

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 31: 26 July - 1 August 2021

Data as reported by: 17:00; 1 August 2021



World Health
Organization

REGIONAL OFFICE FOR

Africa

WHO Health Emergencies Programme

2

New events

122

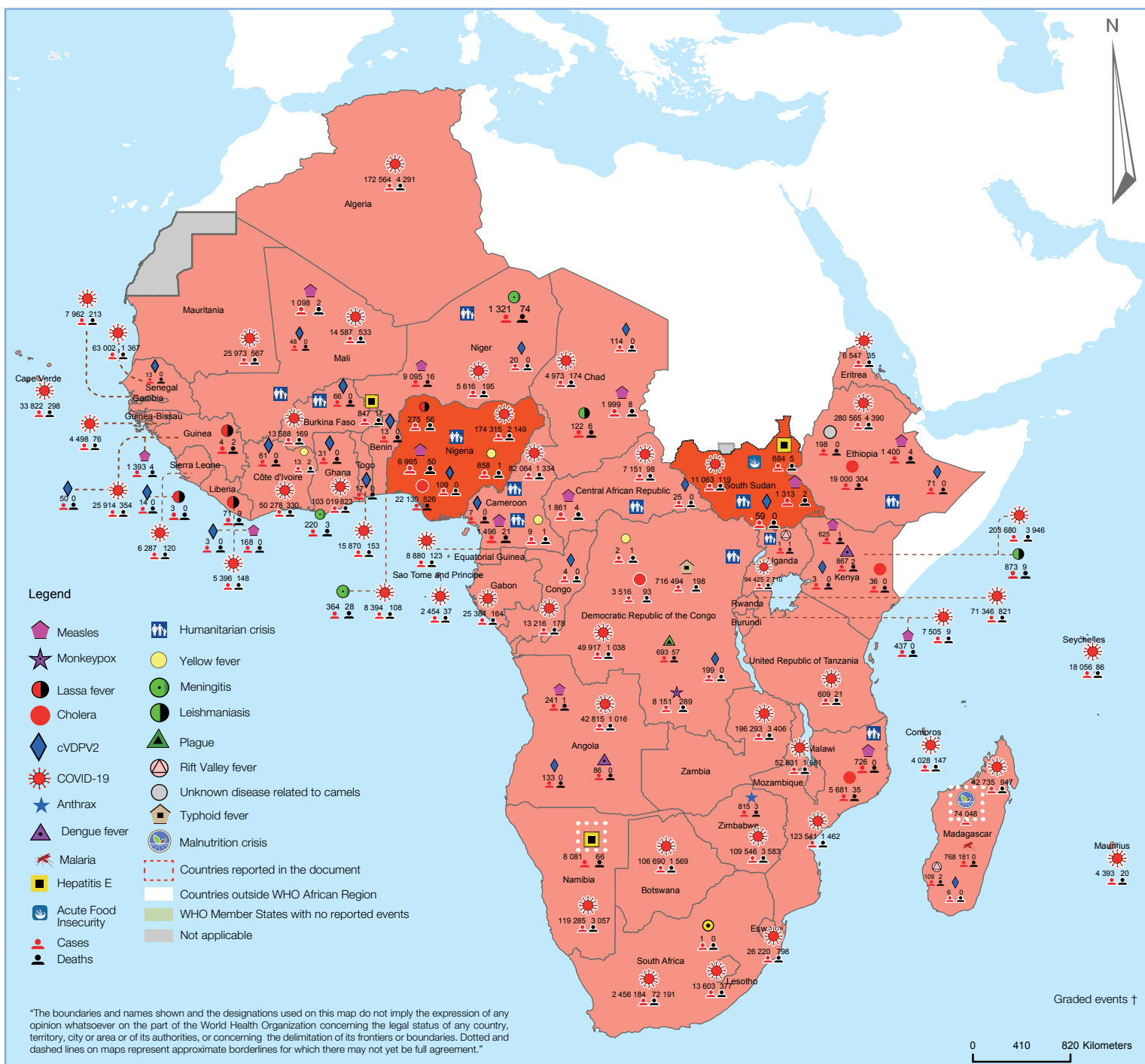
Ongoing events

111

Outbreaks

13

Humanitarian
crises



3

Grade 3 events

27

Grade 2 events

0

Grade 1 events

39

Ungraded events

3

Protracted 3 events

3

Protracted 2 events

3

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 124 events in the region. This week's articles cover:

- [COVID-19 across the WHO African region](#)
- [Hepatitis E in Namibia](#)
- [Humanitarian Crisis in Grand Sud, Madagascar](#)

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:

- COVID-19 cases in the African region dropped for the third consecutive week, after a nine-week rapid increase in case incidence. Reported case numbers declined by 7.2% from 179 693 cases in the previous week to 166 790 in the past week. This decline is largely driven by a rapid fall in new weekly cases in South Africa, plus other countries in the Southern part of the region; Botswana, Namibia, Zambia and Zimbabwe. The region is still experiencing the third wave, with 19 countries still undergoing a resurgence. The number of weekly deaths also decreased by 12.0%. Cabo Verde and Seychelles have recorded high attack rates, with a high proportion of people infected. Health worker infections continue to be of grave concern across the region. Furthermore, the combination of vaccine scarcity and treatment challenges is seriously undermining effective response to the pandemic.
- Even when the protracted hepatitis E outbreak in Namibia has shown significant decline, the conditions for a resurgence of outbreaks of water-borne diseases persist, particularly in urban informal settlements, which suffer from inadequate supplies of safe water and poor sanitation. Authorities need to tackle these challenges and provide sustainable solutions in order to prevent recurrent outbreaks of water-borne diseases. As the Hepatitis E outbreak in Namibia wanes, this provides an opportunity for health workers to target their efforts towards the COVID-19 response.
- A prolonged three-year drought in southern Madagascar has contributed to food insecurity issues for an estimated 1.3 million people in the Grand Sud area. Other factors beyond low agricultural production include job and income losses due to COVID-19 lockdown measures especially for informal workers and food price inflation. As a result, crimes have increased in the most affected district of Amboasary Atsimo as more people engage in risky behaviours to survive. About 510 000 children are expected to have acute malnutrition in the next year if no intervention measures are taken.

Ongoing events

Coronavirus disease 2019

African region

4 917 071 : 117 304 : 2.4%
Cases : **Deaths** : **CFR**

In the past week (26 July – 1 August 2021), the African region recorded a total of 166 790 new cases of coronavirus disease (COVID-19), a 7.2% decrease compared to the previous week when 179 693 new cases were reported. Eighteen countries (38.3%) saw an increase in weekly cases above or equal to 20.0% compared to the previous week; Burkina Faso, Burundi, Central African Republic, Côte d'Ivoire, Eswatini, Ethiopia, Guinea, Guinea-Bissau, Kenya, Lesotho, Mali, Mauritania, Mozambique, Niger, Nigeria, Sao Tome and Principe, Sierra Leone and Togo. Another 18 (38.3%) countries reported a decrease in new cases above or equal to 20.0% compared to the prior week. These countries include; Botswana, Cameroon, Chad, Comoros, Congo, Democratic Republic of the Congo, Equatorial Guinea, Eritrea, Gambia, Ghana, Malawi, Mauritius, Namibia, Rwanda, Seychelles, South Sudan, Uganda and Zambia.

Even though the COVID-19 third wave is showing a downward trend in the African Region, case incidence remains high with an average of 23 827 cases reported each day over the past seven days. Most of these reported cases are concentrated in just a few countries, with five countries accounting for 72.0% of all new cases in the past week; South Africa (78 361; 47.0%), Mozambique (13 253, 8.0%), Zimbabwe (11 652, 7.0%), Algeria (10 409, 6.2%), and Kenya (6271, 3.8%).

Weekly fatalities fell by 12.0% in the past seven days, with 4 514 new deaths recorded from 34 countries. More than half of the new deaths were reported from South Africa (2 416, 54.0%), followed by Zimbabwe (489, 11.0%), Algeria (228, 5.1%), Namibia (186, 4.1%), and Malawi (181, 4.0%). All these five countries accounted for 76.0% of the new deaths recorded in the past week. Other countries reporting 20 or more new deaths in this period include: Mozambique (180), Zambia (134), Uganda (106), Senegal (86), Botswana (84), Kenya (81), Rwanda (79), Eswatini (46), Mauritania (32), Angola (32), Burundi (30), Guinea (26), and Ethiopia (21). Table 1 shows other 16 countries reporting fewer than 20 deaths in the past seven days.

