# **Quarterly Activity Report**





# Plotting Polio's Endgame

Five million dollars from the Bridge Fund helps keep Pakistan on course to eradicate polio



espite the near total global eradication of polio, strains of wild polio virus (WPV) still circulate among the most vulnerable populations in three countries: Pakistan, Afghanistan and Nigeria. This November, with the assistance of the UNICEF USA Bridge Fund, Pakistan was able to conduct a scheduled campaign to distribute 43 million doses of the bivalent oral polio vaccine (bPOV). At the request of the Pakistan Ministry of National Health Services, Regulations &

Coordination, the Bridge Fund accelerated \$5 million in prefinancing of the \$9.6 million total needed by UNICEF to procure sufficient doses for approximately 39.1 million children.

Polio can be completely prevented through a childhood vaccination schedule that requires multiple doses. Pakistan has made meaningful progress toward preventing poliovirus transmission, in large part due to the intensive tactics of the

Pakistan polio eradication program, a government-supported effort with one clear goal: zero polio. However, after experiencing just 12 cases in 2018, Pakistan saw the incidence of polio rise to 140 cases of paralysis in children in 2019.

To eliminate polio, every child in every household must receive multiple doses of the vaccine. The polio eradication initiative in Pakistan has overcome many long-held traditional and religious misconceptions and misinformation to vaccinate 40 million children during the December 2019 National Immunisation Days campaign. Yet several remaining challenges have contributed to the alarming uptick in children affected by polio. In Pakistan, as in polio-endemic Afghanistan and Nigeria, "conflict, insecurity, massive mobile populations, political transitions, operational barriers and, in some instances, communication barriers, have prevented health workers from reaching all children with polio vaccines," according to Jalaa Abdelwahab, Deputy Director, Polio Program, UNICEF.

In these circumstances, reaching all children under five with multiple rounds of immunization requires a vast network of 260,000 trained health workers and the logistical capability to reach the most remote areas of the country as well as the large population of people travelling throughout the country and across its borders. To reach children on the move, the Pakistan polio eradication program has established 372 permanent transit points (PTPs) at railway stations, bus stops, and highways nationwide. Vaccinating the nearly 1.7 million children who pass through transit points each year is critical to guaranteeing every child receives vaccination against polio.

The shared border between Pakistan and Afghanistan allows continuous movement of people, and consequently poliovirus transmission. UNICEF considers the two nations one epidemiological block for poliovirus circulation, and the

countries have closely coordinated their efforts to treat and end the disease. In 2019, Pakistan and Afghanistan conducted their respective National Immunisation Days campaigns at the same time to synchronize cross-border immunization activities, data analysis and sharing, and communication activities.

The resurgence of polio in 2019 has caused the Government of Pakistan to redouble its response with 2020 campaigns that will plug the immunity gaps and ultimately lead to a polio-free Pakistan.

I am waiting to see the day when polio is eradicated from Pakistan; waiting for the time when I travel anywhere in the world and people no longer point fingers and say: you came from a country that is exporting polio virus.

-Mudassir Hassan, Union Council Medical Officer, Baldia Town

Advances toward complete eradication of polio may confront setbacks in the final stages – communities that lack resources and basic services may not be able to respond to repeated calls for immunization. Impact investing can accelerate global health interventions to boost initiatives like Pakistan's polio eradication program across the final mile. The UNICEF USA Bridge Fund acts swiftly to provide funding for established, successful vaccination programs so the programs can avoid slowdowns, or stoppages, due to insufficient stock or inefficient supply chains.



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# Preventing Malaria from Stealing Childhood in Sub-Saharan Africa

The UNICEF USA Bridge Fund accelerates \$5.872 million for antimalarial supplies in Sudan and the Central African Republic.

very two minutes a child under five dies from malaria, a preventable and curable disease. In 2017, 61 percent (266,000) of all deaths caused by malaria were children under age five. In late 2019, the UNICEF USA Bridge Fund expedited \$4 million to Sudan and \$1.872 million to the Central African Republic to bridge timing gaps that threatened critical procurement of antimalarial supplies. The Bridge Fund's timely acceleration of funds allowed both countries to replenish their stocks of mosquito nets and medicines and avert disruption of ongoing initiatives to protect children and their families from malaria.

Sub-Saharan Africa has long battled a pernicious malaria epidemic. Of the 219 million cases of malaria in 2017 worldwide, more than 90 percent occurred in Africa. In Sudan, mosquitoborne malaria, pneumonia and diarrhea collectively cause one third of deaths in children under five years old. In the Central African Republic, the situation is perhaps more dire, with 17.4% of deaths in children under five years old caused by malaria.

Malaria is a life-threatening disease caused by parasites that are transmitted to people by mosquitoes. Those infected may experience fever, headache, and chills; if not treated, malaria can progress to severe illness, often leading to death. Despite being preventable and treatable, the disease continues to take a disproportionately high and devastating toll on vulnerable children and women, particularly those living in poor and rural areas. Pregnant women and their babies are especially at risk, since malaria infection during pregnancy can lead to stillbirth, low birthweight and other complications. Further, lack of access to safe water and improper hygiene practices can make it difficult to contain the spread of the disease once it has invaded a community or region.

For decades, UNICEF has collaborated closely with the World Health Organization, the United Nations Development Programme and other organizations to mobilize a global response to the malaria pandemic. UNICEF focuses on the sourcing and provision of malaria-related commodities through its extensive worldwide network of suppliers, UNICEF country offices, UN agencies, governments and other partners.

If a child has malaria, they have no appetite for food, and it can even lead to malnutrition.

-Jesca Wude Murye, UNICEF South Sudan



Reducing childhood mortality and preventing life-threatening disease remain fundamental priorities for UNICEF as part of its overall strategy for achieving UN Sustainable Development Goal (SDG) 3, ensure healthy lives and promote well-being for all. SDG 3 defines specific targets to end the malaria crisis, along with many other global epidemics, by 2030. UNICEF aims to prevent and mitigate any supply chain disruptions, low supply levels or stock-outs in its effort to reach universal antimalarial coverage for all children. UNICEF USA's Bridge Fund exists to assist UNICEF in these efforts by providing rapid support for life-saving programs in countries, like Sudan and the Central African Republic, where eradicable disease threatens the right of every child to survive and thrive.

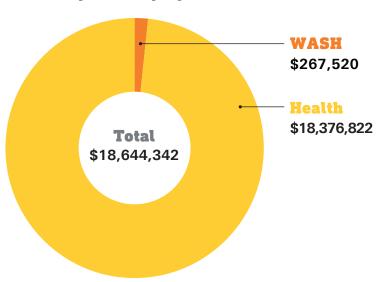
## **SDG 3: The Bridge Fund Focuses on Good Health and Well-Being**

UN SDG 3 declares that ensuring the health and promoting the well-being of people at all ages is essential to sustainable development. No child should die from a preventable cause, and vaccines have proven to be one of the most medically efficacious interventions against deadly disease. Since 2011, the Bridge Fund has accelerated over \$300 million for UNICEF immunization campaigns, contributing to the continuing global reduction in child mortality and offering social impact investors the opportunity to help save children's lives.

# Quarterly Program Activity: \$18,644,342

During the second quarter of Fiscal Year 2020 (FY 2020), the Bridge Fund completed seven new transactions with a total impact of \$18,644,342.

### **Quarterly Activity by Sector**

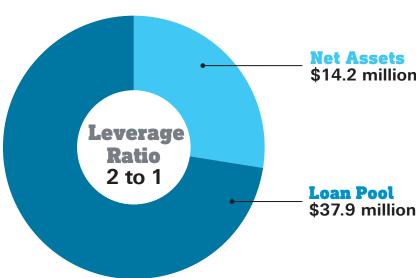


#### **Quarterly Activity by Geographic Reach**

Health	\$18,376,822
South Asia	\$10,000,000
Middle East and North Africa	\$4,000,000
Latin America and the Caribbean	\$2,279,555
West and Central Africa	\$1,872,267
East Asia and the Pacific	\$225,000
Wash	\$267,520
West and Central Africa	\$267,520
Total	\$18,644,342

## **Bridge Fund Current Capitalization**

as of December 31, 2019



# \$14.21 million in net assets provides a first-loss equity pool for investors, as \$37.85 million in capital is disbursed throughout the year. \$10 million of the capital pool is a Line of Credit. At the close of FY 2020 Q2, there was no funding drawn against the Line of Credit, resulting in Loans Payable of \$27.85 million and a leverage ratio of 2 to 1.

## **New Bridge Fund Loan**

This quarter the Bridge Fund obtained its first investment from a member of UNICEF's Next Generation (NextGen) group, an indication of the strong interest in impact investing among UNICEF's most important future supporters. NextGen is a community of young professionals and influencers who are committed to supporting UNICEF with their time, resources, and networks. As UNICEF USA works to grow the NextGens into the great philanthropists of the future, this cooperation with the Bridge Fund ensures that impact investment for children is a key part of the NextGen agenda.

# **Bridge Fund's SDG Impact**

The Bridge Fund is committed to using UNICEF's Sustainable Development Goals 2030 (SDGs) as a framework for our impact reporting, connecting each quarter's activity to SDG targets. This quarter, the Bridge Fund advanced two goals – SDG 3: "Good Health and Well-Being" and SDG 6: "Clean Water and Sanitation" – and eight related targets. We have reported progress in the table below.



### Sustainable Development Goal



#### Goal 3

Ensure healthy lives and promote well-being for all at all ages

You can find detailed targets for the SDG 3 here.

### **SDG Targets**

- **3.2** End preventable deaths of newborns and children under 5 years of age
- **3.3** By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, waterborne diseases and other communicable diseases
- **3.4** By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment, and promote mental health and well-being
- 3.8 Achieve universal health coverage, access to quality healthcare services, and access to safe, effective, quality and affordable essential medicines and vaccines for all

## **Bridge Fund Progress**

- 18.3 million children, aged 5 9 years old, receive measles and rubella vaccine
- 43 million doses of polio vaccine targeting 39.1 million individuals
- Vaccination against malaria, PCV, Rotavirus and HPV
- Immunization devices and other essential supplies (Vitamin A, ORS and Zinc, hand soaps, Amoxicillin DT)
- Promote access to programmatic activities of preventing overweight, obesity and diet related Non-Communicable Diseases of children in Latin America and the Caribbean



#### Goal 6

Ensure availability and sustainable management of water and sanitation for all

You can find detailed targets for the SDG 6 here.

- **6.1** By 2030, achieve universal and equitable access to safe and affordable drinking water for all
- **6.2** By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations
- **6.5** By 2030, implement integrated water resources management at all levels, including through transboundary cooperation as appropriate
- 65 water sources improved and operable in Guinea
- Empower rural communities to adopt good hygiene practices by promoting behavioral change through community mobilization
- Continued dialogue with government on importance of investing in safe water sources
- Water committees (to ensure local empowerment and system sustainability) established in each village

# **Quarterly Program Impact**

## FY 2020 Second Quarter Highlights

- 18.3 million children, aged 5 9 years old, received measles and rubella vaccines
- 43 million doses of polio vaccine procured, targeting 39.1 million people
- \$5.87 million accelerated for antimalarial supplies in the Central African Republic and Sudan

Transactions	Inputs	Outputs	Outcomes
Measles and Rubella vaccines accelerated for Bangladesh national immunization campaign \$5,000,000 Bangladesh 4 months bridged	Purchase of Measles and Rubella vaccines for children 5 – 9 years old	18.3 million children, aged 5 – 9 years old, receive measles and rubella vaccine (Bridge Fund pre-financed 1/3 of the program)	<ul> <li>Bangladesh is closer to its target to eliminate measles and rubella as part of UNICEF's global Strategic Plan for Measles and Rubella Elimination 2020-2024</li> <li>Narrow critical immunization gaps for children 5 – 9 years old</li> </ul>
Acceleration of polio vaccines in rural areas \$5,000,000 Pakistan 2 months bridged	\$5M accelerated toward a total \$9.6M procurement	43 million doses of bOPV2 procured for November immunization campaigns targeting approximately 39.1 million individuals	<ul> <li>Arresting wild polio outbreaks in Pakistan</li> <li>Continued progress towards global polio eradication</li> </ul>
Accelerating purchase of antimalarial supplies \$1,872,267 Central African Republic 2 months bridged	\$1.87M for antimalarial supplies	Stockouts avoided for medical, pharmaceutical and antimalarial supplies	<ul> <li>Enabling the government to prevent a stock-out of essential health supplies.</li> <li>Uninterrupted treatment of various medical conditions, including malaria.</li> </ul>
"Water for Guinea" Sustainable Water Project (second year of a \$1million project)  \$267,521 Guinea 9 months bridged	Drilling of new and rehabilitation of existing boreholes, community empowerment, and capacity building	<ul> <li>65 water sources operable</li> <li>Water Committees established in each village</li> <li>Continued dialogue with government on importance of investing in safe water sources</li> </ul>	<ul> <li>Scale up access to safe water for rural communities/villages through low-cost technology options</li> <li>Empower rural communities to adopt good hygiene practices</li> <li>Strengthen community-based management of water facilities and water supply infrastructure</li> </ul>
Accelerated for purchase of essential vaccines  \$225,000 Pacific Island Countries 5 months bridged	\$225,000 accelerated for Purchase of essential vaccines	<ul> <li>Procurement of new vaccines (PCV, Rotavirus and HPV vaccines) to be successfully introduced in the selected countries</li> <li>Immunization devices and other essential supplies</li> <li>Strengthened national cold chain systems</li> </ul>	<ul> <li>Uninterrupted supply of new essential vaccines</li> <li>Targeted 17,618 infants to be vaccinated annually against PCV/ Rotavirus</li> <li>Targeting 8,943 adolescent girls and boys to be vaccinated annually against HPV</li> </ul>

