Malaria transmission occurs all year round in most parts of Uganda. The annual reported number of malaria cases in 2020 was 15,342,561 with 4,252 deaths.
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, Child and Adolescent health, Neglected Tropical Diseases and malaria.

For Uganda, we commend the Ministry of Health, in the decision to go ahead with the Indoor Residual Spraying, in accordance with the guidance and recommendations from WHO and the RBM Partnership to End Malaria. This decision, allied with sustained malaria case management through the health system will prevent a significant increase in malaria cases and deaths. 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 53.1% increase in malaria cases, and a 235.1% increase in malaria deaths in Uganda. 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 3% of their population by the end of 2021.

Malaria

Progress

Uganda has procured sufficient LLINs to achieve operational universal coverage of vector control in the targeted at risk population. The country has secured sufficient finances to fund the ACTs, RDTs required in 2021. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. Uganda has completed the insecticide resistance monitoring and management plan. Uganda has decreased the estimated malaria incidence and malaria mortality rate by more than 40% since 2010. The country is also showing leadership in malaria control through its participation in the High Burden High Impact approach.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Uganda has enhanced the tracking and accountability mechanisms with the development of the Malaria Control Scorecard, although the scorecard is not yet posted to the ALMA Scorecard Hub. Uganda has launched the Mass Action Against Malaria campaign and the End Malaria Fund.
Impact
The annual reported number of malaria cases in 2020 was 15,342,561 with 4,252 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 Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact</td>
<td>Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic</td>
<td>Q4 2022</td>
<td></td>
<td>Malaria services continue to be provided in adherence to the COVID-19 prevention protocols. In line with national policy, during the quarter testing of suspected cases and treating confirmed cases has been maintained above 95%. The IRS campaign was completed as planned</td>
</tr>
</tbody>
</table>

The country has responded positively to the recommended action on removal of tariffs on private sector RDTs to enhance affordability in the private sector.

New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact</td>
<td>Investigate and address the reasons for the increase in estimated malaria incidence and mortality between 2015 and 2020, which means that the country did not achieve the 2020 target of a 40% reduction in malaria incidence</td>
<td>Q4 2022</td>
<td></td>
</tr>
</tbody>
</table>

RMNCAH and NTDs

Progress
Uganda has achieved good coverage of the tracer RMNCAH intervention of exclusive breastfeeding. Uganda has significantly enhanced the tracking and accountability mechanisms with the ongoing development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Uganda is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. In 2020, preventive chemotherapy coverage was 100% for lymphatic filariasis, 85% for onchocerciasis, 62% for soil transmitted helminths, 57% for trachoma and 47% for schistosomiasis. Overall, the NTD preventive chemotherapy coverage index for Uganda in 2020 was 68, which represents a high increase when compared to 2019 index value (18).
### Previous Key Recommended Actions

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<tr>
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</thead>
<tbody>
<tr>
<td>RMNCAH¹: Impact</td>
<td>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</td>
<td>Q4 2022</td>
<td>RMNCAH services continue to be provided in adherence to the COVID-19 prevention protocol. Key RMNCAH indicators monitoring service availability and uptake have been maintained at high level during the quarter.</td>
<td></td>
</tr>
<tr>
<td>NTDs</td>
<td>Ensure that NTD interventions including Mass Drug Administration, vector control and Morbidity Management and Disability Prevention are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. This includes prioritising key necessary catch-up activities.</td>
<td>Q4 2022</td>
<td>The country is on track for trachoma and two districts (Amudat and Moroto) had MDA in 2021. The trachoma impact survey was conducted in May 2021 in two districts (Nebbi and Buliisa) as well as a surveillance survey in June 2021 in Nakapiripit and Nabilatuk. Schistosomiasis and Soil Transmitted Helminths integrated MDA is conducted on regular basis in 91 targeted districts and channels such as integrated health days and ANC services are used</td>
<td></td>
</tr>
</tbody>
</table>

The country has responded positively to the recommended action on the low coverage of vitamin A and continues to track progress as this action is implemented.

### Key

- **Action achieved**
- **Some progress**
- **No progress**
- **Deliverable not yet due**

¹ RMNCAH metrics, recommended actions and response tracked through WHO