Since 25 February 2020, when the COVID-19 pandemic was declared in the African Region, the cumulative number of confirmed COVID-19 cases is nearly 5 million. More than 4.3 million recoveries have been recorded, giving a recovery rate of 89.0%. The total number of deaths is now at 117 304.

Nineteen countries are still experiencing a resurgence of COVID-19 pandemic; Algeria, Botswana, Burundi, Democratic Republic of the Congo, Eswatini, Gambia, Guinea, Guinea-Bissau, Kenya, Malawi, Mauritania, Mauritius, Mozambique, Namibia, Rwanda, Senegal, South Africa, Zambia, and Zimbabwe. Namibia, South Africa and Zambia have now seen a stable decline in new cases during the past two weeks, though case numbers remain high. Some countries, including Eritrea, Liberia, Sierra Leone and Uganda do not meet the criteria for a resurgence after four weeks of a continuous decline in new cases.

The highest COVID-19 case incidence in the region has been recorded in South Africa (2 456 184 cases, 50.0%), followed by Ethiopia 280 565 (5.7%), Kenya 203 680 (4.1%), Zambia 196 293 (4.0%), and Nigeria 174 315 (3.5%), all accounting for (3 311 037, 67.3%) of total cases. South Africa also has the

highest number of deaths in the region (72 191 deaths, 62.0%); followed by Ethiopia (4 390, 4.0%), Algeria (4 291, 3.7%), Kenya (3 946, 3.4%), and Zimbabwe (3 583, 3.1%). These five countries account for 73.4% (86 082) of all deaths reported in the region. Cabo Verde and Seychelles all have high attack rates, with a high proportion of people infected.

A total of 432 new health worker infections were reported during this reporting period. Of these, Mozambique (277), reported the highest number, followed by Malawi (76), Namibia (71), and Eswatini (8). Currently, there have been 116 167 COVID-19 infections (2.4% of all cases) among health workers in the entire region, with South Africa accounting for about 48.4% (56 180) of the total cases. Algeria (11 936, 10.3%), Kenya (5 777, 5.0%), Ghana (4 763, 4.1%) and Zimbabwe (4 391, 3.8%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. Algeria (7.0%), Niger (6.3%), Chad (6.0%), Togo (6.0%), and Seychelles (5.1%) have the highest country specific proportion of health worker infections. Only Eritrea has not reported any healthcare worker infections.

The African Continent has recorded over 6.8 million cases of COVID-19, with over 171 000 deaths (case fatality ratio 2.5%) and nearly 6 million people have recovered. The African continent accounts for 3.4% of global cases and 4.0% of global deaths, while the WHO African Region, which includes sub-Saharan Africa and Algeria, accounts for 2.4% of global cases and 2.7% of global deaths, making it one of the least affected regions in the world after the WHO Western Pacific Region.

All countries in the African region are experiencing community transmission, of which nine countries (20.0%) including; Botswana, Burundi, Eswatini, Cabo Verde, Namibia, Seychelles, South Africa, Zambia and Zimbabwe have uncontrolled transmission, 13 (28.3%) have high transmission, 15 (33.0%) have moderate transmission and nine (20.0%) countries have low transmission.

Globally, around 4 billion doses of the COVID-19 vaccines have been administered, of which approximately 1.6% have been administered in Africa. This equates to a cumulative total of 47 doses per 100 people worldwide, 92 doses/100 in high-income countries, 4.7 doses/100 in Africa and 3 doses/100 in sub-Saharan Africa. High-income countries have administered 61 times more doses per person than low-income countries.

SITUATION INTERPRETATION

The COVID-19 third wave continues in the African region even though there has been an observed decline in cases in the past two weeks. This decline is largely driven by a rapid fall in case incidence in countries in the southern part of the region; Botswana, Namibia, South Africa, Zambia and Zimbabwe. Nineteen countries in the region, are still undergoing a resurgence. Even with this recorded decline, case incidence remains high, and countries continue to experience an overwhelming situation on their health systems. The pandemic has been mostly concentrated in urban areas where populations are highly mobile, with high population

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densities, and large urban slums. In addition, the recorded CFR has been mostly high in rural areas probably due to inability to access optimal treatment services.

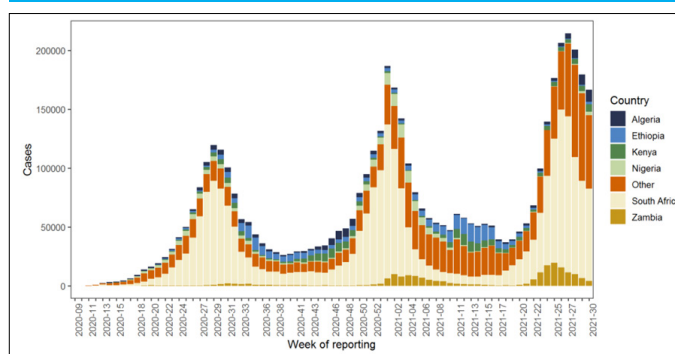
WHO is coordinating the regional response, and is constantly advising countries on critical preparedness, readiness and response actions for COVID-19, surveillance, case investigation and providing guidance on clinical management. Globally, WHO has developed 400 technical guidance documents, and the WHO Regional Office has adapted key documents to regional and country contexts.

PROPOSED ACTIONS

- The WHO advises member states to adhere to the basic precautionary measures that include; getting vaccinated, maintaining physical distancing, cleaning hands, avoiding crowded and closed spaces, and wearing a face mask to prevent the spread of disease. Member states need to maintain strong surveillance and detection systems,

reassess and boost treatment capacity, and step up the supply of critical medicines, including medical oxygen for the treatment of severely ill patients. WHO is calling on the global community and key stakeholders to ensure that all Member States fully vaccinate at least 10.0% of their vulnerable populations by September, and 30.0% by the end of 2021.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by reporting date, 25 February 2020 – 1 August 2021
($n = 4\,917\,071$)



Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 1 August 2021

Country	Total Cases	Total Deaths	Recovered Cases	Case Fatality Ratio (%)	Health Worker infections
South Africa	2 456 184	72 191	2 230 871	2.9	56 180
Ethiopia	280 565	4 390	263 587	1.6	3 354
Kenya	203 680	3 946	189 131	1.9	5 777
Zambia	196 293	3 406	188 106	1.7	1 121
Nigeria	174 315	2 149	165 015	1.2	3 175
Algeria	172 564	4 291	116 009	2.5	11 936
Mozambique	123 541	1 462	90 845	1.2	4 112
Namibia	119 285	3 057	95 913	2.6	4 024
Zimbabwe	109 546	3 583	76 665	3.3	4 391
Botswana	106 690	1 569	95 323	1.5	61
Ghana	103 019	823	97 213	0.8	4 763
Uganda	94 195	2 696	84 052	2.9	1 987
Cameroon	82 064	1 334	80 588	1.6	2 818
Rwanda	71 346	821	45 194	1.2	682
Senegal	63 002	1 367	47 579	2.2	419
Malawi	52 631	1 661	38 147	3.2	1 977
Côte d'Ivoire	50 278	330	49 389	0.7	943
Democratic Republic of the Congo	49 917	1 038	29 944	2.1	256
Angola	42 815	1 016	37 397	2.4	939
Madagascar	42 735	947	41 788	2.2	70
Cabo Verde	33 822	298	33 036	0.9	140
Eswatini	26 220	798	21 047	3.0	658
Mauritania	25 973	567	22 406	2.2	24
Guinea	25 914	232	24 327	0.9	682
Gabon	25 384	164	25 166	0.6	345
Seychelles	18 056	86	17 263	0.5	912
Togo	15 870	153	14 493	1.0	891
Mali	14 588	533	13 948	3.7	87
Lesotho	13 603	377	6 664	2.8	473
Burkina Faso	13 588	169	13 380	1.2	288
Congo	13 216	178	12 519	1.3	203
South Sudan	11 063	119	10 799	1.1	294
Equatorial Guinea	8 880	123	8 637	1.4	416
Benin	8 394	108	8 136	1.3	139
Gambia	7 962	213	6 848	2.7	142
Burundi	7 505	38	6 723	0.5	38
Central African Republic	7 151	98	7 053	1.4	1
Eritrea	6 547	35	6 444	0.5	0
Sierra Leone	6 287	120	4 277	1.9	260
Niger	5 616	195	5 338	3.5	355
Liberia	5 404	148	2 715	2.7	231
Chad	4 973	174	4 793	3.5	292
Guinea-Bissau	4 498	76	3 968	1.7	23
Mauritius	4 393	20	2 427	0.5	30
Comoros	4 028	147	3 869	3.6	155
Sao Tome and Principe	2 454	37	2 358	1.5	102
United Republic of Tanzania	1 017	21	180	2.1	1
Cumulative Cases (N=47)	4 917 071	117 304	4 351 570	2.4	116 167

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

EVENT DESCRIPTION

The protracted outbreak of hepatitis E Virus (HEV) in Namibia, declared on 14 December 2017 in Windhoek, Khomas region, has shown a strong declining trend in the past three months. From 5 to 18 July 2021, only one hepatitis E case was reported country-wide from Khomas region, compared to zero cases reported in the preceding two weeks (21 June to 4 July 2021). During the last eight weeks (24 May to 18 July 2021), a total of 12 HEV cases were reported in the entire country, with Khomas region reporting 9 (76.9%), of which eight were suspected, while one was epi-linked. Otjozondjupa, Erongo and Omusati regions recorded 1 (7.7%) case each. The rest of the regions did not report any case. Since the outbreak began, cases have been reported mainly from informal settlements such as Havana and Goreangab in Windhoek, DRC in Swakopmund and Kuseibmund in Walvisbay and similar settings in areas where access to potable water, sanitation and hygiene is limited.

As of 18 July 2021, a cumulative total of 8 081 cases, with 66 deaths (case fatality ratio 0.8%) have been reported. Of these, 2 117 (26.2%) are laboratory confirmed, 4 741 (58.7%) epidemiologically-linked and 1 222 (15.1%) suspected cases. Most cases were reported from Khomas Region, which accounted for 4 996 (62%) of reported cases, followed by Erongo (1 716; 21.2%), with the rest of the 13 affected regions accounting for 1 369 (17%) of the reported cases.

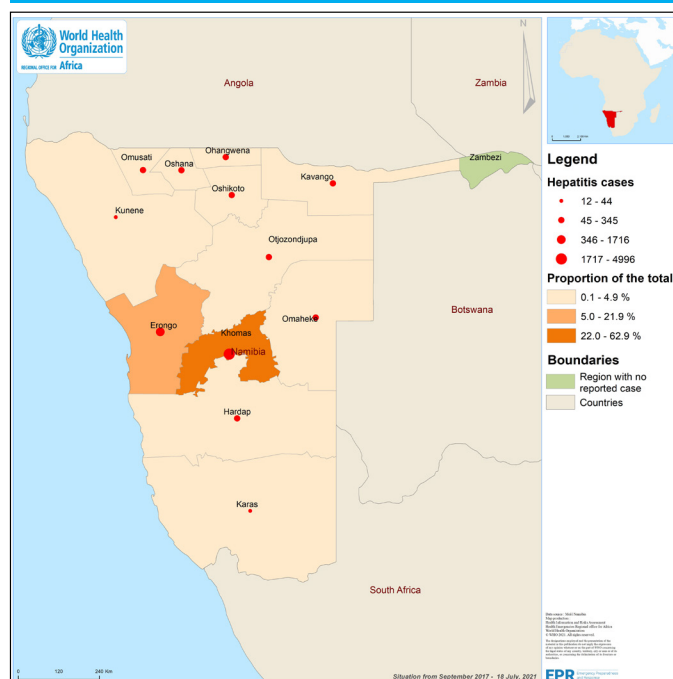
Most cases (5 758; 71.3%) have been reported in the age group 20-39 and most are in males (4 785; 59.2%) compared to females (3 296; 41.0%). Among the 66 deaths, 27 are maternal deaths, representing 41% of all hepatitis E deaths and 6.2% of all reported maternal cases during this period.

The number of new cases reported per week has been on a steady decline, with only sporadic cases reported since the start of 2021 compared to the previous years of the outbreak. One case was reported during the first two weeks of May compared to five cases reported in the last two weeks of April indicating a decreasing trend.

PUBLIC HEALTH ACTIONS

- The Namibian Ministry of Health and Social Services (MoHSS) together with the WHO country office conducted an intra action review and support supervision in six regions. This was aimed at assessing and strengthening the response activities.
- Health authorities conducted a two-day training on the use of hepatitis E rapid diagnostic test kits in the six priority regions.
- Ninety healthcare workers made up of pediatricians, medical officers, medical interns, lectures, registered nurses and midwives were enrolled on management of severe acute malnutrition.
- A cross border meeting was held between the Kavango regions in Namibia and Cuando Cubango Province in Angola to strengthen health interventions and prevention of Hepatitis E.
- Regional and district teams are conducting active surveillance to trace cases of HEV weekly.

Distribution of Hepatitis E cases in Namibia, as of 18 July 2021



- Community meetings are held to provide risk communication information.
- Radio talk shows in the local languages are held to sensitize communities on HEV.
- Infection control and prevention education communication materials have been distributed.
- Diagnostic supplies have been procured for the rapid detection and confirmatory testing of hepatitis A and E.
- Community meetings are held to provide risk communication information.
- Radio talk shows in the local languages are held to sensitize communities on HEV.
- Infection control and prevention education communication materials have been distributed and community led sanitation activities continue in the region to combat open defecation.

SITUATION INTERPRETATION

The significant decline in new hepatitis E cases across the most affected regions in Namibia is encouraging after a prolonged increase in cases. However, the conditions that led to the outbreak are still present, with challenges around inadequate water, sanitation and hygiene interventions to improve access to safe drinking water and proper sanitation in affected urban informal settlements. Another challenge remains around, inadequate risk communication activities. In addition, the continued response to COVID-19, particularly with currently increasing case numbers, has resulted in the MoHSS and partner organizations focusing entirely on the pandemic, with fewer response activities towards the hepatitis E outbreak.

PROPOSED ACTIONS

- Namibian authorities must urgently address the problems with inadequate safe water supplies and poor sanitation in informal settlements across the country in order to prevent further

outbreaks of water-borne diseases. The Ministry of Health and Social Services should continue to strengthen and sustain the implementation of hepatitis E response activities to enable containment and early detection of any possible resurgence.



From left UNICEF Representative, Ms Rachel Odette, Namibia WHO Country Representative, Dr Charles Sagoe-Moses and the Minister of Health and Social Services, Dr Benhard Haufiku in Havana Settlement

EVENT DESCRIPTION

The southern part of Madagascar known as Grand Sud has been greatly affected by a food crisis. As of May 2021, an estimated 1.3 million people were in need of food assistance classified as Integrated Food Security Phase Classification (IPC) Phase 3 and above. Of those, 14 000 people were classified as IPC Phase 5 or catastrophically food insecure. All 10 districts of Grand Sud have been affected with the epicentre of the crisis occurring in Amboasary Atsimo district.

According to World Food Programme, Madagascar's famine crisis has been caused mostly by the effects of climate change. The country experiences extreme weather conditions including cyclones, floods, and droughts which the latter has become the most severe in the Grand Sud area of Madagascar since 1981. For three consecutive years, the area has experienced multiple episodes of drought which has made life difficult for the agriculture-dependent citizens that live there. In addition to the lack of food production, the droughts have caused the decreased availability of agricultural jobs. People who also migrate to other urban areas for work have not been able to earn income as before due to the effects of the ongoing COVID-19 pandemic. Cases of COVID surged during April 2021 but peaked in May and have since then declined, yet problems also persist with increasing food costs during institution of lockdown measures. Sandstorms and pest infestations, namely locusts, have also contributed to the loss in food production. The crisis has also caused the displacement of people trying to reach assistance in several districts, and criminality leading people to engage in risky behaviours like cattle raiding, theft, prostitution, child labour, child marriage, etc. In addition to COVID-19, other disease outbreaks in the country exist like malaria, Rift Valley fever, polio, and acute watery diarrhoea.

