

# COVID-19

Situation update for the WHO African Region

21 October 2020

External Situation Report 34



# COVID-19

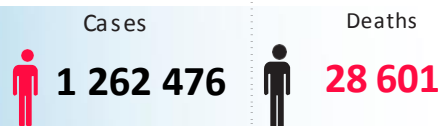
## WHO AFRICAN REGION

### External Situation Report 34

Date of issue: 21 October 2020

Data as reported by: 20 October 2020 as of 00:00 AM (GMT+1)

#### 1. Situation update



#### New cases and deaths in the past seven days (14 to 20 October 2020)

The number of coronavirus disease 2019 (COVID-19) cases in the WHO African Region is now at 1 262 476 with 28 601 deaths. During the last seven, a total of 29 919 new confirmed COVID-19 cases and 474 new deaths were reported from 46 countries, compared to 30 145 cases and 747 deaths registered during the previous seven days (7 - 13 October 2020). With an estimated 40 days of halving time, the number of new cases in the last seven days did not show any significant change (1% decrease) compared to the prior period.

At the same time, the number of new deaths in the African region decreased by 37%, with South Africa reporting 46% of the new deaths. During the last seven days, South Africa reported 429 retrospective COVID-19 deaths as a result of the ongoing mortality audits.

In the past seven days, 14 countries recorded a decrease in new cases by 20% or above: Benin, Botswana, Cameroon, Central African Republic, Congo, Cote d'Ivoire, Equatorial Guinea, Gabon, Gambia, Lesotho, Liberia, Madagascar, Sao Tome and Principe and Seychelles. Twelve countries have recorded an increase in new cases by 20% or above in the past seven days: Algeria, Angola, Burundi, Eritrea, Guinea-Bissau, Kenya, Mauritania, Niger, Rwanda, South Sudan, Togo and Zimbabwe.

The weekly incidence in the past seven days remained stable, increasing or decreasing by less than 20%, in 20 countries: Burkina Faso, Chad, Cabo Verde, Comoros, Democratic Republic of the Congo, Eswatini, Ethiopia, Ghana, Guinea, Malawi, Mali, Mauritius, Mozambique, Namibia, Nigeria, Senegal, Sierra Leone, South Africa, Uganda and Zambia.

United Republic of Tanzania did not officially submit any reports indicating any new confirmed cases.

Seventy-nine new health worker infections were reported from six countries: Côte d'Ivoire (40), Uganda (23), Namibia (10), South Sudan (3), Eswatini (2) and Liberia (1).

During this reporting period, 474 new COVID-19 related deaths occurred in 25 countries, with 203 (43%) of the deaths recorded in South Africa. This was followed by Ethiopia, with 66 (14%) deaths, Algeria with 55 (12%) and Kenya with 55 (12%). South Africa and Ethiopia recorded a 58% and 2% decrease in deaths respectively, while Kenya and Algeria had an increase in deaths by over 20% compared to the previous seven days. The other countries that reported new deaths during the reporting period include; Angola (24), Democratic Republic of the Congo (22), Cabo Verde (10), Nigeria (9), Mozambique (5), Senegal (4), Zimbabwe (3), Burkina Faso (2), Cameroon (2), Rwanda (2), Uganda (2), Botswana (1), Chad (1), Côte d'Ivoire (1), Eswatini (1), Madagascar (1), Malawi (1), Namibia (1), Sierra Leone (1), Togo (1) and Zambia (1).

#### Cumulative number of cases and deaths

As of 20 October 2020, a cumulative total of 1 262 476 COVID-19 cases was reported in the region, including 1 262 475 confirmed, with one probable case reported in Democratic Republic of the Congo. South Africa accounts for more than half, 56% (706 304), of all reported confirmed cases in the region. The other countries that have reported large numbers of cases are Ethiopia (90 490), Nigeria (61 630), Algeria (54 839), Ghana

(47 372), Kenya (45 647), Cameroon (21 570), Côte d'Ivoire (20 342), Madagascar (16 810) and Zambia (15 982). These 10 countries collectively account for 86% (1 080 986) of all reported cases.

Six countries are still reporting fewer than 1 000 cases: Sao Tome and Principe (933), Burundi (550), Comoros (504), Eritrea (452), Mauritius (421), and Seychelles (148). To date, a total of 1 075 973 (85%) case-patients reported from all the 47 countries have recovered.

The total number of deaths reported in the region is 28 601, reported in 45 countries, giving an overall case fatality ratio (CFR) of 2.3%. Two countries, including Eritrea and Seychelles, have not registered any COVID-19 related deaths since the beginning of the pandemic.

Since the beginning of the outbreak in the region, the majority of the deaths have been reported from: South Africa 65% (18 656), Algeria with 6.6% (1 873), Ethiopia 4.8% (1 371), Nigeria 4.0% (1 125), Kenya 3.0% (842), Cameroon 1.5% (425), Zambia 1.2% (346), Senegal 1.1% (320), Ghana 1.1% (310), Democratic Republic of the Congo 1.1% (303) and Angola 0.9% (251). The top five countries: South Africa, Algeria, Ethiopia, Nigeria, and Kenya account for 84% (23 867) of the total deaths reported in the region. Chad (6.6%), Liberia (6.0%), Niger (5.7%), Mali (4.0%), Algeria (3.4%), Gambia (3.2%) and Angola (3.1%) have recorded the highest country specific case fatality ratios.

**Table 1** shows the affected countries and their corresponding 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. **Figures 3 and 4** show the distribution of cases and deaths with case fatality ratio by reporting date in South Africa and in the other top six countries.

### Health worker infections

Health worker infections continue to increase gradually with 44 055 (3.5%) infections reported in 43 countries since the beginning of the outbreak. South Africa remains the most affected, with 27 360 (62%) health workers infected, followed by Algeria (2 300), Nigeria (2 175), Ghana (2 065), Ethiopia (1 711), Kenya (1 029), Cameroon (808), Uganda (682), Guinea (513), Namibia (486), Mozambique (484), Equatorial Guinea (363), Senegal (349), Eswatini (300), Guinea-Bissau (282) and Malawi (280). The other 28 countries that have recorded health worker infections are shown in **Table 1**. Liberia 15.6% (216/1 384), Niger 15.2% (184/1 212), Guinea Bissau 12.0% (282/2 403), Sierra Leone 10.1% (236/2 336), Sao Tome and Principe 9.5% (89/933), Equatorial Guinea 7.2% (363/5 074) and Mauritius 7.1% (30/421) have the highest country specific proportion of health worker infections among confirmed cases.

### Transmission pattern

We continue to observe different transmission patterns across the region, with established community transmission seen in 39 (83%) countries, five (11%) countries have clusters of cases and three (6%) with sporadic cases.

### Situation in the African continent

As of 20 October 2020, the seven African countries in the WHO EMRO Region reported a total of 403 177 confirmed COVID-19 cases: Morocco (179 003), Egypt (105 705), Libya (50 906), Tunisia (44 450), Sudan (13 724), Djibouti (5 499) and Somalia (3 890). Additionally, a total of 11 624 deaths has been recorded from Egypt (6 142), Morocco (3 027), Sudan (836), Libya (746), Tunisia (711), Somalia (101) and Djibouti (61).

A cumulative total of 1 665 653 confirmed COVID-19 cases, 40 225 deaths (case fatality ratio 2.4%) with 1 368 911 cases that have recovered have been reported in the African continent.

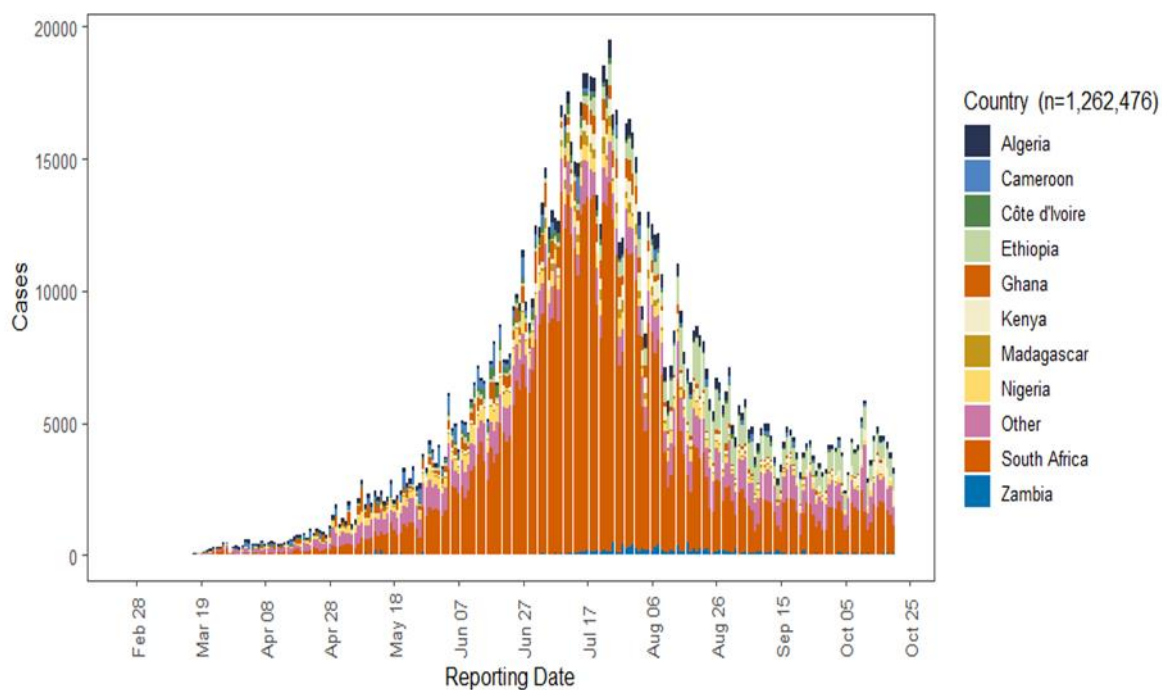
**Table 1. Number of confirmed COVID-19 cases in the WHO African Region, 25 February– 20 October 2020**  
(n =1 262 476)

Country	Total Cases	Total Deaths	Recovered Cases	Case fatality ratio (%)	Health Worker infections (n)	Date of last reported case
South Africa	706 304	18 656	639 568	2.6	27 360	20-Oct-20
Ethiopia	90 490	1 371	43 638	1.5	1 711	20-Oct-20
Nigeria	61 630	1 125	56 797	1.8	2 175	20-Oct-20
Algeria	54 839	1 873	38 346	3.4	2 300	20-Oct-20
Ghana	47 372	310	46 664	0.7	2 065	16-Oct-20
Kenya	45 647	842	32 522	1.8	1 029	20-Oct-20
Cameroon	21 570	425	20 427	2.0	808	18-Oct-20
Côte d'Ivoire	20 342	121	20 044	0.6	222	20-Oct-20
Madagascar	16 810	238	16 215	1.4	70	16-Oct-20
Zambia	15 982	346	15 038	2.2	140	20-Oct-20
Senegal	15 459	320	13 922	2.1	349	20-Oct-20
Namibia	12 367	132	10 528	1.1	486	19-Oct-20
Guinea	11 538	70	10 447	0.6	513	20-Oct-20
Mozambique	11 190	78	9 007	0.7	484	20-Oct-20
Democratic Republic of the Congo	11 052	303	10 357	2.7	256	18-Oct-20
Uganda	10 788	97	7 154	0.9	682	19-Oct-20
Gabon	8 884	54	8 452	0.6	57	19-Oct-20
Zimbabwe	8 187	233	7 692	2.8	238	20-Oct-20
Angola	8 049	251	3 037	3.1	40	20-Oct-20
Cabo Verde	7 901	87	6 792	1.1	90	20-Oct-20
Mauritania	7 634	163	7 359	2.1	5	20-Oct-20
Malawi	5 861	182	4 757	3.1	280	20-Oct-20
Eswatini	5 800	116	5 437	2.0	300	20-Oct-20
Botswana	5 609	21	915	0.4	56	19-Oct-20
Congo	5 156	92	4 400	1.8	166	10-Oct-20
Equatorial Guinea	5 074	83	4 954	1.6	363	18-Oct-20
Rwanda	4 996	34	4 797	0.7	0	20-Oct-20
Central African Republic	4 858	62	1 933	1.3	1	14-Oct-20
Gambia	3 655	118	2 654	3.2	142	18-Oct-20
Mali	3 411	132	2 593	3.9	0	20-Oct-20
South Sudan	2 870	55	2 655	1.9	136	20-Oct-20
Benin	2 557	41	2 367	1.6	139	20-Oct-20
Burkina Faso	2 406	65	1 824	2.7	122	19-Oct-20
Guinea-Bissau	2 403	41	1 818	1.7	282	17-Oct-20
Sierra Leone	2 336	73	1 765	3.1	236	20-Oct-20
Togo	2 104	51	1 555	2.4	68	20-Oct-20
Lesotho	1 833	42	961	2.3	20	14-Oct-20
Chad	1 399	93	1 199	6.6	75	20-Oct-20
Liberia	1 384	82	1 273	5.9	216	19-Oct-20
Niger	1 212	69	1 128	5.7	184	20-Oct-20
Sao Tome and Principe	933	15	898	1.6	89	18-Oct-20
Burundi	550	1	505	0.2	35	19-Oct-20
United Republic of Tanzania	509	21	180	4.1	1	7-May-20
Comoros	504	7	485	1.4	34	17-Oct-20
Eritrea	452	0	388	0.0	0	17-Oct-20
Mauritius	421	10	379	2.4	30	20-Oct-20
Seychelles	148	0	147	0.0	0	10-Oct-20
<b>Cumulative Total (N=47)</b>	<b>1 262 476</b>	<b>28 601</b>	<b>1 075 973</b>	<b>2.3</b>	<b>44 055</b>	

\* Total cases include one probable case from Democratic Republic of the Congo

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

**Figure 1. An epicurve of confirmed cases of COVID-19 in the WHO African Region, 25 February – 20 October 2020 (n=1 262 476)**



