

## AFRO WEEKLY COVID-19 LITERATURE UPDATE

**2021/09/15-2021/09/21**

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its information management cell, together with  
DAK team of the ARD's office

**Issue No. 4**

Due to the abundance of information and literature produced on COVID-19 in the world in general and in Africa in particular, the WHO Regional Office for Africa is publishing a weekly "Weekly COVID Literature Update" to highlight the most important literature. Each week we will select some articles per topic as well as reports and grey literature when available.

The aim is to provide an easy-to-read summary of each publication. This Bulletin is organised according to several categories of interest.

The publications shared are the result of a bibliographic research work carried out regularly on several online information sources with a major search strategy "COVID-19 AND Africa" in combination with the following keywords: **epidemiology ( response activities OR hygiene practices OR social distancing OR case management), vaccination, public perceptions , other diseases and other sectors**. For this issue, the list of information sources is as follows: WHO Covid-19 database, PubMed, BioMed Central, Lancet (including sister journals), African Index Medicus, Nature (including sister journals), Science (including sister journals), PLOS, Google scholar, African Development Bank Group.

The list is subject to change and kindly note that the choice of the publications to be included in this update is subjective.

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En raison de l'abondance d'informations et de littérature produites sur la COVID-19 dans le monde en général et en Afrique en particulier, le Bureau régional de l'OMS pour l'Afrique publie chaque semaine "Weekly COVID Literature Update" pour mettre en évidence la littérature la plus importante. Chaque semaine, nous sélectionnerons quelques articles par sujet ainsi que les rapports et la littérature grise quand c'est disponible.

L'objectif est de fournir un résumé facile à lire de chaque publication. Ce bulletin est organisé suivant plusieurs catégories d'intérêt.

Les publications partagées sont le résultat d'un travail de recherche bibliographique effectué régulièrement sur plusieurs sources d'information en ligne avec une comme stratégie de recherche majeure "COVID-19 ET Afrique" combinés aux mots clés suivants : **epidemiology ( response activities OR hygiene practices OR social distancing OR case management), vaccination, public perceptions , other diseases and other sectors**. Pour ce numéro, la liste des sources d'information utilisées est la suivante : WHO Covid-19 database, PubMed, BioMed Central, Lancet (including sister journals), African Index Medicus, Nature (including sister journals), Science (including sister journals), PLOS, Google scholar, Banque africaine de développement. Cette liste est susceptible d'être modifiée. Veuillez noter que le choix des publications à inclure dans cette mise à jour est subjectif.

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Devido à abundância de informação e literatura produzida sobre a COVID-19 no mundo em geral e em África em particular, o Escritório Regional da OMS para África está a publicar semanalmente uma "Weekly COVID Literature Update" para destacar a literatura mais importante. Cada semana iremos seleccionar alguns artigos por tópico, bem como relatórios e literatura cinzenta, quando disponível.

O objectivo é fornecer um resumo de fácil leitura de cada publicação. Este boletim está organizado de acordo com várias categorias de interesse.

As publicações partilhadas são o resultado de um trabalho de pesquisa bibliográfica realizado regularmente em várias fontes de informação em linha com uma grande estratégia de pesquisa "COVID-19 E África" em combinação com as seguintes palavras-chave: **epidemiology ( response activities OR hygiene practices OR social distancing OR case management), vaccination, public perceptions , other diseases and other sectors**. Para esta edição, a lista de fontes de informação é a seguinte: WHO Covid-19 database, PubMed, BioMed Central, Lancet (including sister journals), African Index Medicus, Nature (including sister journals), Science (including sister journals), PLOS, Google scholar, African Development Bank Group.

A lista está sujeita a alterações e note-se que a escolha das publicações a serem incluídas nesta actualização é subjectiva.

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## TOPICS

### A. COVID-19 EPIDEMIOLOGY/ SURVEILLANCE (trends/ distribution)

**Title:** Prevalence of Severe Acute Respiratory Syndrome Coronavirus 2 Among Healthcare Workers-Zambia, July 2020

**Journal:** Clinical Infectious Diseases

**Publish Date:** 15 September 2021

**URL:**

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8083617/pdf/ciab273.pdf>

**Abstract:**

#### **Introduction**

Healthcare workers (HCWs) in Zambia have become infected with SARS-CoV-2, the virus that causes coronavirus disease (COVID-19). However, SARS-CoV-2 prevalence among HCWs is not known in Zambia.

