Coronavirus disease 2019 (COVID-19) is truly new and knowledge about its nature, the mode of behaviour, effect on the human body, treatment, and its social and economic impact on affected people and communities are still to be seen. Scientists, medical, and health professionals and researchers all over the world are at work trying their best to understand COVID-19 and find the most effective ways to manage and treat it. Here are some frequently asked questions and their responses for One Health partners and stakeholders.

**IMAGE OF THE NOVEL CORONAVIRUS**

Where did the novel coronavirus come from?

Viruses can change over time. Occasionally, a disease outbreak happens when a virus that is common in animals, such as pigs, bats, cattle, or birds, undergoes changes and passes to humans. This is likely how the new coronavirus came to be.

Is it safe to buy or receive or buy products from overseas or other countries?

Yes, it is safe. Although COVID-19 can survive for a short period of time on some surfaces, it is unlikely for it to be spread from domestic or international mail products or packaging exposed to different conditions and temperatures.

Researchers are studying the new coronavirus to learn more about how it infects people. According to a recent article published, depending on the surface and environmental conditions, the novel coronavirus (SARS-CoV-2) can survive between several hours and three days on a surface. As of this writing, the World Health Organization (WHO) says that the likelihood of becoming infected with the novel coronavirus from a commercial package is low since it has likely travelled over several days and been exposed to different temperatures and conditions during transit.

What is social and physical distancing?

Social distancing, also called physical distancing, means keeping space between yourself and other people outside of your home. To engage in social and physical distancing, you can do the following:

- Cover your mouth and nose with a cloth face cover when around others, including when you have to go out in public, for example, to a local marketplace or the grocery store.
- Maintain physical distance of –one to two meters (three to six feet) between you and other people, even when wearing a face covering.
- Stay at least six feet between yourself and others, even when you wear a face covering.
- Do not gather in groups of more than 25 persons, for example for events such as sporting activities, funerals, and traditional festivals.
- Avoid large and small gatherings in private places and public spaces, such as a friend’s house, parks, restaurants, or shops.
- Stay out of crowded places and avoid mass gatherings such as churches, mosques, and football games.

While separating ourselves from one another may feel disheartening, these social and physical distancing measures will help stop or slow down the spread of the disease. In turn, they allow the health care system to more readily care for patients over time. Other examples of social and physical distancing that allow you to avoid larger crowds or crowded spaces include the following:

- Working from home instead of at the office.
- Closing schools or switching to online classes.
- Maintaining contact with loved ones by electronic devices (e.g., through phone calls instead of in person).
- Cancelling or postponing conferences and large meetings.
- Praying at home instead of attending church or mosque to join others in prayer.

What is self-quarantine?

Quarantine means restricting the activities or separating people who may not show obvious signs of illness, but who may have been exposed to COVID-19 and are not yet showing symptoms. The goal is to prevent the spread of the disease by the time people begin to develop symptoms.

Quarantine is different from isolation, which is the separation of ill or infected persons from others to prevent the spread of infection or contamination.

If you do not have symptoms of COVID-19 but think you may have been exposed, you can voluntarily separate yourself from others to prevent any potential spread. This is known as self-quarantine. During the time you are self-quarantining, you will monitor yourself for symptoms.

Because malaria is common in Ghana, do not ignore symptoms of fever-seek medical help.

- When you go to the health facility wear a mask if possible and keep at least one to meters (three to six feet) from other people, and do not touch surfaces with your hands.
- If a child is sick, help the child follow this advice.

People who have been exposed to the novel coronavirus or who are at risk for coming down with COVID-19 might practice self-quarantine. Health experts recommend that self-quarantine lasts 14 days. Two weeks provides enough time for them to know whether or not they will become ill and be contagious to other people.

You might be asked to practice self-quarantine if you have recently returned from traveling to a part of the country or the world where COVID-19 is spreading rapidly, or if you have knowingly been exposed to an infected person.

Self-quarantine involves the following:

- Using standard hygiene and washing hands frequently
- Not sharing things like towels and utensils
- Staying at home
- Not having visitors
- Staying at least six feet (two metres) away from other people in your household

Once your quarantine period has ended, if you do not have symptoms, follow your doctor’s instructions on how to return to your normal routine.

