

# WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 38: 13 - 19 September 2021

Data as reported by: 17:00; 19 September 2021



World Health  
Organization

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

**2**

New events

**126**

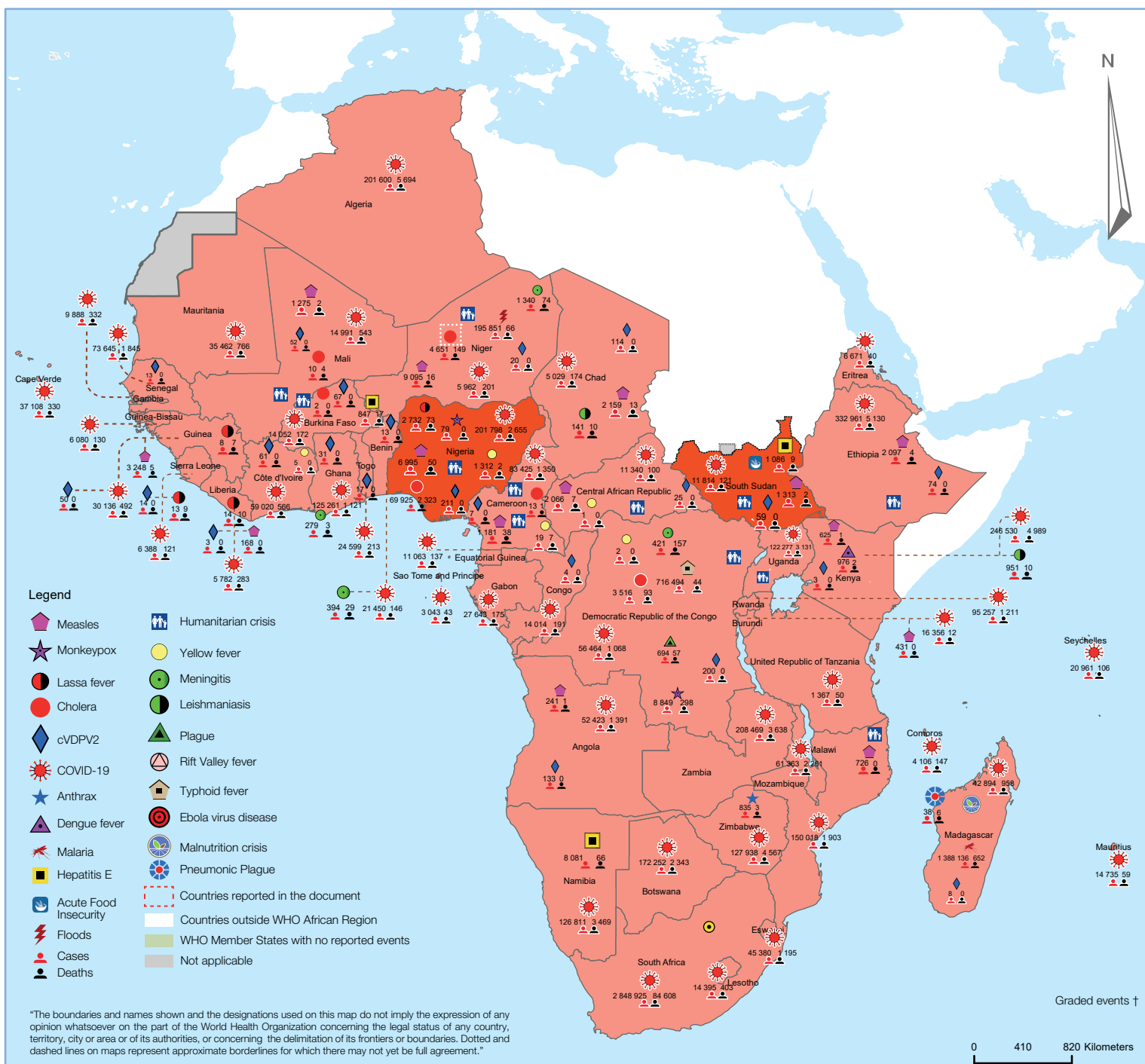
Ongoing events

**114**

Outbreaks

**14**

Humanitarian  
crises



**3**

Grade 3 events

**28**

Grade 2 events

**2**

Grade 1 events

**3**

Protracted 3 events

**4**

Protracted 2 events

**3**

Protracted 1 events

**39**

Ungraded events

# Overview

## Contents

1 Overview

2 -8 Ongoing events

9 All events currently being monitored

This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 126 events in the region. This week's articles cover:

- [End of Marburg outbreak declaration in Guinea](#)
- [COVID-19 across the WHO African region](#)
- [Cholera in Niger](#)

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:

- Although the African region saw a marginal increase in weekly cases of COVID-19 in the past week, case trends continue to vary across countries. This minimal rise could be attributed to a significant increase in Uganda which reported a backlog of cases on a single day. South Africa continues to report more than half of all new cases in the region, followed by Ethiopia and Nigeria. Gabon and Angola have reported a steady increase in the weekly number of cases compared to the previous peak. The number of deaths reported across the region declined in the past week. At the moment, 17 countries are experiencing a resurgence, of which Algeria, Benin, Mauritius and Kenya are in their fourth wave of the pandemic. As many countries continue to relax restriction measures, the risk of resurgence remains high amidst circulation of highly transmissible variants of concern in the region. Africa faces a vaccine shortage of almost 500 million doses following the cutback in COVAX deliveries forecast for the rest of the year. As such the continent will fall short of the WHO year-end target for countries to vaccinate 40% of their populations.
- The ongoing cholera outbreak in Niger continues to deteriorate. The number of reported cases has doubled and the number of deaths has almost tripled in the past three weeks. The number of affected health districts has also increased. The rainy season is still ongoing and its resulting floods which are the main factor for the spread of this outbreak, have already affected many people and damaged thousands of houses and farms. Two neighbouring countries, Burkina Faso and Mali, are also facing cholera outbreaks linked to the ongoing outbreak in Niger. Despite efforts of the Ministry of Health and its partners to contain the outbreak, areas of response such as, risk communication and community engagement, case management, sanitation activities as well as surveillance especially at points of entries and borders to prevent trans-border transmissions, still need to be reinforced.

# End of Marburg outbreak declaration in Guinea

## Marburg Virus Disease

## Guinea

1 Cases | 1 Deaths | 100.0% CFR

### EVENT DESCRIPTION

The Ministry of Health of Guinea declared the end of the Marburg virus disease (MVD) outbreak in Guéckédou prefecture, Nzérékoré Region on 16 September 2021. In accordance with WHO recommendations, the declaration was made 42 days after the safe and dignified burial of the only confirmed case-patient reported in this outbreak. This was the first-ever Marburg virus disease outbreak reported in Guinea.

From 3 August 2021 to the end of outbreak declaration, only one confirmed case was reported. The patient, a man, had onset of symptoms on 25 July 2021. On 1 August 2021, he presented to a small health facility near his village, with symptoms of fever, headache, fatigue, abdominal pain and gingival haemorrhage. A rapid diagnostic test for malaria returned negative, and the patient received ambulatory supportive care with rehydration and symptomatic treatment. Upon returning home, his condition worsened and he died on 2 August 2021.

An alert was subsequently raised by the sub-prefecture public health care facility to the health department of Guéckédou. The investigation team was immediately deployed to the village to conduct an in-depth investigation and collected a post-mortem oral swab sample, which was shipped on the same day to the viral haemorrhagic fever laboratory in Guéckédou city. On 3 August 2021, the sample tested positive for MVD by reverse transcriptase-polymerase chain reaction (RT-PCR) and negative for Ebola virus disease. The national Red Cross supported his safe and dignified burial processes.

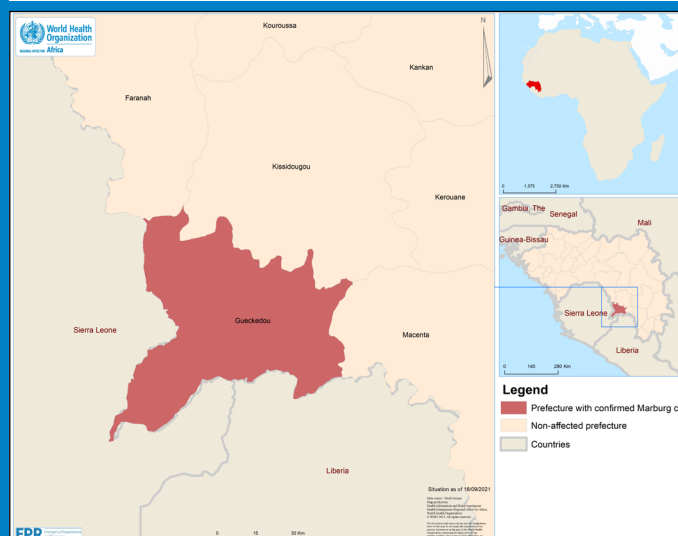
On 5 August 2021, the National Reference Laboratory in Conakry provided confirmation by real-time PCR of the positive Marburg result, and on 9 August 2021, the Institut Pasteur Dakar in Senegal further confirmed the case positive for MVD and negative for Ebola virus disease.

During the outbreak, one confirmed case and 173 contacts were identified, including 14 high risk contacts based on exposure. Among them, 172 (99.4%) were followed for a period of 21 days, of which none developed symptoms. One high-risk contact was lost to follow up. No alerts were generated at the different points of entry in Guéckédou prefecture where passengers were screened.

### PUBLIC HEALTH ACTIONS

- The Ministry of Health activated the national and district emergency management committees to coordinate the response and engage with the community.
- The Ministry of Health together with WHO, the United States Centers for Disease Control, the Alliance for International Medical Action, the Red Cross, UNICEF, the International Organization for Migration, and other partners, initiated measures to control the outbreak and prevent further spread including the implementation of contact tracing and active case search in health facilities and at the community level.
- Appropriate infection prevention and control (IPC) measures

The location of a Marburg virus disease confirmed case reported in Guéckédou prefecture, Nzérékoré Region Guinea, 16 September 2021.



were conducted.

- A total of 173 contacts were identified, including 14 high risk contacts based on exposure.
- The response team captured and sampled bats in the localities of Temessadou M'Boké, Baladou Pébal and Koundou to better understand the involvement of bats in the ecology of Marburg viruses is underway.
- Support to training on community-based surveillance in Guéckédou prefecture is ongoing.
- Risk communication and community mobilization activities in Guéckédou prefecture as a component of a health emergency preparedness and response action plan.
- Sierra Leone and Liberia health authorities activated contingency plans and started public health measures at the points of entry with Guinea.

### SITUATION INTERPRETATION

- Guinea has previous experience in managing viral haemorrhagic diseases such as Ebola virus disease and Lassa fever, but this was the first time that MVD was reported. Guinea health authorities responded rapidly to the event and measures were rapidly implemented to control the outbreak. Cross-border population movement and community mixing between Guinea and neighbouring Sierra Leone and Liberia increased the risk of cross-border spread. The country has a fragile health care system due to the overburden of disease outbreaks, COVID-19 pandemic, and the recurrent threat of epidemics such as malaria, yellow fever, measles, Lassa fever, health care-associated infections, high rates of acute malnutrition, cyclical natural disasters such as floods, and socio-political unrest.

[Go to overview](#)

2

[Go to map of the outbreaks](#)

## PROPOSED ACTIONS

- It is crucial that Guinea builds on good practices that led to the successful management of previous viral haemorrhagic fever outbreaks and taking into consideration some key actions recommended then. Actions should include; health care workers caring for patients with suspected or confirmed MVD should apply standard and transmission-based IPC precautions to avoid any exposure to blood and/or bodily fluids, as well as unprotected contact with the possibly contaminated environment.
- Integrated disease surveillance and response activities, including community-based surveillance must continue to be strengthened within all affected health zones.
- Raising awareness of the risk factors for MVD and the protective measures individuals can take to reduce human exposure to the virus are key strategies to reduce human infections and deaths.



*Guinea's swift action in detecting, curbing Marburg.*



# Ongoing events

## Coronavirus disease 2019

## African region

5 844 604 : 142 031 : 2.4%  
**Cases** : **Deaths** : **CFR**

In the past week (13 – 19 September 2021), the WHO African region reported a total of 88 859 new cases of coronavirus disease (COVID-19), a 7.3% increase compared to the prior week when 82 787 new cases were reported. Ten (22.0%) countries saw a 20% or more increase in weekly cases compared to the previous week: Botswana, Eritrea, Ethiopia, Gabon, Mali, Mauritania, Sao Tome and Principe, Sierra Leone, South Sudan and Zimbabwe.

In the same reporting period, 22 (48.0%) countries reported a decrease of 20% or more in the number of new cases reported compared to the previous week. These countries are Algeria, Benin, Burundi, Cameroon, Cabo Verde, Central African Republic, Chad, Democratic Republic of the Congo, Eswatini, Gambia, Guinea, Guinea-Bissau, Kenya, Mozambique, Namibia, Niger, Nigeria, Senegal, Seychelles, South Africa, Togo, and Zambia.

Five countries account for the majority (46 352, 52.2.0%) of the cases recorded in the past week, namely South Africa (24 435 new cases, 36.0% decrease, 41.7 new cases per 100 000 population); Ethiopia (9 857 new cases, 21.4% increase, 8.8 new cases per 100 000); Botswana (6 608 new cases, 91.0% increase, 270 new cases per 100 000); Kenya (2 805 new cases, 21.0% decrease, 5.3 new cases per 100 000); and Nigeria (2 647 new cases, 27.3% decrease, 1.3 new cases per 100 000).

The region recorded a 7.0% (n=2 279) decrease in the number of new deaths reported from 33 countries. The highest numbers of new deaths were reported from South Africa (1 297 new deaths; 11.0% decrease; 2.2 new deaths per 100 000 population), Ethiopia (201 new deaths; 21.1% increase; 0.2 new deaths per 100 000), Algeria (116 new deaths; 26.6% decrease; 0.3 new deaths per 100 000), Kenya (83 new deaths; 31.0% decrease; 0.2 new deaths per 100 000), and Nigeria (57 new deaths; 24.0% increase; 0.0 new deaths per 100 000).

The cumulative number of confirmed COVID-19 cases reported in the WHO African region is 5 844 604. More than 5.3 million recoveries have been recorded, giving a recovery rate of 92.0%. The total number of deaths reported is now at 142 031, accounting for a case fatality ratio (CFR) of 2.4%. The WHO African Region 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.

Seventeen countries are still experiencing a resurgence of COVID-19 cases in the region; Angola, Benin, Botswana, Burundi, Cabo Verde, Cote d'Ivoire, Equatorial Guinea, Democratic Republic of the Congo, Eswatini, Ethiopia, Gabon, Ghana, Kenya, Mauritius, Rwanda, Sao Tome and Principe, and Togo. Four countries, Algeria, Benin, Mauritius and Kenya are experiencing a fourth wave.

Overall, death trends are on the rise in five countries, Angola, Benin, Cote d'Ivoire, and Ethiopia. Eleven countries have reported higher case fatality rates than the region's average of 2.4% in the past four weeks. A decline in new deaths recorded in Algeria, Angola, Botswana, and Zimbabwe has been observed. Four countries reported zero deaths in the past 4 weeks, namely Chad, Comoros, Cameroon, and South Sudan.

Cumulatively, the highest number of COVID-19 cases in the region has been recorded in South Africa with 2 882 630 cases (49.0%), followed by Ethiopia (332 961, 5.7%), Kenya (246 530, 4.2%), Zambia (208 469, 3.6%), and Nigeria (201 798, 3.45%). These five countries account for 66.3% (n=3 872 388) of all cases. South Africa also has the highest number of deaths in the region (86 174 deaths, 61.0% of all deaths); followed by Algeria (5 694, 4.0%), Ethiopia (5 130, 3.6%), Kenya (4 989, 3.5%), and (Zimbabwe 4 567, 3.2%), all accounting for (106 554, 75.0%) of all total deaths reported in the region.

A total of 179 new health worker infections were reported during this reporting period (13 – 19 September 2021) from Kenya (113), Guinea (22), Liberia (18), Namibia (13), Equatorial Guinea (10), Democratic Republic of the Congo (2), and Eswatini (1). Thus far, there have been 122 201 COVID-19 infections (2.1% of all cases) among health workers in the region, with South Africa accounting for about 46.0% (56 180) of the total infections. Algeria (11 936, 9.8%), Kenya (7 542, 6.2%), Zimbabwe (5 366, 4.4%) and Mozambique (4 779, 4.0%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. Algeria (6.0%), Niger (6.0%), Chad (5.8%), Liberia (5.8%), and Seychelles (4.5%) have the highest proportion of health worker infections by country. Only Eritrea has not reported any healthcare worker infections.

Transmission classification across the African region vary, although all countries are experiencing some degree of community transmission. Nine (20.0%) countries are reporting uncontrolled incidence (Botswana, Rwanda, Eswatini, Cabo Verde, Namibia, Seychelles, South Africa, Zambia and Zimbabwe), 13 (28.3%) with high incidence, 15 (33.0%) with moderate incidence and nine (20.0%) with low incidence community transmission.

The African continent has recorded more than 8.2 million cases of COVID-19, with more than 206 000 deaths (CFR 2.5%) and over 7.5 million people have recovered. The African continent accounts for 3.4% of global cases and 4.0% of global deaths.

COVAX shipments continue with around 12.6 million doses received in the second week of September, compared to 8.6 million in the second week of August 2021. Ethiopia received 793 440 doses of Astra-Zeneca vaccine in the past week. Eleven countries in the African region have reached the 10% target of their population vaccinated by the end of September 2021: Seychelles, Mauritius, Eswatini, Cabo Verde, Botswana, Comoros, Zimbabwe, Equatorial Guinea, South Africa, Mauritania and Lesotho.

Worldwide, more than 6 billion doses have been administered, only 2.0% of which have been administered in Africa. This sums to a cumulative total of 71 doses per 100 people worldwide, over 9 doses/100 in Africa and just over 6 doses/100 in sub-Saharan Africa.

High-income countries have administered 41 times more doses per person than low-income countries. Only 21.6% of doses

have been administered in low-income countries which represent 51.2% of the world's population.

## SITUATION INTERPRETATION

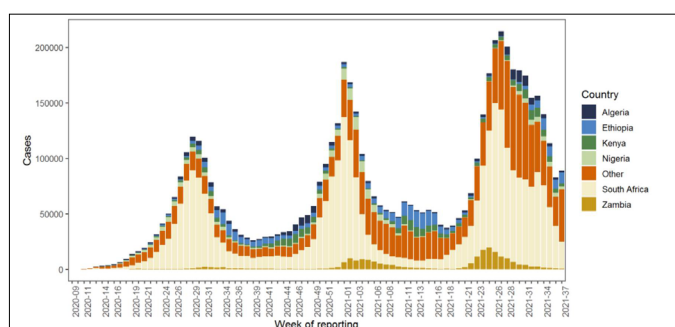
- After a nine-weeks sustained decrease in weekly cases, the African Region recorded an increase in new cases. This increase could be attributed to a backlog of cases recorded in Uganda. The third wave seems to be gradually falling in Africa, with some countries in resurgence beginning to see a significant declining trend in new cases. Although Algeria, Kenya, Nigeria and South Africa are among countries seeing a decline in new cases, they still account for a large proportion of the region's new cases in the last seven days. Even with low numbers reported across the African region, the high number of cases reported globally still pose a risk for the region.
- As the number of vaccine doses administered in sub Saharan Africa continue to increase, countries are advised to enhance a multidimensional approach combining pharmaceutical and public health and social measures to sustain the downward trend of cases reported in the region. WHO is currently supporting countries in the region to conduct intra-action reviews, update their national vaccine deployment plans and develop district-level micro plans.

## PROPOSED ACTIONS

- WHO, Africa CDC and other partners should continue working jointly across COVID-19 response areas and technical response pillars to harmonize support to countries.

We encourage all countries to submit data to WHO on their operational readiness, as this helps us understand their experience better and offer the tailored and targeted support they need. Countries should adapt vaccination strategies to accommodate for different vaccines to ensure doses are administered efficiently. The WHO advises strict adherence to the basic precautionary and control measures including vaccination, hand hygiene, physical distancing, and wearing a face covering when physical distancing is impractical to prevent the spread of disease.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 19 September 2021 (n = 5 844 604)



COVID-19 variants prolong Africa's pandemic wave.

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

Country	Total Cases	Total Deaths	Recovered Cases	Case Fatality Ratio (%)	Health Workers
South Africa	2 882 630	86 174	2 732 363	3.0	56 180
Ethiopia	332 961	5 130	300 684	1.5	3 354
Kenya	246 530	4 989	237 295	2.0	7 542
Zambia	208 469	3 638	204 161	1.7	1 121
Nigeria	201 798	2 655	190 563	1.3	3 175
Algeria	201 600	5 694	137 932	2.8	11 936
Botswana	172 252	2 343	167 318	1.4	61
Mozambique	150 018	1 903	145 606	1.3	4 779
Zimbabwe	127 938	4 567	120 946	3.6	5 366
Namibia	126 708	3 466	122 040	2.7	4 310
Ghana	125 261	1 121	119 859	0.9	4 763
Uganda	122 277	3 131	95 889	2.6	2 892
Rwanda	95 257	1 211	45 750	1.3	682
Cameroon	85 414	1 368	82 077	1.6	2 923
Senegal	73 645	1 845	69 491	2.5	419
Malawi	61 363	2 261	52 005	3.7	2 173
Côte d'Ivoire	59 020	566	56 688	1.0	1 084
Democratic Republic of the Congo	56 463	1 068	50 506	1.9	728
Angola	52 423	1 391	46 036	2.7	939
Eswatini	45 380	1 195	43 236	2.6	958
Madagascar	42 873	956	41 917	2.2	70
Cabo Verde	37 108	330	35 866	0.9	140
Mauritania	35 462	766	33 683	2.2	24
Guinea	30 136	370	28 277	1.2	682
Gabon	27 643	175	26 149	0.6	345
Togo	24 599	213	20 426	0.9	891
Benin	21 450	146	17 294	0.7	139
Seychelles	20 961	106	20 287	0.5	945
Burundi	16 356	12	14 992	0.1	38
Mali	15 069	545	14 218	3.6	87
Mauritius	14 735	59	12 180	0.4	30
Lesotho	14 395	403	6 830	2.8	473
Burkina Faso	14 052	172	13 735	1.2	288
Congo	13 701	183	13 050	1.3	203
South Sudan	11 814	121	11 195	1.0	294
Central African Republic	11 340	100	11 125	0.9	1
Equatorial Guinea	11 063	137	9 490	1.2	487
Gambia	9 888	332	9 533	3.4	142
Eritrea	6 671	40	6 618	0.6	0
Sierra Leone	6 388	121	4 374	1.9	263
Guinea-Bissau	6 080	130	5 237	2.1	23
Niger	5 951	201	5 685	3.4	355
Liberia	5 915	283	5 458	4.8	346
Chad	5 031	174	4 837	3.5	292
Comoros	4 106	147	3 943	3.6	155
Sao Tome and Principe	3 043	43	2 582	1.4	102
United Republic of Tanzania	1 367	50	180	3.7	1
<b>Cumulative Cases (N=47)</b>	<b>5 844 604</b>	<b>142 031</b>	<b>5 399 606</b>	<b>2.4</b>	<b>122 201</b>

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

## EVENT DESCRIPTION

The cholera outbreak in Niger, which was declared on the 9 August 2021, is rapidly worsening. As of 14 September 2021, a total of 4 283 cases of cholera with 144 deaths (case fatality ratio (CFR) 3.4%) have been reported. This CFR is high compared to the expected of < 1%. The outbreak is currently affecting 6 out of 8 (75%) regions of the country. A total of 29 (40%) health districts out of 72 have reported at least one case of cholera and 20 (69%) of these 29 health districts are currently active.

