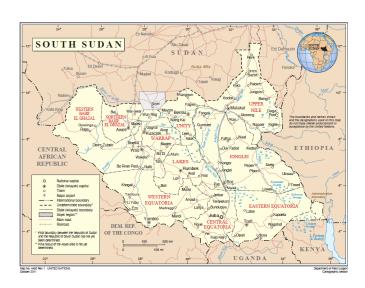
# South Sudan ALMA Quarterly Report Quarter One, 2022



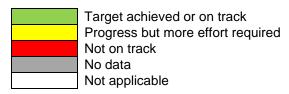
### **Scorecard for Accountability and Action**



Commodities Financed	
LLIN financing 2022 projection (% of need)	63
Public sector RDT financing 2022 projection (% of need)	100
Public sector ACT financing 2022 projection (% of need)	100
Policy	
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	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	
Resistance Monitoring, Implementation and Impact	
Drug Resistance Monitoring Conducted (2018-2020) 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	
National Insecticide Resistance Monitoring and Management Plan	
RDTs in stock (>6 months stock)	
ACTs in stock (>6 months stock)	
LLINIRS campaign on track	
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, NTD	s and Covid 19
Scale of Implementation of iCCM	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2020)	
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2020)	14
Vitamin A Coverage 2020 (2 doses)	
DPT3 coverage 2020 (vaccination among 0-11 month olds)	49
% Population Fully Vaccinated Against COVID-19	

#### Key

Malaria transmission in South Sudan is generally perennial, with moderate to high intensity. The annual reported number of malaria cases in 2020 was 1,805,371 and 244 deaths



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#### **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 of COVID-19. 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 South Sudan, 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 with a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 25.2% increase in malaria cases, and a 30.6% increase in malaria deaths in South Sudan. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

WHO estimates that there were an additional 47,000 malaria deaths globally in 2020 due to service disruptions during the COVID-19 pandemic, leading to an estimated 7.5% increase in deaths.

Given the difficulties in securing essential health commodities in Africa during the COVID-19 pandemic, it is of vital importance that countries sign, ratify and deposit the African Medicines Agency (AMA) instrument with the AUC in order to improve access to quality, safe and efficacious medical products in Africa. The country is encouraged to do this.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2022 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.

The country has been affected by the continent-wide restriction of access to COVID-19 vaccines and had only been able to cover 4% of their population by April 2022. The country, working with partners, should invest in education and behaviour change communication to increase the uptake of COVID vaccines and therapeutics.

### **Malaria**

#### **Progress**

The country secured most of the resources to achieve universal coverage of RDTs and ACTs in 2022. The country has also distributed sufficient LLINs to achieve universal operational coverage of the targeted at risk population. South Sudan has recently completed the insecticide resistance monitoring and management plan.

#### **Impact**

The annual reported number of malaria cases in 2020 was 1,805,371 and 244 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 2022		The country has no stockouts of essential antimalarial commodities (ACTs and RDTs). The programme has received funds from the Global Fund for the implementation of NFM3 grant. However, distribution of LLINs in Jonglei state has not yet been completed due to logistical and security reasons and has not yet started in Unity and Central Equatorial states due to resource gaps
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and mortality between 2015 and 2020, which means that the country did not achieve the 2020 target of a 40% reduction in malaria incidence	Q4 2022		A number of factors have contributed to the country not being on track to achieve the 2020 target of a 40% reduction in malaria incidence and mortality. These include: Low coverage of key malaria interventions such as for testing, treatment and vector control with the use of LLINs; there is also a lot of insecticide resistance and when this is combined with the use of substandard products including medicines in the private sector, contribute to low effectiveness of interventions. Flooding in various parts of the country coupled with the problem of inaccessibility also contributed to increased malaria cases. The COVID-19 pandemic also severely disrupted implementation. Plans to address these factors include: review of the national treatment guidelines; promote the Boma Health Initiative (use of CHWs); introduce new nets (PBO) especially in areas of high malaria prevalence; introduce SMC in areas where this intervention is appropriate; and identify areas that would benefit from the use of IRS to reduce malaria transmission.

South Sudan has responded positively to the recommended action on insecticide resistance monitoring.

**New Key Recommended Actions** 

New Key Recommended Actions						
Objective	Action Item	Suggested completion timeframe				
Policy	Sign, ratify and deposit the AMA instrument at the AUC	Q1 2023				
Monitoring	Ensure that drug resistance monitoring is conducted and data reported to WHO	Q1 2023				

## **RMNCAH and NTDs**

Progress in addressing Neglected Tropical Diseases (NTDs) in South Sudan is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. In 2020, preventive chemotherapy coverage was 31% for soil transmitted helminthiasis, 11% for both schistosomiasis and trachoma, and 0% for both onchocerciasis and lymphatic filariasis. Overall, the NTD preventive chemotherapy coverage index for South Sudan in 2020 is 2, which represents a decrease compared with the 2019 index value (18).

**Previous Key Recommended Actions** 

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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RMNCAH <sup>1</sup> : 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 2022		Guided by the National strategy for continuity of RMNCAH/N services, South Sudan continued to ensure services continuity. Compounding the COVID-19 pandemic challenge, the country is experiencing severe flooding, food insecurity (60% of the population at risk), volatile economy and attacks on health workers. The floods and insecurity limited access to provision of health services, and worsened the malaria, diarrhoea disease and malnutrition situation. Malaria incidence increased to 50% of OPD consultations. Key challenges include limited WASH infrastructure, limited human resources and the low risk perception of the population
NTDs	Recognising the negative impact of COVID-19 on the 2020 MDA coverage, ensure that NTD interventions including MDAs, vector control and Morbidity Management and Disability Prevention are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. This includes prioritizing key necessary catch up activities	Q4 2022		Deliverable not yet due
Optimise quality of care	Address the falling coverage of vitamin A	Q4 2022		Deliverable not yet due

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

South Sudan has responded positively to the recommended actions addressing low coverage of skilled birth attendants and DPT3, and continues to track progress as these actions are implemented.

