

# WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 34: 16 - 22 August 2021

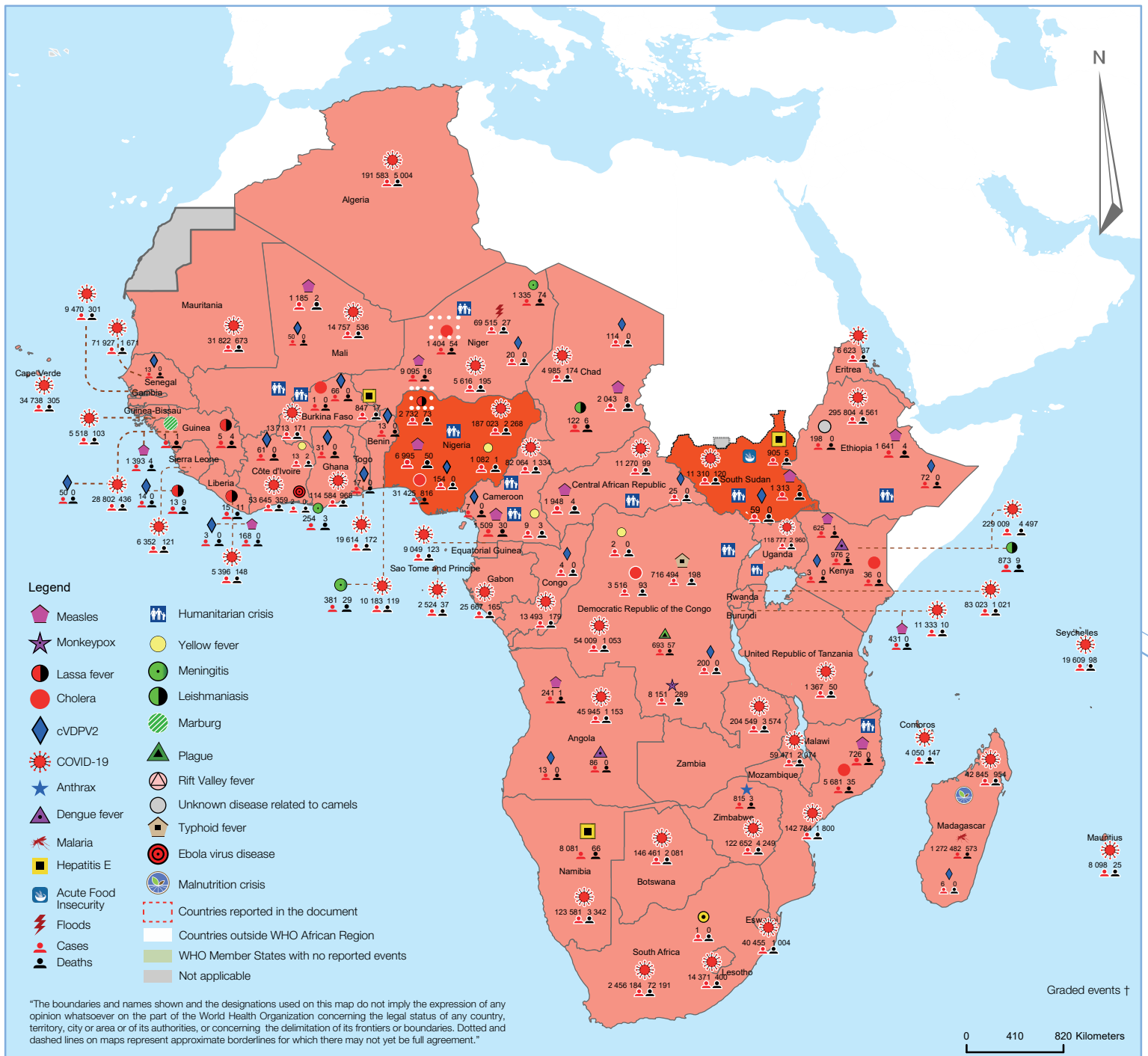
Data as reported by: 17:00; 22 August 2021

**1**  
New event

**125**  
Ongoing events

**112**  
Outbreaks

**14**  
Humanitarian crises



**4**  
Grade 3 events

**3**  
Protracted 3 events

**29**  
Grade 2 events

**3**  
Protracted 2 events

**1**  
Grade 1 events

**3**  
Protracted 1 events

**38**  
Ungraded events

# Overview

## Contents

1 Overview

2-7 Ongoing events

8 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 125 events in the region. This week's articles cover:

- [COVID-19 across the WHO African region](#)
- [Cholera in Niger](#)
- [Lassa fever in Nigeria](#)

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

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

### Major issues and challenges include:

- Although the WHO African region saw a 3.7% decrease in number of cases reported in the past seven days, case trends continue to vary across countries. The decrease has been attributed to a decline in the number of cases reported in at least twenty-six countries including Zambia, Algeria, Botswana, Mozambique, Namibia, and Zimbabwe which are among the top ten countries that have reported the highest number of cumulative cases in the region. South Africa, after a six-week consecutive decline in the number of weekly cases, reported a 18.4% increase in the past week. The number of deaths reported also declined by 12.6% in the past week. Nine out of 22 countries currently experiencing a resurgence are in West Africa. The surge in West Africa is particularly concerning as the sub-region is also facing concurrent outbreaks of cholera, Ebola and Marburg virus disease that threaten to further strain already stretched emergency response capacity.
- Niger is experiencing a rapidly deteriorating cholera outbreak which is epidemiologically linked to the ongoing outbreak in neighbouring Nigeria. Continual cross border population movement coupled with worsening hygiene conditions due to recent floods have contributed to the rapid increase in the number of cases over the past few weeks. Targeted outbreak control measures in the many affected communities needs to be rapidly enhanced to interrupt transmission.
- The Lassa fever outbreak in Nigeria has shown a downward trend since epidemiological week 11 of 2021. Though the declining trend is encouraging, it needs to be interpreted cautiously as the disease is endemic to the region with an ubiquitous vector. Edo and Ondo states remain the epicenter for the virus, accounting for 78% of total cases. Challenges to the response still exist including inadequate bed capacity at treatment centres for management of Lassa fever cases and late presentation to health facilities leading to the increasing case fatality ratio. In addition, the national health system has been overwhelmed with other ongoing outbreaks including cholera, yellow fever and the COVID-19 pandemic. Local and national authorities need to maintain the highest level of vigilance.

# Ongoing events

Coronavirus disease 2019

African region

5 411 063 : 130 308 : 2.4%  
Cases : Deaths : CFR

In the past week (16 – 22 August 2021), the WHO African region reported a total of 148 531 new cases of coronavirus disease (COVID-19), a 3.7% decrease compared to the previous week when 154 164 new cases were reported. A total of 16 (34%) countries saw a 20% or more increase in weekly cases compared to the previous week; Angola, Benin, Cabo Verde, Comoros, Congo, Côte d'Ivoire, Equatorial Guinea, Ethiopia, Gabon, Guinea-Bissau, Liberia, Mauritius, Nigeria, Seychelles, South Sudan, and Togo.

Conversely, 18 (38%) countries reported a decrease of 20% or more in the number of new cases reported compared to the previous week. These countries include Algeria, Botswana, Central African Republic, Chad, Democratic Republic of the Congo, Eritrea, Gambia, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Rwanda, Senegal, Sierra Leone, Uganda, Zambia and Zimbabwe.

Majority of the cases recorded in the past week have been reported in a few countries, with five countries accounting for 73.5% (109 166) of all new cases. In general, the highest number of new cases were reported from South Africa (85 387 new cases; 18.4% increase, 145.8 new cases per 100 000 population), Kenya (8 282 new cases; 6.9% decrease; 15.8 new cases per 100 000), Ethiopia (6 530 new cases; 26.0% increase; 5.8 new cases per 100 000), and Nigeria (4 520 new cases; 10.1% decrease; 2.2 new cases per 100 000).

The region recorded a 12.6% (n=3 730) decrease in the number of new deaths reported from 10 countries. The highest numbers of new deaths were reported from South Africa (2 280 new deaths; 2.1% decrease; 4.0 new deaths per 100 000 population), Algeria (210 new deaths; 126% increase; 0.5 new deaths per 100 000), Kenya (157 new deaths; 18% decrease; 0.3 new deaths per 100 000), Zimbabwe (140 new deaths; 169% increase; 1.0 new deaths per 100 000), and Malawi (106 new deaths; 231.3% increase; 106 new deaths per 100 000).

Since the beginning of the COVID-19 outbreak in the WHO African Region, the cumulative number of confirmed COVID-19 cases reported is 5 411 063. More than 4.8 million recoveries have been recorded, giving a recovery rate of 89.3%. The total number of deaths reported is now at 130 308, accounting for a case fatality ratio (CFR) of 2.4%.

Twenty-two countries are still experiencing a resurgence of COVID-19 cases in the region namely Algeria, Benin, Botswana, Burundi, Cote d'Ivoire, Democratic Republic of the Congo, Eswatini, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Malawi, Mauritania, Mauritius, Mozambique, Rwanda, Senegal, South Africa, Togo, and Zimbabwe.

Cumulatively, the highest number of COVID-19 cases in the region has been recorded in South Africa (2 690 973 cases, 50.0%), followed by Ethiopia 295 804 (5.4%), Kenya 229 009 (4.2%), Zambia 204 549 (3.8%), and Algeria 191 583 (3.5%); these five countries account for 66.5% (n=3 611 918) of all cases. South Africa also has the highest number of deaths in the region (79 421 deaths, 61.0% of all deaths); followed by Algeria (5 004, 3.8%), Ethiopia (4 561, 3.5%), Kenya (4 497, 3.5%), and

Zimbabwe (4 249, 3.3%). These five countries account for 75.0% (97 732) of all deaths reported in the region.

Fifty-one new health worker infections were reported during this reporting period (16–22 August 2021) from Eswatini (27) and Namibia (24). An additional 3 918 health worker infections were reported retrospectively from six countries; Kenya (1 207) reported the highest number, followed by Uganda (905), Zimbabwe (732), Mozambique (667), Democratic Republic of the Congo (266), and Côte d'Ivoire (141).

At the moment, there have been 120 548 COVID-19 infections (2.2% of all cases) among health workers in the region, with South Africa accounting for about 46.7% (56 180) of the total infections. Algeria (11 936, 9.9%), Kenya (6 984, 5.8%), Zimbabwe (5 123, 4.2%) and Mozambique (4 779, 4.0%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. Algeria (6.2%), Niger (6.2%), Chad (6.0%), Liberia (6.0%), and Seychelles (5.0%) have the highest proportion of health worker infection by country. Only Eritrea has not reported any healthcare worker infections.

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

The African Continent has recorded over 7.5 million cases of COVID-19, with nearly 200 000 deaths (CFR 2.5%) and more than 6.6 million people have recovered. The African continent accounts for 3.4% of global cases and 4.0% of global deaths, while the WHO African Region, accounts for 2.4% of global cases and 2.7% of global deaths, making it one of the least affected regions in the world after the WHO Western Pacific Region.

Vaccine shipments to Africa have picked up with the COVAX facility delivering almost 10 million doses to Africa so far in August, which is nine times what was delivered in the same period in July 2021. The African Union has so far delivered 1.5 million doses to nine countries. Since June, the number of doses administered per 100 people in sub-Saharan Africa has almost tripled from 1.2 per 100 people to 3.4 per 100 people.

## SITUATION INTERPRETATION

The weekly number of cases reported in the WHO African Region continues to show a sustained downward trend as the region records its sixth consecutive week of decline. This decrease has been attributed to a reduction in the number of cases being reported from at least eighteen countries reporting more than a 20% decrease in the number of cases compared to the previous week. Though the number of cases being reported weekly remain high, the continual decline coincides with a downward phase of the third wave which began in mid-May. As the number of vaccine doses administered in sub-Saharan Africa continue

[Go to overview](#) ◀

2

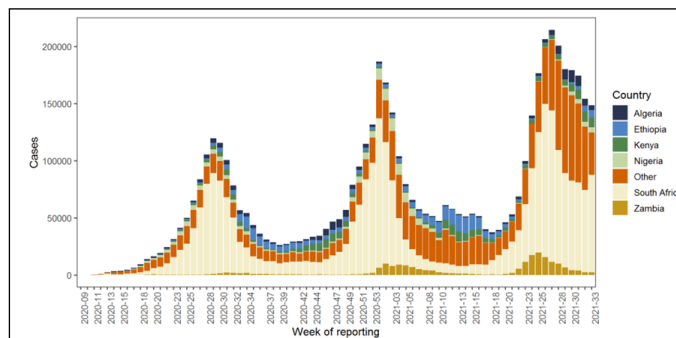
▶ [Go to map of the outbreaks](#)

to increase, countries are advised to enhance a multifaceted approach combining pharmaceutical and public health and social measures to sustain the downward trend of cases reported in the region.

### PROPOSED ACTIONS

- The WHO advises strict adherence to the basic precautionary and control measures including vaccination, maintaining physical distancing, hand hygiene, physical distancing, and wearing a face covering when physical distancing is impractical to prevent the spread of disease. Member states are advised to enhance their surveillance and detection systems, case management capacity and improve the supply of critical medicines. Countries should adapt vaccination strategies to accommodate for different vaccines to ensure doses are administered efficiently.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by reporting date, 25 February 2020 – 22 August 2021 (n = 5 411 063)



Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 22 August 2021

Country	Total Cases	Total Deaths	Recovered Cases	Case Fatality Ratio (%)	Health Worker infections
South Africa	2 690 973	79 421	2 444 409	3.0	56 180
Ethiopia	295 804	4 561	269 132	1.5	3 354
Kenya	229 009	4 497	212 036	2.0	6 984
Zambia	204 549	3 574	198 559	1.7	1 121
Algeria	191 583	5 004	129 950	2.6	11 936
Nigeria	187 023	2 268	168 455	1.2	3 175
Botswana	146 461	2 081	134 260	1.4	61
Mozambique	142 784	1 800	126 041	1.3	4 779
Namibia	123 581	3 342	118 085	2.7	4 234
Zimbabwe	122 652	4 249	106 810	3.5	5 123
Ghana	114 584	968	106 969	0.8	4 763
Uganda	98 270	2 960	95 310	3.0	2 892
Rwanda	83 023	1 021	45 544	1.2	682
Cameroon	82 454	1 338	80 920	1.6	2 820
Senegal	71 927	1 671	57 394	2.3	419
Malawi	59 471	2 074	45 552	3.5	2 080
Democratic Republic of the Congo	54 009	1 053	30 858	1.9	522
Côte d'Ivoire	53 645	395	52 405	0.7	1 084
Angola	45 945	1 153	42 384	2.5	939
Madagascar	42 845	954	41 891	2.2	70
Eswatini	40 455	1 004	29 710	2.5	706
Cabo Verde	34 738	305	33 806	0.9	140
Mauritania	31 822	673	28 167	2.1	24
Guinea	28 802	314	26 212	1.1	682
Gabon	25 667	165	25 437	0.6	345
Togo	19 614	172	16 105	0.9	891
Seychelles	19 609	98	19 006	0.5	912
Mali	14 758	536	14 053	3.6	87
Lesotho	14 371	400	6 763	2.8	473
Burkina Faso	13 713	171	13 461	1.2	288
Congo	13 493	179	12 909	1.3	203
Burundi	11 333	10	10 880	0.1	38
South Sudan	11 310	120	10 948	1.1	294
Central African Republic	11 270	99	11 125	0.9	1
Benin	10 183	119	8 402	1.2	139
Gambia	9 470	301	9 049	3.2	142
Equatorial Guinea	9 049	123	8 803	1.4	416
Mauritius	8 098	25	4 477	0.3	30
Eritrea	6 623	37	6 565	0.6	0
Sierra Leone	6 352	121	4 335	1.9	263
Niger	5 770	196	5 490	3.4	355
Liberia	5 527	245	5 232	4.4	328
Guinea-Bissau	5 518	103	4 592	1.9	23
Chad	4 985	174	4 805	3.5	292
Comoros	4 050	147	3 888	3.6	155
Sao Tome and Principe	2 524	37	2 403	1.5	102
United Republic of Tanzania	1 367	50	180	3.7	1
<b>Cumulative Cases (N=47)</b>	<b>5 411 063</b>	<b>130 308</b>	<b>4 833 767</b>	<b>2.4</b>	<b>120 548</b>

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

## EVENT DESCRIPTION

On 9 August 2021, the Ministry of Public Health of Niger officially declared a cholera outbreak in the country. The first cases were reported in week 23 (week ending 13 June 2021) in Birni N'Konni district, Tahoua region which shares a border with Nigeria. The region also has some districts that share borders with Mali in the north but no cases have been reported thus far. During week 26 (week ending 4 July 2021), districts in the Zinder and Maradi regions reported cholera cases and subsequently Dosso region reported cases in week 30 (week ending 1 August 2021). The capital city of Niamey, which is also the most populated area in the country, has also reported at least 58 cases of cholera.

As of 20 August 2021, a total of 1 404 cases and 54 deaths (CFR 3.8%) have been reported from 22 (31%) out of 72 health districts in Niger. Currently, 17 of the 22 health districts are reporting ongoing transmission of the outbreak. Districts reporting the most cases thus far are Madarounfa (475 cases) and Maradiville (315 cases) both in Maradi region, followed by Magaria (135 cases) in Zinder region. Of the 109 samples tested, 60% of them were confirmed positive with the isolated serotype identified as *Vibrio cholerae* O1 Ogawa. Overall, 735 cases (52%) have been reported among females while 643 cases (45%) have been among males. Proportionally, the highest death rate has occurred among children below five years of age. Death rates have also been higher in Niamey region (Niamey Urban Community) (28% death rate) and Tahoua region (25% death rate), while the other regions' death rates all remain lower than 6%.

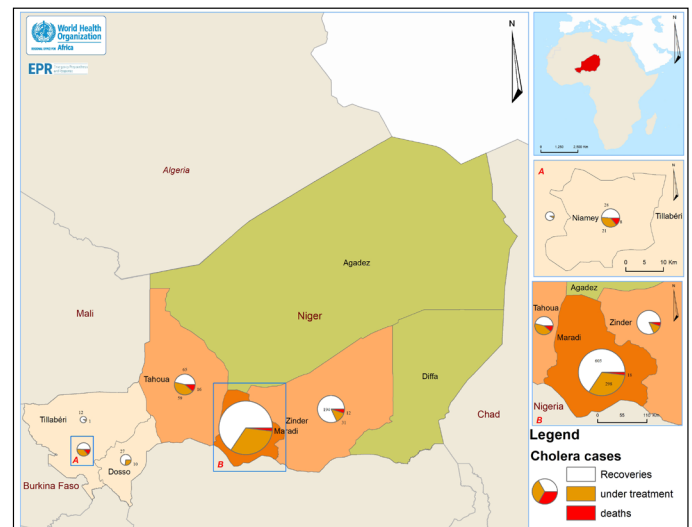
The rainy season in Niger is seasonal and usually lasts between June and October. All regions reporting cholera cases have also reported floods making conditions even worse. According to the Ministry of Humanitarian Action and Disaster Management, 69 515 people from 7 812 households have been affected by the floods throughout the country facilitating the spread of cholera.

In addition, many of the affected districts share borders with other countries and outbreaks in the past have been linked to cross-border cases. Nigeria's northern states are currently known to have active cholera outbreaks and imported cases from Katsina and Sokoto states have been detected in Tahoua and Maradi regions. There is much population movement across borders in this area which is a major threat to the spread of cholera within the West African subregion. The current outbreak in Gaya district of the Dosso region in Niger poses a major threat to Benin and other neighbouring countries considering that it is a major trade and transportation hub in the subregion.

## PUBLIC HEALTH ACTIONS

- An incident management coordination committee was formed and meets daily
- A One Health committee is being established.
- Response teams at all levels (district, regional, and national) have been activated.
- Case investigations are being carried out in the affected regions.
- Laboratory and infection prevention control supplies have been

Distribution of confirmed cases of Cholera in Niger per region, as of 20 August 2021.



prepositioned to all health districts.

- Contacts of cases are being traced and receiving preventative treatment.
- Cholera isolation and treatment units were established in affected health areas.
- Safe and dignified burials have been conducted for the deceased.
- Affected regions were provided with water treatment supplies for household drinking water.
- Water points were rehabilitated in villages in the Zinder region with more planned for the future.
- Risk communication and community outreach is being conducted.
- Preparations are underway for a reactive vaccination campaign.

## SITUATION INTERPRETATION

The cholera outbreak has deteriorated rapidly in Niger. Although an outbreak has not been reported in more than a year, the country is known to be endemic for the disease. The ongoing rainy season has contributed to the precarious situation as floods have been reported in all the regions where they have been reported cases of cholera. Similar seasonal flooding is commonplace at this time of the year across the West African subregion and have been reported in neighbouring Nigeria, a country also currently experiencing a large outbreak of cholera. Furthermore, frequent population movement between nearby countries for travel and trade have in the past accounted for subregional spread of outbreaks and has the potential for much wider regional spread of the current cholera outbreak. A case has already been documented in Burkina Faso which was from Niger.

## PROPOSED ACTIONS

Risk communication activities need to be intensified in affected and at-risk areas, this includes at borders and points of entry into countries. All countries in the region need to strengthen cross-border cooperation and implement prevention and control measures at entry points. It will be important to improve access to safe drinking water and sanitation infrastructure and improve hygiene and food security practices in affected communities in order to control the cholera situation. Timely detection, case management, and treatment of cholera should be facilitated by community teams and through the established cholera treatment units.



*Official and symbolic handing over of a sample of the drug batch to the Minister of Humanitarian Action by the WHO Representative in Niger*

## EVENT DESCRIPTION

Lassa fever (LF) is endemic to several West African countries including Nigeria, Liberia and Sierra Leone. LF is associated with significant morbidity and mortality. According to the Centers for Disease Control, the annual incidence of LF in this region is estimated as 100 000 to 300 000 cases with about 5 000 deaths and 58 million people at risk.

The ongoing LF outbreak in Nigeria that started in 2017 has seen a decreasing trend, with fewer cases reported since week 11 2021. In week 32 (week ending 15 August 2021), the number of new confirmed LF cases (4 cases) was similar to that reported in the previous week (week 31). These new cases came from three states: Ondo (2), Edo (1), and Enugu (1). Two new deaths from Ondo were reported in the same period. There were four case-patients admitted to treatment centres during the reporting week, and 204 contacts under follow up. No new healthcare worker infection was recorded in week 32.

The number of suspected cases has decreased compared to that reported for the same period in 2020. From weeks 1-32 of 2021, a cumulative total of 2 742 suspected Lassa fever cases has been reported, of which 354 (13.0%) were laboratory confirmed. The confirmed cases occurred across 14 states that recorded at least one confirmed case. Edo State recorded the highest number of confirmed cases at 158 (45%), followed by Ondo State with 117 (33%); the two states accounts for 78% of all confirmed cases. A total of six health workers were infected with the disease in 2021.

Cumulatively, from week 1 to week 32 2021, 73 deaths have been reported with a case fatality ratio (CFR) of 21% which is lower than the CFR for the same period in 2020 (21%).

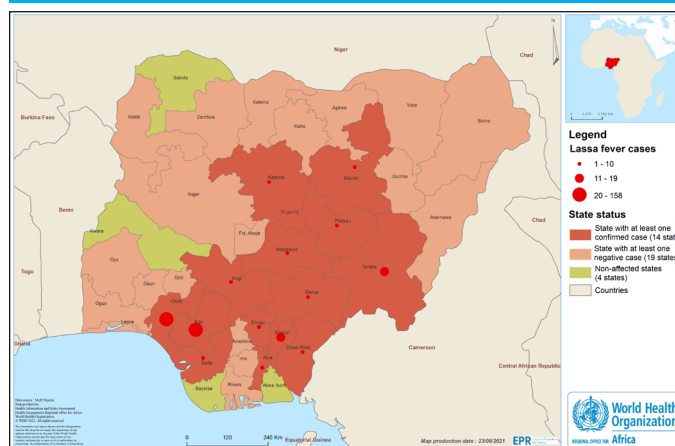
The predominant age-group affected is 21-30 years (range: <1 to 70 years, median age 29 years). The male to female ratio for confirmed cases in 1:0.8.

## PUBLIC HEALTH ACTIONS

- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels
- National Rapid Response Team have been deployed from the Nigerian Centre for Disease Control (NCDC) to support response activities in Kaduna, Bauchi and Taraba states.
- Multi-sectoral Public Health Emergency Operation Centres (PHEOC) were activated in affected States
- Vector control measures in Edo and Ondo States have been implemented periodically.
- Case management and safe burial practices guidelines were reviewed and disseminated
- Mortality review of lassa fever deaths and an in-depth investigation of healthcare worker infections were conducted.
- Distributed response commodities; personal protective equipment, Ribavirin (injection and tablets), body-bags,

[Go to overview](#)

## Distribution of confirmed cases of Lassa fever in local government areas in Nigeria, week 32 2021.



thermometers, hypochlorite hand sanitizers to states and treatment centres.

- Surveillance activities have been enhanced in affected states, with contact tracing and active case finding underway.
- Implementation of targeted risk communication activities in most affected States, with a national Lassa fever awareness and prevention campaign planned.
- The Lassa Fever Environmental response campaign has been implemented in high burden states by the Federal Ministry of Environment.
- Implementation of Nigeria Lassa fever epidemiological study supported by Coalition for Epidemic Preparedness Innovations is ongoing.

## SITUATION INTERPRETATION

- While the Lassa fever outbreak in Nigeria appears to be declining, there is little room for complacency as the vector is endemic to the region and environmental conditions are favorable to disease spread. Active case finding and contact tracing and follow-up need to continue to prevent resurgence of the disease in this endemic region. Furthermore, the local and national authorities need to remain vigilant on this event in the wake of the shifting priorities to other health emergencies, particularly COVID-19 pandemic.

## PROPOSED ACTIONS

- Authorities in Nigeria need to continue to employ the highest levels of surveillance and response as the Lassa fever outbreak in the country starts to show signs of decline. Affected states need to be supported to develop and implement Lassa fever response sustainability plan Focus must not be diverted from this ongoing outbreak by the requirements of response to the COVID-19 outbreak.

[Go to map of the outbreaks](#)

# All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
<b>New Events</b>									
Burkina Faso	Cholera	Ungraded	15-Aug-21	18-Aug-21	18-Aug-21	1	1	0	0.00%
The WHO office was informed by the Ministry of Health in the evening of 15 August 2021, of the detection on August 15, 2021, in the morning of a suspected case of cholera in the health facility of the village of Tanwalbougou, health district of Fada in the Eastern region, bordering Niger where an outbreak of cholera is ongoing. This is a 46-year-old tanker driver of Malian nationality from Niamey in Niger, who was taken to the health facility for loss of consciousness and hypovolemic shock following watery diarrhoea. The patient and his 4 contact persons have been isolated, and the patient is being treated. Hygiene measures have been ensured and are continuing and the preparation of a micro response plan is ongoing. Sample taken and sent to Ouagadougou at National Laboratory of Public Health confirmed <i>Vibrio cholerae</i> O1 Ogawa, the same serotype and serogroup with the one identified in Niger for the ongoing cholera outbreak.									
<b>Ongoing Events</b>									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	22-Aug-21	191 583	191 583	5 004	2.60%
From 25 February 2020 to 22 August 2021, a total of 191 583 confirmed cases of COVID-19 with 5 004 deaths (CFR 2.6%) have been reported from Algeria. A total of 129 950 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	22-Aug-21	45 945	45 945	1 153	2.50%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 22 August 2021, a total of 45 945 confirmed COVID-19 cases have been reported in the country with 1 153 deaths and 42 384 recoveries.									
Angola	Measles	Ungraded	4-May-19	1-Jan-21	6-May-21	241	81	1	0.40%
In 2020, Angola reported a total of 1 220 suspected cases between January and August of which 1 008 have been confirmed, and 5 deaths (CFR 0.4%). From January to Epi week 18 2021, Angola reported 241 suspected cases have been reported in 12 health districts of which 81 were confirmed and one died (CFR 1.2%), 40.7% < 5 years, 24.6% 5- 9 years and. Five districts with confirmed measles outbreaks : Banga, Caimbambo, Uige, Cuito Samba and Caju. 96.0% are either zero dose or with unknown vaccination status									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	21-Aug-21	133	133	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 130. These cases are from several outbreaks which occurred in 2019.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	15-Aug-21	10 183	10 183	119	1.20%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 15 August 2021, a total of 10 183 cases have been reported in the country with 119 deaths and 8 402 recoveries.									
Benin	Meningitis	Ungraded	1-Jun-21	1-Jan-21	25-Jul-21	381	82	29	7.60%
A total of 381 cases and 29 deaths (CFR=7.6%) resulting from meningitis were reported from Week 1 to week 30 of 2021 in Benin. Five districts are on alert and one district reported passing the epidemic threshold.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	21-Aug-21	13	13	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Two cases have been reported so far in 2021. There were three cVDPV2 cases reported in 2020, and 8 in 2019. These cases are all linked to the Jigawa outbreak in Nigeria.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	16-Aug-21	146 461	146 461	2 081	1.40%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 16 August 2021, a total of 146 461 confirmed COVID-19 cases were reported in the country including 2 081 deaths and 134 260 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-Jul-21	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement of a total of 1 368 164 internally displaced persons as of 31 July 2021 in all 13 regions in the country. More than 56K people became IDPs during July 2021, increasing 4.1% compared to the previous month. The regions most affected were Central North, Sahel, Eastern, and Northern. The presence of jihadist groups and self-defense units have created an increasingly volatile security situation. Attacks on the health system, intimidation and kidnapping of health workers, theft of medicines, continue to be reported. According to the World Food Programme, 3.5 million people are in need of humanitarian assistance and 2.87 million people are food insecure as of March 2021.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	20-Aug-21	13 713	13 713	171	1.20%
Between 9 March 2020 and 20 August 2021, a total of 13 713 confirmed cases of COVID-19 with 171 deaths and 13 461 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	21-Aug-21	66	66	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There is one case reported in 2021, and in 2020, 65 were reported. The country is affected by different outbreaks, one linked to the Jigawa outbreak in Nigeria and one to the Savanes outbreak in Togo.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	21-Aug-21	11 333	11 333	10	0.10%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 21 August 2021, the total number of confirmed COVID-19 cases is 11 333, including 10 deaths and 10 880 recovered.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burundi	Measles	Ungraded	23-Mar-20	1-Jan-21	15-Aug-21	431	330	0	0.00%
The measles epidemic has been declared since November 2019 in camps hosting Congolese refugees and then spread to other communities. In 2020, a total of 1 968 cases were reported in 46 of the country's 47 districts throughout 2020, 1 585 confirmed, 6 deaths. As of week 32 of 2021, Burundi has reported a total of 431 suspected cases, 330 reported by case-by-case surveillance and no death, 63 confirmed by IgM+ 261 by epidemiological link and 6 clinical cases. Six districts are currently in outbreak : Bubanza, Mpanda, Bugarama, Muyinga, Rumonge and Cibitoke.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	8-Jul-21	-	-	-	-
According to OCHA reports, an estimated 1.2 million people need assistance, 322 000 people are internally displaced, 67K are camp refugees, and 46K are refugees in the region not in camps. IDPs have been leaving the Mayo-Sava division during the last months due to attacks by NSAG. There have been attacks in Goudoumboul village leading 1 154 IDPs to join 1 600 others in Kouyape village as of 8 July. IDPs currently have need for water, hygiene, sanitation, food, shelter, protection, and education services.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	2-Jul-21	-	-	-	-
Conflict and violence in the North-West and South-West regions continue to cause mass displacement in the area with more than 53K people fleeing their homes during January-May 2021. According to reports from OCHA as of 31 May 2021, there were an estimated 712.8K IDPs, 333.9K returnees, and 67.4K Cameroon refugees in Nigeria. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. In May 2021, there were 14 reported incidents of health facility attacks including kidnapping of personnel and removal of patients from facilities.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	21-Jul-21	82 064	82 064	1 334	1.60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 21 July 2021, a total of 82 064 cases have been reported, including 1 334 deaths and 80 588 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-21	11-Aug-21	1 509	384	30	2.00%
From Epi week 1 to Epi week 30 of 2021, Cameroon has reported 1 509 suspected with 30 deaths (CFR 1.9%). Out of 825 investigated, 606 with blood sample, 384 was positive including 168 cases were IgM+, 77 clinically compatible and 139 epidemiologically linked; 64% of the children are below 5 years of age and only 36% known to be vaccinated with at least 1 dose of MCV. Seventeen districts with confirmed outbreak spread across 7 regions of country.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	21-Aug-21	7	7	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were seven cases reported in 2020.									
Cameroon	Yellow fever	Ungraded	7-Feb-21	4-Jan-21	9-Aug-21	9	9	3	33.30%
From 1 January to 9 August 2021, a total of nine presumptive cases of yellow fever, including three deaths (case fatality rate 33 %), tested positive by plaque reduction neutralization test (PRNT) at the Centre Pasteur in Cameroun (CPC). These cases originated from six different regions with a total of nine health districts (HDs) affected: Adamaoua region (Ngaoundere rural HD), Far North region (Maga, Mogode, Yagoua HD), Littoral region (Yabassi HD), North region (Guider, Garoua 1 HDs), North-West region (Bamenda HD), and Centre region (Eséka HD).									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	22-Aug-21	34 738	34 738	305	0.90%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 22 August 2021, a total of 34 738 confirmed COVID-19 cases including 305 deaths and 33 806 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	21-Jul-21	-	-	-	-
According to OCHA figures, 2.8 million people are in need of assistance, 717K people are internally displaced as of 30 June, and 701K persons are refugees in neighbouring countries. In June 2021, 28 790 new IDPs were registered mostly in Ndele, Kouli, Bocaranga, Bangui, Bimbo, Zemio, Alindao and Kaga-Bandoro sub-prefectures. Also in June 2021, 39 273 people returned mainly Ippy, Paoua, Zemio, Bangassou, Rafai, Batongafo and the Greater Bangui sub-prefectures. On 4 June 2021, IDPs were threatened by armed groups at the Elevage camp in Bambari in Ouaka Prefecture causing more than 8 500 to flee to nearby villages which are considered to be violations of international humanitarian law. Accidents involving explosive devices have been on the rise since mid-April 2021, particularly in the western region where conflict has intensified.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	18-Aug-21	11 270	11 270	99	0.90%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in the Central African Republic on 14 March 2020. As of 18 August 2021, a total of 11 270 confirmed cases, 99 deaths and 11 125 recovered were reported.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	11-Aug-21	1 948	207	4	0.20%
From 1st January up to 11 August 2021 : 1 948 suspected cases have been reported, 170 cases with blood samples out of a total 608 investigated, 207 confirmed cases (51 IgM+ cases, 148 by epidemiological link and 8 compatible cases) and 4 deaths (CFR : 0.2%). Six health districts (out of 35) have reached the epidemic threshold (Bébélati, Sangha-Mbaéré; Nanga-Boguila, Batangafo, Mbaiki and Nana Gebrizi); 49% are children < 5 years; 42% not vaccinated. From the beginning of outbreak in 2019 to 11 August 2021, a total of 35 415 suspected cases have been notified and 197 deaths (CFR : 0.56%) within affected districts.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	21-Aug-21	25	25	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were 4 cVDPV2 cases reported in 2020 and 21 cases in 2019 from several outbreaks.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	22-Aug-21	4 985	4 985	174	3.50%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 22nd August 2021, a total of 4 985 confirmed COVID-19 cases were reported in the country including 174 deaths and 4 805 cases who have recovered.									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-May-21	122	14	6	4.90%
Since January 1, 2018, a total of 122 cases have been reported by 3 provinces (N'Djamena, Borkou and Tibesti). N'Djamena's cases are from Miski's self-referral. For the year 2020 the country registered 74 cases including 3 deaths. Since the beginning of 2021 up to 21 May 2021, 25 cases have been reported including 15 in Bardai, 7 in Faya and 3 in N'djamena. 14 cases are confirmed by PCR and rapid tests.									
Chad	Measles	Ungraded	24-May-18	1-Jan-21	11-Aug-21	2 043	200	8	0.40%
In 2020, Chad reported 8 785 cases, with 363 confirmed cases and 41 deaths. Since 1 January 2021 up to Epi week 30, there have been reported 2 043 suspected cases from 93 out of 129 districts in the country (71% of districts), 405 cases investigated with blood samples recorded, 200 of which were confirmed by IgM and 08 deaths from 4 districts (CFR 0.4%), 21 districts in epidemic in 2021.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	21-Aug-21	114	114	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in this week. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 8 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	22-Aug-21	4 050	4 050	147	3.60%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 22 August 2021, a total of 4 050 confirmed COVID-19 cases, including 147 deaths and 3 888 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	22-Aug-21	13 493	13 493	179	1.30%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 19 August 2021, a total of 13 493 cases including 179 deaths and 12 909 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	21-Aug-21	4	4	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, 2 cases have been reported in 2021. There were two cases reported in 2020.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	22-Aug-21	53 645	53 645	395	0.70%
Since 11 March 2020, a total of 53 645 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 395 deaths, and a total of 52 405 recoveries.									
Côte d'Ivoire	Ebola virus disease	Grade 3	14-Aug-21	14-Aug-21	15-Aug-21	1	1	0	0.00%
On 14 August 2021, Ministry of Health and Public Hygiene of Côte d'Ivoire confirmed 1 case of Ebola virus disease in Abidjan, Cote d'Ivoire. The case is an 18-year-old female who travelled from the Labe region in Guinea (on the border with Senegal) to Abidjan. During the 5-day trip the patient had multiple transit stops including through Nzerekore, Guinea which was the site of the last Ebola outbreak declared over on 19 June 2021. The case experience symptoms of fever during the trip which subsided after consumption of paracetamol, but once she arrived in Abidjan on 12 August 2021, she began to have further symptoms of fever, headache, and gingival haemorrhage. She then presented at a clinic and was eventually referred to the national level hospital and isolation unit health facilities due to her symptoms. Blood samples were taken and diagnostic testing by the Pasteur Institute of Cote d'Ivoire confirmed EVD. The case remains hospitalized and under treatment as of 15 August 2021. A second case is currently suspected to also have the disease and is the spouse of the first case.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	21-Aug-21	61	61	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The number of 2020 cases is still 61.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	27-Jun-21	-	-	-	-
As of 27 June 2021, there are an estimated 5.2 million people internally displaced and 19.6 million are in need of emergency food assistance in the entire country. In Ituri province alone, there were 1 375 071 internally displaced persons, however, during the past 18 months 1 097 108 people have returned to their places of origin. The situation of displaced families in Boga and Chiabi is precarious, marked by lack of food, poor housing conditions and difficulties in accessing health care. In North Kivu province more than 6 039 households have been identified in Goma and Nyiragongo in temporary regroupment sites. Another 7 500 people are with host families in Minova, Rutshuru and Kirotshe, following the Nyiragongo volcano eruption crisis of 22 May 2021. A total of 1 191 shelters were built to accommodate the victims at the temporary site in Nyiragongo territory.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	27-Jun-21	3 516	-	93	2.60%
In 2021, from epidemiological week 1 to 25 (ending 27 June 2021), 3 516 suspected cholera cases including 93 deaths (case-fatality rate 2.6%) were recorded in 76 health zones across 14 provinces of the Democratic Republic of the Congo. This is a significant decrease (70.1%) in the number of weekly cholera cases compared to the same period in 2020. In 2020, a total of 30 304 suspected cholera cases including 514 deaths (case fatality 1.7%) were reported in 179 health zones across 23 provinces.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	20-Aug-21	54 009	54 008	1 053	1.90%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 54 008 confirmed cases and one probable case, including 1 053 deaths have been reported. A total of 30 858 people have recovered.									

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	Monkeypox	Ungraded	n/a	1-Jan-20	27-Jun-21	8 151	39	289	3.50%
<p>Since epidemiological week 1 up to week 25 in 2021, 1 894 cases have been reported with 60 deaths. Between epidemiological week 1 and week 53 of 2020, a total of 6 257 suspected cases including 229 deaths (CFR 3.7%) were reported in 133 health zones from 17 out of 26 provinces in the country. During the same period in 2019, 5 288 suspected cases and 107 deaths (CFR 2.0%) were reported in 132 health zones from 18 provinces. Overall, there is a regressive trend from epidemiological week 33 to 53 of 2020 (276 cases vs 76 cases).</p>									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-20	27-Jun-21	693	-	57	8.20%
<p>From 22 April 2021, a cluster of deaths due to suspected pneumonic plague were recorded in the health zone of Fataki, Ituri province, Democratic Republic of the Congo. The patients presented with headache, fever, chills, coughing sometimes with blood, dyspnoea, vomiting blood, etc. An investigation was conducted during which suspected cases were identified and samples taken to be shipped to the Institut National de Recherche Biomédicale (INRB) in Kinshasa for confirmatory testing. From 22 April to 27 June 2021, 37 suspected pneumonic plague cases including 12 deaths were recorded in two health areas (Bu-Kachele and Bule) of the Fataki health zone. From epidemiological week 1 to 25, 2021 (ending on 27 June), 117 suspected plague cases including 13 deaths were reported in eight health zones in Ituri province. From January to December 2020, 461 suspected plague cases of which 31 deaths were reported in eight health zones of Ituri. The health zones of Biringi, Rethy, and Aru reported the most cases.</p>									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	21-Aug-21	200	200	0	0.00%
<p>One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Mongala. There are 10 cases reported in 2021 so far. The total number of 2020 cases remains at 81.</p>									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	3-Jul-21	716 494	1	198	0.00%
<p>In 2021, from Epi week 1 to 23, 716 494 suspected cases of typhoid fever, including 198 deaths (CFR 0.0%), were recorded in selected health zones of the Democratic Republic of Congo. Of the 204 tests performed (191 blood cultures and 13 faecal cultures), 1 test was positive. In 2020, a total of 715 920 suspected cases of typhoid fever were reported, including 178 deaths (CFR 0.0%).</p>									
Democratic Republic of the Congo	Yellow Fever	Ungraded	21-Apr-21	21-Apr-21	18-Jul-21	2	2	0	0.00%
<p>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 Abuze health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. In addition, confirmatory results are pending for three other presumptive positive cases from Equateur, Kinshasa and North Ubangi provinces.</p>									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	18-Aug-21	9 049	9 049	123	1.40%
<p>The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 18 August 2021, a total of 9 049 cases have been reported in the country with 123 deaths and 8 803 recoveries.</p>									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	20-Aug-21	6 623	6 623	37	0.60%
<p>The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 20 August 2021, a total of 6 623 confirmed COVID-19 cases with 37 deaths were reported in the country. A total of 6 565 patients have recovered from the disease.</p>									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	22-Aug-21	40 455	40 455	1 004	-
<p>The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 22 August 2021, a total of 40 455 cases have been reported in the country including 29 710 recoveries. A total of 1 004 associated deaths have been reported.</p>									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	13-Aug-21	-	-	-	-
<p>According to reports from OCHA, an estimated 5.2 million people are in need of humanitarian assistance and more than 63K refugees have fled to Sudan since fighting began in November 2020. Conflict continues in the Tigray area with spill over from activity in neighbouring Afar and Amhara regions. An estimated 76 500 people were displaced from Afar and 200K from Amhara due to movement of Tigray forces. Despite the fighting, humanitarian access has improved with 75% of the area becoming accessible though logistical and operational problems persist with the lack of banking services, cash, fuel, electricity and telecommunications. Over 400K people are living in famine-like situations, with increasing risks of famine due to the inability of crop production over the past 9 months. Malnutrition rates are far above emergency thresholds among screened children under 5 years (25-30% or higher) and pregnant and lactating women (45-50%).</p>									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	22-Aug-21	295 804	295 804	4 561	1.50%
<p>Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 295 804 cases of COVID-19 as of 22nd August 2021, with 4 561 deaths and 269 132 recoveries.</p>									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-21	14-Aug-21	1 641	926	4	0.20%
<p>In 2021, as of 14 August (epi week 33), a total of 1 641 cases have been reported of which 926 have been confirmed (655 epi-link, 234 IgM and 37 measles compatible) and 4 deaths recorded (CFR 0.4%). Out of the 1 641 suspected cases, 832 were under 5 years of age, 548 were between 5 and 14 years of age and 261 were over 15 years of age.</p>									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	21-Aug-21	72	72	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. 7 cases have been reported so far in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Ethiopia	Unknown disease related to camels	Ungraded	12-Jun-21	8-May-21	12-Jun-21	198	-	0	0.00%
An outbreak was detected in Oromia and Somali regions of Ethiopia related to camels. In Oromia, 158 human cases were reported and a further 40 cases were reported in Somali state of Ethiopia as of 12 June 2021. Out of 40 hospitalized cases 35 were treated and discharged. No deaths have been reported. Symptoms included diarrhoea, fever and vomiting associated with the consumption of camel meat. Samples from camels and human cases have been taken and are undergoing laboratory investigation.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	20-Aug-21	25 667	25 667	165	0.60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 20 August 2021, a total of 25 667 cases including 165 deaths and 25 437 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	20-Aug-21	9 470	9 470	301	3.20%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 20 Aug 2021, a total of 9 470 confirmed COVID-19 cases including 301 deaths, and 9 049 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	18-Aug-21	114 584	114 584	968	0.80%
As of 18 Aug 2021, a total of 114 584 confirmed COVID-19 cases have been reported in Ghana. There have been 968 deaths and 106 969 recoveries reported.									
Ghana	Meningitis	Ungraded	1-Jan-21	1-Jan-21	25-Jul-21	254	-	3	1.20%
Since the beginning of the year 2021, 254 cases of meningitis have been reported with 3 deaths (CFR=1.2%). The Nandom district in the Upper West Region crossed the epidemic threshold and four other districts are on alert (Lawra, Lambussie, Nadowli-Kaleo, Wa Municipal). In Ghana, the Streptococcus pneumoniae is the germ mostly identified by the country laboratory.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	21-Aug-21	31	31	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. There were 12 cases reported in 2020, while the total number of 2019 cases remain 19. One cVDPV2 positive environmental sample was reported in the Eastern province.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	21-Aug-21	28 802	28 802	436	1.50%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 21 August 2021, a total of 28 802 cases including 26 212 recovered cases and 436 deaths have been reported in the country.									
Guinea	Lassa Fever	Ungraded	8-May-21	8-May-21	17-Aug-21	5	5	4	80.00%
To date, there have been a total of 5 confirmed cases and 4 deaths (CFR=80%): the first case (man of 23 years old) was notified on 8 May 2021 at the Yomou prefecture hospital, a resident of Yomou prefecture. The patient was also confirmed to be positive for COVID-19 and later died. Contact tracing of 88 people was done, and no secondary cases found. On 17 June 2021, a second confirmed case (woman of 75 years old) was detected at Nzérékoré Regional Hospital, this case was from Beyla prefecture and died the same day. A listing of 111 contacts have been done for follow up. On 28 June 2021 a third case was confirmed (man of 25 years old), a resident of Nzerekore prefecture, 57 contacts listed are under follow up. On 1 Jul 2021 a fourth case was confirmed (a man of 52 years old), resident also of Nzerekore prefecture, a listing of 21 contacts was done and are being followed. However, the prefecture of Bheeta is regarded as active, with the prefectures of Yomou-Centre, Péla, Yomou and Bignamou on alert.									
Guinea	Marburg Virus Disease	Grade 2	4-Aug-21	4-Aug-21	9-Aug-21	1	1	1	100.00%
On 6 August 2021, WHO was notified by the Ministry of Health of Guinea of a confirmed case of Marburg virus disease (MVD) in Guéckédou prefecture in Nzérékoré Region of south-western Guinea. The case, a male, had onset of symptoms on 30 July 2021. On 1 August 2021 he attended a small health facility near his village of residence with symptoms of fever, headache, fatigue, abdominal pain, and gingival haemorrhage. A rapid diagnostic test performed for malaria was negative. On 2 August 2021 he died in the community and the alert was raised by the sub-prefecture public health care facility to the prefectorial department of health in Gueckedou. A post-mortem oral swab sample was collected and sent on the same day to the viral haemorrhagic fever (VHF) reference laboratory in Guéckédou. The real time PCR test result on 3 August confirmed Marburg virus disease and was negative for Ebola. On 4 August, the sample was sent the National Reference Laboratory in Conakry who provided reconfirmation by real-time PCR that the sample was positive for Marburg disease.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-21	19-Jul-21	1 393	102	4	0.30%
In 2021, as of 19 July (Epi week 27), 1 393 suspected cases have been reported, 279 samples taken, 233 samples tested of which 102 tested positive, 120 negative and 11 undetermined; four deaths have been reported. In 2020 at the same period, 5 835 suspected cases, 820 cases sampled, 805 samples tested of which 512 positive, 247 negative and 46 undetermined; 15 deaths have been reported. Since 2020, a total of 7 228 suspected cases, 1 099 tests analysed, 614 confirmed cases, 19 deaths have been reported.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	21-Aug-21	50	50	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	21-Aug-21	5 518	5 518	103	1.90%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 21 August 2021, the country has reported 5 518 confirmed cases of COVID-19 with 4 592 recoveries and 103 deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	Cholera	Ungraded		23-May-21	17-Jul-21	36	12	0	0.00%
From 23 May 2021, cholera outbreak has been reported from Garissa and Turkana Counties, recording 36 cases with 12 confirmed by culture and no deaths. In Garissa, the outbreak is from Dagahaley Refugee Camp, Dadaab Sub-County, while in Turkana it is reported from Kalobeyi centre, Turkana west sub-county. Turkana outbreak has been controlled, however the outbreak in Garissa is still ongoing.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	22-Aug-21	229 009	229 009	4 497	2.00%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 22nd August 2021, 229 009 confirmed COVID-19 cases including 4 497 deaths and 212 036 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	27-Apr-21	1-Jan-21	17-Jul-21	976	36	2	0.20%
The outbreak has been reported in Mombasa and Mandera Counties, recording 976 cases with 36 confirmed and 2 deaths reported (CFR 0.2 percent).									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	17-Jul-21	873	873	9	1.00%
Since January 2020, a total of 873 visceral leishmaniasis confirmed cases with nine deaths (CFR 1.0 percent), have been reported in seven counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera and Wajir. The outbreak is active in three counties, Mandera, West Pokot and Wajir.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	17-Jul-21	625	30	1	0.20%
As 17 July 2021 (Epi week 27), a total of 625 cases was reported, 30 confirmed cases with one death (CFR 0.2 %) for 2 counties which has reported cases in 2021, West Pokot (4 sub counties affected) and Garissa (1 sub county affected). In West Pokot, the outbreak has been continuous from 2019.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-21	10-Feb-21	21-Aug-21	3	1	0	0.00%
No new cVDPV2 cases reported this week. There was one cVDPV2 environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia. The environmental sample of 22 December 2020, collected from Bouralgy, Garissa town, Garissa County showed a cVDPV2 with 65nt changes from Sabin. A case of circulating Vaccine Derived Polio Virus 2 (cVDPV2) has been isolated from a 11-month-old girl in Dagahaley refugee camp, Dadaab Sub County, Garissa County, in epidemiological week 5 (2021), this child was from Somalia, thus, this was an imported case. Another case from Garissa had been detected and another from Mombasa county in week 6.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	20-Aug-21	14 371	14 371	400	2.80%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 20 Aug 2021, a total of 14 371 cases of COVID-19 have been reported, including 6 763 recoveries and 400 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	17-Jul-21	5 396	5 396	148	2.70%
From 16 March 2020 to 17 July 2021, a total of 5 396 cases including 148 deaths and 2 715 recoveries have been reported from all 15 counties of Liberia. Montserrado County, which hosts the country's capital city, remains at the epicentre of the outbreak.									
Liberia	Lassa fever	Ungraded	23-Jul-21	1-Jan-21	18-Aug-21	15	15	11	73.30%
Between 1 January and 18 Aug 2021, a total of 91 suspected cases were reported, of which 15 (16.5%) were confirmed, and 11 deaths among confirmed cases (CFR=73%). Thirty-eight (38) contacts are currently under follow up. The confirmed cases originated from four counties: namely Bong (4), Grand Bassa (5), Montserrado (2) and Nimba (4). Three counties are currently in outbreak: Montserrado, Nimba and Bong County. Nimba county in 17 days' countdown to end of outbreak. Community engagement continues in affected counties, Rapid Respond Teams continue to respond in the affected counties.									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	24-Jul-21	168	107	0	0.00%
In week 29 (week ending 24 July 2021), 6 suspected cases were reported from Montserrado (5) and Bond (1) Counties. Among the 6 suspected cases, 5 cases are <5 years (83%) and 1 case are >5 years (17%). Since the beginning of 2021, 168 total cases were reported of which 107 were confirmed (16 laboratory-confirmed, 80 clinically confirmed and 11 epi-linked), 57 negative and 2 undetermined.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	21-Aug-21	3	3	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The country has reported 3 cases.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-21	1-Jan-21	31-Jul-21	-	-	-	-
A prolonged three-year drought in southern Madagascar has contributed to food insecurity issues for an estimated 1.3 million people in the Grand Sud area, of which 14K people were classified as IPC Phase 5 or catastrophically food insecure. About 390K children are expected to have moderate acute malnutrition and 111K children to have severe acute malnutrition from May 2021 to April 2022 if no intervention measures are taken. All 10 districts of Grand Sud have been affected with the epicentre of the crisis occurring in Amboasary Atsimo district.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	21-Aug-21	42 845	42 845	954	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 21 August 2021, a total of 42 845 cases have been reported in the country, out of which 42 545 have recovered and 954 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	1-Jan-21	25-Jul-21	1 272 482	-	573	0.00%
From January 2021 to 25 July 2021, 1 272 482 cases were reported including 573 deaths. The number of malaria cases reported in week 29 was 6 022 cases and a decrease in the number of malaria cases has been observed from week 21.									
Madagascar	Poliomyelitis (cVDPV2)	Grade 2	28-Apr-21	28-Apr-21	21-Aug-21	6	6	0	0.00%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. There are six cases in 2021 and two from 2020.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	22-Aug-21	59 471	59 471	2 074	3.50%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 20 August 2021, the country has a total of 59 471 confirmed cases with 2 074 deaths and 45 552 recoveries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	8-Aug-21	-	-	-	-
The security situation continues to gradually spread to the southern regions of the country. Issues such as inter and intra-community conflicts, activism of non-state armed groups, consequences of counter-insurgency operations, crime and banditry continue to weaken the Malian context. Natural disasters (droughts and floods) and COVID-19 compound the health and non-health impacts affecting all basic social sectors as well as the protection of household livelihoods. On 8 August NSAGs simultaneously attacked villages in of Ouatagouna causing deaths, injuries, and IDPs. There have been a total of 372 266 IDPs in the country and more than 140 000 refugees. According to OCHA reports, an estimated 5.9 million people need humanitarian assistance. During July 2021, more than 50 voluntary Ivorian refugees in Sikasso, Mali were repatriated.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	22-Aug-21	14 757	14 757	536	3.60%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 22 August 2021, a total of 14 757 confirmed COVID-19 cases have been reported in the country including 536 deaths and 14 053 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-21	15-Aug-21	1 185	605	2	0.20%
From January 2021 up to Epi week 32 (15/08/2021), Mali has reported a total of 1 185 suspected cases including two deaths, 1 032 samples tested of which 605 were positive, 400 negative and 30 undetermined. There is an increase of 70.90% in confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	21-Aug-21	50	50	0	0.00%
Two cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Mopti and Sikasso. . The total cases reported is 50.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	22-Aug-21	31 822	31 822	673	2.10%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 22nd August 2021, a total of 31 822 cases including 673 deaths and 28 167 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	22-Aug-21	8 098	8 098	25	0.30%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 22nd August 2021, a total of 8 098 confirmed COVID-19 cases including 25 deaths and 4 477 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Grade 2	1-Jan-20	1-Jan-20	10-Aug-21	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. On 8 August 2021, Mocimboa da Praia was retaken by joint forces. During 4-10 August 2021, a total of 5 484 internally displaced person (IDPs) arrived mostly in Mueda (34% arrivals), Nangade (20% arrivals), and Montepuez (20% arrivals) districts. As of 10 August 2021, the nation-wide estimate of people in need of humanitarian assistance is 1.3 million and there are 732K people displaced.									
Mozambique	Cholera	Ungraded	20-Feb-20	31-Jan-20	15-Aug-21	5 681	5 681	35	0.60%
As of 15 Aug 2021, there have been a total of 5 681 cases and 35 deaths (case fatality ratio 0.6%) reported in the Cabo Delgado (4 246 cases and 31 deaths) and Nampula (1 435 cases and 4 deaths ) provinces. Eight districts for Cabo Delgado province: Mocimboa da Praia (307 cases), Ibo (163 cases), Macomia (166 cases), Pemba (566 cases), Metuge (1 245 cases), Chiure (1 165 cases) and Montepuez (328 cases) and Ancuabe (306 cases). Three districts for Nampula province reported cases: Meconta (630 cases), Nampula (755 cases) and Moma (50 cases) .									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	22-Aug-21	142 784	142 784	1 800	1.30%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 22 August 2021, a total of 142 784 confirmed COVID-19 cases were reported in the country including 1 800 deaths and 126 041 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	1-Aug-21	726	84	0	0.00%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 01 August 2021 (week 30) , there were 726 cases reported including 84 confirmed cases and no death. In 2020 at the same period, there were 130 confirmed cases and no death.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	20-Aug-21	123 581	123 581	3 342	0.00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 20 August 2021, a total of 123 581 confirmed cases with 118 085 recovered and 3 342 deaths have been reported.									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	18-Jul-21	8 081	8 081	66	0.80%
The current outbreak in Namibia started in December 2017. As of 18 July 2021, a cumulative total of 8 081 cases (2 117 laboratory-confirmed, 4 741 epidemiologically linked, and 1 222 suspected cases) including 66 deaths (CFR=0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 4 996 (61.8%) of reported cases, followed by Erongo 1 716 (21.2%).									
Niger	Floods	Ungraded	15-Jul-21	2-Aug-21	9-Aug-21	69 515	-	27	0.00%
In Niger, the rising of water of the Niger river caused by the rainy season which extends from June to September each year, is often marked by flooding. The poorest rural populations are more exposed. These floods have serious economic, social and health consequences because they have a negative impact on agricultural production and they provide favourable conditions for the outbreak of water-borne diseases, and or epidemic diseases. The current floods, while considered as relatively stable so far compared to the alert threshold according to the authorities, they are taking place in a context where cases of cholera have been confirmed in the regions of Zinder, Maradi , Dosso and Tahoua. They have already caused the death of 19 people and affect 69 515 people as of 9 August 2021. Increased surveillance is needed.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	6-Aug-21	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2021, 289K are IDPs, 243K are refugees, and 1.6 million are food insecure (phase 3+ and above). The Intikane Malian refugee reception area has closed and many (66%) IDPs from there have resettled in the villages of Temcess, Tillia ville, Gaway, Assaguey in the Tillia department. In the Maradi region, insecurity, theft and looting have cause some population movement. The Maradi region also saw some voluntary returns of IDPs. In Tilliberi region the number of IDPs are expected to drop due to a new government policy of IDP returns. In Diffa region, around 30K people have already returned to their localities of origin due to this return policy.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Niger	Cholera	Grade 1	7-Aug-21	7-Jun-21	20-Aug-21	1 404	1 404	54	3.80%
As of 20 August 2021, a total of 1 404 cases including 54 deaths (CFR = 3.8%) have been reported. The outbreak is related to the epidemic which is ongoing for several months in the neighbouring regions of northern Nigeria where there is significant mixing of cross-border populations and with heavy rainfall recorded during this period in Niger. Six regions have reported cases so far (Tahoua, Niamey, Tillaberi, Dosso, Maradi and Zinder). These 2 regions of Maradi and Zinder have recurrently recorded cholera outbreaks, most often involving border transmission.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	30-Jul-21	5 616	5 616	195	3.50%
From 19 March 2020 to 30 July 2021, a total of 5 616 cases with 195 deaths have been reported across the country. A total of 5 338 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-21	18-Jul-21	9 095	924	16	0.20%
From January to 18 July 2021, 9 095 suspected cases have been reported and 16 deaths. Out of suspected cases, 1 795 were investigated including 924 lab confirmed measles cases, 55% are older than 4 years; 51 of 72 health districts have reported at least 3 confirmed cases of measles in month. Response vaccination took place in 12 health districts (Arlit, Bilma, Dogondoutchi, Tibiri, Gazaoua, Niamey 2, Niamey 3, Niamey 4, Tahoua Com, Ayerou, Balleyara, Tesker) across 8 regions. In 2020 2 079 cases have been suspected of which 241 lab confirmed (IgM positive) and 4 deaths in 8 regions. In 2019 a total of 10 207 suspected measles cases were reported from eight regions in the country.									
Niger	Meningitis	Ungraded		1-Jan-21	25-Jul-21	1 335	-	74	5.50%
Since the beginning of the year 2021 to week 30 ending 25 July 2021, 1 335 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	21-Aug-21	20	20	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The total cases of 2020 still 10. There number of cVDPV2 cases reported in 2018 has been corrected to 9, and 1 in 2019.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	6-Jul-21	-	-	-	-
In 2021, more than 8.7 million require humanitarian assistance in Borno, Adamawa, and Yobe states. Attacks on Nigerian Armed Forces (NAF) by non-state armed groups (NASG) have escalated in April and May 2021 leading to harming of civilians and a new wave of population displacement. IOM reports that more than 2 million people have left the affected area to neighbouring Wards and LGAs in May 2021. An estimated 8 million are at risk of displacement, poverty, and threats of violence. The overall security situation remains complex, unpredictable, and volatile as of 6 July 2021 with constrained health vulnerabilities made worse by the COVID-19 pandemic leading to maintain the grading of protracted level 3.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	4-Aug-21	31 425	-	816	2.60%
As of 4 August 2021, 31 425 have been affected with 816 deaths yielding a CFR of 2.6%. A total of 22 states have reported cases, however, only 8 states have active outbreaks. During week 30 a total of 1 162 suspected cases with 30 deaths were reported - Bauchi (773), Kano (4), Jigawa (13), Katsina (120), FCT (64), Niger (183), Borno (4) and Adamawa (1). Of the reported cases since the beginning of the year, around 27% are aged 5 - 14 years and 51% have been reported among males. There is an ongoing cholera outbreak in 2 regions of the neighbouring country of Niger that have been epidemiologically linked to the outbreak in Nigeria.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	22-Aug-21	187 023	187 023	2 268	1.20%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 22 August 2021, a total of 187 023 confirmed cases with 168 455 recovered and 2268 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	1-Jan-21	1-Jan-21	6-Aug-21	2 732	354	73	2.70%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 32 of 2021, the number of new confirmed cases was 4. These were reported from Ondo, Edo, and Enugu States. Cumulatively from week 1 to week 32 of 2021, a total of 354 confirmed cases including 73 deaths among confirmed cases have been reported with a case fatality rate of 20.6% across 14 states. In total, 2 732 cases are suspected in 2021. This is lower than the same period reported in 2020.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-21	20-Apr-21	6 995	-	50	0.70%
In 2020, Nigeria reported 9 316 confirmed cases, with 55 deaths, CFR 0.6%. From January 2021 to 20 April 2021 (as of epi week 15), 6 995 suspected cases have been reported in Nigeria. The most affected state is Borno with 1 992 cases including 32 deaths, 79% of the cases were below the age of five years. During week 15, 537 were reported with 3 deaths									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	21-Aug-21	154	154	0	0.00%
26 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported: 1 each in Bauchi, Gombe, Kaduna, Sokoto and Zamfara, 2 in Kano, 3 each in Borno and Yobe, and 13 in Jigawa. So far, the number of cases in 2021 is 94 as of 21st August 2021. There were eight cases reported in 2020 ; 18 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	12-Sep-17	1-Jan-21	31-Jul-21	1 082	27	1	0.10%
From 1 January 2021 to 31 July 2021, there has been a cumulative total of 1 082 suspected cases of yellow fever in Nigeria, of which 27 cases have been confirmed, from 367 Local Government Areas (LGA) across 37 states including the Federal Capital Territory (FCT). In 2020, 3 426 suspected cases of yellow fever have been recorded, including 145 confirmed cases, from 495 LGA (64%) across all states and the FCT.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	22-Aug-21	83 023	83 023	1 021	1.20%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 22 August 2021, a total of 83 023 cases with 959 deaths and 45 544 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	22-Aug-21	2 524	2 524	37	1.50%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 22 August 2021, a total of 2 524 confirmed cases of COVID-19 have been reported, including 37 deaths. A total of 2 403 cases have been reported as recoveries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	22-Aug-21	71 927	71 927	1 671	2.30%
From 2 March 2020 to 22 Aug 2021, a total of 71 927 confirmed cases of COVID-19 including 1 671 deaths and 57 394 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	21-Aug-21	13	13	0	0.00%
One new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. So far, the total number of 2021 cases is 13.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	22-Aug-21	19 609	19 609	98	0.50%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 22 Aug 2021 a total of 19 609 cases have been confirmed, including 19 006 recoveries and 98 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	20-Aug-21	6 352	6 352	121	1.90%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 20th August 2021, a total of 6 352 confirmed COVID-19 cases were reported in the country including 121 deaths and 4 335 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	5-Aug-21	13	13	9	69.20%
As of 5 August 2021, 13 cases of Lassa fever have been reported from Kenema (11) and Kailahun (2) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 69%. Lassa fever is known to be endemic in Sierra Leone and surrounding countries.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	21-Aug-21	14	14		0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far, 4 cases have been reported in 2021, and the number of cases 2020 remains 10.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	1-Aug-21	2 456 184	2 456 184	72 191	3.40%
Since the start of the COVID-19 pandemic in South Africa a cumulative total of 2 456 184 confirmed cases and 72 191 deaths have been reported with 2 230 871 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	6-Aug-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people faced crisis levels of food insecurity phase (IPC) 3 or worse from April to July 2021- a figure that increased by 25% compared to the previous three months. Of the total number, 108K are in IPC 5, 2.4 are in IPC 4, and 4.6 million are in IPC 3. The total number includes 1.9 million acutely malnourished women and children suffering and 1.47 million internally displaced people.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	6-Aug-21	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. From the start of 2021, there is a total of 8.3 million people in need of humanitarian assistance, 1.6 million people internally displaced and 175 000 people living in protection of civilian sites across the country. Humanitarian staff have been the target of surge attacks during April to July 2021 with 4 aid workers killed and at least 95 relocated from sites in Fangak, Magwi, Panyijar, Pariang, Renk, Torit, and Uror. Roads have also become frequent to ambushes for aid workers and civilians. According to OCHA, 90K people have been affected by flooding from 1 January - 6 August 2021. The following states have been affected by flooding: Jonglei, Northern Bahr el Ghazal, Unity, Upper Nile and Warrap.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	22-Aug-21	11 310	11 310	120	1.10%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 22nd August 2021, a total of 11 310 confirmed COVID-19 cases were reported in the country including 120 deaths and 10 948 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	3-Jan-18	1-Aug-21	905	905	5	0.60%
The current outbreak in Bentiu UN Protection of Civilians (POC) camp, which started at the beginning of 2018, is ongoing. There were 20 new cases reported during week 30 in 2021. As of 1 Aug 2021, a total of 905 cases of hepatitis E including five deaths (CFR: 0.6%) have been reported. There has been an upsurge of HEV cases since the beginning of 2021 which has been mostly attributed to declining water, sanitation and hygiene services in the camp due to reduced funding.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	1-Aug-21	1 313	54	2	0.20%
Since week 38 of 2019 to week 29 of 2021 (week ending 25 July 2021), a total of 1 313 cases of measles were reported including 54 confirmed cases and two deaths. No case is reported in 2021. The outbreak is controlled in 9 counties (Tonj East, Juba, Bor, Kapoeta East, Jebel Boma, Aweil East, Wau, Pibor and Ibba).									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	21-Aug-21	59	59	0	0.00%
no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 59 cVDPV2 cases in the country; 9 in 2021 and 50 in 2020.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	30-Jul-21	1 367	1 367	50	3.70%
The Ministry of Health, Community Health, Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 22 July 2021, a total of 1 367 cases have been reported in the country including 50 deaths. A new bunch of 100 COVID-19 cases was reported in Tanzania on 28 June 2021 since May 2020.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	22-Aug-21	19 614	19 614	172	0.90%
On 6 March 2020, the Ministry of Health and Public Hygiene of Togo announced the confirmation of its first case of COVID-19. As of 22 August 2021, a total of 19 614 cases including 165 deaths and 16 105 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	21-Aug-21	17	17	0	0.00%
No new case of cVDPV2 was reported during the past week. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	21-Aug-21	118 777	118 777	2 960	2.50%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 21 August 2021, a total of 118 777 confirmed COVID-19 cases, 95 375 recoveries with 2 960 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	22-Aug-21	204 549	204 549	3 574	1.70%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 22nd August 2021, a total of 204 549 confirmed COVID-19 cases were reported in the country including 3 574 deaths and 198 559 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	25-Jul-21	835	0	3	0.40%
The anthrax outbreak is ongoing in Zimbabwe. From Week 1 to 29 of 2021, there were 88 cases reported and no deaths. This outbreak started in Week 36 of 2019, affecting mainly Buhera and Gokwe North and South districts but a surge in cases started appearing in week 38 when cases were reported in some other areas. The cumulative figures for anthrax are 747 cases and 3 deaths in 2020. The last five reported cases were reported in Gokwe North District in Midlands Province during Week 28 of 2021.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	22-Aug-21	122 652	122 652	4 249	3.50%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 22nd August 2021, a total of 122 652 confirmed COVID-19 cases were reported in the country including 4 249 deaths and 106 810 cases that recovered.									

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

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

© 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

Baruani Bienvenu (Niger)  
Namara Geoffrey (Nigeria)  
Mpazanje Rex Gadama (Nigeria)

#### Graphic design

A. Moussongo

#### Editorial Team

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

#### 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.