HIGHLIGHTS (4 Jun 2020)

- Several countries in Southern and Eastern Africa have reported a significant uptick in daily cases over the past week, including Kenya, Malawi and South Africa.

- All countries in Southern and Eastern Africa have now been affected by the pandemic, with Lesotho recording its first case on 13 May. Cross-border transmission is a rising concern.

- The pandemic has gained considerable pace in the region: numbers of people who contracted COVID-19 rose from about 10,000 on 1 May to nearly 50,000 by the end of the month.

- Multiple locations have reported a spike in gender-based violence during the outbreak, as communities face rising economic pressure.

- Resources are urgently needed to scale-up the life-saving response and common services for the outbreak.

KEY FIGURES

<table>
<thead>
<tr>
<th>Total cases in the region (as of 7 June)</th>
<th>Total deaths</th>
<th>Countries affected in the region</th>
</tr>
</thead>
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<td>74,229</td>
<td>1,686</td>
<td>26</td>
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</table>

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INTERACTIVE (9 Jun 2020)

Interactive map - COVID-19 in Southern and Eastern Africa

Click to see the number of people who contracted the virus, deaths and the trends of the pandemic across the region and by country.
ANGOLA – TRENDS  (2 Jun 2020)

Government replaces on 26 May the State of Emergency by a State of Calamity

- **First case:** 19 March 2020
- **Total cases:** 86 (as of 1 June 2020)
- **Total deaths:** 4
- **Schools:** Closed (affecting nearly 8.7 million learners).
- **Borders/flights:** All international flights cancelled effective from 20 March 2020. All land borders closed.
- **Containment measures:** National State of Emergency declared on 27 March and replaced by State of Calamity on 26 May; domestic travel allowed only for seeking/providing essential services; 14-day self-quarantine for those who had contact with symptomatic people.

Situation:

Angola had confirmed that 86 people contracted COVID-19 in the country, including four who died from the disease, as of 1 June. The first local transmission of the virus was registered on 28 April, increasing concerns of a faster increase in the number of people affected.

The Government reportedly replaced on 26 May the State of Emergency declared on 27 March over the coronavirus outbreak by a State of Calamity, according to media reports. The new measure will be in place until 9 June and will reportedly enable the country to gradually open its economic and social life, but keeping specific COVID-19 prevention rules. Angola's capital Luanda, the only region reportedly with active cases of COVID-19, remains under sanitary cordon during the State of Calamity, and closed for movements in and out of the city. The rest of the country will resume activities in a phased manner, with factories, farming and fisheries already allowed to operate. Schools are expected to resume from 13 July, according to the media. When the State of Emergency was previously declared, all non-essential internal travel, meetings and public
activities had been banned and all schools closed. International flights to and from Angola were suspended on 20 March and the country has also prohibited circulation of people at land borders during the same period. Docking and disembarkation of cargo ships and crew members for medical assistance and humanitarian reasons remain operational.

Separately, on 5 May Human Rights Watch (HRW) called on the Government to release detainees and improve the capacity to prevent and respond to coronavirus cases in the overcrowded prisons across the country to prevent a health disaster. In a statement, HRW also denounced that the country is allegedly arresting and placing hundreds of people in custody for low-level crimes, leading to a daily influx of new detainees. The human rights group informed that, according to police data released on 1 May, nearly 300 people have been detained for violating the State of Emergency rules. Enforcing the measures outlined in the State of Emergency, the police reportedly informed that the ban on travel, meetings and public activities imposed on 27 March has only been adhered to by a small part of the population, according to media reports.

COVID-19 has arrived in Angola at a time when much of the population was already struggling to meet their basic needs. In 2018-2019, southern Angola experienced a devastating drought - with temperatures the highest seen in 45 years - driving increasing hunger and malnutrition, especially in Cunene, Huíla, Bié and Namibe provinces. Angola is also facing macroeconomic challenges following multiple consecutive years of economic contraction since 2014, when the country was hit by the oil price crisis. At least 40.6 per cent of the population live below the national poverty line, and nearly 1 in 2 people (47.6 per cent) live below the international poverty line of US$1.9 per day. COVID-19 is expected to exacerbate the situation for the most vulnerable, with 72.6 per cent of the population relying on informal employment.

Response:

- The Government has approved a National Contingency Plan to Control the Epidemic.
- Additional health care spending to mitigate COVID-19, estimated at US$40 million, has been announced and tax exemptions on humanitarian aid and donations have been granted.
- A contingent of over 250 health professionals sent from Cuba on 10 April completed quarantine and has been deployed across the country.
- The Ministry of Social Action, Family and Women Empowerment will disburse AOA 315 million (nearly US$562,500) to support food distribution to vulnerable groups.
- UN entities in Angola have reallocated $16 million to support the Government-led response to COVID-19, including $12.5 million for the health response and $3.5 million for food security in Namibe, Huíla, Cunene and Cuando Cubango provinces.

Official sources:

Ministry of Health

Other links:

Potential Socioeconomic Impact of COVID-19 in Angola: A Brief Analysis, by UNHABITAT/UNDP
Policy Response to COVID-19, by IMF
COVID-19 Educational Disruption and Response, by UNESCO
COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
BOTSWANA — TRENDS (3 Jun 2020)

Country concludes last phase of the COVID-19 lockdown while State of Public Emergency will last for six months

- First case: 30 March
- Total cases: 40 (as of 2 June 2020)
- Total deaths: 1
- Schools: Reopening gradually since 2 June (609,146 learners affected)
- Flights/Borders: Closed since 16 March for specific countries, and totally closed since 2 April, except for nationals returning home.
- Containment measures: State of Emergency declared from 2 April 2020, and extended for the next six months; capital in lockdown since 11 May, restricting movements in and out the city to only essential services providers, who must apply for a permit; for the rest of the country, most restrictions were lift on 21 May, but some measures must be observed, including the use of masks and permits are needed to travel across regions.

Situation:

Botswana confirmed that 40 people in the country had contracted COVID-19 as of 2 June. The gradual lifting of restrictions that started on 8 May was concluded by the Government on 20 May. The State of Public Emergency declared on 2 April has, however, been extended by the Parliament for six months and the capital Gaborone is in lockdown after a truck driver tested positive for COVID-19 on 9 May, with movements in and out of the city restricted to essential services providers. For the rest of the country, all individuals are allowed to move freely and businesses have resumed activities, with some specific guidance to be observed over the next weeks. The use of face masks is mandatory in public transport and shared spaces. Companies are required to continue the daily screening and registration of all employees, including measuring temperatures and checking other COVID-19 symptoms, shared spaces must be frequently disinfected and workers should use face masks and observe social distancing rules.

Public schools are expected to reopen in a phased manner from 2 June, according to the Permanent Secretary for Basic Education, quoted by the media. Private schools, however, are already resuming activities since 15 May, according to the media. All public school teachers and support staff have reportedly been called to report to work from 18 May, to prepare for the school year. The Government informed that hand-washing facilities are being installed at the schools and thermometers will be delivered. Schools are reportedly procuring face masks and parents will supposedly have to buy them at a subsidized price, according to the media.

For the next months, the country has been divided into nine containment zones that will be used to restrict movements by specific areas and allow swift responses in the event of additional COVID-19 outbreaks. Travels across zones require previous authorization.

Response:

- The Government has established the COVID-19 Relief Fund encourages the private sector, individuals and organizations to contribute.
- An economic package was approved, and will facilitate loans by commercial banks to businesses mostly affected by COVID-19 and give tax concessions to businesses in eligible sectors.
- From 20 April, the Government is informed it will start a massive screening campaign across all regions, while implementing measures to ensure that citizens have sufficient potable water and sanitation services.
Official sources:

Botswana Government Official Twitter and Botswana Government website

Presidential address declaring the State of Emergency - 31 March

First containment measures - 16 March 2020

Other links:

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

BURUNDI – TRENDS (9 Jun 2020)

83 people in the country contracted the virus

- **First case:** 31 March 2020
- **Total cases:** 83 (as of 7 June 2020)
- **Total deaths:** 1
- **Schools:** Open (except for the French and Belgian schools)
- **Flights/Borders:** All international passenger flights and visa issuance suspended on 22 March, except for cargo, including humanitarian aid, diplomatic community and ambulance flights. The land borders, temporarily closed with the Democratic Republic of Congo and Rwanda, have been reopened on 15 April to allow the movement of goods and commodities. The border with Tanzania has remained open for the movement of goods and merchandise and for the return of Burundians in their country.
- **Containment measures:** Since 5 March, self-financed 14-day quarantine is mandatory for travellers and anyone who has had contact with symptomatic people. Burundian refugees returning from Tanzania within the voluntary repatriation programme are exempt from this quarantine measure, except for those displaying COVID-19 symptoms.

Situation:

Burundi has registered 83 people who contracted COVID-19 in the country, including one person who died from disease, according to the Government's update on 7 June. In total, the Ministry of Health has conducted just under 1,000 COVID-19 tests to date. At the same time, there are unofficial reports of increasing patient admissions to hospitals with COVID-19 symptoms, as well as multiple deaths due to respiratory failure. The country has had over 2,500 people in mandatory quarantine, including 650 children (some unaccompanied), pregnant women and elderly citizens. There are reports that many people confined in hotels, motels, or other Government designated buildings do not have the financial capacity to complete their 14-day quarantine. In addition, the lack of triage and isolation facilities, the inadequate logistical and operational capacity of rapid response teams and other frontline health workers, as well as the shortage of safe water, sanitation and hygiene equipment throughout the country constrains the response effort. UNHCR has requested that the Government suspend voluntary repatriation until effective COVID-19 protective measures are in place, such as providing accommodation to enable a two-week quarantine for Burundian repatriates.

https://reports.unocha.org/en/country/southern-eastern-africa/
Heavy rains and flooding between April and May caused destruction of key infrastructure and affected around 50,000 people across the country, most of whom are displaced, increasing the risk of COVID-19 transmissions in temporary camps. In Bujumbura Rural Province alone, a hospital, three health facilities and a COVID-19 isolation centre were flooded, disrupting key health services. Meanwhile, the Government and partners are working to increase training of health personnel in the detection, diagnosis, and surveillance of respiratory diseases, as well as hygiene awareness among the population. This is especially important to protect the most vulnerable groups in the country, including internally displaced people, returnees, host communities and over 1.7 million people facing hunger.

Separately, on 14 May the UN Commission of Inquiry on Burundi called on the Government to act with transparency and comply with the international standards of human rights and humanitarian assistance during the response to the COVID-19 outbreak. The statement comes after the Foreign Ministry declared on 13 May the country's WHO representative in Burundi and three health experts working in the UN emergencies team "persona non grata" and as such, ordered the four members to leave the territory of Burundi over an alleged disagreement on the management of the pandemic.

Response:

- In parallel to the Strategic Response Plan developed by the WHO and partners, a contingency plan has been prepared by the Government, requesting US$82.2 million. To date, over $15 million has been pledged or made available for the COVID-19 response efforts. Some partners are also in the process of reprogramming and reallocating the Ebola funding towards the COVID-19 response.

- The National Steering Committee for Public Health Emergency Management, chaired by the Permanent Secretary of the Ministry of Public Health and the Fight Against AIDS, has been reactivated, together with pillar-based technical working groups.

- Health authorities are screening travellers and have supplied laboratories with COVID-19 testing kits, however both require enhancements.

- A campaign has been launched to tell people about the COVID-19 preventive measures and a hotline is answering questions from the public. The service is however overwhelmed, and a call centre with greater capacity is needed.

To learn more about the COVID-19 situation in Burundi and its humanitarian impact, check out the OCHA Burundi Situation Report, available in English and French.

Official sources:

- Ministry of Health Official Twitter and Minister of Health Twitter

Other links

- OCHA Burundi – COVID-19 Information page – Humanitarian Response
- COVID-19 Educational Disruption and Response, by UNESCO
- COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
- Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
- Policy Response to COVID-19, by IMF

COMOROS — TRENDS (8 Jun 2020)
141 people contracted COVID-19 as of 5 June

- **First case:** 30 April
- **Total cases:** 141 (as of 5 June 2020)
- **Total deaths:** 2
- **Schools:** Closed (277,099 learners affected)
- **Flights/Borders:** All international passenger flights suspended; only cargo accepted. Sea travel between islands suspended.
- **Containment measures:** Mandatory quarantine for travellers from countries with COVID-19 confirmed cases. Multiple measures taken to restrict gatherings.

The Comoros registered its first case of a person with COVID-19 on 30 April. Since then, the total number of COVID-19 infections has reached 141 with two deaths as of 5 June. Until the confirmation of the first case, the Government had extremely limited testing capacity, which raised alarms of a possible unreported coronavirus outbreak in some of the islands. The first testing centre started operations at the end of April, after the Government informed it had received the equipment and supplies on 23 April.

President Azali Assoumani announced on 26 April an indefinite nationwide curfew from 8 p.m. to 5 a.m. to strengthen other precautionary measures imposed since 20 March. The country suspended all international commercial passenger flights from 20 March and the National Agency for Maritime Affairs restricted all movements of people coming from any nation that reported a coronavirus outbreak. Sea travels between Comoros’ islands have also been suspended until further notice. All public festivities and gatherings have been suspended until further notice, including any collective prayers at the mosques. Weddings are restricted to no more than 20 people and burials to only family members, relatives of the deceased, and residents of the villages concerned.

_Official sources:_

*Government COVID-19 webpage*

_Other links:_

*U.S. Embassy in Madagascar and Comoros - 18 April Health Advisory*

*Worldometer's COVID-19 data*

*Which countries have not reported any coronavirus cases, by Al Jazeera*

*COVID-19 Educational Disruption and Response, by UNESCO*

*COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)*

*Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)*

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**DJIBOUTI — TRENDS** (8 Jun 2020)

_Government starts to ease restrictions while number of people with COVID-19 surpasses 2,000_

- **First case:** 17 March 2020
Total cases: 4,278 (as of 7 June 2020)

Total deaths: 31

Schools: Closed, affecting over 142,000 learners.

Borders/Flights: All land, sea, and air borders closed effective from 18 March 2020. Only cargo flights are authorized.

Containment measures: Quarantine mandatory for those who have had contact with positive cases; lockdown restricting of movements and closure of all non-essential services since 24 March.

Situation:

The number of people with COVID-19 is rising in Djibouti, with 4,278 cases confirmed on 7 June, according to the Ministry of Health. With a total population of around one million people, Djibouti is reportedly the country with the highest prevalence of the disease in the continent, according to the Africa Centre for Disease Control and Prevention, quoted by the media. Recent rains and floods across the country have affected more than 110,000 people and displaced many of them, increasing the risk of community transmission.

The Government announced on 10 May the gradual lift of COVID-19-related restrictions from 17 May, when the extended State of Emergency is expected to expire. Most business and economic activities will be allowed to resume, following specific guidelines, including the use of mask and social distance. The lockdown was imposed on 23 March, with all stores closed with the exception of food markets, pharmacies, banks and gas stations. Schools have also been closed, affecting 142,564 learners countrywide. Previously, the Government had already closed the airport for all commercial flights since 18 March, allowing cargo to operate normally.

Response:

- The Ministry of Health and its partners have increased their preparedness by building surveillance, testing, quarantine and health worker capacity. WHO has delivered protective and medical equipment, including tests and respirators.
- On 9 April, the United Nations organized a virtual conference on COVID-19, with the participation of the Minister for Foreign Affairs and the spokesperson for the Government, the Minister for the Economy and Finance, religious leaders, the representative of WHO and the United Nations Resident Coordinator. The conference discussed Government and UN response actions to the COVID-19 crisis.

Official sources:

Ministry of Health Official Twitter and Ministry of Health website

Other links:

COVID-19 Educational Disruption and Response, by UNESCO
United Nations Country Team in Djibouti - Situation Reports
COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
Policy Response to COVID-19, by IMF

TRENDS (9 Jun 2020)
DR Congo

EU humanitarian airlift to DRC

- **First case:** 10 March 2020
- **Total cases:** 4,016 (as of 8 June 2020)
- **Total deaths:** 84
- **Schools:** Closed
- **Borders/flight:** All borders closed
- **Containment measures:** The health state of emergency decreed by the Head of State on 24 March to halt the spread of the pandemic in the DRC has been extended for an additional two weeks until late May.

**Situation:**

On 10 March, the Democratic Republic of Congo (DRC) recorded its first case. Seven of the twenty-six provinces have currently recorded COVID-19 cases, with the capital city Kinshasa remaining the epicenter with at least 938 cases. The country has recorded a significant increase in cases over the past four weeks, from more than 400 cases in late April to 4,016 to date. As part of its COVID-19 response, the first mass screening center was opened on 26 May in one of the city's largest football stadium, with the aim of expanding the case detection system. The World Bank and UNICEF handed over an important lot of equipment and health materials worth approximately USD 3 million for health facilities in various provinces including Kinshasa, Kongo-Central, Kasai-Central, and Maniema. The European Union has also announced that it was allocating 5 million euros to support the Saint -Joseph hospital, that will serve to strengthen the response capacity to the virus and improve the overall provision of health services.

The government declared on 24 March a state of emergency and imposed the confinement of the capital, Kinshasa, which includes restrictions to travel between Kinshasa and the rest of the country and the prohibition of all gatherings of people in public spaces.

As part of the EU humanitarian airlift, three flight are scheduled to transport aid workers and essential supplies to help the country fight the coronavirus pandemic. A first flight arrived today in Kinhsasa with Janez Lenarčič, European Commissioner for Crisis Management, Philippe Goffin, Belgian Minister for Foreign Affairs and Defence and Jean-Yves Le Drian, French Minister for Europe and Foreign Affairs. In Kinshasa, they will be received by the President of the DRC, H.E. Félix Tshisekedi and will meet representatives of humanitarian organisations and civil society in Kinhsasa and in Goma. The cargo of the three flights of the EU humanitarian airlift includes, among other things laboratory equipment, masks, and other general medical equipment. **Response:**

The multi-sectoral humanitarian plan specific to the COVID-19 response is an addendum to the Humanitarian Response Plan 2020 (HRP) in order to integrate the impact of the COVID-19 pandemic on existing humanitarian needs and on the activities of humanitarian partners.

This plan is in line with:

1) The COVID-19 Global Humanitarian Response Plan (GHRP) - 287.8 millions USD for DRC.

2) The COVID-19 epidemic preparedness and response plan in the Democratic Republic of Congo developed by the government.
This multi-sectoral humanitarian plan describes the humanitarian needs and response to assist the most vulnerable people affected directly or indirectly by the COVID-19 epidemic in the Democratic Republic of Congo (DRC). The plan therefore supports the national response plan but is not limited to the activities described in the national response plan. The plan is established until December 2020 in alignment with the GHRP and the HRP 2020.

The World Bank has approved the disbursement of US$445 million under its Eastern DRC Stabilization for Peace Project (STEP 2). Through this funding nearly 2.5 million people will benefit from the construction and maintenance of 2,000 basic infrastructure facilities, including at least 500 schools to support the free primary education program, and 300,000 people will receive cash transfers in the 1,000 targeted communities worth $100 million. As part of the COVID-19 response, this project aims to reallocate and mobilize funds to mitigate socio-economic impacts on the Congolese population and better protect the most vulnerable households, via schemes such as creating more than 1.3 million temporary work days for vulnerable people, equipping 45,000 households with improved agro-pastoral technologies. Official sources:

Ministry of Health Official Twitter

Other links:

Global Humanitarian Response Plan 2020

DRC World Health Organisation Country Office

ESWATINI – TRENDS (8 Jun 2020)

State of Emergency extended until at least 19 June

- **First case:** 16 March 2020
- **Total cases:** 333 (as of 7 June 2020)
- **Total deaths:** 3
- **Schools:** Closed (353,796 learners affected).
- **Borders/Flights:** Only cargo, returning citizens and legal residents allowed to enter the country since 27 March. Some landborder posts closed, including Sicunisa, Gege, Lundzi, Sandlane, Bulembu and Nsalitje.
- **Containment measures:** Domestic travel allowed only for seeking/providing essential services; 14-day self-quarantine required for those who had contact with symptomatic people.

**Situation:**

In Eswatini, the number of people who contracted COVID-19 are 333 as of 7 June, according to the Ministry of Health. With a faster increasing in cases over the last couple of weeks, the Government extended on 15 May the State of Emergency until at least 19 June. Previously, authorities had announced on 23 April new measures to reinforce the partial lockdown, with further restrictions and guideline for the essential services that are allowed to operate, including public transport. On his statement, the Prime Minister said “the country’s health system cannot withstand an upsurge of infections and neither the available resources are adequate to manage an uncontrollable transmission of the virus”. The Deputy Prime Minister had also acknowledged the shortage of personal protective equipment to effectively contain the COVID-19 and informed the Government was intensifying the efforts to procure this and other medical supplies.

The first gazette with the Eswatini COVID-19 Regulations already included restriction of movements, prohibition of gatherings, closure of schools, borders and non-essential services and regulations on isolation or mandatory quarantine, price control, among other measures. Since 27 March, only cargo, returning citizens and legal residents are allowed to enter...
the country. Patients who knowingly expose others to coronavirus may be arrested and prosecuted for attempted murder or murder. Refusal to quarantine, the spread of false information or failure in complying with COVID-19 Regulations will be punished by up to five years in prison or a fine not exceeding 25,000 Emalangeni (around US$1,300), depending on the offence.

The containment measures are reportedly exacerbating pre-existing humanitarian needs in Eswatini. There are reports of increasing hunger in some communities, including Kwaluseni Township, in the Manzini District, where most of the population reportedly lost their incomes with the closure of factories. Across the country, more than 11,000 vulnerable children have reportedly been left without their main nutritional daily meal, following the closure of all Government’s Neighbourhood Care Points, where they previously received two meals a day, according to media reports. The situation has compounded the closure of schools and the interruption of the school feeding scheme. The Ministry of Health encouraged farmers to embark on the production of maize, beans, vegetables and other food crops during the winter season.

Response:

- The Government reports that additional health workers, including eight doctors, 145 nurses, environmental health specialists, and paramedics have been recruited and 1,007 nurses, 147 doctors and over 3,000 rural health motivators have been trained on COVID-19 case management.

Official sources:

Eswatini Government Official Twitter and Kingdom of Eswatini COVID-19 Situation Reports

Eswatini COVID-19 Regulations - 27 March 2020

Other links:

COVID-19 Educational Disruption and Response, by UNESCO

Global Monitoring of School Meals During COVID-19 School Closures, by WFP

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

ETHIOPIA — TRENDS (8 Jun 2020)

Pandemic likely to increase the already high food insecurity in the country

- **First case:** 13 March 2020
- **Total cases:** 2,156 (as of 8 June 2020)
- **Total deaths:** 27
- **Schools:** Closed (24.6 million learners affected)
- **Flights/Borders:** All land borders have been closed, except for essential goods. The main airport is open for international flights, although Ethiopian Airlines has been forced to suspend services to various destinations. United Nations Humanitarian Air Services (UNHAS) cargo and passenger operations still ongoing; Addis Ababa is one of the
hubs for the UNHAS global passenger air service for humanitarian and health workers to destinations not served commercially.

- **Containment measures:** All passengers arriving in Ethiopia are placed in a mandatory quarantine at several designated hotels for 14 days at their own expense as of 23 March 2020.

**Situation:**

Since Ethiopia recorded its first COVID-19 infection on 13 March, 2,156 people contracted the virus and 27 of them died from the disease, according to the Ministry of Health. The country declared a State of Emergency on 8 April for five months, closing schools and universities, banning public gatherings and requiring most employees to work from home. In addition, regional authorities have imposed strict measures limiting population movements within the regions, although the inter-regional public transports services across the country have resumed on 17 April.

The measures have impacted ongoing humanitarian operations, including COVID-19 response activities, according to partners in the country. Some essential health services such as measles and polio immunization campaigns have been disrupted, according to UNICEF. While humanitarian organizations continue to work with authorities to establish the appropriate mechanism to enable the continuity of life-saving operations, an estimated 15 million people could experience food consumption gaps as a result of COVID-19, according to the Government’s National Disaster Risk Management Commission (NDRMC) and the Food Cluster. The risk of transmissions and increased humanitarian need is especially high amongst the 1.7 million internally displaced people (IDP) living in collective sites or host communities across the country. Almost all IDPs have limited capacity to follow the recommended norms of social distance and lack access to proper hygiene facilities and supplies such as soaps. In most IDP sites, shelters are crowded, and many people sleep in groups or crowded communal halls. Cases of intimidation related to the stigmatization of foreigners and Ethiopian diasporas in field locations have also been reported. In addition, thousands of Ethiopians have been deported, mainly from Saudi Arabia, Djibouti, Kenya and Sudan since the beginning of the outbreak, increasing challenges related to their reception and assistance.

COVID-19 has arrived in Ethiopia at a time when more than 7 million people were already severely food insecure and struggling to meet their basic needs. The county has also been dealing with other outbreaks, including cholera and measles, putting more pressure on the already weak health system.

**Response:**

- At the Federal level, the multi-sector COVID-19 response is coordinated by the Emergency Coordination Center (ECC) led by the Commissioner of the National Disaster Risk Management Commission (NDRMC). All humanitarian partners are supporting the centre.
- At the country regional level, coordination centres have been established. NDRMC will be working to ensure that regional Coordination Forums mirror the Federal Coordination Mechanism.
- The Government and partners are expanding quarantine and isolations centres to all points of entry (air and land) and major cities; extending the number of testing facilities to cover major cities; carrying out house-to-house COVID-19 surveillance and community awareness;
- The humanitarian system reactivated the Logistics Cluster to coordinate demands for emergency COVID-19 supplies throughout the country.
On 14 April, the Government of Ethiopia and the World Food Program (WFP) opened the Addis Ababa Humanitarian Air Hub inside the Bole International Airport. COVID-19 supplies, equipment and humanitarian workers will be transported from the hub across 32 countries in Africa. The Addis Ababa Humanitarian Air hub is part of a United Nations initiative to scale up procurement and distribution of protective equipment and medical supplies for the COVID-19 response.

Official sources:

Minister of Health Twitter and The Ministry of Health website

Other links:

Ethiopia COVID-19 Humanitarian impact

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

KENYA — TRENDS  (8 Jun 2020)

Government reinforce restrictions in specific areas of Nairobi and Mombasa

- First case: 15 March
- Total cases: 2,862 (as of 8 June 2020)
- Total deaths: 85
- Schools: Closed country-wide (14.3 million learners affected).
- Borders/Flights: All international passenger flights suspended from 25 March; Borders with Somalia and Tanzania closed since 17 May, except for cargo.
- Containment measures: Countrywide curfew (9 p.m. to 4 a.m.) effective from 7 June; cessation of movement from other counties into and out of Nairobi, Kilifi, Kwale and Mombasa since 6 April and Mandera since 22 April; public gatherings limited to 10 people; masks to be worn in public areas.

Situation:

With 2,862 people testing positive for COVID-19, including 85 who died from the disease as of 8 June, Kenya is reinforcing containment measures in specific areas to prevent transmissions. The land borders with Somalia and Tanzania have been closed on 17 May, except for cargo, following increasing number of cases in border areas. COVID-19 test is, since then, mandatory for all drivers of transborder cargo vehicles and those who have the virus will not be allowed to entry Kenya.
The Government also imposed tougher measures to contain the outbreak in Eastleigh in Nairobi and the Old Town in Mombasa. The order, effective on 7 May, includes a ban on movements and public transport in and out of the two neighbourhoods, and the closure of markets and eateries. Meanwhile, heavy rains and flooding in at least three quarters of Kenya's counties have affected over 233,000 people, including 116,000 displaced, increasing the risk of health emergencies, including higher levels of COVID-19 community transmission at overcrowded camps.

In Mandera, a ban on movements in and out of the county have been imposed since 22 April, following a sharp increase on number of people with the virus, the majority of them with history of travel to other counties. Previously on 7 April, the Government declared the Nairobi Metropolitan Area and the counties of Kilifi, Kwale and Mombasa as “COVID-19 infected”, and mandated the cessation of all movements into and out of these areas. Sports activities have been banned with effect from 7 April; prison visits have been suspended and public gatherings are limited to 10 people, including for funerals. The ban on international passenger flights, effective from 25 March, and the nationwide daily curfew, since 27 March, continue.

On 22 April, Human Rights Watch (HRW) launched a report denouncing several allegedly cases of police violence. According to HRW, officers shot and beat people at markets or returning home from work, even before the daily start of the curfew. The organization documented cases of police breaking into homes and shops, extorting money from residents or looting food in several locations across the country. HRW urged Kenyan authorities to ensure that the police do not use excessive force. The Government of Kenya's Independent Policing Oversight Authority has recorded at least 35 cases of police brutality related to enforcement of the COVID-19 curfew, 12 of which resulted in death, and has opened investigations into a number of the cases.

Response:

- The Government has earmarked Ksh40 billion (approximately US$377.7 million) in funds for additional health expenditure, including enhanced surveillance, laboratory services, isolation units, equipment, supplies, and communication; social protection and cash transfers; food relief; and funds for expediting payments of existing obligations to maintain cash flow for businesses during the crisis.

- On 9 April, the United Nations and humanitarian partners launched an Emergency Appeal to support the Government's response to the COVID-19 pandemic in the country. The plan seeks $267.5 million to respond to the most immediate and critical needs of 10.1 million people that will likely be affected by the current situation.

Official sources:

Ministry of Health Official Twitter and Ministry of Health website

WHO Kenya Official Twitter

Fourth Presidential Address on the Coronavirus Pandemic - 17 April 2020

Other links:

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

INTERACTIVE (8 Jun 2020)
**LESOTHO – TRENDS**  (5 Jun 2020)

**Four persons with COVID-19 confirmed in the country**

- **First case:** 13 May
- **Total cases:** 4 (as of 1 June 2020)
- **Total deaths:** 0
- **Schools:** Closed *(579,807 learners affected)*
- **Borders/Flights:** All travellers are screened for coronavirus.
- **Containment measures:** National Emergency declared 28 March, restricting all movements and closing all non-essential services.

The Ministry of Health confirmed four people individuals have contracted COVID-19 in Lesotho, as the country received on 1 June the results of 421 samples. As the country has no testing capacity to date, it relies on South Africa to test people who might have been in contact with the virus. The newly appointed Health Minister Motlatsi Maqelepo, quoted by the media, said that he is working to have a local COVID-19 laboratory up and running in Lesotho as soon as possible. The Lesotho Medical Association have raised concerns over the lack of basic medical supplies and claimed they would not be able to respond to the COVID-19 outbreak should it escalate in the country.

Before the confirmation of the first case on 13 May, Prime Minister Thomas Thabane had loosened on 6 May some of the lockdown restrictions, allowing shops not classified as essential services to temporarily reopen. All other measures remain in place, including a ban on social gatherings, except for funerals and mandatory quarantine for all travellers. All schools are closed, leaving an estimated **390,000 children without access to school meals**, according to WFP. Since the beginning of the **National State of Emergency** on 28 March, the Prime Minister and Police Commissioner have called on law enforcement agencies to uphold people’s rights during the lockdown period. However, there have been reports of excessive use of force.
by security officers and the Government also informed about an increasing on criminal activities during the lockdown. On 18 April, the Prime Minister deployed the army onto streets to ‘restore peace and order’, claiming law enforcement institutions were undermining democracy. His announcement on national television came a day after the Constitutional Court overturned his 3-month suspension of Parliament as part of the coronavirus lockdown extension declared on 17 April, according to media reports.

Prior to the global COVID-19 pandemic, more than a quarter of the population in Lesotho - over half a million people - were facing severe food insecurity as the result of a devastating drought. Humanitarian partners launched a Flash Appeal to respond to the most urgent and life-saving needs, which is just 10 per cent funded. Response:

- A M700 million (approximately US$38.6 million) fund has been set aside for the National COVID-19 Response Integrated Plan 2020, more than half of which will be used for health care personnel and purchase of critical goods and services, with the remainder covering logistics, security, and border management.

Official sources:

Government of Lesotho webpage and COVID-19 National Command Centre

Other links:

COVID-19 Educational Disruption and Response, by UNESCO
COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
Policy Responses to COVID-19, by IMF

MADAGASCAR — TRENDS (8 Jun 2020)

State of Health Emergency extended

- First case: 20 March 2020
- Total cases: 1,094 (as of 8 June 2020)
- Total deaths: 9
- Schools: Were closed until 22 April, (277,099 learners affected).
- Borders/Flights: The Government of Madagascar announced a suspension of all international air travel starting 20 March.
- Containment measures: 14-day quarantine mandatory for individuals who have had possible exposure to COVID-19; travel limited to essential services and work.

Situation:

In Madagascar, the total number of people who contracted COVID-19 raised to 1,094 on 8 June. The Government announced on 17 May the third extension of the State of Emergency for another 15 additional days, maintaining restrictions on movements on the three most affected regions of the country, the capital Antananarivo, Tamatave and Fianarantsoa, and
also extending the measure to Alaotra Mangoro Region. Some measures previously imposed have, however, gradually been lifted since 22 April, when schools resumed activities, as well as public transport and some economic activities, including informal workers. The curfew (8 p.m. – 5 a.m.) remains in place.

President Andry Rajoelina informed that the country would move to the clinic phase of the investigations to transform the COVID Organics tonic into a drug, which includes injecting the product into patients. The herbal product made with Artemisia annua was launched on 20 April by the President as a cure for the virus and is being distributed in schools and communities across the country. Since then, political parties and medical authorities in the country have been asking for more tests before distributing the product, and asked for an official position from WHO. On 3 May, WHO published a press release welcoming innovations around the world, including traditional medicines, as part of the search for potential treatments for COVID-19, and warning about the risks of using products that have not been robustly investigated. The document specifically highlights that the use of medicinal plants such as Artemisia annua as treatment for COVID-19 should be tested for efficacy and adverse side effects. The Deputy Chairperson of the African Union Commission, Kwesi Quartey, in a tweet published on 13 May informed that the Madagascar's Health Ministry had agreed to collaborate with the Africa Centre for Disease Control (Africa CDC) to investigate the remedy.

Madagascar has the fourth highest rate of chronic malnutrition among children under five in the world, and has been buffeted by floods and drought in recent months. Across the country, more than 567,700 children are no longer receiving vital school feeding, according to WFP.

Response:

- Key measures include: (i) increased spending on epidemic prevention and control; (ii) cash-transfers and in-kind necessities to the poorest and those unemployed; and (iii) tax relief, suspension of government fees and waived social contributions.
- On 12 March 2020, the World Bank provided a grant of US$3.7 million to strengthen prevention against the COVID-19 pandemic, purchase materials and equipment, and train health workers. On 2 April, the World Bank approved $100 million Development Policy Operation (DPO) for budget support to improve the human capital. On 3 April 2020, the IMF approved a disbursement under the Rapid Credit Facility (RCF), equivalent to US$165.9 million, to meet the external financing gaps arising from COVID-19.

Official sources:

Ministry of Health Facebook Page and President Official Twitter

Government COVID-19 Official webpage

Other links:

Containment measures extended, by Orange Madagascar

U.S. Embassy Madagascar and Comoros COVID-19 Information

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Responses to COVID-19, by IMF
MALAWI — TRENDS  (8 Jun 2020)

Lockdown suspended by the High Court until further notice

- **First case:** 2 April 2020
- **Total cases:** 438 (as of 8 June 2020)
- **Total deaths:** 4
- **Schools:** Closed (5,495,017 learners affected)
- **Borders/Flights:** All international flights and cross-border passenger and buses banned since 1 April.
- **Containment measures:** State of Disaster declared 20 March; domestic travel allowed only for seeking/providing essential services; 14-day self-quarantine for travellers or those who had contact with symptomatic people.

**Situation:**

The Government confirmed that 438 people contracted COVID-19 in the country as of 8 June, a spike from the 102 cases reported on 26 May. The country now fears a faster spread of the disease, especially after over 400 Malawian returnees from South Africa reportedly escaped from Kamuzu Stadium in Blantyre on 27 May. They were quarantined awaiting tests for coronavirus, according to media reports. Some of the returnees complained that the stadium had no water, no toilets and lack of enough food. Test results released later in the week were reportedly positive for 46 of the escapees while nearly 300 had yet to be tested, according to the media. Malawi has engaged in a judicial dispute over the COVID-19 containment measures. The 21-day lockdown expected to start from 18 April was barred by the High Court of Malawi until further notice. The decision followed and application by members of the Human Rights Defenders Coalition (HRDC), who argued that more consultation was needed to prevent harm to the poorest and most vulnerable people. Several groups, including traders and civil society organizations, had also called on the Government to reconsider the lockdown and ensure that measures taken to prevent the COVID-19 pandemic include support to vulnerable people who rely on daily wages to feed their families. In response, the Government appealed the High Court decision, but the court injunction suspending was upheld. Later on 3 May, President Peter Mutharika has reportedly announced cash transfers to support informal workers who normally depend on the markets for their livelihood, according to media reports.

The lockdown would had reinforced previous measures imposed on 23 March, including the ban of public gatherings and closure of schools and universities; and the ban of all international flights and cross-border passenger buses since 1 April.

The country is also facing challenges in the medical response. Doctors and nurses have repeatedly protested the allegedly unfavorable working conditions, including a critical shortage of personal protective equipment needed to treat COVID-19 patients.

**Response:**

- On 8 April, Malawi Government launched the National Covid-19 Preparedness and Response Plan, with a budget of US$213 million (MWK157 billion). The response plan includes US$20 million (0.25 percent of GDP) in spending on health care and targeted social assistance programs. This includes hiring 2,000 additional health care workers.
- The Minister of Population Planning and Social Welfare reportedly announced on 11 April that all Government social cash transfer beneficiaries will receive a four-month disbursement. The measure aims to cushion them from the economic slowdown caused by the pandemic and to boost compliance with social distance orders. In addition, on 3
May President Peter Mutharika has reportedly announced cash transfers to support informal workers who normally depend on the markets for their livelihood. The Government will reportedly target approximately 172,000 families, representing 35 per cent of the urban population.

- On 15 April, the World Bank approved $7 million in immediate funding to support Malawi’s response under a new Malawi COVID-19 Emergency Response and Health Systems Preparedness project. In addition to the new operation, $30 million has been made available from the Disaster Risk Management Development Policy Financing with a Catastrophe Deferred Drawdown Option (Cat-DDO) to strengthen the country’s response to the pandemic.

Official sources:
Malawi Government Official Twitter and Malawi Government Facebook Page
Ministry of Health COVID-19 Dashboard

Other links:
Malawi Government dispenses 4-month cash transfer to fight COVID-19, by Nyasa Times
COVID-19 Educational Disruption and Response, by UNESCO
COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
Policy Response to COVID-19, by IMF

MAURITIUS – TRENDS (29 May 2020)

Three new individuals with COVID-19 detected

- **First case:** 19 March 2020
- **Total cases:** 335 (as of 29 May 2020)
- **Total deaths:** 10
- **Schools:** Closed (277,099 learners affected).
- **Borders/Flights:** Commercial flights have been suspended since 19 March.
- **Containment measures:** 14-day quarantine mandatory for individuals who have had possible exposure to COVID-19; movements limited to essential services and work.

Situation:

Mauritius has three active cases of COVID-19 as of 29 May. Two are both from the same family and were home-quarantined after being repatriated to the country. The country had previously declared it was COVID-19 free, as no new cases had been registered since 26 April. From 15 May, some non-essential business have been allowed to resume activities and public transport are now operating. The Government has reportedly issued strict guidelines and regulations that both commuters and public transport operators will have to adhere during the new phase. All buses and metros will be disinfected regularly, limitations on the number of passengers and hours of operation have been established, according to media reports.
Response:

- The Government has announced plans to increase general public health spending by Rs208 million (approximately US$5.25 million), with half already disbursed, according to the IMF.

Official sources:

Government of Mauritius Official Twitter and Government of Mauritius COVID-19 webpage

Other links:

U.S. Embassy in Mauritius Travel Advisory – 14 April 2020
COVID-19 Educational Disruption and Response, by UNESCO
COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
Policy Responses to COVID-19, by IMF

MOZAMBIQUE — TRENDS (8 Jun 2020)

State of Emergency extended for an additional 30 days amidst increasing unemployment

- First case: 23 March 2020
- Total cases: 433 (as of 8 June 2020)
- Total deaths: 2
- Schools: Closed country-wide for 30 days (7.9 million learners affected).
- Borders/Flights: Entry for non-nationals and non-residents is restricted.
- Containment measures: State of Emergency effective 1 April, restricting movements and closing schools and non-essential services; 14-day quarantine for all travellers; use of face masks mandatory in public areas; temporary suspension of issuance of visas.

Situation:

The total number of COVID-19 cases in Mozambique had reached 433 as of 8 June, including two deaths, according to the Ministry of Health. Cabo Delgado Province holds the highest number of infections in the country. President Filipe Nyusi announced on 28 May the second extension of the State of Emergency for an additional 30 days, from 1 June, as part of the pandemic containment measures. In his televised address, the President urged the population to respect the social distancing regulations, nothing that some businesses are breaching the rules. The Government announced that inspections will be strengthened in markets, streets and borders, and the lifting of restrictions will depend on the pandemic trend.

On the health response, the Government is collaborating with Cuba to bring 60 doctors to reinforce the COVID-19 operations. Meanwhile, the pandemic has reportedly impacted the country’s economy. According to media reports, 6,115 workers in the tourism industry have reportedly lost their jobs and 1,443 establishments closed their doors since the beginning of the State of Emergency on 1 April. An additional 21,000 people have had their contracts suspended and are on collective leave with no compensation, according to National Union of Hotel, Tourism and Similar Industry Workers, quoted by the media.
Response:

- The Government has increased the budget allocation for health, from about approximately US$29.8 million (MT 2 billion or about 0.2 per cent of GDP) to about $49.2 million (MT 3.3 billion or 0.3 per cent of GDP).

- The Government has requested $700 million from partners to help deal with the impact of the pandemic.

Official sources:

Mozambique Government COVID-19 webpage and Ministry of Health Official Twitter

WHO Mozambique Official Twitter

Other links:

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Responses to COVID-19, by IMF

NAMIBIA – TRENDS (8 Jun 2020)

Country further eases COVID-19 lockdown

- First case: 14 March 2020
- Total number of cases: 29 (as of 7 June 2020)
- Total deaths: 0
- Schools: Open since 2 June
- Borders/Flights: Commercial flights not operating. Road borders closed for non-resident foreign nationals, with exceptions including people seeking medical treatment, essential services, truck drivers transporting food and other essential commodities.
- Containment measures: State of Emergency declared 17 March; self-quarantine for returning residents and nationals; mandatory quarantine in isolation facilities for symptomatic cases; ban on gatherings of more than 50 people; clubs, casinos and gambling houses are closed.

Situation:

After Namibia sustained 45 days without a COVID-19 transmission, the country’s total number of cases reached 29 as of 7 June. Most of the country is easing restrictions to level three of its four-level lockdown system from 2 June, according to media reports. The harbour town of Walvis Bay, however, reverted to level one, the most restrictive, for at least seven days after two residents tested positive on 25 May. The Government has reportedly stepped up tracing of people who came into contact with the two residents. President Hage Geingob reportedly urged public vigilance despite the easing of restrictions, which will allow schools to resume face-to-face classes and restaurants to receive sit-down customers. Non-contact sports and gatherings of up to 50 people at weddings, funerals and other events will be allowed. Clubs, casinos and gambling
houses will remain closed as they are considered high-risk areas while truck drivers arriving in Namibia will be screened, tested on arrival and quarantined for 14 days, according to the media. The State of Emergency declared on 17 March was extended by the Parliament for a period of six months. The borders will remain closed.

Response:

- On 1 April 2020, the Government launched Economic Stimulus and Relief Package to mitigate the impact of COVID-19 for approximately US$434.5 million (8 billion Namibian Dollars, or 4.25 percent of GDP), including approximately $119.5 million (2.2 billion) for health, wage subsidies, and income grants; and guarantees of up to $124.9 million (2.3 billion) to support low interest loans for small and agricultural businesses, and individuals.

Official sources:

Namibia Presidency Official Twitter
Presidential Statement on extension of lockdown

Other links:

Namibian lockdown: Travel with permit allowed, by Namibian newspaper
COVID-19 Educational Disruption and Response, by UNESCO
COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
Policy Responses to COVID-19, by IMF

RWANDA — TRENDS (8 Jun 2020)

Lockdown partially lifted

- First case: 14 March
- Total cases: 439 (as of 7 June 2020)
- Total deaths: 2
- Schools: Closed (3.4 million learners affected).
- Borders/flights: Closed since 20 March, except for cargo.
- Containment measures: Lockdown since 21 March; domestic travels allowed since 1 June; daily curfew from 9 p.m., to 5 a.m.; 14-day quarantine for people coming into the country.

Situation:

Rwanda had 439 confirmed cases of COVID-19 as of 7 June, including two people who died from the disease. The Government lifted some of the restrictions from 1 June, the second time the country eases some COVID-19 measures. On 18 May, the daily curfew was reduced, starting from 9 p.m. instead of the previous 8 p.m. and finishing at 5 a.m. and some business resumed activities. Civil weddings have also been allowed with maximum 15 attendees. From 1 June, motorcycle taxis are allowed to resume services and restrictions on cross-provincial movements have also also been lifted. Borders will remain closed, except for goods and cargo, as well returning Rwandans and legal residents. All returnees will be subjected
to mandatory quarantine for 14 days at their own cost. Schools will remain closed until September, while churches and bars are still not allowed to open. Preventive measures such as wearing face masks and keeping a one-metre distance from people remain.

Rwanda was one of the first countries in the region to close its borders and restrict movements, on 20 and 21 March respectively. Since then, movement and visits outside homes are only permitted for essential services, including those seeking or providing healthcare, groceries or banking services. With all social gatherings banned, schools and places of worship were closed. There were reports of violence by security forces against people who allegedly violated the lockdown regulations. Some businesses have also been fined for selling commodities at higher prices.

Response:

- The Government announced a social protection plan to support vulnerable people across the country during the lockdown, with door to door provision of foodstuffs and groceries to vulnerable homes since 28 March.

Official sources:

Ministry of Health Official Twitter and Ministry of Health COVID-19 webpage

Ministry of Health Statement on New Measures to Prevent COVID-19 Coronavirus Transmission – 14 March

Other links:

BBC Rwanda COVID-19 coverage

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

SEYCHELLES — TRENDS  (2 Jun 2020)

Country has no active COVID-19 cases

- **First case:** 14 March
- **Total cases:** 11 (as of 15 May 2020)
- **Total deaths:** 0
- **Schools:** Reopened in mid-May.
- **Flights/Borders:** Airport and borders reopened on 1 June.
- **Containment measures:** Most restrictions are now lifted, with specific guidances to prevent transmissions.

Situation:

Seychelles has no active COVID-19 cases, after all 11 patients recovered from the disease, according to the Ministry of Health. Seychelles has started a gradual lifting of all restrictions imposed over the pandemic. As announced by President Danny Faure, all restrictions on the movement of people were removed from 4 May, while most services and business are
now allowed to operate, with specific guidance to be followed by some sectors. Religious services are also allowed, following guidance from the Department of Health. Day-care services resumed on 11 May, while all primary and secondary schools reopened on 18 May. Although the National Assembly approved a non-binding motion calling on the Government to keep the borders closed to visitors until the COVID-19 pandemic is controlled worldwide, the airport resumed activities on 1 June. Tourism businesses in Seychelles will reportedly be required to acquire a safe tourism certificate as the country plans to reactivate the sector and attract visitors, according to media reports. The country expects to receive tourists in chartered flights. These visitors will be expected to test for COVID-19 and will not be allowed to leave their resorts.

Response:

- The Government announced it will be cut non-essential spending across most ministries, departments and agencies by introducing measures such as placing a freeze on recruitment, restricting travel and reducing allowances. With the cancellation of several festivals and delaying the national census to 2021, the resources saved will be used to finance the construction of an isolation center, increase actual quarantine capacity and other health-related projects.
- Financial assistance will reportedly be provided to businesses to ensure that all their employees are paid in April, May and June 2020.

Official sources:

Seychelles State House Official Twitter and Ministry of Health webpage

Additional restrictions of movement in Seychelles, by State House on 16 April

Presidential address on COVID-19 situation on 14 April

Other links:

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

SOMALIA — TRENDS (8 Jun 2020)

Pandemic likely to compound fragile humanitarian situation

- First case: 16 March
- Total cases: 2,368 (as of 8 June 2020)
- Total deaths: 84
- Schools: Closed (544,000 learners affected)
- Borders/Flights: Closed for all international passenger flights since 18 March. Cargo flights allowed. Land borders with Kenya and Ethiopia closed.
- Containment measures: Curfew from 8 p.m. to 5 a.m imposed on 15 April for the capital Mogadishu. Nationwide ban of public gatherings. Self-quarantine required for travellers or those who had contact with symptomatic people.
Situation:

Somalia had recorded over 2,000 COVID-19 cases as of 4 June. Most of the cases have no travel history, signifying community transmission. The country has a weak healthcare system with limited capacity to prevent, detect and respond to a pandemic like COVID-19. Less than 20 per cent of the health facilities have the required equipment and supplies to manage an outbreak. There are also significant lacks in surveillance, laboratory testing and personal protective equipment. The COVID-19 pandemic is likely to compound an already fragile humanitarian situation in Somalia.

The country hosts large numbers of vulnerable people, including over 2.6 million internally displaced people (IDPs) living in 2,000 overcrowded sites, with poor access to safe drinking water, clean latrines and hygiene kits including soap. More than 1.2 million people are severely food insecure. The Government announced on 17 March a series of measures to contain the virus, including the closure of schools and a ban on large gatherings. All international and domestic flights are suspended and borders closed since 18 March. The travel ban has limited movement of humanitarian staff and contractors to and within the country, disrupting humanitarian operations. The closures of borders affected the usual movements of people between Doolow in Gedo Region in Somalia, Dollo Ado in Ethiopia and Mandera in Kenya, including people who were recently displaced by violence in Gedo.

Response:

- The Government launched on 26 March a national preparedness and response plan, which seeks US$57.8 million to scale up operations over the next nine months.

Visit the COVID-19 Response in Somalia page to learn more about the pandemic and the humanitarian situation in the country.

Official sources:

- Ministry of Health Official Twitter and Ministry of Health webpage
- COVID-19 Response in Somalia, by Ministry of Health and OCHA

Other links:

- COVID-19 Educational Disruption and Response, by UNESCO
- COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
- Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
- Policy Responses to COVID-19, by IMF

SOUTH AFRICA — TRENDS (8 Jun 2020)

School feeding programme to resume following further lifting of restrictions

- First case: 5 March 2020
- Total cases: 48,285 (as of 7 June 2020)
- Total deaths: 998
- Schools: Partially reopen from 1 June (14.6 million learners affected)
• **Borders/flights:** Closed for all non-resident foreign nationals.

• **Containment measures:** Nationwide lockdown imposed since 27 March and further extended; in the current level three, all economic activities are allowed, except for consuming food and alcohol in restaurants and bars, entertainment venues, hotel accommodation for leisure, gyms and personal care businesses.

**Situation:**

As of 7 June, South Africa confirmed that nearly 50,000 people have contracted COVID-19, including over 900 who died from the disease. The President announced on 24 May that the whole country will move from level four to level three of the lockdown restrictions on 1 June to allow the recovery of the economy while the Government reinforces the public health response to the pandemic. The decision comes despite an increasing number of cases in the country, with more than 1,460 confirmed on 28 May alone, the second day in a row with over than 1,000 infections reported. The change will also allow the country to resume the National School Nutrition Programme to over 9 million children, according to the Department of Basic Education, quoted by the media. According to the authorities, the programme will reopen both for learners who will be returning to school and for those who will still remain at home. The later will receive food parcels. Many children had lost access to at least one nutritious meal per day since the closure of schools and the feeding programme due to the COVID-19 pandemic in early March. The level three of the restrictions also permits places of worship to reopen, subject to sanitary restrictions to prevent infections from rising. All economic activities are allowed, except for consuming food and alcohol in restaurants and bars, entertainment venues, hotel accommodation for leisure, gyms and personal care businesses, where social distancing is not possible. Public gatherings and other high-risk activities, especially those that involve close contact between large numbers of people, remain prohibited.

The Government reportedly faced some challenges over the lockdown regulations, as several opposition parties, teacher unions and civil rights organizations approached courts contesting the constitutionality of the decisions made by the authorities. Educators Union of South Africa was the latest group to go to court on 26 May to challenge the Government’s plan to partially reopen schools on 1 June. Amidst the spiking number of transmissions, the Government is also struggling with its testing capacity, following the limited availability of test kits globally, according to media reports. Nearly 100,000 samples across the country had not been processed as of 25 May, which could mean that the actual number of infections in South Africa is even higher.

Previously on 21 April, President Cyril Ramaphosa acknowledged that “the nationwide lockdown is having a devastating effect on the economy” and added that “the pandemic has resulted in the sudden loss of income for businesses and individuals alike, deepening poverty and increasing hunger.” The statement followed a series of protests and disturbs across the country over access to food parcels handed out by the authorities. Several food stores have reportedly been looted in different localities. There have also been reports of violence by police, including alleged killings, since the lockdown began.

**Response:**

- The Government announced on 21 April a R500 billion Rand (approximately $26.4 billion) social relief and economic support package, involving, accordint to the authorities, a health budget to respond to coronavirus, the relief of hunger and social distress, the support for companies and workers, and the phased re-opening of the economy.

**Official sources:**

- [Government COVID-19 Official website](https://reports.unocha.org/en/country/southern-eastern-africa/)

- [Presidential Statement on increased violence against women and girls during the lockdown](https://reports.unocha.org/en/country/southern-eastern-africa/) - 13 April 2020

**Other links:**
South African police officer arrested for allegedly killing man who violated lockdown, by Democracy Now

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Responses to COVID-19, by IMF

SOUTH SUDAN – TRENDS  (5 Jun 2020)

COVID-19 will likely exacerbate an already fragile humanitarian situation

- **First case**: 5 April 2020
- **Total cases**: 1,317 (as of 4 June 2020)
- **Total deaths**: 14
- **Schools**: Closed (3.5 million learners affected).
- **Flights/Borders**: All international passenger flights suspended from 24 March, except for humanitarian aid, medical and relief services. All land borders closed.
- **Containment measures**: Nationwide curfew from 7 p.m. to 6 a.m. imposed from 29 April. 14-day quarantine mandatory for those arriving from abroad. Self-quarantine, with daily phone calls from public health officers, required for those who are suspected of having been in contact with people who contracted COVID-19.

**Situation**

South Sudan recorded its first COVID-19 case on 5 April 2020. Since then, 1,317 people with COVID-19 have been identified by the WHO on 4 June. Humanitarian partners are scaling up the humanitarian assistance to nearly 30,000 internally displaced people hosted in the PoC in Juba, increasing the number of hand-washing facilities and distributing three months’ worth of food in advance to encourage them to observe the lockdown and reduce movements. Across the country, containment measures have been imposed since 13 March, including the temporary closure of schools and universities, religious activities, ban on gatherings, sports events, and norms for physical distancing. All international passenger flights and land crossing borders have been suspended since 24 March by the Government-led High-Level Task Force, allowing only humanitarian cargo, food and fuel trucks to enter the country. On 13 April, the Government also suspended all internal passenger flights from Juba along with all passenger transport, both private and public.

Humanitarian partners are working to make sure the pandemic does not disrupt aid operations in South Sudan. The United Nations Humanitarian Air Services (UNHAS) cargo flights continue operate and the World Food Programme (WFP), on behalf of the humanitarian system, is engaged with national authorities to enable critical programme personnel movement within the country. COVID-19 testing previously required for all humanitarian staff travelling in Juba on official missions have been removed effective 1 May. However, all travelers must observe a 14-day quarantine prior to travel and authorized health workers from the Ministry of Health must be allowed free regular access to the quarantine facility.

COVID-19 will likely exacerbate an already fragile humanitarian situation in South Sudan. The cumulative effects of years of prolonged conflict, chronic vulnerabilities and weak essential services have left 7.5 million people in need of humanitarian assistance. More than 1.6 million people are internally displaced, nearly 6 million people are severely food insecure and most of the population lack access to health services.
Response

- The country’s High-Level Task Force on COVID-19, chaired by the first Vice President, is leading the response, with technical support from WHO, US Centers for Disease Control (CDC), Technical Working Groups (TWGs) and humanitarian partners. Training of health workers, surveillance, contact tracing, risk communication, case management and expanding the John Garang Infectious Disease Unit from 24 to 80 beds are among the main activities.

- WHO, in support of the Ministry of Health, pre-positioned COVID-19 supplies as part of the national COVID-19 preparedness and response plan to 20 locations across the country.

- Humanitarians are targeting more than 5 million vulnerable people with assistance during the COVID-19 pandemic.

- Up to 12 months of nutritional supplies are being prepositioned for vulnerable families, focusing on tackling acute malnutrition, pregnant and breast-feeding women and the chronically ill.

- Communal hand-washing sites are being set up in high-density areas like Juba, Wau, Malakal and Bentiu.

- Tens of thousands of educational flashcards, pamphlets, banners and posters in multiple languages are being distributed.

- Radio Miraya, a radio station owned and operated by the UN Mission in South Sudan, is broadcasting health information to people across the country.

- A media desk is set up at the Ministry of Health to improve the flow of information to the public and journalists are being trained in how to curb misinformation and rumours.

To learn more about the COVID-19 and its humanitarian impact in South Sudan, visit this page.

Official sources:

Ministry of Health Official Twitter and Government Official Twitter

WHO South Sudan Twitter

Other sources:

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Policy Response to COVID-19, by IMF

SUDAN — TRENDS  (9 Jun 2020)

Federal Ministry of Health confirms 6,242 cases as of 6 June

- First case: 14 March 2020
- Total cases: 6,242 (as of 6 June 2020)
- Total deaths: 359
- States affected: All 18 states
• Schools: Closed (8,375,193 learners affected).
• Borders/flights: All land borders closed. Sudan extends the closure of airports for international and domestic passenger flights until 15 June 2020. This excludes scheduled cargo, humanitarian aid and technical and humanitarian support flights; airlines operating in the oil fields; and evacuation flights for foreign nationals.
• Containment measures: Khartoum State has extended its lockdown for another two weeks from 3 - 18 June. Bridges linking Omdurman and Khartoum North are closed. People can access neighbourhood shops, bakeries and pharmacies between 6 a.m. and 3 p.m. daily. In addition, the Ministry of Awqaf (Religious Endowments) has suspended prayers in mosques and church services in the state during the three-week lockdown period. Some states in Darfur Region have closed borders and have imposed curfews to limit the movement of people.

Situation

Sudan recorded its first COVID-19 case on 14 March 2020. Since then, the Federal Ministry of Health has confirmed that 6,242 people contracted the virus, including 372 who died from the disease. The majority of the confirmed cases are in Khartoum State. In advance of the three-week lockdown in Khartoum State, authorities targeted 600,000 urban poor for a one-off assistance, including food parcels and other essential supplies during the emergency period. The Ministry of Finance and Economic Planning (MoFEP) has also been working on different options to support the population during the COVID-19 lockdown. Among the activities, the MoFEP developed a plan to scale up financing to the health sector and provide cash transfers to 80 per cent of the population—more than 30 million people—most of them informal sector workers whose livelihoods will likely be affected by the restrictions. Each person will receive SDG500.00 (around US$90) per month, according to the Ministry. In addition, the MoFEP informed it would carry out a civil service salary reform to help those on fixed incomes; cushion the private sector through tax and customs exemptions; and it is also evaluating possible support for exporters and other productive industries affected by exchange rates and depreciation.

The Federal Government, the United Nations (UN) and humanitarian partners have joined their efforts to prevent and respond to the COVID-19 outbreak in Sudan. A COVID-19 Country Preparedness and Response Plan (CPRP), organized around eight pillars, is currently being implemented by UN agencies, NGOs and other partners in support to the Sudanese Government-led response.

Immediate priorities include:

• Strengthening the state coordination mechanisms.
• Improvement and scale up of isolation centres at the state level.
• Scaling up the risk communications and infection, prevention and control activities.
• Scaling up testing capacity and prevent delays.
• Strengthening of screening and quarantine facilities at points of entry.
• Improvement in contact tracing.

Official sources:
Sudan Federal Ministry of Health
WHO Sudan Twitter

Other sources:
COVID-19 Educational Disruption and Response, by UNESCO
TANZANIA — TRENDS  (2 Jun 2020)

Borders and schools reopen amidst increasing criticism over the lack of information on COVID-19 numbers

- **First case:** 16 March
- **Total cases:** 509 (as of 8 May 2020)
- **Total deaths:** 21
- **Schools:** Reopened on 1 June.
- **Borders/flights:** Open, no quarantine requested for travellers.
- **Containment measures:** no restrictions currently in place.

Tanzania’s confirmed number of people who tested positive for COVID-19 remains at 509, including 21 who died from the disease. The total, however, is likely to be higher, as the Government has not made public any official update since 8 May. The delay in releasing new numbers has led opposition parties in the country to demand the Government the truth about the COVID-19 outbreak, according to media reports. In a health alert released by the U.S. Embassy in Tanzania on 13 May, the United States warned its citizens that "despite limited official reports, all evidence points to exponential growth of the epidemic in Dar es Sallam and other locations in Tanzania," adding that "many hospitals in Dar have been overwhelmed in recent weeks".

The President of Tanzania announced on 18 May that the country reopened its borders to international passenger flights and there is no mandatory quarantine for incoming travellers as previously required. Authorities will, instead, enhance COVID-19 screening at the borders. Schools and universities also reopened from 1 June, and all economic activities are allowed to operate.

The Government suspended on 4 May the head of its National Health Laboratory in charge of COVID-19 testing, a day after the President questioned the accuracy of the tests, stating the material sent by the African Union were faulty. Following the incident, the Head of the African Union’s Centre for Disease Control and Prevention (Africa CDC), on 7 May, rejected the allegations of problems on the materials and informed during a press conference that the tests used by Tanzania are working correctly. Since the start of the pandemic, political parties and civil society organizations have been repeatedly accused the Government of downplaying the effect of the virus and criticized President Magufuli for allegedly hiding information and misleading the population. The leader has been encouraging people to pray and attend church, as religious gatherings are allowed in the country.

**Response:**

- President John Magufuli has banned the 56 Union Celebrations, normally held on 26 April, and ordered that the Sh500 million that was budgeted for the event be spent on boosting the COVID-19 Special Fund for the Revolutionary Government of Zanzibar.

- The Ministry of Education has announced arrangements to ensure that student learning programs are aired through radio and television, following the indefinite extension of closure of schools announced on 14 April.

**Official sources:**
UGANDA — TRENDS (8 Jun 2020)

Government starts to ease containment measures

- **First case:** 21 March 2020
- **Total cases:** 646 (as of 7 June 2020)
- **Total deaths:** 0
- **Schools:** Closed countrywide (9.6 million learners affected).
- **Borders/Flights:** All borders closed; International flights suspended until 24 April, except for aircraft in a state of emergency, humanitarian aid, medical and relief flights and technical landings.
- **Containment measures:** National curfew from 7 pm to 6:30 am from 31 March. Shops, hotels and restaurants allowed to resume operations since 26 May; private transports are also allowed, while public transports will resume on 4 June.

Situation:

Uganda has reported 646 people with COVID-19 as of 7 June. The number of people who contracted the virus was revised on 21 May, after the country deducted 120 foreign truck drivers who tested positive in Uganda from the total. The decision was directed by President Musevini, according to the Ministry of Health twitter account. The Ministry informed that, on 20 May, Uganda "handed over" 21 foreign truck drivers who tested positive for coronavirus to their country of origin. In total, at least 145 drivers have been sent back to their countries, according to the Ministry of Health. The Government had tried to change the official numbers when the first drivers tested positive in the country in Mid-April but had gone back on the decision following WHO guidance that any person with COVID-19 should be counted and treated in the country where their tested positive. On 28 April, the Ministry of Health denied allegations that Uganda was repatriating truck drivers.

Uganda reportedly started on 26 May a phased easing of restrictions imposed in March to contain the COVID-19 outbreak in the country, according to media reports. Shops, hotels and restaurants are now allowed to resume operations as long as some measures, including social distancing guidelines and the mandatory use of face masks on public spaces, according to the media. Private transports are also allowed, while public transports will resume on 4 June. Private transport, however, is still banned in the country's border districts to limit cross-border transmissions. Schools are expected to restart on 4 June. All the other restrictions like closure of the country's borders except for cargo transport will remain in place, according to the Government, quoted by the media.

Uganda had previously instituted 54 measures to contain the virus, including closing all educational institutions, suspending communal prayers in mosques, churches and other venues, stopping all public political rallies, cultural gatherings or conferences, and banning the movement of all privately owned passenger vehicles. When the President announced on 14
April the extension of the measures he highlighted that, even during the lockdown, certain activities should continue, including work on farms to produce crops for food and cash, work in the factories, provided the companies camp their workers nearby, cargo transport, provision of utilities, medical services and others. UNHCR has urged all countries in the region, including Uganda, to continue to provide protection and access to asylum to people fleeing war and persecution during this challenging time.

Response:

The Government has implemented a house-to-house food distribution during the lockdown. President Museveni has stated that the food support is targeted in urban areas towards people who relied on daily earnings that have been impacted by the anti-COVID-19 measures—including working in hair salons; bars; night clubs; garages; selling non-food items in markets; etc—and who do not grow their own food.

Official sources:

Ministry of Health Official Twitter and Ministry of Health COVID-19 webpage

WHO Uganda

President Museveni’s fourth address

Other links:

UNHCR stepping up coronavirus prevention measures for refugees across East, Horn and Great Lakes region of Africa

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Potential Socioeconomic Impact of COVID-19 in Angola: A Brief Analysis, by NHABITAT/UNDP

Policy Response to COVID-19, by IMF

ZAMBIA — TRENDS (8 Jun 2020)

Spike in number of infections causes concern in Zambia

- **First case:** 19 March
- **Total cases:** 1,200 (as of 7 June 2020)
- **Total deaths:** 10
- **Schools:** Closed country-wide from 20 March (4 million learners affected).
- **Borders/Flights:** Borders are still open, but international flights are only allowed in and out of Kenneth Kaunda International Lusaka Airport.
- **Containment measures:** Travellers required to self-quarantine for 14 days; public gatherings, including conferences, weddings, funerals and festivals restricted to not more than 50 people.

Situation:
The number of people who contracted COVID-19 in Zambia has dramatically increased over the last couple of weeks, jumping from 167 on 9 May to 771 on 17 May. Now, 1,200 cases have been confirmed, as of 7 June. The Government declared on 10 May a total lockdown of Nakonde District, in the border with Tanzania, one of the epicentres of the outbreak. On 20 May alone some 402 cases had been confirmed in the area, out of 887 tests conducted. Immigration officers, truck drivers, sex workers, health workers and other contacts are among the people who contracted the virus. At least 31 were immigration officers and 27 health workers, increasing concerns of the level of transmission. Borders remain closed, including for cargo, generating long queues of trucks at the point of entry, according to humanitarian partners in the country. Security forces have been deployed to enforce the restrictions, with media reporting some incidents, including the arrest of nine motortaxi drivers on 21 May for allegedly protest the restrictions.

For the rest of the country, the Government has not ordered any closure of borders at any point of the outbreak to avoid the negative impact on trade and economy. Some other limitations and closure of some businesses have, however, been imposed. The Government has banned public gatherings and, effective 26 March, gyms, bars, casinos and night clubs were closed, and restaurants allowed to only serve takeaway. Essential services, including pharmacies and food stores, remain open, with orders to adhere to strict hygiene standards. Schools, colleges and universities were closed from 20 March, but markets and churches continue to operate.

Nearly 1.2 million children are missing out on school meals in Zambia due to the COVID-19 containment measures, according to WFP. The Zambian economy is expected to be adversely impacted by the decline in copper prices, depreciation of local currency, and economic disruptions due to lockdowns in trading partners, according to the IMF.

Official sources:
- Ministry of Health Official Twitter and Ministry of Health Facebook Page
- Ministry of Health Situation Reports
- President’s address on COVID-19 impact and response - 25 March 2020

Other links:
- Global Monitoring of School Meals During COVID-19 School Closures, by WFP
- COVID-19 Educational Disruption and Response, by UNESCO
- COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)
- Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)
- Policy Responses to COVID-19, by IMF

ZIMBABWE – TRENDS (8 Jun 2020)

Government declares COVID-19 crisis a national disaster

- First case: 20 March
- Total cases: 282 (as of 7 June 2020)
- Total deaths: 4
- Schools: Closed (4.1 million learners affected)
**Food distributions in Zimbabwe have been adapted to prevent the transmission of COVID, like this one organized by WFP in Bindura District. Photo: WFP/Tatenda Macheka**

- **Borders/Flights:** No commercial international flights permitted during nationwide lockdown. Borders remain open for cargo.

- **Containment measures:** National lockdown in place since 30 March; domestic travels allowed only for seeking/providing essential services; Seven-day mandatory quarantine at Government facilities for travellers or those who had contact with symptomatic people.

**Situation:**

Zimbabwe confirmed that 282 people had contracted COVID-19, including four who died from the disease, as of 7 June. The Government declared the COVID-19 crisis a "national disaster" on 27 March and introduced an initial 21-day national lockdown on 30 March. The measure has later been extended indefinitely with a review every two weeks. Some restrictions were lifted on 1 May to allow formal business to resume operations, following specific prevention measures as the screening of employees. All international passenger flights in and out of Zimbabwe remain suspended and schools are closed. Citizens have been advised to limit their visits to the informal markets, which are still allowed to function. People found guilty of spreading fake news on coronavirus can be charged with 20 years of prison.

Following several reports of police brutality during the State of Emergency, the High Court granted on 14 April, an interim order that any enforcement officers engaged in implementing the country's lockdown must respect human rights, dignity and fundamental freedoms, according to the Zimbabwe Lawyers for Human Rights. On 20 May, the Heads of Mission of the Delegation of the European Union, France, Germany, Greece, Italy, the Netherlands, Romania, Sweden, Norway, Switzerland, the United Kingdom and the United States of America issued a statement exhorting the Government of Zimbabwe to respect human rights. The letter follows the abduction and torture of two leaders of the Movement for Democratic Change (MDC), and a member of the Parliament, all opponents of the Government. The three women were reportedly sexually assaulted by police officers after being arrested during a protest in Harare on 13 May over the impact of COVID-19-related restrictions on vulnerable families.

The Human Rights Watch (HRW) group has raised concerns over the severe water and sanitation crisis, which is likely to undermine the fight against the COVID-19 pandemic. According to HRW, thousands of women and school-age children are spending eight to nine hours and all night in lines at crowded boreholes or narrow water wells to get water, increasing risks of violence. The Women's Coalition of Zimbabwe has reported that at least 764 cases of gender-based violence (GBV) occurred during the first 11 days of the COVID-19 national lockdown, above the monthly average of 500 GBV cases.

At least 4,878 migrants from Zimbabwe have returned to the country in April and May from neighbouring nations, the majority of them from South Africa, according to IOM. Nearly 2,500 Zimbabweans returned from South Africa between 7 and 17 May 2020 through the Beitbridge border post alone, a significant increase compared to the 102 returnees registered in April. Higher numbers of repatriations are expected in the coming months due to the socio-economic impact of the COVID-19 pandemic.

Before the COVID-19 outbreak, Zimbabwe was already facing increased humanitarian needs due to multiple climate shocks and a harsh economic crisis. The health system was nearly collapsing and at least 7 million people in urban and rural areas across Zimbabwe were facing increasing hunger and need of assistance.

**Response:**
The Government launched its COVID-19 National Preparedness and Response Plan on 19 March and has said it will increase cash transfers for 1 million vulnerable households.

In May, Zimbabwe was added to the Global Humanitarian Response Plan for COVID-19, with $84.9 million required to reach 5.9 million people with urgent COVID-19-related assistance. This comes on top of the pre-existing requirement of $715 million to reach 5.6 million people in Zimbabwe with life-saving assistance and protection, which was called for under the Zimbabwe Humanitarian Response Plan.

Official sources:

Ministry of Information Official Twitter and Ministry of Health Official Twitter

Zimbabwe COVID-19 Dashboard and Ministry of Health Daily Updates

Other links:

Unsafe Water Raises COVID-19 Risks, by Human Rights Watch

20 years in jail for spreading fake coronavirus news, by The Standard

High Court granted an interim order that police must respect human rights, by ZLHR Lawyers

COVID-19 Educational Disruption and Response, by UNESCO

COVID-19 World Travel Restrictions, by the Emergency Division of the World Food Programme (WFP)

Global COVID-19 Airport Status, by the International Civil Aviation Organization (ICAO)

Response to COVID-19, by IMF