Malaria transmission in Sudan is low-to-moderate and occasionally epidemic. The annual reported number of malaria cases in 2020 was 3,412,499 with 701 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, Adolescent and Child health, Neglected Tropical Diseases and malaria.

For Sudan, it was of vital importance to ensure that the universal coverage campaign for long-lasting insecticidal nets (LLINs) and IRS campaigns scheduled for 2021 were completed, whilst taking into account physical distancing, in accordance with the guidance and recommendations from WHO and the RBM Partnership to End Malaria. Without the LLIN campaign, planned indoor residual spraying (IRS) and sustained malaria case management, there could have been an 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 18.6% increase in malaria cases, and a 74.1% increase in malaria deaths in Sudan. 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.

Given the difficulties in securing essential health commodities in Africa during the COVID-19 pandemic, it is of vital importance that countries sign, ratify and deposit the African Medicines Agency (AMA) instrument with the AUC in order to improve access to quality, safe and efficacious medical products in Africa. The country is encouraged to do this.

The country has been affected by the continent-wide restriction of access to COVID-19 vaccines and had only been able to cover 6% of their population by April 2022. The country, working with partners, should invest in education and behaviour change communication to increase the uptake of COVID vaccines and therapeutics.

Malaria

Progress

The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the insecticide resistance monitoring and management plan. Sudan has also carried out drug resistance testing since 2018 and the data have been reported to WHO. The country has procured sufficient LLINs and carried out IRS to achieve operational vector control coverage of the targeted at-risk population. Sudan has also scaled up the implementation of iCCM.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Sudan has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard, although the
scorecard is not yet shared on the ALMA Scorecard Hub.

**Impact**
The annual reported number of malaria cases in 2020 was 3,412,499 with 701 deaths.

**Key Challenges**
- Insecticide resistance threatens vector control.
- Gaps in funding for IRS.
- 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>COVID-19 pandemic contributed to delays in the procurement of essential commodities. Coupled with existing large gaps in resources - including operational costs for essential vector control commodities, implementation of LLINs and IRS was affected in 2021. To address these gaps and with GF resources, LLINs will be distributed in 2022. There are also plans to mobilize domestic resources for IRS. However, there are currently no stockouts of ACTs and RDTs.</td>
<td></td>
</tr>
<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>The reasons for the country failing to meet the 2020 target of a 40% reduction in malaria incidence and mortality include widespread reported insecticide resistance and difficulties in switching from cheaper insecticides to the new generation insecticides for IRS due to the increased costs. Frequent flooding in the last three years has also caused increased malaria transmission. The country plans to address the financial and human resource gaps through the mobilization of domestic resources</td>
<td></td>
</tr>
</tbody>
</table>

The country has responded positively to the recommended actions on addressing the reasons for the increase in estimated malaria incidence and malaria mortality rate between 2010 and 2017.

### New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy</td>
<td>Sign, ratify and deposit the AMA instrument at the AUC</td>
<td>Q1 2023</td>
</tr>
</tbody>
</table>
RMNCAH and NTDs

Progress
Sudan has achieved high coverage of the tracer RMNCAH indicator DPT3. The country has enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Sudan 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 21% for trachoma and 0% for schistosomiasis. Data for lymphatic filariasis and onchocerciasis were reported but under validation process while data for soil transmitted helminths was not reported. Overall, the NTD preventive chemotherapy coverage index for Sudan dropped from 43 in 2019 to 0 in 2020.

Previous Key Recommended Actions

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</tr>
</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>Yellow</td>
<td>The Ministry of Health reported a decline of PHC uptake by about two thirds. Lock-down in many states led to limiting of services. In many parts of the country, limited access to health services is coupled with poor health seeking behaviour. The MCH Directorate developed a Guideline for ensuring the continuity of MCH services during COVID-19 for all states to ensure safe services remain available for all during the COVID-19 pandemic. All MCH departments organized the training for health staff in coordination with the COVID-19 case management committee and UNFPA. Training included Infection Prevention and Control, Visual Triage, and Case management courses for community midwives working at community level and health visitors and health care providers working at PHCs. Advanced training on clinical management was carried out for specialists. Implementation of the supervision of RMNCAH services for all states to ensure safe services has continued</td>
</tr>
</tbody>
</table>

¹ RMNCAH metrics, recommended actions and response tracked through WHO
<table>
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<th>Progress</th>
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<tbody>
<tr>
<td>NTDs</td>
<td>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</td>
<td>Q4 2022</td>
<td></td>
<td>In 2021 despite the COVID-19 pandemic, the country managed to do the necessary planning work for MDA for schistosomiasis which took place in January 2022 mainly for School Age Children, and the country is planning MDA for Lymphatic Filariasis and Trachoma. The country maintained the services for Visceral Leishmaniasis despite the stock out of second line treatment in Quarter 4 2021. The country conducted a national training for NTD focal persons from the 18 states in December 2021</td>
</tr>
<tr>
<td>Optimise quality of care</td>
<td>Address the falling coverage of vitamin A</td>
<td>Q4 2022</td>
<td></td>
<td>Deliverable not yet due</td>
</tr>
</tbody>
</table>

Sudan has responded positively to the RMNCAH recommended action addressing low coverage of postnatal care and coverage of ARTs and continues to track progress as this action is implemented.

**Key**

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