



World Health
Organization

Eswatini

NEWSLETTER

March 2025, issue 1



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ESWATINI NATIONAL HEALTH SECTOR STRATEGIC PLAN 2024–2028 LAUNCHED



Minister of Health Hon. Mduduzi Matsebula and the WHO Representative Dr. Susan Tembo displaying the NHSSP during the launch, together with members of the Parliamentary Health Portfolio Committee MP Sicelo Jele and Princess Ntfombiyenkhozi

The Ministry of Health of the Kingdom of Eswatini has officially launched the National Health Sector Strategic Plan (NHSSP) 2024–2028 and the National Health Accounts Report, marking a major milestone in the country's continued efforts toward achieving Universal Health Coverage (UHC) and the 2030 Sustainable Development Goals (SDGs).

The NHSSP outlines the strategic direction for Eswatini's health sector, building on the lessons from the 2018–2023 plan, whose end-term evaluation was conducted in 2023 with support from the World Health Organization (WHO). Developed through a highly consultative process involving NGOs, government agencies, partners, and community stakeholders, the new NHSSP emphasises stronger collaboration, resource-

mobilization, and effective implementation.

The strategic plan is aligned with national and international priorities, including the National Development Plan (NDP) 2023–2028, the WHO Country Cooperation Strategy (CCS), the United Nations Sustainable Development Cooperation Framework (UNSDCF) and the Sustainable Development Goals (SDGs).

Themed “Accelerating Progress Towards the Attainment of Universal Health Coverage and Other Health-Related SDGs,” the NHSSP aims to enhance access to health services, equity, and quality while improving the sector governance and accountability. Strategic Objectives of the NHSSP 2024–2028 are to strengthen health system development for UHC and SDG targets, maximize the health system outputs to-

improve population health, expand coverage of essential health services across all conditions, strengthen inter-sectoral collaboration to address non-biological health determinants and enhance health security and health intelligence capacity.

In addition to the strategic focus areas, the plan identifies priority actions including improved supply chain management for medicines and commodities, strengthened leadership and governance in the health sector, review of health workforce deployment strategies and digital transformation of health information systems.

Speaking at the launch, WHO Representative Dr Susan Tembo commended the Government of Eswatini for its continued investment in health, a critical pillar in sustainable development.

“The move towards UHC demands a robust and well-coordinated health system that unites all stakeholders in pursuit of a shared vision for improved health outcomes. The NHSSP is a blueprint that will drive strategic health sector interventions in the next five years,” the WHO Representative said.

The launch also included the release of the National Health Accounts Report, which provides critical data for financial planning and resource allocation. Both documents will guide budgeting, partner coordination, monitoring and evaluation, and advocacy efforts in the health sector.

Dr Tembo added that “As external funding becomes increasingly limited, domestic resource mobilization including private sector engagement will be vital in sustaining health service delivery.”



she further urged the Government of Eswatini to prioritize health financing in its development agenda.

Meanwhile, the Ministry of Health reaffirmed its commitment to monitoring the implementation of the NHSSP through regular stakeholder engagement and review meetings to ensure progress, address duplication, and improve coordination.

Minister of Health Honorable Mduduzi Matsebula stated highlighted that the strategy provides clear direction for all stakeholders working to ensure access to quality health services in Eswatini.

“It reflects our collective commitment to achieving a healthier, more equitable future for all citizens,” he said, further mentioning that with the improvement in health performance systems, the Ministry aspires to reduce disease burden, prevent and minimise the burden of health risk factors, and increase life expectancy with quality of lives for all citizens.

WHO and other development partners provided technical and financial support in the development of the NHSSP. WHO pledged continued support to assist in implementing, monitoring, and evaluating the strategic objectives.

ESWATINI LAUNCHES NTD MASTER PLAN AND LEPROSY LIMINATION CAMPAIGN



WHO Health Systems Strengthening Officer Dr Mekdim Ayana display the National NTDs master plan during its launch together with Zulisile Zulu from the National Malaria Programme and Senior Medical Officer- Public Health Dr Edmund Shabangu

The Kingdom of Eswatini has taken a bold and historic step in the fight against Neglected Tropical Diseases (NTDs) with the official launch of the National NTDs Master Plan and a 6-month Leprosy Elimination Campaign. The initiatives mark a significant milestone in Eswatini's ongoing commitment to improving public health and achieving disease elimination in alignment with global targets.

