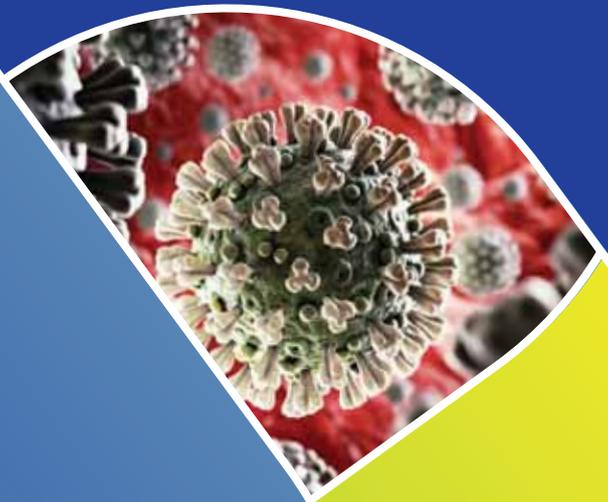




# SADC REGIONAL RESPONSE TO COVID-19 PANDEMIC

With focus on Health, Transport and Food Security Sectors

Bulletin No. 11



#COVID19SADC



## TABLE OF CONTENTS

|   | Page |
|---|------|
| Executive Summary .....   | 2    |
| 1 Global Outlook .....  | 4    |
| 2 Situation in the Africa Region .....  | 5    |
| 3 Situation in the SADC Region .....  | 5    |
| 4 Lockdowns, National Measures and Impacts on Cross Border Transport Operations ..... | 6    |
| 5 The Food Security Situation in the Region .....                                     | 6    |

## EXECUTIVE SUMMARY

The 11th Bulletin of the SADC Response to COVID-19 provides an overview of the global, continental and regional situation. As at 14 August 2020, Africa marked six months since COVID-19 was first detected on the continent. The report provides a short summary on the progression of the pandemic as well as the measures that have been put in place with the support of WHO.

COVID-19 situation continues to rise in some Member States, destabilizing the economies and other systems.

The Food and Nutrition situation in the region remains very precarious partly due to COVID-19. The report summarises the 2020 Regional Synthesis Report on Food and Nutrition Security and further provides the short, medium and long term interventions that Member States can put in place to address the dire situation in the region. Transport and Trade Facilitation remains a major challenge. Despite this, there have been remarkable achievements including the Tripartite Guidelines on Trade and

Transport Facilitation for Safe, Efficient and Cost Effective Movement of Goods and Services during the COVID-19 Pandemic which harmonise the guidelines of SADC, East African Community (EAC) and the Common Market for Eastern and Southern Africa (COMESA).

We are at a time in the pandemic where economic recovery is an imperative. Many Member States have resumed economic activity and are at a point of recovery across all sectors due to economic contraction.

## KEY RECOMMENDATIONS TO MEMBER STATES

### WATER, SANITATION & HYGIENE

- Safely manage health-care waste resulting from COVID-19 and safely managing dead bodies, as part of infection prevention measures.
- Safely managing health-care waste produced by COVID-19 cases and safely managing dead bodies.
- Prioritise district and sub-national response and interventions in order to fully realise results of their intervention at the national level.
- Engage in frequent hand hygiene using appropriate techniques.
- Implement regular environmental cleaning and disinfection practices.
- Managing excreta safely.
- In response to COVID-19, develop and implement a regional strategy on hygiene and hand washing. This should not only focus on risk communication and community engagement but also include support for provision of hand washing infrastructure and products to households.

### TRANSPORT

- Amend and align national transport guidelines in line with the Tripartite Guidelines on Trade and Transport Facilitation for Safe, Efficient and Cost Effective Movement of Goods and Services during the COVID-19 Pandemic.
- Notify about plans to introduce and or amend new taxes and fees applicable to cross border trade and transport operations through the Secretariat.
- Notify of temporary closures or changes to operating hours of points of entry through the Secretariat.
- Establish and or designate National Trade Facilitation Committees with expanded membership to include Public Health Experts in order to coordinate implementation of SADC Guidelines/SOPs.
- Share information on additional commodities that can move cross border, designated routes, way points, truck stops and fueling points to be used by commercial truck drivers and revised and new regulations affecting cross border trade and transport through the Secretariat.

