COVID-19 Readiness among Health and Eyecare Providers in Africa: Survey Results from 108 VisionSpring Partners

VisionSpring improves livelihoods by creating access to affordable eyeglasses in collaboration with more than 350 partners globally. In sub-Saharan Africa, our partner network consists of community health workers, vision centers, primary care clinics, and government, mission, and non-profit hospitals, many of whom are on the front line of COVID-19 prevention and care. Survey responses collected in May 2020 from 108 partners in VisionSpring’s five key market countries in Africa reveals that the majority of providers have a plan for COVID-19 and handwashing stations, but they lack sufficient personal protective equipment (PPE) and request guidance on infection, prevention and control (IPC), particularly to safely restart community-based care.

COVID-19 planning and preparedness is underway

VisionSpring’s partners across sub-Saharan Africa are concentrated in Ghana, Kenya, Nigeria, Uganda and Zambia. Recent experience with infectious disease outbreaks, including Ebola in West Africa and the Democratic Republic of Congo and Marburg virus in Uganda and Kenya, have contributed to COVID-19 readiness in the region.

- 91% of partners have a COVID-19 plan. 47% rated their institution as “prepared” for COVID-19, and 43% rated their institution as “somewhat prepared”.
- 54% of partners expect to conduct COVID-19 screening and to refer patients for higher level care.

As of July 15, the World Health Organization (WHO) reported 503,000 cases on the continent with 6.7% in Nigeria, 5% in Ghana, 2.1% in Kenya, compared with 59.3% in South Africa.¹

Handwashing stations available at a majority of health facility entrances

The WHO recommends urgent provision of public hand hygiene stations, including at the entrances of health facilities, to enable handwashing with soap or an alcohol-based rub for patients and staff entering and exiting the facility.

- 75% of partners reported having a handwashing station at their main entrance. This likely reflects prior experience with infectious disease outbreaks and the availability of handwashing stations on local markets.
- This finding contrasts with VisionSpring’s India-based partners, 52% (n=106) of which reported in April 2020 that they did not have handwashing stations at their entrances.

Guidance on IPC sought, especially for community outreach

Most partners included in this survey typically provide some form of care or screening through community outreach, but those services are currently on hold. Like VisionSpring, they too are looking for ways to adapt their practices to safely restart community-based care.

- 69% of partners requested guidance on IPC integration during outreach activities, such as community-level vision screenings.
- VisionSpring is piloting new protocols for conducting vision screening and eyeglasses provision in communities with heightened IPC practices, and will make these field-tested protocols and associated tools available to partners.

As we rapidly adapt to COVID-19, VisionSpring is committed to serving its partners and customer communities, and helping governments and mission-aligned organizations keep their front line people safe. VisionSpring will continue to share insights and assessment results in an effort to inform our collective COVID-19 response.

Most needed personal protective equipment (PPE)

Reporting their stock levels for specific products, partners revealed which items are most in need. VisionSpring is filling gaps in PPE availability, having established a pooled procurement mechanism to source from certified manufacturers and offer one-stop ordering for a variety of critical products, at-cost, to mission-aligned organizations.

- Partners reported being completely out of stock or short of stock of the following items: N-95 masks (62%), goggles (53%), full face shields (45%), foot covers (38%), surgical gowns (38%) and isolation gowns (35%).
- Only 10% of partners indicated a need for infra-red thermometers.
- Partners reported they most needed information regarding “sources for procuring the best quality PPE” and guidance on “what kind of PPE should be used for different activities (i.e. outpatient care and outreach)”.

<table>
<thead>
<tr>
<th>Shortages of PPE</th>
<th>Out of stock</th>
<th>Short of stock</th>
<th>Out of stock + short of stock</th>
</tr>
</thead>
<tbody>
<tr>
<td>N95 Masks</td>
<td>37%</td>
<td>25%</td>
<td>62%</td>
</tr>
<tr>
<td>Goggles</td>
<td>23%</td>
<td>30%</td>
<td>53%</td>
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<tr>
<td>Full face shields</td>
<td>27%</td>
<td>18%</td>
<td>45%</td>
</tr>
<tr>
<td>Foot covers</td>
<td>16%</td>
<td>22%</td>
<td>38%</td>
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<tr>
<td>Surgical gowns</td>
<td>9%</td>
<td>29%</td>
<td>38%</td>
</tr>
<tr>
<td>Isolation gowns</td>
<td>15%</td>
<td>20%</td>
<td>35%</td>
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If you have any questions or need assistance with PPE, please contact Global Partnerships general delivery box: globalpartners@visionspring.org

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