



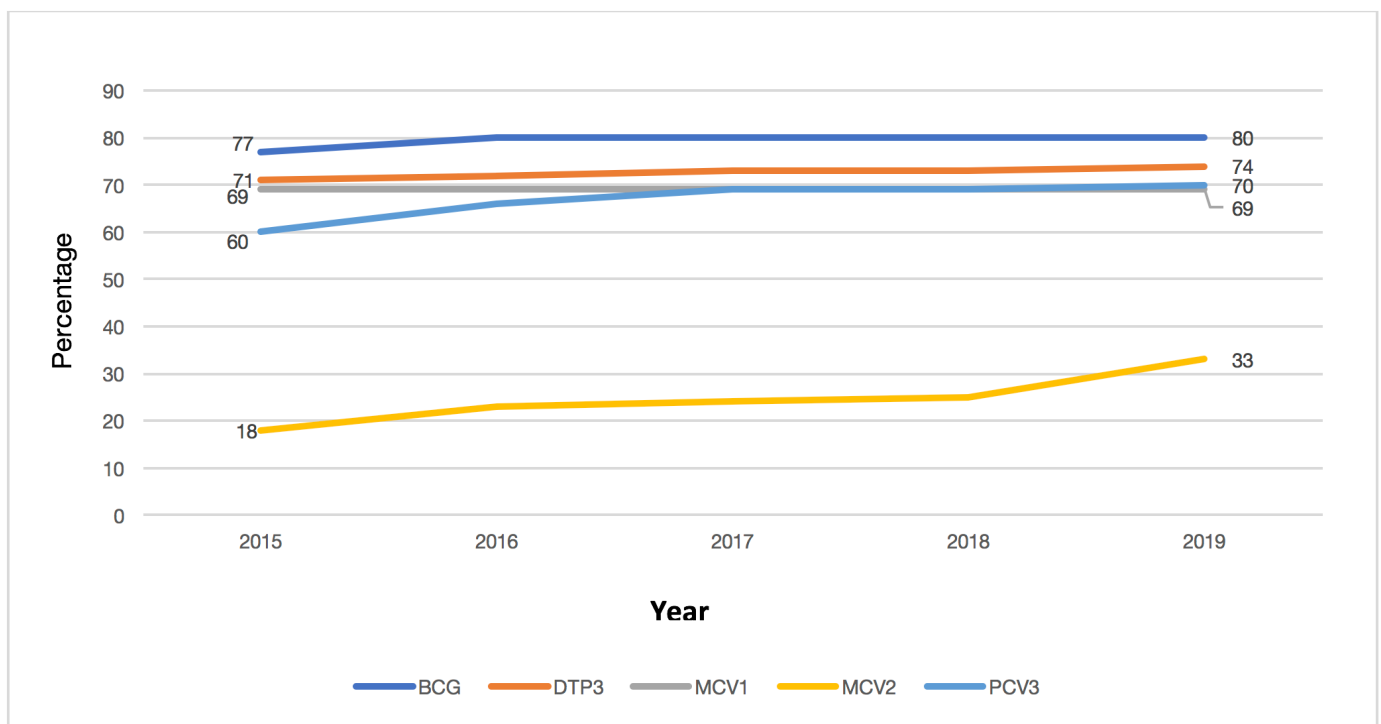
# WHO AFRO Immunization Bulletin:

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## WHO and UNICEF released Immunization Coverage Data for 2019

In July 2020, WHO and UNICEF released national immunization coverage estimates for 2019 ([WUENIC 2019](#)). These estimates showed that between 2014 and 2019, regional coverage for the third dose of the diphtheria-tetanus-pertussis containing-vaccine (DTP3) stagnated between 71% and 74%, while the first dose of the measles containing vaccine (MCV1) stagnated at 69% (Figure 1). As of 2019, 19 countries<sup>1</sup> in the African Region had achieved the Regional Strategic Plan for Immunization (RSPI) coverage target of  $\geq 90\%$  for DTP3, while 15 countries<sup>2</sup> had achieved the RSPI coverage target of  $\geq 90\%$  for MCV1 (Figure 2).

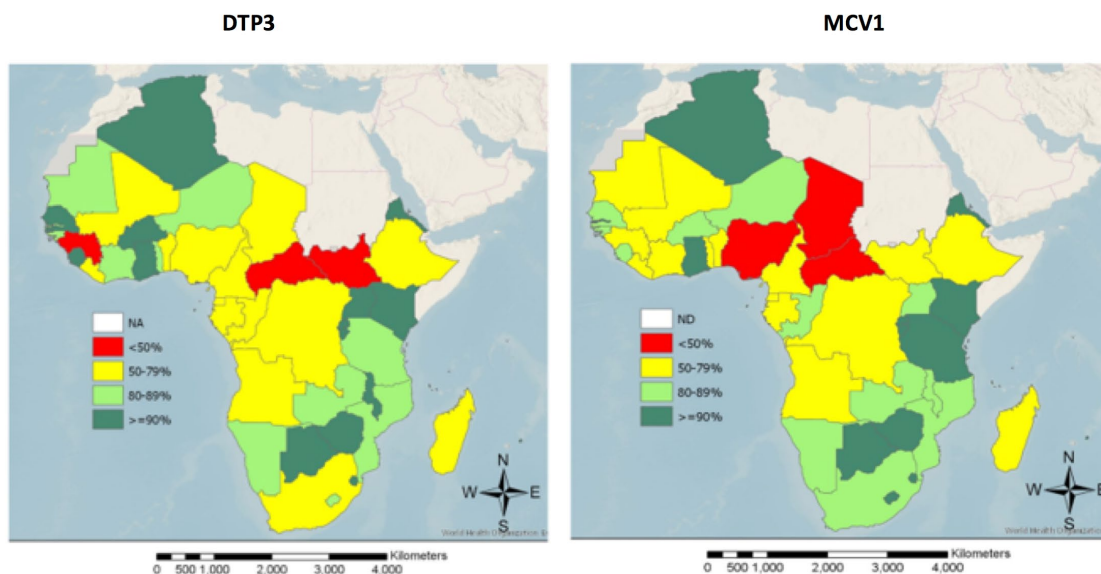
FIGURE 1: Selected Vaccine Coverage, WHO African Region, 2015-2019



Source: WUENIC 2019

<sup>1</sup> Algeria, Botswana, Burkina Faso, Burundi, Cabo Verde, Comoros, Eritrea, Eswatini, Ghana, Kenya, Malawi, Mauritius, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, Uganda and Zimbabwe.  
<sup>2</sup> Botswana, Burundi, Cabo Verde, Comoros, Eritrea, Ghana, Lesotho, Malawi, Mauritius, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone and Zambia.

FIGURE 2: DTP3 and MCV1 Coverage by Country, 2019



## COVID-19 Impact on Routine Immunization in the WHO African Region

On 30 January 2020, WHO declared the outbreak of the novel Coronavirus disease of 2019 (COVID-19) a Public Health Emergency of International Concern (PHEIC), and a pandemic on 11 March 2020. As of 30 September, the WHO African Region had recorded over 1 million COVID-19 cases and 25,926 deaths, disproportionately distributed across the region.