Among the total cases, females 55% (2 347) have been more affected than the males 45% (1 936). The most affected age group is 15 years or older with 2 822 cases (66%) followed by 5-14 years with 549 cases (13%). Majority of the deaths, 117 (81%) have been recorded among the same age group of 15 years or older. Regarding deaths, men are more affected with 77 deaths (53%) against 67 deaths among women (47%).

Since the onset of the outbreak, a total of 278 stool samples have been collected and tested, of which 156 are positive, a positivity rate of 56%. The *Vibrio cholerae* Ogawa 01 serotype has been isolated.

The Maradi region is leading in number of cases with 2 381 cases (55.6%), and is considered the epicenter of the outbreak, followed by Tahoua with 981 cases (23%), Zinder 498 (11.6%), Tillabery 236 (5.5%), Niamey 107 (2.5%) then Dosso 80 (1.8%). Niamey has recorded the highest CFR with 11 deaths out of 107 reported cases (CFR 10%), followed by Tahoua 6.0% (58/2 381), Zinder 4.0% (20/498), and Tillabery 3.4% (8/236).

Regarding the dynamics of the outbreak, Dosso region has not reported new cases for the last 10 days and is therefore no longer considered as a hotspot given that two incubation periods of 5 days for cholera has been reached. The 3 regions of Maradi, Tahoua and Tillabery have at least one health district that have reported case of cholera every day for the past 10 days.

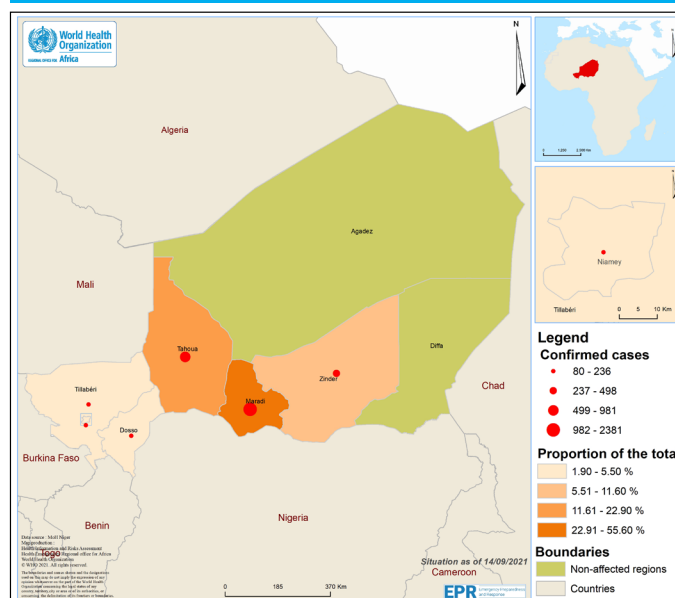
The rainy season is still ongoing and its resulting floods, which are the main factor for the spread of this outbreak, have already affected nearly 195 851 people and killed 66 people as of 6 September 2021. About 12 475 houses have collapsed, 5 960 hectares of cropland buried, and more than 10 000 cattle were lost.

Imported cases of cholera from Nigeria are still reported in the affected regions mainly in Maradi region. In addition to Burkina-Faso that reported 2 cases so far imported from Niger, Mali has just declared the cholera outbreak in the Gao region linked to the ongoing outbreak in Tillabery region of Niger. The strain isolated in Mali is the same as the one causing outbreak in Niger (*Vibrio cholerae* Ogawa 01).

## PUBLIC HEALTH ACTIONS

- The national incident management coordination committee continues to meet on regular basis; weekly meetings of this committee with the national One Health committee are also taking place.
- High-level joint visit led by the Minister of Public Health, to the

Distribution of confirmed cases of Cholera in Niger per region, as of 14 September 2021.



affected regions of Maradi and Zinder with WHO and others UN agencies has been conducted, the main objective of this mission was to assess the quality of the response activities.

- Regular meetings of regional One Health Committees in the affected regions are ongoing
- Deployment of five multidisciplinary support teams to the affected regions took place
- Case management and investigation in the affected areas as well as strengthened surveillance activities are ongoing
- Daily transmission of data from health districts to the regional level as well as data analysis at all levels are also ongoing
- Collection tubes and laboratory supplies have been pre-positioned in all health districts
- Strengthened water, hygiene and sanitation activities including regular treatment of water points, distribution of Aquatab tablets, cholera treatment centers and environmental disinfections are ongoing in the affected areas.
- With the WHO support, the country has submitted the vaccination request at the International Coordination Group on 7 September 2021.

## SITUATION INTERPRETATION

The ongoing cholera outbreak in Niger seems to be more severe compared to the last major outbreak the country experienced in 2018, especially in terms of caseload and deaths counts as well as its spreading pattern. The ongoing rainy season has contributed to the dangerous situation as floods have been reported in all the regions where cases of cholera have been reported. Among some of the hypotheses for the high CFR are late visits to health care facilities, advanced age of patients and low quality of case management,



however, an in-depth assessment on the high lethality is necessary to confirm these hypotheses. Two neighboring countries (Burkina Faso and Mali) have already declared cholera outbreaks linked to the one in Niger, causing concern of further international spread throughout the region. Cases imported from Nigeria also continue to be reported. The epidemic is still active in Niamey, the capital city of the country and which has the highest population density, potentially causing risk to even more disease spread. It is therefore paramount to double efforts deployed so far to overcome this outbreak.

## PROPOSED ACTIONS

- Multisectoral response to the cholera outbreak in Niger should be prioritized because it facilitates the harmonization of actions and promotes the effectiveness of the response. An in-depth assessment to understand the causes of the high death rates

should be conducted urgently and appropriate remedies put in place. Awareness-raising activities for the population about the disease remain essential and should be intensified in the areas most affected and at risk. A reactive cholera vaccination campaign must be organized as quickly as possible targeting those at risk.

- It is also important to think for a sustainable solution since cholera is endemic in Niger. It is therefore necessary to strengthen the health system, carry out hygiene promotion activities, and all structures put in place for prevention and response to cholera outbreaks in the areas at risk. Communities should be availed with access to safe drinking water and adequate sanitation and hygiene facilities. The national action plan for long-term cholera control and elimination should be developed and must include recommendations of the global cholera control group's roadmap.