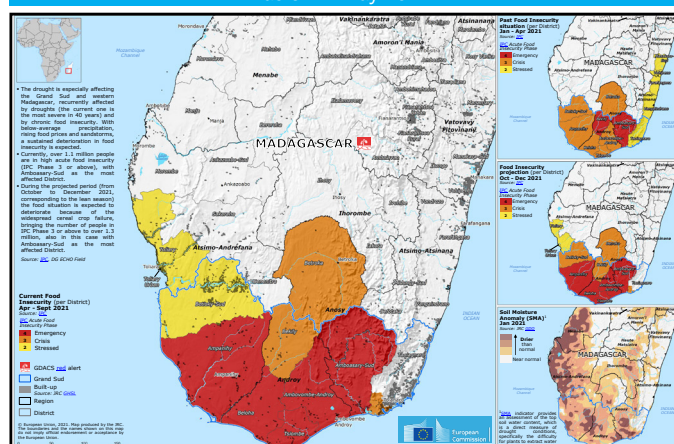
The food crisis has undoubtedly caused health issues for people living in the area and is projected to cause an estimated 501 000 children aged 6-59 months to have acute malnutrition (390 000 children to have moderate acute malnutrition and 111 000 children to have severe acute malnutrition) between May 2021 and April 2022 according to IPC reports. The key drivers of acute malnutrition in Grand Sud include (1) the acute food insecurity, (2) inadequate food intake with 9 children in 10 not having access to a diet adequate for their physical growth, (3) poor access to water and sanitation (only 2.9% of the population in the 10 most affected districts have access to improved sanitation facilities while 57% do not use improved drinking water sources), and (4) delayed introduction of food supplements in only 51% of children 6 months and more in some districts.

PUBLIC HEALTH ACTIONS

- A Flash Appeal was launched in January 2021 to support the governmental priorities and response plan (including health sector response) providing life-saving assistance to the people in southern Madagascar via United Nations agencies, the Red Cross, and non-governmental organizations. The initial Flash Appeal ran through May 2021 and is being revised to reflect the ongoing crisis which is expected to last until at least April 2022.
- The government has set short, medium, and long-term targets for aid projects in order to meet a range of needs.

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A snapshot of the food insecurity and drought in Grand Sud, Madagascar as of 11 May 2021



- Infrastructure projects like road improvements and water pipeline installations have so far been proposed.
- Regular coordination meetings are held for the Health Cluster where response activities are monitored and harmonized.
- A joint assessment mission was conducted in Grand Sud.
- Critical food aid rations were received by more than 829 000 people and an estimated 188 000 children and pregnant and lactating women received nutritional support or treatment required.
- Water, sanitation, and hygiene services are being provided by partners as well as dissemination of hygiene kits.
- Partners are providing people with prevention of gender-based violence and reproductive health awareness campaigns.

SITUATION INTERPRETATION

The food insecurity situation in southern Madagascar has reached extreme levels that have not been seen in many years. While the government and humanitarian actors have responded with aid since the beginning of 2021, the situation remains critical and will require more assistance. While the main contributor seems to be a prolonged drought caused by climate change, it is difficult to predict when the crisis might improve.

PROPOSED ACTIONS

- Immediate access to food aid should reach those who are most in need, particularly those in IPC Phase 5 (or catastrophic) classification to address issues of malnutrition among the population and risk groups. Nutritional and medical attention should be prioritized for children, pregnant women and lactating mothers. Priorities should also focus on providing water, sanitation, and hygiene services in order to mitigate outbreak scenarios of infectious disease. Furthermore, humanitarian actor security should be supported in order for them to access the populations that are most in need. While these might be some of the immediate proposed actions, further long-term solutions will be required to address the effects of climate change such as drought-tolerant farming strategies, pipeline installations, and other resilience activities.

[Go to map of the outbreaks](#)

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
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	1-Aug-21	172 564	172 564	4 291	2.50%
From 25 February 2020 to 1 August 2021, a total of 172 564 confirmed cases of COVID-19 with 4 291 deaths (CFR 2.5%) have been reported from Algeria. A total of 116 009 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	1-Aug-21	42 815	42 815	1 016	2.40%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 1 August 2021, a total of 42 815 confirmed COVID-19 cases have been reported in the country with 1 016 deaths and 37 397 recoveries.									
Angola	Dengue	Ungraded	24-Jun-21	10-Jun-21	11-Jun-21	86	38	0	0.00%
A screening activity was held at Cacuaco Municipal Hospital from 10-11 June 2021 to detect main febrile icteric syndromes. A total of 86 samples were collected from users aged 0-55 years. Of these 38 (44%) were positive for dengue. Cases exhibiting haemorrhagic features were identified by the laboratory as DENV-2 which is endemic to Luanda.									
Angola	Measles	Ungraded	4-May-19	1-Jan-21	6-May-21	241	81	1	0.40%
In 2020, Angola reported a total of 1 220 suspected cases between January and August of which 1 008 have been confirmed, and 5 deaths (CFR 0.4%). From January to Epi week 18 2021, Angola reported 241 suspected cases have been reported in 12 health districts of which 81 were confirmed and one died (CFR 1.2%), 40.7% < 5 years, 24.6% 5- 9 years and. Five districts with confirmed measles outbreaks : Banga, Caimbambo, Uige, Cuito Samba and Caju. 96.0% are either zero dose or with unknown vaccination status									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	30-Jul-21	133	133	0	0.00%
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	26-Jul-21	8 394	8 394	108	1.30%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 26 July 2021, a total of 8 394 cases have been reported in the country with 108 deaths and 8 136 recoveries.									
Benin	Meningitis	Ungraded	1-Jun-21	1-Jan-21	4-Jul-21	364	82	28	7.70%
A total of 364 cases and 28 deaths (CFR=7.7%) resulting from meningitis were reported from Week 1 to week 26 of 2021 in Benin. Four districts are on alert and one district reported passing the epidemic threshold.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	30-Jul-21	13	13	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Two cases have been reported so far in 2021. There were three 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	26-Jul-21	106 690	106 690	1 569	1.50%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 26 July 2021, a total of 106 690 confirmed COVID-19 cases were reported in the country including 1 569 deaths and 95 323 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	30-Jun-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 1 312 071 internally displaced persons and 22 289 refugees registered as of 30 June 2021 in all 13 regions in the country. Over 200K people became IDPs from April-June 2021. The regions most affected were Central North, Sahel, and Eastern. The presence of jihadist groups and self-defense 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.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	31-Jul-21	13 588	13 588	169	1.20%
Between 9 March 2020 and 31 July 2021, a total of 13 588 confirmed cases of COVID-19 with 169 deaths and 13 380 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	30-Jul-21	66	66	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There is one case reported in 2021, and in 2020, 65 were reported. 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	31-Jul-21	7 505	7 505	9	0.10%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 31 July 2021, the total number of confirmed COVID-19 cases is 7 505, including nine deaths and 6 723 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	1-Jan-21	24-Jul-21	437	393	0	0.00%
The measles epidemic has been declared since November 2019 in camps hosting Congolese refugees and then spread to other communities. In 2020, a total of 1,968 cases were reported in 46 of the country's 47 districts throughout 2020, 1,585 confirmed, 6 deaths. As of week 28 of 2021, Burundi has reported a total of 437 suspected cases, 393 reported by case-by-case surveillance and no death, 60 confirmed by IgM+ 244 by epidemiological link and 6 clinical cases. Six districts are currently in outbreak : Bubanza, Mpanda, Bugarama, Musingaet									

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	8-Jul-21	-	-	-	-
According to OCHA reports, an estimated 1.2 million people need assistance, 322 000 people are internally displaced, 67K are camp refugees, and 46K are refugees in the region not in camps. IDPs have been leaving the Mayo-Sava division during the last months due to attacks by NSAG. There have been attacks in Goudoumboul village leading 1 154 IDPs to join 1 600 others in Kouyape village as of 8 July. IDPs currently have need for water, hygiene, sanitation, food, shelter, protection, and education services.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	2-Jul-21	-	-	-	-
Conflict and violence in the North-West and South-West regions continue to cause mass displacement in the area with more than 53K people fleeing their homes during January-May 2021. According to reports from OCHA as of 31 May 2021, there were an estimated 712.8K IDPs, 333.9K returnees, and 67.4K Cameroon refugees in Nigeria. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. In May 2021, there were 14 reported incidents of health facility attacks including kidnapping of personnel and removal of patients from facilities.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	21-Jul-21	82 064	82 064	1 334	1.60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 21 July 2021, a total of 82 064 cases have been reported, including 1 334 deaths and 80 588 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-21	18-Jul-21	1 496	319	21	1.40%
From Epi week 1 to Epi week 28 of 2021 (18 July), Cameroon has reported 1 496 suspected with 21 deaths (CFR 1.4%). Out of 756 investigated, 319 was positive including 161 cases were IgM+, 18 clinically compatible and 139 epidemiologically linked; 56% of the children are below 5 years of age and 72% are zero-dose. Seventeen districts with confirmed outbreak spread across 7 regions of country.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	30-Jul-21	7	7	0	0.00%
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	4-Jan-21	13-Jun-21	9	9	1	11.10%
On 11 January 2021, the Centre Pasteur du Cameroon confirmed a case of yellow fever by Plaque Reduction Neutralization Test (PRNT) in the health district (HD) of Dschang. The case was a 36-year-old female resident of the Doumbouo health area, Dschang HD, whose onset of symptoms occurred on 4 January 2021 with jaundice. She died on 1 February 2021 following surgery for a gallbladder abscess. As of 13 June 2021, a total of 9 yellow fever cases confirmed by PRNT have been reported in 9 HD across 6 regions of Cameroon: Adamaoua region (Ngaoundere rural HD), Far North region (Maga, Mogode, Yagoua HD), Littoral region (Yabassi HD), North region (Guider HD), North-West region (Bamenda HD) and West region (Bafang and Dschang HD).									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	1-Aug-21	33 822	33 822	298	0.90%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 01 August 2021, a total of 33 822 confirmed COVID-19 cases including 298 deaths and 33 036 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	21-Jul-21	-	-	-	-
According to OCHA figures, 2.8 million people are in need of assistance, 717K people are internally displaced as of 30 June, and 701K persons are refugees in neighboring countries. In June 2021, 28 790 new IDPs were registered mostly in Ndele, Kouli, Bocaranga, Bangui, Bimbo, Zemio, Alindao and Kaga-Bandoro sub-prefectures. Also in June 2021, 39 273 people returned mainly Ippy, Paoua, Zemio, Bangassou, Rafai, Batangafo and the Greater Bangui sub-prefectures. On 4 June 2021, IDPs were threatened by armed groups at the Elevage camp in Bambari in Ouaka Prefecture causing more than 8 500 to flee to nearby villages which are considered to be violations of international humanitarian law. Accidents involving explosive devices have been on the rise since mid-April 2021, particularly in the western region where conflict has intensified.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	27-Jul-21	7 151	7 151	98	1.40%
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 27 July 2021, a total of 7 151 confirmed cases, 98 deaths and 7 103 recovered were reported.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	18-Jul-21	1 861	523	4	0.20%
From 1st January up to 18 July 2021 : 1 861 suspected cases have been reported, 149 cases with blood samples out of a total 587 investigated, 523 confirmed cases (45 IgM+ cases, 438 by epidemiological link and 40 compatible cases) and 4 deaths (CFR : 0.2%). Five health districts (out of 35) have reached the epidemic threshold (Berbérati, Sangha-Mbaéré, Nanga-Boguila, Batangafo and Mbaiki); 49% are children < 5 years; 42% not vaccinated. From the beginning of outbreak in 2019 to 18 July 2021, a total of 35 377 suspected cases have been notified and 197 deaths (CFR : 0.56%) within affected districts.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	30-Jul-21	25	25	0	0.00%
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	1-Aug-21	4 973	4 973	174	3.50%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 1st August 2021, a total of 4 973 confirmed COVID-19 cases were reported in the country including 174 deaths and 4 793 cases who have recovered.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-May-21	122	14	6	4.90%
Since January 1, 2018, a total of 122 cases have been reported by 3 provinces (N'Djamena, Borkou and Tibesti). N'Djamena's cases are from Miski's self-referral. For the year 2020 the country registered 74 cases including 3 deaths. Since the beginning of 2021 up to 21 May 2021, 25 cases have been reported including 15 in Bardai, 7 in Faya and 3 in N'djamena. 14 cases are confirmed by PCR and rapid tests.									
Chad	Measles	Ungraded	24-May-18	1-Jan-21	18-Jul-21	1 999	200	8	0.40%
In 2020, Chad reported 8 785 cases, with 363 confirmed cases and 41 deaths. Since 1 January 2021 up to Epi week 28 (18 July), there have been 1 999 suspected cases from 92 out of 129 districts in the country (71% of districts), 405 cases investigated with blood samples recorded, 200 of which were confirmed by IgM and 08 deaths from 4 districts (CFR 0.4%), 21 districts in epidemic in 2021.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	30-Jul-21	114	114	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in this week. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 8 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	31-Jul-21	4 028	4 028	147	3.60%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 31 July 2021, a total of 4 028 confirmed COVID-19 cases, including 147 deaths and 3 869 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	29-Jul-21	13 216	13 216	178	1.30%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 29 July 2021, a total of 13 216 cases including 178 deaths and 12 519 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	30-Jul-21	4	4	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, 2 cases have been reported in 2021. There were two cases reported in 2020.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	1-Aug-21	50 278	50 278	330	0.70%
Since 11 March 2020, a total of 50 278 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 330 deaths, and a total of 49 389 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	30-Jul-21	61	61	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The number of 2020 cases is still 61.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	27-Jun-21	-	-	-	-
As of 27 June 2021, there are an estimated 5.2 million people internally displaced and 19.6 million are in need of emergency food assistance in the entire country. In Ituri province alone, there were 1 375 071 internally displaced persons, however, during the past 18 months 1 097 108 people have returned to their places of origin. The situation of displaced families in Boga and Chiabi is precarious, marked by lack of food, poor housing conditions and difficulties in accessing health care. In North Kivu province more than 6 039 households have been identified in Goma and Nyiragongo in temporary regroupment sites. Another 7 500 people are with host families in Minova, Rutshuru and Kirotshu, following the Nyiragongo volcano eruption crisis of 22 May 2021. A total of 1 191 shelters were built to accommodate the victims at the temporary site in Nyiragongo territory.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	27-Jun-21	3 516	-	93	2.60%
In 2021, from epidemiological week 1 to 25 (ending 27 June 2021), 3 516 suspected cholera cases including 93 deaths (case-fatality rate 2.6%) were recorded in 76 health zones across 14 provinces of the Democratic Republic of the Congo. This is a significant decrease (70.1%) in the number of weekly cholera cases compared to the same period in 2020. In 2020, a total of 30 304 suspected cholera cases including 514 deaths (case fatality 1.7%) were reported in 179 health zones across 23 provinces.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	30-Jul-21	49 917	49 916	1 038	2.10%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 49 916 confirmed cases and one probable case, including 1 038 deaths have been reported. A total of 29 944 people have recovered.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	27-Jun-21	8 151	39	289	3.50%
Since epidemiological week 1 up to week 25 in 2021, 1 894 cases have been reported with 60 deaths. Between epidemiological week 1 and week 53 of 2020, 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).									

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	Plague	Ungraded	12-Mar-19	1-Jan-20	27-Jun-21	693	-	57	8.20%
From 22 April 2021, a cluster of deaths due to suspected pneumonic plague were recorded in the health zone of Fataki, Ituri province, Democratic Republic of the Congo. The patients presented with headache, fever, chills, coughing sometimes with blood, dyspnoea, vomiting blood, etc. An investigation was conducted during which suspected cases were identified and samples taken to be shipped to the Institut National de Recherche Biomédicale (INRB) in Kinshasa for confirmatory testing. From 22 April to 27 June 2021, 37 suspected pneumonic plague cases including 12 deaths were recorded in two health areas (Bu-Kachele and Bule) of the Fataki health zone. From epidemiological week 1 to 25, 2021 (ending on 27 June), 117 suspected plague cases including 13 deaths were reported in eight health zones in Ituri province. From January to December 2020, 461 suspected plague cases of which 31 deaths were reported in eight health zones of Ituri. The health zones of Biringi, Rethy, and Aru reported the most cases.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	30-Jul-21	199	199	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, 9 cases have been reported in 2021. The total number of cases for 2020, 2019, and 2018 remains at 81, 89, and 20, respectively.									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	3-Jul-21	716 494	1	198	0.00%
In 2021, from Epi week 1 to 23, 716 494 suspected cases of typhoid fever, including 198 deaths (CFR 0.0%), were recorded in selected health zones of the Democratic Republic of Congo. Of the 204 tests performed (191 blood cultures and 13 faecal cultures), 1 test was positive. In 2020, a total of 715 920 suspected cases of typhoid fever were reported, including 178 deaths (CFR 0.0%).									
Democratic Republic of the Congo	Yellow Fever	Ungraded	21-Apr-21	21-Apr-21	18-Jul-21	2	2	0	0.00%
On 18 July 2021, two Yellow fever cases tested positive by Plaque Reduction Neutralization Test (PRNT) at Centre Pasteur in Cameroon (CPC). The first case is a 34-year-old male from the Abuzi health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against Yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. In addition, confirmatory results are pending for three other presumptive positive cases from Equateur, Kinshasa and North Ubangi provinces.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	24-Jul-21	8 880	8 880	123	1.40%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 24 July 2021, a total of 8 880 cases have been reported in the country with 123 deaths and 8 637 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	31-Jul-21	6 547	6 547	35	0.50%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 31 July 2021, a total of 6 547 confirmed COVID-19 cases with 35 deaths were reported in the country. A total of 6 444 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	1-Aug-21	26 220	26 220	798	3.00%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 1 August 2021, a total of 26 220 cases have been reported in the country including 21 047 recoveries. A total of 798 associated deaths have been reported.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	15-Jul-21	-	-	-	-
According to reports from OCHA, an estimated 5.2 million people are in need of humanitarian assistance and more than 63K refugees have fled to Sudan since fighting began in November 2020. Access remains a challenge since roads have been curtailed over the last weeks. About 75% of the population is in zones where humanitarian access can be compared to 30% in May 2021. The UN Humanitarian Air Service, which was previously shut down, was allowed passage once again to the Tigray area to transport goods and humanitarian aid workers. In addition to insecurity, partners continue to flag challenges with the lack of banking systems, fuel availability, electricity, and communication lines to respond across Tigray.									
Ethiopia	Cholera	Ungraded	14-May-19	12-May-19	2-May-21	19 000	19 000	304	1.60%
Ethiopia is affected by cholera outbreak since April 2019 with over 19 000 cases reported from 11 regions with an overall CFR of 1.6%. In 2021, a total of 1 758 cases and 15 deaths (CFR 0.9%) have been reported as of 2 May 2021									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	1-Aug-21	280 565	280 565	4 390	1.60%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 280 565 cases of COVID-19 as of 1st August 2021, with 4 390 deaths and 263 587 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-21	1-Aug-21	1 400	767	4	0.30%
In 2021, as of 1 August (week 31), a total of 1 400 cases have been reported of which 741 have been confirmed (519 epi-link, 211 IgM and 33 measles compatible) and 4 deaths recorded (CFR 0.4%). Out of the 1 400 suspected cases, 725 were under 5 years of age, 437 were between 5 and 14 years of age and 238 were over 15 years of age.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	30-Jul-21	71	71	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. 18 cases have been reported so far in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Unknown disease related to camels	Ungraded	12-Jun-21	8-May-21	12-Jun-21	198	-	0	0.00%
An outbreak was detected in Oromia and Somali regions of Ethiopia related to camels. In Oromia, 158 human cases were reported and a further 40 cases were reported in Somali state of Ethiopia as of 12 June 2021. Out of 40 hospitalized cases 35 were treated and discharged. No deaths have been reported. Symptoms included diarrhoea, fever and vomiting associated with the consumption of camel meat. Samples from camels and human cases have been taken and are undergoing laboratory investigation.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	30-Jul-21	25 384	25 384	164	0.60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 30 July 2021, a total of 25 384 cases including 164 deaths and 25 166 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	27-Jul-21	7 962	7 962	213	2.70%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 27 Jul 2021, a total of 7 962 confirmed COVID-19 cases including 213 deaths, and 6 848 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	27-Jul-21	103 019	103 019	823	0.80%
As of 27 Jul 2021, a total of 103 019 confirmed COVID-19 cases have been reported in Ghana. There have been 823 deaths and 97 213 recoveries reported.									
Ghana	Meningitis	Ungraded	1-Jan-21	1-Jan-21	4-Jul-21	220	-	3	1.40%
Since the beginning of the year 2021, 220 cases of meningitis have been reported with 3 deaths (CFR=1.4%). The Nandom district in the Upper West Region crossed the epidemic threshold and four other districts are on alert (Lawra, Lambussie, Nadowli-Kaleo, Wa Municipal). In Ghana, the Streptococcus pneumoniae is the germ mostly identified by the country laboratory.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	30-Jul-21	31	31	0	0.00%
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 remain 19. One cVDPV2 positive environmental sample was reported in the Eastern province.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	31-Jul-21	25 914	25 914	354	1.40%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 31 July 2021, a total of 25 914 cases including 24 327 recovered cases and 354 deaths have been reported in the country.									
Guinea	Lassa Fever	Ungraded	8-May-21	8-May-21	17-Jul-21	4	4	2	50.00%
To date, there have been a total of 4 confirmed cases and 2 deaths (CFR=50%): the first case (man of 23 yrs-old) was notified on 8 May 2021 at the Yomou prefecture hospital, a resident of Yomou prefecture. The patient was also confirmed to be positive for COVID-19 and later died. Contact tracing of 88 people was done, and no secondary cases found. On 17 June 2021, a second confirmed case (woman of 75 yrs-old) was detected at Nzérékoré Regional Hospital, this case was from Beyla prefecture and died the same day. A listing of 111 contacts have been done for follow up. On 28 June 2021 a third case was confirmed (man of 25 yrs-old) , a resident of Nzerekore prefecture , 57 contacts listed are under follow up. On 1 Jul 2021 a fourth case was confirmed (a man of 52 yrs-old) , resident also of Nzerekore prefecture , a listing of 21 contacts was done and are being followed . However, the prefecture of Bheeta is regarded as active, with the prefectures of Yomou-Centre, Péla, Yomou and Bignamou on alert.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-21	19-Jul-21	1 393	102	4	0.30%
In 2021, as of 19 July (Epi week 27), 1 393 suspected cases have been reported, 279 samples taken, 233 samples tested of which 102 tested positive, 120 negative and 11 undetermined; four deaths have been reported. In 2020 at the same period, 5 835 suspected cases, 820 cases sampled, 805 samples tested of which 512 positive, 247 negative and 46 undetermined; 15 deaths have been reported. Since 2020, a total of 7 228 suspected cases, 1 099 tests analysed, 614 confirmed cases, 19 deaths have been reported.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	30-Jul-21	50	50	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	31-Jul-21	4 498	4 498	76	1.70%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 31 August 2021, the country has reported 4 498 confirmed cases of COVID-19 with 3 968 recoveries and 76 deaths.									
Kenya	Cholera	Ungraded		23-May-21	17-Jul-21	36	12	0	0.00%
From 23 May 2021, cholera outbreak has been reported from Garissa and Turkana Counties, recording 36 cases with 12 confirmed by culture and no deaths. In Garissa, the outbreak is from Dagahaley Refugee Camp, Dadaab Sub-County, while in Turkana it is reported from Kalobeyei centre, Turkana west sub-county. Turkana outbreak has been controlled, however the outbreak in Garissa is still ongoing.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	1-Aug-21	203 680	203 680	3 946	1.90%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 1st August 2021, 203 680 confirmed COVID-19 cases including 3 946 deaths and 189 131 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	27-Apr-21	1-Jan-21	25-Jun-21	867	36	2	0.20%
The outbreak has been reported in Mombasa and Mandera Counties, recording 867 cases with 36 confirmed and 2 deaths reported (CFR 0.2 percent).									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	17-Jul-21	873	873	9	1.00%
Since January 2020, a total of 873 visceral leishmaniasis confirmed cases with nine deaths (CFR 1.0 percent), have been reported in seven counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera and Wajir. The outbreak is active in three counties, Mandera, West Pokot and Wajir.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	17-Jul-21	625	30	1	0.20%
As 17 July 2021 (Epi week 27), a total of 625 cases was reported, 30 confirmed cases with one death (CFR 0.2 %) for 2 counties which has reported cases in 2021, West Pokot (4 sub counties affected) and Garissa (1 sub county affected). In West Pokot, the outbreak has been continuous from 2019.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-21	10-Feb-21	23-Jul-21	3	1	0	0.00%
No new cVDPV2 cases 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, inepidemiological week 5 (2021), this child was from Somalia, thus, this was an imported case. Another case from Garissa had been detected and another from Mombasa county in week 6.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	31-Jul-21	13 603	13 603	377	2.80%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 31 Jul 2021, a total of 13 603 cases of COVID-19 have been reported, including 6 664 recoveries and 377 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	17-Jul-21	5 396	5 396	148	2.70%
From 16 March 2020 to 17 July 2021, a total of 5 396 cases including 148 deaths and 2 715 recoveries have been reported from all 15 counties of Liberia. Montserrado County, which hosts the country's capital city, remains at the epicentre of the outbreak.									
Liberia	Lassa fever	Ungraded	23-Jul-21	1-Jan-21	18-Jul-21	71	13	9	12.70%
Between 1 January and 18 July 2021, a total of 71 suspected cases were reported, of which 13 (18.3%) were confirmed, and 9 deaths among confirmed cases . The confirmed cases originated from four counties: namely Bong (3), Grand Bassa (4), Montserrado (1) and Nimba (5). The Public Health Actions taken include active case finding and community engagement, air messages on prevention of Lassa fever and rodents control measures in the affected district in Grand Bassa and Nimba Counties.									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	24-Jul-21	168	107	0	0.00%
In week 29 (week ending 24 July 2021), 6 suspected cases were reported from Montserrado (5) and Bond (1) Counties. Among the 6 suspected cases, 5 cases are <5 years (83%) and 1 case are >5 years (17%). Since the beginning of 2021, 168 total cases were reported of which 107 were confirmed (16 laboratory-confirmed, 80 clinically confirmed and 11 epi-linked), 57 negative and 2 undetermined.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	30-Jul-21	3	3	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week . The country has reported 3 cases.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-21	1-Jan-21	31-Jul-21	-	-	-	-
A prolonged three-year drought in southern Madagascar has contributed to food insecurity issues for an estimated 1.3 million people in the Grand Sud area, of which 14K people were classified as IPC Phase 5 or catastrophically food insecure. About 390K children are expected to have moderate acute malnutrition and 111K children to have severe acute malnutrition from May 2021 to April 2022 if no intervention measures are taken. All 10 districts of Grand Sud have been affected with the epicentre of the crisis occurring in Amboasary Atsimo district.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	31-Jul-21	42 735	42 735	947	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 31 July 2021, a total of 42 735 cases have been reported in the country, out of which 42 385 have recovered and 947 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	8-Mar-21	31-Mar-21	768 181	768 181	-	-
From January 2021 to March 2021, 768 181 cases were reported, 79 out of 114 districts (69.0%) were in outbreak (outbreak threshold: mean +2 standard deviations) and 24 districts on alert (alert threshold: median), considering data available from four previous years. Among the districts which are above the epidemic threshold in the first quarter of 2021, four (districts of Fort Dauphin, Ikongo, Marolambo and Soanieran Ivongo) present a very worrying situation with a duplication of cases compared to the same period of 2020.									
Madagascar	Poliomyelitis (cVDPV2)	Grade 2	28-Apr-21	28-Apr-21	30-Jul-21	6	6	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported this week. So far, there are four cases in 2021 and two from 2020. One cVDPV1 positive environmental sample was reported in Boeni.									
Madagascar	Rift Valley Fever	Ungraded		26-Apr-21	20-May-21	109	10	2	1.80%
On 1 April 2021, the Institut Pasteur in Madagascar confirmed Rift Valley Fever (RVF) by PCR in animals following alerts of abortion cases in ruminants. From 26 April to 20 May 2021, enhanced surveillance for haemorrhagic fevers in humans identified 109 suspected RVF cases in four regions of Madagascar (Vatovavy Fitovinany, Haute Matsiatra, Alaotra Mangoro and Analamanga), including three cases confirmed by PCR, seven by serology, one death among confirmed cases in the Vatovavy Fitovinany region, and one death among suspected cases in the Analamanga region.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	1-Aug-21	52 631	52 631	1 661	-
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 1 August 2021, the country has a total of 52 631 confirmed cases with 1 661 deaths and 38 147 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	30-Jun-21	-	-	-	-
The 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. During May 2021, Mopti (47) reported the most security incidents followed by Gao (28) and Timbuktu (9). Between January and April 2021 there were 61 074 people newly displaced. According to OCHA reports, an estimated 5.9 million people need humanitarian assistance. On 30 June 2021, the United Nations Multidimensional Integrated Stabilization Mission in Mali (MINUSMA) was renewed for one year to continue operations.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	1-Aug-21	14 587	14 587	533	3.70%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 01 August 2021, a total of 14 587 confirmed COVID-19 cases have been reported in the country including 533 deaths and 13 948 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-21	18-Jul-21	1 098	523	2	0.20%
From January 2021 up to Epi week 28 (ending on 18 July 2021), Mali has reported a total of 1 098 suspected cases including two deaths, 910 samples tested of which 523 were positive, 361 negative and 26 undetermined. There is an increase of 50.72% in confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	30-Jul-21	48	48	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. The total cases reported in 2020 is 48.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	1-Aug-21	25 973	25 973	567	2.20%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 1st August 2021, a total of 25 973 cases including 567 deaths and 22 406 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	1-Aug-21	4 393	4 393	20	0.50%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 1st August 2021, a total of 4 393 confirmed COVID-19 cases including 20 deaths and 2427 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Grade 2	1-Jan-20	1-Jan-20	25-Jul-21	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. Five security events were reported from 19-25 July 2021 in Macomia, Muidumbe, Nangade, and Mocimboa da Praia. During 20-23 July 2021, a total of 1 338 internally displaced person (IDPs) arrived in Montepuez, Mueda, Metuge, and Pemba City districts. As of 11 July 2021, the nation-wide estimate of people in need of humanitarian assistance is 1.3 million and there are 732K people displaced. Malaria, febrile syndrome, and diarrhoea remained the top weekly ailments during the 19-25 July.									
Mozambique	Cholera	Ungraded	20-Feb-20	31-Jan-20	27-Jun-21	5 681	5 681	35	0.60%
As of 27 June 2021, there have been a total of 5 681 cases and 35 deaths (case fatality ratio 0.6%) reported in the Cabo Delgado (4 246 cases and 31 deaths) and Nampula (1 435 cases and 4 deaths) provinces. Eight districts for Cabo Delgado province : Mocimboa da Praia (307 cases), Ibo (163 cases), Macomia (166 cases), Pemba (566 cases), Metuge (1 245 cases), Chiure (1 165 cases) and Montepuez (328 cases) and Ancuabe (306 cases). Three districts for Nampula province reported cases : Meconta (630 cases), Nampula (755 cases) and Moma (50 cases).									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	1-Aug-21	123 541	123 541	1 462	1.20%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 1 August 2021, a total of 123 541 confirmed COVID-19 cases were reported in the country including 1 462 deaths and 90 845 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	18-Jul-21	726	77	0	0.00%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 18 July 2021 (week 28) , there were 726 cases reported including 77 confirmed cases and no death. In 2020 at the same period, there were 118 confirmed cases and no death.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	30-Jul-21	119 285	119 285	3 057	0.00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 30 July 2021, a total of 119 285 confirmed cases with 95 913 recovered and 3 057 deaths have been reported.									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	18-Jul-21	8 081	8 081	66	0.80%
The current outbreak in Namibia started in December 2017. As of 18 July 2021, a cumulative total of 8 081 cases (2 117 laboratory-confirmed, 4 741 epidemiologically linked, and 1 222 suspected cases) including 66 deaths (CFR 0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 4 996 (61.8%) of reported cases, followed by Erongo 1 716 (21.2%).									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	2-Jul-21	-	-	-	-
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 Tillabéri region and 328 725 people in the Maradi region). Additionally, IOM reports that between 22-24 June 2021 there were two attacks by non-state armed groups (NSAGs) in the villages of Fantio, Dangazouni, Talbakoira and Tondikwindi (all of the Tillabéri Region) which resulted in 21 deaths and the theft of villagers' livestock. The attacks forced 2 956 people to flee their homes. Of these, 2,040 took refuge in the urban commune of Tera, and 916 in the town of Ouallam. The vast majority (88%) of the displaced populations were women (284) and children (2 310).									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	30-Jul-21	5 616	5 616	195	3.50%
From 19 March 2020 to 30 July 2021, a total of 5 616 cases with 195 deaths have been reported across the country. A total of 5 338 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-21	27-Jun-21	9 095	920	16	0.20%