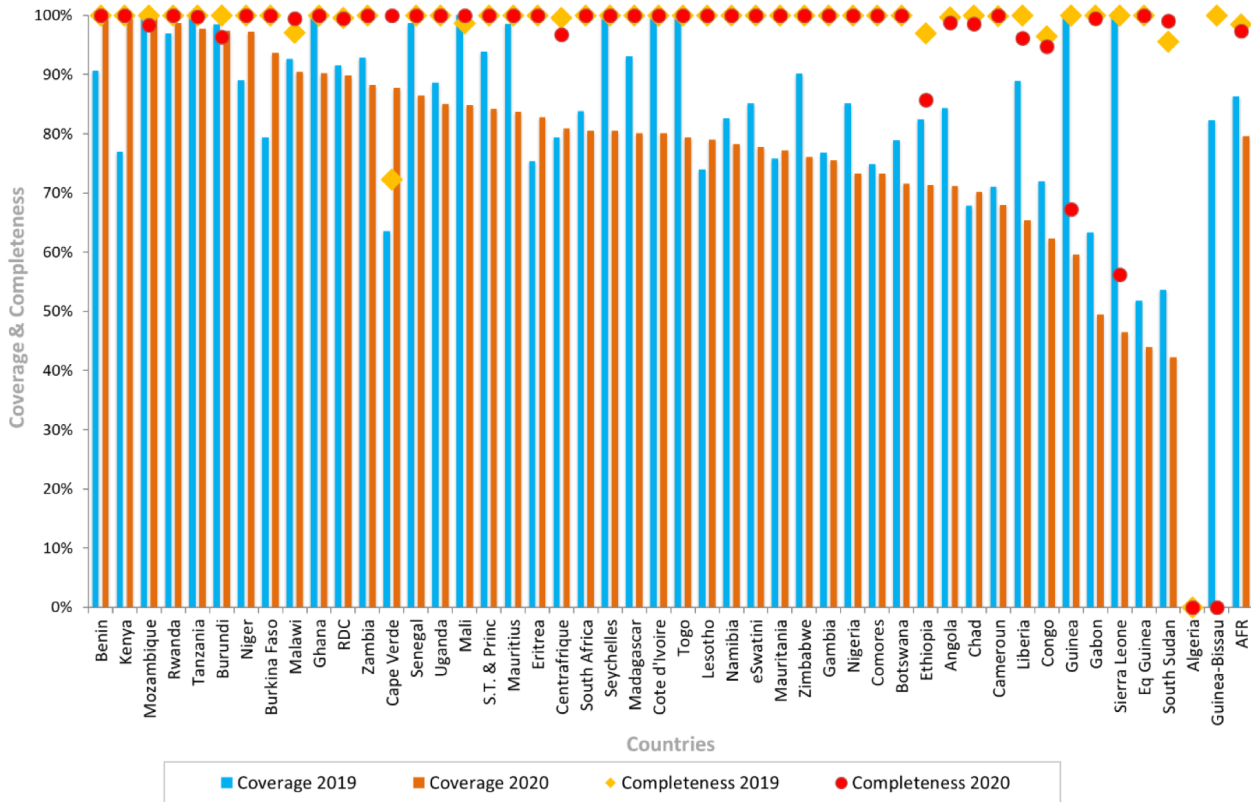
Control measures taken by countries to control the spread of COVID-19 have affected the delivery of essential services, including routine immunization (RI) and supplementary immunization activities (SIAs). A pulse survey conducted by WHO between May and July 2020 showed that commonly reported service disruptions in the region included outreach immunization services (75%), family planning and contraception (69%), and antenatal care (69%). As a result of service disruption, more than 1 million children were not vaccinated for DTP3 and almost 1 million were not vaccinated for MCV1 in the region from January to July 2020 compared to the same time period in 2019 (Figures 3-4).

Similarly, in the first half of this year, 15 countries reported a reduction of more than 10% in the number of vaccinated children for either DTP3 or MCV1, compared to the same period in 2019 (Table 1).

FIGURE 3: MCV1 Coverage in the WHO African Region from January to July, 2018-2020.