*Children, a priority target of the cholera vaccination campaign.*

# All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
<b>New Events</b>									
Central African Republic	Yellow fever	Ungraded	14-Sep-21	1-Apr-21	9-Sep-21	1	1	0	0.00%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test at the Centre Pasteur Cameroun (CPC). She is reportedly not vaccinated against yellow fever. The onset of symptoms was 1 April 2021 with febrile jaundice. Her sample was sent to the CPC for quality control after it tested IgM negative at the Institut Pasteur in Bangui. A thorough investigation is ongoing. Laboratory tests are underway for two additional suspected cases.									
Côte d'Ivoire	Yellow fever	Ungraded	14-Sep-21	13-Aug-21	6-Sep-21	5	3	-	-
On 13 August 2021, five Yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Based on differential tests returned on 6 September 2021, the results of three cases are consistent with a recent Yellow fever infection. Two other cases had cross-reactions with other flaviviruses, one of which was more consistent with dengue and one with a flavivirus infection (PRNT positive for Yellow fever, Zika, and dengue).									
<b>Ongoing Events</b>									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	19-Sep-21	201 600	201 600	5 694	2.80%
From 25 February 2020 to 19 September 2021, a total of 201 600 confirmed cases of COVID-19 with 5 694 deaths (CFR 2.8%) have been reported from Algeria. A total of 137 932 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	19-Sep-21	52 423	52 423	1 391	2.70%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 19 September 2021, a total of 52 423 confirmed COVID-19 cases have been reported in the country with 1 391 deaths and 46 036 recoveries.									
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	17-Sep-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	12-Sep-21	21 450	21 450	146	0.70%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 12 September 2021, a total of 21 450 cases have been reported in the country with 146 deaths and 17 294 recoveries.									
Benin	Meningitis	Ungraded	1-Jun-21	1-Jan-21	26-Aug-21	394	82	29	7.40%
A total of 394 cases and 29 deaths (CFR 7.4%) resulting from meningitis were reported from Week 1 to week 34 of 2021 in Benin. Five districts are on alert and one district reported passing the epidemic threshold.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	17-Sep-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	13-Sep-21	172 252	172 252	2 343	1.40%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 13 September 2021, a total of 172 252 confirmed COVID-19 cases were reported in the country including 2 343 deaths and 167 318 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-Jul-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 1 368 164 internally displaced persons as of 31 July 2021 in all 13 regions in the country. More than 56K people became IDPs during July 2021, increasing 4.1% compared to the previous month. The regions most affected were Central North, Sahel, Eastern, and Northern. 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. According to the World Food Programme, 3.5 million people are in need of humanitarian assistance and 2.87 million people are food insecure as of March 2021.									
Burkina Faso	Cholera	Ungraded	15-Aug-21	18-Aug-21	31-Aug-21	2	2	0	0.00%
The WHO office was informed by the Ministry of Health in the evening of 15 August 2021, of the detection on August 15, 2021, in the morning of a suspected case of cholera in the health facility of the village of Tanwalbougou, health district of Fada in the Eastern region, bordering Niger where an outbreak of cholera is ongoing. This is a 46-year-old tanker driver of Malian nationality from Niamey in Niger. The patient and his 4 contact persons have been isolated, and the patient was treated. The sample taken and sent to Ouagadougou at National Laboratory of Public Health confirmed <i>Vibrio cholerae</i> O1 Ogawa, the same serotype and serogroup with the one identified in Niger for the ongoing cholera outbreak. A second case of cholera confirmed by the regional laboratory on August 29, 2021: also, a tanker driver of Malian nationality, coming from Niamey in Niger after staying in Zinder and Koni / Niger. He was treated, cured, and released in isolation on August 31 08/31/2021. The first confirmed case was discharged on August 22, 2021.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	18-Sep-21	14 052	14 052	172	1.20%
Between 9 March 2020 and 18 September 2021, a total of 14 052 confirmed cases of COVID-19 with 172 deaths and 13 735 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	17-Sep-21	67	67	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There are two 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	15-Sep-21	16 356	16 356	12	0.10%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 15 September 2021, the total number of confirmed COVID-19 cases is 16 356, including 12 deaths and 14 992 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	1-Jan-21	15-Aug-21	431	330	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 32 of 2021, Burundi has reported a total of 431 suspected cases, 330 reported by case-by-case surveillance and no death, 63 confirmed by IgM+ 261 by epidemiological link and 6 clinical cases. Six districts are currently in outbreak : Bubanza, Mpanda, Bugarama, Muyinga, Rumonge and Cibitoke.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	31-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. Specifically, there have been 321 886 IDPs registered in Far North as of 31 July 2021. Increased attacks from non-state armed groups (NSAGs) in the Logone and Chari, and Mayo Tsanaga divisions have led to human rights violations against civilian populations. The resulting insecurity negatively affected humanitarian access where workers have been threatened and harassed. A total of 34 security incidents were recorded during the reporting period.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	31-Jul-21	-	-	-	-
According to reports from UNHCR, 711 056 IDPs have been registered as of 31 July 2021. OCHA also reports an estimated 333.9K returnees, and 67.4K Cameroon refugees in Nigeria as of May 2021. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. An inter-agency mission in Momo Division revealed an increase in the use of improvised explosive devices (IEDs), carjacking, and clashes between security forces and NSAGs, leading to civilian population displacement. The priorities for IDPs are food, healthcare, SGBV response, shelter, and non-food items.									
Cameroon	Cholera	Ungraded	1-Jan-21	5-Aug-21	29-Aug-21	13		1	7.70%
Since the beginning of this year, cases of Cholera, positives for Rapid Tests (RDT) have been notified in the North-West region and suspected cases of Cholera notified in the North region. As of August 15, 2021, a total of 13 cases with 1 death (CFR = 7.7%) have already been recorded. These numbers will be adjusted once new updates are received. The intensification of disease surveillance as well as the management of notified cases are ongoing									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	18-Aug-21	83 425	83 425	1 350	1.60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 18 August 2021, a total of 83 425 cases have been reported, including 1 350 deaths and 81 326 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-21	8-Sep-21	1 181	422	38	3.20%
From Epi week 1 to Epi week 34 of 2021, Cameroon has reported 1 181 suspected with 38 deaths (CFR 1.9%). Out of 825 investigated, 606 with blood samples, 422 was positive including 201 cases were IgM+, 82 clinically compatible and 139 epidemiologically linked; 65% of the children are under 5 years of age and only 33% known to be vaccinated with at least 1 dose of MCV. Twenty one districts with confirmed outbreak spread across 7 regions of country.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	17-Sep-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	5-Sep-21	19	19	7	36.80%
From 1 January to 5 September 2021, a total of 16 presumptive cases of yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur in Cameroun (CPC), of which seven deaths were recorded. These cases originated from seven different regions with a total of 15 health districts (HDs) affected: Adamaoua region (Ngaoundere rural HD), Centre region (Eséka HD), Far North region (Maga, Mogode, Yagoua, Kousséri, and Goulfey HDs), Littoral region (Yabassi, Cité des palmiers HDs), North region (Guider, Garoua 1 HDs), and North-West region (Bamenda HD), and West region (Dschang, Bafang, and Malentouen HDs).									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	19-Sep-21	37 108	37 108	330	0.90%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 12 September 2021, a total of 37 108 confirmed COVID-19 cases including 330 deaths and 35 866 recoveries were 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
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	26-Aug-21	-	-	-	-
According to OCHA figures, 2.8 million people are in need of assistance, 690 705 people are internally displaced as of 31 July 2021, and 699K persons are refugees in neighboring countries. In July 2021, 64 110 new IDPs were registered mostly in Basse-Kotto, Haut-Mbomou and Ouaka Prefectures. Displacements were mostly caused by clashes between the Central African Armed Forces (FACA) and their allies against armed groups (particularly in the Bouar, Bedamara and Paoua Sub-prefectures) as well as fear of abuses by armed groups. Some populations perceiving imminent fighting are moving as a precautionary measure to find refuge in safer areas. A total of 90 083 returns were reported as 31 July 2021, mainly in the Mbomou, Nana-Mambéré, Nana-Gribizi, Basse-Kotto and Bamingui-Bangoran Prefectures. The recapture of towns that had been occupied by armed groups has led to the gradual return of the population to certain localities.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	14-Sep-21	11 340	11 340	100	0.90%
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 14 September 2021, a total of 11 340 confirmed cases, 100 deaths and 11 125 recovered were reported.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	4-Sep-21	2 066	243	7	0.30%
From 1 January to 8 September 2021 : 2 066 suspected cases have been reported, 191 cases with blood samples out of a total 608 investigated, 243 confirmed cases (62 IgM+ cases, 170 by epidemiological link and 11 compatible cases) and 7 deaths (CFR : 0.2%). Seven health districts (out of 35) have reached the epidemic threshold (Berbérati, Sangha-Mbaéré, Nanga-Boguila, Batangafo, Mbaiki, Nana Gebrizi and Vakaga); 49% of children are less than 5 years of age; 42% were not vaccinated. From the beginning of outbreak in 2019 to 19 August 2021, a total of 35 468 suspected cases have been notified and 197 deaths (CFR of 0.56%) within affected districts.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	17-Sep-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	19-Sep-21	5 029	5 029	174	3.50%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 19 August 2021, a total of 5 029 confirmed COVID-19 cases were reported in the country including 174 deaths and 4 837 cases who have recovered.									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-Jul-21	141	14	10	7.10%
Since January 1, 2018, a total of 141 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai). 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 31 July 2021, 34 cases have been reported including 4 deaths.									
Chad	Measles	Ungraded	24-May-18	1-Jan-21	4-Sep-21	2 159	223	13	0.60%
Since 01 January 2021 up to Epi week 34, it has been reported 2 159 suspected cases from 97 out of 129 districts in the country (71% of districts), 459 cases investigated with blood samples recorded, 223 of which were confirmed by IgM and 13 deaths from 4 districts (CFR 0.6%), 23 districts in epidemic in 2021. In 2020, Chad reported 8 785 cases, with 363 confirmed cases and 41 deaths.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	17-Sep-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	19-Sep-21	4 106	4 106	147	3.60%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 19 September 2021, a total of 4 106 confirmed COVID-19 cases, including 147 deaths and 3 943 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-Sep-21	14 014	13 701	191	1.40%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 16 September 2021, a total of 14 014 cases including 191 deaths and 13 305 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	17-Sep-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	19-Sep-21	59 020	59 020	566	1.00%
Since 11 March 2020, a total of 59 020 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 566 deaths, and a total of 56 688 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	17-Sep-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.									



