

# Botswana ALMA Quarterly Report Quarter One, 2025



## Scorecard for Accountability and Action



### Metrics

Financing		
IRS financing (2024-2026) (% of at-risk population)		100
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		100
% of National Malaria Strategic Plan Financed (2024-2026)		81
Domestic Financing for Malaria (2025)		

Policy		
Signed, ratified and deposited the AMA instrument at the AUC	▲	
Malaria activities targeting refugees in Malaria Strategic Plan		
Malaria activities targeting IDPs in Malaria Strategic Plan		
Zero Malaria Starts With Me Launched		
End Malaria Council and Fund Launched		

Resistance Monitoring, Implementation and Impact		
Drug efficacy studies conducted since 2019 and data reported to WHO		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		2
Insecticide resistance monitored since 2020 and data reported to WHO		
% of vector control in the last year with next generation materials		100
ACTs in stock (>6 months stock)		
RTDs in stock (>6 months stock)		
On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)		
On track to reduce malaria mortality by at least 75% by 2025 (vs 2015)		

Tracer Indicators for Maternal and Child Health and NTDs		
Mass Treatment Coverage for Neglected Tropical Disease (NTD Index, %)(2023)		1
% of Neglected Tropical Disease MDAs Achieving WHO Targets		33
National Budget Allocated to NTDs		
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)		66
DPT3 coverage 2023 (vaccination among 0-11 month olds)		95
Climate Change and VBDs in NDCs		

The annual reported number of confirmed malaria cases in 2023 was 651 with 6 deaths.

### Key

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

## **Malaria**

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. We must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, increasing biological threats, climate change, and humanitarian crises. These threats represent the most serious emergency facing malaria in 20 years and will lead to malaria upsurges and epidemics if not addressed. To get back on track and eliminate malaria, we will need to mobilise another \$5.2 billion dollars annually to fully finance our national malaria plans, and urgently fill gaps created by the recent reductions in ODA. Extreme weather events and climate change present a significant threat to the progress that we have made. Africa is disproportionately exposed to the risks of climate change and by the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Climate disasters displace millions and destroy roads and health facilities, reducing access to health services. We must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the invasive *Anopheles stephensi* mosquito which spreads malaria in both urban and rural areas. The good news is that the malaria toolkit continues to expand. WHO has approved the use of dual-insecticide mosquito nets that are 43% more effective than traditional mosquito nets and will address the impact of insecticide-resistance. New medicines for treating malaria and two malaria vaccines for children have also been approved with an increasing number of countries deploying these new tools. The scaling up of these interventions will help us achieve our goal of eliminating malaria. This will require integrated approaches with malaria as a pathfinder for primary health care strengthening, climate change and health, and Universal Health Coverage. We must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD councils and Funds, which have raised over US\$150 million.

## **Progress**

Botswana has secured sufficient resources to fund the required ACTs, RDTs and IRS required in 2024-2026. WHO has identified Botswana as being a country with the potential to eliminate local transmission of malaria by 2025. The country has finalised the insecticide resistance management and monitoring plan, and is using next generation insecticides for vector control.

In line with the priority agenda of the ALMA chair, President Advocate Duma Gideon Boko, Botswana has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Elimination Scorecard and this is shared publicly in-country, but not yet posted to the ALMA Scorecard Knowledge Hub. Discussions are ongoing for the creation of the Botswana End Malaria and NTD council.

## **Impact**

The annual reported number of malaria cases in 2023 was 651 with 6 deaths.

## **Key Challenges**

- Achieving and maintaining IRS coverage above 80%.
- Malaria upsurges in Q1 2025
- Need to further strengthen cross border collaboration with neighbouring countries.

### Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Q1 2023		The country has ratified the AMA instrument
Impact	Ensure that there are sufficient supplies and resources to respond to any malaria upsurges during the Q1 2025 malaria season	Q1 2025		The country had adequate stocks of ACTs but insufficient RDTs to address the malaria upsurge and carry out active case detection. Emergency RDTs were procured in response, as well as donations. The country is experiencing an ongoing upsurge, also linked to low coverage of IRS as well as to the heavy rainfall experiences and response mechanisms are ongoing.
Impact	Investigate and address the reasons for the lack of progress in reducing malaria incidence since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence	Q4 2025		The country has not achieved high coverage of IRS, resulting in malaria upsurges. The ITNs distributed by the country are pyrethroid only nets rather than the next generation nets able to address the insecticide resistance in the country, whilst active case detection is insufficient to address and contain upsurges. In response, the country is decentralising malaria prevention to district level and will implement an acceleration plan towards elimination building off the national strategic plan

Botswana has responded positively to the recommended action addressing the lack of data on drug efficacy testing and is continuing to monitor progress against this action.

### New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Work to identify and address the underlying causes of the ongoing malaria upsurge	Q4 2024

## Reproductive, Maternal, Newborn, Adolescent and Child Health

### Progress

Botswana has enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Adolescent and Child Health Scorecard. The country has achieved high coverage of DPT3.

## Neglected Tropical Diseases

Progress in addressing Neglected Tropical Diseases (NTDs) in Botswana is illustrated using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage is zero for schistosomiasis and for soil-transmitted helminthiasis (0%) and 100% for trachoma (disease under surveillance only). The overall NTD preventive chemotherapy coverage index in 2023 is 1 and shows a decrease compared to the 2022 index value (10). The country did not reach any WHO MDA coverage targets. Botswana has included Vector-borne diseases in the country Nationally Determined Contribution.

### Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Work to implement preventive chemotherapy for Soil Transmitted Helminthiasis and schistosomiasis and reach WHO targets	Q4 2025		The Government provided resources for the 2025 Schistosomiasis and Soil Transmitted Helminthiasis integrated MDA planned in June 2025. The Albendazole and Praziquantel to be used are already in country, with the preparations for MDAs ongoing.
NTDs	Submit data to the AUC on the national Budget Allocated to NTDs	Q4 2025		The country has no specific budget line for NTDs but government funds to support MDAs are channeled via different health budget lines. For 2025, the government funds will cover MDAs activities planned in June 2025.

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due