

COVID-19 RESPONSE REPORT

August 15th to September 15th, 2021



#Covidisnotover
#CommunityEngagement
#Risk communication
#VaccinesSaveLives

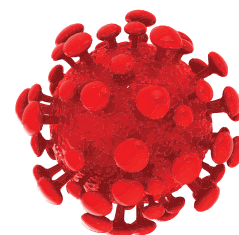


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> A URCS volunteer disseminating COVID-19 messages to the community using a megaphone

1.0 COVID-19 statistics - Global and Uganda

The COVID-19 pandemic, also known as the coronavirus is an ongoing pandemic that has spread world-wide since its first outbreak in Wuhan, China, in December 2019. The World Health Organization (WHO) has since then declared it a Public Health Emergency of International Concern. As of 15th September 2021 at 8am, the Global statistics of COVID-19 can be seen in the summary below:



The Case of Uganda
COVID-19 Statistics as of 15th September 2021

THE REPUBLIC OF UGANDA
MINISTRY OF HEALTH

RESULTS OF 15TH .SEPT. 2021

COVID-19 DAILY UPDATES

Tests Conducted 1,639,822 New (4,192)	New Cases 200	Test Positivity Rate 4.7%
Cumulative Cases 121,984	Active Cases on Admission at Health Facilities 355	Cumulative Recoveries 95,835
Total Doses Administered 1,697,748	Deaths 3,119 New (4)	

Adhere to the COVID-19 SOPs

Website: www.health.go.ug
0800 100 066

Wear Your Mask Wash Your Hands Keep Your Distance

> Extract: Ministry of Health - Uganda

2.0 The auxiliary role of URCS in the COVID-19 fight

The Uganda Red Cross Society is part of the National Task Force (NTF) for Public Health Emergencies chaired by the Ministry of Health. The Red Cross also sits on the National COVID-19 task force chaired by the President of Uganda, sits on the National Community Engagement Task Force and National Health Communication working group. URCS is also part of the implementing partners for the Community Engagement Strategy on COVID-19 and risk communication.

Ministry of Health's (MOH) role

The Ministry of Health (MOH) Uganda continues to respond to the evolving COVID-19 pandemic through working with partners to model data and new evidence aimed at reducing the importation, transmission, morbidity and mortality as well as economic social disruption resulting from COVID-19.

Currently, Ministry of Health has heightened Vaccination cover to more districts and communities across the country.

URCS's mandate

URCS is mandated by the Red Cross Act, Cap 57 of the laws of Uganda to perform an auxiliary role to the Government of Uganda, to give humanitarian support during times of emergencies, of which Epidemics and Pandemics are among.

URCS supports Ministry of Health with continuous COVID-19 community engagement, ambulance response, risk communication, disinfecting public places, community mobilization for vaccination, Home Based Care and referrals, ambulance services among others.

URCS COVID-19 Response

- > Community Engagement
- > Risk communication in high risk areas of the country such as markets, door to door engagements
- > Infection Prevention & Control (IPC)
- > Psychosocial support (PSS) to those affected by the COVID-19 pandemic
- > URCS Capacity strengthening
- > Ambulance services for referrals
- > Supporting the COVID-19 vaccination exercise

Key Partners (Aug to Sept 2021)

