Malaria is endemic in all parts of Zambia and transmission is seasonal. The annual reported number of malaria cases in 2019 was 6,417,487 with 1,339 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. 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, Neglected Tropical Diseases and malaria.

For Zambia, it was of vital importance to ensure that the universal coverage campaign for long-lasting insecticidal nets (LLINs) went ahead, whilst taking into account physical distancing, in accordance with the guidance and recommendations from WHO and the RBM Partnership to End Malaria. Without the LLIN campaign, planned indoor residual spraying (IRS) and sustained malaria case management, there could be an increase in malaria cases and deaths. The country is commended for prioritizing malaria with the IRS and LLIN campaigns going ahead. 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 have been a 42% increase in malaria cases, and a 124% increase in malaria deaths in Zambia. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2021 as the COVID-19 pandemic continues to impact our continent. This may include the implementation of any necessary catch-up activities and ensuring timely planning to account for potential delays in procurement and delivery. Any intervention must ensure the safety of communities and health workers given the ease of transmission of COVID-19.

Progress
Zambia has secured most of the required financing to fund the ACTs, LLINs and IRS required for 2021, including with significant domestic resource commitments. The country has also distributed sufficient LLINs and carried out sufficient IRS to achieve universal operational coverage of the targeted at risk population. Zambia carried out insecticide resistance monitoring since 2015 and reported the results to WHO and has completed the national insecticide resistance monitoring and management plan. Zambia has scaled up the implementation of iCCM and achieved 100% operational coverage of LLINs. Zambia has launched the Malaria Ends with Me campaign.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Zambia has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control and Elimination Scorecard and the sharing of the country scorecards through the ALMA Scorecard Hub. The country has also launched the multisectoral high level End Malaria Council and Malaria Fund.

Impact
The annual reported number of malaria cases in 2019 was 6,417,487 with 1,339 deaths.

Key Challenges
- The country has documented mosquito resistance to four insecticide classes.
- There is a need to strengthen cross border collaboration with neighbouring countries.
- The country has significant resource gaps.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and Neglected Tropical Diseases.

### Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact</td>
<td>Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic</td>
<td>Q4 2020</td>
<td></td>
<td>The malaria programme implemented the malaria control interventions with adherence to the COVID-19 guidelines. Mass LLIN distribution was completed. The 2021 IRS campaign programme has started. The NMEC and partners reviewed and updated the 2020 IRS Covid-19 Risk Mitigation Plan to continue ensuring the safety of IRS campaign teams and community members while continuing to implement IRS campaign activities to the greatest extent possible. Training of trainers and spray operators was conducted for all the provinces and districts. The 47 districts implementing IRS using DDT received their funding to procure PPEs including appropriate Covid 19 PPEs locally while the other logistics are also in place and IRS implementation commenced in June. The other insecticides (Sumishield and Fludora Fusion) which were procured for the remaining districts have started arriving in country to ensure that IRS is implemented on schedule. The Copperbelt Province has also simplified the Covid 19 guidelines and shared with the malaria OTSS group and used scorecard flags to convey severity of the disease and how to manage the cases. The procurement and supply of malaria medicines is on schedule with adequate stocks of the malaria medicines. PPEs have been provided to CHWs. Training of CHWs continued under strict covid 19 guidelines with support from partners. The programme and partners have submitted the COVID 19 Response Mechanism Funding Request Application to the CCM for the GF support. Malaria Programme Review (MPR) has commenced. The malaria scorecard focal point was officially appointed by the MOH. Under the period January to April 2021, malaria cases reduced by 20%, Malaria in Pregnancy decreased by 28% and Under-five cases declined by 22% while Malaria deaths decreased by 29% when compared to 2020 same period. This could be attributed to the intensive implementation of malaria interventions across the country.</td>
</tr>
</tbody>
</table>

### New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vector Control</td>
<td>Ensure the IRS commodities are procured in time for the 2021 IRS campaigns</td>
<td>Q3 2021</td>
</tr>
</tbody>
</table>
RMNCAH and NTDs

Progress
Zambia has achieved high coverage in the tracer RMNCAH interventions of exclusive breastfeeding, vitamin A and DPT3. The country has also increased coverage of ARTs in children. Zambia has enhanced accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Zambia is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Zambia is below WHO targets for trachoma (35%) and for soil transmitted helminths (17%); very low for lymphatic filariasis (0%) and for schistosomiasis (0%). Overall, the NTD preventive chemotherapy coverage index for Zambia in 2019 is 2, which represents a very substantial decrease compared with the 2018 index value (36).

Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>NTDs</td>
<td>Work to increase the preventive chemotherapy for soil transmitted helminths, trachoma and for schistosomiasis along with lymphatic filariasis to reach WHO targets</td>
<td>Q4 2020</td>
<td>Zambia conducted MDA targeting STH and SCH in September-October 2020 in four provinces while one more province completing in December 2020. MDA for LF took place in December 2020. Trachoma MDA will be organized in the first quarter of 2021</td>
<td></td>
</tr>
<tr>
<td>RMNCAH¹: Impact</td>
<td>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</td>
<td>Q4 2020</td>
<td>Zambia is currently experiencing the third wave of Covid 19. The RMNCAH are using the Covid 19 guidelines provided and hospitals have set up screening and swabbing sites at their RMNCAH sites. The Child Health Unit observed that some care givers of patients admitted in the hospitals lack appropriate PPEs. MOH and UNICEF provided the appropriate PPEs to those without</td>
<td></td>
</tr>
<tr>
<td>NTDs</td>
<td>Prioritise the funding to implement preventive chemotherapy for lymphatic filariasis and schistosomiasis and work to increase preventive chemotherapy for soil transmitted helminths, trachoma and reach WHO targets</td>
<td>Q4 2021</td>
<td>Since the end of 2020, the country started organizing MDAs targeting STH, SCH and LF and the geographical coverage was improved at about 90%. SCH MDA in the remaining 49 implementation units was extended up to 2021. Mobilizing funds for MDA has been a priority and all MDAs were supported by WHO. The country also conducted the 5th round of LF MDA in 79 implementation units with the ASCEND support and reports are under compilation. Also, Trachoma MDA has been just completed with the support of ASCEND and reports are under compilation.</td>
<td></td>
</tr>
</tbody>
</table>

¹ RMNCAH metrics, recommended actions and response tracked through WHO
Key

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