

COVID-19 SITUATION REPORT #15

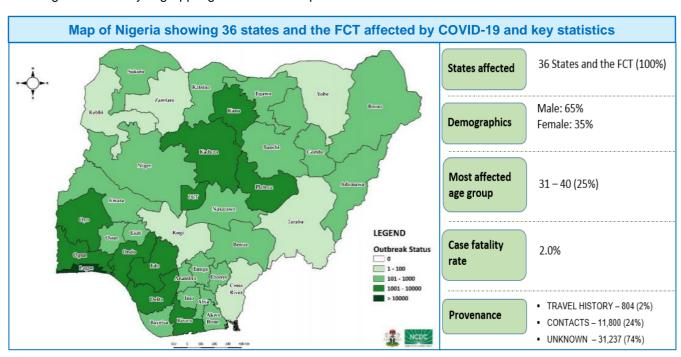


11 AUGUST 2020

Across Gavi-eligible countries, we have seen a consistent increase in cases since March 2020. In the past fortnight, the number of cases has increased by 40%. Since the start of the pandemic, **70** (out of 73) Gavi-eligible countries have reported cases, with over 3.5 million confirmed cases and 75,241 deaths. India has reported the third-highest number of cases in the world (2.2 million), while Pakistan (284,000) has the second-highest total among Gavieligible countries and the twelfth-highest in the world. The Democratic People's Republic of Korea, Kiribati and Solomon Islands have not yet reported any cases. These three countries are fully focused on prevention and preparedness efforts, including physical distancing, raising awareness, orienting health workers and safe sanitation practices.



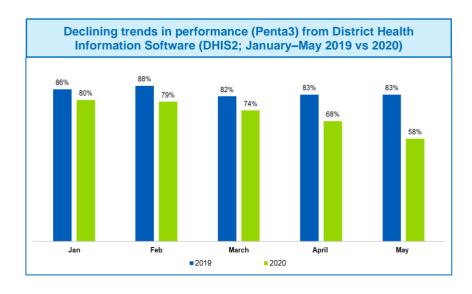
The last two Situation Reports profiled India and Pakistan; this report will focus on Nigeria. Among Gavi-eligible African countries, Nigeria – with the highest number of "zero-dose" children globally – has the highest number of reported cases (46,140). Nigeria is one of the African countries most affected by the COVID-19 pandemic and has the third-highest number of reported cases on the continent (after South Africa and Egypt). In the past week, the number of confirmed cases in Nigeria has grown by 6% (compared to 16.56% in India and 8% in the United States of America). All 36 states and the Federal Capital Territory (FCT) have reported confirmed cases. Lagos State, which is home to Africa's largest city, accounts for 34% of reported cases. This report highlights some of the challenges the country is grappling with due to the pandemic.



On 30 March, Nigeria initiated a lockdown in the FCT, Lagos and Ogun States, which was <u>eased in early May</u>. As of last week, Honourable President Muhammadu Buhari extended the second phase of the nationwide lockdown (which began on 22 April) by <u>four weeks</u>. As Nigeria's economy largely depends on oil exports, the government will <u>struggle to meet the targeted demand of crude oil</u> to fund the 2020 budget due to the reduction in crude oil prices <u>triggered by the pandemic</u>. <u>More than 3.8 million people</u> mainly working in the informal sector risk losing their jobs, and this could rise to 13 million if movement restrictions continue for a longer period. According to the International Monetary Fund (IMF), the informal sector accounts for <u>approximately 65% of economic activities in Nigeria</u>. As part of the government's response efforts, in February a multisectoral Emergency Operations Centre (EOC) was

¹ The Democratic People's Republic of Korea has reported what it describes as the country's first suspected COVID-19 case.

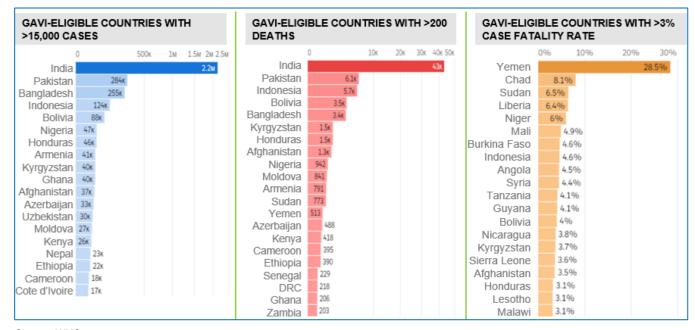
activated at Level 3 - the highest emergency level in Nigeria - led by Nigeria Centre for Disease Control (NCDC) in close coordination with the State Public Health EOCs (PHEOC). The uptake of immunisation services has been adversely affected since the onset of the pandemic in Nigeria. A comparison of pentavalent performance between 2019 and 2020 shows a decrease in performance in the months since the COVID-19 outbreak began. No vaccine stockouts have been reported at federal and state level. There was low buffer level for pneumococcal conjugate



vaccine (PCV) and pentavalent vaccine, which was addressed through charter flights (in some cases, supported by Gavi) for vaccine supply shipments. The distribution cycle for the third quarter of 2020 has just been completed. Replenishment of vaccines for the national strategic cold store is under way, with a number of shipments ready for delivery through a charter flight that was planned for 27 July. The government continues to work on mitigating the impact of COVID-19 on routine immunisation (RI) in the immediate and short terms; this includes planning for RI intensification through strategies such as an appointment-based approach; geocoded mobile health vans; and targeted, temporary fixed-post immunisation sessions. This year, the country is planning to introduce the second dose of measles-containing vaccine (MCV2) in the northern states, and measles and meningococcal vaccines in Kogi and Niger States. Yellow fever supplementary immunisation activities are still planned for the fourth quarter of 2020. Nigeria's National Primary Health Care Development Agency (NPHCDA) and Alliance partners continue to collaborate closely to develop a plan for continuing and optimising primary health care services amid the COVID-19 pandemic. The development of a recovery plan is also under way.

COVID-19 situation across other Gavi-eligible countries

Gavi-eligible countries account for approximately 17% of total global COVID-19 cases and 10% of deaths. This proportion is continuing to grow over time. Several of the most affected countries are those that have transitioned from Gavi support (Armenia, Bolivia, Honduras and Moldova). Africa is the most affected region in terms of having the highest case fatality rate (CFR) at 28.5%. These high CFRs could partly be attributed to lower testing rates; as a result, many cases may be undetected. Nigeria has a CFR of 2%, while India and Pakistan are at 2.1%.



Source: WHO

Impact on routine immunisation (RI)

Out of 68 Gavi-supported vaccine introductions and campaigns projected to take place in 2020, 44 have been impacted due to COVID-19: **39 are confirmed delays**, and a further 5 are at risk of delay. A number of Gavi-eligible countries have resumed campaigns and vaccine introductions, as reported last month: Ethiopia (measles campaign), Eritrea (meningococcal introduction), Nepal (rotavirus introduction), Solomon Islands (rotavirus introduction), Yemen (diphtheria and oral polio vaccine campaigns) and Zambia (leveraged Child Health Week to include a catch-up campaign for inactivated polio vaccine).

Eighteen Gavi-eligible countries have reported shipment delays, while approximately eight² countries are reporting stock-outs at central or subnational level due to COVID-19. UNICEF reported more than 50 vaccine deliveries in week 30 (20 July) – the second week in a row. Although there are still a number of countries that are difficult to access through commercial flights, this number is declining. Charter flights are still required to reach more destinations compared with before the COVID-19 outbreak. The backlog of shipments is at the lowest level since week 15 (20 April), but additional efforts are required to bring it down to the pre-COVID level.

There are delays in the implementation of Gavi's Cold Chain Equipment Optimisation Platform (CCEOP); however, the situation is slowly improving. The Alliance is working with governments to secure special arrangements for continued deployment of CCEOP wherever feasible and with manufacturers to manage the cost of storing devices where this is not possible.

Impact on co-financing and fiduciary risk

Ten Gavi-eligible countries have requested co-financing waivers so far. Following Alliance advocacy and engagement to identify needs and possible solutions, four have identified ways to meet their 2020 co-financing obligations.

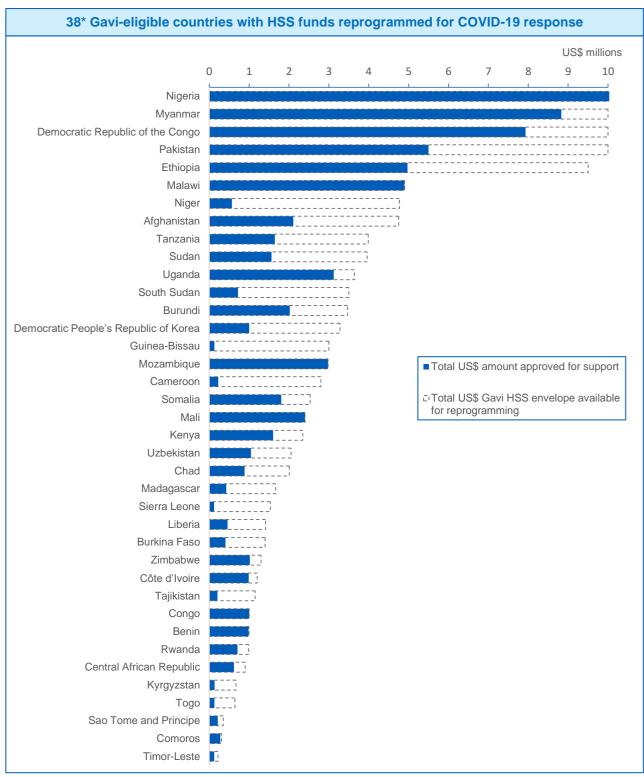
Constraints in Gavi programme audit and oversight functions have been reported in 33 countries. In circumstances where services provided by oversight mechanisms are impacted due to COVID-19, appropriate alternative measures have been put in place. In addition, Gavi continues to establish fiduciary oversight mechanisms where necessary.

A. GAVI COUNTRY PROGRAMMES UPDATE ON COVID-19 RESPONSE

- > Fifty-nine³ reprogramming applications have been approved so far, totalling US\$ 79.86 million. Of these, 42 are health system strengthening (HSS) reprogramming applications totalling US\$ 76 million. On average, countries have reprogrammed 61% of their potential reprogramming ceiling. Twenty-one (21) reprogrammings are for partners' engagement framework (PEF) Targeted Country Assistance (TCA) and post-transition engagement (PTE) reprogramming, totalling US\$ 3.86 million. An additional 33 are no-cost extensions.
- > Gavi's largest area of support continues to be infection prevention and control (IPC), at about 54%.
- > A summary of HSS reprogramming requests as of 11 August is below (further details on approved requests are available in Annex 1).

³ Four countries have submitted multiple applications

² Angola, Burkina Faso, Cameroon, Ethiopia, Guinea, Haiti, Lesotho and Sao Tome and Principe.



^{*}The total number of applications is mentioned as 42 on the previous page, as 4 countries have submitted multiple applications.

Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
HSS reprogrammin	ng applications ap	proved	
Nigeria	12,254,953	12,600,000	Hygiene and infection control training for health workers, infection control supplies, surveillance activities, laboratory testing materials, risk communication and community engagement and coordination and oversight
Myanmar	8,830,447	10,000,000	Disease surveillance, infection prevention and control (IPC), laboratory readiness, coordination, community engagement and risk communication
Democratic Republic of the Congo	7,932,056	10,000,000	Logistics, IPC, coordination, risk communication and community engagement
Pakistan	5,499,990	10,000,000	PPE equipment for frontline immunisation workers for six months
Ethiopia	4,971,000	9,500,000	Infection control supplies; risk and behavioural communication; community, civil society and media engagement
Malawi	4,897,012	4,900,000	Immediate infection prevention efforts, including protection of health workers; strengthening screening and diagnostic efforts; and coordination
Uganda	3,120,539	3,642,000	IPC supplies, laboratory supplies, risk communication
Mozambique	2,980,000	2,980,000	PPE for health workers; development and production of communication materials aimed at the public to encourage the adoption of preventive behaviours and to inform of the continuity of essential programmes
Mali	2,400,000	2,400,000	Disease surveillance equipment, sanitisation materials, lab equipment and PPE
Afghanistan	2,106,722	4,750,000	Diagnostic capacity, IPC and hygiene, infection and laboratory supplies
Burundi	2,019,478	3,468,205	PPE, lab equipment, IPC, logistics support, communication activities and disease surveillance training
Tanzania	1,646,534	3,984,622	PPE
Kenya	1,599,206	2,346,000	Capacity building on COVID-19 case management; coordination (national and county); PPE procurement; communication support; IT to support coordination
Sudan	1,560,519	3,960,000	Hygiene and infection control training for health workers, infection control supplies, disease surveillance activities (including community-based surveillance), support to the establishment of isolation centres, supervision activities
Somalia	1,806,100	2,530,000	PPE, risk communication, disease surveillance, case management, IPC
Uzbekistan	1,047,500	2,050,000	PPE, health worker training and communication
Zimbabwe	1,016,560	1,300,000	Rapid test kits, PPE, test kits

Congo	1,000,000	1,000,000	Diagnostic devices, PPE, medical equipment and treatment, laboratory consumables
Democratic People's Republic of Korea	1,000,000	3,280,000	Training of trainers and refresher training of laboratory personnel; laboratory procurement and installation of diagnostic machines; procurement of lab reagent and supplies; IPC and sample collection kits for laboratory and rapid response team (RRT) staff; joint monitoring with WHO and Ministry of Public Health
Côte d'Ivoire	987,833	1,204,674	Communication and community mobilisation activities
Benin	986,438	998,000	IPC measures in health facilities and communities; supply and management of PPE; community engagement; social and behavioural change communication (SBCC); disease surveillance
Chad	884,721	2,007,342	IPC, PPE, disease surveillance and communication
South Sudan	720,410	3,500,000	Disease surveillance, training, contact tracing, RRTs, IPC and case management
Rwanda	707,161	984,474	Contact testing; RRT transport; quarantine centres
Central African Republic	620,806	900,000	PPE and advocacy communications
Niger	568,153	4,770,000	PPE; support to epidemiological surveillance, monitoring and risk assessment; community communication activities and support for equipment and facilities for remote working
Liberia	459,221	1,410,000	Communication to address rumours that impact routine immunisation
Madagascar	425,907	1,664,000	PPE; strengthening hygiene and sanitation measures; risk prevention and community engagement; coordination; screening; disease surveillance
Burkina Faso	407,933	1,401,000	Procurement of PPE for health workers; social mobilisation through communication; laboratory supplies; disease surveillance
Comoros	277,704	308,560	Procurement of PPE; strengthening hygiene and sanitation measures; IPC; communication for risk prevention and community engagement; capacity building for COVID-19 patient care; coordination, screening (laboratory) and disease surveillance
Cameroon	226,188	2,800,000	Risk communication and community engagement
Sao Tome and Principe	212,600	350,000	PPE
Tajikistan	205,046	1,150,000	Social mobilisation and communication
Kyrgyzstan	134,000	670,000	Disease surveillance, training, communication and PPE
Togo	129,000	645,000	Expansion of testing capacity to subnational level
Timor-Leste	124,580	219,056	Training, operational costs and transportation
Sierra Leone	118,997	1,534,000	Health worker capacity strengthening, training, procurement, social mobilisation and disease surveillance
Guinea-Bissau	127,311	3,000,000	Risk communication and community engagement on COVID- 19 and vaccine-preventable diseases (VPDs); IPC, surveillance and supervision related to COVID-19 and VPDs

Total	76,012,626	124,206,933	
Partners' engagem reprogramming ap			Assistance (TCA)/post-transition engagement (PTE)
Timor-Leste	336,275	No ceiling applicable	PTE support reallocated for operational, training and communication support; and cold chain improvements
Congo	160,040	No ceiling applicable	Training of health workers, patient tracking; supervision
Guinea-Bissau	134,000	No ceiling applicable	Communication strategy, disease surveillance, supervision, infection control and training
Madagascar	523,254	No ceiling applicable	Roll-out of communication activities in nine priority regions; training of health workers on COVID-19; documenting CSOs' role in COVID-19 response
Benin	99,598	No ceiling applicable	Reinforcement of human resources to improve planning and implementation of equity in immunisation in the context of COVID-19
Liberia	320,126	No ceiling applicable	Disease surveillance: support contact tracers' training and conduct contact tracing
Bhutan	50,041	No ceiling applicable	Procurement of cold boxes and vaccine carriers; training of student nurses; monitoring; demand generation
Cambodia	36,030	No ceiling applicable	Reallocation of funding and no-cost extension
Uzbekistan	32,500	No ceiling applicable	No-cost extension for 2019 TCA and reprogramming for safety training for health care workers, communication strategy
Zimbabwe	19,696	No ceiling applicable	Finalise and roll out trainings (if possible, virtual) for community health workers on COVID-19 prevention, case identification and referrals – aligned with village health worker trainings; training for 2,000 community health workers in 23 districts
Congo	160,040	No ceiling applicable	Training of health workers, patient tracking
Senegal	50,000	No ceiling applicable	Disease surveillance, patient tracking
South Sudan	45,000	No ceiling applicable	Contact tracing; reporting
Gambia	22,500	No ceiling applicable	Provide technical support to the adaptation/adoption of the guidelines on the operationalisation of antenatal care (ANC), postnatal care and immunisation in the context of COVID-19
Ghana	21,961	No ceiling applicable	Reprogramming for development and adaptation of relevant plans; capacity building for implementation of guidelines related to surveillance, case management and IPC
Eritrea	140,000	No ceiling applicable	Develop social mobilisation information, education and communication (IEC) materials with the Expanded Programme on Immunization (EPI) for demand creation in light of COVID-19; support resumption of mobile outreach activities
Angola	1,353,862	No ceiling applicable	PPE; supervision to carry out technical adjustments in EPI for COVID-19; expand digital Logistic Platform for vaccines to 12 provinces; equip the central medical store for vaccines with 2 new compressors
Ethiopia	200,500	No ceiling applicable	Support routine immunisation coverage improvement activities, supervision and monitoring; no-cost extension (CDC/CDC-F)

Kiribati	119,880	No ceiling applicable	Support for staff member leading PTE implementation beyond the current programmatic timeline; data strengthening activities
Mongolia	17,000	No ceiling applicable	Support for routine immunisation activities
Georgia	10,500	No ceiling applicable	Risk communication
Kyrgyzstan	Not applicable	No ceiling applicable	No-cost extension for 2019 TCA and assessment; reprogramming for rehabilitation plan for national vaccine store; support for district-level trainings on new guidelines on adverse events following immunisation (AEFI)
Haiti	Not applicable	No ceiling applicable	No-cost extension and reprogramming for COVID-19 response
Bangladesh	Not applicable	No ceiling applicable	No-cost extension
Burkina Faso	Not applicable	No ceiling applicable	No-cost extension
Congo	Not applicable	No ceiling applicable	No-cost extension
Central African Republic	Not applicable	No ceiling applicable	No-cost extension
Democratic Republic of the Congo	Not applicable	No ceiling applicable	No-cost extension
Vietnam	Not applicable	No ceiling applicable	No-cost extension
Uganda	Not applicable	No ceiling applicable	No-cost extension
Senegal	Not applicable	No ceiling applicable	No-cost extension
Sierra Leone	Not applicable	No ceiling applicable	No-cost extension
Niger	Not applicable	No ceiling applicable	No-cost extension
Nigeria	Not applicable	No ceiling applicable	No-cost extension
Ghana	Not applicable	No ceiling applicable	No-cost extension
Afghanistan	Not applicable	No ceiling applicable	No-cost extension
Pakistan	Not applicable	No ceiling applicable	No-cost extension
Sudan	Not applicable	No ceiling applicable	No-cost extension
Nepal	Not applicable	No ceiling applicable	No-cost extension
Nicaragua	Not applicable	No ceiling applicable	No-cost extension
Papua New Guinea	Not applicable	No ceiling applicable	No-cost extension
Liberia	Not applicable	No ceiling applicable	No-cost extension
South Sudan	Not applicable	No ceiling applicable	No-cost extension
Lao PDR	Not applicable	No ceiling applicable	No-cost extension
Myanmar	Not applicable	No ceiling applicable	No-cost extension
Tanzania	Not applicable	No ceiling applicable	No-cost extension
Kenya	Not applicable	No ceiling applicable	No-cost extension
Malawi	Not applicable	No ceiling applicable	No-cost extension
Syria	Not applicable	No ceiling applicable	No-cost extension

Solomon Islands	Not applicable	No ceiling applicable	No-cost extension
Djibouti	Not applicable	No ceiling applicable	No-cost extension
Yemen	Not applicable	No ceiling applicable	No-cost extension
Zimbabwe	Not applicable	No ceiling applicable	No-cost extension
Tajikistan	Not applicable	No ceiling applicable	No-cost extension
University of Oslo	115,000	No ceiling applicable	Support countries that have expressed the need to install the new DHIS2 COVID-19 surveillance packages aligned with WHO recommendation
Total:	3,967,803		