

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 39: 20 - 26 September 2021

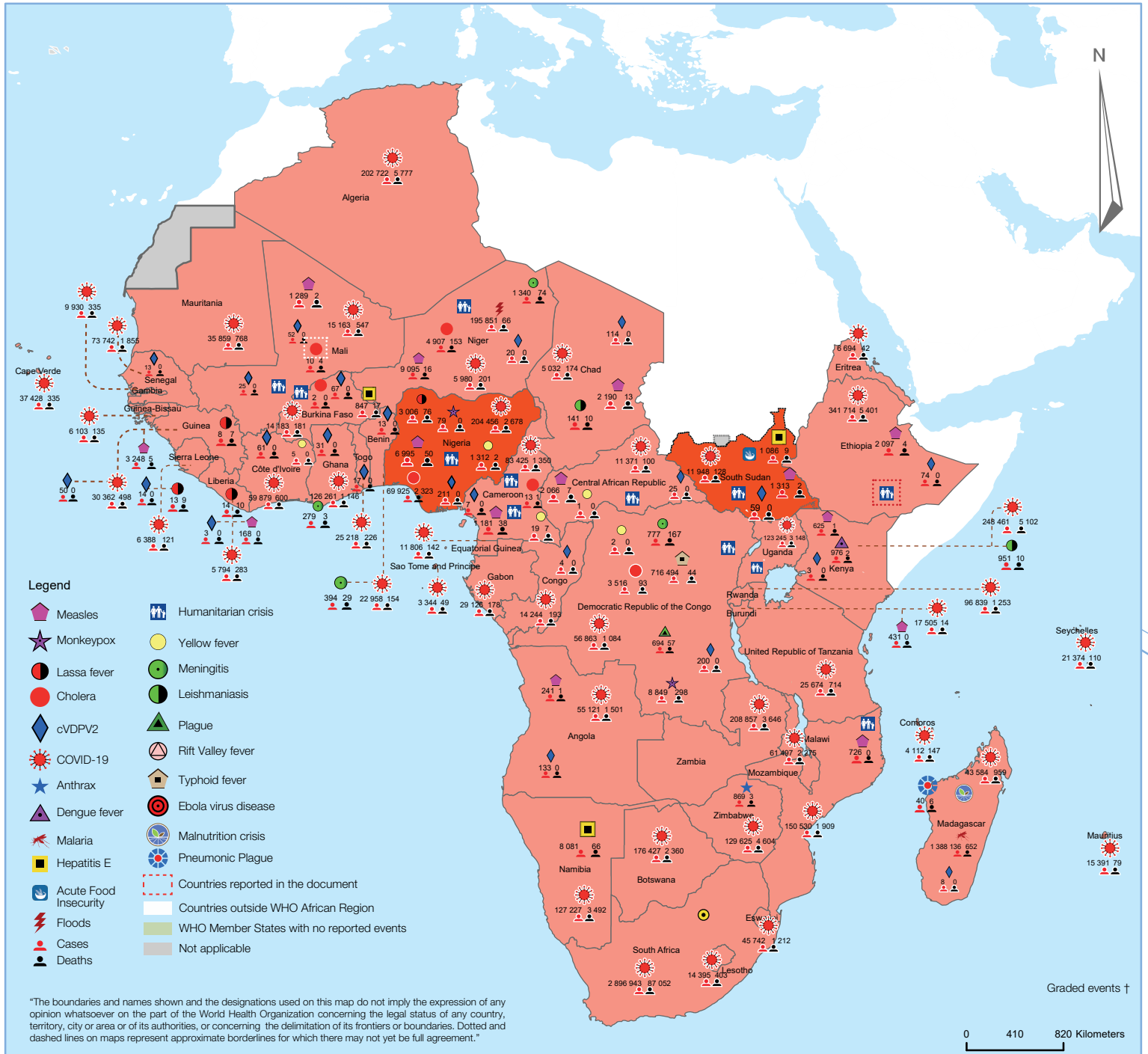
Data as reported by: 17:00; 26 September 2021

0
New event

128
Ongoing events

114
Outbreaks

14
Humanitarian crises



3
Grade 3 events

3
Protracted 3 events

28
Grade 2 events

4
Protracted 2 events

2
Grade 1 events

3
Protracted 1 events

39
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 128 events in the region. This week's articles cover:

- [COVID-19 across the WHO African region](#)
- [Cholera in Mali](#)
- [Humanitarian Crisis in Tigray, Ethiopia](#)

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:

- A fall in the number of COVID-19 cases has been observed for the last two months in the WHO African region, however it has been declining slower than in previous waves due to the persistent effects of variants. South Africa continues to report more than half of all new cases in the region, followed by Ethiopia. Gabon and Angola have reported a steady increase in the weekly number of cases for the second consecutive week. The number of deaths reported across the region declined in the past week. At the moment, 14 countries are experiencing a resurgence, of which Algeria, Benin, Mauritius and Kenya are in their fourth wave of the pandemic. As many countries continue to relax restriction measures, the risk of resurgence remains high amidst circulation of highly transmissible variants of concern in the region. Africa faces a vaccine shortage of almost 500 million doses following the cutback in COVAX deliveries forecast for the rest of the year. As such the continent will fall short of the WHO year-end target for countries to vaccinate 40% of their populations.
- Mali is facing a cholera outbreak since its official declaration by the authorities on 11 September 2021. This outbreak is epidemiologically linked to the ongoing cholera outbreak in Niger. It occurs in the Gao region which has a particular humanitarian profile characterized by the presence of thousands of internally displaced persons due to persistent insecurity which affects the living conditions of populations. Challenges with the response remain around; insufficient drugs and medical supplies for the case management, inadequate sampling kits, and poor community surveillance. The authorities have already appealed to its health partners for assistance to contain this outbreak and prevent its spread throughout the country.
- The humanitarian situation in the Tigray area of Ethiopia has continued to be a challenge. The conflict is now spreading into the adjacent regions of Afar and Amhara where humanitarian actors are also responding with food aid, water and sanitation services. Desert locusts have also been reported in 19 woredas which could further impact food security in the region. The road closures into and out of the region persists, thus exacerbating the situation. Persistent lack of access to social services such as health, water and sanitation, electricity, banking, fuel, and communication lines still trouble the area and make humanitarian response difficult.

Ongoing events

Coronavirus disease 2019

African region

5 929 003 : 144 557 : 2.4%
Cases : Deaths : CFR

The WHO African region reported a total of 75 256 new cases of coronavirus disease (COVID-19) in the past week (20 – 26 September 2021), a 35.0% decrease compared to the prior week when 114 130 new cases were reported. Meanwhile, six (13.0%) countries saw a 20% or more increase in weekly cases compared to the previous week: Angola, Democratic Republic of the Congo, Equatorial Guinea, Eritrea, Gabon, and Sao Tome and Principe.

In the same reporting period, 29 (63.0%) countries reported a decrease of 20% or more in the number of new cases reported compared to the previous week. These countries are Algeria, Benin, Botswana, Burundi, Cabo Verde, Central African Republic, Chad, Comoros, Congo, Eswatini, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Malawi, Mauritania, Mauritius, Mozambique, Namibia, Niger, Rwanda, Senegal, Seychelles, Sierra Leone, South Africa, South Sudan, Togo, and Zambia.

Five countries account for the majority (31 061, 65.0%) of the cases recorded in the past week, namely South Africa (14 313 new cases, 41.4% decrease, 24.4 new cases per 100 000 population); Ethiopia (8 753 new cases, 11.2% decrease, 7.8 new cases per 100 000); Angola (2 698 new cases, 37% increase, 9.2 new cases per 100 000); Nigeria (2 658 new cases, 0.4% increase, 1.3 new cases per 100 000); and Botswana (2 639 new cases, 68.0% decrease, 107.7 new cases per 100 000).

