

# UGANDA Work Plan

**FY 2021**

**Program Year 3**

**October 2020–September 2021**



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## **ACT | EAST PROGRAM OVERVIEW**

The U.S. Agency for International Development Act to End Neglected Tropical Diseases (NTDs) | East Program supports national NTD programs in reaching World Health Organization goals for NTD control and elimination through proven, cost-effective public health interventions. The Act to End NTDs | East (Act | East) Program also provides critical support to countries on their journey to self-reliance, helping them create sustainable programming for NTD control within robust and resilient health systems. The Act | East Program is being implemented by a consortium of partners, led by RTI International and including The Carter Center; Fred Hollows Foundation; IMA World Health; Light for the World; Results for Development (R4D); Save the Children; Sightsavers; and Women Influencing Health, Education, and Rule of Law (WI-HER). In Uganda, Act | East program activities are implemented by RTI and The Carter Center.

## **COVID-19 PANDEMIC IMPACT ON ACT TO END NTDs | EAST (ACT | EAST) ACTIVITIES AND WORK PLANS**

Act | East recognizes the impact that the coronavirus disease 2019 (COVID-19) pandemic has had on all programs. On April 1, 2020, the World Health Organization (WHO) issued interim guidance to neglected tropical disease (NTD) programs recommending that almost all in-person activities be postponed until further notice. With the support of USAID, Act | East stopped all activities that matched the criteria outlined in WHO's interim guidance.

On July 27, 2020, WHO issued further interim guidance on assessing whether NTD activities could restart safely. Alongside this, Act | East, in collaboration with Act | West and USAID, developed activity restart guidance and resource documents to support each country in safely implementing activities while adapting to the COVID-19 challenge and adhering to global guidance.

The timeline to restart activities will be context-specific, varying by country, region, and activity, and is subject to changes in COVID-19 dynamics. For the sake of brevity, all amendments to activity design to account for COVID-19 have not been listed in each country's work plans.

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FY21 Learning Activities are marked with this icon throughout the narrative.

## ACRONYMS LIST

AE	Adverse Event
AFP	Advance Family Planning
ALB	Albendazole
ASCEND	Accelerating Sustainable Control and Elimination of NTDs
BCC	Behavior Change Communication
CBO	Community-Based Organization
CDC	U.S. Centers for Disease Control and Prevention
CDD	Community Drug Distributor
CDI	Community-Directed Intervention
CES	Coverage Evaluation Survey
CHD	Child Health Days
COVID-19	Coronavirus Disease 2019
DFID	U.K. Department for International Development
DHIS2	District Health Information System 2
DQA	Data Quality Assessment
DRC	Democratic Republic of the Congo
DSA	Disease-Specific Assessment
EDC	Electronic Data Capture
EU	Evaluation Unit
FTS	Filariasis Test Strip
FY	Fiscal Year
GESI	Gender Equity and Social Inclusion
GPS	Global Positioning System
GTMP	Global Trachoma Mapping Project
HMIS	Health Management Information System
HSS	Health Systems Strengthening
IDM	Innovative and Intensified Disease Management
IEC	Information, Education, and Communication
IR	Intermediate Result
IVM	Ivermectin
JAP	Joint Application Package
KOICA	Korea International Cooperation Agency
LC	Local Council
LF	Lymphatic Filariasis
LOE	Level of Effort
M&E	Monitoring and Evaluation
MDA	Mass Drug Administration
MERLA	Monitoring, Evaluation, Research, Learning, and Adaptation
MMDP	Morbidity Management and Disability Prevention
MOH	Ministry of Health
NGO	Nongovernmental Organization
NMS	National Medical Stores
NOCP	National Onchocerciasis Control Program
NTD	Neglected Tropical Disease
NTDCP	NTD Control Program
OV	Onchocerciasis

PC	Preventive Chemotherapy
PELF	Program to Eliminate Lymphatic Filariasis
PTS	Post-Treatment Surveillance
PZQ	Praziquantel
Q1, Q2, etc.	Quarter 1, Quarter 2, etc.
R4D	Results for Development
REMO	Rapid Epidemiological Mapping of Onchocerciasis
SAE	Serious Adverse Event
SAFE	Surgery–Antibiotics–Facial cleanliness–Environmental improvements
SCH	Schistosomiasis
SCI	Schistosomiasis Control Initiative
SOP	Standard Operating Procedure
STH	Soil-Transmitted Helminths
STTA	Short-Term Technical Assistance
TAS	Transmission Assessment Survey
TEMF	Trachoma Elimination Monitoring Form
TEP	Trachoma Elimination Program
TF	Trachomatous Inflammation–Follicular
TIS	Trachoma Impact Survey
TOT	Training of Trainers
TSS	Trachoma Surveillance Survey
TT	Trachomatous Trichiasis
U.K.	United Kingdom
UNICEF	United Nations Children’s Fund
UOEEAC	Uganda Onchocerciasis Elimination Expert Advisory Committee
U.S.	United States
USAID	United States Agency for International Development
VB&NTDCD	Vector Borne and Neglected Tropical Diseases Control Division
VCD	Vector Control Division
WASH	Water, Sanitation, and Hygiene
WHO	World Health Organization
WI-HER	Women Influencing Health, Education, and Rule of Law

# NARRATIVE

## 1. NATIONAL NTD PROGRAM OVERVIEW AND SUPPORT

The Neglected Tropical Diseases Control Program (NTDCP) is located within the Vector Borne and Neglected Tropical Diseases Control Division (VB&NTDCD) of the Ministry of Health (MOH), which is within the Environmental Health Department. In 2007, all programs dealing with neglected tropical diseases (NTDs) that can be treated with preventive chemotherapy (PC), called PC-NTDs—onchocerciasis (OV), lymphatic filariasis (LF), trachoma, schistosomiasis (SCH), and soil transmitted helminths (STH)—were integrated, and the national NTDCP was established. The VB&NTDCD is headed by an Assistant Commissioner of Health Services, who also coordinates the NTDCP. The Assistant Commissioner is assisted by disease-specific program managers, senior program staff, scientists, technologists, and technicians. Within the NTDCP, the NTD Secretariat coordinates all NTD partners and sets the program’s strategic direction.

The NTDCP coordinates activities for the five PC-NTDs and the innovative and intensified disease management (IDM) NTDs.<sup>1</sup> Additionally, the MOH provides office space for NTDCP staff, salaries, and laboratory space and contributes to the procurement of laboratory equipment. At other levels of the health care delivery system, the MOH and district local governments recruit and provide salaries for staff in addition to the activities supported at the national level.

Within the MOH, the Top Management Committee, chaired by the Director General of Health Services, serves as the steering committee for all health-related programs, including the NTDCP. In addition, the NTDCP has a Technical Advisory Committee which comprises members of the Top Management Committee, program managers, and experts from other relevant institutions and research organizations. The Director General of Health Services, Minister of Health, State Minister for Health—General Duties, and State Minister for Health—Primary Health Care conduct program-specific, high-level advocacy in support of the NTDCP during visits with representatives of Parliament and meetings with visiting partner and funder delegations.

### Partner Support

The major donors supporting the NTDCP are the U.S. Agency for International Development (USAID), World Health Organization (WHO), the Korea International Cooperation Agency (KOICA), and the U.K. Department for International Development (DFID). Funding by the Queen Elizabeth Diamond Jubilee Trust, which previously supported the Trachoma Program, ended in March 2019. NTD implementing partners currently operating in Uganda include RTI International, The Carter Center, the Schistosomiasis Control Initiative (SCI), and World Vision. In 2019 the DFID Accelerating Sustainable Control and Elimination of NTDs (ASCEND) East grant was awarded to Crown Agents. ASCEND supports SCH mass drug administration (MDA), LF morbidity management and disability prevention (MMDP) in Teso Sub-region, and trachomatous trichiasis (TT) surgery. ASCEND will also support supply chain management, training on capturing NTD data in the health information management system (HMIS), and secondment of staff to the NTDCP to fill critical positions in the program.

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<sup>1</sup> IDM NTDs include human African trypanosomiasis, leishmaniasis, jiggers, Buruli ulcer, cysticercosis, tungiasis, rabies, leprosy, plague, and Guinea worm (which has been eliminated from Uganda).

## 2. IR1 PLANNED ACTIVITIES: LF, TRACHOMA, OV

### LF: Proposed FY21 Activities

As a result of the COVID-19 pandemic, the following LF activities in the approved FY20 country work plan were not completed in FY20 and Act | East Uganda proposes to conduct them in FY21:

- **Training and retraining of TAS team members:** This activity will be conducted by the MOH with financial and technical support from Act | East and will be completed before TAS. To strengthen the quality of filariasis test strip (FTS) administration, RTI will ensure that protocols and training materials emphasize TAS best practices, and electronic data capture (EDC) will be used to track all test results, including invalid tests.
- **TAS1:** In FY21, Act | East will provide financial and technical support to the NTDCP to conduct TAS1 in the eight districts that passed pre-TAS in FY19: Arua, Madi Okollo, Terego, Gulu, Kitgum, Lamwo, Maracha, and Omoro. These districts have all reported high treatment coverage, and few LF-positive cases were found during pre-TAS, so they all are expected to pass TAS1. These districts have been grouped into seven EUs, each with a population of <500,000: Arua, Terego, Maracha, Madi Okollo, Gulu, Omoro, and Kitgum + Lamwo. Data will be collected using EDC, uploaded onto the RTI server, and accessible by NTDCP staff for downloading and decision making.
- **TAS2:** With financial and technical support from Act | East, the NTDCP will conduct TAS2 in five districts in FY21: Tororo, Agago, Amuru, Nwoya, and Pader. These districts were grouped into three EUs for TAS1, but will be divided into five EUs for TAS2 in FY21, each with a population of <500,000: Tororo (2 EUs), Pader (1 EU), Agago (1 EU), and Amuru and Nwoya (1 EU). EDC will be used for TAS2.
- **TAS3:** With financial and technical support from Act | East, the NTDCP will conduct TAS3 in 40 districts (increased from 33 districts in FY20 due to redistricting). These districts were grouped into 19 EUs for TAS1 and TAS2, but they will be grouped into 31 EUs for TAS3 in FY21. This data will be collected using EDC.

### Dossier Status for LF Elimination

Uganda is currently on track to complete its final TAS3 in 2025 and submit the dossier in 2026. ENVISION previously provided technical and financial support to the Program to Eliminate LF (PELF) to develop the first draft elimination dossier in FY17 and FY18.

### *Proposed FY21 Activities for LF Dossier Support*

- **LF Dossier Preparation and Review Meeting:** As a result of the COVID-19 pandemic, the dossier preparation meeting approved in the FY20 country work plan was delayed, and Act | East proposes to conduct this activity in FY21. This will be a 2-day data review and consolidation meeting supported by Act | East to ensure that data is properly updated in the dossier for 2018–2021.



## Trachoma: Proposed FY21 Activities

- **MDA and Moroto (Karamoja) strategy:** In FY21, Act | East will provide financial, technical, and logistical support to the TEP and the Moroto District local government to carry out trachoma MDA in Moroto. All MDA-related activities supported by Act | East will include district planning meetings, microplanning, advocacy, sensitization meetings, community registration update, and relevant trainings. All activities will be supervised by MOH and Act | East staff and carried out according to the COVID-19 SOPs developed by the MOH. In FY20, Act | East conducted a qualitative survey to understand the factors related to recrudescence and persistent high rates of TF in Moroto, Nebbi, and Buliisa. Act | East and the NTDCP used the survey findings to design district-specific strategies for MDA implementation in FY20 and will continue to use the findings to guide implementation in Moroto District in FY21. Some of the activities were not carried out in FY20 due to the COVID-19 pandemic and will be implemented as part of the FY21 strategy for the district. The activities indicated below are derived from the DSA investigation and analysis of the qualitative survey results and are planned to be implemented in FY21 to improve treatment coverage in Moroto District.
- **Collection of data on water points and livestock markets:** This activity was planned in the approved FY20 work plan but has been postponed to FY21 due to COVID-19. Numerous water points and livestock markets exist in the Karamoja Region, and pastoralist communities congregate there to water and sell their animals. Act | East will collect data on water points and livestock markets from the relevant district and sub county offices and use this information to design and implement targeted mobilization and medicine distribution activities. (Level of effort [LOE] only.)
- **Cross-border strategy meeting:** This meeting was approved in the FY20 work plan but will now be conducted virtually in FY21 due to the COVID-19 pandemic. Act | East will provide logistical support in the form of data bundles to the Trachoma Program team to host a virtual cross-border meeting with an estimated 30 participants from Uganda, Kenya, and South Sudan. Participants at this virtual meeting will discuss implementation of the SAFE strategy across borders with a focus on synchronizing MDA activities and mapping infection hot spots across borders for targeted response. Participants will include district representatives from the border districts from each of the countries, partners operating within the region, and MOH officials. Information on infection rates and progress on SAFE interventions within the districts will be used to guide the discussions. Participating countries will use this meeting to identify and strengthen collaborative partnership and reporting frameworks within the region that will enhance program sustainability across borders.
- **Karamoja trachoma stakeholders' meeting:** This activity was planned in the approved FY20 work plan but has been postponed to FY21 due to COVID-19. Act | East will provide technical, logistical, and financial support for a deep-dive meeting with leaders from Karamoja Region to critically review the region's trachoma situation, the factors responsible for recrudescence in some districts, and what can be done at all levels of strategic investment to sustain a trachoma-free region. In addition to garnering political support, one of the meeting's goals will be to engage private sector investments in the region (e.g., from gold and marble mining industries) and explore how these investments can expand WASH infrastructure and contribute to sustained improvements in the F and E components. Act | East will facilitate consensus and stimulate continued engagement on resource mobilization (both direct government contributions and partner support) toward trachoma

elimination in Karamoja. Participants will include champions identified during the parliamentary breakfast meeting in FY19, the Minister of State for Karamoja, senior MOH officials, district and cultural leaders, and key SAFE stakeholders from border districts in the region. It is expected that a multi-sector task force will be selected during this meeting to coordinate and lead trachoma elimination efforts in the region.

- ***Sensitization of kraal, community, and cultural leaders as social mobilizers to increase coverage:*** District health workers will work with local leaders to identify *kraal* (village) and cultural leaders who will be trained by Act | East on social mobilization for MDA. These leaders will work within their *kraals* to promote MDA attendance and compliance.
- ***Sensitization of local government and community leaders:*** Act | East will fund a one-day meeting in Moroto District in FY21. The goal of this meeting is to advocate for district support and ownership of the trachoma MDA. The meeting will target technical, political, administrative, and civic leaders, including members of the District Health Team, Chief Administrative Officer, District Education Office, District Inspector of Schools, heads of health subdistricts, LC III chairpersons, Community Development Officers, district trainers, media representative, representatives from local CBOs/NGOs and religious institutions.
- ***MDA social mobilization activities:*** As part of the trachoma MDA, Act | East supports community dialogue and sensitization meetings with kraal and cultural leaders; announcements via town criers, public address systems and megaphones; radio talk shows, messages and jingles; and production of IEC materials. In FY20 Act | East completed a review and revision of trachoma behavior change communication (BCC) materials to link communication approaches to the socio-cultural context of the districts and promote adoption of prevention practices. In FY21, Act | East will provide financial and technical support for the production and dissemination of these revised materials and messages.
- ***District Microplanning with pastoralist communities:*** Micro-plans are essential tools for organizing health campaigns and provide an opportunity to develop community maps used by health workers to establish MDA distribution points. In FY21, Act | East will provide financial and technical support by developing guidelines to identify influential leaders in pastoralist communities and ensuring they develop micro-plans that will guide MDA implementation. Microplanning will emphasize a community participatory approach in engaging community leaders and VHTs in the pastoralist communities. This exercise will take into consideration the mobility patterns of these communities and the drug logistics required to reach these mobile population groups.
- ***MDA trainings:*** Act | East supports a series of refresher trainings for central level trainers and supervisors, district and subdistrict level supervisors (NTD focal persons, District Health Educators, Biostatisticians, District Health Officers, Health facility in charges, and record assistants), teachers, health workers and parish level supervisors, and CDDs.
- ***Registration and treatment of mobile populations, including kraals and new settlements:*** Mobile populations and new settlements are usually missed during MDA because they are, in most instances, not planned for. In FY21, Act | East will provide funds to enable district teams supported by central supervisors to plan and actively search for, register, and treat the mobile populations and new settlements during MDA. The MOH typically requests a buffer stock of drugs from ITI which can be used to treat newly identified settlements.

- **Enhanced MDA supervision:** Act | East has developed supportive supervision checklists, data verification guides, and an MDA coverage rapid assessment guide that will be used to enhance supervision and reporting. These tools will also be used to review subdistrict coverage data in the field and organize mop-up in areas that register low coverage. Due to the remote nature of the pastoralists' settlements, Act | East has allocated additional time, personnel, and supplies for enhanced supervision and data collection. The tools that will be used to enhance supervision include the following:
  - Supervision checklist: The supervision checklist guides the supervisor to follow through the MDA implementation process and ensure the stipulated MDA implementation guidelines are followed and timely remedial actions are taken where required.
  - Supervisors' MDA coverage rapid assessment guide: This will be used to guide the supervisors in identifying areas with low MDA coverage and reasons for the low coverage. It will therefore help guide the program in identifying and targeting communities that need mop-up. Training on this tool is integrated into the general training for central supervisors.
  - Data verification guide: This will be used by supervisors to validate data submitted and, where necessary, address the data errors identified in randomly sampled parishes.



Act | East MDA supportive supervision teams hold regular meetings at district and sub-county levels during MDA implementation to review MDA progress in the supervisory areas. These meetings will be used as a platform to understand and document how COVID-19 changes have affected MDA activities, if MDA implementation progressed as expected with COVID-19 SOPs, and if any adaptations to planned activities were needed to improve MDA performance. This activity aims to answer the learning question: "How has COVID-19 affected MDA activities?" Act | East and the TEP will document the results in the FY21 MDA implementation report and present them to the three trachoma districts during the MDA feedback meeting and to NTDCP during an NTD Secretariat meeting. In addition, the results will be presented during an Act | East monitoring, evaluation, research, learning, and adaptation (MERLA) roundtable discussion or Pause and Reflect session to facilitate cross-country learning around MDA program adaptations and lessons learned during the ongoing COVID-19 pandemic.

- **Trachoma district advocacy briefs:** One of the reasons for persistent trachoma in Moroto, Buliisa, and Nebbi was a lack of ownership of the trachoma situation by district leaders and their role in trachoma prevention to sustain the gains after MDA stops. As an advocacy approach to facilitate awareness of trachoma and encourage action by district leaders, Act | East and Trachoma Program staff will develop district advocacy briefs for these three districts and distribute them to leaders to help them understand the trachoma situation in their districts and its impact on socioeconomic development. These briefs will contain district-specific data and other information on the trachoma situation in the district.
- **Coverage evaluation survey (CES) in Moroto District:** As a result of the COVID-19 pandemic, three CESs approved in the FY20 work plan were not completed in FY20. Act | East proposes to conduct one of those CESs (in Moroto District) in FY21. Since Nebbi and Buliisa will conduct only one round of MDA in FY20 followed by TIS in FY21, these districts were de-prioritized for CES. Act | East will provide technical and financial support for the CES in Moroto, which will be conducted in Quarter 1 (Q1) FY21 after MDA in August 2020. The CES

will validate reported coverage and determine the predictors of drug compliance, based on the WHO CES guidance. The survey will incorporate questions on knowledge, attitudes, and practices, as well as WASH components. Data will be captured using EDC, uploaded onto the RTI server, and accessible by NTDCP staff for downloading and decision making. The CES will be supplemented by qualitative data collection focusing on how gender equity and social inclusion (GESI) factors affect MDA access and coverage (included in the Act | East Program Work Plan). The results of these surveys will be presented during the Karamoja stakeholders' and cross-border meetings to help understand the peculiarities of trachoma endemicity in the district and to some extent the region and other endemic areas across the borders of Uganda. This information will guide subsequent MDA planning.



Act | East will conduct a CES after the FY20 MDA in Moroto District to validate reported coverage. The CES will also be used to answer learning questions aimed at improving and strengthening trachoma MDA outcomes in vulnerable communities with high TF prevalence following failed trachoma DSA. This activity aims to answer the following learning questions:

- Are tailored MDA approaches effective in attaining high MDA coverage?
- How can results from tailored MDA and CES be used to enhance or modify district MDA operational plan in these areas?

Act | East will document the results in the CES report and in the semi-annual report and will present the results to the MOH during the NTD Secretariat meeting and to the district team.

- **TIS:** In FY21 Act | East will provide financial and technical support to conduct TISs in Nebbi and Buliisa. Each of these districts is considered an EU. Both districts failed TSS in 2019 and are scheduled for MDA in August–September 2020. TIS will be conducted using the Tropical Data system. A local Tropical Data certified master trainer and ophthalmologist will be engaged as a consultant to ensure quality of the trachoma surveys and provide technical support during the training of graders and recorders.
- **TSS:**
  - As a result of the COVID-19 pandemic, three TSSs approved in the FY20 work plan were not completed in FY20, and Act | East proposes to conduct them in FY21. These surveys will take place in Karenga, Kaabong, and Amudat. Each of these districts is considered an EU.
  - TSS is also planned in two districts that passed TIS in 2019—Nakapiripirit and Nabilatuk. Each of these districts is considered an EU. All TSSs will be conducted using the Tropical Data system.
- **Data quality assessment (DQA) in Moroto District:** As a result of the COVID-19 pandemic, the DQA approved in the FY20 country work plan was not completed in FY20, and Act | East proposes to conduct this activity in FY21. Act | East will provide technical and financial assistance to the NTDCP to carry out a DQA in Moroto District after the FY20 MDA, based on the WHO guidelines. Additionally, in line with failed DSA investigations, Act | East will provide financial, technical, and logistical support for the design and conduct of subcounty DQAs in eight sub counties. The sub counties surveyed will be randomly selected from the district NTD database, and data quality aspects such as completeness, integrity, and accuracy will be assessed. Village health teams will be interviewed to assess their ability to

complete the registers and summarize the data on a tally sheet. The outcomes will be shared during feedback meetings to determine actions to strengthen data quality during the next round of MDA.

- **Trachoma quarterly review meetings:** The Trachoma Program holds quarterly meetings to review progress toward trachoma elimination goals. Two quarterly meetings were planned in FY20 under Act | East but did not take place due to the COVID-19 pandemic. Participants discuss progress reports and plans for all the SAFE components. Additionally, participants identify best practices and challenges in order to update plans for the next quarter. MOH program and senior management staff, district-level staff, and Trachoma Program partners and consultants supporting SAFE strategy activities attend the meetings. Act | East will support two quarterly review meetings in FY21 and ASCEND will support the other two. These meetings will be combined with the dossier review meetings (please see below).
- **Trachoma transition and sustainability planning for SAFE in three districts:** Sustainability of the gains made in trachoma elimination in Uganda will partly rely on the districts being able to take ownership of the SAFE strategy. The engagement of the district and subcounty technical planning committees is vital to this effort. Act | East will provide financial and technical support to the Trachoma Program to conduct sustainability planning and transition sessions on the SAFE strategy in three districts in FY21.

#### **Dossier Status for Trachoma Elimination**

Uganda is expected to implement the final trachoma surveillance survey (TSS) in 2024, with subsequent dossier submission by 2025. A third draft of the dossier has been submitted to the MOH Technical Working Group and the NTD Technical Advisory Committee for review. The MOH has set up a trachoma review meeting that meets quarterly to discuss and refine trachoma data and supports dossier development.

#### ***Proposed FY21 Activities for Trachoma Dossier Support***

- **Dossier review meetings integrated with the quarterly trachoma review meetings.** Act | East will support two trachoma quarterly review meetings in FY21. The dossier committee will meet just prior to the quarterly review meeting to discuss updates to the elimination dossier (i.e., new MDA coverage or survey data), which will be shared during the quarterly meetings. A consultant will be hired to technically support the dossier development process.

## OV: Proposed FY21 Activities

- **Training:** Health workers who receive community-directed intervention (CDI) program strategy training often are transferred to non-OV-endemic areas, with the original position filled by health workers who have not received the CDI training. New training is necessary when community drug distributors (CDDs) and parish and community supervisors drop out of the program, and when new administrative units are created. Refresher training is also required for those who have remained in the program. Therefore, trainings of health workers, parish supervisors, community supervisors, and CDDs will be conducted in nine districts with support from Act | East.
- **MDA:** With Act | East funding, The Carter Center will conduct biannual treatment in nine districts in Madi-Mid North (Moyo, Adjumani, Amuru, Nwoya, Omoro, Gulu, Pader, Lamwo, and Kitgum). The Carter Center will support MDA in two districts in Madi-Mid North (Oyam, and Lira) and one district in Lhubiriba (Kasese) using funds from other sources.
- **Supervision for MDA:** With Act | East funding, The Carter Center will carry out supervision during MDA in nine districts. The supervision will be done at all levels by different personnel (national team, district, subcounty, parish, and community supervisors).
- **Onchocerciasis Elimination Expert Advisory Committee (UOEEAC):** The Carter Center, with Act | East funding, will assist the MOH to hold the annual UOEEAC meeting to review the progress of the program. The meeting will be held in Kampala in August 2021.
- **District OV coordinator meetings:** In addition to the UOEEAC meeting in August, Act | East will support the NOCP to conduct two district OV coordinator meetings. Participants at these meetings will review the progress of activities (e.g., discuss pre-MDA activities and treatments in the first meeting and review milestones and goal setting in the second meeting), share challenges, and discuss strategies to improve program performance.

## 3. IR2 SUSTAINABILITY AND HEALTH SYSTEMS STRENGTHENING (HSS) STRATEGY ACTIVITIES

### Improving Core NTD Program Functions

#### *Data Security and Management: Proposed FY21 Activities*

- **National planning and data review meeting:** Act | East will support one national planning and data review meeting in FY21 to address issues of data quality and accuracy, as well as review the data to discuss program performance. The meeting will bring together 35 participants including data managers from MOH and partner organizations, MOH program managers and senior program staff, staff from NMS, and district teams. This meeting will be held with the broader NTD Secretariat to ensure data harmonization among partners and to review data completeness in the WHO Integrated NTD Database. Prior to this meeting, RTI, the MOH and The Carter Center will hold an MDA data review meeting to discuss and agree on the validity of MDA data reported at the district level.
- **Integration of NTD indicators into HMIS:** Previously, ENVISION provided technical support for the development of MDA indicators that were included in the HMIS. In 2019, some MDA indicators were integrated into DHIS2. These indicators were reviewed during the NTD central supervisors' training in FY20, and there was collective agreement that some of the information was misrepresented. A meeting was proposed with the MOH resource center to correct the electronic reporting forms and update the trachoma MDA indicators to reflect



the latest azithromycin treatment guidelines. However, this was not completed due to the COVID-19 pandemic. This process will continue in FY21 with building consensus on new key NTD indicators, including gender-sensitive indicators, to be included in DHIS2. These indicators will disaggregate data by sex and age. This consensus will be anchored on a deliberate plan to expand the HMIS tools to capture all relevant data on MDA, morbidity management, and survey data. This will be done in coordination with ASCEND through the regular NTD Secretariat meetings. (LOE only.)



The Act | East Uganda MERLA team will conduct a desk review to understand barriers to NTD data access, sharing, and use as an approach to strengthen NTD coordination and collaboration at the national and subnational levels. This activity aims to answer the learning question: “What are the barriers to NTD-related data access, sharing, and use?” This activity will build off information gathered during the sustainability planning consultation. Act | East staff will conduct supplemental key informant interviews with MOH, district representatives, and partners to identify strategies, procedures, and processes to efficiently share data. Act | East will document the results in a lessons learned report and present it to MOH, partners, and districts during the data review meeting. The findings will be used to tailor strategies to improve NTD-related data access, sharing, and use. In addition, the results will be presented during a MERLA roundtable discussion to facilitate cross-country learning among Act | East countries and partners.

## ***Drug Management***

### ***Drug Management: Proposed FY21 Activities***

- **Routine procurement activities:** In FY21, Act | East will support drug storage and repackaging; drug transport from the national warehouse to the regions, and from regions to the distribution points; and delivery of IEC materials for MDA.
- **Reverse logistics:** Due to the COVID-19 pandemic and delayed implementation of MDA in FY20, the FY20 approved reverse logistics activity will now take place in FY21 Q1. Act | East will also fund a second round of drug inventory and reverse logistics to take place following the MDA in Moroto District in Q3. Reverse logistics following each MDA will include one MOH staff and one Act | East program staff, who will travel to the districts to take stock and confirm the medicine balance available for use in the next MDA.
- **District monitoring and reporting of SAEs:** Act | East will provide on-the-job training through LOE and support to Moroto District where MDA is supported, to properly report SAEs. Additionally, Act | East will support a two medical and surveillance officers in Moroto district to monitor, report, and facilitate the management of SAEs during MDA in case they occur.
- **High-quality submission of the JAP and Trachoma Elimination Monitoring Form (TEMF):** Act | East will continue to provide technical support through its MERLA Specialist and program team in the preparation of high-quality JAP and TEMF. (LOE only.)

## ***Achieving Sustainability: Mainstreaming & HSS***

### ***FY21 Planned activities***

#### **Governance activities (policy, financing, and coordination)**

- **Breakfast meeting to launch and disseminate the Uganda NTD Sustainability Plan:** Act | East will support the NTDCP to hold a one-day breakfast meeting to launch the Uganda NTD Sustainability Plan 2020–2025. The meeting will be held in Kampala and will be attended by senior management of MOH and invited guests from Ministry of Water and Environment; Ministry of Finance, Planning and Economic Development; and Ministry of Education and Sports; selected NTD stakeholders at the national level; and other dignitaries from WHO and USAID. This breakfast meeting will also be used to promote multi-sectoral collaboration and coordination in NTD programming.
- **Support NTDCP to promote NTD advocacy:** Act | East will help NTDCP influence the decisions of policy makers at the national and district levels on NTD programming. To achieve this goal, Act | East will first support the NTDCP to create an NTD advocacy subcommittee of the NTD Secretariat. The NTD Secretariat, with Act | East support, will hold a two-day session to **establish and orient the NTD advocacy subcommittee**. In this session, the members of the subcommittee will be taken through their ToR, current situation of NTDs in Uganda, challenges and gaps in NTD programming and next steps. Establishing the subcommittee requires preparation, review and approval of the ToR, and conducting an NTD secretariat meeting to select the seven-member team. The membership will comprise of MoH NTDCP staff, representatives from other sectors e.g. Water, Education and Local Government, and representatives of NTDs implementing partners.

