

RAISE 4 SAHEL

ACHIEVEMENTS & RESULTS

December 2024

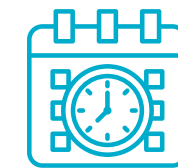


Reaching and Adapting Immunization Services Effectively to Reach Zero-Dose Children in the Sahel (RAISE 4 Sahel)

The shared goal under the GAVI 5.0 Strategy the 2030 Immunization Agenda is to reach every child with every vaccine



Budget: \$60 Million



Timeframe: Jun 2022 – Dec 2024



PARTNERS: Food for the Hungry, CORE Group Inc., African Christian Health Associations Platform (ACHAP), DIMAGI



7 countries



27 regions



88 districts

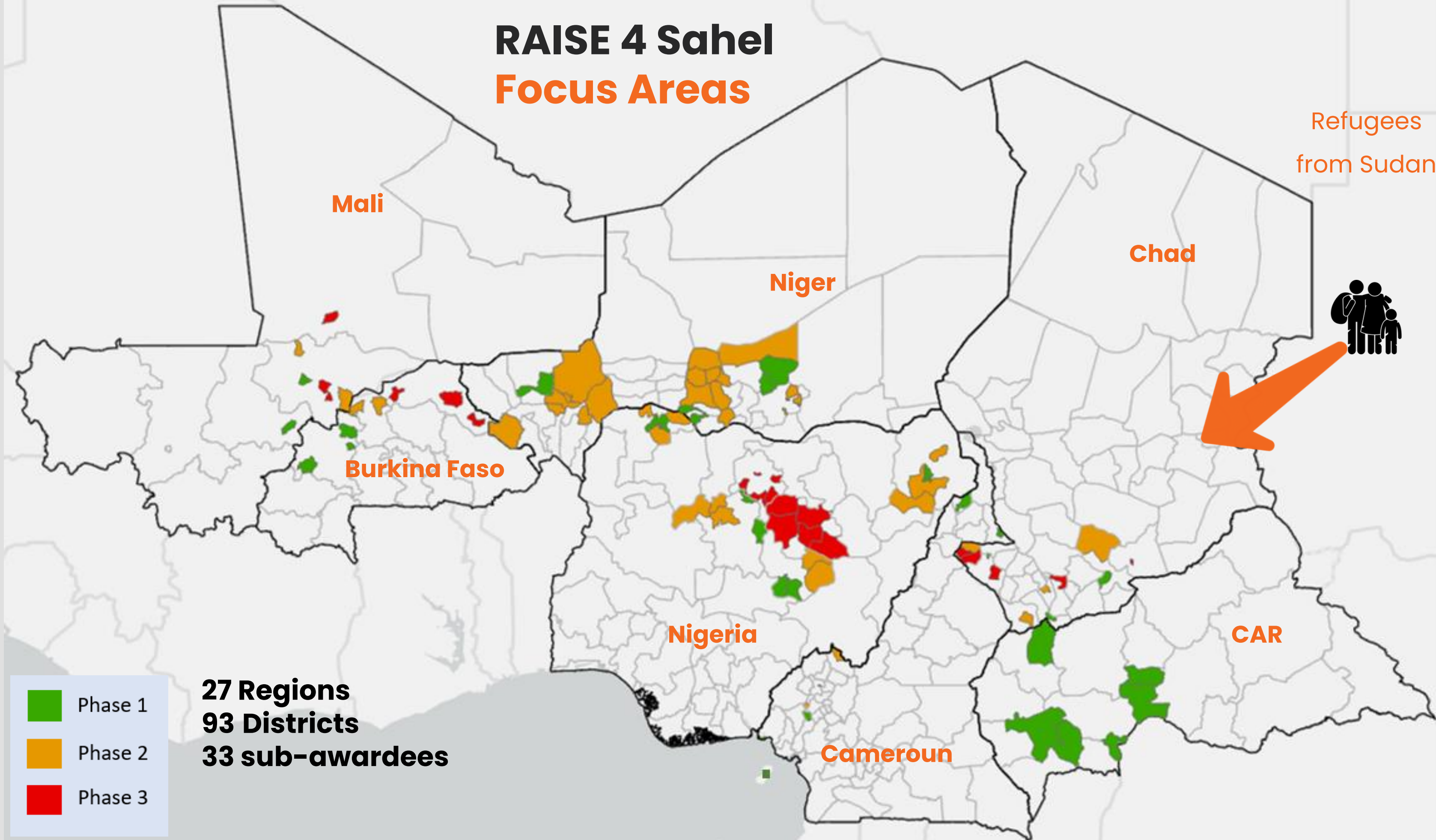


386,106 ZDCs



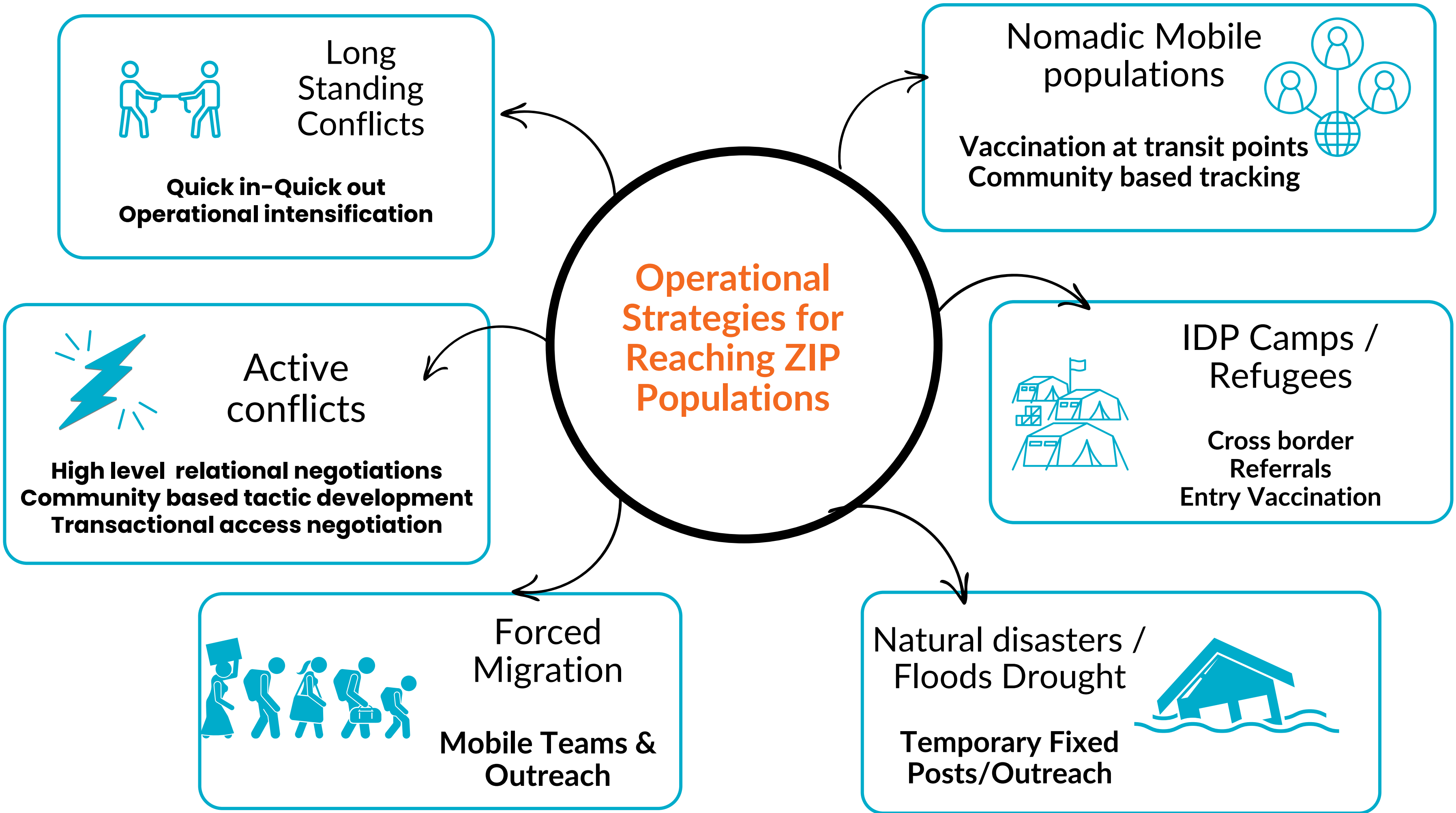
585,435 UICs

RAISE 4 Sahel Focus Areas

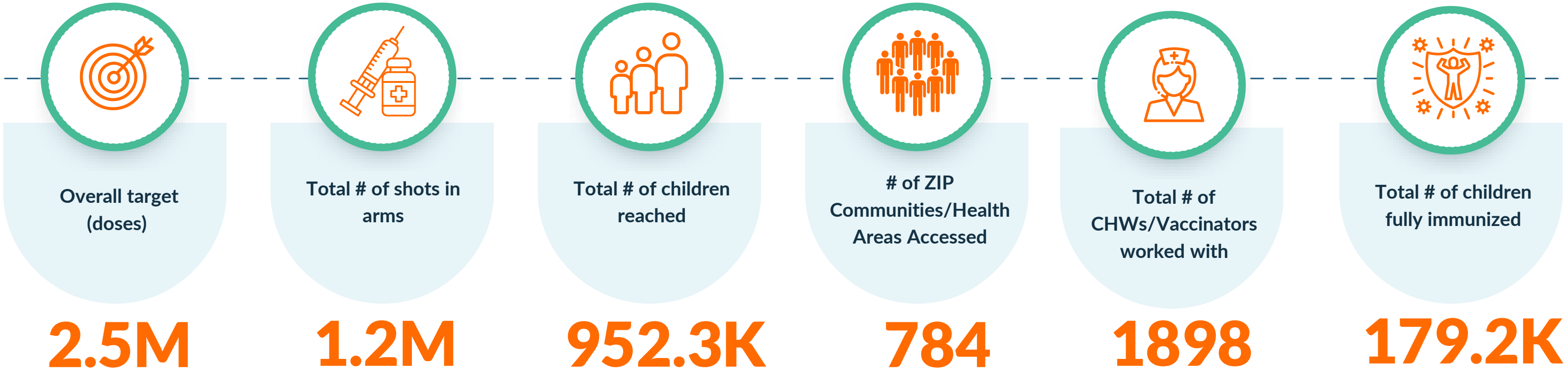


27 Regions
93 Districts
33 sub-awardees

-  Phase 1
-  Phase 2
-  Phase 3



Overall Results





COUNTRY RESULTS



Central African Republic



3 Regions



5 Districts



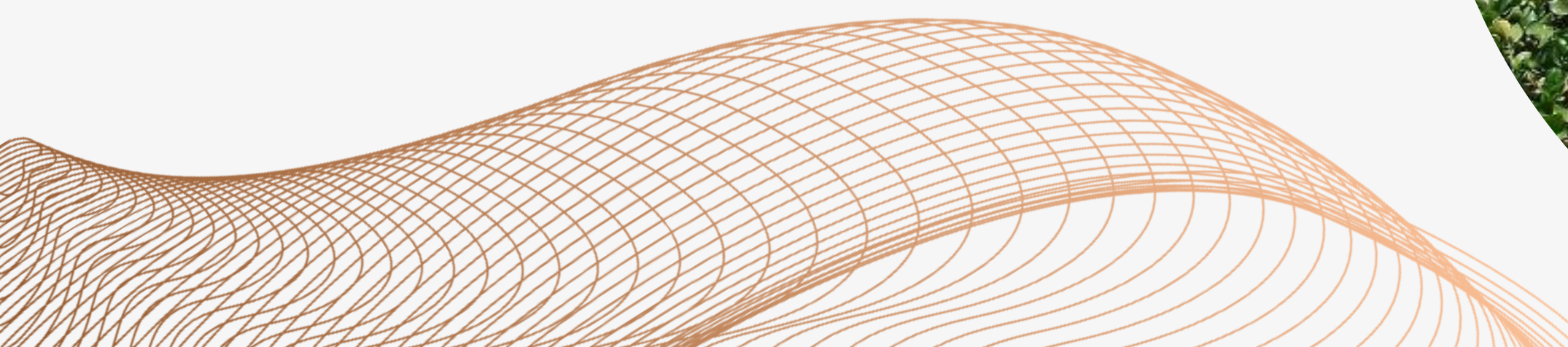
158,312 Targeted



226,148 Reached (142%)



78,579 Total # of children
received Penta 1 vaccination



Chad



3 Regions



15 Districts



198,241 Targeted

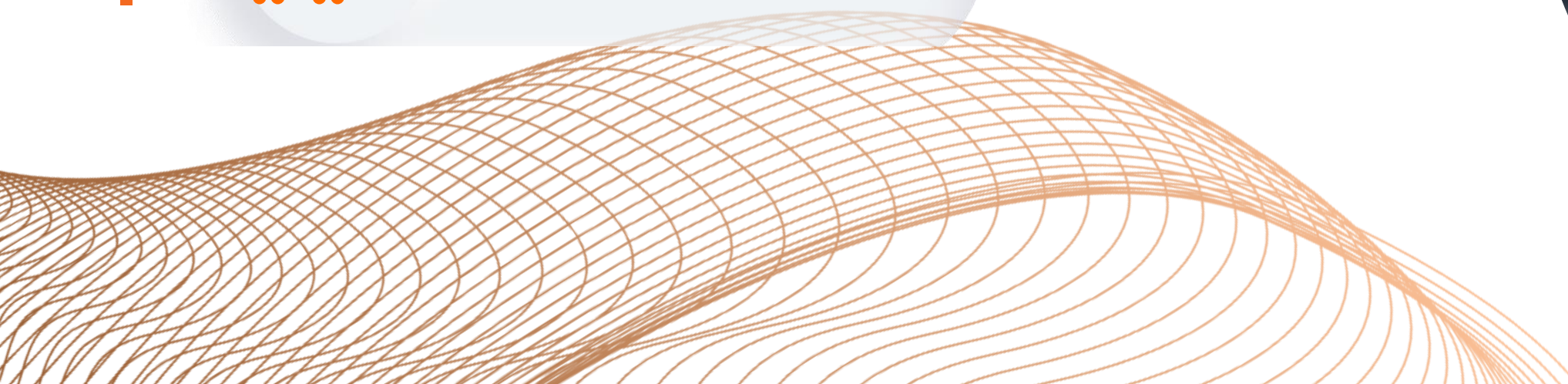
71,190 Reached



17,241 Total # of children
received Penta 1 vaccination



13,412 Achieved full Vaccination



Cameroon



3 Regions



9 Districts



214,340 Targeted



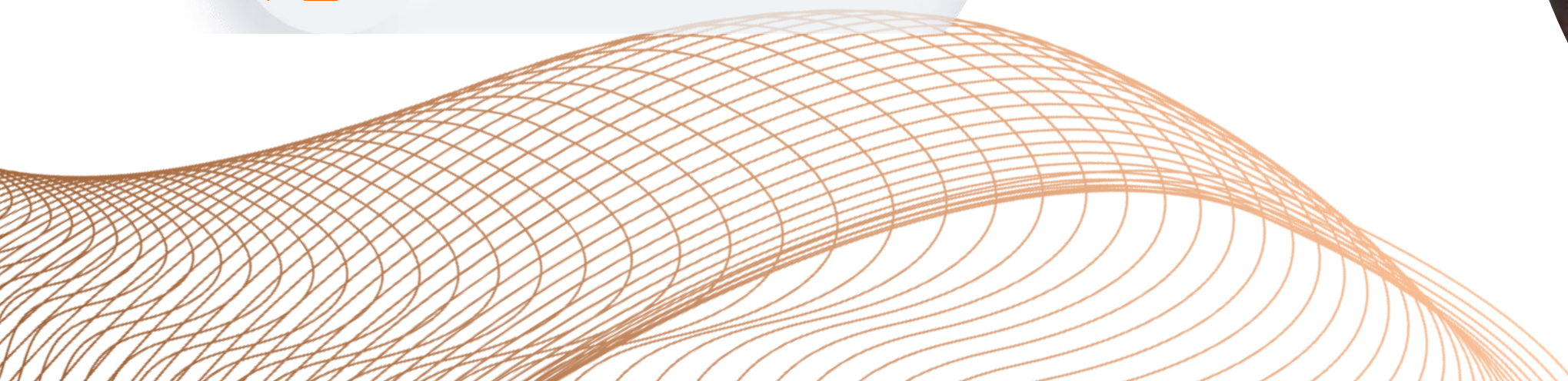
127,511 Reached
(59.5%)



37,732 Total # of children
received Penta 1 vaccination



23,467 Achieved
full Vaccination



CAMEROON SPOTLIGHT

"Breaking Barriers: How a Gender-Inclusive Approach Empowered Illiterate Community Health Workers to Boost Immunization Access"



What we uncovered

Male Dominance in CHW Roles: males constituted over 85% of Community Health Workers (CHWs) in the Far North region.

Access Barriers for Male CHWs: cultural norms prohibit/restrict male CHWs from accessing households where the caregiver is female (in the absence of her husband or male relative).

Recruitment Challenges for Women: Basic CHW recruitment criteria require the ability to read and write, excluding women who are willing and accepted by their communities but cannot read and write.

Community-Specific Access Needs: In some communities (minority) like the Magapus and Arab-Shua, only women from their community are allowed to interact with female caregivers.

"I would have loved to serve my community, but they say I can't because I cannot read and write." Fati, Maga HD



Addressing the gap

Policy Adaptation: Secured approval from the Regional Delegate of Public Health to recruit non-literate women as CHWs

Targeted Recruitment: Identified trusted and respected women, such as mothers, elders, or caregivers, who can access '*culturally restricted*' households.

Mentorship Program: Paired newly recruited trainees with literate CHWs for hands-on guidance and practical learning during the initial phase.

Accessible Learning Tools: Provided user-friendly materials, like pictorial flipcharts and posters, to explain vaccine schedules and their comparative benefits.

Engaging women in a male-dominated sphere drives meaningful change.



Niger



4 Regions



15 Districts



248,976 Targeted



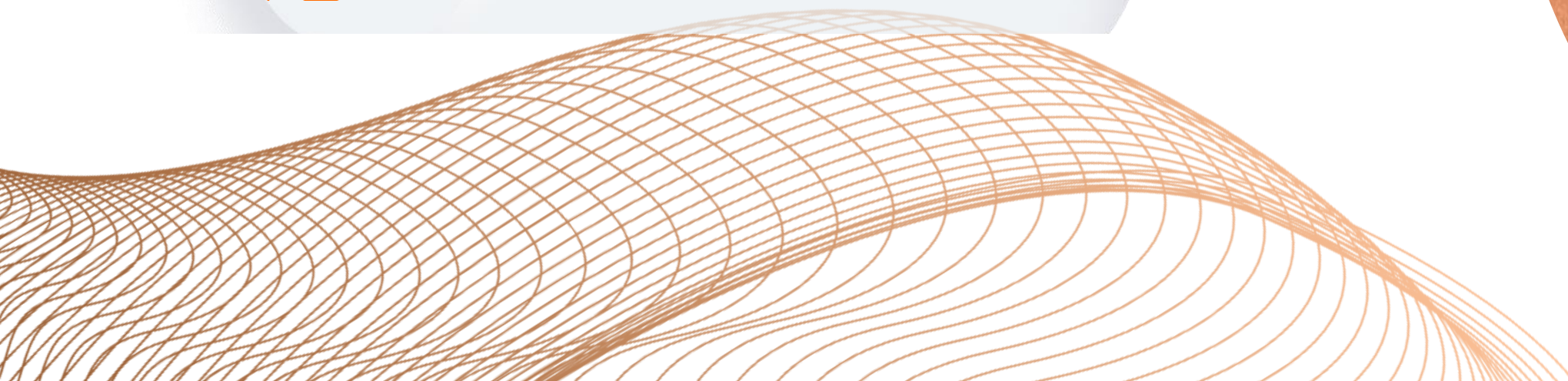
85,913 Reached
(36%)



23,672 Total # of children
received Penta 1 vaccination



17,862 Achieved
full Vaccination



NIGER SPOTLIGHT: VACCINE DELIVERY STRATEGY

2. High-Security Areas : Camouflage Strategy

Implementation Area: Ouallam

Risk Mitigation Measures:

- Conduct risk assessments with state security and local leaders.
- Pre-plan movement with OCHA, authorities, and community chiefs.

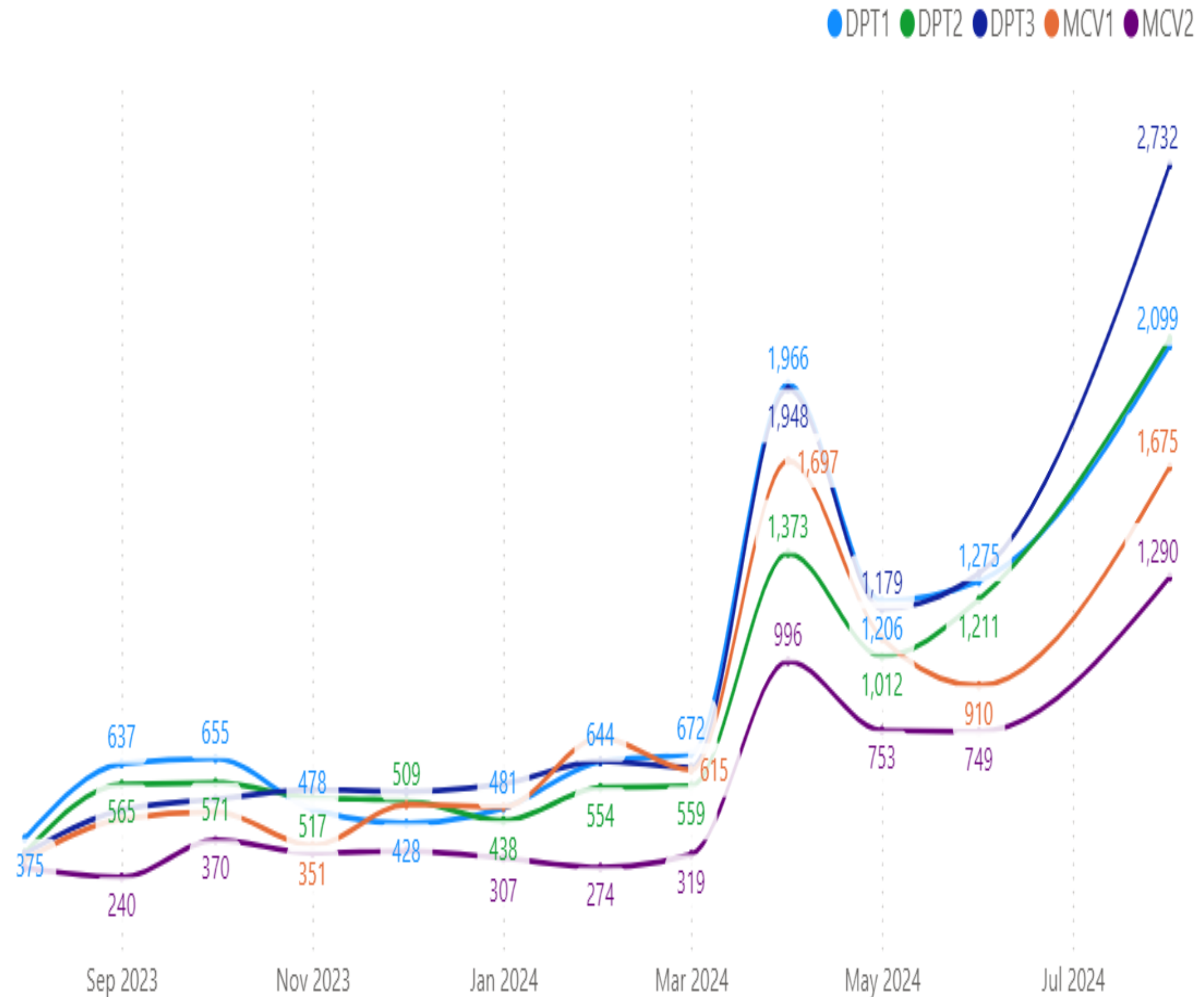
Operational Tactics:

