Botswana ALMA Quarterly Report
Quarter Two, 2026

AFRICAN LEADERS MALARIA ALLIANCE | ALMA

Scorecard for Accountability and Action

The annual reported number of confirmed malaria cases in 2024 was 290 with 1 death.

Metrics

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 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)	▲
RDTs 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, %)(2024)	7
% 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 (2025)	▲ 82
DPT3 coverage 2025 (vaccination among 0-11 month olds)	95
Climate Change and VBDs in NDCs	

Key

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

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Malaria - The Big Push towards 2030

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. Countries must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, decreasing ODA, 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, US$5.2 billion is needed annually to fully finance country national malaria plans, and urgently fill gaps created by the recent reductions in ODA. Extreme weather events and climate change present a significant threat. By the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Countries 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 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. WHO have also recently approved the use of Spatial Repellents. 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. Malaria can serve as a pathfinder for primary health care strengthening, climate change and health, and Universal Health Coverage. Countries must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD Councils and Funds, which have raised over US$245 million to date.

A recent report by ALMA and MNM UK, “The Price of Retreat,” highlights the expected impact of malaria between 2025-2030 on GDP, trade and key sectors for development in Africa. If Botswana cannot sustain malaria prevention due to reductions in malaria financing, this would lead to an estimated 85 additional cases, 6 more deaths, and GDP loss of US$249.8 million between 2025 and 2030. However, if we mobilise the necessary resources and achieve a 90% reduction in malaria, in Botswana there will be a US$2.1 million increase in GDP.

Progress

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 Indoor Residual Spraying.

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 Malaria and NTD Elimination Council. The Honourable Minister of Health has been appointed as an ALMA RBM Malaria champion..

Impact

The annual reported number of malaria cases in 2024 was 290 with 1 death.

Key Challenges

- Achieving and maintaining IRS coverage above 80%.
- Malaria upsurges in 2025 and 2026
- 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
Impact	Ensure that there are sufficient supplies and resources to respond to any malaria upsurges during the Q1 2026 malaria season	Q1 2026		The country has successfully mobilised emergency resources including for ACTs and spatial repellents. The country is working to procure RDTs
Impact	Work to address low stocks of ACTs	Q1 2026		The country has 4 months supplies of ACTs and 6 months supply of RDTs

Botswana has responded positively to the recommended action addressing the lack of data on drug efficacy testing, investigating reasons for the lack of progress in reducing malaria incidence and is continuing to monitor progress against this action.

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, and has increased the voverage of ARTs in children.

Neglected Tropical Diseases

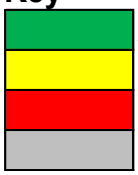
Progress in addressing Neglected Tropical Diseases (NTDs) in Botswana is illustrated using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage is zero (0%) for schistosomiasis; 39% for soil-transmitted helminthiasis and 100% for trachoma (disease under surveillance only). The overall NTD preventive chemotherapy coverage index in 2024 is 7 and shows an increase compared to the 2023 index value (1). 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 (PC) for schistosomiasis and reach WHO targets for all targeted PCs. Ensure that NTD interventions including Mass Drug Administration, vector control and Morbidity Management and Disability Prevention are sustained and implemented.	Q4 2026		Mass Drug Administration is now under the responsibility of local government and the NTD programme is working with the organization in charge to organize MDA in Q3 2026. Routine NTD case management is integrated in health facility package.

The country has responded to the recommended on submitting data to the AUC on the national Budget Allocated to NTDs, and continues to track progress as this action is implemented.

Key



Action achieved

Some progress

No progress

Deliverable not yet due