

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 49: 29 November – 5 December 2021
Data as reported by: 17:00; 5 December 2021

0

New event

142

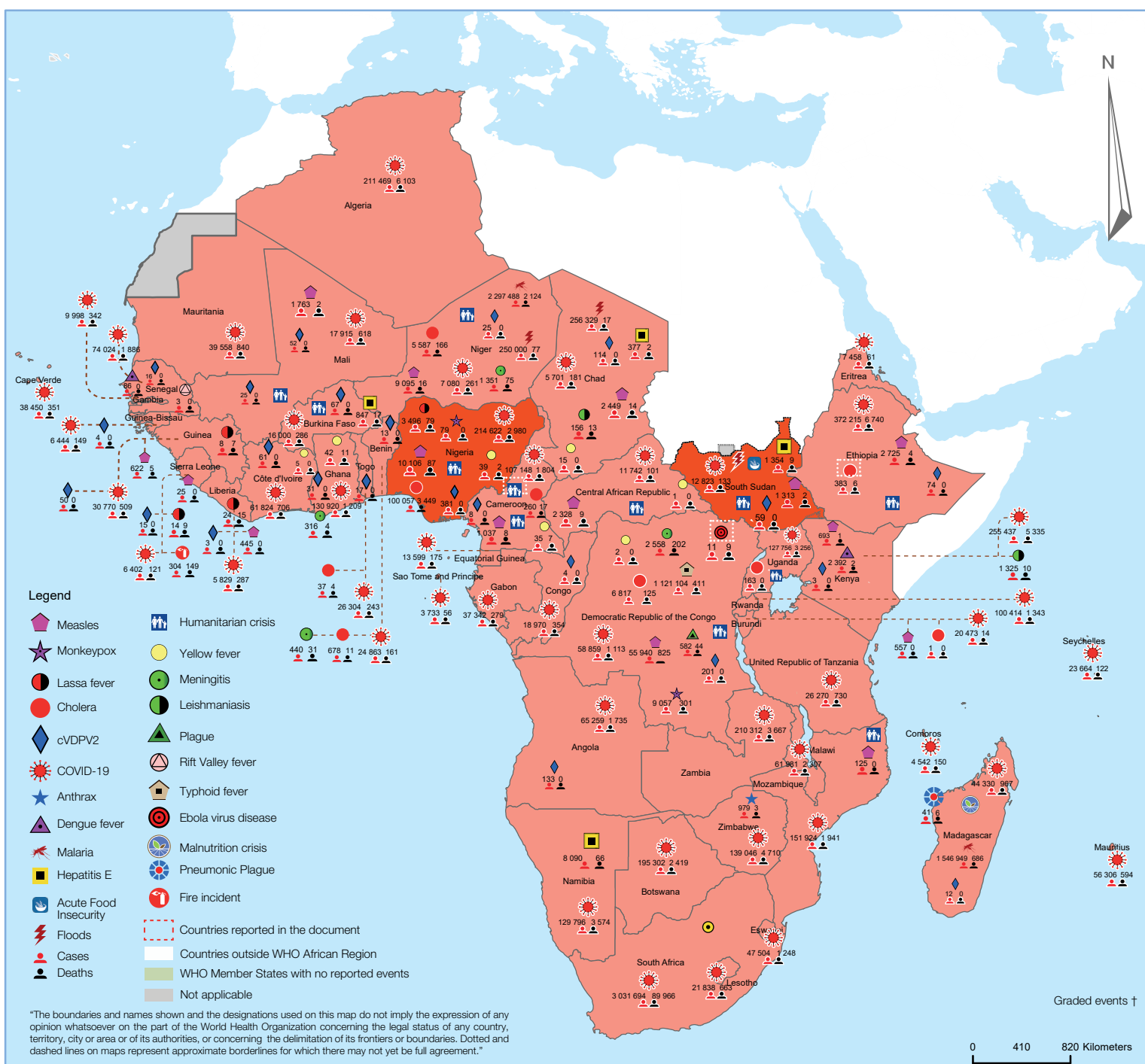
Ongoing events

125

Outbreaks

17

Humanitarian
crises



3

Grade 3 events

38

Grade 2 events

2

Grade 1 events

44

Ungraded events

3

Protracted 3 events

4

Protracted 2 events

3

Protracted 1 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 142 events in the region. This week's articles cover:

- [COVID-19 across the WHO African region](#)
- [Ebola Virus Disease in the Democratic Republic of the Congo](#)
- [Cholera in Ethiopia](#)
- [Humanitarian Crisis in Cameroon](#)

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 have increased for the second time since mid-August when a fall in cases was first observed in the African region. Even with this increase, there remains a variation in the pandemic trends across different sub regions. While most countries have seen a sustained decline in cases, eight countries from Southern Africa saw a sharp rise in new cases in the past week, namely Eswatini, Lesotho, Malawi, Mozambique, Namibia, South Africa, Zambia and Zimbabwe. This increase is primarily because of South Africa's Gauteng province, the country's most populous province, observed a spike along with increasing hospital admissions in the past week. Recent genomic sequencing results revealed the Omicron variant, as the dominant SARS-CoV-2 variant among samples sequenced during November 2021. So, it is likely that the observed increase in new cases in South Africa over the last two weeks is being driven by the circulation of the Omicron variant, although evidence remains inconclusive. While investigations continue into the Omicron variant, WHO recommends countries to take a risk-based and scientific approach and put in place measures which can limit its possible spread.
- It is now 35 days since the last known confirmed Ebola virus disease case was reported in the Democratic Republic of the Congo. Although, all contacts have completed their 21 days of active follow-up, some contacts remain unseen. The end of outbreak count-down has begun and 12 days are left before the final declaration.
- A cholera outbreak has been ongoing in Somali and Oromia regions of Ethiopia since end of August 2021 when the first case was detected. This is the second cholera outbreak that the country has experienced this year following another large-scale cholera outbreak that just ended in May 2021. The ongoing outbreak appears in a context of the armed conflict that started in Tigray region in November 2020 and has generated a major humanitarian crisis within the country and trans-border population movements. Among the identified gaps for the outbreak response are: insufficient funds for the response, logistics shortage and inadequate case management drugs, wash supplies, sensitization materials and oral cholera vaccine (OCV) for the reactive vaccination campaign.
- The humanitarian crisis in Cameroon's North-West and South-West regions has been ongoing for about four years. The problems are related to socio-political disagreements, which have caused violent incidents and human rights abuses among highly vulnerable populations of internally displaced persons and children. In recent months, brutal crimes have been committed on teachers, school children and their parents due to unresolved political problems and increasing insecurity.

Ongoing events

Coronavirus disease 2019

African region

6 285 624 : 152 727 : 2.4%
Cases : **Deaths** : **CFR**

EVENT DESCRIPTION

The WHO African region reported 85 111 new cases of coronavirus disease (COVID-19) in the past seven days (29 November – 5 December 2021), reflecting an 99.0% increase compared to the previous week. Sixteen countries (Cabo Verde, Democratic Republic of the Congo, Eswatini, Gambia, Kenya, Lesotho, Liberia, Malawi, Mali, Mozambique, Namibia, Senegal, South Africa, Togo, Zambia and Zimbabwe) saw a 20% or more increase in weekly cases compared to the past week.

A total of 17 (36.0%) countries reported a decrease of 20% or more in the number of new cases compared to the previous week. These countries are Botswana, Burkina Faso, Cameroon, Central African Republic, Congo, Equatorial Guinea, Gabon, Guinea, Guinea-Bissau, Madagascar, Mauritania, Mauritius, Rwanda, Seychelles, Sierra Leone, Uganda, and the United Republic of Tanzania. Four countries namely, Benin, Chad, Niger and Sao Tome and Principe had no significant change in their weekly COVID-19 cases.

Nearly all the new cases reported in the past week are concentrated in the top five countries, with 92.3% (78 579) of the cases recorded. These countries include; South Africa (70 288 new cases, 122.0% increase, 116.4 new cases per 100 000 population); Zimbabwe (5 055 new cases, 1369.0% increase, 33.3 new cases per 100 000); Algeria (1 317 new cases, 10.0% increase, 2.9 new cases per 100 000); Eswatini (966 new cases, 1794% increase, 82.0 new cases per 100 000) and Ethiopia (953 new cases, 10.3% decrease, 0.8 new cases per 100 000).

During the same reporting period, a drop in weekly COVID-19 deaths in the African region was observed as 414 deaths were reported in 25 countries, a 37.0% decline compared with the previous week when 567 deaths were recorded. The highest numbers of new deaths were reported from South Africa (169 new deaths; 24.0% decrease; 0.3 new deaths per 100 000 population), Mauritius (67 new deaths; 51.0% decrease; 5.3 new deaths per 100 000), Ethiopia (60 new deaths; 4.0% increase; 0.1 new deaths per 100 000), Algeria (45 new deaths; 22.0% increase; 0.1 new deaths per 100 000), and Mali (13 new deaths; 0.0% change; 0.1 new deaths per 100 000).

Only five countries, namely Burkina Faso, Eritrea, Mali, Mauritius, and Niger are undergoing a COVID-19 resurgence.

Since the beginning of the COVID-19 pandemic in the African region, the cumulative number of confirmed COVID-19 cases is 6 285 624, with more than 5.8 million recoveries, giving a recovery rate of 94.4%. The total number of deaths now stands at 152 727, accounting for a CFR of 2.4%. The WHO African Region is one of the least affected regions in the world, accounting for 2.5% of global cases and 3.0% of global deaths.

Overall, South Africa has recorded the highest number of COVID-19 cases in the region with 3 031 694 cases (48.0%), followed by Ethiopia 372 215 (6.0%), Kenya 255 437 (4.1%), Nigeria 214 622 (3.4%), and Algeria 211 469 (3.4%), accounting for 65.0% (4 085 437) of all cases. The average cumulative attack rate (number of cases per million) in the African region is estimated at 6 077 per million population, ranging from 310 to

242 264 per million population.

Similarly, most reported deaths occurred in South Africa, which accounts for 59.0% (89 966) of all deaths. Ethiopia has the second-highest number of deaths (6 800 deaths, 4.5%) followed by Algeria (6 103, 4.0%), Kenya (5 335, 3.5%) and Zimbabwe (4 710, 3.1%), all accounting for 74.0% (112 914) of all deaths reported in the region. The median number of deaths per million in the African region is estimated at 69.0/million population (range: 1.1/million – 1 533/million) with an average cumulative death rate (per million) in the African region estimated at 147 million population.

In the past seven days, 12 new health worker infections were reported from Kenya. Thus far, there have been 144 745 COVID-19 infections (2.4% of all cases) among health workers in the region, with South Africa accounting for 49.0% (71 113) of the total infections. Algeria (11 936, 8.3%), Kenya (7 854, 5.4%), Zimbabwe (5 404, 3.7%) and Mozambique (4 779, 3.3%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. The United Republic of Tanzania (13.0%), Liberia (6.0%), Algeria (5.6%), Chad (5.1%), and Niger (5.0%) have the highest proportion of health worker infections by country. Only Eritrea has not reported any healthcare worker infections.

The African continent has recorded more than 8.8 million cases of COVID-19, with more than 224 050 deaths (CFR 2.5%) and more than 8.1 million people have recovered. The African continent accounts for 3.4% of global cases and 4.3% of global deaths.

As of 2 December 2021, more than 352 million COVID-19 doses have been received in African countries and 67% of these (236 million) of these doses have been administered. Around 101 million people in Africa are fully vaccinated. This equates to 7.3% of the African population. In comparison, 68% of people in the United Kingdom have been fully vaccinated; 58% in the United States; and 67% in the European Union. South Africa, Ethiopia, Kenya, and Rwanda now offer vaccination for children ages 12 to 18.

Recent genomic sequencing results revealed the new variant of concern, Omicron, which was the dominant SARS-CoV-2 variant among samples sequenced during November 2021.

Globally, over 308 cases of the Omicron variant have been confirmed, by 14 countries, including six African countries: Botswana, Ghana, Nigeria, South Africa, Zambia and Zimbabwe as of 2 December 2021.

PUBLIC HEALTH ACTIONS TO HELP AFRICAN COUNTRIES MANAGE OMICRON

- In South Africa, WHO is deploying a surge team to Gauteng Province to support surveillance, contact tracing, infection prevention and treatment measures. Botswana is boosting oxygen production and distribution, which are essential for the treatment of critically ill patients.
- Additional epidemiologists and laboratory experts are also being mobilized to boost genomic sequencing in Botswana,

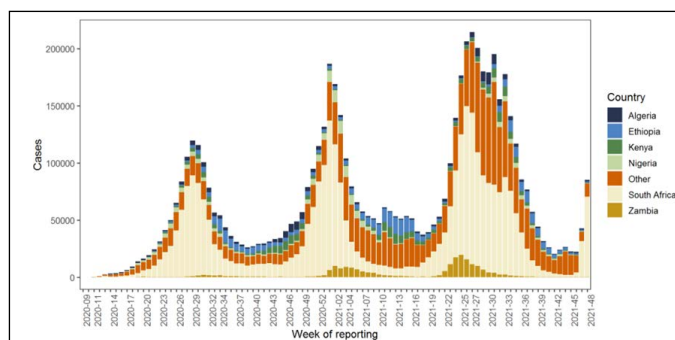
[Go to map of the outbreaks](#)

[Go to overview](#)

Mozambique, and Namibia. WHO has also mobilized US\$ 12 million to support critical response activities in countries across the region for the next three months.

- African countries are also refining operational plans for stronger disease surveillance and investigations. WHO is urging countries to take key steps to enhance efforts to track the Omicron variant, including ensuring their PCR testing equipment can detect it, increasing their sampling and sequencing of COVID-19 test samples by at least double to 150 samples a week from the current average of 75, and review past sequencing samples for potential signs of Omicron. This is an aggressive approach to speed up the determination of Omicron's characteristics.
- Logistics team will map out available supplies and consider prepositioning additional commodities.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 5 December 2021
(*n* = 6 285 624)



SITUATION INTERPRETATION

New COVID-19 cases have increased for the second time in the past 4 months. Countries in Southern Africa, have recorded a very high increase in new cases in the past seven days. At the same time, COVID-19 deaths have shown a sustained decline. WHO is currently monitoring a new variant of concern (Omicron) that was first identified in Southern Africa. There is a need to enhance surveillance and sequencing efforts to better understand circulating SARS-CoV-2 variants. African region also needs to step up implementation of all public health and social measures to prevent transmission of COVID-19.



Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 5 December 2021

Country	Total Cases	Total Deaths	Total Re-covered	Case Fatality Ratio (%)	Health Work-ers
South Africa	3 031 694	89 966	2 858 144	3.0	71 113
Ethiopia	372 215	6 800	349 626	1.8	3 354
Kenya	255 437	5 335	248 426	2.1	7 854
Nigeria	214 622	2 980	207 450	1.4	3 175
Algeria	211 469	6 103	145 195	2.9	11 936
Zambia	210 312	3 667	206 466	1.7	1 121
Botswana	195 302	2 419	192 452	1.2	2 082
Mozambique	151 924	1 941	149 575	1.3	4 779
Zimbabwe	139 046	4 710	128 868	3.4	5 404
Ghana	130 920	1 209	129 042	0.9	4 763
Namibia	129 508	3 573	125 506	2.8	4 380
Uganda	127 756	3 256	97 627	2.5	2 880
Cameroon	107 148	1 804	104 203	1.7	3 655
Rwanda	100 414	1 343	98 887	1.3	682
Senegal	74 024	1 886	72 103	2.5	419
Angola	65 259	1 735	63 325	2.7	939
Malawi	61 981	2 307	58 824	3.7	2 231
Côte d'Ivoire	61 824	706	60 864	1.1	1 913
Democratic Republic of Congo	58 858	1 113	55 875	1.9	728
Mauritius	56 306	594	54 742	1.1	30
Eswatini	47 504	1 248	45 271	2.6	1 066
Madagascar	44 330	967	42 915	2.2	70
Mauritania	39 558	840	37 877	2.1	24
Cabo Verde	38 450	351	37 972	0.9	140
Gabon	37 342	279	32 296	0.7	345
Guinea	30 770	387	29 725	1.3	682
Togo	26 304	243	25 923	0.9	891
United Republic of Tanzania	26 270	730	180	2.8	3 351
Benin	24 863	161	24 685	0.6	139
Seychelles	23 664	122	23 128	0.5	945
Lesotho	21 838	663	13 741	3.0	473
Burundi	20 473	14	20 359	0.1	38
Congo	18 970	354	16 853	1.9	203
Mali	17 916	618	15 298	3.4	87
Burkina Faso	16 000	286	15 345	1.8	288
Equatorial Guinea	13 599	175	13 346	1.3	541
South Sudan	12 823	133	12 463	1.0	294
Central African Republic	11 742	101	11 212	0.9	51
Gambia	9 998	342	9 641	3.4	142
Eritrea	7 458	61	7 240	0.8	0
Niger	7 080	261	6 729	3.7	355
Guinea-Bissau	6 444	149	6 277	2.3	23
Sierra Leone	6 402	121	4 399	1.9	264
Liberia	5 829	287	5 535	4.9	346
Chad	5 703	181	4 874	3.2	292
Comoros	4 542	150	4 313	3.3	155
Sao Tome and Principe	3 733	56	3 675	1.5	102
Cumulative Cases (N=47)	6 285 624	152 727	5 878 472	2.4	144 745

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

[Go to overview](#)

4

[Go to map of the outbreaks](#)

EVENT DESCRIPTION

The last known confirmed case of Ebola virus disease (EVD) outbreak in Beni Health Zone (HZ) in North Kivu Province of the Democratic Republic of the Congo was reported on the 30 October 2021. Therefore, 35 days have elapsed with no positive EVD case reported.

The total number of EVD cases remains 11 as of 04 December 2021, including eight confirmed cases (with four community deaths) and three probable cases in Beni HZ. Two EVD survivors have been registered.

The overall case fatality rate (CFR) is 81.8% (9/11) and 75.0% (6/8) among confirmed cases.

Thus far, three (17.0%) out of the 18 health areas in Beni HZ have reported confirmed cases, namely, Butsili (6 cases), Bundji (1 case) and Ngilinga (1 case). Children under the age of five years account for 50.0% (4/8) of the cases.

As of 04 December 2021, all the listed contacts had completed their 21 days of follow-up period and were discharged from active monitoring. Two of the contacts lost to follow up were found on day 42 in Butsili HA. A total 25 contacts remain unseen since day 1 of their follow-up period.

A total of 349 new alerts were notified including five deaths from six health zones, of which 344 (98.6%) were investigated and 26 (7.6%) validated as EVD suspected cases. Blood samples were collected from all suspected cases.

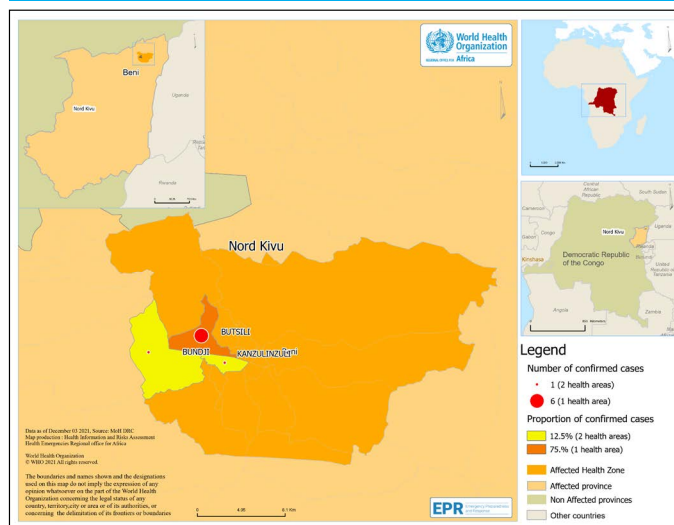
On 04 December 2021, 71 frontline healthcare workers were vaccinated from five sites (20 Butsili, 11 in Ngongolio, 22 in Mandrandele, 10 in Paid8 and 1 in Mabakanga). The total number of people vaccinated since the beginning of the vaccination activities is 1 022, including 98 high risk contacts, 300 contacts of contacts and 258 probable contacts with rVSV-ZEBOV-GP vaccine and 295 frontline health care workers with ERVEBO vaccine. Furthermore, 121 frontline health care workers were vaccinated, including 11 high risk contacts, 37 contacts of contacts and 73 probable contacts.

Since the declaration of the EVD outbreak in Beni HZ, a total 1 312 samples including 499 swabs have been collected, of which eight were confirmed EVD cases.

PUBLIC HEALTH ACTIONS

- Six interactive radio talk shows were conducted with a focus on the importance of community-based surveillance as a strategy to control EVD.
- A total of 19 411 home visits were conducted and 52 219 persons were sensitized on EVD prevention on 04 December 2021; 322 alerts were notified including 6 deaths.
- Alert monitoring continues using both active and passive surveillance in health facilities and communities.
- Six suspected cases are currently under medical care at the isolation facilities (one in Bundji, one in Butsili, one in Mandrandele, one in Malepe and two in Kanzulinzuli).
- Infection prevention and control (IPC) monitoring and education activities continue. Ninety-seven health care workers from 23 Health facilities were sensitized on IPC standard practices.

Distribution of confirmed cases of Ebola Virus Disease in the Democratic Republic of the Congo, as of 5 December 2021



- A total of 96 683 travellers were screened out of 98 533 persons that went through the different points of control. A total of 11 alerts were notified from travellers at the points of entry, and six were validated as a suspected case of EVD.
- The five suspected cases in isolation centres are being offered psychological support services, including 13 care takers. In the community, 139 persons participated in 17 psychosocial sessions on different aspects of the EVD response.
- Community awareness activities on the various themes related to prevention of sexual exploitation and abuse has continued.

SITUATION INTERPRETATION

No new confirmed case of EVD has been notified in the Democratic Republic of Congo in the past 35 days. Contact follow-up remains of concern with many contacts lost to follow-up. In addition, the response activities against EVD in Beni is currently affected by inadequate resources for the response, and lack of efficient standardized isolation centres in some areas.

PROPOSED ACTIONS

- There is need to finalize the assessment of health facilities in non-priority structures in order to have a mapping on IPC in the entire Beni HZ.
- The response teams need to strengthen community engagement to increase uptake of EVD preventive measures, especially vaccination.
- Challenges around community surveillance, contact follow-up and other response measures need urgent action.

EVENT DESCRIPTION

Oromia and Somali regions in Ethiopia are currently experiencing a cholera outbreak, since 31 August 2021. The highest number of daily cases reported so far, was on 28 September with 26 cases. As of 23 November 2021, 383 cases with six associated deaths (case fatality ratio (CFR) =1.6%), have been reported with an attack rate of 114.6 per 100 000 persons. Males are more affected with 51.2% (196) of cases than female with 48.8% (187). The 15 to 44 years old age group is the most affected with 165 cases (43.1%).

Since the start of the cholera outbreak in Ethiopia, four health districts have been affected: Delo mena (132 cases; 3 deaths), Kersadulla (103 cases; 3 deaths), Harana Buluk (79 cases; 0 death) and Meda Welabu (63 cases; 0 death). Of the two regions affected, the Oromia region has reported more cases (277 cases) as compared to the Somali region with 106 cases.

Among the 383 reported cases so far, 112 (29.2%) were severe cases managed in the cholera treatment canter. The four health districts affected have an estimated population of 386 261 served by two hospitals, 19 health centres and 77 health posts. Response teams continue to face a few challenges that include: insufficient logistics, namely drugs and supplies, water purifiers, fuel, home disinfection chemical, wash supplies; sensitisation materials and oral cholera vaccines.

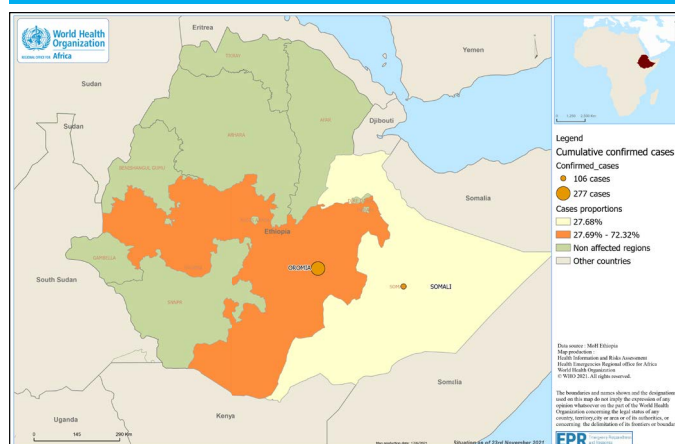
PUBLIC HEALTH ACTIONS

- A Cholera outbreak committee including Ministry of Health, local and international organizations has been established and meets regularly
- Cholera task force meetings are often held in the affected health districts
- Active case search, contacts tracing and case management activities continue. The response teams are also searching private clinics for suspected cases who are later referred to the cholera treatment centers.
- Capacity building, logistics and cholera supplies have been provided with the support from Ministry of Health partners
- The risk communication team has conducted mass community mobilization and health education at places of worship and other public places.

SITUATION INTERPRETATION

Cholera is endemic in Ethiopia and the ongoing outbreak is the second one the country is facing this year. The first outbreak that ended in May 2021 was a continuation of the large-scale cholera outbreak that started in April 2019 with several cases registered from 11 regions. The presence of numerous humanitarian actors in the country can be considered as an opportunity to complement the Ministry of Health efforts in responding this outbreak. Nonetheless, the ongoing conflict in the country may affect the quality of that outbreak response.

Geographic distribution of Cholera cases in Ethiopia, as of 23 November 2021.



PROPOSED ACTION

- It is important that all operational partners responding to the humanitarian crisis provide the required support to the Ministry of Health by addressing all the identified gaps in a bid to control the cholera outbreak
- Risk communication and community engagement activities must continue throughout the outbreak affected and at-risk areas
- For the longer term, it is highly recommended that the road map for cholera elimination by 2030 be implemented by all countries with cholera including Ethiopia.



Aschalew EPHI DDG administrateur l'OCV 2020

EVENT DESCRIPTION

The humanitarian situation remains complex in Cameroon with various areas of the country affected. The North-West and South-West (NWSW) regions of the country are experiencing a protracted 2 humanitarian crisis where 1.46 million people are estimated to be in need of humanitarian assistance. The crisis partly originates from a long-standing colonial problem stemming from the establishment of the area by Anglophones. By late 2017, government separatists began an insurgency in the area and in November 2017 the government of Cameroon declared war on them. As a result, an estimated 711 000 people are internally displaced in NWSW regions as of 31 October 2021 according to the United Nations High Commissioner for Refugees. The NWSW area also faces food insecurity where an estimated 1.1 million people are affected.

On 15 September 2021, a lockdown was imposed in NWSW through 2 October 2021 by non-state armed groups (NSAGs) which banned all movement, work, and social activity, and was enforced by use of arms and in some cases improvised explosive devices. The only movement was by taxi or motorbikes and people were allowed to attend church and go to markets. Humanitarian partners were forced to stop their operations during the lockdown. The access to health, education, livelihoods, and humanitarian aid were severely impacted.

The lockdown affected the population's access to timely and equitable healthcare. Mobile clinics could not operate and while ambulances were allowed to operate for medical emergencies, the majority of people found their own means to arrive at health facilities, which was made difficult by the lockdown regulations. Additionally, the COVID-19 vaccination campaign and medical supply chain were interrupted by the lockdown. More than 200 000 vulnerable people that were supposed to receive food assistance in September were unable to do so due to the ban of movements and activities.

One of the most detrimental consequences the NWSW regions face because of the conflict is the closure of schools. The main reason for closure is the violence propagated by the government's decision to increase the use of the French language in schools in Anglophone areas which has caused protests and rebellion. Due to the attacks, schools have been shut for the past three years and were slated to reopen in September 2021. According to OCHA, 66% of schools remain closed in NWSW affecting over 700 000 children. NSAGs are rumoured to threaten parents, students, and teachers attempting to maintain the education system and have reportedly committed kidnappings, assaults, and killings on them.

PUBLIC HEALTH ACTIONS

- Malnutrition screenings are ongoing by partners providing health care services in the affected areas.
- A renovated intensive care unit for COVID-19 patients and 25 oxygen concentrators were handed over by WHO to the Regional Delegation of Public Health in the North-West region.
- Regional delegations in NWSW conducted a reactive campaign to a measles outbreak.

- Risk communication messages on COVID-19 and feeding practices for infants and children have been communicated.
- Partners have provided non-formal learning in safe spaces including radio education and distance-learning programmes for children who cannot attend school.

SITUATION INTERPRETATION

The protracted level 2 humanitarian crisis in the North-West and South-West regions of Cameroon continues to affect 1.46 million people in need of humanitarian assistance. Violence among armed groups is targeted at students and teachers which has caused some 700 000 children to not attend school fearing kidnapping, assaults, or even death. Continuous attacks have caused prolonged deterioration of the basic services in the regions including health facilities and schools.

PROPOSED ACTIONS

- There is a need for high-level advocacy to support access to healthcare, education, and protection to those affected by the crisis. The conflict has had a long-standing impact on the people in the area and has affected vulnerable populations such as internally displaced persons and children. The crisis will have a profound impact on this generation's ability to generate livelihoods as well as deprive children of an education.
- There is a need for political resolution to the crisis in NWSW, but it will also be important for humanitarian agencies to provide support in the developmental areas of society especially among the children whose futures will be profoundly impacted.

A snapshot of the humanitarian crisis in Cameroon,
as of 5 November 2021.

KEY FIGURES

2.2M

Affected people in
NWSW

1.6M

Targeted for
assistance in NWSW

573.9K

IDPs within or
displaced from
NWSW

383.6K

Returnees (former
IDP) in NWSW

68.6K

Cameroonian
refugees in Nigeria

FUNDING (2021)

\$361.6M

Required

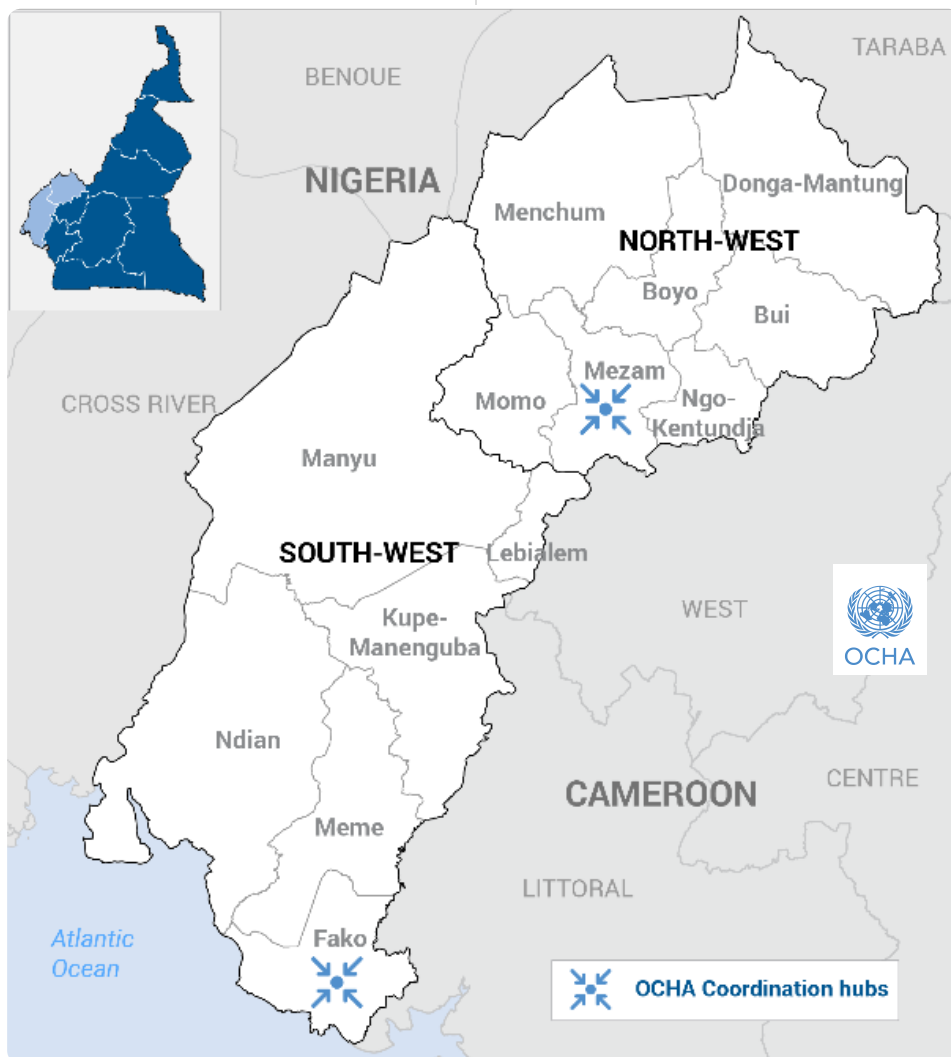
\$108.5M

Received



30%
Progress

FTS: <https://fts.unocha.org/appeals/1030/summary>



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

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-2020	25-Feb-2020	5-Dec-2021	211 469	211 469	6 103	2.9%
From 25 February 2020 to 5 December 2021, a total of 211 469 confirmed cases of COVID-19 with 6 103 deaths (CFR 2.9%) have been reported from Algeria. A total of 145 195 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	5-Dec-2021	65 259	65 259	1 735	2.7%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 5 December 2021, a total of 65 259 confirmed COVID-19 cases have been reported in the country with 1 735 deaths and 63 325 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-2019	1-Jan-19	3-Dec-2021	133	133	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 130. These cases are from several outbreaks which occurred in 2019.									
Benin	Cholera	Ungraded	28-Mar-21	28-Mar-21	28-Nov-21	678	21	11	1.6%
Since week 12 (ending 28 March 2021) of this year, cases of cholera have been reported in Benin. As of 28 November 2021, a total of 678 cases with 11 deaths (CFR 1.6%) are reported so far.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	29-Nov-21	24 863	24 863	161	0.6%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 29 November 2021, a total of 24 863 cases have been reported in the country with 161 deaths and 24 685 recoveries.									
Benin	Meningitis	Ungraded	1-Jun-2021	1-Jan-21	15-Oct-21	440	82	31	7.0%
A total of 440 cases and 31 deaths (CFR 7.0%) resulting from meningitis were reported from Week 1 to week 41, 2021 in Benin.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-2019	8-Aug-2019	3-Dec-2021	13	13	0	0.0%
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	29-Nov-21	195 302	195 302	2 419	1.2%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 29 November 2021, a total of 195 302 confirmed COVID-19 cases were reported in the country including 2 419 deaths and 192 452 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-Oct-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 over 1 407 685 million (6.3% of the total population) internally displaced persons as of 31 October 2021 in all 13 regions. The most affected regions were Sahel (493 708, 35.1%) and Centre-Nord (466 314, 33.1%). There are also some 23 610 refugees in the country of which the majority (23 173, 98.1%) are from Mali. 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 October 2021. A cumulative of 3 205 incidents have been reported from January to October 2021 with 343 recorded in October 2021. As of 31 October 2021, 395 health facilities are affected by insecurity in the 6 regions most affected by the crisis, of which 89 (24%) are completely closed depriving more than 850K inhabitants access to health care. About 92% of closed health facilities are due to direct attacks by unidentified armed groups on health facilities.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	28-Nov-21	16 000	16 000	286	1.8%
Between 9 March 2020 and 28 November 2021, a total of 16 000 confirmed cases of COVID-19 with 286 deaths and 15 345 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	3-Dec-2021	67	67	0	0.0%
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	Cholera	Ungraded	15-Nov-21	7-Nov-21	7-Nov-21	1	1	0	0.0%
During week 44 (ending 7 November 2021), one confirmed case of cholera and zero death (CFR 0.0%) was reported from Cibitoke health district in Burundi. This is the first case of cholera reported from Burundi in 2021. Last year a total of 95 cholera cases and one death (CFR 1.1%) were reported in Burundi with 30 cases and zero death from Cibitoke health district. In 2019 cases were also reported from Cibitoke health district during a larger outbreak of which 1074 cases, 7 deaths (CFR 0.7%) were reported in Burundi. This large outbreak affected Bujumbura Mairie, Bujumbura Rurale, Cibitoke and Bubanza health districts.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	3-Dec-2021	20 473	20 473	14	0.1%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 03 December 2021, the total number of confirmed COVID-19 cases is 20 473, including 14 deaths and 20 359 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	1-Jan-21	23-Oct-21	557	496	0	0.0%
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 41, 2021, Burundi has reported a total of 557 suspected cases, 496 reported by case-by-case surveillance with no death, 72 confirmed by IgM+ 274 by epidemiological link and 6 clinical cases. Six districts are currently in outbreak mode : Bubanza, Mpanda, Bugarama, Musinga, Rumonge and Cibitoke.									

