



**Reporting Period: 1-31 August 2020**

# East and Southern Africa Region

## COVID-19 Situation Report No. 7

United Nations Population Fund



### Regional Highlights

- COVID-19 cases continue to be reported in all countries across the region, totalling over 800,000. The confirmed number of new cases has significantly reduced, with only 175,000 new cases reported during the month of August, down from June and July, when the numbers of cases were doubling every month.
- South Africa, which has the highest caseload, reported a significant drop in new cases. Daily new cases have decreased to under 3,000 from previous averages of about 13,000. The Government further eased restrictions allowing more sectors of the economy to open in an attempt to ease the socio-economic impact of COVID-19.
- Although August has seen a reduction of new cases in most countries, the limited testing capacity and contact tracing makes it difficult to ascertain the exact phase of the pandemic.
- Ethiopia continues to report an increased number of new infections, and the small island nations of Mauritius and Seychelles, which had gone for prolonged periods without new cases, reported new infections.
- In Southern Africa alone, over 45 million people are food insecure with 7 million estimated to be at crisis level due to prolonged drought and social and economic challenges, further exacerbated by the current African migratory locust invasion. With food security as the primary focus, women and girls are less likely to pay attention to preventive measures against COVID-19 and their sexual and reproductive health.
- In Uganda and Tanzania, tensions over the upcoming general elections are resulting in less attention to COVID-19 preventive measures and laxity in enforcement by authorities. Violence continues to escalate in Cabo Delgado province in Mozambique and Jonglei State in South Sudan, with humanitarian and COVID-19 responses impacted by limited access to responders.
- Personal protective equipment (PPE) for health care workers remains inadequate across all countries, with slow deliveries due to supply chain constraints. UNFPA continues to work with actors to address these supply chain challenges.
- Refugees and migrants continue to be affected by stringent border closures limiting the number of those able to seek asylum. Even those who cross borders cannot seek services freely due to fear of their illegal migration status. Sex workers across many countries face severe disruptions in income and crack-down by authorities in their places of work.
- UNFPA is working to ensure the continuity of sexual and reproductive health services and prevention and response to gender-based violence, to protect health workers, and reduce the spread and negative socio-economic impact of COVID-19.

### Situation in Numbers



**822,875** Confirmed COVID-19 Cases



**18,200** COVID-19 Deaths

Source: WHO 8 September 2020

### Key Population Groups



**16 M** Pregnant Women



**151 M** Women of Reproductive Age

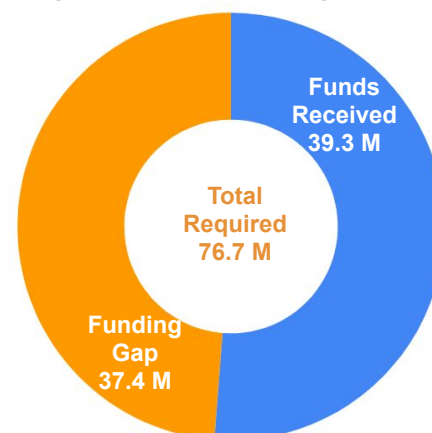


**199 M** Young People (age 10-24)



**19 M** Older Persons (age 65+)

### Funding Status for Region (US\$)



# Regional Response Summary

## Coordination and partnerships

The UNFPA response in the region aligns with the [2030 Agenda](#), [WHO global strategic preparedness and response plan](#), [UN-coordinated global humanitarian response plan](#), the [UN framework for socio-economic response to COVID-19](#), and [UNFPA COVID-19 global response plan](#).

Country offices are engaging and coordinating with the governments, UN agencies and civil society partners. In line with its global response plan, UNFPA continues to influence national COVID-19 response plans.

On the UN socio-economic response plan to COVID-19, UNFPA engagements and inputs are informed by:

- Impact on health systems and disruption of essential health service delivery, such as continuity of SRH/HIV/GBV services;
- Increased incidence of GBV demonstrated by the increased reporting through self-help lines and safe spaces; and
- Disruption of menstrual hygiene management in areas with limited access to water, sanitation and hygiene products for adolescent girls and young women.

