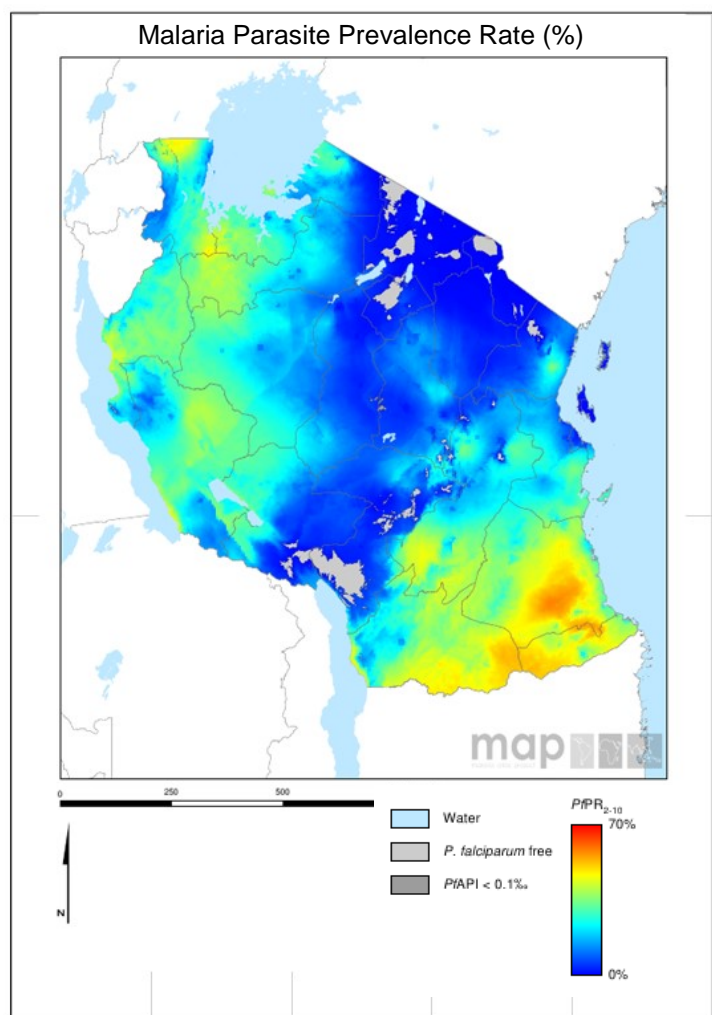


Scorecard for Accountability and Action



Malaria is endemic in all parts of the United Republic of Tanzania, with seasonal peaks. The annual reported number of malaria cases in 2014 was 7,403,562 with 5,373 deaths.

Metrics

Commodities Financed and Financial Control	
LLIN financing 2016 projection (% of need)	100
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 LLIN/IRS coverage (% of at risk population)	▲ 67
>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 (2014)	43
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2014)	29
% deliveries assisted by skilled birth attendant	49
Postnatal care (within 48 hrs)	31
Exclusive breastfeeding (% children < 6 months)	41
Vitamin A Coverage 2013 (2 doses)	92
DP T3 coverage 2014 (vaccination among 12-23 month olds)	97

Key

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

## **Malaria**

### **Progress**

The United Republic of Tanzania has secured sufficient resources to sustain universal coverage of LLINs, ACTs, and RDTs in 2016, and the country is completing the universal LLIN coverage campaign. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO and has completed the national insecticide resistance monitoring and management plan.

### **Impact**

The annual reported number of malaria cases in 2014 was 7,403,562 with 5,373 deaths. On the island of Zanzibar, malaria morbidity and mortality has been substantially reduced with a 75% decrease in the numbers of malaria cases, inpatient malaria cases and deaths in 2013 compared to the average for 2000–2004. WHO, through modeling, projects that the United Republic of Tanzania will reduce malaria incidence by 50-75% between 2000 and 2015.

### **Key Challenges**

- Maintaining malaria high on the political and funding agenda on the island of Zanzibar as the burden continues to drop.
- Tariffs on raw commodities for LLIN local production

## **MNCH**

### **Progress**

The United Republic of Tanzania has also made progress on tracer MNCH interventions including vitamin A and has recently increased coverage of DPT3. The country achieved MDG4 with a reduction of the under-five mortality rate by more than two-thirds since 1990. The country has significantly enhanced the tracking and accountability mechanisms with the development and launch of the Tanzania Reproductive, Maternal, Newborn and Child Health Scorecard, and with the development of the multi-sectoral nutrition scorecard.

## Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH <sup>1</sup> : Optimise quality of care	Identify and address reasons for decreasing exclusive breastfeeding coverage	Q3 2016		The public expenditure review on nutrition and the Joint Multisectoral Nutrition Review revealed that insufficient funds were allocated to the promotion of IYCF by LGAs. Only 17% of health staff and 14% of community health workers were trained on promotion of exclusive breastfeeding and only 23% of mothers of children 0-5 months received counselling. Key bottlenecks for exclusive breastfeeding were identified, causal analysis of these bottlenecks was carried out and recommendations were formulated. These recommendations will be integrated in the costed scale up plan for maternal infant and young child nutrition (2016-21) that is currently under development. This plan will be use to mobilize resources, guide action and progress monitoring for promotion of exclusive breastfeeding

## New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
MNCH <sup>1</sup> : Optimise quality of care	Work to accelerate coverage of ARTs in children under 14 years of age	Q1 2017

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

<sup>1</sup> MNCH metrics, recommended actions and response tracked through WHO MCA