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-2013	27-Jun-2017	31-Oct-21	-	-	-	-
According to UNHCR and OCHA reports, an estimated 1.2 million people need assistance, 341 535 people are internally displaced as of 31 October 2021. IDPs have been leaving the Mayo-Sava division during the last months due to attacks by NSAG where improvised explosive devices have been identified and were attempted to be deactivated.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-2018	31-Oct-21	-	-	-	-
According to reports from UNHCR, an estimated 711 056 IDPs have been registered while 466 578 returnees have been reported as of 31 October 2021. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. Schools resumed session, but teachers and students faced attacks. There has been an increase in the use of improvised explosive devices (IEDs), carjacking, and clashes between security forces and NSAGs, leading to civilian population displacement. There were also 454 854 refugees as of 31 October 2021, of which more than 333K (73.3%) arrived from Central African Republic.									
Cameroon	Cholera	Grade 2	1-Jan-21	5-Aug-2021	29-Nov-21	260	4	17	6.5%
Since the beginning of this year up to 29 November 2021, 260 suspected cases of Cholera have been notified from Far-North, North, Centre, South West and Littoral regions. Seventeen deaths are reported so far (CFR 6.5%) as of 29 November 2021. 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	24-Nov-21	107 148	107 148	1 804	1.7%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 24 November 2021, a total of 107 148 cases have been reported, including 1 804 deaths and 104 203 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-2019	1-Jan-21	14-Nov-21	1 037	643	8	0.8%
From Epi week 1 to 46, 2021, Cameroon has reported 1 037 suspected with 8 deaths (CFR 1.9%). Of the 1 000 investigated cases, 643 were positive including 250 cases IgM+, 96 clinically compatible and 297 epidemiologically linked; 86% of the children are under 10 years of age and only 33% known to be vaccinated with at least 1 dose of MCV. Twenty four districts with confirmed outbreak spread across 7 regions of country.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	3-Dec-2021	8	8	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were seven cases reported in 2020.									
Cameroon	Yellow fever	Grade 2	7-Feb-2021	4-Jan-21	14-Nov-21	35	24	7	20.0%
From 1 January to 14 November 2021, a total of 35 presumptive cases of Yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur Cameroun, of which seven deaths were recorded. These cases originated from nine different regions with a total of 19 health districts (HDs) affected: Adamaoua region, Central region, East region, Far North region, Littoral region, North region, North-West region, South region, and West region. Some of the PRNT-positive cases had a history of vaccination against Yellow fever.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	5-Dec-2021	38 450	38 450	351	0.9%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 05 December 2021, a total of 38 450 confirmed COVID-19 cases including 351 deaths and 37 972 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-2013	11-Dec-2013	25-Nov-21	-	-	-	-
According to OCHA figures, 3.1 million people (63% of the total population) are in need of assistance and protection and will continue to need it in 2022. There are 722 101 people that are internally displaced as of 25 Nov 2021 and 733K persons are refugees in neighboring countries. Among the problems people face are recurring violence and continued disruptions of basic services deteriorating the living conditions. Displacements were mostly caused by clashes between the Central African Armed Forces (FACA) and their allies against armed groups, fear of abuses by armed groups, and flooding as well. Food insecurity is also estimated to be 2.4 million people in 2022.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	28-Nov-21	11 742	11 742	101	0.9%
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 28 November 2021, a total of 11 742 confirmed cases, 101 deaths and 11 212 recovered were reported.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	7-Nov-21	2 328	283	9	0.4%
From 1 January to 07 November 2021 : 2 328 suspected cases have been reported, 283 cases with blood samples out of a total 608 investigated, 283 confirmed cases (75 IgM+ cases, 196 by epidemiological link and 12 compatible cases) and 9 deaths (CFR : 0.4%). Ten health districts (out of 35) have reached the epidemic threshold (Bossebelé, 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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-2021	9-Sep-21	1	1	0	0.0%
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.									
Chad	Floods	Ungraded	6-Oct-21	26-Sep-21	17-Nov-21	256 329	-	17	0.0%
The floods since June 2021 has affected about 256 329 people (42 788 households) in 400 villages across 9 regions of Chad (Borkou, Ennedi West, Logone Oriental, Mandoul, Moyen-Chari, Ouaddai, Sila, Lake and Tandjile). As of 28 October 2021, flooding caused significant material and human damage in the Lac province, particularly on the island of Kinasserom; 23 households (115 people) were affected, including two children who drowned in Fourkoulom. As of 17 November 2021, a total of 17 people died, and 17 others are missing and 329 people have been injured. Authorities have appealed to partners and to people of goodwill for assistance. Priority needs identified so far are food, shelter, household supplies/kits, livelihood, twelve health facilities need support (drug and medical supplies), water points treatment (wells) and vaccination.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	30-Nov-21	5 701	5 701	181	3.2%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 30 November 2021, a total of 5 701 confirmed COVID-19 cases were reported in the country including 181 deaths and 4 874 cases who have recovered.									
Chad	Hepatitis E	Ungraded	25-Nov-21	1-Oct-21	20-Nov-21	377	12	2	0.5%
Hepatitis E outbreak had been declared by Chadian health authorities mid-November 2021 in Sategui health area, Lai health district in the Tandjile region. As of 20 Nov 2021, there have been 377 suspected cases and 2 deaths (CFR 0.5%) reported. Among those affected, the majority have been men with 216 cases (57%) and the most affected age group has been less than 10 years of age with 90 cases (23.8%).									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	30-Sep-21	156	15	13	8.3%
Since 1 January 2018, a total of 156 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai) and 13 deaths (CFR 8.3%). For the year 2020 the country registered 74 cases including 3 deaths. Since the beginning of 2021 up to 30 September 2021, 49 cases have been reported including 7 deaths (CFR 14.3%) .									
Chad	Measles	Ungraded	24-May-2018	1-Jan-21	7-Nov-21	2 449	704	14	0.6%
Since 01 January 2021 up to Epi week 45, It has been reported 2 449 suspected cases from 26 out of 129 districts in the country (% of districts), 964 cases investigated with blood samples recorded, 264 of which were confirmed by IgM, 36 were compatible cases and 14 deaths from 4 districts (CFR 0.6%), 26 districts with confirmed outbreaks since the start of the year. 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	3-Dec-2021	114	114	0	0.0%
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.									
Chad	Yellow fever	Grade 2	13-Nov-21	1-Nov-21	13-Nov-21	15	2	0	0.0%
On 13 November 2021, the Institut Pasteur de Dakar shared the results of 17 samples of suspected yellow fever cases from the Mandoul district, Chad, of which two tested PCR positive, six were IgM positive with cross-reactions with other flaviviruses, and six other IgM positive without cross-reactions. Plaque reduction neutralisation test is ongoing for the IgM positive cases.									
Comoros	COVID-19	Grade 3	30-Apr-2020	30-Apr-2020	4-Dec-2021	4 542	4 542	150	3.3%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 04 December 2021, a total of 4 542 confirmed COVID-19 cases, including 150 deaths and 4 313 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	25-Nov-21	18 970	18 970	354	1.9%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 25 November 2021, a total of 18 970 cases including 354 deaths and 16 853 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	3-Dec-2021	4	4	0	0.0%
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	5-Dec-2021	61 824	61 824	706	1.1%
Since 11 March 2020, a total of 61 824 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 706 deaths, and a total of 60 864 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	3-Dec-2021	61	61	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2020 cases remains at 63.									
Côte d'Ivoire	Yellow fever	Grade 2	14-Sep-21	13-Aug-2021	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).									

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-2016	17-Apr-2017	14-Nov-21	-	-	-	-
As of 7 Nov 2021, there are an estimated 5.7 million people internally displaced and 19.6 million are in need of emergency food assistance in the entire country. On 11 Nov 2021 one of the biggest attacks all year happened in the Kisunga village of North Kivu province causing the death of 35 people and forcing 4K people to displace. Health centre workers were kidnapped and facilities were looted and destroyed depriving nearly 12K of health services. In Ituri another attack occurred on 7 Nov 2021 causing 10 deaths, kidnappings, looting and burning of property. Nearly 25K people have relocated to the Beni territory in North Kivu as a result.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	7-Nov-21	6 817	-	125	1.8%
In 2021, from epidemiological week 1 to 44 (ending 7 November 2021), 6 817 suspected cholera cases including 125 deaths (case-fatality rate 1.8%) were recorded in 80 health zones across 16 provinces of the Democratic Republic of the Congo. 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	2-Dec-2021	58 859	58 857	1 113	1.9%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 58 857 confirmed cases and two probable case, including 1 113 deaths have been reported. A total of 55 875 people have recovered.									
Democratic Republic of the Congo	Ebola virus disease	Grade 2	8-Oct-21	8-Oct-21	6-Nov-21	11	8	9	81.8%
On 8 October 2021, a case of Ebola virus disease (EVD) was confirmed by PCR in a 29-month-old male child living in the Butsili health area in the Beni health zone, North Kivu province in the Democratic Republic of the Congo. The patient, treated in turn in three health facilities in the Beni health zone since 27 September 2021, died on 6 October 2021 in a local health facility in a hemorrhagic event. This case follows three suspected clustered deaths of EVD in the same family in the Butsili health area on 14, 19 and 29 September 2021 respectively. These three deaths were not sampled or given a dignified and safe burial. By 6 November 2021, 11 cases, of which 8 confirmed and 3 probable, and nine deaths have been reported.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jun-2021	14-Nov-21	55 940	1 193	825	1.5%
From week 1 through week 46 of 2021 (ending 14 November) 55 940 suspected measles cases and 825 deaths (CFR 1.5%) have been reported. The outbreak has been confirmed in 93 health districts across 23 affected provinces including the capital city of Kinshasa. A total of 3079 suspected cases was investigated, 1 271 cases are IgM + for measles among which 64% are children under five and 29% known to be vaccinated, half of them have an unknown vaccination status, 72% of measles confirmed cases are either zero dose or unknown vaccination status. A total of 483 cases are IgM+ of rubeola among which 94.2% are more than 14 years old.									
Democratic Republic of the Congo	Meningitis	Grade 2	30-Jul-2021	1-Jun-2021	31-Oct-21	2 558	29	202	7.9%
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 31 October 2021, 2 558 cases have been reported including 202 deaths (CFR= 7.9%). Twenty nine samples have been confirmed on the 181 analysed samples including 27 for Neisseria meningitidis serogroup W, 1 Hemophilus influenzae and 1 Sp)									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	14-Nov-21	9 057	39	301	3.3%
Since epidemiological week 1 up to week 45 in 2021, 2 800 cases have been reported with 72 deaths (CFR 2.5%). 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	14-Nov-21	582	-	44	7.6%
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. An investigation was conducted during which suspected cases were identified and samples taken for confirmatory testing. From epidemiological week 1 to 45, 2021 (ending on 14 Nov), 121 suspected pneumonic 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-2018	1-Jan-18	3-Dec-2021	201	201	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 11 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-2021	1-Jan-21	3-Oct-21	1 121 104	19 734	411	0.0%
In 2021, from Epi week 1 to 39, 1 121 104 suspected cases of typhoid fever have been reported including 411 deaths (CFR 0.0%) and 19 734 confirmed cases in the epi week 39. In 2020, a total of 715 920 suspected cases of typhoid fever were reported, including 178 deaths (CFR 0.0%).									

