



#### Mass Action Against Malaria(MAAM)

## "Creating a Young Generation of Malaria Champions"

Peter Kwehangana Mbabazi

Finance & Multisectoral Collaboration Expert Co-Chair RBM Multisectoral Working Group Ministry of Health Uganda /WHO



28-30 June, 2021

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## **Presentation outline**

- 1. MAAM: Framework, commitment, advocacy
- 2. Need for Multisectoral action: Child Poverty and Malaria
- 3. Creating young generation of malaria champions; strategic actions
- 4. Target audience & stakeholders
- 5. Multisectoral Engagement; MOH-MOES
- 6. Role of schools in UMRESP implementation
- 7. Mainstreaming Malaria in Multisectoral budgets: Budget Call Circular-2021-2022
- 8. MAAM Book series

### The Mass Action Against Malaria (MAAM) Framework:

- 'Mass Action Against Malaria' (MAAM) Framework (2021-2025) is fully aligned with that of the UMRESP (2021-2025).
- □ Vision: 'Malaria Free Uganda'.
- □ Slogan: "Am I malaria-free today?"
- Strategy: "Reaching Every Household With All Malaria Interventions" - where malaria is everyone's business requiring mass action against malaria at all levels by all stakeholders.
- □ Framework: "Mass Action Against Malaria" (MAAM)
- Strategic objectives and targets are adjusted as all (100%) of households and the entire populace at risk in all districts of Uganda are in focus.

#### **Presidential Commitment**





## Advocacy and Engagement of all Levels Leadership

Secured the highest level of political engagement of His Excellency, President Yoweri Museveni, for sustainable political commitment to malaria free Uganda by 2030.

- A Malaria free Uganda is my responsibility
- **O A Malaria free Constituency is my responsibility**
- A Malaria free District is my responsibility
- A Malaria free Village is my responsibility
- **O A malaria free School is my responsibility**
- A Malaria free Class is my responsibility
- A Malaria free Home is my responsibility

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• Am I Malaria free today?

#### NEED FOR MALARIA MULTISECTORAL ACTION

Engaging beyond the health sector: developing ambitious national responses to the Malaria- related targets included in the SDGs will require action across all government departments, as well as the engagement of civil society and the private sector.

Delivering commitments: critical for delivering the national commitments set for example:

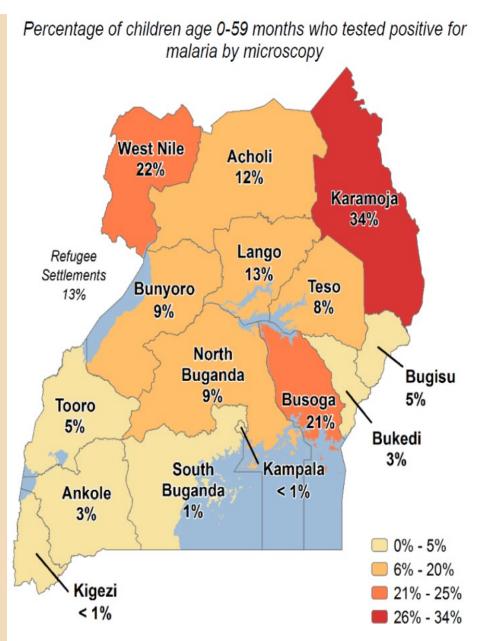
- Implementing health-in-all-policies, whole- of-government and whole-of-society approaches for addressing Malaria;
- Setting national targets for Malaria;
- Developing and strengthening national multisectoral policies and plans and incorporating Malaria into the national development agenda and plans;
- Raising awareness about the national public health burden caused by Malaria and the relationship between Malaria, poverty and social and economic development.

#### POVERTY AND MALARIA

#### Child Poverty Headcount Rates Jan 2018

Oyam Kole Lira Alebtong Amuria Kiryandongo Buliisa Masindi Amolat Hoima Nakasongola Rukedeal Bulambu Kyankwanzi Mbale Bu Kibuku Nakaseke Kibaale Kayung Kamuli Bundibugyo Kyenjojo Kabarole Mubende Kampal Buikwe Gomba Butambela Wakiso Ssembabule Kasese Kalungų Mpigi Mukon Ibanda Kiruhura Bukom Rubirizi, I vantond Buhweju Buvuma Bushenyi Masaka Kalangala Namayingo Mitooma Rakai Isingiro Kanungu Ntungam KisoroKabale **POVERTY RATES** 60.01% - 80% 4.27% - 7.5% 10.01% - 15% 25.01% - 30% 40.01% - 50% 0.42% - 4.26% 7.51% - 10% 15.01% - 25% 50.01% - 60% 80.01% - 94.16% 30.01% - 40%

#### MIS (Dec 2018 / Jan 2019)



**CREATING YOUNG GENERATION OF MALARIA CHAMPIONS** 

- Theme: Harnessing Young People`s Potential for social & Economic transformation
- **Slogan:** "A Malaria Free School is My Responsibility"
- **Specific Objectives:** 
  - 1. Promote reading culture and literacy and academic excellency
  - 2. Create awareness among the learners on how to have a malaria free school environment through edutainment.
  - 3. Use Learners as change agents to deliver MAAM messages to the communities
  - 4. Share best practices with the children and community on how to fight malaria
  - 5. Make different stakeholders aware of their roles and responsibility in the fight against Malaria, thus making their respective area malaria free.

#### MAAM in Schools: Key Strategic Actions

Distribution & Promotion of MAAM books(Covid-19)

- Mass awareness campaigns and Inter School Competitions:
  - Malaria in Science
  - School debates
  - Music, Dance and Drama
  - **O School MAAM Activities during World Malaria week/Day**
- □ Routine Malaria Services delivery in Schools
  - $\odot$  Early diagnosis and referral
- □ Malaria free School competitions E.g.
  - o Individual "Iam I malaria free today?"
  - Malaria free class is my responsibility



# TARGET AUDIENCE

- Children of school going age in schools.
- Parents and families.
- Members of parliament
- The general public.
- District leaders
- □Sub county leaders
- □Policy Makers.
- **Religious leaders**
- Cultural leaders



MAAM & School Health: Key Stakeholders

- Ministry of Education & Sports:
  - 1. School Management
  - 2. Students(Children of school age)
  - 3. Science teacher (subject head/Health club patron)
  - 4. Parents and family members
  - 5. School Teachers
  - 6. School Nurse



#### A coordinated national malaria response Multisectoral Engagements

Telegram: "EDUCATION" Telephone: 234451/8 Fax: 234920

In any correspondence on this subject please quote: ADM/137/157/01

Kampala, Uganda

CIRCULAR NO.20/2018

The Chief Administrative Officers/Town Clerks Executive Director, Kampala City Council Authority

#### NATIONAL EFFORTS TO STRENGTHEN SCHOOL HEALTH: MASS ACTION AGAINST MALARIA AND MUSIC DANCE AND DRAMA

On September 1<sup>st</sup> to 8<sup>th</sup> 2018, the Ministry of Health in collaboration with Ministry of Education and Sports successfully held the National Music Dance and Drama (MDD) competitions for Secondary and Primary schools respectively. Both Ministries agreed to use edutainment (education through entertainment) channel of MDD competitions in schools to transform and equip learners with knowledge and skills as change agents to fight malaria

Ministry of Health aims to achieve a Malaria Free Uganda by 2030 through Mass Action Against Malaria (MAAM). To that effect the of Ministry of Education and Sports aims to achieve <u>Malaria Free Schools</u> because Malaria is the number one cause of Morbidity, Mortality, poor academic performance, and drop out in schools. Community surveys in Uganda have shown that children aged 5 to 15 years had the highest malaria prevalence and these are all of the school going age.

District Education Officers (DEOs) and Head Teachers are very critical in the dissemination of Health information and practices to the learners and the communities they serve and we would like to appreciate the support and cooperation they provided during the implementation of the National Roll-out of HPV vaccination, Distribution of Long Lasting Insecticidal Treated Nets in selected schools, De-worming, Development of school Health Micro-Plans between health facilities and catchment schools and Participation in Child Health Davs.

The purpose of this circular is to bring to your attention the following health promotion activities to be conducted in your schools:

- Establishment of clubs to discuss health issues affecting learners including: I) malaria, HIV/AIDS, Tuberculosis, Immunisable diseases, Non Communicable Diseases, Diarrheal diseases (WASH) and nutrition.
  - School Management Committees/Board of Governors to ensure the fol malaria control interventions are properly implemented: a. Indoor Residual Spraying (IRS) for both dormitories and classro-toilets conducted during the holidays

    - Screening of the windows and ventilators Encouraging learners to use protective clothing to limit mosquito bite c. sleeves and trousers in the evenings/night)
    - Clearing bushes around schools and homes. Draining any stagnant water (Draining gutters, broken containers, co
  - e.
  - water drums/containers) to destroy breeding sites for mosquitoes Work with the nearest health facility to develop a schedule for providing education talks and referral mechanisms for learners in case of comp 111) malaria and other medical conditions of concern.
  - Follow up cases of school absentees to establish reason and provide p iv) support where required.

We would like to emphasize the need for updated appropriate messages, supportive supervision and continuous monitoring and evaluation to identify gap: implementation and address them in a timely manner to ensure malaria free sch 2020.

We look forward to your support and cooperation

Dr. Daniel Nkaada For: PERMANENT SECRETARY

- District /Municipal Education Officers, Director, Education and Social Services, KCCA. District /Municipal Inspectors of Schools Copy:
- Board of Governors Chairpersons School Management Committee chairpersons, Head Teachers.

n.o.o. PS/ES Copy: C/BE

II)

Ministry of Education and Sports Embassy House P.O. Box 7063

E-mail: permasec@education.go.ug Website: www.education.go.ug

234451/8

In any correspondence on this subject please quote: ADM/143/282/01



CIRCULAR: 18/2019

21th August 2019

Telegram: "EDUCATION

Telephone: Fax: 234920

To: The Chief Administrative Officer/ Town Clerk

NOTICE TO ALL SCHOOLS

Uganda is currently experiencing an Upsurge of Malaria in more than 70 districts. The Ministry of Health is building on the good partnership existing between different Ministries to pursue this endeavor.

**Ministry of Education and Sports** 

cation.go.ug

mbassy Hous P.O. Box 7063

E-mail: permasec@ Website: www.edu Kampala, Uganda

One of the ways to achieve Mass Action Against Malaria (MAAM) is riding on existing systems to achieve the desired goal of a malaria free Uganda. School children are one of the means to achieve social change at the household: as such their vigilance is required to bring down the malaria upsurge

The increase in malaria cases has been attributed to: Aging of the nets; Seasonality & climate change; Heavy and intermittent rains creating breeding sites; Behavior of people staying out late; Travels/ Movement from low to high transmission areas and vice versa; Increase of Refugees in some districts.

This therefore serves to inform the school communities that vigilance of school children is expected as they lead through their holiday. We are hereby sharing this vital information to call on you to amplify the following malaria messages among our school children as we contain this upsurge

- (i) Malaria is transmitted by a female anopheles' mosquito which usually bites at night (6.00pm to 6.00am). Gii
- (6.00pm to 6.00am). The country is experiencing a malaria upsurge in over 65 districts. The malaria cases have increased by over 30% (400,000) reported cases. The malaria cases have increased by over 30% (400,000) reported cases. Output the second (iii) (iv)
- (v) (vi) (vii)
- (viii)
- (ix) People in areas of low Malaria prevalence such as Kampala and Kigezi are prone to severe malaria due to reduced/low immunity.

#### You are requested to;

- (i) Alert all schools to be on the lookout for any increase in reported cases of Malaria at school and outside school.
- (ii) Encourage the children to demand from their parent's early treatment seeking within 24 hours of onset of fever symptoms.
- (iii) Inspire all schools to be Malaria smart by draining all stagnant water, conducting quality IRS in Dormitories, classrooms and toilets during holidays.
- (iv) Encourage students to wear long sleeved shirts and trousers in the evening
- (v) Close windows and doors of dormitories and classrooms by 6:00pm
- (vi) Plant mosquito repellant plants/ flowers in the compound and around dormitories
- Students should report to school with a Long-lasting insecticidal Net and encourage/ (vii) enforce learners to sleep under it every night.
- (viii) Encourage learners to spread Malaria information to their parents, relatives, neighbors and school host communities.
- (ix) Encourage school administrators to quickly refer severe Malaria cases to nearby health centers.
- (x) Invite Health officials to visit schools and offer appropriate health education to learners.
- (xi) Ensure schools work with District Health Teams to secure information materials for display in classrooms and around the school compounds.
- All Boarding schools must have a resident qualified Nurse. (xii)



Dr. C.T. Mukasa Lusambu For. PERMANENT SECRETARY

#### MAAM Initiative at Sub-national levels: MAAM District Task Forces supporting District and Community Health Teams to reach every Household in Uganda



Health Minister, Dr Ruth Aceng, launching District MAAM Task Force at a district headquarter



District MAAM Task Force at Lira



The Armed Forces were not left out



Mass awareness and social mobilization activities



National School MAAM MDD Competitions



## School Health & UMRESP Objective 1: Malaria Prevention

Key Stakeholde rs	LLIN	IRS	Environmental Mgt.	Larval Source Mgt.
	recommended Long lasting insecticidal mosquito nets (LLINS)	Promote IRS (Indoor Residual Spray) in Classes and Dormitories	Mosquito breeding sites	Ensure all Mosquito breeding sites are cleared
school age)	recommended LLINS - Request to Sleep under LLINS	Request that your classes and Dormitories are sprayed	and doors in the evening	Ensure all mosquito breeding sites are cleared



## School Health & UMRESP Objective 1: Malaria Prevention(contd)

Key Stakeholders	LLIN	IRS	Environmental Mgt.	Larval Source Mgt.
teacher	LLINS consistently where	where possible	environment in	- Ensure that all mosquito breeding sites in own house are cleared
members			environment in	- Ensure that all mosquito breeding sites in own house are cleared



## School Health & UMRSP Objective 1:

#### Malaria Case Management

Key Stakehold ers	Early recognition of malaria features	Early diagnosis	Appropriate treatment, follow up and referrals
ent	counsellors to handlle health issues	Provide and stock sick bays with quality assured diagnostics - Provide qualified health workers - Support and supervise health workers	Provide and stock sick bays - Provide qualified health workers - Ensure functional referral facilities are in place
of school age)	and signs of malaria - Report any fever, malaria	promptly to school authority	<ul> <li>Understand and strictly comply with treatment instructions</li> <li>Demand to know the side effects of the treatment</li> </ul>
teacher	<ul> <li>Know correct symptoms and signs of malaria</li> <li>Display health promotion and SBCC materials in Sick bay</li> <li>Provide regular health talks to pupils and teachers</li> </ul>	of quality diagnostics are stored (appropriate stock management) - Ensure appropriate diagnostic test is applied	<ul> <li>Provide adequate information to patients</li> <li>Ensure appropriate management based on National Treatment Guideline is provided</li> <li>Adequate documentation, data management</li> <li>/ record keeping and reporting to DHT, MOES and MOH</li> <li>Maintain confidentiality and ethical</li> </ul>



#### School Health & UMRESP Objective 1: Malaria Case Management

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Key Stakeholders	Early recognition of malaria features	Early diagnosis	Appropriate treatment and follow up and referrals
members	malaria - Report any fever, malaria symptoms and signs promptly;		<ul> <li>Cooperate with School and Health authority on management of ill health</li> <li>Ensure care for sick child and maintain social support for other family members</li> </ul>
e) School Teachers	malaria - Report any fever, malaria symptoms and	health - Inform and refer any pupil with symptoms and signs of illness to Sick Bay	<ul> <li>Cooperate with Health authority on management of ill health of sick pupil.</li> <li>Support care for sick child and maintain social support for other pupils and own family members</li> </ul>



### School Health & UMRESP Objective 2: Private Sector Management

Stakeholders	capacity of the private sector to deliver quality malaria preventive and		Ensure sustainable financing of affordable malaria interventions at workplaces & institutions.
members	malaria - Report any fever, malaria symptoms and signs promptly;	<ul> <li>Inform and refer any pupil with symptoms and signs of illness to</li> </ul>	•
	malaria - Report any fever, malaria symptoms and signs promptly;	<ul> <li>Inform and refer any pupil with symptoms and signs of illness to</li> </ul>	-



#### School Health & UMRESP Objective 3: Social & Behavior Communication

Key Stakeholders	Awareness creation for behaviour change	Social mobilization for demand creation / participation	Advocacy
a) School Management	<ul> <li>Seek knowledge on disease (esp. malaria) transmission, prevention and treatment</li> <li>Create and support Malaria Clubs, Drama, Debates and films in school.</li> </ul>		<ul> <li>Invite Advocates and Champions e.g. Rotarians to speak to pupils on volunteerism and change agents for health and development</li> </ul>
b) Pupils (Children of school age)	problems incl. malaria	<ul> <li>Be malaria volunteers at school and in the community</li> <li>Take active part in campaigns and social mobilization activities</li> </ul>	- Aspire to become malaria change agents and champions



#### School Health & UMRESP Objective 3: Social & Behavior Change Communication Cont<sup>d</sup>

		Social mobilization for demand creation / participation	Advocacy
	- Provide adequate information on School Health to pupils and teachers	<ul> <li>Facilitate and take active part in school competitions, campaigns and social mobilization activities</li> </ul>	- Aspire to become malaria change agents and champions
-		<ul> <li>Promote child's participation in School Clubs, Volunteer Clubs, etc focusing on Health and Development</li> <li>Ensure School participation in inter school competitions e.g. Music Dance and Drama (MDD) and sport activities</li> </ul>	- Aspire to become malaria change agents and champions



#### School Health & UMRESP Objective 4: Malaria Surveillance Monitoring & Evaluation

Stakeholde rs	-	Coordination: Programmatic, Multisectoral, Public-Private Mix, etc.	Capacity building to deliver malaria interventions	Resource mobilizati on
a) School Managemen t	<ul> <li>Adopt Malaria Free School agenda, develop and implement malaria related plans and projects</li> <li>Actively participate in Community malaria control projects</li> <li>Respond to and follow up Community recommendations against Malaria</li> </ul>	key stakeholders of the Malaria Program	- Utilize School resources (HR, logistics, etc.) to support Malaria Program in line with MAAM approach	- Support mobilization of community resources for MAAM
(Children of school age)	Respond to and follow up Community recommendations against Malaria	Provide information about Malaria and	Provide correct and appropriate information to Health Worker	Students
c) Science teacher	• Provide knowledge and skills and information to Village Communities in the fight against malaria.	timely to the coordinating		Trained Science teachers



#### School Health & UMRESP Objective 4: Malaria Surveillance Monitoring & Evaluation (contd)

Key Stakeholders	Planning, TA and Supervision	Coordination: Programmatic, Multisectoral, Public-Private Mix, etc.		Resource mobilization
d) Parents and family	Engage in Malaria control	Take part in	Provide	Parents and
members	meetings, initiatives and	Community	information about	family
	planning	researches and	Malaria and the	members
	Provide information about	survey	Mosquito in the	contributions
	Malaria and the Mosquito in the		Community	
	Community		Volunteer to be	
	Volunteer to be Malaria VHTS		Malaria VHTS	
	Touching their children on the			
	cheeks and hand to feel for high			
	temperatures			
e) School Teachers	Touching their children on the	Touching their	Teaching Malaria	School
	cheeks and hand to feel for high	children on the	causes, signs and	Science
	temperatures and appropriate	cheeks and hand to	symptoms and	teachers
	referral	feel for high	active search for	
		temperatures	mosquito larval	



### School Health & UMRESP Objective 4: Epidemic Preparedness & Response

Key Stakehold ers	Data management (demand and use)	Strengthening Surveillance System (Epid., Parasitology, Ento., Drug and Insecticide, etc)	Monitoring / Supervision	Evaluation / Operational Research
a) School Managem ent	<ul> <li>Prepare malaria prevention and control plans.</li> <li>Conduct continuous monitoring of malaria prevention of malaria activities in the school</li> <li>Participate in the planned monitoring and eradication activities</li> <li>Take part in coordination meetings</li> </ul>	Seek relevant and updated Knowledge and resources from appropriate offices. Report any abnormal mosquito densities, fevers	Regular supervision around school compounds & surrounding communities for breeding sites	Allow Students to participate in research as respondents
b) Pupils (Children of school age)	<ul> <li>Provide correct and appropriate information to Health Worker (nurse)</li> </ul>	Seek relevant and updated Knowledge and resources from appropriate science teachers Report any abnormal	Regular supervision around school compounds & surrounding communities for	Participate in research as respondents