### FOOD AND NUTRITION SECURITY

- Encourage crop diversification through the promotion of diversified diets, including indigenous foods. This includes species diversification in livestock production, especially small ruminants that are adapted to harsh weather conditions.
- Share information on additional commodities that can move cross border, designated routes, way points, truck stops and fueling points to be used by commercial truck drivers and revised and new regulations affecting cross border trade and transport through the Secretariat.
- Assist food and nutrition insecure populations including women and children and ensure harmonisation with national shock-responsive social protection programmes.
- Address market-related challenges for small scale farmers by improving and developing the road infrastructure to improve farmers' access to markets, suppliers for improved production.
- Strengthen mechanisms that mitigate the impact of COVID-19 from disrupting the food supply chains and associated livelihoods, by minimizing disruption to farming operations, enabling access to production inputs, critical emergency veterinary drugs and markets by farming households and communities.

### ECONOMIC RECOVERY

- Develop economic recovery plans to ensure among others improvements in macro-economic indicators, revive job creation as well as fast track government efforts towards mobilising resources to revive heavily affected sectors at national level.
- Develop resilience-building initiatives, including employment creation in rural areas, incorporating climate-smart technologies in subsidies and conservation agriculture.
- Provide an indirect income transfer to households and communities to buffer the negative economic and food security consequences of COVID-19. Where on-site distribution of school meals is not feasible, consider providing or larger take-home rations or cash-based transfers.
- Pay special attention to the rising cases of domestic violence and gender-based violence during the COVID-19 pandemic by, among others, ensuring that women and girls are protected from all forms of abuse. Shelters, places of safety and helplines for victims of abuse must be considered an essential service and remain open for use and must be afforded the necessary financial and other support.
- Furthermore, Member States are to incorporate gender perspectives in all responses to COVID-19 to ensure that actions during, and after the COVID-19 crisis aim to build more equal, inclusive and sustainable economies and societies.

# 1. GLOBAL OUTLOOK

## 1.1 Situation in numbers (by WHO Region)

|                              |                            |                        |
|------------------------------|----------------------------|------------------------|
| <b>Globally</b>              | 18 902 735 cases (278 291) | 709 511 deaths (6 815) |
| <b>Africa</b>                | 860 507 cases (12 454)     | 15 652 deaths (400)    |
| <b>Americas</b>              | 10 135 322 cases (154 118) | 376 606 deaths (4 598) |
| <b>Eastern Mediterranean</b> | 1 610 798 cases (12 412)   | 42 403 deaths (353)    |
| <b>Europe</b>                | 3 513 219 cases (25 473)   | 215 640 deaths (416)   |
| <b>South-East Asia</b>       | 2 428 584 cases (67 863)   | 50 571 deaths (999)    |
| <b>Western Pacific</b>       | 353 564 cases (5 971)      | 8 625 deaths (49)      |

## 1.2 Scientific brief on estimating COVID-19 Mortality

The transmission of COVID-19, like many infectious diseases, is frequently underestimated because a substantial proportion of people with the infection are undetected either because they are asymptomatic or have only mild symptoms and thus typically do not present at healthcare facilities. There may also be neglected or under-served segments of the population who are less likely to access healthcare or testing. Under-detection of cases may be exacerbated during an epidemic, when testing capacity is limited and restricted to people with severe cases and priority risk groups (such as frontline healthcare workers, elderly people and people with comorbidities). Cases may also be misdiagnosed and attributed to other diseases with similar clinical presentation, such as influenza.

*Differences in mortality between groups of people and countries are important proxy indicators of relative risk of death that guide policy decisions regarding scarce medical resource allocation during the ongoing COVID-19 pandemic*

This document is intended to help countries estimate Case Fatality Rate (CFR) and, if possible, Infection Fatality Rate (IFR), as appropriately and accurately as possible, while accounting for possible biases in their estimation.

An important characteristic of an infectious disease, particularly one caused by a novel pathogen like SARS-CoV-2, is its severity, the ultimate measure of which is its ability to cause death. Fatality rates help us understand the severity of a disease, identify at-risk populations,

and evaluate quality of healthcare. The full scientific brief issued by an expert panel on infectious diseases can be downloaded from this link: <https://www.who.int/publications/i/item/WHO-2019-nCoV-Sci-Brief-Mortality-2020.1>

