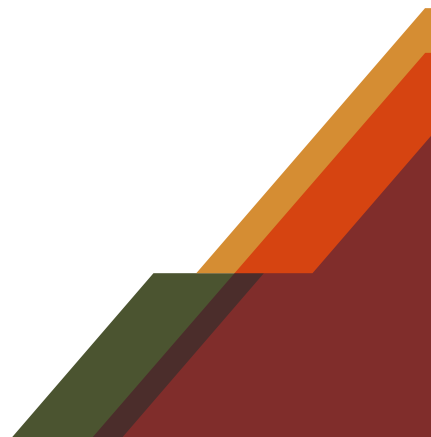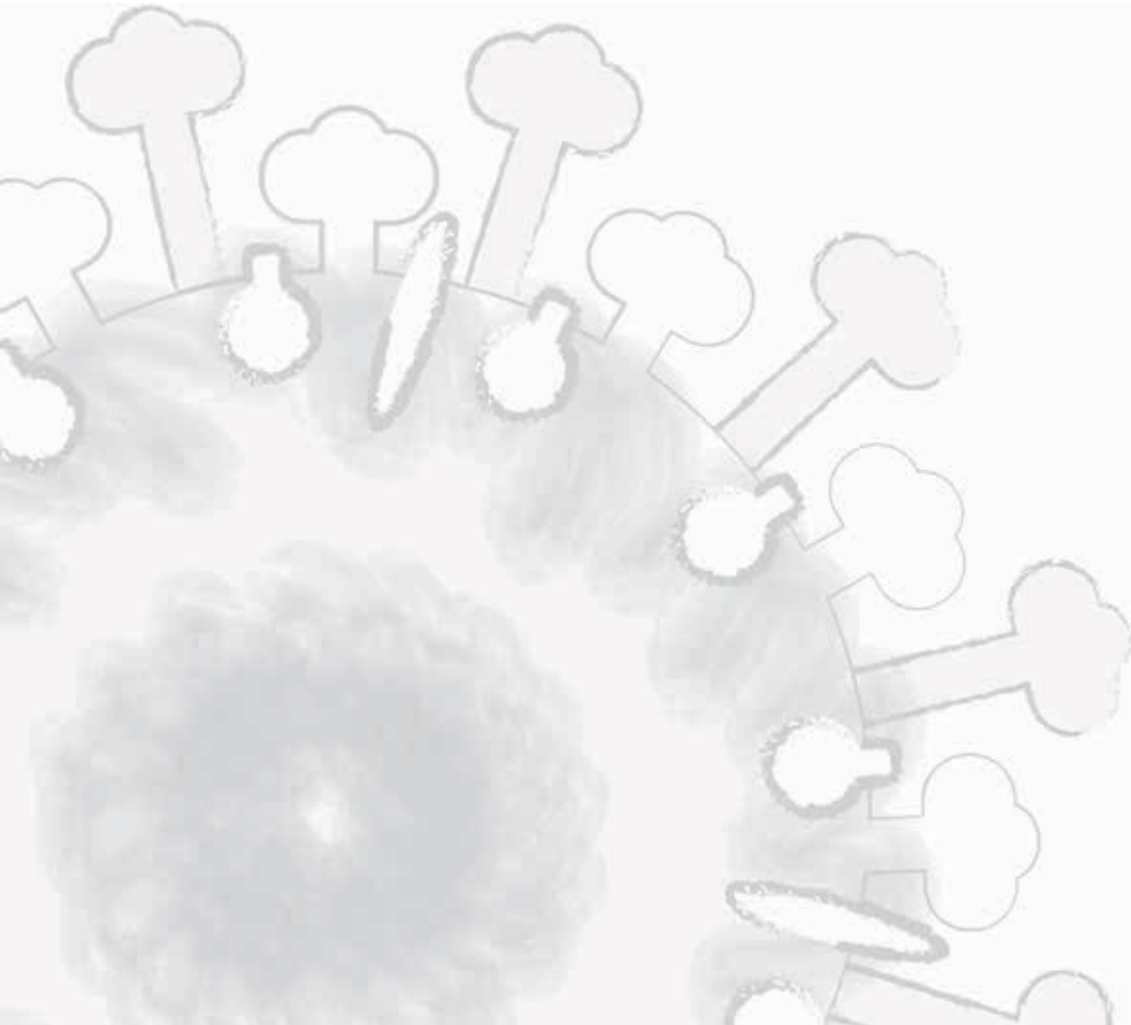# Africa CDC Guidance for Assessment, Monitoring, and Movement Restrictions of People at Risk for