Next, Act | East will hold a two-day **training session with the NTD advocacy subcommittee to adapt the Advance Family Planning (AFP) SMART<sup>2</sup> toolkit** for use in NTD programming.

Then, Act | East will hire a consultant to provide STTA to MoH-NTDCP to facilitate a 5-day workshop with NTDCP staff and the NTD advocacy subcommittee to **draft an advocacy strategy for NTDs** using the approach adapted from the AFP SMART advocacy toolkit. The strategy will focus on addressing policy and financing gaps identified in the Sustainability Plan, including data availability, policy alignment, GESI in NTD programming, and sustainable financing of NTDs in Uganda—in line with health sector strategic plans, national health financing strategies, and universal health coverage goals.

In support of NTD advocacy, RTI and R4D through STTA will conduct a **mapping exercise of key actors, governance structures, budgeting processes, and decision-making spaces** of NTD program budget allocation and overall health financing. R4D will lead the activity, while RTI will provide logistics support and assistance on the governance aspects of the mapping exercise. The exercise will inform the advocacy strategy and will provide inputs to the NTD financing subcommittee to guide budget allocation for NTDs at national and subnational levels. Then, Act | East will support the NTDCP to identify and package relevant data and develop customized messages to policy makers, based on a clear analysis of the NTD burden, GESI issues, NTD financial data, political salience, and return on investment. RTI and R4D will also facilitate a one-day training targeting selected MOH-NTDCP, and district local government staff on **processing, analyzing, and packaging NTD data** to develop an investment case for the NTD program in

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<sup>2</sup> Advance Family Planning (AFP) SMART advocacy approach is a three-phase process for effective advocacy strategy development that was developed by Bill and Melinda Gates Foundation in collaboration with Johns Hopkins School of Public Health to advance advocacy for reproductive health. Act | East will adopt this approach for NTDs advocacy strategy development and interventions. Toolkit details can be found through the following link:

<https://www.advancefamilyplanning.org/afp-launches-new-guide-smart-advocacy-facilitation>



Uganda. This training will enhance the MOH and district local governments' management of financial data and produce compelling reports on NTDs for different audiences that address financing and critical socio-cultural issues.

Using these advocacy messages and reports, NTDCP and the NTD advocacy subcommittee will conduct high-level advocacy and engagement activities with senior management of relevant ministries and six targeted local governments (Nebbi, Buliisa, Moroto, Nakapiripirit, Kaabong, and Amudat) to progressively increase domestic financing for NTDs and fully integrate NTD services into the essential minimum health care package. To do this, Act | East will hold **10 targeted advocacy and dialogue sessions**: two for parliamentarians, two for MOH Senior Management, and one in each of six districts. These meetings will be facilitated by selected members of the NTD advocacy subcommittee to provide high-quality data and evidence on key challenges to policy makers at the district level.

**Establish an NTD financing subcommittee to support coordination of health financing decisions and donor resources:** Act | East, through RTI and R4D, will provide technical support to the NTDCP to establish an NTD financing subcommittee from within the membership of the NTD Secretariat and the NTD Technical Advisory Committee. This subcommittee will coordinate donor and government funding for NTDs, define annual criteria/guidelines for budget allocation, and advise on funding prioritization of NTD services and activities at national and subnational levels, considering disease elimination trajectories. The NTDCP will engage the NTD Secretariat, the MOH Multi-Sectoral Coordination Department, and the MOH Budget and Finance Department on the establishment of this subcommittee within the NTD Secretariat, with members from both departments to support the coordination of health financing decisions and donor resources. Once established, R4D will build the capacity of this subcommittee to strategically coordinate NTD funding in Uganda. With this goal, R4D will facilitate a one-day workshop to develop a sustainable financing strategy for NTDs through which the NTDCP will advance priorities and activities established in the NTD Sustainability Plan. This will be a workshop involving participants from the MOH; Ministry of Finance, Planning and Economic Development; donors; and selected stakeholders. Implementation of this activity will be coordinated along with development of the advocacy strategy mentioned above. Additionally, an R4D consultant will attend the committee meetings in an advisory capacity to share findings from other health financing activities and identify opportunities to better link planning, budgeting, and intended results for NTDs.

- **Conduct a detailed assessment of financial and programmatic records:** In collaboration with RTI, R4D will provide technical support to the MOH to collect and examine the detailed financial and programmatic records of major donor-funded NTDs initiatives in Uganda and identify ways of integrating this financial data into the Integrated Financial Management System<sup>3</sup>. Act | East also will provide the NTDCP with technical support to access NTD off-budget financial data and unpack government health budgets to identify which NTD programming inputs are financed through which budget votes, programs, and line items. This activity will be developed after conducting the mapping exercise through which the NTDCP will achieve effective multi-stakeholder engagement. As a result of this activity, the

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<sup>3</sup> IFMS is a fiscal and financial management information system for government that bundles all financial management functions into one suite of applications. It is an IT-web based budgeting and accounting system that assists government entities to initiate, spend and monitor their budgets, initiate, and process their payments, and manage and report on their financial activities.