## 1.3 Water, sanitation, hygiene, and waste management for Covid-19

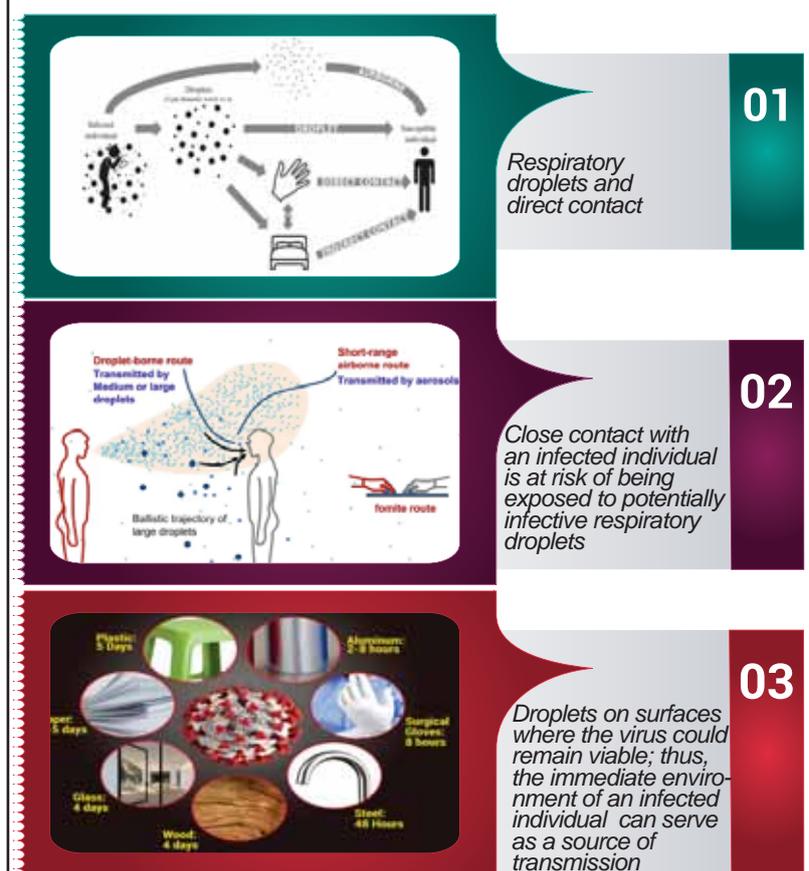
The guidance on water, sanitation, hygiene and waste management developed by the World Health Organisation (WHO) is intended for water and sanitation practitioners and providers, and health-care providers who want to know more about WASH and waste risks and practices in relation to COVID-19, and

is in this link, <https://apps.who.int/iris/rest/bitstreams/1289390/retrieve>

The provision of safe water, sanitation and waste management and hygienic conditions is essential for preventing and for protecting human health during all infectious disease outbreaks, including of coronavirus disease 2019 (COVID-19).

Ensuring evidenced-based and consistently applied WASH and waste management practices in communities, homes, schools, marketplaces, and healthcare facilities will help prevent human-to-human transmission of pathogens including SARS-CoV-2, the virus that causes COVID-19.

## 1.4 The main routes of transmission of COVID-19:



## 2. SITUATION IN THE AFRICA REGION

Africa marked six months on 14 August since COVID-19 was first detected on the continent. Preliminary analysis by the World Health Organization (WHO) found that:

- Many countries are experiencing a gradual rise in COVID-19 cases and it is difficult to discern a specific peak.
- Transmission patterns differ between countries, but more importantly within countries.
- At the onset, COVID-19 mainly affected capital cities. However, the virus is now moving from high density urban areas to informal settlements and then onward to rural areas that have a lower population density.
- In the past six months, countries on the continent have made a lot of progress.
- Many African governments were quick to impose lockdowns and key public health measures that helped to slow down the virus.
- Over time preventive, diagnostic and treatment measures have been strengthened. All countries can now diagnose COVID-19, with 14 performing over 100 tests per 10 000 populations.
- Production of oxygen, critical for severely ill COVID-19 patients,

has also considerably increased, with the number of oxygen plants in the region rising to 119 from 68 at the onset, while the number of oxygen concentrators has more than doubled to over 6000.

A recent WHO assessment based on self-reporting by 16 countries in sub-Saharan Africa found that the

*“Not only must we keep up with the evolving trends, we must also anticipate, predict and act faster to head off potentially disastrous outcomes. Areas of high transmission as well as localities with relatively fewer infections both deserve attention. In short we must be strong on all fronts.” - WHO Regional Director for Africa, Dr Matshidiso Moeti*

countries improved their capacity to respond to COVID-19.

WHO measured countries' readiness in a range of areas including coordination, surveillance, laboratory capacity, case management, infection prevention and control.

- Six months ago, the score was 62% and now it is 78% reflecting an increase in tea capacity and readiness in these critical areas. While much progress appears to

have been made at the national level, at the district level countries are generally lagging behind.

