

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 19: 3-9 May 2021

Data as reported by: 17:00; 9 May 2021



World Health
Organization

REGIONAL OFFICE FOR **Africa**
WHO Health Emergencies Programme

1

New event

128

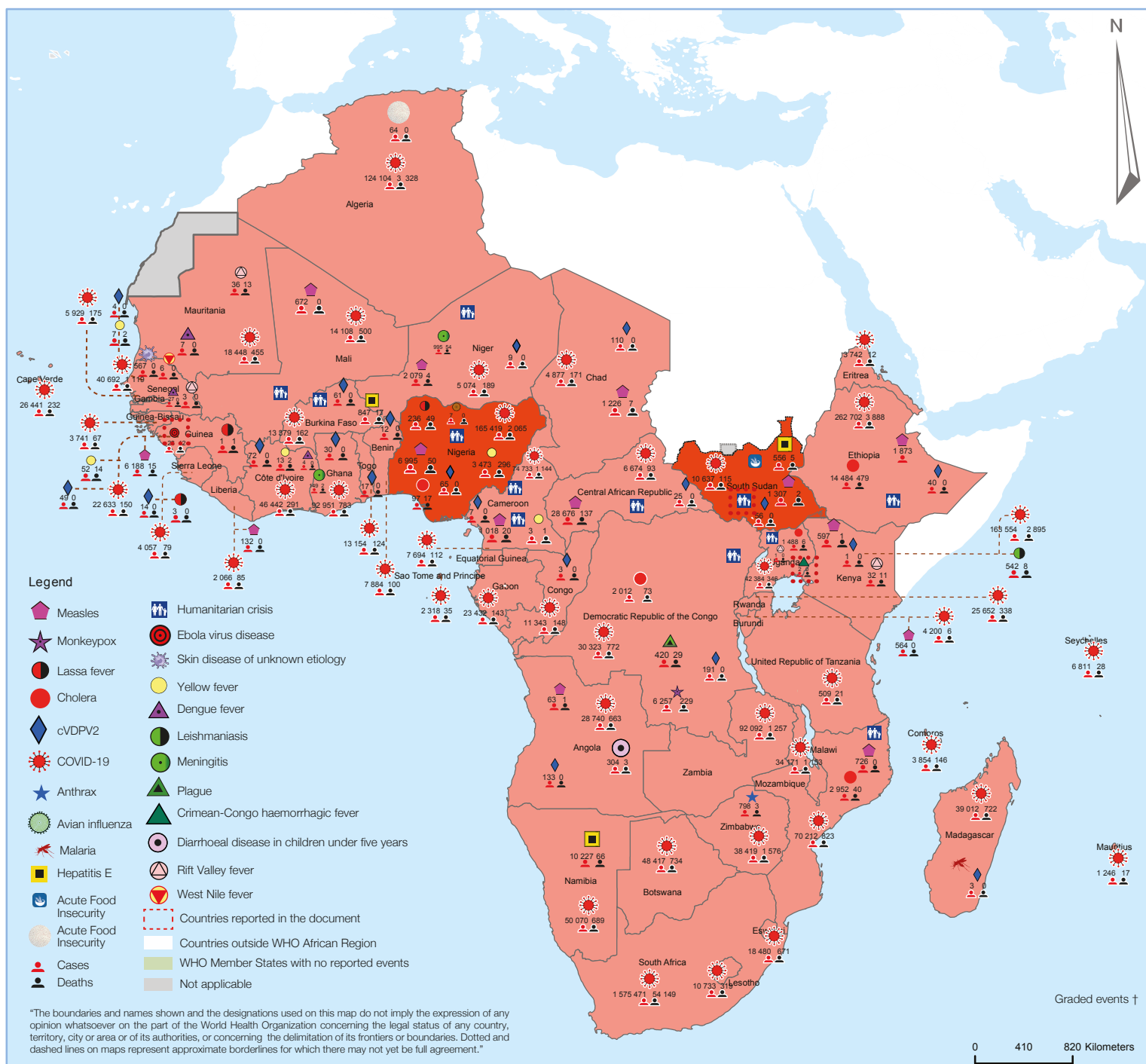
Ongoing events

115

Outbreaks

13

Humanitarian
crises



23

Grade 3 events

2

Grade 2 events

6

Grade 1 events

2

Ungraded events

3

Protracted 3 events

3

Protracted 2 events

50

Protracted 1 events

Overview

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This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 129 events in the region. This week's articles cover:

- [COVID-19 across the WHO African region](#)
- [Ebola virus disease in Guinea](#)
- [Crimean-Congo haemorrhagic fever in Uganda](#)
- [Humanitarian crisis in South Sudan](#)

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 been controlled and closed.

Major issues and challenges include:

- Eleven countries including; Angola, Comoros, Eritrea, Eswatini, Lesotho, Mauritania, Niger, South Africa, Uganda and Zambia had an increase in weekly cases in the past seven days. South Africa has started seeing an increase in weekly cases after over two months of decline and plateau. The risk of COVID-19 resurgence remains high in African countries due to poor adherence to public health measures. The current upsurge in India could also have a negative implication on vaccine availability globally, particularly in Africa. Three countries have very high rates of community transmission and these are of serious concern. Health worker infections remain of concern as the numbers continue to increase across the region.
- The 42-day countdown to end of outbreak started in Guinea on 8 May 2021 and surveillance is being enhanced in Nzerekore and neighbouring prefectures over this time. There are currently four new suspected cases, although the number of alerts is falling. Vaccination coverage continues to increase, including among frontline workers and high-risk contacts. Despite alerts around community deaths, safe and dignified burials remain disappointingly low. Efforts continue around understanding reluctance for this prevention measure. Authorities need to remain at the highest level of vigilance to ensure that any remaining chains of transmission are rapidly identified and managed in this countdown period.
- Uganda has recently reported an outbreak of Crimean-Congo haemorrhagic fever, a disease known to occur in livestock in the country. So far the outbreak is confined to two people and there are no deaths. Contact follow-up is underway and the country has rapidly initiated a One Health response, involving animal health and veterinary authorities along with health authorities. However, there are challenges around sample transportation and the requirement for isolation of cases in the Kyangwali Refugee Settlement health facility necessitates a plan in the event of other disease outbreaks. Funding is also required for district outbreak response.
- The humanitarian crisis in South Sudan has been ongoing for many years and little seems to change in terms of the numbers of people involved, consequent mass population movements and continued insecurity in this troubled region. Humanitarian resources remain limited, access is hampered by insecurity in many regions, coordination mechanisms are poor at sub-national level and there is a chronic shortage of funds, all of which require urgent attention from national authorities and donors.

Ongoing events

Coronavirus disease 2019

African region

3 320 786 : 83 650 : 2.5%
Cases : Deaths : CFR

The number of coronavirus (COVID-19) infections increased by 33 794 in the African Region in the past week (3 - 9 May 2021), a 14.5% decrease compared to the previous week. A total of 34 (74.0%) countries reported a decrease in new cases. Eleven countries (24.0%) including; Angola, Comoros, Eritrea, Eswatini, Lesotho, Mauritania, Niger, South Africa, Uganda and Zambia had an increase in weekly cases in the past seven days. Only Côte d'Ivoire showed no significant change in case numbers during this reporting period.

The majority of the new cases reported this week were from South Africa (12 531; 37.1%). This was followed by Ethiopia reporting 4318 cases (12.8%), Kenya reporting 3 132 (9.3%), Cabo Verde (2073; 6.1%) and Angola (1 747; 5.2%). Among the top reporting countries, South Africa and Uganda recorded the highest percent increase in this period.

The African Region also saw a fall in the number of new deaths, with 875 deaths recorded from 31 countries, a 14.2% decrease. Twenty-six (56.5%) countries reported a decline in deaths, while eight (17.4%) had an increase in the past seven days. South Africa reported the highest number of deaths (318, 36.3%) followed by Ethiopia with 162 (19.0%) and Kenya 132 (15.1%). Other countries reporting deaths in this period include; Algeria (58), Madagascar (45), Angola (31), Namibia (30), Mali (11), Botswana (10), Senegal (9), Cabo Verde (8), Mozambique (8), Zimbabwe (6), Burkina Faso (5), Malawi (5), Democratic Republic of the Congo, Zambia (4), Guinea (4), Côte d'Ivoire (4), Gabon (4), Uganda (4), Central African Republic (2), Nigeria (2), Rwanda (1), Congo (1), Togo (1), Lesotho (1), Chad (1), Mauritania (1), and Niger (1). Overall deaths trend across the region has plateau although a few countries including Algeria, Cabo Verde, Cameroon and Madagascar are experiencing an increasing trend. Mortality rates and case fatality ratios have remained high in some countries; Malawi (7.2%), Mauritius (7.1%), Lesotho (6.1%), Mali (4.0%), South Africa (3.9%) and Algeria (3.5%) had the highest case fatality ratio in the last 4 weeks.

The cumulative total number of confirmed cases in the WHO African Region is over 3.3 million, with more than 3 million recoveries, giving a recovery rate of 91.0%. The death toll is nearly 84 000. Even while the African Region is one of the least affected globally, it has a high cumulative case fatality ratio of 2.5%, which is above the global average of 2.1%.

The top five countries reporting the highest case numbers include South Africa (1 596 595 cases, 48.1%), Ethiopia (262 702 cases, 7.9%), Nigeria (165 419 cases, 5.0%), Kenya 163 554 cases, 4.9%) and Algeria (124 104 cases, 3.7%), accounting for 2 312 374 (69.6%) of all cases.