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	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	16-Sep-21	56 464	56 462	1 068	1.90%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 56 462 confirmed cases and two probable case, including 1 068 deaths have been reported. A total of 50 506 people have recovered.									
Democratic Republic of the Congo	Meningitis	Grade 2	6-Sep-21	1-Jun-21	15-Sep-21	421	9	157	37.30%
On 28 July 2021, an alert was reported in the locality of Panga, Banalia territory, in Kisangani district in DRC as a result of an illness with signs similar to those of meningitis. As of 15 September 2021, 421 cases have been reported including 157 deaths (CFR= 37%). Nine samples have been confirmed for <i>Neisseria meningitidis</i> serogroup W.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	13-Sep-21	8 849	39	298	3.40%
Since epidemiological week 1 up to week 34 in 2021, 2 592 cases have been reported with 69 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 was 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	1-Jan-20	13-Sep-21	694	-	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 epidemiological week 1 to 34, 2021 (ending on 29 August), 118 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 Arou reported the most cases.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	17-Sep-21	200	200	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 10 cases reported in 2021 so far. The total number of 2020 cases remains at 81.									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	31-Jul-21	716 494	883	44	0.00%
In 2021, from Epi week 1 to 30, 716 494 suspected cases of typhoid fever have been reported including 883 confirmed cases (606 in Popokabaka health zone and 277 in Mushie health zone), 44 (21 in Popokabaka health zone and 23 in Mushie health zone) deaths (CFR 0.0%). 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	15-Sep-21	11 063	11 063	137	1.20%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 15 September 2021, a total of 11 063 cases have been reported in the country with 137 deaths and 9 490 recoveries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	17-Sep-21	6 671	6 671	40	0.60%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 17 September 2021, a total of 6 671 confirmed COVID-19 cases with 40 deaths were reported in the country. A total of 6 618 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Sep-21	45 380	45 380	1 195	2.60%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 19 September 2021, a total of 45 380 cases have been reported in the country including 43 236 recoveries. A total of 1 195 associated deaths have been reported.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	13-Aug-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. Conflict continues in the Tigray area with spill over from activity in neighbouring Afar and Amhara regions. An estimated 76 500 people were displaced from Afar and 200K from Amhara due to movement of Tigray forces. Despite the fighting, humanitarian access has improved with 75% of the area becoming accessible though logistical and operational problems persist with the lack of banking services, cash, fuel, electricity and telecommunications. Over 400K people are living in famine-like situations, with increasing risks of famine due to the inability of crop production over the past 9 months. Malnutrition rates are far above emergency thresholds among screened children under 5 years (25-30% or higher) and pregnant and lactating women (45-50%).									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Sep-21	332 961	332 961	5 130	1.50%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 332 961 cases of COVID-19 as of 19th August 2021, with 5 130 deaths and 300 684 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-21	3-Sep-21	2 097	1 215	4	0.20%
In 2021, as of 03 September (Epi week 37), a total of 2 097 cases have been reported of which 1215 have been confirmed (892 epi-link, 282 IgM and 41 measles compatible) and 4 deaths recorded (CFR 0.4%). Out of the 2 097 suspected cases, 1023 were under 5 years of age, 681 were between 5 and 14 years of age and 393 were over 15 years of age.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	17-Sep-21	74	74	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. 9 cases have been reported so far in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	17-Sep-21	27 643	27 643	175	0.60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 17 September 2021, a total of 27 643 cases including 175 deaths and 26 149 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	16-Sep-21	9 888	9 888	332	3.40%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 16 Sep 2021, a total of 9 888 confirmed COVID-19 cases including 332 deaths, and 9 533 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	15-Sep-21	125 261	125 261	1 121	0.90%
As of 15 Sep 2021, a total of 125 261 confirmed COVID-19 cases have been reported in Ghana. There have been 1121 deaths and 119 859 recoveries reported.									
Ghana	Meningitis	Ungraded	1-Jan-21	1-Jan-21	26-Aug-21	279	-	3	1.10%
Since the beginning of the year 2021, 279 cases of meningitis have been reported with 3 deaths (CFR of 1.1%). 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	17-Sep-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	14-Sep-21	30 136	30 136	492	1.60%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 14 September 2021, a total of 30 136 cases including 28 277 recovered cases and 492 deaths have been reported in the country.									
Guinea	Lassa Fever	Ungraded	8-May-21	8-May-21	20-Sep-21	8	8	7	87.50%
To date, there have been a total of 8 confirmed cases and 7 deaths (CFR=87.5%): the first case (man of 23 years 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 years 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 years 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 years 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. The last case (female 9 years old) from Faranah health district detected on 14 Sept has been confirmed on 19 Sep 2021 by the Gueckerou laboratory and died the same day									
Guinea	Measles	Ungraded	9-May-18	1-Jan-21	23-Aug-21	3 248	183	5	0.20%
In 2021, as of 16 September (Epi week 34), 3 248 suspected cases have been reported, 392 samples taken, 353 samples tested of which 183 tested positive, 154 negative and 16 undetermined; 5 deaths have been reported. In 2020 at the epi week 30, 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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	17-Sep-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	19-Sep-21	6 080	6 080	130	2.10%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 19th September 2021, the country has reported 6 080 confirmed cases of COVID-19 with 5 237 recoveries and 130 deaths.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Sep-21	246 530	246 530	4 989	2.00%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 19th September 2021, 246 530 confirmed COVID-19 cases including 4 989 deaths and 237 295 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	27-Apr-21	1-Jan-21	26-Aug-21	976	36	2	0.20%
The outbreak has been reported in Mombasa and Mandera Counties, recording 976 cases with 36 confirmed and 2 deaths reported (CFR 0.2 percent).									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	26-Aug-21	951	951	10	1.10%
Since January 2020, a total of 951 visceral leishmaniasis confirmed cases with 10 deaths (CFR 1.1 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.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	20-Aug-21	625	31	1	0.20%
As 20 August 2021 (Epi week 32), a total of 625 cases was reported, 31 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	17-Sep-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 Bouralgay, 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, in epidemiological 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	26-Aug-21	14 395	14 395	403	2.80%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 26 Aug 2021, a total of 14 395 cases of COVID-19 have been reported, including 6 830 recoveries and 403 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	16-Sep-21	5 782	5 782	283	4.90%
From 16 March 2020 to 19th September 2021, a total of 5 782 cases including 283 deaths and 5 458 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	6-Sep-21	14	14	10	71.40%
The numbers of confirmed and death cases have been reviewed. From January to date , a total of 91 suspected cases were reported, of which 14 (15.3%) were confirmed, and 10 deaths among confirmed cases (CFR=71%). The confirmed cases originated from four counties: namely Bong (4), Grand Bassa (5), Montserrado (1) and Nimba (4). No new confirmed case reported since Epi-Week 30. All 226 contacts have completed 21 days of monitoring. Two counties ( Bongo and Montserrado) currently in countdown to end of outbreak ; Nimba county outbreak declared over on September 5, 2021									
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	17-Sep-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	9-Sep-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	12-Sep-21	42 894	42 894	958	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 12 September 2021, a total of 42 894 cases have been reported in the country, out of which 42 612 have recovered and 956 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	1-Jan-21	25-Jul-21	1 388 136	-	652	0.00%
From January 2021 to 29 August 2021, 1 388 136 cases were reported including 652 deaths. The number of malaria cases reported in week 34 was 5 807 cases and a decrease in the number of malaria cases has been observed from week 21.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	Pneumonic Plague	Grade 1	29-Aug-21	1-Sep-21	16-Sep-21	38	19	6	15.80%
On 29/08/2021, in the Itasy region, in the Arivonimamo health district, an alert was received by the health authorities regarding cases of Pulmonary Plague. As of 16 Sep, a total of 38 suspected cases of pulmonary plague including 19 confirmed and 6 death cases (CFR= 15.8%) are reported so far. Active case finding, chemo prophylaxis for high-risk contacts of alive and death cases are ongoing; regular meetings of the plague control committees at regional and health district level; mass sensitization activities; contact tracing; Ongoing investigation as well as vector and anti-reservoir control measures, are also ongoing.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-21	10-Sep-21	8	8	0	0.00%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. There are six cases in 2021 and two from 2020.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	19-Sep-21	61 363	61 363	2 261	3.70%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 19 September 2021, the country has a total of 61 363 confirmed cases with 2 261 deaths and 52 005 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	8-Aug-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. On 8 August NSAGs simultaneously attacked villages in Ouatagouna causing deaths, injuries, and IDPs. There have been a total of 372 266 IDPs in the country and more than 140 000 refugees. According to OCHA reports, an estimated 5.9 million people need humanitarian assistance. During July 2021, more than 50 voluntary Ivorian refugees in Sikasso, Mali were repatriated.									
Mali	Cholera	Ungraded	11-Sep-21	12-Sep-21	13-Sep-21	10	2	4	40.00%
During the 36th week of 2021 (9 September), seven (07) suspected cases of cholera have been notified by the health area of Labbezanga, Ansongo health district in the Gao region. On 11 September, cholera was confirmed with the isolation of Vibrio cholerae Ogawa 01 at Institut National de Sante Publique laboratory, the same serotype causing the ongoing cholera outbreak in Niger. The probable index case had contact with a relative who visited its family for 2 days from Ayorou in Tillabery region of Niger. Tillabery region is one of the 6 regions affected by the ongoing cholera outbreak in Niger. As of 13 September, a total of 10 cases including 2 confirmed and 4 deaths (CFR=40%) are reported so far. Measures are being taken by the authorities to contain the outbreak at local level.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	19-Sep-21	14 991	14 991	543	3.60%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 19 September 2021, a total of 14 991 confirmed COVID-19 cases have been reported in the country including 543 deaths and 14 190 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-21	12-Sep-21	1 275	655	2	0.20%
From January 2021 up to Epi week 35 (12 September 2021), Mali has reported a total of 1 275 suspected cases including two deaths, 1 133 samples tested of which 655 were positive, 445 negative and 33 undetermined. There is an increase of 75.75% in confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	17-Sep-21	52	52	0	0.00%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Bamako bringing the total number of cases since 2020 to 52.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Sep-21	35 462	35 462	766	2.20%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 19th September 2021, a total of 35 462 cases including 766 deaths and 33 683 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	19-Sep-21	14 735	14 735	59	0.40%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 19th September 2021, a total of 14 735 confirmed COVID-19 cases including 59 deaths and 12 180 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	1-Aug-21	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. On 8 August 2021, Mocimboa da Praia was retaken by joint forces. During 4-10 August 2021, a total of 5 484 internally displaced person (IDPs) arrived mostly in Mueda (34% arrivals), Nangade (20% arrivals), and Montepuez (20% arrivals) districts. As of 10 August 2021, the nation-wide estimate of people in need of humanitarian assistance is 1.3 million and there are 732K people displaced.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	19-Sep-21	150 018	150 018	1 903	1.30%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 19th September 2021, a total of 150 018 confirmed COVID-19 cases were reported in the country including 1 903 deaths and 145 606 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	1-Aug-21	726	84	0	0.00%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 01 August 2021 (week 30), there were 726 cases reported including 84 confirmed cases and no death. In 2020 at the same period, there were 130 confirmed cases and no death.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-Sep-21	126 811	126 811	3 469	0.00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 16 September 2021, a total of 126 081 confirmed cases with 122 373 recovered and 3 469 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%).									



Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Niger	Floods	Ungraded	15-Jul-21	2-Aug-21	6-Sep-21	195 851	-	66	0.00%
As of 6 Sep 2021, heavy rains and floods due to the rising of water of the Niger river caused by the rainy season which extends from June to September each year, have affected 195,851 people across the country's eight regions, destroying over 12,475 houses, flooding hectares of crops and killing 66 people. The government and humanitarian partners are scaling up efforts to address the situation, including building and strengthening protective dykes. Food stock is also being prepositioned in the affected regions. Floods have been followed by outbreaks of cholera across six of the country's eight regions									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	6-Aug-21	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2021, 289K are IDPs, 243K are refugees, and 1.6 million are food insecure (phase 3+ and above). The Intikane Malian refugee reception area has closed and many (66%) IDPs from there have resettled in the villages of Temcess, Tillia ville, Gawey, Assaguey in the Tillia department. In the Maradi region, insecurity, theft and looting have cause some population movement. The Maradi region also saw some voluntary returns of IDPs. In Tillaberi region the number of IDPs are expected to drop due to a new government policy of IDP returns. In Diffa region, around 30K people have already returned to their localities of origin due to this return policy.									
Niger	Cholera	Grade 1	7-Aug-21	7-Jun-21	18-Sep-21	4 651	4 651	149	3.20%
As of 18 Sep 2021, a total of 4 651 cases including 149 deaths (CFR = 3.2%) have been reported. The outbreak is linked to the epidemic which is ongoing for several months in the neighbouring regions of northern Nigeria where there is significant mixing of cross-border populations and with heavy rainfall recorded during this period in Niger. Six regions out of eight have reported cases so far (Tahoua, Niamey, Tillaberi, Dosso, Maradi and Zinder). To date 30 out of 72 Health districts have reported cases with 18 health districts currently actives.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	19-Sep-21	5 962	5 962	201	3.40%
From 19 March 2020 to 19 september 2021, a total of 5 962 cases with 201 deaths have been reported across the country. A total of 5 700 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-21	18-Jul-21	9 095	924	16	0.20%
From January to 18 July 2021, 9 095 suspected cases have been reported and 16 deaths. Out of suspected cases, 1 795 were investigated including 924 lab confirmed measles cases, 55% are older than 4 years; 51 of 72 health districts have reported at least 3 confirmed cases of measles in 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	26-Aug-21	1 340	-	74	5.50%
Since the beginning of the year 2021 to week 34 ending 26 August 2021, 1 340 cases have been reported with 75 deaths (CFR 5.5%). Two districts have surpassed the epidemic threshold and six districts are on alert.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Oct-18	1-Oct-18	17-Sep-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	31-Jul-21	-	-	-	-
In 2021, more than 8.7 million require humanitarian assistance in Borno, Adamawa, and Yobe states. Attacks in Nigeria have continued in LGAs of Borno, Adama, and Yobe (BAY) states making the North-Eastern part of the country volatile. As of 31 July 2021, there were 2 191 193 IDPs from these states according to UNHCR. In this area, 92% of IDPs were caused by insurgency, 7% by communal clashes, and 1% by natural disaster. In the North-West part of the country, another 379 316 people have been displaced as of 31 July 2021 and in North-Central area, 316 598 have been displaced.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	5-Sep-21	69 925	-	2 323	3.30%
As of 5 September 2021, 69 925 have been affected with 2 323 deaths yielding a CFR of 3.3%. A total of 25 states have reported cases, however, only 19 states have active outbreaks. During week 35 a total of 1 677 suspected cases with 46 deaths were reported - Bauchi (566), Katsina (282), Sokoto (258), Yobe (183), Borno (179), Niger (94), Kaduna (66), Adamawa (34), Gombe (8), Kano (4), Kebbi (2), and Nasarawa (1). People aged 5 - 14 years have been the most affected. There is an ongoing cholera outbreak in bordering regions of the neighbouring country of Niger that have been epidemiologically linked to the outbreak in Nigeria.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	19-Sep-21	201 798	201 798	2 655	1.30%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 19 September 2021, a total of 201 798 confirmed cases with 190 563 recovered and 2 655 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	1-Jan-21	1-Jan-21	6-Aug-21	2 732	354	73	2.70%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 32 of 2021, the number of new confirmed cases was 4. These were reported from Ondo, Edo, and Enugu States. Cumulatively from week 1 to week 32 of 2021, a total of 354 confirmed cases including 73 deaths among confirmed cases have been reported with a case fatality rate of 20.6% across 14 states. In total, 2 732 cases are suspected in 2021. This is lower 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	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	31-Aug-21	79	23	0	0.00%
According to the Nigeria Centre for Disease Control (NCDC), in August 2021, a total of nine suspected monkeypox cases, six confirmed cases and 0 deaths were reported from six states. In 2021, 79 suspected cases have been reported between January and August 31, 2021. Of the suspected cases, 23 were confirmed from eight states Delta (7), Lagos (4), Bayelsa (4), Rivers (4), Edo (1), FCT (1), Niger (1), Ogun (1) and, no deaths recorded from all States.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	17-Sep-21	211	211	0	0.00%
10 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported: two each in Gombe, Jigawa, Kano and Yobe and one each in Katsina and Plateau. There are now 151 cases reported in 2021. There were eight cases reported in 2020 ; 18 cVDPV2 cases reported in 2019 and 34 in 2018.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	Yellow fever	Ungraded	12-Sep-17	1-Jan-21	31-Aug-21	1 312	31	2	0.20%
From 1 January 2021 to 31 August 2021, a total of 1 312 suspect YF cases were reported in 367 Local Government Areas (LGAs) across all 37 States including the Federal Capital Territory. A total of 45 blood samples were sent to the Institut Pasteur in Dakar and 31 samples tested positive by PRNT. Twelve PRNT-positive cases had a history of YF vaccination, which may have impacted the PRNT result. There were two deaths reported among the 19 non-vaccinated PRNT positive cases (CFR 11%). The 31 YF PRNT positive cases were reported from 18 LGAs in nine states.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	19-Sep-21	95 257	95 257	1 211	1.30%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 19 September 2021, a total of 95 257 cases with 1 211 deaths and 45 750 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	19-Sep-21	3 043	3 043	43	1.40%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 19 September 2021, a total of 3 043 confirmed cases of COVID-19 have been reported, including 43 deaths. A total of 2 582 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	19-Sep-21	73 645	73 645	1 845	2.50%
