

COVID-19
ACTION
FUND FOR
AFRICA



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Protecting the Community Health Workforce During COVID-19: *Getting PPE to the last mile*

Community health workers (CHWs) play a vital role in health service delivery, especially in countries with less resilient health systems. During any outbreak CHWs are relied on to help control the spread. However, they are often the last in line to receive necessary health products and protective equipment, which affects their ability to safely serve their communities.

COVID-19 Action Fund for Africa (CAF-Africa) formed in June 2020 to meet an urgent need to get personal protective equipment (PPE) to community health workers (CHWs).

When COVID-19 began to spread around the world, five organizations (Community Health Impact Coalition (CHIC), Direct Relief, the Community Health Acceleration Partnership (CHAP), Pandemic Action Network, and VillageReach) came together to form the COVID-19 Action Fund for Africa (CAF-Africa) to supply CHWs with personal protective equipment (PPE). CAF-Africa's objectives were informed by a rapid assessment¹ of PPE needs

for 900,000 CHWs across 24 sub-Saharan African countries. This assessment estimated 450 million units of PPE would be needed annually for CHWs, at a cost of \$100 million USD annually. Together, these CHWs serve an estimated 400 million people in Africa, often in the most remote areas. Supplying this volume of PPE to CHWs required radical collaboration among philanthropic, civil society, government and institutional partners.

THE IMPACT

As an emergency response effort, CAF-Africa was able to mobilize quickly to supply PPE on a larger scale than any one partner could have done alone. **Between June 2020 and May 2021**, we mobilized more than \$18.5 million in financial and in-kind contributions to procure and distribute 81.6 million units of PPE (including surgical and non-surgical masks, KN95 masks, gloves, eye protection and gowns) to nearly 480,000 CHWs in 18 sub-Saharan African countries.²



18 countries²
received PPE



479,508
CHWs reached



81.6 million
units of PPE delivered



48%
cost savings



\$18.5 million
mobilized
(in donated and in-kind support)

In 2020, CAF-Africa was the fifth largest procurement mechanism for PPE in the world and the third largest user of free cargo flights offered by the World Food Program (WFP) from August to December 2020 after UNICEF and World Health Organization (WHO).³

CAF-Africa's impact had a longer-term effect on strengthening health systems as well.⁴ We shared our data and learnings in support of PPE access with Africa Medical Supplies Platform, Africa Centres for Disease Control and Prevention, UNICEF Supply Division and the Wellcome Trust and the Global Fund's 'Rethinking PPE' consortium. We also worked to encourage governments to officially recognize CHWs as essential workers in health service delivery.^{1,5} By working with country partners and governments to plan for a nationwide PPE supply, CAF-Africa catalyzed reviews of CHW

country registries and encouraged their inclusion in supply planning for COVID-19 response. This process not only helped update countries CHW registries, but also helped to build longer-term partnerships and collaboration between community health and supply planning sectors. This collaboration includes adding CHWs to priority planning for COVID-19 vaccines.

CAF-Africa has worked to ensure countries secure additional PPE support as part of the Global Fund COVID-19 Response Mechanism (C19RM). We also published a set of global, regional and national recommendations for PPE access in the short and long term to help guide future efforts. However, ongoing needs that urgently require support and investment include: technical assistance for quantification and updated CHW registries, integration of CHW needs into routine supply plans, last mile distribution and improved monitoring and verification of last mile commodity distribution.



Photo Credit: Denis Onyodi

LOOKING TO THE FUTURE



Photo courtesy of Direct Relief

At its inception, CAF-Africa was focused on getting PPE to countries as a stopgap emergency response; we hoped the pandemic would be controlled and other interventions led by multilateral institutions and governments would fill continued PPE gaps. However, one year after this initiative began, significant work still needs to be done to ensure PPE is getting to all the CHWs who need it.

The current state of the pandemic calls for a stronger emphasis on country level support to continue advocacy required to ensure CHWs are institutionalized and protected. This is particularly true in Africa, where less than 1% of the population is vaccinated.⁶

Global and regional actors must also continue their support. Sufficient funding has been a key challenge and philanthropic entities should continue providing catalytic support to protect CHWs. Rather than having hundreds of

non-governmental organizations procure small amounts of PPE for CHWs, these organizations should pool efforts. This could represent a significant opportunity for cost savings and economies of scale that translates into more product at the country level.

Going forward, CAF-Africa partners are building on lessons learned to opportunistically direct philanthropic support to supply PPE for CHWs.

And as we continue to monitor the ways that

low- and middle-income countries are impacted by the pandemic, we will also seek to assist those wishing to make financial or in-kind contributions by matching them with areas of need. *Note: CAF-Africa will continue to receive donations and procure supplies during this pandemic.*

More work needs to be done at the country and global levels to make sure CHWs are included in medical supply chains and have the support they need to do their jobs safely.

We thank our partners and donors for their support.

1 Nepomnyashchiy, L., Westgate, C., Wang, A., Oslen, H., Yadav, P. and Ballard, M. *Protecting Community Health Workers: PPE Needs and Recommendations for Policy Action*. Center For Global Development. Accessed June 15, 2021. <https://www.cgdev.org/publication/protecting-community-health-workers-ppe-needs-and-recommendations-policy-action>

2 Angola, Cote d'Ivoire, Democratic Republic of Congo, Ethiopia, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mozambique, Nigeria, Rwanda, Togo, Uganda, Sierra Leone, Zambia, and Zimbabwe.

3 Based on an independent analysis of global PPE procurement trends by Precision Global Health in Dec 2020.

4 Ballard M. *Turning a short-term crisis into long-term change*. Gavi, The Vaccine Alliance website. April 29, 2021. Accessed June 27, 2021. <https://www.gavi.org/vaccineswork/turning-short-term-crisis-long-term-change>

5 Ballard M, Westgate C. *COVID-19: It ain't over until there's PPE all over*. ThinkGlobalHealth website. May 4, 2020. Accessed June 27, 2021. <https://www.thinkglobalhealth.org/article/covid-19-it-aint-over-until-theres-ppe-all-over>

6 Africa Centres for Disease Control and Prevention. Africa CDC vaccine dashboard. Accessed June 20, 2021. <https://africacdc.org/covid-19-vaccination>



Learn more about how CAF-Africa was formed, structured and the processes deployed for this collaborative effort in the full report: [Protecting the Community Health Workforce During COVID-19: Getting PPE to the last mile.](#)



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