

# WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 28: 6 - 12 July 2020

Data as reported by: 17:00; 12 July 2020



World Health  
Organization

REGIONAL OFFICE FOR

Africa

WHO Health Emergencies Programme

0

New event

110

Ongoing events

100

Outbreaks

10

Humanitarian  
crises



Graded events ↑

49

Grade 3 events

15

Grade 2 events

1

Grade 1 events

38

Ungraded events

2

Protracted 3 events

2

Protracted 2 events

3

Protracted 1 events

# Overview

## Contents

- 1 Overview
- 2 - 4 Ongoing events
- 5 Summary of major issues, challenges and proposed actions
- 6 All events currently being monitored

This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 110 events in the region. This week's main articles cover the following events:

- [Coronavirus disease 2019 \(COVID-19\) in Ghana](#)
- [Ebola virus disease \(EVD\) in Équateur Province, Democratic Republic of the Congo](#)
- [Humanitarian crisis in Democratic Republic of the Congo.](#)

For each of these events, a brief description, followed by public health measures implemented and an interpretation of the situation is provided.

A table is provided at the end of the bulletin with information on all new and ongoing public health events currently being monitored in the region, as well as recent events that have largely been controlled and thus closed.

### Major issues and challenges include:

- Ghana has the third highest number of confirmed cases of COVID-19 in the Region, but still few deaths. However, as with many other countries in the region, lockdown regulations started to be relaxed in mid-June 2020, allowing schools and universities to re-open, and gatherings of up to 100 people for funerals and weddings. At the same time there is a rise in numbers of confirmed cases, including at Senior High Schools. Community engagement and risk communication around physical distancing, the use of cloth masks in public and hand hygiene is now vital in order to stem this rise in transmission.
- The growing outbreak of EVD in Equateur Province, Democratic Republic of the Congo, is of grave concern in the context of the continued monitoring of the recently ended outbreak in North Kivu and Ituri provinces, the COVID-19 outbreak, a long-standing measles outbreak and a complex humanitarian crisis in the country. There are challenges around the continued residence of known confirmed cases in the community. In both Ebola virus disease and COVID-19, there is a need to sustain a strong and robust surveillance system in order to detect, isolate, test and treat new suspected cases as early as possible, to improve outcomes in potential cases, and to break all chains of transmission.
- Democratic Republic of the Congo continues to experience significant insecurity, resulting in large-scale population displacement. This, along with constant, widespread outbreaks of infectious diseases, threatens still further the security and livelihood of their vulnerable populations. Although at present the COVID-19 outbreak is largely confined to Kinshasa city and province, the potential for further spread is there, particularly among IDP populations. This, as well as the underlying drivers of the insecurity, needs to be addressed, in order to provide the input required by the authorities and partners to tackle the major problems experienced by this country.

# Ongoing events

## Coronavirus disease 2019

## Ghana

24 518 : 139 : 0.6%  
Cases : Deaths : CFR

### EVENT DESCRIPTION

The first two cases of COVID-19 in Ghana were confirmed on 12 March 2020 in two people who had returned to Accra from Norway and Turkey. Greater Accra, Ashanti and Upper West regions all recorded cases in March 2020 and remain the most affected areas in the country. The number of new cases has been increasing rapidly in recent weeks. As of 12 July 2020, there was a cumulative total of 24 518 confirmed cases, with 139 deaths (case fatality ratio 0.6%). Of the new daily cases, 65% are reported from Greater Accra, 10% from Ashanti and 10% from Western regions. Routine surveillance accounts for 35% of new cases, while enhanced surveillance through contact tracing and quarantined travellers accounts for 65% of new cases. As of 12 July 2020, a total of 421 (17%) confirmed cases has been reported among health workers.

As of 3 July 2020, a total of 316 798 tests had been carried out, with a positivity rate of 6.3% with a laboratory testing rate at 107 per 10 000 population per capita. The attack rate nationally is 70 per 100 000 population, but higher in Greater Accra Region at 239 per 100 000 population, Western Region at 87.2 per 100 000 population and Ashanti Region at 78.1 per 100 000 population. All 16 regions of the country have recorded cases and the median attack rate for the regions is 16 per 100 000 population. To date, a total of 20 187 (82%) cases have been recorded as recovered in Ghana.

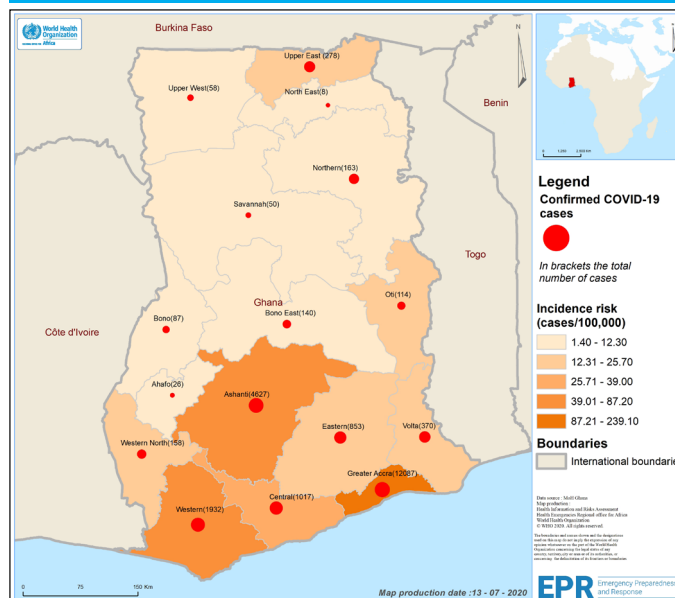
### PUBLIC HEALTH ACTIONS

- Ghana's coronavirus preparedness and response plan continues to be implemented and there are plans for COVID-19 treatment centres to be expanded across the country.
- Because isolated cases have been reported in Senior High Schools, the Minister of Education has outlined measures to ensure the safety of students in educational institutions and more than 200 people from the Ghana Health Service and the Ghana Education Service have been deployed to monitor COVID-19 cases in senior high schools.
- The National Surveillance Team continues to scale up barcode and SORMAS training for COVID-19 testing laboratories.
- An initial consignment of laboratory supplies has arrived to support the laboratory network involved in COVID-19 testing.
- COVID-19 Risk Communication teams are visiting schools and other institutions to deliver COVID-19 prevention messages and have also engaged the coalition of health NGOs across the country to intensify community education on prevention.

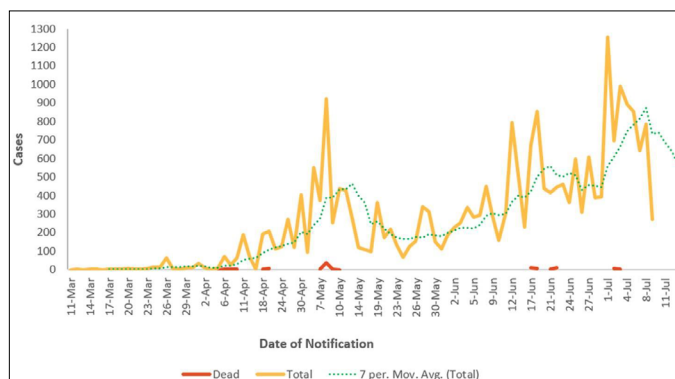
### SITUATION INTERPRETATION

The COVID-19 outbreak in Ghana continues to expand in terms of confirmed cases, but few deaths have been reported, with the country currently ranking fourth in confirmed cases in the WHO Africa Region. At the beginning of June 2020, along with many

Geographical distribution of confirmed Coronavirus disease 2019 reported from 3 July 2020, Ghana



The distribution of COVID-19 confirmed case; alive, dead and moving average in Ghana, 11 March – 12 July 2020 (n=24 518)



countries in the Region, Ghana started relaxing restrictions to allow gatherings such as funerals and religious services of no more than 100 people. Final year students of junior schools, high schools and universities started returning from 15 June 2020. Cloth face masks are mandatory in the country when in a public place. However, as is the case elsewhere in the Region, the number of cases has started to rise as these restrictions have been eased. Challenges remain around public health messages on physical distancing, the use of cloth masks and hand hygiene. Local and national authorities need urgently to scale up community engagement and risk communication to remind people of the importance of behaviour change in mitigating the risks associated with COVID-19.