The region recorded a 43.0% (n=1 792) decrease in the number of new deaths reported from 34 countries against 3 184 deaths reported by 40 countries in the previous week. The highest numbers of new deaths were reported from South Africa (878 new deaths; 32.3% decrease; 2.0 new deaths per 100 000 population), Ethiopia (271 new deaths; 35.0% increase; 0.2 new deaths per 100 000), Kenya (113 new deaths; 36.1% increase; 0.2 new deaths per 100 000), Angola (110 new deaths; 112.0% increase; 0.4 new deaths per 100 000), and Algeria (83 new deaths; 28.4% decrease; 0.2 new deaths per 100 000).

The cumulative number of confirmed COVID-19 cases reported in the WHO African region is 5 929 003. More than 5.4 million recoveries have been recorded, giving a recovery rate of 92.0%. The total number of deaths reported is now at 144 557, accounting for a case fatality ratio (CFR) of 2.4%. The WHO African Region accounts for 2.6% of global cases and 3.1% of global deaths, making it one of the least affected regions in the world after the WHO Western Pacific Region.

Fourteen countries are still experiencing a resurgence of COVID-19 cases in the region; Angola, Benin, Botswana, Burundi, Cabo Verde, Cote d'Ivoire, Equatorial Guinea, Ethiopia, Gabon, Ghana, Mauritius, Rwanda, Sao Tome and Principe, and Togo. Gabon and Angola are having a steady increase in the number of cases reported weekly, compared to the previous peak. The current resurgence in Gabon occurred two months after the government began easing COVID-19 restrictions. Four countries, Algeria, Benin, Mauritius and Kenya are experiencing a fourth wave.

Overall, death trends are on the rise in four countries, Angola, Benin, Cote d'Ivoire, and Ethiopia. Eleven countries have reported higher case fatality rates than the region's average of 2.4% in the

past four weeks. Five countries reported zero deaths in the past 4 weeks, namely Chad, Comoros, Central African Republic, Liberia and Sierra Leone.

Cumulatively, the highest number of COVID-19 cases in the region has been recorded in South Africa with 2 896 943 cases (49.0%), followed by Ethiopia 341 714 (5.8%), Kenya 248 461 (4.2%), Zambia 208 857 (3.5%), and Nigeria 204 456 (3.4%). These five countries account for 66.0% (n=3 900 431) of all cases. South Africa also has the highest number of deaths in the region (87 052 deaths, 60.0% of all deaths); followed by Algeria (5 777, 4.0%), Ethiopia (5 401, 3.7%), Kenya (5 102, 3.5%) and Zimbabwe (4 604, 3.2%), all accounting for 74.6% (107 936) of all deaths reported in the region.

A total of 62 new health worker infections were reported during this reporting period (20 – 26 September 2021) from Equatorial Guinea (25), Kenya (21), Namibia (11), and Eswatini (5). An additional 3 316 health worker infections were retrospectively reported from the United Republic of Tanzania (3 266), and Central African Republic (50). To date, there have been 125 546 COVID-19 infections (2.1% of all cases) among health workers in the region, with South Africa accounting for about 45.0% (56 180) of the total infections. Algeria (11 936, 9.5%), Kenya (7 542, 6.0%), Zimbabwe (5 366, 4.3%) and Mozambique (4 779, 3.8%) 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 (12.7%), Algeria (6.0%), Niger (6.0%), Liberia (6.0%), and Chad (5.8%) 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 8.3 million cases of COVID-19, with more than 209 000 deaths (CFR 2.5%) and over 7.6 million people have recovered. The African continent accounts for 3.6% of global cases and 4.4% of global deaths.

Twelve countries in the African region have reached the 10% target of their population vaccinated by the end of September 2021: Botswana, Eswatini, Cabo Verde, Comoros, Equatorial Guinea, Lesotho, Mauritania, Mauritius, Seychelles, South Africa, Rwanda and Zimbabwe.

Worldwide, more than 6 billion doses have been administered, only 2.3% of which have been administered in Africa. This sums to a cumulative total of 71 doses per 100 people worldwide, over 10 doses/100 in Africa and nearly 6 doses/100 in sub-Saharan Africa.

High-income countries have administered 36 times more doses per person than low-income countries. Only 23.0% of doses have been administered in low-income countries which represent 51.0% of the world's population.

SITUATION INTERPRETATION

- Although the WHO African region has seen a steady decline in the number of new cases in the past two months, country specific case trends vary. The decline is driven largely by more than half of region's countries observing a fall in weekly cases as Africa's third wave continues to lessen.

[Go to overview](#)

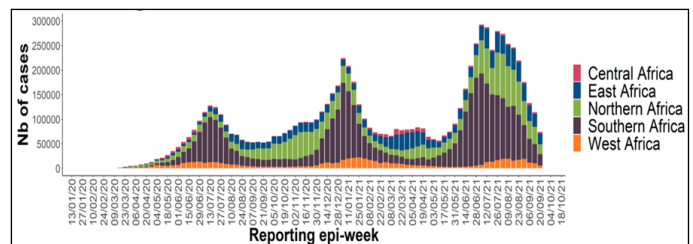
2

[Go to map of the outbreaks](#)

Although Algeria, Kenya, Ethiopia and South Africa are among countries seeing a decline in new cases, they still account for a large proportion of the region's new cases in the last seven days. At the same time, weekly COVID-19 deaths in the region decreased in the past week, with South Africa accounting for more than half of all fatalities. Even with low numbers reported across the African region, the high number of cases reported globally still pose a risk for the region. WHO is currently supporting countries in the region to conduct intra-action reviews, update their national vaccine deployment plans and develop district-level micro plans.

- The WHO advises strict adherence to the basic precautionary and control measures including vaccination, hand hygiene, physical distancing, and wearing a face covering when physical distancing is impractical to prevent the spread of disease.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 26 September 2021 (n = 5 929 003)



Africa faces 470 million COVID-19 vaccine shortfall in 2021

PROPOSED ACTIONS

- WHO, Africa CDC and other partners should continue working jointly across COVID-19 response areas and technical response pillars to harmonize support to countries. We encourage all countries to submit data to WHO on their operational readiness, as this helps us understand their experience better and offer the tailored and targeted support they need.
- Countries should adapt vaccination strategies to accommodate for different vaccines to ensure doses are administered efficiently.

Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 26 September 2021

Country	Total Cases	Total Deaths	Recovered Cases	Case Fatality Ratio (%)	Health Worker infections
South Africa	2 896 943	87 052	2 760 093	3.0	56 180
Ethiopia	341 714	5 401	308 395	1.6	3 354
Kenya	248 461	5 102	240 235	2.1	7 542
Zambia	208 857	3 646	204 745	1.7	1 121
Nigeria	204 456	2 678	192 628	1.3	3 175
Algeria	202 722	5 777	138 852	2.8	11 936
Botswana	176 427	2 360	172 051	1.3	61
Mozambique	150 530	1 909	146 544	1.3	4 779
Zimbabwe	129 625	4 604	122 249	3.6	5 366
Uganda	129 329	3 148	96 027	2.4	2 880
Namibia	127 227	3 492	122 690	2.7	4 321
Ghana	126 621	1 146	121 878	0.9	4 763
Rwanda	96 839	1 253	45 784	1.3	682
Cameroon	85 414	1 368	82 077	1.6	2 923
Senegal	73 742	1 855	71 482	2.5	419
Malawi	61 509	2 276	54 593	3.7	2 173
Côte d'Ivoire	59 879	600	57 479	1.0	1 084
Democratic Republic of the Congo	56 862	1 084	50 675	1.9	728
Angola	55 121	1 501	47 273	2.7	939
Eswatini	45 770	1 212	43 891	2.6	963
Madagascar	43 570	958	42 612	2.2	70
Cabo Verde	37 428	335	36 420	0.9	140
Mauritania	35 859	768	34 291	2.1	24
Guinea	30 362	376	28 733	1.2	682
Gabon	29 126	178	26 541	0.6	345
United Republic of Tanzania	25 674	714	180	2.8	3 267
Togo	25 218	226	22 321	0.9	891
Benin	22 958	154	20 058	0.7	139
Seychelles	21 374	110	20 823	0.5	945
Burundi	17 505	14	17 259	0.1	38
Mauritius	15 391	79	13 326	0.5	30
Mali	15 164	547	14 264	3.6	87
Lesotho	14 395	403	6 830	2.8	473
Congo	14 244	193	13 394	1.4	203
Burkina Faso	14 183	181	13 831	1.3	288
South Sudan	11 948	128	11 422	1.1	294
Equatorial Guinea	11 806	142	10 225	1.2	512
Central African Republic	11 371	100	11 125	0.9	51
Gambia	9 930	335	9 571	3.4	142
Eritrea	6 694	42	6 628	0.6	0
Sierra Leone	6 388	121	4 374	1.9	263
Guinea-Bissau	6 103	135	5 290	2.2	23
Niger	5 980	201	5 735	3.4	355
Liberia	5 794	283	5 488	4.9	346
Chad	5 034	174	4 850	3.5	292
Comoros	4 112	147	3 953	3.6	155
Sao Tome and Principe	3 344	49	2 675	1.5	102
Cumulative Cases (N=47)	5 929 003	144 557	5 471 860	2.4	125 546

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

EVENT DESCRIPTION

The cholera outbreak which was declared by the Malian health authorities on 11 September 2021 continues. The epicenter of the outbreak is currently in the health area of Labbezanga, Ansongo health district in the Gao region. As of 19 September 2021, 10 suspected cases with two confirmed and four deaths (case fatality ratio (CFR) = 40%), have been reported. This current CFR is high compared to the expected ratio of <1%.

Preliminary investigations have shown that the index case was a Nigerien male from Ayorou town in the Tillabery region in Niger where a cholera outbreak is ongoing with nearly 5 000 cases and 151 deaths reported so far. Ayorou also borders the Malian region of Gao. He stayed with a family in Labbezanga for two days. After his departure, a 17-year-old girl from the host family died on 5 September 2021, from diarrhoea and vomiting which is consistent with a clinical picture suggesting cholera.

The onset date of this event was 8 September 2021, when the Chief Medical Officer of Ansongo health District was alerted by Labbezanga Community Health Center of two suspected cases of cholera received at a health facility in Labbezanga city. These two suspected cases revealed that they were from the same home as the 17-year-old girl who died on 5 September 2021. They suffered an acute illness with onset on 7 September 2021. They then sought medical care at Labbezanga Community Health Center on 8 September 2021 presenting with diarrhoea and vomiting and died the same evening.

On 11 September 2021, cholera was confirmed with the isolation of *Vibrio cholerae* Ogawa 01 at National Institute of Public Health laboratory, the same serotype causing the ongoing cholera outbreak in Niger and Nigeria. Among the 10 reported cases, seven cases are female (70%) and three cases are male (30%), the male-female sex ratio is 2.3. The 25 and over age group is the most affected with 6 cases (60%). Regarding deaths, females are more affected with three deaths (75%) against one death for males (25%). The age groups affected by deaths are those of 25 years and over (2 deaths), 15-24 years (1 death) and 6-14 years (1 death).

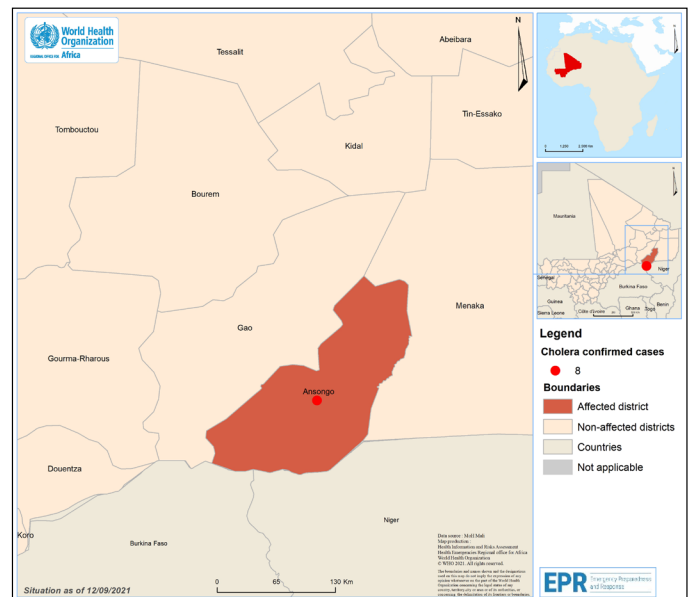
The investigation team deployed in the affected area identified several challenges, including the need for drugs and medical supplies for the case management, inadequate sampling kits, and poor community surveillance.

PUBLIC HEALTH ACTIONS

- Emergency meeting of the Gao regional and Ansongo health district incident management committees was held
- The Ministry of health deployed an investigation team to the affected areas
- The National Institute of Public Health laboratory is currently collecting stool samples for confirmation of cholera
- Response teams are strengthening surveillance activities at points of entries and health facilities.
- A cholera treatment unit was set up at Labbezanga health center and assigned a medical team for case management.

[Go to overview](#) ◀

Distribution of confirmed cases of Cholera in Mali, as of 12 September 2021



- Regional and local teams sensitized communities around Labbezanga city.

SITUATION INTERPRETATION

Since 1990, Mali regularly faces cholera outbreaks occurring in the dry season or in the rainy season. However, during the rainy season which runs from June to October, an increase in cases is seen. The spread of these outbreaks to a large part of the country is often along the Niger and Senegal rivers. Insufficient access to drinking water as well as poor hygiene conditions especially in rural areas, have been identified as the main risk factors of cholera outbreaks in Mali. The current outbreak is the result of cross-border transmission from Niger where another large-scale outbreak is underway. Although still localized, the risk of this outbreak spreading throughout the country is high because the implementation of the effective control measures may be impeded given the volatile security situation in the affected area.

PROPOSED ACTIONS

- It is urgent that the main gaps identified by the investigation team be quickly addressed, by increasing the supply of medicines and medical supplies for the case management, as well as strengthening of surveillance, especially at the points of entries to prevent national and regional spreads of the outbreak.
- Cross-border collaboration between Mali, Burkina-Faso, and Niger, particularly in the border regions and districts, should be reinforced.
- At the same time, in areas at risk but not yet affected, preparedness and response plans must be developed and implemented. Sustainable programs for access to drinking water, sanitation and hygiene must be considered as a priority in all areas regularly affected especially in rural areas.

▶ [Go to map of the outbreaks](#)

EVENT DESCRIPTION

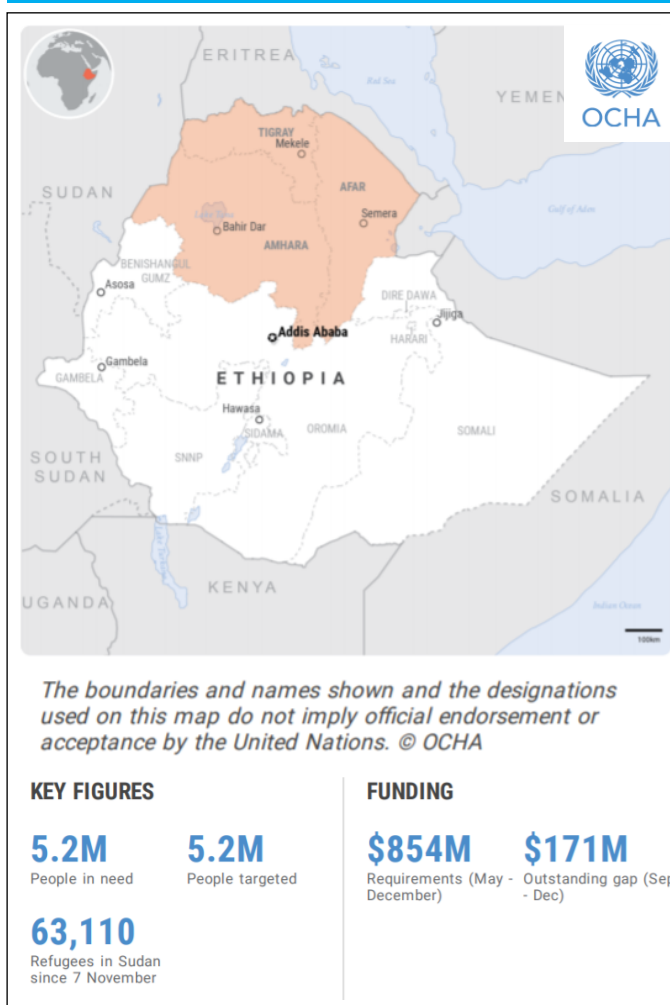
Since November 2020, the Tigray region of Ethiopia has seen catastrophic violence resulting from clashes between the Special Forces of the Tigray region and the Ethiopian federal government. For more than 10 months there has been ongoing conflict between the two sides and their alliances. The armed conflict has disrupted the health system and negatively impacted the lives and livelihood of the population of the region. The situation has amplified the vulnerability of individuals and their families and has severely inhibited access to essential health care services especially to children, women, and internally displaced persons (IDPs).