The United Republic of Tanzania has reported no new confirmed cases in our database in the last 368 days. The average cumulative attack rate (number of cases per million) in the African region is estimated at 3 043 /million population, ranging from 9/million to 69 767 million. Seychelles (69 767 cases/million population), Cabo Verde (48 080 cases/million), South Africa (27 265 cases/million), Namibia (20 072 cases/million) and Botswana (19 765

cases/million), are the five countries with the highest attack rate in the region. Liberia (429 cases/million), Democratic Republic of Congo (349 cases/million), Burundi (319 cases/million), Chad (306 cases/million), and Niger (234 cases/million) are the five countries with the lowest cumulative attack rate.

South Africa has the highest number of deaths in the region (54 735, 65.4%). This is followed by Ethiopia (3 888, 4.6%), Algeria (3328, 4.0%), Kenya (2 895, 3.5%), and Nigeria (2 065, 2.5%), accounting for 80.0% (66 911) of cumulative deaths. The median number of deaths per million in the African region is estimated at 26.8/million population (range: 0.4/million – 935/million) with an average cumulative death rate (per million) in the African region estimated at 76.7/million population. South Africa (935 deaths/million population), Eswatini (584/million), Cabo Verde (422/million), Botswana (300/million), Seychelles (287 million) and Namibia (276/million) are the five countries with the highest number of COVID-19 related deaths per million population. Burkina Faso (7.8/million population) Uganda (7.8/million), Eritrea (3.7/million), Burundi (0.5/million) and United Republic of Tanzania (0.4/million) have the lowest number of COVID-19 related deaths per million population.

During this reporting period, 55 new health worker infections were reported from Namibia (51), Eswatini (3), and Congo (1). A total of 152 new health worker infections were also reported retrospectively from Cameroon (117) and Niger (35). At present, 110 194 (3.3% of all cases) health worker infections have been reported from 46 countries (48.0% of all countries) in the region. South Africa (55 672, 51.0%), Algeria (11 936, 11.0%) and Ghana (4 763, 4.3%), have recorded the highest number of health worker infections among countries. Zimbabwe (11.0%), Liberia (10.6%), and Guinea-Bissau (10.1%), have the highest country specific proportion of health worker infections. Only Eritrea has not reported any healthcare worker infections.

To date, the total number of confirmed COVID-19 cases on the African continent amounted to over 4.6 million. The total number of deaths is now more than 124 386 (case fatality ratio 2.7%), and more than 4.1 million people have recovered.

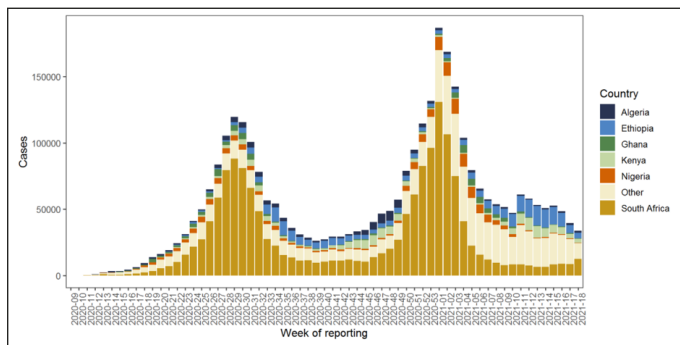
Varied transmission classifications have been observed across the African Region. Currently, all countries apart from United Republic of Tanzania have reported cases in the past 14 days. Forty-five countries (98.0%) are experiencing community transmission, of which three countries (6.6%) including Botswana, Cabo Verde and Seychelles have uncontrolled incidence, 11 (24.4%) have high incidence, 23 (51.1%) have moderate transmission and eight (17.7%) countries with low incidence. Only one country, Mauritius, has clusters of transmission.

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[Go to map of the outbreaks](#)

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by reporting date, 25 February 2020 – 9 May 2021 (n = 3 320 786)



SITUATION INTERPRETATION

The African region has seen a decrease in both daily case and death counts for a third consecutive week. Eswatini, South Africa, and Zambia, all in Southern Africa, have reported a recent increase in cases while other sub regions are experiencing either a plateau or a decline. The majority of the countries in the region are experiencing community transmission and three countries having uncontrolled incidence. Although cases and deaths are declining overall, it is vital that member states continue to take a harmonised approach to the pandemic, in a bid to lessen transmission. The overwhelming increase in cases and deaths in India, and increases in other regions of the world, are clear signs that the pandemic is not yet over in African countries.



Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 9 May 2021

Country	Total cases	Total deaths	Recovered Total	Case Fatality Ratio (%)	Health Worker infections
South Africa	1 596 595	54 735	1 516 256	3.4 %	55 672
Ethiopia	262 702	3 888	210 030	1.5 %	2 933
Nigeria	165 419	2 065	156 300	1.2 %	3 175
Kenya	163 554	2 895	111 191	1.8 %	4 698
Algeria	124 104	3 328	86 420	2.7 %	11 936
Ghana	92 951	783	90 568	0.8 %	4 763
Zambia	92 092	1 257	90 428	1.4 %	814
Mozambique	74 733	1 144	66 568	1.5 %	2 270
Cameroon	70 212	823	67 785	1.2 %	3 501
Namibia	50 070	689	47 300	1.4 %	2 157
Botswana	48 417	734	46 226	1.5 %	61
Côte d'Ivoire	46 442	291	45 847	0.6 %	943
Uganda	42 384	346	41 971	0.8 %	1 943
Senegal	40 692	1 119	39 384	2.7 %	419
Zimbabwe	39 012	722	36 026	1.9 %	70
Madagascar	38 419	1 576	36 063	4.1 %	4 210
Malawi	34 171	1 153	32 159	3.4 %	1 886
DRC	30 323	772	26 434	2.5 %	256
Angola	28 740	633	24 717	2.2 %	939
Rwanda	26 441	232	23 037	0.9 %	140
Gabon	25 652	338	24 153	1.3 %	682
Cabo Verde	23 432	143	19 944	0.6 %	345
Guinea	22 633	150	20 231	0.7 %	682
Eswatini	18 667	456	17 899	2.4 %	24
Mauritania	18 480	671	17 783	3.6 %	575
Mali	14 108	500	9 010	3.5 %	87
Burkina Faso	13 379	162	13 156	1.2 %	288
Togo	13 154	124	11 691	0.9 %	874
Lesotho	11 343	148	10 191	1.3 %	203
Congo	10 773	319	6 427	3 %	473
South Sudan	10 637	115	10 312	1.1 %	391
Benin	7 884	100	7 652	1.3 %	139
Equatorial Guinea	7 694	112	7 279	1.5 %	401
Central African Republic	6 811	28	5 388	0.4 %	294
Gambia	6 674	93	5 659	1.4 %	1
Niger	5 929	175	5 598	3 %	142
Seychelles	5 321	192	4 901	3.6 %	339
Chad	4 877	171	4 649	3.5 %	292
Sierra Leone	4 200	6	3 883	0.1 %	38
Burundi	4 068	79	3 078	1.9 %	249
Comoros	3 924	146	3 682	3.7 %	155
Guinea-Bissau	3 742	12	3 602	0.3 %	0
Eritrea	3 741	67	3 400	1.8 %	377
Sao Tome and Principe	2 318	35	2 262	1.5 %	102
Liberia	2 117	85	1 964	4 %	224
Mauritius	1 246	17	1 149	1.4 %	30
United Republic of Tanzania	509	21	180	4.1 %	1
Cumulative Cases (N=47)	3 320 786	83 650	3 019 833	2.5 %	110 194

*Total cases includes one probable case from Democratic Republic of the Congo

EVENT DESCRIPTION

No new confirmed Ebola virus disease (EVD) cases have been reported in Nzerekore prefecture, the site of the current EVD outbreak in Guinea, as of 9 May 2021. There are no active sub-prefectures within the prefecture of Nzerekore, and no new confirmed cases have been reported in the past 21 days. However, four new suspected cases have been notified; one has been sampled and three have declined sampling.

As of 9 May 2021, a total of 23 cases have been reported, including 16 confirmed cases, and 7 probable cases, of which 9 have recovered, giving a recovery rate of 39.1%. Of the 23 cases, 12 have died (case fatality ratio 52.2%). The number of health workers infected remains five.

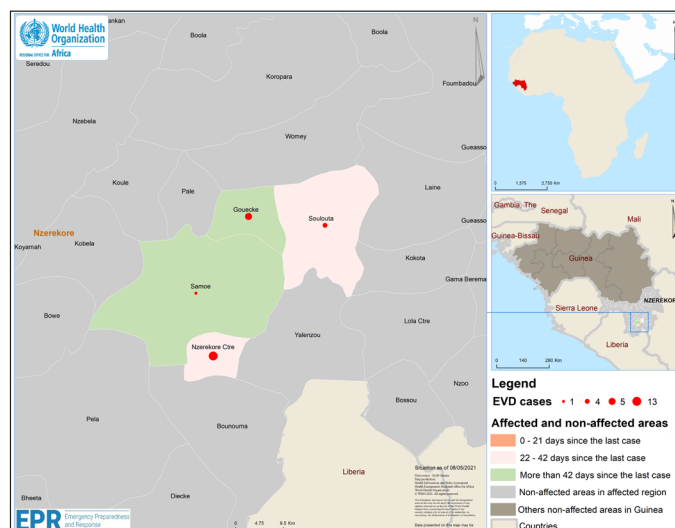
The majority of the confirmed and probable cases reported are female (13/23; 60.9%) and the most affected age group are those over 40 years.

A total of 1 114 contacts have been listed, and 56.0% of these have been vaccinated. As of 9 May 2021 a total of 35 new alerts were notified in Nzerekore, including three deaths. Of these, 10 (29.0%) were investigated within 24 hours and six were validated. Six new alerts were received in neighbouring prefectures, all community deaths, all were investigated and none validated.

PUBLIC HEALTH ACTIONS

- The 42-day countdown to the end of the outbreak started on 8 May 2021, with the expected date for the declaration of the end of the outbreak the 19 June 2021.
- Continued support is being provided to Nzerekore and all neighbouring prefectures for enhanced surveillance during this period.
- A cumulative total of 9 569 people have been vaccinated, including 622 high-risk contacts, 8 413 contacts-of-contacts and 534 probable contacts, including 2 694 frontline workers. Four vaccination teams are deployed in the field, supported by WHO.
- One suspected case is currently hospitalized in the Epidemic Diseases Hospital treatment centre in Nzerekore and one suspected patient is hospitalized in Goueke Epidemic Diseases hospital; a total of four patients, all suspected cases, are currently being managed in treatment centres.
- Infection prevention and control (IPC) activities included an orientation session on biosafety principles and the management of suspected EVD cases held for 40 health workers from four isolation sites at Nzerekore; organization of a briefing session on EVD standard and supplementary precautions for six health workers in the Koropara Health Centre, followed by provision of IPC kits.

The distribution of Ebola virus disease cases in Guinea as of 8 May 2021.



- Eleven new community deaths were reported, with seven samples collected and no safe and dignified burials carried out.
- Risk communication and community engagement (RCCE) included two in-depth interviews on the EVD experience of a survivor and a local elected official in the Goueke community; and integrated briefing of 50 religious leaders on community surveillance in order to help manage response resistance and increase the number of alerts in Nzerekore.

SITUATION INTERPRETATION

As the 42-day countdown to the end of outbreak declaration starts, the situation in Guinea is still not stable with contacts still lost to follow up and one confirmed case remaining in the community. Alerts continue to be received, although few are reported by the community and 24-hour follow-up is inadequate. Community surveillance in Nzerekore and neighbouring provinces requires strengthening. In addition, the WHO response plan is still only 17% funded. This gap needs urgently to be filled if the momentum of response is to continue.

A case of Crimean-Congo haemorrhagic fever (CCHF) was confirmed on 28 April 2021 in a 16-year-old female from Munsinsi-A village in the Kyangwali Refugee Settlement, Kikuube district on 27 April 2021. She presented at the Kagoma health facility with a two-day history of fever, with a temperature of 38°C, as well as a history of headache, fatigue, vomiting blood and nose bleeds. There was no history of recent travel to a place with a CCHF outbreak, but her family raises goats. She was isolated in the Kasonga Treatment Centre as a suspected viral haemorrhagic fever case. Laboratory results returned positive for CCHF by polymerase chain reaction (PCR) testing at the Uganda Virus Research Institute (UVRI) on 28 April 2021.

A second case, epidemiologically linked to the case patient as a primary contact, is a 13-year-old male from Busisa-Kyangwali, who was admitted on 29 April 2021 with a high grade fever, blood in his urine and vomiting blood. A sample was shipped to the UVRI and returned PCR positive for CCHF on 4 May 2021.

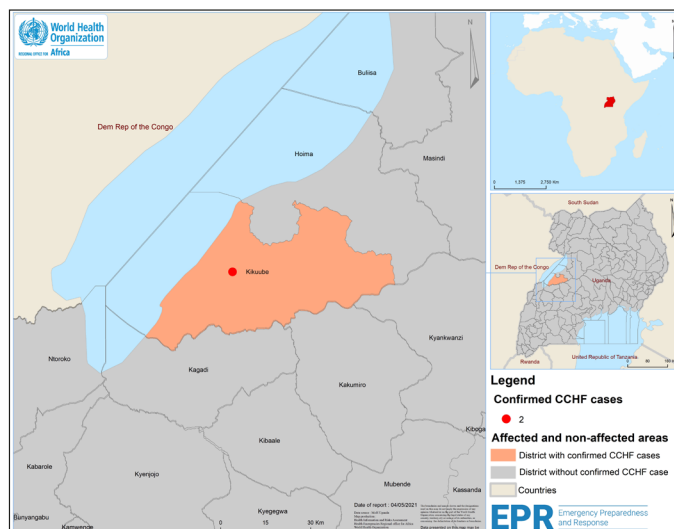
Both patients are currently stable and showing signs of improvement, and samples have been taken for repeat PCR testing.

As of 4 May 2021, there are two confirmed cases of CCHF and no deaths. No new suspected cases have been reported. A total of 144 contacts have been listed for both cases and are being followed up. Samples from patients admitted in the isolation unit have been sent for CCHF PCR testing.

PUBLIC HEALTH ACTIONS

- Coordination meetings are being held and WHO and UNHCR are coordinating the inter-agency response in the refugee settlement.
- The Animal Health and food production sector are active in the refugee camp and a joint plan of action has been established across pillars and agencies.
- There is ongoing surveillance, with contact tracing and follow up, along with an alert system in the camp, that includes rumour monitoring and reporting.
- Households in Munsinsi-A are being mapped, identifying households with animals.
- There is ongoing sensitization of voluntary community workers on CCHF surveillance, risk communication, and infection prevention and control practices.
- Personal protective equipment is available, with sufficient stock for one month.
- Stocks of ribavirin have been procured and delivered.
- Environmental assessment is underway, with listing of households with animals and livestock, along with random sampling of cows and goats for analysis at UVRI.
- UNHCR has scheduled mass spraying of domestic livestock from Munsinsi A and B villages within the refugee camp, led by the district veterinary officer.

Crimean-Congo haemorrhagic fever in Uganda as of 4 May 2021



- Infection prevention and control activities included training health workers on CCHF IPC measures, with the support of WHO and Care Uganda.
- Risk communication and community engagement (RCCE) activities have reached eight villages, with ongoing community drives through communication teams.

SITUATION INTERPRETATION

Crimean-Congo haemorrhagic fever is known to be present in livestock in Uganda and the country is experienced in responding to outbreaks of infectious diseases, as evidenced by the prompt diagnosis, isolation and treatment of the two cases so far. In addition, a One Health approach has immediately been implemented, with inter-Agency collaboration including animal health and veterinary authorities in the response. Stocks of personal protective equipment and the drug ribavirin are available and health workers are being trained in case management and IPC measures. However, challenges remain in timely sample transportation, the need for a contingency plan for the treatment unit in Kasonga in the event of any other disease outbreak in the refugee camp and the need for more medical and logistical supplies for the outbreak. More RCCE materials are needed and funding needs to be supplied for district outbreak response.

The long-standing and complex humanitarian crisis in South Sudan continues. From the start of 2021, there is a total of 8.3 million people in need of humanitarian assistance, 1.6 million people internally displaced and 125 000 people living in protection of civilian sites across the country. In addition, acute food insecurity is affecting an estimated 5.8 million people, thought to be (Integrated Food Security Phase Classification (IPC)) phase 3 and above. Flooding is expected to complicate the situation further, with above normal rainfall predicted from the end of May 2021 in the eastern part of the country (Jonglei and Greater Pibor Administrative Area).

Insecurity continues to complicate the situation with community-based militias responsible for 78.0% of the violence directed at civilians, as well as abductions and conflict-related sexual violence in pockets of South Sudan, according to a new human rights report. Armed personnel have been reported in health facilities and internally displaced persons (IDP) settlements in Yei County. Population movements continue, with 5 322 refugees returning to Akobo East County, most of whom are from Ethiopia, Sudan, Kenya and Uganda.

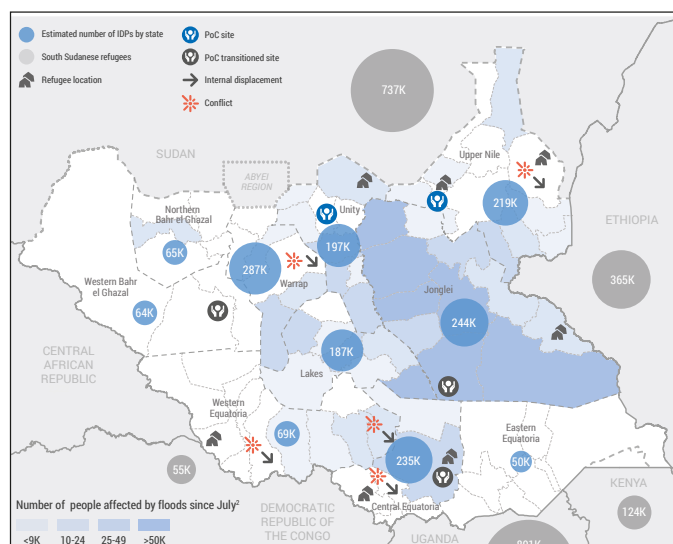
Food insecurity is being targeted in six priority 1 counties, with the IPC report projecting that over 810 000 people will be in crisis or worse levels of food insecurity, of which 108 000 will be in IPC Phase 5 catastrophe in the six most affected counties.

In addition, outbreaks of epidemic prone diseases continue, including COVID-19. Malaria, acute watery diarrhoea, acute respiratory infections and acute bloody diarrhoea accounted for 98.0% of alerts generated from through the early warning and response (EWARS) monitoring. An outbreak of rubella has been confirmed in Tambura County and cases of vaccine derived polio virus, type 2, have been reported in all 10 states, with 25 out of 80 counties reporting at least one case; 20.0% of all cases so far in 2021 have been from Warrap State.

PUBLIC HEALTH ACTIONS

- Health partners continue to increase access to health services through mobile and static facilities in the areas most affected by food insecurity, along with periodic intensification of routine immunization activities in these areas.
- Emergency Mobile Medical Teams continue to provide integrated health and nutrition services in Greater Pibor Administrative area, reaching more than 1 000 patients so far, with plans underway to scale mobile outreaches in other food insecure counties.
- WHO and partners have completed two rounds of polio vaccination campaigns in Akobo, Pibor, Alweil South, Tonj South and Tonj North.
- Cholera preparedness and readiness activities are ongoing in Pibor, Akobo and other counties bordering Ethiopia where there is an active cholera outbreak.

A snapshot of the humanitarian situation in South Sudan showing population displacement and conflict hot spots as of May 2021



- COVID-19 vaccination activities are underway, with the first COVAX vaccine shipment received, targeting frontline health workers and those over the age of 60 years.

SITUATION INTERPRETATION

The long-standing humanitarian crisis in South Sudan shows no sign of ending, and is further complicated by acute food insecurity in a number of counties. Insecurity continues to plague the population and hamper humanitarian response, with some areas periodically inaccessible to aid workers. There continue to be limited resources to cover all affected counties, weak coordination mechanisms at sub-national level, huge operational costs against available donor funds and inadequate human resources for health at sub-national levels. National authorities and partners need to continue all efforts to bring humanitarian assistance to the population of South Sudan and the US\$ 20 million funding gap in the humanitarian response plan needs urgent attention.

Summary of major issues, challenges and proposed actions

Major issues and challenges

- More than half of the countries in the African region are experiencing community transmission of COVID-19 with moderate incidence. Numbers of health worker infections are still a concern, as is the relatively high case fatality ratio, even with deaths declining overall. Confirmation of the variant that was first identified in India in the African region is of concern, given the current escalation of COVID-19 cases and deaths in India. This could also have an implication on the vaccine availability in the region.
- As the 42-day countdown to end of outbreak starts, Guinea continues to experience challenges around locating contacts lost to follow-up, isolating suspected patients and the continuing presence of a confirmed case in the community. Community surveillance remains poor, with most alerts reported through active case finding and poor 24-hour follow-up. A continuing funding gap for response activities will seriously impact continued surveillance and the required strengthening in contact follow-up and alert reporting if not closed.
- Authorities in Uganda have responded promptly and efficiently to the small outbreak of Crimean-Congo haemorrhagic fever reported recently, with a One Health approach established between animal health, veterinary and health authorities. However, there are challenges with sample transport, medical supplies and logistics and RCCE materials, as well as funding for district outbreak response.
- The continuing humanitarian crisis in South Sudan, characterised by mass population displacement, is further complicated by acute food insecurity, continuation of armed conflict, outbreaks of epidemic-prone diseases (including COVID-19) and a large funding gap of US\$ 20 million in the humanitarian response plan.

Proposed actions

- The African region needs to continue to implement all public health and social measures to prevent transmission of COVID-19. It is also important that the public receive accurate information about how the virus is spreading and be reminded of the importance of public health measures.
- Authorities and partners in Guinea need to continue to strengthen active case searching in the community, along with strengthening alert management and contact tracing. Partners need to provide sufficient funds for continuing response as a matter of urgency.
- Authorities in Uganda need to address the challenges with sample transport, medical supplies and RCCE materials urgently in order not to lose the momentum of efficient response to the CCHF outbreak in the country.
- All humanitarian efforts in South Sudan need to continue, with particular attention to the acute food insecurity present in six priority counties. The massive funding gap in the humanitarian response plan needs to be closed as a matter of urgency.

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
New Event									
Angola	Undiagnosed diarrhoeal disease	Ungraded		1-Apr-21	27-Apr-21	304	304	3	1.0%
From 1-27 April, 304 diarrhoeal cases have been observed in the emergency room of the Cacuaco municipal hospital with 3 cases dead. Most cases have been in children <5 years.									
Ongoing Events									
Algeria	Brucellosis	Ungraded	13-Apr-21	01-Jan-21	12-Apr-21	64	64	0	0.0%
The outbreak began in January 2021 in the wilaya of Batna where a cumulative of 64 cases have been confirmed as of 12 April 2021. Four cases were confirmed in January, 12 cases in February, and 48 cases in March. During March 50% of cases were among goat breeders and people having contact with contaminated animals. A total of 21 cases have been hospitalized, but all have been discharged with no deaths reported.									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	9-May-21	124 104	124 104	3 328	2.7%
From 25 February 2020 to 9 May 2021, a total of 124 104 confirmed cases of COVID-19 with 3 328 deaths (CFR 2.7%) have been reported from Algeria. A total of 86 420 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	9-May-21	28 740	28 740	633	2.2%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 9 May 2021, a total of 28 740 confirmed COVID-19 cases have been reported in the country with 633 deaths and 24 717 recoveries.									
Angola	Measles	Ungraded	4-May-19	01-Jan-21	31-Mar-21	63	17	1	1.6%
In 2020, Angola reported between January and August a total of 1 220 suspected cases of which 1 008 have been confirmed, and 5 deaths (CFR 0.4%). From January to March 2021, Angola reported 63 suspected cases, of which 17 were confirmed and one dead (CFR 1.6%). The confirmed cases are between 6 and 59 months old. The affected provinces are: Uige, Quitexe, Banga (Cuanza Norte) and Dande (Bengo). A Catch up campaign was conducted on the end of March.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	01-Jan-19	5-May-21	133	133	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 130. These cases are from several outbreaks which occurred in 2019.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	1-May-21	7 884	7 884	100	-
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 1st May 2021, a total of 7 884 cases have been reported in the country with 100 deaths and 7 652 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	5-May-21	12	12	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cVDPV2 cases reported in 2020, and 8 in 2019. These cases are all linked to the Jigawa outbreak in Nigeria.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	3-May-21	48 417	48 417	734	1.5%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 3 May 2021, a total of 48 417 confirmed COVID-19 cases were reported in the country including 734 deaths and 46 226 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	01-Jan-19	01-Jan-19	1-Feb-21	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement of a total of 1 034 609 internally displaced persons registered as of 31 October 2020 in all 13 regions. The presence of jihadist groups and self-defence units have created an increasingly volatile security situation. Attacks on the health system, intimidation and kidnapping of health workers, theft of medicines, continue to be reported. As of 30 September, 2020, 95 health facilities (7.5% of health facilities in six regions) were closed, and 199 other health facilities are working partially. Central Burkina Faso (including capital Ouagadougou area, and the Centre-Nord Region) was affected by heavy rain in September 2020, which triggered floods and resulted in casualties and damages. Food and nutrition insecurity issues linger at alarming levels specifically in the conflict areas. In 2021, 3.5 million people are in need of humanitarian assistance, more than 1.5 million people are in need of protection, and more than 250 000 people are in phase 4 "emergency" conditions for food insecurity.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	09-Mar-20	8-May-21	13 379	13 379	162	1.2%
Between 9 March 2020 and 8 May 2021, a total of 13 379 confirmed cases of COVID-19 with 162 deaths and 13 156 recoveries have been reported from Burkina Faso.									
Burkina Faso	Hepatitis E	Grade 1	07-Sep-20	17-Sep-20	28-Mar-21	847	10	17	2.0%
From 8 September to 28 March 2021, there were a total of 847 cases of febrile jaundice detected, including 706 in the Barsalogho health district, North Central Region of Burkina Faso. The outbreak has mainly affected internally displaced persons, including 15 of 17 deaths that were among pregnant or postpartum women. Hepatitis E was confirmed in ten cases. Eight out of nine samples were IgM positive for hepatitis E at a hospital laboratory in Montpellier, France on 25 September 2020; three samples tested IgM positive for yellow fever and 1 sample was undetermined at the Laboratoire National de Référence des Fièvres Hémorragiques Virales (LNR-FHV) in Centre Muraz; a total of four samples were sent to IPD for confirmation. Results showed two samples tested PCR positive for Hepatitis E; seroneutralization results revealed 4 positive yellow fever results, however with very low titres; and 0 samples tested RT-PCR positive for yellow fever. This has now been confirmed as a hepatitis E outbreak.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2		01-Jan-19	5-May-21	61	61	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week, the number of 2020 cases still 61. The country is affected by different outbreaks, one linked to the Jigawa outbreak in Nigeria and one to the Savanes outbreak in Togo.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	8-May-21	4 200	4 200	6	0.1%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 08 May 2021, the total number of confirmed COVID-19 cases is 4 200, including six deaths and 3 883 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	01-Jan-21	25-Apr-21	564	-	0	0.0%
Burundi has been experiencing measles outbreaks since November 2019 in camps hosting Congolese refugees and the disease spread in the host community in the district of Citiboke. A total of 1 879 cases were reported in 45 of 47 districts of the country throughout 2020. As of the beginning of the year 2021, Burundi reported a total of 564 measles cases. 3 districts reported cases during week 16: Bujumbura north(4), Giteranyi(1), Kabezi(1)									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	28-Feb-21	-	-	-	-
Cameroon continues to face a humanitarian crisis in the Far North Region linked to the terrorist attacks by the Boko Haram group resulting in significant population displacement. The United Nations Department of Safety and Security identified 42 security incidents in February 2021. UNHCR protection monitoring through INTERSOS, reported 525 protection incidents in the same month of which Logone and Chari departments recorded the highest number of incidents. According to OCHA reports, an estimated 1 million people need assistance, 322 000 are internally displaced, 69 900 are camp refugees, and 46 300 are refugees in the region not in camps. In December 2020, a tripartite agreement between UNHCR, Nigeria, and Cameroon agreed to voluntarily repatriate 5 000 Nigerian refugees which is in process.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	01-Oct-16	27-Jun-18	31-Mar-21	-	-	-	-
Conflict and violence in the North-West and South-West regions continue to cause mass displacement in the area with more than 1 427 people fleeing their homes during March 2021. As of 31 March 2021, there were an estimated 712 800 IDPs and an estimated 66K Cameroon refugees in Nigeria. Much of the violence remains between parties of the ongoing conflict including non-state armed groups and vigilante groups which often affect community members caught in the crossfire. There have also been reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers.									
Cameroon	COVID-19	Grade 3	06-Mar-20	06-Mar-20	28-Apr-21	74 733	74 733	1 144	1.5%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 28 April 2021, a total of 74 733 cases have been reported, including 1 144 deaths and 66 568 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	01-Jan-21	25-Apr-21	1 018	-	20	2.0%
From January to 25 April 2021, Cameroon has reported 1 018 cases and a total of 20 deaths. There is an ongoing outbreak in the east Region (Yokadouma).									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	01-Jan-20	01-Jan-20	5-May-21	7	7	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were seven cases reported in 2020.									
Cameroon	Yellow fever	Ungraded	7-Feb-21	04-Jan-21	18-Apr-21	3	3	1	33.3%
On 11 January 2021, the Centre Pasteur du Cameroon confirmed a case of yellow fever by seroneutralization in the health district of Dschang. The case was a 36-year-old female resident of the Doumbouou health area, Dschang health district, whose onset of symptoms occurred on 19 December 2020 with jaundice. She died on 1 February 2021 following surgery for a gallbladder abscess. Between 1 February and 18 March 2021, 4 additional cases tested IgM positive for yellow fever, of which 2 were confirmed by seroneutralization from the health districts of Yagoua (confirmed on 15 March 2021) and Maga (confirmed on 26 March 2021).									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	9-May-21	26 441	26 441	232	-
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 9 May 2021, a total of 26 441 confirmed COVID-19 cases including 232 deaths and 23 037 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	26-Apr-21	-	-	-	-
Civil unrest and food insecurity in most parts of the country, including major cities, continue 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. According to OCHA figures, 2.8 million people are in need of assistance, 738 279 people are internally displaced as of 31 March 2021, and 650 000 persons are refugees in neighbouring countries. In March, 33 571 new IDPs were registered mostly in the Nangha Boguila, Bozoum, Paoua, Kouango and Alindao sub-prefectures and in the outskirts of Bouar. Displacement was also noted in surrounding bushes and axes such as Bossangoa – Nana-Bakassa and Paoua-Bozoum. In March 2021, 37 171 people returned mainly in the Bangassou, Rafai, Bambari, Grimari, Baboua, Bimbo, Birao, Markounda and Bouar sub-prefectures due to the controlling of towns by armed forces. On 18 April 2021 a fire broke out at the PK3 IDP site in Bria destroying 335 shelters and leaving 2 000 previously displaced people without homes. Medical, psychological, and security protection is being provided by humanitarian organizations.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	3-May-21	6 674	6 674	93	1.4%
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 3 May 2021, a total of 6 674 confirmed cases, 93 deaths and 5 659 recovered were reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Measles	Grade 2	15-Mar-19	01-Jan-19	14-Oct-20	28 676	443	137	0.5%
As of 14 October 2020, a total of 28 676 suspected cases have been notified and 137 deaths within 22 affected districts. A total of 32 new cases and 0 deaths were reported as of epi week 40. The majority of cases are under five years of age, followed by the 5 to under 15 year old age group. Response activities are ongoing in the affected health districts.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	5-May-21	25	25	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were 4 cVDPV2 cases reported in 2020 and 21 cases in 2019 from several outbreaks.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	9-May-21	4 877	4 877	171	3.5%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 9 May 2021, a total of 4 877 confirmed COVID-19 cases were reported in the country including 171 deaths and 4 649 cases who have recovered.									
Chad	Measles	Ungraded	24-May-18	01-Jan-21	25-Apr-21	1 226	87	7	0.6%
In 2020, Chad reported 8 785 cases, with 363 confirmed cases and 41 deaths. Since 1 January 2021 to date (25 April 2021), there have been 1 226 cases reported, 87 of which were confirmed by IgM and seven deaths.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	09-Sep-19	5-May-21	110	110	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported in this week. There were 99 cVDPV2 cases reported in 2020 from three different outbreaks. There were 11 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	7-May-21	3 854	3 854	146	3.8%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 02 May 2021, a total of 3 854 confirmed COVID-19 cases, including 146 deaths and 3 682 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	6-May-21	11 343	11 343	148	1.3%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 6 May 2021, a total of 11 343 cases including 148 deaths and 10 191 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		01-Jan-20	5-May-21	3	3	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. There is one case in 2021. There were two cases reported in 2020.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	9-May-21	46 442	46 442	291	0.6%
Since 11 March 2020, a total of 46 442 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 291 deaths, and a total of 45 847 recoveries.									
Côte d'Ivoire	Dengue			20-Jan-21	20-Jan-21	4	4	0	0.0%
Four confirmed cases of dengue from Cocody and Treichville, PRNT positive. Information received in conjunction with the laboratory results for yellow fever.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	5-May-21	72	72	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The total number of 2020 still 72.									
Côte d'Ivoire	Yellow fever	Ungraded			25-Jan-21	13	3	2	15.4%
Results from Institute Pasteur Dakar indicated that 3 out of 13 samples tested positive for yellow fever by plaque reduction neutralization test (PRNT) including 1 from Korhogo (Dec 2020 onset), 1 from Niakaramadougou (Dec 2020 onset), and 1 from Treichville-Marcory (March 2021 onset); an additional 4 cases were confirmed for dengue.									
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-16	17-Apr-17	25-Apr-21	-	-	-	-
There has been prolonged movement in Ituri province of IDPs in various territories where 1 651 180 people were displaced and 584 463 returned during April 2021. The territories of Mahagi and Djugu are experiencing the most movement from displacements and returnees. During March 2021 there was increased security incidence of which 55% were attributed to armed groups. Most (71%) were homicides and most (45%) occurred in Beni. In Kasai province, almost all villages on the Bakwenge and Kakege axis have emptied following intercommunal conflict at the end of March 2021. In Tanganyika province, insecurity, torrential rain, gender-based violence, and a deteriorating food situation challenges the province. As of 25 April 2021, there are an estimated 5.2 million people displaced and 19.6 million in need of emergency food assistance.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	01-Jan-20	28-Mar-21	2 012	-	73	3.6%
In 2021, from epidemiological week 1 to 12 (ending on 28 March 2021), 2 012 suspected cholera cases including 73 deaths (case-fatality rate 3.6%) were recorded in 51 health zones across 11 provinces of the Democratic Republic of the Congo. This is a 68% decrease in the number of suspected cholera cases compared to the same period in 2020, but the number of deaths remains stable between these two years. The endemic provinces are the most affected. In 2020, 30 304 suspected cholera cases including 514 deaths (case fatality 1.7%) were reported in 179 health zones across 23 provinces.									

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	COVID-19	Grade 3	10-Mar-20	10-Mar-20	8-May-21	30 323	30 322	772	2.5%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 30 322 confirmed cases and one probable case, including 772 deaths have been reported. A total of 26 434 people have recovered.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	01-Jan-20	31-Dec-20	6 257	39	229	3.7%
From epidemiological week 50 to 53 of 2020, there were 269 suspect cases of monkeypox and 4 deaths registered across the country. Between epidemiological week 1 and week 53, a total of 6 257 suspected cases including 229 deaths (CFR 3.7%) were reported in 133 health zones from 17 out of 26 provinces in the country. During the same period in 2019, 5 288 suspected cases and 107 deaths (CFR 2.0%) were reported in 132 health zones from 18 provinces. Overall, there is a regressive trend from epidemiological week 33 to 53 of 2020 (276 cases vs 76 cases).									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	01-Jan-20	25-Dec-20	420	-	29	6.9%
Ituri province notified an upsurge of plague cases in the health zone of Rethy during 2020. From 1 January to 25 December 2020, a total of 420 cases with 29 deaths (CFR 6.9%) were notified in 5 out of 22 health areas of Rety health zone. Plague is considered endemic in Ituri province. In 2019, from week 1 to 52, a total of 48 cases of bubonic plague including eight deaths have been reported in the country. Actions undertaken include ongoing strengthening in surveillance with the support of Malteser International and WHO; decontamination of households of cases; case management and free preventive distribution of doxycycline (in adults) and cotrimoxazole (in children) to contacts; raising awareness for community engagement; and briefing health providers in the affected health areas.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	01-Jan-18	5-May-21	191	191	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far, we have 2 reported cases in 2021. The total number of 2020 cases remains at 81. The case count for 2019 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	27-Apr-21	7 694	7 694	112	-
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 27 April 2021, a total of 7 694 cases have been reported in the country with 112 deaths and 7 279 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	7-May-21	3 742	3 742	12	-
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 7 May 2021, a total of 3 742 confirmed COVID-19 cases with 12 deaths were reported in the country. A total of 3 602 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	9-May-21	18 480	18 480	671	3.6%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 9 May 2021, a total of 18 480 cases have been reported in the country including 17 783 recoveries. A total of 671 associated deaths have been reported.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 2	04-Nov-20	04-Nov-20	14-Apr-21	-	-	-	-
The access situation in Tigray is fluid and constantly changing. Despite recent improvements in access, active conflict in various areas this week restricted humanitarian response. In addition to insecurity, humanitarian partners continue to flag challenges with capacity and resources to be able to scale up to the level needed to respond across Tigray.									
Ethiopia	Cholera	Ungraded	14-May-19	12-May-19	14-Mar-21	14 484	14 484	479	3.3%
In week 10 (week ending 14 March 2021), 29 new suspected cases with no associated deaths were reported. Most of the cases were reported from SNNP, Tigray and Oromia.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	9-May-21	262 702	262 702	3 888	1.5%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 262 702 cases of COVID-19 as of 9 May 2021, with 3 888 deaths and 210 030 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	01-Jan-19	10-Jan-21	1 873	-	-	-
In week 01 (week ending 10 January 2021), the measles outbreak is still ongoing in the country. A total of 37 new suspected cases were reported during the week with one associated death mainly from SNNPR, Oromia, Amhara and Benishangul regions.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	5-May-21	40	40	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The total number of 2020 cases still 26. The total number of cVDPV2 cases reported is 40.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	7-May-21	23 432	23 432	143	-
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 7 May 2021, a total of 23 432 cases including 143 deaths and 19 944 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	6-May-21	5 929	5 929	175	3.0%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 6 May 2021, a total of 5 929 confirmed COVID-19 cases including 175 deaths, and 5 598 recoveries have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	5-May-21	92 951	92 951	783	0.8%
As of 5 May 2021, a total of 92 951 confirmed COVID-19 cases have been reported in Ghana. There have been 783 deaths and 90 568 recoveries reported.									
Ghana	Meningitis	Ungraded		01-Jan-21	18-Apr-21	149		2	1.3%
Since the beginning of the year 2021, 149 cases have been reported with 2 deaths.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	09-Jul-19	08-Jul-19	5-May-21	30	30	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. There were 12 cases reported in 2020, while the total number of 2019 cases remains 18. One cVDPV2 positive environmental sample was reported in the Eastern province.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	8-May-21	22 633	22 633	150	-
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 8 May 2021, a total of 22 633 cases including 20 231 recovered cases and 272 deaths have been reported in the country.									
Guinea	Ebola virus disease	Grade 3	14-Feb-21	13-Feb-21	4-Apr-21	23	16	12	52.2%
Detailed update given above.									
Guinea	Lassa Fever	Ungraded	11-Jul-20	11-Jul-20	4-Aug-20	1	1	1	100.0%
A case of Lassa fever was confirmed on 11 July 2020 by the Haemorrhagic Fever laboratory in Guéckédou. The case patient is a 28-year-old, female, 22 weeks of pregnancy, living in the village of Kondian, in the rural district of Koundou Lengo Bengou. She fell ill on 07 June 2020 with chest pain and no history of travel or being in contact with a foreigner a month before her illness. She consulted at Koundou health centre on 10 July 2020, with fever, cough, myalgia, diarrhoea, vomiting, sore throat, and chest pain. The malaria RDT performed was positive. She was treated for malaria and transferred to Guéckédou hospital the same day, where the diagnosis of haemorrhagic fever was made. A diagnostic test for haemorrhagic fever performed at the Haemorrhagic Fever laboratory in Guéckédou was positive for lassa fever. The patient died the next day. A dignified and secure burial was carried out by the Red Cross on 12 July 2020.									
Guinea	Measles	Ungraded	09-May-18	01-Jan-19	18-Jan-21	6 188	366	15	0.2%
For epidemiological week 53 of 2020, there were a cumulative number of 6 118 cases and 15 deaths. During week 44 of 2019 (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	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	5-May-21	49	49	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far we have 5 cases in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea	Yellow fever	Grade 2	19-Nov-20	06-Nov-20	15-Dec-20	52	0	14	26.9%
A total of 48 suspected yellow fever cases have been notified in Guinea: 46 suspect cases from Koundara commune (northern part of Guinea), 1 suspect case from Kouroussa (center of Guinea), and 1 suspect case Dubreka (north of Conakry). Among the samples collected, there are 10 probable cases (IgM positive) tested by the Laboratoire des Fiebres Hemorragiques Virales at Nongo, and are now en route to IP Dakar for confirmatory testing.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	8-May-21	3 741	3 741	67	1.8%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 8 May 2021, the country has reported 3 741 confirmed cases of COVID-19 with 3 400 recoveries and 67 deaths.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	9-May-21	163 554	163 554	2 895	1.8%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 9 May 2021, 163 554 confirmed COVID-19 cases including 2 895 deaths and 111 191 recoveries have been reported in the country.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	03-Jan-20	16-Mar-21	542	542	8	1.5%
Since January 2020, a total of 542 visceral leishmaniasis confirmed cases with eight deaths (CFR 1.5%), have been reported in seven counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera and Wajir. The outbreak is active in three counties, West Pokot, Mandera and Wajir.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	25-Apr-21	597	10	1	0.2%
In October 2019, an outbreak of measles has been reported in nine sub-counties spread across five counties namely West Pokot, Garissa, Wajir, Tana River and Kilifi. As of 30th April 2021, the outbreak is still active in 5 sub-counties across two counties (West Pokot and Garissa), with a new outbreak in Pokot South sub-county. The total cases reported in the remaining two active counties, since end of October 2019, are 597 out of which 30 were confirmed (by laboratory) and one death (CFR 0.2%).									
Kenya	Poliomyelitis (cVDPV2)		3-Feb-21		5-May-21	1	1	0	0.0%
No cVDPV2 positive environmental sample was reported this week. There was one cVDPV2 environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia. The environmental sample of 22 December 2020, collected from Bouralgy, Garissa town, Garissa County showed a cVDPV2 with 65nt changes from Sabin. A case of circulating Vaccine Derived Polio Virus 2 (cVDPV2) has been isolated from a 11-month-old girl in Dagahaley refugee camp, Dadaab Sub County, Garissa County.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	Rift Valley fever	Ungraded		14-Jan-21	09-Mar-21	32	14	11	34.4%
Rift Valley fever (RVF) in humans has been reported in Isiolo and Mandera counties and in animals in Isiolo, Mandera, Murang'a and Garissa counties in Kenya. The first case of suspected RVF was reported in late November 2020 following a sudden death of an adult male who was a herder. This was a case from Sericho ward in Garbatulla subcounty, Isiolo county. Other deaths with symptoms such as fevers, joint pains, headache and general malaise were also reported in Gafarsa and Erisaboru locations within Garbatulla subcounty as well as Korbasa in Merti subcounty. A confirmed case of RVF in Madera county reported end of December has since died; he was involved in the slaughter of four sick camels. All the affected cases were males age ranging from 13 to 70 years. As of 2 March 2021, there were a 32 total cases reported, of which 14 are confirmed and 11 deaths.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	8-May-21	10 733	10 733	319	-
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 1 May 2021, a total of 10 733 cases of COVID-19 have been reported, including 6 427 recoveries and 319 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	4-Apr-21	2 066	2 066	85	4.1%
From 16 March 2020 to 4 April 2021, a total of 2 066 cases including 85 deaths and 1 922 recoveries have been reported from all 15 counties of Liberia. Montserrado County, which hosts the country's capital city, remains at the epicenter of the outbreak.									
Liberia	Measles	Ungraded	24-Sep-17	01-Jan-19	18-Apr-21	132	77	0	0.0%
In week 16 (week ending 18 April 2021), 10 suspected cases were reported from Nimba(4), Lofa (3), Grand Gedeh (1), Margibi (1) and Montserrado (1) Counties. Among the 10 suspected cases, 7 cases are <5 years (70%) and 3 cases are >=5 years(30%). Since the beginning of 2021, 132 total cases were reported of which 77 were confirmed (16 laboratory-confirmed, 50 clinically confirmed and 11 epi-linked)									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	8-May-21	39 012	39 012	722	1.9%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 8 May 2021, a total of 39 012 cases have been reported in the country, out of which 36 026 have recovered and 722 deaths reported.									
Madagascar	Malaria	Ungraded	08-Mar-21	08-Mar-21	08-Mar-21				-
There is an increase of 41% in the number of malaria cases for the last quarter of 2020 compared to the same period of the previous year for 31 districts in Madagascar.									
Madagascar	Poliomyelitis (cVDPV2)	Grade 2		01-Jan-20	5-May-21	3	3	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) reported this week. So far 2 cases have been confirmed for 2020 in South-East, and one in 2021 from South-West.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	9-May-21	34 171	34 171	1 153	3.4%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 9 May 2021, the country has a total of 34 171 confirmed cases with 1 153 deaths and 32 159 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	8-Feb-21	-	-	-	-
The precarious security situation continues to gradually spread to the southern regions of the country. Issues such as inter and intra-community conflicts, activism of non-state armed groups, consequences of counter-insurgency operations, crime and banditry continue to weaken the Malian context. Natural disasters (droughts and floods) and COVID-19 compound the health and non-health impacts affecting all basic social sectors as well as the protection of household livelihoods. According to OCHA reports, an estimated 5.9 million people need humanitarian assistance. As of January 2021, an estimated 358 212 people are refugees or internally displaced.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	9-May-21	14 108	14 108	500	3.5%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 09 May April 2021, a total of 14 108 confirmed COVID-19 cases have been reported in the country including 500 deaths and 9 010 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	01-Jan-21	2-May-21	672	328	0	0.0%
Measles outbreak is ongoing in Mali. During week 17 (week ending 2 May 2021), 60 suspected cases of measles were reported from eight regions of the country. Since January 2021 as to date, Mali reported a total of 672 suspected cases of which 328 were confirmed. It shows an increase of 30.33% compared to the total cases reported last year at the same week									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	2-May-21	18 448	18 448	455	2.5%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 2 May 2021, a total of 18 448 cases including 455 deaths and 17 725 recovered cases have been reported in the country.									
Mauritania	Dengue	Ungraded	11-May-20	3-May-20	02-Nov-20	7	7	0	0.0%
Between 16 to 24 October 2020, 5 cases of dengue fever have been suspected at Etewvigh Clinic in Tevragh Zeina district, and all have been confirmed by RT-PCR at the National Institute of Research in Public Health (INRSP). On 3 May 2020, two suspected cases of dengue fever were admitted to hospital in Mauritania. 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 a further 5 additional cases (4 women and 1 man) distributed in 4 districts of Atar (Atar, Tineri, Aghnemrite and Edebaye) were detected.									
Mauritania	Rift Valley Fever	Grade 1	09-Oct-20	04-Sep-20	28-Sep-20	36	36	13	36.1%
The Ministry of Health notified the WHO of 8 cases, including 7 deaths, of Rift Valley Fever (RVF) (PCR positive) in breeders, which occurred between 13 September 2020 and 1 October 2020, in several localities in the departments of Tidjikja and Moudjéria (Tagant region), Guerou (Assaba region) and Chinguetty (Adrar region). The 7 deaths occurred in the Tagant region (5) and in Assaba region (2) among hospitalized cases with fever and haemorrhagic syndrome (petechiae, gingivorrhagia) and vomiting. The continuous surveillance of RVF at the animal level has confirmed the outbreaks in the Assaba, Tagant, Brakna, Tarza and Hodh Elgharbi regions. The results of 165 samples taken in the period from 16-23 September 2020, show that 33 camelids, 4 small ruminants and 6 cattle were positive.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	7-May-21	1 246	1 246	17	1.4%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 7 May 2021, a total of 1 246 confirmed COVID-19 cases including 17 deaths and 1 149 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Grade 2	01-Jan-20	01-Jan-20	2-May-21	-	-	-	-
The security situation in Cabo Delgado remains volatile and uncertain with several nights of shooting between NSAGs and Governmental Forces and with reports of several burnt houses. After recent attacks in Palma Sede, there have been movement of troops and IDPs in the area. As of 2 May 2021, an estimated total of 35 370 IDPs had been registered arriving by foot, bus, boat and air from Palma to the districts of Nangade, Mueda, Montpuez, and Pemba. Most IDPs are being integrated into families and in accommodation centers.									
Mozambique	Cholera	Ungraded	20-Feb-20	31-Jan-20	17-Jan-21	2 952	108	40	1.40%
As of 17 January 2021 there have been a total of 2 952 cases and 40 deaths (case fatality ratio 1.4%) reported in the Cabo Delgado province in seven districts: Mocimboa da Praia (380 cases), Ibo (440 cases), Macomia (247 cases), Pemba (685 cases), Metuge (571 cases), Chiure (377 cases) and Montpuez (252 cases). The districts of Mocimboa da Praia and Macomia have not been reporting data because of ongoing insurgent attacks in the area.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	9-May-21	70 212	70 212	823	1.2%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 9 May 2021, a total of 70 212 confirmed COVID-19 cases were reported in the country including 823 deaths and 67 785 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	01-Jan-21	18-Apr-21	726	-	0	0.0%
Since the beginning, measles outbreaks are active in 11 provinces. As of week 15, there were 726 cases reported.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	8-May-21	50 070	50 070	689	0.0%
The first case of COVID-19 was first detected in Namibia on the 14 March 2020. As of 8 May 2021, a total of 50 070 confirmed cases with 47 300 recovered and 689 deaths have been reported.									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	08-Sep-17	10-Jan-21	10 227	10 227	66	0.6%
During this reporting period, 28 December 2020 - 10 January (weeks 53 & 01), a total of 5 HEV (Hepatitis E Virus) cases were reported country-wide. Since the beginning of the outbreak in December 2017, a cumulative total of 10 227 cases (2 099 laboratory-confirmed, 4 744 epidemiologically linked, and 1 187 suspected cases) including 66 deaths (CFR 0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 5 103 (50%) of reported cases, followed by Erongo 1 916 (19%) since the outbreak began.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	28-Apr-21	-	-	-	-
On 21 March 2021 attacks were carried out by suspected non-state armed groups (NSAGs) on Tuareg camps in the commune of Tillia. Due to the violence, 1 416 people have been displaced from the area and have sought refuge in the capital of Tillia Department as of 19 April 2021. In the Tahoua region, the security situation continues to deteriorate since 2017 from attacks perpetrated by NSAGs. Between January and March 2021, 404 cases of protection incidents were recorded in the region, particularly in the departments of Tassara, Tahoua, and Tillia (Tillia county accounting for 70% of incident cases). According to OCHA statistics, 3.8 million people need humanitarian assistance in 2021, 313K are IDPs, 234K are refugees, and 2 million are food insecure (with 511 332 affected by food insecurity in the Tillaberi region alone).									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	11-Apr-21	5 074	5 074	189	3.7%
From 19 March 2020 to 11 April 2021, a total of 5 074 cases with 189 deaths have been reported across the country. A total of 4 747 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	01-Jan-20	31-May-20	2 079	241	4	0.2%
From week 1 to 22 of 2020, Niger reported a total measles suspected case count of 2 079 of which there were 241 lab confirmed (IgM positive) and 4 deaths in 8 regions: Agadez (50 cases, 0 deaths), Diffa (4 cases, 0 deaths), Dosso (27 cases, 0 deaths), Maradi (101 cases, 2 deaths), Niamey (23 cases, 0 deaths), Tahoua (62 cases, 1 death), Tillaberi (67 cases, 0 deaths) and Zinder (167 cases, 1 death). In 2019 a total of 10 207 suspected measles cases were reported from eight regions in the country. 24 districts were affected by outbreaks in 2020.									
Niger	Meningitis	Ungraded		01-Jan-21	18-Apr-21	995		54	5.4%
Since the beginning of the year 2021, 995 cases have been reported with 54 deaths.									
Niger	Poliomyelitis (cVDPV2)	Grade 2		01-Jan-20	5-May-21	9	9	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. There were nine cVDPV2 cases reported in 2020.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	17-Apr-21	-	-	-	-
In 2021, more than 8.7 million require humanitarian assistance in Borno, Adamawa, and Yobe states. Attacks on Nigerian Armed Forces (NAF) by non-state armed groups (NASG) have escalated in the past month leading to harming of civilians. The violent attacks have been ongoing for months and growing insecurity has affected operations in Borno state in Monguno, Ngala, Dikwa, and Damask. The overall situation remains unpredictable with limited or no access to some locations due to constrained humanitarian access. Among the aid affected include food distribution, WASH, health, and nutrition programs which will be paused for a significant period until security can be maintained and recovery can begin.									
Nigeria	Avian influenza	Ungraded	04-Mar-21	09-Mar-21	09-Mar-21	7	7	0	0.0%
As of 3 March 2021 a total of seven confirmed cases with no deaths have been reported in two States (Plateau and Kano). Forty-five samples were collected from bird handlers who had contact with confirmed positive and suspected birds in Kano and Plateau States, of which seven tested positive at the Nigeria Centre for Disease Control National Reference Laboratory for influenza A - Kano (4) and Plateau (3).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	Cholera			12-Jan-21	30-Mar-21	97	97	17	17.5%
A cholera outbreak was detected in Benue State, Nigeria and resulted in 10 deaths in the region Agatu. The Agatu outbreak is reported to have started in December 2020, in Obagaji, the LGA headquarters. An immediate response on the spot assessment of the alert in Abinsi by a Rapid Response of the Ministry of Health was done. As of 30 March 2021, 39 persons, mostly children have been affected with 7 deaths giving a CFR of 17.9%. Fifty-eight cases have been recorded in Abinsi settlement of Guma LGA with 10 deaths (CFR 17.2%).									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	9-May-21	165 419	165 419	2 065	-
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 9 May 2021, a total of 165 419 confirmed cases with 156 300 recovered and 2 065 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	01-Jan-21	01-Jan-21	4-Apr-21	236	233	49	20.8%
Three (3) new cases were reported from Ondo State during the week ending 4 April 2021. Of the 14 states affected, Edo (102), Ondo (64), and Taraba (18) states accounts for 79% of all confirmed cases reported to date. New cases have declined since the end of week 11 (week ending 21 March 2021).									
Nigeria	Measles	Ungraded	25-Sep-17	01-Jan-21	11-Apr-21	6 995	-	50	0.7%
In 2020, Nigeria reported 9 316 confirmed cases, with 55 deaths, CFR 0.6%. The measles outbreak is ongoing. From January 2021 to 11 April 2021, 6 995 suspected cases have been reported in Nigeria. During week 11, 889 were reported. The most affected state is Borno with 2 945 suspected cases out of which 41 deaths were recorded.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	01-Jun-18	01-Jan-18	5-May-21	65	65	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far, we have 5 cases reported in 2021. There were eight cVDPV2 cases reported in 2020, 18 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	01-Nov-20		29-Jan-21	3 473	169	296	8.0%
As of 29 January 2021, there have been a cumulative total of 3 112 suspected cases of yellow fever, of which 109 cases have been confirmed, from 488 LGA (63%) across all states and the Federal Capital Territory (FCT). Laboratory results in-country show 70 cases confirmed by PCR, with 148 presumptive positive, 13 inconclusive and 1 526 negative. Laboratory results for 148 samples sent to Institut Pasteur Dakar show 41 (27.7%) confirmed, 16 negative and 91 pending.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	9-May-21	25 652	25 652	338	1.3%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 9 May 2021, a total of 25 652 cases with 338 deaths and 14 153 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	9-May-21	2 318	2 318	35	1.5%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 9 May 2021, a total of 2 318 confirmed cases of COVID-19 have been reported, including 35 deaths. A total of 2 262 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	02-Mar-20	02-Mar-20	9-May-21	40 692	40 692	1 119	-
From 2 March 2020 to 9 May 2021, a total of 40 692 confirmed cases of COVID-19 including 1 119 deaths and 39 384 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2			5-May-21	4	4	0	0.0%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Diourbel bringing the number of 2021 cases to four.									
Senegal	Rift Valley Fever	Ungraded	23-Oct-20	23-Oct-20	15-Nov-20	3	3	0	0.0%
The Institut Pasteur of Dakar through the directorate of diseases prevention notified the district of Matam of two confirmed cases of Rift Valley fever (RVF-IgM positive) on 23 October 2020, one in a 20-year-old, male, living in Bokidiawé. He consulted at the health post on 13 October 2020 for an infectious syndrome without history of travel with an axillary temperature of 39.6 degree Celsius. The onset of symptoms is one day before the consultation date. The second case, is a 24 year-old man, living in Bokidiawé. he consulted the health post on 2 October 2020 for an infectious syndrome without notion of travel with an axillary temperature of 38.2 degree Celsius. The onset of symptoms is three days before the date of consultation. An additional case of confirmed RVF was notified later.									
Senegal	West Nile fever	Ungraded	23-Oct-20	23-Oct-20	15-Nov-20	6	6	0	0.0%
The Institut Pasteur of Dakar through the directorate of diseases prevention notified to the district of Matam one confirmed cases of West Nile fever (IgM positive) on 23 October 2020, in a 32-year-old female living in Bokidiawé. She consulted at the health post of Bokidiawé on 7 October 2020 for an infectious syndrome without history of travel with axillary temperature of 38.2 degree Celsius. The symptoms occurred 2 days before the consultation. Five additional cases were notified later in Tambacounda, Matam, Dakar et Ziguinchor regions.									
Senegal	Yellow fever	Ungraded			17-Dec-20	7	7	2	28.6%
From 29 October to 17 December 2020, there were 7 cases confirmed (IP Dakar) with yellow fever in three regions of Senegal bordering Mauritania and Mali: 4 in Kidira health district (Tambacounda Region), 1 in Thilogne health district (Matam Region), 1 in Saraya district and 1 in Kedougou district (the latter two are both from Kedougou Region). Two deaths have been notified.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	5-May-21	6 811	6 811	28	0.4%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 05 May 2021 a total of 6 811 cases have been confirmed, including 5 388 recoveries and 28 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	1-May-21	4 057	4 057	79	1.9%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 1 May 2021, a total of 4 057 confirmed COVID-19 cases were reported in the country including 79 deaths and 3 076 recovered cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	01-Jan-21	16-Feb-21	3	3	0	0.0%
In the first four weeks of 2021, six cases of acute viral haemorrhagic fever were identified and tested. Of the six tested, three came back testing positive for Lassa fever in Kenema district. Two of the patients who tested positive have recovered. Further epidemiological investigations are currently underway.									
Sierra Leone	Poliomyelitis (cVDPV2)				5-May-21	14	14		0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far, 4 cases have been reported in 2021, and the number of cases 2020 remains 10.									
South Africa	COVID-19	Grade 3	05-Mar-20	03-Mar-20	25-Apr-21	1 575 471	1 575 471	54 148	3.4%
Since the start of the COVID-19 pandemic in South Africa a cumulative total of 1 575 471 confirmed cases and 54 148 deaths have been reported, with 1 501 185 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	16-Apr-21	-	-	-	-
People in parts of South Sudan continue to face the highest levels of food insecurity since the country declared independence 10 years ago. According to Integrated Food Security Phase Classification (IPC) projections, from December to March 2021, an estimated 5.8 million people (48% of the population) faced Crisis levels of food insecurity (IPC Phase 3) or worse - a figure that is expected to increase to 7.2 million (60% of the population) in the upcoming lean season of April-July 2021. In the six priority 1 locations, 810 000 people are deemed to be in Crisis or worse levels of food insecurity (IPC Phase 3+) according to IPC projections. This includes over 300 000 children suffering from Severe Acute Malnutrition (SAM) and some 480 000 pregnant and lactating women who are acutely malnourished and in need of treatment.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	15-Apr-21	-	-	-	-
Detailed update given above.									
South Sudan	COVID-19	Grade 3	5-Apr-20	2-Apr-20	7-May-21	10 637	10 637	115	1.1%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 7 May 2021, a total of 10 637 confirmed COVID-19 cases were reported in the country including 115 deaths and 10 312 recovered cases.									
South Sudan	Hepatitis E	Ungraded	-	03-Jan-19	11-Apr-21	556	556	5	0.9%
The current outbreak in Bentiu UN Protection of Civilians (POC), which started at the beginning of 2019, has continued with 7 new cases reported in week 14 (week ending 11 April 2021). As of the reporting date, a total of 556 cases of hepatitis E including five deaths have been reported.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	11-Apr-21	1 307	51	2	0.2%
Between week 38 of 2019 to week 14 of 2021, a total of 1 307 cases of measles. The outbreak is controlled in 9 counties (Tonj East, Juba, Bor, Kapoeta East, Jebel Boma, Aweil East, Wau, Pibor and Ibba). One confirmed case of measles was reported in Tambura between week 2 and week 10									
South Sudan	Poliomyelitis (cVDPV2)			23-Sep-20	5-May-21	56	56	0	0.0%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Jonglei. There are now 56 cVDPV2 cases in the country; 6 in 2021 and 50 in 2020.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	11-Apr-21	509	509	21	4.1%
The Ministry of Health, Community Health Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 29 November 2020, a total of 509 cases have been reported in the country including 21 deaths. The last information on confirmed COVID-19 cases was shared by Tanzania mainland on 29 April 2020 and Zanzibar last shared information on on-going COVID-19 outbreak on 7 May 2020.									
Togo	COVID-19	Grade 3	06-Mar-20	01-Mar-20	9-May-21	13 154	13 154	124	0.9%
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 9 May 2021, a total of 13 154 cases including 124 deaths and 11 691 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	5-May-21	17	17	0	0.0%
No new case of cVDPV2 was reported during the past week. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Uganda	Humanitarian crisis	Ungraded	20-Jul-17	n/a	31-Jan-21	-	-	-	-
As of 31 January 2021, Uganda was hosting 1 424 325 refugees, majority of whom were resident in Bidibidi, Adjumani, Nakivale, Kyangwali and Kyaka Li districts. Most of the refugees were from South Sudan (65.3%), DRC (31.0%) and Burundi (3.6%).									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	8-May-21	42 384	42 384	346	0.8%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 8 May 2021, a total of 42 384 confirmed COVID-19 cases, 41 971 recoveries with 346 deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Uganda	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	1-May-21	28-Apr-21	4-May-21	2	2	0	0.0%
Detailed update given above.									
Uganda	Rift Valley Fever			10-Dec-20	10-Dec-20	1	1	0	0.0%
A 25 year old male patient at Nakasero Hospital Kampala district was suspected for viral haemorrhagic fever (VHF), he was tested for Ebola, Marburg, Crimean-Congo haemorrhagic fever and Rift Valley fever (RVF) viruses by PCR. He tested positive for RVF.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	9-May-21	92 092	92 092	1 257	1.4%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 9 May 2021, a total of 92 092 confirmed COVID-19 cases were reported in the country including 1 257 deaths and 90 428 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	07-Mar-21	798		3	0.4%
The anthrax outbreak is ongoing in Zimbabwe. From Week 1 to 11 of 2021, there were 51 cases reported. This outbreak started in 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. The cumulative figures for anthrax are 747 cases and 3 deaths as of Week 52 of 2020.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	9-May-21	38 419	38 419	1 576	4.1%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 9 May 2021, a total of 38 419 confirmed COVID-19 cases were reported in the country including 1 576 deaths and 36 063 cases that recovered.									

†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.

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