Zimbabwe ALMA Quarterly Report Quarter One, 2023



Scorecard for Accountability and Action

Metrics



Commodities Financed IRS financing 2023 (% of at-risk population) 100 Public sector RDT financing 2023 projection (% of need) 100 Public sector ACT financing 2023 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 End Malaria Council and Fund Launched 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 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 (%) 94 On track to reduce case incidence by ≥40% by 2021 (vs 2015) On track to reduce case mortality by ≥40% by 2021 (vs 2015) Tracer Indicators for Maternal and Child Health, NTDs and Covid 19 Scale of Implementation of iCCM Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2021) Estimated % of children (0-14 years old) living with HIV 73 who have access to antiretroviral therapy (2021) Vitamin A Coverage 2021 (2 doses) DPT3 coverage 2021 (vaccination among 0-11 month 86 olds)

Malaria transmission is seasonal in Zimbabwe with about 60% of the population at risk. The annual reported number of malaria cases in 2021 was 133,137 and 131 deaths.

Key



Target achieved or on track Progress but more effort required Not on track No data Not applicable



Malaria

Global Fund Allocation

The Global Fund announced that Zimbabwe will receive US\$504.7 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2024-2026. The Global Fund has determined the total allocation amount based on Zimbabwe'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 Zimbabwe this is calculated at US\$ 48 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Zimbabwe 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. The Global Fund resources are especially important in the current resource constrained environment. The ongoing economic crisis, increased costs of doing business, and the need to introduce newer more expensive commodities to address insecticide and drug resistance mean that countries may experience shortfalls in sustaining their life-saving malaria essential services.

Progress

The country continues to work on strengthening and maintaining health services following the devastating impact of the COVID-19 pandemic. In this regard, Zimbabwe secured the resources required for ACTs, RDTs, LLINs and IRS in 2023 and has achieved high coverage of vector control. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO, and has finalised the insecticide resistance monitoring and management plan.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Zimbabwe has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Scorecard, but this is not yet shared on the ALMA Scorecard Hub. Zimbabwe is exploring whether to establish an End Malaria Council.

Impact

The annual reported number of malaria cases in 2021 was 133,137 and 131 deaths.

Key Challenges

• There is a need to strengthen cross border collaboration with neighbouring countries.

RMNCAH and NTDs

Progress

Zimbabwe has 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 Zimbabwe is shown using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, schistosomiasis, soil transmitted helminths and trachoma. In 2021, preventive chemotherapy coverage was 15% for trachoma and zero for schistosomiasis, soil-transmitted helminths and lymphatic filariasis. Overall, the NTD preventive chemotherapy coverage index for Zimbabwe in 2021 is 0 which represents a decrease compared with the 2020 index value (2).

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Address the falling coverage of vitamin A	Q4 2022		The country increased vitamin A coverage in the second round of 2022 to 50% but coverage of the two doses remains low
NTDs	Work to implement preventive chemotherapy for schistosomiasis, soil-transmitted helminths and lymphatic filariasis and reach WHO targets	Q4 2023		Deliverable not yet due

Previous Key Recommended Actions

Key

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Action achieved
Some progress
No progress
Deliverable not yet due