The conflict is now spreading into the adjacent regions of Afar and Amhara where humanitarian actors are also responding with food aid, water and sanitation services. Roadway traffic has been closed to the Tigray region since 22 August 2021 except for the road through the Afar region via Abala which is heavily monitored by regional and federal authorities. Though the security situation along this route remains calm, it is also very unpredictable. Route closures to the surrounding areas makes access difficult for people in the region and humanitarian actors trying to provide aid. The western zone of Tigray remains inaccessible to aid workers. Major challenges that still persist are the lack of health care services, water and sanitation systems, banking systems, fuel availability, electricity, and communication lines in the region.

More than 5.2 million people have been estimated to be in need of food assistance according to the partner response plan drafted in May 2021. There is also a major concern of severe acute malnutrition because of the food insecurity in the area. Due to the lack of access to the region, partners had to extend food aid goals which is normally delivered in six-week cycles. There is also a concern for the small agricultural yields that will be harvested this year. The forthcoming harvest is expected to produce 2.4-2.8 million quintals this year whereas it would normally reach 21 million quintals. Desert locusts have also been reported in 19 woredas which could further impact food supplies in the region.

The recent return of the regional authorities in late June 2021 allowed for access to most of the communities and health facilities whereas only 30% of those needing assistance were able to be reached by humanitarian actors in May 2021. Less than half of all referral hospitals in the region are functional and the health facilities that are open have been the victims of looting and attacks leaving medical equipment destroyed. Mobile health and nutrition teams (MHNTs) operated by partners have been deployed to support health facilities in IDP sites, however the operators face resource challenges to maintain the work. There is currently a need for medication, equipment, and other supplies for health facilities as the health system faces combined challenges of delivery and destruction. These issues, as well as those arising from disease outbreaks in precarious settings and conflict zone injuries have led to a weak health system for IDPs. Currently, malaria trends are on the rise in the region and could see an increase in cases as the rainy season progresses, since Tigray is prone to have high cases and therefore precautions should be taken. Cholera also causes frequent

A snapshot of the humanitarian crisis in Tigray, Ethiopia, as of 23 September 2021.



outbreaks in the area and therefore has been flagged as a concern. The first IDPs from the Tigray region were relocated to a new site called "Sabacare 4" located in Mekelle. Currently, there are 2 727 people housed there though it has capacity for up to 20 000 IDPs.

PUBLIC HEALTH ACTIONS

- A consultation with the Tigray Regional Health Bureau (TRHB) was held to discuss key health priorities and emergency response efforts and incorporating malaria emergency response plan.
- The health cluster terms of reference were updated to reflect the new TRHB leadership and participating partners.
- A malaria technical working group is being formed and terms of reference are being drafted to respond to the high amount of cases.
- Mobile health and nutrition teams have been created to support health facilities and IDP sites and these are operated by various partners.

- Water, sanitation and hygiene supplies were distributed to cholera hotspots
- Laboratory diagnostic capacity for cholera was strengthened in the Tigray region
- A first round of oral cholera vaccinations has been administered to 2.1 million people, with plans for a second campaign.
- Inter-agency emergency health kits were provided to health partners including various medications.

SITUATION INTERPRETATION

The humanitarian situation in the Tigray region has affected many people as the conflict continues to worsen. With an estimated 5.2 million people needing assistance and a growing number of IDPs and refugees, there are inadequate basic needs in this area. Lack of access to the region is causing a disruption of supplies and resources for the indigenous people as well as humanitarian workers trying to provide help. It is important that provision of life-saving supplies including food, medicines, vaccines, and sanitation supplies are not delayed.

PROPOSED ACTIONS

- The restrictions to access the Tigray region by road is seriously inhibiting the functionality of the area's health system and the humanitarian partner resources that could provide help to the area. There needs to be a call to end the blockage of the roads or establishing a more frequent humanitarian corridor since it is causing many problems.
- Plans for immunizations need to progress as there are various vaccines proposed to roll-out (cholera, COVID-19, measles). Preparedness, detection and response actions need to be strengthened for some diseases of epidemic potential (cholera, measles, malaria, COVID-19) with a focus on displaced populations.



© UNHCR/Hazim Elhag

Ethiopian refugees fleeing clashes in the country's northern Tigray region, rest and cook meals near UNHCR's Hamdayet reception centre after crossing into Sudan.

