

USAID Regional Health Integration To Enhance Services in East Central Uganda (2016-2022).

Augustin Muhwezi-Chief of Party

Ahmed Luwangula-Senior Technical Advisor,

Nutrition/WASH



University Research Co., LLC Center for Human Services

Facility renovations

Maternity Units

Laboratories

Photo gallery

Overview

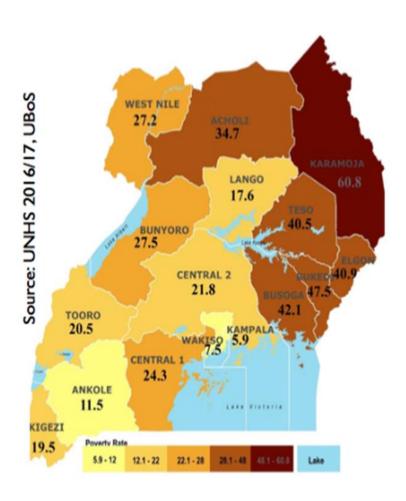
Program Description:

- To increase utilization of health services by: strengthening health systems; increase availability of, access to and demand for quality health services; and supporting the health sector to sustain higher health service utilization rates.
- Interventions integrated health services (malaria; reproductive, maternal, newborn and child health; family planning; nutrition; water sanitation and hygiene; HIV prevention, care and treatment; tuberculosis; laboratory services; and health systems strengthening)
- Reach: 12 districts, Population of 4.2 Million
- Implementing Partner: University Research Co. LLC
- Partners: TASO, Youth-Alive, CDFU, MJAP, CSOs

Results and Intermediate Results (IRs)

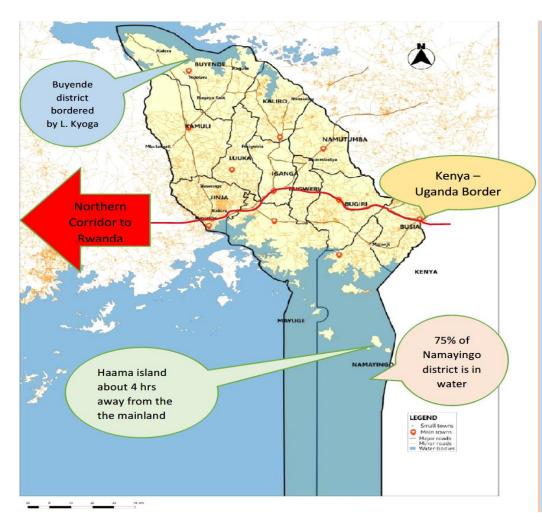
- Result 1: Increased availability of and accessibility to health services
 - IR 1.1 Proven high impact facility and community-based health interventions implemented
- Result 2: Improved quality of health services
 - IR 2.1 Routine use of Quality Improvement approaches and methods strengthened at district, healthcare facility and community levels.
 - IR 2.2 Quality of health services improved through renovations
- Result 3: Increased availability of resources for public sector health services
 - IR 3.1 Increased recruitment, retention & management of the Health care workers.
 - IR 3.2 Reduced stock out rates of affordable medicines and health supplies and improved rational use of these drugs.
- Result 4: Improved organization and management of service delivery
 - IR 4.1 Improved mechanisms for evidence-based planning and decision-making
 - IR 4.2 Capacity for management of decentralized service delivery in target districts strengthened.
- Result 5: Increased adoption of healthy behaviors & positive child development practices by communities in focus areas and target population groups
 - IR 5.1 Knowledge, awareness, attitudes, and practices about key health issues improved.

Context: East Central Region Unique Socio-demographic characteristics



- 4,484,600 Population of EC Region with 55% less than 18 years
- A mix of new and old districts; new districts have minimal HR and infrastructure
- 42.1% of population in poverty-\$1.9/day (third highest in Uganda) –and associated food insecurity
- Very low levels of literacy in many communities limited use of IEC materials
- School drop-out rates: 41% complete primary;7.2% complete
 O' level and only 2.2% finish A' level
- High teenage pregnancy rates (25%) indicating early sexual activity
- Very high fertility rates:6.9 (National 5.8)
- Most communities served by HCIIs that are severely underresourced – 70% of 531 healthcare facilities are HCIIs (Nationally 54%): hence the need for a large outreaches program,
- Unique socio-economic factors and socio-cultural, religious and gender norms that significantly negatively impact demand, uptake and continuous utilization, and many times delivery, of services

Context continued....



- The region is surrounded by large water bodies (L. Kyoga in the north and L. Victoria in the south) with multiple fishing communities around the lake-shores (landing sites)
- Hard-to-reach severely under-resourced sites and communities in Island districts of Namayingo and Mayuge districts
- The Northern Transport Corridor (Mombasa to Kigali) traverses 6 districts of the region (Bugiri, Busia, Bugweri, Iganga, Mayuge and Jinja) facilitated mobility and economic activity for the key and priority populations which compound the HIV transmission and ART retention dynamics
- Widespread GBV:46.3% of all women who have experienced physical violence since age of 15 years –affects uptake and retention of HIV services by women and children (UDHS 2016)

Selected Programmatic Achievements – Result 1

	Year I (2016/2017)		Year 2 (2017/2018)		Year 3 (2018/2019)		Year 4 (2019/2020)		
Key Performance Indicators		Target	Actual	Target	Actual	Target	Actual	Targ et	Actual
Malaria									
	80-100%								
Percentage of malaria cases treated that were confirmed by mRDT or Microscopy test	75-79.9%								
	<75%	75%	66%	80%	74%	85%	88%	85%	94.9%
Maternal Newborn Child Health									
Maternal Mortality Rate(Per 100,00 live births)	<100 100-200 >200		368/100,000 (Baseline 2016)		101.8/100,000		85.7/100,000		87/ 100,000
Proportion of maternal deaths reported that are audited	80-100% 75-79.9% <75%		26%(77/290)		53.9%(78/105)		89% (83/93)		98%(104 /106)

Selected Programmatic Achievements – Result 1 (continued)

		Achieved against annual target									
Key Performance Indicators		Year 1 (2	016/2017)	Year 2 (2017/2018)		Year 3 (2018/2019)		Year 4 (2	019/2020)		
		Target	Actual	Target	Actual	Target	Actual	Target	Actual		
Maternal Newborn Child Health											
Proportion of cases of 2-59 months child pneumonia appropriately treated	>80% <mark>70-79%</mark> <70	80%	92.8%	80%	79%	80%	92%	80%	98%		
Family Planning											
Number of new individuals reached with short term and long-term FP services (No targets-Mexico city policy)		N/A	208,709	N/A	390,967	N/A	246,298	N/A	581,626		
Nutrition											
Percentage of HIV positive patients	>90%										
receiving HIV care services whose nutrition status was assessed.	85-89%	90%	85%	90%	93%	90%	91%	90%	92%		
	<85%										
Percentage of pregnant and lactating	>60%										
women who received Infant and Young Child Feeding (IYCF) counselling	<mark>50-59 %</mark>	35%	31%	40%	39%	50%	47%	60%	62.5%		
	<50%										

Selected Programmatic Achievements – Result 1 (continued)

				Achieved against annual target								
Key Performance Indicators		Year 1 (2	016/2017)	Year 2 (2	017/2018)	Year 3 (2	018/2019)	Year 4 (2	019/2020)			
		Target	Actual	Target	Actual	Target	Actual	Target	Actual			
HTS												
Number of individuals who received HIV Testing Services (HTS) for HIV and received their test results	>90% <mark>85-89%</mark> <85%	681,892	858,002 (126%)	851,805	903,750 (106%)	373,541	616,694 (165%)	286,757	509,098 (178%)			
Number of individuals who received HIV Testing Services (HTS) and positive test results.	>90% 85-89% <85%	18,362	15,713 (86%) Yield-1.83%	28,255	25,266 (89%) Yield-2.8%	10,445	9,767 (94%) Yield-1.6%	11,252	12,354 (109%) Yield-2.4%			
VMMC												
Number of males circumcised as part of the voluntary medical male circumcision (VMMC) for HIV prevention program within the reporting period	>90% <mark>85-89%</mark> <85%	97,997	76,666 (78%)	28,415	29,044 (102%)	56,299	48,716 (87%)	47,002	48,652 (104%)			
HIV Prevention												
Number of key populations (FSWs) reached with individual and/or small group level HIV prevention interventions designed for the target population.	>90% <mark>85-89%</mark> <85%	7,829	3,828 (49%)	13,924	8,021 (60%)	7,279	6,924 (95%)	5,205	6,168 (118%)			
PMTCT												
Percentage of pregnant women with known HIV status at antenatal care (includes those who already knew their HIV status prior to ANC)	>95% <mark>90-94%</mark> <90%	95%	92%	95%	96%	95%	102%	95%	97.2%			
Number (%) of infants born to HIV- positive women who had a virologic HIV test done within 12 months of birth who tested positive for HIV	>5% <mark>5-10 %</mark> > 10%	95%	231 (8.8%)	95%	206(7.1%)	95%	174 (5.6%)	95%	111 (2.5%)			

Selected Programatic Achievements – Result 1 (continued)

Key Performance Indicators		Year 1(20	016/2017)	Year 2(20	017/2018)	Year 3(2	018/2019)	Year 4(2019/2020)	
		Target	Actual	Target	Actual	Target Actua		Target	Actual
HIV – ART									
Number of adults and children newly enrolled on antiretroviral therapy	>95% 80-94% <80%	23,200	12,053 (52%)	28,246	22,747 (80.5%)	9,618	12,541 (130%)	12,099	11,483 (96.4%)
Number of adults and children	>95%		57,950/		79,622/		77,789/		83,372
currently receiving antiretroviral therapy.	80-94% <80%	95%	100,567 (57.6%)	95%	106,554 (75%)	95%	96,280 (81%)	95%	85767 (97.2%)
Percentage of ART patients with a suppressed VL	>95% 80-94%	90%	89%	90%	90%	90%	86%	/	
ТВ	<80%							95%	90%
TB Case Notification Rate (per	>150/100000	150/	69/	128/	120/	141/	114/	156/	106/
100,000 people)	<100/100000	100,000	100,000	100,000	100,000	100,000	100,000	100,000	100,000
TB Treatment Success Rate	>90% 80-89% <80%	90%	81%	90%	85.2%	90%	80%	90%	83%
Lab									
Percentage of Viral load (VL) specimens rejected by the national VL testing laboratory at MoH/CPHL	<1% 1-5% >5%	2%	1.70%	2%	0.70%	1%	0.5%	1%	0.3%

Selected Programatic Achievements – Results 2 to 5

Key Performance Indicators		Year 1(20	016/2017)	Year 2(20	017/2018)	Year 3 (20	018/2019)	Year 4 (20)19/2020)
		Target	Actual	Target	Actual	Target	Actual	Target	Actual
Laboratory Systems									
Number of laboratories that have attained a 3-star status or the WHO/SLIPTA laboratory accreditation preparedness checklist	80-100% <mark>75-79.9%</mark> <75%	3	1 (33%)	5	3 (60%)	5	4 (80%)	7	4 (57%)
Average GeneXpert Equipment utilization (number of samples tested at each GeneXpert site per day)	80-100% <mark>75-79.9%</mark> <75%	10	3 (30%)	10	4 (40%)	10	8 (80%)	10	5.6 (56%)
QI									
Number of health service delivery units renovated	80-100% <mark>75-79.9%</mark> <75%	0	0	4	4 (100%)	6	0 (0%)	15	9 (60%)
Percentage of supported health facilities (HCIIIs and above with functional QI committees (N=142)	80-100% 75-79.9% <75%	65%	20%	70%	63%	80%	80%	100%	80%
HRH									
Percent of approved personnel posts filled by qualified health workers	80-100% <mark>75-79.9%</mark> <75%	72%	72%	75%	73%	76%	81%	76%	73%
Health Worker absenteeism rate (# of days of employee absences over a given period).	80-100% 75-79.9% <75%	12%	10%	9%	6%	7%	8.6%	5.5%	24%
Supply Chain									
Percentage of Health Facilities Submitting on-time order reports to NMS/JMS (Lab, TB, EMHS) (N=452)	80-100% <mark>75-79.9%</mark> <75%	80%	95%	80%	100%	80%	100%	80%	100%
Percentage of Health Facilities Submitting on-time ARV Orders into DHIS2 (N=136)	80-100% 75-79.9% <75%	80%	97%	80%	96%	80%	100%	80%	100%







USAID'S REGIONAL HEALTH INTEGRATION TO ENHANCE SERVICES IN EAST CENTRAL UGANDA

Nutrition & WASH Deep Dive







USAID'S REGIONAL HEALTH INTEGRATION TO ENHANCE SERVICES IN EAST CENTRAL UGANDA

Nutrition

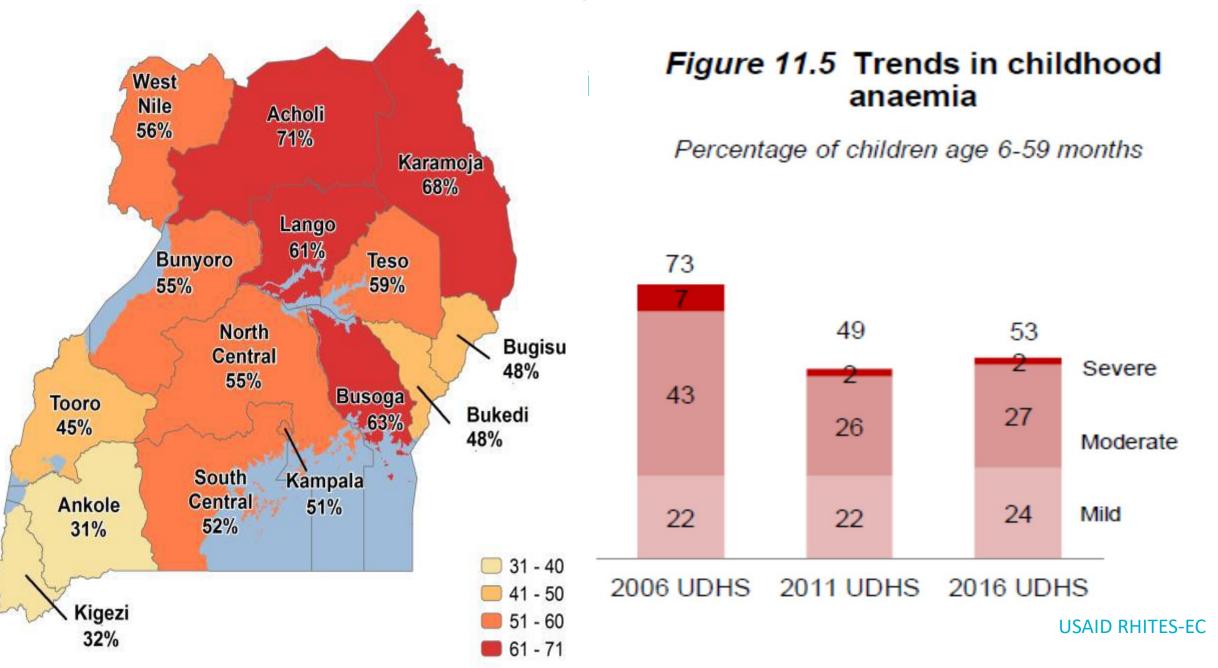
Introduction and Background

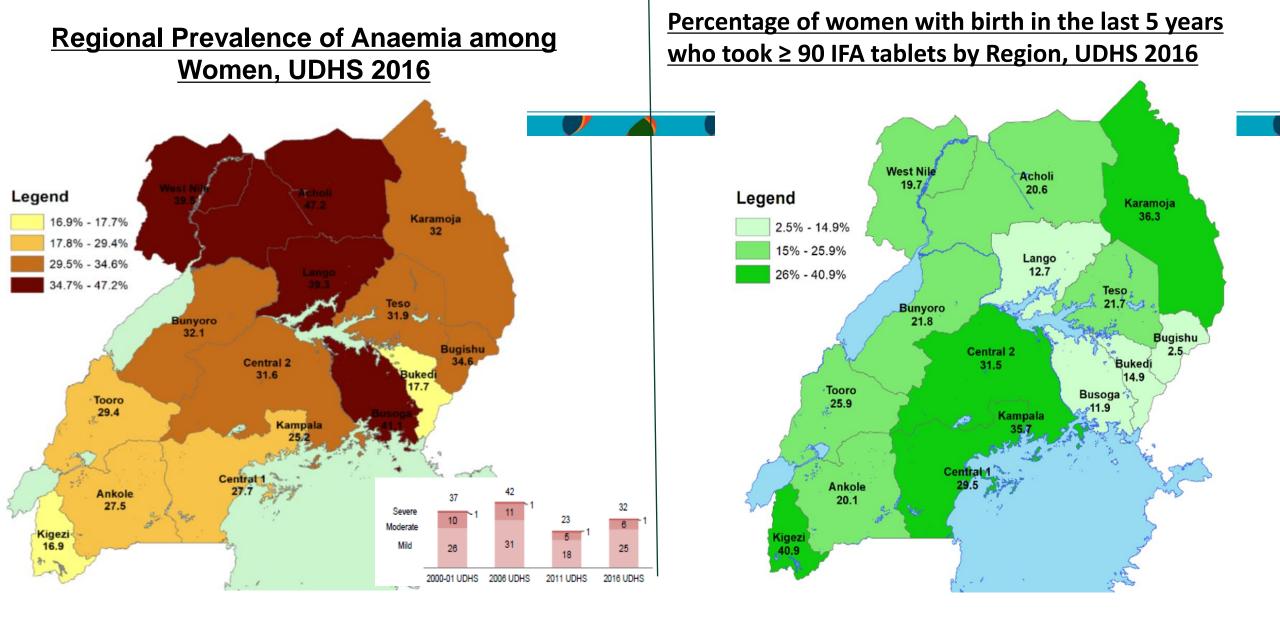
Statistical Overview

Malnutrition prevalence – EC region (UDHS 2016)

Category		Indicator (%)							
		Busoga	National						
<5yrs	Wasting (<5yrs)	3.6	4						
	Stunting (<5yrs)	29	28.9						
	Underweight (<5yrs)	9.4	11						
	Anemia	63.4	52.8						
WoCBA	Anemia	41	31.8						

Prevalence of Anaemia among Children 6 -59 months, UDHS 2016



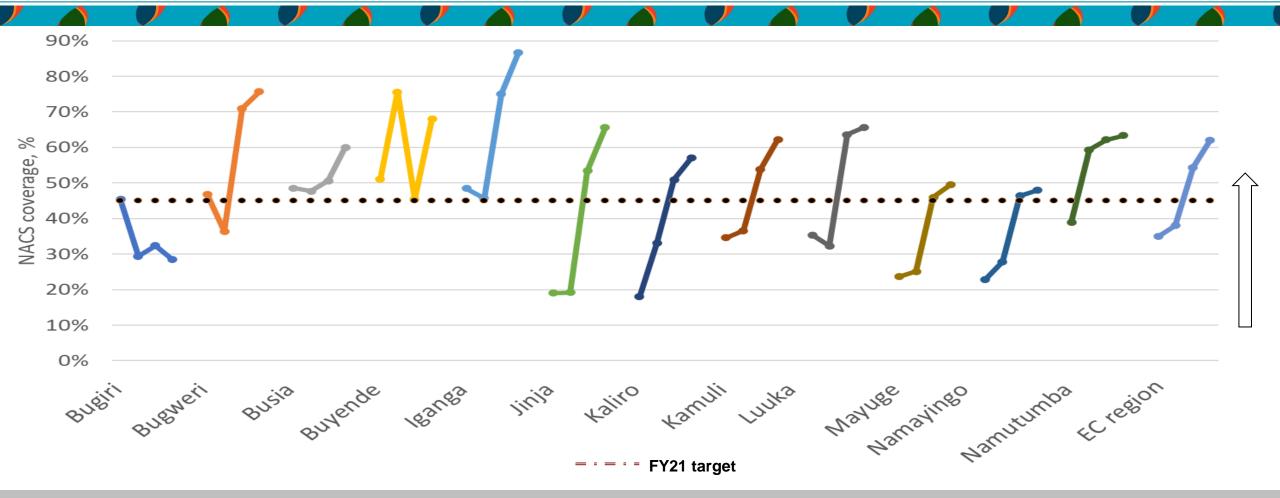


- Regional variation in anaemia prevalence highest, North, West Nile & Busoga
- Kigezi has lowest anemia[LEFT], also shows to have highest IFAS prior to survey [RIGHT]
- Busoga & Lango regions have the highest anaemia prevalence [LEFT] also registered very low IFAS supplementation [RIGHT]

Situation analysis at project inception Vs FY20Q4

> Nutrition assess	sment	FY17Q1 (Inception), %	FY20Q4 performance (%)	FY21 target (%)	
	- OPD (all)	7.7	45.8	45	
	- OPD (<5s)	7.2	54.4	45	
	- ANC/Mat/PNC	10.5	76.4	55	
	- ART	93	95.6	90	
> IYCF for pregr	nant/lactating women	26.4	72.1	75	
> IFAS		85	75.6	75	
> Burden of mal	nutrition	3.3	1.3	1.5	
> Access to the	rapeutic foods	41.4	33	60	
> Cure rate			37.8	75	
Minimum Dieta(LQAS, 2016)	ary Diversity, MDD	27.1	34.2 (2020)	35	

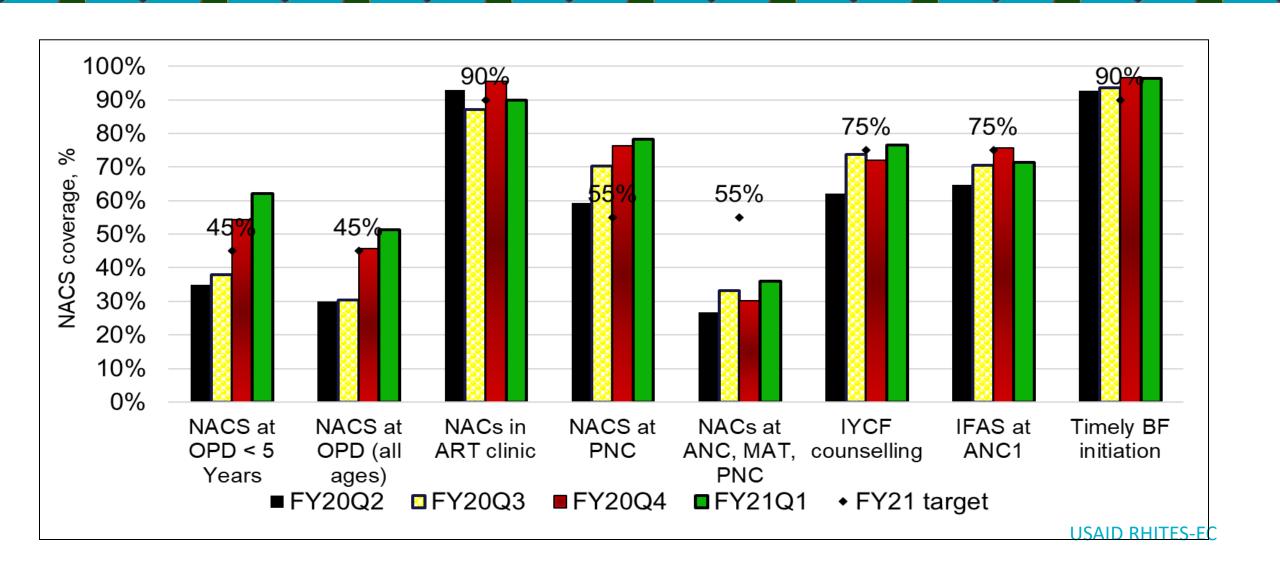
Trends in NACS for children <5yrs at OPD (all-level facilities), by district (FY20Q2 - FY21Q1): Improved from 54% to 62% over 2 quarters. Highest performance (of 86.7%) in Iganga. All districts except Bugiri surpassed annual target.



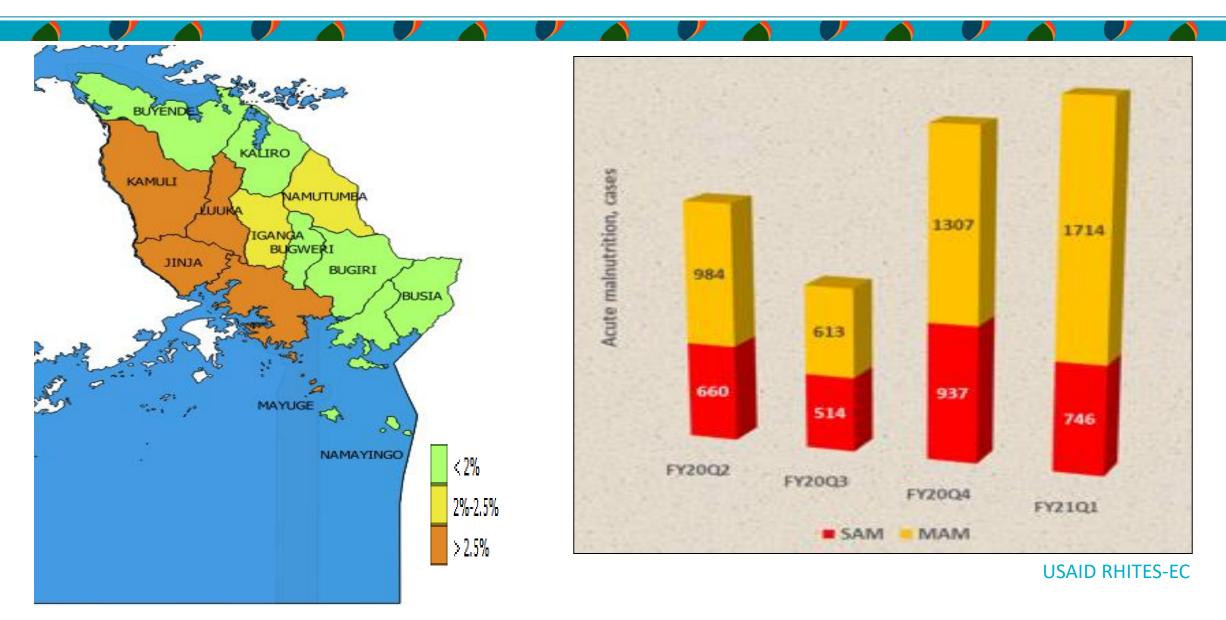
- > General performance improved due to timely targeted onsite mentorship, HC II reporting
- Bugiri affected by non-reporting and COVID19 anxiety by frontline staff at Bugiri hospital

^{*}Underperforming high-volume facilities in Bugiri (Buluguyi, Buwunga HC III, Nankoma HC IV, Bugiri hospital) to be targeted for support in Q2

Trends in NACS at key service delivery points; FY20Q2 – FY21Q1: Steady improvement in NACS (OPD, MCH). All districts except Bugiri (at 28%) surpassed annual target (45%) while Iganga has highest (87%) OPD assessment. Annual target met/surpassed in all except MCH, IFAS.

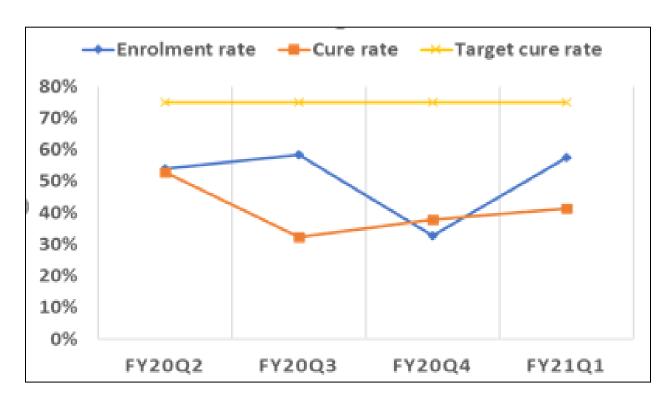


Th The burden of acute malnutrition amongst children <5 years seen at facilities in EC region: Kamuli, Jinja, Luuka, Mayuge are highest burden districts. Overall, the cases identified increased from 2,244 in FY20Q4 to 2,460 (FY21Q1) due to: Improvement in assessment, improved documentation



Management of severe acute malnutrition: 41.3% (57/138) discharged as cured, a slight improvement from 37.8% (102/270) in FY20Q4

Management of SAM



Management affected by:

- Low coverage of OTC sites: 15 sites (6 hospitals, 6 HC IVs, 2HC IIIs, I special clinic)
- Inconsistent facility RUTF stock that hinders redistributions
- Documentation gaps in some OTC sites

OTC outcomes; FY21Q1



- 429 children <5years accessed therapeutic care
- 41.3% (57/138) discharged as cured, a slight improvement from 37.8%
 (102/270) in FY20Q4 (Target; 75%)
- The highest cure rates registered in Iganga (48.4%) and Jinja (40%).
- 54.3% (75/138) dropped out during treatment.







USAID'S REGIONAL HEALTH INTEGRATION TO ENHANCE SERVICES IN EAST CENTRAL UGANDA

WASH

Community WASH reporting and household reach (FY20Q2 –FY21Q1): Reporting below annual target (75%), with reduced household reach in FY21Q1 largely due to conflicting political activities (campaigns)

		Com	munity WA	SH reporti	ng rate		Household coverage						
	FY20Q1	FY20Q2	FY20Q3	FY20Q4	FY21Q1	Trajectory	FY20Q1	FY20Q2	FY20Q3	FY20Q4	FY21Q1	Trajectory	
Bugiri	7.0%	52.8%	43.4%	69.8%	67.9%		8,014	87,107	94,985	821,620	75,304		
Bugweri	100.0%	100.0%	100.0%	100.0%	100.0%	• • • •	11,157	3,802	23,612	15,089	26,365		
Busia	10.3%	25.0%	31.3%	78.1%	75.0%		-	-	31,598	61,388	48,242		
Buyende	13.6%	100.0%	95.2%	100.0%	66.7%		9,846	48,706	63,246	65,143	43,045		
Iganga	38.9%	73.9%	58.8%	90.2%	45.1%		13,259	27,618	52,338	50,154	46,768		
Jinja	3.7%	100.0%	100.0%	83.9%	57.1%		2,146	17,179	43,888	134,718	63,575		
Kaliro	85.0%	73.9%	82.6%	73.9%	91.3%		58,611	68,659	74,686	46,634	75,197		
Kamuli	21.8%	64.7%	67.6%	60.3%	54.4%		29,441	77,853	137,901	108,372	114,163		
Luuka	5.0%	2.3%	2.3%	76.7%	79.1%		1,850	-	1,304	49,883	66,782		
Mayuge	0.0%	46.2%	61.5%	38.5%	65.4%		-	1,564	41,415	56,276	58,515		
Namayingo	100.0%	87.9%	87.9%	100.0%	87.9%		21,273	25,642	27,116	37,999	56,014		
Namutumba	0.0%	0.0%	100.0%	100.0%	100.0%		-	-	62,632	62,296	66,904		
EC Region	27.8%	57.7%	65.8%	76.9%	69.5%		155,597	358,130	654,721	821,620	740,874		

Key<25
≥25 - <75
≥75

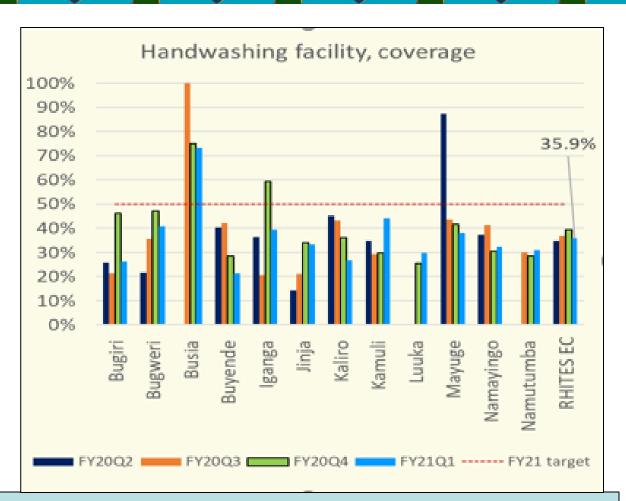
*None of the districts was in red in Q4; 9/12 surpassing target

- Targeted support to underperforming districts
- Increased commitment at all levels
- Low coverage of community data tools (VHT registers)

Rate reduced to 69.5% in FY21Q1 with reduced household reach largely due to conflicting political activities (campaigns)

Clean, safe latrine coverage stagnated at 64% (target; 75%). Slight improvement in 7 and decline in 5 districts. Decline in coverage for HWFs with only 4 districts (Kamuli, Luuka, Namayingo, Namutumba) improving in FY21Q1.

	C	lean, safe l	latrine cove	rage	
	FY20Q2	FY20Q3	FY20Q4	FY21Q1	Trends (Q4-Q1)
Bugiri	39.1%	39.3%	71.8%	58.5%	
Bugweri	65.1%	50.3%	60.3%	64.5%	
Busia		118.7%	75.5%	78.6%	
Buyende	60.2%	69.1%	58.7%	55.1%	
Iganga	67.2%	72.1%	84.1%	72.1%	
Jinja	47.7%	81.8%	48.5%	69.8%	
Kaliro	72.9%	61.2%	58.5%	67.4%	
Kamuli	72.1%	91.4%	59.2%	70.3%	
Luuka			63.8%	67.5%	
Mayuge	84.5%	94.3%	66.1%	48.2%	
Namayingo	54.6%	51.2%	56.6%	58.5%	
Namutumba		72.7%	67.5%	53.2%	
RHITES EC	59.7%	76.2%	63.4%	63.9%	



- Community reporting gaps still exist; especially due to COVID19 restrictions and, the campaign period
- Sanitation facilities affected by weather changes

^{*}Continued integration of SBCC messages and community activities; community WASH in Q2

Annual baseline clean clinics assessment (facility WASH score cards): Buyende HC III and Bugaya had cleanest Labour and delivery units

- 64 high-volume facilities
 (10Hospitals, 18HC IVs, 36HC IIIs)
- Focus units
 - OPD
 - Labor & delivery
 - Postnatal
- 5 domains assessed
 - Water
 - Sanitation
 - Hygiene and infection prevention;
 - Healthcare waste;
 - Cleaning and administration

Best performing unit:

Labor and delivery (L&D)

Lowest performing unit

Postnatal units;

Facility Performance

- Buyende HC III and Bugaya HC III (at 94%) were highest L&D WASH performers
- Iganga municipal council HC III (31%) was lowest,

Best performing domains/elements (Labour and Delivery units)

- i) Mattress (or bed covers) made of waterproof materials,
- ii) Waste containers clearly labeled and/or color coded to communicate the type of waste contained,
- iii) Placentas properly disposed of as infectious waste; with scores in 57 assessed facilities

The lowest performing Domains in Post natal Care units(PNC):

Absence of disposable hand drying supplies (towels or tissues); only 5 facilities scored.

*Site specific support scheduled to address gaps identified

Facility WASH Interventions: WASH for MNCH units through renovations; 2020 status



Renovation/Remodeling of Maternity at Malongo HCIII, Mayuge



A side rear end view of the renovated maternity, Bulesa HC III, Bugiri



New extension to maternity block including water supply and waste disposal systems, Magada HC III, Namutumba



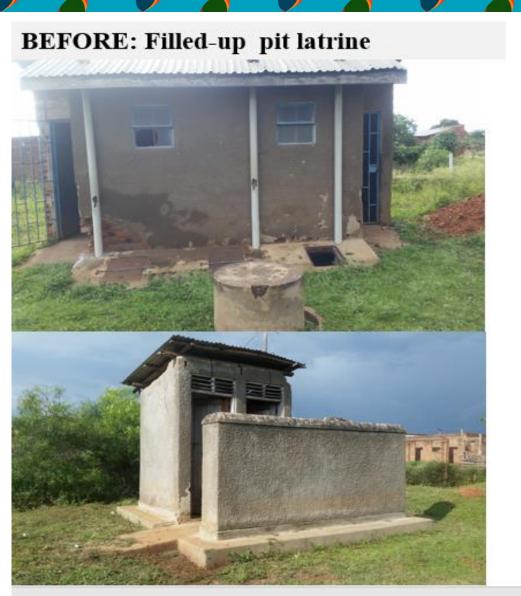
Renovated Maternity block at Jinja RRH, Jinja district

Other maternity renovations completed

- o Butagaya HC III
- o Nawandala HC III

- Mayuge HC III
- Mbehenyi HC III

VIP Latrine construction – Busembatia HC III (Bugweri district)



AFTER: 5-stance lined pit latrine



LQAS indicator performance: WASH targets achieved for all except water treatment technologies

			LQAS								
	2016	2017	2018	2019	2020	Key					
Percentage of individuals who wash their hands with soap after visiting the toilet	60.5%	75.6%	75.7%	75.0%	80.7%	<50%	≥50 - < 75%	≥ 75%			
Percent of households in target areas practicing correct use of recommended household water treatment technologies			42.1%	38.4%	27.1%	<30%	≥30 - < 50%	≥ 50%			
Percentage of households with soap and water at a handwashing station commonly used by family members			25.5%	25.4%	37.5%	<15%	≥15 - < 30%	≥ 30%			

Household water treatment remains a challenge:

- Perceived safety of some water chains
- Limited access to firewood due to high population density I

FY21: Work with SBCC and community teams - target increasing awareness on need for water treatment

Improvements attributed to:

- Sustained
 engagement of
 community
 stakeholders
- Targeted SBCC interventions to promote uptake
- Targeted community WASH support, including COVI19 pandemic response initiatives.

Challenges and mitigation measures

Challenges	Mitigation measures
Documentation gaps in the revised HMIS tools (MCH clinics)	 Monthly data reviews to identify under performing sites Targeted quarterly on-site mentorship support and collaborative learning sessions
Inconsistent stock of RUTF in the selected nutrition rehabilitation facilities	 Continued advocacy and collaboration with other partners Targeted onsite support to improve adherence to OTC
Rampant stock-out of iron-folic acid (IFA) tablets due to non-delivery by NMS during the quarter	- Advocate for policy change to support revised protocols
COVID19 restrictions disrupted facility NACS and impeded implementation of community nutrition and WASH activities	 Virtual site support provided to ensure social distancing and address missed opportunities for NACS at key contact points Some community activities postponed to Q2
Political activities (campaigns) heavily engaged VHTs, disrupting community health activities	- Anticipated improvement in subsequent quarters with no political activities are expected USAID RHITES-EC

Planned strategies/Activities

Nutrition

- •Targeted onsite mentorship to selected facilities guided by quarterly data.
- Nutrition QI collaboratives for selected (scale-up) sites
- Nutrition care groups sessions in selected malnutrition burden districts (Kamuli, Jinja, Bugiri); on-going
- •Support FLS for children 0 -23months, caregivers and pregnant women in selected communities within Buyende, Luuka, Iganga, Mayuge, Namayingo districts
- •Integrated nutrition and WASH dialogue meetings with key community resource persons in high-burden and sugarcane growing districts
- •Conduct home-to-home nutrition and WASH support in households with pregnant women and children <2years in 4 selected districts (Buyende, Kaliro, Kamuli, Luuka)

Key Strategies/Activities for

WASH

- •Quarterly nutrition and WASH dialogue meetings (integrated) with CRPs in the sugarcane growing districts (Iganga, Jinja, Luuka, Mayuge, Namayingo)
- •Collaborate with USHA for Infection prevention and control (IPC) and WASH follow-up in the 64 selected high-volume facilities guided by FY20Q1 IPC assessment data.
- •Support SBCC_WASH messages during commemoration of world toilet day and sanitation week.
- •Support quarterly VHT performance review meetings to facilitate quarterly reporting.

USAID RHITES-EC is being implemented by, University Research Co., LLC



with its partners:





