

COVID-19 – SUB-SAHARAN AFRICA

FACT SHEET #2, FISCAL YEAR (FY) 2021

October, 2021

KEY FIGURES*

5.8

MILLION

Total number of confirmed COVID-19 cases in region

143,106

Total number of deaths related to COVID-19 in region

69.5

MILLION

Total number of vaccine doses administered in region

**Source: Johns Hopkins University and Our World in Data, to date as of September 30, 2021; Figures are subject to change due to periodic adjustment and updating.*

KEY MESSAGES

- USAID works in more than 120 countries and has provided over \$9.3 billion worldwide in FY 2021 and COVID-19 supplemental funding toward the fight against COVID-19, including efforts to address the social and economic effects of the pandemic. USAID works with partner governments and civil society to deliver and distribute vaccines, protect and train health workers, disseminate key public health information, deliver 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.
- [USAID's response](#) is guided by the [U.S. COVID-19 Global Response and Recovery Framework](#), which outlines a whole-of-government response and offers a roadmap for the global community to beat the pandemic. USAID's work is helping to meet the ambitious targets introduced by the September 2021 Global COVID-19 Summit convened by President Biden.
- Between July and September 2021, much of sub-Saharan Africa (SSA) experienced a third wave of COVID-19 more severe than previous waves. More than 1.8 million COVID-19 cases and nearly 47,000 COVID-19 deaths were reported in this period, bringing the estimated total number of cases since the start of the pandemic to over 5.8 million and the total reported deaths to over 143,000. The true numbers of cases and deaths are likely much higher given the extremely low rates of testing in the region. SSA's low vaccination rates pose a serious risk in future waves.
- In response, the U.S. Government (USG)—including USAID—is working with national governments, UN agencies and multinational institutions, non-governmental organizations, civil society, and the private sector to reduce COVID-19 cases and mortality in SSA while mitigating the negative social and economic impacts of the pandemic. USAID supports widespread and equitable access to safe and effective COVID-19 vaccines; reduces morbidity and mortality from COVID-19; limits transmission; strengthens health systems; and responds to immediate needs resulting from the pandemic.
- USAID has rapidly deployed nearly \$1.6 billion to 48 countries in SSA to fight the pandemic and mitigate its social and economic impacts. To save lives around the world, rebuild the global economy, and stop the threat of new variants, the USG is expanding and accelerating vaccine access in SSA. In close coordination with COVAX and the African Union, the USG has donated COVID-19 vaccines to 41 SSA countries and will continue to share vaccine doses as supply becomes available.

TOTAL USAID FUNDING FOR THE COVID-19 RESPONSE IN SUB-SAHARAN AFRICA²

USAID Bureau for Africa (SSA)	\$207,383,359
USAID Bureau for Humanitarian Assistance (BHA)	\$1,144,626,526
USAID Bureau for Global Health (GH)	\$220,066,485
	\$1,572,076,370

¹ The 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. 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 from Ebola Repurposed funds completed by September 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 \$2.2 billion in USAID assistance for global COVID-19 response operations, including USG assistance to GAVI/COVAX. To date, USAID has obligated more than \$4 billion for COVID-19 response operations worldwide.

KEY DEVELOPMENTS

- In the last quarter, much of SSA experienced a third wave of COVID-19 that proved more severe than previous waves. The circulation of the highly transmissible Delta variant, limited vaccine access, fragile health care systems, and the onset of winter weather conditions in the Southern Hemisphere contributed to the surge in cases. Southern Africa continued to report the highest burden of cases and deaths regionally, with the Republic of South Africa accounting for nearly 50 percent of all reported cases and 56 percent of reported deaths during this quarter. Many countries are recovering from their third waves more slowly than previous waves, and many are expecting a fourth wave in early December 2021 (a fourth is already affecting Benin, Mauritius, and Kenya). By the end of September 2021, Angola, Benin, Djibouti, Equatorial Guinea, Gabon and Sao Tome & Principe reported a continued increase in cases, and Ethiopia's third wave has persisted.
- The region continues to have limited diagnostic testing and weak surveillance systems, meaning that community-based transmission is likely more widespread than reported. Pandemic fatigue continues to contribute 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 amidst circulation of highly transmissible variants of concern in the region.
- Twenty-three million COVID-19 vaccines arrived in the African continent in September, a ten-fold increase from June. The USG has donated more than 45 million doses to African countries, and vaccine donations continue to scale across the continent. Despite improvements in vaccine availability, the percentage of population vaccinated throughout SSA remains low. Just 60 million Africans have been fully vaccinated so far, and only 2 percent of the more than six billion vaccines given globally have been administered on the continent. The overwhelming majority of the population remains at risk of infection. Only 30 percent of African countries (15 total, with 12 in SSA) have reached the World Health Organization (WHO) target to vaccinate 10 percent of their population by the end of September 2021: Botswana, Eswatini, Cabo Verde, Comoros, Equatorial Guinea, Lesotho, Mauritania, Mauritius, São Tomé and Príncipe, Seychelles, South Africa, Rwanda, and Zimbabwe. Meanwhile, half of the 52 countries with COVID-19 vaccination programs on the continent have vaccinated less than 2 percent of their populations.
- The recent COVID-19 surges have 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

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 adequately 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. For example, in Angola, a USAID partner conducted an ultra-cold chain survey of available structures within 2,287 public sector and private sector facilities to support ultra-cold chain logistics. In South Sudan, USAID programmed \$1 million through the Health Pooled Donor Fund to support operational costs associated with expanding COVID-19 vaccine sites beyond Juba, significantly increasing vaccine utilization rates. Additionally, USAID support to Benin facilitated the rapid distribution of a shipment of COVID-19 vaccine doses that arrived with a short expiry time frame, preventing vaccine wastage.
- USAID recognizes that the most effective way to address key drivers of hesitancy 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 communities' vaccine acceptance. For example, in Guinea where 69 percent of people get news by radio (Afrobarometer), a USAID implementing partner played radio spots over 2,000 times on 21 radio stations and aired seven interactive programs on rural radio stations to promote the benefits of immunization and address listeners' concerns about immunization. In Zambia, USAID engaged influential opinion-leaders including traditional leaders, journalists, and Ministry of Health staff to combat vaccine hesitancy and misinformation. As part of the public outreach campaign, 326,000 materials were printed in seven local languages and distributed by civil society members. The Government of Zambia has credited these efforts with increasing public awareness about the benefits of vaccination, and for creating a strong surge in demand for both first and second doses at public health clinics in Lusaka.

REDUCE MORBIDITY, MITIGATE TRANSMISSION, AND STRENGTHEN HEALTH CARE SYSTEMS

- To reduce transmission of COVID-19, USAID partners have supported infection prevention and control (IPC), and WASH activities. For example, in Zambia, implementing partners have assisted 568 health facilities to triage and isolate COVID-19 patients and improve site WASH conditions. Partners have also trained over 5,000 health workers in IPC and/or WASH, including 2,500 community health workers. In Cameroon, USAID helped distribute sanitation kits to 284 health facilities, including two district hospitals. During Cameroon's recent wave of infections, USAID provided needed personal protective equipment to protect health workers and mitigate facility-acquired transmission.
- USAID helps minimize the spread of COVID-19 through communications outreach and community engagement. To reach a large share of the population, USAID has supported Malawi with the broadcast of 14,702 spots on 27 radio stations and six TV stations across the country, reaching more than two-thirds of Malawian population with key messages on COVID-19 prevention. In Ghana, USAID funds have furthered the dissemination of audio messaging featuring traditional, religious, and community leaders speaking on COVID-19 prevention, stigma reduction, gender-based violence, and mental health. In Eswatini, local partner, The Luke Commission, continues to broadcast COVID-19 messages and has hosted a dedicated 24-hour COVID-19 hotline to answer questions and alleviate concerns.
- Testing and surveillance capacity is an important component of a comprehensive COVID-19 response. USAID has provided resources for laboratory supplies, development of testing sites, and tests in several countries including Burkina Faso, Cape Verde, Djibouti, and Zambia. USAID supported 12 testing facilities in Zambia and has trained health workers on specimen transportation and COVID-19 testing in Uganda and Zimbabwe among other countries.
- Case management capacity contributes to reduced morbidity and mortality associated with case surges. When the third wave hit SSA, USAID expanded oxygen availability, helped keep supplies in stock, and supported the hiring of health care workers in Zambia, South Africa, Uganda, and Namibia. In Ghana, USAID supported technical assistance to the country's 16 regions, including ventilators and case management support. In Zambia, a USAID implementing partner procured and distributed compressed medical oxygen, 1,325 Oxygen Concentrators and 2,000 pulse oximeters to manage COVID-19 patients.
- Across SSA, USAID helped to train thousands of healthcare workers on COVID-19 case management. To monitor medical equipment needs in Benin, the government has relied on USAID-funded data systems to assess medical stock availability and consumption.

