

Uganda Work Plan

FY 2020

Program Year 2

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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.

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ACRONYM LIST

BCC	Behavior Change Communication
CDI	Community-Directed Intervention
DFID	U.K. Department for International Development
DRC	Democratic Republic of the Congo
EU	Evaluation Unit
FY	Fiscal Year
GAP	Gender Action Plan
HMIS	Health Management Information System
HSS	Health Systems Strengthening
IDM	Innovative and Intensified Disease Management
IEC	Information, Education, and Communication
IR	Intermediate Result
KOICA	Korea International Cooperation Agency
LF	Lymphatic Filariasis
MDA	Mass Drug Administration
MERLA	Monitoring, Evaluation, Research, Learning, and Adaptation
MMDP	Morbidity Management and Disability Prevention
MOH	Ministry of Health
NTD	Neglected Tropical Disease
NTDCP	NTD Control Program
OV	Onchocerciasis
PC	Preventive Chemotherapy
PTS	Post-treatment Surveillance
R4D	Results for Development
SAE	Serious Adverse Event
SAFE	Surgery–Antibiotics–Facial cleanliness–Environmental improvements
SCH	Schistosomiasis
SCI	Schistosomiasis Control Initiative
STH	Soil-Transmitted Helminths
TAS	Transmission Assessment Survey
TEP	Trachoma Elimination Program
TF	Trachomatous Inflammation–Follicular
TIS	Trachoma Impact Survey
TSS	Trachoma Surveillance Survey
TT	Trachomatous Trichiasis
U.K.	United Kingdom
U.S.	United States
USAID	United States Agency for International Development
VCD	Vector Control Division
VHT	Village Health Team
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

The Neglected Tropical Diseases Control Program (NTDCP) is located within the Vector Control Division (VCD) 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 VCD is headed by the 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.¹ Additionally, the MOH provides office space for NTDCP staff, compensates salaries, provides 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 delegations.

2. INTERMEDIATE RESULT 1 (IR1) PLANNED ACTIVITIES: LF, TRACHOMA, OV

Lymphatic Filariasis

Proposed FY20 Activities for LF

- **Mapping in refugee settlements:** Act | East will provide support to the NTDCP to conduct LF mapping in refugee settlements in four districts: Hoima, Kiryandongo, Kyegegwa, and Kamwenge. The refugee settlement in these districts are Kyangwali, Kiryandongo/Panyandoli, Rwamwanja, and Kyaka 2. These settlements host refugees from endemic areas in the Democratic Republic of the Congo (DRC) and have not previously been mapped.
- **Training and retraining of transmission assessment survey (TAS) team Members:** This activity will be conducted by Act | East and will be completed before TAS. To ensure FTS quality control the following will be done: training documents and presentations which emphasize TAS best practices will be used, EDC will be used to track invalids, and a regional TAS workshop will be held.
- **TAS1:** Nine districts passed pre-TAS in FY19. In FY20, Act | East will provide support to the NTDCP to conduct TAS1 in the nine districts that passed pre-TAS: Mayuge, Namayingo, Bugiri,

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

Arua, Gulu, Kitgum, Lamwo, Maracha, and Omoro. These districts have all reported repeated 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 five evaluation units (EUs). These EUs are grouped according to population, geography, and history of mass drug administration (MDA) coverage rates. Data for the survey will be captured electronically using electronic data collection (EDC), uploaded onto the RTI server, and accessible by NTDCP staff for downloading and decision-making.

- **TAS2:** With support from Act I East, the NTDCP will conduct TAS2 in five districts in FY20: Tororo, Agago, Amuru, Nwoya, and Pader. These districts were grouped into three EUs for TAS1. Given that no LF-positive cases were found in TAS1 and the population is less than 500,000 in each EU, they will continue to be grouped into three EUs. EDC will be used for TAS2.
- **TAS3:** With support from Act I East, the NTDCP will conduct TAS3 in 33 districts. These districts were grouped into 19 EUs for TAS1 and TAS2. Given that all EUs with more than one district had no LF-positive cases in TAS1 and TAS2 and the population is less than 500,000 in each EU, they will continue to be grouped into 19 EUs. This data will be collected using EDC.
- **LF Dossier Preparation Meeting:** A one-day data review and consolidation meeting supported by Act | East is planned for FY20 to ensure that data are properly captured, and updates are made to incorporate data and information from previous years.

Trachoma

Proposed FY20 Activities for Trachoma

- **Trachoma Surveillance Surveys (TSS):** In FY20, the Trachoma Elimination Program (TEP), through Act | East, will conduct TSS in three districts—Karenga, Kaabong, and Amudat; each district is considered an EU in Uganda. All data will be collected using the Tropical Data system.
- **Trachoma Mapping in Refugee Camps (surveys for 7 camps):** Mapping of refugee settlements from South Sudan was previously conducted; however, mapping has not been conducted in camps with refugees from the DRC. In FY20, Act | East will provide support for baseline mapping in six refugee settlements: Rwamwanja, Kyaka 2, Lobule, Kyangwali, Nakivale, and Orukyinga.
- **Failed DSA assessment and MDA in Nebbi and Buliisa:** At the end of FY19, RTI learned that Nebbi and Buliisa failed TSS surveys. These districts had trachomatous inflammation–follicular (TF) prevalence of 7.7% (Nebbi) and 5.8% (Buliisa). The MOH, with Act | East support, plans to conduct a failed DSA assessment and MDA in these two districts. RTI has already begun assisting the MOH with a desk review of recent and previous survey information, and the MOH has contacted the International Trachoma Initiative to request additional Zithromax® for the MDA. More details about the MDA strategy, including timing, will be shared with USAID following the failed DSA assessment.
- **MDA and Moroto (Karamoja) strategy:** In FY20, Act | East, will provide support to TEP and the Moroto District local government to carry out trachoma MDA. All MDA conducted by Act | East will include district planning meetings, micro-planning, advocacy and sensitization meetings, and relevant trainings (included in budget and budget narrative). Given the trachoma impact survey (TIS) failure in Moroto, Act | East will carry out investigations before MDA to understand the factors explaining persistently high TF prevalence in the district, in line with programmatic preferred practices for DSA outcome investigations, as identified by ENVISION. Both qualitative and quantitative methods will be applied. Act I East will use the results of the investigations to

guide the drafting and implementation of a Karamoja strategy. The results of the investigation will improve the design and implementation of the activities implemented by Act | East which are listed below:

- *Microplanning with pastoralist populations:* Micro-plans are essential tools for organizing health campaigns and are used to develop community maps used by health workers to establish MDA distribution points. In FY20, Act | East will identify influential leaders in pastoralist communities and ensure that they develop micro-plans that will guide MDA implementation. This exercise will take into consideration the mobility patterns of these communities.
- *Training of kraal leaders as social mobilizers to ensure increased coverage:* District health workers will work with local leaders to identify *kraal* (village) 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.
- *Coordinated MDA:* Given that pastoralists rarely recognize international borders, coordinating the response between Kenya and Uganda has become a major priority. Perceived availability of better services on the other side of the border, such as schools, health centers, water points, and markets, often triggers migration. Given this perception, Act | East will work with the MOH to ensure that MDA occurs at the same time on both sides of the Kenyan and Ugandan border. Plans for cross-border coordination will be developed at the International Coalition for Trachoma Control cross-border meeting in FY19.
- *Collection of data on water points and livestock markets:* Numerous water points and livestock markets exist in the Karamoja Region. Data on these two types of locations identify places where pastoralist communities congregate to water and sell their animals. Act | East will work with the Veterinary Department and the Department of Water Resources through the Minister for Karamoja Affairs to obtain data on water points and livestock markets. This information will be used to inform mobilization and microplanning for MDA implementation.
- *Cross-border strategy meeting:* Act | East will support a cross-border meeting among Uganda, Kenya, and South Sudan to agree on cross-border coordination and collaboration efforts with regard to the Surgery–Antibiotics–Facial cleanliness–Environmental improvements (SAFE) strategy and synchronizing MDA activities. This will be attended by 25 participants from the three countries.
- *Planning meeting with Karamoja on Drug Logistics:* Act | East will support this coordination meeting to ensure that hard-to-reach districts and pastoralists are reached through drug distribution.
- *Karamoja trachoma stakeholders meeting:* Act | East will support a meeting in the Karamoja region to garner political support for NTD and better WASH infrastructure.
- *Behavior change communication (BCC) materials for pastoralists:* There are few printed communication products specifically for pastoralists of the Karamoja Region because of the migratory nature of the region. BCC products will be produced and tested, that feature traditional settings, including camels, livestock, and pastoralist housing to be culturally appropriate. Similarly, radio content related to MDA implementation will also include pastoralist topics of interest to draw more pastoralist audiences. Act | East will

engage a social mobilization consultant to provide technical support to the NTDCP to develop these products.

- *Enhanced MDA Supervision and Trachoma MDA Taskforce:* Due to the remote nature of the pastoralists’ settlements and that Moroto is generally hard to reach, Act | East has allocated additional time and supplies for enhanced supervision. Additionally, a taskforce of community members will support trachoma control efforts and encourage social mobilization in areas of low coverage/will work to increase compliance among hard to reach populations.
- **Coverage validation survey in Moroto, Nebbi, and Buliisa districts:** Act | East will provide technical and financial assistance to the MOH to conduct a coverage validation survey in Moroto, Nebbi and Buliisa together with the DQAs to validate the reported coverage and determine the predictors of drug compliance, based on the WHO coverage evaluation survey guidance. This survey will also incorporate questions on knowledge, attitudes, and practices as well as on WASH. Data for the survey will be captured electronically using electronic data collection (EDC), uploaded onto the RTI server, and accessible by NTDCP staff for downloading and decision-making.
- **Data quality assessment in Moroto, Nebbi, and Buliisa districts:** Act | East will provide assistance to the NTDCP to carry out a data quality assessment in Moroto, Nebbi and Buliisa districts after MDA, based on the WHO data quality assessment guidelines. Additionally, in line with failed DSA investigations Act | East will support sub-county DQAs in 8 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 (VHTs) will be interviewed to assess their ability to complete the registers and summarize the data on a tally sheet. The outcomes will be documented and shared during feedback meetings for action.

Dossier Support

The TEP embarked on drafting the “A” component of the trachoma dossier in December 2018 with ENVISION technical support; the dossier process for the other components (S, F, and E) had been started earlier. In 2019, two dossier retreats, bringing together the MOH and all the SAFE partners, were held. A consultant facilitated compilation of the initial draft and editing of the draft dossier. The MOH has set up a trachoma semi-annual review meeting that meets quarterly to discuss and refine trachoma data and supports dossier development. The dossier committee meeting takes place prior to the quarterly trachoma review meeting.

Onchocerciasis

Proposed FY20 Activities for OV

- **Entomological surveys:** The Carter Center will provide assistance to the MOH through Act | East to collect vector samples as specified below. USAID is only supporting collection and not laboratory analysis of samples.
 - Lhubiriha focus: Act | East will support fly collection and crab monitoring.
 - Madi-Mid North focus: Act | East will support fly collection.
 - Wadelai focus: Act | East will support fly collection.

- Budongo focus: as part of post-treatment surveillance (PTS); Act | East will support fly and crab collection in Waki-Siiba and Kasokwa sub-foci.
- Bwindi focus: as part of PTS, Act | East will support fly collection.
- Nyagak-Bondo focus: as part of PTS, Act | East will support fly collection.
- **Cross-border surveys:** Through TCC, Act | East will support Ugandan and Sudanese MOH staff to conduct entomological surveys (sample collection) in Madi-Mid North focus in areas of South Sudan adjacent to the Ugandan districts of Moyo and Adjumani.
- **Impact surveys:** Impact surveys will be conducted in the foci where OV has been interrupted (Wadelai, Maracha-Terego, Obongi, Nyamugasani, Budongo, Bwindi), suspected (Nyagak-Bondo), and ongoing (Lhubiriha, Madi-Mid North). Act | East will support vector monitoring activities including fly collection, but no laboratory analysis.
- **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 CDI training. New training is necessary when community drug distributors 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. The trainings will be conducted by Act | East in 14 districts (Kasese, Moyo, Adjumani, Amuru, Nwoya, Omoro Gulu, Pader, Lamwo, Kitgum, Nebbi, Zombo, Arua, and Madi-Okollo).
- **MDA:** With Act | East and other support, The Carter Center will conduct biannual treatment in 14 districts of the Nyagak-Bondo, Lhubiriha, and Madi-Mid North foci.² Act | East will also support training prior to MDA.
- **Supervision for MDA:** With Act | East and other support, The Carter Center will support supervision during MDA by the national team, district- and sub-county-level parish supervisors, and community supervisors.

