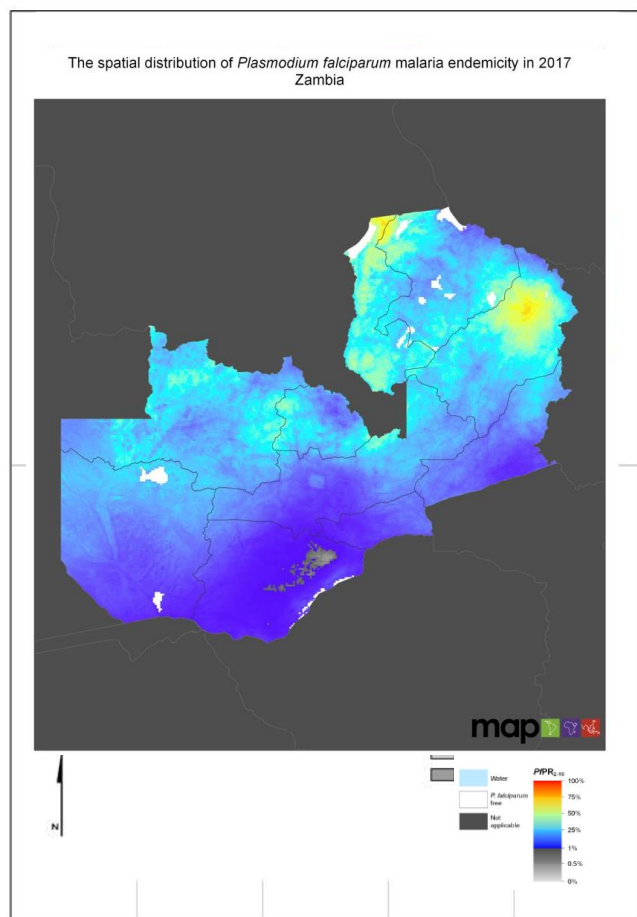


### Scorecard for Accountability and Action



Malaria is endemic in all parts of Zambia and transmission is seasonal. The annual reported number of malaria cases in 2018 was 5,195,723 with 1,209 deaths.

#### Metrics

Commodities Financed and Financial Control		
LLIN financing 2020 projection (% of need)	86	
Public sector RDT financing 2020 projection (% of need)	57	
Public sector ACT financing 2020 projection (% of need)	100	
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)	3.1	
Insecticide Resistance Monitoring, Implementation and Impact		
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		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM (2017)		
Operational LLIN/IRS coverage (% of at risk population)	100	
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 and NTDs		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)	36	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2018)	78	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)	79	
% deliveries assisted by skilled birth attendant	▲ 80	
Postnatal care (within 48 hrs)	▲ 70	
Exclusive breastfeeding (% children < 6 months)	70	
Vitamin A Coverage 2018 (2 doses)	99	
DPT3 coverage 2018 (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**

### **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. 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, Child and Adolescent health including 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, as well as chemoprevention for pregnant women (intermittent preventive treatment in pregnancy). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Zambia, it will be of vital importance to ensure that the universal coverage campaign for long-lasting insecticidal nets (LLINs) scheduled for 2020 goes ahead, whilst taking into account physical distancing, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. Without the LLIN campaign, planned indoor residual spraying (IRS) and sustained malaria case management, there could be an increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 42% increase in malaria cases, and a 124% increase in malaria deaths in Zambia. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

### **Global Fund Update**

The Global Fund has announced that Zambia will receive US\$315.2 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2021-2023. The Global Fund has determined the total allocation amount based on Zambia's disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Zambia this is calculated at US\$65.1 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Zambia is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to accelerate progress.

### **Progress**

Zambia has secured most of the required financing to fund the ACTs, LLINs and IRS required for 2020, including with significant domestic resource commitments. The country has also distributed sufficient LLINs and carried out sufficient IRS to achieve universal operational coverage of the targeted at risk population. 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 scaled up the implementation of iCCM and achieved 100% operational coverage of LLINs. Zambia has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control and Elimination Scorecard and with the recent launch

of the multisectoral high level End Malaria Council and Malaria fund. Zambia has launched the Malaria Ends with Me campaign.

## Impact

The annual reported number of malaria cases in 2018 was 5,195,723 with 1,209 deaths.

## Key Challenges

- The country has documented mosquito resistance to four insecticide classes.
- There is a need to strengthen cross border collaboration with neighbouring countries.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.

## Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure the GF malaria funding application is submitted by Q2 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2020		Deliverable not yet due
Impact	Investigate and address the reasons for the increase in estimated malaria deaths between 2015 and 2018	Q4 2020		Deliverable not yet due

## New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
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 2020
Impact	Work to address the increase in malaria cases observed in Q1 2020	Q2 2020

## RMNCAH and NTDs

### Progress

Zambia has achieved high coverage in the tracer RMNCAH interventions of exclusive breastfeeding, vitamin A and DPT3. The country has also increased coverage of ARTs in children. 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 very good for Lymphatic Filariasis (93%) and below WHO targets for Soil Transmitted Helminths (51%), trachoma (22%), Schistosomiasis (17%). Overall, the NTD preventive chemotherapy coverage index for Zambia in 2018 is 36, which is a decrease compared with the index value of 2017 (56).

### Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Work to increase the preventive chemotherapy for soil transmitted helminths, trachoma and for schistosomiasis along with lymphatic filariasis to reach WHO targets	Q2 2020		In 2018, Zambia managed to organize MDAs for Schistosomiasis in only 12 districts out of 103 (12%) due to a lack of resources. The coverage in the targeted districts ranged from 75 to 85%. The country is working hard to improve the coverage of all the targeted diseases and is actively raising resources

### New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
RMNCAH <sup>1</sup> : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

### Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

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