MOH will routinely collect NTD financial data, including current NTD revenues and expenditures from all sources, and be able to perform financial analyses and forecasts to identify gaps. This activity supports the sustainability goal of transitioning from external donor funding and effectively coordinating health financing decisions and donor resources.

- **Define and collect data on IR2/3 Indicators for Uganda:** In FY21, Act | East will support data collection and reporting to track progress toward sustainability in Uganda. Act | East will work with the MOH to select relevant indicators currently under development based on USAID's Working Paper (*USAID NTD Program: Framework and Strategy for the Promotion of Sustainability*), and draft country-specific definitions, milestones, targets and processes in line with the host government's priorities identified through Uganda's NTD sustainability planning consultation and NTD Sustainability Plan. Data will be collected in FY21 and reported to USAID during the semiannual reporting periods. (LOE only.)
- **Support GESI integration:** Based on the activities laid out in the GESI Action Plan, WI-HER will provide additional, ongoing technical assistance for integrating and mainstreaming GESI considerations in FY21. This will include integrating GESI aspects into social mobilization campaigns, M&E efforts, research and data collection approaches, community engagement efforts, and MDA plans and activities; developing innovations in training; using a GESI lens for NTD plans and budgets; and coordinating with other donor-funded projects on gender integration in NTDs. WI-HER and RTI will also work together to add additional indicators to measure the outcomes and impact of GESI integration and mainstreaming activities. (LOE only.)
- **Conduct a workshop for integration of GESI into MOH MDA training manuals:** RTI and WI-HER will provide financial and technical support to the NTDCP to review the MDA training manuals and update them with a GESI component. Emphasis will be on addressing issues such as adequately reaching migratory populations and people out of school, poor health-seeking behavior of men with hydrocele, women with TT not accessing surgery, etc. Act | East will then support the roll-out of the updated MDA training manual with integrated GESI components for trachoma MDA at the district and sub-district levels.



Act | East will begin to address the learning question "How is GESI integration in NTD programming effecting MDA access and coverage?" In FY21, Act | East will focus on gathering baseline information on stakeholder experiences integrating GESI into MDA programming and will describe the process of GESI integration into NTD programming in FY20. We will look at reported coverage from FY20 MDA, CES results, and qualitative data to establish a baseline understanding of GESI influence on MDA coverage and access, as part of the package of MDA interventions. After GESI has been integrated into MDA training materials, we will then look at FY21 MDA coverage to investigate the effects of this change to the package of MDA interventions. This learning activity will extend into FY22 since MDA coverage data will likely not be available until September 2021. We will aim to use this information to revise and strengthen the package of MDA interventions in preparation for FY22 MDA. Act | East will plan to share findings in a NTD Secretariat meeting and during advocacy meetings at both the national and district level.

## Other activities

- **Documentation of HSS activities:** To ensure visibility of the HSS activities and to have information for future reference, HSS activities will be documented through print and electronic formats and used in advocacy briefs and reports as may be required. Specifically, Act | East will produce an advocacy strategy; targeted advocacy messages; and reports on mapping of NTD commitments, donor financial records, and decision-making spaces.

#### 4. IR3 PLANNED ACTIVITIES: SCH/STH

##### SCH/STH: Proposed FY21 Activities

- **SCH/STH Expert Committee:** This activity was approved in the FY20 country work plan but was delayed as a result of the COVID-19 pandemic; Act | East proposes to conduct this activity in FY21. Among the challenges cited by stakeholders and the Honorable Minister of Health is the lack of a specific forum to handle key programmatic issues and provide recommendations toward SCH/STH control. In FY21, Act | East will provide financial support for one in-person and one virtual SCH/STH Expert Committee meeting, including technical support during the discussions of the expert committee. Draft terms of reference for the committee were developed in FY20 with technical support from Act | East. The aim is for these to be reviewed by the NTD Technical Advisory Committee and endorsed by the Minister of Health by end of FY20. Similar to the UOEEAC, this committee will be composed of international experts; local experts; MOH; Ministry of Local Government; Ministry of Water and Environment; Ministry of Gender, Labour and Social Development; and representatives from academia, the Equal Opportunities Commission, and gender-focused civil society organizations. At least one-third of the committee members will be women.
- **NTD Technical Advisory Committee meeting:** In FY21, Act | East will provide financial support for a one-day meeting for the NTD Technical Advisory Committee, where committee members will review program performance, identify priorities, discuss implementation strategies including programmatic adaptation based on lessons learned, define NTD indicators for the national HMIS, and provide inputs into the dossiers and manuscript development. The meeting will be attended by 24 members, 12 of whom will be the NTD Technical Advisory Committee members, 8 from the MOH, and 4 from Act | East.
- **Act | East end-of-year program evaluation and review retreat:** The Act | East program team of 14 staff will hold a 3-day Pause and Reflect session outside of Kampala to assess the program against annual targets, and to inform programmatic adaptation based on that progress. The meeting will also be used as a capacity building opportunity for staff to increase staff cohesion, align staff to the goals of the project, and provide leadership and management training for the staff to help teams develop the competencies and motivation that will steer the program.