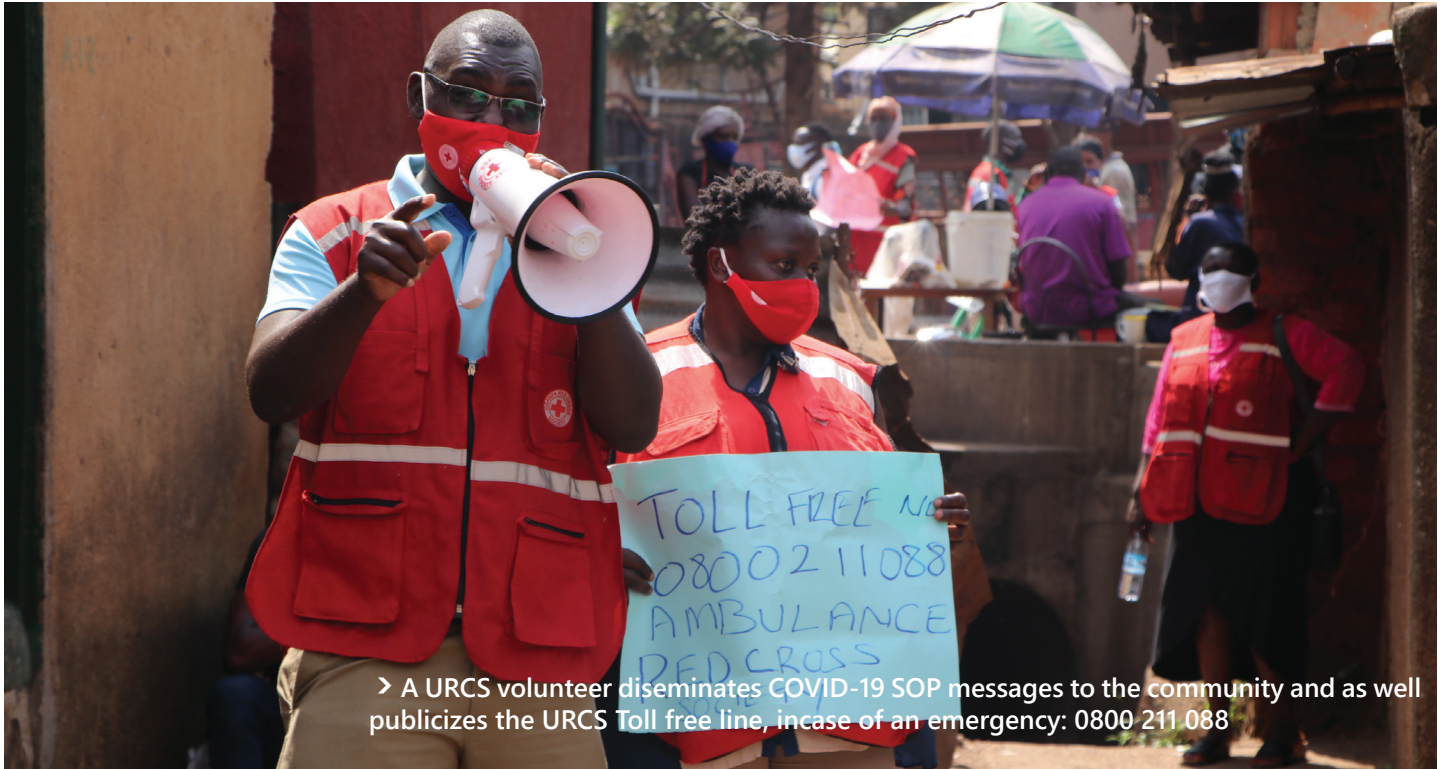
Uganda Red Cross Society has over the past month (August 15th to September 15th, 2021) worked with a cross section of partners to ensure that the COVID-19 response is effective. These include:

- > Ministry of Health
- > Kampala Capital City Authority
- > District COVID-19 Task Forces
- > Village COVID-19 Task Forces
- > Red Cross Movement partners

3.0 URCS COVID-19 Response

During the months of August 15th to September 15th, 2021 - Uganda Red Cross Society, while working with various partners such as Ministry of Health, Kampala Capital City Authority, District COVID-19 Task Forces and Village Task Forces focused on three core response pillars and these include:

- > Rolling out the Community Engagement Strategy (CES) on COVID-19
- > Conducting Risk Communication
- > Supporting the COVID-19 vaccination exercise countrywide



> A URCS volunteer disseminates COVID-19 SOP messages to the community and as well publicizes the URCS Toll free line, incase of an emergency: 0800 211 088



> A URCS volunteer guides an expectant mother at a health centre

3.1 Rolling out the National Community Engagement Strategy (CES) on COVID-19

The Government of Uganda launched the National Community Engagement Strategy for COVID-19 response on October 20th, 2020 to curb the spread of the Corona virus with in communities in Uganda. The Uganda Red Cross is a member of the National Taskforce and an implementing partner executing the strategy, chaired by Professor Omaswa.