**What is isolation?**

Self-isolation is when a person that is experiencing fever, cough, or other COVID-19 symptoms stays at home and does not go to work, school or public places to avoid spreading potential COVID-19 with others. If you are self-isolating, follow the guidance provided by the Ghana Health Service (GHS) and the general guidelines provided by WHO, which include:

- Have a large, well-ventilated space with hand-washing and toilet facilities; if this is not possible, place beds at least one metre apart
- Keep at least one to two meters (three to six feet) from other people; even from your family members
- Monitor your symptoms daily
- Isolate for 14 days, even if you feel healthy
- If you develop difficulty breathing, contact your healthcare provider immediately-call them first if possible
- Stay positive and energized by keeping in touch with loved ones by phone or online, and by exercising at home
- CDC guidelines on when it is safe to leave self-isolation are available below and here.
- Do not ignore symptoms or fever if you live in an area with malaria or dengue fever. Seek medical help
- Wear a mask if possible and keep at least one to two meters (three to six feet) from other people and do not touch surfaces with your hands when you go to the health facility
- Help sick children follow these guidelines

Guidelines on when it is safe to leave self-isolation are available in the *Synthesized Guidance for COVID-19 Message Development* produced by Breakthrough ACTION and the “*Caring for Someone Sick at Home*” webpage from the U.S. Centers for Disease Control and Prevention.

**What is “flattening the curve”?**

“Flattening the curve” refers to using protective practices to slow the rate of COVID-19 infection so hospitals have room, supplies, and doctors for all of the patients who need care. A large number of people becoming very sick over a few days could overwhelm a hospital or care facility. Too many people becoming severely ill with COVID-19 at roughly the same time could result in a shortage of medical supplies, hospital beds, equipment, or doctors. On a graph, a sudden surge in patients over a short time could be represented as a tall, narrow curve.

On the other hand, if that same large number of patients arrived at the hospital at a slower rate, for example, over the course of several weeks, the line of the graph would look like a longer, flatter curve. In this situation, fewer patients would arrive at the hospital each day. There would be a better chance of the hospital being able to keep up with adequate supplies, beds, and health care providers to care for them, resulting in better services and outcomes for patients.

![An Illustration of the concept- Flattening the Curve](https://www.gannett-cdn.com/presto/2020/03/11/USAT/a1b74308-3657-4be5-b3bb-29a04e5cf737_the_curve2.jpg?crop=1679,945,x192,y0&width=1679&height=945&format=pjpg&auto=webp)

Adherence to the GHS-recommended COVID-19 prevention protocols is a sure way to slow down infection and thereby prevent the available health facilities from being overwhelmed. This is particularly necessary as Ghana enters the raining season when cases of existing endemic diseases such as malaria are expected to rise.

**How can one give support in lessening the coronavirus impact?**

First, learn *what to do if you feel sick*. The coronavirus pandemic is making everyone aware of handwashing and protecting others from coughs and sneezes. Along with those essential steps, practices such as wearing face masks, social and physical distancing, and self-quarantine and isolation when appropriate can slow the rate of infection in a city, town, or community.

The pandemic can seem overwhelming, but in truth, every person can help
At a meeting of the leadership of various Ghanaian media houses on March 16, 2020, chaired by Ghana’s Minister of Information, the Hon. Kodzo Oppong Nkrumah, it was decided that media practitioners in Ghana be trained in COVID-19 information management. In response, One Health partners—the Health Promotion Division (HPD) of the GHS, USAID’s Breakthrough ACTION project, the Information Services Department, and the Ghana Medical Association—organized a series of media training activities at national and regional levels for media practitioners. These training activities were aimed at broadening the knowledge and understanding of the media professionals in the various regions on COVID-19 to promote appropriate behaviour change among the general public and to mitigate spread of the disease.

A total of 78 media practitioners from the Ghana Independent Broadcasters Association, Ghana Journalists Association (GJA), Private Newspaper Publishers Association of Ghana, officers from the Ministry of Information, Health Promotion Officers from the HPD and officials from the Public Relations Unit of the GHS attended the national level training sessions held at the Ministry of Information and the GJA press centres in Accra on March 23, 2020.

Dr. Da Costa Aboagye, Director of HPD-GHS encouraged the media to focus on reporting facts obtained from authentic sources and avoid putting into public domain information that could cause fear and panic. On his part, Dr. Justice Yankson, of the Ghana Medical Association called for responsible reportage by the media and resource persons and emphasized the importance of strict adherence to professional ethics, respect for confidentiality, and accurate and timely information flow to mitigate the impact of rumours.

At the regional levels a total of 254 media practitioners from 15 regions participated in the COVID-19 media training sessions held between April 7–9. Participation at the various regional capitals was as follows: Central Region, 29 at Cape Coast; Volta and Oti Regions, 30 at Ho; Eastern Region, 30 at Koforidua; Ashanti Region, 28 at Kumasi; Bono, Ahafo and Bono East Regions, 38 at Sunyani; Northern, North East and Upper East Regions, 46 at Tamale; and Upper West and Savanna Regions, 28 at Wa.

Since the COVID-19 pandemic outbreak in Ghana in March 2020, the GHS with its new Director General, Dr. Patrick Kuma-Aboagye, has risen to the challenge as Chairman of the NTCC.

Through the Public Health Division, the Disease Surveillance Department, the Regional Health Directorates with support from various health research institutions and laboratories, the GHS continues to collate COVID-19 prevalence data and other relevant information for submission to the Inter-Ministerial Coordinating Committee for onward transmission to the office of the President to feed into the COVID-19 weekly briefings provided to the nation by the NTCC.

The Director General further supports the Health Promotion Division which serves as Chair to the National Risk Communication Technical Working Group and its One Health partners in the organization of various risk communication activities, including the production and distribution of risk communication materials directed toward behaviour change and halting the spread of COVID-19.

Dr. Patrick Kuma-Aboagye, Chairman of the NTCC, is a Senior Public Health Specialist with over 28 years of progressive experience as a clinician and Public Health Specialist.
Some media personnel show off face masks presented to them by a local philanthropist at the Bono, Ahafo, and Bono East Regions training. Photo by Vivian Abiwu/Breakthrough ACTION

Veterinary Services Department supports COVID-19 testing
The Veterinary Services Directorate (VSD) of the Ministry of Food and Agriculture through its Accra Laboratory has been supporting the Noguchi Memorial Institute of Medical Research in the processing and testing of samples for the novel coronavirus since March 2020. The outfit according to Dr. Fenteng Danso, the National Head of Epidemiology at the directorate, says the VSD is ready to bring on board its facilities in Takoradi and Pong Tamale to support the Ministry of Health in its collective fight against COVID-19. As far as expertise of personnel is concerned, Dr. Danso noted that his staff are adept at handling other deadly diseases like rabies and anthrax. “We had a project called USAID-PREDICT where we looked specifically at coronaviruses and the influenza virus in the wild and we used our existing facility in doing so,” Dr. Danso stated. This experience he noted is sufficient in enabling the VSD to carry out testing for COVID-19 confidently and successfully.

Ghana Red Cross Society promotes hand hygiene and supports the needy
To promote handwashing and the use of hand sanitizers in preventing COVID-19, the Ghana Red Cross Society (GRCS) has initiated handwashing activities across all shopping malls in Accra and prepositioned 100 pieces of 50 litre containers, soap, and other detergents. GRCS also distributed over 2,000 hand sanitizers targeting long-distance drivers, markets, churches, and mosques.

During the lockdown in Accra and Kumasi, the GRCS, in collaboration with Nestlé Ghana, distributed 50,000 Nestlé packaged food products to some vulnerable communities in the two cities. The distribution of these food packets was carried out in informal settlements and impoverished communities; volunteers went from house-to-house to avoid crowding people as stated in the Ghana COVID-19 protocols.

National Disaster Management Organisation distributes food to vulnerable populations in 40 districts
As the main disaster and relief management agency in Ghana, the National Disaster Management Organisation supported the distribution of food items including water to needy and venerable populations in 40 districts in the Accra and Kumasi Metropolitan areas as well as Kasoa in the Central Region during the three weeks lockdown period of March 30 to April 20, 2020. About 200 volunteers were deployed in carrying out this exercise which was accompanied with education on personal preventive measures, such as frequent handwashing and use of hand sanitizers.

UNICEF engages nine NGOs in COVID-19 prevention
UNICEF Ghana signed agreements with nine local NGOs to conduct education and advocacy activities on prevention of COVID-19 along the country’s borders with Togo, Côte d’Ivoire and Burkina Faso. UNICEF also collaborated with other One Health Partners, the GHS-HPD and Breakthrough ACTION to develop COVID-19 prevention advocacy messages for eminent personalities and community influencers including chiefs, queen mothers, religious leaders, and academia.

WHO supports four regions in their response to COVID-19
WHO Ghana, in their role as the representative of the global body in Ghana providing oversight for the country’s efforts in fighting the COVID-19 pandemic, provided funding to four regions-Greater Accra, Ashanti, Eastern, and Upper East-for implementing different pillars of approach and the overall COVID-19 response activities. It also provided funds to support the Ghanaian government’s efforts in educating the public on meningitis prevention in the Upper West Region.

Did you know? Social stigma associated with COVID-19 hurts
Social stigma in the context of the pandemic means people with COVID-19 are being labelled, stereotyped, discriminated against, and treated differently. Did you know

- That people with COVID-19 are also experiencing loss of status because of a perceived link with the disease?
- That social stigma can negatively affect those with the disease, as well as their caregivers, health workers, family, friends, and communities?
- That people who do not have the disease but share other characteristics with this group may also suffer from stigma?

COVID-19 stigma is a dangerous phenomenon. It can undermine social cohesion and prompt possible social isolation of groups, which might contribute to a situation where the virus is more, not less, likely to spread. This can result in more severe health problems and difficulties in controlling the disease outbreak. Stigma can:

- Drive people to hide the illness to avoid discrimination;
- Prevent people from seeking health care immediately;
- Discourage them from adopting healthy behaviours.
What should we do and not do?

<table>
<thead>
<tr>
<th><strong>Do</strong></th>
<th><strong>Don’t</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Talk about the coronavirus disease without attaching it to ethnic groups, institutions, companies, or other characteristics from which people treated/being treated for the disease have been identified. The official name for the disease was deliberately chosen to avoid stigmatization—the “co” stands for corona, “vi” for virus and “d” for disease, and 19 because the disease emerged in 2019.</td>
<td>Refer to people with the disease as “COVID-19 cases” or “victims.”</td>
</tr>
<tr>
<td>Talk about “people who have COVID-19,” “people who are being treated for COVID-19,” “people who are recovering from COVID-19,” or “people who died after contracting COVID-19.”</td>
<td></td>
</tr>
<tr>
<td>Talk about “people who may have COVID-19” or “people who are presumptive for COVID-19.”</td>
<td>Talk about “COVID-19 suspects” or “suspected cases.”</td>
</tr>
<tr>
<td>Speak accurately about the risk from COVID-19 based on scientific data and the latest official health advice.</td>
<td>Repeat or share unconfirmed rumours and avoid using hyperbolic language designed to generate fear like “plague,” “apocalypse.”</td>
</tr>
<tr>
<td>Talk positively and emphasise the effectiveness of prevention and treatment measures. For most people, this is a disease they can overcome. There are simple steps we can all take to keep ourselves, our loved ones, and the most vulnerable safe.</td>
<td>Emphasise or dwell on the negative or on threat messages. We need to work together to help keep those who are most vulnerable safe.</td>
</tr>
</tbody>
</table>

Using criminalising or dehumanising terminology creates the impression that people with the disease have somehow done something wrong or are less human than the rest of us. This feeds stigma, undermines empathy, and potentially fuels wider reluctance to seek treatment or attend screening, testing, and quarantine. **STOP STIGMA! IT IS DANGEROUS AND HURTS!**

---

**COME ON BOARD AND SUPPORT ONE HEALTH!**

**BE A PARTNER TO ONE HEALTH!**

This Ghana One Health Newsletter is produced by the Health Promotion Division of the Ghana Health Service, the Ghana One Health Partnership, and Breakthrough ACTION. Breakthrough ACTION is supported by the U.S. Agency for International Development (USAID) under the terms of Cooperative Agreement No. AID-OAA-A-17-00017. The views expressed are those of the authors and do not necessarily reflect the views of USAID or the United States government.

---

For further information, contact:
healthpromotiondepartment.gh@gmail.com

---