- The scores for coordination (38%), infection prevention and control (46%) and clinical care for patients (47%) are all particularly low at the district level and this requires a stronger focus of the response at the district and sub-national levels, by Member States

Member States which have expressed the urgent need for support have been supported by the WHO. South Africa has received the first surge team to support the government. Other countries are also receiving urgent assistance by mobilizing more technical experts on the ground and by scaling up training to build local capacity, particularly at the provincial and district level.

## 3. SITUATION IN THE SADC REGION

The situation in the SADC region remains on a high scale in a number of countries. It is to be noted that South Africa has begun to see a decline in the number of new cases, exhibiting a flattening curve.

As at 15 August, South Africa confirmed that the country has reached its peak of infections and has moved beyond the infection point of the curve. Table 1 below summarises the situation of COVID-19 in the SADC region ([Table 1; below](#))

| Country           | Confirmed Cases | Total death  | Recoveries    | Active        | Cases per 1M |
|-------------------|-----------------|--------------|---------------|---------------|--------------|
| Angola            | 1879            | 86           | 628           | 1165          | 57           |
| Botswana          | 1214            | 3            | 80            | 120           | 515          |
| Comoros           | 403             | 7            | 379           | 17            | 462          |
| DRC               | 9678            | 244          | 9705          | 731           | 108          |
| Eswatini          | 3745            | 69           | 2268          | 1408          | 3224         |
| Lesotho           | 903             | 25           | 271           | 607           | 421          |
| Madagascar        | 13724           | 166          | 12232         | 1326          | 494          |
| Malawi            | 5026            | 157          | 2623          | 2246          | 262          |
| Mauritius         | 346             | 10           | 334           | 2             | 272          |
| Mozambique        | 2791            | 19           | 1136          | 1636          | 89           |
| Namibia           | 3907            | 35           | 2352          | 1520          | 1534         |
| Seychelles        | 127             | 0            | 126           | 1             | 1290         |
| South Africa      | 583653          | 11677        | 466941        | 105035        | 9826         |
| Tanzania          | 509             | 21           | 183           | 305           | 9            |
| Zambia            | 9186            | 260          | 8065          | 861           | 498          |
| Zimbabwe          | 5176            | 130          | 2047          | 2999          | 348          |
| <b>Total SADC</b> | <b>642267</b>   | <b>12909</b> | <b>509370</b> | <b>119979</b> | <b>1963</b>  |



# Regional Guidelines for the harmonisation and facilitation of movement of critical goods and services across SADC during the COVID-19 pandemic

<https://www.sadc.int/issues/covid-19/>



GRAPHICS COURTESY OF ALLFREEDOWNLOADS

## 4. LOCKDOWNS, NATIONAL MEASURES AND IMPACTS ON CROSS BORDER TRANSPORT OPERATIONS

On 23rd June 2020, the SADC Council of Ministers approved the revised Regional Guidelines on Harmonization and Facilitation of Cross Border Transport Operations across the Region, and Regional Standard Operating Procedures for the Management and Monitoring of Cross Border Road Transport at Designated Points of Entry and Covid-19 Checkpoints. The Guidelines aim to balance, realign, harmonise and coordinate COVID-19 response measures with the requirements for trade and transport facilitation; and promote safe trade and transport facilitation for economic growth and poverty alleviation in the SADC region.

### 4.1 Notification of amendments to national regulations in line with the SADC Guidelines

Some Member States have started amending national regulations pertaining to owners of trucking and freight companies. The amendments entail;

- Ensuring that drivers and operators are tested prior to journeys to any other country at their own cost.
- Repatriating and quarantining drivers and operators that may be found to be infected in other countries at their own costs.

### 4.2 Cross Border Road Transport Operations

- Serious border delays are still occurring to trucks on cross border trips as countries are still taking measures to fully comply with the SADC and Tripartite Trade and Transport Facilitation Guidelines and Standard Operating Procedures for the Movement of Persons, Goods and Services across the region during COVID-19 Pandemic.
- Further delays are caused by closure of border agencies offices, such as Customs offices, when either a member staff of suspected cases of COVID-19 have accessed the offices and the offices have to be fumigated and disinfected before they can be opened for service again.
- The delays result in higher transport cost and commensurate increase in price of goods and services to the consumers.
- Botswana, Namibia and Zambia have made progress in preparations for piloting the Corridor Trip Monitoring System (CTMS) on sections on the Trans Kalahari, North - South Corridors and the Walvis Bay - Ndola - Lubumbashi Corridors. Transport operators in the countries have started up-loading operator, driver and vehicle information onto the CTMS. The CTMS was developed

to facilitate sharing of driver wellness including COVID-19 test results, driver, vehicle and load information and to facilitate tracking of cross border movements and where required contact tracing.

