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World Antimicrobial Awareness Week 2020



ANTIMICROBIALS

Such as antibiotics, antivirals, antiparasitics, and antifungals are important for infectious disease control in humans, animals and plants, but they can only continue to be effective if we use them responsibly and according to professional advice.

- Using antimicrobials without prescription can cause antimicrobial resistance, always seek the advice of a health care professional before using antimicrobials against any infection.
- Using antimicrobials without prescription can cause antimicrobial resistance, always seek the advice of a health care professional before using antimicrobials against any infection.
- There is no antibiotic treatment for viral infections like cold or flu, seek medical advice only from a health care professional anytime you are sick or have an infection.
- You can avoid the need for antimicrobials if you practice good hygiene such as regular handwashing with soap and water and proper environmental sanitation to prevent or reduce the spread of infections.
- Abuse or misuse of antimicrobials can make pathogenic microorganisms to become resistant to antimicrobials and make diseases more difficult or impossible to treat. Seek proper medical care anytime you are sick.

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– Antimicrobial resistance presents a threat to health security, food safety, economic growth, and the society in Africa, but we can prevent the dangers by choosing to use antimicrobials responsibly and with care.

– Antimicrobial resistance (AMR) is the ability of a microorganism to evolve; reducing or eliminating the effectiveness of antimicrobials against microbial infections in humans, plants and animals.

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File	Action
Africa CDC World Antimicrobial Awareness Week 2020 Resources and Social media Toolkit (FULL KIT – ENG)	DOWNLOAD
Africa CDC World Antimicrobial Awareness Week 2020 Resources and Social media Toolkit (FULL KIT – FRE)	DOWNLOAD
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Date

15 November 2020

Theme

Emergency Response and Preparedness

Region

Central Africa, Eastern Africa, Northern Africa, Southern Africa, Western Africa

Tags

Antibody, Antimicrobial Awareness, Antimicrobial Awareness Week, Antimicrobial Resistance, COVID19 Antibody

Related Content



Outbreak Brief 52: Coronavirus Disease 2019 (COVID-19) Pandemic

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have been reported from 223 countries and territories. The distribution of cumulative cases (specimen of global cases) from the World Health Organization (WHO) reporting regions (excluding Africa) are as follows: Eastern Mediterranean Region 4,136,040 (5%), European Region 27,086,517 (32%), Region of the Americas 36,802,670 (44%), South-East Asia Region 12,077,582 (14%) and Western-Pacific Region 1,130,182 (1%). Among the affected locations, the United States has reported more than one million new cases each week for the last eight consecutive weeks. For the last seven days, the United Kingdom (UK) and Italy reported over 200,000 new cases. For more detailed information on cases and deaths being reported outside of Africa, refer to the WHO daily situation reports.⁷

As of 9 am East African Time (EAT) 5 January 2021, a total of 2,831,891 COVID-19 cases and 87,363 deaths (CFR: 2.8%) have been reported in 55 African Union (AU) Member States. This is 3.8% of all cases reported globally. The majority (84%) of Member States continue to report community transmission. Of the countries actively reporting COVID-19 epidemiological data, seventeen countries are reporting case fatality rates higher than the global case fatality rate of 2.2%. These include Sahrawi Arab Democratic Republic (3.8%), Sudan (3.3%), Egypt (3.1%), Chad (3.2%), Liberia (4.8%), Mali (3.8%), Tunisia (3.4%), Democratic Republic of Congo (3.2%), Somalia (3.3%), Niger (3.2%), Sierra Leone (2.8%), Malawi (2.8%), Algeria (2.8%), Somalia (2.8%), South Africa (2.7%), Zimbabwe (2.4%), Mauritania (2.4%), Eswatini (2.4%) and Angola (2.3%).