- Utilize carts for discreet transport of teams and equipment.
- Maintain cold chain logistics (vaccines, coolers).
- Conduct security briefings for vaccination teams.

Execution Steps:

- Notify communities in advance via local relays and Community leaders.
- Validate agenda and logistics the day before.
- Flexibility in scheduling: Adjust the time periods based on specific contexts and feedback from field teams.
- Vaccinate children and record data onsite.
- Submit daily reports at health centers, including security and logistical updates.

Achievements: Ouallam accounts for 45.1% of the doses administered by the program over the entire implementation period.



Nigeria



4 Regions



19 Districts



940,306 Targeted



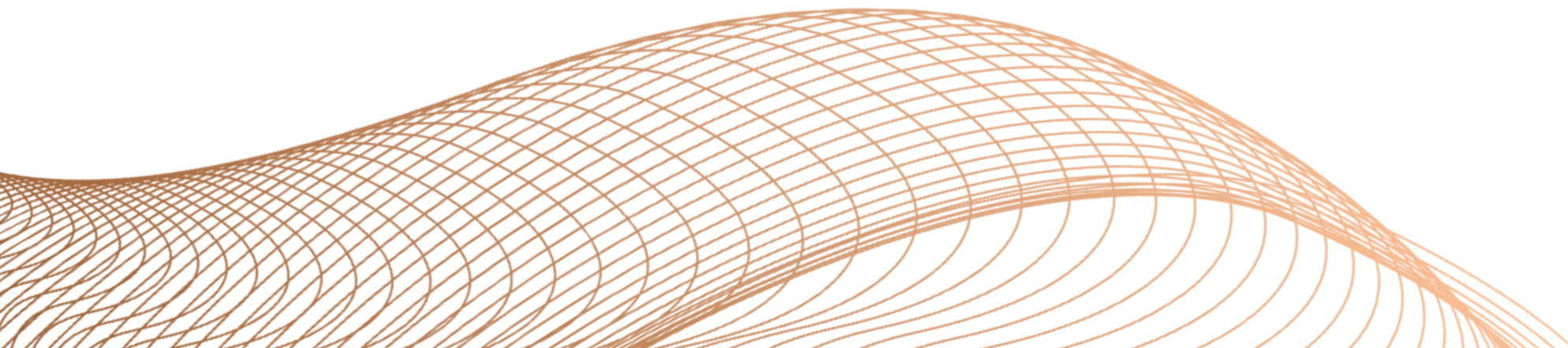
350,117 Reached
(37,2%)



