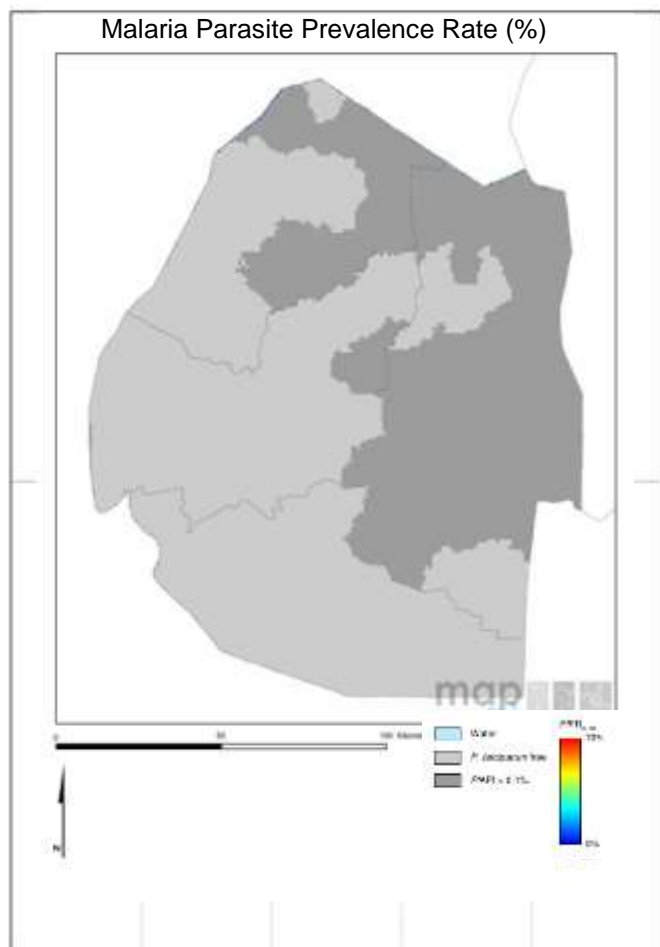


Scorecard for Accountability and Action



Malaria transmission is seasonal in eSwatini; the annual reported number of malaria cases in 2016 was 487 and 3 deaths.

Metrics

Commodities Financed and Financial Control		
IRS financing 2018 (% of at-risk population)		100
Public sector RDT financing 2018 projection (% of need)		100
Public sector ACT financing 2018 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		0
Insecticide resistance monitored since 2015 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of iCCM (2017)		
IRS Operational Coverage (%)	▼	76
Reduced Malaria Incidence by >40% by 2020 (vs 2015) (projected)		
Tracer Indicators for Maternal and Child Health and NTDs		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2016)		90
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2016)		80
Estimated % of children (0-14 years old) living with HIV who have access to antiretroviral therapy (2016)		63
% deliveries assisted by skilled birth attendant		88
Postnatal care (within 48 hrs)		87
Exclusive breastfeeding (% children < 6 months)		64
Vitamin A Coverage 2015 (2 doses)		
DPT3 coverage 2016 (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

Progress

eSwatini secured sufficient resources to fund the IRS, ACTs, and RDTs required to sustain universal coverage in 2018. WHO has identified eSwatini as being a country with the potential to eliminate local transmission of malaria by 2020. 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.

Impact

The annual reported number of malaria cases in 2016 was 487 with 3 deaths. With the overall increase in the estimated malaria incidence between 2010 and 2016, WHO projects that the country will record an increase in malaria incidence by 2020. The country also experienced an increase in malaria 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

- Maintaining malaria high on the political and funding agenda post-2015.
- Upsurges of malaria in 2016 and 2017.
- There is a need to strengthen cross border collaboration with neighbouring countries.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Report the status of both insecticide resistance monitoring and the national insecticide resistance monitoring and management plan to WHO	Q1 2017		eSwatini has prepared a draft insecticide resistance management plan
Vector Control	Ensure the IRS programme is fully implemented before the beginning of the malaria season	Q4 2017		The country carried out emergency spraying using pyrethroid and procured actellic through the GF. The number of cases have declined following the upsurges observed in the last quarter of 2017
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		The country reported an increase in malaria cases from 157 cases in 2015 to 209 cases in 2016. In response, the government has doubled the funding for IRS and has adequate supplies for RDTs and ACTs for the current malaria season.

eSwatini 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 diarrhoea.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Vector control	Address the decreasing coverage of IRS	Q4 2018

MNCH and NTDs

Progress





Good progress has been made on tracer MNCH interventions including DPT3, skilled birth attendants, exclusive breast feeding and 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 (94%) and soil transmitted helminths (86%). Overall, the NTD preventive chemotherapy coverage index for eSwatini in 2016 is 90, which represents a very substantial increase compared with the 2015 index value (0).

Previous Key Recommended Action

eSwatini has responded positively to the recommended action addressing the lack of data on vitamin A and continues to track progress.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due