



JULY - SEPTEMBER 2024

Organization Impact Report Q3, 2024

ehealthafrica.org

Introduction

This report presents a detailed assessment of eHealth Africa’s (eHA) organizational performance from July to September 30, 2024. The findings highlight eHA's achievements in addressing critical public health challenges while identifying areas that offer opportunities for further development. Through strategic partnerships and innovative approaches, eHA plays a pivotal role in advancing African public health. 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 regions of operation.

Key Organizational Results Across Program Areas

eHA has significantly strengthened public health infrastructure, particularly in emergency preparedness, public health laboratory infrastructure support, and routine immunization vaccine supply management across Nigeria and other African countries. The organization’s efforts have led to impressive outcomes in preventing vaccine wastage, increasing vaccine geo-tracking coverage, and strengthening public health capabilities for improved outbreak preparedness and response.

472, 628 undelivered vaccines returned to the state, saving **\$708, 942** for the Sokoto government

3819 public health practitioners from **154** Partner organizations utilized the PHEOCS for outbreak planning, coordination, and response activities

5399 frequency of visits to the EOCs

1513 public health practitioners had their capacities strengthened in public health emergency management and technical training across the EOCs.

19 humanitarian partners have their essential commodities managed by the Ngala and Dikwa Wahouse in Borno State

Partners have directly reached **4,760,143** children with essential life-saving commodities through eHA digital services, protecting millions from life-threatening conditions and improving child health outcomes.

On average, **6811** traditional leaders are engaged monthly to address any cultural or religious barriers to vaccine hesitancy in Northern Nigeria.

On average, an **84%** vaccination tracking geo-coverage rate was achieved in the quarter

On average, **87%** of project work plans for the quarter were achieved, showing program effectiveness.

Effective Vaccine Management: Prevention of Life-saving Vaccines from Wastage

eHealth Africa (eHA) plays a critical role in ensuring that vaccines are protected throughout the supply chain, maintaining their quality and availability for those who need them most. This commitment to resource efficiency directly contributes to improved public health outcomes. During the reporting quarter, eHA successfully prevented the wastage of 472,628 vaccine doses by returning undelivered vaccines to the central cold store in Sokoto State.

The cost of routine immunization vaccines in Nigeria varies based on the type of vaccine and procurement source. Government-procured vaccines, such as those obtained through agencies like UNICEF, typically range from \$1 to \$3 per dose for vaccines like BCG, DPT, and OPV (Oral Polio Vaccine). By returning unused vaccines to the cold store, eHA saved an estimated \$708,942 in procurement and distribution costs. This achievement underscores the effectiveness of eHA’s vaccine management system, which not only prevents spoilage and loss but also promotes optimal vaccine utilization. The substantial cost savings highlight the value of continued investment in last-mile vaccine delivery and monitoring systems, which are essential to safeguarding public health and ensuring that vaccines reach beneficiaries without wastage.



472,628

Vaccines were saved from wastage in Sokoto State reaching those in need



\$708,942

estimated cost saved by returning unused vaccines to the cold store

Program Reach: Beneficiaries and Partners Supported by eHA Digital Solutions and Interventions

Over the past three months, eHealth Africa (eHA) provided a range of technical services, including public health emergency operations support, data management, and geospatial technological solutions, to enhance emergency preparedness and response outcomes in Nigeria.


Additionally, eHA engaged 11,397 traditional leaders per month across five states—Zamfara, Kebbi, Sokoto, Katsina, and Kano—to address vaccine hesitancy during health campaigns. This reflects the broad reach of eHA’s interventions, benefiting both direct recipients and partner organizations involved in public health initiatives.

Notably, eHA’s digital solutions have facilitated the delivery of essential health commodities to 4,760,143 children, showcasing the organization's ability to effectively use technology to scale health interventions. The substantial number of children reached emphasizes the critical role of maintaining and expanding digital health technologies to improve access to essential health services across diverse communities.

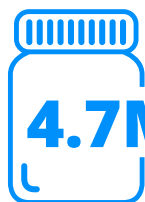
ETI PROJECT

Enhanced the capacity of officers to enable them to discharge their role in terms of community mobilization and supportive supervision during the exercise

Zamfara, Kebbi, Sokoto, Katsina, and Kano—to address vaccine hesitancy during health campaigns



11,397



4.7M children were directly reached by partners with life-saving commodities through eHA's digital solutions

Public Health Emergency Management (PHEM) portfolio

Support for Polio Outbreak Control Rooms

The scope of the Support for Polio Outbreak Control Rooms (SPOCR) project is aimed to set up POCR in Garowe, provide supportive supervision to the established POCRs in Somalia, DR Congo, and Cameroon, and conduct impact assessments in selected African countries. The following results elaborate on the support provided for the POCRs and the status of the Garowe construction within the period of review.

Improved effectiveness in the delivery of operations and logistics support:

During the reporting period, eHealth Africa (eHA) provided operational management support to 11 Emergency Operations Centers (EOCs) across Africa. These EOCs are located in Mogadishu, Jowhar, Banaadir, Dhusamareb, Kismayo, Maroua, Kinshasa, Maniema, Haut Lomami, Tanganyika, and the Brazzaville regional EOC. The support covered critical areas such as internet services, utilities, operational costs for Polio Outbreak Control Rooms (POCR), facility maintenance, ICT infrastructure, and furniture upgrades.

Out of these 11 EOCs, 6 (55%) requested and received operational support within a 12-week timeframe, meeting the 100% delivery rate target. This timely assistance has contributed significantly to enhancing the operational effectiveness of the EOCs.

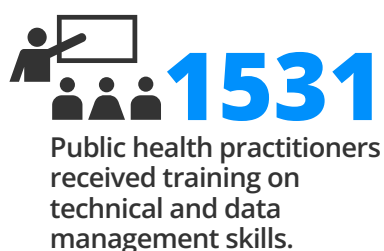
By addressing both immediate operational needs and long-term infrastructure maintenance, eHA ensures the sustainability of these centers. The provision of consistent management support fosters standardized operations across all EOCs, improving coordination and strengthening regional emergency response capabilities. This aligns with eHA's broader goal of facilitating the rapid management of health emergencies and empowering African governments to lead and respond effectively to public health crises.

Emergency Operation Center (EOC) Project

The scope of the PEOC project is to provide administrative and infrastructure support to the Polio EOCs (PEOC) in Northern Nigeria. These include operational support and training to enhance public health practitioners' emergency management skills. The results underscore their critical role in coordinating public health and emergency activities, contributing to Nigeria's capacity to respond to public health crises effectively. The performance indicators of the PEOC project are summarized in the results areas presented below.

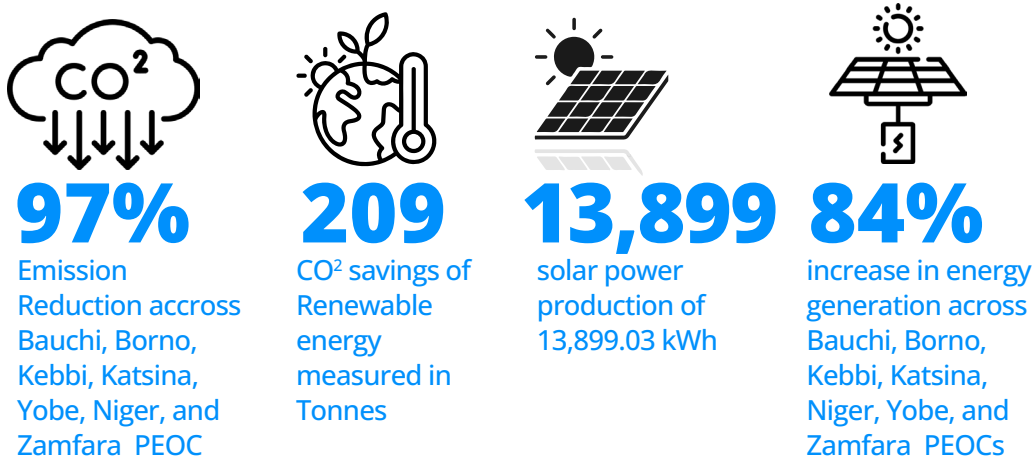
Improved capabilities of health practitioners to prepare for PH emergencies

In the third quarter, 1513 public health practitioners underwent capacity building on technical and data management skills. Of these, 93% had evidence of improved knowledge to effectively deploy the requisite skills needed to deliver public health emergency planning and response through the pre-post test assessment. These various trainings contribute to having skilled practitioners in the PHE space and strengthening the preparedness and response to public health events in Nigeria.



