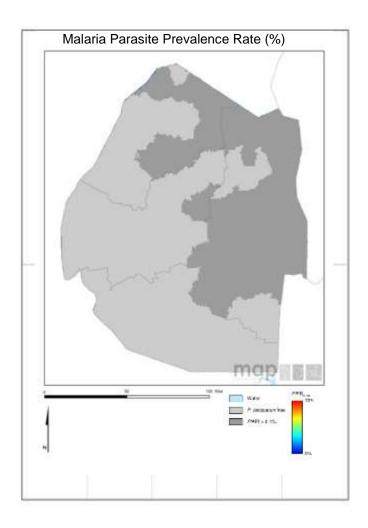
Eswatini ALMA Quarterly Report Quarter Two, 2018



Scorecard for Accountability and Action



Commodities Financed and Financial Control		
RS 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 2017 (CPIA Cluster D)		
Insecticide Resistance Monitoring, Implementation a	nd Ir	npact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		- 3
Insecticide resistance monitored since 2015 and data reported to WHO		
National Insecticide Resistance Monitoring and Management Plan		
Scale of Implementation of ICCM (2017)	Τ	
RS Operational Coverage (%)		70
Reduced Malaria Incidence by >40% by 2020 (vs 2015) (projected)		
Tracer Indicators for Maternal and Child Health and I	ITD	5
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2016)		9
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2017)	•	8
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2017)		7
% deliveries assisted by skilled birth attendant		8
Postnatal care (within 48 hrs)		8
Exclusive breastfeeding (% children < 6 months)		6
Vitamin A Coverage 2016 (2 doses)		.3
DPT3 coverage 2017 (vaccination among 0-11 month olds)		90

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

Key



Eswatini ALMA Quarterly Report Quarter Two, 2018



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 which will be reviewed by the national Vector Control Advisory Board, with plans to complete the plan by the end of Q3 2018
Vector control	Address the decreasing coverage of IRS	Q4 2018		The country has doubled the number of IRS operators. Additionally, Eswatini has reprogrammed GF grant savings to procure additional DDT and have already commensed the insecticide procurement earlier than in previous years

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.

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.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
MNCH1:	Address the low coverage of vitamin A	Q2 2019
Optimise		
quality of care		



¹ MNCH metrics, recommended actions and response tracked through WHO MCA