Malaria is present in the three northern provinces of South Africa bordering Mozambique and Eswatini. The annual reported number of malaria cases in 2018 was 18,638 with 69 deaths.
Malaria
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, Child and Adolescent health 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. Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For South Africa, it was of vital importance that the indoor residual spraying (IRS) campaign planned for the fourth quarter of 2020 went ahead and that the insecticides for the campaign were ordered on time, whilst taking into account physical distancing, in accordance with the recent guidance and recommendations from WHO. The country is congratulated for rolling out IRS in a timely manner. Without this IRS, coupled with the need to sustain essential health services including malaria case management, there could have been an increase in malaria cases and deaths. Under the worst-case scenario, in which there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 20.6% increase in malaria cases, and a 135% increase in malaria deaths in South Africa. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress
South Africa secured sufficient resources for the insecticides required for IRS in 2020 and enough RDTs and ACTs. WHO has identified South Africa 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. South Africa has significantly enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Elimination Scorecard.

Impact
The annual reported number of malaria cases in 2018 was 18,638 with 69 deaths.

Key Challenges
- Risk of re-introduction of malaria from neighbouring countries.
- There is a need to strengthen cross border collaboration with neighbouring countries.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.
Impact

Ensure that malaria services including case management and IRS are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic

Q4 2020

South Africa has sufficient stocks of RDTs and ACTs for the diagnosis and treatment of malaria in health facilities. The necessary precautions including the provision of PPEs for health workers, including for vector control operators, are available for use against COVID-19. Additionally, all the insecticides (DDT and Deltamethrin) needed for IRS have been received and spraying has started in all the three provinces in time.

Vector Control

Ensure the IRS commodities are procured in time for the 2020 IRS campaigns

Q3 2020

DDT was received by the second week of September and with Deltamethrin and PPEs available, IRS campaigns have started in all the three provinces.

RMNCAH and NTDs

Progress

The country has made significant progress in scaling-up the tracer RMNCAH interventions of skilled birth attendants and postnatal care.

Progress in addressing Neglected Tropical Diseases (NTDs) in South Africa is shown using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis and soil transmitted helminths. Preventive chemotherapy coverage in South Africa is below WHO target for soil transmitted helminths (54%) and preventive chemotherapy for schistosomiasis was not implemented in 2018 (0%). Overall, the NTD preventive chemotherapy coverage index for South Africa in 2018 is very low (2), which is the same as in 2017 index value (2).

Previous Recommended Actions

Objective

NTDs

Action Item

Identify the reasons for the decrease in Preventive Chemotherapy (PC) coverage of Soil Transmitted Helminths (STH) and the continued low coverage of PC for Schistosomiasis, and work to enhance coverage to reach the WHO targets

Q4 2019

The programme has carried out the mapping of Schistosomiasis distribution in 7 provinces with only 2 outstanding. This will support the development of a national strategy to treat everyone everywhere in need of preventive chemotherapy for NTDs.
NTDs
Implement preventive chemotherapy (PC) for schistosomiasis along with soil transmitted Helminths(STH) and work to increase PC for STH to reach WHO target.

Q4 2020
No progress reported

RMNCAH¹: Impact
Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities

Q4 2020
RMNCAH services, especially preventive and promotive services which are provided at clinics and community health centres, have been disrupted by the Covid-19 lockdown especially in April. All Primary Health Care services should now be providing all essential services, and each of the nine provinces has been requested to ensure that catch-up plans for RMNCAH as well as HIV/TB services are in place

Key
- Action achieved
- Some progress
- No progress
- Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO