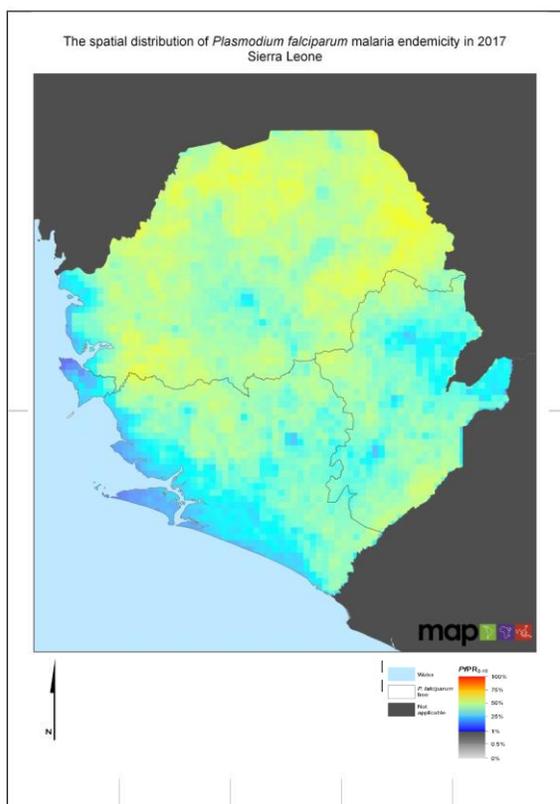


Scorecard for Accountability and Action



The entire population of Sierra Leone is at high risk of malaria. The annual reported number of malaria cases in 2020 was 1,223,397 with 1,648 deaths.

Metrics

Commodities Financed		
LLIN financing 2021 projection (% of need)	100	
Public sector RDT financing 2021 projection (% of need)	100	
Public sector ACT financing 2021 projection (% of need)	100	

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		
RDTs in stock (>6 months stock)		
ACTs in stock (>6 months stock)		
LLIN/IRS campaign on track		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM		
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, NTDs and Covid 19		
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2020)	59	
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2020)	47	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2020)	10	
% deliveries assisted by skilled birth attendant	69	
Postnatal care (within 48 hrs)	73	
Exclusive breastfeeding (% children < 6 months)	31	
Vitamin A Coverage 2020 (2 doses)	32	
DPT3 coverage 2020 (vaccination among 0-11 month olds)	91	
% Population Fully Vaccinated Against COVID-19	5	

Key

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

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, Adolescent and Child health, Neglected Tropical Diseases and malaria.

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 29.3% increase in malaria cases, and a 99.6% increase in malaria deaths in Sierra Leone. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

WHO estimates that there were an additional 47,000 malaria deaths globally in 2020 due to service disruptions during the COVID-19 pandemic, leading to an estimated 7.5% increase in deaths.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2022 as the COVID-19 pandemic continues to impact our continent. This may include the implementation of any necessary catch-up activities and ensuring timely planning to account for potential delays in procurement and delivery. Any intervention must ensure the safety of communities and health workers given the ease of transmission of COVID-19.

The country has been affected by the continent-wide restriction of access to COVID-19 vaccines and had only been able to cover 5% of their population by the end of 2021.

Malaria

Progress

Sierra Leone secured sufficient resources to achieve universal coverage of LLINs, RDTs and ACTs in 2021 and has distributed sufficient LLINs to achieve 100% operational coverage of the targeted at risk population. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has recently finalised the insecticide resistance monitoring and management plan. Sierra Leone has launched the Zero Malaria Starts with Me campaign.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Sierra Leone has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard, although the scorecard has not yet been posted to the ALMA Scorecard Hub.

Impact

The annual reported number of malaria cases in 2020 was 1,223,397 with 1,648 deaths.

