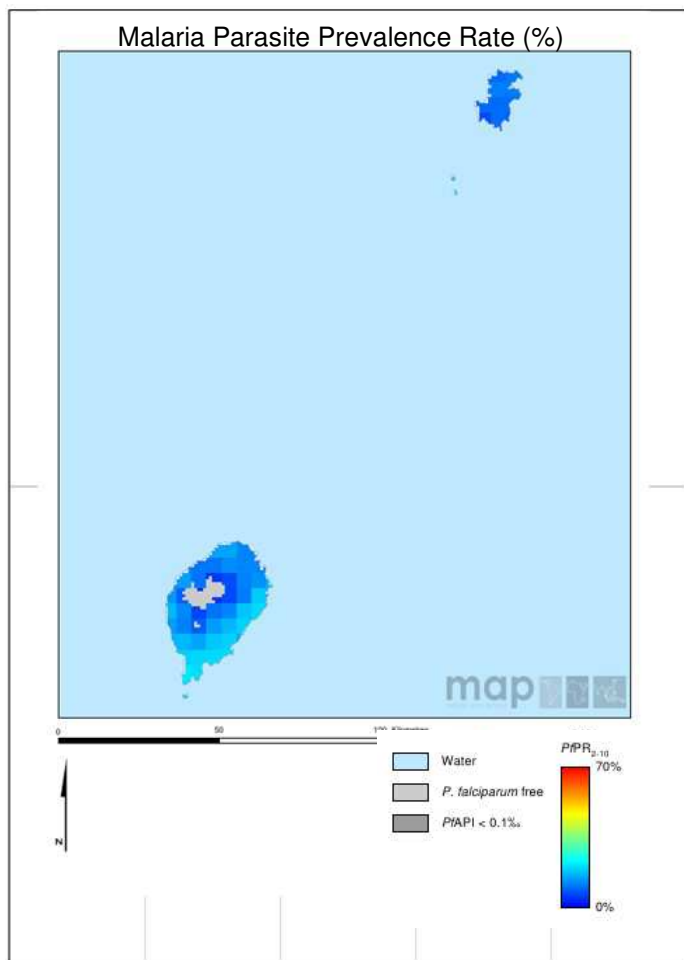


Scorecard for Accountability and Action



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)	100
World Bank rating on public sector management and institutions 2016 (CPIA Cluster D)	3.2
Insecticide Resistance Monitoring, Implementation and Impact	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	0
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 (2016)	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2016)	
% deliveries assisted by skilled birth attendant	93
Postnatal care (within 48 hrs)	37
Exclusive breastfeeding (% children < 6 months)	74
Vitamin A Coverage 2014 (2 doses)	
DPT3 coverage 2016 (vaccination among 0-11 month olds)	96

In São Tomé and Príncipe, the annual reported number of malaria cases in 2015 was 2,058 with zero deaths.

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 São Tomé and Príncipe will receive € 5.1 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2018-2020. The Global Fund has determined the total allocation amount based on São Tomé and Príncipe'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 São Tomé and Príncipe this is calculated at € 3.5 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. São Tomé and Príncipe 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

São Tomé and Príncipe has secured sufficient resources to finance the ACTs, RDTs and LLINs required for 2017 and has achieved 100% operational coverage of vector control. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO.

Impact

The annual reported number of malaria cases in 2015 was 2,058 with zero deaths. WHO estimates that the country has achieved a decrease of 20-40% in the malaria incidence rate and a change of less than 20% for malaria mortality rate for the period 2010 - 2015.

Key Challenge

- Significant reduction in funding from the Global Fund and other donors has significantly reduced the resources available for malaria control.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector Control	Finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		A draft IRM plan is under development
Optimise quality of care	Provide data on the scale up of iCCM implementation country wide	Q1 2017		The country operates a comprehensive programme of active case detection for malaria, which includes treating any cases at community level and responding to any cases with a vector control
Address funding	Ensure the GF malaria funding application is submitted by Q2 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2017		The country submitted the GF funding application

MNCH

Progress

São Tomé and Príncipe has achieved high coverage in the tracer MNCH intervention DPT3 vaccination coverage, skilled birth attendants and exclusive breastfeeding.

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) Provide data on ART coverage in children under 14 years of age	Q1 2017		The country has supported the policy shift to Test-and-Treat all children and Option B+ for PMTCT and is working to enhance community engagement Deliverable not yet due
	b) Address the lack of vitamin A coverage data	Q3 2017		

The country has responded positively to the MNCH recommended actions addressing low coverage of postnatal care, 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