



AFRICA CENTRES FOR DISEASE CONTROL AND PREVENTION

RECOMMENDATIONS FOR STEPWISE RESPONSE TO COVID-19

BY AFRICAN UNION MEMBER STATES



BACKGROUND

The COVID-19 pandemic is rapidly expanding in Africa. To help countries respond, Africa CDC is recommending that African Union Member States tailor their response activities to the stage of their epidemic and to the African context. African countries have a greater vulnerability to massive economic, social and political disruption from many outbreak control measures being implemented in Asia, Europe and North America.

This document provides a high-level mapping of outbreak stages with guidance on how to time the minimum uptake of different interventions that have been recommended by Africa CDC, driven by evidence and science.

2 WHY STEPWISE APPROACH

Different countries across the globe have adopted different approaches in containing and mitigating harm due to COVID-19 outbreak. Some of these measures have been documented and being used to inform the global strategy on COVID-19 response. Compared to some Asian and European countries, many African countries have limited capacity to respond to a massive outbreak of the disease. It is therefore important to provide guidance to AU Member States in their response, taking note of the different policy documents already developed and circulated by Africa CDC. It is also important to conduct thorough analysis before implementing any strenuous measures.

The following fundamental questions should be answered before instituting any measures:

- 1. As a country, are the measures appropriate for the outbreak stage that you are in?
- 2. How will each measure impact the overall wellbeing of the country, not just COVID-19 incidence?
- 3. As a country, are you prepared for the social and economic consequences of each measure?

- 4. Will the measures impair support for outbreak preparedness and response by international and regional partners?
- 5. What criteria will you use to end such measures, particularly if they impair the routine healthcare system or other sectors?

Measures should be adopted with care so they don't cause severe negative impact on the social wellbeing and economic progress of countries with a growing economy. This will ensure sustainability of the response to COVID-19 by African Union Member States and avoid intervention fatigue and community revolt to the measures.

This is an interim guide with minimum recommendations for African Union Member States based on currently available evidence. Countries may choose stricter measures depending on available resources.



Map of Africa showing travel restrictions adopted by countries in response to COVID-19 as of 19 March 2020

3 STEPWISE MINIMUM RESPONSE MEASURES FOR COVID-19 EPIDEMIC PHASES

Epidemic phase	Characteristics of the phase	Response measures
PHASE 0 :	No reported cases in-country	Aim: Preparedness for COVID-19 Central coordination
No COVID-19 case		 Prepare a contingency plan for response to COVID-19 and identify potential resources to facilitate implementation of the plan Train and prepare response teams in surveillance, case management, infection prevention and control (IPC), and laboratory
		Surveillance
		 Implement enhanced surveillance at points of entry (PoE)
		 Prepare measures to support home and/or facility-based quarantine
		Laboratory
		 Prepare laboratory facilities/specimen referral systems for COVID-19 testing
		 Test all persons suspected of COVID-19 using WHO case definitions A and B¹
		 Test selected severe acute respiratory infection (SARI) samples from influenza sentinel surveillance system to identify undetected virus circulation
		IPC and clinical management
		 Prepare health facilities for severe case isolation and care
		Ensure IPC measures in hospitals and clinics

¹ https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov)

Epidemic phase	Characteristics of the phase	Response measures
		Communication and community mobilization
		 Identify trusted community channels, key opinion and faith leaders to open discussions on possible outbreak control measures
		 Sensitise the population about the outbreak control measures, including contact tracing, quarantine, and individual and community social distancing
		 Develop and implement risk communication plans
PHASE 1 :	 One or more imported cases 	Aim: Prevent sustained transmission of COVID-19
	 Limited local 	Central coordination
	transmission related to imported cases	 Activate Emergency Operations Centre (EOC) for COVID-19 and establish a response structure
_		 Activate a contingency plan for COVID-19
Early stage		Surveillance
outbreak		 Intensify surveillance at PoE
		 Conduct contact tracing (contact identification for all confirmed cases, contact listing and classification, choose contact follow up approach and do daily contact follow-up)
		Laboratory
		 Conduct rigorous case investigation to identify and home-quarantine all close contacts
		Test all persons suspected of COVID-19 using WHO case definitions A and B
		 Test all contacts who develop symptoms Test all SARI cases from the influenza sentinel surveillance system
		IPC and Clinical Management
		 Establish triage at all health facilities
		Open isolation wards in designated hospitals
		Communication and community mobilization
		 Inform the public about the case
		 Promote individual social distancing and hand/cough hygiene