All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	26-Sep-21	202 722	202 722	5 777	2.80%
From 25 February 2020 to 26 September 2021, a total of 202 722 confirmed cases of COVID-19 with 5 777 deaths (CFR 2.8%) have been reported from Algeria. A total of 138 852 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	26-Sep-21	55 121	55 121	1 501	2.70%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 26 September 2021, a total of 55 121 confirmed COVID-19 cases have been reported in the country with 1 501 deaths and 47 273 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	24-Sep-21	133	133	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 130. These cases are from several outbreaks which occurred in 2019.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	19-Sep-21	22 958	22 958	154	0.70%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 19 September 2021, a total of 22 958 cases have been reported in the country with 154 deaths and 20 058 recoveries.									
Benin	Meningitis	Ungraded	1-Jun-21	1-Jan-21	26-Aug-21	394	82	29	7.40%
A total of 394 cases and 29 deaths (CFR 7.4%) resulting from meningitis were reported from Week 1 to week 34 of 2021 in Benin. Five districts are on alert and one district reported passing the epidemic threshold.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	24-Sep-21	13	13	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Two cases have been reported so far in 2021. There were three cVDPV2 cases reported in 2020, and 8 in 2019. These cases are all linked to the Jigawa outbreak in Nigeria.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	20-Sep-21	176 427	176 427	2 360	1.30%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 20 September 2021, a total of 176 427 confirmed COVID-19 cases were reported in the country including 2 360 deaths and 172 051 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-Jul-21	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement of a total of 1 368 164 internally displaced persons as of 31 July 2021 in all 13 regions in the country. More than 56K people became IDPs during July 2021, increasing 4.1% compared to the previous month. The regions most affected were Central North, Sahel, Eastern, and Northern. The presence of jihadist groups and self-defense units have created an increasingly volatile security situation. Attacks on the health system, intimidation and kidnapping of health workers, theft of medicines, continue to be reported. According to the World Food Programme, 3.5 million people are in need of humanitarian assistance and 2.87 million people are food insecure as of March 2021.									
Burkina Faso	Cholera	Ungraded	15-Aug-21	18-Aug-21	31-Aug-21	2	2	0	0.00%
The WHO office was informed by the Ministry of Health in the evening of 15 August 2021, of the detection on 15 August 2021, in the morning of a suspected case of cholera in the health facility of the village of Tanwalbougou, health district of Fada in the Eastern region, bordering Niger where an outbreak of cholera is ongoing. This is a 46-year-old tanker driver of Malian nationality from Niamey in Niger. The patient and his 4 contact persons have been isolated, and the patient was treated. The sample taken and sent to Ouagadougou at National Laboratory of Public Health confirmed Vibrio cholerae O1 Ogawa, the same serotype and serogroup with the one identified in Niger for the ongoing cholera outbreak. A second case of cholera confirmed by the regional laboratory on 29 August, 2021: also, a tanker driver of Malian nationality, coming from Niamey in Niger after staying in Zinder and Koni / Niger. He was treated, cured, and released in isolation on August 31. The first confirmed case was discharged on 22 August, 2021.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	25-Sep-21	14 183	14 183	181	1.30%
Between 9 March 2020 and 25 September 2021, a total of 14 183 confirmed cases of COVID-19 with 172 deaths and 13 831 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	24-Sep-21	67	67	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There are two case reported in 2021, and in 2020, 65 were reported. The country is affected by different outbreaks, one linked to the Jigawa outbreak in Nigeria and one to the Savanes outbreak in Togo.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	25-Sep-21	17 505	17 505	14	0.10%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 25 September 2021, the total number of confirmed COVID-19 cases is 17 505, including 14 deaths and 17 259 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	12-Sep-21	461	348	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 37 of 2021, Burundi has reported a total of 461 suspected cases, 348 reported by case-by-case surveillance and no death, 68 confirmed by IgM+ 274 by epidemiological link and 6 clinical cases. Six districts are currently in outbreak : Bubanza, Mpanda, Bugarama, Muyinga, Rumonge and Cibitoke.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	31-Jul-21	-	-	-	-
According to OCHA reports, an estimated 1.2 million people need assistance, 322 000 people are internally displaced, 67K are camp refugees, and 46K are refugees in the region not in camps. Specifically, there have been 321 886 IDPs registered in Far North as of 31 July 2021. Increased attacks from non-state armed groups (NSAGs) in the Logone and Chari, and Mayo Tsanaga divisions have led to human rights violations against civilian populations. The resulting insecurity negatively affected humanitarian access where workers have been threatened and harassed. A total of 34 security incidents were recorded during the reporting period.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	31-Jul-21	-	-	-	-
According to reports from UNHCR, 711 056 IDPs have been registered as of 31 July 2021. OCHA also reports an estimated 333.9K returnees, and 67.4K Cameroon refugees in Nigeria as of 5 May 2021. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. An inter-agency mission in Momo Division revealed an increase in the use of improvised explosive devices (IEDs), carjacking, and clashes between security forces and NSAGs, leading to civilian population displacement. The priorities for IDPs are food, healthcare, SGBV response, shelter, and non-food items.									
Cameroon	Cholera	Ungraded	1-Jan-21	5-Aug-21	29-Aug-21	13	-	1	7.70%
Since the beginning of this year, cases of Cholera, positives for Rapid Tests (RDT) have been notified in the North-West region and suspected cases of Cholera notified in the North region. As of August 15, 2021, a total of 13 cases with 1 death (CFR = 7.7%) have already been recorded. These numbers will be adjusted once new updates are received. The intensification of disease surveillance as well as the management of notified cases are ongoing.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	18-Aug-21	83 425	83 425	1 350	1.60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 18 August 2021, a total of 83 425 cases have been reported, including 1 350 deaths and 81 326 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-21	8-Sep-21	1 181	422	38	3.20%
From Epi week 1 to Epi week 34 of 2021, Cameroon has reported 1 181 suspected with 38 deaths (CFR 1.9%). Out of 825 investigated, 606 with blood samples, 422 was positive including 201 cases were IgM+, 82 clinically compatible and 139 epidemiologically linked; 65% of the children are under 5 years of age and only 33% known to be vaccinated with at least 1 dose of MCV. Twenty one districts with confirmed outbreak spread across 7 regions of country.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	17-Sep-21	7	7	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were seven cases reported in 2020.									
Cameroon	Yellow fever	Ungraded	7-Feb-21	4-Jan-21	5-Sep-21	19	19	7	36.80%
From 1 January to 5 September 2021, a total of 16 presumptive cases of yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur in Cameroon (CPC), of which seven deaths were recorded. These cases originated from seven different regions with a total of 15 health districts (HDs) affected: Adamaoua region (Ngaoundere rural HD), Centre region (Eséka HD), Far North region (Maga, Mogode, Yagoua, Kousseri, and Gouffey HDs), Littoral region (Yabassi, Cité des palmiers HDs), North region (Guider, Garoua 1 HDs), and North-West region (Bamenda HD), and West region (Dschang, Bafang, and Malentouen HDs).									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	26-Sep-21	37 428	37 428	335	0.90%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 26 September 2021, a total of 37 428 confirmed COVID-19 cases including 335 deaths and 36 420 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	26-Aug-21	-	-	-	-
According to OCHA figures, 2.8 million people are in need of assistance, 690 705 people are internally displaced as of 31 July 2021, and 699K persons are refugees in neighboring countries. In July 2021, 64 110 new IDPs were registered mostly in Basse-Kotto, Haut-Mbomou and Ouaka Prefectures. Displacements were mostly caused by clashes between the Central African Armed Forces (FACA) and their allies against armed groups (particularly in the Bouar, Bedamara and Paoua Sub-prefectures) as well as fear of abuses by armed groups. Some populations perceiving imminent fighting are moving as a precautionary measure to find refuge in safer areas. A total of 90 083 returns were reported as of 31 July 2021, mainly in the Mbomou, Nana-Mambéré, Nana-Gribizi, Basse-Kotto and Bamingui-Bangoran Prefectures. The recapture of towns that had been occupied by armed groups has led to the gradual return of the population to certain localities.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	22-Sep-21	11 371	11 371	100	0.90%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in the Central African Republic on 14 March 2020. As of 22 September 2021, a total of 11 371 confirmed cases, 100 deaths and 11 125 recovered were reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	4-Sep-21	2 066	243	7	0.30%
From 1 January to 8 September 2021 : 2 066 suspected cases have been reported, 191 cases with blood samples out of a total 608 investigated, 243 confirmed cases (62 IgM+ cases, 170 by epidemiological link and 11 compatible cases) and 7 deaths (CFR : 0.2%). Seven health districts (out of 35) have reached the epidemic threshold (Berbérati, Sangha-Mbaéré; Nanga-Boguila, Batangafo, Mbaiki, Nana Gebrizi and Vakaga); 49% of children are less than 5 years of age; 42% were not vaccinated. From the beginning of outbreak in 2019 to 19 August 2021, a total of 35 468 suspected cases have been notified and 197 deaths (CFR of 0.56%) within affected districts.									
Central African Republic	Yellow fever	Ungraded	14-Sep-21	1-Apr-21	9-Sep-21	1	1	0	0.00%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test at the Centre Pasteur Cameroun (CPC). She is reportedly not vaccinated against yellow fever. The onset of symptoms was 1 April 2021 with febrile jaundice. Her sample was sent to the CPC for quality control after it tested IgM negative at the Institut Pasteur in Bangui. A thorough investigation is ongoing. Laboratory tests are underway for two additional suspected cases.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	26-Sep-21	5 032	5 032	174	3.50%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 26 September 2021, a total of 5 032 confirmed COVID-19 cases were reported in the country including 174 deaths and 4 850 cases who have recovered.									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-Jul-21	141	14	10	7.10%
Since January 1, 2018, a total of 141 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai). N'Djamena's cases are from Miski's self-referral. For the year 2020 the country registered 74 cases including 3 deaths. Since the beginning of 2021 up to 31 July 2021, 34 cases have been reported including 4 deaths.									
Chad	Measles	Ungraded	24-May-18	1-Jan-21	4-Sep-21	2 190	231	13	0.60%
Since 01 January 2021 up to Epi week 36, It has been reported 2 190 suspected cases from 97 out of 129 districts in the country (71% of districts), 473 cases investigated with blood samples recorded, 231 of which were confirmed by IgM and 13 deaths from 4 districts (CFR 0.6%), 23 districts in epidemic in 2021. In 2020, Chad reported 8 785 cases, with 363 confirmed cases and 41 deaths.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	24-Sep-21	114	114	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in this week. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 8 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	23-Sep-21	4 112	4 112	147	3.60%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 23 September 2021, a total of 4 112 confirmed COVID-19 cases, including 147 deaths and 3 953 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	23-Sep-21	14 244	14 244	193	1.40%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 23 September 2021, a total of 14 244 cases including 193 deaths and 13 394 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	24-Sep-21	4	4	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, 2 cases have been reported in 2021. There were two cases reported in 2020.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	26-Sep-21	59 879	59 879	600	1.00%
Since 11 March 2020, a total of 59 879 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 600 deaths, and a total of 57 479 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	24-Sep-21	61	61	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The number of 2020 cases is still 61.									
Côte d'Ivoire	Yellow fever	Ungraded	14-Sep-21	13-Aug-21	6-Sep-21	5	3	-	-
On 13 August 2021, five Yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Based on differential tests returned on 6 September 2021, the results of three cases are consistent with a recent Yellow fever infection. Two other cases had cross-reactions with other flaviviruses, one of which was more consistent with dengue and one with a flavivirus infection (PRNT positive for Yellow fever, Zika, and dengue).									
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.									

