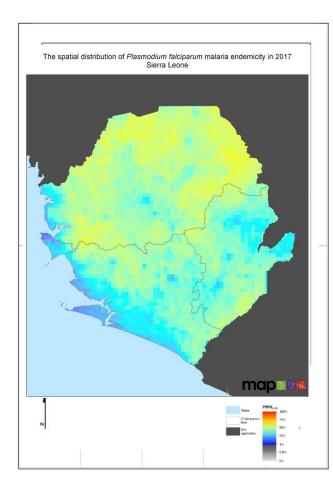
# Sierra Leone ALMA Quarterly Report Quarter One 2020



### Scorecard for Accountability and Action



#### Metrics

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 2018 (CPIA Cluster D)	3.2	

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		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM (2017)		
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 and N	ITE	)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 (2018)		41
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)		17
% 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)	v	69
DPT3 coverage 2018 (vaccination among 0-11 month olds)		90

### 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 including 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, it will be of vital importance to ensure that the universal coverage campaign for long-lasting insecticidal nets (LLINs) scheduled for 2020 goes ahead, whilst taking into account physical distancing, 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. Without the 2020 LLIN campaign, coupled with sustained malaria case management, there will be 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 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.

### **Global Fund Update**

The Global Fund has announced that Sierra Leone will receive US\$ 126.2 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2021-2023. The Global Fund has determined the total allocation amount based on Sierra Leone's disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Sierra Leone this is calculated at US\$68.4 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Sierra Leone is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to accelerate progress.

### 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.

#### **Previous Key Recommended Action**

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		Deliverable not yet due

#### New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
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

# **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
NTDs	Work to increase the preventive chemotherapy for lymphatic filariasis and schistosomiasis to reach WHO targets and implement preventive chemotherapy for Soil Transmitted Helminths	Q2 2020		Sierra Leone reports that the Schistosomiasis data used to calculate the NTD coverage index are not in line with the data reported by the country. The NTD programme will check with WHO to update their coverage data

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.

#### New Key Recommended Actions

Objective	Action Item	Suggested completion timeframe
RMNCAH <sup>1</sup> : Optimise quality of care	Address the falling coverage of vitamin A	Q1 2021
RMNCAH <sup>1:</sup> Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

<sup>&</sup>lt;sup>1</sup> RMNCAH metrics, recommended actions and response tracked through WHO