

Sudan ALMA Quarterly Report

Quarter One, 2020



Scorecard for Accountability and Action



Metrics

Commodities Financed and Financial Control	
LLIN financing 2020 projection (% of need)	83
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)	2.1
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 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, %)(2018)	30
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2018)	15
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2018)	15
% deliveries assisted by skilled birth attendant	78
Postnatal care (within 48 hrs)	27
Exclusive breastfeeding (% children < 6 months)	55
Vitamin A Coverage 2018 (2 doses)	34
DPT3 coverage 2018 (vaccination among 0-11 month olds)	93

Malaria transmission in Sudan is low-to-moderate and occasionally epidemic. The annual reported number of malaria cases in 2018 was 3,581,302 with 3,129 deaths.

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, 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 Sudan, 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. Without the LLIN campaign, planned indoor residual spraying (IRS) and sustained malaria case management, there could 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 18.6% increase in malaria cases, and a 74.1% increase in malaria deaths in Sudan. 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 Sudan will receive US\$145.7 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 Sudan'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 Sudan this is calculated at US\$110.3 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Sudan 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 sustain the gains made in recent years, and accelerate progress.

Progress

Sudan has financed most of the required LLINs, ACTs and RDTs required to sustain high coverage in 2020. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the insecticide resistance monitoring and management plan. The country has procured sufficient LLINs and carried out IRS to achieve operational vector control coverage of the targeted at risk population. Sudan has also scaled up the implementation of iCCM. The country has

enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control and Elimination Scorecard.

Impact

The annual reported number of malaria cases in 2018 was 3,581,302 with 3,129 deaths.

Key Challenges

- Insecticide resistance threatens vector control.
- Gaps in funding for IRS.
- 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
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and deaths between 2015 and 2018	Q4 2020		Heavy rainfall and flooding contributed to the increase in malaria transmission and this was made worse by the epidemics of other vector-borne diseases including dengue, chikungunya and Rift Valley Fever. The country has been successful in securing resources through Global Fund portfolio optimisation for vector control.
Address funding	Ensure the GF malaria funding application is submitted by Q2 2020 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years	Q2 2020		Deliverable not yet due
Emergency Preparedness	Following the extensive flooding in the country, ensure that the emergency response plan is in place to respond to any potential upsurges of malaria	Q2 2020		Following the extensive flooding in the country, the FMOH, Sudan and WHO are developing an emergency and response plan to respond to any potential upsurges of malaria. The plan will be implemented as the next rainy season is expected to start in a few weeks. The plan includes pre-positioning of malaria commodities including insecticides, spray pumps, recruiting spray teams, mapping risk areas for malaria and other vector borne diseases, mapping stocks of medicines and RDTs and determining training needs and gaps

The country has responded positively to the recommended actions on addressing the reasons for the increase in estimated malaria incidence and malaria mortality rate between 2010 and 2017.

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

Sudan has achieved high coverage of the tracer RMNCAH indicator skilled birth attendants, exclusive breastfeeding and DPT3. The country has enhanced tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Sudan 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 is very good for schistosomiasis (95%) but below WHO targets for trachoma (51%), onchocerciasis (19%), lymphatic filariasis (17%), soil transmitted helminths (15%). Overall, the NTD preventive chemotherapy coverage index for Sudan in 2018 is 30, which represents a substantial increase compared with the 2017 index value (12). The country has enhanced tracking and accountability mechanisms with the development of the first NTD Scorecard.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Optimise quality of care	Investigate and address the reasons for the low coverage of vitamin A	Q2 2020		The country has increased coverage of vitamin A by 14% in 2018 compared to 2017, however overall coverage remains low

Sudan has responded positively to the RMNCAH recommended action addressing low coverage of postnatal care and coverage of ARTs and continues to track progress as this action is implemented.

New Key Recommended Action

Objective	Action Item	Suggested completion timeframe
RMNCAH ¹ : Impact	Ensure that essential RMNCAH services are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO