COVID-19 Situation Report, Madagascar | July 7th, 2020

Madagascar
Country Office
Covid-19 response

July 7th 2020

Situation in Numbers

- 3250 cases across 15 regions
- 33 deaths
- 1135 recovered

Funding status 2020

- Fund received $1.16
- Carry forward $2.24
- Funding Gap $3.6

Highlights

- From May 17th to July 7th 2020, the growth curve in the number people testing positive decupled, reaching an exponential shape from 304 to 3250. Cases have been reported in 15 regions.

- There are currently four regions mostly affected by the epidemic in Madagascar: Analamanga (Antananarivo), Alaotra Mangoro (Mangoro), Analanjirofo (Fenerive Est) and Atsinanana (Toamasina) that cumulate most of the previous and new cases with high community transmission. The overload of central hospitals has led to preparing for decentralizing of care for asymptomatic and pauci-symptomatic patients whilst moderate, severe and critical patients will still be taken care of in central hospitals.

- Government declared health emergency status since March 20 and has since maintained or increased measures, especially in affected regions (such as Analamanga region, where the capital city is located). The recent control measures, including curfews and limitation to inter-regional transport, make partners’ response more complicated.

- UNICEF is the key organizer and financer for preparing to this decentralizing of patients’ management and will support the PHC units as well as general practitioners. UNICEF supported also severe patients’ care by contracting O2 suppliers for hospitals, helping saving lives of most severe patients who were on the high rise.

- UNICEF will launch in July in 59 priority districts, a strengthening of PHC services to boost these in response to decreased use.

- UNICEF continues to support the continuation of learning. 69 per cent of schools in the country have been disinfected, close to 100 per cent of schools in UNICEF priority areas (outside Antananarivo) have opened for grades 3, 7 and Terminal, and 172,008 children have received self-study guides.

- 600,000 people in most affected cities receive, via programme Avo-Traina, subsidized access to water as well as soap for 200,000 and provision of 2,500 hand washing devices.

- Use of regular resources, reallocation of existing programmes (Korea, Gavi, ECHO, DFID) and mobilization of new donors (Denmark, Norway, National committees) is supporting UNICEF’s response.
UNICEF Madagascar has estimated its initial needs at USD 7 million for four months to support the government in its response to the pandemic.

### Situation Overview and Humanitarian Needs

COVID-19 first officially appeared in Madagascar on March 19, 2020. The president of Madagascar declared a state of emergency on March 20, 2020 which has been lasting since. To respond to socio-economics needs, measures have been partially lifted over time but were fully reapplied after exceptional council of Minister of the 5th of July. The country, with one of the poorest population in the world, has experienced several pandemics over the past years (polio, plague, measles) which challenged its health system and stocks and is geographically isolated, with limited local production capacity for medical and para medical equipment to date, which complexifies the response. The secondary impact of the crisis, on poverty, access to public services, nutrition, education is particularly dire.

In the past weeks, the number of cases has started to rapidly accelerate, both in terms of person affected and death, although the lethality remains relatively low.

![Daily number of cases and moving average](https://www.covid19mg.org/)

Source: [https://www.covid19mg.org/](https://www.covid19mg.org/)

### Humanitarian Leadership, Coordination and Strategy

#### Humanitarian Strategy

In coordination with government, UN agencies, NGOs, Donors and other actors, UNICEF response focuses on health (procurement of essential supplies, ensuring access to essential activities and support to the primary health care system); risk communication and community engagement; access to water, basic sanitation and hygiene; and prevention and mitigation of secondary impacts across sectors such as education (remote learning and preparations for a future school reopening); nutrition (prevention and treatment of acute malnutrition); social policy and social protection (unconditional cash transfers); and child protection (case management, psychosocial support and interim care/family tracing and reunifications).
Humanitarian leadership and coordination

Within the government, three distinct levels exist for the management of the pandemic in Madagascar: the political level under the lead of the presidency in collaboration with the prime minister and the ministries; the strategic level under the lead of the prime minister with the ministries in charge of essential sectors; and the operational level with the COVID-19 Operational Command Center (CCOC) ensuring the implementation of actions and coordination.

The CCOC is chaired by the Minister of the Interior and Decentralization who is in permanent contact with the General Coordinator.

Summary Analysis of Programme Response

Strengthening Risk Communication and Community Engagement (RCCE)

In collaboration with other UN agencies and partners, UNICEF continued to support the Ministry of Health in the coordination of communication response in the fight against COVID-19 in Madagascar.

From April to June 2020, 9.9 million people in 52 districts were reached with COVID-19 messaging on prevention and access to services through media and mass communication. A free hotline (910) provides public with advice and guidance and rumors monitoring is done on a daily basis to adapt messages and counter fake news.

However a more systemic approach is being planned with the finalisation of a KAP (knowledge Attitude Practice) survey on COVID-19. This will complement a series of C4D rapid assessment in a monthly-basis to measure regularly the perception, opinion, attitude, knowledge and practices of the population in this context of COVID-19, and also to identify influencers and appropriate and trusted communication channels.

UNICEF contributes to the finalization of tools and guidance for health community agents and for media professionals in the context of COVID-19 response. A specific effort is made to reach youth, especially in highly affected areas.

Faced with the evolution of the current situation, with the substantial increase of COVID-19 positive cases, the spread of stigmatization, the proliferation of rumours, the decrease in the use of services, and the non-compliance with preventive measures, COVID-19 communication strategies and approaches were reoriented. This reorientation will be effective from July 1st, 2020 at national level and specifically in the main affected districts.

The tone and the style of messages were adjusted to a more positive note, and the content takes into account the current situation in the field. The COVID-19 IEC materials bank is also updated in order to capitalize on achievements but also to explore innovative approaches.

In addition, with the field officer team, UNICEF continues its support to the affected and high-risk districts in the implementation of communication activities in the field.

RCCE actions also involve active collaboration and support to programs in the response to COVID-19, including on secondary impact, especially on health (continuity of vaccination in the context of COVID-19) and WASH (improving access to water in the urban area with the context of COVID-19)
Strengthening public health response to Covid 19 and improve Infection and Prevention Control (IPC) and provide critical medical and WASH supplies

Health:

UNICEF Madagascar, benefiting from a strong expertise in Health System Strengthening, large field presence and procurement capacity provides support to the health sector via a tri-pronged approach:

- In a context where protective equipment remains scarce, UNICEF provided 6,000 PPE to boost the stocks in these items and to be used by first line health workers. 9,250 GeneXpert COVID-19 tests, a quarter of all tests available in Madagascar, were also provided by UNICEF in addition to elements provided to the ministry of health at the beginning of the epidemics.
- 309 professionals have been trained in hospital hygiene management in the nine regions most affected by the epidemic.
- UNICEF provided technical support with special support to decentralization of treatment and reinforcing networks of both hospitals and general practitioners in addition to training of trainers on IPC in five regions.

Wash:

WASH succeeded to reach a major momentum with an official decree limiting the price of Water in main affected cities (reaching 600,000 people), with provision of soap to more than 200,000 people and provision of 2,500 hand washing devices in strategic areas. This key achievement is the result of months of advocacy to ensure that WASH is considered a key element of prevention and response to the covid-19 crisis and intense coordination of the sector with government, donors and NGO partners.

In addition, Infection prevention and control (IPC) training modules were developed and shared with WASH partners. 312 clinical and non-clinical staff have been trained on IPC and provided with personal protective equipment in 7 regions (Analanjirfo, Analamanga, Atsinanana, Atsimo Atsinanana, Boeny, Haute Matsiatra and Vakinankaratra), through our partnership with Action Contre la Faim (ACF), MEDAIR and Ministry of Health.

Since the beginning of the crisis, UNICEF has supported reinforcement of hygiene in quarantine, treatment and general population locations and shall continue to ensure that most vulnerable population can collect safe water in a safe way. In parallel interventions remain in drought affected south and in ensuring that open air defecation continue to decrease despite challenges, since it causes major diarrhea and malnutrition, which take a heavier toll on children than covid-19.

Continuity of health, education, nutrition and protection services

Health:

Since “regular” diseases such as vaccine preventable and neonatal disease keep killing more children than Covid-19, UNICEF Madagascar supports the continuity of primary health care services (maternal and child health services) underway at the national and regional levels by actively participating in technical committees, developing a continuity plan, tools and advice.

At central and field level UNICEF contributes and provides technical support to the commission for treatment and epidemiological surveillance. Participate in disease surveillance and response to other epidemics (malaria, dengue, etc.).
**Education:**

For a third of the year, children have been deprived of their basic right to education, in a situation where even under normal times access to quality education remain a challenge for a vast number of children. UNICEF Madagascar has worked with ministry and partners to ensure that children authorised to go back to school (grades having to pass an exam) would do so in safe condition and that children deprived of face to face schooling receive alternative way to keep learning and developing.

98,280 classrooms in 17 out of the 22 regions of Madagascar have thus been disinfected and close to 100 per cent of schools have reopened in UNICEF priority regions and communities have received information on COVID-19 (posters, protocol, guidelines).

During the last 2 weeks 93,485 self-study guides have been received by schools in Androy, Anosy, Atsimo Andrefana, Vatovavy-Fitovinany, Vakinankaratra and Bongolava. The cumulative number of guides received by schools is 172,008. The distribution network continues to operate in spite of continued logistic and contextual difficulties.

**Nutrition:**

Ready-to-Use Therapeutic Food distribution continues in the south of Madagascar, affected by a drought. Most recent IPC estimates that 20,000 children will suffer from severe acute malnutrition this year. Thanks to a support from USAID and expected support from ECHO, UNICEF and its partners can maintain their screening and support.

**Child Protection, Gender:**

Child Protection is always a neglected area in Madagascar, with poor interest from international community. However, the most vulnerable children (street children, children in jail, children victim of violence) and their family are the ones suffering the most from the current situation. UNICEF ensure that psychosocial support is provided to families affected by COVID-19 via Social workers trained in the Atsinanana, Analanjirofo, Androy and Anosy regions (in progress). To date, 587 people including 250 children have benefited from this support.

In collaboration with other United Nations agencies, UNICEF supports the efforts of the Ministry of Justice to prevent and respond to COVID-19 in prisons. UNICEF has facilitated the screening of quarantined minors, the provision of hygiene materials and provides protective and preventive materials to the children areas in prisons in high-prevalence regions, in addition to advocacy and technical support aimed to reduce the incarceration of children during the epidemic (and in the future). UNICEF collaborated with the Municipality of Antananarivo to find placements for street children without parental care.

**Social Policy and Social Protection:**

The emergency social protection programme (TOSIKA FAMENO) put in place by the Cash Working Group, under the leadership of the Ministry of Population, Social Protection and Empowerment of Women (MPPSPF) and the National Office for Risk and Disaster Management (BNGRC), and UNICEF co-lead, is currently being rolled out in three town in Madagascar (Antananarivo, Toamasina and Fianarantsoa). Thus far, 240,000 families have received a cash transfer of 100,000 Ariary (26
US$),. A second payment is planned for the month of July to continue to support the immediate needs of the most vulnerable families affected by the socio-economic impact of the pandemic.

UNICEF continues to support the government to leverage resources to prioritize the social sectors and expand social safety nets programmes. In particular, UNICEF started a review of the 2020 revised Budget Law – and policy recommendations will be presented in July.

**Communications**

**Press:**

UNICEF has been featured in major media outlets during children’s month in Madagascar. UNICEF also contributed to an [UN-wide press release](#) on support to prisons and prisoners during the outbreak.

The section has been supporting a leading private television channel to produce programmes highlighting child rights and which allow young people to express their views on the future of Madagascar. The programmes were broadcast on Madagascar’s Independence Day, June 26.

**Digital assets:**

In collaboration with the Division of Communication and the Rooftop agency, the section contributed to a video series on the lives of young people during the Covid-19 lock-down. The launch of the programme is planned for August. To highlight UNICEF interventions in key areas during the COVID-19 crisis, we produced three animated videos on social protection, WASH and health interventions. In addition, the section is producing a video series for parenting month to highlight, in the words of the parents, the challenges they face during this time. The first video was published on social media. The [Learning diary](#) of a child home schooling during Covid-19 was also produced and posted on social media. Finally, we produced the latest in our series, One-Minute with Lova, featuring eight-year old Lova Rene. This episode highlighted messages on [online child protection](#) during the pandemic. These videos are being shared with the national TV channel and are broadcast during prime time.

**Social Media**

**TWITTER:**

- [UNICEF is supporting the government of Madagascar in combating covid19 by providing access to safe water and sanitation facilities](#)
- [The impact of the economic fallout from covid19 on the most vulnerable children](#)
- [UNICEF campaign about handwashing to protect people from covid19](#)
- [Legal identity campaign in Africa](#)
- [Parenting during the coronavirus period](#)
- [Social protection and UNICEF’s actions towards vulnerable populations](#)
- [UNICEF and UN support for Madagascar’s prisons to cope with coronavirus](#)
- [Partnership between UNICEF and AFD for education and children in Madagascar](#)
- [Message from Lova Renée on online protection](#)

**FACEBOOK:**

- [UNICEF is supporting the Government of Madagascar in combatting covid19 by providing access to safe water and sanitation facilities](#)
- [Campaign: Children have the right to a legal identity](#)
- [Parenting during the coronavirus period](#)
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- Social protection and UNICEF’s actions towards vulnerable populations
- Reminder of handwashing message
- UNICEF’s work with the United Nations system to support prison infrastructure in Madagascar
- Message from Lova Renée on online protection

Contact for further information

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### Annex A

**SUMMARY OF PROGRAMME RESULTS**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>UNICEF Target</th>
<th>Total Results as of 24 June</th>
<th>Sector/Cluster</th>
<th>Total Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wash: Number of people engaged on COVID-19 through rcce actions (Hand Washing)</td>
<td>2,000,000</td>
<td>584,800</td>
<td>19,716,000</td>
<td>9,914,000</td>
</tr>
<tr>
<td>C4D: Number of people reached on COVID-19 through messaging on prevention and access to services. Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanism.</td>
<td>8,636,309</td>
<td>9,927,000</td>
<td>250,000</td>
<td>349,536</td>
</tr>
<tr>
<td>Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH: Number of people reached with critical wash supplies (including hygiene items) and services</td>
<td>100,000</td>
<td>472,374</td>
<td>4,177,144</td>
<td>1,057,650</td>
</tr>
<tr>
<td>HEALTH Number of healthcare workers within health facilities and communities provided with personal protective equipment (ppe). Number of healthcare facility staff and community health worker trained in infection prevention and control (ipc). Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases.</td>
<td>50,000</td>
<td>2,100</td>
<td>10,806</td>
<td>1,988</td>
</tr>
<tr>
<td>Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Number of children and women receiving essential healthcare services in UNICEF supported facilities.</td>
<td>2,173,034</td>
<td>361,094</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19</td>
<td>3,500,000</td>
<td>1,568,089</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition (sam).</td>
<td>16,000</td>
<td>17,603</td>
<td></td>
<td></td>
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<tr>
<td>Access to continuous education, child protection and GBV services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children supported with distance/home-based learning.</td>
<td>600,000</td>
<td>Radio and tv programming have been made available to 600,000 pupils. Materials distributed for 172,008 pupils.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of schools implementing safe school protocols (COVID-19 prevention and control).</td>
<td>0</td>
<td>41,570 schools have been disinfected.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children without parental or family care provided with appropriate alternative care arrangements</td>
<td>300</td>
<td>76 (27 girls, 49 boys)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children, parents and primary caregivers provided with community based mental health and psychosocial support.</td>
<td>700</td>
<td>587 (250 pupils, 142 girls and 108 boys)</td>
<td></td>
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<td></td>
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<tr>
<td>Number of UNICEF personnel &amp; partners that have completed training on gbv risk mitigation &amp; referrals for survivors.</td>
<td>1,000</td>
<td>337</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse.</td>
<td>500,000</td>
<td></td>
<td></td>
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<tr>
<td>Support access to continuous education, social protection, child protection and gender-based violence (GBV) services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of households benefitting from new or additional SOCIAL ASSISTANCE MEASURES provided by governments to respond to COVID-19 with UNICEF support</td>
<td>7,500</td>
<td>8,500</td>
<td>189,400</td>
<td>206,497</td>
</tr>
</tbody>
</table>

**FUNDING**

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Funds Received Current Year</td>
<td>Carry-Over (re-programmation)</td>
<td>Total</td>
</tr>
<tr>
<td>Nutrition</td>
<td>700,000</td>
<td>-</td>
<td>34,015</td>
</tr>
<tr>
<td>Health</td>
<td>1,300,000</td>
<td>614,477</td>
<td>471,627</td>
</tr>
<tr>
<td>WASH</td>
<td>1,000,000</td>
<td>350,000</td>
<td>625,642</td>
</tr>
<tr>
<td>Education</td>
<td>1,200,000</td>
<td>-</td>
<td>875,265</td>
</tr>
<tr>
<td>Child Protection</td>
<td>300,000</td>
<td>20,000</td>
<td>-</td>
</tr>
<tr>
<td>Communication for Development</td>
<td>1,500,000</td>
<td>173,859</td>
<td>234,333</td>
</tr>
<tr>
<td>Cash-based transfert</td>
<td>1,000,000</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cross sectoral / Cluster coordination</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>7,000,000</td>
<td>1,158,337</td>
<td>2,240,882</td>
</tr>
</tbody>
</table>