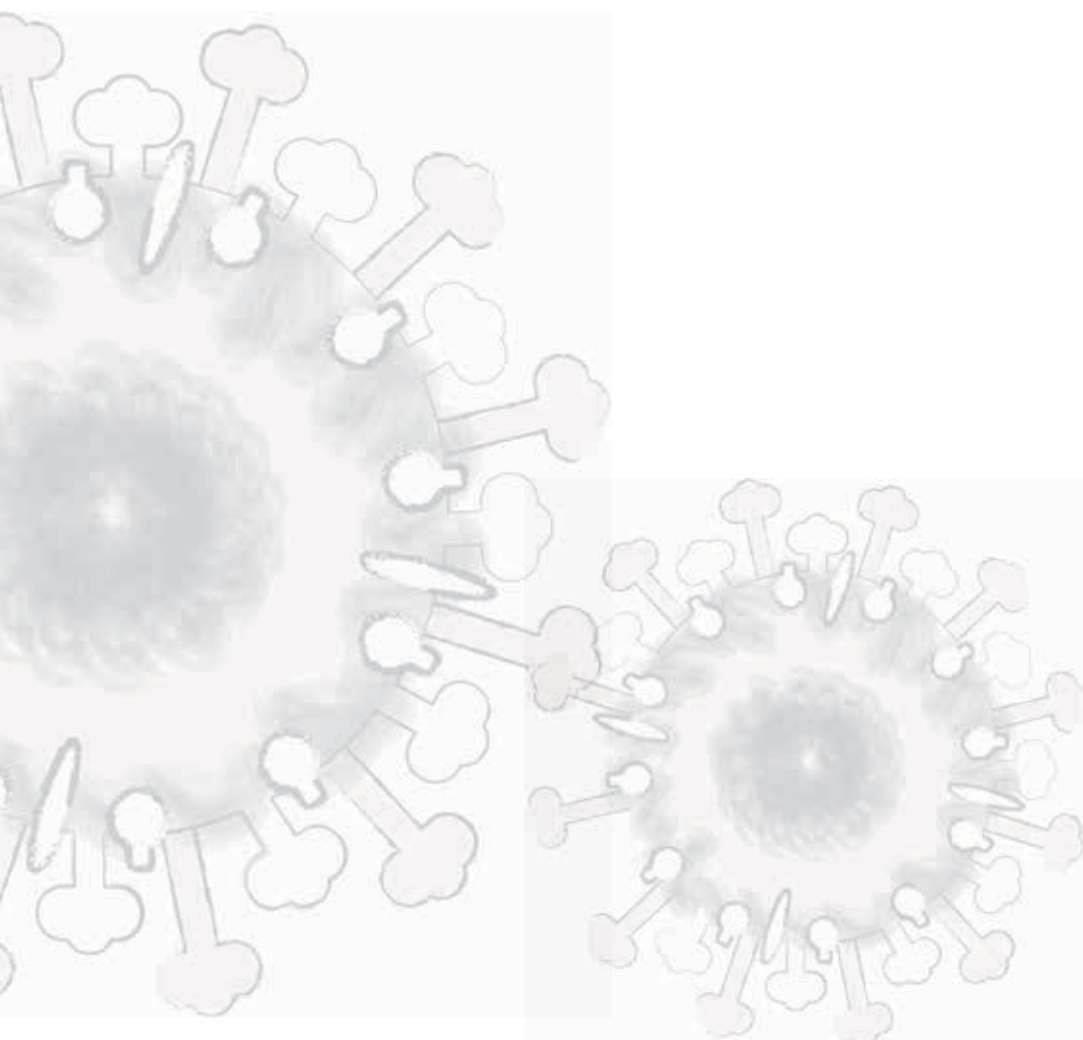# COVID-19

IN AFRICA

BACKGROUND

Africa CDC has been asked by Member States for the best approach to managing people returning from area affected by the novel coronavirus (COVID-19) outbreak. The World Health Organization (WHO) has provided detailed guidance.[1,2] Africa CDC is providing additional guidance based on questions from Member States and in consideration of the African context.

