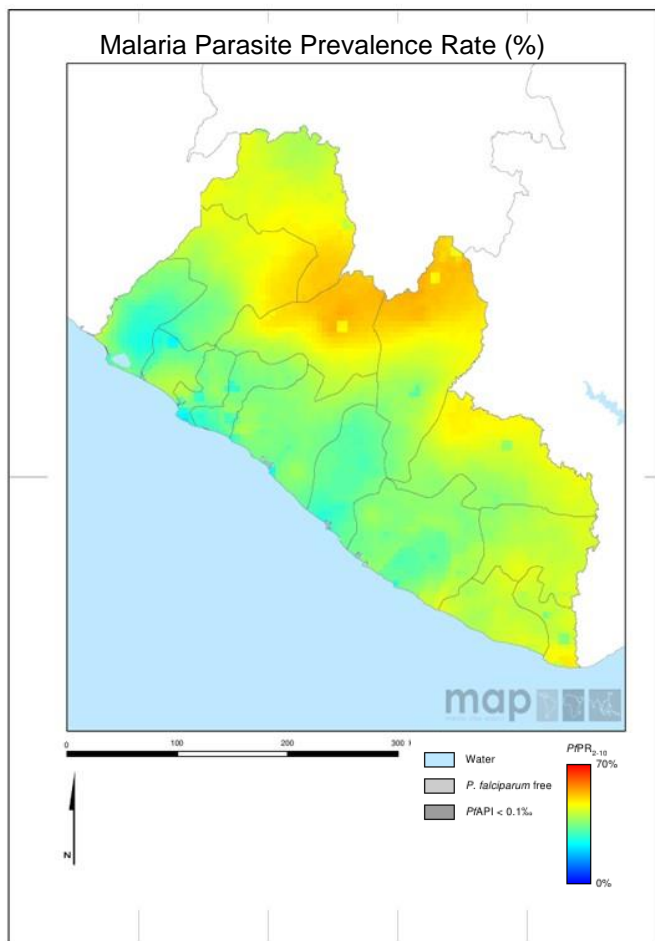


Scorecard for Accountability and Action







The entire population of Liberia is at high risk for malaria. The annual reported number of malaria cases in 2015 was 1,781,092 with 1,379 deaths.

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)	100	
World Bank rating on public sector management and institutions 2015 (CPIA Cluster D)	2.9	
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3	
Insecticide resistance monitored since 2014 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of iCCM (2016)		
Operational LLIN/IRS 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 (2015)	24	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	10	
% deliveries assisted by skilled birth attendant	61	
Postnatal care (within 48 hrs)	71	
Exclusive breastfeeding (% children < 6 months)	55	
Vitamin A Coverage 2014 (2 doses)	0	
DPT3 coverage 2015 (vaccination among 0-11 month olds)	52	

Key

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

Malaria

Progress

Liberia has secured the resources required for the procurement and distribution of the anti-malarial commodities required in 2017. The country has also distributed sufficient LLINs to achieve 100% operational coverage in 2017. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Liberia has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard.

Impact

The annual reported number of malaria cases in 2015 was 1,781,092 with 1,379 deaths. WHO estimates that the country has achieved a decrease of 20 - 40% in the malaria incidence rate and malaria mortality rate for the period 2010 - 2015.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Given the reported mosquito resistance to 3 classes of insecticide, urgently finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		The national insecticide resistance monitoring and management plan is being developed with support from PMI. It will be finalized in Q2 2017
Address funding	Ensure the GF malaria funding application is submitted by Q1 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q1 2017		The country submitted the GF malaria funding application in Q1 2017

MNCH

Progress

Liberia has achieved good coverage in the tracer MNCH indicator of exclusive breastfeeding. Liberia has significantly enhanced the tracking and accountability mechanisms with the development and launch of the Reproductive, Maternal, Newborn and Child Health Scorecard.

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
MNCH ¹ : Optimise quality of care	a) Work to address decreasing DPT3 coverage	Q4 2016		Progress not reported
	b) Work to accelerate coverage of ARTs in the total population and in children under 14 years of age	Q1 2017		The country has completed the policy shift to Test-and-Treat all children and is working to enhance case-finding of HIV positive children. HIV programming is being integrated within routine child health care tools (EPI Card, iCCM tools). Community engagement for paediatric ART (including family testing, family disclosure, retention) is also planned

Liberia has responded positively to the MNCH recommended actions addressing low coverage of vitamin A 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