

COVID-19

Situation update for the WHO African Region

24 June 2020

External Situation Report 17



REGIONAL OFFICE FOR

World Health
Organization
Africa

COVID-19

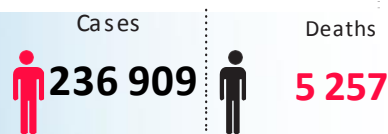
WHO AFRICAN REGION

External Situation Report 17

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1. Situation update



Since the coronavirus disease 2019 (COVID-19) outbreak was first detected in the WHO African Region in Algeria on 25 February 2020, the outbreak continues to evolve with rising incidence cases and associated deaths, although with decreasing case fatality rates. Since our last situation report on 17 June 2020 ([External Situation Report 16](#)), an additional 51 839 new confirmed COVID-19 cases (a 28% increase) were reported from 44 countries. Of the 51 839 reported new cases in the region, more than half, (57%) 29 774 were recorded in South Africa. During this period, five countries in the region observed the highest percentage increase in cases: Namibia 112% (from 34 to 72 cases), Mauritania 65% (from 1 887 to 3 121 cases), Benin 60% (from 532 to 850 cases), Botswana 48% (from 60 to 89 cases) and Malawi 42% (from 564 to 803 cases). Mauritania has consistently been among countries recording the highest increase in cases for the past four reporting periods.

Seychelles has reported zero new confirmed COVID-19 cases in the past 77 days, respectively. Although United Republic of Tanzania and Equatorial Guinea have no new confirmed cases in our database in the last 46 and 33 days, respectively, there are no official reports indicating zero confirmed cases. Lesotho and Mauritius reported new cases after 20 and 17 days of zero reporting respectively. The eight cases identified in Lesotho were nationals undergoing quarantine with travel history to different affected neighbouring countries, while the three cases in Mauritius had been repatriated from Madagascar. One new country, Burkina Faso joined the list of countries reporting health worker infections with 90 infections retrospectively registered in this period. A total of 101 new health worker infections were recorded from seven countries, including Côte d'Ivoire (33), Congo (29), Sierra Leone (12), South Sudan (11), Malawi (8), Democratic Republic of the Congo (4) and Uganda (4). The region has registered 30 818 new recoveries in this reporting period.

From 17 to 23 June 2020, an additional 941 deaths (25% increase) were reported from 32 countries: South Africa reported the highest number, 477, new deaths in this reporting period, similar to 463 deaths recorded in the previous period. This was followed by Nigeria that registered the second highest number of deaths, at 109 (85% increase) compared to the 59 registered in the previous reporting period. The other countries that reported new deaths include; Algeria (73), Ghana (37), Cameroon (32), Central African Republic (23), Democratic Republic of the Congo (23), Kenya (23), Mauritania (21), Senegal (19), Ethiopia (14), Côte d'Ivoire (12), Congo (10), Gabon (10), Zambia (7), Mali (5), Malawi (5), South Sudan (5), Angola (4), Benin (4), Comoros (4), Guinea-Bissau (4), Sierra Leone (4), Eswatini (3), Guinea (3), Madagascar (3), Zimbabwe (2), Cabo Verde (1), Gambia (1), Liberia (1) and Niger (1) and Mozambique (1).

In this reporting period (17 to 23 June 2020), the cumulative number of COVID-19 cases in the region has exceeded 200 000 and is now at 236 909 cases, including 236 589 confirmed and 320 probable cases, reported across the 47 countries in the region. The probable cases have been reported from Sao Tome and Principe (319) and Democratic Republic of the Congo (1). A total of 5 257 deaths have been reported in 42 countries, giving an overall case fatality ratio (CFR) of 2.2%. 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 2.6% of confirmed COVID-19 cases and 1.1% 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 10 countries: South Africa (106 108), Nigeria (21 371), Ghana (14 568), Algeria (12 076), Cameroon (12 041), Côte d'Ivoire (7 904), Senegal (6 034),

Democratic Republic of Congo (6 027), Guinea (5 104) and Kenya (4 952), which collectively account for 83% of all reported cases.

Of the 236 909 COVID-19 cases reported, 120 089 (51%) have recovered from across all the 47 countries in the region. All 11 reported cases in Seychelles have recovered.

As of 23 June 2020, the countries reporting high numbers of deaths are: South Africa 2 102 (40%), Algeria 861 (16%), Nigeria 533 (10%), Cameroon 308 (5.9%), Democratic Republic of the Congo 134 (2.6%), Kenya 128 (2.4%), Mauritania 112 (2.1%), Mali 111 (2.1%), Ghana 95 (1.8%), Senegal 89 (1.7%) and Ethiopia 75 (1.4%). South Africa, Nigeria, Algeria and Cameroon account for 74% of the total deaths reported in the region.

The highest case fatality ratios were observed in seven countries: Chad* (8.6%), Algeria (7.1%), Niger (6.4), Burkina Faso (5.9%), Mali (5.6), Angola (5.3%) and Liberia (5.2%)*. **Figure 3** shows the distribution of cases and deaths by week of notification in the 12 most affected countries.

Health workers have been significantly affected by COVID-19, with 5 824 (25%) being infected in 37 countries since the beginning of the outbreak. Overall, South Africa has been the most affected, with 2 084 health workers infected, followed by Nigeria (987), Ghana (351), Cameroon (325), Niger (184), Côte d'Ivoire (179), Guinea-Bissau (174), Democratic Republic of the Congo (158), Sierra Leone (151), Senegal (147) and Guinea (134). The other 27 countries that have recorded health worker infections are shown in **Table 1**.

According to the available data on age and gender distribution ($n=7\,438$), the male to female ratio among confirmed cases is 1.7, and the median age is 36 years (range: 0 - 105). Males (62%) in the 31-39 and 40-49 age-groups are more affected than females (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 23 June 2020, the seven African countries in the WHO EMRO Region reported a total of 84 976 confirmed COVID-19 cases: Egypt (56 809), Morocco (10 264), Sudan (8 698), Djibouti (4 617), Somalia (2 835), Tunisia (1 159) and Libya (594). In addition, a total of 3 224 deaths has been recorded from Egypt (2 278), Sudan (533), Morocco (214), Somalia (90), Tunisia (50), Djibouti (49) and Libya (10). A cumulative total of 321 885 confirmed COVID-19 cases 8 481 deaths (case fatality ratio 2.6%) with 153 023 cases that have recovered have been reported in the African continent.

* 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 – 23 June 2020 ($n=236\,909$)

Country	Total Cases	Total Deaths	Probable Cases	Recovered Cases	Case fatality ratio (%)	Health Workers
South Africa	106 108	2 102	0	55 045	2.0	2 084
Nigeria	21 371	533	0	7 338	2.5	987
Ghana	14 568	95	0	10 907	0.7	351
Algeria	12 076	861	0	8 674	7.1	0
Cameroon	12 041	308	0	7 740	2.6	325
Côte d'Ivoire	7 904	58	0	3 182	0.7	179
Senegal	6 034	89	0	4 046	1.5	147
Democratic Republic of the Congo	6 027	134	1	861	2.2	158
Guinea	5 104	29	0	3 744	0.6	134

Kenya	4 952	128	0	1 782	2.6	64
Gabon	4 849	39	0	2 107	0.8	57
Ethiopia	4 848	75	0	1 412	1.5	87
Mauritania	3 121	112	0	905	3.6	0
Central African Republic	3 051	37	0	522	1.2	1
Mali	1 978	111	0	1 302	5.6	0
South Sudan	1 916	35	0	190	1.8	86
Madagascar	1 640	15	0	692	0.9	2
Guinea-Bissau	1 556	19	0	191	1.2	174
Zambia	1 477	18	0	1 213	1.2	111
Sierra Leone	1 347	55	0	853	4.1	151
Congo	1 141	37	0	464	3.2	49
Niger	1 051	67	0	913	6.4	184
Equatorial Guinea	1 043	12	0	208	1.2	53
Cabo Verde	983	8	0	421	0.8	40
Burkina Faso	903	53	0	814	5.9	90
Chad	860	74	0	757	8.6	75
Benin	850	13	0	272	1.5	2
Malawi	803	11	0	258	1.4	35
Rwanda	798	2	0	371	0.3	0
Uganda	797	0	0	699	0.0	27
Mozambique	757	5	0	206	0.7	0
Sao Tome and Principe	707	10	319	4	1.4	40
Eswatini	674	7	0	319	1.0	17
Liberia	652	34	0	270	5.2	50
Togo	576	13	0	384	2.3	23
Zimbabwe	525	6	0	64	1.1	2
United Republic of Tanzania	509	21	0	180	4.1	1
Mauritius	340	10	0	326	2.9	30
Comoros	265	7	0	159	2.6	0
Angola	189	10	0	77	5.3	1
Burundi	144	1	0	93	0.7	1
Eritrea	143	0	0	39	0.0	0
Botswana	89	1	0	25	1.1	3
Namibia	72	0	0	21	0.0	3
Gambia	42	2	0	26	4.8	0
Lesotho	17	0	0	2	0.0	0
Seychelles	11	0	0	11	0.0	0
Total (n=47)	236 909	5 257	320	120 089	2.2	5 824

Figure 1. Daily number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 23 June 2020 (n=236 909)

