

COVID-19 – Sub-Saharan Africa

FACT SHEET #3, FISCAL YEAR 2022

November 30, 2021

KEY FIGURES*

KEY MESSAGES

- USAID works in more than 120 countries to fight against COVID-19, including efforts to address the social and economic effects of the pandemic, mitigate its wide-ranging impacts, and support recovery from COVID-19. USAID works with partner governments, multilateral institutions, non-governmental organizations and civil society to deliver and distribute vaccines, protect and train health workers, disseminate key public health information, provide emergency food and critical humanitarian services and supplies, support continuity of basic services and social and economic support, and sustain education for millions of students. <u>USAID's response</u> is guided by the <u>U.S. COVID-19</u>
 <u>Global Response and Recovery Framework</u>. USAID's work is helping to meet the targets introduced by the September 2021 Global COVID-19 Summit convened by President Biden.
- The White House supports the World Health Organization's goal of vaccinating 70 percent of the global population by September, 2022 and pledged that the United States will be the world's vaccine arsenal. USAID plays a pivotal role in U.S. contributions to this goal. Over the next year, USAID will continue to support the donation of more than 1.2 billion U.S.-made doses to low- and lower-middle-income countries. USAID will also continue to provide financial and technical assistance to vaccine delivery and administration in more than 100 countries worldwide, helping to prepare and strengthen vaccination programs to ensure COVID-19 vaccines get into the arms of those who need them.
- Between October and mid-November 2021, most countries in sub-Saharan Africa (SSA)¹ reported a decline in new COVID-19 cases and deaths after a severe third or fourth wave, while a few countries experienced new or persisting surges. At the end of November, cases began to rapidly increase in South Africa, eSwatini and Zimbabwe coinciding with the discovery of the Omicron variant.

TOTAL USAID FUNDING FOR THE COVID-19 RESPONSE IN AFRICA		
USAID Bureau for Africa	\$225,689,583	
USAID Bureau for Humanitarian Assistance (BHA)	\$1,150,383,218	
USAID Bureau for Global Health (GH)	\$220,456,857	
	\$1,596,529,658	

¹The SSA region includes Angola, Benin, Botswana, Burkina Faso, Burundi, Cabo Verde, Cameroon, Central African Republic (CAR), Chad, Comoros, Côte d'Ivoire, the Democratic Republic of the Congo (DRC), Djibouti, Equatorial Guinea, Eswatini, Ethiopia, Gabon, The Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mauritius, Mozambique, Namibia, Niger, Nigeria, the Republic of the Congo (RoC), Rwanda, São Tomé and Príncipe, Senegal, Seychelles, Sierra Leone, Somalia, South Africa, South Sudan, Sudan, Tanzania, Togo, Uganda, Zambia, and Zimbabwe. ² The figures represent publicly announced committed funding or obligations of the 2021 American Rescue Plan Act, 2020 Coronavirus Preparedness Act, the 2020 CARES Act Supplemental Funding, and Prior Year funding completed by November 30, 2021. They do not include redirections, nor do they include base funds that were used to respond to COVID-19. Amounts may include funds appropriated by Congress to the Department of State for HIV/AIDS allowed to USAID.

6.0

MILLION Total Number of Confirmed COVID-19 Cases in Region

150,731

Total Number of Deaths Related to COVID-19 in Region

79.6

MILLION Total USG-donated vaccine doses to the region**

129.6

MILLION Total Number of Vaccine Doses Administered in Region

Sources:

* Johns Hopkins University and Our World in Data, to date as of November 30, 2021 **Kaiser Family Foundation, as of November 30, 2021. Figures are subject to change due to periodic adjustment and updating.

KEY DEVELOPMENTS

- Between October and mid-November 2021, most countries in sub-Saharan Africa reported a decline in new COVID-19 cases and deaths; many of these countries were just emerging from severe third or fourth waves. A few countries experienced new or persisting surges in COVID-19 cases, including Burkina Faso, Republic of Congo, Eritrea, Mali, Mauritania, Niger, Somalia, and Sudan.
- At the end of November, reported cases began to rapidly increase in South Africa, eSwatini and Zimbabwe, with new cases nearly doubling in one day in South Africa from 4,373 to 8,561. This rapid increase in cases corresponded to the discovery of the Omicron variant, which WHO categorized as a "variant of concern" on November 26th.
- During these two months, more than 206,000 COVID-19 cases and over 6,000 deaths were reported in sub-Saharan Africa, bringing the estimated total number of regional cases since the start of the pandemic to over six million and the total reported deaths to an estimated 150,731. The true numbers of cases and deaths are likely much higher, given the low rates of testing in the region
- The region continues to have limited diagnostic testing and weak surveillance systems. Pandemic fatigue contributes to reduced adherence to public health measures, such as mask-wearing and physical distancing. As many countries relax restrictions, the risk of resurgence remains high, especially as vaccination rates remain low in most countries.
- The USG has donated more than 63.8 million vaccine doses to 43 countries in sub-Saharan Africa (SSA), and vaccine donations continue to scale across the continent. Despite improvements in vaccine availability, the percentage of population vaccinated throughout SSA remains low, with only around 5 percent of people in SSA fully vaccinated.
- The ongoing COVID-19 pandemic has exacerbated humanitarian needs in SSA. Limited public awareness of COVID-19 risks and poor water, sanitation, and hygiene (WASH) infrastructure have constrained efforts to contain the spread of the disease, while the effects of the pandemic have hindered access to food and markets contributing to high emergency food assistance needs. Rising caseloads have strained health care systems already weakened by complex emergencies, as populations face multiple crises, including the pandemic, climatic shocks, desert locust infestations, and insecurity. Moreover, the pandemic has disrupted routine immunization campaigns and weakened local health care systems, while clinics and hospitals report a lack of access to critical medicines and supplies due to procurement challenges and supply chain disruptions. The socioeconomic impacts of the pandemic have exacerbated humanitarian needs, including for emergency food assistance.

USAID RESPONSE HIGHLIGHTS

FACILITATE ACCESS TO SAFE AND EFFECTIVE COVID-19 VACCINATIONS

USAID is helping 46 SSA countries implement their national vaccination strategies; identify and address supply chain needs; facilitate vaccine awareness activities in local communities; train health care professionals to safely administer COVID-19 vaccines; and monitor for adverse events following immunization. These efforts help countries prepare to receive multiple vaccine products and enable health care systems to provide the services required to safely administer COVID-19 vaccines.

- As more vaccines are delivered to SSA countries, USAID continues to strengthen supply chains to facilitate last mile distribution and avoid wastage. USAID has financed cold chain equipment, vaccine data management systems, and other essential vaccine commodities. In Ghana, one USAID partner is providing logistics management information systems assistance to help track immunization-related commodities and support COVID-19 vaccination rollout at the national and subnational levels. In addition, a USAID partner in Guinea is providing support to monitor and manage vaccine stocks.
- USAID recognizes that the most effective way to address key drivers of low vaccine confidence and encourage vaccine uptake
 is through integrated communication and community engagement. USAID works with local stakeholders to identify and
 address the specific reasons for hesitancy among different groups in each country, and then to address the relevant attitudes,
 social processes, motivations, access, and other structural issues to encourage individuals and community vaccine
 acceptance. For example, in Nigeria, USAID is supporting real-time evidence generation on factors affecting vaccine
 acceptance. In Cameroon, where persistently low vaccine confidence has contributed to slow COVID-19 vaccine uptake,
 USAID is supporting an NGO partner to conduct quarterly assessments to understand the causes of low vaccine confidence, as
 well as identify the actors—including health care workers and family members—who could influence increased uptake
 among assessed populations. In Botswana, USAID, in partnership with District Health Management Teams, has supported
 community-level COVID-19 vaccine efforts which deployed 110 community health workers in vaccination site catchment
 areas to engage communities and disseminate COVID-19 vaccine messages, dispel myths, educate community members on

the benefits of the COVID-19 vaccine, and advocate to communities for the uptake of the vaccines. As part of vaccine demand creation efforts in South Africa, a USAID partner supported the National Department of Health to develop and execute a national media strategy to amplify COVID-19 vaccine and prevention communications. In September, these efforts reached more than 22 million people with television spots on vaccine acceptance; 250,000 people through cinema messages; and 17 million people through national radio spots.

• USAID missions continue to work closely with countries' ministries of health on planning, advocacy, healthcare worker training, and supply chains, to increase their capacity to absorb the delivery of additional vaccine doses. Campaigns are being planned and conducted in some countries to increase the vaccination rate and meet national vaccination targets. Uganda has begun the campaign in two regions and Ethiopia in two city administrations and three regions.

REDUCE MORBIDITY, MITIGATE TRANSMISSION, AND STRENGTHEN HEALTHCARE SYSTEMS

- In Ghana, four oxygen-generating pressure swing adsorption plants purchased with USAID assistance have been delivered and are fully operational. Each plant can provide lifesaving support to approximately 25 severe COVID-19 patients per day and will help expand critical access to oxygen in Ghana.
- In the midst of a COVID-19 surge in September 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.
- In South Africa, a USAID partner has provided extensive GIS mapping and advanced analytics to the National Department of Health and six provinces by producing weekly reports and attending weekly forums for disseminating results. GIS data mapping the incidence of cases, their severity and mortality rates —informed decisions made by national, provincial and district.

ADDRESS ACUTE NEEDS DRIVEN BY COVID-19

- Nearly 12,600 confirmed COVID-19 cases had been recorded in South Sudan as of November 12, according to the World Health Organization. Despite ongoing vaccination campaigns by South Sudan's Ministry of Health, less than 1 percent of the total population was vaccinated as of late October, representing the lowest vaccination rate on the African continent. In South Sudan, USAID is supporting vaccination efforts and combating health disinformation by reaching those most vulnerable to COVID-19—including internally displaced persons, pastoralist herders, refugees, and populations residing in hard-to-reach areas—with targeted public health messaging promoting vaccine uptake.
- With USAID support, health actors in Sudan continue to provide COVID-19 screening, treatment referrals, and prevention services to populations at an elevated risk of complications related to COVID-19. However, heightened insecurity throughout Sudan due to the October 25 military takeover and related protests have threatened the continuity of these activities. Relief actors project that Sudan's COVID-19 case rate is likely to increase in 2022, exacerbating emergency needs amid continued disparities in access to health care, including COVID-19 vaccines.
- USAID continues to provide food assistance, nutrition, WASH, and other support to address the impact of the COVID-19 pandemic on humanitarian crises in southern Africa. In Malawi, USAID is partnering with UNICEF to reach approximately 100,000 people with improved water supply services and WASH supplies for COVID-19 infection prevention and control. In addition, USAID support is enabling UNICEF to reach approximately 300,000 people with high COVID-19 caseloads. USAID has also partnered with WFP to provide unconditional in-kind food assistance and nutrition support—including preventative supplementary feeding and treatment of acute malnutrition—to approximately 532,000 people in Madagascar's Androy, Anosy, and Atsimo-Andrefana regions, where the adverse socioeconomic effects of the COVID-19 pandemic are exacerbating the impact of prolonged drought conditions on regional food security.
- USAID is supporting partners addressing the multi-sector humanitarian impacts of COVID-19 across East Africa. With USAID support, UNICEF is providing health care and WASH assistance—including COVID-19 infection prevention and control and risk communication—to approximately 310,000 people in high-risk locations in Somalia. USAID is supporting the UN Food and Agriculture Organization to provide emergency food assistance to approximately 121,000 people in Somalia, where the COVID-19 pandemic continues to adversely affect livelihoods and access to food. Similarly, USAID is partnering with WFP in Djibouti to provide emergency food assistance to more than 29,000 people who are coping with the adverse socioeconomic effects of the pandemic.

• To address the sharp increase of gender-based violence (GBV) associated with COVID-19 related social distancing measures and lockdowns, USAID has adapted some gender equality and related programming to institute anti-GBV Public Service Announcements and mass community communication campaigns; train community volunteers to target GBV awareness outreach to USAID beneficiaries; improve local awareness on how to access GBV services; coordinate with One Stop Centers, through which GBV survivors get virtual support and assistance to reach in-person services; and engage local authorities and community leaders to support GBV response services.

BOLSTER ECONOMIES AND OTHER CRITICAL SYSTEMS

- In West and Central Africa, USAID has continued to support governments and civil society organizations to communicate COVID-19 messages and facilitate dialogues aimed at increasing trust, improving transparency, and strengthening oversight of government action. For example, USAID supported ten consensus building dialogues and 20 conflict prevention programs in Cameroon. USAID assistance helped with training 100 organizations and media institutions on advancing respect for freedom of expression and countering misinformation about COVID-19 in Chad, Côte d'Ivoire, Niger, and Mali. With these initiatives, USAID works to address grievances that often fuel conflict and extremism.
- USAID provided assistance to 20 civil society organizations through a grants program in Benin, Guinea, and Togo to address the potentially destabilizing effects of the COVID-19 pandemic on the democratic processes. USAID supported local civil society organizations to prevent and mitigate conflict through the development of platforms for dialogue, strengthening social cohesion, monitoring and countering of misinformation and hate speech, and engagement of youth and women as peace mobilizers. In these countries, USAID has supported civil society partners to engage local communities to address communal conflicts such as farmers/herders' conflicts; mitigate post-electoral violence, and address the impact of the COVID-19 pandemic through early warning and response mechanisms, cross-communal dialogues, education and awareness-raising, and the distribution of personal protective equipment in select communities.

