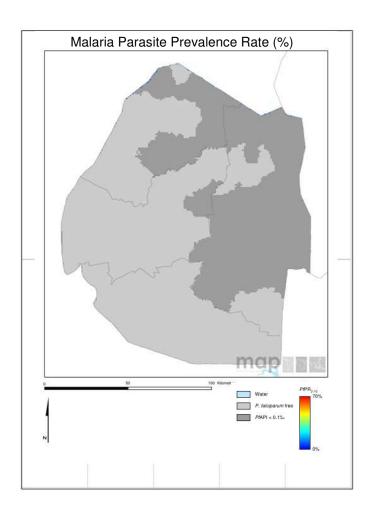
Swaziland ALMA Quarterly Report Quarter Two, 2017



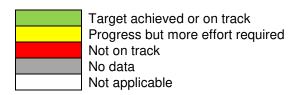
Scorecard for Accountability and Action



Metrics Commodities Financed and Financial Control IRS financing 2017 (% of at-risk population) 100 Public sector RDT financing 2017 projection (% of 100 Public sector ACT financing 2017 projection (% of 100 need) 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 Insecticide resistance monitored since 2014 and data reported to WHO National Insecticide Resistance Monitoring and Management Plan Scale of Implementation of iCCM (2016) IRS Operational Coverage (%) 94 Estimated change in malaria incidence rate (2010 - 2015)Estimated change in malaria mortality rate (2010 - 2015)Tracer Indicators for Maternal and Child Health Estimated % of Total Population living with HIV who 80 have access to antiretroviral therapy (2016) Estimated % of children (0-14 years old) living with 63 HIV who have access to antiretroviral therapy (2016) 88 % deliveries assisted by skilled birth attendant Postnatal care (within 48 hrs) 87 Exclusive breastfeeding (% children < 6 months) 64 Vitamin A Coverage 2014 (2 doses) 43 DPT3 coverage 2016 (vaccination among 0-11 90 month olds)

Malaria transmission is seasonal in Swaziland; the annual reported number of malaria cases in 2015 was 651 and five deaths.

Key



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Malaria

Progress

Swaziland has made significant progress in scaling-up malaria control interventions leading to a significant reduction in malaria burden in the country. Adequate resources have been secured to fund the IRS, ACTs, and RDTs required to sustain universal coverage in 2017. The country has achieved high operational coverage of IRS. Swaziland was awarded the 2017 ALMA Award for Excellence for reducing malaria incidence and malaria mortality by more than 40% for the period 2010-2015. WHO has identified Swaziland as being a country with the potential to eliminate local transmission of malaria by 2020. Swaziland 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 2015 was 651 with 5 deaths. WHO estimates that the country has achieved a decrease of greater than 40% for malaria incidence rate and for malaria mortality rate for the period 2010 - 2015.

Key Challenges

- Maintaining malaria high on the political and funding agenda post-2015.
- Upsurges of malaria in southern Africa following heavy rainfall.
- 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		The programme is now in the process of drafting the IRM plan as part of an overall vector control strategy. The plan will be finalized before the end of 2017

Swaziland 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
Address Funding	Work to accelerate the signature of the GF grant	Q4 2017

MNCH

Progress

Good progress has been made on tracer MNCH interventions including DPT3, skilled birth attendants, exclusive breast feeding and postnatal care and has recently increased coverage of ARTs in the total population. Swaziland has significantly enhanced tracking

and accountability mechanisms towards malaria elimination with the development of a Reproductive, Maternal, Newborn Child and Adolescent Health Scorecard.