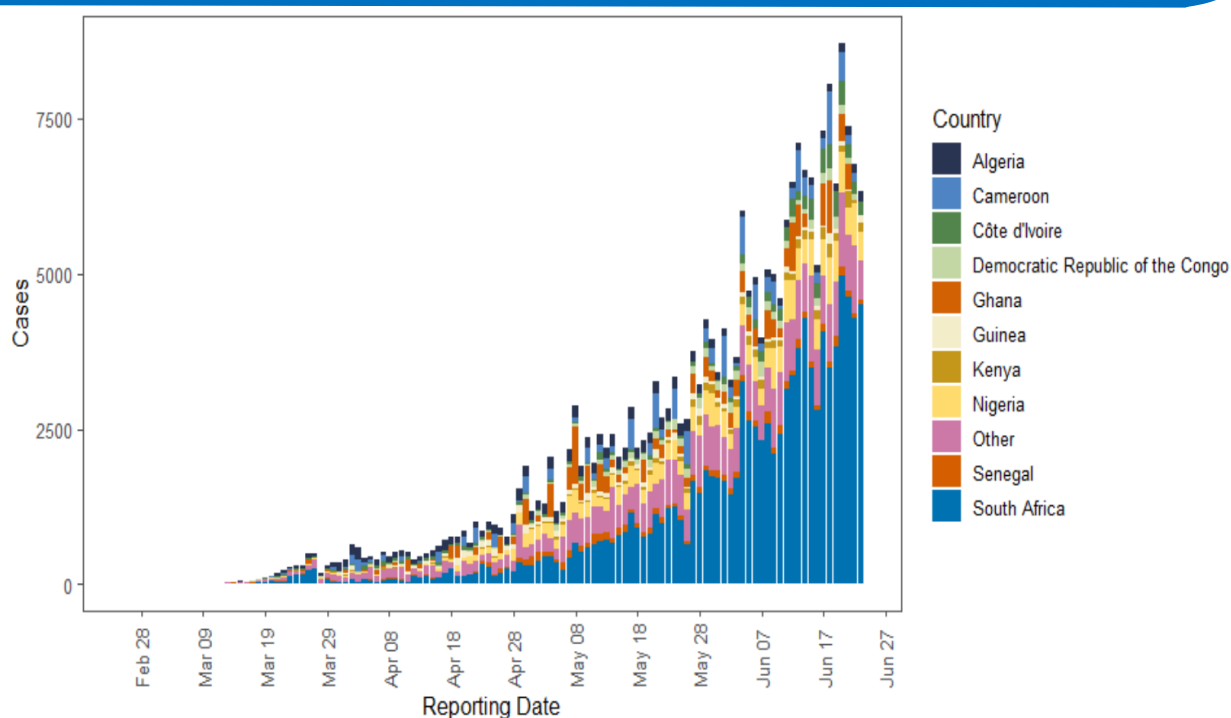
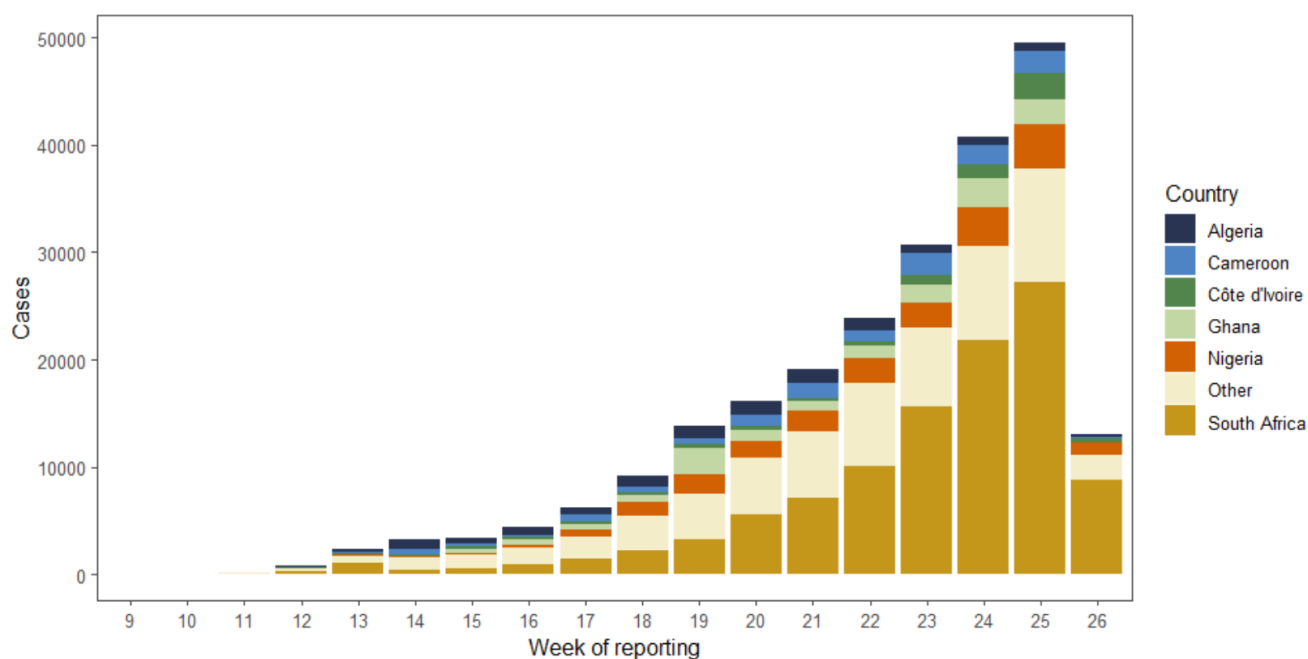


Figure 2. Weekly number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 23 June 2020 (n=236 909)



**Week 26 includes partial data for two days*

Figure 3. Epicurves showing distribution of confirmed cases and deaths with case fatality ratios of COVID-19 in the top 12 reporting countries: South Africa, Nigeria, Ghana, Algeria, Cameroon, Cameroon, Côte d'Ivoire, Senegal, Democratic Republic of the Congo, Guinea, Kenya, Gabon and Ethiopia, 25 February – 23 June 2020 ($n=205\,882$)

