Malaria transmission is seasonal in Eswatini; the annual reported number of malaria cases in 2017 was 1,127 and 20 deaths.
Malaria
Progress
Eswatini secured sufficient resources to fund the IRS, ACTs, and RDTs required to sustain universal coverage in 2019. WHO has identified Eswatini as being a country with the potential to eliminate local transmission of malaria by 2020. The country has finalised the insecticide resistance monitoring and management plan. Eswatini has increased the coverage of IRS. 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. Eswatini is a member of the Elimination 8 and MOSASWA initiatives, strengthening their cross-border collaboration with neighbouring countries. In May 2019, the country launched an End Malaria Fund to raise US$5 million.

Impact
The annual reported number of malaria cases in 2017 was 1,127 with 20 deaths. The country experienced a significant increase in malaria cases and deaths in 2017 and investigated and addressed the underlying reason for this upsurge.

Key Challenges
- Maintaining malaria high on the political and funding agenda post-2015.

Previous Key Recommended Actions
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. The country has also worked to address the upsurges in 2017, with a significant reduction in indigenous cases reported in 2018.

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 high for both schistosomiasis (100%) and soil transmitted helminths (84%). Overall, the NTD preventive chemotherapy coverage index for Eswatini in 2017 is 92, which represents an increase compared with the 2016 index value (90).

Previous Key Recommended Action
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.