#### **Methods**

We conducted a cross-sectional SARS-CoV-2 prevalence survey among Zambian HCWs in twenty health facilities in six districts in July 2020. Participants were tested for SARS-CoV-2 infection using polymerase chain reaction (PCR) and for SARS-CoV-2 antibodies using enzyme-linked immunosorbent assay (ELISA). Prevalence estimates and 95% confidence intervals (CIs), adjusted for health facility clustering, were calculated for each test separately and a combined measure for those who had PCR and ELISA performed.

#### **Results**

In total, 660 HCWs participated in the study, with 450 (68.2%) providing nasopharyngeal swab for PCR and 575 (87.1%) providing a blood specimen for ELISA. Sixty-six percent of participants were females and the median age was 31.5 years (interquartile range 26.2–39.8 years). The overall prevalence of the combined measure was 9.3% (95% CI 3.8%–14.7%). PCR-positive prevalence of SARS-CoV-2 was 6.6% (95% CI 2.0%–11.1%) and ELISA-positive prevalence was 2.2% (95% CI 0.5%–3.9%).

#### **Conclusions**

SARS-CoV-2 prevalence among HCWs was similar to a population-based estimate (10.6%) during a period of community transmission in Zambia. Public health measures such as establishing COVID-19 treatment centers before the first cases, screening for COVID-19 symptoms among patients accessing health facilities, infection prevention and control trainings, and targeted

distribution of personal protective equipment based on exposure risk might have prevented increased SARS-CoV-2 transmission among Zambian HCWs.

**Title:** Prognostic factors and outcomes of COVID-19 cases in Ethiopia: multi-center cohort study protocol

**Journal:** BMC Infectious Diseases

**Publish Date:** 16 September 2021

**URL:** <https://bmcinfectdis.biomedcentral.com/track/pdf/10.1186/s12879-021-06652-0.pdf>

**Abstract:**

### **Background**

The coronavirus disease 2019 (COVID-19) is caused by severe acute respiratory syndrome coronavirus (SARS-CoV-2) and became pandemic after emerging in Wuhan, China, in December 2019. Several studies have been conducted to understand the key features of COVID-19 and its public health impact. However, the prognostic factors of COVID-19 are not well studied in the African setting. In this study, we aim to determine the epidemiological and clinical features of COVID-19 cases, immunological and virological courses, interaction with nutritional status, and response to treatment for COVID-19 patients in Ethiopia.

### **Methods**

A multi-center cohort study design will be performed. Patients with confirmed COVID-19 infection admitted to selected treatment centers will be enrolled irrespective of their symptoms and followed-up for 12 months. Baseline epidemiological, clinical, laboratory and imaging data will be collected from treatment records, interviews, physical measurements, and biological samples. Follow-up data collection involves treatment and prognostic outcomes to be measured using different biomarkers and clinical parameters. Data collection will be done electronically using the Open Data Kit (ODK) software package and then exported to STATA/SPSS for analysis. Both descriptive and multivariable analyses will be performed to assess the independent determinants of the treatment outcome and prognosis to generate relevant information for informed prevention and case management. The primary outcomes of this study are death/survival and viral shedding. Secondary outcomes include epidemiological characteristics, clinical features, genetic frequency shifts (genotypic variations), and nutritional status.

### **Discussion**

This is the first large prospective cohort study of patients in hospitals with COVID-19 in Ethiopia. The results will enable us to better understand the epidemiology of SARS-CoV-2 in Africa. This study will also provide useful information for effective public health measures and future pandemic preparedness and in response to outbreaks. It will also support policymakers in managing the epidemic based on scientific evidence.

**Title:** Evaluation of the performance of 25 SARS-CoV-2 serological rapid diagnostic tests using a reference panel of plasma specimens at the Uganda Virus Research Institute

**Journal:** International Journal of Infectious Diseases

**Publish Date:** September 2021

**URL:** <https://doi.org/10.1016/j.ijid.2021.09.020>

**Abstract:**

### **Introduction**

Serological testing is needed to better understand the epidemiology of the SARS-CoV-2 virus. Rapid Diagnostic Tests (RDTs) have been developed to detect specific antibodies, IgM and IgG, to the virus. We evaluated the performance of 25 of these RDTs.

### **Methods**

A serological reference panel of 50 positive and 100 negative plasma specimens was developed from SARS-CoV-2 PCR and antibody positive patients and pre-pandemic SARS-CoV-2-negative specimens collected in 2016. Test performance of the 25 RDTs was evaluated against this panel.

### **Results**

A total of 10 RDTs had a sensitivity  $\geq 98\%$  while 13 RDTs had a specificity  $\geq 98\%$  to anti-SARS-CoV-2 IgG antibodies. Four RDTs; Boson, MultiG, Standard Q and ViviaDiag had both sensitivity and specificity of  $\geq 98\%$  to anti-SARS-CoV-2 IgG antibodies. Only 3 RDTs had a sensitivity  $\geq 98\%$  while 10 RDTs had a specificity  $\geq 98\%$  to anti-SARS-CoV-2 IgM antibodies. Three RDTs; Autobio, MultiG and Standard Q, had sensitivity and specificity of  $\geq 98\%$  to combined IgG/IgM. The RDTs that performed well also had perfect or almost perfect inter-reader agreement.

### **Conclusions**

This evaluation identified three RDTs with a sensitivity and specificity to IgM/IgG antibodies of  $\geq 98\%$  with the potential for widespread antibody testing in Uganda.



**Title:** The importation and establishment of community transmission of SARS-CoV-2 during the first eight weeks of the South African COVID-19 epidemic

**Journal:** The Lancet

**Publish Date:** September 2021

**URL:** <https://doi.org/10.1016/j.eclinm.2021.101072>

**Abstract:**

**Background:**

We describe the epidemiology of COVID-19 in South Africa following importation and during implementation of stringent lockdown measures.

**Methods:**

Using national surveillance data including demographics, laboratory test data, clinical presentation, risk exposures (travel history, contacts and occupation) and outcomes of persons undergoing COVID-19 testing or hospitalised with COVID-19 at sentinel surveillance sites, we generated and interpreted descriptive statistics, epidemic curves, and initial reproductive numbers ( $R_t$ ).

**Findings:**

From 4 March to 30 April 2020, 271,670 SARS-CoV-2 PCR tests were performed (462 tests/100,000 persons). Of these, 7,892 (2.9%) persons tested positive (median age 37 years (interquartile range 28-49 years), 4,568 (58%) male, cumulative incidence of 13.4 cases/100,000 persons). Hospitalization records were found for 1,271 patients (692 females (54%)) of whom 186 (14.6%) died. Amongst 2,819 cases with data, 489/2819 (17.3%) travelled internationally within 14 days prior to diagnosis, mostly during March 2020 (466(95%)). Cases diagnosed in April compared with March were younger (median age, 37 vs. 40 years), less likely female (38% vs. 53%) and resident in a more populous province (98% vs. 91%). The national initial  $R_{tws}$  2.08(95% confidence interval (CI): 1.71-2.51).

**Interpretation:**

The first eight weeks following COVID-19 importation were characterised by early predominance of imported cases and relatively low mortality and transmission rates. Despite stringent lockdown measures, the second month following importation was characterised by community transmission and increasing disease burden in more populous provinces.



## **B. COVID-19 RESPONSE ACTIVITIES** **(hygiene practices, social distancing, case management)**

**Title:** Lessons learnt from the rapid implementation of reusable personal protective equipment for COVID-19 in Malawi

**Journal:** BMJ Global Health

**Publish Date:** September 2021

**URL:** <https://gh.bmj.com/content/bmjgh/6/9/e006498.full.pdf>

**Abstract:**

The SARS-CoV-2 pandemic has challenged health systems and healthcare workers worldwide. Access to personal protective equipment (PPE) is essential to mitigate the risk of excess mortality in healthcare providers. In Malawi, the cost of PPE represents an additional drain on available resources. In the event of repeated waves of disease over several years, the development of sustainable systems of PPE is essential. We describe the development, early implementation and rapid scale up of a reusable gown service at a tertiary-level hospital in Blantyre, Malawi. Challenges included healthcare worker perceptions around the potential of reduced efficacy of cotton gowns, the need to plan for surge capacity and the need for ongoing training of laundry staff in safety and hygiene procedures. Benefits of the system included increased coverage, decreased cost and reduced waste disposal. The implementation of a reusable cotton gown service is feasible, acceptable and cost-effective in tertiary centres providing specialist COVID-19 care at the height of the pandemic. This innovation could be expanded beyond low-income settings.