**Figure 2. Weekly number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 20 October 2020 (n=1 262 476)**

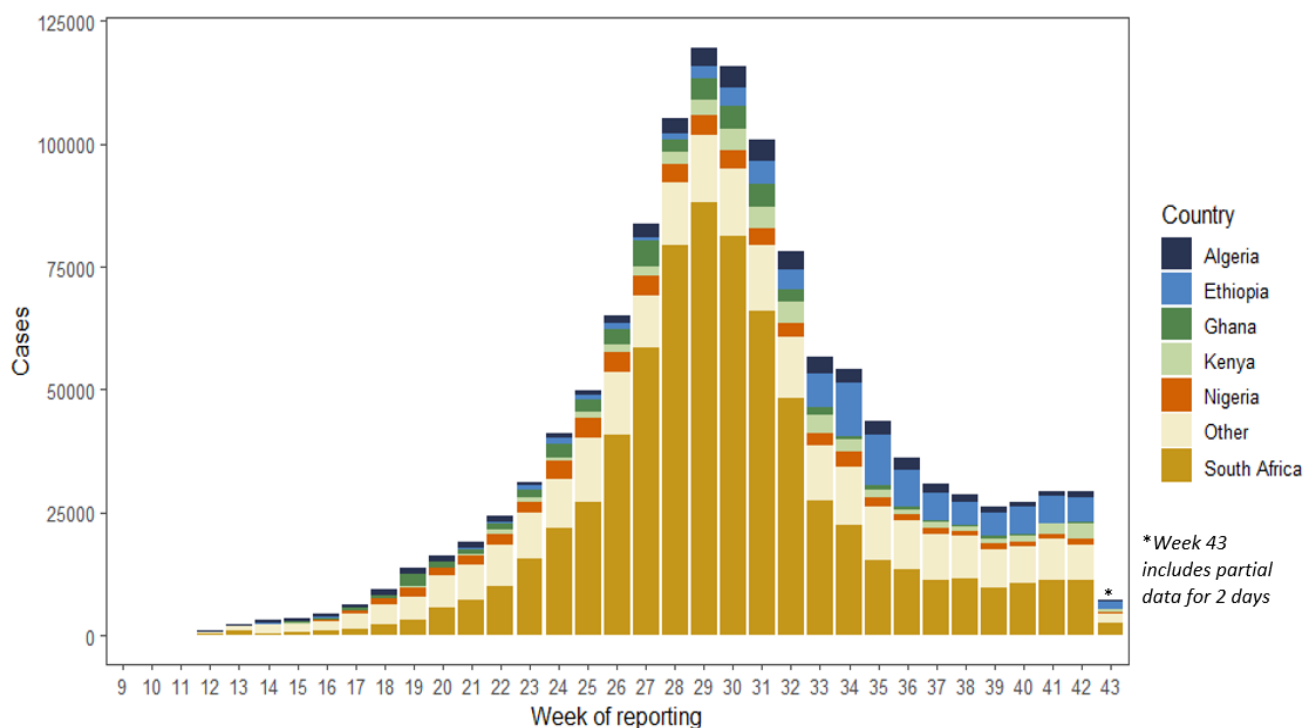


Figure 3. The distribution of confirmed COVID-19 cases, deaths and 7-day moving average for South Africa by date of reporting, 5 March – 20 October 2020 (n= 706 304)