NTDs are a group of infectious diseases that disproportionately affect vulnerable populations in tropical and sub-tropical regions. In Eswatini, five NTDs—schistosomiasis (bilharzia), soil-transmitted

helminthiasis, rabies, snake bites, and leprosy—are endemic and pose a serious public health concern. Meanwhile, healthcare and sanitation is limited. The newly launched NTDs Master Plan is a strategic framework aligned with the World Health Organization's (WHO) NTD Roadmap 2021–2030. It is designed to enhance disease surveillance, increase access to essential medicines, and strengthen health systems to reduce the burden of NTDs across the country.

“The launch of this plan is a powerful step toward equity in health,” said WHO representative Dr Susan Tembo at the launch. “It demonstrates Eswatini's

commitment to leaving no one behind in the fight against diseases that have long been overlooked,” she said.

As part of the NTD response, the country also launched a national Leprosy Elimination Campaign, further cementing Eswatini’s role as a leader in the region. Over the past decade, Eswatini has reported only one new case of leprosy and zero cases in children over the last 25 years. These achievements position the country as a strong candidate for WHO’s leprosy elimination certification.

According to WHO guidelines, leprosy is considered eliminated when the number of new cases falls below 1 per 10,000 people. Eswatini’s exceptional progress places it among only twelve low-burden countries in the WHO African Region and one of the few in the continent poised to receive this prestigious recognition. The two initiatives come after a WHO-supported consultancy in August 2024, which helped guide the development of the NTDs Master Plan and communication efforts around leprosy. The Ministry of Health has since moved swiftly to implement these recommendations,

reflecting what officials have proudly referred to as operating in “Nkwe mode”—a symbol of strength and agility. “Our success is the result of strong collaboration among health workers, local communities, the Ministry of Health, and our international partners,” said Senior Medical Officer-public health Dr Edmund during the launch of the plan, further emphasising that “Together, we are building a healthier, more equitable Eswatini.”

In support of these efforts, WHO reaffirmed its commitment to work hand-in-hand with the Government of Eswatini and all stakeholders to ensure the success of these initiatives.

“This is more than a public health achievement; it is a celebration of what is possible through leadership, partnership, and perseverance,” the WHO Representative added.

The launch of the NTD Master Plan and the Leprosy Elimination Campaign is a transformative moment in Eswatini’s public health journey—bringing the country closer to disease elimination and a future where neglected diseases are neglected no more.



Representatives from different stakeholders displaying the NTDs master plan during its launch in Mbabane

WHO CONDUCTS ILLICIT TOBACCO TRADE ASSESSMENT IN ESWATINI

From 17 to 21 March 2025, the Secretariat of the WHO Framework Convention on Tobacco Control (WHO FCTC), in close collaboration with the Government of the Kingdom of Eswatini and with strategic support from the World Health Organization (WHO) Regional Office for Africa and the WHO Eswatini Country Office, conducted a comprehensive in-country needs assessment to evaluate Eswatini's implementation of the Protocol to Eliminate Illicit Trade in Tobacco Products.

The mission, which included extensive consultations with key government institutions including the Parliamentary Health Portfolio Committee and Finance Portfolio Committee, the Royal Eswatini Police Service, the Umbutfo Eswatini Defense Force, United Nations Country Team and civil society actors sought to identify technical and institutional gaps, assess capacity needs, and support the development of a roadmap to strengthen Eswatini's national response to illicit tobacco trade.

Other recommendations include developing a national implementation strategy with multisectoral participation, promoting awareness and capacity-building among law enforcement, judiciary, and civil society and safeguarding public policy from tobacco industry interference, in line with Article 5.3 of the WHO FCTC. Another important area is raising awareness about the Tobacco Products Control Act, 2013 to ensure that all its provisions, particularly those regarding health warnings, are fully enforced. These preliminary recommendations were presented to the Government of Eswatini and will inform the development of a full technical report in the coming-



The WHO consultants with the local tobacco team posing with the Parliamentary Finance Portfolio Committee during the consultation meeting



