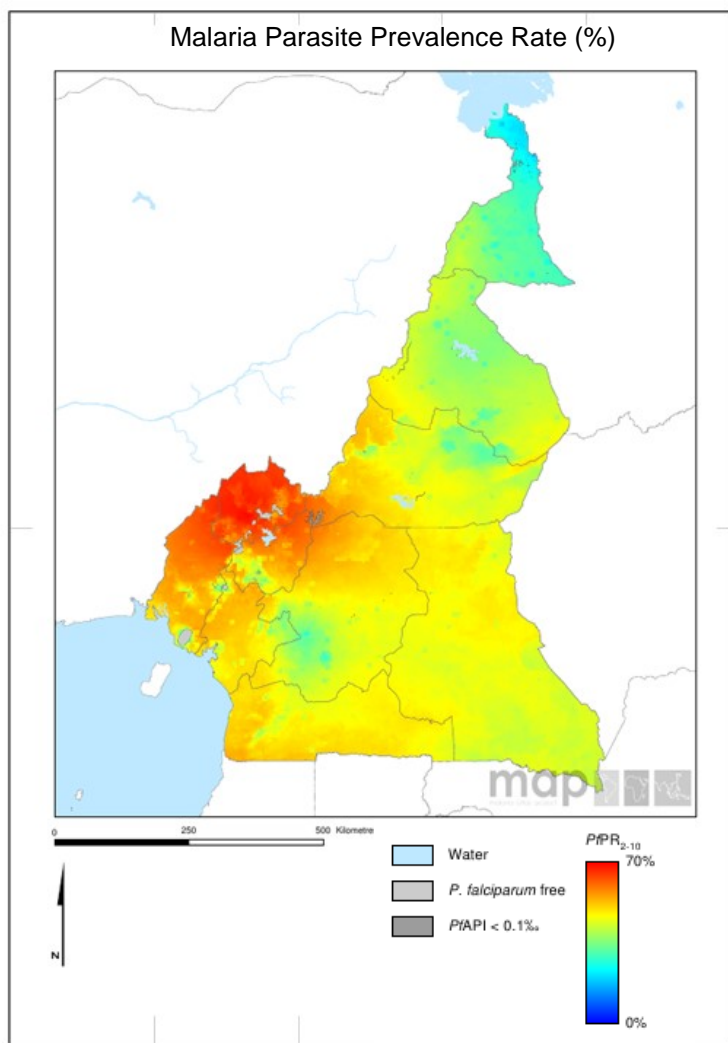


Scorecard for Accountability and Action



Malaria transmission occurs year round in Cameroon and is most intense in the south of the country. The annual reported number of malaria cases in 2013 was 1,824,633 with 4,349 deaths.

Metrics

Policy and Financial Control	
Oral Artemisinin Based Monotherapy Ban status (2015)	Target achieved or on track
Community case management (Pneumonia)(2015)	Target achieved or on track
Community case management (Malaria)(2015)	Target achieved or on track
World Bank rating on public sector mgmt and institutions 2013 (CPIA Cluster D)	2.9
Commodities Financed, Implementation and Malaria Impact	
LLIN financing 2015 projection (% of need)	100
Public sector RDT financing 2015 projection (% of need)	100
Public sector ACT financing 2015 projection (% of need)	100
Operational LLIN/IRS coverage (% of at risk population)	28
On track in 2013 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)	No data/Not applicable
Tracer Indicators for Maternal and Child Health	
PMTCT coverage 2013 (% pregnant HIV pts receiving ARVs)	61
% deliveries assisted by skilled birth attendant	64
Exclusive breastfeeding (% children < 6 months)	20
Vitamin A Coverage 2012 (2 doses)	88
DPT3 coverage 2013 (vaccination among 12-23 month olds)	89
Postnatal care (within 48 hrs)	37

Key

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

Progress

Cameroon has banned the import and sale of oral artemisinin-based monotherapies and has introduced Community Case Management of malaria and pneumonia. The country has committed domestic resources to fill the outstanding gap for the LLIN campaign and has secured sufficient resources to cover the costs of the LLINs, ACTs and RDTs needed in 2015. The country has made significant improvements in the tracer MNCH intervention PMTCT coverage, DPT3 coverage as well as achieving high levels of vitamin A coverage.

Impact

The number of reported malaria cases in 2013 was 1,824,633 with 4,349 deaths. The number of malaria cases and deaths increased from 313,315 cases and 3,209 deaths in 2012.

Key Challenge

- Ensuring domestic resources are secured to support the 2015 LLIN universal coverage campaign.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Ensure all facilities are baby friendly by implementing the ten steps to successful breastfeeding, providing follow-up support to breastfeeding mothers and enhancing community awareness	Q1 2013		No progress reported

Cameroon has responded positively to the recommended actions addressing the low coverage of LLINs and has launched the universal coverage campaign in quarter 2 and will achieve universal coverage in the next reporting period. The country also investigated the cause of the increase in cases in 2013 and is working to address the increase by rolling out the universal coverage campaign.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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