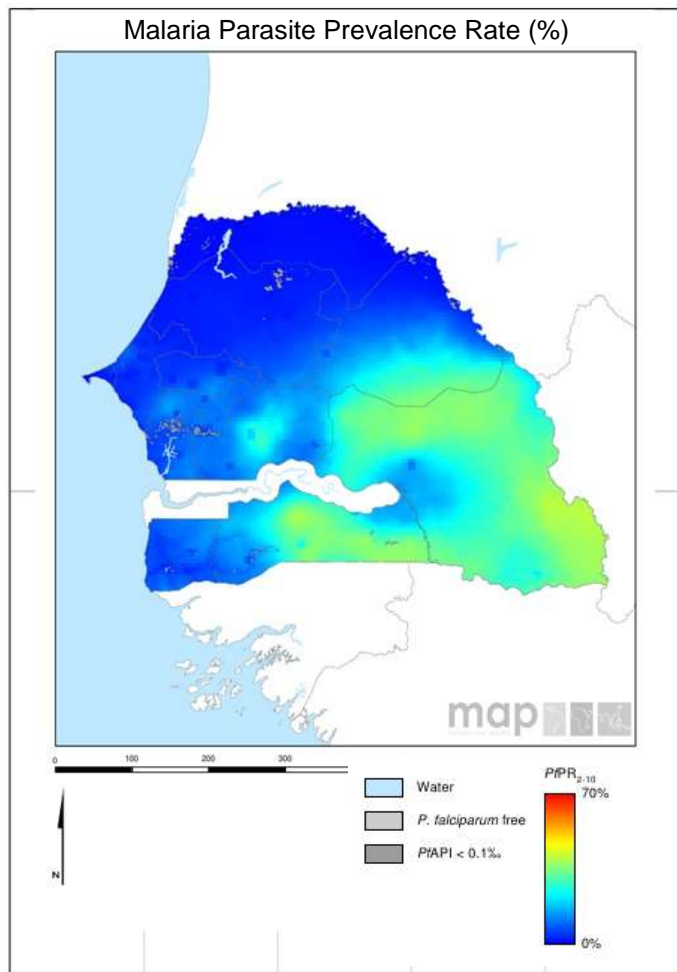


Senegal ALMA Quarterly Report Quarter Four, 2016



Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control		
LLIN financing 2016 projection (% of need)	100	Target achieved or on track
Public sector RDT financing 2016 projection (% of need)	100	Target achieved or on track
Public sector ACT financing 2016 projection (% of need)	100	Target achieved or on track
World Bank rating on public sector management and institutions 2015 (CPIA Cluster D)	3.6	Target achieved or on track
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	4	Not on track
Insecticide resistance monitored since 2014 and data reported to WHO		Target achieved or on track
National Insecticide Resistance Monitoring and Management Plan		Progress but more effort required
Scale of Implementation of ICCM (2016)		Target achieved or on track
Operational LLIN/IRS coverage (% of at risk population)	100	Target achieved or on track
Estimated change in malaria incidence rate (2010–2015)		Progress but more effort required
Estimated change in malaria mortality rate (2010–2015)		Not on track
Tracer Indicators for Maternal and Child Health		
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2015)	40	Progress but more effort required
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2015)	25	Not on track
% deliveries assisted by skilled birth attendant	53	Progress but more effort required
Postnatal care (within 48 hrs)	74	Progress but more effort required
Exclusive breastfeeding (% children < 6 months)	33	Progress but more effort required
Vitamin A Coverage 2014 (2 doses)	89	Target achieved or on track
DPT3 coverage 2015 (vaccination among 0-11 month olds)	89	Target achieved or on track

The annual reported number of malaria cases in 2015 was 502,084 with 536 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 Senegal will receive € 65 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 Senegal'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 Senegal this is calculated at € 36.4 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Senegal 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

Senegal has implemented iCCM country wide. The country has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Senegal has secured sufficient resources to sustain universal coverage of essential malaria control interventions in 2016. Senegal has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard. Senegal has put in place strong public sector management systems and has achieved a rating of 3.6 for Cluster D CPIA.

Impact

The annual reported number of malaria cases in 2015 was 502,084 with 536 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.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Address funding	Ensure the GF malaria funding application is submitted by Q1 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q1 2017

MNCH

Progress

Senegal has achieved high coverage of the tracer MNCH intervention vitamin A. The country has significantly enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn and Child Health Scorecard.

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) Work to accelerate coverage of ARTs especially in children under 14 years of age	Q1 2017		Deliverable not yet due but Senegal has achieved a 4% increase in ART coverage in the total population and by 5% in children. The country has completed the policy shift to Test-and-Treat all children and is working to enhance case-finding of HIV positive children. HIV programming is being integrated within routine child healthcare tools (EPI Card, iCCM tools). Community engagement for paediatric ART (including family testing, family disclosure, retention) is also planned.
	b) Investigate and address the reasons for the decreasing coverage of skilled birth attendants	Q2 2017		Deliverable not yet due
	c) Identify and address reasons for decreasing vitamin A coverage	Q3 2017		Deliverable not yet due

Senegal has responded positively to the MNCH recommended action addressing low coverage of exclusive breastfeeding and continues to track progress as this action is implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Investigate and address the reasons for the decreasing coverage of postnatal care	Q4 2017

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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