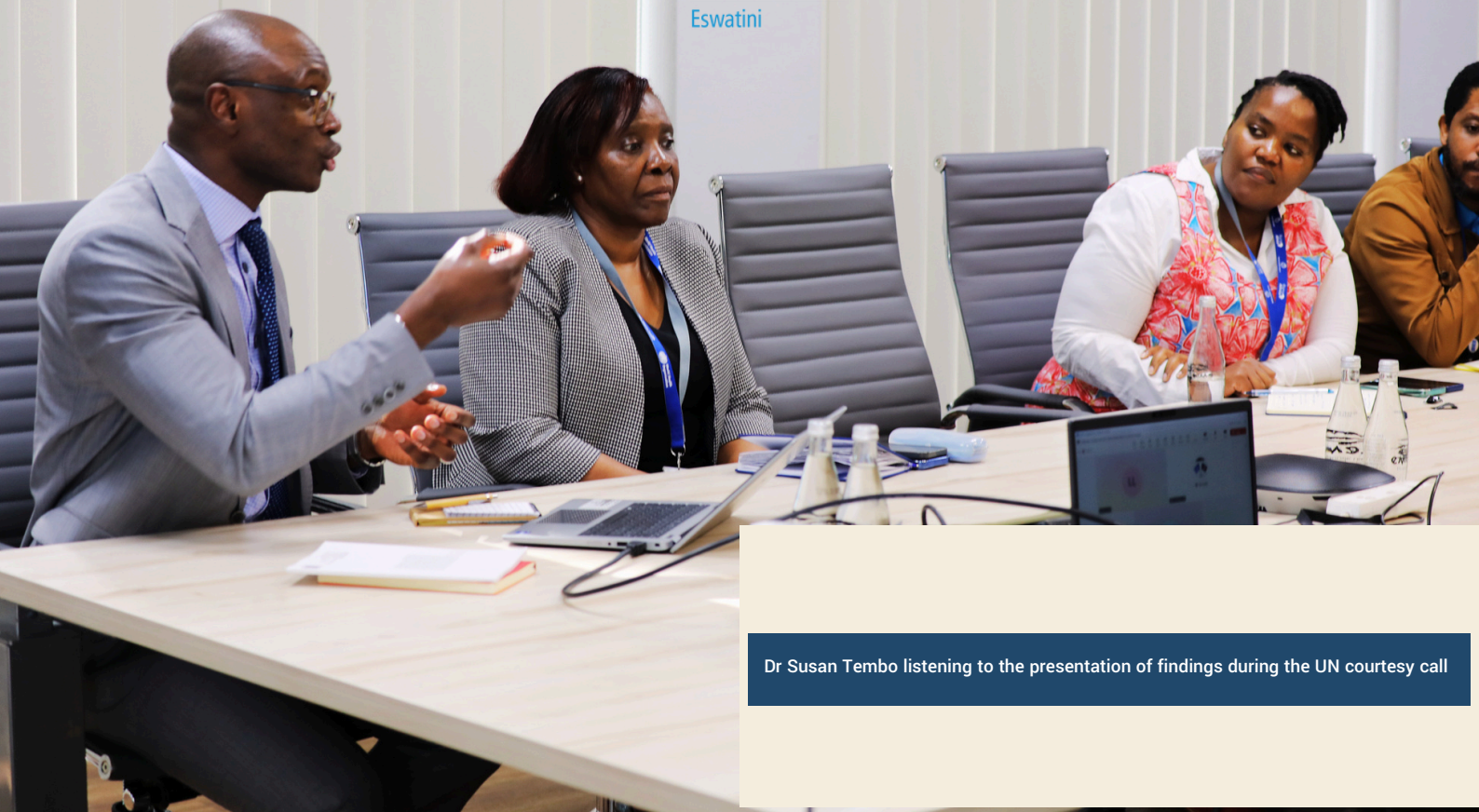
Head of the WHO FCTC Secretariat Dr. Adriana Blanco Marquizo making a presentation during the wider stakeholder consultation meeting



President of COP9 for 2022-2023, Ms. Zandile Dhlamini in attendance during the wider stakeholder meeting



The WHO FCTC consultants following proceedings



Dr Susan Tembo listening to the presentation of findings during the UN courtesy call



UN Eswatini Resident Coordinator Mr. George Wachira (centre) listening to presentations during the team's courtesy call with the UN



Members of the Ministry of Health Senior Management Committee being briefed about findings of the assessment

weeks. These recommendations are intended to guide strategic action and mobilize technical and financial support from international partners.

“Eswatini’s political commitment and openness to cross-sectoral engagement offer a solid foundation for future action. This mission represents a crucial step in aligning national efforts with global standards and ensuring sustained progress in eliminating illicit trade in tobacco products,” said Dr. Adriana Blanco Marquizo, Head of the WHO FCTC Secretariat.

Dr. Marquizo further encouraged ongoing collaboration with regional and international partners to support the country’s implementation roadmap and build lasting institutional capacity. “Enhanced international cooperation will be key to ensuring the integrity of the supply chain and protecting global health,” he said.