Learning Questions

The Act | East Project proposes focusing on four learning questions (see list below) in Uganda in FY20. These questions are preliminary and will be agreed upon in consultation with USAID and pending the finalization of the Act | East program-wide learning agenda. Once finalized, additional information around the proposed activities to assist in answering these questions will be developed. The proposed questions are as follows:

1. Which health systems strengthening (HSS) components are relevant to the sustainability of NTD programs and how do we measure the impact of HSS support?
2. Lessons learned from Karamoja: Assessment of risk factors for trachoma, including cross-border migration, evaluation of MDA impact, and planning for future implementation of the SAFE strategy
3. Strategies for NTD surveillance: Engaging the health care system in morbidity management and disability prevention (MMDP) case identification and linking to management, and improving reporting of data for decision making.

² Nyagak-Bondo focus: Nebbi, Zombo, Arua, Madi-Okollo; Lhubiriha focus: Kasese; Madi-Mid North focus: Pader, Kitgum, Gulu, Omoro, Amuru, Nwoya, Oyam, Lira, Moyo, Zombo, and Adjumani.

4. Sustaining NTD program ownership: Investigation of advocacy opportunities and barriers, and the role of microplanning at the district level.

3. SUSTAINABILITY STRATEGY ACTIVITIES (IR2 AND IR3)

Data Security and Management

Proposed FY20 Activities for Data Security and Management

- **Data review meetings:** There will be two MDA data review meetings— **The MDA Data Review Meeting** between RTI, the MOH, and The Carter Center to discuss and agree on the validity of the MDA data at the district level. The second, **the National Planning and Data Review Meeting** will be held with the broader NTD Secretariat to ensure data harmonization between partners and data completeness in the WHO Integrated NTD Database.
- **Mainstreaming NTD data into health management information systems (HMIS):** Previously, ENVISION provided technical support in the development of MDA indicators that were included in the HMIS. This process will continue in FY20 through on the job training and coaching from the Act | East Monitoring, Evaluation, Research, Learning, and Adaptation (MERLA) Specialist. The indicators to be included in the HMIS are program coverage, epidemiological coverage, and geographical coverage.

Drug Management

Proposed FY20 Activities for Drug Management

- **Act | East support of routine procurement activities:** Drug transport from the national warehouse to region, delivery of information, education, communication (IEC) materials, drug transport from the regions to distribution points, reverse supply chain of diagnostic stock post-MDA, drug storage, drug repacking.
- **District monitoring and reporting of serious adverse events (SAEs):** Act | East will provide on the job training and support to all districts where MDA is supported, to properly report SAEs.
- **High Quality Submission of JAP or TEMF:** Act | East will continue to support high quality submission of the JAP and TEMF.

Mainstreaming and HSS Activities (IR2)

Proposed FY20 Activities for HSS

In FY20, Act | East will work with the NTDCP to support HSS-related activities based on findings from the planned assessments. The HSS Advisor, in conjunction with the Act | East Uganda team, will provide technical assistance to the NTDCP. Additional support will be provided through short-term technical assistance from RTI and its partners, with a focus on supporting policy development, integration of NTD planning and services within the health sector and beyond, mainstreaming gender and social inclusion into NTD programming, improving domestic resource mobilization, and strengthening NTD advocacy capacity. In addition, preparatory work, such as the development of an NTD program sustainability plan, will be conducted for establishing a bilateral sustainability agreement between USAID and the Government of Uganda. The document will outline agreed-upon formal commitments in support of the national NTDCP from both parties. Act | East will collaborate with other partners and work closely with the WHO country office in Kampala to better understand best practices for HSS in Uganda and leverage existing resources.

Illustrative activities include the following:

- **Combined sustainability assessment validation and gender analysis launch:** This 5-day meeting will bring together key stakeholders such as MOH; USAID Mission, Ministry of Finance, Planning, and Economic Development; Ministry of Local Government; NTDCP; Ministry of Education; and regional and district officials to discuss the findings of the HSS and gender assessments conducted by the Act | East Program and NTDCP in FY19. This meeting will also serve as an advocacy tool to support the development and launch of an NTD program sustainability plan. The meeting will involve representatives from the districts where Act | East operates, key stakeholders within the MOH, and two NTD champions identified during the parliamentary advocacy breakfast in FY19 (mentioned below under “NTD advocacy kit and capacity building”).
- **Gender action plan (GAP):** The GAP will be developed based on findings from the gender and NTDs desk review and the Uganda gender analysis and will strategically connect to the Act | East Global Gender Strategy and Program objectives and activities. It will address how to integrate gender into national policies and programs, as well as Act | East activities, in order to reach national objectives and Act | East Program goals. It will have specific activities, objectives, and indicators, and will apply to the remaining years of the program.
- **Gender and social inclusion training and scale-up:** The training and associated cascade trainings will be informed by the gender analysis and will involve key NTD program implementers at the national and regional levels. The training will consist of sensitization on key gender and NTD issues and training in specific knowledge, skills, and/or behaviors that will strengthen policy development, strategic planning, and program design around NTDs, and will improve service delivery practices and monitoring. Participants will also be trained on how to conduct these trainings on their own and will be provided with facilitator guides and continuous supportive supervision and monitoring as they scale these gender trainings and activities at the district levels.
- **Gender integration and monitoring support:** Based on the activities laid out in the GAP, WI-HER will provide additional, ongoing technical assistance for integrating and mainstreaming gender. This could include integrating gender into social mobilization campaigns, monitoring and evaluation efforts, research and data collection approaches, community engagement efforts, and MDA plans and activities; developing innovations in training; mainstreaming gender into 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 the gender integration and mainstreaming activities.
- **Policy development support:** As the Health Sector Development Plan ends in 2020, support will focus on policy analysis, costing, or NTD curriculum development for health providers that strengthens the discussion of NTDs in the new plan. These inputs will help the NTDCP place NTDs on the wider health sector agenda and inform the NTD Master Plan when it is developed in 2021.
- **Donor and cross-sectoral collaboration on NTD mainstreaming efforts:** This collaboration is required to ensure high quality implementation of NTD activities that are mainstreamed into existing programs. The Act | East program will support ongoing donor and cross-sector coordination efforts, such as the SCH/STH expert committees, through targeted technical assistance (e.g., workshops, briefs, coaching, and analysis) that supports stakeholders to collaborate on NTD programming. This activity will also focus on strengthening collaboration between the health and education sectors for NTD programming. This work will build on the political economy analysis conducted in FY19.

- **NTD advocacy kit and capacity building:** This activity will incorporate several elements, such as the development of an advocacy kit for NTDCP to promote greater domestic visibility, support, and investment for NTD programming. The kit will be used at all levels to guide advocacy efforts of the program, including in other functions, events, and avenues that are not entirely NTD specific, e.g., in Parliament and council meetings, and at the ministerial level. The advocacy kit also includes the development of a budget cycle brief to help stakeholders understand what processes they can influence at specific times of year. In addition, Act | East will support several working meetings with key Government of Uganda decision makers to put NTD challenges on their radar, including the breakfast meeting with Ugandan MPs .

These activities will be coordinated by the HSS Advisor and will require technical assistance from both international and local experts.

- **Health financing analytics:** Act | East expects that after the sustainability assessment, financing will emerge as a major factor for NTD sustainability in Uganda. This is based on ENVISION’s experience in country and Act | East’s understanding of the country context. Results for Development (R4D) will lead a health financing analytics activity as input to the country’s sustainability planning process, based on priority needs and gaps identified in the sustainability assessment. Example activities include conducting a more detailed NTD resource mapping across levels of government and key donors and supporting government to adapt and use planning and budgeting tools. Additionally, Act | East will support two meetings for four days that compliment this activity.
- **Health financing technical assistance and capacity building:** R4D will provide ongoing training and support for the country team’s HSS Advisor and other staff as deemed necessary. This will include contributions to those team members’ technical on-boarding and ad hoc technical support and backstopping. An R4D expert will also visit the country to conduct more in-depth technical orientations with the team and, if needed, with government counterparts, as well as to support ongoing health financing analysis and dialogue with government and other stakeholders. Following orientations, Act | East will support one two-day meeting will take place to support capacity building in country.

SCH, STH, Post-Validation/Verification Surveillance (IR3)

Proposed FY20 Activities for SCH/STH

- **SCH/STH expert committee:** Act | East will support an SCH/STH expert committee to help discuss key programmatic issues and provide recommendations toward SCH control moving forward. This committee will be composed of international experts, local experts, MOH, Ministry of Local Government, Ministry of Water and Environment, and representatives from academia.