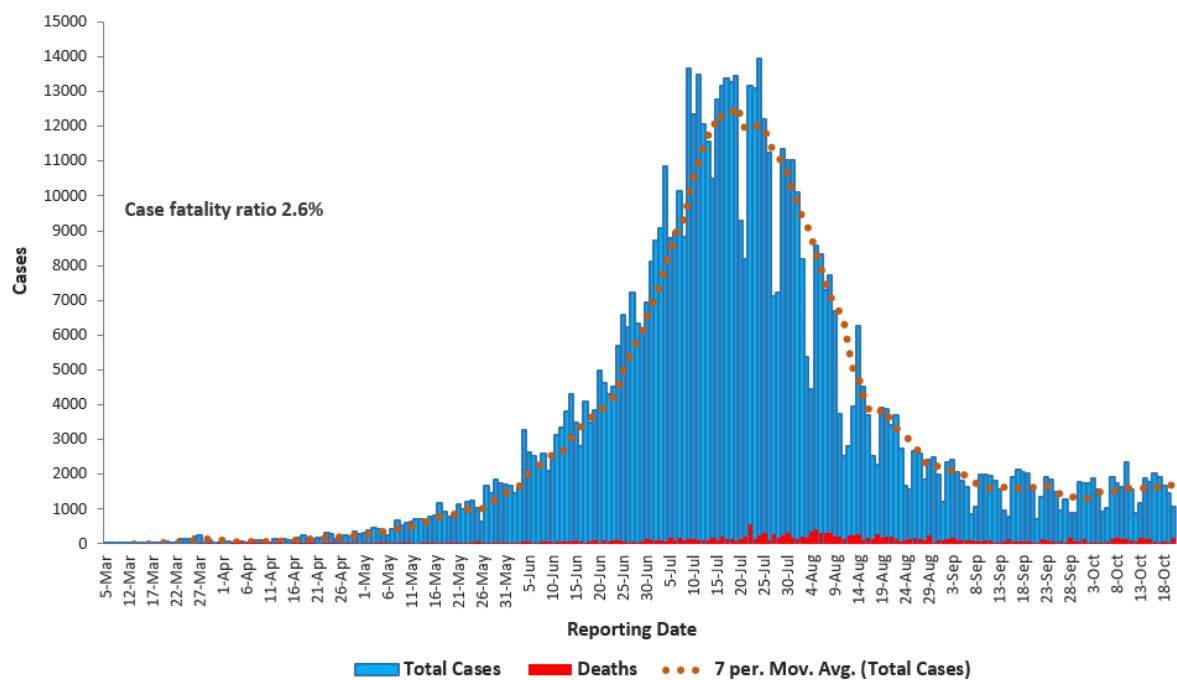
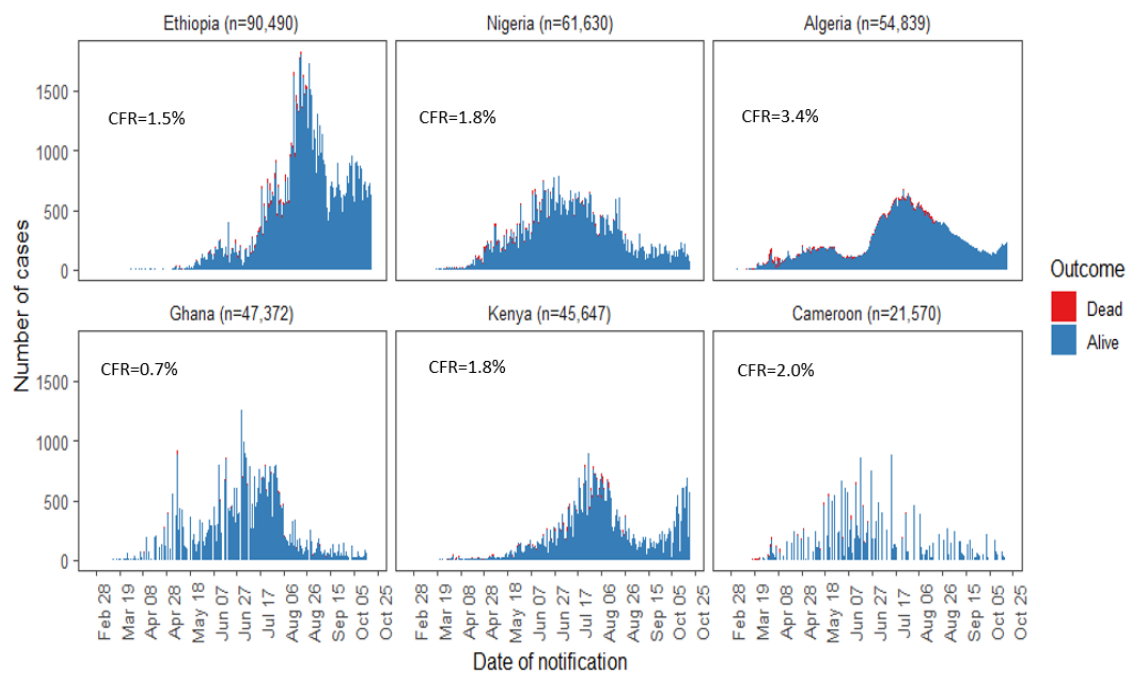


Figure 4. Epicurves showing distribution of confirmed cases and deaths with case fatality ratios of COVID-19 in the other top six reporting countries: Ethiopia, Nigeria, Algeria, Ghana, Kenya, and Cameroon, 25 February – 20 October 2020 (n= 321 548)



## 2. Global update

As of 20 October 2020, at 10:38 CET, a total of 40 455 651 confirmed cases, including 1 119 431 deaths (CFR 2.8%), 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 (8 124 633), India (7 651 107), Brazil (5 250 727), the Russian Federation (1 431 635), Argentina (1 002 662), Colombia (965 883), Spain (936 650), France (880 922), Peru (870 876) and Mexico (854 926).