Climate Change Mitigation through the Use of Clean Energy and CO2 Savings across PHEOCs

The project also achieved CO² savings of 209 Tonnes of Renewable energy utilization indicating 97% CO² emission reduction across Bauchi, Borno, Kebbi, Katsina, Yobe, Niger, and Zamfara PEOCs. The project achieved a solar power production of 13,899.03 kWh indicating an 84% increase in energy generation across Bauchi, Borno, Kebbi, Katsina, Niger, Yobe, and Zamfara PEOCs. On average, the utilization stands at 89% across the aforementioned PEOCs. Reducing CO² emissions reduces greenhouse gas concentrations in the atmosphere reducing the risk of extreme weather events, rising sea levels, and disruptions to the ecosystem. The use of clean energy sources reduces harmful pollutants like particulate matter, improving the quality of air which can further improve health outcomes.



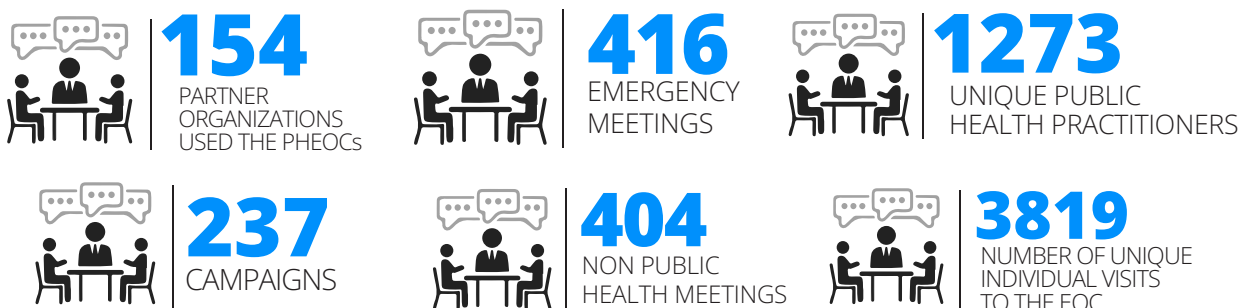
Utilization of the Public Health Emergency Operations Centers (PHEOCs) for Improved Planning and Preparedness for Early Detection and Response to Public Health Events in Nigeria

On average, 154 partner organizations and 1273 unique public health practitioners utilized the EOC between July and September 2024.

- The use of the EOC underscores the EOC's central role in coordinating public health and emergency-related activities. The activities included participation in
- 416 public health emergency meetings were hosted across all EOCs in Q3
- 48 campaigns and 189 cVDPV2 campaigns were supported to improve immunization coverage in targeted communities.
- 404 non-public health meetings such as State Emergency Routine Immunization Coordination Center (SERICC) Meetings, Surveillance review meetings, Strategic Working Group Meetings, etc.
- In each month, an average of 100 partners utilized the EOCs for PH meetings with 3819 unique individuals visiting the EOCs at least 2 times within a month.

The use of EOCs for campaign planning, micro-planning, data reviews, and incidence reporting has enhanced timely detection and response to outbreaks within the period of review.

This alludes to the EOC's resources being heavily leveraged. This engagement reflects the EOC's importance in fostering collaboration and rapid response among partners. However, it also implies a significant strain



on resources, necessitating careful planning and potentially increased capacity to sustain this level of activity without compromising the quality of support provided. Through this project, eHA is contributing to Nigeria’s capabilities to effectively respond to public health emergency issues.

Laboratory Systems and Diagnostics (LS&D) portfolio

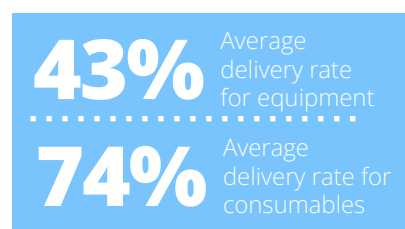
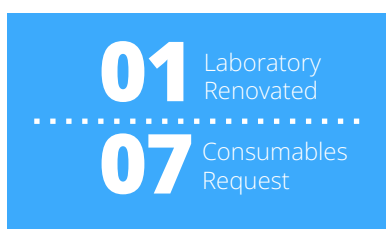
Laboratory Infrastructure and Procurement Strengthening Project

Within this period of review, the performance of the SLS/LIP project was measured by its agility and efficiency in achieving the deliverables attached to the upgrade of the laboratories as described below.

Delivery of Public Health Laboratory Consumables and/or Equipment to Enhance Timely Detection and Confirmation of VDPV and other vaccine-preventable diseases:

- eHA supports 16 Public Health Laboratories. In the period of review,
- Also, there was one additional equipment request from the National Public Health Laboratory, Tanzania. The equipment requests from Institut Pasteur Cameroon, WHO Polio Lab, Maiduguri, and National Institute for Communicable Diseases - South Africa are still being processed and should be delivered by the end of October 2024.
- For consumables, the project had seven consumable requests in September 2024 from Virology Lab, UCH, Kenya Medical Research Institute, WHO Polio Lab, Maiduguri, Institute National Research Biomedical, DRC, National Public Health Laboratory, Tanzania, Uganda Virus Research Institute, Noguchi Memorial Advance Research Institute, Ghana.
- Additionally, from the 5 requests made in August one was delivered 100% for all sites in September and the other 4 are currently being processed as it is still within the 8 weeks timeline.
- The delivery delays seem to be aggravated by the increasing volume of requests each month. As the demand for both equipment and consumables grows, the slower pace of delivery may lead to shortages, operational disruptions, or delays in service provision.
- Addressing these issues will require a comprehensive review of the supply chain processes, potential scaling of resources, and stronger coordination with suppliers to meet rising demands.
- Implementing efficient tracking systems or revising procurement schedules might help mitigate further delays.
- Further conversations with the team suggest that the timelines set for delivery of supply hub requests (6 months) are not realistic based on the processes required to successfully deliver on a robust hub.

This project contributes to eHA's goal to support the availability of functional and optimal public health laboratories as it is critical for the timely detection and confirmation of disease for effective outbreak management. Optimized PHLs enable accurate diagnosis, efficient resource use, informed decision-making, public communication, and prevention of secondary outbreaks.



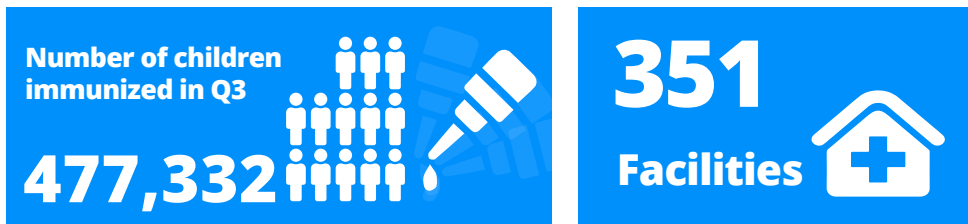
Disease Prevention Monitoring (DPM) Portfolio

Vaccine Direct Delivery in Sokoto State

The success of the VDD project is represented across 3 result areas as indicated below.

Children immunized in VDD-enabled Communities in Sokoto State

eHA delivers routine immunization antigens and dry goods to 351 facilities in Sokoto State. Across these facilities, 477,332 children were vaccinated. There was a 4% decline in children immunized in September from August because of a nationwide stockout of essential vaccines.

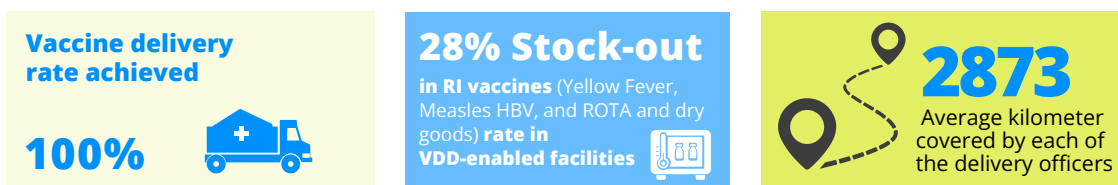


Vaccine stock-out experiences in VDD-enabled facilities in Sokoto state

Four vaccines have been consistently out of stock at the State Central cold store (Yellow Fever, Measles HBV, and ROTA and dry goods such as Syringes). This has contributed to the high rate of stock out rate. The average stock-out rate is 28%.

Vaccines delivered at scheduled health facilities in Sokoto state

eHealth Africa achieved a 100% delivery rate for each round of delivery within the period of review. In 3 months, 1,590,625 antigens and 569,282 dry goods were delivered across 351 facilities. The unavailability of vaccines at the central store further impacted the number of vaccines delivered. The project data shows a consistent decrease in the number of deliveries of antigens and vaccines. The average kilometer covered by each of the delivery officers was two thousand, eight hundred and seven three (2,873).



Geospatial Tracking System (GTS)

Competent and dedicated vaccinators deployed for campaign tracking

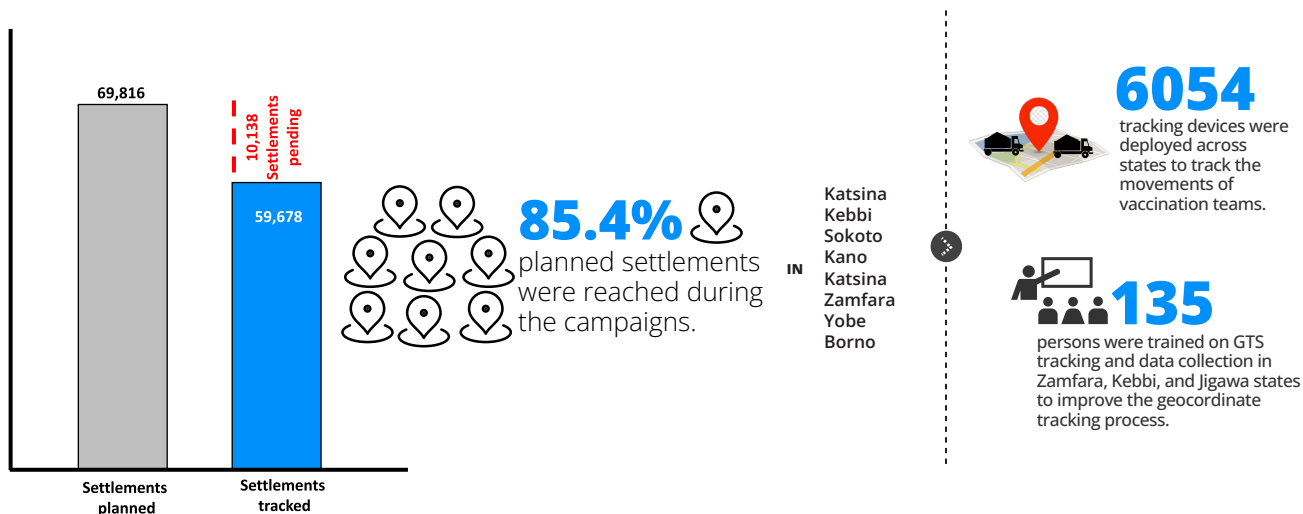
- 135 persons were trained on GTS tracking and data collection in Zamfara, Kebbi, and Jigawa states to improve the geocoordinate tracking process.
- 6054 tracking devices were deployed across states to track the movements of vaccination teams.

Geo-coverage Rate of Vaccination Tracking Teams

The GTS project commenced a new phase of implementation in July 2024. Ever since, eHealth Africa has tracked

- 3 number of campaigns
- 8 states, namely- Katsina, Kebbi, Sokoto, Kano, Katsina, Zamfara, Yobe, and Borno).
- 69,816 settlements planned across all campaigns in all states between July and September
- 59,678 settlements tracked/reached across all campaigns in all states between July and September
- 10,138 settlements pending across all campaigns in all states between July and September

This project is implemented to improve the coverage of vaccination activities during polio outbreak response efforts and ensure that the majority of targeted areas have been consistently served across these states.



CFD-50 and Stationary Cold Chain Equipment (CCE) Data Advocacy

Post-transition functional CCE across 12 states of CCE deployment:

In Q3, an average of 88 metafridges remained functional across 11 states out of the 12 states of metafridges installation, with 49 non-functional. Notably, all metafridges deployed in Taraba State were functional during Q3, a significant improvement from Q2, where 2 metafridges were non-functional in May. The sustained functionality of these cold chain devices is critical for maintaining optimal vaccine storage conditions, directly contributing to the success of immunization programs and health outcomes of communities served across the states.

88 Functional Metafridges across 11 states.

49 Non-Functional Metafridges across 11 states.

Abia - **4**, Bayelsa - **8**, Enugu - **7**, Federal Capital Territory - **5**, Gombe - **8**, Jigawa - **9**, Kano - **10**, Nasarawa - **11**, Osun - **7**, Plateau - **9**, Taraba - **10**

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

Common Storage Warehouse Management Project

Monthly physical inventory at Ngala and Dikwa warehouses successfully conducted by the eHA warehouse team

- Two physical inventories were conducted in September, one in each warehouse.

The monthly physical inventories conducted are important to the project as they help to ensure the accuracy of records, identifying discrepancies such as theft, damage, or misplacement. It also helps optimize the warehouse space and enhance the warehouse's overall operational efficiency.

Number of Consignments managed

- In 3 months, 342 consignments were handled in Ngala, totaling 172 metric tonnes and 746 cubic meters.
- In Dikwa, 244 consignments were handled in Dikwa, totaling 449 metric tonnes and 1312 cubic meters of cargo.
- 19 partner organizations utilize the warehouse in Ngala (9) and Dikwa (10)

Cargo management at the warehouse remains essential, ensuring accuracy, stock control, efficient space utilization, compliance, safety, and partner satisfaction

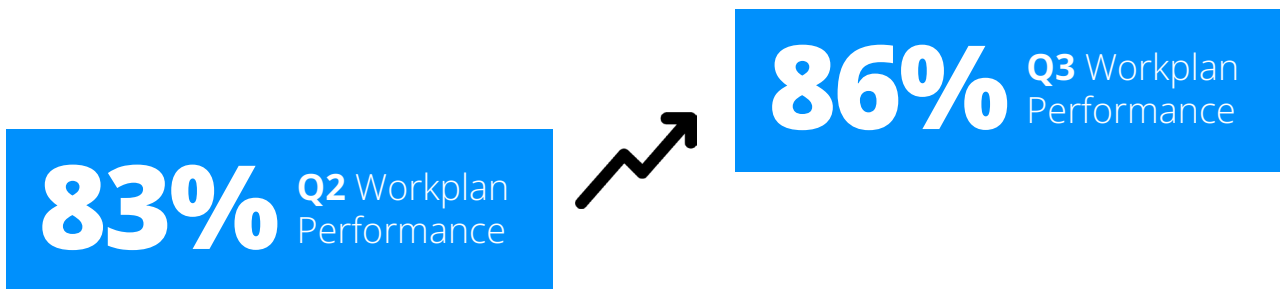
The project continues to ensure that storage of relief materials for humanitarian partners are housed properly and with dignity to reduce wastage while ensuring accountability to the World Food Programme which is in line with one of eHA's strategies which is to enhance climate-responsive practices and actions in achieving sustainable food security, improved nutrition and health.

The project remains dedicated to ensuring that relief materials for humanitarian partners are stored properly and with dignity, minimizing waste, and maintaining accountability to the World Food Programme. This aligns with eHA's strategy to promote climate-responsive practices and actions that support sustainable food security, improved nutrition, and health.

Workplan Performance

In the quarter under review, the organizational work plan score was 94% (Meet Standard grade). This is a 25% increase from August which had a work plan score of 75%.

The completion rate for all active project's planned activities in September indicates strong execution progress but may need to address outstanding issues to meet the planned actions fully.



Conclusion

The Performance Report reflects eHealth Africa's (eHA) significant achievements in various public health projects. The report highlights eHA's efficient response to public health emergencies, evidenced by its support for polio outbreak control rooms and emergency operations centers across several African countries. eHA also contributed to climate change mitigation by achieving significant CO2 savings through the use of renewable energy. However, challenges such as vaccine stockouts in Sokoto State and delivery delays in laboratory infrastructure projects indicate areas that need attention. Overall, eHA's work plan performance for September was commendable, achieving 94% completion of planned activities, a notable improvement from the previous month.

Recommendations

Addressing Vaccine Stockouts: The 30% stockout rate in Sokoto State indicates a need for more robust supply chain management at the national level. eHA can work closely with relevant authorities and stakeholders to address vaccine shortages and ensure consistent availability of essential immunization supplies.

Improve Delivery Processes: Delays in delivering public health laboratory equipment and consumables need to be resolved to avoid disruptions in disease monitoring and outbreak management. Streamlining procurement processes and enhancing supply chain coordination with vendors may mitigate these issues.

Expand Operational Capacity: The high utilization of emergency operations centers (EOCs) for public health emergency meetings and campaigns suggests the need for additional resources or expanded facilities to prevent resource strain and ensure sustained service quality.

Targeted Interventions in Low Coverage Areas: The relatively lower immunization coverage in Borno State (79%) due to security concerns and flooding requires focused interventions. Collaborating with local authorities to enhance security and mitigate environmental disruptions would improve service delivery.

Scale Renewable Energy Efforts: Given the success of the CO2 savings achieved through renewable energy use, eHA should consider scaling this initiative across more states to further reduce emissions and promote sustainable energy practices.

Click here to view Power-BI visualisation

<https://bit.ly/eHealthAfricaPower-BIVisualisation>





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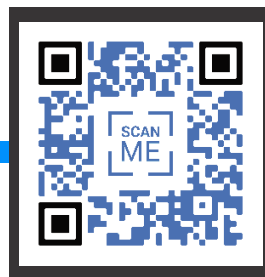
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