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	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	23-Sep-21	56 863	56 861	1 084	1.90%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 56 861 confirmed cases and two probable case, including 1 084 deaths have been reported. A total of 50 675 people have recovered.									
Democratic Republic of the Congo	Meningitis	Grade 2	6-Sep-21	1-Jun-21	21-Sep-21	777	12	167	21.50%
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 21 September 2021, 777 cases have been reported including 167 deaths (CFR= 21.5%). Twelve samples have been confirmed for Neisseria meningitidis serogroup W.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	13-Sep-21	8 849	39	298	3.40%
Since epidemiological week 1 up to week 34 in 2021, 2 592 cases have been reported with 69 deaths. Between epidemiological week 1 and week 53 of 2020, a total of 6 257 suspected cases including 229 deaths (CFR 3.7%) were reported in 133 health zones from 17 out of 26 provinces in the country. During the same period in 2019, 5 288 suspected cases and 107 deaths (CFR 2.0%) were reported in 132 health zones from 18 provinces. Overall, there was a regressive trend from epidemiological week 33 to 53 of 2020 (276 cases vs 76 cases).									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-20	13-Sep-21	694	-	57	8.20%
From 22 April 2021, a cluster of deaths due to suspected pneumonic plague were recorded in the health zone of Fataki, Ituri province, Democratic Republic of the Congo. The patients presented with headache, fever, chills, coughing sometimes with blood, dyspnoea, vomiting blood, etc. An investigation was conducted during which suspected cases were identified and samples taken to be shipped to the Institut National de Recherche Biomédicale (INRB) in Kinshasa for confirmatory testing. From epidemiological week 1 to 34, 2021 (ending on 29 August), 118 suspected plague cases including 13 deaths were reported in eight health zones in Ituri province. From January to December 2020, 461 suspected plague cases of which 31 deaths were reported in eight health zones of Ituri. The health zones of Biringi, Rethy, and Aru reported the most cases.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	24-Sep-21	200	200	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 10 cases reported in 2021 so far. The total number of 2020 cases remains at 81.									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	31-Jul-21	716 494	883	44	0.00%
In 2021, from Epi week 1 to 30, 716 494 suspected cases of typhoid fever have been reported including 883 confirmed cases (606 in Popokabaka health zone and 277 in Mushie health zone), 44 (21 in Popokabaka health zone and 23 in Mushie health zone) deaths (CFR 0.0%). In 2020, a total of 715 920 suspected cases of typhoid fever were reported, including 178 deaths (CFR 0.0%).									
Democratic Republic of the Congo	Yellow Fever	Ungraded	21-Apr-21	21-Apr-21	18-Jul-21	2	2	0	0.00%
On 18 July 2021, two yellow fever cases tested positive by Plaque Reduction Neutralization Test (PRNT) at Centre Pasteur in Cameroon (CPC). The first case is a 34-year-old male from the Abuza health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. In addition, confirmatory results are pending for three other presumptive positive cases from Equateur, Kinshasa and North Ubangi provinces.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	22-Sep-21	11 806	11 806	142	1.20%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 22 September 2021, a total of 11 806 cases have been reported in the country with 142 deaths and 10 225 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	25-Sep-21	6 694	6 694	42	0.60%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 25 September 2021, a total of 6 694 confirmed COVID-19 cases with 42 deaths were reported in the country. A total of 6 628 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	26-Sep-21	45 742	45 742	1 212	2.60%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 26 September 2021, a total of 45 742 cases have been reported in the country including 43 804 recoveries. A total of 1 212 associated deaths have been reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	15-Sep-21	-	-	-	-
According to reports from OCHA, an estimated 5.2 million people are in need of humanitarian assistance and more than 63K refugees have fled to Sudan since fighting began in November 2020. Conflict continues in the Tigray area with spill over from activity in neighbouring Afar and Amhara regions. An estimated 76 500 people were displaced from Afar and 200K from Amhara due to movement of Tigray forces. Despite the fighting, humanitarian access has improved but 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. Malnutrition rates are far above emergency thresholds among screened children under 5 years (25-30% or higher) and pregnant and lactating women (45-50%).									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	26-Sep-21	341 714	341 714	5 401	1.60%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 341 714 cases of COVID-19 as of 26 September 2021, with 5 401 deaths and 308 395 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-21	3-Sep-21	2 097	1 215	4	0.20%
In 2021, as of 03 September (Epi week 37), a total of 2 097 cases have been reported of which 1215 have been confirmed (892 epi-link, 282 IgM and 41 measles compatible) and 4 deaths recorded (CFR 0.4%). Out of the 2 097 suspected cases, 1023 were under 5 years of age, 681 were between 5 and 14 years of age and 393 were over 15 years of age.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	24-Sep-21	74	74	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. 9 cases have been reported so far in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	24-Sep-21	29 126	29 126	178	0.60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 24 September 2021, a total of 29 126 cases including 178 deaths and 26 541 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	24-Sep-21	9 930	9 930	335	3.40%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 24 Sep 2021, a total of 9 930 confirmed COVID-19 cases including 335 deaths, and 9 571 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	22-Sep-21	126 261	126 261	1 146	0.90%
As of 22 September 2021, a total of 126 261 confirmed COVID-19 cases have been reported in Ghana. There have been 1146 deaths and 121 878 recoveries reported.									
Ghana	Meningitis	Ungraded	1-Jan-21	1-Jan-21	26-Aug-21	279	-	3	1.10%
Since the beginning of the year 2021, 279 cases of meningitis have been reported with 3 deaths (CFR of 1.1%). The Nandom district in the Upper West Region crossed the epidemic threshold and four other districts are on alert (Lawra, Lambussie, Nadowli-Kaleo, Wa Municipal). In Ghana, the Streptococcus pneumoniae is the germ mostly identified by the country laboratory.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	24-Sep-21	31	31	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. There were 12 cases reported in 2020, while the total number of 2019 cases remain 19. One cVDPV2 positive environmental sample was reported in the Eastern province.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	24-Sep-21	30 362	30 362	498	1.60%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 24 September 2021, a total of 30 362 cases including 28 733 recovered cases and 498 deaths have been reported in the country.									
Guinea	Lassa Fever	Ungraded	8-May-21	8-May-21	20-Sep-21	8	8	7	87.50%
To date, there have been a total of 8 confirmed cases and 7 deaths (CFR=87.5%): the first case (man of 23 years old) was notified on 8 May 2021 at the Yomou prefecture hospital, a resident of Yomou prefecture. The patient was also confirmed to be positive for COVID-19 and later died. Contact tracing of 88 people was done, and no secondary cases found. On 17 June 2021, a second confirmed case (woman of 75 years old) was detected at Nzérékoré Regional Hospital, this case was from Beyla prefecture and died the same day. A listing of 111 contacts have been done for follow up. On 28 June 2021 a third case was confirmed (man of 25 years old), a resident of Nzerekore prefecture, 57 contacts listed are under follow up. On 1 Jul 2021 a fourth case was confirmed (a man of 52 years old), resident also of Nzerekore prefecture, a listing of 21 contacts was done and are being followed. However, the prefecture of Bheeta is regarded as active, with the prefectures of Yomou-Centre, Péla, Yomou and Bignamou on alert. The last case (female 9 years old) from Faranah health district detected on 14 Sept has been confirmed on 19 Sep 2021 by the Gueckerou laboratory and died the same day									
Guinea	Measles	Ungraded	9-May-18	1-Jan-21	5-Sep-21	3 248	183	5	0.20%
In 2021, as of 16 September (Epi week 34), 3 248 suspected cases have been reported, 392 samples taken, 353 samples tested of which 183 tested positive, 154 negative and 16 undetermined; 5 deaths have been reported. Out of the 183 positive persons, 11 (6%) 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 9 318 suspected cases, 1 120 tests analysed, 707 confirmed cases, 19 deaths have been reported.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	17-Sep-21	50	50	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	25-Sep-21	6 103	6 103	135	2.20%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 26 September 2021, the country has reported 6 103 confirmed cases of COVID-19 with 5 290 recoveries and 135 deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	26-Sep-21	248 461	248 461	5 102	2.10%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 26 September 2021, 248 461 confirmed COVID-19 cases including 5 102 deaths and 240 235 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	27-Apr-21	1-Jan-21	26-Aug-21	976	36	2	0.20%
The outbreak has been reported in Mombasa and Mandera Counties, recording 976 cases with 36 confirmed and 2 deaths reported (CFR 0.2%).									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	26-Aug-21	951	951	10	1.10%
Since January 2020, a total of 951 visceral leishmaniasis confirmed cases with 10 deaths (CFR 1.1 percent), have been reported in seven counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera and Wajir. The outbreak is active in three counties, Mandera, West Pokot and Wajir.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	20-Aug-21	625	31	1	0.20%
As 20 August 2021 (Epi week 32), a total of 625 cases was reported, 31 confirmed cases with one death (CFR 0.2%) for 2 counties which has reported cases in 2021, West Pokot (4 sub counties affected) and Garissa (1 sub county affected). In West Pokot, the outbreak has been continuous from 2019.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-21	10-Feb-21	24-Sep-21	3	1	0	0.00%
No new cVDPV2 cases reported this week. There was one cVDPV2 environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia. The environmental sample of 22 December 2020, collected from Bouralg, Garissa town, Garissa County showed a cVDPV2 with 65nt changes from Sabin. A case of circulating Vaccine Derived Polio Virus 2 (cVDPV2) has been isolated from a 11-month-old girl in Dagahaley refugee camp, Dadaab Sub County, Garissa County, in epidemiological week 5 (2021), this child was from Somalia, thus, this was an imported case. Another case from Garissa had been detected and another from Mombasa county in week 6.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	26-Aug-21	14 395	14 395	403	2.80%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 26 August 2021, a total of 14 395 cases of COVID-19 have been reported, including 6 830 recoveries and 403 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	22-Sep-21	5 794	5 794	283	4.90%
From 16 March 2020 to 22 September 2021, a total of 5 794 cases including 283 deaths and 5 488 recoveries have been reported . Montserrado County, which hosts the country's capital city, remains at the epicentre of the outbreak.									
Liberia	Lassa fever	Ungraded	23-Jul-21	1-Jan-21	6-Sep-21	14	14	10	71.40%
The numbers of confirmed and death cases have been reviewed. From January to date , a total of 91 suspected cases were reported, of which 14 (15.3%) were confirmed, and 10 deaths among confirmed cases (CFR=71%). The confirmed cases originated from four counties: namely Bong (4), Grand Bassa (5), Montserrado (1) and Nimba (4). No new confirmed case reported since Epi-Week 30. All 226 contacts have completed 21 days of monitoring. Two counties (Bongo and Montserrado) currently in countdown to end of outbreak ; Nimba county outbreak declared over on September 5, 2021									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	24-Jul-21	168	107	0	0.00%
In week 29 (week ending 24 July 2021), 6 suspected cases were reported from Montserrado (5) and Bond (1) Counties. Among the 6 suspected cases, 5 cases are <5 years (83%) and 1 case are >5 years (17%). Since the beginning of 2021, 168 total cases were reported of which 107 were confirmed (16 laboratory-confirmed, 80 clinically confirmed and 11 epi-linked), 57 negative and 2 undetermined.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	24-Sep-21	3	3	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The country has reported 3 cases.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-21	1-Jan-21	9-Sep-21	-	-	-	-
A prolonged three-year drought in southern Madagascar has contributed to food insecurity issues for an estimated 1.3 million people in the Grand Sud area, of which 14K people were classified as IPC Phase 5 or catastrophically food insecure. About 390K children are expected to have moderate acute malnutrition and 111K children to have severe acute malnutrition from May 2021 to April 2022 if no intervention measures are taken. All 10 districts of Grand Sud have been affected with the epicentre of the crisis occurring in Amboasary Atsimo district.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	17-Sep-21	43 584	43 584	959	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 17 September 2021, a total of 43 584 cases have been reported in the country, out of which 42 634 have recovered and 959 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	1-Jan-21	25-Jul-21	1 388 136	-	652	0.00%
From January 2021 to 29 August 2021, 1 388 136 cases were reported including 652 deaths. The number of malaria cases reported in week 34 was 5 807 cases and a decrease in the number of malaria cases has been observed from week 21.									
Madagascar	Pneumonic Plague	Grade 1	29-Aug-21	1-Sep-21	19-Sep-21	40	19	6	15.00%
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 19 September 2021 , a total of 40 suspected cases of pulmonary plague including 19 confirmed and 6 death cases (CFR=15.8%) are reported so far. Active case finding, chemo prophylaxis for high-risk contacts of alive and death cases are ongoing ; regular meetings of the plague control committees at regional and health district level ; mass sensitization activities; contact tracing; Ongoing investigation as well as vector and anti-reservoir control measures , are also ongoing .									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-21	24-Sep-21	8	8	0	0.00%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. There are six cases in 2021 and two from 2020.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	26-Sep-21	61 497	61 497	2 275	3.70%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 26 September 2021, the country has a total of 61 497 confirmed cases with 2 275 deaths and 54 474 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	Cholera	Ungraded	11-Sep-21	12-Sep-21	13-Sep-21	10	2	4	40.00%
During the week 36 of 2021 (9 September), 7 suspected cases of cholera have been notified by the health area of Labbezanga, Ansongo health district in the Gao region. On 11 September 2021, cholera was confirmed with the isolation of Vibrio cholerae Ogawa 01 at National Institute of Public Health laboratory, the same serotype causing the ongoing cholera outbreak in Niger. The probable index case had contact with a relative who visited its family for 2 days from Ayorou in Tillabery region of Niger. Tillabery region is one of the 6 regions affected by the ongoing cholera outbreak in Niger. As of 13 September, a total of 10 cases including 2 confirmed and 4 deaths (CFR=40%) are reported so far. Measures are being taken by the authorities to contain the outbreak at local level.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	26-Sep-21	15 163	15 163	547	3.60%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 26 September 2021, a total of 15 163 confirmed COVID-19 cases have been reported in the country including 547 deaths and 14 264 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-21	19-Sep-21	1 289	671	2	0.20%
From January 2021 up to Epi week 37 (ending the 19 September 2021), Mali has reported a total of 1 289 suspected cases including two deaths, 1 156 samples tested of which 671 were positive, 450 negative and 35 undetermined. There is an increase of 82.83% of confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	24-Sep-21	25	25	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were 4 cVDPV2 cases reported in 2020 and 21 cases in 2019 from several outbreaks.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	24-Sep-21	52	52	0	0.00%
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	26-Sep-21	35 859	35 859	768	2.10%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 26 September 2021, a total of 35 859 cases including 768 deaths and 34 291 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	25-Sep-21	15 391	15 391	79	0.50%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 25 September 2021, a total of 15 391 confirmed COVID-19 cases including 79 deaths and 13 326 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	1-Aug-21	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. On 8 August 2021, Mocimboa da Praia was retaken by joint forces. During 4-10 August 2021, a total of 5 484 internally displaced person (IDPs) arrived mostly in Mueda (34% arrivals), Nangade (20% arrivals), and Montepuez (20% arrivals) districts. As of 10 August 2021, the nation-wide estimate of people in need of humanitarian assistance is 1.3 million and there are 732K people displaced.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	26-Sep-21	150 530	150 530	1 909	1.30%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 26 September 2021, a total of 150 530 confirmed COVID-19 cases were reported in the country including 1 909 deaths and 146 544 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	23-Sep-21	127 227	127 227	3 492	0.00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 23 September 2021, a total of 127 227 confirmed cases with 122 690 recovered and 3 492 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	6-Sep-21	195 851	-	66	0.00%