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>.

The current figures in the African region represent 3.1% of confirmed COVID-19 cases and 2.6% of deaths reported worldwide. South Africa, the hardest hit country on the African continent, ranked 12th globally, although with relatively low numbers of deaths.

## 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 Huanan 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 continues to work closely with its 47 Member States, as well as partners, in order to implement several outbreak preparedness and response interventions.

### Cross-pillar country actions

#### Laboratory Updates

- Mozambique has received support on backlog mitigation, including re-routing samples to less busy labs and pooling samples; WHO interim guidelines and supplies for Ag RDT were received.
- The East African community, the Southern African Development Community and the Intergovernmental Authority on Development worked together with the Health Operations and Technical Expertise (HOTE) pillar on addressing testing challenges at points of entry.
- The Solidarity Trial Collaborative met to discuss ongoing sero-surveys.

- A three-level teleconference was held with the IMS of Guinea Bissau, Togo, Niger and Senegal to discuss the Ag RDT algorithm and the context in which this should be used.
- Extra RNA extraction kits are being distributed to countries experiencing shortages.
- Orientation was provided on using the Ag RDT during Senegal's Magal pilgrimage.
- Support was provided to Lesotho to develop a COVID-19 testing strategy.
- Questionnaires were sent to the ESA region and West and Central African countries to capture decentralization, testing and equipment in use.
- The interim guidance on the Ag RDT algorithm (English version) was distributed to country offices, with translations also into French and Portuguese.
- A webinar on biosafety considerations for testing COVID-19 infections, with a focus on the use of Ag RDT was provided. Training-of-trainers in biosafety/biosecurity was completed in Niger, with cascade training awaiting finance. Allocation of phase 2 diagnostics was shared with countries.
- Mapping for decentralization of laboratory testing in Democratic Republic of the Congo was updated; logistics and stock management were discussed.
- The laboratory Action Points Tracking Tool was updated and shared with SHOCROOM for compilation by IMST country focal points.
- Challenges remain around PCR laboratory supplies for many countries; the continuous need to decentralize lab testing capacities and improve turnaround time; harmonizing testing strategies to include the use of Ag RDT to supplement decentralization; continue to update the lab database; complete laboratory mapping data for some countries; collect lab data from some countries.

## **Ethiopia pillar reports**

### **Coordination**

- A draft Health Sector Disaster Preparedness and Response Guide was finalized and submitted to the National Public Health Emergency Operations Centre (PHOEC).
- Regional health boards (RHB) were supported in re-organizing the public health emergency management system at Woreda levels.
- Amhara region participated in a performance review of COVID-19 outbreak response organized by the RHB and the Amhara Public Health Institute.
- Intensified adherence to COVID-19 prevention measures were advocated during a multisectoral engagement meeting in tobacco control and non-communicable diseases (NCD) in the Amhara regions.
- In Oromia region, WHO led a high-level mission to provide guidance on strengthening the WHO regional IMT coordination of the ongoing COVID-19 response operations, partnership and continuity of essential health services.
- WHO provided technical support to a 3-day PHEM quarterly review meeting in West Shewa Zone and prepared an action plan to improve the zone's PHEM performance.
- A multi-agency (WHO, OCHA, NRC, GOAL and Christian Aid, and ZHB) coordination meeting was held in Guangua, Abaya woredas and West Guji.
- A review of the regional (Oromia) COVID-19 Emergency Preparedness and Response Plan (EPRP) was supported.

