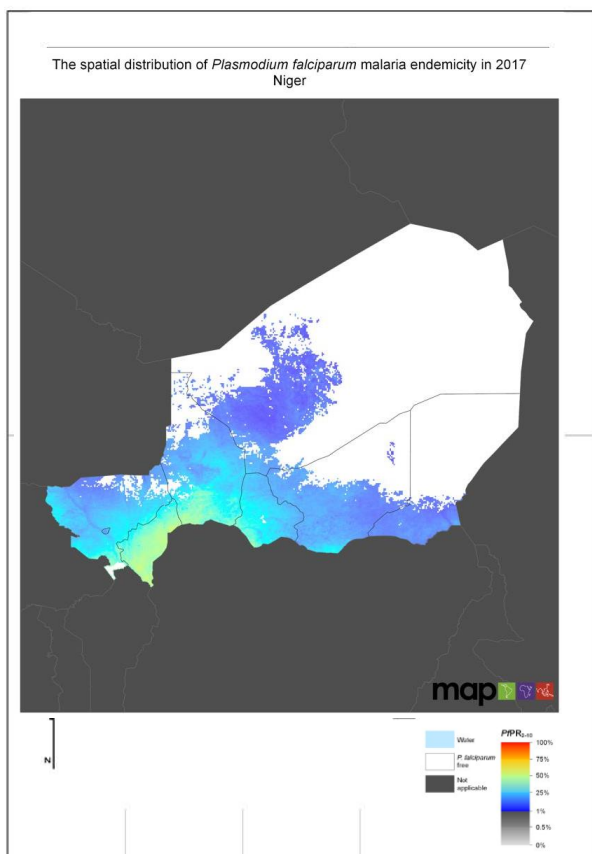


Scorecard for Accountability and Action



Malaria transmission is most intense in the south whilst the desert areas in the north are malaria-free. The annual reported number of malaria cases in 2018 was 3,358,058 with 3,576 deaths.

Metrics

Commodities Financed and Financial Control

LLIN financing 2020 projection (% of need)	100
Public sector RDT financing 2020 projection (% of need)	100
Public sector ACT financing 2020 projection (% of need)	100
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)	3.1

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	4
Insecticide resistance monitored since 2015 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	
Scale of Implementation of iCCM (2017)	
Operational LLINIRS coverage (% of at risk population)	100
On track to reduce case incidence by ≥40% by 2020 (vs 2015)	
On track to reduce case mortality by ≥40% by 2020 (vs 2015)	

Tracer Indicators for Maternal and Child Health and NTDs

Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)	56
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2018)	54
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)	52
% deliveries assisted by skilled birth attendant	40
Postnatal care (within 48 hrs)	37
Exclusive breastfeeding (% children < 6 months)	23
Vitamin A Coverage 2018 (2 doses)	▲ 64
DPT3 coverage 2018 (vaccination among 0-11 month olds)	79

Key

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

Malaria

Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health including malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant women and young children (intermittent preventive treatment in pregnancy and seasonal malaria chemoprevention). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Niger, we commend the Ministry of Health, under your leadership, in the decision to go ahead with the universal coverage campaign for long-lasting insecticidal nets (LLINs), in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. WHO modelling suggests that this decision, allied with sustained malaria case management through the health system, and seasonal malaria chemoprevention campaigns will prevent a significant increase in cases and deaths. The country is commended for this commitment to the fight against malaria. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 17.6% increase in malaria cases, and a 100.7% increase in malaria deaths in Niger. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Global Fund Update

The Global Fund has announced that Niger will receive €124.2 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2021-2023. The Global Fund has determined the total allocation amount based on Niger's 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 Niger this is calculated at €97.4 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Niger 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 accelerate progress.

Progress

Niger has mobilised the required financing to procure and distribute LLINs, ACTs and RDTs required for 2020. The country has procured sufficient LLINs to achieve universal operational coverage of the targeted population. Niger has completed the national insecticide resistance monitoring and management plan and has recently reported the results of insecticide resistance testing to WHO. The country has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control Scorecard. The country is also showing leadership in malaria control through its participation

in the High Burden High Impact approach. Niger has launched its Zero Malaria Starts with Me campaign.

Impact

The annual reported number of malaria cases in 2018 was 3,358,058 with 3,576 deaths.

Key Challenge

- Insufficient resources to achieve high coverage of essential malaria interventions.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure the GF malaria funding application is submitted by Q2 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2020		Deliverable not yet due

Niger has responded positively to the recommended action addressing resource mobilisation and continues to track progress as this action is implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

RMNCAH and NTDs

Progress

The country has achieved high coverage of the tracer RMNCAH intervention vitamin A. The country has enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Niger is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Niger is high for schistosomiasis (100%); good for soil transmitted helminths (76%) and for lymphatic filariasis (74%) and low for trachoma (18%). Overall, the NTD preventive chemotherapy coverage index for Niger in 2018 is 56.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Carry out mapping for elimination of Onchocerciasis to identify if there are some areas where elimination has occurred	Q3 2019		The country carried out a review and situation analysis in order to identify where the mapping of Onchocerciasis will be conducted. The experts meeting to review and analyse the findings is planned in Q2 2020 and will determine the next steps
RMNCAH ¹ : Optimise quality of care	Investigate and address the reasons for the low coverage of vitamin A	Q2 2020		Niger has significantly increased vitamin A coverage in 2018 compared to 2017

Niger has responded positively to the RMNCAH recommended actions addressing low coverage of skilled birth attendants, postnatal care and exclusive breastfeeding, and ARTs coverage in children (with recent increases in coverage reported), and continues to track progress as these actions are implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
RMNCAH ¹ : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO