

THE IMPACT OF COVID-19 ON NTD PROGRAMME AFRICA

Implementing Partners' Consultative Meeting
27 May 2020

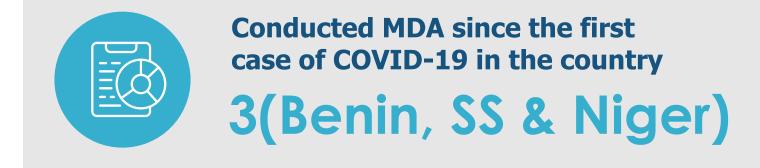


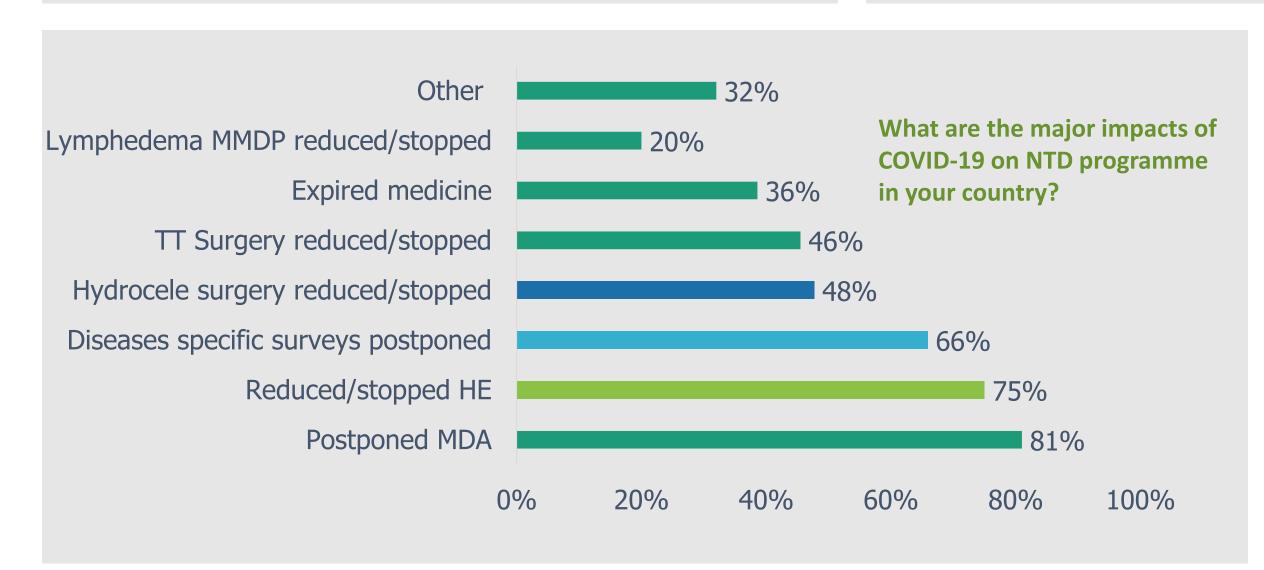


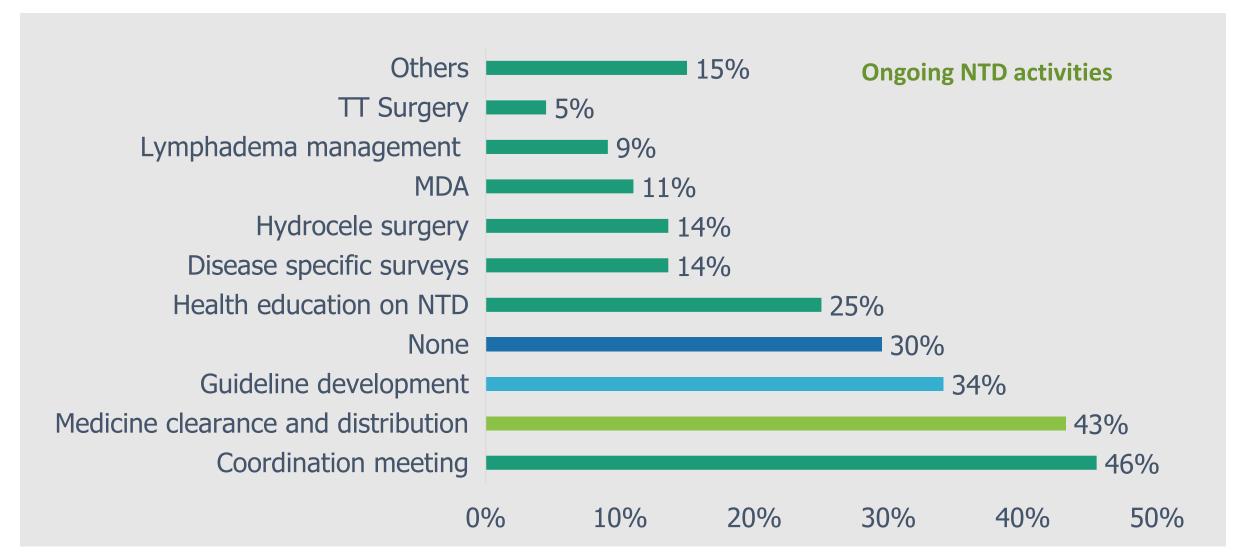
OVERALL IMPACT OF COVID-19 ON NTD PROGRAMME IN AFRICA

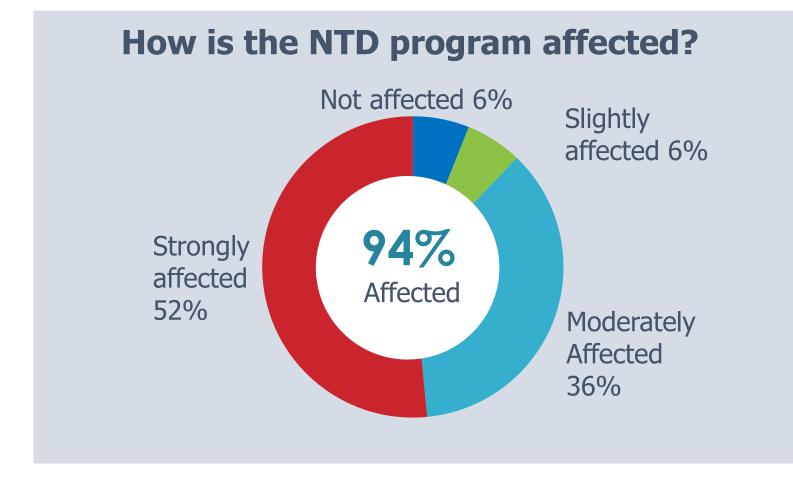


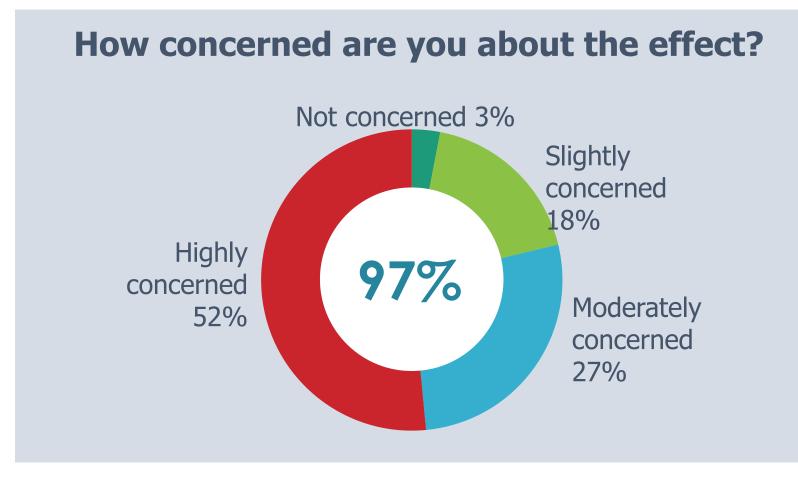


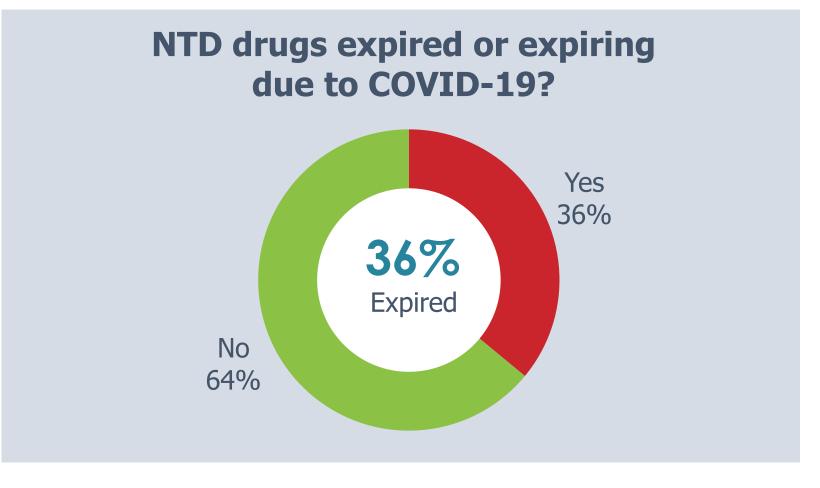








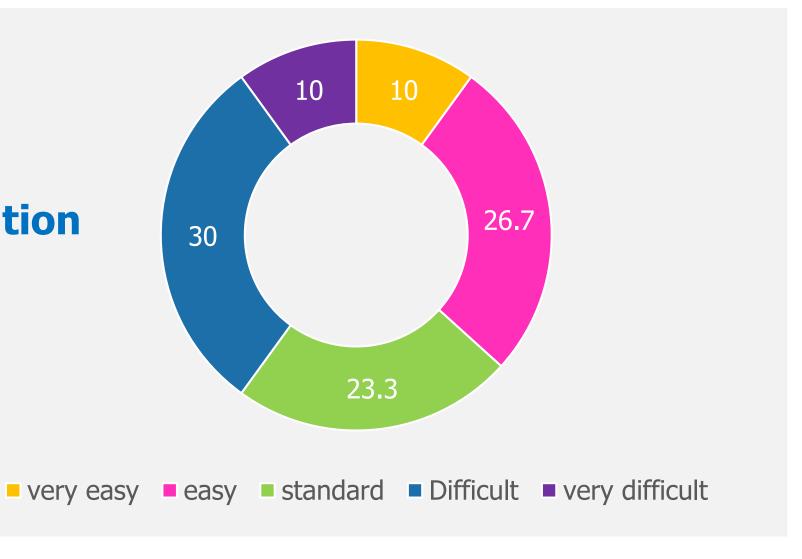




KEY INDICATORS AND LIST OF COUNTRY

POSTPONED MDA (26)	Kenya, Eswatini, Rwanda, South Sudan, Niger, Malawi, Togo, Burundi, Senegal, Uganda, Ethiopia, Botswana, Liberia, Sierra Leone, CIV, Chad, Madagascar, Guinea Bissau, Cameroun, Benin, Gabon, Angola, Ghana, Burkina Faso, Mauritania and Zambia.
NTD DRUGS AND SUPPLIES EXPIRED/EXPIRING (12)	Angola, Chad, Ghana, Guinea Bissau, Kenya, Liberia, Malawi, Senegal, South Sudan, Mauritania, Zimbabwe and Zambia
POSTPONED DISEASE SPECIFIC SURVEYS(24)	Rwanda, South Sudan, Niger, Malawi, Togo, Burundi, Kenya, Senegal, Uganda, Ethiopia, Botswana, DRC, Liberia, CIV, Chad, Madagascar, Benin, Namibia, Gabon, Angola, Ghana, Burkina Faso, Mauritania, Zambia.
NOT PROVIDING MMDP FOR LF AND TRACHOMA (17)	Burkina Faso, Burundi, Cameroon, Chad, DRC, Ethiopia, Eswatini, Guinea Bissau, Madagascar, Namibia, Senegal, Sierra Leone, South Sudan, Togo, Uganda, Zambia and Zimbabwe.

How easy is it to access information about NTD programme implementation during COVID-19?



PLANNING TO RESUME MDA(9)

Angola, Benin, DRC, Niger, Malawi, South Sudan, Mozambique, Guinea Conakry, Madagascar

PROVIDING MMDP FOR LF AND TRACHOMA (13)

Algeria, Angola, Benin, Cabo Verde, Côte d'Ivoire, DRC, Gabon, Liberia, Malawi, Mauritania, Niger and Rwanda

COVID-19 and NTD Programme workforce

63.3%

NTD programme personnel repurposed to COVID-19.

73.3%

There is involvement of CDDs and CHW in the COVID-19 work.

Do you see any change in the role of CDDs and CHW changing after COVID-19?

Yes = 36.6%

NTD programme personnel in your country repurposed to COVID-19

- As a frontline responders on night duty, active case search and contact tracing
- Community based surveillance, monitoring and evaluation.
- Response team deployed to sub-national level
- At national level supporting coordination of various subcommittees.
- Training and capacity building on COVID-19
- Risk communication, community engagement and development and validation of SOPs
- Case management guidelines and coordination of triage

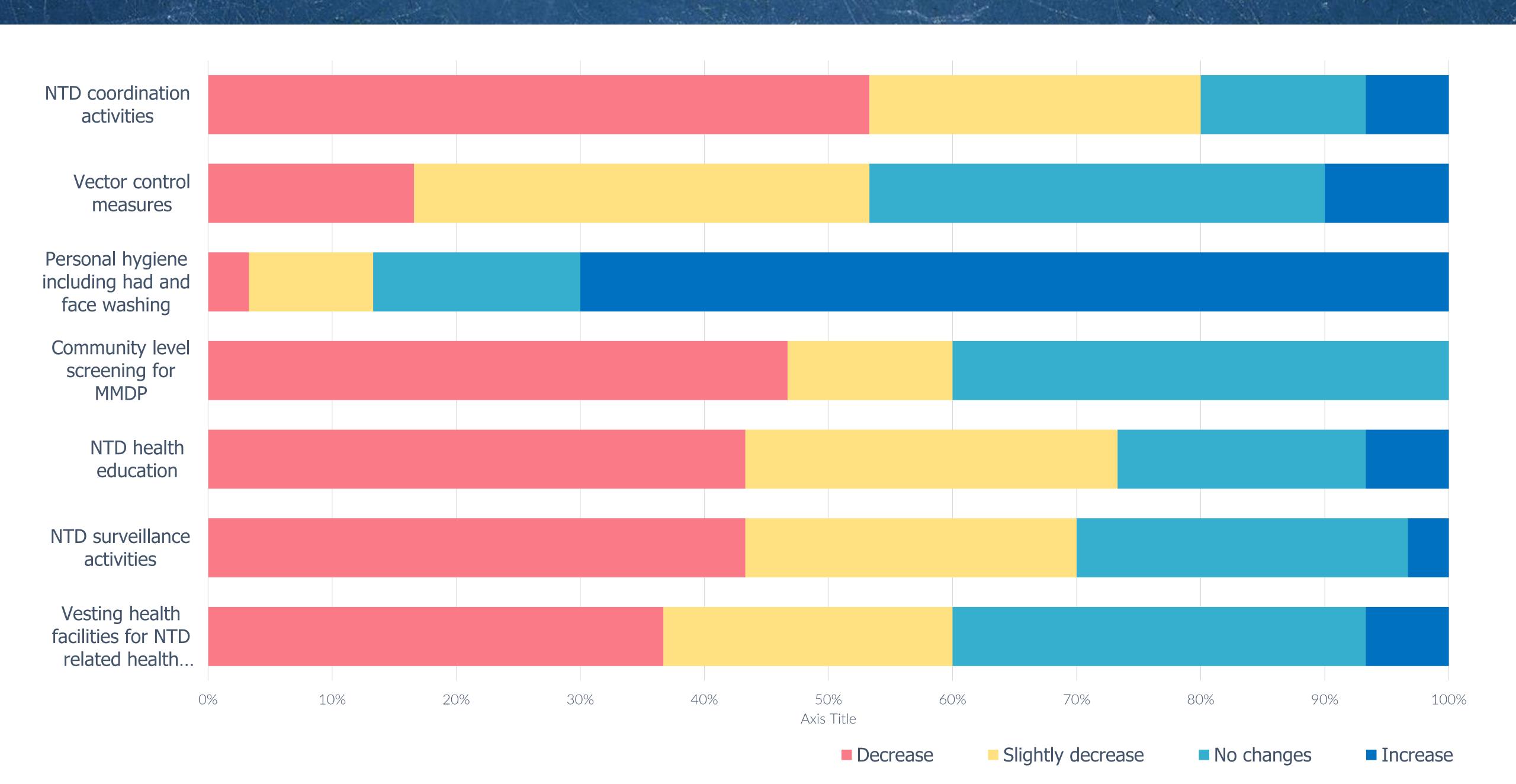
CDDs and CHW supporting any NTD activities currently

- Door to door MDA along with Vitamin A supplementation.
- Ongoing GWD surveillance coupled with COVID-19 prevention messagesCDDs for Trachoma control Programme integrated COVID 19 awareness messages
- Sensitization on LF morbidity management to prevent comorbidity impact

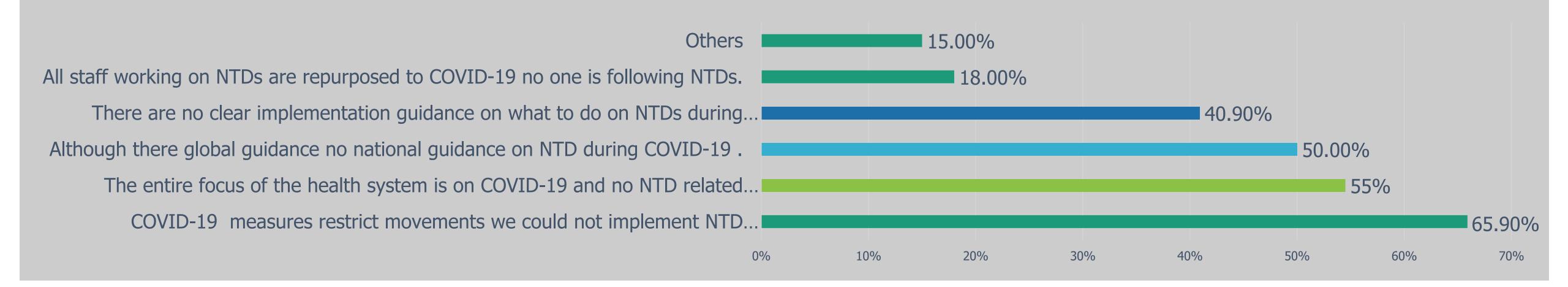
COVID-19 related activities are CDDs and CHW supporting

- Risk communication and community engagement of COVID-19 and Promotion of hygiene measures.
- Surveillance (screening, active case finding, contact tracing and follow up and suspect notifications).
- Point of entry surveillance support, rumour management
- Infection Prevention and Control: Support in triage at health facilities.

Impact of COVID-19 on key NTD interventions



Key challenges and coping strategies



In summary the key challenges are:

- Postponement of planned MDA activities with the danger of **expiry** for some **of the drugs** as well as missing of opportune timing for MDA implementation in some countries.
- Postponement of disease specific surveys: Expiry of diagnostic test and other commodities.
- Repurposing of **human resources** for the COVID-19 response at the country level endangering continuity of essential health services including NTD work.
- Postponement and delay in provision of **MMDP and TT surgery** due to fear of COVID-19 propagation.
- **Delay in submission** of 2019 treatment **reports and JAP** 2021 submission.
- Poor quality of country inventory management and delay in delivery of new shipments.
- Lapse in surveillance and data collection activities due to repurposing of staff, and finances, and Covid-19 prioritization.

Coping strategies

- Door- to-Door MDA by CHWs and CDDs
- Integration of individual and collective hygiene practices.
- Development SOPs and field manuals for safe delivery of MDA in the context of COVID 19 pandemic.
- Development integrated awareness messages for Guinea worm, Trachoma and COVID-19.
- Coordinating with COVID-19 response for example coordination of LF morbidity sensitization with COVID-19 activities
- Virtual and telephone communication.
- Follow WHO advice on NTD during COVID-19.
- Contingences quarterly plan.
- Rescheduling of activities.
- Virtual NTD coordinating meetings.
- Training of CHWs/CDDs on COVID 19 safety measures, provision of protective gears to carry out NTDs related activities.

Objective 1	Objective 2	Objective 3	Objective 4	Objective 5
Access platform and behavior change	Surveillance and (laboratory) capacity building	Supply chain management	Strengthening information and data management systems	Sustainability, country ownership and HSS
Community health workers (CHW) present in each community in Africa: • behavior change& health education; • distribute medicines and other commodities.	 ESPEN laboratory: to perform PCR and ELISA conduct quality control and quality assurance. Laboratory network in Africa Support data management systems for Africa. 	 ESPEN works with governments to strengthen Supply Chain mechanism, from the point of entry of medicines and commodities to the point of distribution. Inventory management, adequate distribution and storage, reporting on use, reverse logistics on unutilized products. 	 ESPEN portal is a platform for data sharing at community level for the entire African continent. ESPEN collect is a mobile app that enables CHW to collect information using simple questionnaires that are automatically shared with ESPEN. 	 ESPEN supports countries to develop Master plans for action for 2021-2025. ESPEN works with governments and partners to engage civil society in teaching behavior change and hygiene measures.
CHW train communities to prevent the spread of NTDs and COVID-19 by promoting WASH, hand washing, social distancing and adequate use of masks and bed nets when appropriate.	 African lab networks are trained for PCR for NTDs and COVID19). Lab results and data will be reported in a central national and regional database. 	SCM can also have an impact on distribution and appropriate management of supplies related to COVID-19 and NTD response (e.g. information leaflets, masks, gloves, hand washing devices, medicines)	ESPEN Portal and ESPEN Collect share continental wide subnational level data on NTDs and could be expanded to other infectious diseases such as COVID-19.	NTD Master Plans are able to incorporate COVID-19 approaches to empower communities to protect their health holistically.

