

AFRO Weekly COVID-19 Literature Update

2022/12/16-2022/12/22

Prepared by AFRO COVID-19 IMST through its information management cell, together with DAK team of the ARD's office

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

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

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

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

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

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

Les publications partagées sont le résultat d'un travail de recherche bibliographique effectué régulièrement sur plusieurs sources d'information en ligne avec une comme stratégie de recherche majeure "COVID-19 ET Afrique" combinés aux mots clés suivants : epidemiology (response activities OR hygiene practices OR social distancing OR case management), vaccination, public perceptions, other diseases and other sectors. Pour ce numéro, la liste des sources d'information utilisées est la suivante : WHO Covid-19 database, PubMed, BioMed Central, Lancet (including sister journals), One library, African Index Medicus, Nature (including sister journals), Science (including sister journals), PLOS, Google scholar, Oxford University Press, Taylor & Francis, Springer, the BMJ.

Cette liste est susceptible d'être modifiée. Veuillez noter que le choix des publications à inclure dans cette mise à jour est subjectif.

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

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

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

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

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Topics

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

Title: Incorporating COVID-19 into Acute Febrile Illness Surveillance Systems, Belize, Kenya, Ethiopia, Peru, and Liberia, 2020–2021 **Journal**: Emerging Infectious Diseases **Publish Date**: December 2022

URL: <u>Incorporating COVID-19 into Acute Febrile Illness Surveillance Systems, Belize, Kenya, Ethiopia, Peru, and Liberia, 2020–2021 - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC</u>

Abstract:

Existing acute febrile illness (AFI) surveillance systems can be leveraged to identify and characterize emerging pathogens, such as SARS-CoV-2, which causes COVID-19. The US Centers for Disease Control and Prevention collaborated with ministries of health and implementing partners in Belize, Ethiopia, Kenya, Liberia, and Peru to adapt AFI surveillance systems to generate COVID-19 response information. Staff at sentinel sites collected epidemiologic data from persons meeting AFI criteria and specimens for SARS-CoV-2 testing. A total of 5,501 patients with AFI were enrolled during March 2020–October 2021; >69% underwent SARS-CoV-2 testing. Percentage positivity for SARS-CoV-2 ranged from 4% (87/2,151, Kenya) to 19% (22/115, Ethiopia). We show SARS-CoV-2 testing was successfully integrated into AFI surveillance in 5 low- to middle-income countries to detect COVID-19 within AFI care-seeking populations. AFI surveillance systems can be used to build capacity to detect and respond to both emerging and endemic infectious disease threats.

Title: Extending and Strengthening Routine DHIS2 Surveillance Systems for COVID-19 Responses in Sierra Leone, Sri Lanka, and Uganda

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: Extending and Strengthening Routine DHIS2 Surveillance Systems for COVID-19 Responses in Sierra Leone, Sri Lanka, and Uganda - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC

Abstract:

The COVID-19 pandemic challenged countries to protect their populations from this emerging disease. One aspect of that challenge was to rapidly modify national surveillance systems or create new systems that would effectively detect new cases of COVID-19. Fifty-five countries leveraged past investments in District Health Information Software version 2 (DHIS2) to quickly adapt their national public health surveillance systems for COVID-19 case reporting and response activities. We provide background on DHIS2 and describe case studies from Sierra Leone, Sri Lanka, and Uganda to illustrate how the DHIS2 platform, its community of practice, long-term capacity building, and local autonomy enabled countries to establish an effective COVID-19 response. With these case studies, we provide valuable insights and recommendations for strategies that can be used for national electronic disease surveillance platforms to detect new and emerging pathogens and respond to public health emergencies.

Title: Comparison of COVID-19 Pandemic Waves in 10 Countries in Southern Africa, 2020–2021

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: <u>Comparison of COVID-19 Pandemic Waves in 10 Countries in Southern Africa,</u> 2020–2021 - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC

Abstract:

We used publicly available data to describe epidemiology, genomic surveillance, and public health and social measures from the first 3 COVID-19 pandemic waves in southern

Africa during April 6, 2020–September 19, 2021. South Africa detected regional waves on average 7.2 weeks before other countries. Average testing volume 244 tests/million/day) increased across waves and was highest in upper-middle-income countries. Across the 3 waves, average reported regional incidence increased (17.4, 51.9, 123.3 cases/1 million population/day), as did positivity of diagnostic tests (8.8%, 12.2%, 14.5%); mortality (0.3, 1.5, 2.7 deaths/1 million population/day); and case-fatality ratios (1.9%, 2.1%, 2.5%). Beta variant (B.1.351) drove the second wave and Delta (B.1.617.2) the third. Stringent implementation of safety measures declined across waves. As of September 19, 2021, completed vaccination coverage remained low (8.1% of total population). Our findings highlight opportunities for strengthening surveillance, health systems, and access to realistically available therapeutics, and scaling up risk-based vaccination.

Title: Using Population Mobility Patterns to Adapt COVID-19 Response Strategies in 3 East Africa Countries

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: <u>Using Population Mobility Patterns to Adapt COVID-19 Response Strategies in 3</u> <u>East Africa Countries - Volume 28, Supplement—December 2022 - Emerging Infectious</u> <u>Diseases journal - CDC</u>

Abstract:

The COVID-19 pandemic spread between neighboring countries through land, water, and air travel. Since May 2020, ministries of health for the Democratic Republic of the Congo, Tanzania, and Uganda have sought to clarify population movement patterns to improve their disease surveillance and pandemic response efforts. Ministry of Health–led teams completed focus group discussions with participatory mapping using country-adapted Population Connectivity Across Borders toolkits. They analyzed the qualitative and spatial data to prioritize locations for enhanced COVID-19 surveillance, community outreach, and cross-border collaboration. Each country employed varying toolkit strategies, but all countries applied the results to adapt their national and binational communicable disease response strategies during the pandemic, although the Democratic Republic of the Congo used only the raw data rather than generating datasets and digitized products. This 3-country comparison highlights how governments create preparedness and response strategies adapted to their unique sociocultural and cross-border dynamics to strengthen global health security.

Title: Effects of COVID-19 on Vaccine-Preventable Disease Surveillance Systems in the World Health Organization African Region, 2020

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: Effects of COVID-19 on Vaccine-Preventable Disease Surveillance Systems in the World Health Organization African Region, 2020 - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC

Abstract:

Global emergence of the COVID-19 pandemic in 2020 curtailed vaccine-preventable disease (VPD) surveillance activities, but little is known about which surveillance components were most affected. In May 2021, we surveyed 214 STOP (originally Stop

Transmission of Polio) Program consultants to determine how VPD surveillance activities were affected by the COVID-19 pandemic throughout 2020, primarily in low- and middleincome countries, where program consultants are deployed. Our report highlights the responses from 154 (96%) of the 160 consultants deployed to the World Health Organization African Region, which comprises 75% (160/214) of all STOP Program consultants deployed globally in early 2021. Most survey respondents observed that VPD surveillance activities were somewhat or severely affected by the COVID-19 pandemic in 2020. Reprioritization of surveillance staff and changes in health-seeking behaviors were factors commonly perceived to decrease VPD surveillance activities. Our findings suggest the need for strategies to restore VPD surveillance to prepandemic levels.

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

Title Adapting Longstanding Public Health Collaborations between Government of Kenya and CDC Kenya in Response to the COVID-19 Pandemic, 2020-2021

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: Adapting Longstanding Public Health Collaborations between Government of Kenya and CDC Kenya in Response to the COVID-19 Pandemic, 2020-2021 - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC

Abstract:

Objectives

Kenya's Ministry of Health (MOH) and the US Centers for Disease Control and Prevention in Kenya (CDC Kenya) have maintained a 40-year partnership during which measures were implemented to prevent, detect, and respond to disease threats. During the COVID-19 pandemic, the MOH and CDC Kenya rapidly responded to mitigate disease impact on Kenya's 52 million residents. We describe activities undertaken jointly by the MOH and CDC Kenya that lessened the effects of COVID-19 during 5 epidemic waves from March through December 2021. Activities included establishing national and county-level emergency operations centers and implementing workforce development and deployment, infection prevention and control training, laboratory diagnostic advancement, enhanced surveillance, and information management. The COVID-19 pandemic provided fresh impetus for the government of Kenya to establish a national public health institute, launched in January 2022, to consolidate its public health activities and counter COVID-19 and future infectious, vaccine-preventable, and emerging zoonotic diseases.

