Botswana ALMA Quarterly Report Quarter Four, 2023



Scorecard for Accountability and Action



Financing		
IRS financing (2024-2026) (% of at-risk population)		10
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		10
% of National Malaria Strategic Plan Financed (2024- 2026)		
Policy		
Signed, ratified and deposited the AMA instrument at the AUC		
Malaria activities targeting refugees in Malaria Strategic Plan	Γ	
Malaria activities targeting IDPs in Malaria Strategic Plan		
Zero Malaria Starts With Me Launched		
End Malaria Council and Fund Launched		
Resistance Monitoring, Implementation and Impact		
Drug efficacy studies conducted since 2019 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		
RDTs in stock (>6 months stock)		
ACTs in stock (>6 months stock)		
LLIN/IRS campaign on track		
% of ITNs/IRS delivered in 2023 that include next generation insecticides		10
On track to reduce case incidence by ≥55% by 2022 (vs 2015)		
On track to reduce case mortality by ≥55% by 2022 (vs 2015)		
Tracer Indicators for Maternal and Child Health, NTDs an	d C	ovid 19
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2022)		1
% of Neglected Tropical Disease MDAs Achieving WHO Targets		6
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2022)		5
Vitamin A Coverage 2022 (2 doses)		
DPT3 coverage 2022 (vaccination among 0-11 month		8

The annual reported number of confirmed malaria cases in 2022 was 446 with 6 deaths.

Key



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

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Malaria

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. We must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, increasing biological threats, climate change, and humanitarian crises. These threats represent the most serious emergency facing malaria in 20 years and will lead to malaria upsurges and epidemics if not addressed. AU Member States face a \$1.5 billion gap just to sustain existing, yet inadequate, levels of malaria-related services between now and 2026. To get back on track and eliminate malaria, we will need to mobilise another \$5.2 billion dollars annually to fully finance our national malaria plans. Climate change presents a significant threat to the progress that we have made. Africa is disproportionately exposed to the risks of climate change and by the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Climate disasters displace millions and destroy roads and health facilities, reducing access to health services. There is urgency to decarbonise and reduce our carbon footprint. We must implement integrated and multisectoral solutions, and adapt our health systems to the threats of both climate change and pandemics. We must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the Anopheles stephensi mosquito which spreads malaria in both urban and rural areas. The good news is that the malaria toolkit continues to expand. WHO has approved the use of dual-insecticide mosquito nets that are 43% more effective than traditional mosquito nets and will address the impact of insecticide-resistance. New medicines for treating malaria and two malaria vaccines for children have also been approved with an increasing number of countries deploying these new tools. The scaling up of these interventions will help us achieve our goal of eliminating malaria. This will require integrated approaches with malaria as a pathfinder for pandemic preparedness, climate change and health, Primary Health Care and Universal Health Coverage. We must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD councils and Funds, which have raised over US\$50 million

Progress

Botswana has secured sufficient resources to fund the required ACTs, RDTs and IRS required in 2024-2026. The current IRS campaign is on track. WHO has identified Botswana as being a country with the potential to eliminate local transmission of malaria by 2025. The country has finalised the insecticide resistance management and monitoring plan.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Botswana has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Elimination Scorecard and this is shared publicly in-country, but not yet posted to the ALMA Scorecard Knowledge Hub. Discussions are ongoing for the creation of the Botswana End Malaria and NTD council.

Impact

The annual reported number of malaria cases in 2022 was 446 with 6 deaths.

Key Challenges

- Achieving and maintaining IRS coverage above 80%.
- Need to further strengthen cross border collaboration with neighbouring countries.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Q1 2023		No progress reported

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and mortality since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence and deaths	Q4 2024

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

Botswana has enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Adolescent and Child Health Scorecard.

Previous Key Recommended Actions

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 2024		Botswana uses routine Health Facility level distribution of vitamin A with regular outreach through Child Health Days (alongside vaccinations). The country achieved high coverage in the second planned campaign in 2022 and plans to build on this success moving forward

Neglected Tropical Diseases

Progress in addressing Neglected Tropical Diseases (NTDs) in Botswana is illustrated using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage is good for schistosomiasis (89%), 100% for trachoma (disease under surveillance only) and was not implemented for soil-transmitted helminthiasis (0%). The overall NTD preventive chemotherapy coverage index in 2022 is 10 shows an increase compared to the 2021 index value (3). The country reached the WHO MDA coverage target for Schistosomiasis. The country has signed the Kigali declaration. The Gambia has significantly enhanced the tracking and accountability mechanisms for NTDs with the development of a NTD Scorecard tool.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Optimise quality of care	Work to implement preventive chemotherapy for Soil Transmitted Helminthiasis and reach WHO targets.	Q4 2024

Key	
	Action achieved
	Some progress
	No progress
	Deliverable not yet due