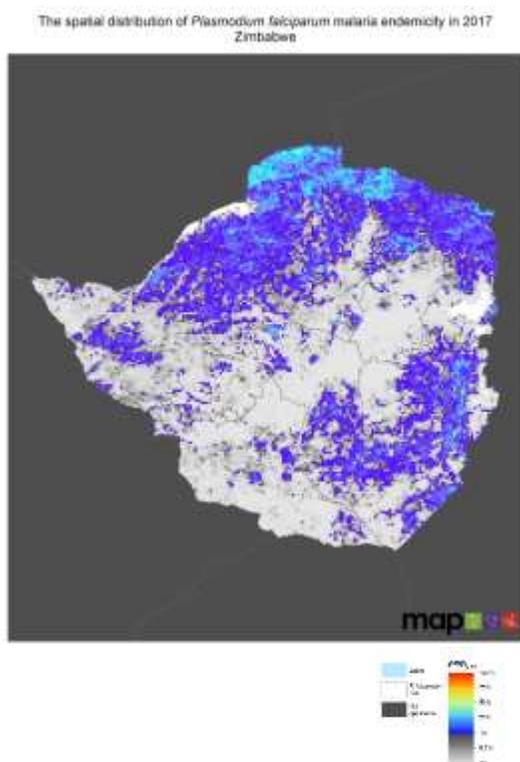


Zimbabwe ALMA Quarterly Report Quarter Three, 2020

Scorecard for Accountability and Action



Malaria transmission is seasonal in Zimbabwe with about 60% of the population at risk. The annual reported number of malaria cases in 2018 was 184,427 and 192 deaths.

Metrics

Commodities Financed and Financial Control		
IRS financing 2020 (% of at-risk population)	100	100
Public sector RDT financing 2020 projection (% of need)	100	100
Public sector ACT financing 2020 projection (% of need)	100	100
World Bank rating on public sector management and institutions 2019 (CPIA Cluster D)	2.9	
Insecticide Resistance Monitoring, Implementation and Impact		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	6	
Insecticide resistance monitored since 2015 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
RDTs in stock (>9 months stock)		
ACTs in stock (>9 months stock)		
LLINIRS campaign on track		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of implementation of ICCM (2017)		
IRS Operational Coverage (%)	94	
On track to reduce case incidence by ≥40% by 2020 (vs 2015)		
On track to reduce case mortality by ≥40% by 2020 (vs 2015)		
Tracer Indicators for Maternal and Child Health and NTDs		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)	6	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	85	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)	71	
% deliveries assisted by skilled birth attendant	78	
Postnatal care (within 48 hrs)	57	
Exclusive breastfeeding (% children < 6 months)	47	
Vitamin A Coverage 2018 (2 doses)	40	
DPT3 coverage 2019 (vaccination among 0-11 month olds)	90	

Key

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

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, as well as chemoprevention for pregnant women (intermittent preventive treatment in pregnancy). 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 Zimbabwe, 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 are ordered on time, whilst taking into account physical distancing, in accordance with the recent guidance and recommendations from WHO. The country is congratulated for ensuring that the IRS campaign rolled out as planned. Without this IRS, coupled with the ongoing long-lasting insecticidal net (LLIN) distributions and 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 all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 23.2% increase in malaria cases, and a 111.4% increase in malaria deaths in Zimbabwe. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress

Zimbabwe has secured the resources required for ACTs, RDTs, LLINs and IRS in 2020 and has achieved high coverage of vector control. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO, and has finalised the insecticide resistance monitoring and management plan. Zimbabwe has sufficient stocks of RDTs, and 6 months supply of ACTs. Zimbabwe has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard. The country has significantly reduced malaria cases and deaths since 2015.

Impact

The annual reported number of malaria cases in 2018 was 184,427 and 192 deaths.

Key Challenges

- 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.

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 2020		Vector control implementation (IRS and distribution of nets) commenced in September and all preparations including training have been completed. There are no reported stock outs of ACTs and RDTs
Vector Control	Ensure the IRS commodities are procured in time for the 2020 IRS campaigns and that the LLIN campaign is rolled out as soon as possible	Q3 2020		All IRS commodities (insecticides and PPEs) have been procured on time, although there were delays in the shipment of DDT. The spraying is ongoing

The country has responded to the recommended action to ensure that the recent cyclone does not impact negatively on the malaria situation and successfully mobilized emergency funds to cover the costs of additional malaria commodities and operations and has not experienced any major upsurge.

RMNCAH and NTDs

Progress

Zimbabwe achieved high coverage of the tracer RMNCAH intervention skilled birth attendants and ARTs in the total population. Zimbabwe has 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 Zimbabwe is shown using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage is low for trachoma (23%) and the country did not implement preventive chemotherapy for schistosomiasis, soil-transmitted helminths and lymphatic filariasis. Overall, the NTD preventive chemotherapy coverage index for Zimbabwe in 2018 is 0, which represents a decrease compared with the 2017 index value (12).

Previous Key Recommended Action

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 stock-outs of essential RMNCAH commodities	Q4 2020		Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due