

# COVID-19

Situation update for the WHO African Region

10 June 2020

## External Situation Report 15



World Health  
Organization  
REGIONAL OFFICE FOR  
Africa

# COVID-19

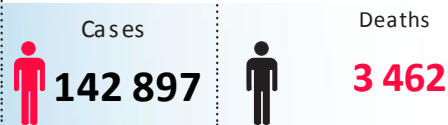
## WHO AFRICAN REGION

### External Situation Report 15

Date of issue: 10 June 2020

Data as reported by: 9 June 2020 as of 11:59 PM (GMT+1)

#### 1. Situation update



The coronavirus disease 2019 (COVID-19) outbreak continues in the WHO African Region (with Algeria confirming the first case on 25 February 2020), with rising incidence cases and associated deaths. Since our last situation report on 3 June 2020 ([External Situation Report 14](#)), an additional 33 555 new confirmed COVID-19 cases (a 31% increase) were reported from 44 countries. During this period, six countries in the WHO African region observed the highest percentage increase in cases: Mauritania 98% (from 588 to 1 162 cases), Ethiopia 74% (from 1 344 to 2 336 cases), Central African Republic 73% (from 1 069 to 1 850 cases), South Sudan 62% (from 994 to 1 606 cases) and Zimbabwe 52% (from 206 to 314 cases). In the same reporting week, Malawi and Namibia reported clusters of cases that were identified in quarantine areas as nationals continue to return from neighbouring affected countries. Three new countries, Cabo Verde, Ethiopia and Uganda, joined the list of countries reporting health worker infections. The region has registered 18 643 new recoveries in this reporting period compared to 15 015 in our previous report.

Seychelles and Equatorial Guinea have reported zero new confirmed COVID-19 cases in the past 63 and 19 days, respectively. Although United Republic of Tanzania has no new confirmed cases in our database in the last 24 hours, there are no official reports indicating zero confirmed cases. Furthermore, Eritrea reported two new confirmed COVID-19 cases after 44 consecutive days of zero reporting. This was a couple who had their blood sample taken during the random community testing.

From 3 to 9 June 2020, an additional 698 new deaths (25% increase) were reported from 23 countries: South Africa (407), Algeria (57), Nigeria (51), Mauritania (35), Democratic Republic of the Congo (19), Ethiopia (18), Kenya (17), Mali (16), Cameroon (15), Ghana (10), South Sudan (10), Senegal (9), Chad (5), Côte d'Ivoire (5), Congo (4), Guinea-Bissau (4), Sierra Leone (4), Liberia (3), Madagascar (3), Zambia (3), Central African Republic (1), Benin (1) and Gabon (1).

As of 9 June 2020, the cumulative total of COVID-19 cases is 142 897, including 142 633 confirmed and 264 probable cases, reported across the 47 countries in the region. The probable cases have been reported from São Tomé and Príncipe (219), Comoros (44) and Democratic Republic of the Congo (1). A total of 3 462 deaths have been reported in 42 countries, giving an overall case fatality ratio (CFR) of 2.4%. 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 2.0% of confirmed COVID-19 cases and 0.9% 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 (52 991, 37%), Nigeria (13 464), Algeria (10 382), Ghana (10 201), Cameroon (8 312), Senegal (4 516), Democratic Republic of Congo (4 259), Guinea (4 258), Côte d'Ivoire (3 995) and Gabon (3 294), which collectively account for 81% of all reported cases.

Of the 142 897 COVID-19 cases reported, 67 847 (48%) 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.

From 3 to 9 June 2020, the number of deaths in South Africa exceeded 1000 and is now 1 162, followed by Algeria with 724 (21%) deaths. The other countries reporting high numbers of deaths are: Nigeria 365 (11%), Cameroon 215 (6.2%), Mali 94 (2.7%), Democratic Republic of the Congo 90 (2.6%), Kenya 88 (2.5%), Chad

71 (2.1%), Niger 65 (1.9%) and Mauritania 61 (1.8%). 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: Chad (8.4%), Liberia (8.1%), Algeria (7.0%), Niger (6.7), Burkina Faso (6.0%), Mali (6.0) and Mauritania (5.2%). Of these, Chad\*, Liberia\*, Algeria, Niger and Burkina Faso have recorded case fatality ratios higher than the 5.7% currently registered globally. **Figure 3** shows the distribution of cases and deaths by week of notification in the six most affected countries.

Of concern, health workers have been significantly affected by COVID-19, with 4 962 health workers being infected in 36 countries since the beginning of the outbreak. Overall, South Africa has been the most affected, with 2 084 health workers infected, followed by Nigeria (812), Cameroon (293), Niger (184), Senegal (138), Guinea (134), Democratic Republic of the Congo (131), Côte d'Ivoire (130), Ghana (126), Sierra Leone (119) and Zambia (111). The other 25 countries that have recorded health worker infections are shown in **Table 1**.

According to the available data on age and gender distribution ( $n=5\,178$ ), the male to female ratio among confirmed cases is 1.7, and the median age is 38 years (range: 0 - 105). Males 3 234 (62%) in the 31-39 and 40-49 age-groups are more affected than females 1 944 (38%) across the same age-groups. The distribution of cases by age and sex is presented in **figure 4**.

Currently, 27 countries in the region are experiencing community transmission, 17 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 9 June 2020, the cumulative number of cases in the African continent is 201 157 confirmed COVID-19 cases and 5 486 deaths (CFR 2.7%). The 201 157 cases include a total of 58 260 cases from the seven countries in the WHO EMRO Region: Egypt (35 444), Morocco (8 408), Sudan (6 242), Djibouti (4 331), Somalia (2 416), Tunisia (1 087) and Libya (332) and 142 897 cases from the WHO AFRO Region. Additionally, the 2 024 deaths have been recorded from Egypt (1 271), Morocco (208), Sudan (372), Somalia (85), Tunisia (49), Djibouti (34) and Libya (5) and 3 462 from the AFRO region.

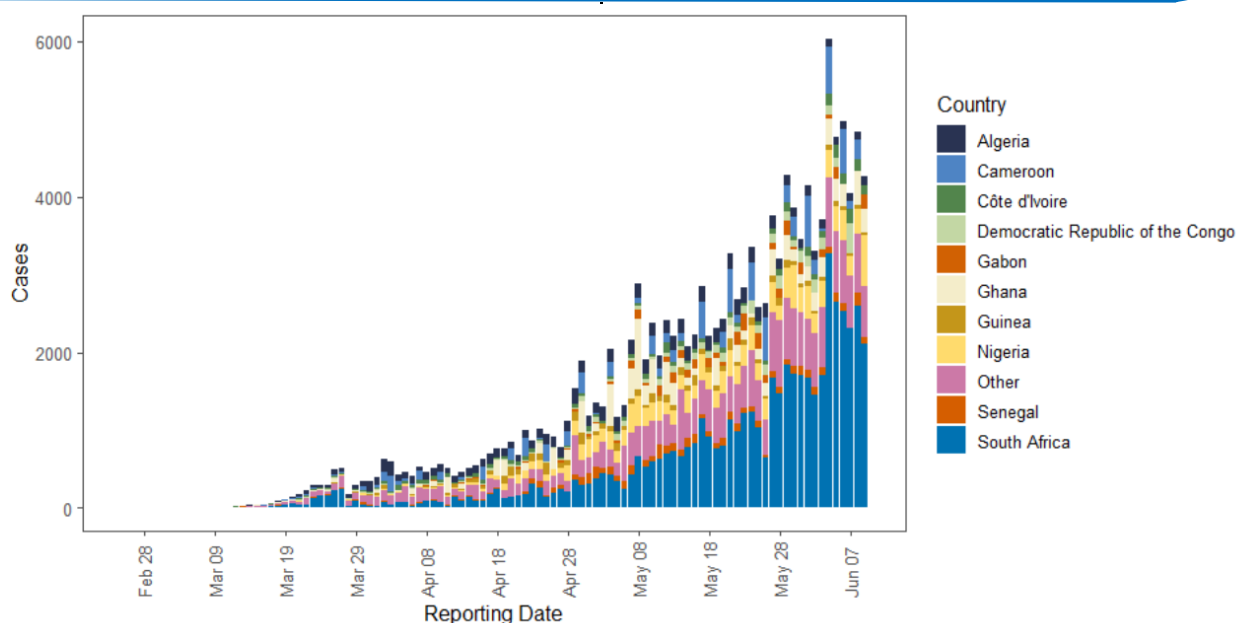
\* *Chad and Liberia are implementing community mortality surveillance that could have attributed to high case fatality ratios.*

**Table 1. Number of confirmed COVID-19 cases in the WHO African Region, 25 February – 9 June 2020 ( $n=142\,897$ )**

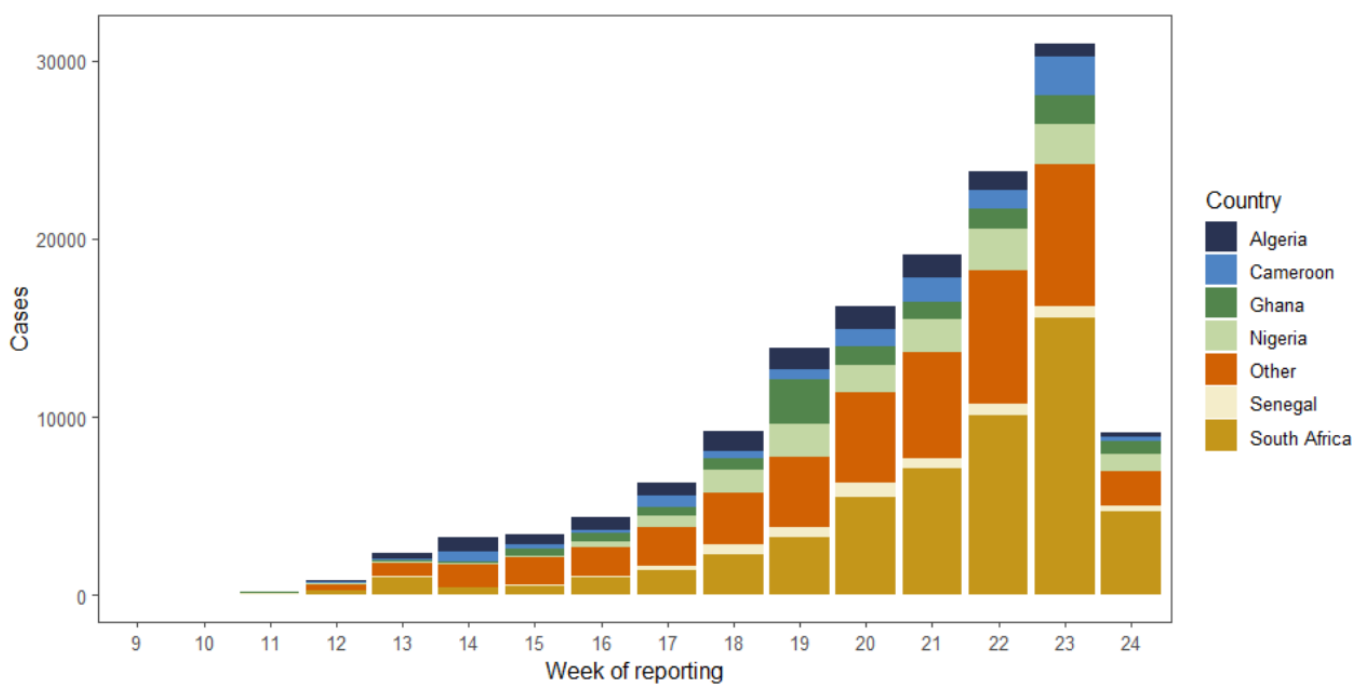
Country	Total cases	Total Dead	Probable Total	Recovered Total	Health workers	Case fatality ratio (%)
South Africa	52 991	1 162	0	29 006	2 084	2.2
Nigeria	13 464	365	0	4 206	812	2.7
Algeria	10 382	724	0	6 951	0	7.0
Ghana	10 201	48	0	3 755	126	0.5
Cameroon	8 312	215	0	4 794	293	2.6
Senegal	4 516	52	0	2 809	138	1.2
Democratic Republic of the Congo	4 259	90	1	539	131	2.1
Guinea	4 258	23	0	2 983	134	0.5
Côte d'Ivoire	3 995	38	0	2 045	130	1.0
Gabon	3 294	21	0	956	57	0.6
Kenya	2 989	88	0	873	64	2.9
Ethiopia	2 336	32	0	379	87	1.4
Central African Republic	1 850	5	0	38	1	0.3
South Sudan	1 606	20	0	15	40	1.2

Mali	1 586	94	0	931	0	5.9
Guinea-Bissau	1 389	12	0	153	79	0.9
Zambia	1 200	10	0	1 020	111	0.9
Mauritania	1 162	61	0	139	0	5.2
Madagascar	1 138	9	0	274	2	0.8
Equatorial Guinea	1 043	12	0	208	53	1.2
Sierra Leone	1 025	50	0	621	119	4.9
Niger	974	65	0	871	184	6.7
Burkina Faso	891	53	0	778	0	5.9
Chad	844	71	0	706	75	8.4
Uganda	775	0	0	103	15	
Congo	718	24	0	220	20	3.3
Cabo Verde	585	5	0	293	40	0.9
Sao Tome and Principe	514	10	219	4	40	1.9
United Republic of Tanzania	509	21	0	180	1	1.9
Togo	497	13	0	251	19	2.6
Rwanda	463	2	0	300	0	0.4
Malawi	455	4	0	55	12	0.9
Mozambique	455	2	0	136	0	0.4
Liberia	383	31	0	199	45	8.1
Eswatini	371	3	0	232	8	0.8
Benin	339	4	0	191	2	1.2
Mauritius	337	10	0	324	30	3.0
Zimbabwe	314	4	0	46	2	3.0
Comoros	141	2	44	67	0	1.4
Angola	96	4	0	38	1	4.2
Burundi	83	1	0	45	1	1.2
Botswana	42	1	0	24	3	2.4
Eritrea	41	0	0	39	0	0.0
Namibia	31	0	0	16	3	0.0
Gambia	28	1	0	22	0	3.6
Seychelles	11	0	0	11	0	0.0
Lesotho	4	0	0	1	0	0.0
<b>Total</b>	<b>142 897</b>	<b>3 462</b>	<b>264</b>	<b>67 847</b>	<b>4 962</b>	<b>2.4</b>

**Figure 1. Daily number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 9 June 2020 ( $n=142\,897$ )**



**Figure 2. Weekly number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 9 June 2020 ( $n=142\,897$ )**



\*Week 24 includes partial days for two days

**Figure 3. Epidemic curves of COVID-19 outbreaks in South Africa, Nigeria, Algeria, Ghana, Cameroon, Senegal, Democratic Republic of the Congo, Guinea, Côte d'Ivoire, Gabon, Kenya and Ethiopia, 25 February – 9 June 2020 ( $n=120\,997$ )**

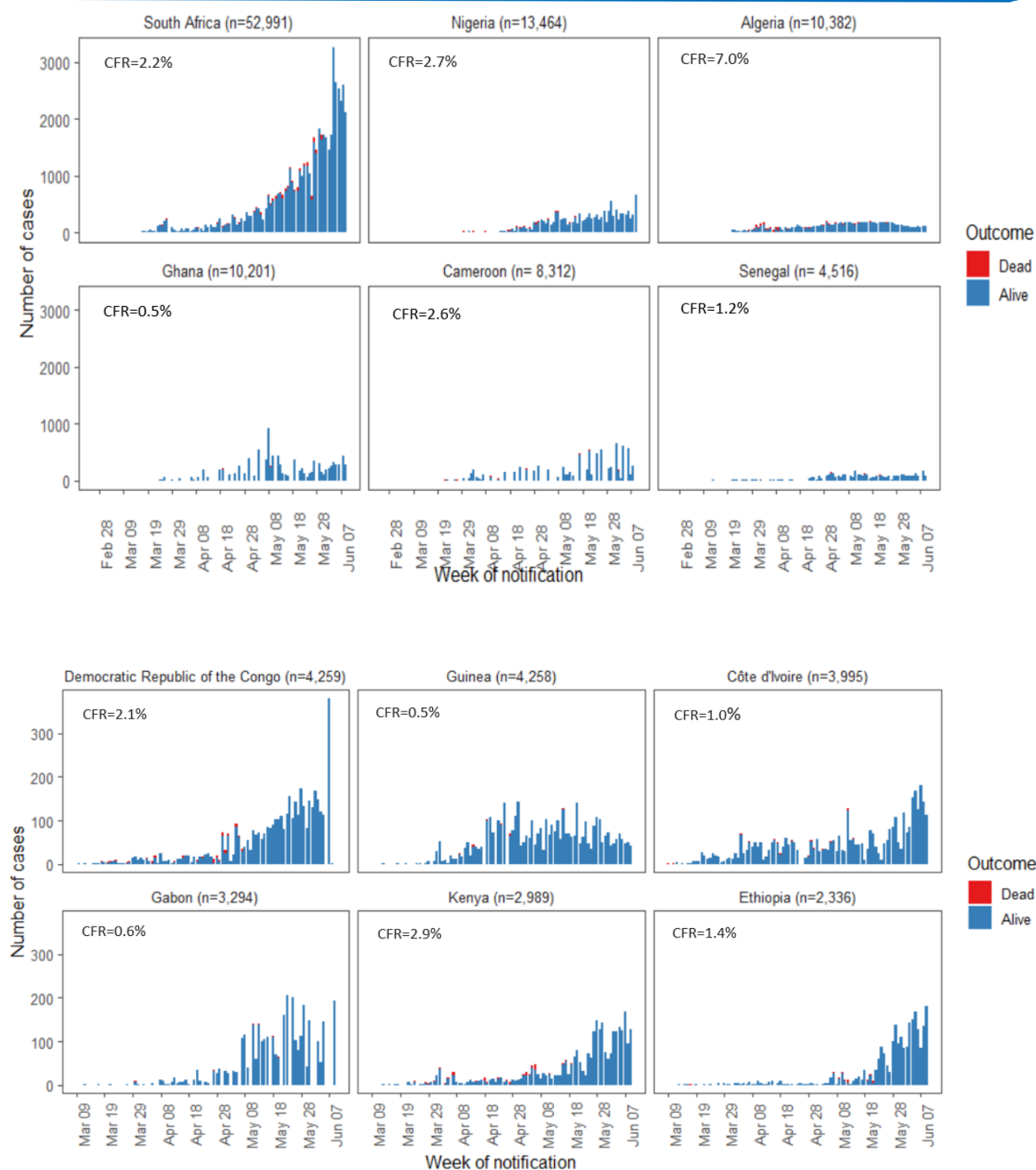
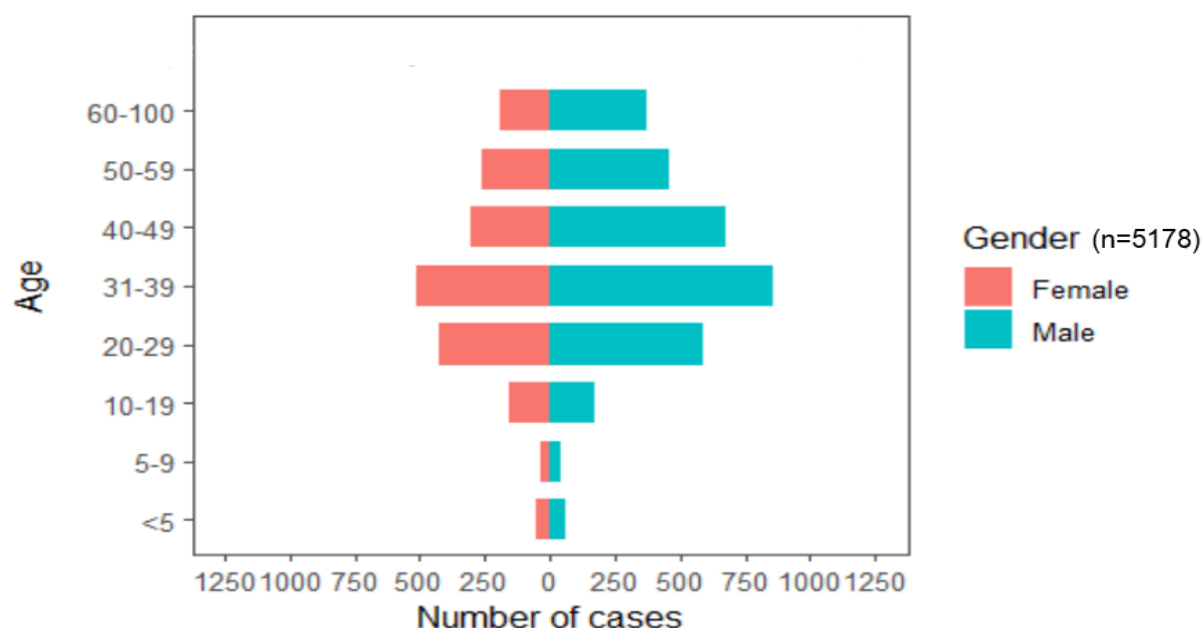




