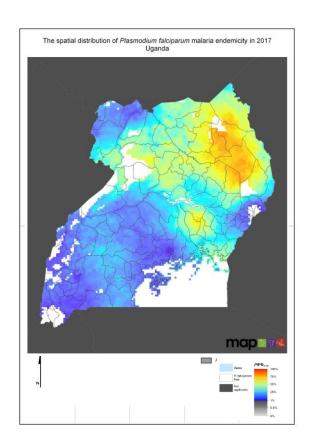
# Uganda ALMA Quarterly Report Quarter Two, 2020



# **Scorecard for Accountability and Action**

Metrics



etrics		
Commodities Financed and Financial Control		
LLIN financing 2020 projection (% of need)		100
Public sector RDT financing 2020 projection (% of need)		95
Public sector ACT financing 2020 projection (% of need)		83
World Bank rating on public sector management and institutions 2018 (CPIA Cluster D)		3.2
Insecticide Resistance Monitoring, Implementation as	nd	Impact
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		4
Insecticide resistance monitored since 2015 and data reported to WHO		9)
National Insecticide Resistance Monitoring and Management Plan		
RDTs in stock (>9 months stock)		
ACTs in stock (>9 months stock)		
LLIN/IRS campaign on track		
Country Reporting Launch of Zero Malaria Starts with Me Campaign		
Scale of Implementation of iCCM (2017)		
Operational LLIN/IRS coverage (% of at risk population)		83
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 I	NTE	)s
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2018)		70
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	<b>A</b>	84
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)		65
% deliveries assisted by skilled birth attendant		74
Postnatal care (within 48 hrs)		54
Exclusive breastfeeding (% children < 6 months)		66
Vitamin A Coverage 2018 (2 doses)		33
DPT3 coverage 2019 (vaccination among 0-11 month olds)		93

Malaria transmission occurs all year round in most parts of Uganda. The annual reported number of malaria cases in 2018 was 8,895,436 with 3,302 deaths.

# Key



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## 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, Child and Adolescent 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 Uganda, we commend the Ministry of Health, in the decision to go ahead with the universal coverage campaign for LLINs and IRS, in accordance with the recent 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.

#### **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 and LLINs required in 2019. 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. The country has scaled up the implementation of iCCM. Uganda has enhanced the tracking and accountability mechanisms with the development of the Malaria Control Scorecard. 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. Uganda has launched the Mass Action Against Malaria campaign.

#### **Impact**

The annual reported number of malaria cases in 2018 was 8,895,436 with 3,302 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 Actions**

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Vector control	Work to address the falling LLIN coverage	Q4 2020		Over 2.6 million LLINs were delivered to the country in Q2 2020
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		The country has worked to ensure that malaria services have continued during the COVID-19 pandemic. IRS was completed and planning so on track for the LLIN campaign, which commenced in quarter 2. Sufficient stocks of ACTs are available and case management for malaria has continued
Impact	Investigate and address the reasons for the increase in estimated malaria incidence between 2015 and 2018	Q4 2020		The increase in reported incidence over the period 2015-2018 is attributed by the county to an increase of 13% in health facility reporting. Additionally, the percentage of malaria cases that were confirmed increased from 39% in 2015 to 92% in 2018. Additionally, the 2018 Uganda Malaria Indicator Survey (UMIS) showed a marked reduction in malaria parasitemia of 9.1%, from 19% reported in 2015 in children under five years of age

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

## **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. Preventive chemotherapy coverage in Uganda is very good for onchocerciasis (96%) and for lymphatic filariasis (80%). Preventive chemotherapy coverage is below WHO target for soil transmitted helminths (67%), schistosomiasis (62%) and for trachoma (52%). Overall, the NTD preventive chemotherapy coverage index for Uganda in 2018 is 70, which represents an increase compared with the 2017 index value (68).

**Previous Key Recommended Actions** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH¹: 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		Following a reduction in demand for RMNCAH services due to COVID and the national lock down, the MOH has intensified community mobilization to ensure mothers and children continue to access ANC, PNC, immunization and curative services. Concurrently, infection control efforts continue in all health facilities are ongoing as part of the COVID response.

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.



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