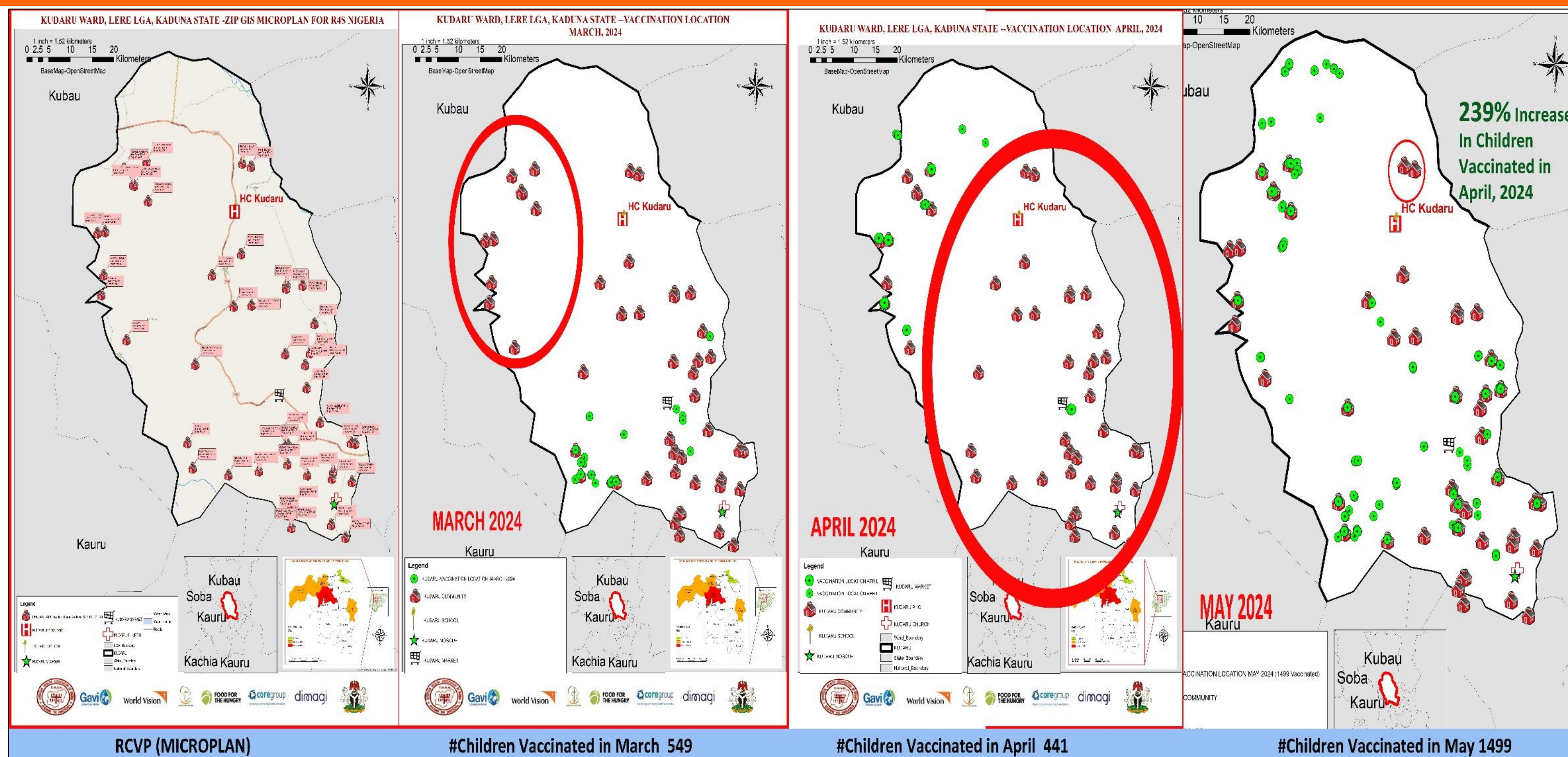
117,607 Total # of children
received Penta 1 vaccination