FOLLOWING WHO GUIDELINES, ESWATINI ACHIEVES 46% REDUCTION OF NEW TB CASES

In 2011, the Government of Eswatini declared TB a national emergency, paving way for an accelerated emergency response that included creating awareness about the disease, prevention, quick diagnosis, effective treatment, patient support and follow-up. The World Health Organization (WHO) intensely trained health personnel to better manage TB patients.

The response roped in an array of partners, including the KNCV Tuberculosis Foundation, the Global Fund, Médecins Sans Frontières and the Columbia University (USA) Mailman School of Public Health, with guidance from WHO. The country received funding from the Global Fund to fund the emergency response, running alongside the Government's general strategic plan. The emergency plan had intervention points that needed to be hammered hard for things to change.

Interventions included robust awareness, introduction of rapid diagnosis for drug-susceptible and drug-resistant TB, which reduced the waiting period for results. The introduction of new diagnostic tests also allowed for drug-resistant TB tests to be done in country instead of being sent to South Africa, which had been the previous practice.

Diagnostic sites increased, from 13 to 48, as did the TB management units, to 180 of the 204 clinics in the country. There was also involvement of the private sector where TB clinics and laboratories were set up in the major private clinics, which then received drugs and technical support from Government, and were included in quarterly review meetings.



WHO Eswatini Representative Dr Susan Tembo delivering remarks during the World TB Day commemoration in the Manzini region



A TB mobile truck used for outreach TB diagnosis services

Before the TB management units were set up, treatment drop-out rate had been high, at 15%, because drugs were available in fewer sites, which compelled patients to travel long distances to the nearest location.

In 2019, WHO released updated guidelines for MDR/RR-TB treatment which recommended oral 9-month shorter MDR-TB regimen, removing the use of injectables. In May 2022, WHO further released an updated recommendation for a shorter 6-month treatment regimen. This greatly improved adherence to treatment.

As a result, the country started seeing people coming in early to start treatment, unlike before,



Participants at the World TB Day commemoration in the Manzini region



One of WHO-supported stakeholder meetings in Manzini to fight TB

when people would deteriorate to a level where it was not easy to treat them.

Eswatini has shown significant improvement, with a remarkable 46% reduction in TB incidence since 2015, bringing the rate down to 350 cases per 100,000 population in 2023. Treatment success rate for MDR/RR-TB has increased from 74% in 2018 to 84% by the end of 2023. Mortality rates have declined significantly, from 15% in 2018 to 8% in 2023. To date, 100% of TB patients know their HIV status and 100% of those found to be positive are on HIV treatment.

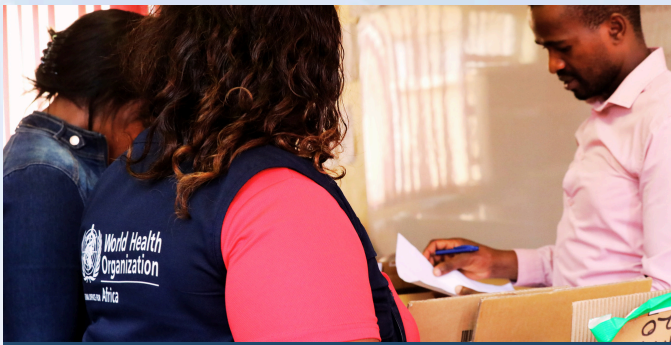
The WHO Representative Dr Susan Tembo has noted that despite all of these successes, TB continues to be a significant global health challenge and remains the number one killer among infectious diseases globally. In 2023, more than 1.5 million people worldwide died from TB. During the same year, a total of 949 Eswatini lost their lives to TB, meaning one person dies from TB every 9 hours.

In addition, nearly half of all TB cases still go undiagnosed, particularly in adults and children. To address this burden, WHO call on all stakeholders to take urgent action to:

1. Prevent any disruption of TB services with a sense of urgency, initiating a response commensurate to the disruption.
2. Ensure domestic resources to sustain equitable and essential TB care.
3. Safeguard the key activities, essential TB drugs, diagnostics, care and social protection coverage for people with TB, while strengthening collaboration with other stakeholders within and beyond the health sector.
4. Establish or activate national partner platforms including public and private sectors, civil society, NGOs, professional societies, donors, to maintain momentum towards ending TB and tackle financial and operational uncertainties.
5. Enhance monitoring by increasing reporting frequency to better assess impact and establish early warning systems.