UN regional offices have formed a “migration working group” that is working with countries and the regional economic communities to address the plight of migrants and refugees in the COVID-19 era. Agencies are deploying their regional and country assets to influence the National COVID-19 task forces to ensure migrants are not left behind in the responses.

UNFPA chairs the regional continuity of essential health services working group. The group carries out routine tracking of disruption of essential health services using quantitative, qualitative and anecdotal reporting tools including media monitoring within the region. To ensure continued focus on ongoing humanitarian crises, UNFPA is involved in other regional humanitarian coordination forums. The regional GBV working groups are also supporting the countries to focus current programmes to respond to COVID-19 and address GBV programme implementation challenges occasioned by COVID-19.

## Continuity of SRH interventions, including protection of health workforce

The regional office and the country offices have supported the continuity of essential SRH services by:

- Advocacy for continuity of essential SRH services at national and sub national levels.
- Monitoring disruptions of SRH services and providing technical support to overcome the bottlenecks in service delivery.
- Strengthening operational and logistics support to national supply chains, including providing personal protective equipment (PPE) to health workers; and facilitating additional supplies of modern contraceptives and other SRH commodities.
- Support the capacity building efforts for frontline SRH workers and health facility optimization for COVID-19 through virtual training platforms and mentorships.
- Support risk communications and community engagement initiatives aimed at reducing risk of COVID-19 transmission while addressing the increasing fear of health facilities by communities especially women and girls.

## Country examples:

- **Eswatini:** UNFPA, in collaboration with UNICEF, the Ministry of Health and civil society organisations, has launched the provision of essential SRH services through mobile clinics. In one such clinic held at Far East Textiles in Matsapha, over 600 women employed at the factory received SRH services including family planning commodities, HIV testing services, STI screening, breast cancer screening, antenatal care, GBV information and counselling as well as civil rights registration information.
- **Democratic Republic of Congo:** UNFPA donated emergency SRH kits for the provision of services to a population of 120,000 displaced persons. The kits included clean delivery kits, post rape kits for the management of 200 survivors, medicines for the management of sexually transmitted infections, equipment for management of complications of abortion and reusable equipment to support emergency obstetric care. The items were received by the Vice-Governor of the Kasai Province.
- **Kenya:** The country office (CO) donated 500 pieces each of assorted PPEs to Pumwani Maternity Hospital, and 200 mama kits for newly delivered mothers. The CO also donated four normal birth midwifery training manikins (Mama Natalie). The Pumwani Maternity Hospital is the biggest and specialized health facility dedicated to maternity and newborn care in Kenya, handling an average of 120 deliveries per day This totals to seven the number of models given to Nairobi City County to enhance skills in managing normal birth during the COVID-19 pandemic.
- **Madagascar:** While a rise in cases prompted the resumption of restrictions on movement in the capital Antananarivo and surrounding areas, UNFPA continues to provide free transport to health facilities for pregnant women for antenatal care, deliveries and other health emergencies. Access has been negotiated for the vehicles transporting the women and girls to the health facilities.

## Regional Response Summary

### Country examples (continuation):

- **Malawi:** As part of the HIV Aids Donor Group, UNFPA is participating in the revision of specific guidelines for continuation of HIV services during COVID-19. UNFPA together with all stakeholders is advocating strategic ways to continue care, especially prevention services, some of which were suspended at the facility level to ease congestion. The guidelines, which were developed in April, are now under review.
- **Namibia:** UNFPA handed over the first of three consignments of reproductive health and dignity kits to the Ministry of Health and Social Services. The donated dignity kits comprise male condoms, rape treatment kits, management of miscarriages and complications from abortions kits, as well as contraception kits, amongst others. Receiving the donation, Minister Dr. Kalumbi Shangula said this support was in line with the Ministry's strategic interventions for post-violence care and it will go a long way in addressing women's reproductive health, particularly access to emergency reproductive health and medical services.
- **South Africa:** UNFPA is supporting the continuity of essential SRH services through the provision of mobile clinics in selected districts in the provinces of Eastern Cape and Kwazulu Natal, building on networks established to support the response to floods in Kwazulu Natal in 2019.
- **South Sudan:** As part of its programme to support the expansion of midwifery services, UNFPA supported the Ministry of Health to deploy 27 midwives to the most underserved areas of the country. These midwives will ensure the continuity of SRH services and support the provision of medical services to survivors of GBV.

### Addressing gender-based violence: Continuity and adaptation of GBV services and GBV prevention and mitigation measures

The regional office and country offices are working to ensure that the needs of survivors of the rising GBV incidence are met:

- Continuing advocacy for the inclusion of GBV essential services by the national authorities during times of lockdown and other forms of restriction of movement.
- Reprogramming existing GBV initiatives such as the Spotlight Initiative to address rising prevalence of GBV during COVID-19.
- Working with the Regional GBV Emergency Advisors (REGA) based in Nairobi, the regional team is building the capacity of GBV coordinators in humanitarian contexts to ably position GBV as an issue of concern at the humanitarian coordination structures.
- Addressing the dignity needs of women and girls in quarantine centers to help them to easily reintegrate into society at the end of their quarantine period.

### Country Examples

- **Botswana:** UNFPA supported the production of the COVID-19 Key Messages Booklet, the booklet is a compilation of key messages from UN agencies, the Government of Botswana and Ministry of Health and Wellness, contextualized to suit the local context. The purpose is to use this booklet to increase public understanding of COVID-19, including efforts to prevent and respond to GBV and secure sexual and reproductive health and rights.
- **Mozambique:** UNFPA strengthened capacity of 317 health and social services providers at central and provincial levels as well as hotline operators (including 32 from the COVID-19 call center and 18 from the free Linha Verde hotline) to provide GBV-related services in the context of COVID-19. Topics include vulnerable groups, roots and consequences, how GBV can be exacerbated during and as a result of a pandemic, remote support and case management, reviewing referral pathways and adapting service provision in the context of COVID-19, and more.
- **Tanzania:** UNFPA distributed 40 Dignity Kits to women in five COVID-19 quarantine facilities in Unguja and Pemba, Zanzibar, through the Ministry of Labour, Empowerment, Elders, Women and Children (MLEEWC), in collaboration with the Ministry of Health Zanzibar, ensuring women have access to personal hygiene products despite pandemic-related movement restrictions.
- **Zambia:** Through ongoing support to drought prone Districts in Southern Province, UNFPA continued to support community outreach activities, including door-to-door sensitization on GBV as it relates to COVID-19. The sensitizations are held with strict adherence to COVID-19 prevention measures. To strengthen GBV information desks, 120 volunteers in two target districts received mentorship in relation to prevention of sexual exploitation and abuse (PSEA) and GBV risk identification and protection mechanisms including COVID 19 aimed at reducing GBV incidence and COVID-19 cases.

### Ensuring the supply of modern contraceptives and other reproductive health commodities

The regional office supplies team continues to work with the country offices to ensure uninterrupted availability of modern contraceptives and reproductive health supplies:

- Closely monitoring family planning and reproductive health (RH) commodity stocks in all countries and providing technical support to address any impending stockouts through redistribution from low consumption countries or any other means.
- Support resource mobilisation for procurement of commodities including PPE for health care providers and community-based distributors by country offices.
- Prepositioning family planning and reproductive commodities to avert any shortages arising out of logistical challenges in moving commodities.
- Providing technical support to country offices, implementing partners and Ministries of Health on supply forecasting, distribution and rational use during the COVID-19 pandemic.

