

COVID-19 SITUATION REPORT #5

14 APRIL 2020

The number of COVID-19 reported cases continues to increase, with 67¹ Gavi-eligible countries reporting a total of 30,998 confirmed cases and 1,104 deaths². Three Gavi-eligible countries with the highest number of zero-dose children, India, Pakistan and Indonesia, account for 61% of confirmed cases. Efforts are underway to procure sufficient medical equipment to protect health care workers and diagnose and treat patients.

Several Gavi-eligible countries are already implementing strong measures to control the spread of COVID-19, including curfews or lockdowns, which is leading to suspensions or delays in their routine immunisation (RI) programmes. India's measures include further extending its 21-day curfew by 15 days up to 3 May 2020. In addition to the lockdown, India's efforts to control COVID-19 include the recent Government ban on the export of hydroxychloroquine, ventilators, sanitisers and personal protective equipment (PPE). The Government has agreed to cover the costs of COVID-19 testing, treatment and isolation in private hospitals for the lowest-income individuals under Ayushman Bharat, the central government's health insurance scheme for those on low incomes. States such as Kerala are using innovative efforts towards COVID-19 management and prevention strategies, for example through transmedia storytelling (such as this viral video featuring a group of Kerala policemen dancing to a popular song all while demonstrating the correct way to wash hands).

As the COVID-19 pandemic spreads, the risk of vaccine-preventable disease (VPD) outbreaks continues to rise, with increasing reports of disruption to immunisation. In the Democratic Republic of the Congo, COVID-19 containment measures have recently affected measles response in Kinshasa and Lubumbashi. Response efforts are being stepped up to help address both diseases with intensified community- and health facility-based interpersonal communication; hygiene and infection control activities in health facilities and communities; risk and behavioural communication and community engagement; as well as surveillance, investigation and testing of suspected cases.

However, immunisation programmes are proactively making efforts to safeguard RI as an essential service by rolling out health care worker training packages and working on mitigation plans for vaccine shortages. Health worker training packages are already being rolled out in South Sudan, Myanmar, Haiti and Somalia, covering issues such as facility preparedness, contact tracing, preventative and sanitary measures, lab capacity building, and risk communication.

Most countries are attempting at least to maintain fixed site services. In Angola for example, a state of emergency has been declared for 15 days starting 27 March, with airport closures, borders closed and restricted circulation within provinces and districts. However, the Government and partners are using post-transition funding to help maintain immunisation at fixed sites, particularly in the highest risk areas, with traditional authorities and community networks playing a key role.

In Uganda, the Government has developed a three-pronged mitigation strategy to decrease the risk of a vaccine supply shortage. This strategy includes expediting payment of the country's 2020 co-financing obligations; frontloading six months' worth of stocks to districts to avert any stock-out crisis; and providing for the incremental shipment cost due to the use of cargo planes. In Sierra Leone, the Government has put in place measures drawing from their past Ebola experience. These include health worker trainings, improving its WASH and surveillance systems at entry points and at the health facility level, strengthening of surveillance officers and social mobilisation activities. To further sustain RI, the Government is highlighting the risk of VPD outbreaks that may occur if high coverage is not maintained.

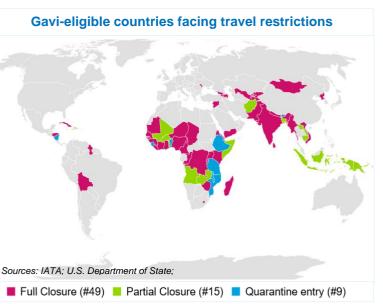
¹ Out of 73 Gavi-eligible countries (includes Syria) ² Up from 13,258 confirmed cases and 430 deaths as of last week (07 April 2020)

A. GAVI COUNTRY PROGRAMMES UPDATE ON COVID-19 RESPONSE

- 23³ COVID-19 reprogramming applications totalling US\$ 32.8 million of support have so far been approved - this represents 56% of their available allocation.
- A further 13 applications are currently being reviewed for a further US\$ 12 million.
- A summary of reprogramming requests as of 14 April is below (further details on approved requests are available in Annex A).

Application status	Countries				
HSIS ⁴ reprogramming applications approved <i># 16 countries</i>	 Tajikistan Liberia Malawi Myanmar 	 South Sudan Timor-Leste Ethiopia the Sudan 	 > Afghanistan > Zimbabwe > Kyrgyzstan > Sierra Leone 	 Democratic Republic of the Congo Togo 	> Mali > Burundi
Targeted Country Assistance (TCA)/ Post-transition engagement reprogramming applications approved # 7 countries	 > Vietnam > Guinea-Bissau > Bhutan > Sierra Leone 	> Uganda> Bangladesh> Senegal			
Applications under review # 13 countries	 > Kenya > Mozambique > Rwanda > Cameroon > Benin 	 > Timor-Leste (2nd application) > Côte D'Ivoire > Burkina Faso > Comoros 	 > the Congo > Ghana > Niger > Uganda⁵ 		

- The Gavi Secretariat continues to engage with countries and Alliance partners to ensure that it is providing coordinated and necessary support based on COVID-19 national response plans.
- Thus far, only five Gavi-eligible countries have not expressed an interest in applying for Gavi funds, as they are receiving significant funding from the World Bank. Other donors identified WHO, UNICEF, are USAID, Asian Development Bank (ADB), Department for International Development (DFID), Bill & Melinda Gates Foundation, Inter-American Development Bank (IDB) and the Global Fund. Gavi will stay in close dialogue with these countries in case their needs evolve.
- The Secretariat up to this point has been focussed on responding and protecting RI. It is beginning to pivot its thinking towards reflecting the implication of COVID-19 on RI



- and its role in maintaining and restoring immunisation post-COVID-19.
- The Secretariat has collaborated with UNICEF Supply Division (SD) to agree on a pre-financing mechanism for the procurement of COVID-related commodities (principally PPE and diagnostics) on behalf of countries, leveraging existing Gavi health system strengthening (HSS) funding.

³ Up from 11 applications approved as of last week (07 April 2020). ⁴ Health system and immunisation strengthening (HSIS) includes: health system strengthening (HSS) support; vaccine introduction grants (VIGs); and operational support for campaigns (Ops).

⁵ Uganda's application has been put on hold as a new Ministry of Health Incident Manager for COVID -19 pandemic has been appointed, and currently the existing costed response plan dated February 2020 is being re-reviewed with estimates and projections being higher.

B. ANNEX A: FURTHER DETAILS ON APPROVED REQUESTS

Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
HSIS reprogramming applications appro	oved		
Myanmar	7,400,000	10,000,000	Disease surveillance, laboratory readiness, coordination, community engagement and risk communication
Democratic Republic of the Congo	6,001,751	10,000,000	Logistics, infection prevention and control (IPC), coordination, risk communication and community engagement
Ethiopia	4,900,000	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
Mali	2,400,000	2,400,000	Surveillance equipment, sanitisation materials, lab equipment and personal protective equipment (PPE)
Afghanistan	2,106,722	4,750,000	Diagnostic capacity, IPC and hygiene, infection and laboratory supplies
Burundi	1,317,918	3,450,000	PPE, lab equipment, IPC, logistics support, communication activities and surveillance training

Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
Sudan	1,260,000	3,960,000	Hygiene and infection control training for health workers, infection control supplies, surveillance activities (including community-based surveillance), support to the establishment of isolation centres, supervision activities
Zimbabwe	1,020,000	1,300,000	Rapid test kits, PPE, test kits
South Sudan	720,410	3,500,000	Surveillance, training, contact tracing, rapid response teams, IPC and case management
Kyrgyzstan	134,000	550,000	Surveillance, training, communication, PPE
Тодо	129,000	645,000	Expansion of testing capacity to sub-national level
Timor-Leste	124,580	219, 056	Training, operational costs and transportation
Sierra Leone	119,000	1,534,000	Health worker capacity strengthening, training, procurement, and social mobilisation and surveillance
Tajikistan	59,339	1,150,000	Social mobilisation and communication
Liberia	24,970	1,410,000	Communication to address rumours that impact routine immunisation
Total	32,614,702	59,050,754	-
Targeted Country Assistance (TCA)/pos	t-transition engagement repr	ogramming applications appr	oved
Bhutan	50,041	Not applicable	Procurement of cold boxes and vaccine carriers, training of student nurses, monitoring and demand generation

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Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
Guinea-Bissau	70,000	300,000	Communication strategy, surveillance, supervision, infection control and training
Bangladesh	12,000	10,000,000	COVID-19 response activities
Vietnam	Not applicable	Not applicable	No-cost extension to Transition Grant requested by Vietnam until December 2020
Uganda	Not applicable	3,642,000	Cost effectiveness of different approaches to diphtheria-tetanus- pertussis (DTP) booster dose introduction: school-based delivery, facility-based delivery, single cohort approach and multiple cohort approach
Senegal	Not applicable	1,600,000	Programme implementation/coverage and equity; health information systems (data)
Sierra Leone	Not applicable	1,534,000	Technical support around planning of interventions to improve coverage/uptake/demand and address equity issues in low-performing districts
University of Oslo	115,000	Not applicable	Support countries that have expressed the need to install the new DHIS2 COVID-19 surveillance packages aligned to WHO recommendation
Total:	247,041	-	-