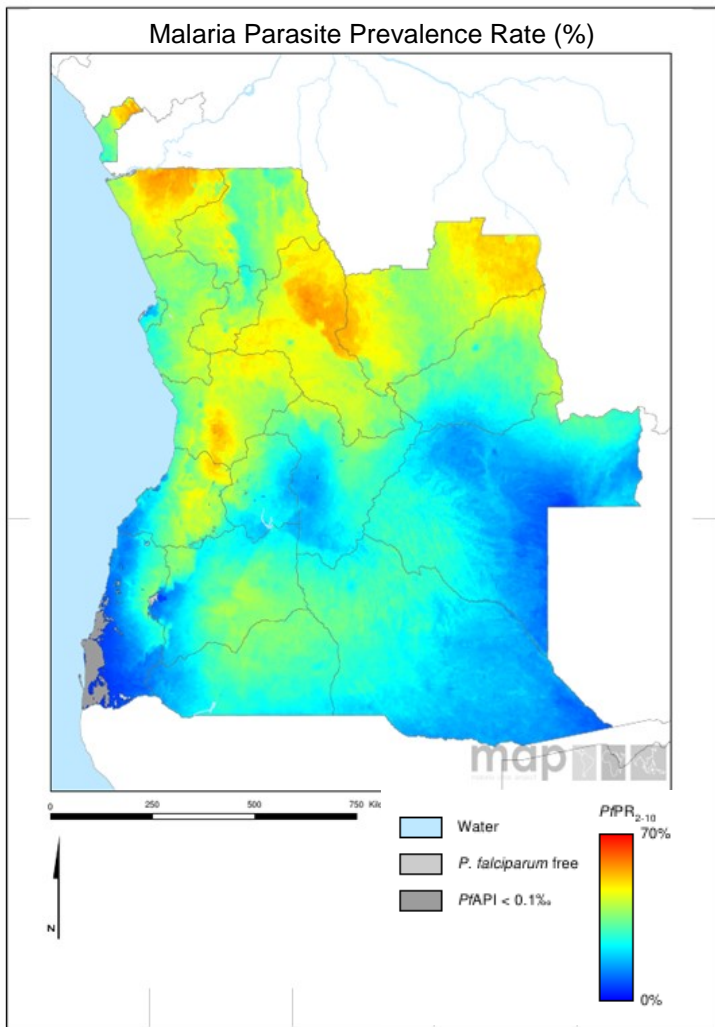


Scorecard for Accountability and Action





Metrics



The entire population of Angola is at risk of malaria. The annual reported number of suspected malaria cases in 2014 was 3,180,021 with 5,714 deaths.

Commodities Financed and Financial Control		
LLIN financing 2016 projection (% of need)	70	
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)		
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 (2013)		
Operational LLIN/IRS coverage (% of at risk population)	62	
>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)	25	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2014)	14	
% deliveries assisted by skilled birth attendant	47	
Postnatal care (within 48 hrs)		
Exclusive breastfeeding (% children < 6 months)		
Vitamin A Coverage 2013 (2 doses)	48	
DPT3 coverage 2014 (vaccination among 12-23 month olds)	80	

Key

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

Malaria

Progress

Angola has reprogrammed and re-prioritised its resources, filling the majority of the malaria commodity gaps previously identified and has recently increased operational coverage of vector control. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO.

Impact

Angola reported 3,180,021 malaria cases with 5,714 malaria deaths in 2014. The number of malaria deaths decreased from 7,300 in 2013. WHO, through modeling, estimates Angola has achieved a 50%-75% decrease in incidence between 2000 and 2015.

Key Challenges

- The lack of new resources allocated to malaria control jeopardises the country's ability to sustain the gains made in the fight against malaria.
- The country has documented mosquito resistance to three insecticide classes.

Previous Key Recommended Actions

The country has responded positively to finalising the policy on Community Case Management of malaria and pneumonia as well as ensuring that resources are allocated to malaria control at a high level that is sufficient to ensure universal coverage of key interventions including through enhanced domestic resource commitments.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
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

MNCH

Progress

The country plans to pilot integrated Community Case Management in three provinces starting from 2016, including use of ACTs and antibiotics at community level. Angola has achieved high coverage of the tracer MNCH intervention DPT3.

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	Identify and address reasons for decreasing DPT3 coverage	Q4 2016		DPT3 coverage dropped as a result of the country using the adjusted 2014 census data with a higher population denominator. Angola is working to enhance coverage in 30 low performing districts and have submitted an application to GAVI for health systems strengthening

Angola has responded positively to the MNCH recommended actions addressing the lack of data on exclusive breastfeeding and postnatal care and continues to track progress as these actions are implemented.

New Key Recommended Action

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

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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