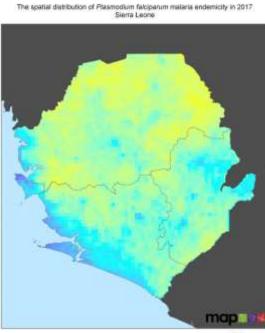
Sierra Leone ALMA Quarterly Report Quarter Three 2020



Scorecard for Accountability and Action





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Commodities Financed and Financial Control		
LLIN financing 2020 projection (% of need)	100	
Public sector RDT financing 2020 projection (% of need)	100	
Public sector ACT financing 2020 projection (% of need)	100	
World Bank rating on public sector management and institutions 2019 (CPIA Cluster D)	3.2	

Insecticide Resistance Monitoring, Implementation and Impact

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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 (>9 months stock)	
ACTs in stock (>9 months stock)	
LLINIRS campaign on track	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	
Scale of Implementation of ICCM (2017)	
Operational LLINIRS 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 and NTC)s
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)	14
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	43
Estimated % of children (0–14 years old) living with HV who have access to antiretroviral therapy (2019)	1#
% deliveries assisted by skilled birth attendant	69
Postnatal care (within 48 hrs)	73
Exclusive breastfeeding (% children < 6 months)	31
Vitamin A Coverage 2018 (2 doses)	69
DPT3 coverage 2019 (vaccination among 0-11 month olds)	95

Key

The entire population of Sierra Leone is at high risk of malaria. The annual reported number of malaria cases in 2018 was 1,781.855 with 1,949 deaths.



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

Malaria

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 and malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant women (intermittent preventive treatment in pregnancy). Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Sierra Leone, we commend the Ministry of Health, in the decision to go ahead with the universal coverage campaign for LLINs, in accordance with the recent guidance and recommendations from WHO and the RBM Partnership to End Malaria. It is of particular note that this guidance was developed based upon the experiences of distributing LLINs in Sierra Leone during the Ebola outbreak. Based on WHO modeling, 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 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.

Progress

Sierra Leone has secured sufficient resources to achieve universal coverage of LLINs, RDTs and ACTs in 2020 and has distributed sufficient LLINs to achieve 100% operational coverage of the targeted at risk population. The country has scaled up the implementation of iCCM. Sierra Leone has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard. 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.

Impact

The annual reported number of malaria cases in 2018 was 1,781,855 with 1,949 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 including malaria.

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Address funding	Ensure the GF malaria funding application is submitted by Q3 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q3 2020		The country successfully submitted the Global Fund funding request
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 2020		Sierra Leone has completed the LLIN universal coverage campaign and has worked to sustain case management during the COVID-19 pandemic

Previous Key Recommended Actions

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. Preventive chemotherapy coverage in Sierra Leone is good for onchocerciasis (76%) and below WHO targets for soil transmitted helminths (73%) and for lymphatic filariasis (61%). Preventive chemotherapy was not implemented for schistosomiasis (%). Overall, the NTD preventive chemotherapy coverage index for Sierra Leone in 2018 is 14, which represents a large decrease compared with the 2017 index value (85).

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Optimise quality of care	Address the falling coverage of vitamin A	Q1 2021		Deliverable not yet due
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 2020		Deliverable not yet due

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		

¹ RMNCAH metrics, recommended actions and response tracked through WHO