From January to Epi week 25 of 2021, 9 095 suspected cases have been reported and 16 deaths. Out of suspected cases, 1 583 were investigated including 920 lab confirmed measles cases. 51 of 72 health districts have reported at least 3 confirmed cases per month. Response vaccination took place in 12 health districts (Arlit, Bilma, Dogondoutchi, Tibiri, Gazaoua, Niamey 2, Niamey 3, Niamey 4, Tahoua Com, Ayerou, Balleyara, Tesker) across 8 regions . In 2020, 2 079 cases have been suspected of which 241 lab confirmed (IgM positive) and 4 deaths in 8 regions. In 2019 a total of 10 207 suspected measles cases were reported from eight regions in the country.									
Niger	Meningitis	Ungraded		1-Jan-21	4-Jul-21	1 321	1 321	74	5.60%
Since the beginning of the year 2021 to week 24 ending 20 June, 1 321 cases have been reported with 74 deaths (CFR 5.6%). Two districts have surpassed the epidemic threshold and five districts are on alert.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Oct-18	1-Oct-18	30-Jul-21	20	20	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The total cases of 2020 still 10. There number of cVDPV2 cases reported in 2018 has been corrected to 9, and 1 in 2019.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	6-Jul-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 April and May 2021 leading to harming of civilians and a new wave of population displacement. IOM reports that more than 2 million people have left the affected area to neighbouring Wards and LGAs in May 2021. An estimated 8 million are at risk of displacement, poverty, and threats of violence. The overall security situation remains complex, unpredictable, and volatile as of 6 July 2021 with constrained health vulnerabilities made worse by the COVID-19 pandemic leading to maintain the grading of protracted level 3.									
Nigeria	Cholera	Ungraded	12-Jan-21	12-Jan-21	22-Jul-21	22 130	-	526	2.40%
As of 22 July 2021, 22 130 persons, mostly children, have been affected with 526 deaths yielding a CFR of 2.4%. A total of 19 states have reported cases, however Bauchi, Kano, Sokoto, and Zamfara states have had the highest number of cases. Throughout the outbreak some states have contained the flare ups, however new outbreaks are regularly reported in another states.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	1-Aug-21	174 315	174 315	2 149	1.20%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 01 August 2021, a total of 174 315 confirmed cases with 165 015 recovered and 2 149 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	1-Jan-21	1-Jan-21	9-May-21	275	272	56	20.40%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 18 of 2021, the number of new confirmed cases increased from 8 in week 17 to 10 cases. These were reported from 4 states - Ondo, Edo, Ebonyi, and Bauchi. Cumulatively from week 1 to week 18 of 2021, a total of 272 confirmed cases including 56 deaths have been reported with a case fatality rate of 20.6% across 14 states. This is higher than the same period reported in 2020.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-21	20-Apr-21	6 995	-	50	0.70%
In 2020, Nigeria reported 9 316 confirmed cases, with 55 deaths, CFR 0.6%. From January 2021 to 20 April 2021 (as of epi week 15), 6 995 suspected cases have been reported in Nigeria. The most affected state is Borno with 1 992 cases including 32 deaths, 79% of the cases were below the age of five years. During week 15, 537 were reported with 3 deaths									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	30-Jul-21	109	109	0	0.00%
So far, the number of cases in 2021 is 49 as of 2nd August . There were eight cases reported in 2020 ; 18 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	12-Sep-17	1-Jan-21	30-Jun-21	858	27	1	0.10%
From 1 January 2021 to 30 June 2021, there has been a cumulative total of 858 suspected cases of yellow fever in Nigeria, of which 27 cases have been confirmed, from 312 LGA across 37 states including the Federal Capital Territory (FCT). In 2020, 3 426 suspected cases of yellow fever have been recorded, including 145 confirmed cases, from 495 LGA (64%) across all states and the FCT.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	1-Aug-21	71 346	71 346	821	1.20%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 01 August 2021, a total of 71 346 cases with 821 deaths and 45 194 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	1-Aug-21	2 454	2 454	37	1.50%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 01 August 2021, a total of 2 454 confirmed cases of COVID-19 have been reported, including 37 deaths. A total of 2 358 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	1-Aug-21	63 002	63 002	1 367	2.20%
From 2 March 2020 to 1 Aug 2021, a total of 63 002 confirmed cases of COVID-19 including 1 367 deaths and 47 579 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	30-Jul-21	13	13	0	0.00%
One new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. So far, the total number of 2021 cases is 13.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	24-Jul-21	18 056	18 056	86	0.50%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 24 Jul 2021 a total of 18 056 cases have been confirmed, including 17 263 recoveries and 86 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	1-Aug-21	6 287	6 287	120	1.90%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 1st August 2021, a total of 6 287 confirmed COVID-19 cases were reported in the country including 120 deaths and 4 277 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	3-Apr-21	3	3	0	0.00%
As of 3 April 2021, 28 samples of acute viral haemorrhagic fever were identified and tested. Of those, three returned positive for Lassa fever in Kenema district. All patients who tested positive have recovered. Further epidemiological investigations are currently underway.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	23-Jul-21	14	14		0.00%
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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	1-Aug-21	2 456 184	2 456 184	72 191	3.40%
Since the start of the COVID-19 pandemic in South Africa a cumulative total of 2 456 184 confirmed cases and 72 191 deaths have been reported with 2 230 871 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	2-Jul-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people faced crisis levels of food insecurity phase (IPC) 3 or worse from April to July 2021- a figure that increased by 25% compared to the previous three months. Of the total number, 108K are in IPC 5, 2.4 are in IPC 4, and 4.6 million are in IPC 3. The total number includes 1.9 million acutely malnourished women and children suffering and 1.47 million internally displaced people.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	30-Jun-21	-	-	-	-
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. Humanitarian staff have been the target of surge attacks during April to June 2021 with 4 aid workers killed and at least 95 relocated from sites in Fangak, Magwi, Panyijiar, Pariang, Renk, Torit, and Uror. Roads have also become frequent to ambushes for aid workers and civilians. Additionally, there has been increased violence in the Greater Pibor area following the killing of over 14 civilians in age-set violence in Kongor village on 29 June 2021. There have been security incidents in Greater Tonj including the looting of a humanitarian warehouse and the killing of civilians in Tonj North on 19 June and 2 July 2021, respectively. Killings of civilians also occurred in Tonj South on 27 June 2021.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	31-Jul-21	11 063	11 063	119	1.10%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 31st July 2021, a total of 11 063 confirmed COVID-19 cases were reported in the country including 119 deaths and 10 799 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	3-Jan-18	27-Jun-21	684	684	5	0.70%
The current outbreak in Bentiu UN Protection of Civilians (POC) camp, which started at the beginning of 2018, is ongoing. There were 19 new cases reported during week 25 in 2021. As of 27 June, a total of 684 cases of hepatitis E including five deaths have been reported. There has been an upsurge of HEV cases since the beginning of 2021 which has been mostly attributed to declining water, sanitation and hygiene services in the camp due to reduced funding.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	30-Jun-21	1 313	54	2	0.20%
Since week 38 of 2019 to 30 June 2021 (week 26 of 2021), a total of 1 313 cases of measles were reported including 54 confirmed cases and two deaths. The outbreak is controlled in 9 counties (Tonj East, Juba, Bor, Kapoeta East, Jebel Boma, Aweil East, Wau, Pibor and Ibba). No county has reported outbreak in 2021.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	30-Jul-21	59	59	0	0.00%
no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 59 cVDPV2 cases in the country; 9 in 2021 and 50 in 2020.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	16-Jul-21	609	609	21	3.40%
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 28 June 2021, a total of 609 cases have been reported in the country including 21 deaths. A new bunch of 100 COVID-19 cases was reported in Tanzania on 28 June 2021 since May 2020.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	1-Aug-21	15 870	15 870	153	1.00%
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 01 August 2021, a total of 15 870 cases including 153 deaths and 14 493 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	30-Jul-21	17	17	0	0.00%
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	COVID-19	Grade 3	21-Mar-20	21-Mar-20	31-Jul-21	94 425	94 425	2 710	2.90%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 31 July 2021, a total of 94 425 confirmed COVID-19 cases, 84 959 recoveries with 2 710 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	1-Aug-21	196 293	196 293	3 406	1.70%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 1st August 2021, a total of 196,293 confirmed COVID-19 cases were reported in the country including 3,406 deaths and 188,106 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	30-May-21	815	0	3	0.40%
The anthrax outbreak is ongoing in Zimbabwe. From Week 1 to 21 of 2021, there were 68 cases reported and no deaths. 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 in 2020.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	1-Aug-21	109 546	109 546	3 583	3.30%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 1st August 2021, a total of 109, 546 confirmed COVID-19 cases were reported in the country including 3583 deaths and 76 665 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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