'Yes! We Can End TB: Commit, Invest, Deliver

ESWATINI CONDUCTS GLOBAL SCHOOL HEALTH SURVEYS TO STRENGTHEN ADOLESCENT HEALTH DATA AND POLICY



The local team being assisted by WHO to collect data from School's Principals in the Lubombo region

The World Health Organization (WHO) Regional Office for Africa and the UNESCO Regional Office, in collaboration with the Eswatini Ministry of Health and Ministry of Education and Training, have successfully conducted the Global School-based Student Health Survey (GSHS) and the Global School Health Policies and Practices Survey (G-SHPPS). This initiative marks a renewed commitment to generating up-to-date, valid data on adolescent health behaviors and school health policies across Eswatini.

The GSHS and G-SHPPS are internationally recognized tools that provide critical data to inform and strengthen national strategies on adolescent health—particularly in the prevention and control of non-communicable diseases (NCDs). These surveys assess a wide range of behavioral risk factors and protective practices, as well as school-level policies and environments that shape student well-being.

The last Global School Health surveys in the country were conducted in 2013. With growing concerns about the health of young people, and the need for policy-relevant data, this new round of surveys was implemented using global methodologies and ethical standards. The WHO Country Office played a pivotal role in the successful implementation of the survey by leading the development of the protocol, as well as localizing and piloting the questionnaires to suit the national context. The Eswatini Health and Human Research Review Board granted ethical approval, and

data collection was conducted in March 2025, before the end of the school's first term academic," stated Ms. Nokuthula Mahlalela, Principal Health Research Officer from the Ministry of Health.

Further, she mentioned that "Adolescents are a key demographic for investment in health and development. Through this initiative, Eswatini is building the evidence base needed to craft effective, targeted interventions for a healthier future."

The data collection teams successfully visited all 39 targeted public and private primary and secondary schools across Eswatini as part of the GSHS, focusing on students aged 13 to 17 years. In addition to the student survey, 208 head teachers—representing 68% of the targeted 300—completed the online G-SHPP questionnaire. This was achieved through a centrally coordinated process that ensured high data quality, standardized procedures, and sustained high response rates across participating institutions. WCO officers were instrumental in administering the tools to ensure the quality, consistency, and integrity of the data collected, while maintaining full adherence to WHO standards and maintaining ethical standards.

WHO Representative Dr. Susan Tembo, emphasized the vital role of data in guiding effective public health strategies, stating that "Reliable data is the foundation of sound public policy." She further stated that Eswatini is demonstrating leadership by leveraging school-based health surveys as a powerful tool for generating actionable insights, fostering evidence-informed decision-making, and contributing meaningfully to both health and education sector planning.

The findings of the surveys will build on the STEPS survey conducted last year among the adult population to support both national and regional progress toward achieving the Sustainable Development Goals—particularly SDG 3 and 4. By providing updated and comprehensive data, the surveys will help inform evidence-based policies, track trends, and guide targeted interventions that address key health and education challenges.

WHO WORKS WITH MINISTRY OF HEALTH TO STRENGTHEN HEALTH PROFESSIONAL COUNCILS



Representatives from Health professionals mother bodies during one of the consultation meetings in Ezulwini

The Ministry of Health, in collaboration with the World Health Organization (WHO), is taking a major step toward strengthening the regulation and professional development of healthcare providers in Eswatini. A WHO AFRO technical mission was in the country in February 2025 to support the development and modernization of Continuous Professional Development (CPD) programs for health professionals across the Kingdom.

Among other things, the team drew up a comprehensive roadmap for regulatory reform to guide the sustainable implementation, monitoring, and evaluation of CPD across all health professional councils in Eswatini. CPD is the process through which health professionals update, develop, and enhance the knowledge, skills, and attitudes necessary for their professional roles.

This initiative aims to enhance the capacity of the Eswatini Nursing Council and the Eswatini Medical and Dental Council through the review and digitisation of CPD frameworks, transition from offline to online systems, and development of essential regulatory tools and standards. This will ensure health professionals remain competent, confident, and aligned with global best practices, resulting in enhanced patient outcomes and satisfaction. "This initiative reflects the Ministry's ongoing commitment to strengthening health governance, improving patient outcomes, and building a resilient and responsive health workforce," said the Ministry of Health Under Secretary-Admin Ms. Ncamsile Mtshali.



WHO leading discussions among clinicians

The scoping mission involved, among other things, reviewing of the Eswatini Nursing Council's CPD Program and development of a new national CPD framework, supported the transitioning to online systems for CPD point tracking, license renewal, and professional registration as well as introducing of a standardized CPD framework for medical officers, dentists, laboratory technicians, and other allied health professionals.