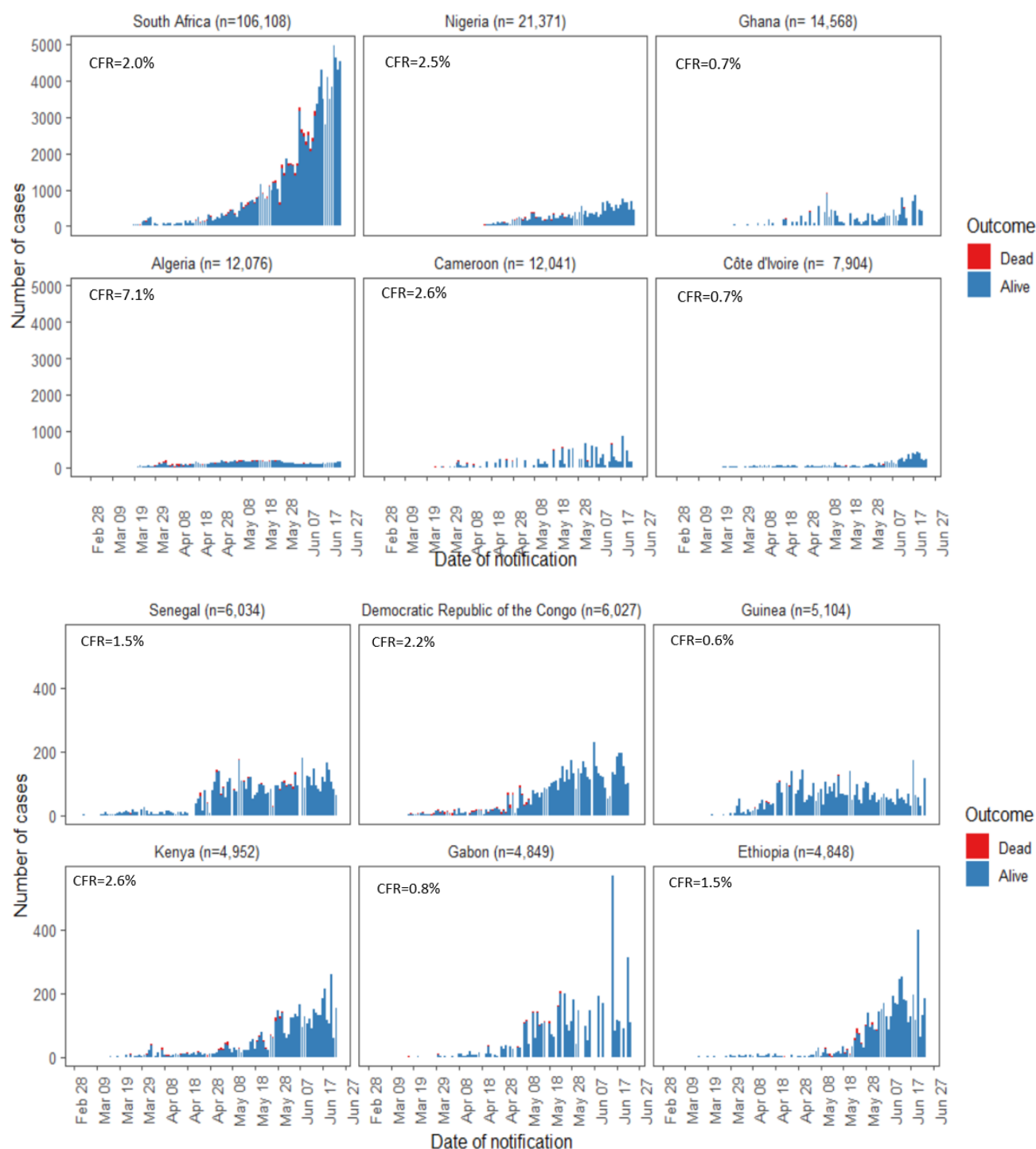
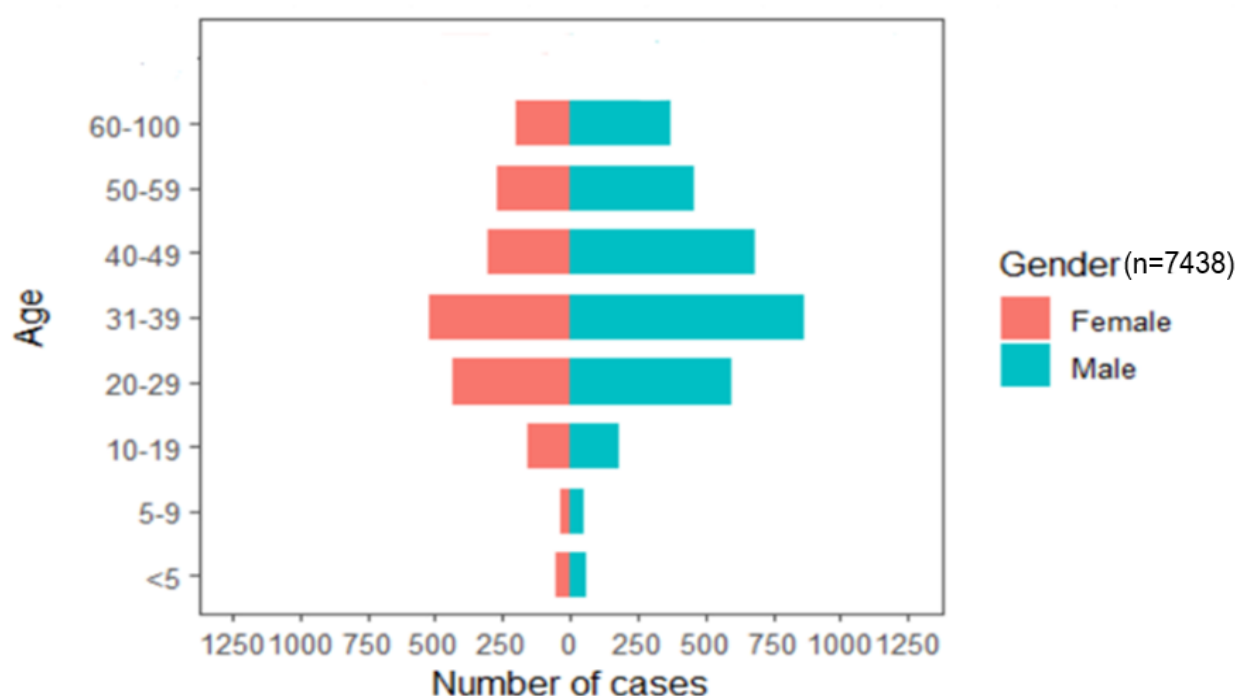


