Impact of Covid-19 in Immunization in the African Region

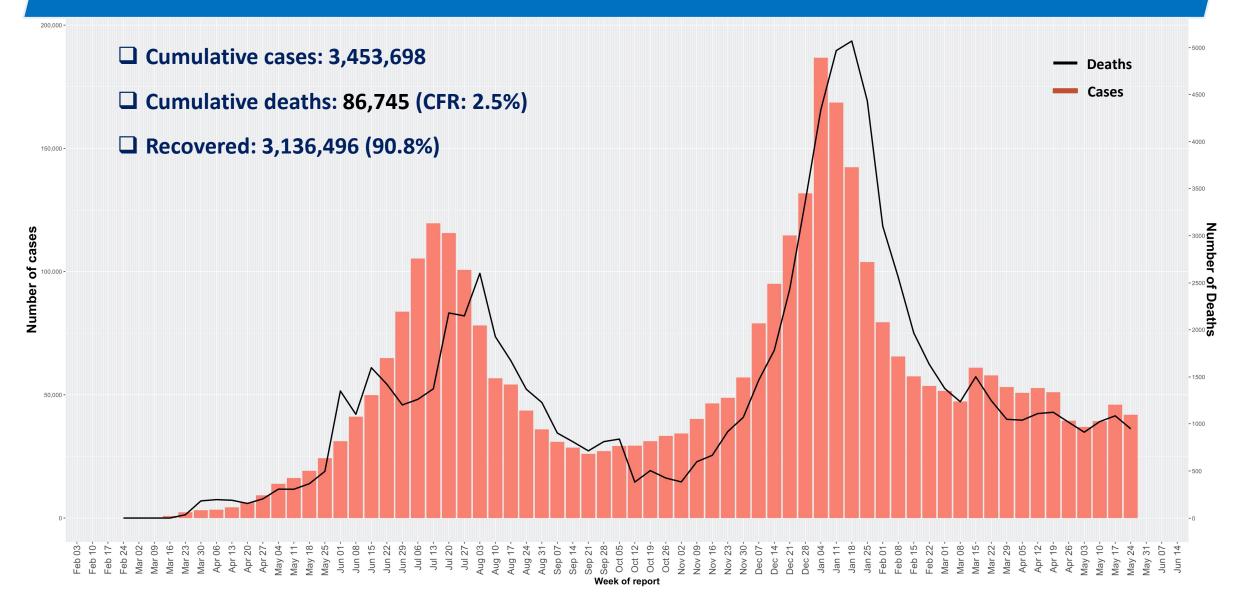


VPD, WHO AFRO

By Dr. Richard Mihigo

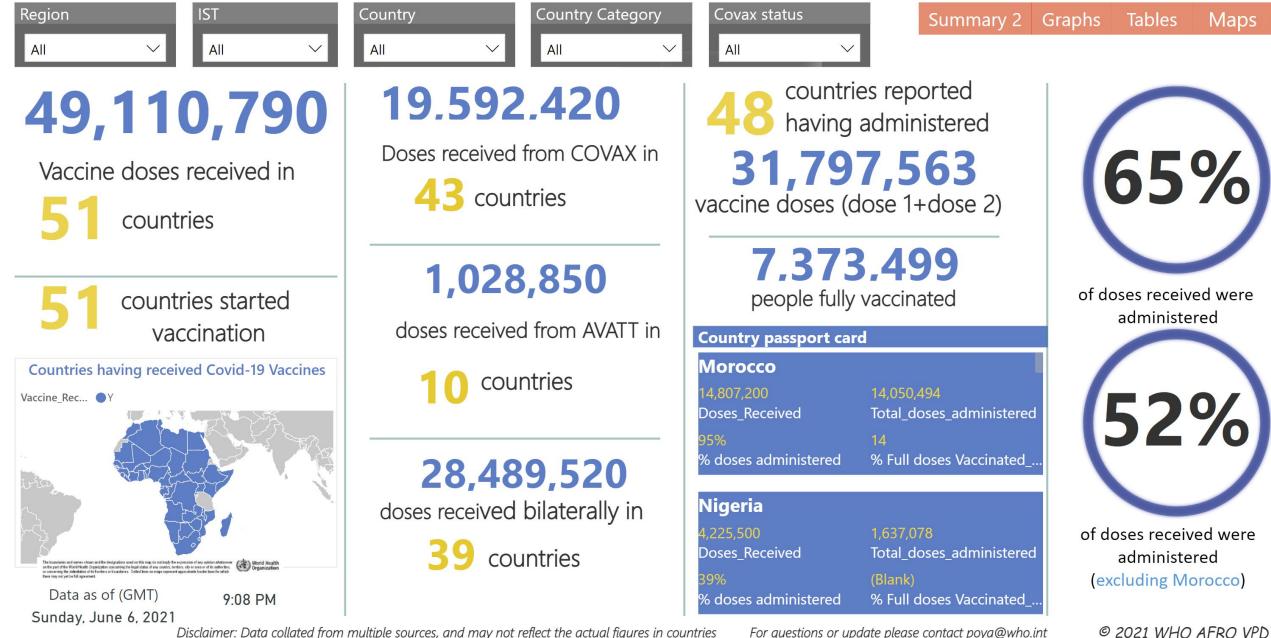
Update on Covid-19 EPI and vaccines roll-out in Africa

COVID-19 CASES AND DEATHS IN THE WHO AFRICAN REGION (data as of 29 May 2021)



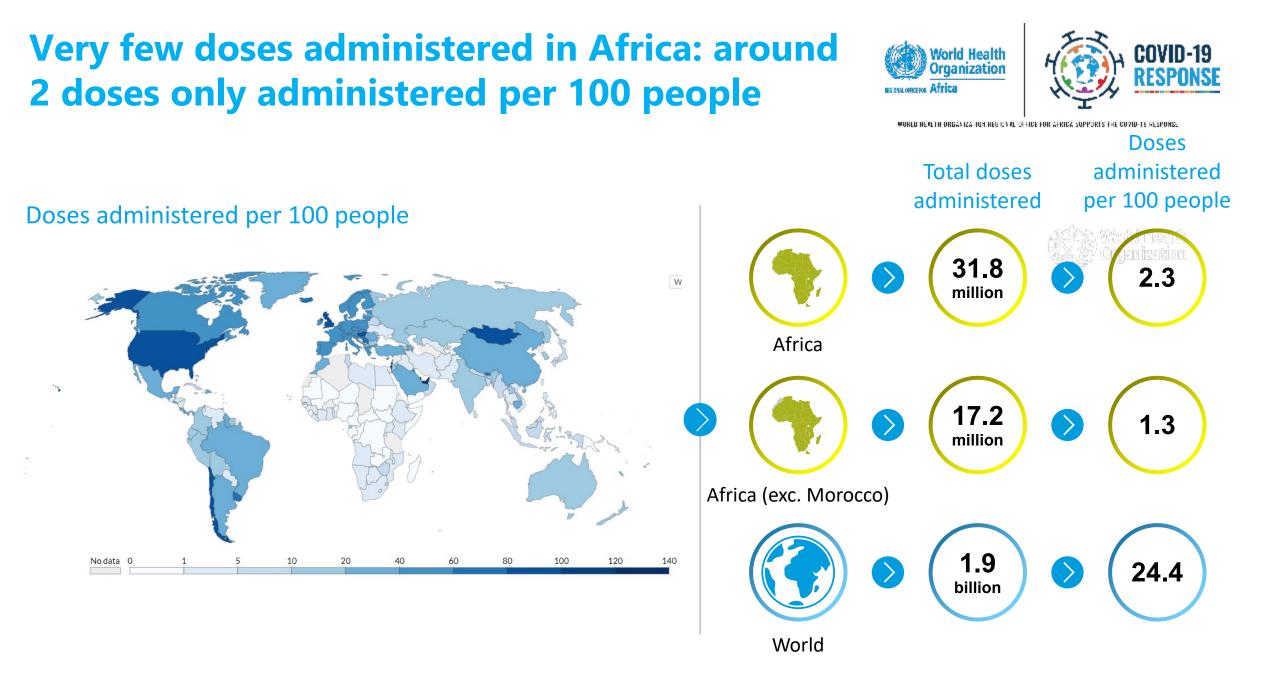


AFRICA COVID-19 Vaccination Daily Update



Disclaimer: Data collated from multiple sources, and may not reflect the actual figures in countries

For questions or update please contact poya@who.int



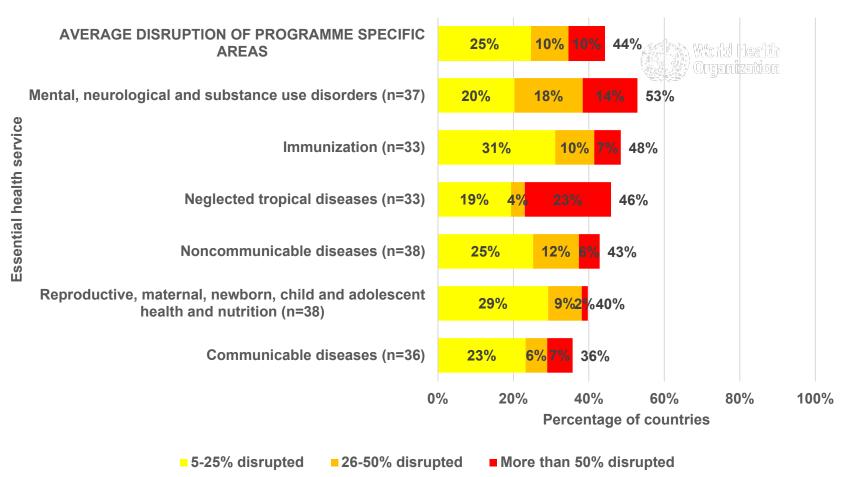
Disruptions to essential health services persist across the AFRO region

Disruptions were reported across all the main programmes



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- **53% of AFRO countries** reported disruptions to mental health
- **48%** of countries reported disruptions to immunization services
- **46%** reported disruptions to Neglected Tropical Diseases ;
- **43%** of countries reported disruptions to NCD services
- **40%** and **36%** reported disruptions to RMNCAH and Communicable diseases respectively



Percentage of countries reporting disruptions across tracer service areas

Working draft for internal use only – not for circulation

Disruptions in immunization services

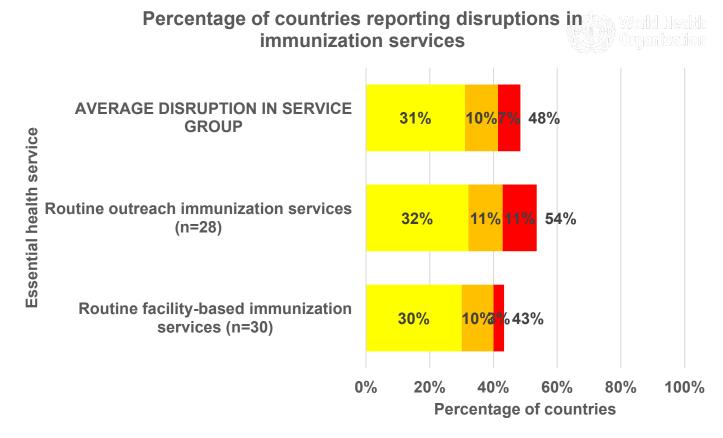


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More than 1/3 of countries reported disruptions to both facility-based and immunization services. Essential service disruptions due to COVID-19 have relativley decreased but still continued.

Among immunization services :

- **54%** of countries reported disruption to routine outreach immunization services and,
- **43%** to routine facility-based services



■ 5% to 25% disrupted **■** 26% to 50% disrupted **■** More than 50% disrupted

VPD campaigns postponed due to COVID-19: 58 campaigns in 48 countries, 1st June 2021*



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Diseases/ Vaccines	No. of countries with postponed campaigns (fully or partially)	No. of campaigns postponed (fully or partially)	No. of campaigns postponed by regions					
			AFR	AMR	EMR	EUR	SEAR	WPR
Measles/ Measles Rubella/ Measles Mumps Rubella (M/MR/MMR)	23	23	4	5	2	6	3 01	ond Has ganizati 1
Polio (IPV)	13	13	10				2	1
Bivalent Oral Poliovirus (bOPV)	6	7	2		3		2	
Monovalent Oral Poliovirus Type2 (mOPV2)								
Meningitis A (Men A)	3	3	3					
Yellow Fever (YF)	2	2	1		1			
Typhoid (TCV)								
Cholera (OCV)	4	5	2		1		2	
Tetanus (Td)	4	5	1		2			2
Total postponed	48*	58	23	5	9	6	9	4

No. of countries with campaigns that have been postponed because of COVID-19 *counting from March 2020 - current as of 2021-06-01

*Total no. of countries with at least one VPD immunization campaign postponed (fully or partially)

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Essential Service Disruption



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Insufficient staff availability due to deployment to provide COVID-19 relief is the major cause of disruption

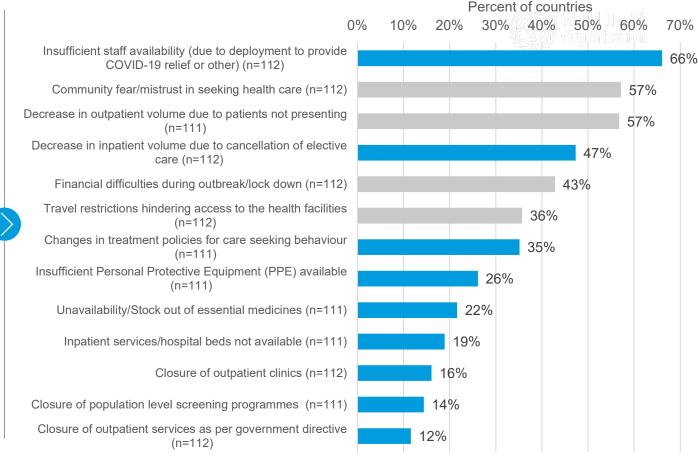


Supply-side reasons are linked to staff deployment to COVID-19 relief and insufficient staff availability. Cancellation of elective care and changes to treatment policies are also reported as reasons for disruptions



Demand-side reasons included: community fear/mistrust, decreases in OPD volume due to patients not presenting, travel restrictions and financial difficulties during the pandemic.

In some countries, measures for COVID-19 control may contribute to increased barriers to accessing care (e.g. fear of getting infected, limited PPE access, limitations in movement, loss of income, increased financial burden etc.)



Reasons for service disruptions (n=112)

Denominator: does not include "Not applicable" or "Do not know" responses.

Demand side factor Supply side factor



• •

Vaccine

hesitancy



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Multiple vaccines in country

Reports of schedules being completed using a different vaccine AZ doses received through AVATT have very short shelf life



Costing & financing

Reports of diversion of funds from other programs to cover operational costs Kuspension of vx in HICs due to reports of AEFI has a big impact in LICs/LMICs



Safety monitoring

Delays in some countries in reporting adverse events. Concerns about the safety of AZ vaccine, related to suspension in some EU countries. New concerns about J&J in the US



Target population

Reports of diversion of doses because co-morbidities cannot be verified or to prevent wastage



Knowledge management

Emerging data on efficacy, effectiveness and safety of different products against variants of concern 

RI and other programs

Need to support the
use of IAR tools to
more systematically
document lessonsC
a
a
b
b
learned

Monitoring

tools

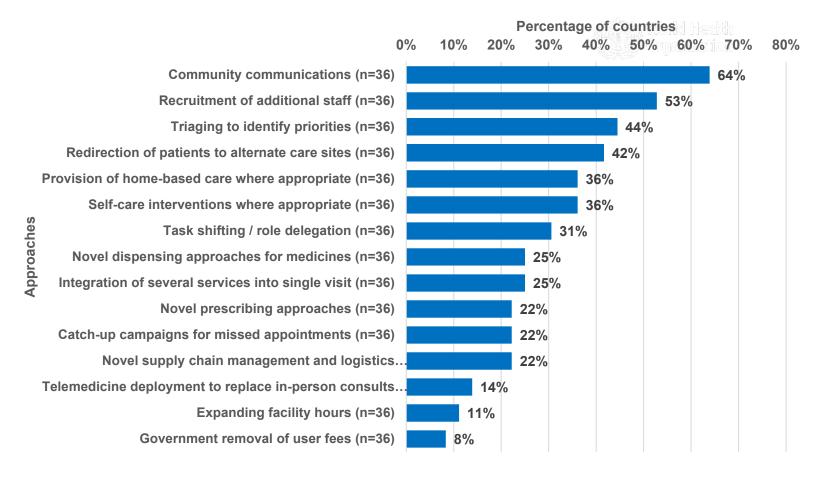
Concern from AFRO and partners on a potential decline in RI coverage (even though this was not observed in 2020) Other programs may also suffer if funding is diverted

Strategies to restore or adapt service delivery being implemented by many countries



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Approaches for overcoming disruptions



- More than half countries report using community communications (64%) and staff recruitment (53%) to overcome service disruptions
- 42% of countries have redirected patients to alternative care sites
- 36% of countries have provided home-based care where appropriate
- 22% of countries have conducted campaigns for measles to catch up

The future of PHC systems



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Primary health care systems and services will need to be scaled up to accommodate and address the needs of adults and older age population.

- 1. Data systems : Optimizing data collection, analysis and management tools to capture older age population and adults (beyond children, mothers and adolescents)
- 2. Human Resource: Number of health providers and their skill sets (non-communicable and chronic diseases)
- 3. Cold Chain capacity: Expand Cold chain and logistics capacity to accommodate for new vaccinces including COVID-19
- 4. Essential health service re-packaging
 - Including a widespread **routine Adult vaccination** services
 - Service delivery sites to include schools (adolescents and young people)
 - Outreach service delivery to include **non-traditional sites such as workplaces, public gathering sites**
 - Address health challenges of the **older age and adult populat**ions eg. Non-communicable diseases
- 5. Governance and organisation of PHC

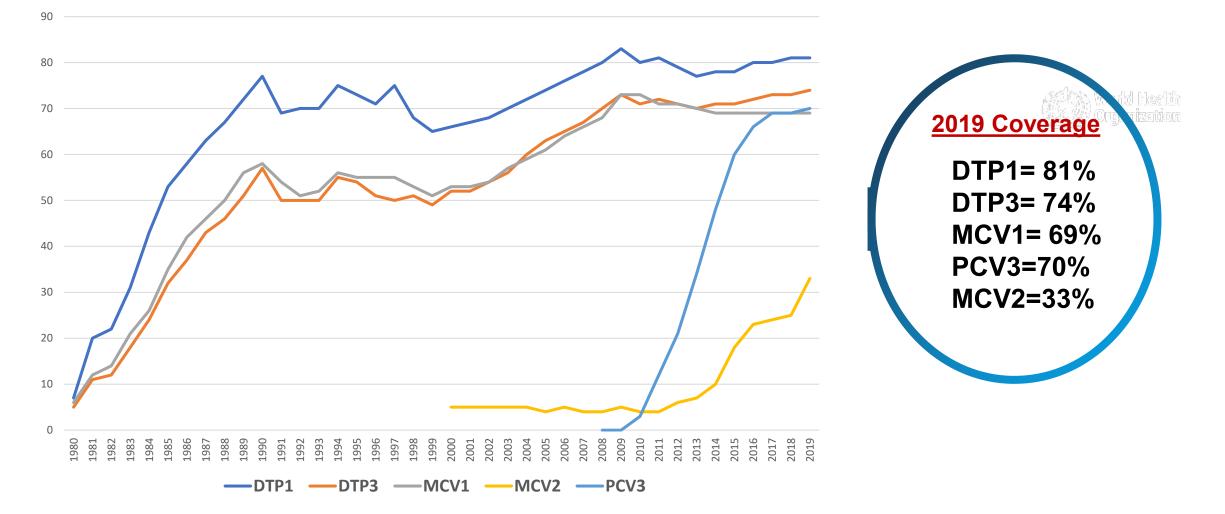
Impact on essential immunization

Routine Immunization progress in the African Region (WUENIC), 1980 - 2019



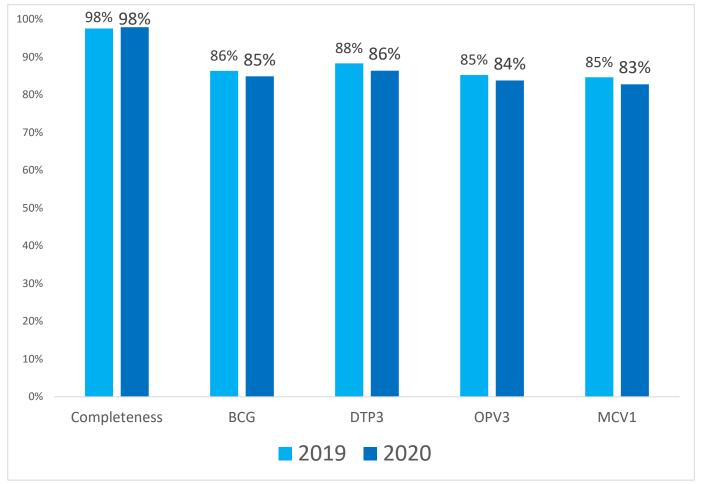
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Source: WUENIC 2020

Routine Immunization coverage 2020 vs 2019 (Reported data)



World Health Organization RESPON

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Asta World Health

± 2% drop in coverage has been observed in reported data between 2019 and 2020

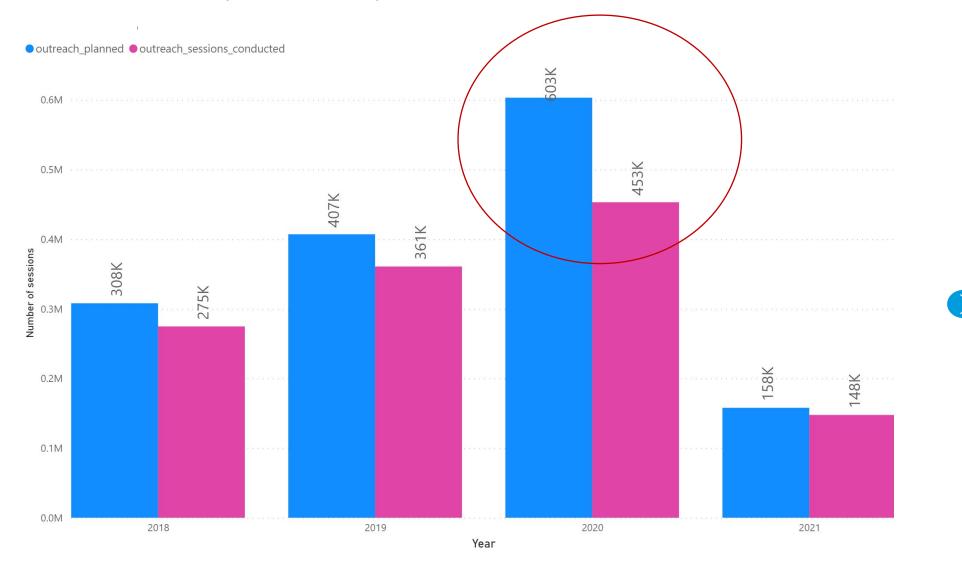
Monthly monitoring of Immunization session



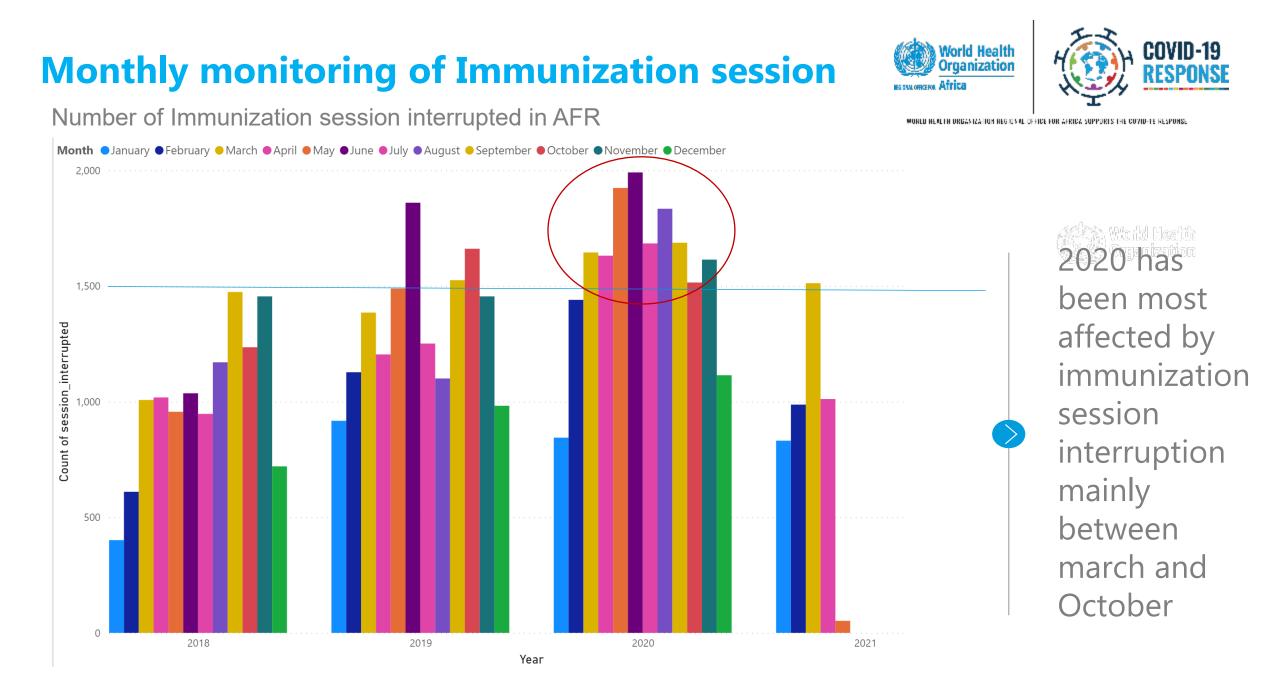


Outreach session implemented vs planned

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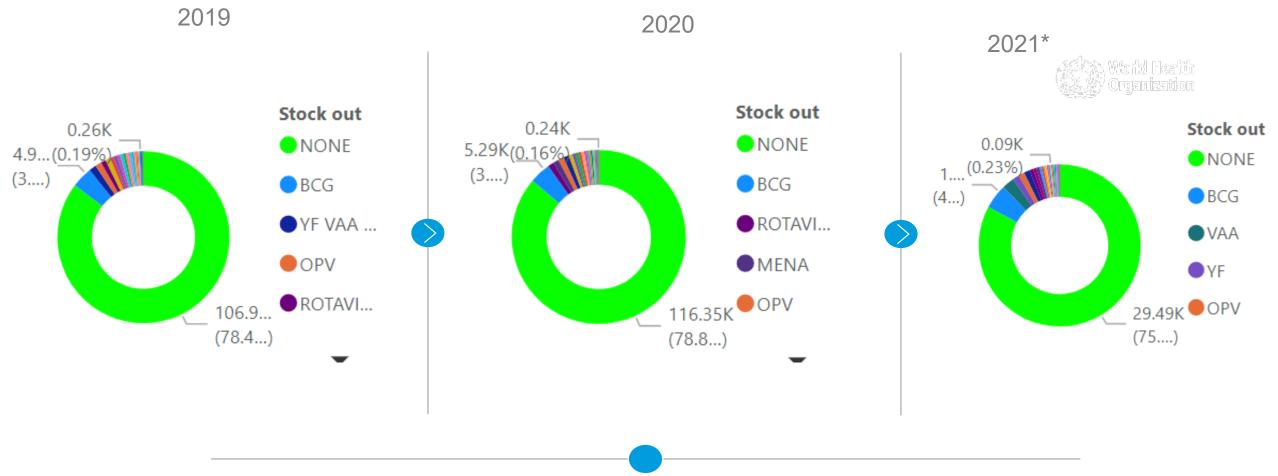
The lowest proportion of non implemented outreach session vs planned happened in 2020



Vaccine availability



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Source: ISS * January to May +- 78% of visited sites were found with no vaccine stock out in 2019 and 2020 which dropped to 75% the first 5 years of 2021. BCG, YF vaccine and OPV are among vaccine found out of stock





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- Disruptions are still persisting, even though countries have largely opened up their economies meaning that current disruptions are not associated with lockdowns, or burden of COVID-19
- This suggests that the residual effects of the pandemic on essential services will persist probably for a long time.
- Disruptions are driven by both demand and supply side issues
- Some gains and partial rebound in service provision and utilization have been seen:
 - There are due to implementation of recommended policies and strategies for maintaining essential health services

Thank you