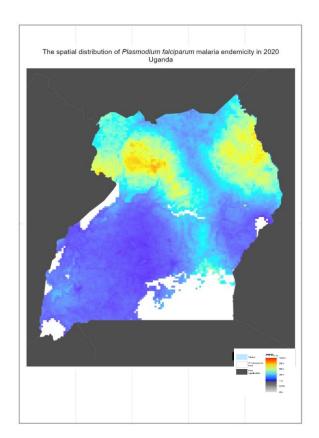
## **Uganda ALMA Quarterly Report Quarter One, 2024**



## **Scorecard for Accountability and Action**



Financing		
LLIN financing (2024-2026) projection (% of need)		7
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)		8
% of National Malaria Strategic Plan Financed (2024- 2026)		7
Policy		
rollcy		
Signed, ratified and deposited the AMA instrument at the AUC	,	
Malaria activities targeting refugees in Malaria Strategic Plan		
Malaria activities targeting IDPs in Malaria Strategic Plan		
Zero Malaria Starts With Me Launched		
End Malaria Council and Fund Launched		
Resistance Monitoring, Implementation and Impact		
Drug efficacy studies conducted since 2019 and data reported to WHO		
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010		
Insecticide resistance monitored since 2015 and data reported to WHO		
RDTs in stock (>6 months stock)		
ACTs in stock (>6 months stock)		
LLIN/IRS campaign on track		
% of vector control in the last year with next generation materials		100
On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)		
On track to reduce malaria mortality by at least 75% by 2025 (vs 2015)		
Tracer Indicators for Maternal and Child Health and NTD	IS	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2022)		8
% of Neglected Tropical Disease MDAs Achieving WHO Targets		8
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2022)		7
Vitamin A Coverage 2022 (2 doses)		5
DPT3 coverage 2022 (vaccination among 0-11 month	Ħ	8

Malaria transmission occurs all year round in most parts of Uganda. The annual reported number of malaria cases in 2022 was 20,012,873 with 4817 deaths.

### Key



## **Uganda ALMA Quarterly Report Quarter One, 2024**



#### Malaria

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. We must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, increasing biological threats, climate change, and humanitarian crises. These threats represent the most serious emergency facing malaria in 20 years and will lead to malaria upsurges and epidemics if not addressed. AU Member States face a \$1.5 billion gap just to sustain existing, yet inadequate, levels of malaria-related services between now and 2026. To get back on track and eliminate malaria, we will need to mobilise another \$5.2 billion dollars annually to fully finance our national malaria plans. Climate change presents a significant threat to the progress that we have made. Africa is disproportionately exposed to the risks of climate change and by the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Climate disasters displace millions and destroy roads and health facilities, reducing access to health services. There is urgency to decarbonise and reduce our carbon footprint. We must implement integrated and multisectoral solutions, and adapt our health systems to the threats of both climate change and pandemics. We must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the Anopheles stephensi mosquito which spreads malaria in both urban and rural areas. The good news is that the malaria toolkit continues to expand. WHO has approved the use of dual-insecticide mosquito nets that are 43% more effective than traditional mosquito nets and will address the impact of insecticide-resistance. New medicines for treating malaria and two malaria vaccines for children have also been approved with an increasing number of countries deploying these new tools. The scaling up of these interventions will help us achieve our goal of eliminating malaria. This will require integrated approaches with malaria as a pathfinder for pandemic preparedness, climate change and health, Primary Health Care and Universal Health Coverage. We must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD councils and Funds, which have raised over US\$50 million.

#### **Progress**

Uganda has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. The country has scaled up the use of next generation mosquito nets and insecticides. Uganda has also completed drug resistance monitoring since 2018 and has reported the data to WHO. The country is also showing leadership in malaria control through participation in the High Burden High Impact approach, and recently signed the Yaoundé Declaration.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, 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 2022 was 20,012,873 with 4817 deaths.

#### **Key Challenges**

- Threat of insecticide and drug resistance
- Insufficient resources to fully implement the malaria National Strategic Plan

**Previous Key Recommended Action** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Resource Mobilisation	Work to fill key gaps in malaria funding	Q2 2024		The country successfully mobilised resources from the Global Fund which together with funds from other donors will meet major needs for the period 2024-26 with the exception of the total ITN need for 2026. Other efforts include ongoing domestic resource mobilisation through the private sector-led Malaria Free Uganda which is currently working with the malaria programme to prioritise and fundraise for programme gaps. Advocacy for increased domestic budget allocation for health and malaria is also being strengthened through the Uganda Parliamentary Forum on Malaria.
Impact	Investigate and address the reasons for the increase in estimated malaria incidence since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence	Q4 2024		Interventions to manage the increased malaria burden continue to be implemented. A countrywide ITN campaign was completed in Q4 2023 and there is ongoing surveillance to assess and ensure proper net use and drug efficacy. Other interventions to strengthen case management such as strengthened data-based and targeted support supervisions are ongoing. Current data show a decline in malaria cases and deaths in 2023 compared to 2022

**New Key Recommended Action** 

Objective	Action Item	Suggested completion timeframe
Impact	Work to develop a plan of action to support the implementation of the Yaoundé declaration	Q4 2024

# Reproductive, Maternal, Newborn, Adolescent and Child Health

#### **Progress**

Uganda has significantly enhanced the tracking and accountability mechanisms with the ongoing development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

## **Neglected Tropical Diseases**

## Progress

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 2022, preventive chemotherapy coverage was 100% for lymphatic filariasis

(under surveillance), 95% for onchocerciasis, 92% for soil transmitted helminths, 78% for trachoma and 82% for schistosomiasis. Overall, the NTD preventive chemotherapy coverage index for Uganda in 2022 is 87, which represents a very substantial increase compared to 2021 index value (53). The country reached any WHO MDA target in 2022. The country reached WHO MDA targets for onchocerciasis, soil transmitted helminthiasis and for schistosomiasis. Uganda have signed the Kigali declaration.