In her remarks, the WHO Representative Dr Susan Tembo stated that "Continuous Professional Development is central to maintaining quality healthcare services."

Meanwhile, Mntshali emphasised that "This partnership with WHO will help us modernize our systems and support the professional growth of all licensed health practitioners in the Kingdom."

The Eswatini Medical and Dental Council is introducing a Continuous Professional Development Program as a mandatory requirement for practice license renewal for registered members and new entrants. Meanwhile, the Eswatini Nursing Council is responsible for regulating nurses' and midwives' education, practice and professional conduct and utilizes the CPD Program for ensuring compliance and maintenance of competence and professional excellence. The CPD program was started in 2013 and is hosted in a local server. Nurses are required to keep a CPD book document and submit paper based CPD documents indicating points accrued yearly for practice license renewal. Further, with support from development partners, a draft CPD Framework for laboratory technicians was developed and a multidisciplinary committee was elected in 2019 to provide oversight in the introduction of mandatory CPD.

AVOHC SURGE TEAM CONDUCT MASS SCREENING AMONG MIGRANTS AT MALINDZA REFUGEE CAMP TO PREVENT PUBLIC HEALTH RISKS



Queueing for services during the health screening at Malindza camp

In January 2025, the Ministry of Health deployed 52 members of the Africa Volunteer Health Corps (AVOHC) SURGE team at Malindza Refugee Camp to conduct intensive health screening at Eswatini's eastern border, targeting migrants and returnees, primarily from Mozambique. The initiative, supported by the Ministry of Health and the World Health Organization (WHO) was aimed at detecting and preventing the spread of public health threats, including COVID-19, mpox, cholera and malaria. The team also provided screening for non-communicable diseases (NCDs), immunization and antenatal care.

The majority of individuals screened were women and children, many of whom were pregnant or in need of immunization services. The main challenge that the SURGE Team was facing was challenges interpreting foreign antenatal and immunization cards, due to differences in format and language.

"We realized that to manage pregnancies and child health effectively, it is important to have locally issued ANC and immunization cards," said the team lead Sister

Busisiwe Mamba. "This will enable our health teams to monitor care, referrals, and follow-ups correctly," she said. Among other things, the team was tasked to assess immunization status among migrant children, screen for malaria and other endemic diseases, identify NCDs like high blood pressure and diabetes and also provide referrals to Good Shepherd Hospital for further care.

Mozambique remains a malaria-endemic country, and many migrants entered Eswatini through informal border crossings, increasing their exposure to malaria and other health risks. Other emerging health concerns included the unrest in Mozambique which left many families vulnerable, often arriving in Eswatini with few possessions and limited access to care. As a result, the SURGE team observed that many of the migrants had elevated blood pressure, particularly among men, many of whom were diagnosed for the first-time during screening. Diabetes and other chronic conditions, requiring urgent referrals for stabilization and long-

term care were also observed. The team also found high rates of malnutrition among children, especially those under five years as well as low uptake of family planning services, with many women expressing uncertainty but continuing to have children in short intervals.

Medication was provided on-site to stabilize patients where possible, but long-term management requires follow-up at health facilities, hence they were referred to Good Shepherd Hospital.

Deployment of the AVoHC SURGE team is part of Eswatini's broader efforts to strengthen cross-border disease surveillance and mitigate the impact of humanitarian crises on public health. The collaboration with interpreters, health professionals, and local clinics is key to reaching underserved communities and ensuring inclusive healthcare.



Some of the asylum seekers getting health information at the WHO stand



UNHCR, Emergency Preparedness and Response and Ms. Bawinile Mdziniso from WHO



Malaria testing taking place at the site



Promotional and educational material being provided at the WHO stand



Some of the members of the AVoHC SURGE team at Malindza

"This intervention is a demonstration of Eswatini's readiness to protect public health and provide care to vulnerable populations," said Mamba during an interview at the site.

WHO and partners will continue supporting the government's efforts to integrate migrants and returnees into the national health system, promote health equity, and prevent disease outbreaks.

WHO TRAINS OVER 50 SERVICES PROVIDERS AND BENEFICIARIES AT MALINDZA REFUGEE CAMP ABOUT SEXUAL EXPLOITATION AND ABUSE



WHO ESWATINI ON X



PROUD TO BE WHO



ACKNOWLEDGEMENTS