As part of the implementation of the CES, URCS staff and volunteers across the 51 branches have conducted Trainings of Trainers for Village Health Teams, created Village COVID-19 Task Forces and conducted Home Based Care trainings. Below is a detailed description of each of the Trainings conducted in the reporting period:

> (CES) Trainers of Trainers (ToTs):

Virtual CES Trainers of Trainers were conducted for Mukono, Kabale, Bundibugyo, Kamwenge and Kitagwenda Village COVID-19 Task Forces. This covered trainings for 44 Village Health Team members and 9 URCS staff in the respective branches as ToTs.

> CES & Home Based Care (HBC) Training of VHTs/Red Cross Volunteers:

764 Village Health Teams (VHTs) were trained in CES and HBC with support from IFRC to include:

Mukono
409 VHTs

Kabale
110 VHTs

Bundibugyo
125 VHTs

Kitagwenda
120 VHTs

> Formation of VCTFs

Germany Red Cross facilitated 20 Volunteers for the formation of 20 Village COVID-19 Tasks Forces (VHTF) in sub-counties heavily affected by COVID-19.

The respective Red Cross Volunteers support (CES) activities notably; Risk communication and community Engagement (Rumor tracking, beliefs, observations, question suggestion acknowledgements and praise), Home Based Care and referral to facility based care, community based surveillance, Infection prevention and control, mental health and PSS, SDB and reporting.

> VHTs Training in Wakiso

In Wakiso district, there were 200 volunteer teams that were oriented and trained to work as VHTs on Village COVID-19 Task Forces in 15 Subcounties in Wakiso district.

It is key to note that the training of volunteer teams on CES is still underway to ensure universal coverage of all sub-counties in Wakiso.

"The National Community Engagement Strategy requires that every village establishes a village COVID-19 task force which provides community based surveillance and case detection including deaths, Community case management including self-isolation, community based drug distribution and referrals as appropriated, community contact tracking and reporting among others. This strategy covers both district and village levels of community engagement."

The table below showcases the Number of Village COVID-19 Task Forces formed in various Sub-counties in Wakiso district between 15th August to 15th September 2021

No.	TC/DIV/SC	Target	No. Formed	%VCTFs Formed	Gap
1	Wakiso TC	13	5	38.4%	61.6%
2	Kyengerera TC	37	0	0%	100%
3	Kakiri TC	14	14	100%	0%
4	Masulita TC	18	2	11.1%	88.9%
5	Namayumba TC	17	0	0%	100%
6	Kasangati TC	50	50	100%	0%
7	Wakiso SC	37	5	16%	84%
8	Kakiri SC	39	39	100%	0%
9	Masulita SC	23	0	0%	100%
10	Namayumba SC	36	8	22.2%	77.8%
11	Busukuma Div	39	2	5.1%	94.9%
12	Gombe Div	53	1	1.8%	98.2%
13	Nabweru Div	20	5	20%	80%
14	Nansana Div	23	23	100%	0%
15	Mende SC	25	3	12%	88%
	Total	419	15	37.4%	62.6%



> A URCS volunteer disseminates COVID-19 precautionary messages to the community

Rolling out the CES in Bundibugyo, Kamwenge & Kitagwenda Districts

After rolling out CES in Kampala, Wakiso, Entebbe and greater Kampala, during the month of August, the Red Cross volunteers focused on creating awareness within communities to raise better understanding of COVID-19, its causes, preventive measures and vaccination in the wake of a third wave. Most of the activities involved ensuring that communities maintain COVID-19 Standard Operational Procedures, SOPs as reflected in the table below.

