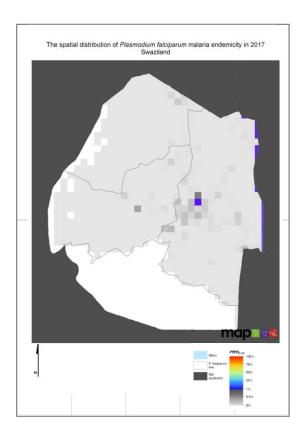
Eswatini ALMA Quarterly Report Quarter Four, 2021



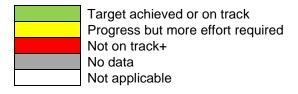
Scorecard for Accountability and Action



Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010 Insecticide resistance monitored since 2015 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLINIRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	1000
Public sector ACT financing 2021 projection (% of need) Insecticide Resistance Monitoring, Implementation and Impact Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010 Insecticide resistance monitored since 2015 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLIN/IRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	100
Insecticide Resistance Monitoring, Implementation and Impact Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010 Insecticide resistance monitored since 2015 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLIN/IRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010 Insecticide resistance monitored since 2015 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLINIRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	0
Insecticide resistance monitored since 2015 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLIN/IRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	0
data reported to WHO National Insecticide Resistance Monitoring and Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLIN/IRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	
Management Plan RDTs in stock (>6 months stock) ACTs in stock (>6 months stock) LLIN/IRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	
ACTs in stock (>6 months stock) LLIN/IRS campaign on track Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of ICCM IRS Operational Coverage (%) On track to reduce case incidence by >40% by 2020	
Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%)	
Country Reporting Launch of Zero Malaria Starts with Me Campaign Scale of Implementation of iCCM IRS Operational Coverage (%) On track to reduce case incidence by >40% by 2020	
Scale of Implementation of ICCM IRS Operational Coverage (%) On track to reduce case incidence by >40% by 2020	
IRS Operational Coverage (%) On track to reduce case incidence by >40% by 2020	
On track to reduce case incidence by >40% by 2020	
On track to reduce case incidence by ≥40% by 2020	92
(vs 2015)	
On track to reduce case mortality by ≥40% by 2020 (vs 2015)	
Tracer Indicators for Maternal and Child Health, NTDs and Covi	d 19
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2020)	0
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2020)	98
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2020)	98
% deliveries assisted by skilled birth attendant	88
Postnatal care (within 48 hrs)	88
Exclusive breastfeeding (% children < 6 months)	64
Vitamin A Coverage 2020 (2 doses)	
DPT3 coverage 2020 (vaccination among 0-11 month olds)	83
% Population Fully Vaccinated Against COVID-19	

Malaria transmission is seasonal in Eswatini; the annual reported number of malaria cases in 2020 was 325 and 2 deaths.

Key



Eswatini ALMA Quarterly Report Quarter Four, 2021



Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden of COVID-19. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Adolescent and Child health, Neglected Tropical Diseases and malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying.

WHO estimates that there were an additional 47,000 malaria deaths globally in 2020 due to service disruptions during the COVID-19 pandemic, leading to an estimated 7.5% increase in deaths.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2022 as the COVID-19 pandemic continues to impact our continent. This may include the implementation of any necessary catch-up activities and ensuring timely planning to account for potential delays in procurement and delivery. Any intervention must ensure the safety of communities and health workers given the ease of transmission of COVID-19.

The country has been affected by the continent-wide restriction of access to COVID-19 vaccines but has been able to cover 25% of their population by the end of 2021.

Malaria

Progress

Eswatini secured sufficient resources to fund the IRS, ACTs, and RDTs required to sustain universal coverage in 2021. WHO has identified Eswatini as being a country with the potential to eliminate local transmission of malaria. The country has finalised the insecticide resistance monitoring and management plan. Eswatini increased the coverage of IRS in 2021. The country has sufficient stocks of ACTs and insecticide required for the IRS. Eswatini is a member of the Elimination 8 and MOSASWA initiatives, strengthening their cross-border collaboration with neighbouring countries. The country also launched its Zero Malaria Starts with Me campaign.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, building of the agenda of His Majesty King Mswati III, in May 2019, the country launched an End Malaria Fund to raise US\$5 million towards malaria elimination. Eswatini was the first country in Africa to introduce a malaria elimination scorecard to enhance tracking, accountability and action as the country moves towards malaria elimination and this has been publicly posted to the ALMA Scorecard hub.

Impact

The annual reported number of malaria cases in 2020 was 325 and 2 deaths.

Key Challenges

Maintaining malaria high on the political and funding agenda.

 Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and NTDs.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2022		In relation to Case Management, the malaria programme encouraged early health care treatment seeking behaviour for fever and suspected malaria through billboards and radio adverts. This communication encouraged the population suffering from fever to test for malaria. The programme further ensured access to case management services in health facilities and communities through maintaining the availability Rapid Diagnostic Tests (RDTs]) for those suspected of having malaria. These commodities were delivered to facilities to avoid stock outs. The country has been faced with procurement bottlenecks for essential malaria commodities and has limited stocks of ACTs, but good stocks of RDTs. The Indoor Residual Spraying campaign rolled out as planned and is expected to be completed in January 2022, with high coverage reported to date

Eswatini has responded positively to the recommended actions addressing reporting insecticide resistance data to WHO and the lack of data on iCCM and continues to strengthen access to treatment of malaria, pneumonia and diarrhoea.

RMNCAH and NTDs

Progress

Good progress has been made on tracer RMNCAH interventions including DPT3, skilled birth attendants, exclusive breast feeding, postnatal care and coverage of ARTs in the total population. Eswatini has significantly enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Eswatini is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis and soil transmitted helminths. Preventive chemotherapy coverage in Eswatini is zero for soil-transmitted helminths and schistosomiasis.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stockouts of essential RMNCAH commodities	Q4 2022		The country developed COVID- 19 RMNCAH guidelines which are in line with WHO guidance. The country is experiencing issues of commodity stock outs despite efforts to limit such challenges
NTDs	Progress in addressing Neglected Tropical Diseases (NTDs) in Eswatini is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis and soil transmitted helminths. In 2020, preventive chemotherapy coverage was 0% for both schistosomiasis and soil-transmitted helminths. Overall, the NTD preventive chemotherapy coverage index for Eswatini in 2020 is zero, which represents a decrease compared with the 2019 index value (3).	Q4 2022		Since the COVID-19 pandemic, the country has not carried out the planned MDA but hopes to implement as soon as the COVID-19 situation allows

The country has responded positively to the RMNCAH recommended action addressing low coverage of vitamin A and continues to track progress as this action is implemented.



¹ RMNCAH metrics, recommended actions and response tracked through WHO