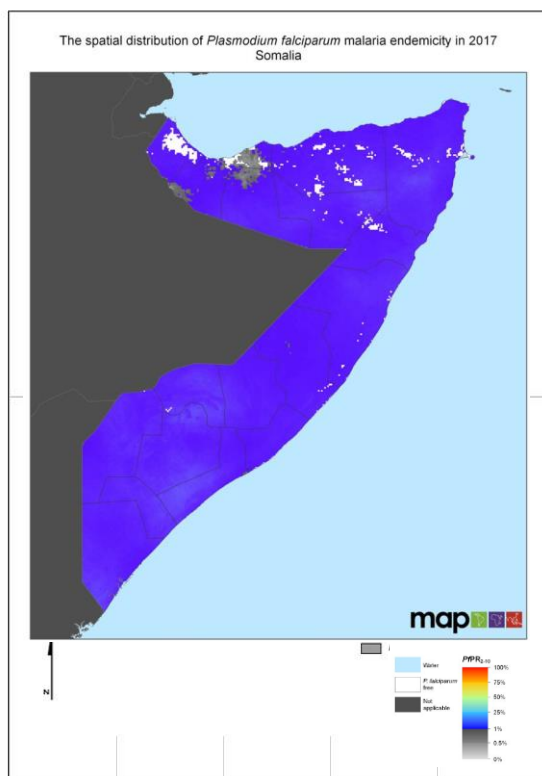


Scorecard for Accountability and Action



Malaria transmission ranges from unstable and epidemic in Puntland and Somaliland to moderate in central Somalia to high in the south. The annual reported number of malaria cases in 2018 was 31,030 and 31 deaths.

Metrics

Commodities Financed and Financial Control	
LLIN financing 2020 projection (% of need)	100
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)	1.8
Insecticide Resistance Monitoring, Implementation and Impact	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3
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)	
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)	39
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)	65
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	33
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)	17
% deliveries assisted by skilled birth attendant	9
Postnatal care (within 48 hrs)	
Exclusive breastfeeding (% children < 6 months)	5
Vitamin A Coverage 2018 (2 doses)	32
DPT3 coverage 2019 (vaccination among 0-11 month olds)	42

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 and 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 Somalia, it will be of vital importance to ensure that the rolling 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 this campaign, coupled with the need to sustain essential health services including 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 an 8.6% increase in malaria cases, and a 25.2% increase in malaria deaths in Somalia. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress

Somalia has secured sufficient resources to cover the procurement and distribution of the LLINs, ACTs and RDTs required in 2020.

Key Challenges

- A weak health system and relatively few partners limits scale up of core malaria interventions.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.

Impact

The annual reported number of malaria cases in 2018 was 31,030 with 31 deaths.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
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		The country submitted the GF malaria application in Q2
Vector control	Work to address the falling LLIN coverage	Q4 2020		The Somalia LLIN campaign is rolling out from Q3 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		Somalia reports that there is no significant change in health services utilization (including for malaria). There have been no stock outs of antimalarial to date but there is a requirement for commodity deliveries to be fast tracked to avoid future stock outs. WHO through UNICEF has been requested to provide emergency stocks. Virtual training on case management was carried out from Q2 with the support of WHO. Planning for IRS implementation in the three Zones of Puntland, Somaliland and Somalia is ongoing. Distribution of LLINs is planned at the end of Q2. Teams will carry out house-to-house delivery of LLINs with community involvement and distributors will use PPEs and practice social distancing to avoid contracting COVID-19. A total amount of USD 8.46 m has been submitted to the GF for COVID-19 support

RMNCAH and NTDs

Progress in addressing Neglected Tropical Diseases (NTDs) in Somalia is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis and soil transmitted helminths. Preventive chemotherapy coverage data for schistosomiasis is reported at 100% and for soil transmitted helminths at 42% giving a 2018 index value of 65% which represents a significant increase compared to 2017.

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 MoH, with support from partners, is working to ensure continuity of essential health (RMNCH) services during the COVID-19 pandemic. This includes capacity building of health professionals and frontline health workers, provision of PPE to health team members in static health facilities and ensuring provision of medical supplies. DHIS2 data are monitored monthly. The quarter two, 2020 data show that immunization services and first ANC visits have declined, however, fourth ANC visits and skilled birth attendants have increased

Somalia has responded positively to the RMNCAH recommended actions addressing low coverage and lack of data for a number of key interventions including skilled birth attendants, exclusive breastfeeding and postnatal care and continues to track progress as these actions are implemented.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO