



USAID'S COVID-19 RESPONSE END THE GLOBAL PANDEMIC AND BUILD BACK BETTER

AMERICAN RESCUE PLAN ACT

The United States is leading the global fight against COVID-19 to beat back the pandemic, support a strong recovery from the pandemic's vast impacts, take action to mitigate future pandemic threats, and build back better. The United States is donating more than 1.2 billion vaccines to more than 110 countries in need. With more than 400 million vaccines delivered as of the end of January 2022, the United States has donated more COVID-19 vaccines than any other country in the world.

USAID is programming \$5.175 billion¹ in COVID-19 global response funds received under the American Rescue Plan Act of 2021 (ARPA) in more than 115 countries to help vaccinate the world, save lives, and provide critical humanitarian assistance. We work with local and international partners, partner governments, and civil society to: deliver and distribute vaccines; protect and train health workers; provide support for risk communication and community engagement; support infection prevention and control; strengthen diagnostic and surveillance systems; improve case management to include increasing

¹ Excluding USAID Operating Expenses of \$41 million.

access to oxygen; deliver emergency food assistance, humanitarian services, and supplies, and response training; support continuity of basic services; and mitigate social and economic impacts caused by the pandemic.

GRAND TOTAL	\$5,175,000,000*
HUMANITARIAN ASSISTANCE including TITLE II FOOD ASSISTANCE (\$800 Million)	\$2,101,200,000
SAVE LIVES NOW	\$761,490,000
VACCINATE THE WORLD	\$2,303,460,000

USAID-MANAGED ARPA INVESTMENTS

*This includes \$8.85 million for monitoring, evaluation, and learning activities and excludes \$41 million in USAID ARPA Operating Expenses.

VACCINATE THE WORLD

Vaccines are one of our best tools to help end the pandemic, demonstrated by the U.S. commitment to donate more than 1.2 billion doses to the world. To prevent further severe illness and death from COVID-19 and to help vaccinate 70 percent of the global population by September 2022, USAID is working to accelerate equitable access to safe and effective vaccines. USAID is working with partners to facilitate the shipment and delivery of vaccines, and help prepare countries to receive and administer them.

Using ARPA resources, U.S. Government support has contributed to concrete progress in global COVID-19 vaccination rates. As of January 10, 2022, just over a year after the first COVID-19 vaccines were approved, more than 50 percent of the world population has received a full primary series of COVID-19 vaccination and more than 50 percent of people in lower-middle income countries have received at least one dose.

U.S. Government support, including not only eight million Pfizer doses donated but also multiple levels of in-country assistance, contributed to an increase in Uganda's COVID-19 vaccine coverage from 14 percent to 47 percent of adults receiving at least one dose in just six weeks.

Similar support to the Government of Zambia helped administer close to two million vaccines nationally in December, nearly doubling the full vaccination rate in the Copperbelt Province from 12 percent to 22 percent in just one month.

In order to get shots in arms, USAID helps countries prepare for vaccine delivery and administration. Through the Initiative for Global Vaccine Access, or Global VAX, the U.S. Government is accelerating efforts to turn vaccines into vaccinations, ensuring that doses are delivered to people around the world quickly and equitably. USAID's support for this initiative includes a diverse array of activities such as:

- Strengthening vaccination programs, including setting up mass vaccination sites and mobile clinics
 - In Madagascar, USAID assisted the country's vaccination campaign with eight fixed-location sites and seven mobile clinics to vaccinate 170,000 community members.
- Training health workers to administer vaccines
 - In the midst of a September 2021 COVID-19 surge in Uganda, USAID supported the training of 274 health workers on case management and 248 health workers on COVID-19 surveillance, adding to the 1,023 health workers trained on these topics in previous months.
- Educating about the vaccines and countering mis- and disinformation
 - USAID has supported the Government of Côte d'Ivoire's (GoCI) COVID-19 response through development of a Rumor-tracking Management System (RMS) that collects, analyzes, and addresses harmful COVID-19 rumors in real time. This database has provided rapid insights on circulating beliefs, enabling risk communicators to tailor COVID-19 messaging. We also worked with the GoCI to develop messaging for local television and radio that addressed the themes Ivorians are most concerned about, helping contribute to a steady but continual improvement in vaccine confidence and an increase in demand for COVID-19 vaccinations.
- Improving countries' cold chain capabilities
 - In El Salvador, USAID supported the installation of 39 remote temperature monitoring devices in the national and regional depots where vaccines are stored, enabling the Ministry of Health to monitor the temperatures of cold storage facilities remotely, quickly identify and address any issues, and ultimately get more vaccines to the last mile.

SAVE LIVES NOW

In addition to widespread, equitable access to vaccines, USAID supports implementing a comprehensive public health and clinical strategy in every country to prevent transmission and expand access to care and treatment for patients with moderate to severe COVID-19 infections. Highly transmissible variants have contributed to rapid spikes in infections in many countries, resulting in increased hospitalization and a demand for oxygen and associated technical assistance. USAID is supporting these efforts with ARPA funds.

In Nepal, in order to increase access to oxygen, USAID supported the procurement of six liquid oxygen tanks, vaporizers, and cylinder filling stations for major hospitals, as well as the provision of technical assistance to train engineers, help modify facilities to enable them to use the oxygen, and develop strategies to improve downstream distribution of oxygen to facilities.

Key commodities are also critical to saving lives, especially in times of infection spikes. Supported by ARPA funding, USAID provides rapid assistance to countries whose inventories of key commodities are at risk of running out, and helps ensure the continuity of the health system in three key areas: infection prevention and control, case management, and testing.

In August and September of 2021, Quezon City, Philippines recorded some of the highest COVID-19 cases in the country. USAID partnered with the city's health department to establish four new community-based testing centers that offered free and convenient COVID-19 testing in vulnerable communities, and also helped hire and train medical technologists and assistants, procure testing kits, and organize swab booths, information materials, and client flow guidance in the new testing centers. The new testing centers helped the city reduce the spread of COVID-19, and with USAID's support, the city was also able to increase personnel at community-based testing sites and assign other health workers to other interventions.

COVID-19 surges have repeatedly strained even well-prepared health systems, causing shortages in resources needed to prevent and treat the disease. To help countries manage these surges, USAID maintains a Rapid Response Fund, supported by ARPA, to increase the number of medical commodities and broaden technical assistance to stem incipient surges or mitigate the morbidity and mortality they may bring. The Rapid Response Fund provides additional stop-gap measures if other funding streams are unable to support needed interventions quickly.

By mid November, Ukraine was in its third wave of COVID-19 and was reporting an average of more than 21,000 new cases daily. This put an enormous strain on the health system, stretching its testing and diagnostic capacity to the limits and exhausting personal protective equipment (PPE) supplies. Using the Rapid Response Funds, USAID quickly deployed an additional \$1.2 million in antigen tests and laboratory reagents to augment the country's COVID-19 testing capacity–particularly in ten oblasts that were not equipped to handle the surge–and sent PPE to COVID-19 treatment centers to keep staff safe while they worked through the emergency.

HUMANITARIAN ASSISTANCE

The cascading effects of the pandemic extend far beyond the health impacts of COVID-19. There have been devastating and overlapping effects across humanitarian and economic landscapes, including lost jobs and livelihoods; increased food prices and disrupted food and water access; and increased exposure to gender-based and other forms of violence, abuse, and exploitation. Communities affected by conflict or disasters are particularly susceptible to the spread of COVID-19 and its impacts, which creates increased humanitarian needs resulting from and exacerbated by the pandemic. With ARPA funding, USAID is addressing these needs by strengthening the public health response; preventing famine and mitigating severe food insecurity; addressing the exacerbated gender-based violence, child protection, and psychosocial needs caused by the COVID-19 pandemic; strengthening humanitarian operations and coordination; and bolstering the humanitarian community's ability to quickly scale up responses to other infectious diseases.

From June to September 2021, to address the secondary impact of heightened food insecurity brought on by the COVID-19 pandemic, USAID support reached more than 166,000 people, including 87,000 women, with food assistance activities in Colombia. This included more than 126,000 Venezuelan migrants and refugees, or approximately 76 percent of those reached, the remaining being host community members. The pandemic has been especially hard on Venezuelan migrants and refugees in Colombia given their heavy reliance on the informal labor market, which was severely disrupted by COVID-19 containment measures, to meet their basic food and livelihood needs. USAID humanitarian support provides cash-based assistance, including food vouchers and cash transfers, as well as hot meals and in-kind food kits. USAID also supports the use of solar-powered food trucks to distribute hot meals to Venezuelan migrants and refugees along the ruta de caminantes as they walk from Venezuela through Colombia. In addition to cash-based and prepared emergency food assistance, such as hot meals, USAID provides Title II food assistance such as rice, wheat, and sorghum, which is sometimes used to prepare the hot meals we support. These commodities are sourced in the U.S. and pre-positioned in USAID warehouses in Texas, Djibouti, and South Africa, to be ready to rapidly respond to emergency food needs around the world or directed to address shortfalls in countries where conditions are deteriorating into crisis.

USAID also supports the prevention of gender-based violence (GBV) and violence against children (VAC), and response services to support the most vulnerable women, girls, men, and boys —in all their diversity, including gender identity and sexual orientation—and will expand protection and social services to support the most vulnerable families and individuals.

The pandemic threatens the safety and well-being of already vulnerable communities, particularly women and girls. To address these vulnerabilities, USAID is supporting holistic protection services in El Salvador, Guatemala, and Honduras. This includes deploying social workers and psychologists, bolstering ongoing efforts by local women's organizations to assist survivors of GBV, and establishing spaces protected from gang activity where children and their caregivers can learn coping mechanisms and receive professional support.