# **Quarterly Program Impact**

Transactions	Inputs	Outputs	Outcomes
Prevent overweight, obesity and diet related Non-Communicable Diseases of children in Latin America and the Caribbean  \$2,279,555 Latin America and the Caribbean 1 month bridged	\$2.28 million accelerated towards the program need	<ul> <li>Global and regional accelerator to disseminate evidence on the drivers, consequences and solutions on childhood obesity.</li> <li>Tailored in-country support to strengthen interventions and policies.</li> </ul>	<ul> <li>Enhance knowledge among decision makers on successful policies to prevent childhood obesity in middle-income countries</li> <li>Build awareness of the impact of obesity on children and their rights and advocate for the need to make systemic changes to address this growing epidemic</li> <li>Drive and strengthen multisector interventions in Latin America and the Caribbean region</li> </ul>
Accelerating the purchase of antimalarial supplies \$4,000,000 Sudan 5 months bridged	The purchase of antimalarial supplies for Sudan to avoid a stock-out	<ul> <li>The purchase of a substantial amount of antimalarial supplies and funding related services.</li> <li>Targeting 6,586,210 cases of uncomplicated malaria and 329,311 cases of severe malaria in 2020</li> </ul>	<ul> <li>Enabling the government to prevent a stock-out of essential health supplies.</li> <li>Uninterrupted treatment of various medical conditions, including malaria, because supplies will remain available.</li> </ul>



# **Financial Information**

UNICEF USA Impact Fund for Children Inc. (formerly U.S. Fund for UNICEF In Kind Assistance Corporation)

Assets	
Cash and Investments	\$18,614,046
Contributions Receivable	\$23,538,463
Total Assets	\$42,152,509
Liabilities	
Loans Payable	\$27,850,000
Accrued Interest Expense	\$94,343
Total Liabilities	\$27,944,343
Net Assets	\$14,208,166
Total Liabilities and Net Assets	\$42,152,509

\*As of December 31, 2019

#### **Covenant Calculation**

Leverage Ratio	Loan Goal	Actual
Debt : Net Assets	Maximum 3.5 : 1	2.0:1

#### Statement of Activities (unaudited)\*

Revenue	
Contributions Revenue	\$13,150,814
Investment and Interest Income	\$720,931
Total Revenue	\$13,871,745
Expenses	
Program Services	
Grants to UNICEF and other NGOs	\$13,070,814
Interest Expense	\$429,998
Total Expenses	\$13,500,812
Net Income	\$370,933
Net Assets – Beginning	\$13,837,233
Net Assets – Ending	\$14,208,166
*For the six months ended December 31, 2019	

We certify that as of the quarter ending December 31, 2019, there exists no default or Event of Default (as such term is defined in the Loan Agreement), and we are in compliance with the covenants set forth in Sections 4.1 and 4.4 and in Article V of the Loan Agreement, including without limitation and as demonstrated in the above computations, the financial covenants set forth in Sections 5.2 and 5.5 of the Loan Agreement.

Brett Robinson, Chief Financial and Administrative Officer, UNICEF USA Dated: December 31, 2019

To learn more, please visit our website at unicefusa.org/bridgefund or contact:

Bretto.

**Brett Robinson** 

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