NEWS SITUATION TRACKING
VOL. 5

4700 CONFIRMED CASES, 22 DEATHS, 494 FULL RECOVERIES OF COVID-19 OUTBREAK IN GHANA

Location: Ghana
Issue: COVID-19 Disease recorded in Ghana
Date: MARCH 12th to May 10, 2020

COMMUNITY PROFILING

Population: The current population of Ghana is 30,875,999 as of Sunday, March 15, 2020, based on Worldometer elaboration of the latest United Nations data.1 Basic Demography and Geography of Hotspots: Ghana lies in the center of the Gulf of Guinea coast, 2,420 km of land borders with three countries: Burkina Faso (602 km) to the north, Ivory Coast (720 km) to the west, and Togo (1,098 km) to the east. To the south are the Gulf of Guinea and the Atlantic Ocean. Ethnicity: There are over 100 ethnic groups living in Ghana. Akan 45.3%, Mole-Dagbon 15.2%, Ewe 11.7%, Ga-Dangme 7.3%, Guan 4%, Gurma 3.6%, Grusi 2.6%, Mande-Busanga 1%, other tribes 1.4%, other 7.8% (Ghana Statistical Service, Census 2000) Significance of the State: Although relatively small in area and population, Ghana is one of the leading countries of Africa, being a major player in the global economy and a member of the African Union.

CRITICAL STAKEHOLDERS

Direct Responders: • Frontline Health Workers

Affected Persons: • 4700 persons were confirmed positive, 494 fully recovered, 22 dead

Interested Actors: • The Ghana Police Service, National Disaster Management Organization (NADMO)
• The Ghana Armed Forces, National Disaster Management Organization (NADMO),

The coronavirus pandemic (COVID-19) is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The outbreak was first identified in Wuhan, Hubei, China in December 2019 and recognized as a pandemic by the World Health Organization (WHO) on 11 March 2020.4 Global statistics regarding confirmed cases of COVID-19 have reached 4,194,326. A total of 286,615 fatalities have been recorded while 1,464,926 recoveries have been recorded.5 Between March 12th and 31st, 161 cases had been confirmed, 3 full recoveries made, 49 persons6 had been discharged and 5 deaths recorded. This meant that 153 cases were still being managed.

From 1st to 30th April 2020, an additional 1913 cases had been added, raising the confirmed case count to 2074 and the live case count to 1845.7 As of 10th May 2020, 494 recoveries have been supervised, 22 deaths confirmed and 4700 cases confirmed.8 The table below gives the cases recorded in each region from the start of the pandemic in Ghana in March to May 10, 2020. March recorded 3.4% of the total number of confirmed cases, April accounted for 40.7% and May accounting for 55.9% of the total number of cases as of 9th May. Positive cases for males is 2773, representing 59%, while female positive cases were 1927 (41%).9

Currently, the Greater Accra, Ashanti, Central, Eastern, Northern, North East, Upper East and Upper West, Volta, Western, Oti, Bono

INCIDENT PROFILING

Situation Tracking is a periodic analytical report designed by WANEP through its National Early Warning System (NEWS) to monitor the changing trends of specific conflict threats as civil society support to peace and security in Ghana.

1 https://www.worldometers.info/world-population/ghana-population/
3 https://coronavirus.jhu.edu/map.html Accessed May 12, 2020
5 https://www.worldometers.info/world-population/ghana/
6 https://www.ghanastatsservice.org/covid19/
7 Ghana Health Service
8 Ibid
9 Ibid
partly because it was the first black African country south of the Sahara to achieve independence from colonial rule and regarded as a bastion of democracy in West Africa. Ghana's growing economic prosperity and democratic political system have made it a regional power in West Africa.

**Economy:**
- **Currency:** Ghanaian cedi
- **GDP:** 47.33 billion USD
- **GDP per capita:** 1,641.49 USD
- **GNI per capita:** 4,490 PPP dollars
- **GDP growth rate:** 8.5% annual change

**Politics:**
Ghana is a unitary constitutional democracy with a president who is both head of state and head of the government. Ghana has a multi-party system, however, there are two dominant political parties (the National Democratic Congress and the New Patriotic Party).

**Religion:**
- **Christians** 68.8% (Pentecostal / Charismatic 24.1%, Protestant 18.6%, Catholic 15.1%, other 11%), (2000 census)
- **Muslim** 15.9%, (2000 census)
- **Traditional** 8.5%, other 0.7%, none 6.1% (2000 census)

- Ministry of Works and Housing,
- Ministry of Information,
- Sanitation Ministry
- Interior Ministry
- Members of Parliament
- Civil Society Organizations
- Embassies and High Commissions
- Schools
- All hospitals
- Ministry of Health
- National Commission for Civic Education
- The Immigration Service
- Churches
- The World Health Organization

The charts below illustrate the daily trend of confirmation of the COVID-19 cases in Ghana from March 12 to May 2, 2020. The undulations in the graphs, particularly for the cases in April, were the periodic batch updates that were reported by the Ghana Health Service after test results were acquired.

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### Table: Monthly Regional Count

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<tr>
<th>Regions</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Sum</th>
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Source: Ghana Health Service Data

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GEOGRAPHICAL DYNAMICS OF COVID-19 IN GHANA

The Greater Accra continues to be the hardest hit region followed by the Ashanti region. However, the Eastern region has also recorded more cases in a rapid spate compared to the rate at which the other affected regions are increasing in case counts. This could be attributed to the contagious nature of the three regions, coupled with the fact that these regions serve as the main traveling routes to regions in central and northern parts of the country. Aside this, Ashanti and Greater Accra regions are the main economic hub of the country and therefore attract mass movements of people to transact varied economic activities. Over the years, this economic factor has been a source of influx of both internal migration and migrants from neighbouring countries.

The Ketu South Municipality of the Volta Region has also been identified as an emerging hotspot for the spread of the coronavirus in the region. This is because the municipality has so far recorded more than 50% of confirmed coronavirus cases in the region.

Several arrests were made as regards violations of the restriction order of the state. These persons arrested included several foreign nationals entering the country illegally or exiting the country via unapproved routes in the Volta and Upper West regions especially. In addition, the gaps in security operational standards of how the ‘lockdown’ should be enforced had aggravated series of human rights violation across the lockdown areas. The failure of some citizens to adhere to the restriction measures were largely motivated by the need for economic livelihoods. This might have contributed to the lifting of the lockdown in the affected areas by the Government. Given the dense population in the regional capitals coupled with inability of the population to adhere to social distance measures, the risk of increased cases of COVID-19 is most likely.

The northern regions, especially in the Upper West Region have also become the epicenter of Cerebrospinal Meningitis (CSM) disease. As of now, four hundred and nine (409) positive cases have been recorded. The Upper West Region alone accounts for 303 positive cases and a death toll at 44. This also adds additional challenge to the limited health facilities in the region which is already underequipped to mitigate the spread of both COVID-19 and CSM.

RISK ANALYSIS

The lockdown mechanism initiated by the Government was a critical move that allowed for some level of containment of the coronavirus disease. Already, the economic challenges it poses to populations have made it a difficulty for compliance with lockdown measures. Furthermore, the lack of knowledge and understanding of the nature of the virus by a minority of the educated as well as a majority of the uneducated, compounds the risk of further spread of the disease. Lifting the lockdown measures based on these two scenarios alone suggests that the spread of the pandemic could accelerate if appropriate control mechanisms are not instituted.

RECOMMENDATIONS

- There is the need for the Government to consider mass testing. This has become necessary because of the confirmed cases emanating from 82% infected persons with no clear travel history and the fact that carriers of the virus may also be asymptomatic.
- The Government should continue to strengthen coordination of responses at the national, regional and local levels through robust inter-agency collaboration and partnership with the civil society.
- Information dissemination to sensitize the public on personal safety and hygiene is imperative. To achieve this, the Government should continue to strengthen partnership with the National Commission for Civic Education (NCCE), civil society organizations, local NGOs, the media, traditional authority and religious institutions. This should further be utilized in enforcing the measures initiated by the Government to curb the spread of the pandemic.
- The need for Government response to prioritize protection of vulnerable populations including the aged, pregnant women and the physically challenged is imperative in preventing fatalities associated with COVID-19 pandemic.

https://www.ghanaweb.com/GhanaHomePage/NewsArchive/Meningitis

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