

## **Sightsavers deworming programme, Guinea Bissau**

**GiveWell schistosomiasis (SCH) and soil transmitted helminths (STH) project**

**Year 4 annual report: April 2020 – March 2021**

**Project name:** Guinea Bissau GiveWell SCH and STH project

**Country:** Guinea Bissau

**Start date:** January 2017

**Project goal:** The reduction in the prevalence and intensity of schistosomiasis (SCH) and soil transmitted helminths (STH) in school age children.

### **Project Summary**

The GiveWell funded project in Guinea-Bissau has entered into Year 4 across six regions Bafata, Cacheu, Farim, Gabu, Biombo and Tombali.

At the end of Year 3, there was a change of government in Guinea Bissau, which led to a freezing of government bank accounts. This meant Year 3 STH MDA scheduled for one of the regions, Tomabli, could not be conducted and this MDA had to be pushed to Year 4.

Year 4 was greatly affected by COVID-19 which forced all project activities to be suspended in March 2020, as per WHO recommendation. At this point the government also introduced very strict restrictions on international and domestic travel, public transport, mass gatherings, non-essential services and schools and offices were closed. The Sightsavers Guinea Bissau office closed and staff worked from home. Staff from the NTD National Programme contracted COVID-19. COVID cases peaked between March to July in Guinea-Bissau, but restrictions began to ease with schools and non-essential services reopening in September.

The second wave of the COVID-19 started in early January 2021, with restrictions re-established. Cases are now declining in all regions, but some restrictions remain in place such as mask wearing and for domestic travel including limited use of public transport, negative test presentation within 72 hours of travel.

As of 24<sup>th</sup> May, there have been 3,751 confirmed cases of which 68 deaths have been reported. Currently there are 182 active cases of COVID under treatment. On the 22<sup>nd</sup> March 2021, the High Commission for COVID-19 received 12,000 vaccine doses and in early April the vaccination campaign began across the country.

Ascend West supported the national COVID-19 response. The project team worked with the MoH to identify the need and mitigation activities. With Ascend funding, Sightsavers supported the training of COVID-19 data managers in each region of the 11 regions in Guinea Bissau and the COVID rapid response team (6 team members in each of the 11 health regions).

As part of the restart of NTD activities for Ascend and Accelerate, Sightsavers distributed PPE and hand sanitisers to health workers and CDDs for their door to door activities. COVID awareness raising work was carried out, including; engaging the local press and community volunteers and elders and community radio broadcasts. These measures will also be carried out for SCH/STH MDA.

In response to COVID-19, Sightsavers worked with various global partners to develop a rigorous five-step review process for the resumption of project activities known as the RAMA (Risk Assessment and Mitigation Process). The implementation of the new RAMA process led to delays to the restart of MDA. In September 2020, the MoH confirmed to Sightsavers that NTD project activities could continue. Due to a large stock of ivermectin tablets expiring in Guinea-Bissau in January 2021, the MoH prioritised the resumption of oncho/LF MDA by Ascend West to avoid skipping a treatment cycle and drugs wastage. The Ascend funded oncho/LF MDA was done region by region rather than simultaneously and was completed by 1<sup>st</sup> March 2021. It was not possible to complete MDA for all 5 PC<sup>1</sup> NTDs at the same time due to the capacity of the national NTD programme.

Another contributing factor to the delay of Year 4 MDA was the investigation into the unauthorised withdrawal of funds from another NTD programme in June 2020 by a now ex minister for Guinea Bissau. Sightsavers takes allegations of any financial wrongdoing very seriously and was concerned to hear about the current arrest and detention of a former government minister in Guinea Bissau. This is an active police investigation so it would not be appropriate for us to comment further, but we stand ready to support the authorities in any way we can.

Both factors culminated in the SCH/STH MDA being delayed to Q2 2021.

The Guinea-Bissau country office and the MoH are currently developing and collating the documentation needed to complete the RAMA process. Sightsavers aims for the approval process to be finalised by the end of May for the resumption of activities to begin in June 2021. The rainy season begins in May in Guinea Bissau, with the heavier rains beginning in July, so we are aiming to start MDA as soon as possible and complete before the heavy rains in July and before schools close end of June/early July.

### Project output summary

Output	Indicator	Year 4 Target	Year 4 To date
Treat school-age children between 5-14 years for SCH and STH through MDA	No. of school-age children between 5-14 years treated for SCH	164,991*	0
	No. of school-age children between 5-14 years treated for STH	43,835**	0

\* This target has been reduced. The reason being the 2017 Re-Mapping in Guinea-Bissau, showed the SAB (Autonomous Sector of Bissau – the capital of Bissau) no longer requires SCH MDA due to low prevalence. Therefore, SAB is not targeted to receive SCH MDA in Year 4.

\*\* This target has been reduced due to rounds of LF MDA resulting in incidental STH treatments in Bafata by Ascend West.

**Total number of school aged children treated:** data to be provided after MDA

### Activity Narrative

The project aims to deliver treatments to six regions that are endemic to SCH or STH. In Year 4, of these six regions, four (Bafata, Cacheu, Farim and Gabu) need treatment for SCH, and two (Biombo

and Tombali<sup>2</sup>) need treatment for STH. All activities, including MDA and CES, planned to take place in 2020-21 have been postponed due to COVID-19 and also to the MoH's prioritisation of oncho/LF MDAs. A contingency plan to deliver the activities in 2021 (project Year 5) has been developed. The Guinea-Bissau country office are in the final stages of RAMA approval for the resumption of project activities. The collated and developed documents include SOPs developed to ensure COVID-19 safety such a thorough the use of PPE for all field actors (MoH/SS staff, teachers and community volunteers) a security risk assessment with COVID-19 trends, an updated budget containing the additional spending for PPE and extra health messaging, and a letter of approval from the Ministry of Health.

Sightsavers hopes that, following RAMA approval, MDA activities can commence in June 2021 with the CES taking place up to 6 months afterwards.

During training staff, health workers, CDDs and teachers will all receive COVID-19 mitigation and safety training before any MDA activities take place. A pilot module of Gender Equity will be integrated into the training of trainers at regional level and the training of CDDs and teachers in Year 4. Training sessions will take place outside where possible but when indoor venues are needed, good ventilation, social distancing and compulsory mask wearing is essential along with frequent handwashing and disinfection stations. Any community-based MDA will be done door-to-door to avoid mass gatherings and will be conducted outside. Attendees will be provided with PPE for the extent of their training.

Social mobilization and community sensitization will integrate both MDA information such as awareness of treatments and good hygiene practices and COVID-19 measures. These sensitization materials will be distributed and broadcast one week before MDA activities. By also addressing COVID-19 the project can reinforce mitigation measures such as social distancing, mask wearing and handwashing promotion whilst also helping address and dispel any rumours or false information.

### Project output summary

Output	Indicator	Year 4 Target*	Year 4 To date
1. Train health staff, community members and teachers to deliver SCH/STH MDA to schools and endemic communities	No. of Teachers trained on SCH/STH MDA	1,454	0
	No. of health workers trained on SCH/STH MDA	285	0
	No. of CDDs trained on SCH/STH MDA	928	0
	No. of schools training at least one classroom teacher on school MDA.	1,035	0
2. Treat school aged children between 5-14 years for STH and SCH through MDA	No. of school age children between 5-14 years treated for STH	43,835	0
	No. of school age children between 5-14 years treated for SCH	164,991	0
	No. of treatment coverage surveys conducted with data disaggregated by age group and gender and school attendance.	1	0

<sup>2</sup> Bafata received LF MDA from Ascend West in Year 4 and STH MDA was scheduled to start once LF treatment had stopped. However, the LF TAS is needed before LF MDA can stop but due to delays the TAS has not yet been completed.

3. Ministry of Health coordinates and supports targeted regions/districts to implement the National NTD Plan with focus on SCH and STH	No. of advocacy meetings conducted with stakeholders on SCH/STH Interventions.	1	0
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\* As above, this target has been reduced. The reason being the 2017 Re-Mapping in Guinea-Bissau, showed the SAB (Autonomous Sector of Bissau – the capital of Bissau) no longer requires SCH MDA due to low prevalence. Therefore, SAB is not targeted to receive SCH MDA in Year 4.

The SCH/STH MDA and trainings data will be shared with GiveWell once they are validated by the Ministry of Health.

### School vs community-based treatments

Where possible, a hybrid school and community-based platform is used to deliver SCH/STH treatments in Guinea-Bissau. However, this year the project will deliver community MDA only, due to the delays caused by COVID-19 and other factors mentioned above. The RAMA and trainings (health staff and CDDs) will take several weeks before MDA can begin, by which time schools will be on vacation. Sightsavers will share community treatment rates with GiveWell once the Ministry of Health has validated the MDA data.

### Project monitoring and coverage survey activity

Ongoing monitoring of COVID-19 mitigation compliance and project guidelines, as per the SOPs, will take place throughout the MDA and CES activities.

Frequent communication will take place between supervisors and project staff via virtual meetings and WhatsApp groups during MDA delivery. All supervisors will be provided with a SOP checklist which includes COVID-19 to ensure compliance. Any supervisor or project staff reports with symptoms must isolate for the required time.

A COVID-19 committee will assess the data trends and feedback to the national review and data will be submitted biweekly and four weeks post-MDA to determine the impact, if any, of MDA activities on COVID-19.

Field visits will be limited but where essential, COVID-19 guidelines will be followed as per the SOPs and MoH. Where national travel is necessary, a negative COVID-19 result, taken within 72 hours of departure, must be presented.

The Guinea-Bissau country office and MoH are in the process of developing and submitting the RAMA documentation needed for approval for the MDA and CES at the same time. With the CES scheduled for Q3 2021 and the results to be shared with GiveWell, once available. Training and implementation of the CommCare app will be used following recommendations and developments from previous years.

## Treatment coverage rates

Outcome Indicator	Year 4 April 2020 - Mar 2021	
	Year 4 Milestone	Year 4 To date
% of all targeted people in targeted health zones treated with praziquantel for SCH (ultimate threshold at least 75%).	75%	-
% of all targeted people in targeted health zones treated with at least one round of albendazole/ mebendazole against STH (ultimate threshold at least 75%).	75%	-
% of existing schools in targeted health zones participating in the school deworming programme.	80%	-

The treatment coverage rates for SCH and STH MDA will be shared with GiveWell once they are validated by the Ministry of Health.

### Key Successes

- Completion of the RAMA and new SOPs, with the full participation of the MoH, is an achievement in light of the unprecedented challenge of the COVID-19 pandemic. This required the project team to adapt and be flexible in their approach. The support Sightsavers provided to the MoH to respond to the COVID-19 pandemic by strengthening its surveillance system helped to reinforce the trust and confidence in Sightsavers.
- A pilot gender module has been developed by Sightsavers and approved by the National Coordinator for SCH and STH for delivery to the Training of Trainers at regional level and to trainings for teachers and CDDs. The aim is to increase female representation among teachers and CDDs during recruitment and training because there is a lower percentage of women among CDDs and supervisors<sup>3</sup>. When RAMA approval has been granted and MDA training activities can go ahead, the training module will be piloted and reviewed for application across other GiveWell projects.

### Key Challenges

- The unauthorised withdrawal of funds by a minister of health from an NTD programme in Guinea-Bissau resulted in the demotivation of staff from the MoH NTD team. In light of this Sightsavers took immediate compensatory control measures, changing how funds are released and held to ensure such withdrawals could not be made. A performance-based allowance procedure was suggested by Sightsavers and accepted by MoH to be the basis for the payment of the monthly allowances for the 3 NTD programmes supported by Sightsavers in Guinea-Bissau (Ascend West, Accelerate and GiveWell).
- COVID-19 significantly delayed project activities across Guinea-Bissau. Activities planned for April 2020 to March 2021 (Year 4) have been rescheduled to be delivered in 2021.

<sup>3</sup> According to Geyer *et al.* (2020), having more women participating in community-based treatment as CDDs may help to increase treatment coverage and compliance. Geyer RE, Ibikounle M, Emmanuel-Fabula M, Roll A, Avokpaho E, Elijan A, *et al.* (2020). Gender norms and mass deworming program access in Cote d'Ivoire, Benin: A qualitative assessment of gender-associated opportunities and challenges to achieving high mass drug administration coverage. *PLoS Negl Trop Dis* 14(4): e0008153. <https://doi.org/10.1371/journal.pntd.0008153>.

- The challenge of accurate population data continues. We had hoped to address this challenge when new data became available from the national census scheduled for 2019. However, as the census did not go ahead we were unable to benefit from this new data. The MoH advise the use of the current population data as it is the data they use across all programmes. The impact of this is that targets for MDA are often exceeded and coverage treatment rates are very high. A complication is the frequent movement of populations between regions and an underreporting of population in the region. The current population data has been loaded to the ESPEN portal and all other health programmes use this data and therefore there are also issues with not using this data.
- We were planning to explore using the previous MDA treatment numbers as the basis for targets, but we due to limited previous school-based MDA in Year 4 project locations, we do not have reliable data. In addition, the MoH is not keen on this approach. Going forward we will compare population treatment numbers with numbers from last year in Biombo ( taking into account population growth rates) and continue discussions on this with the MoH and consider how to tackle the issue of matching our data with population data on the ESPEN portal. For the other regions this approach may be possible after the next round of MDA.
- Sightsavers being the only INGO supporting NTDs in Guinea Bissau puts additional pressure on the country office in light of Ascend West cuts. It results in the MoH being highly concerned about support for NTDs going forward.

### Lessons learned

- As a result of the issues with the withdrawal of funds another NTD programme our financial processes have been changed and steps have been introduced to ensure this could not happen to Sightsavers funds in the future. In addition, to the performance based allowance procedure, all project funds now go to Sightsavers Guinea Bissau country office bank account and can only be released by signatures from at least 2 country office staff and Sightsavers SMT. The process is now much faster and the NTD national programme and they find the process much faster and more efficiently.
- Sightsavers Guinea Bissau country office learnt how to operate during a pandemic. Sightsavers supported Ascend West oncho/LF MDA achieved high coverage rates in the midst of COVID restrictions. These learnings will be applied to GiveWell funded SCH/STH MDA.

### Looking ahead to 2021

Sightsavers will continue to monitor the COVID-19 situation in country and continuously reassess project activities to ensure the safety of all staff and beneficiaries.

Sightsavers will continue to use GiveWell Wishlist 4 funding to conduct MDA activities in Guinea-Bissau up to March 2022.

The Guinea-Bissau country office is in the final stages of approval for RAMA documentation for the resumption of MDA activities and implementation of the CES survey.

The delayed Year 4 MDA activities for STH and SCH control as per GiveWell Wishlist 4 are expected to begin in June 2021, and our current plans are to deliver Year 5 MDA in Q1 2022. Following Year 4 MDA, CES are expected to take place in Q3; data and narrative reports will be shared with GiveWell once available.

We will explore further collaboration with ESPEN on best ways of supporting MoH in delivering subdistrict analysis for SCH.

In 2021, WHO launches their new NTD road map 2021 to 2030, this will inform the updating of the NTD 5 year masterplan in Guinea Bissau.