From 2 March 2020 to 19 Sep 2021, a total of 73 645 confirmed cases of COVID-19 including 1 845 deaths and 69 491 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	17-Sep-21	13	13	0	0.00%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. So far, the total number of cases in 2021 is 13.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	15-Sep-21	20 961	20 961	106	0.50%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 15 Sep 2021 a total of 20 961 cases have been confirmed, including 20 287 recoveries and 106 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	16-Sep-21	6 388	6 388	121	1.90%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 16th September 2021, a total of 6 388 confirmed COVID-19 cases were reported in the country including 121 deaths and 4 374 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	5-Aug-21	13	13	9	69.20%
As of 5 August 2021, 13 cases of Lassa fever have been reported from Kenema (11) and Kailahun (2) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 69%. Lassa fever is known to be endemic in Sierra Leone and surrounding countries.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	21-Aug-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.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	19-Sep-21	2 882 630	2 882 630	86 174	3.40%
Since the start of the COVID-19 pandemic in South Africa by 19 September 2021, a cumulative total of 2 882 630 confirmed cases and 86 174 deaths have been reported with 2 732 363 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	15-Aug-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. The six most affected counties are Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	15-Aug-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 175 000 people living in protection of civilian sites across the country. According to OCHA, 90K people have been affected by flooding from 1 January - 6 August 2021 in 11 counties including Ayod, Fangak, Renk, Guit, Gogrial West, Aweil South, Mayendit, Koch, Nhaildu Rubkona and Malakal from Fangak.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	19-Sep-21	11 814	11 814	121	1.00%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 19th September 2021, a total of 11 814 confirmed COVID-19 cases were reported in the country including 121 deaths and 11 195 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	3-Jan-18	5-Sep-21	1 086	104	9	0.80%
The current outbreak in the Bentiu IDP camp, which started at the beginning of 2018, is ongoing. As of 5 Sep 2021, a total of 1 086 cases of hepatitis E including 9 deaths (CFR: 0.83%) have been reported. Hepatitis E cases have been above the epidemic threshold since week 19 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	18-Aug-21	1 313	54	2	0.20%
Since week 38 of 2019 to 24 July 2021 (week 30 of 2021), a total of 1 313 cases of measles were reported including 52 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	17-Sep-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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	6-Aug-21	1 367	1 367	50	3.70%
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 22 July 2021, a total of 1 367 cases have been reported in the country including 50 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	19-Sep-21	24 599	24 599	213	0.90%
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 19 September 2021, a total of 24 599 cases including 213 deaths and 20 426 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	17-Sep-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	19-Sep-21	122 277	122 277	3 131	2.60%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 28 August 2021, a total of 122 277 confirmed COVID-19 cases, 95 889 recoveries with 3,131 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	19-Sep-21	208 469	208 469	3 638	1.70%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 19th September 2021, a total of 208 469 confirmed COVID-19 cases were reported in the country including 3 638 deaths and 204 161 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	25-Jul-21	835	0	3	0.40%
The anthrax outbreak is ongoing in Zimbabwe. From Week 1 to 29 of 2021, there were 88 cases reported and no deaths. This outbreak started in Week 36 of 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. The last five reported cases were reported in Gokwe North District in Midlands Province during Week 28 of 2021.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	19-Sep-21	127 938	127 938	4 567	3.60%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 19 September 2021, a total of 127 938 confirmed COVID-19 cases were reported in the country including 4 567 deaths and 120 946 cases that recovered.									
<b>Closed Events</b>									
Guinea	Marburg Virus Disease	Grade 2	4-Aug-21	4-Aug-21	16-Aug-21	1	1	1	100.00%
On 6 August 2021, WHO was notified by the Ministry of Health of Guinea of a confirmed case of Marburg virus disease (MVD) in Guéckédou prefecture in Nzérékoré Region of south-western Guinea. The case, a male, had onset of symptoms on 30 July 2021. On 1 August 2021 he attended a small health facility near his village of residence with symptoms of fever, headache, fatigue, abdominal pain, and gingival haemorrhage. A rapid diagnostic test performed for malaria was negative. On 2 August 2021 he died in the community and the alert was raised by the sub-prefecture public health care facility to the prefectorial department of health in Gueckedou. A post-mortem oral swab sample was collected and sent on the same day to the viral haemorrhagic fever (VHF) reference laboratory in Guéckédou. The real time PCR test result on 3 August confirmed MVD and was negative for Ebola. On 4 August, the sample was sent the National Reference Laboratory in Conakry who provided reconfirmation by real-time PCR that the sample was positive for Marburg disease. On 16 September 2021, the Ministry of Health of Guinea declared the end of the MVD outbreak that affected the Guéckédou prefecture in Nzérékoré Region of south-western Guinea after a 42-day countdown. The countdown started on 5 August, the day after the safe and dignified burial of the only confirmed case reported in this outbreak.									

†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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Correspondence on this publication may be directed to:

Dr Mary Stephen

Programme Area Manager, Health Information & Risk Assessment. ai

WHO Emergency Preparedness and Response

WHO Regional Office for Africa

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

Email: afrooutbreak@who.int

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#### Contributors

Freddy BANZA-MUTOKA (Guinea)  
Georges Alfred KI-ZERBO (Guinea)  
Dr Adamou Moustapha (Niger)

#### Graphic design

A. Moussongo

#### Editorial Team

M. Stephen  
C. Okot  
V. Mize  
G. Williams  
J. Kimenyi  
E. Kibangou  
O. Ogundiran  
T. Lee  
F. Kambale  
J. Nguna  
R. Mangosa Zaza

#### Production Team

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

#### Editorial Advisory Group

Dr. Salam Gueye, *Regional Emergency Director*  
M. Stephen  
A. Talisuna  
A. Fortin

#### Data sources

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