Figure 4. Age and sex distribution of confirmed COVID-19 cases in the WHO African Region, 25 February – 23 June 2020 (n=7 438)



2. Global update

- As of 23 June 2020, at 18:00 CET, a total of **8 993 659** confirmed cases, including **469 587** deaths (CFR 5.2%), 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 (2 268 753), Brazil (1 085 038), the Russian Federation (599 705), India (440 215), the United Kingdom (305 293), Chile (246 963), Spain (246 504), Italy (238 720), Peru (254 936) and Iran-Islamic Republic (207 525). 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) is supporting countries with priority for hot spots and countries with major change in their case pattern including risk factors; response performance and other gaps or challenges.
- The team is advising and supporting countries to strengthen routine health service delivery programmes even during the COVID-19 pandemic. To that effect, the AFRO IMST focal points are linking up with WRs to assign focal persons to focus on improving continuity in routine health services.
- 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.

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.
- A mechanism for tracking of cases in neighboring countries in order to report confirmed cases during cross-border screening is being established to avoid missing cases from the country of origin or duplication of notifications in two countries.
- An analysis is being carried out on the impact of the lockdown on the current epi-situation (joint analysis on the lower trend of COVID in Africa).
- 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)

- 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.
- The IPC monitoring and evaluation framework was developed and will start receiving data from 45 of 47 countries next week.

