

COVID-19 SITUATION REPORT #8

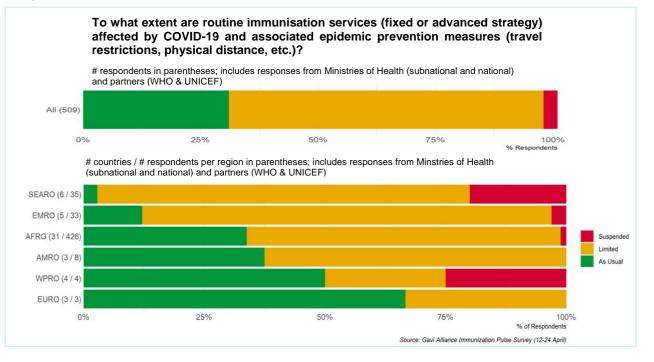
05 MAY 2020

Sixty-nine (out of 73) Gavi-eligible countries have reported 123,129 confirmed cases and 3,941 deaths. These 69 countries account for a small proportion, about 3%, of global COVID-19 cases and deaths. More than half of these cases are in India, Pakistan and Indonesia – which have the highest number of zero-dose children. The Democratic People's Republic of Korea, Kiribati, Lesotho and Solomon Islands have not yet reported any cases.

Fragile countries¹ account for only 5% of confirmed cases across Gavi-eligible countries; however, the number of cases in these fragile countries is rapidly rising – with a 57% increase in the past week. As these countries have limited testing capacity, there is likely to be substantial under-reporting. There is significant risk that cases will go undetected, with community transmission becoming widespread. Moreover, the ongoing humanitarian and economic crises, compounded by COVID-19, provide for potentially catastrophic situations in fragile countries. The number of people facing acute food insecurity worldwide could nearly double from 135 million to 265 million as a result of the economic impact of COVID-19, according to the World Food Programme (WFP). Gavi-eligible countries facing severe food crises include Afghanistan, the Democratic Republic of the Congo (DRC), Haiti, South Sudan, Syria and Yemen. Similarly, in the Central Sahel region of Africa, more than 5 million people are facing severe food insecurity. According to the World Bank, remittances to low- and middle-income countries are expected to drop by around 20% in 2020 to US\$ 445 billion (down from US\$ 554 billion in 2019) as migrant workers are laid off, further affecting fragile economies. In Somalia, for example, the value of remittances is believed to be two to three times greater than humanitarian aid funds.

Impact on routine immunisation (RI)

While nearly all Gavi-eligible countries have taken special COVID-19 mitigation measures – such as border closure, in-country travel restrictions, banning of mass gatherings and quarantine measures – these are difficult to sustain. For example, Afghanistan continues to see large numbers of migrant workers returning from Iran and Pakistan. In the majority of Gavi-eligible countries, most routine immunisation (RI) is continuing at health facilities with adapted protocols per WHO guidance, but health workers are increasingly focused on COVID-19 response, and the uptake of RI services is decreasing due to lockdown and fear of transmission. Based on a COVID-19 immunisation pulse survey conducted by WHO, UNICEF and Gavi, 50% of nearly 75% of Gavi-eligible countries have reported some disruption to RI.

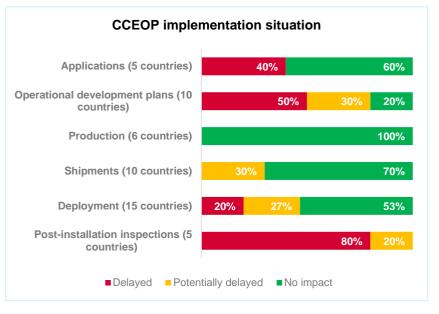


¹ Afghanistan, Burundi, Central African Republic, Chad, Democratic Republic of the Congo, Eritrea, Haiti, Mali, Papua New Guinea, Solomon Islands, Somalia, South Sudan, Syria and Yemen

A resurgence of outbreaks is expected as supplementary immunisation activities (SIAs) have been put on hold – including polio, diphtheria, yellow fever, measles and oral cholera vaccine campaigns. A new case of vaccine-derived polio was reported in Niger in the last two weeks. Niger contained previous polio outbreaks through mass vaccination campaigns; however, the suspension of campaigns due to the pandemic is affecting the response of Niger, as well as <u>14² other African countries that are currently experiencing vaccine-derived poliovirus outbreaks</u>.

Out of 68 Gavi-supported vaccine introductions and campaigns planned for 2020, to date 14 vaccine introductions and 36 campaigns have either been delayed by a minimum of 3 months or suspended, or are at risk of delay/suspension. While vaccine and cold chain manufacturing have not been significantly affected, restrictions in air travel and movement have impacted international shipments, and restrictions on movement have hindered distribution of vaccines in some countries. Approximately eight Gavi-eligible countries (including the Central African Republic, Chad, the Democratic Republic of the Congo, Haiti and Pakistan) have reported shipment delays, while about nine Gavi-eligible countries (including Chad, the Democratic Republic of the Congo and Somalia) have reported low vaccine stocks or vaccine stock-outs at the central or sub-national level. There is also a risk of in-country vaccines expiring due to suspension of campaigns, for example tetanus-diphtheria (TD) vaccines in Yemen and Chad. Somalia, South Sudan and Yemen are experiencing problems with sample transport due to restricted movement. RI services continue to be hampered by lack of personal protective equipment (PPE) for frontline, community and aid workers; and reduced ability to continue health services (including vaccination), social mobilisation and outreach.

In some countries, cold chain equipment optimisation platform installation (CCEOP) and implementation has also been delayed, generally in such areas as: development submission of applications; and finalisation of operational development plans (ODPs): in-country deployment: and implementation of post-installation inspections (PII). The Gavi Secretariat and UNICEF Supply Division continue to monitor the situation closely. Monitoring measures include routine tracking to detect challenges, issue reminders and provide remote support to fast-track processes; and to identify funding sources to cover additional costs.

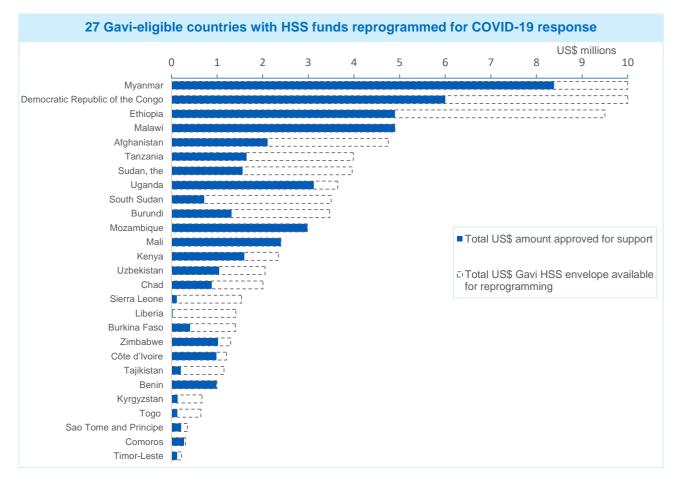


A. GAVI COUNTRY PROGRAMMES UPDATE ON COVID-19 RESPONSE

- Thirty-five reprogramming applications have been approved so far, of which 27 health system strengthening (HSS) reprogramming applications have been approved totalling US\$ 48.2 million this represents 59% of the countries' available allocation. Eight (8) reprogrammings are for partners' engagement framework (PEF) Targeted Country Assistance (TCA) and post-transition engagement (PTE) reprogramming. An additional 20 are no-cost extensions.
- > A further eight (8)³ applications are currently being reviewed for an additional US\$ 25 million.
- Countries may not be requesting the full amount available for reprogramming in order to safeguard current funds for RI recovery efforts.

² Angola, Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Côte d'Ivoire, Democratic Republic of the Congo, Ethiopia, Ghana, Mali, Nigeria, Togo and Zambia ³ Cameroon, Congo, Ghana, Niger, Nigeria, Rwanda, Pakistan and Somalia

- > Approximately 41% of this allocation has been reprogrammed for personal protective equipment (PPE) and infection prevention and control (IPC) activities.
- In mid-April, Gavi signed an agreement with UNICEF Supply Division to pre-finance US\$ 40 million to facilitate the procurement of and access to COVID-19-related supplies (mainly PPE and diagnostics) on behalf of countries; this has already allowed Supply Division to secure critical supplies in a highly constrained market. To date, US\$ 11 million has been drawn down by countries on this advance.
- Summary of reprogramming requests as of 05 May is below (further details on approved requests are available in Annex 1).



Regular engagement with all Gavi-eligible countries indicates that governments have ramped up their response towards COVID-19 with a view to safeguarding RI services.

For example, **Uganda's** reprogramming application of US\$ 3.1 million will help Uganda contain the spread of the disease while maintaining RI. The Minister of Health is ensuring that immunisation services are continuing together with other essential health services – especially for matters related to mothers, children and vulnerable groups. To date, Uganda has 97 confirmed COVID-19 cases, with <u>more than 50% recoveries</u>. It appears that in Uganda the population is not afraid to seek out health services, due to informative and timely updates on the situation by the government. In addition to the high recovery rate, there are no reported cases yet in the districts/villages, thereby reassuring the population that the situation is under control.

In **the Lao People's Democratic Republic (PDR)**, the government imposed a national lockdown at the end of March. Due to the risk of disruption of essential health services, the Ministry of Health prepared guidance on maternal and child health and service delivery during the COVID-19 pandemic. As a result of this guidance, RI continued, along with the successful introduction of the human papillomavirus (HPV) vaccine into the country's national immunisation schedule – despite strong control measures against COVID-19. Provinces such as Sekong are reporting >70% HPV immunisation coverage.

B. ANNEX 1: FURTHER DETAILS ON REPROGRAMMING APPLICATIONS APPROVED

Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
HSIS reprogram	ning applications approved		
Myanmar	8,387,053	10,000,000	Disease surveillance, infection prevention and control (IPC), laboratory readiness, coordination, community engagement and risk communication
Democratic Republic of the Congo	6,001,751	10,000,000	Logistics, 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
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
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, the	1,560,519	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
Burundi	1,317,928	3,468,205	PPE, lab equipment, IPC, logistics support, communication activities and disease surveillance training

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Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
Uzbekistan	1,047,500	2,050,000	PPE, health worker training and communication
Zimbabwe	1,020,000	1,300,000	Rapid test kits, PPE, test kits
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
Côte d'Ivoire	987,833	1,204,674	Communication and community mobilisation activities
Chad	884,721	2,007,342	IPC, PPE, disease surveillance and communication
South Sudan	720,410	3,500,000	Surveillance, training, contact tracing, rapid response teams, IPC and case management
Burkina Faso	407,932	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 surveillance
Sao Tome and Principe	212,600	350,000	PPE
Tajikistan	205,046	1,150,000	Social mobilisation and communication
Kyrgyzstan	134,000	670,000	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
Liberia	24,970	1,410,000	Communication to address rumours that impact routine immunisation
Total	48,198,998	80,678,459	

Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
		ted Country Assistance (T	CA)/post-transition engagement (PTE)
reprogramming	applications approved		PTE support reallocated for operational,
Timor-Leste	336,275		training and communication support; and cold chain improvements
Guinea-Bissau	134,000		Communication strategy, disease surveillance, supervision, infection control and training
Madagascar	132,444		Roll-out of communication activities in 9 priority regions; training of health workers on COVID-19; documenting CSOs' role in COVID-19 response
Liberia	51,400		Disease surveillance: support contact tracers' training and conduct contact tracing
Bhutan	50,041		Procurement of cold boxes and vaccine carriers, training of student nurses, monitoring and demand generation
Cambodia	36,030		Reallocation of funding and no-cost extension
Uzbekistan	32,500	PEF TCA/PTE reprogramming	Safety training for health care workers, communication strategy
Zimbabwe	19,696		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
Bangladesh	Not applicable	e for	No cost extension
Burkina Faso	Not applicable	able	No-cost extension
Congo	Not applicable	applic	No-cost extension
Central African Republic	Not applicable	No ceiling applicable	No-cost extension
Vietnam	Not applicable	° Z	No-cost extension
Uganda	Not applicable		No cost extension
Senegal	Not applicable		No cost extension
Sierra Leone	Not applicable		No cost extension
Niger	Not applicable		No cost extension
Nigeria	Not applicable		No-cost extension
Ethiopia	Not applicable		No cost extension
Ghana	Not applicable		No cost extension
Afghanistan	Not applicable		No-cost extension
Haiti	Not applicable		No-cost extension
Pakistan	Not applicable		No-cost extension
Sudan	Not applicable		No-cost extension
Nicaragua	Not applicable		No-cost extension

Country	Total US\$ amount approved for support	Total US\$ Gavi HSS envelope available for reprogramming	Main components of reprogrammed support
Papua New Guinea	Not applicable		No-cost extension
Liberia	Not applicable		No-cost extension
University of Oslo	115,000		Support countries that have expressed the need to install the new DHIS2 COVID-19 surveillance packages aligned with WHO recommendation
Total:	907,386		