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	Yellow Fever	Grade 2	21-Apr-2021	21-Apr-2021	21-Nov-21	2	2	0	0.0%
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. As of 21 November 2021, confirmatory results are pending for six additional presumptive positive cases.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	1-Dec-2021	13 599	13 599	175	1.3%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 01 December 2021, a total of 13 599 cases have been reported in the country with 175 deaths and 13 346 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	5-Dec-2021	7 458	7 458	61	0.8%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 5 December 2021, a total of 7 458 confirmed COVID-19 cases with 61 deaths were reported in the country. A total of 7 240 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Dec-2021	47 504	47 504	1 248	2.6%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 5 December 2021, a total of 47 504 cases have been reported in the country including 45 271 recoveries. A total of 1 248 associated deaths have been reported.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	25-Nov-21	-	-	-	-
The security situation in the country remains volatile, affecting civilians and limiting humanitarian aid deliverance. Adequate communication, electricity, and banking services remain intermittent. The conflict in the Tigray area has been spilling over into the Afar and Amhara regions for some time but continued in recent weeks with a large displacement of people from the South and North Wello Zones causing massive displacement of people who are living among the host community and others living in crowded centers, including schools. Due to the ongoing conflict in the Amhara region, more than 500 health facilities are unfunctional. Access to the area still remains a challenge, but humanitarian flights operated by the UN have resumed to Mekelle as of 24 Nov 2021.									
Ethiopia	Cholera	Ungraded	31-Aug-2021	31-Aug-2021	23-Nov-21	383	2	6	1.6%
The outbreak of cholera is ongoing in Oromia and Somali regions. The first case was reported on 31 August 2021. As of 23 November 2021, a total of 383 cases with 6 associated death (CFR 1.6%), are reported so far. Five sample were tested and two were positive for cholera. Response activities are ongoing including outbreak investigation, case management, cholera supplies delivery.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Dec-2021	372 215	372 215	6 740	1.8%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 372 215 cases of COVID-19 as of 05 December 2021, with 6 800 deaths and 349 626 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-21	26-Nov-21	2 725	1 426	4	0.1%
In 2021, as of 26 November (Epi week 48), a total of 2 725 cases have been reported of which 1 426 have been confirmed (965 epi-link, 426 IgM and 44 measles compatible) and 4 deaths recorded (CFR 0.1%). Out of the 2 725 suspected cases, 1 380 were under 5 years of age, 896 were between 5 and 14 years of age and 449 were over 15 years of age.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-2019	20-May-2019	3-Dec-2021	74	74	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Nine 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	28-Nov-21	37 342	37 342	279	0.7%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 28 November 2021, a total of 37 342 cases including 279 deaths and 32 296 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	2-Dec-2021	9 998	9 998	342	3.4%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 2 December 2021, a total of 9 998 confirmed COVID-19 cases including 342 deaths, and 9 641 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	20-Nov-21	130 920	130 920	1 209	0.9%
As of 13 November 2021, a total of 130 920 confirmed COVID-19 cases have been reported in Ghana. There have been 1209 deaths and 129 042 recoveries reported.									
Ghana	Meningitis	Ungraded	1-Jan-21	1-Jan-21	25-Oct-21	316	-	4	1.3%
Since the beginning of the year 2021 until Week 43, 316 cases of meningitis have been reported with 4 deaths (CFR of 1.3%). 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-2019	8-Jul-2019	3-Dec-2021	31	31	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. There were 12 cases reported in 2020, while the total number of 2019 cases remain 19. One cVDPV2 positive environmental sample was reported in the Eastern province.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ghana	Yellow fever	Grade 2	3-Nov-21	15-Oct-21	3-Nov-21	42	3	11	26.2%
From 15 October 2021 to 3 November 2021, a total of 42 suspected cases of yellow fever were reported mostly among nomadic settlers from 14 communities in two districts (West Gonja and North Gonja) in Savannah Region, northwest Ghana (bordering Côte d'Ivoire). Eleven out of the 42 suspected cases, including all the three PCR positive cases died, case fatality rate (CFR) 36%. Three blood samples collected from suspected cases tested YF PCR positive at Noguchi Memorial Institute for Medical Research (NMIMR) and six additional samples tested YF IgM positive by ELISA at the National Public Health and Reference Laboratory.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	28-Nov-21	30 770	30 770	509	1.7%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 28 November 2021, a total of 30 770 cases including 29 725 recovered cases and 509 deaths have been reported in the country.									
Guinea	Lassa Fever	Ungraded	8-May-2021	8-May-2021	6-Dec-2021	8	8	7	87.5%
To date, there have been a total of 8 confirmed cases and 7 deaths (CFR 87.5%): the first case (23 years old man, resident of Yomou prefecture) was notified on 8 May 2021. 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. However, the prefecture of Bheeta is regarded as active, with the prefectures of Yomou-Centre, Péla, Yomou and Bignamou on alert. More cases have been reported with the recent case, a 9 years old female from Faranah health district confirmed on 19 September 2021 by the Gueckerou laboratory and died the same day.									
Guinea	Measles	Ungraded	09-May-2018	1-Jan-21	1-Dec-2021	622	321	5	0.8%
In 2021, as of Epi week 49, 622 suspected cases have been reported, 601 samples taken, 601 samples tested of which 321 tested positive; 5 deaths have been reported. Out of the 321 positive persons, 64 (12%) were vaccinated. In 2020 at the same epi week, 6070 suspected cases, 870 cases sampled, 767 samples tested of which 524 positive, 269 negative and 48 undetermined; 15 deaths have been reported. Since 2020, a total of 6 623 suspected cases, 1 120 tests analysed, 1 141 confirmed cases, 19 deaths have been reported.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-2020	22-Jul-2020	3-Dec-2021	50	50	0	0.0%
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	4-Dec-2021	6 444	6 444	149	2.3%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 4 December 2021, the country has reported 6 444 confirmed cases of COVID-19 with 6 277 recoveries and 149 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	3-Dec-2021	4	4	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 3 cases in the country which are linked to the Jigawa outbreak in Nigeria.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Dec-2021	255 437	255 437	5 335	2.1%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 05 December 2021, 255 437 confirmed COVID-19 cases including 5 335 deaths and 248 426 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	27-Apr-2021	1-Jan-21	7-Nov-21	2 392	36	2	0.1%
The outbreak has been reported in Mombasa and Mandera Counties, recording 976 cases with 36 confirmed and 2 deaths reported (CFR 0.2%) as of epidemiological week (EW) 34, 2021. Between EW 35 and 44, 1 650 suspected cases were reported from Mombasa County and 66 suspected cases from Mandera County through routine surveillance.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	25-Nov-21	1 325	1 325	10	0.8%
Since January 2020, a total of 1 325 visceral leishmaniasis confirmed cases with 10 deaths (CFR 0.9%), have been reported in eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir, and Tharaka Nithi. The outbreak is active in four counties; Kitui, Tharaka Nithi, West Pokot, and Wajir. 10 new cases were recorded during week 46.									
Kenya	Measles	Ungraded	6-May-2019	20-Oct-19	18-Nov-21	693	30	1	0.1%
Since October 2019 through 18 November 2021 (Epi week 45), a total of 693 measles cases were reported of which 30 were confirmed and one death (CFR 0.1%) were reported. Currently, the counties of Garissa and West Pokot have active outbreaks.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-2021	10-Feb-2021	3-Dec-2021	3	3	0	0.0%
No cVDPV2 positive environmental sample was reported this week. There was one cVDPV2 positive environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia.									
Lesotho	COVID-19	Grade 3	13-May-2020	13-May-2020	1-Dec-2021	21 838	21 838	663	3.0%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 1 December 2021, a total of 21 838 cases of COVID-19 have been reported, including 13 741 recoveries and 663 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	2-Dec-2021	5 829	5 829	287	4.9%
From 16 March 2020 to 02 December 2021, Liberia has recorded a total of 5 829 cases including 287 deaths and 5 535 recoveries have been reported.									
Liberia	Lassa fever	Ungraded	23-Jul-2021	1-Jan-21	21-Nov-21	24	24	15	62.5%
The numbers of confirmed and death cases have been reviewed. From January 2021 to 21 November 2021, a total of 136 suspected cases were reported, of which 24 (17.6%) were confirmed, and 15 deaths (CFR 62.5%) among the confirmed cases. Three counties are currently in outbreak: Bong, Grand Bassa and Montserrado counties.									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	26-Nov-21	445	198	0	0.0%
In week 46 (week ending 21 November 2021), 5 suspected cases were reported from Grand Gedeh (2), Grand Bassa (1), Bong (1) and Nimba (1) Counties. Among the 5 suspected cases, 3 cases are <5 years (83%) and 2 case are >5 years (17%). Since the beginning of 2021, 445 total cases were reported of which 198 were confirmed (57 laboratory-confirmed, 131 clinically confirmed and 10 epi-linked), 247 negative.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-2020	17-Dec-2020	3-Dec-2021	3	3	0	0.0%
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-2021	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	26-Nov-21	44 330	44 330	967	2.2%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 26 November 2021, a total of 44 330 cases have been reported in the country, out of which 42 915 have recovered and 967 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	1-Jan-21	7-Nov-21	1 546 949	-	686	0.0%
From January 2021 to 19 September 2021, 1 439 687 cases were reported including 686 deaths. The number of malaria cases reported in week 37 was 6 951 cases. A decrease in the number of malaria cases has been observed from week 21.									
Madagascar	Pneumonic Plague	Grade 1	29-Aug-2021	1-Sep-21	7-Nov-21	41	19	6	14.6%
On 29 August 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 7 November 2021, a total of 41 suspected cases of pneumonic plague including 19 confirmed and 6 death cases (CFR 14.6%) are reported so far. The number of cases and deaths on this outbreak have been updated by the MoH.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-2021	28-Apr-2021	3-Dec-2021	12	12	0	0.0%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. The number of 2021 cases remains at 10. There were two cases reported in 2020. There were two cases reported in 2020.									
Malawi	COVID-19	Grade 3	2-Apr-2020	2-Apr-2020	5-Dec-2021	61 981	61 981	2 307	3.7%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 5 December 2021, the country has a total of 61 981 confirmed cases with 2 307 deaths and 58 824 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	31-Oct-21	-	-	-	-
There have been 402K IDPs in the country and more than 156 700 refugees as of 31 October 2021. However, 85 939 returnees have come back to the country. The situation in northern and central regions of the country remains unstable, marked by an increase in direct or indirect attacks against national and international armed forces and the civilian population. 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. COVID-19 also continues to compound the health impacts affecting all basic social sectors as well as the protection of household livelihoods. Due to the humanitarian crisis, 5% of health facilities are not fully functional with a limited presence of partners working in the management of primary health care in the northern and central regions. Since the beginning of 2021, 8 attacks on the health system have been reported by the northern and central regions.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	5-Dec-2021	17 915	17 915	618	3.4%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 05 December 2021, a total of 17 915 confirmed COVID-19 cases have been reported in the country including 618 deaths and 15 298 recoveries.									
Mali	Measles	Ungraded	20-Feb-2018	1-Jan-21	21-Nov-21	1 763	828	2	0.1%
From January 2021 up to Epi week 46 (ending the 21 November 2021), Mali has reported a total of 1 763 suspected cases including two deaths, 1 516 samples tested of which 828 were positive, 688 negative and 44 undetermined. There is an increase of 100 % of confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-2020	18-Aug-2020	3-Dec-2021	52	52	0	0.0%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. The total number of cases since 2020 to 52.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Dec-2021	39 558	39 558	840	2.1%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 05 December 2021, a total of 39 558 cases including 840 deaths and 37 877 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	2-Dec-2021	56 306	56 306	594	1.1%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 02 December 2021, a total of 56 306 confirmed COVID-19 cases including 594 deaths and 54 742 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	23-Nov-21	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. From 17-23 November 2021, a total of 1 934 internally displaced person (IDPs) arrived mostly in Mueda, Nangade, and Ancuabe. As of 31 Oct 2021, the nation-wide estimate of people in need of humanitarian assistance is 1.3 million and there are 744 949 people displaced by conflict and 116 385 displaced by disaster. Of those fleeing due to conflict, most have left because of violence perpetrated by NSAGs.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	5-Dec-2021	151 924	151 924	1 941	1.3%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 5 December 2021, a total of 151 924 confirmed COVID-19 cases were reported in the country including 1 941 deaths and 149 575 recoveries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mozambique	Measles	Ungraded	25-Jun-2020	1-Jan-21	10-Oct-21	125	2	0	0.0%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 10 October 2021 (week 40), there were 125 cases reported including 2 confirmed cases and no death. In 2020 at the same period, there were 185 confirmed cases and no death.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	4-Dec-2021	129 796	129 796	3 574	0.0%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 4 December 2021, a total of 129 796 confirmed cases with 125 531 recovered and 3 574 deaths have been reported.									
Namibia	Hepatitis E	Protracted 1	18-Dec-2017	8-Sep-17	15-Aug-2021	8 090	8 090	66	0.8%
The current outbreak in Namibia started in December 2017. As of 15 August 2021, a cumulative total of 8 090 cases (2 117 laboratory-confirmed, 4 738 epidemiologically linked, and 1 235 suspected cases) including 66 deaths (CFR=0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 5 004 (62.0%) of reported cases, followed by Erongo 1 717 (21.2%).									
Niger	Floods	Ungraded	15-Jul-2021	2-Aug-2021	21-Nov-21	250 000	-	77	0.0%
In Niger, torrential rainfall and floods affected more than 250,000 people and left 77 people dead. Since the start of the 2021 rainy season in June, torrential rainfall has led to the collapse of more than 21 000 houses, the destruction of more than 7 300 hectares of cultivable land, and the death of more than 10 000 livestock. Thousands of people have been rendered homeless and vulnerable due to the loss of their livelihoods. Floods have been followed by outbreaks of cholera across seven of the country's eight regions.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-2015	1-Feb-2015	31-Oct-21	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2021. As of 31 Oct 2021, 264 257 people are internally displaced, 249 816 are refugees, and 2.3 million are food insecure (phase 3+ and above). Security tensions have had a negative impact on local markets and price of food in the Tillabéri region causing concern for nutrition levels in children in the region. The trend of children admitted into national food program has increased in certain areas of the country (including Tillabéri and Maradi) between July and August 2021. According to the Humanitarian Response Plan 2021, more than 1.8 million children <5 years need nutritional assistance, including 1.6 million children between 6-59 months for management of acute malnutrition and 178 228 children between 6-23 months for preventive supplementation.									
Niger	Cholera	Grade 1	7-Aug-2021	7-Jun-2021	28-Nov-21	5 587	194	166	3.0%
As of 28 November 2021, a total of 5 587 cases including 166 deaths (CFR 3.0%) have been reported. Seven regions out of eight have reported cases so far (Tahoua, Niamey, Tillabéri, Dosso, Maradi Zinder and Diffa). To date 35 out of 72 health districts have reported cases with 3 health districts currently actives. The rainy season is still ongoing causing floods that contribute to the spread of the outbreak.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	5-Dec-2021	7 080	7 080	261	3.7%
From 19 March 2020 to 04 December 2021, a total of 7 080 cases with 261 deaths have been reported across the country. A total of 6 729 recoveries have been reported from the country.									
Niger	Malaria	Ungraded	4-Oct-21	1-Jan-21	19-Sep-21	2 297 488	2 297 488	2 124	0.1%
Between epidemiological weeks 1 and 37 2021 (ending 19 September), 2 297 488 confirmed malaria cases including 2 124 deaths were reported through routine surveillance in Niger. Although the weekly attack rates follow the trends seen in the last two years, epidemic thresholds have been exceeded in several districts in the regions with increases in malaria incidence and mortality. Investigations are being planned to better understand the situation.									
Niger	Measles	Ungraded	10-May-2019	1-Jan-21	18-Jul-2021	9 095	924	16	0.2%
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	25-Oct-21	1 351	-	75	5.6%
Since the beginning of the year 2021 to week 43 ending 25 October 2021, 1 351 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	3-Dec-2021	25	25	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are five cVDPV2 cases in 2021 and there were 10 cases reported in 2020									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	31-Oct-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 August 2021, there were 3 024 199 IDPs according to UNHCR. As of 31 October 2021, there were 73 346 refugees from other countries within Nigeria with more than 68K (or 95%) coming from Cameroon. More than 2.1 million IDPs (72.5% of all IDPs in the country) are in the North-East, while the rest (27.5%) are in the North-West/North-Central part of the country. Of those in need of humanitarian assistance, many have limited access to basic health care and other essential services. Some 800K previously inaccessible individuals in need of nutrition and health care in Borno state are now reachable due to the liberation of these areas by military insurgence. Health conditions in this area exceed emergency thresholds for mortality and acute malnutrition.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	7-Nov-21	100 057	100 057	3 449	3.4%
As of 7 November 2021, a total of 100 057 suspected cases including 3 449 deaths (CFR 3.4%) have been reported from 32 states and FCT in 2021. Of the suspected cases since the beginning of the year, the 5-14 years age group is the most affected, while males and females are equally affected. Four states Bauchi (19 470 cases), Jigawa (12 965 cases), Kano (12 116 cases), and Zamfara (11 101 cases) account for 56% of all cumulative cases. Twelve LGAs across five states Bauchi(4), Zamfara(4), Jigawa(2), Kano(1), and Katsina(1) have reported more than 1 000 cases each this year.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	COVID-19	Grade 3	27-Feb-2020	27-Feb-2020	5-Dec-2021	214 622	214 622	2 980	1.4%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 05 December 2021, a total of 214 622 confirmed cases with 207 450 recovered and 2 980 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	1-Jan-21	1-Jan-21	31-Oct-21	3 496	403	79	19.6%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 43 of 2021, the number of new confirmed cases was 2. These were reported from Ondo and Edo States. Cumulatively from week 1 to week 43 of 2021, a total of 403 confirmed cases including 79 deaths among confirmed cases have been reported with a case fatality rate of 19.6% across 15 states. In total, 3 496 cases are suspected in 2021. This is lower than the same period reported in 2020. Of all confirmed cases 44% are from Edo, 35% from Ondo and 5% are from Taraba States.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-21	31-Aug-2021	10 106	6 718	87	0.9%
In 2020, Nigeria reported 9 316 confirmed cases, with 55 deaths, CFR 0.6%. From January 2021 to 31 August 2021, 10 106 suspected cases have been reported in Nigeria including 87 deaths. Of the suspected cases reported, 6 718 (66.5%) were confirmed (1 065 lab confirmed 2 734 epi-linked and 2 919 clinically compatible), 3 272 (32.4%) were discarded and 116 (1.2%) are pending classification. The most affected state is Borno with 5 614 cases. The age group 9 - 59 months accounted for 5 048 (75.1%) of all confirmed cases. During the month of August, 189 were reported; no death was recorded among confirmed cases.									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	30-Sep-21	79	23	0	0.0%
According to the Nigeria Centre for Disease Control (NCDC), in September 2021, no additional cases of suspected monkeypox were reported. Therefore in 2021, the total remains at 79 suspected cases reported since the beginning of the year. 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-2018	1-Jan-18	3-Dec-2021	381	381	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 289 cases reported in 2021. There were eight cases reported in 2020, 118 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	30-Sep-21	39	39	2	5.1%
From 1 January 2021 to 30 September 2021, a total of 1 518 suspect Yellow fever (YF) cases were reported in 428 Local Government Areas (LGAs) across all 37 States including the Federal Capital Territory. A total of 74 blood samples (59 presumptive positive and 15 inconclusive) were sent to the Institut Pasteur in Dakar and 39 samples tested positive for YF by plaque reduction neutralization test (PRNT). Some PRNT-positive cases had a history of YF vaccination. There were two deaths reported among the PRNT positive cases. The YF PRNT positive cases were reported from 11 states (Anambra, Benue, Delta, Enugu, Imo, Kogi, Nasarawa, Niger, Ondo, Osun, and Oyo states).									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	5-Dec-2021	100 414	100 414	1 343	1.3%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 05 December 2021, a total of 100 414 cases with 1 343 deaths and 98 887 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-2020	6-Apr-2020	5-Dec-2021	3 733	3 733	56	1.5%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 05 December 2021, a total of 3 733 confirmed cases of COVID-19 have been reported, including 56 deaths. A total of 3 675 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	5-Dec-2021	74 024	74 024	1 886	2.5%