The table below shows the Number of Households engaged

Areas of intervention	Kabale	Kamwenge	Bundibugyo	Other	Total
House Holds visited	857	340	431		1,628
No. of people reached	1,545	1,663	2,287		5,495
No. of men	675	774	909		2,358
No. of women	870	889	1,378		3,137



➤ URCS volunteers hold community meetings to disseminate COVID-19 messages as part of the CES execution.

CES - Home Based Care (HBC)

Home Based Care is a hallmark for managing of asymptomatic and mild COVID-19 patients. URCS volunteers support the various Village COVID-19 Task Forces to support Home Based Care - case management in terms of sensitization, patient care, how to isolate family members, case monitoring and referrals.

The table below showcases the cumulative number of Home Based Care cases monitored within Kampala

Number of COVID-19 cases	Cummulative (Total to date)	Current (7 Days)
Total number of COVID 19 cases recruited into Home Based Care	6	10
Number of cases De-isolated from HBC	3	3
Number of Deaths among persons in HBC	0	0



> A URCS volunteer sensitizes the community about COVID-19 precautionary measures

CES - Psychosocial support - Telephone services

URCS offered psychosocial support to COVID-19 patients admitted in hospitals or are isolated away from home. With support from ICRC, URCS offers telephone services to patients in Mulago and Entebbe hospitals.

Telephone Services offered to COVID-19 patients (Summary of statistics for 15th August to 15th September 2021)

Services	Entebbe	Mulago	Total
Successful calls	33	150	183
Number of Males served	21	69	90
Number of Females served	19	100	119
Total Phone call services offered	98	348	446



> URCS volunteers offer free telephone services to patients who need to establish or maintain contact with family members. They also receive free psychosocial support services.

3.2 Risk Communication

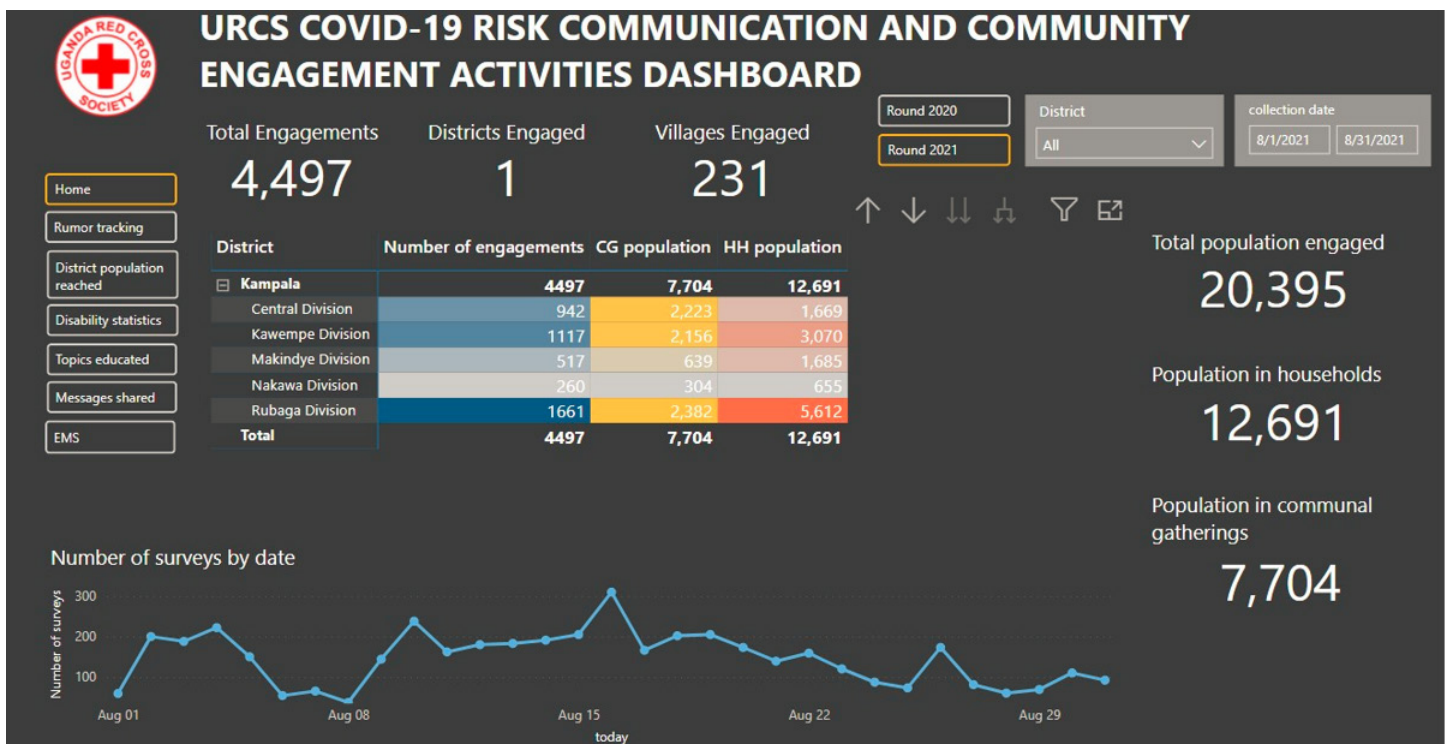
Kampala Capital City Authority (KCCA) in collaboration with Uganda Red Cross Society (URCS) during the months of August and September 2021 rolled out risk communication community engagement activities in Wakiso and Kampala districts to 48,294 people within 1,557 villages specifically focusing on:

- > Hand washing demonstrations
- > Setting up tippy taps
- > Mega phone (pre-recorded messages),
- > Posters/fliers
- > Verbal communication and,
- > Health Education talks among others covering key COVID-19 response topics such as Prevention, Spread/ Transmission, Treatment and First aid.

In Kampala, 860 volunteers were deployed to conduct Risk Communication and Community Engagement activities as well as implementation of Home Based Care (HBC) to support COVID-19 patients with asymptomatic and mild symptoms.

Through Risk Communication and Community Engagement (RCCE), Village COVID-19 Task Forces (VHTFs) comprising Red Cross Volunteers (RCV) and Village Health Teams (VHT) also conducted rumour tracking and health promotion through house to house visits and also during communal gatherings. This has been tracked electronically via the ODK/KOBO Data Collection Tool.

For instance, The data below shows people reached in Kampala city urban divisions during the said period this report covers:



> Snapshot of the RCCE dashboard showing Kampala data

3.3 Supporting the Vaccination exercise countrywide

Between the months of 15th August to 15th September 2021, URCS' scaled up COVID-19 response by supporting the local districts to roll out the mass vaccination and distribution of COVID-19 vaccines to priority groups and districts. Red Cross Volunteers at the various vaccination sites supported:

- > Mobilization using megaphones to disseminate messages on the availability of the COVID-19 vaccines.
- > Social mobilization to improve vaccine uptake at the vaccination sites particularly in the rural vaccination centres
- > Distribution of IEC materials at the vaccination sites to improve community awareness
- > Crowd control at the vaccination centres
- > Data capture of the numbers vaccinated in the Ministry of Health and district registries.

The table below showcases the Number of Red Cross Volunteers and Vaccinations conducted in Wakiso District between 15th August to 15th September 2021

No.	Site	Location	No. RCVs	No. Vaccinated
1	Wakiso Health Centre IV	Wakiso	5	1,640
2	Nabweru Health Centre III	Nansana	4	800
3	Wakiso Epicenter III	Wakiso	6	320
4	Kiziba Health Centre IV	Masulita	3	160
5	Namayumba Health Centre IV	Namayumba	5	400
6	Kakiri Health Centre IV	Kakiri	5	640
7	Kasangati Health Centre IV	Kasangati	8	1,200
8	Bulondo Health Centre III	Mende	3	80
9	Mende Health Centre III	Mende	4	80
10	Namulonge HC III	Busukuma	6	240
11	Namayumba Epicenter	Namayumba	4	201
12	Mmanze Health Centre III	Masulita	4	281
13	Namayumba HC.IV	Namayumba	3	315
14	Watubba HC III	Gombe - Matugga	4	160
		Total	64	6,517



> A URCS volunteer guides and registers persons to take part in vaccination

4. Other Emergency Health Services

URCS carried out other emergency life saving services to COVID-19 patients in hospitals and those receiving home based care.

Ten (10) Ambulances were deployed to support COVID-19 responses and were strategically stationed at major regional referral hospitals such as Nebbi Hospital, Soroti hospital, Hoima Regional Referral Hospital, Kapchorwa Hospital, Jinja Regional Referral Hospital, Kampala-Mulago and Namboole. The COVID-19 Response team evacuated a total of 180 Cases during this said period.

The table below shows the Total number of COVID-19 patients evacuated within the said period

District	No. of COVID-19 cases
Amuria	1
Amuru	2
Budaka	1
Bugiri	1
Buhweju	1
Buikwe	1
Butambala	1
Gulu	2
Hoima	2
Iganga	1
Jinja	2
Kagadi	4
Kalaki	1
Kampala	12
Kapelebyong	1
Kyotera	1
Lira	1
Lwengo	1
Masaka	2
Mbale	3
Mubende	1
Mukono	1
Nakaseke	2
Namutumba	1
Napak	1
Nebbi	2
Omoro	2
Serere	2
Soroti	1
Wakiso	126
Total	180

5. Challenges

- > Inadequate funding for the COVID-19 response
- > Inadequate PPE and IPC for operations.
- > High expectations from districts in terms of supporting CES (HBC and reporting in the 51 districts).
- > Delay in relaying data to branches and digitalizing tools and allowances to volunteers to support reporting. There were gaps in real time reporting of potential cases in communities.

6. Recommendations

- > There is need to commit more funding towards COVID-19 operation to enable full execution of the Response plan.
- > There is need for timely release of funds for COVID-19 Operations
- > There is need to emphasize the rolling out of the CES to more areas while funding the teams better to support branches with PPEs, IPC, airtime/data, handwashing equipment and dead body management.
- > Branches should work with District Task Forces to support movement clearance and identification using URCS jackets, which should also be increased per branch.



> A URCS handwashing point in Wakiso district

7. Lessons learnt

- > Procurement of VCTF tool kits such as IPC materials has helped improve service delivery.
- > Engagement with partners such as CDC-IDI, Save the children and local districts to implement COVID-19 response activities is key in promoting vaccination campaigns and behavioral change.
- > There is representation of URCS at the national vaccination and surveillance pillar subcommittee meetings and currently implementing partners are engaging URCS on its role in the response of the polio outbreak which has positioned URCS as a partner of choice in delivering services to people.
- > Kampala branches are working through the Village COVID-19 Task force teams in 860 villages, and so far 50,000 homes have been visited.
- > Branches across the country and attending District Task Forces are reporting about Home Based care in a timely manner to URCS and Ministry of Health.
- > There is need to heighten publicity regarding COVID-19 precautionary messages to include DJ mentions, support meetings for VCTFs in Kampala primarily fronted by the Netherlands Red Cross Society

8. Key Activities

URCS has Key activities for the COVID-19 Response that are both planned and ongoing to include:

- > National level and district task force meetings are key avenues for advocacy and showcasing what URCS is doing.
- > Wakiso branch has started carrying out RCCE in markets and House Holds, although the activity has not been funded.

- > The proposed resurgence plan entails reporting/visibility, trainings, equipping VCTFs (HBC, RCCE, CBS) digitalizing the tools hence the need for more internet data, PPE, IPC, testing and vaccination for volunteers and staff as well as dead body management within communities.



> URCS volunteers supporting registration for vaccination



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