### School Health & UMRESP Objective 4: Epidemic Preparedness & Response(Contd)

Koy Stakahaldara	Data management	Strengthening	Monitoring /	Evaluation /
Key Stakeholders	-		-	-
	(demand and use)	Surveillance System	Supervision	<b>Operational Research</b>
		(Epid., Parasitology,		
		Ento., Drug and		
		Insecticide, etc)		
c) Science teacher	Capture all	Participate in	Participate in	Participate in
	relevant parent	epidemic control	epidemic control	research as
	data	and prevention	and prevention	respondents or data
	• Submit all the	intervention	intervention	collectors
	Health data	Support epidemic	Support epidemic	
	timely to the	teams	teams	
	coordinating	Report unusual	Report unusual	
	Health Centre	occurrences in	occurrences in	
		vector density	vector density	
d) Parents and	• Take part in	Participate in	Participate in	Participate in
family members	Community	epidemic control	epidemic control	research as
······, ······························	researches and	and prevention	and prevention	respondents or data
	survey	intervention	intervention	collectors
		Support epidemic	Support epidemic	
		teams	teams	
		Report unusual	Report unusual	



## School Health & UMRESP Objective 5: Control to elimination

Stakehold ers	Transform malaria programming in targeted districts from control to elimination		Capacity building, design and implementation of sustainable interventions at the district level;	Transform the surveillance system from routine to case- based surveillance.
a) School Managem ent	vour students	control and elimination activities.	Regular talk on malaria around school compounds & surrounding communities for breeding sites	Students to participate in surve Conduct continuous monitoring of malaria prevention of malaria activities in the school
b) Pupils (Children of school age)	<ul> <li>Be the Malaria champion in your class and home and community</li> </ul>	malaria control	Read all MAAM Books series and attend all Malaria talks	Participate in surveillance



## School Health & UMRESP Objective 5: Control to elimination

,	Transform malaria programming in targeted districts from control to elimination	Resource mobilization for elimination readiness;	Capacity building, design and implementation of sustainable interventions at the district level;	Transform the surveillance system from routine to case- based surveillance.
c) Science teacher	<ul> <li>Ensure that Students read their MAAM books</li> </ul>	<ul> <li>Participate in Malaria control and prevention intervention</li> </ul>	<ul> <li>Ensure that Students read their MAAM books</li> <li>Report unusual occurrences in vector density</li> </ul>	Participate in research as respondents or data collectors Submit all the Health data timely to the coordinating Health Centre
d) Parents and family members	<ul> <li>Ensure that Students read their MAAM books</li> </ul>	<ul> <li>Volunteer in malaria control and elimination activities</li> <li>Fill in the malaria commodity Gaps</li> </ul>	<ul> <li>Ensure that Students read their MAAM books</li> </ul>	Volunteer information to relevant officers



### School Health & UMRESP Objective 5: Control to elimination

···· <b>,</b> · ·····	programming in	Resource mobilization for elimination readiness;	Capacity building, design and implementation of sustainable interventions at the district level;	Transform the surveillance system from routine to case- based surveillance.
e) School Teachers	<ul> <li>Ensure that Students read their MAAM books</li> </ul>	<ul> <li>Volunteer in malaria control and elimination activities</li> <li>Fill in the malaria commodity Gaps</li> </ul>	<ul> <li>Ensure that Students read their MAAM books</li> </ul>	Volunteer information to relevant officers

#### School Health & UMRESP Objective 6: Enabling environment and multi-sectoral collaboration.

Key Stakeholders	Supervision	Coordination: Programmatic, Multisectoral, Public-Private Mix, etc.	Capacity building to deliver malaria interventions	Resource
	develop and implement malaria	projects as key stakeholders of the	- Utilize School resources (HR, logistics, etc.) to support Malaria Program in line with MAAM approach	- Support mobilization of community resources for MAAM
(Children of school age)	recommendations against Malaria	Provide information about Malaria and the Mosquito in the	Student prefects, class monitors and Malaria clubs engage in supervision of fellow students to do their roles in Malaria control	Student prefects, class monitors and Malaria clubs

### School Health & UMRESP Objective 6: Enabling

environment and multi-sectoral collaboration.

Key Stakeholders	Supervision		Capacity building to deliver malaria interventions	Resource
	Provide knowledge and skills and information to Village Communities in the fight against malaria.	to in class	Planning Malaria awareness weeks, activities	School nurses, Science teachers
family	Engage in Malaria control meetings, initiatives and planning		Provide information about Malaria and the Mosquito in the Community	Parents and family members
		activities with school and	Planning Malaria awareness weeks, activities	School nurses, Science teachers

#### Mainstreaming Malaria into Multi-sectoral National and District Plans, Uganda (2020 & 2021).

https://www.afro.who.int/publications/guidelines-mainstreaming-malaria-multisectoral-national-and-district-plans

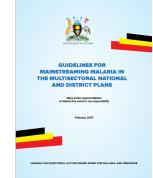
 To provide guidance to Ministries, Departments, and Agencies (MDAs) in mainstreaming of malaria control as a cross cutting issue in their plans and budgets in compliance with the Budget call Circular issued by the Permanent Secretary & Secretary to the Treasury (PSST) MoFPED starting with Financial Year 2020/21 budgets and over the medium term.