For the week 10 (27 December 2020 - 3 January 2021), 166,710 new COVID-19 cases have been reported, which is an 8% increase in the number of new cases reported compared to the week 12. The majority of new COVID-19 cases being reported for this week are from the Southern region (55%) followed by the Northern (13%), Western (8%), Eastern (4%) and Central (1%) regions. Countries reporting the highest incidence (COVID-19 new cases per 100,000 population) this week

⁷ WHO COVID-19 epidemiological and case definitions: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/coronavirus/cases-definitions>
⁸ WHO COVID-19 epidemiological and case definitions: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/coronavirus/cases-definitions>

Outbreak Brief 51: Coronavirus Disease 2019 (COVID-19) Pandemic

Outbreak Briefs

Partners for Evidence-Based Responses to COVID-19

Reporting period: 22 December 2020 – 4 January 2021

Biweekly Report

Africa's second wave of COVID-19 cases surmounts the height of its first. African Union (AU) Member States across the continent are intensifying measures to contain the spread of the virus. Under its April and May, most AU Member States have enacted emergency orders, and PHEIC and In-Care today are more targeted, focusing on the highest burden areas. The new variant identified in South Africa is concerning. Although it is essential for countries to be leading to increased transmission, given that the variant is more transmissible in the UK, scientists urge caution in assumption until the appropriate studies are completed on it.

Total Cases (per 100,000)	New Cases (per 100,000)	Total Reported Deaths (per 100,000)	New Deaths (per 100,000)	Total Case Fatality Ratio (%)	New Reported Cases (per 100,000)
2,831,891	166,710	87,363	8,234	2.8	88,001

4. New cases and deaths increased by 11% and 8% in Africa between the biweekly week reporting period (27 December 2020 – 4 January 2021) and the previous two-week reporting period (21 December 2020). The daily average of new cases reported in 2020 was 166,710 cases during the reporting period. On 19 December, Africa (AU) total reported COVID-19 cases were 2,665,181. South Africa reported 1 million (1,000,000) cases. The highest case rate in Africa is 8.8 per 100,000 population, which is currently below the recommended range, indicating that many cases are likely going undetected (note: the distribution of cases has likely shifted leaving and reporting gaps).

5. New cases have increased in 29 AU Member States over the prior reporting period, with an increase of more than 10% in 10 AU Member States. Cases have been rising sharply in Nigeria since early December, reaching a record high. Zimbabwe also reported the highest number of COVID-19 cases and deaths in one week since the start of the pandemic. In Eswatini, several cases have also reached their highest since the start of the pandemic, the same number of cases from COVID-19 on 10 December. New cases in the current reporting period increased by 85% in Malawi and 58% in Mozambique, respectively.

6. On 18 December, South Africa announced the detection of a new variant of COVID-19, termed (SARS-CoV-2). This variant has the same genetic mutation found in the UK variant (named B.1.1.7), which may make it more transmissible than its predecessor. The UK variant is that it has been other spike protein mutations. On 24 December, it was announced that a new variant – different from the variant from South Africa and UK – called (SARS-CoV-2) with mutations similar to the early pandemic circulating strains in continental Africa. The Africa Centres for Disease Control and Prevention (Africa CDC) shared information regarding for AU Member States to follow in responding to the new variant.

7. The World Health Organization (WHO) issued a press briefing on 3 January that there is currently no evidence to suggest that the variant identified in South Africa is more transmissible than the variant identified in the UK. However, there is a need to know more when epidemiological and molecular studies of the variant are conducted in the coming weeks. So far, the variant from South Africa has also been detected in Jordan and Bahrain.

8. Scientists continue to state that it is more likely that the increase in cases in South Africa, and across the continent, can be attributed to rising PHEIC and people not adhering to measures rather than the new variant, although more research is needed to confirm. As an example, health officials noted that a new wave of infections in South Africa in the (SARS-CoV-2) in mid of year has been observed by thousands of students.

For more information on the disease situation, PHEIC implementation and adherence in Africa, as well as PERC survey findings, visit the PERC [dashboard](#) and [reports](#).

PERC: Biweekly Report (22 December – 04 January 2021)

PERC

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Total of 79,693,677 COVID-19 cases and 1,762,866 related deaths (case-fatality rate (CFR): 2.2%) have been reported from 221 countries and territories. The distribution of cumulative cases (excluding Africa) are as follows: Eastern Mediterranean Region 4,634,728 (5%), European Region 20,457,329 (25%), Region of the Americas 34,632,862 (43%), South-East Asia Region 11,873,894 (15%) and Western Pacific Region 1,086,456 (1%). Among the affected locations, the United States has reported more than one million new cases each week for the last seven consecutive weeks. For the last seven days, Brazil, the United Kingdom (UK), and Russia reported over 200,000 new cases. For more detailed information on cases and deaths being reported outside of Africa, refer to the WHO daily situation reports.¹

As of 9 am East African Time (EAT) 29 December 2020, a total of 1,677,066 COVID-19 cases and 63,194 deaths (CFR: 3.7%) have been reported in 55 African Union (AU) Member States. This is 3.6% of all cases reported globally. The majority (84%) of Member States continue to report community transmission. Of the countries actively reporting COVID-19 epidemiologic data, eighteen countries are reporting case-fatality ratios higher than the global case-fatality ratio of 2.2%. These include Eastern-Arabia Democratic Republic (8.7%), Sudan (6.1%), Egypt (5.4%), Chad (5.2%), Liberia (4.4%), Mali (3.8%), Democratic Republic of Congo (3.4%), Tunisia (3.4%), Senegal (3.2%), Niger (3.1%), Sierra Leone (3%), Malawi (2.5), Algeria (2.8%), South Africa (2.7%), Somalia (2.7%), Zimbabwe (2.7%), Mauritania (2.6%) and Nigeria (2.5%).

For the week 52 (21 December - 27 December) 154,029 new COVID-19 cases have been reported, which is an 18% increase in the number of new cases reported compared to the week 51. The majority of new COVID-19 cases being reported for this week are from the Southern region (41%) followed by the Northern (23%), Western (7%), Eastern (3%) and Central (2%) regions. Countries

¹WHO COVID-19 surveillance guidelines and case definition: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/surveillance-reports>
²WHO coronavirus disease (COVID-19) dashboard: <https://covid19.who.int/>

Outbreak Brief 50: Coronavirus Disease 2019 (COVID-19) Pandemic

Outbreak Briefs

COVID-19 Update: Keeping safe and healthy through the holidays

With the second wave of COVID-19 pandemic affecting Africa more than ever, it is important that we all adhere to following public health and social measures to protect our health and the health of our friends, family, and our communities.

The traditional Christmas and New Year's gatherings will be getting the SARS-CoV-2 virus to directly spread to the number of infected people that are present in the community. To keep that risk as low as possible, we must take a 4-fold reduction in our holiday gatherings and activities.

31 MEMBER STATES
 (as compared to 54 in total)

80% MEMBER STATES
 reporting community transmission of the virus

What we know about COVID-19 and SARS-CoV-2, the virus that causes COVID-19

- Respiratory and gathering together in a building, especially in a crowded space, are the most common ways of spreading the virus.
- Close contact between people, especially in crowded spaces, is the most common source of transmission, with risk going to individuals, family, and others of household.
- The virus can be transmitted by those not showing any symptoms (asymptomatic infection) or by people who are beginning to become sick, but do not have symptoms or serological evidence.
- The main way the virus spreads is through other contact and interactions with an infected person.
- The virus is easily transmitted from one person to another through respiratory droplets spread when an infected person sneezes or talks loudly. Activities such as coughing, sneezing, eating or sharing and touching common items.
- When an infected person coughs or sneezes (spit, droplets, sputum) or coughs into a surface, other people can become infected by the virus by simply touching the contaminated surface and then touching their nose, nose or mouth.

How are respiratory droplets and aerosols?

SICK PERSON → **CONTACT PERSON**

COVID-19 Update: Keeping safe and healthy through the holidays

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Africa CDC strengthens the capacity and capability of Africa's public health institutions as well as partnerships to detect and respond quickly and effectively to disease threats and outbreaks, based on data-driven interventions and programmes.

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Visit Africa CDC on the [African Union website](#).

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