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1   Available at: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/travel-advice
2   Available at: https://www.who.int/ith/Repatriation_Quarantine_nCoV-key-considerations_HQ-final11Feb.pdf

GUIDANCE

✔ **For any person at risk for COVID-19, Africa CDC recommends that Member States:**

    a. Collect information about the person to determine the level of risk for COVID-19. Information must include symptoms, travel, exposure to anyone with COVID-19 infection, exposure to healthcare facilities, and details about how to contact the person.

    b. Classify the person into one of three categories: "high risk," "some risk," or "no risk."

        i. "High risk" if the person is a known contact with a COVID-19 case or spent time in a healthcare facility with a COVID-19 case in the previous 14 days.

        ii. "Some risk" if the person spent time in a COVID-19 outbreak area in the previous 14 days.

        iii. "No risk" if the person who does not meet either of the above risk definitions.

    c. Based on the level of risk, determine the appropriate movement restriction, monitoring, and enforcement *[Table]*.

    d. Provide information to the person about the symptoms of COVID-19, how to contact a local healthcare facility and/or public health officer if they develop COVID-19 symptoms or other medical problem, and their legal rights to appeal their movement restrictions and monitoring.

✔ **Africa CDC recommends that movement be restricted to the home, rather than a facility, based on acceptability, feasibility, ethics, and resources in most Member States.** Africa CDC also recognizes that countries may choose a more restrictive approach, e.g., restricting patients to a designated quarantine facility. A quarantine facility may be justified depending on the person's likelihood of developing COVID-19, transmitting COVID-19 to others, and/or complying with home-based quarantine, as well as other community considerations. If Member States choose facility-based quarantine, they must ensure a safe and healthy environment, with adequate food, water, hygiene, sleep, infection prevention, medical care, and respect for the rights and dignity of persons.

RISK LEVEL	RISK DEFINITION	MOVEMENT RESTRICTION	MONITORING	ENFORCEMENT
High risk	Known contact with a COVID-19 case[3] *OR* Spent time in a healthcare facility with a COVID-19 case in previous 14 days	Home. Do not leave home for any reason other than medical necessity or safety.	Health officer checks at least one time per day via phone or in person. Person also monitors their own health and reports any symptoms of COVID-19.	Ask the person to restrict movement voluntarily. Consider legal order if concerned about compliance.
Some risk	Spent time in a COVID-19 outbreak area in previous 14 days	Home. Do not leave home for any reason other than medical necessity or safety. *OR* Permitted to leave home. Must avoid congregate settings, work, public transportation, and any other situation where a person could likely infect others.	Person monitors their own health and reports any symptoms of COVID-19.	Ask the person to restrict movement voluntarily.
No known risk		None	None	None

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3   Definition of a contact available at: https://www.who.int/publications-detail/
    global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov)

APPENDIX

Frequently Asked Questions

1. What does quarantine mean?

The International Health Regulations (2005) define quarantine as the restriction of activities and/or separation from others of suspect persons who are not ill or of suspect baggage, containers, conveyances, or goods in such a manner as to prevent the possible spread of infection or contamination.

For COVID-19 public health practice, quarantine refers to separating and restricting the movement of a healthy (i.e. non-infected) person who is at risk of COVID-19. When developing policies on quarantine, it is important to carefully consider:

  a. What is the risk that the healthy (non--infected) person has of developing COVID-19?
  b. Should the person's movement be restricted? If so, should they be restricted to their home, to a separate facility, or to a specific geographic area?
  c. Should the person's movement be monitored to ensure they are complying with the restrictions?
  d. If the person's movement will be monitored, who will do the monitoring, how will they be monitored, and how often will the person will be monitored?
  e. Should the person have a legal order placed to enforce compliance with the movement restriction?
  f. If the person violates the legal order restricting movement, should they be moved to a separate facility for monitoring?
  g. Who will provide a safe and healthy environment at the home or facility, including food, water, hygiene, sleep, infection prevention, and medical care?

2. Should people have a laboratory test for COVID-19 before being permitted to enter my country?

No. Laboratory testing should only be performed on people who meet the case definition for a suspect case, including symptoms of COVID-19 *and* a history of exposure to COVID-19. Definitions are available from WHO at https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/surveillance-and-case-definitions.

Testing people without symptoms wastes resources. Testing people without symptoms may also provide false reassurance the person has no risk of COVID-19, i.e., if the patient is in the incubation phase, the test could be negative if the virus is not present in the airway yet.

3. What should we do with people who enter our country with no symptoms, no exposure to COVID-19 or healthcare facilities, but a history of being in China or another outbreak area?

Africa CDC recommends:

a. Classify the person as "some risk."

b. Provide the person with information:

   i. About the symptoms of COVID-19

   ii. About how to minimise the risk of transmission of the virus

   iii. About how to contact a local healthcare facility and/or public health officer if they develop COVID-19 symptoms or other medical problem[4]

c. Obtain detailed contact information for the person and for at least 2 relatives or close contacts of the person in country.

d. Ask the person to restrict movement to their home until a total of 14 days has passed since they were last exposed to COVID-19. For example, if the person arrives to country from China on 1 February 2020, they should restrict their movement until 15 February 2020.

e. Ask the person to contact a specific healthcare facility or public health officer if they develop any symptoms of illness. They should telephone first, unless they are severely ill.

4. Is it necessary for people at "some risk" to stay at home for the entire 14 days?

Countries will need to make a decision based on their assessment of the risk of transmission and the resources required to restrict movement.

In patients at "some risk," another option is to instruct people to avoid situations where a person could likely infect others (e.g. social gatherings, work, school, athletic events, church, healthcare facilities, markets, etc.) for a period of 14 days. During this period, people should not use public transportation including buses, taxis, or ride sharing. People should limit their contact with others, including having visitors at home. People should avoid sharing household items such as dishes, drinking glasses, cups, eating utensils, towels, pillows, or other items with others in the home.

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4 Available at: https://www.who.int/docs/default-source/coronavirus/2020Ð02Ð04-home-care-en.pdf

5. What should we do with people who enter our country and are a known contact of a COVID-19 case?

Africa CDC recommends:

a. Confirm that the person meets the WHO definition of a "contact": https://www.who.int/publications-detail/home-care-for-patients-with-suspected-novel-coronavirus-(ncov)-infection-presenting-with-mild-symptoms-and-management-of-contacts

b. Classify the person as "high risk."

c. Provide the person with information:

 i. About the symptoms of COVID-19

 ii. About how to minimise the risk of transmission of the virus

 iii. Contact information for healthcare facilities and/or public health officers to call if they develop COVID-19 symptoms

d. Obtain detailed contact information for the person and for at least 2 relatives or close contacts of the person in country.

e. Ask the person to restrict movement to their home until a total of 14 days has passed since they were last exposed to COVID-19. For example, if the person arrives to country from China on 1 February 2020, they should restrict their movement until 15 February 2020.

f. A public health officer should perform a check on the person at least one time every day.

 i. The check can be performed in person or by phone.

 ii. The check should include asking the person about any of their symptoms and whether they have been anywhere outside of the home.

6. What do we do with people who are "some risk" or "high risk" that refuse to stay at home or are known to have left their home for a non-emergency situation?

Countries and sub-national jurisdictions have different laws regarding quarantine and personal liberties. Africa CDC recommends that countries:

a. Review laws regarding quarantine of healthy (uninfected) people.

b. Consider what legal authority exists to enforce movement restriction and mandate monitoring.

c. Develop alternative settings for people who do not have a safe and stable home and for people who do not comply with their movement restriction.

Based on legal authority and local considerations of risk, health officials will need to decide whether to restrict movement to a place other than home, I.e., a quarantine facility. Moving a person to and restricting their movement to a quarantine facility requires several considerations:

a. Are there individual rooms for each person? People have different levels of risk. Mixing people together can increase the likelihood of secondary transmission if one of the quarantined people develops CLOVID-19. If no individual rooms are available, then people need to be kept >1m apart at all times.

b. Are there facilities to ensure health, hygiene, sleep, and safety?

c. Is there funding and personnel to supply food, water, toiletries, and other social and cultural necessities?

d. Are the facilities able to accommodate individual-specific requirements, such as religious rituals, physical disabilities, and/or allergies?

7. What do we do with people who are at "high risk" or "some risk" and do not have a safe and stable home?

Public health officials will need to decide if there is a facility, such as a shelter or hospital, that meets the conditions discussed above.

8. What are some reasons we should not quarantine people, e.g., restrict movement and monitor people?

There is substantial debate about the public health effectiveness of quarantine. In addition to the epidemiology of diseases, it is important to consider the impacts on the individual person and the health system, including:

a. Impact on the person being quarantined

   i. Loss of personal income and/or job

   ii. Inability to obtain food, medicine, or essential household supplies

   iii. Psychological stress from social isolation and stigma

   iv. Transmission of infection to other household members given more prolonged time spent indoors

   v. Worsening of other medical conditions that require attention

b. Impact on the health system

    i. Decreased willingness of people to accurately and completely report their travel history, exposures, and names of contacts

    ii. Decreased willingness of people named as contacts to truthfully verify that they are contacts

    iii. Decreased willingness of people named as contacts to report symptoms after they develop them

    iv. Cost of monitoring individuals

    v. Cost of paying for food, medicine, household supplies, and/or income for people restricted to their homes

9. What is "isolation"?

The term "isolation" refers to the separation of people with symptoms (i.e., sick people), not to healthy people at risk. Africa CDC does not recommend using the term "isolation" or "self-isolation" for people without symptoms who are at risk for COVID-19.
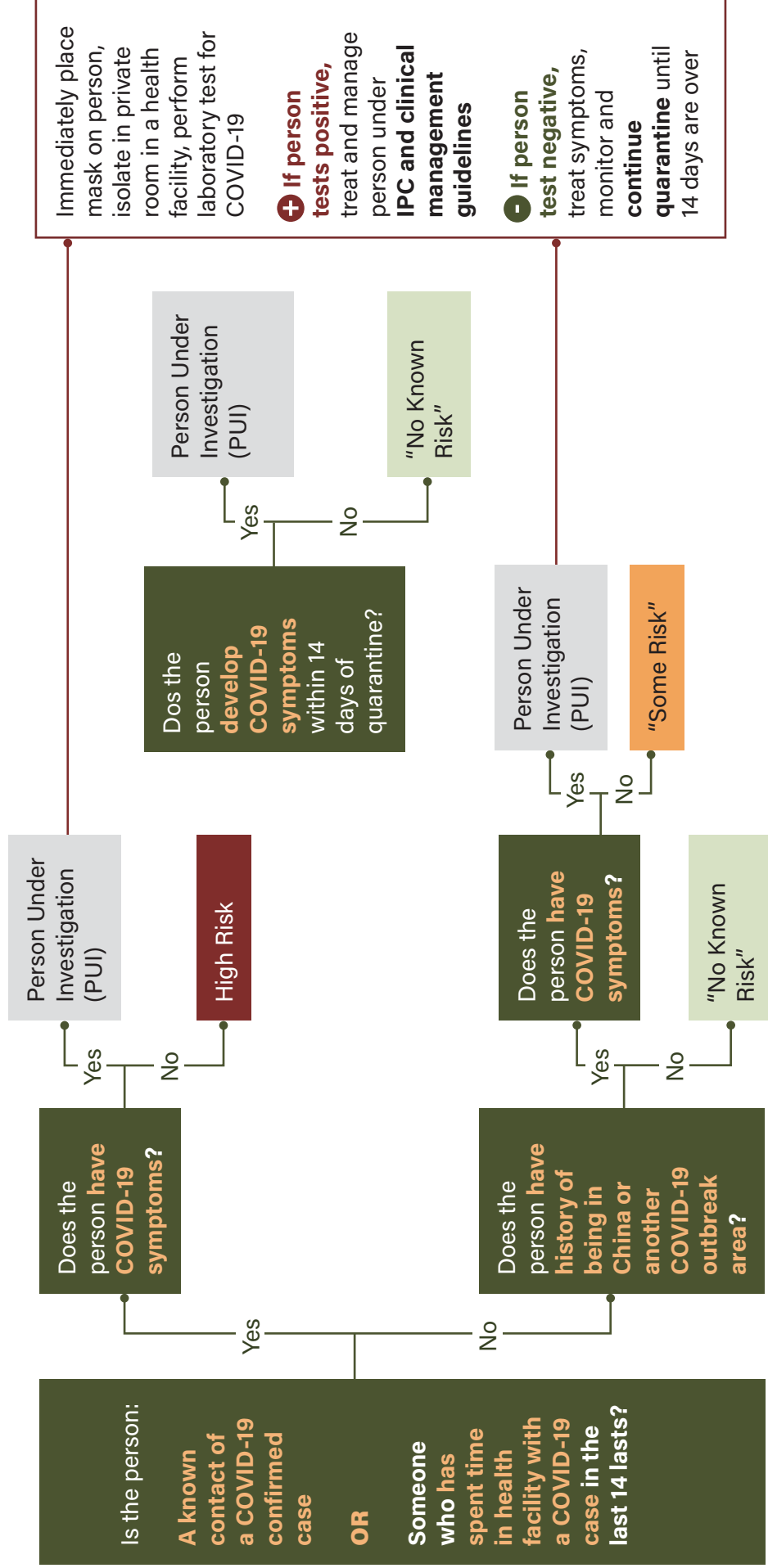
10. What is "self-quarantine"?

Africa CDC does not recommend using the term "self-quarantine." A public health official should determine a person's movement restriction, monitoring, and enforcement based on the person's exposure to COVID-19. A public health official should then determine if the person should be restricted to home and, if so, whether the person agrees to do this voluntarily or requires a legal order. The person ("self") should not make that determination.

11. Who should we contact if we need surveillance or diagnostic technical assistance for return travellers?

In addition to your WHO country contact, you can reach out to Africa CDC at AfriceCDCEBS@africa-union.org. You can also access many of our reference materials on our website: http://www.africacdc.org/press-centre/news/116-outbreak-coronavirus-2019-ncov-resources-and-information

12. Flow chart to use to determine how to classify an individual's risk level

Ask people about their contact with a confirmed case, exposure to a health facility, and their travel history to outbreak areas

Is the person:

A known contact of a COVID-19 confirmed case

OR

Someone who has spent time in health facility with a COVID-19 case in the last 14 lasts?

— Yes → Does the person **have COVID-19 symptoms?**

- Yes → Person Under Investigation (PUI) → Immediately place mask on person, isolate in private room in a health facility, perform laboratory test for COVID-19

  ⊕ **If person tests positive,** treat and manage person under **IPC and clinical management guidelines**

  ⊖ **If person test negative,** treat symptoms, monitor and **continue quarantine** until 14 days are over

- No → High Risk → Dos the person **develop COVID-19 symptoms** within 14 days of quarantine?

  - Yes → Person Under Investigation (PUI)

  - No → "No Known Risk"

— No → Does the person have **history of being in China or another COVID-19 outbreak area?**

- Yes → Does the person **have COVID-19 symptoms?**

  - Yes → Person Under Investigation (PUI)

  - No → "Some Risk"

- No → "No Known Risk"

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