

Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control	
LLIN financing 2017 projection (% of need)	100
Public sector RDT financing 2017 projection (% of need)	100
Public sector ACT financing 2017 projection (% of need)	51
World Bank rating on public sector management and institutions 2016 (CPIA Cluster D)	2.7
Insecticide Resistance Monitoring, Implementation and Impact	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	2
Insecticide resistance monitored since 2014 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Scale of Implementation of iCCM (2016)	
Operational LLINIRS coverage (% of at risk population)	100
Estimated change in malaria incidence rate (2010–2015)	
Estimated change in malaria mortality rate (2010–2015)	
Tracer Indicators for Maternal and Child Health	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2016)	35
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2016)	
% deliveries assisted by skilled birth attendant	82
Postnatal care (within 48 hrs)	49
Exclusive breastfeeding (% children < 6 months)	12
Vitamin A Coverage 2014 (2 doses)	14
DPT3 coverage 2016 (vaccination among 0-11 month olds)	▲ 91

Most of the population of Comoros is at risk of malaria. Transmission is perennial on the Island of Grand Comore and unstable throughout the zones of Anjouan and Mohéli. The annual reported number of malaria cases in 2015 was 1,517 with one death.

Key

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

Malaria

The Global Fund

The Global Fund has announced that Comoros will receive € 6 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for the next funding cycle. The Global Fund has determined the total allocation amount based on the disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Comoros this is calculated at € 4.1 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Comoros is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to sustain the gains made in recent years.

Progress

Comoros has made good progress in scaling-up coverage of key malaria control interventions and has achieved 100% operational coverage with LLINs. The country has secured sufficient resources for the required LLINs and RDTs in 2017. WHO has identified Comoros as being a country with the potential to eliminate local transmission of malaria by 2020. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Comoros was awarded the 2017 ALMA Award for Excellence for reducing malaria incidence and malaria mortality by more than 40% for the period 2010-2015

Impact

The annual reported number of malaria cases in 2015 was 1,517 with one death. WHO estimates that the country has achieved a decrease of greater than 40% for malaria incidence rate and malaria mortality rate for the period 2010 - 2015.

Key Challenge

- Insufficient human resources and a limited number of partners to implement malaria control activities.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Develop and implement a national insecticide resistance monitoring and management plan	Q1 2017		Comoros has commenced the development of a national insecticide resistance monitoring and management plan
Address funding	Ensure the GF malaria funding application is submitted by Q2 2018 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2018		Deliverable not yet due

MNCH

Progress





The country has achieved high coverage in the tracer MNCH intervention skilled birth attendants and has recently increased coverage of DPT3.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Report on coverage of ARTs in the total population and in children under 14 years of age	Q1 2017		The country reports ART coverage in the total population at 35%. Comoros is working to scale up ART coverage including through strengthening HIV testing, training providers at all levels, ensuring an uninterrupted supply of drugs and setting up the psychosocial and nutritional care programme. The country is delegating prescribing and enhancing communication support by educating PLHIV through discussion groups run by CSOs and peer educators

Comoros has responded positively to the MNCH recommended actions addressing low coverage of vitamin A and exclusive breastfeeding and continues to track progress as these actions are implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ MNCH metrics, recommended actions and response tracked through WHO MCA