COVID-19 Situation Report, Madagascar | 2020 May 31

14 May to 31 May 2020

**Highlights**

- As of May 31, 2020, there were 790 reported cases with 6 deaths and 168 people having recovered. From May 17 to May 31, the growth curve in the number people testing positive rose exponentially from 304 to 790. Cases have been reported in 13 regions.

- UNICEF has provided last week of May more than 7,200 tests to the country, dramatically increasing testing capacity especially at decentralized level.

- The state of health emergency that was first declared on March 20 and remains in effect until May 31st, with partial confinement measures in place.

- UNICEF is playing a key role in supporting the government and other partners in the integrated response, which includes surveillance, case management, and campaigns for children, supported by community engagement, social mobilization, risk communication and logistics. In addition, UNICEF ensures coordination for the communication, WASH, education, shock responsive social protection and nutrition components of the global response.

- UNICEF also pursues advocacy, support and service delivery to ensure that the children of Madagascar, the poorest country in East Africa, are not further impacted by common diseases, such as malaria, or by the disruption of essential services. Madagascar is one of the few countries in the Region that reopened schools for some grade, with UNICEF support for alternative education.

- Use of regular resources, reallocation of existing programmes (Korea, Gavi, ECHO) and mobilization of new donors (Denmark, National committees) have supported UNICEF’s response

---


[2] Situation joint report number 1 Madagascar COVID19 on 19 April 2020
UNICEF Madagascar has estimated its initial needs at USD 7 million for four months to support the government in its response to the pandemic.

This response focuses on health (procurement of essential supplies, including protective equipment and essential drugs, and support to the primary health care system); risk communication and community engagement; access to water, basic sanitation and hygiene; and 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).

**Situation Overview and Humanitarian Needs**


Madagascar has put in place measures against COVID-19, but the country lacks the capacity to respond to a widespread outbreak without additional international support.

**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 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.

**Preparedness and Response Actions**

**Health**

**Before the pandemic**

- UNICEF assessed hospital services at the nine main international ports of entry. And supported the training of rapid response teams in five entry points.
- Contribution and technical support to the development of the first draft of the response plan.

**During the pandemic**

- On 25th of May, in a context of high global demand, UNICEF secured 7,200 tests for the government, dramatically increasing capacity to test, especially at decentralized level. Since the beginning of the crisis, limited supply only enabled 10,000 tests to be performed.
- Technical support was provided for the training of health workers on infection, prevention and control (IPC);
- Contribution given to the development and finalization of the response plan against the COVID-19 epidemic. UNICEF also supported the development of the immunization continuity plan and basic health care services.
- UNICEF Madagascar trained 40 anesthesiologists and resuscitators from four hospitals selected for the management of COVID-19 cases in the Analamanga region.
- Technical support for the training of health workers on PCI (Infection and Prevention Control) and Management case was also provided, as was support for strengthening of community-based surveillance on COVID-19 and other diseases with epidemic potential; and technical support to the commission for treatment and epidemiological surveillance. Participation in disease surveillance and response to other epidemics (malaria, dengue, etc.);
• 32 professionals have been trained as trainers in hospital hygiene, including 16 managers and 16 hygiene managers, in the Toamasina and Analamanga regions.

• UNICEF strongly advocated for and supported the continuity of primary healthcare services (maternal and child health services) at the national and regional level through active participation in technical committees, development of continuity plan, tools, and guidance;

• In addition to the tests, UNICEF provided 240 boxes of Ceftriaxone, 213 boxes of Cefalexin, 45 boxes of corticosteroids, 450 boxes of bronchodilators, 60 bottles containing an infusion of glucose and sodium lactate, 120 boxes of ascorbic acid, 450 boxes of bronchodilators, 60 bottles containing an infusion of glucose and sodium lactate, 120 boxes of ascorbic acid, 40 thermometers, 2900 FFP2 masks, 480 FFP1 mask, four medical tents (24m²) a rub hall of 240m² and 1000 COVID protective visors to the minister of health.

Looking forward

• UNICEF will pursue its equipment and consumable supports, with new tests arriving in the next 2 weeks

• UNICEF shall continue the training of anesthesiologists and resuscitators in the 30 hospitals selected for the management of cases, prioritizing the regions that already have cases, and will pursue cascading training for hygienists, prioritizing regions that already have cases.

• As a nexus move, UNICEF will strengthen the technical platform of pediatric resuscitation services at university clinics, and reinforce training of pediatricians and nursing staff working in emergency services in the 12 specialized pediatric hospital, prioritizing the affected regions. Health workers will also be mobilized on detection and case management.

WASH

• UNICEF is leading and co-leading with the ministry in charge of water, the WASH cluster response and coordination with 55 members including national and international NGOs as well as the private sector.

• WASH cluster finalized a second version of the COVID-19 WASH response plan, which requires a total budget of USD 24 million. To date, the plan 3.5 million have been made available and 4 million are in negotiation with donors engaged to support WASH cluster.

• WASH cluster completed needs analysis that put 19 million people at risk with 4 million in immediate need.

• An analysis was completed with the Global WASH cluster support and data collected through 40 WASH partners contributing for the WASH response. The web page is accessible from the following link: https://www.humanitarianresponse.info/en/operations/madagascar/water-sanitation-hygiene.

• WASH cluster adapted its strategy to intensify the response in the four most affected regions: Analamanga (Antananarivo), Atsinanana (Toamasina), Haute Matsiatra (Fianarantsoa) and Alaotra Mangoro (Moramanga District). Case mapping has been used to concentrate activities in the most affected areas.

• 48 WASH assessments have been carried out at hospitals, health centers, and airports in regions using WASH Fit Tool.

• Infection prevention and control (IPC) training modules developed and shared to WASH partners. To date, 176 clinical and non-clinical staff have been trained on IPC in Toamasina, Antananarivo and Farafangana through our partnership with Action contre la Faim (ACF) and MEDAIR.

• Risk Communication and Community Engagement (RRCE) activities started and WASH developed real-time monitoring using KOBO software to monitor WASH C4D activities in Toamasina and Antananarivo.

• UNICEF is developing a specific urban WASH response to reinforce and coordination for the two most affected cities, Toamasina and Antananarivo, to support disinfection activities, IPC in public transport and markets and WASH kit voucher distribution targeting 50,000 vulnerable households already assisted through Emergency social response. Hygiene promotion activities supported by UNICEF in partnership with the ministry in charge of WASH reaching directly almost 200,000 through activities undertaken in critical wash supplies (including hygiene items) and services.

• UNICEF has completed a second round of WASH kits procurement for a total de 430,000 USD with the financial support of UK-Aid, KOICA and Danish Government.

• An electro chlorinator installed March in the Manarapenitra health center in Antananarivo, has produced 256 liters at 5% chlorine concentration. In total 11 electro chlorinators are operating to produce chlorine and, since the beginning of the crisis, have produced 1,232l of chlorine, an increase of from 16 to 60l/week per institution.
Education

- The education of more than seven million children nation-wide was affected in Madagascar due to the measures taken to prevent the spread of COVID-19. On 23 March, confinement measures were introduced that required closing schools at all levels. A national strategy was developed with the following objectives:
  - Continuation of education while children remain at home;
  - Support the closure of the 2019-2020 school year and the transition of pupils to the 2020-2021 school year;
  - Reinforce the system’s resilience.
- More than 45,000 classrooms in 20,000 schools have been disinfected (counting 14 out of the 22 regions for which information is available as of May 28). An average of 97% of schools have reopened in UNICEF priority regions and communities have received information on COVID-19. Not all schools received masks, soap and materials on their first day of operation, but this situation is gradually improving. In UNICEF priority regions the proportion of schools that have received sufficient masks and other hygiene products ranges from 10 to 50 per cent. Rates of attendance continue to oscillate between 15 per cent and 88 per cent.
- UNICEF has contributed to the national effort by providing technical and financial support to adapt radio and TV broadcasts to the current context, preparing self-directed learning workbooks for lower secondary, produce and distribute posters with information on the prevention of COVID-19, establishing the necessary agreements with regional governments to establish the temporary storage facilities for the goods that need to eventually reach schools, and helping prepare schools for opening (for example, the disinfection of classrooms).
- In the current programme’s priority regions, UNICEF expects to provide direct or indirect support to 1.4 million primary level children and 600,000 at the secondary level. In addition, UNICEF supports the Ministry of Education to reinforce the catch-up class programme for lower secondary and primary children (CRAN programme) to reduce the drop-out rate for the next school year.
- UNICEF is also working with the Ministry of Education and Technical Professional Training (MENETP) and the World Bank in preparing a proposal for the Global Partnership for Education’s (GPE) Accelerated COVID-19 funding window to support: (i) continuation of education services, (ii) promoting the return to schools that are safe and secure, (iii) set-up a monitoring and evaluation system that accounts for the efforts implemented to face the pandemic. UNICEF will maintain an active, supportive role during the implementation of the activities suggested under this proposal.
- The government decreed the opening of schools on April 22 for about 1 million pupils enrolled in grade levels that require an examination to receive a certification or be promoted to the next academic level (grades 7, 3, and terminal). The government committed itself to supplying all pupils with face masks and to ensure the hygienic security of the schools. UNICEF education field programme officers have followed the process at the regional level. All regions have reported schools have started opening.

Communication for Development (C4D)

- Communication is essential to prevent the spread of the epidemics, ensure the proper behavior, reduce rumors and mobilise populations. Media and mass communication, sensitization sessions, community engagement activities, and information watch initiatives are held at both the national level and at local level. From April to May 2020, more than 9 million people in 46 districts were reached with COVID-19 messaging on prevention and access to services through media communication, dissemination of IEC materials and awareness activities.
- Technical support is also provided to the Ministry of Health and the 910 green hotline team in line with the work with the COVID-19 communication committee. From 12th to 26th May 2020, 65,982 calls related to COVID-19 were received through the 910-hotline. In total since January 1, 2020, more than 300,000 calls on COVID-19 have been handled by respondents on the hotline. This number represents 75% of the total number of calls to the 910 number, the remaining 25% are calls related to other epidemics (malaria, plague, measles, etc.).
- In collaboration with the Ministry of Communication, 419 TV and radio stations (public, private), representing 90% of the total number of stations in the 22 regions of Madagascar, broadcast programmes related to COVID-19. These stations participate in a single wave broadcast every day at 1 p.m. Currently, 27 types of audio and video spots on COVID-19 are produced at national level in addition to the TV and radio spots produced at local level.
- With UNICEF support, more than 1900 community agents in the two main affected cities (Tana and Tamatave) held sensitization activities on the adoption of prevention measures related to COVID-19.
Child Protection

- Technical and financial support to provide psycho-social support and find alternative care for children without parental care (street children) who were in homeless shelters in Antananarivo, with a view to finding suitable long-term solutions. These children are placed in care centers for family, school and professional reintegration.
- Continued advocacy with the justice ministry, including publication of a global statement, to maintain access to justice for children and to limit detention of children, as well as avoiding detention of children with adults.
- Updated mapping of active para-social workers and social workers in 10 regions with the Ministry of Population in order to identify para social workers that can be mobilized to provide psycho-social support to children and families affected by COVID-19 and to provide them with the abovementioned training. 408 social workers from the Ministry of Population and NGOs are available in 10 regions to offer psychosocial support to children and families affected by COVID-19.
- Psychosocial support for families affected by COVID-19 by social workers trained in the Atsinanana, Analanjirofo and Androy regions (in progress).
- UNICEF supported via NGO partner Youth First awareness strengthening of the risks of online violence against children during this time of COVID-19 and confinement via social media (https://www.facebook.com/Safebookmg/)
- UNICEF is further advocating and supporting the continuity of care services for child victims of violence, a sector traditionally underfunded in Madagascar.

Nutrition

- During the reporting period, UNICEF initiated with the government and nutrition cluster members a virtual Integrated Acute Malnutrition Phase Classification analysis (IPC-AMN) in six districts in southern Madagascar. The latest nutrition surveys implemented before the lockdown and hypotheses from COVID-19 outbreak were used to gather information on the annual nutrition situation overview. According to the results covering the hunger gap between February and April 2020, four (4) districts were classified in the Serious (IPC phase 3) with 10 to 15% of children acutely malnourished and two districts in the Alert (IPC Phase 2, with 5 to 10% of acute malnutrition).
- More than 100,000 children are expected to suffer from acute malnutrition during the year 2020, including more than 19,000 severe cases in the analyzed districts.
- In collaboration with the National Disaster Risk Management Office (BNGRC), and the Food Security and the Social Protection clusters, UNICEF is actively participating in the preparation of a series of Household Economy Analysis (HEA) Baseline and Outcome surveys to be conducted in June/July 2020 in areas affected by the confinement (Antananarivo and Toamasina) and in areas affected indirectly by COVID-19 such as the staple food production areas in the highlands and cash crops production areas in north east Madagascar.
- As of next week, UNICEF will be launching on Facebook and Twitter a quiz and a Q&A on “Infant & Young Child Feeding (IYCF) in the time of COVID-19” to strengthen knowledge and practices on optimum feeding practices. On the same topic, “Frequently asked questions: Breastfeeding and COVID-19 for health care workers” issued by WHO in May 2020 was translated into Malagasy for a large distribution at community level. The document includes a very practical decision tree for breastfeeding in context of COVID-19 aimed to orient counselling and referral of mothers for health facility staff and community workers.
- In collaboration with C4D, a radio spot on early stimulation of children (Early Childhood Development) has been developed and validated by the Commission of Communication of the Ministry of Health, listed in the message bank, and recorded/produced.

Social Policy and Social Protection

- Prior to the arrival of COVID-19, Madagascar was already grappling with a multitude of compounding shocks, including cyclones in the north and drought in the south. With 75% of the population living on less than US$ 1.90 per day, COVID-
COVID-19 is foremost a socio-economic crisis in Madagascar compounded by lower income and assets, rising costs of basic goods and reduced access to social services. These pose immense threats to the wellbeing of 13 million children – four out of five which are affected by multidimensional poverty – as well as the 2,434 newborns that arrive in the country every day. The pandemic exacerbates existing issues inequalities, including the prevalence of gender-based violence.

- In coordination with the Ministry of Population, Social Protection and Empowerment of Women (MPPSPF) and the National Office for Risk and Disaster Management (BNRGC), UNICEF is co-leading the Cash Working Group and supporting the design, implementation and monitoring of the social protection response to the COVID-19 pandemic.
- In the emergency response phase, the response strategy sets the parameters of a new an unconditional cash transfer programme in urban and suburban areas to aid families and their children. After completing the pre-registration process about 240,000 households – 8,500 directly supported by UNICEF – from the 769 fokontany (sub districts) of the eight districts of Antananarivo, Toamasina and Fianarantsoa will benefit from the programme, called TOSIKA FAMENO (filling the gap). Under the programme, which was launched by the President of Madagascar on Tuesday, 20 April, each identified household will receive 100,000 Ariary per household (US$ 26) by mobile money or voucher, for initially two months. The first wave of payments was initiated on Saturday, 25 April reaching out to 124,000 households to date.
- UNICEF continues to support the government to leverage resources to prioritize social protection and enable the expansion of social safety nets. Existing social protection programmes (FIAVOTA and Monetary Transfer for Human Development – Let Us Learn) within the framework of the national social protection strategy (SNPS) continue to be financed to ensure the continuity of ongoing activities. Support during the COVID-19 pandemic is provided with the long-term goal to continue building government systems and their ability to adapt and respond to shocks.
- In addition, UNICEF initiated an analysis to assess and monitor the socio-economic impacts of COVID-19 on the wellbeing of children. This includes a rapid desk review of existing data and the conduct of simulations to estimate the impacts of COVID-19 on poverty and inequality alongside the mitigation potential of cash transfer programmes, as well as the costs and impacts of scaling up cash transfer programmes over time.

Communications

Press:
- The section issued the UNICEF/Airtel partnership press release and shared it to national media
- The section also contributed to a joint press release on UN donations to combat COVID-19

Digital Content:

Website
- Story: In Madagascar, a teenager turns to robotics to combat Covid-19
- Story: A family benefits from the cash transfer programme
- Story: Supporting those with special needs during COVID-19

Videos
- CO is producing a video series of adolescents’ diaries during COVID-19 in collaboration with HQ and Rooftop (week two of a one-month project)

Social Media

TWITTER:
- Africa Day: benefit concert to help UNICEF in the fight against covid19
- Live streaming of the benefit concert for UNICEF
- Reminder of the Q&A session about the way parents support their children during covid19
- Grant request message to support UNICEF in the fight against COVID-19
- Danish government reinforcing its support to UNICEF in the fight against COVID-19
UNICEF and the United Nations in Madagascar continuing to support Malagasy government in the fight against COVID-19

UNICEF Madagascar donates COVID-19 test kits to the government

UNICEF Madagascar made its first donation from Danish government funding

FACEBOOK:

Animation video on barrier gestures against COVID-19

Africa Day: benefit concert to help UNICEF in the fight against COVID-19

The importance of having clean water and water storage materials to avoid contracting COVID-19

About Africa Day benefit concert and UNICEF actions in the fight of COVID-19

UNICEF donates 9250 COVID-19 test kits to Institut Pasteur Madagascar

About the Genexpert tests donated by UNICEF to the government from Danish government funding

One minute with Lova Renée where she talks about nutrition

Contact for further information

Michel Saint-lot, Representative of UNICEF Madagascar, +261 32 23 432 84, msaintlot@unicef.org

Jean Benoit Manhes, Deputy Representative UNICEF, +261 32 05 411 37, jmanhes@unicef.org
### Annex A

**SUMMARY OF PROGRAMME RESULTS**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>UNICEF Target</th>
<th>UNICEF Results</th>
<th>Sector/Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Communication and Community Engagement (RCCE)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wash : Number of people engaged on COVID-19 through rcce actions (Hand Washing)</td>
<td>2,000,000</td>
<td>481,042</td>
<td></td>
</tr>
<tr>
<td><strong>C4D :</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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>9,154,199</td>
<td></td>
</tr>
<tr>
<td>Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanism.</td>
<td>250,000</td>
<td>235,587</td>
<td></td>
</tr>
<tr>
<td><strong>Improve Infection and Prevention Control (IPC) and provide critical medical and water, sanitation and hygiene (WASH) supplies</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WASH:</strong> Number of people reached with critical wash supplies (including hygiene items) and services</td>
<td>100,000</td>
<td>140,118</td>
<td></td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of healthcare workers within health facilities and communities provided with personal protective equipment (ppe).</td>
<td>50,000</td>
<td>3,600</td>
<td></td>
</tr>
<tr>
<td>Number of healthcare facility staff and community health worker trained in infection prevention and control (ipc).</td>
<td>10,806</td>
<td>3,115</td>
<td></td>
</tr>
<tr>
<td>Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases.</td>
<td>10,806</td>
<td>3,000</td>
<td></td>
</tr>
<tr>
<td><strong>Support the provision of continued access to essential health and nutrition services for women, children and vulnerable communities, including case management</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children and women receiving essential healthcare services in UNICEF supported facilities.</td>
<td>5,000,000</td>
<td>518,183</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>1,419,818</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>14,617</td>
<td></td>
</tr>
<tr>
<td><strong>Access to continuous education, child protection and GBV services</strong></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></td>
<td></td>
</tr>
<tr>
<td>Number of schools implementing safe school protocols (COVID-19 prevention and control).</td>
<td>0</td>
<td>2,000 schools have been disinfected.</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>51 (26 girls,25 boys)</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>245 (75 pupils, 45 girls and 30 boys)</td>
<td></td>
</tr>
<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>241</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>
</tr>
<tr>
<td>Support access to continuous education, social protection, child protection and gender-based violence (GBV) services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs.</td>
<td>7,500</td>
<td>8,500</td>
<td>189,400</td>
</tr>
</tbody>
</table>

**FUNDING**

Funding Requirements (as defined in Humanitarian Appeal 28 Mai 2020)

<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></td>
<td>Funds Received Current Year</td>
<td>Carry-Over (re-programmation)</td>
</tr>
<tr>
<td>Nutrition</td>
<td>700,000</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Health</td>
<td>1,300,000</td>
<td>380,000</td>
<td>407,928</td>
</tr>
<tr>
<td>WASH</td>
<td>1,000,000</td>
<td>350,000</td>
<td>625,539</td>
</tr>
<tr>
<td>Education</td>
<td>1,200,000</td>
<td>-</td>
<td>1,225,373</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>218,760</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><strong>Total</strong></td>
<td>7,000,000</td>
<td>923,859</td>
<td>2,477,600</td>
</tr>
</tbody>
</table>