## 5. THE FOOD SECURITY SITUATION IN THE REGION

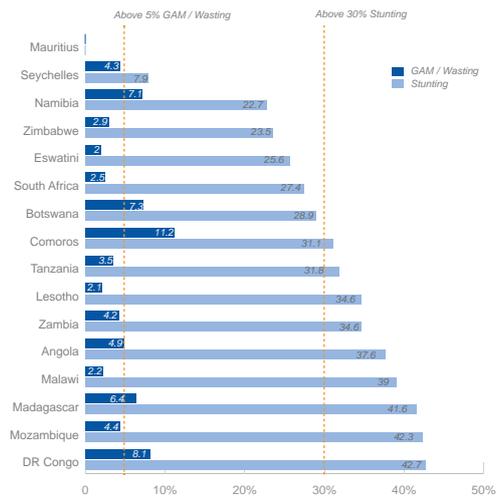
The SADC 2020 Synthesis Report on the State of Food and Nutrition Security and Vulnerability in Southern Africa which was released in July 2020 reveals a precarious food and nutrition security situation, in the face of COVID-19 as illustrated on the Regional food and nutrition insecurity snapshot tables on **page 7**.

## Regional Vulnerability Assessment and Analysis (as of July 2020)

Close to 44.8 million people in both urban and rural areas of Southern Africa are food insecure due to multiple shocks and stressors. Nine SADC Member States are also reporting stunting rates above 30%, and micronutrient deficiencies are widespread. Yet the full impact of COVID-19 and the lockdown which has contributed massively to already pervasive poverty can not yet be fathomed. The urban poor have been suffering since the very start of the lockdown, as they rely wholly on the market for their food.

The region's 2020 maize harvest is expected to have increased by at least 8% from last year. However, poor rainfall and economic challenges are expected to see Zimbabwe experience one of its highest cereal harvest deficits of about 52% of national requirements. Dry conditions also affected production in Eswatini, Lesotho, south-eastern Angola, southern Madagascar and Mozambique and most of Zimbabwe. Rural food insecurity is expected to peak between November.