Title: Effect of Nigeria Presidential Task Force on COVID-19 Pandemic, Nigeria Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: Effect of Nigeria Presidential Task Force on COVID-19 Pandemic, Nigeria - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC

Abstract:

Nigeria had a confirmed case of COVID-19 on February 28, 2020. On March 17, 2020, the Nigerian Government inaugurated the Presidential Task Force (PTF) on COVID-19 to coordinate the country's multisectoral intergovernmental response. The PTF developed

the National COVID-19 Multisectoral Pandemic Response Plan as the blueprint for implementing the response plans. The PTF provided funding, coordination, and governance for the public health response and executed resource mobilization and social welfare support, establishing the framework for containment measures and economic reopening. Despite the challenges of a weak healthcare infrastructure, staff shortages, logistic issues, commodity shortages, currency devaluation, and varying state government cooperation, high-level multisectoral PTF coordination contributed to minimizing the effects of the pandemic through early implementation of mitigation efforts, supported by a strong collaborative partnership with bilateral, multilateral, and private-sector organizations. We describe the lessons learned from the PTF COVID-19 for future multisectoral public health response.

C. COVID-19 VACCINATION

Title: Leveraging HIV Program and Civil Society to Accelerate COVID-19 Vaccine Uptake, Zambia

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: Leveraging HIV Program and Civil Society to Accelerate COVID-19 Vaccine Uptake, Zambia - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal - CDC

Abstract

To accelerate COVID-19 vaccination delivery, Zambia integrated COVID-19 vaccination into HIV treatment centers and used World AIDS Day 2021 to launch a national vaccination campaign. This campaign was associated with significantly increased vaccinations, demonstrating that HIV programs can be leveraged to increase COVID-19 vaccine uptake.

Title: Post COVID-19 vaccination side effects and associated factors among vaccinated health care providers in Oromia region, Ethiopia in 2021 **Journal**: PLoS ONE

Publish Date: December 8, 2022

URL:<u>https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0278334&type</u>=printable

Abstract:

Background

Severe Acute Respiratory Syndrome (SARS COV-2) known as COVID-19 since its outbreak in 2019, more than 375 and 5.6 million were infected and dead, respectively. Its influence in all disciplines stimulated different industries to work day to night relentlessly to develop safe and effective vaccines to reduce the catastrophic effect of the disease. With the increasing number of people globally who have been vaccinated, the reports on possible adverse events have grown and gained great public attention. This study aims to determine post-COVID-19 vaccination adverse effects and associated factors among vaccinated Health care providers in the Oromia region, Ethiopia in 2021.

Methods

A cross-sectional study was conducted among 912 health care workers working in government hospitals in the central Oromia region from November 20 to December

15/2021. Respondents absent from work due to different reasons were excluded during the interview. The outcome variable was COVID-19 side effects (response as Yes/No). A descriptive analysis displayed findings in the form of the frequencies and percentages, and logistic regression was employed to see the association of different variables with side effects experienced.

Result

Overall, 92.1% of the participants experienced side effects either in 1st or 2nd doses of post-COVID-19 vaccination; 84.0% and (71.5%) of participants experienced at least one side effect in the 1st and 2nd dose of the vaccines, respectively. COVID-19 infection preventive protocols like keeping distance, hand wash using soap, wearing mask and using sanitizer were decreased post vaccination. About 74.3% of the respondents were worried about the adverse effects of the COVID-19 vaccine they received. The majority (80.2%) of the respondent felt fear while receiving the vaccine and 22.5% of the respondents suspect the effectiveness of the vaccine they took. About 14.8% of the vaccinated Health workers were infected by COVID-19 post-vaccination. Engaging in moderate physical activity and feeling fear when vaccinated were the independent factors associated with reported side effects of post-COVID-19 vaccination using multiple logistic regression. Respondents who did not engage in physical activity were 7.54 fold more likely to develop post-COVID-19 vaccination side effects compared to those who involved at least moderate-intensity physical activity [AOR = 7.54, 95% CI;2.46,23.12]. The odds of experiencing side effects among the respondents who felt fear when vaccinated were 10.73 times compared not felt fear (AOR = 10.73, 95% CI; 2.47,46.64), and similarly, those who felt little fear were 4.28 times more likely to experience side effects(AOR = 4.28, 95% CI; 1.28, 14.39).

Conclusion

Significant numbers of the respondents experienced side effects post COVID-19 vaccination. It is recommended to provide pre-awareness about the side effects to reduce observed anxiety related to the vaccine. It is also important to plan monitoring and evaluation of the post-vaccine effect using standard longitudinal study designs to measure the effects directly.

Title: Attitude and level of COVID-19 vaccination and its determinants among patients with chronic disease visiting Debre Tabor Comprehensive Specialized Hospital, Northwest Ethiopia: A cross-sectional study

Journal: PLoS ONE

Publish Date: December 9, 2022

URL:

https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0278914&type=print able

Abstract:

Introduction

Coronavirus disease is a fatal viral disease caused by severe acute respiratory syndrome coronavirus 2. This study was aimed to assess the attitude, level of COVID-19 vaccine uptake, and its determinants among patients with chronic diseases visiting Debre Tabor Comprehensive Specialized Hospital, Northwest Ethiopia.

Methods

An institutional-based cross-sectional study was conducted among 422 randomly selected patients with chronic disease visiting Debre Tabor Comprehensive Specialized Hospital from February 1 to March 30, 2022. Bivariable and multivariable binary logistic regression analyses were done to identify associations between dependent and independent variables.

Results

Among all participants, only 29.6% of patients were vaccinated with any of the COVID-19 vaccines at least one dose. Age from 31 to 40 years (AOR = 6.26, 95% CI: 2.69–14.56), attended collage and above (AOR = 6.3, 95% CI: 1.37, 28.68), positive attitude towards COVID-19 vaccine (AOR = 9.07, 95% CI: 4.51–18.22), good knowledge (AOR = 7.63, 95% CI: 1.08–16.85), history of COVID-19 (AOR = 4.33, 95% CI: 1.85–10.17), family history of COVID-19 (AOR = 3.99, 95% CI = 1.89–8.48), ever been tested for COVID-19 (AOR = 0.33, 95% CI: 0.15–0.74) were determinant factors for COVID-19 vaccine uptake.

Conclusion

COVID-19 vaccine uptake among patients with chronic disease was very low. The main reasons for not being vaccinated were doubts about vaccine efficacy, the vaccine may cause disease by itself, and fear of adverse effects. Therefore, different stakeholders should enforce vaccine uptake and awareness creation.

D. COVID-19 PUBLIC PERCEPTIONS AND EFFECTS

Title: Uptake of public health measures and vaccine acceptance during the COVID-19 pandemic in rural Zambia

Journal: Human Vaccines & Immunotherapeutics

Publish Date: 08 Dec 2022

URL:<u>https://www.tandfonline.com/doi/epdf/10.1080/21645515.2022.2153538?needAcces</u> s=true&role=button

Abstract:

Vaccines are effective tools to prevent COVID-19-related morbidity. However, coverage is low throughout sub-Saharan Africa. Uptake of public health measures, perceptions of COVID-19 illness and vaccines, and intention to vaccinate were evaluated in 2021–2022 in rural Zambia. Adherence to public health measures, perceptions of COVID-19 risk and severity, and vaccine acceptance increased significantly over time, particularly in December 2021, coinciding with the fourth pandemic wave and relaunch of the national vaccine campaign. Vaccine acceptance was associated with perceptions of vaccine safety and effectiveness, but not disease severity. These findings highlight the importance of strong pandemic response and public communication for increased uptake of mitigatory measures, including vaccine acceptance.

E. COVID-19 EFFECTS ON OTHER DISEASES AND SECTORS

Title: Sexual Violence Trends before and after Rollout of COVID-19 Mitigation Measures, Kenya

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: <u>Sexual Violence Trends before and after Rollout of COVID-19 Mitigation Measures</u>, <u>Kenya - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases journal</u> <u>- CDC</u>

Abstract:

COVID-19 mitigation measures such as curfews, lockdowns, and movement restrictions are effective in reducing the transmission of SARS-CoV-2; however, these measures can enable sexual violence. We used data from the Kenya Health Information System and different time-series approaches to model the unintended consequences of COVID-19 mitigation measures on sexual violence trends in Kenya. We found a model-dependent 73%–122% increase in reported sexual violence cases, mostly among persons 10–17 years of age, translating to 35,688 excess sexual violence cases above what would have been expected in the absence of COVID-19–related restrictions. In addition, during lockdown, the percentage of reported rape survivors receiving recommended HIV PEP decreased from 61% to 51% and STI treatment from 72% to 61%. Sexual violence surveillance systems, enhancing prevention efforts during school closures, and maintaining access to essential comprehensive services for all ages and sexes.

Title: Outcomes after Acute Malnutrition Program Adaptations to COVID-19, Uganda, Ethiopia, and Somalia

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: <u>Outcomes after Acute Malnutrition Program Adaptations to COVID-19, Uganda,</u> <u>Ethiopia, and Somalia - Volume 28, Supplement—December 2022 - Emerging Infectious</u> <u>Diseases journal - CDC</u>

Abstract:

At the onset of the COVID-19 pandemic, protocols for community-based management of acute malnutrition (CMAM) were implemented to support continuity of essential feeding services while mitigating COVID-19 transmission. To assess correlations between adaptation timing and CMAM program indicators, we evaluated routine program data in Uganda, Ethiopia, and Somalia for children 6–59 months of age. We specifically analyzed facility-level changes in total admissions, average length of stay (ALOS), total children screened for admission, and recovery rates before and after adaptations. We found no statistically significant changes in program indicators after adaptations. For Somalia, we also analyzed child-level changes in ALOS and in weight and mid–upper arm circumference at admission and discharge. ALOS significantly increased immediately after adaptations and then decreased to preadaptation levels. We found no meaningful changes in either weight or mid–upper arm circumference at admission or discharge. These findings indicate that adapted CMAM programs can remain effective.

Title: Lessons from Nigeria's Adaptation of Global Health Initiatives during the COVID-19 Pandemic

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: <u>Lessons from Nigeria's Adaptation of Global Health Initiatives during the COVID-19</u> <u>Pandemic - Volume 28, Supplement—December 2022 - Emerging Infectious Diseases</u> <u>journal - CDC</u>

Abstract:

Nigeria receives funds from several global health initiatives that are aimed at addressing elevated risks and overall burden of infectious disease outbreaks. These funds include the Global Fund to Fight AIDS, Tuberculosis and Malaria; US President's Emergency Plan for AIDS Relief; US President's Malaria Initiative; and Global Polio Eradication Initiative. These initiatives have contributed to a substantial reduction in illness and death from HIV, tuberculosis, malaria, and polio. However, Nigeria has experienced mixed success with leveraging the capacities built through these donor-funded vertical programs to respond to new health threats. This report describes experiences using resources from vertical disease programs by the Nigeria Centre for Disease Control in response to the 2014–2016 Ebola outbreak in West Africa and the COVID-19 pandemic. Integrating resources from different disease programs with government-led systems and institutions will improve responses to endemic outbreaks and preparedness for future pandemics in Nigeria.

Title: Infection Prevention and Control Initiatives to Prevent Healthcare-Associated Transmission of SARS-CoV-2, East Africa

Journal: Emerging Infectious Diseases

Publish Date: December 2022

URL: Infection Prevention and Control Initiatives to Prevent Healthcare-Associated Transmission of SARS-CoV-2, East Africa - Volume 28, Supplement—December 2022 -Emerging Infectious Diseases journal - CDC

Abstract:

The coronavirus disease pandemic has highlighted the need to establish and maintain strong infection prevention and control (IPC) practices, not only to prevent healthcare-associated transmission of SARS-CoV-2 to healthcare workers and patients but also to prevent disruptions of essential healthcare services. In East Africa, where basic IPC capacity in healthcare facilities is limited, the US Centers for Disease Control and Prevention (CDC) supported rapid IPC capacity building in healthcare facilities in 4 target countries: Tanzania, Ethiopia, Kenya, and Uganda. CDC supported IPC capacity-building initiatives at the healthcare facility and national levels according to each country's specific needs, priorities, available resources, and existing IPC capacity and systems. In addition, CDC established a multicountry learning network to strengthen hospital level IPC, with an emphasis on peer-to-peer learning. We present an overview of the key strategies used to strengthen IPC in these countries and lessons learned from implementation.

Title: Pre- and intra -COVID-19 trends of contraceptive use among women who had termination of pregnancy at Charlotte Maxeke Johannesburg Academic Hospital, Johannesburg South Africa (2010–2020)

Journal: PLoS ONE

Publish Date: December 14, 2022

URL:<u>https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0277911&type</u> <u>=printable</u>

Abstract:

Background

Contraception is a key prevention strategy for maternal morbidity and mortality and is an important component of postabortion care. The trend of contraceptive uptake can guide interventions among vulnerable individuals. The aim of the study was to determine the trends of immediate post-abortion contraceptive uptake among women who had induced abortion at a dedicated abortion centre in Johannesburg, South Africa.

Method

This study was a retrospective cross-sectional and trend analysis of the contraceptive uptake among women who had legal termination of unwanted pregnancy at the Charlotte Maxeke Johannesburg Academic Hospital (CMJAH), from 1 January 2010 to 31 December 2020. We reviewed the nursing records and summaries of the induced abortion cases that were performed for the past eleven years from 1 January 2010 to 31 December 2020. The trends in the annual number of abortion seeking clients, annual contraceptive uptake rate (stratified by types), age of clients and gestational age at presentation were extracted into a spreadsheet for analysis. Join point regression modelling and Pearson's chi square were utilized to assess the trends and association between categorical variables. The trends before and during the Corona Virus disease(COVID-19) era were also compared.

Results

In all, 12,006 clients had induced abortion over the study period. Nearly half (n = 5915, 49.26%) of the clients were aged 26–40 years, one tenth (n = 1157, 9.64%) being teenagers and one third (n = 4619, 38.47%) between age 19–25 years. There was a 16.3% annual increase in the number of abortion clients performed at the facility from 2010 to 2014 and a gradual declining trend of about 9.2% per annum from 2014 to 2019. The overall postabortion contraceptive uptake rate was 74.5%. There was an initial 15.1% annual decline in contraceptive uptake per 100 clients from 2010 to 2014 and a subsequent increasing trend of about 11.1% per annum from 53.45 per 100 clients in 2014 to 98 per 100 clients in 2019. About 66.43% of the clients opted for injectable contraceptives. There was a reduction in the number of abortion seeking clients by 32.2% from 985 in 2019 to 668 in 2020 during the COVID-19 era. However, the contraceptive uptake was still high in 2020 (90.72%). There was no statistically significant relationship between the age group and the time periods. Thus, the distribution of the age group accessing the abortion services did not significantly change over the two time periods of 2010–2014 and 2015–2019. (P-value = 0.076).

Conclusion

There was increased trends in postabortion contraceptive uptake among our clients from 2010 to 2020. Although there was reduced number of performed induced abortion during the COVID -19 era, the contraception uptake rate was still high during the COVID-19 era.

About 6 out of every 10 clients accepted injectable contraceptives. More education is needed to improve uptake of other long-acting contraception that may not require frequent contact with the health facility.

Title: Quality of life among patients with the common chronic disease during COVID-19 pandemic in Northwest Ethiopia: A structural equation modelling Journal: PLoS ONE

Publish Date: December 6, 2022

URL:https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0278557&type =printable

Abstract:

Background

Improving Quality of Life (QoL) for patients with chronic diseases is a critical step in controlling disease progression and preventing complications. The COVID-19 pandemic has hampered chronic disease management, lowering patients' quality of life. Thus, we aimed to assess the quality of life and its determinants in patients with common chronic diseases, in Northwest Ethiopia during the COVID-19 pandemic.

Methods

A cross-sectional study was conducted among 1815 randomly selected chronic patients with common chronic diseases. A standardized WHOQOL BREF tool was used, and electronic data collection was employed with the kobo toolbox data collection server. Overall QoL and the domains of Health-Related Quality of life (HRQoL) were determined. Structural equation modelling was done to estimate independent variables' direct and indirect effects. Path coefficients with a 95% confidence interval were reported.

Results

About one in third, (33.35%) and 11.43% of the study participants had co-morbid conditions and identified complications, respectively. The mean score of QoL was 56.3 ranging from 14.59 and 98.95. The environmental domain was the most affected domain of HRQoL with a mean score of 52.18. Age, psychological, and environmental domains of HRQoL had a direct positive effect on the overall QoL while the physical and social relationships domains had an indirect positive effect. On the other hand, the number of medications taken, the presence of comorbidity, and complications had a direct negative impact on overall QoL. Furthermore, both rural residency and the presence of complications had an indirect negative effect on overall QoL via the mediator variables of environmental and physical health, respectively.

Conclusion

The quality of life was compromised in chronic disease patients. During the COVID-19 pandemic, the environmental domain of HRQoL was the most affected. Several sociodemographic and clinical factors had an impact on QoL, either directly or indirectly. These findings highlighted the importance of paying special attention to rural residents, patients with complications, patients taking a higher number of medications, and patients with comorbidity.

Title: Media attention toward COVID-19 across 18 countries: The influence of cultural values and pandemic severity

Journal: PLoS ONE

Publish Date: December 7, 2022

URL:https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0271961&type =printable

Abstract:

Background

Current media studies of COVID-19 devote asymmetrical attention to social media, in contrast, newspapers have received comparatively less attention. Newspapers are an integral source of current information—that are syndicated and amplified by social media to a wide global audience. This is the first-known study to investigate the impact of cultural values and pandemic severity on media attention towards COVID-19. Findings lay the groundwork for targeted public health communications that are culturally nuanced. Objective

We investigated the impact of cultural values and pandemic severity on Media Attention towards COVID-19 across 18 countries.

Methods

We tracked the global volume of COVID-19 coverage (to measure media attention) over 8 months in a news media database of 12 billion words with 30 million articles from over 7,000 news media sites. Predictors of Media Attention towards COVID-19 came from the Oxford COVID-19 Government Response Tracker (incidence and mortality) and Hofstede's Cultural Values.

Results

Media attention toward COVID-19 increased 55 times over 8 months. Higher rates of new cases and deaths predicted this exponential increase. Countries with higher power distance, uncertainty avoidance, and long-term orientation, were associated with increased media attention, controlling for covariates.

Conclusions

Cultural values play a significant role in the news media's attention toward COVID-19, controlling for pandemic severity. We provided a framework to design targeted public health communications that are culturally nuanced.

Title: Narrative explorations of the role of the informal food sector in food flows and sustainable transitions during the COVID-19 lockdown

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URL:https://journals.plos.org/sustainabilitytransformation/article/file?id=10.1371/journal.p str.0000038&type=printable

Abstract:

Globally, the informal food sector has been the recipient of exclusionary urban policies, despite its dominant role in urban life. This study examined the contributions of the informal food sector to food flows during the COVID-19 lockdown in Cape Town, South Africa. An ethnographic research method consisting of in-depth interviews and participant observations was used to gather data between April and November 2020. The data were thematically analysed. Corporate retailers and informal vendors managed food flows

through the city prior to COVID-19. Due to the lockdown regulations, food flows through the informal sector ceased. The situation resulted in job loss and increased food insecurity. During this challenging period, the informal sector transformed food flows by facilitating sustainable urban agriculture, food aid programmes, and community change. Although the sector can hinder urban modernisation, the current study findings showed that the informal food sector is a buffer for meeting urban sustainability needs. Regulatory frameworks that embrace inclusive governance approaches are highly recommended.

Title: The burden of respiratory conditions in the emergency department of Muhimbili National Hospital in Tanzania in the first two years of the COVID-19 pandemic: A cross sectional descriptive study

Journal: PLOS GLOBAL PUBLIC HEALTH

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URL:<u>https://journals.plos.org/globalpublichealth/article/file?id=10.1371/journal.pgph.0000</u> 781&type=printable

Abstract:

Globally, respiratory diseases cause 10 million deaths every year. With the COVID-19 pandemic, the burden of respiratory illness increased and led to significant morbidity and mortality in both high- and low-income countries. This study assessed the burden and trend of respiratory conditions among patients presenting to the emergency department of Muhimbili National Hospital in Tanzania and compared with national COVID-19 data to determine if this knowledge may be useful for the surveillance of disease outbreaks in settings of limited specific diagnostic testing. The study used routinely collected data from the electronic information system in the Emergency Medical Department (EMD) of Muhimbili National Hospital in Tanzania. All patients presenting to the EMD in a 2-year period, 2020 and 2021 with respiratory conditions were included. Descriptive statistics and graphical visualizations were used to describe the burden of respiratory conditions and the trends over time and to compare to national Tanzanian COVID-19 data during the same period. One in every four patients who presented to the EMD of the Muhimbili National Hospital had a respiratory condition-1039 patients per month. Of the 24,942 patients, 52% were males, and the median age (IQR) was 34.7 (21.7, 53.7) years. The most common respiratory diagnoses were pneumonia (52%), upper respiratory tract infections (31%), asthma (4.8%) and suspected COVID-19 (2.5%). There were four peaks of respiratory conditions coinciding with the four waves in the national COVID-19 data. We conclude that the burden of respiratory conditions among patients presenting to the EMD of Muhimbili National Hospital is high. The trend shows four peaks of respiratory conditions in 2020–2021 seen to coincide with the four waves in the national COVID-19 data. Real-time hospital-based surveillance tools may be useful for early detection of respiratory disease outbreaks and other public health emergencies in settings with limited diagnostic testing.

Title: "Are they trying to control us people?": News media coverage of COVID-19 lockdown tobacco sales ban in South Africa

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Abstract:

The South African government imposed one of the strictest lockdowns in the world as part of measures to curb the spread of COVID-19 in the country, including a ban on the sale of tobacco products. This study explored news media coverage of arguments and activities in relation to the South African lockdown tobacco sales ban. We collected media articles published between 26 March to 17 August 2020, which corresponded to the period of the sales ban. Data were sourced via google search and snowball identification of relevant articles. Thematic analysis of data was conducted with the aid of NVivo. We analysed a total of 305 articles relevant to the South African tobacco sales ban during the lockdown. Six major themes were identified in the data: challenges associated with implementing the ban, litigation, and threats of litigation to remove the ban, governance process and politicization of the ban, pro and anti-tobacco sales ban activities and arguments and reactions to the announcement lifting the ban. The initial reason for placing the ban was due to the non-classification of tobacco products as an essential item. Early findings of a link between tobacco smoking and COVID-19 disease severity led to an extension of the ban to protect South Africa's fragile health system. Pro-sales ban arguments included the importance of protecting the health system from collapse due to rising COVID-19 hospitalization, benefit of cessation, and the need for non-smokers to be protected from exposure to secondhand smoke. Anti-sales ban arguments included the adverse effect of nicotine withdrawal symptoms on smokers, loss of jobs and the expansion of the illicit cigarette markets. Litigation against the ban's legality was a strategy used by the tobacco industry to mobilize the public against the ban while promoting their business through the distribution of branded masks and doorto-door delivery which goes against current tobacco regulations. The media could serve as a veritable tool to promote public health if engaged in productive ways to communicate and promote public health regulations to the general population. Engagement with the media should be enhanced as part of health promotion strategies.