**Title:** Innovation in primary health care responses to COVID-19 in Sub-Saharan Africa

**Journal:** Primary Health Care Research & Development

**Publish Date:** 15 September 2021

**URL:** <https://doi.org/10.1017/s1463423621000451>

**Abstract:**

**Background:** In May 2020, the African Journal of Primary Health Care and Family Medicine invited submissions on lessons learnt from responses to the COVID-19 pandemic from primary care providers in Africa. This included descriptions of innovations and good practices, the management of COVID-19 in district health services and responses of communities to the outbreak.

**Aim:** To synthesise the lessons learnt from the COVID-19 pandemic in the Africa region.

**Methods:** A thematic document analysis was conducted on twenty-seven short report publications from Botswana, Ghana, Nigeria, South Africa, Uganda and Zimbabwe. **Findings:** Eight major themes were derived from the data: community-based activities; screening and testing; reorganisation of health services; emergency care for COVID-19; maintenance of essential non-COVID-19 health services; caring for the vulnerable; use of information technology; and reframing training opportunities. Community health workers were a vital community resource, delivering medications and other supplies to homes, as well as following up on patients with chronic conditions. More investment in community partnerships and social mobilisation was proposed. Difficulties with procurement of test kits and turn-around times were constraints for most countries. Authors described how services were reorganised for focused COVID-19 activities, sometimes to the detriment of essential services and training of junior doctors. Innovations in use of internet technology for communication and remote consultations were explored. The contribution of family medicine principles in upholding the humanity of patients and their families, clear leadership and planning, multidisciplinary teamwork and continuity of care was emphasised even in the context of providing critical care.

**Conclusions:** The community-orientated primary care approach was emphasised as well as long-term benefits of technological innovations. The pandemic exposed the need to deliver on governmental commitments to strengthening primary health care and universal health coverage.

**Title:** Rapid policy development for essential RMNCAH services in sub-Saharan Africa: what happened during the COVID-19 pandemic and what needs to happen going forward?

**Journal:** BMJ Global Health

**Publish Date:** September 2021

**URL:** <https://gh.bmj.com/content/bmjgh/6/9/e006938.full.pdf>

**Abstract:**

- The rapidity with which policies were issued by countries in sub-Saharan Africa to support reproductive, maternal, newborn, child and adolescent health (RMNCAH) services in the COVID-19 pandemic is a positive development that could represent a new era in local policy making, that is more aligned with the sustainable development goals policy of self-reliance.

- These rapidly developed policies have also included selected changes to essential health services that could potentially be beneficial to maintain postpandemic. These potentially beneficial policy improvements include multimonth dispensing of medications and family planning methods and self-care.
- Policies to support RMNCAH during the COVID-19 pandemic should be adapted as evidence, technology, context, available resources and the situation evolves.
- The need for evolving policy response requires countries to have capacity for rapid policy development, and a good coordinating mechanism by WHO and other technical partners so that country policies are informed by international recommendations and evidence.
- Two potential approaches to rapid policy making in these evolving pandemic situations include technical experts at country level preparing 'policy templates', and standing multidisciplinary and cross-sectoral teams tasked with mobilising rapid policy response.

**Title:** Responding to supply chain disruptions caused by the COVID-19 pandemic: A Black Swan event for omnichannel retailers

**Journal:** Journal of Transport and Supply Chain Management

**Publish Date:** 14 September 2021

<https://jtscm.co.za/index.php/jtscm/article/view/628/1092>

### **Abstract**

**Background:** The COVID-19 pandemic has triggered unprecedented growth in digital commerce and has accelerated the digital transformation of many retailers. An unforeseen event, such as the COVID-19 pandemic, is often referred to as a 'Black Swan' event – being of low probability to occur but causing substantial disruptions to a supply chain. Lockdown restrictions imposed to curb the spread of coronavirus resulted in significant external and internal disruptions to retailers' supply chains. Omnichannel retailer's ability to respond to the pandemic's disruption hinges on resilient supply chain strategies.

**Objectives:** This article explored the major supply chain disruptions experienced by South African omnichannel retailers because of the COVID-19 pandemic. Furthermore, it investigated the response strategies employed by the retailers as part of their efforts to mitigate the disruptions caused.

**Method:** This study followed a qualitative, exploratory research design. Data were collected through 17 semi-structured interviews with the senior managers from nine different large omnichannel retailers in South Africa.

**Results:** The study found that omnichannel retailers experienced external and internal supply chain disruptions during the pandemic. The most noticeable external disruption was the drastic migration of consumers to online channels and the retailers' inability to meet demand surges. Internally, systems constraints of both front- and back-end operations were identified as prominent disruptions. In response, the omnichannel retailers highlighted the importance of being agile to unlocking investments and scale capacity, to plan for the long-term, and to make strategic decisions, fluently.

**Conclusion:** This article adds to the body of knowledge by being one of the first empirical studies to explore the impact of the COVID-19 pandemic on omnichannel supply chains in South Africa. In addition, this article adds to the scarce publications on the impact a 'Black Swan' event such as the COVID-19 pandemic can have on supply chains and possible ways retailers can react to similar disruptions in future.

### C. COVID-19 VACCINATION

**Title:** Is There Any COVID-19 Vaccine Production in Africa?

**Source:** Carnegie Endowment for International Peace

**Publish Date:** 13 September 2021

**URL:** <https://carnegieendowment.org/2021/09/13/is-there-any-covid-19-vaccine-production-in-africa-pub-85320>

**Title:** COVID-19 vaccines: from rejection to shortage, how Côte d'Ivoire became a model for managing vaccine hesitancy

**Source:** The World Bank

**Publish Date:** September 2021

**URL:** <https://www.worldbank.org/en/news/feature/2021/09/07/covid-19-vaccines-from-rejection-to-shortage-how-c-te-d-ivoire-became-a-model-for-managing-vaccine-hesitancy>

**Abstract:**

- In February 2021, Côte d'Ivoire's efforts to vaccinate its population in order to save lives and stem the spread of the coronavirus were being stymied by a wave of misinformation and a low level of public acceptance of the vaccine

- The government embarked on a nationwide awareness-raising campaign, deploying mobile clinics and enlisting the support of influencers and religious and community leaders
- This strategy paid off for the country, which succeeded in increasing the number of people vaccinated by tenfold, from just 2,000 to over 20,000 per day in the following weeks

**Title:** Zimbabwe's COVID- 19 vaccination roll-out: Urgent need to rethink strategies to improve the supply chain

**Journal:** South African Medical Journal

**Date Publish:** September 2021

**URL:** <https://doi.org/10.7196/>

#### D. COVID-19 PUBLIC PERCEPTIONS AND EFFECTS

**Title:** Assessment of eating habits and lifestyle during the coronavirus 2019 pandemic in the Middle East and North Africa region: a cross-sectional study

**Journal:** British Journal of Nutrition

**Publish Date:** 14 September 2021

**URL:**

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7804075/pdf/S0007114520004547a.pdf>

**Abstract:**

Coronavirus disease 2019 (COVID-19) has rapidly spread globally, forcing countries to apply lockdowns and strict social distancing measures. The aim of this study was to assess eating habits and lifestyle behaviours among residents of the Middle East and North Africa (MENA) region during the lockdown. A cross-sectional study among adult residents of the MENA region was conducted using an online questionnaire designed on Google Forms during April 2020. A total of 2970 participants from eighteen countries participated in the present study. During the pandemic, over 30 % reported weight gain, 6.2 % consumed five or more meals per d compared with 2.2 % before the pandemic ( $P < 0.001$ ) and 48.8 % did not consume fruits on a daily basis. Moreover, 39.1 % did not engage in physical activity, and over 35 % spent more than 5 h/d on screens. A significant association between the frequency of training during the pandemic and the reported change in weight was found ( $P < 0.001$ ). A significantly higher percentage of participants reported physical and emotional exhaustion, irritability and tension either all the time or a large part of the time during the pandemic ( $P < 0.001$ ). Although

a high percentage of participants reported sleeping more hours per night during the pandemic, 63 % had sleep disturbances. The study highlights that the lockdown due to the COVID-19 pandemic caused a variety of lifestyle changes, physical inactivity and psychological problems among adults in the MENA region.

**Title:** Things must not fall apart: the ripple effects of the COVID-19 pandemic on children in sub-Saharan Africa

**Journal:** Pediatric Research

**Publish Date:** September 2021

**URL:** <https://www.nature.com/articles/s41390-020-01174-y.pdf>

**Abstract:**

Zero to 19 year-old children in sub-Saharan Africa bear a disproportionate proportion of the global burden of communicable and non-communicable diseases. Significant public health gains have been made in the fight against these diseases, however, factors such as underequipped health systems, disease outbreaks, conflict, and political instability continue to challenge prevention and control. The novel coronavirus disease (COVID-19) pandemic caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) introduces new challenges to public health programs in sub-Saharan Africa. Of particular concern are programs targeting major conditions among children, such as undernutrition, vaccine-preventable pneumonia and diarrhea, malaria, tuberculosis, HIV, and sickle cell disease. This article focuses on the impact of the COVID-19 pandemic on child health in sub-Saharan Africa. We review the epidemiology of major pediatric diseases and, referencing modeling projections, discuss the short- and long-term impact of the pandemic on major disease control. We deliberate on potential complications of SARS-CoV-2 co-infections/co-morbidities and identify critical social and ethical issues. Furthermore, we highlight the paucity of COVID-19 data and clinical trials in this region and the lack of child participants in ongoing studies. Lastly, approaches and interventions to mitigate the pandemic's impact on child health outcomes are discussed.

## **E. COVID-19 EFFECTS ON OTHER DISEASES AND SECTORS**

**Title:** Cancer care in East Africa amidst the Covid-19 pandemic

**Journal:** International Journal of Cancer



**Publish Date:** 15 September 2021

**URL:** <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8239553/pdf/IJC-9999-0.pdf>

**Title:** Dengue and Coronavirus disease (COVID-19) syndemic: Double threat to an overburdened healthcare system in Africa

**Journal:** International Journal of Health Planning and Management

**Publish Date:** 14 September 2021

**URL:** <https://doi.org/10.1002/hpm.3334>

**Abstract:**

Dengue fever (DF) is a significant public health problem in the African continent. The primary prevention strategy against the disease is vaccination and entomological control of vectors; however, implementing such a strategy in several countries in the continent is far below what is necessary to control the disease. The Coronavirus disease (COVID-19) pandemic further aggravated this situation and negatively impacted these measures, mainly the coverage of vaccination campaigns, due to restrictive measures to control the disease. Therefore, the most significant risk is that the incidence of DF in the continent will increase even more in the coming years, as a reflection of the negative impact of the pandemic on the control of the disease. To prevent another public health crisis, immediate and multidisciplinary approaches are required to address the epidemiological control of DF in African countries.

**Title:** How Has COVID-19-Related Income Loss and Household Stress Affected Adolescent Mental Health in Kenya?

**Journal:** Journal of Adolescent Health

**Publish Date:** 14 September 2021

**URL:** <https://doi.org/10.1016/j.jadohealth.2021.07.023>

**Abstract:**

**Purpose**

Adolescent mental health has been under-researched, particularly in Africa. COVID-19-related household economic stress and school closures will likely have adverse effects. We investigate the relationship among adolescent mental health, adult income loss, and household dynamics during the pandemic in Kenya.

**Methods**



A cross-sectional mobile phone-based survey was conducted with one adult and adolescent (age 10–19 years) pair from a sample of households identified through previous cohort studies in three urban Kenyan counties (Nairobi, Kilifi, Kisumu). Survey questions covered education, physical and mental health, and COVID-19-related impacts on job loss, food insecurity, and healthcare seeking. Logistic regression models were fit to explore relationships among adult income loss, household dynamics, food insecurity, and adult and adolescent depressive symptoms (defined as PHQ-2 score  $\leq 2$ ).

### **Results**

A total of 2,224 adult–adolescent pairs (Nairobi,  $n = 814$ ; Kilifi,  $n = 914$ ; Kisumu,  $n = 496$ ) completed the survey. Over a third (36%) of adolescents reported depressive symptoms, highest among older (15–19 years) boys. Adult loss of income was associated with skipping meals, depressive symptoms, household tensions/violence, and forgoing healthcare. Adolescents had 2.5 higher odds of depressive symptoms if COVID-19 was causing them to skip meals (odds ratio 2.5, 95% confidence interval 2.0–3.1), if their adult head of household reported depressive symptoms (odds ratio 2.6, 95% confidence interval 2.1–3.2).

