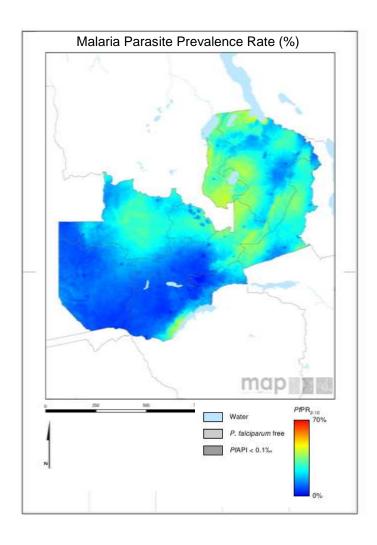
Zambia ALMA Quarterly Report Quarter One, 2018



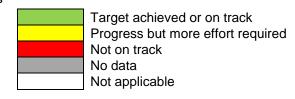
Scorecard for Accountability and Action



Commodities Financed and Financial Control					
LLIN financing 2018 projection (% of need)	100				
Public sector RDT financing 2018 projection (% of need)					
Public sector ACT financing 2018 projection (% of need)					
World Bank rating on public sector management and institutions 2016 (CPIA Cluster D)					
Insecticide Resistance Monitoring, Implementation and In	pact				
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	4				
Insecticide resistance monitored since 2015 and data reported to WHO					
National Insecticide Resistance Monitoring and Management Plan					
Scale of Implementation of iCCM (2017)					
Operational LLIN/IRS coverage (% of at risk population)	100				
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)	51				
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2016)	65				
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2016)					
% deliveries assisted by skilled birth attendant					
Postnatal care (within 48 hrs)					
Exclusive breastfeeding (% children < 6 months)	72				
Vitamin A Coverage 2015 (2 doses)					
DPT3 coverage 2016 (vaccination among 0-11 month olds)	99				

Malaria is endemic in all parts of Zambia and transmission is seasonal. The annual reported number of malaria cases in 2016 was 5,976,192 with 1,827 deaths.

Key



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Malaria

Progress

Zambia has secured sufficient financing to fund the ACTs, RDTs, LLINs and IRS required for 2018, including with significant domestic resource commitments. The country has also distributed sufficient LLINs and carried out sufficient IRS to achieve universal operational coverage of vector control. Zambia carried out insecticide resistance monitoring since 2015 and reported the results to WHO and has completed the national insecticide resistance monitoring and management plan. Zambia has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control and Elimination Scorecard. Zambia has scaled up the implementation of iCCM and achieved 100% operational coverage of LLINs.

Impact

The annual reported number of malaria cases in 2016 was 5,976,192 with 1,827 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.

Key Challenges

- The country has documented mosquito resistance to four insecticide classes.
- There is a need to strengthen cross border collaboration with neighbouring countries.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Investigate and address the reasons for the WHO projected increase in malaria cases	Q4 2018

MNCH and NTDs

Progress

Zambia has achieved high coverage in the tracer MNCH interventions of exclusive breastfeeding and DPT3. Zambia has enhanced accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Zambia is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Zambia is high for lymphatic filariasis (92%). Coverage is 32% for schistosomiasis, 57% for soil transmitted helminths and 40% for trachoma. Overall, the NTD preventive chemotherapy coverage index for Zambia in 2016 is 51, which represents no change compared with the 2015 index value (52).

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progres s	Comments - key activities/accomplishments since last quarterly report
MNCH¹: Optimise quality of care	Address the lack of vitamin A coverage data	Q3 2017		The country reports consistently high vitamin A coverage in 2015-2017. This has been achieved through the integration of vitamin A distribution into the MTEF which means that districts are planning and allocating resources to implementation. The country also involves communities in the planning and service delivery, with supportive communication



 $^{^{\}rm 1}\,{\rm MNCH}$ metrics, recommended actions and response tracked through WHO MCA