Key Challenge

- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and Neglected Tropical Diseases.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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 2022		Sierra Leone has worked to sustain case management during the COVID-19 pandemic but the pandemic has impacted accessibility and utilization of malaria services. This is evidenced by a drop in key coverage indicators. The disruptive effects of COVID-19 pandemic on malaria services have included decreased health facility attendance due to fear of contracting COVID-19, reduced fever cases tested with RDTs and malaria cases treated related to severe supply chain blocks caused by significant decreases in air cargo capacity, sea freight, and transport logistics. This led to stock outs of antimalarial commodities and delays in the distribution of malaria commodities. In response, the country is intensifying community-led sensitization on ANC attendance to promote ITNs and IPTp; Sensitization of PHU staff to ensure compliance to the malaria treatment guidelines; adapted the WHO-UNICEF global interim guidance on continuity of community based essential health services in the context of COVID-19 and CHWs were oriented on the prevention and control of COVID-19. With regards to integrated community case management (iCCM), CHWs have been following the no-touch policy and treated simple malaria cases presumptively (without RDT test) in the absence of sufficient PPE supplies for CHWs. The CHW hub and partners trained CHWs in malaria case management including COVID-19 precautionary measures. Continuous sensitization of health workers on the precautionary measures of COVID-19 infection is ongoing, as well as constant monitoring of the stock situation including the demand, pipeline management procurement, delivery timelines, supporting in-country stock management and distribution capacity in order to ensure that sufficient quantities (including buffers) are available at any point in time. The IRS campaign has been completed on schedule with high coverage achieved

RMNCAH and NTDs

Progress

Sierra Leone has achieved high coverage of the tracer RMNCAH intervention of DPT3 and has recently increased coverage of ARTs in the total population and skilled birth attendants. The country enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Sierra Leone is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, and soil transmitted

helminths. In 2020, preventive chemotherapy coverage was 75% for onchocerciasis, 70% for lymphatic filariasis, 52% for schistosomiasis, and 44% for soil transmitted helminths. Overall, the NTD preventive chemotherapy coverage index for Sierra Leone in 2020 was 59, which represents a decrease compared with the 2019 index value (73).

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities	Q4 2022		The COVID-19 pandemic has caused a significant disruption in delivery of essential health services. The high burden of infection among health workers directly contributed to some of the disruptions, including temporary closure of health facilities, or selected services within facilities. Essential commodities and supplies were redistributed to prioritize the needs of COVID-19 Treatment Centres, with the result that existing shortfalls in supplies of free healthcare commodities were exacerbated and stock-outs worsened. Training of health workers on continuity of essential services in the context of COVID-19 has been conducted. Mother Support Groups from different districts have been trained on maternal, infant and young child feeding in the context of COVID-19. Health workers in Primary Health care facilities have been supervised and mentored on Integrated Case Management of Newborn and Childhood Illnesses (IMNCI) skills. Special Care Baby Units remained fully functional. 8,700 new national community health workers have been recruited. This has followed the revision of the national CHW Policy. Sierra Leone's CHW programme is a vehicle to deliver a package of RMNCAH+N interventions through home visits for promotional, preventive and basic curative services. The training curriculum includes COVID-19 prevention and control and topics on continuity of essential services during COVID-19. A national integrated IPV, Vitamin A and Albendazole campaign has been conducted in all districts, with 81% coverage for IPV, 75.3% for Vitamin A, and 80% for Albendazole for under five children. Routine vitamin A supplementation is being consolidated including by training and planning involving district medical officers, M&E officers and nutrition officers of all the 16 districts

¹ RMNCAH metrics, recommended actions and response tracked through WHO

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
NTDs	Recognising the negative impact of COVID-19 on the 2020 MDA coverage, ensure that NTD interventions including MDAs, vector control and Morbidity Management and Disability Prevention are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. This includes prioritizing key necessary catch up activities	Q4 2022		No progress reported

Sierra Leone has responded positively to the RMNCAH recommended action addressing low coverage of ARTs in children and continues to track progress as this action is implemented, with increases in coverage recently observed.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due