### Global acute malnutrition and stunting prevalence



### Cereal balance sheet (% change in 2020)



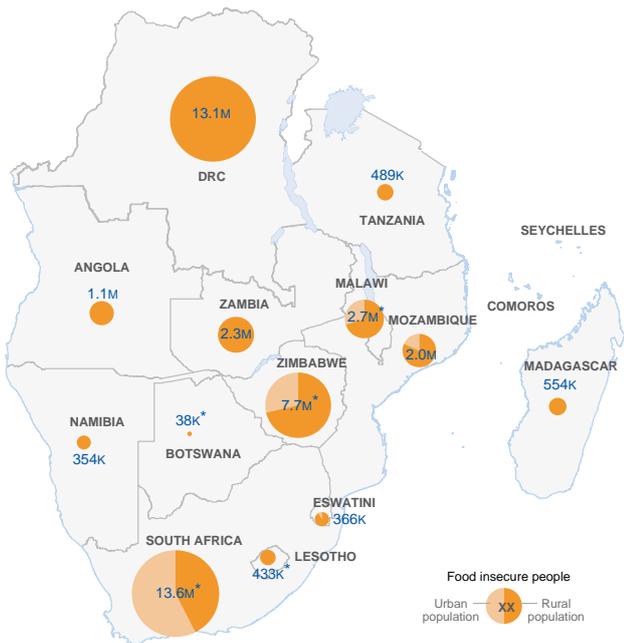
**44.8M**  
FOOD INSECURE PEOPLE

**18.7M**  
STUNTED CHILDREN

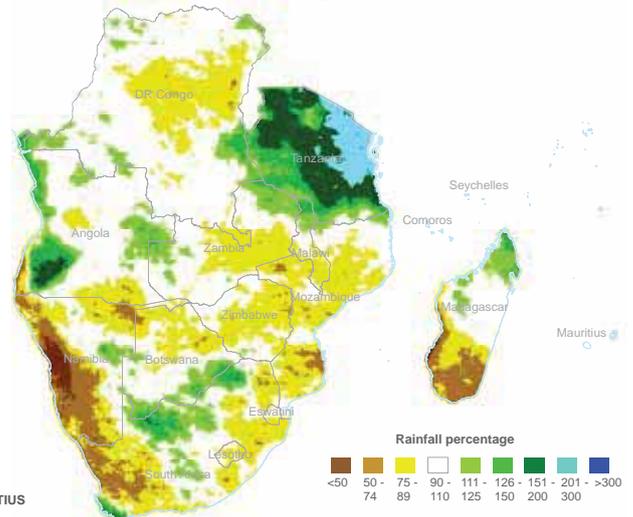
**2.3M**  
CHILDREN REQUIRE SEVERE ACUTE MALNUTRITION (SAM) TREATMENT

**8%**  
2020/21 INCREASE IN MAIZE PRODUCTION

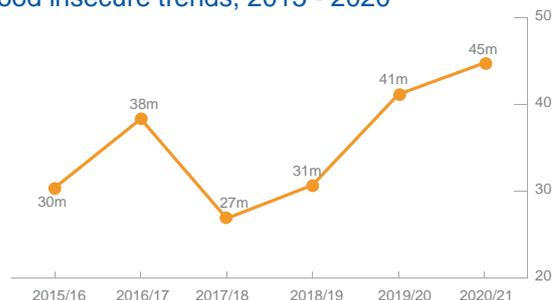
### Food insecure population



### Rainfall as percent of average, (Oct 2019 - Mar 2020)

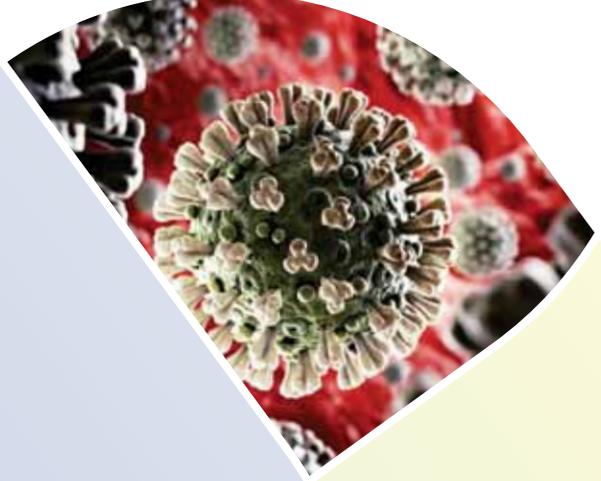


### Food insecure trends, 2015 - 2020\*\*



\* Food insecurity data based on NVAC assessments and forecasts

\*\* Figures are mainly based on rural assessments, with few countries also conducting targeted urban assessments



**1 REGION, 16 NATIONS WORKING TOWARDS A COMMON FUTURE**



[www.sadc.int](http://www.sadc.int)



[sadc\\_secretariat](https://www.instagram.com/sadc_secretariat)



[facebook.com/sadc.int](https://www.facebook.com/sadc.int)



[@SADC\\_News](https://twitter.com/SADC_News)



[prinfo@sadc.int](mailto:prinfo@sadc.int)



[youtube.com/sadc.int](https://www.youtube.com/sadc.int)



ANGOLA



BOTSWANA



UNION OF COMOROS



DEMOCRATIC REPUBLIC OF CONGO



ESWATINI



LESOTHO



MADAGASCAR



MALAWI



MAURITIUS



MOZAMBIQUE



NAMIBIA



SEYCHELLES



SOUTH AFRICA



UNITED REPUBLIC OF TANZANIA



ZAMBIA



ZIMBABWE

## ABOUT SADC

The Southern African Development Community (SADC) is an organisation founded and maintained by countries in southern Africa that aim to further the socio-economic, political and security cooperation among its Member States and foster regional integration in order to achieve peace, stability and wealth. The Member States are: Angola, Botswana, Union of Comoros, the Democratic Republic of Congo, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, United Republic of Tanzania, Zambia and Zimbabwe.

Information in this publication may be reproduced, used and shared with full acknowledgement of the SADC Secretariat.

Southern African Development Community (SADC), SADC House, Plot No. 54385  
Central Business District, Private Bag 0095, Gaborone, Botswana  
Tel: +267 395 1863, Fax: +267 397 2848/3181070, Website: [www.sadc.int](http://www.sadc.int)  
Email: [prinfo@sadc.int](mailto:prinfo@sadc.int) or [registry@sadc.int](mailto:registry@sadc.int) or [webmaster@sadc.int](mailto:webmaster@sadc.int)

@2020 SADC Secretariat