Epidemic phase	Characteristics of the phase	Response measures
PHASE 2:	 Increasing numbers of imported cases 	Aim: Contain and slow transmission of COVID-19
	 Increased local spread but all cases linked to known transmission chains Outbreak clusters with a known 	 Central coordination Continue EOC for COVID-19 event and establish a response structure Activate contingency plan and prepare for COVID-19
Expanding	common exposure	Surveillance
outbreak		 Intensify contact tracing and adherence to quarantine as much as possible. If resources are limited, prioritise contacts for follow-up with the highest risk exposures, particularly health workers and vulnerable populations
		Laboratory
		 Test all persons suspected of COVID-19 using WHO case definitions A and B and all contacts who develop symptoms
		• Expand testing to all SARI cases in the natural catchment area around each cluster to identify any undetected transmission chains
		IPC and clinical management

- Intensify promotion of IPC and hand/cough hygiene
- Prepare for increasing numbers of severely affected cases
- Institute community social distancing measures (see the social distancing policy for guidance)
- Restrict mass gathering activities/events (see mass gathering policy for guidance)

Communication and community mobilization

- Strengthen support strategy to people under home quarantine to encourage adherence
- Prepare population for community social distancing measures
- Continue to provide update on the outbreak to the population

Epidemic phase	Characteristics of the phase	Response measures
Advancing outbreak	 Localised outbreaks start to merge One or more cases 	Aim: Delay transmission of COVID-19 to delay and reduce outbreak peak and burden on health services
	or deaths occur outside known transmission chains • Sustained person to person transmission – multiple generations in transmission chains • Cases are detected	 Central coordination Ensure priorities, including shifting away from contact tracing and intensified focus on rapid detection, diagnosis and isolation of cases. These should be well communicated and understood across all pillars Identify key gaps in response and seek partners and/or assistance
	among SARI case	Surveillance
	with no known exposure	 Halt contact tracing in all outbreak areas Trace contacts only in districts reporting first cases where containment might still be possible or among high-risk vulnerable contacts
		Laboratory
		• Continue to test suspects in areas without cases, and symptomatic contacts while these areas remain in phase 1 or 2.
		 Test all SARI cases presenting to hospital to aid isolation management
		 Analyse case data to review case definition
		Where possible, extend diagnostic capacity to other laboratories
		IPC and clinical management
		 Home-isolation for mild and moderate suspected or confirmed cases not requiring hospitalisation
		 Reinforce individual social distancing practices
		 Consider feasibility and acceptability of community lockdowns for areas with exponential transmission
		 Reinforce isolation and treatment facilities as much as possible
		Communication and community mobilization
		 Educate the population on social distancing and other recommended Africa CDC social distancing guidelines, including cancellation of mass gathering
		Continue to provide updates to the population

Epidemic Characteristics of phase the phase	Response measures
 PHASE 4: Widespread sustained community transmission Multiple generation transmission chains can be identified but most cases occurring outside of chains Community- wide transmission throughout all or nearly all the country 	 Aim: Reduce mortality among severe COVID-19 cases Central coordination Reinforce priorities and strive for a coordinated, well-understood response Ensure that all interventions (governmental and partners) focus on reducing burden on healthcare services, protecting populations at risk of severe disease, and reducing mortality Surveillance Halt contact tracing activities with few exceptions determined by the need and value for doing so, such as outbreaks in hospitals Use country-adapted syndromic case definition to count cases Eaboratory Test hospital admissions for differential diagnosis Test to investigate unusual or specific (e.g. health care workers) high risk clusters Test ILI and SARI specimens (or a sample of them based on resources) as a marker of COVID-19 burden