Laboratory

- The team is regularly monitoring and analyzing influenza data to see the impact of COVID-19 response measures including lockdown on influenza. Support to countries that are conducting surveillance for seasonal and pandemic influenza is also ongoing.
- Laboratories are working closely with the surveillance team to enhance laboratory information management including: tests per capita; positivity rate of specimens tested; and analysis of laboratory information based on sampling strategy to provide a better understanding of the regional status.

Case management

- The team presented on AFRO guidance on Case Management and Anti-biotherapy: Lessons learnt, best practices, challenges and way forward at the Webinar – AMR threat during COVID-19 response – taking action on antimicrobial stewardship. A total of 370 participants attended across the continent.
- WHO has donated 50 beds and mattresses to help with establishment of an isolation centre at Ndolo Prison in the Democratic Republic of the Congo.
- A WCO case management officer is supporting the MoH in the Ghana team in mapping available treatment centres across the country to address increasing number of cases.
- The AFRO team met with the AFTCOR Case management pillar meeting on 17 June 2020 to develop joint guidelines for Home Care of Patients with COVID-19, Discharge and Follow-up Criteria, and Management of Critically ill Patients with COVID-19.
- A curriculum was developed for community health workers along with Guidelines on healthcare workers performing CPR in a COVID-19 patient. General and specific technical advice was provided on prone position ventilation and home management of COVID-19 patients.

Risk Communication

- The communication team at AFRO developed guidelines on stigma reduction and disseminated these to focal points and partners.
- The communication team conducted capacity building on risk communication and community engagement, rumor management and communication to healthcare workers in Cabo Verde, Côte d'Ivoire, Senegal and Mauritania. The team also trained field team leads in Nigeria and Senegal, trained local journalists in three regions of Côte d'Ivoire and prison administrators and transport union delegates in Cameroon.
- Community engagement was stepped up in 16 regions of Ghana including action in hot spots. This includes training of fishermen/women, and advocacy with influencers in border communities in Ghana.
- In Kenya, 21 counties supported community engagement activities and mass media engagement and five staff were recruited to step up community engagement.
- The hero campaign intensified in Nigeria, Democratic Republic of the Congo and Sierra Leone.

Logistics

- A total of 37 countries placed request in the UN supply portal for an amount of 34 million laboratory test kits with sample collection kits, 22 million units of personal protective equipment and five million units of biomed equipment. Delivery of lab test kits is starting this week and is expected to continue during the following weeks.
- Delivery of PPE (Personal Protective Equipment) was expected to start next week but partners are facing challenges in organizing shipments from China. An alternative solution being explored in order to retain the same estimated time of arrival.
- The delivery of oxygen concentrators started last week end and is expected to continue during this week.
- The AFRO logistics team doubled the number of laboratory shipments and new ad-hoc routes have been opened with a progressive increase in the number of commercial flights.

Emergency Medical Team

- Ongoing support of countries through the proposal submitted by operational partners (NGOs and academic institutions). Processes for implementation of activities of technical thematic group between AFRO and academic institutions have been finalized and have started.
- There is ongoing discussion for deployment of EMTs in Cameroon (Malteser EMT) from Germany) and South Sudan (UK-Med and IMC from the United States of America).
- 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.

- There is ongoing discussion with Zambia for implementation of National EMT with the support of UK Med and DFID, with continued monitoring of EMT activities for experts deployed in Zambia and Ghana.
- A teleconference call is planned with Ethiopia for implementation of EMT training and simulation centre.
- The AFRO IMT team has continued to organize a weekly meeting with operational partners.

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 communication (22), Media communication (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 team is conducting advocacy at higher level for more flexible funding within the region.
- 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, albeit disproportionately between countries. Many governments are gradually easing their lockdown restrictions, including the reopening of businesses and the gradual reopening of schools; however, restrictions on border crossings and flight operations largely remain in effect. 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 23 June 2020