Figure 4. Age and sex distribution of confirmed COVID-19 cases in the WHO African Region, 25 February – 9 June 2020 (n=5 178)



## 2. Global update

- As of 9 June 2020, at 18:00 CET, a total of **7 039 918** confirmed cases, including **404 396** deaths (CFR 5.7%), 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, 215 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 (1 933 560), Brazil (691 758), the Russian Federation (485 253), the United Kingdom (287 403), Spain (241 717), Italy (235 278), India (266 598), Germany (184 543), Iran, Islamic Republic (173 832), Turkey (171 121) and France (150 413). 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.
- WHO is supporting the response to a new Ebola outbreak in northwest Democratic Republic of the Congo. The new outbreak comes as the country continues to respond to the complex Ebola outbreak in the eastern part of the country, as well as the COVID-19 pandemic, the world’s largest measles outbreak, and a complex and long-standing humanitarian crisis.
- 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 team participated in AFTCOR meeting on 2 June 2020, AFTCOR to discuss on strategies to improve COVID-19 response across Africa with a focus on the PACT Initiative module for training health workers across the continent
- The roll out of PACT initiative (Partnership to Accelerate Testing in Africa) was supported, with aim to increase testing, trace and treat through training of 100 000 health workers to support COVID-19 response, increase testing to 15 million per month for the next six months and support provision of supportive care to patients.
- Technical issues and the required assistance in case management was discussed with focal persons of Nairobi Hub and also oriented case management team for deployment in Guinea Bissau.

## Risk Communication

- Community health mobilizers are on the frontlines of Angola's COVID-19 response, increasing awareness of COVID-19 among the general population by conducting home visits and social mobilization campaigns in local markets and other busy communal areas.
- 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 expert team from the faculty of Medicine from the University of Kinshasa arrived in Comoros on 4 June 2020. The deployment of experts in Guinea Bissau remains a challenge for WHO AFRO. South Sudan, Chad and Cameroon have already formulated their request, submitted to the HQ in Geneva, for the rest of the EMT deployment procedure.
- 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 country offices have been informed of the projects that will be submitted by the partners. Suggestions were made to orient project proposals on strengthening activities and community engagement.
- 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 draft TOR of the technical secretariat of the platform is still awaiting feedback for its validation. The issue of the African facets of COVID-19 remains a major challenge and summarizes the main points of the discussions.

## 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 continues to evolve in the WHO African Region, with the numbers of new cases and deaths rapidly increasing in many countries. Countries must continue with strong implementation of public health measures in order to slow down this rapid growth in cases. The cornerstone of the response in every country is to find, isolate, test and care for every case, and to trace and quarantine every contact. Additionally, communities need to adhere to physical distancing, with good personal hygiene practices and cough etiquette.

## Annex 1. Global and Regional time line for COVID-19 as of 4 May 2020