IPC and clinical management

- Set up additional temporary healthcare units/ facilities for COVID-19 cases
- Focus on activities to reduce the delay to hospital presentation to improve outcome for severe cases
- Consider lifting community lockdowns/ rescinding institution closures but approach with caution to prevent mass exposure of non-immune population

Communication and community mobilization

- Evaluate effectiveness of community social distancing measures and revise as necessary
- Provide update of the situation and policies to the population

4 KEY DEFINITIONS AND ABBREVIATIONS

Technical terms and Abbreviation	Definition or description
Contact tracing	 Identification and follow-up of persons who may have had contact with a person infected with COVID-19. The contact tracing process involves four main steps: 1. Contact identification 2. Contact listing and classification 3. Contact monitoring 4. Contact discharge
Social distancing	 This is the term applied to public health measures taken to delay and diminish transmission of COVID-19 At the individual level, social distancing involves the use of non-contact greetings, maintaining at least one metre distance between yourself and other people, and staying home when ill At the community level, social distancing involves closure of any events or settings in which people gather together, including schools, workplaces, houses of worship, and cultural, social and sports events
Isolation	 Refers to the separation of people with symptoms (i.e. sick people) to prevent spread of the infection to healthy individuals
Quarantine	 For COVID-19 public health practice, quarantine refers to separating and restricting the movement of a healthy (i.e. non-infected) person who is at risk of COVID-19
Influenza-Like Illness (ILI)	- Acute respiratory infection with measured fever of \geq 38 C°, and cough with onset within the last 10 days
Severe Acute Respiratory Infection (SARI)	- An acute respiratory infection with a history of fever or measured fever of \geq 38 C°, and cough, with onset within the last 10 days, and requires hospitalization

ADDITIONAL RESOURCES

- Africa CDC Guidance on Community Social Distancing During COVID-19 Outbreak, 17 March 2020: http://www.africacdc.org/covid-19-and-resources/guidelines-policies/covid-19-and-resources/guidelines-policies/africa-cdc-guidance-on-community-social-distancing-during-covid-19-outbreak-pdf/detail
- Africa CDC Guidance for Assessment, Monitoring, and Movement Restrictions of People at Risk for COVID-19 in Africa, 5 March 2020: http://www.africacdc. org/covid-19-and-resources/guidelines-policies/covid-19-and-resources/ guidelines-policies/africa-cdc-guidance-for-assessment-monitoringand-movement-restrictions-of-people-at-risk-for-covid-19-in-africa-pdf/ detail
- Africa CDC Policy Recommendation for African Union Meetings and Travel During COVID-19 Outbreak, 15 March 2020: http:// www.africacdc.org/covid-19-and-resources/guidelines-policies/ covid-19-and-resources/guidelines-policies/africa-cdc-policy-recommendation-for-african-union-meetings-and-travel-during-covid-19-outbreak-pdf/ detail
- Africa CDC Guidance for Contact Tracing for the COVID-19 Pandemic, 24 March 2020: http://www.africacdc.org/covid-19-and-resources/guidelines-policies/ covid-19-and-resources/guidelines-policies/detail
- European Centres for Disease Centre for Disease Prevention and Control Risk Assessment 5th Update, 2 March 2020: https://www.ecdc.europa.eu/en/ publications-data/rapid-risk-assessment-outbreak-novel-coronavirus-disease-2019-covid-19-increased
- World Health Organisation Critical preparedness, readiness and response actions for COVID-19, 19 March 2020: https://www.who.int/publications-detail/critical-preparedness-readiness-and-response-actions-for-covid-19
- Operational considerations for case management of COVID-19 in health facility and community, 19 March 2020: https://apps.who.int/iris/bitstream/handle/10665/331492/WHO-2019-nCoV-HCF_operations-2020.1-eng.pdf







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