KEY TAKEAWAYS:

- Almost a year since the pandemic started, African Union (AU) Member States are dealing with the COVID-19’s direct and indirect effects. South Sudan and Somalia, in particular, are battling rising COVID-19 cases in addition to major security incidents. Similarly, while DRC and Guinea respond to Ebola outbreaks, they are also experiencing increases in COVID-19 cases.
- As Africa reached a grim milestone this week—surpassing 100,000 deaths from COVID-19—there have been growing reports that this number is likely a major underestimation.
- In a major change in messaging, the president of Tanzania is acknowledging for the first time that the recent rise in reported pneumonia cases and deaths there may be due to COVID-19. Still, Tanzania has no plans for vaccination rollouts and has yet to report a new case since May 2020.

DISEASE DYNAMICS (Reference: Africa Centres for Disease Control and Prevention Outbreak Brief)

- Across Africa, the total numbers of reported new cases and deaths decreased by 14% and 20%, respectively, between Epi week 7 (15-21 February) and Epi week 6 (8-14 February). Still, the continent reached a grim milestone—surpassing 100,000 reported deaths.
- Multiple recent reports highlight how the lack of COVID-19 data across Africa has misrepresented the extent of the virus’s reach. A study in Zambia found that 1 in 5 newly-deceased people in a Lusaka morgue (which accounts for 80% of deaths in the community) tested positive for COVID-19, indicating that mortality surveillance may be underestimating the severity of the epidemic. Another study from Sudan estimated that approximately 2% of total COVID-19 deaths had been counted in Khartoum.
- Reported new COVID-19 cases increased in 21 AU Member States, the majority of which are in the Central and Eastern regions. The test positivity rate remains above the 5% rate recommended by the Africa CDC in the majority of AU Member States, suggesting that many cases are going undetected.
- In Somalia and South Sudan, reported new cases have increased rapidly since early February and the 7-day averages of new cases are the highest yet reported.
  - In Somalia, where a prominent religious scholar died from COVID-19, there are reports that hospitals in Mogadishu have run out of oxygen. Ongoing conflict over delayed elections intensified between the
current administration and the opposition party in recent weeks. There were reports of gunfire in Mogadishu, which is currently in lockdown due to rising COVID-19 cases.

- In South Sudan, where 27 members of the president’s staff tested positive for the virus, the test positivity rate is 22%. The UN Human Rights Council reported the conflict situation is the “worst recorded” since the civil war began in December 2013. And, according to the World Food Program, the number of people in need of humanitarian assistance has increased by 10% since 2020 (up to 70% of their population).

- DRC, which declared an Ebola outbreak on 7 February, sustained a 20% increase in new reported cases and reported a very high test positivity rate of 31%. Guinea, which also declared an Ebola outbreak on 14 February and is tackling measles and yellow fever outbreaks, reported a 105% increase in COVID-19 cases with a test positivity rate of 9%.

- Reported new cases decreased by 20% in the Southern region; however, cases increased by 56% in Namibia where the test positivity rate is above 15%.

- On 21 February, Tanzania’s president appeared to acknowledge that COVID-19 was a problem and called on people to wear face masks, although the AU Member State has not reported any new cases since April 2020. The president’s statement came after WHO called on Tanzania to start reporting COVID-19 cases, implement public health measures and prepare for vaccinations.
  - In news and on social media, there have been growing reports in recent weeks of increased deaths from respiratory illnesses in Tanzania. On 17 February, it was reported that the vice president of Zanzibar died at a hospital in Dar es Salaam, from what is suspected to be COVID-19 (although his cause of death was not officially announced).
  - In February alone, there were 293 posts mentioning pneumonia on social media in Tanzania. One Twitter user commented, “My timeline and groups are inundated with obituaries, deaths caused by ‘severe pneumonia’.”

**Hotspot Warning Levels**

<table>
<thead>
<tr>
<th>Warning Level 0: Gray</th>
<th>Warning Level 1: Green</th>
<th>Warning Level 2: Yellow</th>
<th>Warning Level 3: Orange</th>
<th>Warning Level 4: Red</th>
</tr>
</thead>
<tbody>
<tr>
<td>No data available.</td>
<td>Relatively low spread and no evidence of a growing outbreak.</td>
<td>A moderate outbreak or the possible start of a growing outbreak.</td>
<td>A widespread or growing outbreak.</td>
<td>A very widespread or fast-growing outbreak.</td>
</tr>
</tbody>
</table>

Figure 2. Map of AU Member States by hotspot level on PERC dashboard. This system is intended to highlight AU Member States in need of attention due to an increasing or widespread outbreak. For specifics on calculations, refer to the dashboard methodology. The delineation of the international and other boundaries used on this map do not imply official endorsement or acceptance by the AU and Africa CDC. The validity of the hotspot warning levels is dependent on the data quality, reporting frequency and testing strategy being implemented within specific Member States. Interpret cautiously for countries with low testing rates.

The following Member States have reported presence of the 501Y.V2 variant (B.1.351): Botswana, Comoros, DRC, Ghana, Kenya, Malawi, Mozambique, South Africa, The Gambia and Zambia. Note, at present, global genomic surveillance is limited.

**PUBLIC HEALTH AND SOCIAL MEASURE (PHSM) HIGHLIGHTS**

For more information on the disease situation, PHSM implementation and adherence in Africa, as well as PERC survey findings, please visit the PERC website.
The table below highlights changes in PHSMs by PERC hotspot warning level based on data from the [Oxford COVID-19 Government Response Tracker](https://covid19.ox.ac.uk/). An up arrow indicates new PHSMs announced. Horizontal arrow indicates PHSMs extended. Down arrow indicates PHSMs loosened/expired.

<table>
<thead>
<tr>
<th>Country</th>
<th>PHSM Trend</th>
<th>PHSM Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Warning Level 4: Red</strong> A very widespread or fast-growing outbreak.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cabo Verde</td>
<td>↑</td>
<td>The Council of Ministers in <a href="https://covid19.ox.ac.uk/cabo-verde">Cabo Verde announced</a> that Carnival celebrations would not be permitted to take place this year due to high COVID-19 transmission. Authorities also extended income support measures as a result of the ongoing restrictions.</td>
</tr>
<tr>
<td>Eswatini</td>
<td>→</td>
<td>In lieu of resuming in-person learning, the government of <a href="https://covid19.ox.ac.uk/eswatini">Eswatini announced</a> that it will air pre-recorded lessons on public radio until lockdown measures are lifted and schools reopen.</td>
</tr>
<tr>
<td>Lesotho</td>
<td>↓</td>
<td><a href="https://covid19.ox.ac.uk/lesotho">Lesotho downgraded</a> the country’s risk level from red to orange on 3 February. As a result, some restrictions were eased, including capacity limits on funerals, and the nationwide curfew was shortened by an hour.</td>
</tr>
<tr>
<td>Libya</td>
<td>↓</td>
<td>More than half of <a href="https://covid19.ox.ac.uk/libya">Libya’s schools reopened</a> on 15 February with some preventative measures in place.</td>
</tr>
<tr>
<td>São Tomé and Príncipe</td>
<td>→</td>
<td><a href="https://covid19.ox.ac.uk/sao-tome-and-principe">São Tomé and Príncipe extended</a> a state of calamity until 2 March, maintaining restrictions including suspension of religious services and restricted travel between the islands.</td>
</tr>
<tr>
<td>Somalia</td>
<td>↑</td>
<td>All schools are <a href="https://covid19.ox.ac.uk/somalia">closed</a> in Somalia for a period of at least two weeks.</td>
</tr>
<tr>
<td>South Africa</td>
<td>→</td>
<td><a href="https://covid19.ox.ac.uk/south-africa">South Africa reopened</a> land borders and <a href="https://covid19.ox.ac.uk/south-africa">resumed</a> in-person learning; however, it also extended a nationwide state of disaster until 15 March, and maintained measures such as the nightly curfew.</td>
</tr>
<tr>
<td>Tunisia</td>
<td>→</td>
<td><a href="https://covid19.ox.ac.uk/tunisia">Tunisia extended</a> partial lockdown measures until 7 March amidst surges in new cases. This includes maintenance of a nightly curfew and a ban on public gatherings.</td>
</tr>
</tbody>
</table>

| **Warning Level 3: Orange** A widespread or growing outbreak.                                                                 |
| Chad               | →          | [Chad extended](https://covid19.ox.ac.uk/chad) the existing nighttime curfew in N’Djamena and the surrounding area until 24 February.                                                                         |
| Congo Republic     | →          | In [Congo Republic](https://covid19.ox.ac.uk/congo-republic), authorities have maintained a nightly curfew in Brazzaville and Pointe-Noire, where the majority of cases continue to be concentrated. Additionally, the state of health emergency has been extended until 6 March. |
| Gabon              | ↑          | [Gabon restricted](https://covid19.ox.ac.uk/gabon) movement into and out of capital city Libreville and lengthened a nighttime curfew by two hours, beginning at 18:00 until 5:00. |

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**Ebola outbreak**

- On 14 February, the Ministry of Health of **Guinea** announced a cluster of Ebola cases in Gouéké, a rural community close to the **Liberia** and **Côte d'Ivoire** border. The week before, an unrelated Ebola outbreak was declared in **DRC**. WHO released US$ 1.25 million to support the response in Guinea and to reinforce Ebola readiness in neighbouring AU Member States and Africa CDC is deploying response staff to the region. Health systems are already stretched thin, with both Guinea and DRC battling COVID-19 and measles outbreaks, though Ebola vaccines are being sent to both AU Member States.

**Security incidents**

- The Italian Ambassador to **DRC**, along with two other people, were killed in a convoy attack near Goma. The circumstances around the attack are unclear, however, it may negatively affect government and international organizations ability to respond to the multiple disease outbreaks (Ebola, COVID-19, Measles) **DRC** is experiencing currently.
- **Central African Republic** is experiencing ongoing instability with almost one-third of the population displaced from their homes. The latest conflict is due to the elections in December which led to 200,000 recently displaced, with the capital now under siege. Rebels are now controlling entry routes and supply deliveries are being blocked. While the hotspot analysis (in Figure 1, above) shows **Central African Republic** as a level 1, it is important to take movement restraints and limited access to health services into account when interpreting the country’s COVID-19 epidemiology.

**PHSM enforcement and protests**

- Government leaders in **Nigeria** have started to hand out 2,000 naira (US$ 5) fines to people found violating the face mask mandate and physical distancing measures. One day, a reported 46 people were tried at an outdoor court in Abuja. In January, the president signed into law that people violating COVID-19 measures could face up to six months in jail.
- In **South Africa**, the government announced that travelers entering their borders using fake negative COVID-19 test results would be denied entry and receive a five-year ban from crossing the border. Social media users in **Zimbabwe** reacted negatively to the announcement, noting that getting tested was costly and cumbersome.
- Protests against the latest COVID-19 restrictions have been ongoing in **Gabon** since 13 February, with reports of violent clashes with police. Social media users expressed frustration following a report that two protestors were shot and killed by police.

**NEWS AND SOCIAL MEDIA**

- Top hashtags associated with the vaccines, new variants, and COVID-19 in Africa in February included #RaisingTheBar and #WeChooseVaccinations. #RaisingTheBar emerged at the beginning of February, prominently being used by social media users in **Kenya**. Between 1-18 February, the hashtag was used 6.93K times. Users of the hashtags commonly encourage their peers to wash their hands, wear a face mask, and physically distance. #WeChooseVaccinations was posted 8.57K times in the same timeframe.
- While misinformation narratives were less common, the following narratives gained traction in news and on social media:
  - In **Ghana**, some government officials are encouraging people to consume more chocolate as a means to prevent COVID-19. Between February 1 and February 18, “chocolate” and “cocoa” were mentioned a total of 350 times in COVID-19 Twitter coverage geolocated to **Ghana**.
  - On social media in **Malawi**, reports circulated of “a new way of treating” COVID-19 patients by using a “water treatment.”
  - In early February, government officials in **Tanzania** launched a campaign to encourage steam therapy to fight the virus, despite having no evidence to support the approach. On social media, some users warned that the steam rooms were likely spreading the virus, rather than preventing it.

