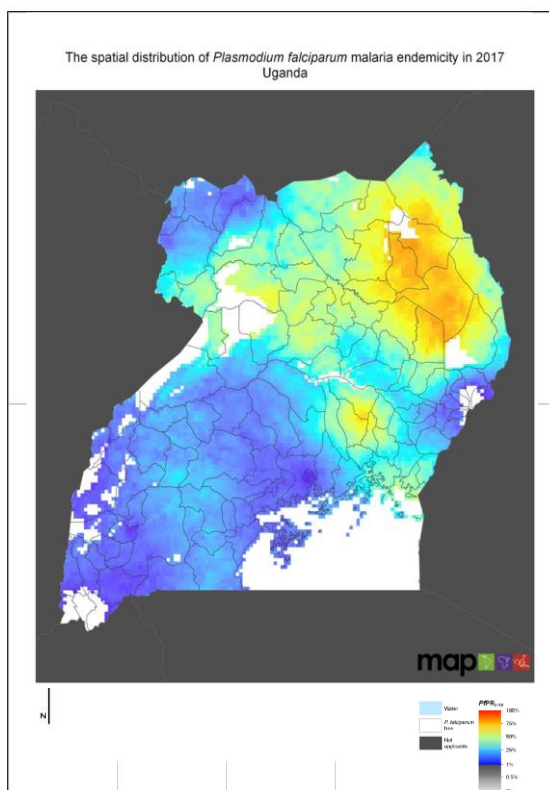


Scorecard for Accountability and Action



Malaria transmission occurs all year round in most parts of Uganda. The annual reported number of malaria cases in 2019 was 16,243,323 with 5,027 deaths.

Metrics

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 2019 (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	
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	
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 NTDs	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2019)	18
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	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

Key

	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, Child and Adolescent health, Neglected Tropical Diseases and malaria.

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 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.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2021 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.

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 2020. 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. 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 and the End Malaria Fund.

Impact

The annual reported number of malaria cases in 2019 was 16,243,323 with 5,027 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, malaria and Neglected Tropical Diseases.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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 maintenance of key malaria services, including case management during the COVID-19 epidemic is prioritized and monitored by the "Continuation of Essential Health Services (CEHS)" COVID-19 response pillar. Malaria case management has been maintained at health facility and community levels with minimal disruptions in commodity supplies and service provision. The ongoing mass LLIN distribution has progressed as scheduled to maintain vector control. Epidemic control measures have been activated in districts experiencing malaria upsurges. Malaria service delivery guidelines are being revised in response to the escalation of spread of the COVID-19 epidemic to Phase 4). Sufficient stocks of ACTs are available and case management for malaria has continued, although there have been reduced stocks of RDTs available
Vector control	Work to accelerate the LLIN campaign	Q1 2021		Approximately 22 million LLINs distributed by end of 2020

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

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
Impact	Investigate and address the reasons for the increase in estimated malaria incidence between 2015 and 2019 which means that the country is not on track to achieve the 2020 target of a 40% reduction in malaria incidence	Q4 2021

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 good for onchocerciasis (77%), for lymphatic filariasis (78%), low for schistosomiasis (61%), for soil transmitted helminths (45%) and very low for trachoma (0%). Overall, the NTD preventive chemotherapy coverage index for Uganda in 2019 is 18, which represents a substantial decrease compared with the 2018 index value (70).

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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		The maintenance of key RMNCAH services during the COVID-19 epidemic is prioritized and monitored by the “Continuation of Essential Health Services (CEHS)” COVID-19 response pillar. An observed drop in coverage of RMNCAH interventions in July – September (after an initial drop in April), was followed by efforts to increase demand and access to services including revamping child health days and enhancing community messaging. In October, a steep increase in Low Birth Weight was observed. In response to this, the MOH is initiating pre-term birth surveillance, community registration of pregnancies, community engagement and sending mobile phone reminder messages for ANC to pregnant women. RMNCAH service delivery guidelines are being revised in response to the escalation of spread of the COVID-19 epidemic





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.

¹ RMNCAH metrics, recommended actions and response tracked through WHO

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
NTDs	Prioritise the funding and other resources for the implementation of preventive chemotherapy for trachoma and work to increase preventive chemotherapy for soil transmitted helminths and schistosomiasis to reach WHO targets.	Q4 2021

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due