From 2 March 2020 to 5 December 2021, a total of 74 024 confirmed cases of COVID-19 including 1 886 deaths and 72 103 recoveries have been reported in Senegal.									
Senegal	Dengue	Ungraded	18-Nov-21	18-Nov-21	18-Nov-21	86	25	0	0.0%
On 8 October 2021, the Dakar Pasteur Institute notified to health authorities the confirmation of cases of Dengue Serotype 1 from the Richard Toll health district in the Saint-Louis health region. As of 11 November 2021, a total of 86 cases are reported from 17 health districts. The Ricard Toll health district has reported more cases with 58 cases out of 86 (67.4%). Two serotypes of the Dengue virus are reported so far: serotype 1 and 3.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-2021	3-Dec-2021	16	16	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2021 cases remains at 16.									
Senegal	Rift Valley Fever	Ungraded	25-Nov-21	18-Nov-21	18-Nov-21	3	2	0	0.0%
An outbreak of Rift Valley fever (RVF) is ongoing in Senegal declared by health authorities after confirmation of the first case on 10 November 2021 by the Pasteur Institute of Dakar. As of 18 November 2021, a total of 3 cases and zero death (CFR 0.0%) are reported in the health districts of Gossas and Diofior, in the Fatick region.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	5-Dec-2021	23 664	23 664	122	0.5%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 5 December 2021 a total of 23 664 cases have been confirmed, including 23 128 recoveries and 122 deaths have been reported.									
Sierra Leone	Mass fire incident	Ungraded	5-Nov-21	6-Nov-21	22-Nov-21	304	304	149	49.0%
On 20 November 2021, there was a Mass Fire Accident involving a fuel tank that ruptured its tanks after a collision with another vehicle. The fuel ignited and caused a mass burn affecting a number of persons with various degrees of burns including instant deaths. As of 12 November 2021, 304 victims were reported on with 149 deaths and 51 are currently in admission. So far 42 patients have been discharged and are being treated as outpatients for burns.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	4-Dec-2021	6 402	6 402	121	1.9%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 04 December 2021, a total of 6 402 confirmed COVID-19 cases were reported in the country including 121 deaths and 4 399 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-2021	1-Jan-21	30-Sep-21	14	14	9	64.3%
As of 30 September 2021, 14 cases of Lassa fever have been reported from Kenema (12) and Kailahun (2) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 64%. Lassa fever is known to be endemic in Sierra Leone and surrounding countries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sierra Leone	Measles	Ungraded	1-Nov-21	19-Oct-21	31-Oct-21	25	3	0	0.0%
On 29 October 2021, Sierra Leone's Ministry of Health and Sanitation declared a measles outbreak in Kambia District following the confirmation of three cases at the Central Public Health Reference Laboratory (CPHRL) in Freetown. The date of onset of symptoms for the first two cases was 11 October 2021. As of 31 October 2021, 25 cases of which 3 confirmed, 0 deaths and 2 recovered have been reported.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-2020	10-Dec-2020	3-Dec-2021	15	15		0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far, 5 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	5-Dec-2021	3 031 694	3 031 694	89 966	3.4%
Since the start of the COVID-19 pandemic in South Africa by 04 December 2021, a cumulative total of 3 031 694 confirmed cases and 89 966 deaths have been reported with 2 858 144 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-2020	5-Apr-2021	29-Oct-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people (60% of the country's total population) 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 1.71 million internally displaced people. The six most affected counties are Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East. In 2021, the World Food Programme has reached some 284 848 (35% of an estimated 800K) flood-affected people with food and nutrition assistance. Due to deteriorating security situations in Tambura and Greater Pibor Administrative Area humanitarian operations have ceased in October 2021.									
South Sudan	Floods	Grade 2	15-Jul-2021	1-May-2021	3-Nov-21	-	-	-	-
The escalating flooding began in May 2021 and has affected over 800 000 people in areas along the Nile and Lol rivers and Sudd marshlands as of 3 November 2021. Flooding has affected over 30 counties across 8 states with communities in Jonglei, Upper Nile and Unity states being the most affected. A rapidly worsening situation was noted in October 2021 with a significant increase in the number of people and locations affected by flooding in Jonglei State (267 000 people affected), Unity State (196 000 people affected), and Upper Nile (125,000 people affected).									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-2016	n/a	31-Oct-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, 1.7 million people internally displaced and 175K people living in protection of civilian sites across the country. Inter-ethnic violence in Tambura county has continued since June 2021 with the most recent incidents occurring on 14 and 19 October 2021. In Tonj East and Tonj North counties intercommunal attacks have persisted for most of 2021 hindering hospital functionality, food aid delivery, and humanitarian operations. Thirteen armed attacks have also hindered humanitarian aid delivery in Lainya, Morobo and Yei counties in 2021. A threat on humanitarian operations by youth groups on 4 October 2021 in the Greater Pibor Administrative Area has caused the relocation of 80 humanitarian staff and impacted more than 100K vulnerable people. Youth groups in the area demanded for 80% of all national employment opportunities to be reserved for locals.									
South Sudan	COVID-19	Grade 3	5-Apr-2020	5-Apr-2020	5-Dec-2021	12 823	12 823	133	1.0%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 05 December 2021, a total of 12 823 confirmed COVID-19 cases were reported in the country including 133 deaths and 12 463 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	3-Jan-18	14-Nov-21	1 394	104	9	0.6%
The current outbreak in the Bentiu IDP camp, which started at the beginning of 2018, is ongoing. As of 14 Nov 2021, a total of 1 394 cases of hepatitis E including 9 deaths (CFR: 0.6%) have been reported since 1 Jan 2018. There were 40 new cases reported in week 45, 2021. 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, however efforts are now underway to respond to the sanitation and outbreak needs.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	10-Oct-21	1 313	54	2	0.2%
Since week 38 of 2019 to 10 October 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 Ibb). No county has reported outbreak in 2021.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	3-Dec-2021	59	59	0	0.0%
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	26-Nov-21	26 270	26 270	730	2.8%
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 26 November 2021, a total of 26 270 cases have been reported in the country including 730 deaths.									
Togo	Cholera	Ungraded	8-Nov-21	7-Nov-21	27-Nov-21	37	11	4	10.8%
The Cholera outbreak was declared by health authorities on 7 November 2021. The Index case was notified on 5 November 2021 by the peripheral health Unit of Agouégan in the Lacs district. This was a 15-year-old boy presenting with profuse diarrhoea with signs of severe dehydration and died later. The stool sample was taken and sent to the National Institute of Hygiene (INH) laboratory and was confirmed positive for Vibrio cholerae On 7 November 2021. The index case was living in the same area with another person who sought health care at the same health facility on 3 November 2021 having the same clinical picture made of diarrhoea and dehydration. The person was treated as an outpatient and died the following day at home. As of 27 November 2021, a total of 37 cases and 4 deaths (CFR: 10.8%) are reported.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	5-Dec-2021	26 304	26 304	243	0.9%
On 6 March 2020, the Ministry of Health and Public Hygiene of Togo announced the confirmation of its first case of COVID-19. As of 05 December 2021, a total of 26 304 cases including 243 deaths and 25 923 recovered cases have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	3-Dec-2021	17	17	0	0.0%
No new case of cVDPV2 was reported during the past week. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Uganda	Cholera	Ungraded	15-Nov-21	4-Nov-21	17-Nov-21	163	7	0	0.0%
An active cholera outbreak is ongoing in Uganda since 4 November 2021. The epicenter are the villages of Nyarugugu B and C in the district of Isingiro in South-Western Uganda, but also suspected cases of cholera are reported in the capital city of Kampala. As of 17 November 2021 a total of 163 cases, 7 confirmed and zero death (CFR 0.0 %), have been reported including 152 cases from Isingiro district and 11 from the capital city of Kampala.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	4-Dec-2021	127 756	127 756	3 256	2.5%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 4 December 2021, a total of 127 756 confirmed COVID-19 cases, 97 627 recoveries with 3 256 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	5-Dec-2021	210 312	210 312	3 667	1.7%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 04 December 2021, a total of 210 312 confirmed COVID-19 cases were reported in the country including 3 667 deaths and 206 466 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-2019	6-May-2019	7-Nov-21	979	0	3	0.3%
The anthrax outbreak is ongoing in Zimbabwe. Nine new anthrax cases and no death were reported in week 44 of 2021 ending on 7 November 2021. The cases were reported by Gokwe North District (2), Gokwe South District (4) in Midlands Province, Goromonzi District (1) in Mashonaland East Province, Hurungwe District (1) and Makonde District (1) in Mashonaland West Province. From Week 1 to 44 of 2021, the cumulative figures for anthrax are 212 cases and 0 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.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	5-Dec-2021	139 046	139 046	4 710	3.4%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 04 December 2021, a total of 139 046 confirmed COVID-19 cases were reported in the country including 4 710 deaths and 128 868 cases that recovered.									
Closed Events									
Mozambique	Cholera	Ungraded	28-Sep-21	21-Jul-2021	19-Oct-21	191	8	0	0.0%
On 28 September 2021, the WHO was notified about a Cholera outbreak in some communities of Caia District. By 19 October 2021, 191 cases were recorded with no deaths. Eight cases were confirmed (7 by RDT and 1 by culture).									

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

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

© WHO Regional Office for Africa

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

Correspondence on this publication may be directed to:

Dr 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

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

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

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

Contributors

Amédée Prosper DJIGUIMDE (Democratic Republic of the Congo)
engomo Gervais FOLEFACK T(Democratic Republic of the Congo)
Boureima HAMA SAMBO (Ethiopia)
Victor TUGUMIZEMU (Ethiopia)
Emmanuel DOUBA EPEE (Cameroon)

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
J. Banda Dabwitso

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

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