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VACCINE UPDATE

Distribution

- Vaccination continues to be distributed unequally around the globe; more than 75% of vaccine administration has been concentrated in 10 of the world’s wealthiest countries, while healthcare workers in Africa remain largely unprotected. A total of nine AU Member States have started to roll out vaccines in Africa, including Algeria, Egypt, Guinea, Mauritius, Morocco, Seychelles, and most recently, South Africa, Rwanda and Zimbabwe.
- As of 23 February, 37 AU Member States submitted National Deployment and Vaccination Plans (NDVPs) and 16 AU Member States completed purchase orders for the first wave of vaccine shipments. Ghana, Cote d’Ivoire and Uganda will be among the first AU Member States to receive a vaccine via COVAX in the coming weeks.
  - Of the 10 AU Member States that did not submit a NDVP, five are self-financing so are not required to submit an NDVP. The other five are Burundi, Central African Republic, Eritrea, Tanzania, and Madagascar (Central African Republic asked for extension until end of February).
- Next week, the AU will distribute 1 million AstraZeneca vaccine doses to 20 Member States. South Africa offered to donate its AstraZeneca vaccine to the AU for continent-wide distribution after suspending its rollout due to concerns over efficacy against the 501.V2 variant. Other AU Member States, including Malawi and Botswana, confirmed they will continue to use the AstraZeneca vaccine as planned.
- The Chinese Sinopharm vaccine has begun rollout across the continent: Equatorial Guinea received a donation of 100,000 doses; Zimbabwe received 200,000 doses and has started administering to health workers; Algeria is set to receive 200,000 doses; Senegal purchased 200,000 doses, with rollout anticipated soon.

Regulatory approvals

- WHO granted an emergency use listing for two versions of the AstraZeneca vaccine. With this approval, the COVAX facility is expected to begin delivery at the end of February. Johnson & Johnson submitted data on 19 February to WHO to be considered for an emergency use listing.
- Nigerian regulatory authorities approved the AstraZeneca vaccine for emergency use and expect the first doses to arrive in February. Private companies in Nigeria formed a coalition to raise more than USD$100 million to purchase 42 million doses for the AU Member State.

Foreign aid/assistance

- France’s Emmanuel Macron and the United Kingdom’s Boris Johnson pledged to donate excess vaccine to lower income nations and urged others to follow suit. President Biden committed to donating $4 billion to the COVAX facility to support global vaccine equity, while the EU has announced it will double its contribution to $1.2 billion. The U.S. biotech company Novavax also announced it will sell 1.1 billion doses of its vaccine to COVAX once approved.
- Russia offered to donate 300 million doses of their Sputnik V vaccine to the AU, with expected delivery in May.
- The World Bank approved support to Cabo Verde to procure and distribute enough vaccine to cover 35% of the nation’s population.

Clinical trials/research

- A new lab-based study of the Pfizer/BioNTech vaccine suggested that its neutralization power might be reduced by up to two-thirds against the 501.V2 variant; however, the real-world implications of these findings are still unclear. Researchers said that despite a potential decrease in antibody neutralization, the vaccine was still likely to effectively protect against COVID-19 caused by the variant. Scientists in South Africa are determining how this new study affects their vaccination plans, with 100,000 doses of the Pfizer vaccine expected in the first quarter, and 20 million in total. Two top government advisors have publicly backed the vaccine, arguing that despite some reduction in neutralization, the remaining neutralization potency will be sufficient to provide protection.

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