54,087 Achieved
full Vaccination



NIGERIA SPOTLIGHT: GIS MAPPING IDENTIFYING AND REACHING ZERO-DOSE CHILDREN AND MISSED COMMUNITIES



NIGERIA SCORECARD
As of Sept. 2024

Total Doses Administered
350,117

Total Children Vaccinated
228,538

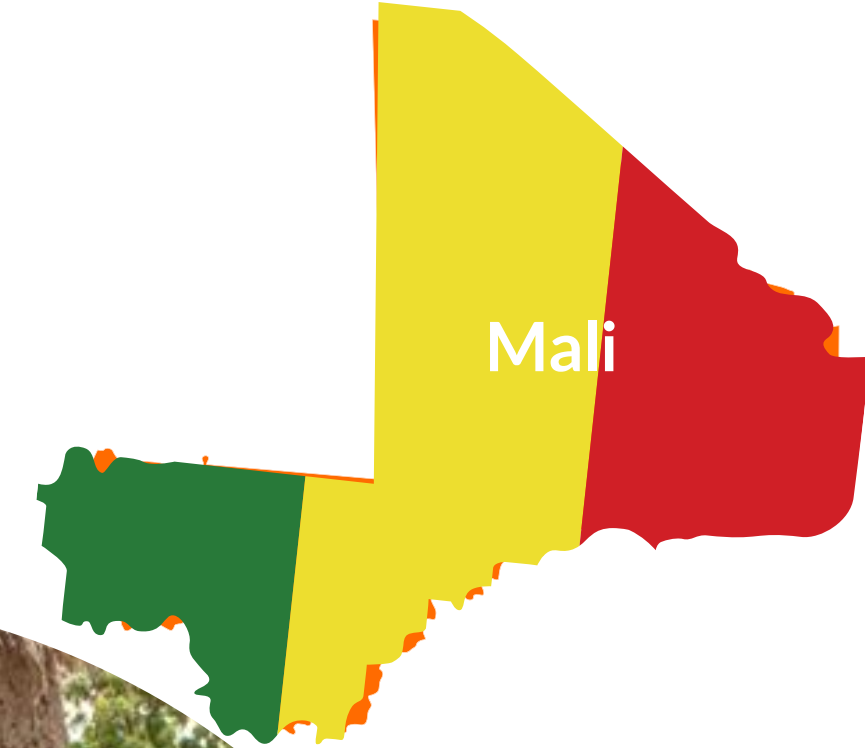
Children on Path to full Immunization
117,607

Children that have completed Immunization (MCV2)
54,087

239% Increase In Children Vaccinated in April, 2024

GIS Technology contributed to a **239% Increase in vaccinated children in Kuduru, Lere LGA, Kaduna State**. The communities in the red circle were not visited in March and April 2024 by the R4S Kaduna team, due to various reasons including the need for more vaccination teams, and insecurity perpetrated by criminal gangs, bandits, and the Ansaru terrorist group. The lemon-colored dots are the locations where vaccination teams visited and provided services. These geocoordinates were captured using the CommCare App. 96% (49 out of 51) of communities were visited in May 2024, as seen on the far-right map. resulting in a great percentage increase in the number of ZDC vaccinated. All wards in Lere LGA had significant increases in the number of Zero Dose Children (ZDC) Vaccinated. Garu Mariri recorded 151%, Kayarda 115%, and Gure Kahuju 92% increase.

Mali



3 Regions



7 Districts



106,360 Targeted



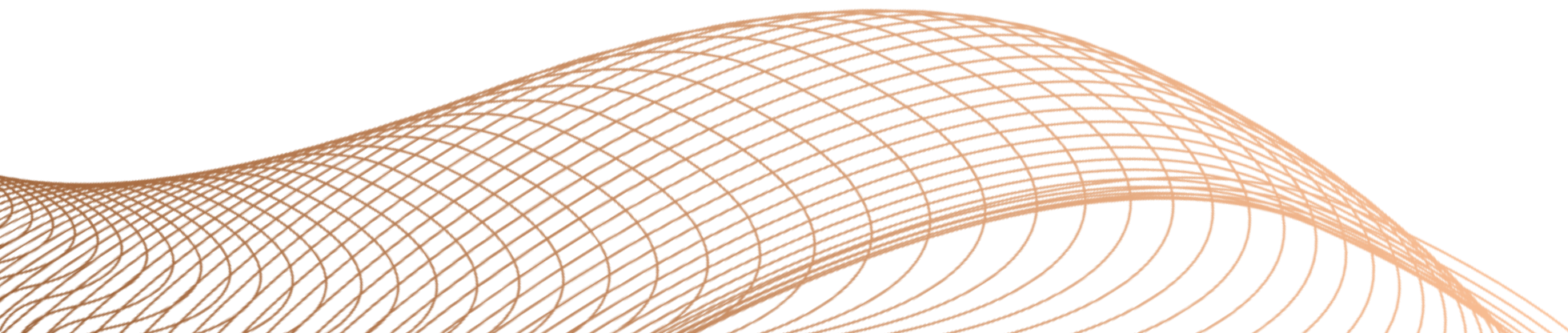
159,784 Reached
(37,2%)



117,607 Total # of children
received Penta 1 vaccination



15,618 Achieved
full Vaccination



Burkina Faso



6 Districts



57 Focus Areas



195,428 Total

Target (# of doses)



172,485 Total # of
shots in arms



36,134 Total # of children
received Penta 1 vaccination



54,328 Achieved
full Vaccination





Thank
You