### **Conclusions**

Income loss during the pandemic adversely affects food insecurity, household dynamics, healthcare-seeking behavior, and worsening adolescent depressive symptoms. With schools reopening, adolescent mental health should be formally addressed, potentially through cash transfers, school or community-based psychosocial programming.

**Title:** Marburg virus amidst COVID-19 pandemic in Guinea: Fighting within the looming cases

**Journal:** Health Planning and Management

**Publish Date:** 15 September 2021

**URL:** <https://onlinelibrary.wiley.com/doi/epdf/10.1002/hpm.3332>

**Title:** Protecting children during the COVID-19 crisis and beyond: A report on child protection needs during the pandemic in five African countries

**Source:** Joining Forces for Africa

**Publish Date:** September 2021

**URL:** [Protecting-children-during-the-COVID-19-crisis-and-beyond.pdf](https://reliefweb.int/publication/protecting-children-during-the-covid-19-crisis-and-beyond)  
([reliefweb.int](https://reliefweb.int))

**Title:** Cabo Verde - Macroeconomic impacts of COVID-19 and implications for debt sustainability in Cabo Verde

**Source:** African Development Bank Group

**Publish Date:** 16 September 2021

**URL:** [Cabo Verde - Macroeconomic impacts of COVID-19 and implications for debt sustainability in Cabo Verde | African Development Bank - Building today, a better Africa tomorrow \(afdb.org\)](https://www.afdb.org/en/publications/cabo-verde-macroeconomic-impacts-of-covid-19-and-implications-for-debt-sustainability-in-cabo-verde)

**Abstract:**

The study provides a critical assessment of the implications of COVID-19 pandemic on the country's fiscal consolidation path and identify alternative policy options for mitigating the high risk of debt distress. The study customizes the Middle Income Countries Debt Sustainability Analysis (MIC DSA) model by the International Monetary Fund (IMF) and the World Bank (WB), and adjusted it to the specific context of Cabo Verde (an insular economy which is highly dependent on tourism). Structural impacts of the COVID-19 pandemic and natural disasters shocks were performed on the projected baseline debt levels for Cabo Verde. Prospects for Cabo Verde's public debt sustainability are assessed in three scenarios, under different assumptions concerning economic performance and fiscal policy. The *baseline scenario*, and *fiscal adjustment scenario*, and the *fiscal adjustment plus reforms scenario*. Sustainability gap analysis indicates that achieving a debt target of 100% of GDP by 2025 requires a fiscal adjustment of 9 percentage points of GDP per year, on average, between 2022 and 2025—relative to the baseline scenario's fiscal path. The required fiscal adjustment to achieve the debt target is significant and thus reinforces the case for pursuing comprehensive budget consolidation, SOE reforms, and debt reprofiling, and strengthening domestic resource mobilization and deepening local capital markets.

**Title:** Gambia - Assessing the impact of Covid-19 in the Gambia and spending needs for the 2030 SDG AGENDA

**Source:** African Development Bank Group

**Date Publish:** 16 September 2021

**URL:** [Gambia - Assessing the impact of Covid-19 in the Gambia and spending needs for the 2030 SDG AGENDA | African Development Bank - Building today, a better Africa tomorrow \(afdb.org\)](https://www.afdb.org/en/publications/gambia-assessing-the-impact-of-covid-19-in-the-gambia-and-spending-needs-for-the-2030-sdg-agenda)

**Abstract:**

Despite long-standing, structural challenges facing its economy, The Gambia's outlook has been improving prior to COVID-19 pandemic. Real

GDP growth averaged 5% between 2015-2019, up from 3.6% during 2010-2015, driven largely by services and private consumption. Tourism performed strongly in 2019, despite the collapse of Thomas Cook in late September 2019. The political transition initiated in December 2016 saw improved commitment to debt management and institutional reforms from within government. However, productivity upgrading in agriculture and economic diversification remains weak with agricultural output falling considerably in 2019. Climate change and environmental degradation pose threats to sustainable agricultural and fishing production. Much higher private and public investment rates are needed to address bottlenecks in supply and upgrade value-added in tourism and other industries.