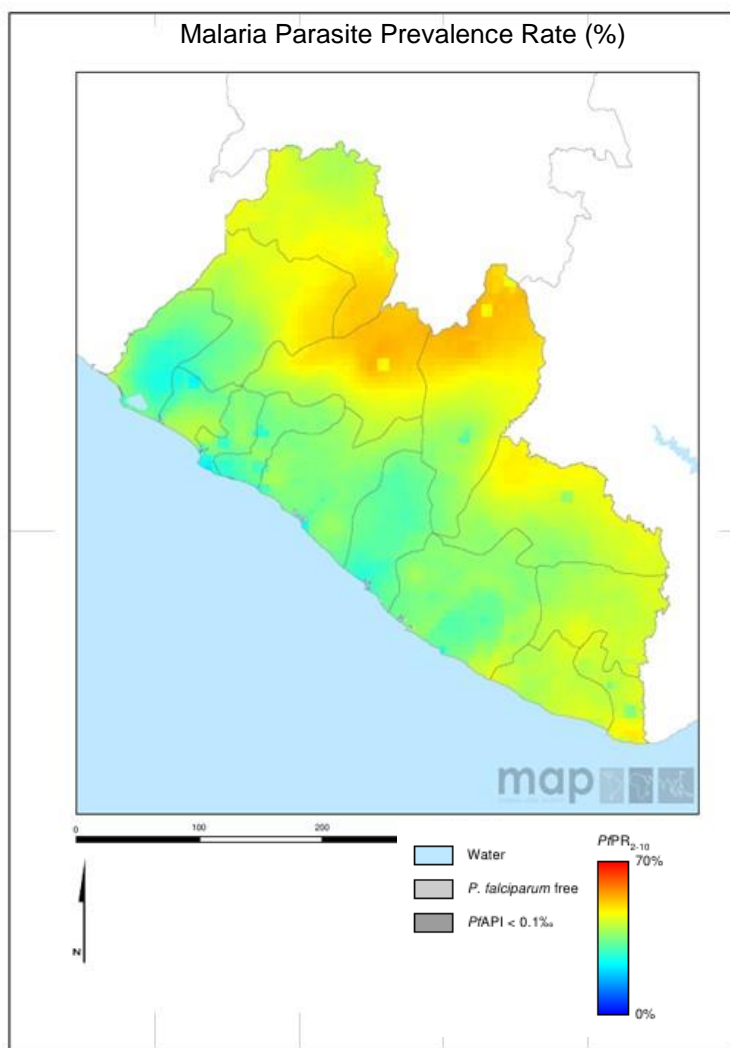


Scorecard for Accountability and Action



The entire population of Liberia is at high risk for malaria. Transmission is perennial in most of the country, particularly in the central and southern regions, and is intense for most months of the year. The annual reported number of malaria cases in 2013 was 1,483,676 with 1,191 deaths.

Metrics

| Policy and Financial Control | | |
|--|---|-----|
| Oral Artemisinin Based Monotherapy Ban status (2015) | | |
| Community case management (Pneumonia)(2015) | | |
| Community case management (Malaria)(2015) | | |
| World Bank rating on public sector mgmt and institutions 2014 (CPIA Cluster D) | | 2.9 |
| Commodities Financed, Implementation and Malaria Impact | | |
| LLIN financing 2015 projection (% of need) | | 100 |
| Public sector RDT financing 2015 projection (% of need) | | 100 |
| Public sector ACT financing 2015 projection (% of need) | | 100 |
| Operational LLIN/IRS coverage (% of at risk population) | | 100 |
| On track in 2013 to Reduce Malaria Incidence by >75% by 2015 (vs 2000) | | |
| Tracer Indicators for Maternal and Child Health | | |
| PMTCT coverage 2014 (% pregnant HIV pts receiving ARVs) | ▼ | 52 |
| % deliveries assisted by skilled birth attendant | | 61 |
| Exclusive breastfeeding (% children < 6 months) | | 55 |
| Vitamin A Coverage 2012 (2 doses) | | 13 |
| DPT3 coverage 2013 (vaccination among 12-23 month olds) | | 89 |
| Postnatal care (within 48 hrs) | | 71 |

Key

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

Progress

Liberia has made significant progress in malaria control. A ban has been introduced on the importation and sale of oral artemisinin-based monotherapies. Liberia has also introduced policies on Community Case Management of malaria and pneumonia. Liberia has secured the resources for procurement and distribution of the antimalarial commodities required in 2015. The country has achieved good coverage in the tracer MNCH indicators of DPT3, skilled birth attendants, and exclusive breastfeeding and has increased coverage of postnatal care. Liberia has achieved MDG4 by reducing under-five child mortality by over two-thirds since 1990. Liberia has significantly enhanced the tracking and accountability mechanisms with the development and launch of the Reproductive, Maternal, Newborn and Child Health Scorecard. Liberia has made significant efforts to mitigate the impact of the current ebola crisis on malaria control. Additional resources have been secured for malaria control and the country has rolled out the LLIN universal coverage campaign.

Impact

The annual reported number of malaria cases in 2013 was 1,483,676 with 1,191 deaths.

Key Challenge

- Ensuring the coverage of essential health services following the ebola outbreak.

Previous Key Recommended Actions

| Objective | Action Item | Suggested completion timeframe | Progress | Comments - key activities/accomplishments since last quarterly report |
|-----------------|--|--------------------------------|----------|---|
| Address funding | Ensure the NFM concept note is submitted by Q1 2015 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years | Q1 2015 | | The country is working on a Global Fund costed extension |

Liberia has responded positively to the recommended action addressing low coverage of vitamin A coverage and continues to track progress as this action is implemented.

New Key Recommended Action

| Objective | Action Item | Suggested completion timeframe |
|--|------------------------------------|--------------------------------|
| MNCH ¹ : Optimise quality of care | Work to increase coverage of PMTCT | Q3 2016 |

Key

| | |
|--|-------------------------|
| | Action achieved |
| | Some progress |
| | No progress |
| | Deliverable not yet due |

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