

Scorecard for Accountability and Action



Metrics

Financing		
IRS financing (2024-2026) (% of at-risk population)		100
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		100
% 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		
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		2
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 vector control in the last year with next generation materials		100
On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)		
On track to reduce malaria mortality by at least 75% by 2025 (vs 2015)		
Tracer Indicators for Maternal and Child Health and NTDS		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2022)		10
% of Neglected Tropical Disease MDAs Achieving WHO Targets		67
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2023)		66
Vitamin A Coverage 2022 (2 doses)		0
DPT3 coverage 2023 (vaccination among 0-11 month olds)		95

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

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\$60 million

Progress

Botswana has secured sufficient resources to fund the required ACTs, RDTs and IRS required in 2024-2026. 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 Actions

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

Botswana has responded positively to the recommended action addressing the lack of data on drug efficacy testing and is continuing to monitor progress against this action.

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. The country has achieved high coverage of DPT3.

Previous Key Recommended Actions

Botswana has responded positively to the recommended action addressing the low coverage of Vitamin A and is continuing to monitor progress against this action.

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. Botswana has significantly enhanced the tracking and accountability mechanisms for NTDs with the development of a NTD Scorecard tool.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Work to implement preventive chemotherapy for Soil Transmitted Helminthiasis and reach WHO targets.	Q4 2024		In May 2024, the country organized the Mass Drug Administration (MDA) targeting schistosomiasis and is now working on the MDA report. For Soil Transmitted Helminthiasis, the country is conducting case management at health facility level. Other NTD routine activities including trachoma surveillance are being conducted as planned.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due