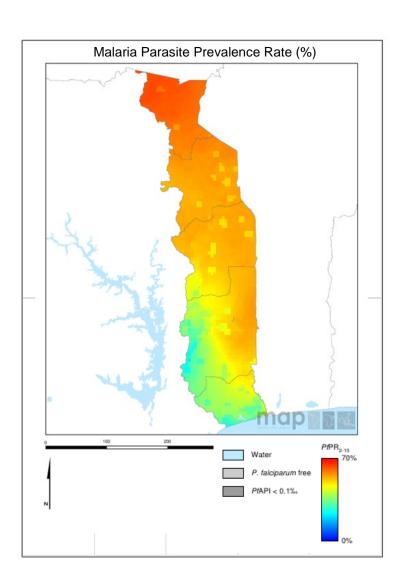
## **Togo ALMA Quarterly Report Quarter Four, 2015**



### **Scorecard for Accountability and Action**

Metrics

Policy and Financial Control



Oral Artemisinin Based Monotherapy Ban status Community case management (Pneumonia)(2015) Community case management (Malaria)(2015) World Bank rating on public sector mgmt and 2.6 institutions 2014 (CPIA Cluster D) Commodities Financed, Implementation and Malaria Impact LLIN financing 2015 projection (% of need) 100 Public sector RDT financing 2015 projection (% of 68 need) Public sector ACT financing 2015 projection (% of 100 Operational LLIN/IRS coverage (% of at risk 100 population) >75% Decrease in Malaria Incidence Projected 2000-2015 Tracer Indicators for Maternal and Child Health PMTCT coverage 2014 (% pregnant HIV pts 87 receiving ARVs) 59 % deliveries assisted by skilled birth attendant

The entire population of Togo is at high risk of malaria. The annual reported number of malaria cases in 2014 was 1,130,251 and 1,205 deaths.

#### Key

month olds)

Target achieved or on track
Progress but more effort required
Not on track
No data/Not applicable

Exclusive breastfeeding (% children < 6 months)

DPT3 coverage 2014 (vaccination among 12-23

Vitamin A Coverage 2013 (2 doses)

Postnatal care (within 48 hrs)

58

61

87

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### **Progress**

Togo banned oral artemisinin-based monotherapies and has introduced policies for Community Case Management of malaria and pneumonia. The country has secured sufficient resources to achieve universal coverage of LLINs and ACTs in 2015. Togo was awarded a 2015 ALMA Award for Most Improved in Malaria Control.

Togo also continues to make progress on tracer MNCH interventions, with high coverage in DPT3 vaccinations, PMTCT and postnatal care.

### **Impact**

The annual reported number of malaria cases in 2014 was 1,130,251 and 1,205 deaths. WHO, through modeling, estimates that there has been a less than 50% decrease in malaria incidence between 2000 and 2015.

**Previous Key Recommended Action** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Work to fill the outstanding gaps required to sustain full coverage of RDTs in 2015	Q1 2016		Deliverable not yet due