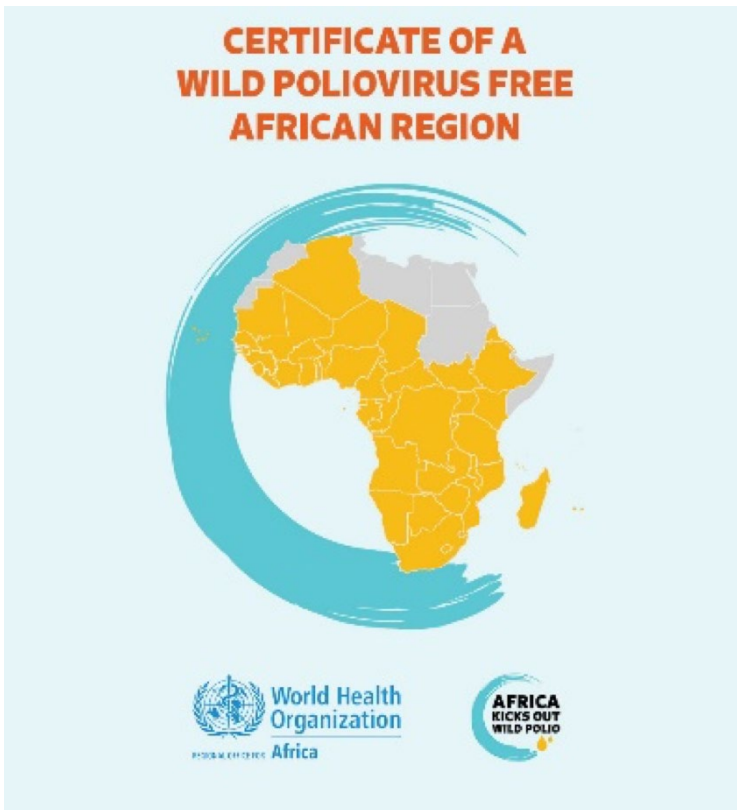
FIGURE 4: MCV1 Coverage by Country, WHO African Region, from January to July, 2019-2020



## The African Region is certified Wild Polio Free – while responding to a surge of circulating vaccine-derived poliovirus

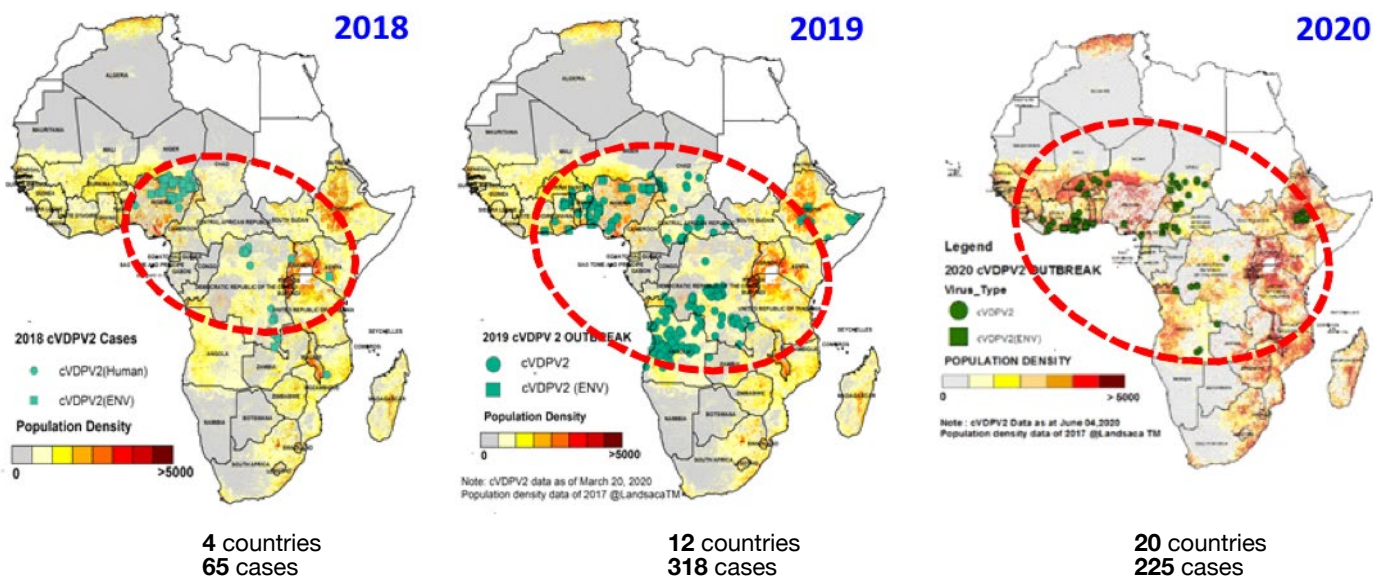
On 25 August 2020, the independent Africa Regional Certification Commission (ARCC) certified the WHO African Region free of wild poliovirus. This historic achievement marks the second disease to be eradicated from the Region, since the eradication of smallpox 40 years ago. The path to polio eradication in Africa has been a monumental effort of multinational coordination among governments, donors and development partners, health workers, traditional and religious leaders, civil society, local communities and parents. In 1996 – when polio was paralyzing 75,000 children a year across the continent – African leaders signed the Yaoundé Declaration on Polio Eradication in Africa, and the late Nelson Mandela and Rotary International launched the ‘Kick Polio Out of Africa’ campaign, jumpstarting Africa’s commitment to polio eradication. Since then, an estimated 1.8 million cases of wild poliovirus have been averted, and 9 billion oral polio vaccines have been provided. Each year, about 2 million health volunteers help immunize 220 million children against polio across the WHO African Region.





Despite this monumental achievement, the challenge of eliminating circulating vaccine-derived poliovirus (cVDPV) remains (Figure 5). As of 18 September 2020, 16 countries in the WHO African Region have reported cVDPV2 outbreaks, with a total of 225 cVDPVs detected through samples collected from acute flaccid paralysis cases and 72 cVDPVs detected from the environment. Response to cVDPV2 outbreaks has been delayed by the suspension of mass immunization campaigns in many African countries, due to the COVID-19 pandemic. The WHO Polio Eradication Programme in the African Region is working closely with partners and member states to resume immunization campaigns and polio outbreak response activities – while adhering to strict infection prevention and control measures against COVID-19 transmission, to ensure the safety of the children, caregivers and frontline vaccinators.

FIGURE 5: Distribution of cVDPV across the African Region, 2018-2020



## Mass Immunization Services during COVID-19

Despite the immense challenges posed by the COVID-19 pandemic, several countries in the Region are continuing to deliver immunization services, with heightened infection prevention and control measures in place.

### Ethiopia conducted nationwide measles SIAs, integrating COVID-19 prevention measures

After an initial decision in March 2020 to postpone all planned mass vaccination activities due to the COVID-19 pandemic, Ethiopia organized a successful nationwide measles campaign in July 2020. The Federal Ministry of Health and the national COVID-19 response taskforce prioritized supplemental immunization activities (SIAs) for measles, considering the increasing risk of measles outbreaks, COVID-19 transmission trends, the approaching rainy season (from July to September), and the operational feasibility of conducting the SIAs in a safe manner.

SIA preparations integrated COVID-19 prevention measures, including virtual trainings at national and provincial levels; small workshops with distancing and masks at the district level; and distribution of face masks, sanitizers and other personal protective equipment (PPE) supplies at the district level.

Intensive social mobilization was done leading up to and during the SIAs, with discussions and messages focused on the need to continue essential services including immunization, as well as on safety measures and the rationale for the SIAs. In addition, efforts were made to bring the vaccination service delivery sites closer to the community, which were organized in well-ventilated areas to allow for physical distancing and to enable COVID-19 screening. Additional health workers and volunteers were included in the vaccination teams.

The SIAs were implemented over 7-10 days in each district to avoid over-crowding. The whole country was covered between 30 June and 24 July 2020, reaching more than 13.9 million children aged 9-59 months, and attaining 98.8% administrative coverage against the target at national level.

Overall, the SIAs were highly successful due to strong coordination and effective leadership at all levels, commitment of health workers, availability of PPE, strong social mobilization efforts, proximity of vaccination sites to the communities, deployment of mobile vaccination teams in some areas, and the extended campaign implementation period. Going forward, Ethiopia will need to increase the sensitivity of its disease surveillance and continue to reinforce routine immunization in order to sustain the gains from the campaign and ensure that any pockets of immunity gaps are identified and addressed.



### Uganda vaccinated more than 1.6 million people against yellow fever

The Republic of Uganda, in collaboration with WHO and partners, conducted a vaccination campaign from 24-31 August 2020 to control the spread of yellow fever in six districts. More than 1.6 million people, from 9 months to 60 years of age, were vaccinated in this seven-day campaign.



The vaccination campaign used doses from the global emergency yellow fever vaccine stockpile, managed by the International Coordination Group on Vaccine Provision (ICG) and funded by Gavi, the Vaccine Alliance. The ICG coordinates the timely and equitable provision of vaccines during outbreaks and maintains an emergency stockpile of 6 million doses of yellow fever vaccine, which is continually replenished. Gavi also covered operational costs for this campaign.

The WHO Framework for decision-making and guideline for implementation of mass vaccination campaigns in the context of COVID-19 were used to conduct the campaign. This included infection prevention measures such as use of masks and hand sanitizer, as well as physical distancing.

The campaign was a response to eight laboratory-confirmed yellow fever cases, which tested positive in January 2020, most of them after visiting rural areas in South Sudan and the Democratic Republic of the Congo (DRC). Since then, no other case has been confirmed in the country, but more than 80 suspected cases have been reported since the beginning of the year.

## WHO AFRO Established a COVID-19 Vaccine Readiness and Deployment Taskforce

In response to the COVID-19 pandemic, the COVID-19 Vaccine Global Access Facility, commonly referred to as the “COVAX Facility” – co-led by Gavi, the Vaccine Alliance, the Coalition for Epidemic Preparedness Innovations (CEPI) and WHO – was established to provide the world with the best chance that safe, efficacious COVID-19 vaccines are rapidly available and affordable to the highest risk populations worldwide, regardless of income level.

The COVAX Facility forms a key part of the Access to COVID-19 Tools (ACT) Accelerator, a global collaboration established to accelerate the development, production and equitable access to COVID-19 tests, treatments and vaccines. The COVAX Facility aims to accelerate the development and manufacture of COVID-19 vaccines, and to guarantee fair and equitable access for every country in the world. It aims to provide at least 2 billion doses by the end of 2021, enabling participating economies to protect frontline health care and social workers, as well as other high-risk groups.

More than 172 countries are engaged in the COVAX Facility. Eighty countries have expressed interest to finance the vaccines from their own public finance budgets and partner with up to 92 low-income countries that could be supported through voluntary donations to Gavi’s COVAX Advance Market Commitment (AMC). Together, this group of 172 countries represents more than 70% of the world’s population, with representation from each continent and more than half of the world’s G20 economies.

This historic scientific collaboration is currently monitoring over 300 vaccine candidates in varying stages of development and 25 candidate vaccines in clinical evaluation. It is anticipated that potentially one or more vaccine candidate(s) could achieve emergency use approval by Q4 2020. In anticipation of these developments, WHO AFRO has established the COVID-19 Vaccine Readiness and Deployment Taskforce (ACREDT), which will work with the global COVID-19 Vaccine Country Readiness and Delivery Group (CRaD) to facilitate the technical aspects of COVID-19 vaccine readiness and delivery activities in the region.

One area of ACREDT’s work is to process and review the available evidence in parallel with the ongoing phases 1, 2 and 3 trials of candidate vaccines and share the safety and efficacy data with countries.



**Table 1. Summary of Routine Immunization in the African Region, January-July 2019 & 2020**

Country	Vaccinated children				Change in vaccinated children, January-July 2019 and 2020				Coverage change, January-July 2019 and 2020			
	DPT3		MCV1		DTP3		MCV1		DPT3		MCV1	
	2019	2020	2019	2020	Absolute number	Percent	Absolute number	Percent	2019	2020	2019	2020
Algeria	-	-	-	-	NA	NA	NA	NA	ND	ND	ND	ND
Angola	458,559	398,618	521,189	452,587	-59,941	-13%	-68,602	-13%	74.2%	62.7%	84.3%	71.2%
Benin	231,213	223,991	228,042	222,771	-7,222	-3%	-5,271	-2%	91.9%	110.7%	90.6%	110.1%
Botswana	29,057	29,366	29,795	26,991	309	1%	-2,804	-9%	77.0%	77.8%	78.9%	71.5%
Burkina Faso	354,146	440,139	352,909	440,401	85,993	24%	87,492	25%	79.7%	93.6%	79.4%	93.7%
Burundi	228,670	210,857	222,326	224,645	-17,813	-8%	2,319	1%	101.3%	91.4%	98.4%	97.4%
Cameroon	408,869	371,806	366,242	352,029	-37,063	-9%	-14,213	-4%	79.3%	71.8%	71.0%	68.0%
Cape Verde	3,418	5,062	3,902	5,307	1,644	48%	1,405	36%	55.7%	83.6%	63.5%	87.7%
Central African Republic	78,441	75,790	75,444	78,357	-2,651	-3%	2,913	4%	82.5%	78.2%	79.4%	80.9%
Chad	366,078	344,590	303,315	303,854	-21,488	-6%	539	0%	81.8%	79.6%	67.8%	70.2%
Comoros	10,488	9,884	10,469	10,515	-604	-6%	46	0%	75.0%	68.9%	74.9%	73.3%
Congo	98,994	83,672	94,820	84,377	-15,322	-15%	-10,443	-11%	75.1%	61.8%	72.0%	62.3%
Cote d'Ivoire	548,900	503,224	545,223	487,771	-45,676	-8%	-57,452	-11%	106.4%	82.6%	105.7%	80.1%
Democratic Republic of the Congo	2,022,179	2,039,622	2,001,078	2,058,255	17,443	1%	57,177	3%	92.5%	89.0%	91.6%	89.8%
Equatorial Guinea	9,219	8,103	8,043	6,822	-1,116	-12%	-1,221	-15%	59.4%	52.2%	51.8%	43.9%
Eritrea	44,868	49,310	50,104	48,243	4,442	10%	-1,861	-4%	67.5%	84.6%	75.4%	82.8%
Eswatini	16,175	14,332	15,413	14,085	-1,843	-11%	-1,328	-9%	89.3%	79.1%	85.1%	77.8%
Ethiopia	1,729,353	1,599,672	1,658,558	1,548,594	-129,681	-7%	-109,964	-7%	85.9%	73.7%	82.4%	71.4%
Gabon	27,311	20,922	26,095	21,055	-6,389	-23%	-5,040	-19%	66.3%	49.2%	63.3%	49.5%
Gambia	45,891	43,252	36,775	35,664	-2,639	-6%	-1,111	-3%	95.8%	91.5%	76.8%	75.4%
Ghana	677,257	656,780	663,173	635,602	-20,477	-3%	-27,571	-4%	106.5%	93.3%	104.3%	90.3%
Guinea	240,089	156,606	239,630	157,182	-83,483	-35%	-82,448	-34%	100.2%	59.4%	100.0%	59.6%
Guinea-Bissau	30,861	-	29,891	-	NA	NA	NA	NA	85.0%	ND	82.3%	ND
Kenya	751,180	736,665	749,649	747,688	-14,515	-2%	-1,961	0%	77.2%	107.7%	77.0%	109.4%
Lesotho	19,322	17,986	22,344	15,210	-1,336	-7%	-7,134	-32%	64.0%	93.4%	74.0%	79.0%
Liberia	89,630	72,721	86,979	69,020	-16,909	-19%	-17,959	-21%	91.6%	68.9%	88.9%	65.3%
Madagascar	490,773	445,911	486,720	424,794	-44,862	-9%	-61,926	-13%	93.8%	84.1%	93.1%	80.1%

■ Coverage ≥ 100%    
 ■ Coverage 90–99.9%    
 ■ Coverage 80–89.9%    
 ■ Coverage 50–79.9%    
 ■ Coverage < 50%    
 ■ No data

**Table 1. Summary of Routine Immunization in the African Region, January-July 2019 & 2020**

Malawi	403,176	412,838	394,181	394,302	9,662	2%	121	0%	94.8%	94.7%	92.6%	90.4%
Mali	445,197	416,141	449,151	410,706	-29,056	-7%	-38,445	-9%	103.8%	86.0%	104.7%	84.9%
Mauritania	73,436	70,909	68,318	67,065	-2,527	-3%	-1,253	-2%	81.5%	81.7%	75.8%	77.2%
Mauritius	6,144	5,156	7,264	6,214	-988	-16%	-1,050	-14%	83.4%	69.4%	98.6%	83.7%
Mozambique	673,782	647,393	671,084	647,782	-26,389	-4%	-23,302	-3%	114.5%	108.6%	114.0%	108.6%
Namibia	43,483	42,912	40,738	39,534	-571	-1%	-1,204	-3%	88.2%	85.0%	82.6%	78.3%
Niger	546,146	547,949	547,067	549,037	1,803	0%	1,970	0%	88.9%	97.1%	89.0%	97.3%
Nigeria	3,998,732	3,700,922	3,637,944	3,449,305	-297,810	-7%	-188,639	-5%	93.5%	78.7%	85.1%	73.3%
Rwanda	204,391	197,167	206,340	213,992	-7,224	-4%	7,652	4%	96.0%	90.9%	97.0%	98.7%
São Tomé and Príncipe	3,046	2,455	3,046	2,789	-591	-19%	-257	-8%	93.9%	74.1%	93.9%	84.2%
Senegal	350,078	329,001	306,795	290,155	-21,077	-6%	-16,640	-5%	112.6%	98.0%	98.7%	86.5%
Seychelles	895	851	934	876	-44	-5%	-58	-6%	99.5%	78.2%	103.9%	80.5%
Sierra Leone	158,015	81,260	155,281	79,792	-76,755	-49%	-75,489	-49%	102.3%	47.3%	100.5%	46.5%
South Africa	574,983	552,793	565,956	544,516	-22,190	-4%	-21,440	-4%	85.1%	81.7%	83.8%	80.5%
South Sudan	154,047	171,254	150,320	144,482	17,207	11%	-5,838	-4%	54.9%	50.1%	53.6%	42.2%
Tanzania	1,254,212	1,242,297	1,245,622	1,207,595	-11,915	-1%	-38,027	-3%	104.3%	100.6%	103.6%	97.8%
Togo	172,594	156,238	178,194	149,841	-16,356	-9%	-28,353	-16%	98.1%	82.8%	101.3%	79.4%
Uganda	970,569	927,184	896,507	887,216	-43,385	-4%	-9,291	-1%	96.0%	88.9%	88.7%	85.1%
Zambia	370,654	360,623	398,831	368,237	-10,031	-3%	-30,594	-8%	86.3%	86.4%	92.9%	88.2%
Zimbabwe	241,711	227,809	241,754	203,828	-13,902	-6%	-37,926	-16%	90.2%	85.0%	90.2%	76.0%
<b>Total (African Region)</b>	<b>19,656,232</b>	<b>18,652,033</b>	<b>18,993,455</b>	<b>18,129,083</b>	<b>-1,004,199</b>	<b>-5%</b>	<b>-864,372</b>	<b>-5%</b>	<b>89.3%</b>	<b>81.9%</b>	<b>86.3%</b>	<b>79.6%</b>

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