"I would like to appeal to the Private sector, Rotarians, Philanthropists and Individuals to contribute to the Malaria Free Uganda fund. Together we can achieve a malaria free Uganda by 2030" (*Rt. Honourable Dr. Ruhakana Rugunda – Prime Minister of Uganda*)

"I therefore call upon all the Government MDAs and LGs, our valued partners - the Development Cooperation Agencies, NGOs, CSOs, and the private sector to use this document as a reference tool or a resource for effective malaria mainstreaming of malaria in your respective activities" *Hon. Dr. Ruth Jane Aceng – Minister of Health, Uganda*.





"This guidance is critical towards strengthening and streamlining efforts by all Malaria multisectoral partners in sustainable malaria financing" (Dr. Diana Atwine, Permanent Secretary – MoH, Uganda).



Rethinking Malaria: Multi-sectoral Engagement for Effective National Response to Malaria and Health System strengthening



#### **Budget Call Circular:**

#### Budgetary Framework to translate political will to sustainable resources



Ministry of Finance, Planning & Economic Development Plot 2-12, Apollo Kaggwa Road P.O. Box \$147 Kampala - Uganda

In any correspondence on this subject please quote No. BPD 86/107/01

15th February, 2021

All Accounting Officers (Central and Local Government Votes) and, All Chief Executive Officers of State Owned Enterprises and Public Corporations

#### THE SECOND BUDGET CALL CIRCULAR ON FINALISATION OF DETAILED BUDGET ESTIMATES AND MINISTERIAL POLICY STATEMENTS (MPSs) FOR FINANCIAL YEAR 2021/2022

HE REPUBLIC OF LIGAND

A. INTRODUCTION

- The Second Budget Call Circular (2<sup>nd</sup> BCC) for FY 2021/2022 is issued in line with Section 11(b) of the Public Finance Management (PFM) Act, 2015 (Amended).
- In line with the above and as required under Section 9 (8) of the PFM Act 2015, Cabinet and Parliament respectively approved the National Budget Framework Paper (NBFP) for FY 2021/2022 with recommendations. Accordingly, we have embarked on the process of finalization of the Budget for FY 2021/2022.
- The Budget for FY 2021/2022 is anchored on the Third National Development Plan (NDP III), the Budget Strategy approved in the National Budget Framework Paper for FY 2021/2022, the NRM Manifesto 2021 – 2026 and the twelve strategic policy intervention areas by H.E. The President.
- 4. Section 13 (3) of the PFM Act 2015 requires Detailed Budget Estimates to be presented in Parliament by 1<sup>st</sup> April for review, approval and appropriation by Parliament by 31<sup>st</sup> May. Similarly, Section 13 (7) of the PFM Act, 2015 requires the Minister of Finance, Planning and Economic Development to present the proposed Budget Estimates in Parliament accompanied by a Certificate of Compliance (CoC) issued by the National Planning Authority. Accordingly, Accounting Officers should submit copies of the following documents, to the National Planning Authority (NPA), by Thursday, 11<sup>th</sup> March 2021 for review and issuance of the Certificate of Compliance:
  - Approved Ministries, Departments and Agencies (MDA) Strategic Plan (2021/2022 – 2025/2026);
  - ii. MDA BFPs for FY 2019/2020 and 2020/2021;
  - iii. Ministerial Policy Statements (MPS) for FY 2019/2020;
  - iv. Annual Performance Report for FY 2019/2020; and
  - MDA Project Specific Progress Reports for FY 2019/2020.

