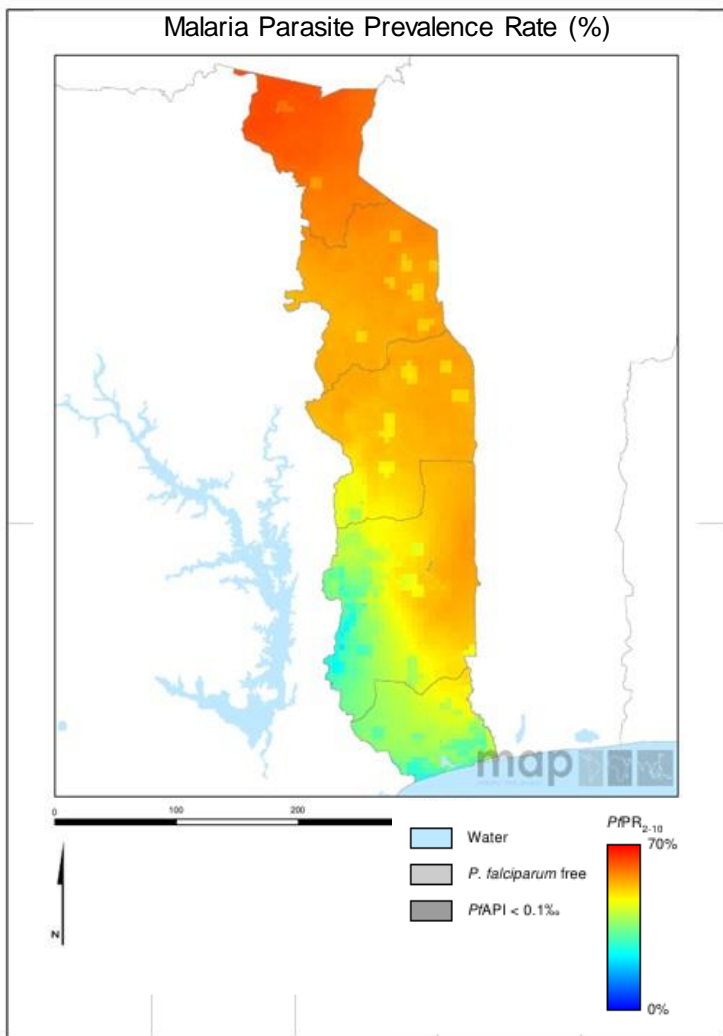


Scorecard for Accountability and Action



The entire population of Togo is at high risk of malaria. The annual reported number of malaria deaths in 2013 was 1,361.

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)		2.6
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2015 projection (% of need)	▼	70
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)		100
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)		75
% deliveries assisted by skilled birth attendant		59
Exclusive breastfeeding (% children < 6 months)		57
Vitamin A Coverage 2012 (2 doses)		64
DPT3 coverage 2013 (vaccination among 12-23 month olds)		84
Postnatal care (within 48 hrs)		

Key

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

## Progress

Togo confirmed the banning of oral artemisinin-based monotherapies and has introduced policies for Community Case Management of malaria and pneumonia. The country has secured sufficient resources to achieve universal coverage of LLINs, RDTs, and ACTs in 2015. Togo continues to make progress on tracer MNCH interventions, with high coverage in DPT3 vaccinations, PMTCT, and exclusive breastfeeding and has increased coverage of vitamin A. Togo was awarded a 2015 ALMA Award for Most Improved in Malaria Control.

## Impact

The annual reported number of malaria deaths in 2013 was 1,361. Progress in reducing cases has been reported sub-nationally where interventions have been intensified.

## 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		Togo submitted the GF New Funding Model concept note in April 2015
MNCH <sup>1</sup> : Optimise quality of care	a) Identify and address reasons for decreasing PMTCT coverage	Q3 2015		Deliverable not yet due
	b) Investigate and address the reasons for the decreasing coverage of exclusive breastfeeding	Q4 2015		Deliverable not yet due

Togo has responded positively to the recommended action addressing the lack of data for postnatal care and continues to track progress as this action is implemented.

## New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Address the decreasing coverage of vector control	Q2 2015

## Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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