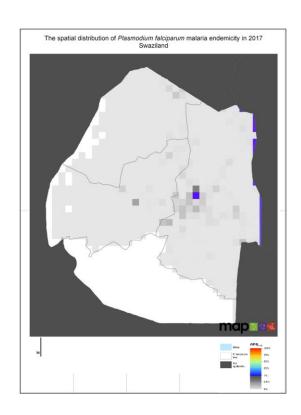
# Eswatini ALMA Quarterly Report Quarter One, 2022



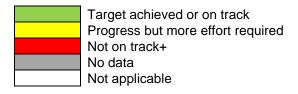
## **Scorecard for Accountability and Action**



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IRS financing 2022 (% of at-risk population)		100
Public sector RDT financing 2022 projection (% of need)		100
Public sector ACT financing 2022 projection (% of need)		100
Policy		
Signed, ratified and deposited the AMA instrument at the AUC		
Malaria activities targeting refugees in Malaria Strategic Plan		
Malaria activities targeting IDPs in Malaria Strategic Plan		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Resistance Monitoring, Implementation and Impact		
Drug Resistance Monitoring Conducted (2018-2020) and data reported to WHO		
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		
RDTs in stock (>6 months stock)	•	
ACTs in stock (>6 months stock)		,
LLIN/IRS campaign on track		
IRS Operational Coverage (%)		92
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, NTD	s a	nd Covid 19
Scale of Implementation of iCCM		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2020)		0
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2020)		98
Vitamin A Coverage 2020 (2 doses)		
DPT3 coverage 2020 (vaccination among 0-11 month olds)		83
% Population Fully Vaccinated Against COVID-19	_	38

Malaria transmission is seasonal in Eswatini; the annual reported number of malaria cases in 2020 was 325 and 2 deaths.

## Key



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## 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, Adolescent and Child health, Neglected Tropical Diseases 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. WHO estimates that there were an additional 47,000 malaria deaths globally in 2020 due to service disruptions during the COVID-19 pandemic, leading to an estimated 7.5% increase in deaths.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2022 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

Given the difficulties in securing essential health commodities in Africa during the COVID-19 pandemic, it is of vital importance that countries sign, ratify and deposit the African Medicines Agency (AMA) instrument with the AUC in order to improve access to quality, safe and efficacious medical products in Africa. The country is encouraged to do this.

The country has been affected by the continent-wide restriction of access to COVID-19 vaccines but has been able to cover 38% of their population by April 2022. The country, working with partners, should invest in education and behaviour change communication to increase the uptake of COVID vaccines and therapeutics.

#### Malaria

#### **Progress**

Eswatini secured sufficient resources to fund the IRS, ACTs, and RDTs required to sustain universal coverage in 2022. WHO has identified Eswatini as being a country with the potential to eliminate local transmission of malaria. The country has finalised the insecticide resistance monitoring and management plan. Eswatini increased the coverage of IRS in 2021. The country has sufficient stocks of ACTs and insecticide required for the IRS. Eswatini is a member of the Elimination 8 and MOSASWA initiatives, strengthening their cross-border collaboration with neighbouring countries. The country also launched its Zero Malaria Starts with Me campaign.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, building of the agenda of His Majesty King Mswati III, in May 2019, the country launched an End Malaria Fund to raise US\$5 million towards malaria elimination. 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 and this has been publicly posted to the ALMA Scorecard hub.

#### **Impact**

The annual reported number of malaria cases in 2020 was 325 and 2 deaths.

#### **Key Challenges**

- Maintaining malaria high on the political and funding agenda.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and NTDs.

**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 2022		In relation to Case Management, the malaria programme encouraged early health care treatment seeking behaviour for fever and suspected malaria through billboards and radio adverts. This communication encouraged the population suffering from fever to test for malaria. Most of the planned case management activities were implemented. All medicines are in stock with the exception of Mefloquine and the government is working towards a solution of transferring resources available to it for this drug to the Principal Recipient to procure this. Vector control services such as IRS were initially affected by the emergence of COVID-19 as national resources were diverted to the response neglecting routine needs of the NMP in the procurement of fuel and maintenance of vehicles. Through support from the End Malaria Fund, vehicles for IRS were serviced and maintained and IRS was successfully conducted with minimal interference. A total of 46 334 structures were sprayed during the past season, maintaining coverage of 91% in the targeted areas. Through partnering with other organizations on the ground, malaria messaging was disseminated to the communities and through support from the EMF, social media messaging was used by the programme to reach the masses during the era of Covid-19. In preparation for the next spray cycle in September; Insecticides and PPE have already been ordered. By utilizing the C19RM grant, additional vehicles will be obtained to strengthen IRS. 5,000 nets were procured through the country grant and will be distributed to farmers who are regarded as a high risk group due to their exposure while farming. The programme had envisaged distributing these nets during the month of March, preceding the peak harvest season. Due to logistical challenges such as human and transportation resources, that could not be possible. Support has been requested from MOSASWA to cover these costs

Eswatini has responded positively to the recommended actions addressing reporting insecticide resistance data to WHO and the lack of data on iCCM and continues to strengthen access to treatment of malaria, pneumonia and diarrhoea.

**New Key Recommended Actions** 

Objective	Action Item	Suggested completion timeframe
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Policy
Monitoring	Ensure that drug resistance monitoring is conducted and the data are reported to WHO	Monitoring

### **RMNCAH and NTDs**

### **Progress**

Good progress has been made on tracer RMNCAH intervention ART coverage in children.

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 zero for soil-transmitted helminths and schistosomiasis.

## **Previous Key Recommended Actions**

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH¹: Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stockouts of essential RMNCAH commodities	Q4 2022		The country developed COVID-19 RMNCAH guidelines which are in line with WHO guidance. The country experienced stock outs of some essential commodities. In response, the country advocated for life saving drugs including magnesium sulphate, Oxytocin, sutures, cord clamps and family planning commodities. UNFPA in collaboration with the MOH was able to reprogramme funds towards the procurement of these commodities. All commodities are currently available in stock
NTDs	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. In 2020, preventive chemotherapy coverage was 0% for both schistosomiasis and soil-transmitted helminths. Overall, the NTD preventive chemotherapy coverage index for Eswatini in 2020 is zero, which represents a decrease compared with the 2019 index value (3).	Q4 2022		The country is conducting NTD routine activities whilst respecting COVID-19 safety measures. The last MDA in country was conducted in 2019 and currently the country is engaging WHO to support the next MDA which is planned between June and July 2022. The country has also requested a support from ESPEN to have sentinel sites for Soil Transmitted Helminths established

<sup>&</sup>lt;sup>1</sup> RMNCAH metrics, recommended actions and response tracked through WHO

The country has responded positively to the RMNCAH recommended action addressing no data on vitamin A coverage and continues to track progress as this action is implemented.