AGENCY	PARTNERS	AMOUNT
	Angola	
USAID/AFR	Chemonics, Developing Workshop Angola, Mothers2Mothers South Africa (M2M SA), World Health Organization (WHO)	\$3,810,000
USAID/GH	Chemonics, M2M SA, Population Services International (PSI), WHO	\$2,370,000
USAID FUNDING FO	DR COVID-19 RESPONSE IN ANGOLA	\$6,180,000
	Benin	
USAID/AFR	Bupdos ONG, Chemonics, Creative Associates International, Management Sciences for Health (MSH), ONG, SIA NSON-ONG,	\$2,900,000
USAID/GH	Bupdos ONG, Chemonics, MSH, ONG, SIA NSON-ONG, WHO	\$2,616,655
USAID FUNDING FO	DR COVID-19 RESPONSE IN BENIN	\$5,516,655
	Botswana	
USAID/AFR	Chemonics, Family Health International 360 (FHI), Global Communities, Hope Worldwide Botswana, Stepping Stones International, Tebelopele VCT	\$4,483,099
USAID/GH	Chemonics, FHI, Global Communities	\$3,575,000
USAID FUNDING F	DR COVID-19 RESPONSE IN BOTSWANA	\$8,058,099
	Burkina Faso	
USAID/AFR	Chemonics, OBTCI, Johns Hopkins University (JHU), John Snow Research and Training Institute (JSI), United Nations Children's Fund (UNICEF), US Pharmacopeia, WHO, Winrock International	\$5,281,667
USAID/BHA	Dansk Flgtngingahjaelp, International Rescue Committee (IRC), Alliance for International Medical Action, UN-OCHA, UNICEF, World Food Program (WFP)	\$17,000,000
USAID/GH	Chemonics, JHU, MSH, Palladium, UNICEF	\$3,900,000
USAID FUNDING F	DR COVID-19 RESPONSE IN BURKINA FASO	\$26,181,667
	Burundi	
USAID/AFR	FHI, JHPIEGO, WHO	\$3,948,277

USAID FUNDING FOR THE SSA COVID-19 RESPONSE³

USAID/BHA	UN-OCHA, WFP, World Vision	\$3,500,000
USAID/GH	Chemonics, UNICEF, WHO	\$3,452,459
USAID FUNDING	FOR COVID-19 RESPONSE IN BURUNDI	\$10,900,736
	Cameroon	
USAID/AFR	Equal Access International, International Federation of the Red Cross and Red Crescent (IFRC), UNICEF, Implementing Partners	\$4,500,000
USAID/BHA	Implementing Partners, UNICEF, WFP	\$18,000,000
USAID/GH	IFRC, UNICEF, Implementing Partners	\$5,350,000
USAID FUNDING	FOR COVID-19 RESPONSE IN CAMEROON	\$27,850,000
	Cape Verde	
USAID/AFR	Creative Associates International, UNICEF	\$2,000,000
USAID/GH	UNICEF	\$216,000
USAID FUNDING	FOR COVID-19 RESPONSE IN CAPE VERDE	\$2,216,000
	Central African Republic	
USAID/AFR	UNICEF	\$1,500,000
USAID/BHA	ACTED, IMC, UNICEF, WFP	\$18,446,308
USAID FUNDING	FOR COVID-19 RESPONSE IN CENTRAL AFRICAN REPUBLIC	\$19,946,308
	Chad	
USAID/AFR	Implementing Partners	\$390,833
USAID/BHA	Implementing Partners, WFP	\$17,240,174
USAID FUNDING	FOR COVID-19 RESPONSE IN CHAD	\$17,631,007
	Comoros	
USAID/AFR	WHO / OMS	\$200,000
USAID FUNDING	FOR COVID-19 RESPONSE IN COMOROS	\$200,000
	Congo, People's Republic	
USAID/BHA	WFP	\$1,000,000
USAID/GH	UNICEF	\$250,000
USAID/AFR	UNICEF	\$1,500,000
USAID FUNDING	FOR COVID-19 RESPONSE IN CONGO, PEOPLE'S REPUBLIC	\$2,750,000
	Côte d'Ivoire	
USAID/AFR	Davis Campus, Equal Access International, FHI, JHPIEGO, JHU, MSH, Palladium, Save the Children, UNICEF, WHO	\$4,251,231
USAID/GH	Chemonics, JHU, MSH, UNICEF, WHO	\$9,829,682
USAID FUNDING	FOR COVID-19 RESPONSE IN COTE D'IVOIRE	\$14,080,913
	Democratic Republic of Congo	
USAID/AFR	Chemonics, FHI, IBTCI, IFRC, JHU, JSI, UNICEF, WHO	\$11,704,000
USAID/BHA	Doctors of the World, FHI, Food for the Hungry, IMC, International Organization for Migration (IOM), IRC, Internews, Save the Children, Tearfund, UNICEF, WFP, World Vision	\$41,735,347
USAID/GH	Chemonics, IFRC, MSH, Office of Sponsored Research, PATH, PSI, Remote Medical International, UNICEF, World Relief	\$14,017,873
USAID FUNDING	FOR COVID-19 RESPONSE IN DEMOCRATIC REPUBLIC OF CONGO	\$67,457,220
	Djibouti	
USAID/AFR	FHI, United Nations Development Program (UNDP)	\$3,900,000
USAID/BHA	WFP	\$1,500,000
USAID/GH	UNICEF	\$500,000

USAID FUNDING I	FOR COVID-19 RESPONSE IN DJIBOUTI	\$5,900,000
	Equatorial Guinea	
USAID/AFR	UNICEF, WHO	\$1,000,000
USAID FUNDING F	FOR COVID-19 RESPONSE IN EQUATORIAL GUINEA	\$1,000,000
	Eswatini	
USAID/AFR	Elizabeth Glaser Pediatrics AIDS Foundation (EGPAF), FEI.com, Global Environment and Technology Foundation, PACT, Right to Care, The Luke Commission, World Vision, Young Heroes	\$2,912,854
USAID/GH	Chemonics, FHI, Global Environment and Technology Foundation, JHU, PACT, Remote Medical International, Right to Care, Luke Commission	\$5,470,000
USAID FUNDING F	FOR COVID-19 RESPONSE IN ESWATINI	\$8,382,854
	Ethiopia	
USAID/AFR	AMREF Health Africa HQ, Beza Posterity Development Organization, Chemonics, IBTCI, JHPIEGO, JSI, JHU, Live in Action, Mekdim Ethiopia, Pathfinder, Project Hope, US Pharmacopeia	\$8,222,000
USAID/BHA	AMREF Health Africa HQ, CARE, Clobek v Tisni, CRS, Handicap International, IMC, IOM, IRC, JHU, Mercy Corps, Pathfinder, Project Hope, Relief and Development, Rest, Save the Children, Lutheran World Federation, UN-OCHA, UNICEF, WFP, World Vision	\$343,777,603
USAID/GH	AMREK Health Africa HQ, Chemonics, JHPIEGO, JSI, JHU, MSH, Pathfinder, Remote Medical International, WHO	\$8,564,902
USAID FUNDING F	FOR COVID-19 RESPONSE IN ETHIOPIA	\$360,564,505
	Gabon	
USAID/AFR	WHO / OMS	\$500,000
USAID FUNDING F	OR COVID-19 RESPONSE IN GABON	\$500,000
	Gambia	
USAID/AFR	Consortium for Elections and Political Process, UNICEF	\$2,310,000
USAID FUNDING F	OR COVID-19 RESPONSE IN GAMBIA	\$2,310,000
	Ghana	
USAID/AFR	Chemonics, JHPIEGO, JHU, JSI, Results for Development, US Pharmacopeia	\$2,499,651
USAID/GH	Chemonics, JHPIEGO, JHI, PSI, Public Health Institute (PHI), Remote Medical International, Results for Development, Total Family Health Organization, US Pharmacopoeia	\$8,876,845
USAID FUNDING F	FOR COVID-19 RESPONSE IN GHANA	\$11,376,496
	Guinea	
USAID/AFR	Chemonics, IBTCI, ICF, JHPIEGO, JHU, UNICEF, WHO	\$3,700,000
USAID/GH	Chemonics, JHPIEGO, JHU, UNICEF	\$2,800,000
· · ·	OR COVID-19 RESPONSE IN GUINEA	\$6,500,000
	Guinea-Bissau	+ + + + + + + + + + + + + + + + + + + +
USAID/AFR	UNICEF	\$200,000
	FOR COVID-19 RESPONSE IN GUINEA-BISSAU	\$200,000
USAID I UNDING I		\$200,000
	Kenya JHPIEGO, Liverpool VCT, MSH, MTRH, Socha	¢2,020,620
		\$3,920,635
USAID/BHA	Kenya Red Cross, Racida, Save the Children, UNICEF, WFP Chemonics, FHI, IMA, IFRC, Intrahealth, JHPIEGO, JSI, MSH, MTRH, Palladium, Pathfinder, PHI, Socha, University of Nairobi, World Relief	\$33,300,000 \$14,853,327
· ·	FOR COVID-19 RESPONSE IN KENYA	\$52,073,962
	Lesotho	
USAID/AFR	Baylor College of Medicine (Baylor), Chemonics, EGPAF, FHI, JHPIEGO	\$5,770,000
USAID/GH	EGPAF, JHPIEGO	\$2,050,000
	FOR COVID-19 RESPONSE IN LESOTHO	\$7,820,000
	Liberia	