5. The purpose of this Circular therefore, is to the following

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- ✓ The MoFPED Permanent Secretary & Secretary to the Treasury issued a <u>Budget Call Circular</u>, 15 February 2021, requiring other sectors to mainstream Malaria in the 2021/2022 budget estimates and beyond.
- ✓ The Uganda Malaria Multisectoral Forum chaired by the Prime Minister will coordinate and monitor performance of the Malaria intervention in other sectors

#### Malaria

62. Whereas Uganda has experienced a reduction in malaria prevalence, it is one of the leading killer diseases and largely affects the strength of labor force through sickness and time taken to treat and care for those affected. As part of the budget preparation for FY 2021/2022, Accounting Officers are advised to plan for a malaria free environment by ensuring that resources are earmarked for bush clearing around the offices as well as

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sensitization of staff to adopt malaria preventive measures, among other budget cross cutting actions, in their homes.

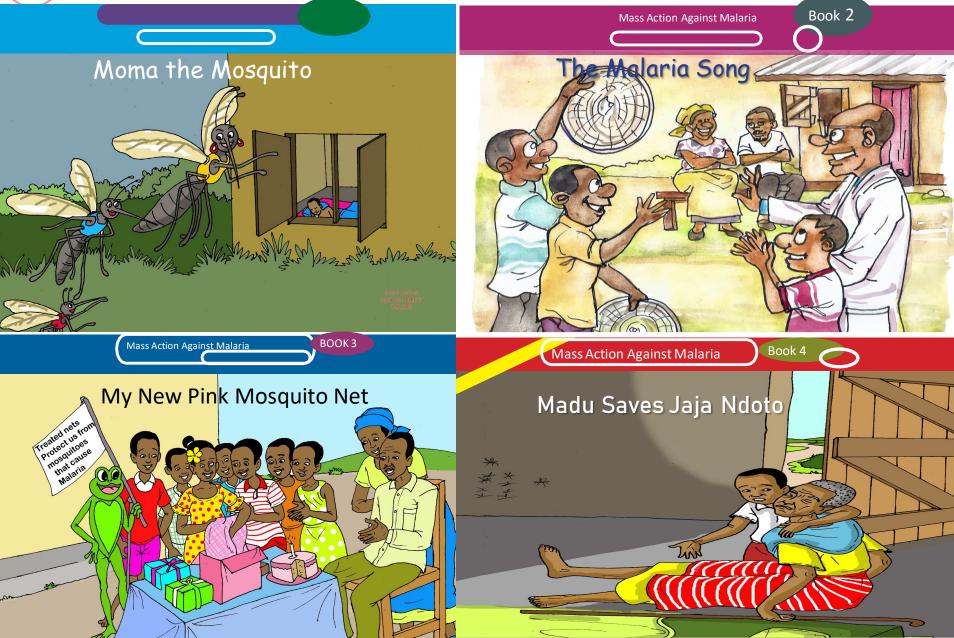
**63.** Furthermore, in the development of work plans where the intended intervention(s) have a community focus, the issue of malaria prevention should be incorporated. The Permanent Secretary, Ministry of Health has issued and disseminated the Guidelines on specific details related to malaria. These are expected to guide Accounting Officers in the course of preparing their work plans and detailed budget estimates for FY 2021/22.

#### **Promotion of Literacy & Reading culture**





#### MAAM Malaria Free Schools (Primary school Series)



#### MAAM Malaria Free Schools (Primary school Series & Instructors)

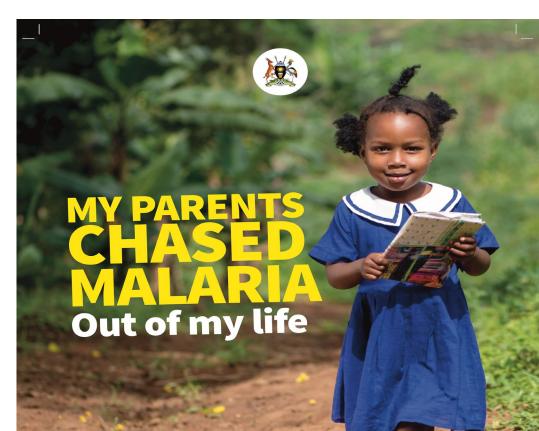
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#### Putting a MAAM book in every child's hands

#### I am a Malaria-Champion



I sleep under a treated mosquito net every night and I am tested for malaria when I get fever.









# Creating and enabling a Young Generation of Malaria Champions in every endemic country village will turn a A Malaria Free World dream into reality

# Thank you



For further details contact; Peter K.Mbabazi +256772405440; mbabazipeter@gmail.com

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