

COVID-19

Situation update for the WHO African Region

3 June 2020

External Situation Report 14



REGIONAL OFFICE FOR

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Organization

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COVID-19

WHO AFRICAN REGION

External Situation Report 14

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1. Situation update



Just over three months into the coronavirus disease 2019 (COVID-19) outbreak in the WHO African Region (with Algeria confirming the first case on 25 February 2020), incidence cases and associated deaths continue to rise, albeit with differential trends among countries. There has been a daily average of more than 2 000 new cases in the past month, with a peak attained on 29 May 2020 when the region recorded its highest daily total count of 4 212 new confirmed cases. The greatest increase has been observed in South Africa where over 1 500 cases have been reported daily for the past 13 days. The incidence of imported cases within the region and clusters of cases among quarantine sites and prison settings are on the increase.

Since our last situation report on 27 May 2020 ([External Situation Report 13](#)), an additional 25 219 new confirmed COVID-19 cases (a 30% increase) were reported from 41 countries. During this period, eight countries in the WHO African region observed the highest percentage increase in cases: Zimbabwe 268% (from 56 to 206 cases), Malawi 256% (from 101 to 358 cases), Mauritania 124% (from 262 to 588 cases), Ethiopia 92% (from 701 to 1 344 cases), Uganda 72% (from 341 to 586 cases), Central African Republic 64% (652 to 1 069 cases), Kenya 55% (from 1 348 to 2 093 cases) and Comoros 52% (from 87 to 132 cases). In the same reporting week, Malawi and Zimbabwe reported clusters of cases that were identified in quarantine areas. Two new countries, Guinea and Uganda, joined the list of countries reporting health worker infections this week. The region has registered 15 015 new recoveries in this reporting period.

Seychelles and Eritrea have reported zero new confirmed COVID-19 cases in the past 56 and 44 days, respectively. Lesotho, Equatorial Guinea, South Sudan and United Republic of Tanzania did not report any new cases in this period.

From 27 May to 2 June 2020, an additional 477 new deaths (21% increase) were reported from 28 countries: South Africa (231), Nigeria (65), Algeria (50), Cameroon (23), Kenya (19), Mauritania (17), Ethiopia (8), Mali (8), Gabon (6), Senegal (6), Ghana (6), Madagascar (4), Democratic Republic of the Congo (4), Chad (4), Central African Republic (3), Côte d'Ivoire (3), Guinea (3), South Sudan (2), Liberia (2), Sierra Leone (2), Guinea-Bissau (2), Rwanda (2), Niger (2), Comoros (1), Mozambique (1), Cabo Verde (1), Congo (4) and Eswatini (1). Rwanda recorded their first death in a confirmed case during the reporting week.

As of 3 June 2020, the cumulative total of COVID-19 cases has surpassed 100 000 and is now at 109 342, including 109 082 confirmed and 260 probable cases reported across the 47 countries in the region. The probable cases have been reported in Sao Tome and Principe (189), Comoros (70) and Democratic Republic of the Congo (1). A total of 2 764 deaths have been reported, giving an overall case fatality ratio (CFR) of 2.5%. Five countries have not registered any COVID-19 related deaths since the beginning of the pandemic in the region: Eritrea, Seychelles, Lesotho, Namibia and Uganda.

The current status in the region represents 1.8% of confirmed COVID-19 cases and 0.7% of deaths reported worldwide. **Table 1** shows the list of affected countries and their respective number of cases and deaths. The daily and weekly distribution of cases by date and week of reporting are presented in Figures 1 and 2, respectively. The highest number of cases in the region have been reported from South Africa (35 812), Nigeria (10 819), Algeria (9 626), Ghana (8 297), Cameroon (6 752), Guinea (3 886), Senegal (3 836), Democratic Republic of the Congo (3 326), Côte d'Ivoire (2 952) and Gabon (2 803), which collectively account for 81% of all reported cases.

Of the 109 342 COVID-19 cases reported, 49 204 (45%) have recovered, with recoveries documented from all the 47 countries in the region. All the reported cases in Eritrea (39) and Seychelles (11) have recovered. Lesotho reported their first recovered case this reporting period.

From 27 May to 2 June 2020, South Africa overtook Algeria in reporting the highest daily and weekly cumulative deaths in the region, with 755 (28%) deaths, followed by Algeria with 667 (24%). The other countries reporting high numbers of deaths are: Nigeria 314 (12%), Cameroon 200 (7.3%), Mali 78 (2.9%), Democratic Republic of the Congo 71 (2.6%), Kenya 71 (2.6%), Chad 66 (2.4%) and Niger 65 (2.4%). South Africa, Nigeria, Algeria and Cameroon account for 71% of the total deaths reported in the region.

The highest case fatality ratios were observed in seven countries: Liberia (9.0%), Chad (8.3%), Algeria (6.9%), Niger (6.8), Burkina Faso (6.0%), Mali (5.8) and Sierra Leone (5.3%). Of these, only Liberia, Chad, Algeria and Niger have recorded case fatality ratios higher than the 6.1% currently registered globally. **Figure 3** shows the distribution of cases and deaths by week of notification in the 12 most affected countries.

Of concern, health workers have been greatly affected by COVID-19, with 2 544 health workers being infected in 34 countries since the beginning of the outbreak. Overall, Nigeria has been the most affected, with 606 health workers infected, followed by South Africa (327), Niger (184), Cameroon (181), Democratic Republic of the Congo (131), Ghana (126), Guinea (118), Côte d'Ivoire (116), Sierra Leone (109), Zambia (80) and Senegal (77). The other 23 countries that have recorded health worker infections are shown in **Table 1**.

Based on the available data on age and gender distribution ($n=5\,133$), the male to female ratio among confirmed cases is 1.7, and the median age is 38 years (range: 0 - 105). Males 3 213 (63%) in the 31-39 and 40-49 age-groups are more affected than females 1 920 (37%) across the same age-groups. The distribution of cases by age and sex is presented in **figure 4**.

Currently, 25 countries in the region are experiencing community transmission, 15 have clusters of cases and seven have sporadic cases of COVID-19. The region has also observed increased incidences of importation of cases from affected countries within the region, largely fueled by long-distance truck drivers and illicit movement through porous borders.

As of 2 June 2020, the cumulative number of cases in the African continent is, 155 880 confirmed COVID-19 cases and 4 429 deaths (CFR 2.8%). The 155 880 cases include a total of 46 538 cases from the seven countries in the WHO EMRO Region: Egypt (26 384), Morocco (7 859), Sudan (5 173), Djibouti (3 779), Somalia (2 089), Tunisia (1 086) and Libya (168) and 109 342 cases from the WHO AFRO Region. Additionally, the 1 665 deaths have been recorded from Egypt (1 005), Morocco (205), Sudan (298), Somalia (79), Tunisia (48), Djibouti (25) and Libya (5) and 2 764 from the AFRO region.

Table 1. Number of confirmed COVID-19 cases in the WHO African Region, 25 February – 2 June 2020 ($n=109\,342$)

Country	Total cases	Total deaths	Total probable	Health Workers	Case fatality ratio (%)
South Africa	35 812	755	0	327	2.1
Nigeria	10 819	314	0	606	2.9
Algeria	9 626	667	0		6.9
Ghana	8 297	38	0	126	0.5
Cameroon	6 752	200	0		3.0
Guinea	3 886	23	0	118	0.6
Senegal	3 836	43	0	77	1.1
Democratic Republic of the Congo	3 326	71	1	131	2.1
Côte d'Ivoire	2 952	33	0	116	1.1
Gabon	2 803	20	0	57	0.7
Kenya	2 093	71	0	64	3.4
Mali	1 351	78	0		5.8

Ethiopia	1 344	14	0		1.0
Guinea-Bissau	1 339	8	0	73	0.6
Zambia	1 089	7	0	80	0.6
Central African Republic	1 069	4	0	1	0.4
Equatorial Guinea	1 043	12	0	53	1.2
South Sudan	994	10	0	7	1.0
Niger	960	65	0	184	6.8
Burkina Faso	884	53	0		6.0
Sierra Leone	869	46	0	109	5.3
Madagascar	845	6	0	2	0.7
Chad	794	66	0	46	8.3
Congo	618	20	0	13	3.2
Mauritania	588	26	0		4.4
Uganda	586	0	0	7	0.0
United Republic of Tanzania	509	21	0	1	4.1
Sao Tome and Principe	484	10	189	40	2.1
Cabo Verde	466	5	0	181	1.1
Togo	445	13	0	19	2.9
Rwanda	384	2	0		0.5
Malawi	358	4	0	12	1.1
Mauritius	335	10	0	30	3.0
Liberia	311	28	0	44	1.3
Mozambique	307	2	0		0.7
Eswatini	294	3	0	8	1.0
Benin	244	3	0	2	1.2
Zimbabwe	206	4	0	2	1.9
Comoros	132	2	70		1.5
Angola	86	4	0	1	4.7
Burundi	63	1	0	1	1.6
Botswana	40	1	0	3	2.5
Eritrea	39	0	0		0.0
Gambia	26	1	0		3.8
Namibia	25	0	0	3	0.0
Seychelles	11	0	0		0.0
Lesotho	2	0	0		0.0
Total	109 342	2 764	260	2 544	

**Chad and Liberia are implementing community mortality surveillance that could have attributed to high case fatality ratios.*

Figure 1. Daily number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 2 June 2020 (n=109 342)

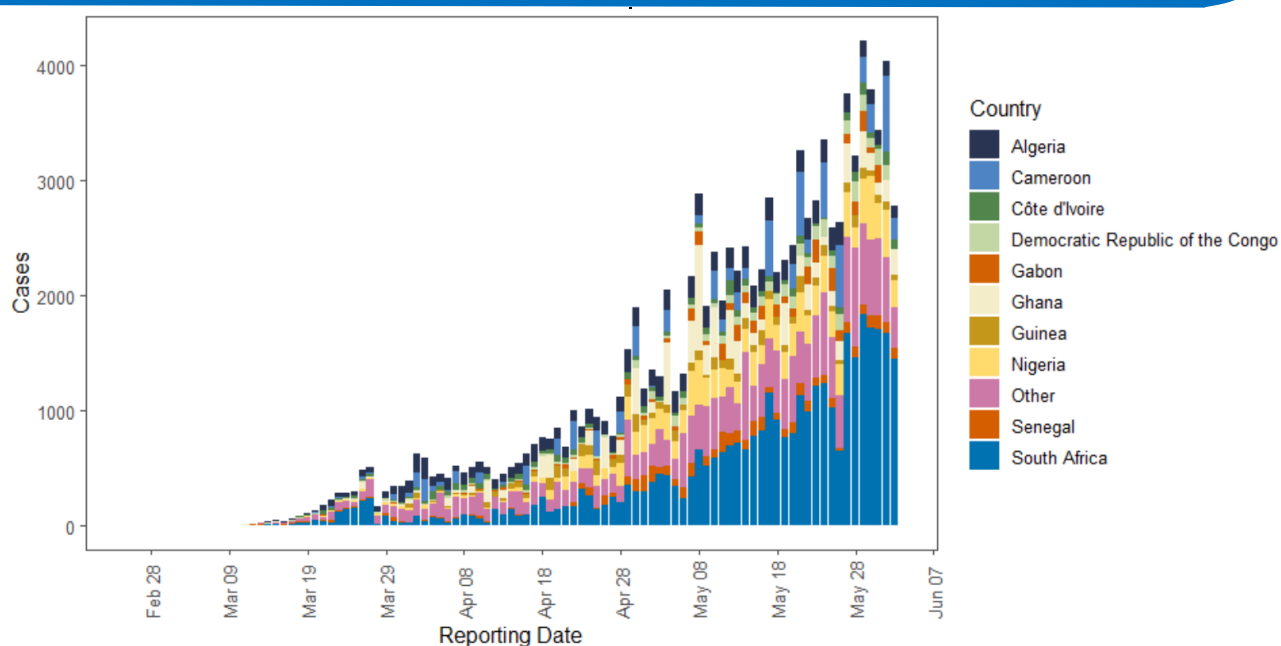


Figure 2. Weekly number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 2 June 2020 (n=109 342)

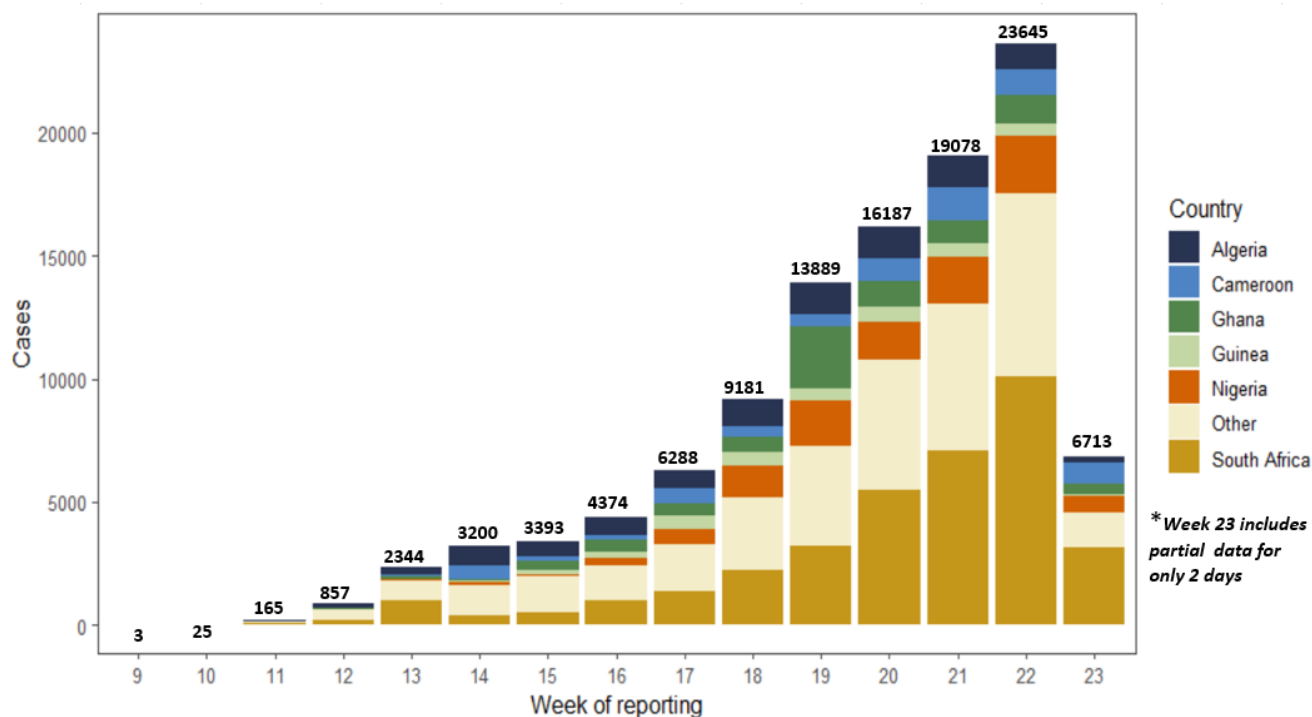


Figure 3. Epidemic curves of COVID-19 outbreaks in South Africa, Algeria, Nigeria, Ghana, Cameroon, Guinea, Senegal, Democratic Republic of the Congo, Côte d'Ivoire, Gabon, Kenya and Mali, 25 February – 2 June 2020 ($n=91\ 553$)

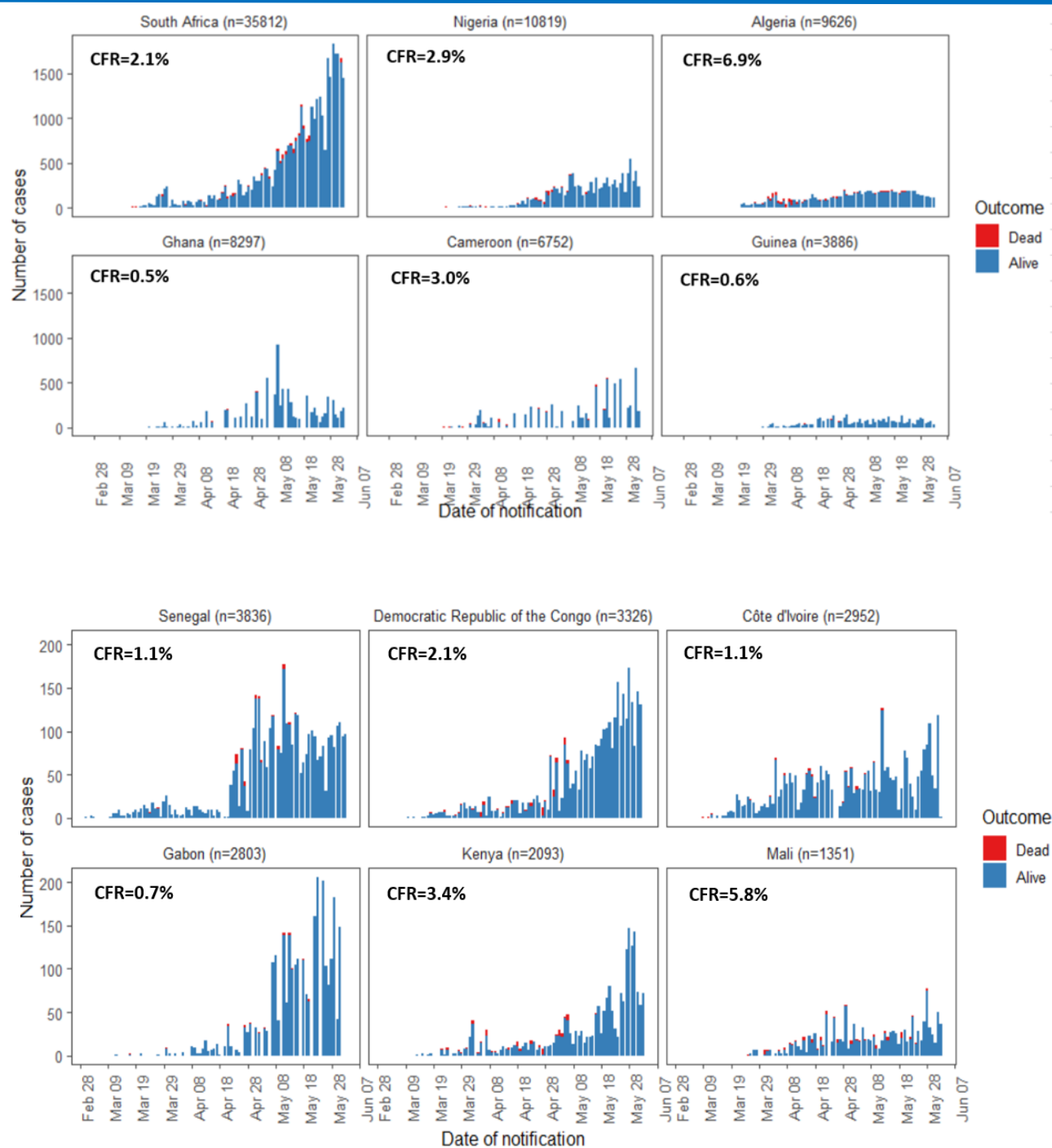
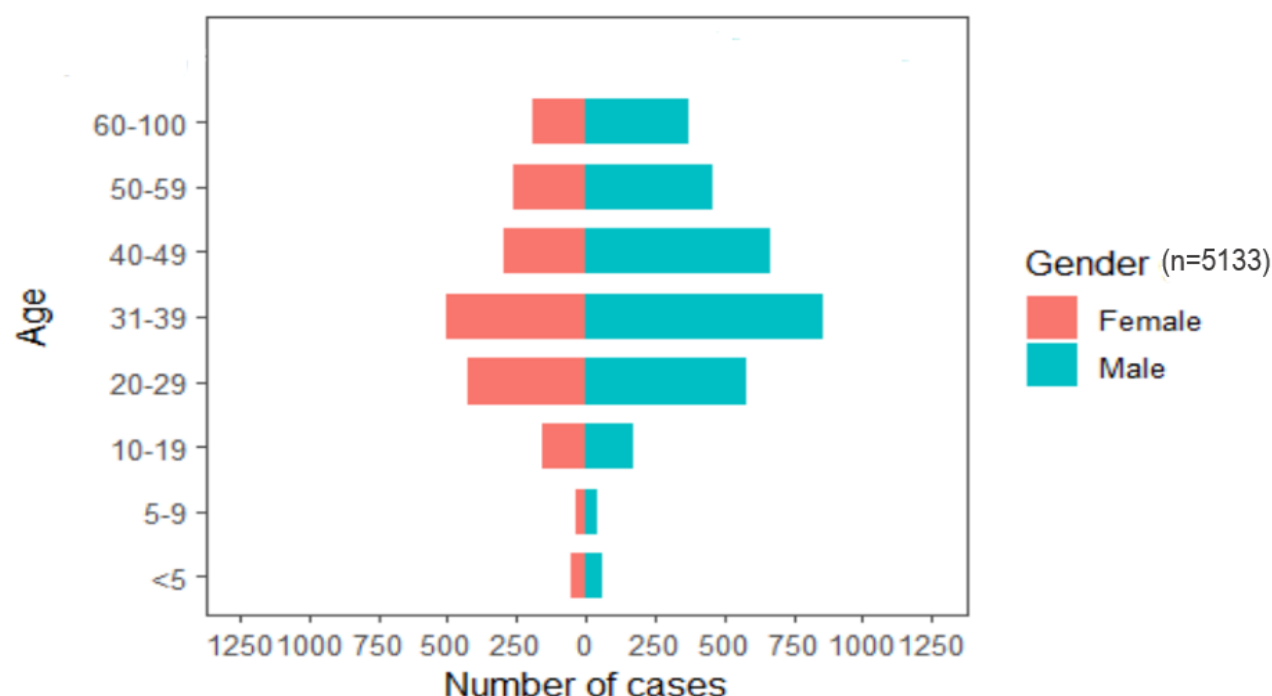


Figure 4. Age and sex distribution of confirmed COVID-19 cases in the WHO African Region, 25 February – 2 June 2020 (n=5 133)



2. Global update

- As of 2 June 2020, at 18:00 CET, a total of **6 194 533** confirmed cases, including **376 320** deaths (CFR 6.1%), was reported globally. Both the global number of confirmed COVID-19 cases and deaths have continued to increase significantly during the past weeks.
- To date, 214 countries/territories/areas and one international conveyance have reported laboratory confirmed COVID-19 cases. The 10 countries with the highest number of cumulative cases are: United States of America (1 783 638), Brazil (514 849), the Russian Federation (423 741), the United Kingdom (276 336), Spain (240 010), Italy (233 197), India (198 706), Germany (182 028), Turkey (164 769), France (148 775) and Iran -Islamic Republic (154 445). All affected countries have reported new confirmed cases in the past week.

Please refer to the WHO Daily Coronavirus disease (COVID-2019) situation reports for further information: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>.

3. Current risk assessment

On 11 March 2020, the WHO Director-General characterized the COVID-19 as a pandemic.

Chinese authorities identified a new type of coronavirus (novel coronavirus, SARS-CoV-2) from a cluster of pneumonia cases in Wuhan city, Hubei Province, China, on 7 January 2020. SARS-CoV-2 is a new strain of coronavirus that has not been previously identified in humans. According to the information provided, the initial cases described in Wuhan were linked to Hunan seafood market in Wuhan (the market was closed on 1 January 2020). The possible source of the outbreak is still under investigation by the Chinese authorities and it may have emerged from an animal species, as has been the case for other coronaviruses. The exact extent of the outbreak remains unknown.

On 30 January 2020, the WHO Director-General declared the COVID-19 outbreak a public health emergency of international concern (PHEIC), with temporary recommendations issued for all countries. On 28 February 2020, WHO raised the risk assessment for the COVID-19 outbreak internationally from “high” to “very high”.

4. Actions to date

The WHO Regional Office for Africa (AFRO) is working closely with its 47 Member States, as well as partners, in order to implement several outbreak preparedness and response interventions.

Coordination

- The WHO AFRO COVID-19 Incident Management Support Team (IMST) continues to coordinate and support response efforts across the region. The IMST holds daily virtual coordination meetings and regularly engages with the country Incident Management Systems in Member States to provide technical, financial and logistical support. Focal points have been designated for all the countries in the region to strengthen follow up and support.
- The update of the WHO AFRO COVID-19 Strategic Response Plan (SRP), February - December 2020, has been finalized. The total cost of the SRP is US\$ 455 910 114, with US\$ 40 436 494 for supporting Regional Office activities and US\$ 415 473 620 to support critical interventions in Member States in the region. Mobilization of the resources for effective implementation of the SRP is ongoing.

Surveillance

- The Surveillance Pillar of the IMST continues to provide technical support to Member States to improve active surveillance, including alert management systems, case investigations and contact tracing. During the reporting week, technical support was provided to many countries, as follows:
 - Data management training (Go. Data, Open Data Kit, EWARs) was conducted and technical support was offered to Algeria, Eswatini, Democratic Republic of the Congo, Liberia, Sierra Leone, South Africa, South Sudan and Zimbabwe.
 - Virtual meetings were held with staff from the Ministries of Health and WHO Country Offices in Botswana, Eritrea, Mauritius, Sierra Leone, South Sudan and Tanzania to strengthen COVID-19 surveillance, including alert management system, contact tracing, reporting and data analysis.
 - Technical support was provided to Niger, Senegal and Burkina Faso in contact tracing, data entry, quality control and analysis.
- A detailed epidemiological analysis of COVID-19 cases, laboratory testing and contact tracing database was continued to provide evidence to guide and improve public health measures.
- A rapid assessment of the status of COVID-19 surveillance was initiated in the 47 countries of the region to inform targeted technical support and guidance.

Infection Prevention and Control (IPC)

- The IPC monitoring and evaluation framework was developed and will start receiving data from 45 of 47 countries next week.
- The team provided guidance on certification and quality check of personal protective equipment (PPE) to countries and guidance on use of cloth masks.
- WHO AFRO supported eight countries, including Angola, Burkina Faso, Cameroon, Congo, Cote d'Ivoire, Democratic Republic of the Congo, Senegal, South Africa and Tanzania. In these countries, 1 131 IPC trainers are now available, along with 9 381 trained health workers. At the same time 3 658 households of COVID-19 confirmed patients were disinfected, along with 513 healthcare facilities and 133 COVID-19 treatment centres were assessed.

Laboratory

- Experts are being deployed to Comoros and Sao Tome to support initiation and strengthening of Polymerase Chain Reaction testing for SARS-CoV-2.
- A comprehensive document, Technical Guidance on Laboratory Operations for Coronavirus Disease (COVID-19) Testing in the WHO African Region, prepared to support countries in providing streamlined laboratory actions for COVID-19 was published in French, Portuguese and English and disseminated regionally.
- A laboratory reporting platform was launched during the reporting week. This is a data reporting tool to monitor, at a regional level, the number of specimens tested, stock levels and other laboratory performance parameters.

Case management

- The WHO AFRO case management team conducted a two-day virtual training for Comoros, Guinea Bissau, AMERN and 30 participating clinicians across the continent and Europe on 19 to 20 May 2020. A total of 410 participants attended, 234 individuals have followed up and viewed the presentation online with 163 downloads.
- The team participated in a teleconference call with focal points' daily meeting on 21 May 2020 to discuss issues countries are facing, along with specific and general technical assistance. The team had a call with Botswana on the same day to review COVID-19 Case Management practices and the Guidance Adaptation Technical Group (GATG) also met to complete a draft "Management of Critical Care of COVID-19 Patient Guide".

Risk Communication

- The team developed messages on key prevention behaviours with a focus on the benefits of hand washing, physical and social distancing, use of masks and staying away from the public when sick.
- Twenty-eight countries have developed and are implementing community engagement strategies. In Uganda, truck drivers were engaged to discuss risk, prevention and control measures.
- Guidance for physical and social distancing is being disseminated within the region.
- The Senegal hub had in-depth discussions with Algeria, Cameroon, Benin, Togo and the Democratic Republic of the Congo country teams to support them in strategies to improve capacity.
- Key messages were developed for health workers working in quarantine facilities and guidance on stigma reduction was also developed. Over 200 participants attended a virtual training on monitoring and evaluation of RCCE.

Logistics

- Individual follow up, briefings and trainings on the new supply chain system have been conducted with countries within the region. A new online portal version with new features has been released.
- Identification of Supply Coordinators at country level is in an advanced stage to enable full use of the online portal and adequate request processing. A total of 27 countries have already placed requests in the online portal.
- In addition, requests have been placed for a total value of US\$ 30 000 000 to cover urgent needs in 47 countries. Delivery of testing kits is in progress despite limited means of transportation.
- A centralized helpdesk, offering direct support from AFRO, has been implemented.

Emergency Medical Team

- The Ministry of Health in South Sudan is finalizing a request for an urgent deployment of an EMT. A team of at least 10 experts is in the process of deployment to Comoros, with the support of the Faculty of Medicine of the University of Kinshasa. A Chinese EMT arrived this week in Brazzaville, Congo and the process of deployment of an EMT or another team of expert to support Guinea Bissau is in process.
- The EMT team at AFRO is collaborating with NGOs in the finalization of the proposals template of projects to be submitted to the WHO. WHO AFRO urges partners to propose projects with specific activities related to the gaps identified in the response to the COVID-19 pandemic.
- The terms of reference have been drafted for setting up a technical secretariat to follow the recommendation of the meetings between academic institutions and WHO AFRO. The template of the proposal of project to academic institutions has been shared.

Human Resources

- Since the outbreak started, a total of 232 experts have been deployed to 39 countries, including the Regional Office in Congo, to support: Coordination (33), Surveillance (19), Laboratory (14), IPC (24), Case Management (19), Point of Entry (5), Epidemiology (11), Risk Com (22), Media Com (10), Logistics (19), Partnership coordination (2), Data Management (15), Information Management Officer (1), SHOC Support (1), Training & Capacity Building (2), Planning & Monitoring (1), technical support to Countries (focal points) (25), Resources Mobilization (2), Planning & Information Management (1), Translator (2), staff wellbeing (1), EOC (1) Technical advisor (1) and Writing and Reporting (1).
- The lockdowns and international flights restrictions in most African countries remain the main challenges affecting the deployment of experts to support national responses.

5. IHR travel measures and cross border health

- WHO recommendations for international traffic in relation to COVID-19 outbreak are available at <https://www.who.int/news-room/articles-detail/updated-who-recommendations-for-international-traffic-in-relation-to-covid-19-outbreak>

WHO continues to monitor IHR measures being implemented by countries in the region:

- All countries in the region are conducting entry screening at the Points of Entries (PoEs), mainly at the airports, with some doing so at seaports and ground crossings.
- Due to movement of goods through the ground crossing, countries have intensified screening at ground crossings, which has led to detection of COVID-19 cases among truck drivers.
- A total of 24 countries are implementing lockdown; nationwide lockdown in 13 countries and lockdown in affected areas in 11 countries.
- Eight countries have started a phased easing of the lockdown measures.

6. Conclusion

The COVID-19 outbreak has been ongoing in the WHO African Region for slightly over three months, now affecting all countries. The overall trajectory of the outbreak is on the increase, although with differential trends among countries. Many countries in the region are now easing confinement measures introduced to control the spread of the virus, which came with considerable social and economic costs, particularly to the most vulnerable in the society. WHO has published guidance to countries on how the lockdowns can be eased in a systematic, step-by-step approach, as well as describing what essential public health measures need to be in place throughout the process. It is critical that rigorous public health measures are implemented at all levels of the national health

systems and in all communities. The emphasis remains on effective active case finding, testing and isolation of cases, contact tracing, physical distancing and promotion of good personal hygiene practices.

Annex 1. Global and Regional time line for COVID-19 as of 31 May 2020

