Botswana ALMA Quarterly Report Quarter Four, 2017



Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control	
IRS financing 2017 (% of at-risk population)	100
Public sector RDT financing 2017 projection (% of need)	100
Public sector ACT financing 2017 projection (% of need)	100
World Bank rating on public sector management and institutions 2016 (CPIA Cluster D)	

Insecticide Resistance Monitoring, Implementation and Impact

Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	1
Insecticide resistance monitored since 2015 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
Scale of Implementation of iCCM (2016)	
IRS Operational Coverage (%)	69
Change in malaria incidence rate (2010–2016)	

Tracer Indicators for Maternal and Child Health and I	ITE	Ds
Mass Treatment for Neglected Tropical Disease (NTD index)(2016)		2
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2016)		83
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2016)		60
% deliveries assisted by skilled birth attendant		95
Postnatal care (within 48 hrs)		
Exclusive breastfeeding (% children < 6 months)		20
Vitamin A Coverage 2015 (2 doses)	T	57
DPT3 coverage 2016 (vaccination among 0-11 month olds)		85

The annual reported number of confirmed malaria cases in 2016 was 718 with 3 deaths.

Key



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

Malaria

Progress

Botswana mobilised sufficient financing for IRS, malaria diagnosis and treatment in 2017. WHO has identified Botswana as being a country with the potential to eliminate local transmission of malaria by 2020. Botswana has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard.

Impact

The annual reported number of malaria cases in 2016 was 718 with 3 deaths. WHO estimates that the country has achieved a decrease of between 20-40% in the malaria incidence rate for the period 2010 - 2016. However, the country experienced an increase in cases of more than 20% between 2015 and 2016 and investigating and addressing the key underlying reason for this upsurge will be a key priority for 2018.

Key Challenges

- Malaria outbreaks have been reported by the country during the previous malaria season.
- Achieving and maintaining IRS coverage above 80%.
- There is a need to strengthen cross border collaboration with neighbouring countries.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Finalise and implement the national insecticide resistance monitoring and management plan	Q1 2017		Botswana is planning to finalise the insecticide resistance monitoring and management plan by the end of quarter 1 2018
Vector Control	Ensure the IRS programme is fully implemented before the beginning of the malaria season	Q4 2017		The country received sufficient DDT, and later pyrethroids to meet the requirements for IRS. While the supervision of the spraying has been a challenge, the country plans to complete the spraying in time
Vector Control	Report on the status of insecticide resistance monitoring to WHO	Q3 2018		Deliverable not yet due but the country has collected data on the insecticide resistance status and plans to submit these data to WHO

Previous Key Recommended Actions

Botswana has responded positively to the recommended action addressing the lack of data on iCCM and continues to strengthen access to treatment of malaria, pneumonia and diarrhea.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Investigate and address the reasons for the WHO estimated increase of greater than 20% in the malaria incidence rate between 2015 and 2016	Q4 2018

MNCH and NTDs

Progress

Botswana has achieved good coverage in tracer MNCH interventions, including deliveries by skilled birth attendants and ART coverage in children. The country has significantly enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Adolescent and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Botswana is illustrated using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis and soil transmitted helminths. Whilst 29% preventive chemotherapy coverage for soil transmitted helminths in Botswana has been achieved, coverage for schistosomiasis is low (0%). Overall, the NTD preventive chemotherapy coverage index for Botswana in 2016 is low, but shows some improvement over the 2015 index value.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
MNCH ¹ : Optimise quality of care	Identify and address reasons for the decrease in coverage of DPT3	Q2 2018		Deliverable not yet due

The country has responded positively to the MNCH recommended actions addressing low coverage of exclusive breastfeeding and lack of data for postnatal care and continues to track progress as these actions are implemented.

New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Address the decreasing vitamin A coverage	Q4 2018
NTDs	Given the Soil Transmitted Helminths (STH) Preventive Chemotherapy (PC) coverage achieved, implement PC for Schistosomiasis alongside STH, at least for school-age children	Q4 2018

Key

Action achieved
Some progress
No progress
Deliverable not yet due