ADDRESS ACUTE NEEDS DRIVEN BY COVID-19

- In response to the adverse impact of the COVID-19 pandemic and related mitigation measures on food security throughout Africa, USAID is funding implementing partners to provide emergency food assistance, nutrition support, and agricultural and other livelihoods assistance to vulnerable populations across the continent.
- In South Sudan, movement restrictions have contributed to rising child marriage and incidents of gender-based violence (GBV). In response, COVID-19 funds have enabled USAID partners IRC and DRC to provide life-saving protection programming, including child protection services, GBV prevention and response, and protection monitoring. Funding is also used for the GBV Dignity Kit core pipeline.
- USAID partners in Ethiopia strengthened primary healthcare units by training healthcare workers on active surveillance, screening, triage and contact tracing for early detection and treatment of COVID-19 cases. USAID partners installed handwashing stations and water storage tanks at government institutions and healthcare centers; distributed WASH non-food items, provided cleaning materials and implemented health education, risk communication and community engagement activities in IDP camps and other high-risk areas. USAID partners responded to acute needs resulting from the COVID-19 pandemic in Ethiopia by providing psychological first aid training to service providers including frontline workers and combining food distribution cycles and providing double food rations to approximately 7.2 million people and providing cash transfers to food-insecure households in the country, enabling them to procure food from the local markets.
- In Zimbabwe, USAID is working to reach 75,000 individuals with integrated health, protection, and water, sanitation, and hygiene (WASH) assistance to mitigate the social, health, and physical impacts of disease—particularly COVID-19—while strengthening institutional and community resilience. Through support to GOAL Zimbabwe's UPLIFT/ZIMUDZA project, USAID is also assisting 15,000 people in Harare Province whose livelihoods have been negatively impacted by COVID-19 and related Government-imposed restrictions. The project provides multipurpose cash assistance to beneficiary households for six months and protection assistance for children and women. In addition, the project will support the establishment or re-establishment of 800 small businesses.
- In Sudan, USAID-funded COVID-19 response enabled UNICEF to reach over 21 million people with COVID-19 prevention messages, support 186 primary health centers and 350 schools with basic water and sanitation facilities, including hand washing stations and water storage tanks (93,000 patients and 175,000 school children). Additionally, with USAID support, WFP is providing food assistance to more than 407,000 vulnerable people across North Darfur.
- In Somalia, COVID-19 supplemental funding enabled USAID and its partners to reach more than 1 million people with COVID-19 prevention messaging; 484,000 people with health services; 83,000 children with treatment for severe acute malnutrition; and 300,000 people with emergency and sustained water, hygiene, and sanitation services. Additionally, USAID is supporting WFP to reach more than 1.6 million people with emergency food and nutrition assistance.
- Additionally, to address the sharp increase of gender-based violence associated with COVID-19 related social distancing measures and lockdowns, USAID is adapting 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.

- USAID helps mitigate the impact COVID-19 has had on water service delivery to households. Specifically, partners are working to strengthen the financial resilience of local water utilities, improving monitoring of WASH services, as well as documenting and disseminating best practices on how WASH sector actors can respond to the pandemic.

BOLSTER ECONOMIES AND OTHER CRITICAL SYSTEMS

- In West and Central Africa, USAID supports 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. Supplemental funds helped with training 23 organizations and media institutions on advancing respect for freedom of expression and countering misinformation about COVID-19 in Chad, 22 in Côte d'Ivoire, 20 in Niger, and 23 in Mali. With these initiatives, USAID works to address grievances that often fuel conflict and extremism.

USAID FUNDING OBLIGATED FOR THE SUB-SAHARAN AFRICA COVID-19 RESPONSE³

AGENCY	PARTNERS	AMOUNT
Angola		
USAID/AFR	Chemonics, Development Workshop Angola, Mothers2Mothers, WHO	\$3,810,000
USAID/GH	Chemonics, Mothers2Mothers, Population Services International (PSI), WHO	\$2,370,000
USAID FUNDING FOR COVID-19 RESPONSE IN ANGOLA		\$6,180,000
Benin		
USAID/AFR	BUPDOS-ONG, Chemonics, DEDRAS, MSH, e, SIANSON,	\$2,000,000
USAID/GH	BUPDOS-ONG, Chemonics, MSH, Organisation non gouvernementale, SIANSON, WHO	\$2,616,655
USAID FUNDING FOR COVID-19 RESPONSE IN BENIN		\$4,616,655
Botswana		
USAID/AFR	Chemonics, FHI 360, PCI, Global Communities, Hope Worldwide Botswana, Stepping Stones, Tebelopele Voluntary Counseling and Testing	\$4,483,099
USAID/GH	Chemonics, FHI 360, Global Communities	\$3,575,000
USAID FUNDING FOR COVID-19 RESPONSE IN BOTSWANA		\$8,058,099
Burkina Faso		
USAID/AFR	Chemonics, IBTCI, JHU, JSI, UNICEF, US Pharmacopeia, WHO, Winrock International	\$5,281,667
USAID/BHA	Implementing Partners UNICEF, WFP, UN_OCHA	\$17,000,000
USAID/GH	Chemonics, Johns Hopkins University (JHU), MSH, Palladium International, UNICEF	\$3,900,000
USAID FUNDING FOR COVID-19 RESPONSE IN BURKINA FASO		\$26,181,667
Burundi		
USAID/AFR	FHI 360, JHPIEGO, WHO	\$3,948,277
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	IPs, International Federation of the Red Cross and Red Crescent (IFRC)	\$2,550,000
USAID/BHA	IPs, UNICEF, WFP	\$18,000,000
USAID/GH	IPs, UNICEF	\$5,350,000
USAID FUNDING FOR COVID-19 RESPONSE IN CAMEROON		\$25,900,000
Cape Verde		
USAID/AFR	Creative Associates International	\$1,500,000

USAID/GH	UNICEF	\$216,000
USAID FUNDING FOR COVID-19 RESPONSE IN CAPEVERDE		\$1,716,000
Central African Republic		
USAID/AFR	UNICEF	\$1,500,000
USAID/BHA	ACTED, International Medical Corps (IMC), UNICEF, WFP	\$18,380,998
USAID FUNDING FOR COVID-19 RESPONSE IN Central African Republic		\$19,880,998
Chad		
USAID/AFR	Implementing Partner	\$390,833
USAID/BHA	Implementing Partners, UNICEF, WFP	\$18,000,000
USAID FUNDING FOR COVID-19 RESPONSE IN CHAD		\$18,390,833
Republic of the Congo		
USAID/BHA	WFP	\$1,000,000
USAID/GH	UNICEF	\$250,000
USAID FUNDING FOR COVID-19 RESPONSE IN REPUBLIC OF THE CONGO		\$1,250,000
Côte d'Ivoire		
USAID/AFR	Davis Campus/News Service, FHI 360, JHPIEGO, JHU, MSH, Palladium, UNICEF, WHO	\$3,050,623
USAID/GH	Chemomics, FHI 360, JHU, MSH, UNICEF, WHO	\$9,629,682
USAID FUNDING FOR COVID-19 RESPONSE IN COTE D'IVOIRE		\$12,680,305
Democratic Republic of the Congo		
USAID/AFR	Implementing Partners, UNICEF, WHO	\$13,204,000
USAID/BHA	Implementing Partners, International Organization for Migration (IOM), UNICEF, WFP	\$41,735,347
USAID/GH	Implementing Partners	\$14,062,873
USAID FUNDING FOR COVID-19 RESPONSE IN DRC		\$69,002,220
Djibouti		
USAID/AFR	FHI 360, UN Development Program	\$3,900,000
USAID/BHA	WFP	\$1,500,000
USAID/GH	UNICEF	\$500,000
USAID FUNDING FOR COVID-19 RESPONSE IN DJIBOUTI		\$5,900,000
Eswatini		
USAID/AFR	EGPAF, FEI.com, Global Environment and Technology Foundation, PACT, Right to Care, Luke Commission - Swaziland, World Vision - Swaziland, Young Heroes	\$2,912,854
USAID/GH	Chemomics, FHI 360, Global Environment and Technology Foundation, JHU, PACT, Remote Medical International, Right to Care, Luke Commission - Swaziland	\$5,470,000
USAID FUNDING FOR COVID-19 RESPONSE IN ESWATINI		\$8,382,854
Ethiopia		
USAID/AFR	AmRef Health Africa, Chemomics, IBTCI, JHPIEGO, JSI, JHI, Love in Action Ethiopia, Pathfinder, US Pharmacopeia	\$6,606,000
USAID/BHA	Amref Health Africa, CARE, CRS, Handicap International, IMC, IOM, IRC, JHU, Mercy Corps, UN Office for the Coordination of Humanitarian Affairs (OCHA), Pathfinder International, Project Hope, Food for the Hungry, Relief Society of Tigray, SCF, UNICEF, WFP, World Vision	\$339,590,941
USAID/GH	AmRef Health Africa, Chemomics, JHPIEGO, JHU, John Snow Inc (JSI), MSH, Pathfinder International, Remote Medical International, WHO	\$8,564,902
USAID FUNDING FOR COVID-19 RESPONSE IN ETHIOPIA		\$354,761,843
Gambia		
USAID/AFR	Consortium for Elections and Political Process Strengthening, UNICEF	\$1,225,000

USAID FUNDING FOR COVID-19 RESPONSE IN GAMBIA		\$1,225,000
Ghana		
USAID/AFR	Chemonics, JHPIEGO, JHU, RDI, US Pharmacopeia	\$2,000,000
USAID/GH	Chemonics, JHPIEGO, JHU, PSI, Public Health Institute, Remote Medical International, Results for Development, Total Family Health Organization, U.S. Pharmacopeia	\$8,876,845
USAID FUNDING FOR COVID-19 RESPONSE IN GHANA		\$10,876,845
Guinea		
USAID/AFR	Chemonics, IBTCI, ICF, JHPIEGO, JHU, UNICEF, WHO	\$2,700,000
USAID/GH	Chemonics, JHPIEGO, JHU, UNICEF	\$2,800,000
USAID FUNDING FOR COVID-19 RESPONSE IN GUINEA		\$5,500,000
Guinea-Bissau		
USAID/AFR	UNICEF	\$200,000
USAID FUNDING FOR COVID-19 RESPONSE IN GUINEA-BISSAU		\$200,000
Kenya		
USAID/AFR	JHPIEGO, Liverpool VCT Care and Treatment, MSH, Socha LLC	\$3,000,000
USAID/BHA	Kenya Red Cross, Racida, SCF, UNICEF, WFP	\$32,948,805
USAID/GH	Chemonics, FHI 360, IMA IFRC, Intrahealth International, JHPIEGO, JSI Research and Training Institute, MSH, Moi Teaching for Referral Hospital, MSH, Palladium International, Pathfinder International, Public Health Institute, SOCHA, University of Nairobi Enterprises and Services Limited, World Relief	\$14,853,327
USAID FUNDING FOR COVID-19 RESPONSE IN KENYA		\$50,802,132
Lesotho		
USAID/AFR	Baylor College of Medicine Foundation, Chemonics, EGPAF, FHI 360, JHPIEGO	\$4,243,800
USAID/GH	EGPAF, JHPIEGO	\$2,050,000
USAID FUNDING FOR COVID-19 RESPONSE IN LESOTHO		\$6,293,800
Liberia		
USAID/AFR	FHI 360, ICF, JHPIEGO, JHU, WHO	\$1,400,000
USAID/BHA	CRS	\$1,000,000
USAID/GH	Chemonics, FHI 360, JHPIEGO, JHU, Palladium International, UNICEF, WHO	\$2,800,000
USAID FUNDING FOR COVID-19 RESPONSE IN LIBERIA		\$5,200,000
Madagascar		
USAID/AFR	ICF, Institut Pasteur, MSH, PSI	\$5,100,000
USAID/BHA	ADRA, ACF, WFP	\$28,693,818
USAID/GH	Institut Pasteur de Madagascar, JSI Research and Training Institute, MSH, PSI	\$2,500,000
USAID FUNDING FOR COVID-19 RESPONSE IN MADAGASCAR		\$36,293,818
Malawi		
USAID/AFR	Catholic Health Commission, Chemonics, FHI 360, JHPIEGO, JHU, MSH, PSI, Public Health Institute, Right to Care, UNICEF, World Education Inc., World Relief	\$4,376,358
USAID/BHA	UNICEF	\$2,500,000
USAID/GH	Chemonics, FHI 360, JHU, MSH, Remote Medical International, Right to Care, World Relief	\$9,179,993
USAID FUNDING FOR COVID-19 RESPONSE IN MALAWI		\$16,056,351
Mali		
USAID/AFR	Implementing Partners	\$7,845,000

USAID/BHA	Implementing Partners, UNICEF, UNOCHA, WFP	\$17,133,486
USAID/GH	Implementing Partners	\$3,400,000
USAID FUNDING FOR COVID-19 RESPONSE IN MALI		\$28,378,486
Mauritania		
USAID/AFR	UNICEF	\$637,161
USAID/GH	UNICEF	\$250,000
USAID FUNDING FOR COVID-19 RESPONSE IN MAURITANIA		\$887,161
Mauritius		
USAID/GH	IFRC	\$500,000
USAID FUNDING FOR COVID-19 RESPONSE IN MAURITIUS		\$500,000
Mozambique		
USAID/AFR	Abt Associates, ANDA, Associacao Comusanas, Chemonics, FHI 360, IBTCl, JHPIEGO, JHU, JSI, PIRCOM	\$7,819,950
USAID/BHA	CARE, FHI 360, Food for the Hungry, IOM, SCF, UNICEF, WFP, World Vision	\$26,995,219
USAID/GH	Abt Associates, Chemonics, FHI 360, JHPIEGO, JHU, JSI Research and Training Institute, MSH, PIRCOM, UNICEF, VillageReach	\$16,668,381
USAID FUNDING FOR 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 FOR COVID-19 RESPONSE IN NAMIBIA		\$10,010,000
Niger		
USAID/AFR	Implementing Partners, WHO, UNICEF	\$4,672,500
USAID/BHA	Implementing Partners, WFP, UNOCHA, UNICEF,	\$34,466,672
USAID/GH	Implementing Partners, UNICEF, WHO	\$2,250,000
USAID FUNDING FOR COVID-19 RESPONSE IN NIGER		\$41,389,172
Nigeria		
USAID/AFR	Implementing Partners, WHO	\$5,600,000
USAID/BHA	Implementing Partners, UNICEF, WFP	\$74,136,188
USAID/GH	Implementing Partners, WHO	\$10,527,417
USAID FUNDING FOR COVID-19 RESPONSE IN NIGERIA		\$90,263,605
Rwanda		
USAID/AFR	Chemonics, IntraHealth, JHPIEGO, MSH, PACT	\$2,013,006
USAID/BHA	WFP	\$3,000,000
USAID/GH	Chemonics, IntraHealth, MSH, World Relief	\$7,487,423
USAID FUNDING FOR COVID-19 RESPONSE IN RWANDA		\$12,500,429
Senegal		
USAID/AFR	FHI 360, JHU, MSH, World Relief	\$3,406,757
USAID/GH	Abt Associates, ICF, IntraHealth, JHU, MSH, Palladium International, UNICEF	\$5,900,000
USAID FUNDING FOR COVID-19 RESPONSE IN SENEGAL		\$9,306,757
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 FOR COVID-19 RESPONSE IN SIERRA LEONE		\$8,200,000
Somalia		
USAID/BHA	Implementing Partners	\$143,150,000
USAID FUNDING FOR COVID-19 RESPONSE IN SOMALIA		\$143,150,000
South Africa		
USAID/AFR	Anova Health Institute, BroadReach Healthcare, Global Environment and Technology Foundation, Guidehouse LLP, Maternal Adolescent and Child Health Institute, NACOSA, Not for Profit Organisation, Panagora Group, Right to Care, Wits Health Consortium	\$26,000,000
USAID/GH	Anova Health Institute; BroadReach Healthcare; Center for Communication Impact; Chemonics; Guidehouse; JHU; Maternal, Adolescent, and Child Health Institute; NACOSA; Right to Care; UNICEF; WHO; Wits Health Consortium	\$35,563,701
USAID FUNDING FOR COVID-19 RESPONSE IN SOUTH AFRICA		\$61,563,701
Southern Africa Regional⁴		
USAID/AFR	IFRC, WHO	\$1,200,000
USAID FUNDING FOR COVID-19 RESPONSE IN SOUTHERN AFRICA REGIONAL		\$1,200,000
South Sudan		
USAID/AFR	JHU, WHO, World Vision	\$3,500,000
USAID/BHA	ACTED, Concern Worldwide, CRS, Dansk FLYGTNINGEHJAEELP, Doctors of the World, FAO, IFRC, IMC, Internews, IOM, MercyCorps, Nonviolent Peaceforce, Samaritan's Purse, SCF, ST International NGO Safety Organization, TearFund, UNICEF, WFP, World Vision	\$168,213,769
USAID/GH	Chemonics, JHPIEGO, Pathfinder International, World Vision	\$3,750,000
USAID FUNDING FOR COVID-19 RESPONSE IN SOUTH SUDAN		\$175,463,769
Sudan		
USAID/AFR	Implementing Partners	\$8,000,000
USAID/BHA	Implementing Partners, UNICEF, WFP	\$89,204,051
USAID/GH	UNICEF	\$1,000,000
USAID FUNDING FOR COVID-19 RESPONSE IN SUDAN		\$98,204,051
Tanzania		
USAID/AFR	CSSC, Deloitte, EGPAF, FHI 360, FAO, Global Environment and Technology Foundation, ICF., JHPIEGO, MSH, PACT, Tanzania Health Promotion Support, Benjamin William Mkapa HIV/AIDS Foundation, WHO	\$9,198,436
USAID/BHA	WFP	\$3,000,000
USAID/GH	Chemonics, Guidehouse, ICF, JHPIEGO, MSH, Palladium International, UNICEF	\$6,400,000
USAID FUNDING FOR COVID-19 RESPONSE IN TANZANIA		\$18,598,436
Togo		
USAID/GH	Chemonics, WHO	\$1,710,000
USAID FUNDING FOR COVID-19 RESPONSE IN TOGO		\$1,710,000
Uganda		
USAID/AFR	FHI 360, JHU, Palladium	\$5,600,000
USAID/BHA	WFP	\$26,000,000
USAID/GH	FHI 360, IntraHealth, JSI, MSH, University Research Co.	\$4,250,000
USAID FUNDING FOR COVID-19 RESPONSE IN UGANDA		\$35,850,000
Zambia		
USAID/AFR	Catholic Medical Mission Board, CIDRZ, JSI, MSH, Right to Care, Zambia Center for Communications on Programmes	\$16,000,000
USAID/GH	Center for Infectious Disease Research in Zambia, JSI Research and Training Institute, UNICEF, WHO	\$5,870,000

USAID FUNDING FOR COVID-19 RESPONSE IN ZAMBIA		\$21,870,000
Zimbabwe		
USAID/AFR	Implementing Partners	\$10,298,038
USAID/BHA	Implementing Partners	\$30,977,231
USAID/GH	Implementing Partners	\$4,587,827
USAID FUNDING FOR COVID-19 RESPONSE IN ZIMBABWE		\$45,863,096
West Africa Regional⁵		
USAID/AFR	Creative Associates International, Equal Access International, UNICEF, WHO	\$8,550,000
USAID/GH	West African Health Organization, UNICEF ²	\$884,000
USAID FUNDING FOR WEST AFRICA REGIONAL COVID-19 RESPONSE		\$9,434,000
TOTAL USAID FUNDING FOR THE SUB-SAHARAN AFRICA COVID-19 RESPONSE⁶		\$1,572,076,370

³ 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 from Ebola Repurposed funds completed by September 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 USG assistance to GAVI/COVAX. To date, USAID has obligated more than \$4 billion for COVID-19 response operations worldwide.

⁴ This includes support to Comoros, Seychelles, and Mauritius.

⁵ This includes support to Gabon, Equatorial Guinea, São Tomé and Príncipe, and Togo.

⁶ 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 September 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 in American Rescue Plan Act appropriated for COVID-19 related OE expenditures, approximately \$7.5 million had been obligated as of September 30, 2021.

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: www.cidi.org.
- 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>.