#### Country Examples

- **Lesotho:** UNFPA provided family planning commodities to the Government of the Kingdom of Lesotho. The commodities, officially handed over at the National Drug and Services Organization, which distributes medicines and commodities to all health facilities in the country on a monthly basis, also form part of UNFPA's effort to relieve the Government of Lesotho's budget for the COVID-19 response.
- **Uganda:** The country office is supporting the Ministry of Health to maintain a responsive supply chain system for RH commodities. This includes: pipeline monitoring, provision of RH commodities, monitoring of stock status at central warehouses (National Medical Stores and Joint Medical Stores), as well as support to ensure commodity redistribution at district and facility levels. Through partnership with motorcycle taxi riders (*boda boda*), over 71,000 people have been reached with family planning information and commodities.
- **Zimbabwe:** UNFPA continues to work with the World Food Programme to deliver SRH services, food security and nutrition interventions at the same time. Family planning commodities, condoms and antenatal care services are provided during general food distribution and nutrition support is provided to high risk pregnant mothers in maternity waiting homes where they wait to give birth. This has helped the Ministry of Health to deliver contraceptive services to women during the restrictions on community-based activities during the COVID-19 pandemic.

### Risk communication and community engagement, including youth engagement, leaving no one behind

UNFPA is part of the regional risk communications and community engagement working group that aims at providing joint programmatic guidance to country offices, governments and media practitioners in the region.

#### Country Examples

- **Angola:** UNFPA is supporting the national platform on HIV (ANASO) to develop the Community Engagement Campaign during the COVID-19 pandemic in Luanda province. This campaign aims at to reach 5,000 young people with COVID-19 and HIV prevention information, including HIV counseling and testing among other SRH basic services.
- **Ethiopia:** UNFPA, working with the Ministry of Health, UNESCO and youth organisations supported the first National Adolescent and Youth Health Forum in Ethiopia, which was held virtually under the theme "Let's connect for improved adolescent and youth health." The forum was organised to strengthen the coordination and partnership of organisations working on youth development to ensure multi-sectoral response. It also sought to raise awareness on the risk, vulnerability, and response to young people and COVID-19, and to share good practices, evidence and programmatic lessons on adolescent and youth development.
- **Kenya:** The country office held a meeting with the informal transport sector (*boda boda*), which has a membership of over one million motorcycle riders, to discuss strategies to strengthen male involvement in addressing FGM and teenage pregnancy.
- **Mozambique:** Approximately 600 mentors under Rapariga Biz continue to provide individual mentorship and information on COVID-19 prevention, SRH and GBV to more than 17,000 girls and young women (with one mentor supporting 30 girls) through door-to-door visits, phone calls or individual face-to-face meetups in Nampula and Zambezi provinces. The centerpiece of Rapariga Biz is promoting and protecting the sexual and reproductive health rights of girls and young women in these provinces. The programme is supported by UNFPA, UNICEF, UN WOMEN and UNESCO and led by the Ministry of Youth and Sports.
- **Rwanda:** UNFPA enhanced its support to the National Institute of Statistics Rwanda to ensure safe collection of Demographic Health Survey (DHS) data in the context of COVID-19. UNFPA is supporting the finalisation of the DHS report together with the preparations for the upcoming census mapping exercise.

## Media & Communications

**UNFPA raises awareness, shares guidance and showcases achievements through media outreach and engagement.**

[UNFPA Kenya donates Mama Care kits to NMS](#)

[COVID-19 basic information booklet: UNFPA Botswana](#)

[Youth, media to amplify voices tackling reproductive health needs for adolescents \(Kenya\)](#)

[Covid-19 aftershocks: How refugee girls and women bear a heavy burden \(Kenya\)](#)

[Coronavirus - Kenya: Let the Petals Fall in Dignity Despite Covid-19 \(Kenya\)](#)

[Uganda: A ride-hailing app helps deliver contraceptives during lockdown \(BBC, August 24, 2020\)](#)

[MTN Foundation, MTN Kampala Marathon partners refurbish and equip Kawempe Neonatal Intensive Care Unit \(The New Vision, August 20, 2020\)](#)

[Give us a listening ear, resources and some faith – Eswatini youth](#)

