eHealth AFRICA

OCTOBER 2024

Programs Performance Report

ehealthafrica.org

List of Acronyms

AIT –	Area of Intervention Target
CAHFSN –	Climate Adaptation in Health Food Security and Nutrition
CO2 –	Carbon Dioxide
cVDPV2 –	Circulating Vaccine-Derived Poliovirus Type 2
DPM –	Disease Prevention Monitoring
DRC –	Democratic Republic of the Congo
eHA –	eHealth Africa
REACH –	Resiliency through Azithromycin for Children
EOCs –	Emergency Operations Centers
FCT –	Federal Capital Territory
Indigo –	A vaccine carrier technology or system
LGAs –	Local Government Areas
LGA –	Local Government Area
LIPs –	Laboratory Infrastructure Projects
LS&D –	Laboratory Systems and Diagnostics
NIMR –	Nigerian Institute of Medical Research
OBR –	Outbreak Response
PEOCs –	Public Health Emergency Operations Centers
PH –	Public Health
PHLs –	Public Health Laboratories
PHEM –	Public Health Emergency Management
PortaBat –	A digital solution designed for optimal vaccine maintenance
RI –	Routine Immunization
SERICC –	State Emergency Routine Immunization Coordination Center
SLS –	Strengthening Laboratory Systems
SPOCR –	Strengthening Public Operations and Coordination Response
TWG –	Technical Working Group
VDD –	Vaccine Direct Delivery
WFP –	World Food Programme

Introduction

This report presents the results achiveved across eHA program areas in October. The performance report highlights eHA's achievements in addressing critical public health challenges while identifying areas that offer opportunities for further development.

Through our strategic partnerships and innovative approaches, eHA plays a pivotal role in advancing health outcomes in Africa. The report also includes key insights and recommendations to enhance eHA's operational effectiveness and its ability to deliver high-quality, efficient, and equitable health services across its programs and implementation strategies.

Big Numbers

Utilization of PEOCs

1,776 Emergency Meetings

693 Organisations utilized the EOC Facilities

5,336 unique public health practitioners utilized the EOCs

9,998 Number of times the EOC was utilized

477 Public Health Campaigns

Program Reach

5,482,558 antigens were delivered

1,603,988 children have been vaccinated in the VDD-enabled facilities

2,245,865 dry goods have been delivered at last-mile facilities in Sokoto state

Cost Savings

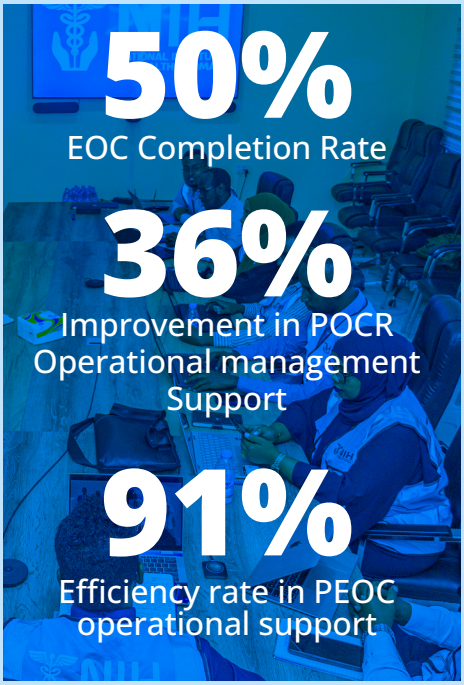
1,693,502 Vaccines have been returned back to the state cold store This translates to

$ 2,540,253 in cost savings from vaccine wastage prevention. This reflects an efficient use of resources, allowing for reallocation to other program needs.

7,744 Public Health practitioners have been trained across all the EOCs in Nigeria between January and October

Public Health Emergency Management (PHEM) portfolio

Enhanced efficiency and effectiveness in operations and logistics support for Emergency Operation Centers



In October 2024, the Support Polio Outbreak Control Project (SPOCR) project continued the construction of the EOCs in Garowe, Puntland state of Somalia, and the status is still at 50% completion rate. Operational management support was provided to 15 EOCs across Africa, including Somalia, Cameroon, the Democratic Republic of the Congo, Republic of the Congo. This is a 36% improvement when compared with the September result where we only provided support to 11 POCRs across Africa. Eleven EOCs requested for operational support and 10 of these requests were achieved within 12 weeks achieving a 91% efficiency rate based on the established target. The support covered items such as facility operations, internet service, office supplies, cleaning services, cleaning services, staff stipends, office accessories, and power.

Across 7 EOCs in Nigeria, eHA provided operational support to ensure the smooth running of the EOCs. This support ranged from the secretariat, administrative, Information technology, consumables, technical support, refreshments for meetings, operational support, and setting up Google spaces for various government technical working groups. eHA also participated in 3 Technical Working Group (TWG) meetings with 44 scorecards produced in Zamfara, Borno and Kebbi with eHA support.

By providing this management support, eHA facilitates the operations of essential functions at the EOCs without delays, improving overall effectiveness. Ongoing support for operational costs and maintenance further ensures sustainability, addressing both immediate needs and long-term improvements. Consistent support across all centers promotes standardized operations, enabling better coordination at the EOCs, and strengthening regional emergency response networks. This supports eHA's strategic goal to Improve public health infrastructures to effectively prepare for public health emergencies in Africa.

Effective utilization of EOCs for emergency meetings and campaign planning sessions.

A total of 1,517 public health practitioners from 230 partner organizations utilized the EOCs in Nigeria, making at least 4,599 visits, with an average of three visits per individual. These figures highlight the pivotal role of EOCs in coordinating public health and emergency activities.

1,517 UNIQUE PUBLIC HEALTH PRACTITIONERS

230 PARTNER ORGANIZATIONS USED THE PHEOCs

4,599 NUMBER OF UNIQUE INDIVIDUAL VISITS TO THE EOC

Key activities conducted at the EOCs included 171 public health emergency meetings, 19 campaign planning sessions, 73 cVDPV2 campaign activities, and 177 non-public health meetings, such as SERICC meetings, surveillance reviews, and strategic working group sessions. These numbers demonstrate the extensive utilization of EOC resources, emphasizing their value in facilitating collaboration and ensuring a rapid response among partners.

171 EMERGENCY MEETINGS

19 CAMPAIGNS PLANNING SESSION

73 cVDPV2 CAMPAIGNS ACTIVITIES

177 NON PUBLIC HEALTH MEETINGS

By maintaining a conducive environment for public health practitioners to address health emergencies, eHA significantly enhances Nigeria's capacity to respond effectively to such issues. Although the project operates without specific targets, all results are on track and are being closely monitored to ensure continued progress.

Strengthened capacity of public health practitioners to effectively manage EOCs across Africa

In October 2024, 38 public health practitioners (28 males and 9 females) received training across seven EOCs in Mogadishu, Dhusamareb, Baidoa, Kismayo, Banaadir, Jowhar, and Maniema. The training focused on key areas such as EOC management, budgeting, and proposal writing, equipping all participants with critical skills to enhance operational efficiency and strengthen crisis response capabilities.

Similarly, in Nigeria, 1,058 public health practitioners received capacity-building training on technical and data management skills. These sessions play a vital role in developing a skilled workforce to enhance preparedness and response to public health events across the country.

1,058
Public health practitioners received capacity-building on technical and data management skills

532 Males

526 Females

Laboratory Systems and Diagnostics (LS&D) portfolio

Laboratory Infrastructure and Procurement Strengthening Project

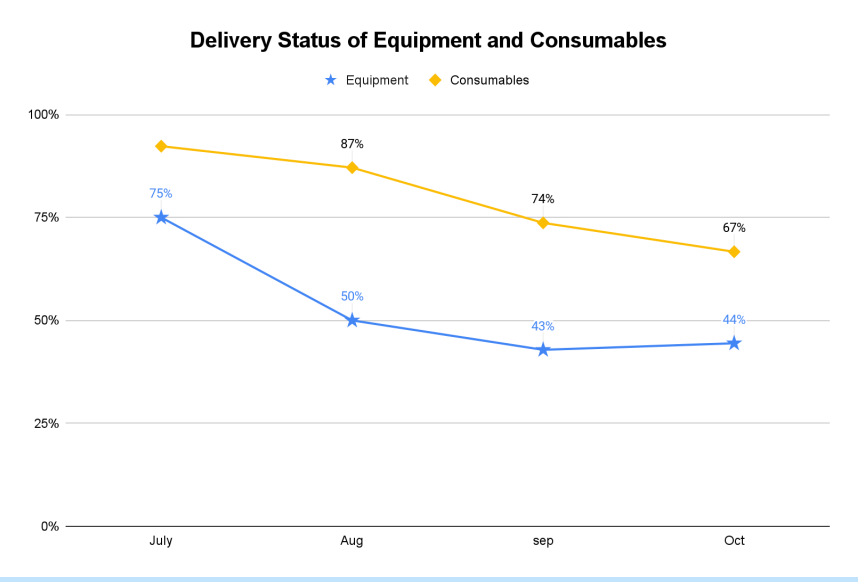
The SLS/LIPs project aligns with eHA's strategic objective of ensuring functional and optimal public health laboratories (PHLs), which are essential for the timely detection and confirmation of diseases to effectively manage outbreaks. Optimized PHLs facilitate accurate diagnosis, efficient resource utilization, informed decision-making, effective public communication, and prevention of secondary outbreaks.

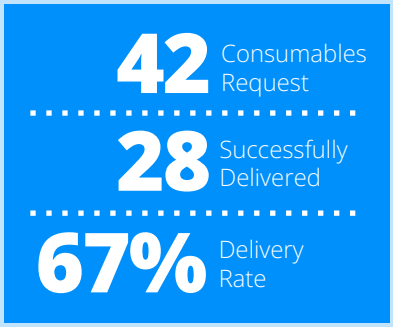
In October 2024, eHA provided active support to eight PHLs, including the Uganda Virus Research Institute, Kenya Medical Research Institute, WHO Polio Lab (Maiduguri), Institut Pasteur (Cameroon and Madagascar), National Microbiology Laboratory (Zimbabwe), Institut Pasteur de Côte d'Ivoire, and the National Institute for Communicable Diseases (South Africa). Equipment requests were fulfilled for the Uganda Virus Research Institute and the National Microbiology Laboratory in Zimbabwe, while a pending request from July for the Institut Pasteur Cameroon was delivered during this period.

For consumables, four requests were processed in October from the Institut Pasteur d'Algérie, Institute National Research Biomedical (DRC), Kenya Medical Research Institute, and Institut Pasteur Madagascar. The level of engagement from these laboratories reflects their strong collaboration with eHA.

Between January and October 2024, there were nine equipment requests, with only four fulfilled, indicating a 44% delivery success rate. In contrast, consumables had 42 requests, with 28 successfully delivered, achieving a 67% delivery rate. These metrics highlight the need for improved logistics and coordination to enhance delivery timelines and project efficiency.

The cumulative status report shows a 1% rise in October for equipment and declined further to 67% for consumables in October. This trend still shows growing delays in meeting delivery targets, which could potentially affect operational efficiency and overall project outcomes.





Disease Prevention Monitoring (DPM) Portfolio

Expanded vaccination coverage through effective tracking across implementing states

eHealth Africa significantly contributes to effective campaign planning and implementation through the use of geospatial technologies. In October, eHA achieved an 88% average geospatial tracking coverage for the Outbreak Response (OBR4) campaign, an 8% improvement over September. This campaign covered 103 Local Government Areas (LGAs) and 1,030 wards across Kebbi, Sokoto, Katsina, Borno, Kano, and Zamfara states.

To support these efforts, 12,452 tracking devices were deployed, enabling precise monitoring of vaccination team movements, thereby enhancing campaign efficiency and coverage.

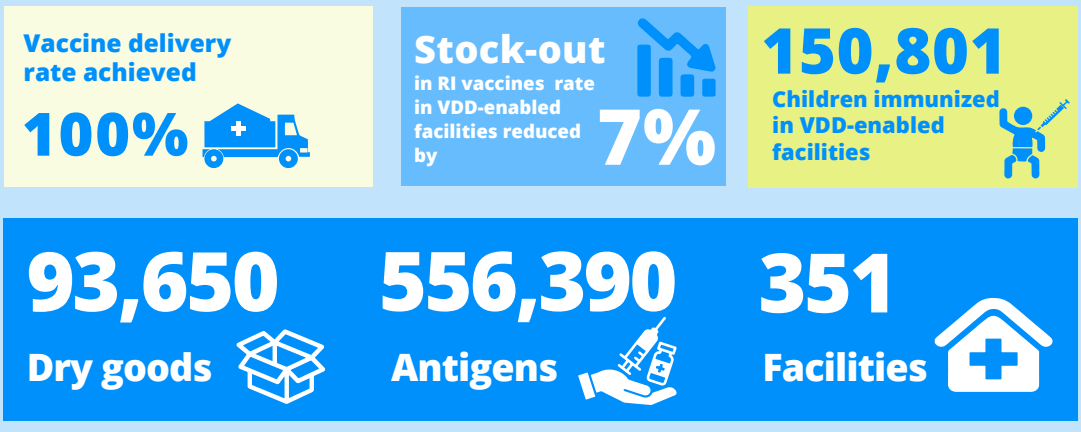
Enhanced Micro-Planning Efficiency and Development

The deployment of the eHA-developed Planfeld solution in Kebbi State on the Digital Micro Planning Project has significantly enhanced the precision and efficiency of immunization campaign planning. The innovative Planfeld tool streamlined the microplanning process, resulting in a marked improvement in campaign outcomes. In Kebbi State, 79% of users found the digital microplan easy to use for microplanning, while 75% reported that it greatly increased the efficiency of campaign planning. This advancement has driven more effective and data-driven immunization efforts in Kebbi state.

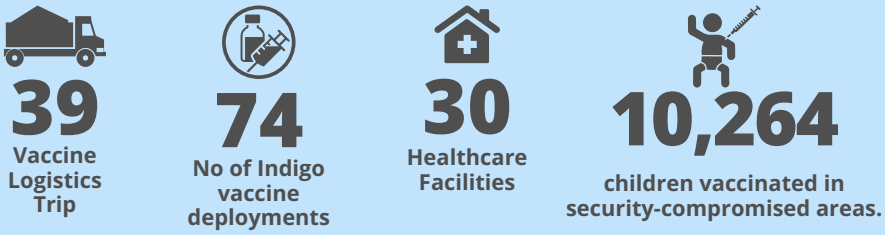
eHA Supports the Availability and Uptake of Potent Vaccines for use at last-mile facilities through digital solutions.

eHA successfully delivered 93,650 dry goods and 556,390 antigens to 351 facilities through the vaccine direct delivery (VDD) project.

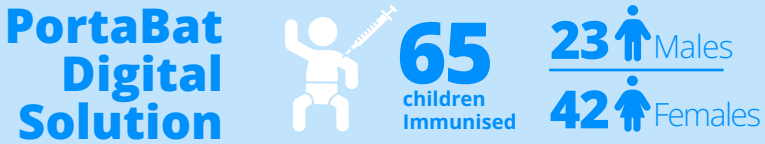
A. Notably, October recorded a 100% successful delivery rate.
B. 150,801 children were immunized in VDD-enabled facilities
C. The VDD-enabled facility stock-out rate reduced by 7% when compared with September.



In October, the Indigo Deployment Project continued its focused efforts to ensure that potent vaccines reach the last mile through the deployment of Indigo vaccine carriers. 39 vaccine logistics trips were embarked upon to 30 health facilities, resulting in the deployment of Indigo vaccine carriers 74 times. This resulted in the immunization of 10,264 children as an effort to support routine immunization programs and bolster the reach of essential healthcare services.



In October, eHA deployed the **PortaBat digital solution** to ensure optimal maintenance of vaccines in their potent state. Four PortaBat units (two in Kano and two in FCT) were introduced during four outreach sessions (two per location) through the eHA REACH Clinics. This led to the immunization of 65 children (23 males and 42 females). Notably, the Kano eHA REACH Clinic achieved its first child immunizations, while the FCT clinic saw a significant increase in immunizations, rising from just three children in the baseline to 39 children immunized in October.



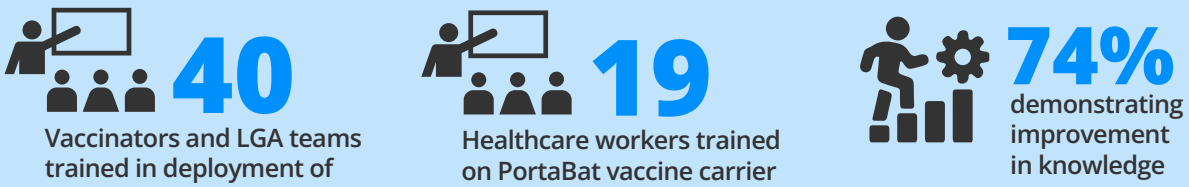
Strengthened Capacity of Healthcare Workers on Digital Solutions

In October, as part of ongoing capacity-building efforts, 40 vaccinators and LGA teams participated in a monthly refresher training session focused on the effective deployment of Indigo vaccine carriers. This training reinforced key operational practices and ensured the optimal use of the equipment in routine immunization activities.

Additionally, 19 healthcare workers (8 males and 11 females) were trained on the PortaBat vaccine carrier across the two project locations. Post-training assessments revealed that 74% of the healthcare workers demonstrated improved knowledge of PortaBat usage.

In line with eHA's commitment to strengthening local capacity, four healthcare professionals from the Nigerian Institute of Medical Research were trained on Pulse Oximetry equipment in October. This training equipped them with the skills needed to conduct the Lead-in study effectively, resulting in the enrollment of 33 children, all of whom provided informed consent, ensuring smooth and ethical data collection.

This consistent engagement underscores eHA's commitment to equipping healthcare workers with the necessary skills and knowledge to effectively manage Indigo vaccine carriers, thereby improving vaccine quality and contributing to the overall success of immunization programs in Nigeria.

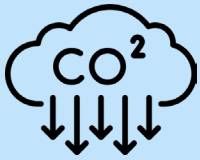


Climate Adaptation in Health Food Security and Nutrition (CAHFSN) portfolio

Reduction in CO^2 Emission

The organization achieved a CO^2 emission reduction of 1,458.85 tonnes through the adoption of renewable energy across EOCs in Bauchi, Borno, Kebbi, Katsina, Yobe, Niger, and Zamfara states. Notably, eHA generated 21,313.60 kWh of solar power, reflecting a 65% increase in energy production at these PEOCs. On average, solar energy utilization across these centers stood at 63%.

The reduction in CO^2 emissions through solar energy adoption is a key part of eHealth Africa's broader efforts to reduce greenhouse gas concentrations, slow the pace of climate change, and mitigate its impact on human health and ecosystems. By embracing clean energy technologies, eHealth Africa is helping to create a more sustainable healthcare model—one that supports both the environment and public health. This sustainable approach to energy is vital in ensuring that healthcare facilities remain operational and effective, even in the face of climate shocks.

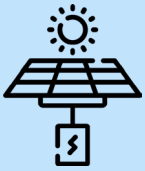


1,458.85

Tonnes of Emission Reduction accross Bauchi, Borno, Kebbi, Katsina, Yobe, Niger, and Zamfara PEOC.

21,313

solar power production of 21,313.60 kWh



65%

increase in energy generation across Bauchi, Borno, Kebbi, Katsina, Niger, Yobe, and Zamfara PEOCs

Warehouse Management

eHA successfully managed humanitarian warehouses in Dikwa and Ngala, Borno State, Nigeria, with routine monthly inventories conducted at each location.

In Ngala, 139 consignments were processed, totaling 58 metric tonnes and 208 cubic meters, while two new partners were onboarded, bringing the total to twelve partners utilizing the warehouse.

In Dikwa, 60 consignments were handled, totaling 88 metric tonnes and 751 cubic meters.

Effective cargo management at the Ngala warehouse continues to be crucial for maintaining accuracy, stock control, efficient space utilization, compliance, safety, and partner satisfaction. eHA remains committed to ensuring that relief materials are stored with dignity, minimizing waste, and maintaining accountability to the World Food Programme. This effort aligns with eHA's strategy to promote climate-responsive practices supporting sustainable food security, improved nutrition, and health.

NGALA

139

Consignments Processed

DIKWA

60

Consignments Processed

80%

Work-order Completion Rate

Monitoring and Accountability Activities

eHA conducted third-party monitoring activities through effective distribution monitoring, retailer performance evaluation monitoring, warehouse monitoring, market price data collection, and much more. The achievement in October shows a significant improvement in executing third-party monitoring activities. In October, eHA achieved an 80% work-order completion rate. This is a significant improvement of 45% when compared to September.

Conclusion and Recommendations

eHA demonstrated a significant impact through its programmatic efforts, particularly in vaccination coverage, operational support for emergency response, and laboratory diagnostics. However, gaps in consumable delivery rates and data timeliness suggest areas for further improvement. The integration of digital tools like Planfeld also shows promise for increasing campaign planning accuracy and effectiveness.

Recommendations:

1. Enhance Logistic Coordination for Laboratory Support: Address the 56% unfulfilled equipment request rate by streamlining procurement and delivery processes for laboratories, focusing on resource predictability and communication with lab partners.
2. Strengthen Data Timeliness Efforts: Given the decline in on-time data submission, the Impact Measurement team will work closely with the program's delivery team to adhere to the routine data collection protocols.
3. Optimize Consumables Supply Chain: To counteract the recent decline in consumable delivery rates, improve vendor partnerships, and inventory tracking to minimize disruptions, especially for laboratories reliant on these resources.
4. Capacity Building with Targeted Support: eHA is to continue delivering effective and targeted training sessions for healthcare workers to enhance competency in using digital solutions and innovative tools like the Indigo and PortaBat carriers.

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