### **Surveillance**

- Sessions on COVID-19 epidemiology and surveillance were facilitated for 17 health workers in Benishangul Gumuz, jointly organized by the Ethiopian Mental Health Association and the Federal Ministry of Health.
- WHO is monitoring surveillance activities in the regions and providing guidance for active case search in health facilities, community-based surveillance, case investigation, targeted contact tracing and laboratory testing.
- Mentorship orientation for more than 30 health workers from health facilities in Somali, Benishangul Gumuz and SNNP regions was provided for active case search, sentinel surveillance, contact tracing, reporting and strategies to enhance lab testing.
- Guidance was provided on harmonizing data between the case management team and the rapid response team (RRT) in Dire Dawa City Administration.

### **Point of entry (POE)**

- WHO deployed surge teams to Afar and Gambella regions to provide additional support for POE activities.
- The Elidar border screening team in Afar received guidance while processing 450 travellers.

- A joint supportive mission was undertaken to Galafi and Elidar POE to monitor adherence to COVID-19 prevention protocols and facilitate data sharing and coordination between the POE and the Afar regional PHEOC.
- WHO conducted a joint (EPHI and WHO) supportive supervision to Bole International Airport to re-assess COVID-19 precautionary measures, with feedback given to Ethiopian Airport Authorities.
- Health screening of 340 returnees from Saudi Arabia at Bole International Airport and their move to quarantine centres was monitored.
- Gambella COVID-19 IMT conducted supportive visits to five priority POE to address emerging issues observed.

### Logistics

- WHO Ethiopia delivered COVID-19 lab supplies to the Ethiopian Public Health Institute to ensure screening and strengthen surveillance; part of these supplies donated by the Republic of South Korea (through KOICA) to 24 African countries.

### Infection prevention and control (IPC)

- Amhara RHB was supported in reviewing and updating IPC workplace assessment checklists for sauna, steam and massage centres.
- WHO conducted IPC/WASH assessment using WHO scorecards at Axum University Molecular Research and Diagnostic Centre (Tigray); 33 Abay Division of Ethiopian National Defense (Amhara) and two health care facilities along the transport corridor in Abala (Afar).
- A training package for IPC/WASH was developed for schools, along with training, in collaboration with regional education bureaus, for 190 school teachers on IPC protocols in preparation for re-opening schools.
- The existing protocol for handling corpses was reviewed in the context of the new COVID-19 directive.
- A National ICU assessment was carried out using the reviewed checklist for both COVID-19 and non-COVID-19 ICUs.
- Technical support was provided on the implementation and follow-up of home-based isolation and care for COVID-19 cases in Benishangul Gumuz.

### Risk communication and community engagement (RCCE)

- WHO provided support to the RCCE team of Gambella RHB on strategies to improve RCCE at the POE in the region.
- The COVID-19 RCCE training guide for schools was reviewed and a 6-month RCCE interventions action plan was supported in preparation for return to school.
- RCCE strategies for regions with natural disasters and flooding were supported.
- Drafting of mobile SMS messages based on newly prepared and improved COVID-19 preventions directives was supported.
- Social mobilization activities were conducted at main markets in 14 woredas in Afar region.
- Health information was disseminated to 2 000 households in Dire Dawa on prevention and control of chikungunya, dengue, malaria and COVID-19.

## 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.

## 6. Conclusion

The overall case trend in the African Region has remained similar in the past two reporting periods, although still higher in comparison to the previous two weeks. The top five countries with the highest caseloads in the last month have remained the same and continue to account for the majority of new cases reported in the region.

The number of new deaths in the African region decreased by 37%, with South Africa reporting 46% of the new deaths. This large decrease in deaths is attributed to the ongoing COVID-19 related mortality audits in South Africa and reconciliation of dates of deaths. At the same time, the number of deaths also increased in Kenya by 25%.

WHO continues to encourage member states to observe all precautionary measures diligently and comprehensively in all health facilities and communities including rural and urban areas.

### Annex 1. Global and Regional time line for COVID-19 as of 23 August 2020