## EVENT DESCRIPTION

The Ebola virus disease (EVD) outbreak in Équateur Province, Democratic Republic of the Congo, continues to evolve, with a further health zone and more health areas affected. Since our last report ([Weekly Bulletin 27](#)), eight additional confirmed EVD cases have been reported, with three new deaths. A total of six confirmed cases are known to be still in the community, two in Bikoro, two in Lotumbe and one each in Mbandaka and Wangata.

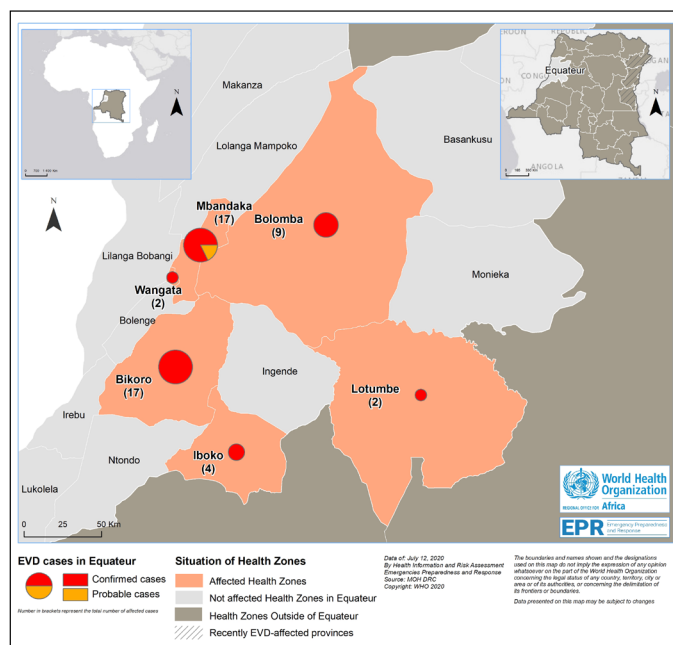
As of 11 July 2020, there are a total of 49 cases (46 confirmed and three probable) including 20 deaths (case fatality ratio 40.8%). The case fatality ratio among confirmed cases is 37% (17 deaths/46 confirmed cases). Two health workers are among the confirmed cases since the start of the outbreak, making up 4.1% of all cases. To date, six out of 18 health zones and 18 out of 281 health areas in Équateur Province have reported at least one confirmed or probably case of EVD. In the past 21 days (from 21 June 2020 to 11 July 2020), 26 confirmed cases of EVD have been reported in 14 health areas in five health zones.

All five health zones reported contacts on 11 July 2020, with 27 new contacts registered, 22 in Mbandaka and five in Iboko. The proportion of contacts followed-up (4 977/5 580) was 89.2%. A total of 118 contacts were not seen in the past 24 hours, of which 13 (11%) were lost to follow-up, 20 (19.5%) were not in the area and the remaining 23 (19.5%) have never been seen. A total of 564 contacts completed their follow-up period. Seven health zones reported alerts, including Lotumbe Health Zone. A total of 518 new alerts were reported, including four deaths, well above the average of the previous seven days (average=323). A total of 546 alerts were recorded on 11 July 2020, of which 493 (90.3%) were investigated and 125 (25.4%) were validated as suspicious.

## PUBLIC HEALTH ACTIONS

- Two surveillance teams deployed to Lotumbe are continuing in-depth investigations and contact listing around confirmed cases of 7 July 2020 and are also continuing to search for two high-risk contacts in South Ubangi and Tshuapa provinces.
- On 11 July 2020, 15/16 of the active Points of Control (PoCs) (93.8%) reported. A total of 7 739 travellers passed through these PoCs and 7 066 (91.3%) were screened. No alerts were recorded. Since the start of the response activities, 273 769 (92%) screenings have been performed among the 297 579 travellers who have passed through the active PoCs. Out of these 11 alerts have been detected, with four validated.
- As of 11 July 2020, 92 samples were received in operational laboratories; Bikoro (16), Itipo (15) and Mbandaka (61). None of the samples were positive for Ebola virus. Since the start of the outbreak a total of 962 samples have been tested.
- Training of samplers in the affected health zones has started, as well as ongoing on-site training of laboratory technicians in the various operational sites on laboratory techniques and stock management.
- A total of 411 new people were vaccinated with rVSV-ZEBOV-GP on 11 July 2020, including 121 high risk contacts, 283 contacts of contacts and seven probable contacts.
- Since 5 June 2020, a total of 11 327 people has been vaccinated.
- A total of 50 patients, including 12 confirmed patients were managed in the transit centres and Ebola treatment centres in affected areas as of 11 July 2020, with bed occupancy at 50%.
- The Bikoro ETC was nearly full for the second successive day and the Lotumbe general reference hospital was overcrowded.

Geographical distribution of confirmed Ebola virus disease cases reported from 11 July 2020, Équateur Province, Democratic Republic of the Congo



- A community death alert was raised in Bikoro, but no sampling or safe and dignified burial could be carried out.
- As of 11 July 2020, five health facilities in Mbandaka (2), Wangata (2) and Bolombo (1) and 15 households in Bikoro were equipped with IPC kits. Monitoring and supervision of 18 health facilities in the Mbandaka, Bolombo and Bolenge health zones took place and 107 providers were briefed on hand hygiene, injection safety and safe disposal of hospital waste.
- Risk communication, mobilization and community engagement continues, with an advocacy session conducted with the Territory Administrator and the customary chief and representative of the indigenous peoples of Bikoro. Community outreach units visited 2 159 households and five educational talks were held in the Bolomba, Likolo and Boso Semodja health areas in Bolomba Health Zone.

## SITUATION INTERPRETATION

New confirmed and probable cases of EVD continue in this region, albeit at a relatively slow rate. However, the continued presence of confirmed cases in the community, along with contacts lost to follow-up, are of grave concern, given the highly infectious nature of the disease. All pillars of response are active in all affected areas and robust public health measures continue to be implemented, along with ring vaccination. The security situation appears relatively calm, with a few pockets of resistance, and support is being provided to the various commissions deployed on the ground. Public health measures, particularly a strong and robust surveillance system, required to detect, isolate and treat new suspected cases as early as possible is required to break any new chains of transmission, along with full community engagement in the response measures. Current community engagement and education cover both EVD and COVID-19, with the risk communication strategy for both outbreaks working in tandem.



## EVENT DESCRIPTION

Democratic Republic of the Congo continues to experience a complex humanitarian crisis, further complicated by a growing outbreak of COVID-19, the 11th Ebola virus disease outbreak in Équateur Province, and ongoing outbreaks of measles and cholera, among other infectious disease outbreaks. In the province of North Kivu alone there are around 14 000 internally displaced persons (IDPs) and close to 4 000 returnees from the Kelembe/Kalonge-Mera-Peti and the eastern region of Walikala between April and May 2020. These population displacements were caused by clashes between armed groups in the Masisi, Walikale, and Kivu in North Kivu Province. All IDPs and returnees have multisectoral requirements.

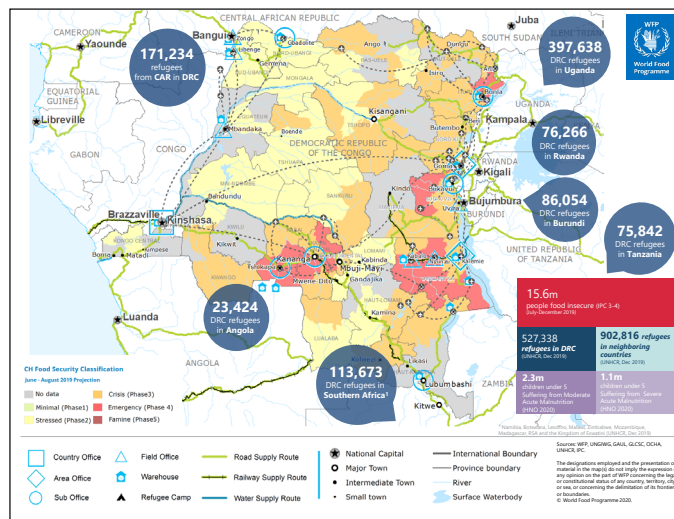
In Lubero territory, the protection situation in the south-west portion of the Kayna Health Zone has deteriorated since 23 June 2020 following clashes between different factions of one group, with a risk of population movements following this, after a lull of nearly six months in the region. The security situation in Ituri Province remain tense after an attack on the Allied Democratic Forces, which claimed the lives of two civilians on 24 June 2020 and an unknown number of people have been displaced as a result. In Tanganyika Province, cross-border conflict with Zambia has caused waves of population displacement since 13 March 2020 and nearly 8 200 IDPs are still waiting to be re-settled and require humanitarian assistance. The IDP sites in the province currently host 24 229 people. In Kwango Province, a total of 432 people were deported back to Angola on 19 June 2020, most of whom have remained in the border area. These refugees required food, healthcare, education, shelter and essential household items, in a region with little or no humanitarian assistance because of difficulties around physical access in the area.

Multiple outbreaks of infectious diseases complicate this already fragile situation, the major outbreaks being COVID-19, malaria, cholera, measles, Ebola virus disease (details in this bulletin), and smaller outbreaks of monkey pox, plague, yellow fever, meningitis and diarrhoea in children under the age of five years. The main causes of morbidity in weeks 1 to 25 (week ending 20 June 2020) were malaria (359 962 cases, 9 274 deaths), acute respiratory infections (106 795) and typhoid fever (29 313 cases).

## PUBLIC HEALTH ACTIONS

- Meetings have been organized in response to the humanitarian situation, including coordination with the humanitarian fund unit and the Advisory Board Group team, during the course of which various prioritization proposals within the budget of US\$ 56 million of the clusters have been validated.
- There was a meeting of the national inter-cluster group reporting on the COVID-19 and the Ebola virus disease outbreak, along with a coordination meeting at which the response to COVID-19 was updated by the Pillar team leaders.
- The allocation of funds for the humanitarian fund was finalized.

Map of Internally Displaced Persons in Democratic Republic of Congo, as of 06 March 2020



- WHO continued to coordinate the health interventions of the different sectors, with regular meetings of the Health Cluster, flood crisis coordination and cholera response coordination.
- Water, sanitation and hygiene intervention included construction of a metal water tank along the Kavimvira River.
- WHO is supporting epidemiological surveillance at the Provincial Health Division in Ituri in response to the COVID-19 outbreak; MEDAIR continued support for free healthcare for children under five with severe acute malnutrition.
- Other partners are USAID, Save the Children, and Samaritan's Purse.

## SITUATION INTERPRETATION

Democratic Republic of the Congo continues to suffer with multiple drivers of the long-standing complex humanitarian crisis. Although coordination by the various pillars is robust, the combination of continued insecurity, resulting in large population displacements and major outbreaks of infectious disease is putting enormous strain on already inadequate resources. All this is complicate further by deployment of resources to the COVID-19 outbreak, which, while rapidly expanding, is still small relative to the other disease outbreaks, many of which disproportionately affect refugees and displaced persons. National authorities and partners need to ensure that all the country's needs are adequately assessed and responded to in the context of COVID-19, which should be used to complement other responses.

# Summary of major issues, challenges and proposed actions

## Major issues and challenges

- Cases of COVID-19 are rising in Ghana as the country relaxes lockdown regulations, with gatherings of up to 100 people allowed at funerals and weddings, along with the re-opening of schools and universities. Although face masks are mandatory in public places, the continuing rise in incidence cases shows that behavioural change around physical distancing and hand hygiene is still not sufficient to stem the spread of the virus.
- The 11th Ebola virus disease outbreak in Equateur Province, Democratic Republic of the Congo, continues to spread, with new health areas and health zones affected in the past week. There are still confirmed cases at large in the community, making it difficult to break chains of transmission. The COVID-19 outbreak in the country is also showing rising case incidence, with Democratic Republic of the Congo now in ninth position in the WHO African Region, which means that the country's response mechanisms are likely to be particularly burdened by simultaneous outbreaks of major infectious diseases.
- Responses to the ongoing complex humanitarian crisis in Democratic Republic of the Congo have the potential to be disrupted by diversion of resources to the COVID-19 outbreak. This needs to be addressed, so that the response to COVID-19 strengthens resources available for other emergencies and outbreaks in the region.

## Proposed actions

- Authorities in Ghana need to increase efforts put into community engagement and risk communication in order to encourage the behaviour change that is necessary to stem the spread of the virus. At the same time, testing, contact tracing and isolation of contacts and confirmed cases needs to be continued and surveillance strengthened in order to monitor the fourth largest outbreak in the African Region.
- The new Ebola virus disease outbreak requires robust response activities in order to control this rapidly, break chains of transmission and engage the community in these activities. These should be linked to existing COVID-19 surveillance activities in order to use resources efficiently. These efforts should be encouraged and supported nationally and by partners.
- The allocation of funds for the humanitarian response in Democratic Republic of the Congo needs to take into account the ongoing vulnerability of the population to insecurity, displacement and disease outbreaks, including COVID-19.

# All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
<b>Ongoing Events</b>									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	12-Jul-20	19 195	19 195	1 011	5.30%
From 25 February to 12 July 2020, a total of 19 195 confirmed cases of COVID-19 with 1 011 deaths (CFR 5.3 %) have been reported from Algeria. A total of 13 743 cases have recovered. Most of the cases have been reported from the Wilaya of Blida.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	12-Jul-20	506	506	26	5.10%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 12 July 2020, a total of 506 confirmed COVID-19 case have been reported in the country with 26 deaths and 118 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	7-Jul-20	132	132	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There have been two cases as of 24 May in 2020 so far while the total number since 2019 remain 132 cases. The last case had onset of paralysis on 9 February 2020. All other cases are from several outbreaks which occurred in 2019.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	11-Jul-20	1 378	1 378	26	1.90%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 11 July 2020, a total of 1 378 cases have been reported in the country with 26 deaths and 557 recoveries.									
Benin	Lassa fever	Ungraded	19-Feb-20	17-Feb-20	15-May-20	4	4	1	25.00%
From 17 February to 15 May 2020, a total of 4 confirmed cases of Lassa fever have been reported in Tchaurou commune in Borgou department of Benin. One death was recorded on 18 February 2020 in the index case and a safe and dignified burial has been conducted. All cases are residents of Bukuro city, Kwara state, Nigeria. A total of 34 contacts, including 23 healthcare workers, are under follow-up.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	7-Jul-20	9	9	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There is one case as of 24 May 2020, while the number of cases in 2019 remains eight. These cases are all linked to the Jigawa outbreak in Nigeria.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	12-Jul-20	399	399	1	0.30%
On 30 March 2020, the Minister of Health and Wellness of Botswana reported three confirmed cases of COVID-19. As of 12 July 2020, a total of 399 confirmed COVID-19 cases were reported in the country including one death and 38 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	23-Jun-20	-	-	-	-
Since 2015, the security situation initially in the regions of the Sahel and later in the East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement leading to a total of 942 4040 internally displaced persons registered as of 23 June 2020 in all 13 regions in the country. Presence of jihadist groups and self-defence units have created an increasingly volatile security situation. Humanitarian access is restricted in Sahel, North, Centre-North and East regions, while IDP numbers are rising, along with protection concerns. Armed insurgent groups carried out three attacks on civilians and aid workers over 29-30 May 2020. The provisional death toll is 50 people, including at least one humanitarian worker. Health services are severely affected and as of 13 January 2020, According to the report of the Ministry of Health, 9.5% (n=121) of the health facilities located in the six regions affected by insecurity are closed, thus depriving more than 1.5 million people of health care, and 11.9% (n=152) have reduced their services to a minimum, following insecurity. Heavy rains on 5 June caused flooding in several communes of Centre Nord region, including Kongoussi; already affected by the 19 April flooding, Pensa, and Barsalogo. Flooding destroyed 669 shelters and damaged another 2 900. Around 140 000 IDPs are hosted in the affected communes. Morbidity due to epidemic-prone diseases remaining high and Malnutrition thresholds are alarming in the areas hosting IDPs, mainly in Barsalogo, Djibo, Matiacoli, Arbinda, and Titao.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	10-Jul-20	1 033	1 033	53	5.10%
Between 9 March and 10 July 2020, a total of 1033 confirmed cases of COVID-19 with 53 deaths and 869 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2		1-Jan-19	7-Jul-20	10	10	0	0.00%
A total of 10 cases of circulating vaccine-derived poliovirus have been reported from Benin since 2019. The last case had onset of paralysis on 16 January 2020. All cases were linked to the Jigawa outbreak in Nigeria.									
Burundi	Cholera	Ungraded	20-Feb-20	20-Feb-20	9-Jun-20	70	0	0	0.00%
The cholera outbreak in Burundi which started since epidemiological week 8,2020 (week ending on 15 March 2020) in six districts is improving. The last confirmed cases were reported on 7 May 2020. A total of 70 cholera cases were notified in six districts, namely Bujumbura centre (8), Bujumbura North (28 cas), Bujumbura Sud (3), Isale (25 cases), Kabezi (1 case) and Cibitoke (5) as of 9 of June 2020. The affected district reported cases as well in 2019 cholera outbreak. Of 70 cholera cases, 48.5 % are males and 49% are of age between 19 to 50 years old.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	12-Jul-20	258	258	1	0.40%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 12 July 2020, the total confirmed COVID-19 cases is 258, including one death and 118 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	4-Nov-19	19-Apr-20	857	857	0	0.00%
Burundi has been experiencing measles outbreaks since November 2019 in camps hosting Congolese refugees and has recently been spreading in the host community in the district of Cibitoke. As of April 2020, a total of 857 confirmed measles cases have been reported among which are 56 lab-confirmed measles cases and the rest were clinically compatible cases and epidemically linked. The geographic distribution of the cases is: Cibitoke (624 cases), Butezi (221 cases), Cankuzo (6 cases) and South Bujumbura (6 cases). No new cases have been reported in South district of Bujumbura and Cankuzo since December 2019. The last cases were reported in Butezi on 2 March 2020.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	26-Jun-20	-	-	-	-
Cameroon continues to face a humanitarian crisis in the Far North Region linked to the terrorist attacks by Boko Haram group, with significant population displacement. A total of 14 women and 2 men were abducted by Boko Haram insurgents in Mainankoua village bordering Nigeria in Cameroon's Far North on 23 June. Since 1 January 2020, there have been 38 attacks by alleged Boko Haram insurgents, resulting in 20 missing people, 95 injuries and 76 deaths. Two health facilities have been attacked, with one completely destroyed, along with attacks on health workers, with two deaths and one injury reported. Flood waters have receded in Mada and Makary health districts, potentially making them more vulnerable to security incidents. Maroua, the regional capital of Far North is on alert. The Minawao Refugee Camp in the Mokolo Health District continues to host Nigerian refugees, with spontaneous refugee arrivals being recorded weekly.									
Cameroon	Humanitarian crisis (NW & SW)	Grade 2	1-Oct-16	27-Jun-18	26-Jun-20	-	-	-	-
The humanitarian situation in the Northwest and Southwest (NW & SW) of Cameroon continues to deteriorate with rising tensions between separatists and military forces despite calls for a COVID-19 ceasefire by the UN Secretary General. The Southern Cameroons Defence Forces (SOCADEF) is the only non-state armed group (NSAG) that yielded to the UN Secretary General's call for a ceasefire as a result of the pandemic. An estimated 3 889 persons (604 households) in the NWSW were displaced as a result of continued violence in March alone. 70% (2 751 persons; 415 households) of the displaced are from the NW and the remaining 30% from the SW region. Since January 2020, there has been an upsurge in violence especially in the NW region affecting mostly women and children. Attacks on humanitarian workers in NW and SW Cameroon are increasing. Shelter, NFI (Non-Food Items), protection and food continue to be the most urgent needs of the displaced populations.									
Cameroon	Cholera	Ungraded	1-Mar-19	1-Jan-20	3-Jul-20	980	39	45	4.60%
The Cholera outbreak is ongoing in Cameroon affecting four regions, namely littoral, South Ouest, South and Centre regions. A total of 73 new suspected cholera cases and 6 new deaths were reported in South region (71 suspected cases and 4 deaths) and centre region (2 suspected cases and 2 deaths) from 19 Jun to 2 July 2020. Since the beginning of this outbreak in January to 3 July, 2020, a total of 980 cholera cases, including 39 confirmed cases and 45 deaths (29 in the hospitals and 16 in the community) (CFR: 4.6%) were reported in four regions. The majority of cases were reported in the littoral region (563 suspected cases and 30 deaths), followed by the South region (344 suspected cases and 12 deaths). In 2019, only the Far North, North and South Ouest regions were affected by the cholera outbreak.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	10-Jul-20	15 173	15 173	359	2.40%
Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 10 July 2020, a total of 15 173 cases have been reported, including 359 deaths and 11 928 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-20	17-May-20	1 175	1 175	11	0%
A measles outbreak is ongoing in Cameroon. Since 1 January 2020 to date, a total of 1175 confirmed cases have been reported. Of these, 594 were confirmed as IgM-positive and 581 by epidemiological link. The outbreak is currently affecting 78 over 189 districts (41%) in 8 regions over 10 regions of the country (North west and South west regions are not affected). In addition a total of 11 cases were reported to date in six districts, namely Kribi (4), Gashiga (2), Betaré Oya (1), Kolofata (2), Awaé (1), Ngaoundal(1). Fifty per cent of cases are 5 years old and above and 14% are less than 9 months years old. Seventy-four confirmed cases are not vaccinated.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	12-Jul-20	1 698	1 698	19	1.10%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 12 July 2020, a total of 1 698 confirmed COVID-19 cases including twelve deaths and 748 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	31-May-20	-	-	-	-
Civil unrest and food insecurity in most parts of the country including major cities are continuing to cause a complex humanitarian situation. The security situation remains tense with the persistence of inter-ethnic tensions within rival armed groups in the Northeast of the country mainly in Ndele, Birao, Batangafo and Bria. Intercommunal violence has intensified in Ndélé, capital of the northern prefecture of Bamingui Bangoran, since March. The violence started on 29 April and led to at least 8 000 people displaced, 28 deaths, and 56 injuries. This situation of Insecurity in CAR has led to restrictions of movement of humanitarian organizations and to temporary suspensions of their activities. A total of 31 incidents directly affecting humanitarian personnel or property were recorded in May compared to 23 incidents in May 2019. In Ndélé, looting of humanitarian premises continued during the first part of the month. A humanitarian team was kidnapped on the Batangafo - Kabo axis and within 6 days all prisoners were released. An increase in the number of wounded humanitarian workers (6) compared to only 8 in the first four months of the year was also recorded.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	10-Jul-20	4 288	4 288	53	1.20%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in the Central African Republic on 14 March 2020. As of 10 July 2020, a total of 4 288 confirmed cases of COVID-19 cases were reported in the country with 1 145 recoveries.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-19	10-May-20	21 219	21 219	83	0.40%
As of 10 May 2020, a total of 21 219 cases have been confirmed with 91 deaths in the country. From Week 1, 2019 (week ending on 7 January 2019) until week 7, 2020 (week ending on 23 February 2020), a total of 7 626 measles cases including 517 confirmed cases and 83 deaths have been reported in twenty affected districts in Central Africa. A total of 2 315 new suspected measles cases were notified from epidemiological week 1 to week 7 of 2020 in 20 districts among which there are 7 new districts reporting cases in this year. The majority of cases are under five of age, followed by the age group between 5 to 10 years old. Response activities are ongoing in the affected health districts.									



Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	7-Jul-20	22	22	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There is one case reported in 2020 so far and 21 cases in 2019 from several outbreaks for a total of 22.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	12-Jul-20	880	880	75	8.50%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 12 July 2020, a total of 880 confirmed COVID-19 cases were reported in the country including 75 deaths and 790 cases who have recovered.									
Chad	Measles	Ungraded	24-May-18	1-Jan-19	5-Jul-20	8 397	357	39	0.50%
In week 27 (week ending 5 July 2020), 11 suspected cases were reported. Five districts were in the epidemic phase during the week. Since the beginning of the year, a total of 8 397 suspected cases and 39 deaths (CFR 0.5%) have been reported from Beboto, Kyabe, Goundi, Korbol, Kelo and Guelao.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	7-Jul-20	50	50	0	0.00%
Four cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported: one each in Logone Occidental and Mayo Kebbi Est and two in Tandjile. There are now 50 cases from two different outbreaks in the country one being the Jigawa outbreak.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	11-Jul-20	317	317	7	2.20%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 11 July, a total of 317 confirmed COVID19, including 7 deaths and 296 recovered were reported in the country.									
Comoros	Dengue	Ungraded		22-Dec-19	5-Apr-20	696	4	0	0.00%
Comoros is registering many cases of suspected Dengue fever since December 2019. In total, four isolated cases of Dengue fever type I were confirmed by Institut Pasteur of Madagascar Laboratory in epidemiological week 52 in 2019. In 2020, from epidemiological week 1 to week 13, a total of 696 suspected dengue fever cases were reported with no laboratory confirmation as the country continues to face challenges in laboratory testing. The number of suspected cases peaked in week 12, 2020 with 88 cases reported. The majority of cases (508) are reported from Anjouan, followed by Moheli islands with 179 suspected Dengue cases. Ngazidja reported nine suspected dengue fever cases from week 1 to week13.									
Congo	Chikungunya	Grade 1	22-Jan-19	1-Jan-20	9-Feb-20	37	0	0	0.00%
In week 6 (week ending 9 February 2020), a total 6 suspected cases were reported in three out of the 12 departments, namely: Brazzaville (3 cases), Bouenza (2 cases) and Kouilou (1 case). From week 1 to week 6, 37 cases with no deaths were reported in the country. From weeks 1 to 52 of 2019, a total of 11 600 cases have been reported in 44 out of the 52 health districts in 10 out of 12 departments. The departments of Bouenza (3102 cases), Kouilou (2844 cases) and Niari (2589) were the most affected by the outbreak accounting for 74% of cases reported since the beginning of the outbreak.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	10-Jul-20	2 103	2 103	47	2.20%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 10 July 2020, a total of 2 103 cases including 47 deaths and 602 recovered cases have been reported in the country.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	12-Jul-20	12 766	12 766	84	0.70%
Since 11 March 2020, a total of 12 76 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 84 deaths. A total of 6 654 patients have recovered.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Ungraded	29-Oct-19	29-Oct-19	7-Jul-20	19	19	0	0.00%
One new case of cVDPV2 was reported in the past week. The most recent case had onset of paralysis on 15 May 2020. There are now 19 cVDPV2 cases in the country. Forty-three environmental samples have also tested positive for cVDPV2 in 2020.									
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-16	17-Apr-17	21-Jun-20	-	-	-	-
Detailed update given above.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	21-Jun-20	11 773	-	169	1.40%
The cholera outbreak situation in the Democratic Republic of Congo is improving. During week 25 (week ending 21 June 2020), a total of 332 cases of cholera and 3 deaths was notified in 41 health zones ( 10 provinces) of the country while 417 cases, including 3 deaths (0.7 %) were reported in 37 Health Zones (10 provinces) in the same period in 2019. From week 22 to 25 of 2020, 91 % of the cases have been reported from four provinces: North-Kivu, South-Kivu, Haut-Katanga, and Tanganyika. Between week 1 and week 52 of 2019, a total of 30 304 cases including 514 deaths (CFR 1.7%) were notified from 23 out of 26 provinces.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	11-Jul-20	8 033	8 032	188	2.30%
On 10 March, the Minister of Health announced the presence of the first confirmed COVID-19 case in Kinshasa. As of 11 July 2020, 8 032 confirmed cases and 1 probable case have been reported, for a total of 8 033 cases, including 188 deaths and 3615 recoveries.									
Democratic Republic of the Congo	Ebola virus disease	Grade 2	31-May-20	17-May-20	11-Jul-20	49	46	20	40.80%
Detailed update given above.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	Measles	Grade 2	10-Jan-17	1-Jan-20	28-Jun-20	65 004	1 252	919	1.40%
In week 26 (week ending 28 Jun 2020), 452 measles cases including 9 deaths (CFR 2 %) were reported across the country. The provinces that reported majority of cases include: Kasai Oriental (117 cases), South Ubangi (73 cases), Maindombe (61 cases) et North Ubangi (35 cases). Over the past four weeks (weeks 23 to 26) provinces that notified the majority of cases are: Sankuru (931 cases), Maindombe (287 cases), North Kivu (242 cases), Kasai Oriental (228 cases) and North Ubangi (208 cases). Since 2019 a total of 376 412 measles cases and 6 950 deaths (CFR 1.8%) have been reported in the country.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	17-May-20	1 702	-	47	2.80%
During week 20 (week ending 17 May 2020), a total of 98 suspected cases of Monkeypox with ten deaths were reported across the country compared to 151 cases the preceding week. Between week 1 and week 20, a total of 1 702 suspected cases including 47 deaths were reported in the country. The majority of cases were reported from the Provinces of: Sankuru, Equateur, Bas-Uele, Mongala and Tshopo. Between weeks 1 and 52 of 2019 a cumulative total of 5 288 monkeypox cases, including 107 deaths (CFR 2%) were reported from 133 health zones in 19 provinces. One major challenge to the current emergency include acquiring the required funding to respond to all the multiple ongoing outbreaks in the country.									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	11-Jun-20	1-Jul-20	34	-	7	20.60%
The Ituri province is notifying an upsurge of plague cases in the health zone of Rethy. From 11 June to 1 July 2020, a total of 34 cases with 7 deaths (CFR:21%) were notified in 5 over 22 health areas of Rethy health zone. The plague outbreak is endemic in Ituri province. During the first wave of this outbreak which started in January 2020, a total of 21 suspected bubonic plague cases with 7 deaths (Case Fatality Ratio 35%) were notified in 5 health zones: Aungba (4 cases et 2 deaths), Linga (7 cases and 5 deaths), Rethy (6 cases and no death), Aru (2 cases and no death) and Kambala (1 case and no death). In 2019, from week 1 to 52, a total of 48 cases of bubonic plague including eight deaths have been reported in the country.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	7-Jul-20	126	126	0	0.00%
No new cVDPV2 case was reported in the past week. A total of 18 cases have been reported in 2020 while the total number of 2019 cases remains 88. There were 20 cases reported in 2018. The country continues to be affected by several other genetically distinct cVDPV2s (notably in Kasai, Kwilu, Kwango and Sankuru provinces).									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	31-May-20	1 043	1 043	12	1.20%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 31 May 2020, a total of 1043 cases have been reported in the country with 12 deaths and 208 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	9-Jul-20	232	232	0	0.00%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 09 July 2020, a total of 232 confirmed COVID-19 cases with no deaths were reported in the country. A total of 107 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	12-Jul-20	1 351	1 351	20	1.50%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 5 July 2020, a total of 1351 cases have been reported in the country including 668 recoveries. Twenty associated deaths have been reported.									
Ethiopia	Cholera	Ungraded	14-May-19	12-May-19	5-Jul-20	11 427		176	1.50%
In week 27 (week ending 5 July 2020), 989 new suspected cases with 41 associated deaths were reported. Since the beginning of the year, a total of 11 427 cases with 176 associated deaths have been reported from five woredas in SNNP and two woredas in Oromia regions.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	12-Jul-20	7 766	7 766	128	1.60%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 6386 cases of COVID-19 as of 12 July 2020. Of the 7 766 cases, 128 deaths and 4 556 recoveries have been reported.									
Ethiopia	Guinea Worm Disease	Ungraded	3-Apr-20	3-Apr-20	28-Jun-20	7	7	0	0.00%
Since the beginning of April 2020, the Ethiopian Dracunculiasis Eradication Program (EDEP) detected six suspected human cases of dracunculiasis in the Duli village of Gog district in the Gambella region. As of 28 June 2020, a total of seven confirmed cases with an emerged worm morphologically consistent with human guinea worm have been reported. This report comes after more than two consecutive years of zero reporting, as the last cases were reported in December 2017.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-19	26-Apr-20	1 873		-	-
In week 17 (week ending 26 April 2020), the measles outbreak is still ongoing in Oromia, Amhara and Tigray regions. A total of 575 suspected cases and 7 deaths were reported during the week with most suspected cases being reported from Oromia region.									
Ethiopia	Poliomyelitis (cVDPV2)	Ungraded	24-Jun-19	20-May-19	7-Jul-20	27	27	0	0.00%
A total of 27 cases of CVDPV2 have been reported from Ethiopia since 2019. So far 14 cases have been reported in 2020. There were 13 cases in 2019.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Yellow fever	Ungraded	3-Mar-20	3-Mar-20	5-Mar-20	32	2	0	0.00%
On 3 March 2020, the Ethiopian Public Health Institute (EPHI) reported three suspected Yellow fever cases in Ener Enor woreda, Gurage zone, South Nations Nationalities and Peoples Region (SNNPR). The first 3 reported cases were members of the same household (father, mother and son) located in a rural kebele. Two of three samples tested positive at the national level on RT-PCR and were subsequently confirmed positive by plaque reduction neutralization testing (PRNT) at the regional reference laboratory, Uganda Viral Research Institute (UVRI) on 28 March 2020. In response to the positive RT-PCR results, Ethiopia performed an in-depth investigation and response, supported by partners including WHO. As of 30 March, a total of 85 suspect cases have been notified from 5 kebele in Ener Enor woreda, of which 55 are reported from Wedesha kebele. Laboratory testing is ongoing at the national laboratory.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	10-Jul-20	5 942	5 942	46	0.80%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 10 July 2020, a total of 5 942 cases including 46 deaths and 3 004 recovered have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	10-Jul-20	64	64	3	4.70%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 10 July 2020, a total of 64 confirmed COVID-19 cases including three deaths and 34 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	9-Jul-20	24 518	24 518	139	0.60%
Detailed update given above.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	7-Jul-20	29	29	0	0.00%
No cVDPV2 cases were reported this week. There have been eleven cases in 2020 so far, while the total number of 2019 cases remain 18.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	11-Jul-20	6 141	6 141	37	0.60%
The Ministry of health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 11 July 2020, a total of 6 141 cases including 4 862 recovered cases and 37 deaths have been reported in the country.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-19	5-Jun-20	5 644	366	14	0.30%
During week 23 (week ending in 5 June) there has been a total of 5644 cases with 366 confirmed and 14 deaths in 2020. During week 44 (week ending 3 November 2019), 127 suspected cases of measles were reported. From week 1 to 44 (1 January – 3 November 2019), a total of 4 690 suspected cases including 18 deaths (CFR 0.4%) have been reported. Of the 4 690 suspected cases, 1 773 were sampled, of which 1 091 tested positive for measles by serology. Three localities in three health districts are in the epidemic phase, namely, Wanindara in Ratoma health district, Dounet in Mamou health district and Soumpoura in Tougue health district.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	9-Jul-20	1 842	1 842	25	1.40%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 9 July 2020, the country has 1 842 confirmed cases of COVID-19 with 873 recoveries and 25 deaths.									
Kenya	Cholera	Ungraded	21-Jan-19	1-Jan-20	5-Jul-20	685	21	13	1.90%
In week 277 (week ending 21 June 2020), seven new suspected cases were reported from Turkana county. Since 1 January 2020, cholera outbreak has been reported in five counties namely: Garissa, Marsabit, Muranga, Turkana and Wajir. Cumulatively, a total of 685 cases with 13 deaths has been reported. Turkana County has reported a fourth wave since the beginning of the year. The outbreak is currently active in Marsabit and Turkana counties.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	12-Jul-20	10 105	10 105	185	1.80%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 cases in the country. As of 12 July 2020, 10 105 confirmed COVID-19 cases including 185 deaths and 2 881 recoveries have been reported in the country.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	5-Jul-20	202	98	10	5.00%
In week 27 (week ending 5 July 2020), four new cases were reported. Since the beginning of the outbreak, suspected and confirmed cases of leishmaniasis have been reported from Baringo, Garissa, Kitui and Marsabit counties.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	5-Jul-20	421	48	2	0.50%
As of 5 July 2020, a total of 320 measles cases including 9 confirmed cases and one death have been reported in Pokot North sub county, West Pokot county since 20 October 2019. Four additional counties have been affected in 2020 including: Tana River (56 total cases, 7 confirmed and 1 death), Garissa (33 total cases, 20 confirmed), Kilifi (5 confirmed cases) and Wajir (7 total confirmed cases).									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	12-Jul-20	233	233	2	0.90%
On 13 May 2020, WHO was notified of the first confirmed COVID-19 case in Lesotho. As of 12 July, 233 cases of COVID-19 have been reported, including 32 recoveries.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	11-Jul-20	1 010	1 010	51	5.00%
Since the last update on 4 July 2020, a total of 136 new cases including 14 deaths have been reported. From 16 March to 11 July 2020, a total of 1010 cases including 51 deaths have been reported from 13 out of the 15 counties of Liberia. Montserrado County which hosts the country's capital city remains at the epicentre of the outbreak. A total of 423 case-patients have recovered.									
Liberia	Lassa fever	Ungraded	23-Jan-19	1-Jan-20	5-Jul-20	40	40	18	45.00%
No new confirmed case was reported during week 27 (week ending 5 July 2020). Of 144 suspected cases reported across the country from 1 January to 5 July 2020, 40 were confirmed. A total of 18 deaths (CFR 45.0%) have been reported among the confirmed cases.									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	5-Jul-20	694	87	3	0.40%
In week 27 (week ending on 5 July 2020), 17 suspected cases were reported from 6 out of 15 counties across the country. Since the beginning of 2020, 694 cases with 3 associated deaths have been reported across the country, of which 87 are laboratory-confirmed, 228 are epi-linked, and 225 are clinically confirmed.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	12-Jul-20	4 867	4 867	35	0.70%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 12 July 2020, a total of 4 867 cases have been reported in the country, out of which 2 378 have recovered and 35 deaths have been reported in the country.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	12-Jul-20	2 364	2 364	38	1.60%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 12 July 2020, the country has a total of 2 364 confirmed cases with 38 deaths and 557 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	17-Jun-20	-	-	-	-
The security situation continues to worsen as violence spreads from the north to the more populated central regions of the country. The last week of May was particularly deadly in the Mopti region. It was marked by a resurgence of security incidents in the circles of Koro, Bandiagara, Bankass and Douentza. At least 68 civilians are reported to have been killed in attacks leading to serious human rights abuses during the week. In addition, an incident caused by an explosive device which took place in the Douentza circle left eight civilians dead and thirty wounded, five of whom were seriously wounded. More than 75 percent of security incidents reported in May (282 incidents) took place in the regions of Mopti (175 cases) and Ségou (107 cases) in the centre of the country. Mali now has more than 250 000 internally displaced persons.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	12-Jul-20	2 411	2 411	121	5.00%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 12 July 2020, a total of 2 411 confirmed COVID-19 cases have been reported in the country including 121 deaths and 1 694 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-19	5-Jul-20	657	324	0	0.00%
During week 27 (week ending on 5 Jul 2020), 6 suspected cases of measles were reported from two regions in the country. Four samples were confirmed IgM-positive during the week. Since 1 January 2020, 657 suspected cases, 324 of which were confirmed have been reported. No associated deaths have been reported so far.									
Mali	Yellow fever	Ungraded	3-Dec-19	1-Jan-20	7-Jun-20	82	4	1	1.20%
As of 7 June 2020, a total of 82 suspected cases have been reported including 4 confirmed cases and 1 death. The cumulative epidemiological situation in 2019 included 78 suspected cases including four confirmed cases and three deaths (CFR - 75%). Confirmed cases of yellow fever, were reported from the Sikasso and Koulikoro regions.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	11-Jul-20	5 275	5 275	147	2.80%
The government of Mauritania announced its first confirmed COVID-19 on 13 March 2020. As of 11 July 2020, a total of 5 275 cases including 147 deaths and 2 160 recovered cases have been reported in the country.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	11-May-20	2-May-20	11-May-20	1	1	0	0.00%
On 11 May 2020, one confirmed case of Crimean Congo haemorrhagic fever was reported from the Moughataa of Mederdra in the district of Tiguin in the wilaya of Trarza. The case is a 60-year-old butcher from Tiguin presenting symptoms of fever, fatigue, headaches and epistaxis, with onset on 2 May 2020. He had a history of handling the carcasses of meat and no recent travel history. He presented at a health facility of 7 May 2020 and a sample was collected for testing following the suspicion of a viral haemorrhagic fever disease. The case-patient was evacuated the same day in the Emergency Department in Nouakchott for further care. On 8 May 2020, the case was confirmed with CCHF by RT-PCR from the INRSP and transferred to the infectious diseases department where he was isolated and treated.									
Mauritania	Dengue	Ungraded	11-May-20	3-May-20	11-May-20	7	7	0	0.00%
On 3 May 2020, two suspected cases of dengue fever were admitted to a hospital in Mauritania. On May 4 2020, it was found that the majority of consultations at the hospital had a history of unexplained fever. Thus, samples from the two suspected cases were collected and sent to the National Institute of Research in Public Health (INRSP). On 5 May 2020 the 2 cases were confirmed by RT-PCR positive for Dengue virus with DENV-1 serotype. The cases were discharged from hospital and declared cured after symptomatic treatment. A rapid investigation was carried out at city level and made it possible to identify 5 additional cases (4 women and 1 man) distributed in 4 districts of Atar (Atar, Tineri, Aghnemrite and Edebaye).									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	12-Jul-20	342	342	10	2.90%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 12 July 2020, a total of 342 confirmed COVID-19 cases including ten deaths and 330 recovered cases have been reported in the country.									
Mozambique	Cholera	Ungraded	20-Feb-20	31-Jan-20	12-Jun-20	2 625	-	21	0.80%
Cholera outbreak is ongoing in Mozambique. From 11 January till 12 June 2020, a total of 2 625 cases including 21 deaths (CFR: 0.8%) were reported in two provinces, namely Nampula (1 648 cases and 3 deaths) and Cabo Delgado (997 cases and 15 deaths). In total, eleven districts of Nampula province, namely Nampula City, Mogovolas, Memba, Nacala-à-Velha, Nacaroa, Namialo, Ribawé, Monapo, Larde, Angoche and Malema were affected since the beginning of the outbreak and only two of them remain currently active (Monapo and Nampula city). In Cabo Delgado province, four districts, namely Mocimboa de Praia, macomia, Ibo and pamba city are affected.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	12-Jul-20	1 157	1 157	9	0.80%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 12 July 2020, a total of 1 157 confirmed COVID-19 cases were reported in the country including nine deaths and 364 recoveries.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	12-Jul-20	785	785	1	0.10%
Two cases of novel coronavirus (COVID-19) were confirmed in Namibia on 14 March 2020. As of 12 July 2020, a total of 785 cases have been reported in the country including 26 cases who recovered with one death.									



Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	5-Apr-20	7 587	1 937	65	0.90%
In weeks 12 and 13 (week ending 5 April 2020), 66 new cases were reported countrywide with the majority (38 cases) from Khomas region. Since the beginning of the outbreak in December 2017, a cumulative total of 7 587 cases (1 937 laboratory-confirmed, 4 410 epidemiologically linked, and 1 240 suspected cases) including 65 deaths (CFR 0.9%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 4 707 (62%) of reported cases, followed by Erongo 1 623 (21%) since the outbreak began.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	11-Jun-20	-	-	-	-
The security situation continues to worsen in bordering areas of Burkina Faso, Mali and Nigeria following armed groups attacks in the region. This security situation is hampering the humanitarian access and affecting the access to basic health and social services. A total of 46 health posts and 10 health centres have closed due to insecurity. According to OCHA statistics, 2.9 million people are in need of humanitarian assistance, 190 248 people are internally displaced, and 217 858 are refugees in the country. Food security remains a key challenge in Niger, particularly for displaced populations and host communities in Diffa, Tahoua, and Tillabery regions. Increased violence and COVID-19 related restrictions are expected to increase the number of people projected in severe food insecurity (IPC-3 and above) from 2 million to 2.7 million over June-August 2020.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	12-Jul-20	1 099	1 099	68	6.20%
Since the last update on 5 July 2020, six (6) new cases with zero deaths were reported. From 19 March to 12 July 2020, a total of 1099 cases with 68 deaths have been reported across the country. A total of 978 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-20	2-Feb-20	304	-	1	0.30%
During week 5 (week ending 2 February 2020), 123 suspected measles cases were notified in the country. From week 1 to 5 of 2020, a total of 304 suspected measles cases with 1 death (CFR:0.3%) were notified in 8 regions: Agadez (34 cases, 0 deaths), Diffa: (3 cases, 0 deaths), Dosso (2 cases, 0 deaths), Maradi (17 cases, 1 death), Niamey (5 cases, 0 deaths), Tahoua (57 cases, 0 deaths), Tillabery (3 cases, 0 deaths) and Zinder (183 cases, 0 deaths). In 2019 a total of 10 207 suspected measles cases were reported from eight regions in the country.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	30-Jun-20	-	-	-	-
The humanitarian crisis in the North-eastern part of Nigeria persists with continued population displacement from security compromised areas characterized by overcrowded population in many camps in the region. Health Sector partners are supporting the government led COVID-19 response across the three states, including support through joint resource mobilization activities, overall coordination and monitoring of the response in the northeast.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	12-Jul-20	32 558	32 558	740	2.30%
The Federal Ministry of Health of Nigeria announced the first confirmed case of COVID-19 in Lagos, Nigeria on 27 February 2020. As of 12 July 2020, a total of 32 558 confirmed cases including 740 deaths and 13 447 recovered cases have been reported in the country.									
Nigeria	Lassa fever	Ungraded	24-Mar-15	1-Jan-20	5-Jul-20	1 057	1 043	232	21.90%
A total of three new confirmed cases with zero deaths were reported from two states across Nigeria in week 27 (week ending 5 July 2020). From 1 January to 5 July 2020, a total of 1057 cases (1043 confirmed and 14 probable) with 232 deaths (CFR 21.9%) have been reported from 129 Local Government Areas across 27 states in Nigeria. A total of 18 contacts are currently being followed.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-20	7-Jun-20	420		14	3.30%
Between epi weeks 1 - 23 (week ending 7 June 2020), a total of 420 suspected cases of measles were reported from 88 LGAs in 20 states and FCT. None was laboratory confirmed and 14 deaths were recorded.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	7-Jul-20	53	53	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 18 cVDPV2 cases reported in 2019, 34 in 2018, and one in 2020.									
Nigeria	Yellow fever	Ungraded	14-Sep-17	1-Jan-20	21-Jun-20	1 150	5	0	0.00%
In week 25, there were 18 suspected cases reported from 16 LGA in 12 states. Between week 1 and 25 in 2020, a total of 1 150 suspected cases including 12 presumptive positive cases and 5 confirmed cases were reported. In 2019, a total of 4288 suspected cases were reported in 618 (83.1%) LGAs from all states in the country. Four States: Katsina, Kebbi, Bauchi and Benue had the highest attack rates. A total of 227 cases were confirmed in Nigeria and from IP Dakar and 231 deaths were reported.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	12-Jul-20	1 337	1 337	4	0.30%
Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 12 July 2020, a total of 1 337 cases with four deaths and 684 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	12-Jul-20	729	409	12	1.60%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 12 July 2020, a total of 729 cases of COVID-19 has been reported, including 409 cases confirmed by PCR and an additional 320 probable cases. Among the confirmed cases, 12 deaths have been reported. Among the total number of cases, 286 have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	12-Jul-20	8 135	8 135	148	1.80%
Between 2 March 2020 and 12 July 2020, a total of 8 135 confirmed cases of COVID-19 including 148 deaths have been reported from Senegal. A total of 5 446 cases have recovered.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	12-Jul-20	100	100	0	0.00%
The first COVID-19 confirmed cases were reported in Seychelles 14 March 2020. After 78 days of reporting no confirmed cases, a fishing vessel replacement crew arrived by air in Seychelles on 23 June 2020, a group of them having tested positive for COVID-19 at the point of entry. As of 12 July, there are eleven recoveries and 89 active cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	12-Jul-20	1 635	1 635	63	3.90%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 12 July 2020, a total of 1 635 confirmed COVID-19 cases were reported in the country including 63 deaths and 1 154 recovered cases.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	12-Jul-20	276 242	276 242	4 079	1.50%
South Africa continues to report cases of COVID-19. From 5 March to 12 July 2020, a total of 276 242 confirmed cases with 4 079 deaths have been reported from all provinces across the country. A total of 134 874 cases have recovered.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	30-Jun-20	-	-	-	-
The humanitarian situation has escalated in recent weeks with recent armed inter-communal fighting in several parts of the country. On 22 June 2020 in Pibor town causing displacement toward Verteth and Labarab. A presidential committee has been set up in response to the recent escalation. Floods in Bor South and Panyijar counties also continue to cause displacement of over 13 000 persons.									
South Sudan	COVID-19	Grade 3	5-Apr-20	2-Apr-20	12-Jul-20	2 148	2 148	41	1.90%
On 5 April 2020, the Ministry of Health of South Sudan has reported the country's first case of COVID-19. As of 12 July 2020, a total of 2 145 confirmed COVID-19 cases were reported in the country including 41 deaths and 1 135 recovered cases.									
South Sudan	Hepatitis E	Ungraded	-	3-Jan-19	21-Jun-20	337	41	2	0.60%
The current outbreak in Bentiu UN Protection of Civilians (POC) continues since the beginning of 2019 with five new cases reported in week 25 (ending 21 June 2020). As of the reporting date, a total of 337 cases of Hepatitis E including two deaths have been reported from South Sudan, mostly from Bentiu POC (325 total cases), and a total of 12 suspected cases including 4 confirmed cases in Lankein. The last case in Lankein was reported in week 25 (week ending on 23 June 2019).									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	21-Jun-20	916	50	2	0.20%
Between week 38 of 2019 to week 25 of 2020, a total of 916 suspected cases of measles which 50 laboratory-confirmed and 2 deaths (CFR 0.6%) have been reported. The outbreak has affected six counties (Tonj East, Magwi, Bor, Kapoeta East, Aweil East and Wau) and Bentiu Protection of Civilians Sites (POC).									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	12-Jul-20	509	509	21	4.10%
The Ministry of Health, Community Health Community Development, Gender, Elderly and Children (MOHCDCGEC) in Tanzania has reported the country's first case of COVID-19 on 16 March 2020. As of 12 July 2020, a total of 509 cases have been reported in the country including 21 deaths and 180 recovered cases. Tanzania mainland last reported a confirmed case on 29 April 2020.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	12-Jul-20	720	720	15	2.10%
On 6 March 2020, the Ministry of Health and Public Hygiene of Togo announced the confirmation of its first case of COVID-19. As of 12 July 2020, a total of 720 cases including 15 deaths and 513 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	7-Jul-20	17	17	0	0.00%
No new case of cVDPV2 was reported during the past week. There have been nine cases so far in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Togo	Yellow Fever	Ungraded	4-Feb-20	3-Feb-20	5-Jun-20	1	1	1	100.00%
On 28 April 2020, WHO received information regarding a confirmed yellow fever case in Mango village, Oti district, Savanes region in northern part of Togo. The results were confirmed at the yellow fever reference laboratory, Institute Pasteur in Dakar, Senegal by seroneutralisation. The case is a 55-year old female with no travel or vaccination history for yellow fever. On 3 February 2020, she presented to a health facility with symptoms of fever with aches. The following day she developed jaundice and a blood sample was taken and transported to the national laboratory as yellow fever was suspected. The case-patient died three days later while receiving treatment. On 17 March, the sample tested IgM positive for yellow fever. On 22 March 2020, an in-depth multi-disciplinary investigation was conducted, and no additional case was detected.									
Uganda	Humanitarian crisis - refugee	Ungraded	20-Jul-17	n/a	30-Jun-20	-	-	-	-
Between 1 and 30 June 2020, a total of 3 056 new refugee arrivals crossed into Uganda from the Democratic Republic of the Congo (3 056), South Sudan (0) and Burundi (0). Uganda hosted 1 425 040 asylum seekers as of 30 June 2020, with 94% living in settlements in 11 of Uganda's 128 districts and in Kampala. Most are women within the age group 18 - 59 years.									
Uganda	Cholera	Ungraded	11-May-20	29-Apr-20	11-Jun-20	682	17	6	0.90%
On 11 May 2020, a cholera outbreak was confirmed in Moroto district. The index case was a 17-year-old male patient from Natapar Kocuc Village, Loputuk parish, Nadunget Subcounty who was seen on 29 April 2020 with acute watery diarrhoea and severe dehydration. On 4 May 2020 more cases with similar symptoms from the same location with the index case were seen and cholera was suspected. On 11 May 2020, CPHL confirming <i>Vibrio cholerae</i> serotype O1 Inaba detected in 7 out of 8 stool samples that were collected. As of 12 June 2020, the cumulative number of cases is 682 including 6 deaths have been reported.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	12-Jul-20	1 025	1 025	0	0.00%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 12 July 2020, a total of 1 025 confirmed COVID-19 cases, 972 recoveries with no death were reported in the country.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	7-Jul-20	1 895	1 895	42	2.20%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 7 July 2020, a total of 1 895 confirmed COVID-19 cases were reported in the country including 42 deaths and 1 412 recovered cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Zambia	Poliomyelitis (cVDPV2)	Grade 2	17-Oct-19	16-Jul-19	7-Jul-20	2	2	0	0.00%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) has been reported since the beginning of 2020. There were two cVDPV2 cases reported in 2019.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	14-Jun-20	319		1	0.30%
The anthrax outbreak is ongoing in Zimbabwe with a cumulative total number of 319 cases and one death notified since the beginning of the outbreak in week 36 (Week starting from 6 May 2019) of 2019. This outbreak started since week 36, 2019, affecting mainly Buhera and Gokwe North and South districts but a surge in cases started appearing in week 38 when cases were reported in some other areas. Since 1 January to 15 May 2020, a total of 319 cases were reported mainly in Masvingo, Midlands and Mashonaland west provinces.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	12-Jul-20	985	985	18	1.80%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 12 July 2020, a total of 985 confirmed COVID-19 cases were reported in the country including 18 deaths and 328 cases that recovered.									
Zimbabwe	Malaria	Ungraded	8-Mar-20	1-Jan-20	4-May-20	236 865	236 865	226	0.10%
On 4 May 2020, WHO received an update regarding the malaria situation in Zimbabwe. Since the beginning of the year and as of 26 April 2020, there have been 236 865 malaria cases and 226 deaths. This is an almost doubling of the cases in comparison for the same time period in 2018 when 120 758 cases and 109 deaths were reported, and 2019, when 137 843 cases and 137 deaths were reported. The outbreaks are densely clustered in the eastern districts and scattered in the southern and northern districts of the country (highly affected provinces are Manicaland, Mash East, Mash Central). Health Facilities in affected areas face the overwhelming malaria situation in the context of COVID 19 pandemic. The surge of cases poses negative impact on elimination efforts in 28 districts.									
<b>Closed Events</b>									
South Sudan	Yellow fever	Ungraded	3-Mar-20	3-Mar-20	10-Jul-20	2	2	0	0.00%
On 3 March 2020, the Ministry of Health of South Sudan reported 2 cases of presumptive yellow fever, found IgM positive at the regional reference laboratory, Uganda Viral Research Institute (UVRI). Eventually on 28 March 2020, the two cases were confirmed for yellow fever after plaque reduction neutralization testing (PRNT). As of 10 July 2020, no new cases have been reported for over two incubation periods.									

†Grading is an internal WHO process, based on the Emergency Response Framework. For further information, please see the Emergency Response Framework: <http://www.who.int/hac/about/erf/en/>.

Data are taken from the most recently available situation reports sent to WHO AFRO. Numbers are subject to change as the situations are dynamic.

© WHO Regional Office for Africa

This is not an official publication of the World Health Organization.

Correspondence on this publication may be directed to:

Dr Benido Impouma

Programme Area Manager, Health Information & Risk Assessment

WHO Health Emergencies Programme

WHO Regional Office for Africa

P O Box. 06 Cité du Djoué, Brazzaville, Congo

Email: afrooutbreak@who.int

Requests for permission to reproduce or translate this publication – whether for sale or for non-commercial distribution – should be sent to the same address.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate borderlines for which there may not yet be full agreement.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either express or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization or its Regional Office for Africa be liable for damages arising from its use.



### Contributors

G. Folefack (Democratic Republic of the Congo)  
N. Rusibamayila Kimambo (Ghana)

### Graphic design

A. Moussongo

### Editorial Team

B. Impouma  
C. Okot  
B. Farham  
G. Williams  
Z. Kassamali  
J. Kimenyi  
E. Kibangou  
O. Ogundiran  
T. Lee  
J. Nguna  
I. Fernandes

### Production Team

A. Bukhari  
T. Mlanda  
R. Ngom  
F. Moussana

### Editorial Advisory Group

Z. Yoti, *Regional Emergency Director ai*  
B. Impouma  
Y. Ali Ahmed  
M. Yao  
M. Djingarey

### Data sources

Data and information is provided by Member States through WHO Country Offices via regular situation reports, teleconferences and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.