USAID/AFR	FHI, ICF, JHPIEGO, JHU, WHO	\$1,400,000
USAID/BHA	CRS	\$1,000,000
USAID/GH	Chemonics, FHI, JHPIEGO, JHU, Palladium, UNICEF, WHO	\$2,800,000
USAID FUNDING F	OR COVID-19 RESPONSE IN LIBERIA	\$5,200,000
USAID/AFR	Madagascar	\$5,100,000
USAID/AFK	ICF, Institut Pasteur, MSH, PSI ADRA, AICF, CRS, WFP	\$3,100,000
USAID/GH	Institut Pasteur, JSI, MSH, PSI	\$2,500,000
	OR COVID-19 RESPONSE IN MADAGASCAR	\$2,300,000
USAID I UNDING I	Malawi	\$30,470,393
USAID/AFR	Baylor, Catholic Health Commission, Chemonics, FHI, JHPIEGO, JHU, MSH, Pakachere Insitute, Partners in Hope, PSI, PHI, Right to Care, UNICEF, World Education, World Relief	\$6,081,146
USAID/BHA	UNICEF	\$2,500,000
USAID/GH	Chemonics, FHI, JHU, MSH, Remote Medical International, Right to Care, World Relief	\$9,179,993
USAID FUNDING F	OR COVID-19 RESPONSE IN MALAWI	\$17,761,139
	Mali	
USAID/AFR	Implementing Partners	\$7,845,000
USAID/BHA	Implementing Partners, UN-OCHA, UNICEF, WFP	\$17,133,486
USAID/GH	Implementing Partners	\$3,400,000
USAID FUNDING F	OR COVID-19 RESPONSE IN MALI	\$28,378,486
	Mauritania	
USAID/AFR	UNICEF	\$1,500,000
USAID/GH	UNICEF	\$250,000
USAID FUNDING F	OR COVID-19 RESPONSE IN MAURITANIA	\$1,750,000
	Mauritius	
USAID/GH	IFRC	\$500,000
USAID/AFR	WHO / OMS	\$500,000
USAID FUNDING F	OR COVID-19 RESPONSE IN MAURITIUS	\$1,000,000
	Mozambique	
USAID/AFR	Abt Associates (Abt), ANDA, Associacao Comusanas, Chemonics, FHI, ICTCI, JHPIEGO, JHU, JSI, PIRCOM	\$7,819,950
USAID/BHA	Care, FHI, IOM, Relief and Development, Save the Children, UNICEF, WFP, World Vision	\$26,995,219
USAID/GH	Abt, Chemonics, FHI, JHPIEGO, JHU, JSI, MSH, PIRCOM, UNICEF, VillageReach	\$16,668,381
USAID FUNDING F	OR COVID-19 RESPONSE IN MOZAMBIQUE	\$51,483,550
	Namibia	
USAID/AFR	Chemonics, PACT, Project Hope, Right to Care	\$6,660,000
USAID/GH	Chemonics, Right to Care	\$3,350,000
USAID FUNDING F	OR COVID-19 RESPONSE IN NAMIBIA	\$10,010,000
	Niger	
USAID/AFR	Implementing Partners, UFRC, UNICEF, WHO	\$5,172,500
USAID/BHA	Implementing Partners, UN-OCHA, UNICEF, WFP	\$37,399,265
USAID/GH	Implementing Partners, IFRC, UNICEF, WHO	\$2,250,000
USAID FUNDING F	OR COVID-19 RESPONSE IN NIGER	\$44,821,765
USAID FUNDING F USAID/AFR USAID/GH USAID FUNDING F USAID/AFR USAID/BHA USAID/BHA	OR COVID-19 RESPONSE IN MOZAMBIQUE Namibia Chemonics, PACT, Project Hope, Right to Care Chemonics, Right to Care OR COVID-19 RESPONSE IN NAMIBIA Niger Implementing Partners, UFRC, UNICEF, WHO Implementing Partners, IFRC, UNICEF, WFP Implementing Partners, IFRC, UNICEF, WHO	\$51,483, \$6,660, \$3,350, \$10,010, \$5,172, \$37,399, \$2,250,

USAID/AFR	Implementing Partners, WHO	\$5,600,000
USAID/BHA	Implementing Partners, IOM, UNICEF, WFP	\$74,204,828
USAID/GH	Implementing Partners, WHO	\$10,527,417
USAID FUNDING F	OR COVID-19 RESPONSE IN NIGERIA	\$90,332,245
	Rwanda	
USAID/AFR	African Evangelistic Enterprise, Chemonics, FXB Rwanda, Intrahealth, JHPIEGO, MSH, PACT	\$2,065,400
USAID/BHA	WFP	\$3,000,000
USAID/GH	Chemonics, Intrahealth, MSH, World Relief	\$7,487,423
USAID FUNDING F	OR COVID-19 RESPONSE IN RWANDA	\$12,552,823
	Sao Tome and Principe	
USAID/AFR	UNICEF	\$200,000
USAID FUNDING F	OR COVID-19 RESPONSE IN SAO TOME AND PRINCIPE	\$200,000
	Senegal	
USAID/AFR	FHI, JHU, MSH, UNICEF	\$3,406,757
USAID/GH	Abt, ICF, Intrahealth, JHU, MSH, Palladium, UNICEF	\$5,900,000
USAID FUNDING F	OR COVID-19 RESPONSE IN SENEGAL	\$9,306,757
	Seychelles	
USAID/AFR	IFRC	\$500,000
USAID FUNDING F	OR COVID-19 RESPONSE IN SEYCHELLES	\$500,000
	Sierra Leone	
USAID/AFR	UNICEF, WHO	\$1,000,000
USAID/BHA	CRS, WFP	\$4,500,000
USAID/GH	Chemonics, JHPIEGO, JHU, UNICEF	\$2,700,000
USAID FUNDING F	OR COVID-19 RESPONSE IN SIERRA LEONE	\$8,200,000
	Somalia	
USAID/AFR	Implementing Partners	\$1,500,000
USAID/BHA	World Food Program, Implementing Partners	\$141,809,491
USAID FUNDING F	OR COVID-19 RESPONSE IN SOMALIA	\$143,309,491
	South Africa	
	Anova Health Institute, Braodreach, EDC, Global Environmental and Technology Foundation,	
USAID/AFR	Guidehouse, Maternal Adolescent and Child Health Institute, NACOSA, Panagora, Right to Care, WITS Health Consortium	\$26,250,000
USAID/GH	Anova, Broadreach, Centre for Communications Impact, Chemonics, Guidehouse, JHU, Maternal Adolescent and Child Health Institute, NACOSA, UNICEF, WHO, WITS	\$35,563,701
	FOR COVID-19 RESPONSE IN SOUTH AFRICA	\$61,813,701
	South Sudan	<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>
USAID/AFR	JHU, WHO, World Vision	\$3,500,000
USAD/AIN	ACTED, Concern Worldwide, CRS, Dansk, Doctors of the World, Food and Agriculture Organization	\$3,300,000
USAID/BHA	(FAO), IFRC, IMC, IOM, IRC, Internews, Mercy Corps, Nonviolent Peaceforce, Samaritan's Purse, Save the Children, St. International, TearFund, UN-OCHA, UNICEF, WFP, World Vision	\$168,207,572
USAID/GH	Chemonics, DFID, JHPIEGO, Pathfinder, World Vision	\$100,207,572
	OR COVID-19 RESPONSE IN SOUTH SUDAN	\$175,457,572
	Sudan	<i>\[\[\]</i>
USAID/AFR	WHO, WFP	\$8,000,000
USAID/BHA	Implementing Partners, IOM, UN-OCHA, UNFPA, UNICEF, WFP, WHO	\$89,204,051
USAID/GH	UNICEF	\$1,000,000

USAID FUNDING	FOR COVID-19 RESPONSE IN SUDAN	\$98,204,051
	Tanzania	
USAID/AFR	C S S C, Deloitte, EGPAF, FHI, FAO, Global Environment and Technology Foundation, ICF, JHPIEGO, MSH, PACT, Tanzania Health Promotion Support, Benjamin William Mkapa Foundation, UNICEF, WHO	\$10,198,436
USAID/BHA	WFP	\$3,000,000
USAID/GH	Chemonics, Guidehouse, ICF, JHPIEGO, MSH, Palladium, UNICEF	\$6,400,000
USAID FUNDING	FOR COVID-19 RESPONSE IN TANZANIA	\$19,598,436
	Тодо	
USAID/AFR	Equal Access International, WHO / OMS	\$2,750,000
USAID/GH	Chemonics, REWARD II, WHO	\$1,710,000
USAID FUNDING	FOR COVID-19 RESPONSE IN TOGO	\$4,460,000
	Uganda	
	African Network for the Care of Children, Baylor, EGPAF, FHI, Green Label Services, IBTCI, Intrahealth, JSI, JHU< Makerere University, Multi Community Based Development Initiative, Palladium,	
USAID/AFR USAID/BHA	Transcultural Psychosocial, URC WFP	\$10,588,109 \$26,000,000
USAID/GH	Beyond Logistics, EGPAF, FHI, Intrahealth, JSI, MSH, URC	\$4,485,371
	FOR COVID-19 RESPONSE IN UGANDA	\$41,073,480
	West Africa Regional ⁴	, ,, ,, ,,
USAID/GH	UNICEF, West African Health Organization	\$884,000
USAID FUNDING	FOR COVID-19 RESPONSE IN WEST AFRICA REGIONAL	\$884,000
	Zambia	
USAID/AFR	Catholics Medical Mission, CIDRZ, FHI, JSI, MSH, Project Concern, Right to Care, Zambia Centre for Communications Programs	\$16,350,000
USAID/GH	FIDRZ, JSI, UNICEF, WHO	\$5,870,000
USAID FUNDING	FOR COVID-19 RESPONSE IN ZAMBIA	\$22,220,000
	Zimbabwe	
USAID/AFR	Implementing Partners	\$10,298,038
USAID/BHA	Implementing Partners, IOM, UNICEF, WFP	\$31,059,481
USAID/GH	Implementing Partners, WHO	\$4,587,828
USAID FUNDING	FOR COVID-19 RESPONSE IN ZIMBABWE	\$45,945,347
TOTAL⁵		1,596,529,658

³ The figures represent obligations of the 2021 American Rescue Plan Act, 2020 Coronavirus Preparedness Act, the 2020 CARES Act Supplemental Funding, and Prior Year funding completed by November 30, 2021. They do not include redirections, nor do they include base funds that were used to respond to COVID-19. Amounts may include funds appropriated by Congress to the Department of State for HIV/AIDS allowed to USAID for programming. The total does not include the more than \$2.1 billion in USAID assistance for global COVID-19 response operations, including U.S. Government assistance to GAVI/COVAX.

⁴ UNICEF support under the West Africa Regional was provided to Equatorial Guinea, Gabon, Sao Tome and Principe, and Togo.

⁵ This total does not include funding for USAID operating expenses (OE). Of the \$95 million in CAREs Act appropriated for COVID-19-related OE, approximately \$73 million had been obligated as of November 30, 2021. In addition, USAID transferred \$7 million in ESF-COVID funding (Coronavirus Preparedness and Response Supplemental Appropriations Act) to the USAID OE Account. Of the \$41 million appropriated in ARPA OE, USAID has obligated \$13 million.

ADDITIONAL INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to organizations that are conducting relief operations. USAID encourages cash donations because they allow aid professionals to procure the exact items needed; can be transferred quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at USAID Center for International Disaster Information: <u>www.cidi.org</u>.
- USAID has established an inbox (covid-pse@usaid.gov) to coordinate private sector engagement around the COVID-19 response. In
 addition, the UN supports an initiative for businesses seeking to donate money, goods or services. Please visit
 connectingbusiness.org for more information.
- Finally, USAID reminds the public that it may accept unsolicited applications and proposals. The Agency has set up a COVID-19 Concepts portal at: https://www.usaid.gov/coronavirus/funding-requests-unsolicited-proposals.