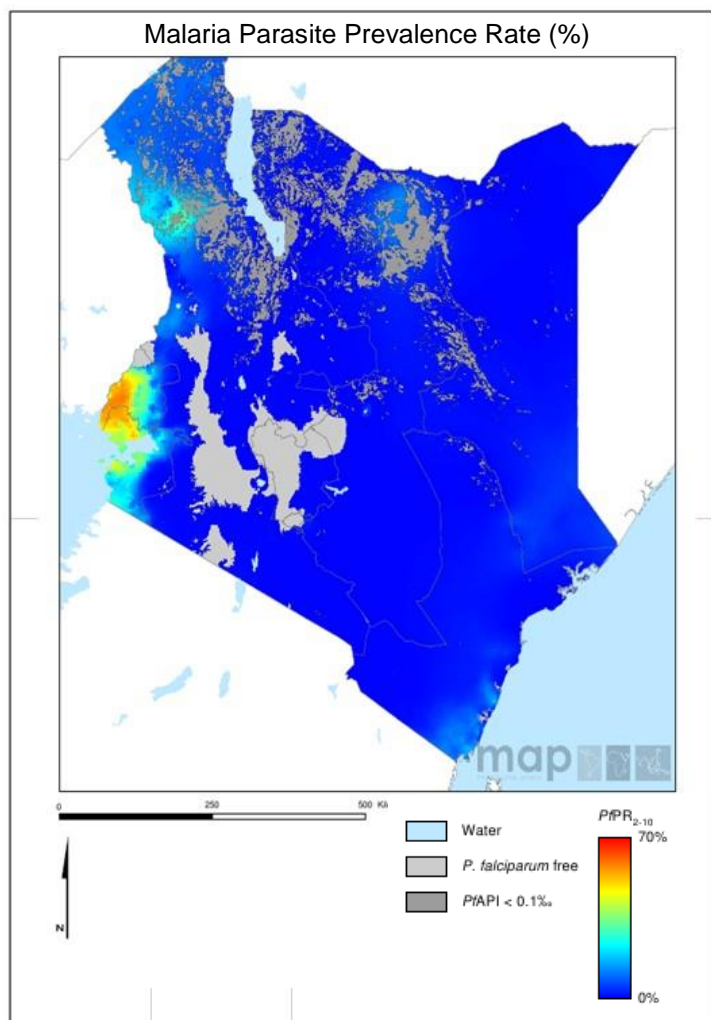


Scorecard for Accountability and Action



Malaria transmission in Kenya ranges from intense in lowland areas to unstable epidemic-prone in the highlands. The annual reported number of malaria cases in 2014 was 9,655,905 with 472 deaths.

Metrics

Commodities Financed and Financial Control		
LLIN financing 2016 projection (% of need)		91
Public sector RDT financing 2016 projection (% of need)		100
Public sector ACT financing 2016 projection (% of need)		100
World Bank rating on public sector management and institutions 2014 (CPIA Cluster D)		3.4
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		4
Insecticide resistance monitored since 2014 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan	▲	
Scale of Implementation of iCCM (2013)		
Operational LLINWIRS coverage (% of at risk population)		91
>75% Decrease in Malaria Incidence Projected 2000–2015		
Tracer Indicators for Maternal and Child Health		
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2015)	▲	59
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	▲	73
% deliveries assisted by skilled birth attendant		62
Postnatal care (within 48 hrs)		53
Exclusive breastfeeding (% children < 6 months)		61
Vitamin A Coverage 2013 (2 doses)		19
DPT3 coverage 2014 (vaccination among 0-11 month olds)		81

Key

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

Malaria

Progress

Kenya has made steady progress in scaling-up malaria control interventions. The country has secured the majority of the resources required to sustain universal coverage of essential malaria control interventions in 2016. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Kenya has recently completed the national insecticide resistance monitoring and management plan.

Impact

The annual reported number of malaria cases in 2014 was 9,655,905 with 472 deaths. Progress in reducing cases has been reported sub-nationally where interventions have been intensified. WHO, through modeling, estimates that there has been a less than 50% decrease in malaria incidence between 2000 and 2015. The 2015 Kenya Malaria Indicator Survey found that the malaria prevalence among children was 8 percent, a decline from 11 percent in 2010.

Key Challenge

- The lack of new resources allocated to malaria in the GF New Funding Model jeopardises the country's ability to sustain the gains made in the fight against malaria.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address Funding	Submit a costed extension to sustain GF resources until end of 2017	Q2 2016		The country has prepared costed extension for the GF
Vector Control	Given the reported mosquito resistance to 4 classes of insecticide, urgently finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		Kenya has completed and is implementing the national insecticide resistance management plan

MNCH





Progress

Kenya has achieved high coverage of tracer MNCH interventions, including exclusive breastfeeding and DPT3 and has recently increased coverage in ARTs for both the total population and in children. Kenya has a high rating in terms of public sector management systems (CPIA cluster D). The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Identify and address reasons for decreasing vitamin A coverage	Q4 2016		The country reports that vitamin A coverage fell as there were no resources available to conduct catch-up campaigns. Kenya is working to mobilise funds to undertake this activity in 2016

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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