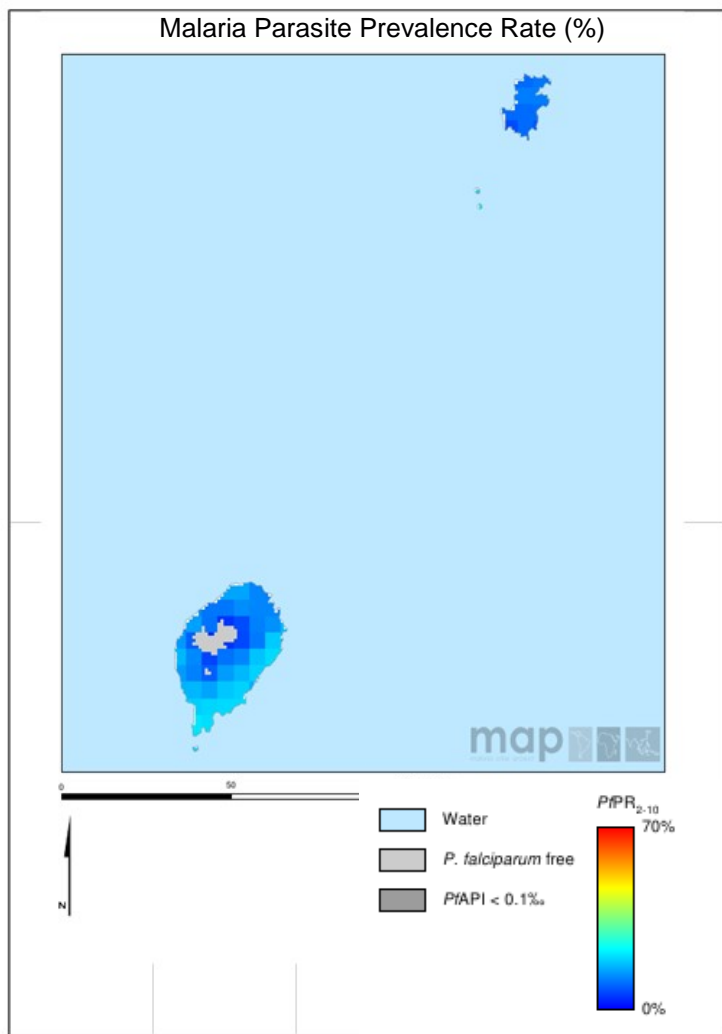


Scorecard for Accountability and Action



In São Tomé and Príncipe, the annual reported number of malaria cases in 2013 was 9,261 with 11 deaths.

Metrics

Policy and Financial Control		
Oral Artemisinin Based Monotherapy Ban status (2015)		
Community case management (Pneumonia)(2015)		
Community case management (Malaria)(2015)		
World Bank rating on public sector mgmt and institutions 2013 (CPIA Cluster D)		3.1
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)		53
On track in 2013 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)		
Tracer Indicators for Maternal and Child Health		
PMTCT coverage 2013 (% pregnant HIV pts receiving ARVs)		42
% deliveries assisted by skilled birth attendant		82
Exclusive breastfeeding (% children < 6 months)		51
Vitamin A Coverage 2012 (2 doses)		34
DPT3 coverage 2013 (vaccination among 12-23 month olds)		97
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

São Tomé and Príncipe has made significant progress in malaria prevention and control, leading to a tremendous reduction in malaria deaths between 2005 and 2010. The country has secured sufficient resources to finance the ACTs, RDTs and LLINs required for 2015. São Tomé and Príncipe has achieved and maintains high coverage in tracer MNCH interventions including skilled birth attendants and DPT3 vaccination.

Impact

Confirmed malaria cases decreased from an annual average of 38,655 during 2000–2005 to 9,261 cases in 2013. In the same period, malaria deaths also fell from 162 to 11. As such, the country has achieved a 70% reduction in malaria incidence since 2000.

Key Challenge

- Resistance to pyrethroid insecticides detected.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure the GF New Funding Model concept note is submitted by Q1 2015 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q1 2015		STP submitted the GF New Funding Model concept note in April 2015
Optimise quality of care	Address the decreasing coverage of vector control	Q4 2015		Deliverable not yet due but the country is planning an LLIN universal coverage campaign in 2015

São Tomé and Príncipe has responded positively to the recommended actions addressing low coverage of vitamin A and the policy on Community Case Management and continues to track progress as this action is implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due