[UNFPA Namibia: Donation of Reproductive Health and Dignity Kits](#)

[Mozambique resumes obstetric fistula repair after advocacy efforts led by UNFPA Mozambique](#)

[Uganda: Boda Boda Drivers Deliver Contraceptives to the Door During Uganda's COVID-19 Lockdown](#)

[UNFPA Rwanda secures Rwf5bn for youth reproductive health and rights](#)

[Exxaro employees raise their voice in movement to stop gender-based violence and drive positive change \(South Africa\)](#)

[Sanitary towels should be sold as cheaply as masks \(Kenya\)](#)

[Celebration of the growing partnership \*\*UNFPA-KOICA\*\* and Official launch of a three years ... \(Rwanda\)](#)

[Teenage pregnancy is on the rise in Malawi amid pandemic](#)

[Kwale records a 70% drop in teen pregnancies \(Kenya\)](#)

[Reduce cost of sanitary pads to enhance access during Covid-19 \(Kenya\)](#)

[UNFPA pumps K50 million in family planning project \(Malawi\)](#)

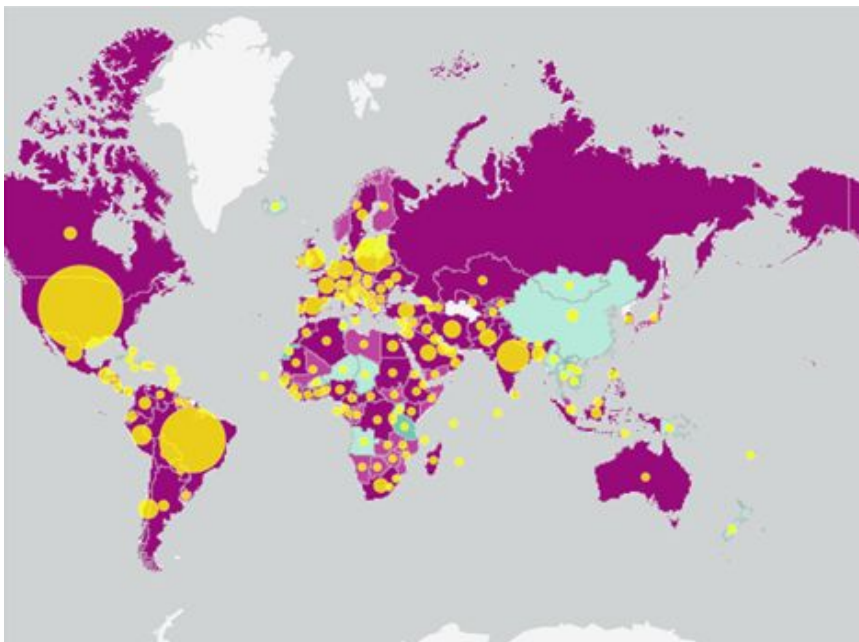
[Activists want youth to get reproductive services \(Uganda\)](#)

[DPP decries sloppy investigations into sexual abuse and GBV cases \(Uganda\)](#)



## Confirmed Cases and Deaths (UNFPA programme countries) WHO, 8 September 2020

Country	Confirmed Cases	Deaths
Angola	2,981	120
Botswana	2,126	9
Burundi	466	1
Comoros	448	7
Democratic Republic of the Congo	10,232	260
Eritrea	330	0
Eswatini	4,884	94
Ethiopia	59,648	933
Kenya	35,205	599
Lesotho	1,164	31
Madagascar	15,352	202
Malawi	5,621	176
Mauritius	356	10
Mozambique	4,557	27
Namibia	8,810	91
Rwanda	4,409	19
Seychelles	135	0
South Africa	639,362	15,004
South Sudan	2,552	49
United Republic of Tanzania	509	21
Uganda	3,776	44
Zambia	12,836	295
Zimbabwe	7,116	208
<b>TOTAL</b>	<b>822,875</b>	<b>18,200</b>



See UNFPA's [COVID-19 Population Vulnerability Dashboard](#) for real-time updates