

COVID-19

Situation update for the WHO African Region

22 April 2020

External Situation Report 8



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WHO AFRICAN REGION

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1. Situation update



It has been nearly two months since the first case of COVID-19 was reported in the WHO African Region and the number of cases continues to rise significantly. All Member States have been affected, with the exception of Comoros and Lesotho where no official reports of COVID-19 cases have been received to date.

Since our last situation report on 15 April 2020 ([External Situation Report 7](#)), there has been a 43% increase in the number of COVID-19 cases and a 38% increase in the number of COVID-19 deaths reported in the WHO African Region. As of 21 April 2020 (epidemiological week 17), a cumulative total of 15 394 confirmed COVID-19 cases with 716 deaths (case fatality ratio: 4.7%) have been reported across the 45 affected countries in the region. The list of affected countries and their respective number of cases and deaths is presented in **Table 1**.

Figures 1 and 2 show the daily and weekly distribution of cases by country, respectively. The number of weekly reported new cases has increased by 29% in week 16 ($n=4\,333$ cases) compared to week 15 ($n=3\,357$ cases). Although the outbreak has been ongoing for 8 weeks, the majority (78%) of cases were reported over the past four weeks. Out of the 45 affected countries, 9 (20%) reported over 500 cases, 12 (27%) reported between 100 and 499 cases and 24 (53%) reported fewer than 100 cases. Cameroon and Ghana are the latest countries to cross the 1 000 cases threshold, joining Algeria and South Africa in this group.

The most affected countries in the WHO African Region are: South Africa (3 465 cases), Algeria (2 811 cases), Cameroon (1 163 cases), Ghana (1 042 cases), Cote d'Ivoire (916 cases) and Guinea (688 cases). Together, these countries account for 66% of the cases reported in the region. Between weeks 15 and 16 an increasing trend in the weekly case incidence was observed in Algeria, Cote d'Ivoire, Ghana, Guinea and South Africa, while a decreasing trend occurred in Cameroon. Among countries with wide spread transmission, the highest case fatality ratios (CFR) were observed in Algeria (13.9%), Liberia (7.9%), Democratic Republic of the Congo (7.0%), Burkina Faso (6.5%) and Mali (5.4%). Algeria alone accounted for 55% of COVID-19 deaths reported in the region. **Figure 3** shows the distribution of cases by week of notification in the six most affected countries.

Information on sex and age is currently available for 2 854 (19%) and 2 237 (15%) cases, respectively. The male to female ratio among the confirmed cases is 1.8, and the median age is 40 years old (range: 0 - 105). The distribution of cases according to age and sex is presented in **figure 4**; older males continue to be disproportionately affected by this outbreak.

Overall, in the African continent a total of 24 137 cases and 1 171 deaths (CFR: 4.9%) have been reported as of 21 April 2020, including 15 394 cases and 716 deaths in Member States from the WHO African Region and 8 743 cases and 455 deaths in Member States from the WHO Eastern Mediterranean Region.

Table 1. Number of confirmed COVID-19 cases in the WHO African Region, 25 February – 21 April 2020 (n = 15 394)

Country	Date of first, notification to WHO	Cumulative alive	Cumulative deaths	Cumulative recovered	Total cases	CFR	New cases	New deaths
Algeria	25-Feb-20	1267	392	1152	2811	13.9%	93	8
Angola	29-Mar-20	16	2	6	24	8.3%	0	0
Benin	16-Mar-20	26	1	27	54	1.9%	0	0
Botswana	30-Mar-20	19	1	0	20	5.0%	0	0
Burkina Faso	9-Mar-20	186	38	357	581	6.5%	0	0
Burundi	31-Mar-20	6	1	4	11	9.1%	0	0
Cameroon	6-Mar-20	791	43	329	1163	3.7%	0	0
Cape Verde	19-Mar-20	65	1	1	67	1.5%	0	0
Central African Republic	14-Mar-20	9	0	5	14	0.0%	0	0
Chad	19-Mar-20	26	0	8	34	0.0%	0	0
Congo (Republic of)	14-Mar-20	143	6	16	165	3.6%	5	0
Cote d'Ivoire	9-Mar-20	600	13	303	916	1.4%	37	3
DR Congo	10-Mar-20	289	25	45	359	7.0%	9	0
Equatorial Guinea	13-Mar-20	72	0	7	79	0.0%	0	0
Eritrea	21-Mar-20	36	0	3	39	0.0%	0	0
Eswatini	13-Mar-20	15	1	8	24	4.2%	0	0
Ethiopia	13-Mar-20	95	3	16	114	2.6%	3	0
Gabon	12-Mar-20	139	1	16	156	0.6%	36	0
Gambia	18-Mar-20	7	1	2	10	10.0%	0	0
Ghana	11-Mar-20	934	9	99	1042	0.9%	0	0
Guinea	13-Mar-20	555	6	127	688	0.9%	0	0
Guinea-Bissau	25-Mar-20	50	0	0	50	0.0%	0	0
Kenya	13-Mar-20	208	14	74	296	4.7%	15	0
Liberia	16-Mar-20	86	8	7	101	7.9%	0	0
Madagascar	21-Mar-20	85	0	36	121	0.0%	0	0
Malawi	2-Apr-20	13	2	3	18	11.1%	1	0
Mali	25-Mar-20	187	14	57	258	5.4%	12	0
Mauritania	13-Mar-20	0	1	6	7	14.3%	0	0
Mauritius	18-Mar-20	76	9	243	328	2.7%	0	0
Mozambique	22-Mar-20	33	0	6	39	0.0%	0	0
Namibia	14-Mar-20	10	0	6	16	0.0%	0	0
Niger	18-Mar-20	510	20	127	657	3.0%	0	0
Nigeria	28-Feb-20	356	19	166	541	3.5%	0	0
Rwanda	14-Mar-20	70	0	80	150	0.0%	3	0
Sao Tome & Principe	6-Apr-20	4	0	0	4	0.0%	0	0
Senegal	28-Feb-20	172	5	235	412	1.2%	35	0
Seychelles	14-Mar-20	6	0	5	11	0.0%	0	0
Sierra Leone	31-Mar-20	44	0	6	50	0.0%	7	0
South Africa	5-Mar-20	2352	58	1055	3465	1.7%	165	0
South Sudan	5-Apr-20	4	0	0	4	0.0%	0	0
Tanzania	16-Mar-20	234	10	11	255	3.9%	0	0
Togo	5-Mar-20	24	6	56	86	7.0%	0	0
Uganda	21-Mar-20	20	0	36	56	0.0%	1	0
Zambia	18-Mar-20	32	3	35	70	4.3%	5	0
Zimbabwe	20-Mar-20	23	3	2	28	10.7%	3	0
Total	-	9895	716	4783	15394	4.7%	430	11

*New cases and new deaths are for the past 24 hours

Figure 1. Daily number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 21 April 2020 (n = 15 394)

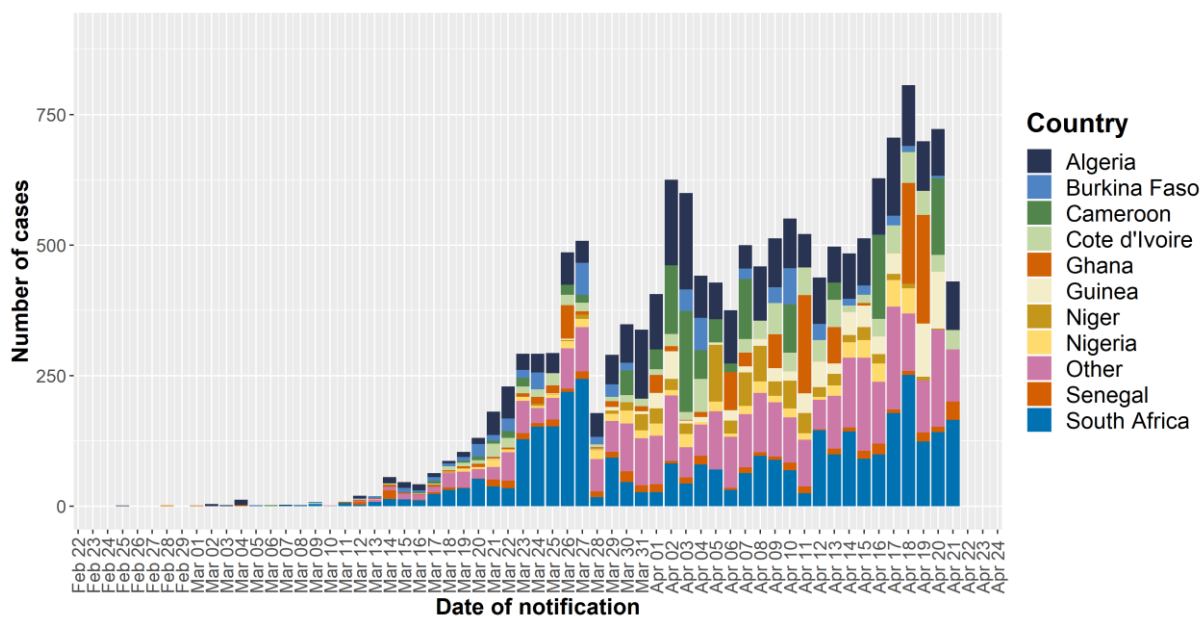
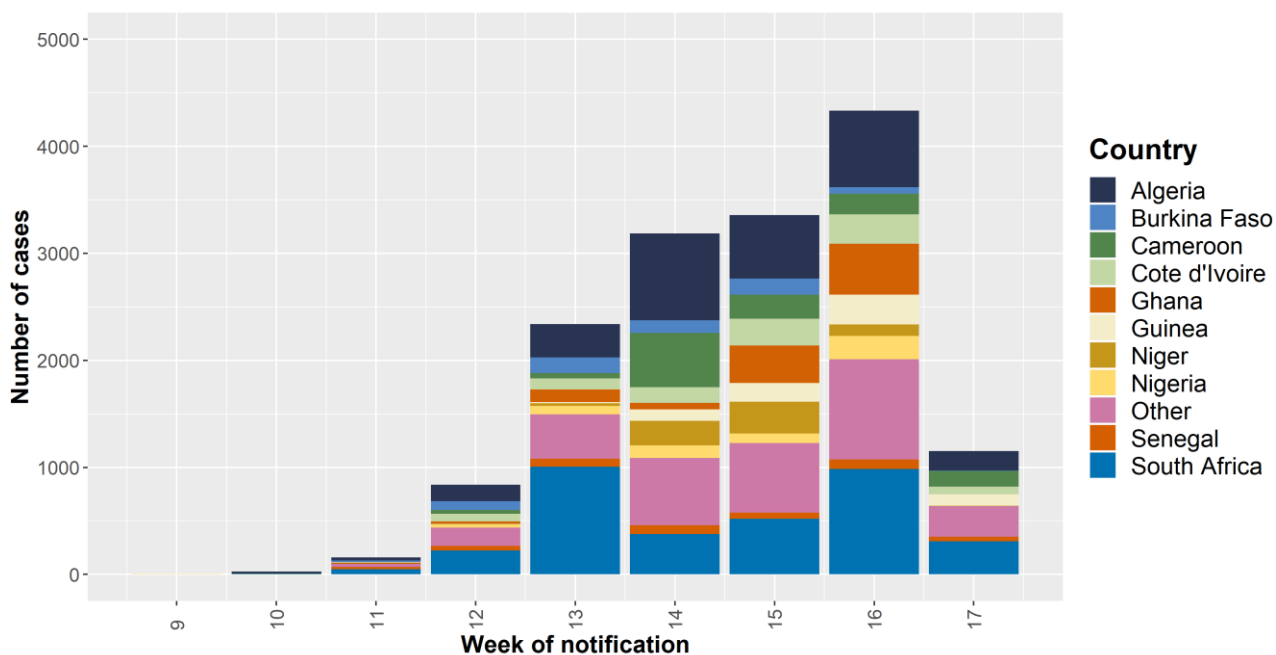
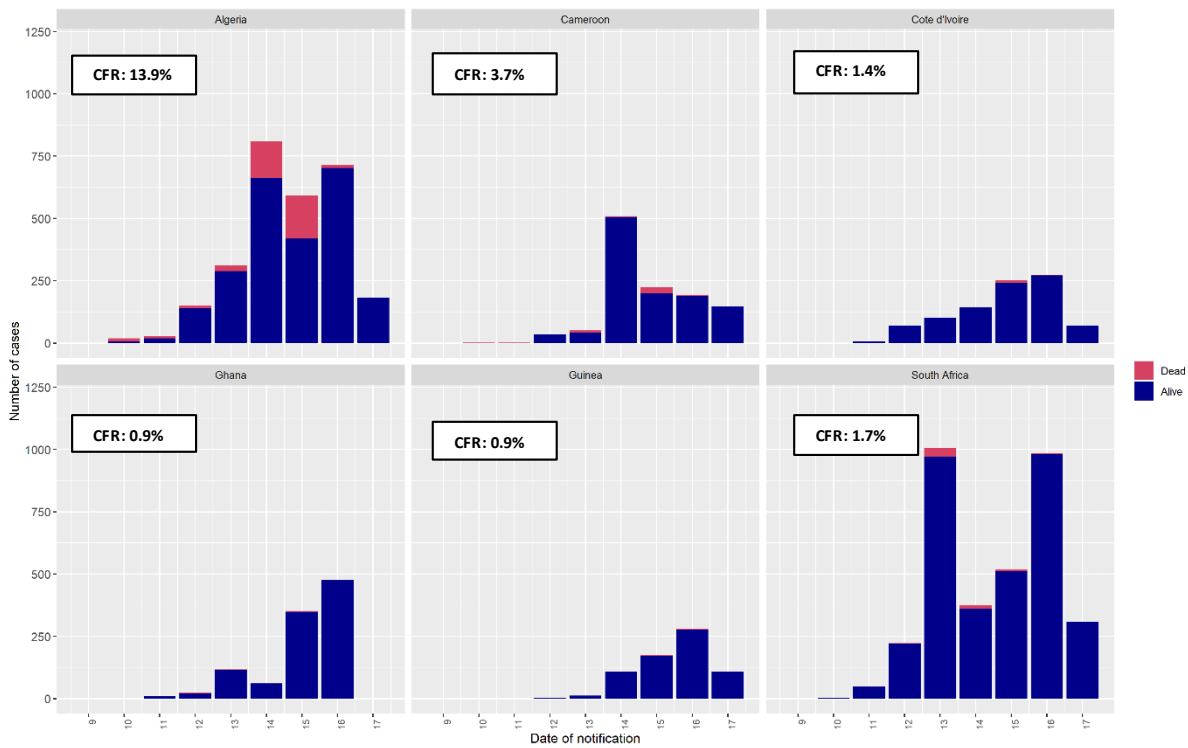


Figure 2. Weekly number of confirmed COVID-19 cases in the WHO African Region by country, 25 February – 21 April 2020 (n = 15 394)



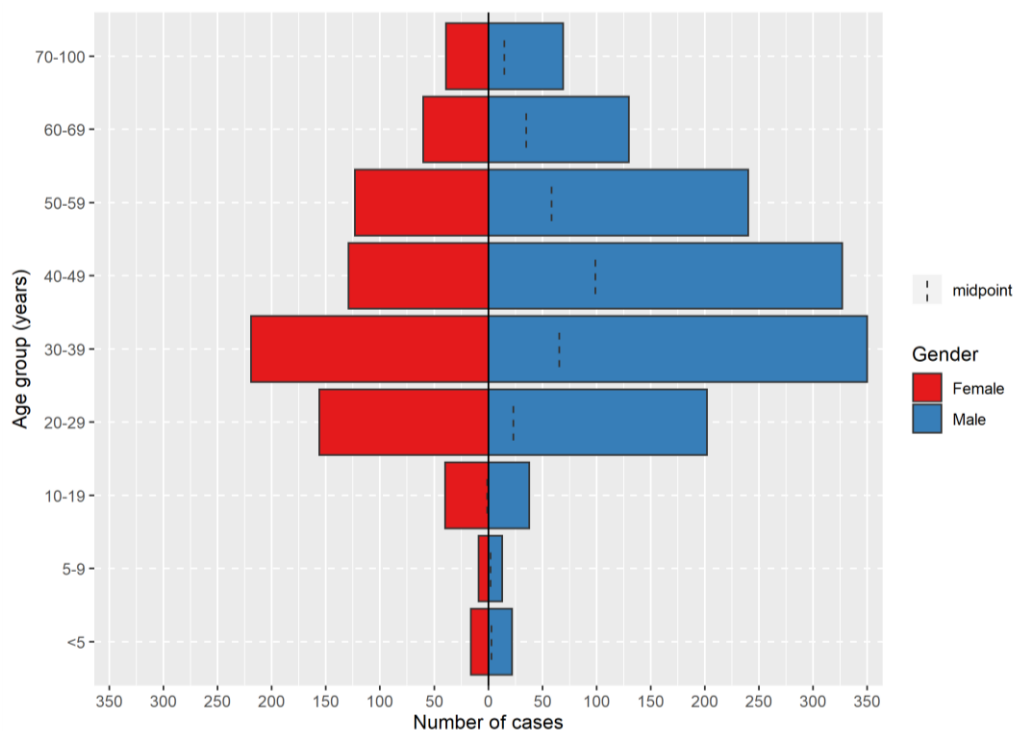
**Week 17 data is up to 21 April 2020 and is therefore partial*

Figure 3. Epidemic curves of COVID-19 outbreaks in Algeria, Burkina Faso, Cameroon, Cote d'Ivoire, Ghana and South Africa, 25 February – 21 April 2020



**Week 17 data is up to 21 April 2020 and is therefore partial.*

Figure 4. Age and sex distribution of confirmed COVID-19 cases in the WHO African Region, 25 February – 15 April 2020



2. Global update

Since the declaration of the COVID-19 outbreak on 31 December 2020, the global number of cases has surpassed the two million mark. As of 21 April 2020 at 18:00 CET, a total of **2 402 250** confirmed cases, including **163 097** deaths (CFR: 6.8%), were reported globally. Both the global number of confirmed COVID-19 cases and deaths have continued to significantly increase in the course of the past week.

As of 21 April 2020, 212 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 (751 273), Spain (200 210), Italy (181 228), Germany (143 457), The United Kingdom (124 747), France (113 513), Turkey (90 980), Iran (Islamic Republic of) (84 802), China (84 253) and the Russian Federation (52 763). All affected countries have reported new confirmed cases in the past two weeks.

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 declared the COVID-19 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 structure of the COVID-19 Incident Management Support Team at WHO AFRO has been revised and reinforced to provide more effective support to Member States and to build synergies with the coordination activities concomitantly happening at the hub levels.
- WHO AFRO is finalizing its second Strategic Response Plan for the COVID-19 pandemic, which will cover the period of April to September 2020.
- WHO AFRO will this month release a COVID-19 de-confinement strategy to guide those Member States that are considering gradually phasing out lockdown orders. This strategy will assist Member States to identify the best measures to take according to their national context.
- As several African countries have now entered the COVID-19 mitigation phase, WHO AFRO is intensifying its efforts to support these countries.
- WHO AFRO will soon release a COVID-19 training package on the decentralization of the response to the district level.

Surveillance

- WHO AFRO has developed a training on COVID-19 surveillance and contact tracing at district level.
- WHO AFRO has developed technical guidance on contact tracing implementation as well as a user guide for the contact tracing tool.
- WHO AFRO is closely monitoring signals on potential confirmed COVID-19 cases in Comoros.
- WHO AFRO is piloting the use of the polio GIS platform for contact tracing in Republic of the Congo.

Infection Prevention and Control

- WHO AFRO has developed a control assessment framework of healthcare facilities.
- Since the beginning of the pandemic:
 - **7 127** HCW (948 more than last week) were trained in Algeria (33), Angola (303), Burkina Faso (757), Cameroon (534), Congo (407), Cote d'Ivoire (1 512), DRC (246), Kenya (32), Senegal (1 079), South Africa (1 800) and Tanzania (424).
 - **2 122** households (476 more than last week) were disinfected in Burkina Faso (406), Cameroon (1 231), DRC (162) and Senegal (128).
 - **993** IPC trainers (331 more than last week) were trained in Angola (687), Burkina Faso (69), Cameroon (4), Congo (12), Cote d'Ivoire (12), DRC (51), Ethiopia (2), Gabon (2), Ghana (1), Kenya (34), Madagascar (2), Malawi (2), Mali (1), Mozambique (2), Namibia (2), Nigeria (6), Senegal (30), Uganda (2), Zambia (1) and Zimbabwe (1).
 - **179** healthcare facilities (87 more than last week) have been disinfected in Angola (1), Burkina Faso (83), Cameroon (17), Congo (6), Cote d'Ivoire (13) and DRC (50)
 - **112** COVID-19 treatment centres (two more than last week) have been assessed across the region in Angola (7), Burkina Faso (3), Cameroon (17), Congo (4), DRC (8), Kenya (4), Senegal (13), South Africa (47) and Tanzania (9).

Laboratory

- WHO AFRO has completed the mapping of diagnostic platforms in the region
- The procurement of diagnostic reagents for high throughput platforms has been initiated so as to increase the testing capacity of countries.
- WHO AFRO continues to work with partners to provide support to countries by mapping expertise and increasing access to training tools.
- There are continued challenges with global supplies of reagents, which are affecting regional capacity to test for SARS-CoV-2.

Case management

- On 16 April 2020, WHO AFRO worked closely with WHO Country Offices in Burkina Faso and Ethiopia to facilitate the arrival of medical teams from China to support COVID-19 case management.
- On 17 April 2020, WHO AFRO organised a 3-hours interactive virtual training session on the provision of psycho-social support for nurses caring for COVID-19 patients. Overall, 310 participants from Ministries of Health, WACN and ESCASOP attended the session; participants included nurses, midwives, medical officers, and allied health workers.
- On 17 April 2020, WHO AFRO organised a 3-hours interactive virtual training session on the design of COVID-19 treatment centres. Overall, 326 participants attended including health managers and planners, architects, engineers, logistics staff, water and sanitation staff, and partners.

Risk Communication

- WHO AFRO has distributed its guidance on physical distancing to all Member States.
- The Democratic Republic of Congo, Sierra Leone, South Sudan and Zimbabwe are using mobile vans to disseminate messages on hand washing, physical distancing and coughing etiquette.
- Member States are partnering with journalists and local radio and television stations to disseminate key information on COVID-19. Regular updates are provided to the public through press releases and daily updates.
- In Gambia, Senegal, South Sudan and Zimbabwe, community health workers continue to engage communities to adopt preventive measures.

Logistics

- The solidarity flight distribution supported by WHO and Jack Ma Foundation is progressing well. As of 21 April 2020, 42 (81%) of the 52 targeted countries have been served.
- The regional forecasting of critical items for COVID-19 response is in process (PPE, laboratory reagents and medical equipment).
- On 21 April 2020, the UN COVID-19 Supply Chain Task Force (Global Level) released an operating model to address current international supply and transport challenges. A centralized global procurement model has been made accessible to partners involved in the COVID-19 response at country level.

Human Resources

- Since the outbreak started, 232 experts have been deployed in 39 Countries, including AFRO, 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).
- Lockdowns and international flights restriction in most of African countries remain the main challenge for 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.
 - A total of 35 countries are implementing total refusal of entry into their territories; of these, 22 countries allow cargo, humanitarian or emergency flights.
 - Nine countries are implementing refusal of entry of passengers from high risk countries and three countries allow entry with days 14 quarantine upon arrival.
 - A total of 22 countries are implementing lockdown; nationwide lockdown in 12 countries and lockdown in affected areas in 10 countries.
 - Curfew has been put in place in eight countries.

6. Conclusion

The COVID-19 pandemic continues to expand in the WHO African Region, despite the implementation of lockdown orders in the vast majority of countries. The number of new confirmed cases continues to increase every week, albeit at a slower pace than previously, thus indicating that the peak of the outbreak has not yet been reached. Four countries (South Africa, Algeria, Cameroon and Ghana) have recorded over 1 000 cases; these countries alone account for over half (55%) of the cases reported in the region. It is essential to reinforce mitigation measures in these countries in order to reduce morbidity and mortality, maintain essential health services and minimize the disruption of public services and economic activities. At the same time, just over half (53%) of affected countries have reported fewer than 100 cases to date. In these countries, measures to contain or at least delay the spread of the outbreak need to be intensified; including active case finding, testing and isolation of cases, contact tracing, physical distancing and promotion of good personal hygiene practices. Finally, the absence of reported COVID-19 cases from Comoros and Lesotho calls for a reinforcement of the alert management system in these countries, including the intensification of active case search and testing of suspected cases. Governments need to commit local resources, supplemented by the donor communities, to support the implementation of their containment and mitigation strategies.

Annex 1. Global and Regional time line for COVID-19 as of 14 April 2020