As of 6 September 2021, heavy rains and floods due to the rising of water of the Niger river caused by the rainy season which extends from June to September each year, have affected 195,851 people across the country's eight regions, destroying over 12,475 houses, flooding hectares of crops and killing 66 people. The government and humanitarian partners are scaling up efforts to address the situation, including building and strengthening protective dykes. Food stock is also being prepositioned in the affected regions. Floods have been followed by outbreaks of cholera across six of the country's eight regions									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
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 Tillaberi region the number of IDPs are expected to drop due to a new government policy of IDP returns. In Diffa region, around 30K people have already returned to their localities of origin due to this return policy.									
Niger	Cholera	Grade 1	7-Aug-21	7-Jun-21	22-Sep-21	4 907	158	153	3.10%
As of 22 September 2021, a total of 4 907 cases including 153 deaths (CFR = 3.1%) have been reported. Six regions out of eight have reported cases so far (Tahoua, Niamey, Tillaberi, Dosso, Maradi and Zinder). To date 31 out of 72 health districts have reported cases with 17 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	26-Sep-21	5 980	5 980	201	3.40%
From 19 March 2020 to 26 September 2021, a total of 5 980 cases with 201 deaths have been reported across the country. A total of 5 735 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-21	18-Jul-21	9 095	924	16	0.20%
From January to 18 July 2021, 9 095 suspected cases have been reported and 16 deaths. Out of suspected cases, 1 795 were investigated including 924 lab confirmed measles cases, 55% are older than 4 years; 51 of 72 health districts have reported at least 3 confirmed cases of measles in month. Response vaccination took place in 12 health districts (Arlit, Bilma, Dogondoutchi, Tibiri, Gazaoua, Niamey 2, Niamey 3, Niamey 4, Tahoua Com, Ayerou, Balleyara, Tesker) across 8 regions. In 2020 2 079 cases have been suspected of which 241 lab confirmed (IgM positive) and 4 deaths in 8 regions. In 2019 a total of 10 207 suspected measles cases were reported from eight regions in the country.									
Niger	Meningitis	Ungraded		1-Jan-21	26-Aug-21	1 340	-	74	5.50%
Since the beginning of the year 2021 to week 34 ending 26 August 2021, 1 340 cases have been reported with 75 deaths (CFR 5.5%). Two districts have surpassed the epidemic threshold and six districts are on alert.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Oct-18	1-Oct-18	24-Sep-21	20	20	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The total cases of 2020 still 10. There number of cVDPV2 cases reported in 2018 has been corrected to 9, and 1 in 2019.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	31-Jul-21	-	-	-	-
In 2021, more than 8.7 million require humanitarian assistance in Borno, Adamawa, and Yobe states. Attacks in Nigeria have continued in LGAs of Borno, Adama, and Yobe (BAY) states making the North-Eastern part of the country volatile. As of 31 July 2021, there were 2 191 193 IDPs from these states according to UNHCR. In this area, 92% of IDPs were caused by insurgency, 7% by communal clashes, and 1% by natural disaster. In the North-West part of the country, another 379 316 people have been displaced as of 31 July 2021 and in North-Central area, 316 598 have been displaced.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	5-Sep-21	69 925	-	2 323	3.30%
As of 5 September 2021, 69 925 have been affected with 2 323 deaths yielding a CFR of 3.3%. A total of 25 states have reported cases, however, only 19 states have active outbreaks. During week 35 a total of 1 677 suspected cases with 46 deaths were reported - Bauchi (566), Katsina (282), Sokoto (258), Yobe (183), Borno (179), Niger (94), Kaduna (66), Adamawa (34), Gombe (8), Kano (4), Kebbi (2), and Nasarawa (1). People aged 5 - 14 years have been the most affected. There is an ongoing cholera outbreak in bordering regions of the neighbouring country of Niger that have been epidemiologically linked to the outbreak in Nigeria.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	26-Sep-21	204 456	204 456	2 678	1.30%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 26 September 2021, a total of 204 456 confirmed cases with 192 628 recovered and 2 678 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	1-Jan-21	1-Jan-21	12-Sep-21	3 006	369	76	20.60%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 36 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 36 of 2021, a total of 369 confirmed cases including 76 deaths among confirmed cases have been reported with a case fatality rate of 20.6% across 14 states. In total, 3 006 cases are suspected in 2021. This is lower than the same period reported in 2020. Of all confirmed cases, 84% are from Edo (45%), Ondo (34%) and Taraba (5%) States.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-21	20-Apr-21	6 995	-	50	0.70%
In 2020, Nigeria reported 9 316 confirmed cases, with 55 deaths, CFR 0.6%. From January 2021 to 20 April 2021 (as of epi week 15), 6 995 suspected cases have been reported in Nigeria. The most affected state is Borno with 1 992 cases including 32 deaths, 79% of the cases were below the age of five years. During week 15, 537 were reported with 3 deaths									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	31-Aug-21	79	23	0	0.00%
According to the Nigeria Centre for Disease Control (NCDC), in August 2021, a total of nine suspected monkeypox cases, six confirmed cases and 0 deaths were reported from six states. In 2021, 79 suspected cases have been reported between January and August 31, 2021. Of the suspected cases, 23 were confirmed from eight states Delta (7), Lagos (4), Bayelsa (4), Rivers (4), Edo (1), FCT (1), Niger (1), Ogun (1) and, no deaths recorded from all States.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	24-Sep-21	211	211	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are now 151 cases reported in 2021. There were eight cases reported in 2020 ; 18 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	12-Sep-17	1-Jan-21	31-Aug-21	1 312	31	2	0.20%
From 1 January 2021 to 31 August 2021, a total of 1 312 suspect YF cases were reported in 367 Local Government Areas (LGAs) across all 37 States including the Federal Capital Territory. A total of 45 blood samples were sent to the Institut Pasteur in Dakar and 31 samples tested positive by PRNT. Twelve PRNT-positive cases had a history of YF vaccination, which may have impacted the PRNT result. There were two deaths reported among the 19 non-vaccinated PRNT positive cases (CFR 11%). The 31 YF PRNT positive cases were reported from 18 LGAs in nine states.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	26-Sep-21	96 839	96 839	1 253	1.30%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 26 September 2021, a total of 96 839 cases with 1 253 deaths and 45 784 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	26-Sep-21	3 344	3 344	49	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 26 September 2021, a total of 3 344 confirmed cases of COVID-19 have been reported, including 49 deaths. A total of 2 675 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	26-Sep-21	73 742	73 742	1 855	2.50%
From 2 March 2020 to 26 September 2021, a total of 73 742 confirmed cases of COVID-19 including 1 855 deaths and 71 482 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	24-Sep-21	13	13	0	0.00%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. So far, the total number of cases in 2021 is 13.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	24-Sep-21	21 374	21 374	110	0.50%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 24 September 2021 a total of 21 374 cases have been confirmed, including 20 823 recoveries and 110 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	24-Sep-21	6 388	6 388	121	1.90%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 16 September 2021, a total of 6 388 confirmed COVID-19 cases were reported in the country including 121 deaths and 4 374 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	5-Aug-21	13	13	9	69.20%
As of 5 August 2021, 13 cases of Lassa fever have been reported from Kenema (11) and Kailahun (2) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 69%. Lassa fever is known to be endemic in Sierra Leone and surrounding countries.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	24-Sep-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	26-Sep-21	2 896 943	2 896 943	87 052	3.40%
Since the start of the COVID-19 pandemic in South Africa by 26 September 2021, a cumulative total of 2 896 943 confirmed cases and 87 052 deaths have been reported with 2 760 093 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	15-Aug-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people faced crisis levels of food insecurity phase (IPC) 3 or worse from April to July 2021- a figure that increased by 25% compared to the previous three months. Of the total number, 108K are in IPC 5, 2.4 are in IPC 4, and 4.6 million are in IPC 3. The total number includes 1.9 million acutely malnourished women and children suffering and 1.47 million internally displaced people. The six most affected counties are Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	15-Aug-21	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. From the start of 2021, there is a total of 8.3 million people in need of humanitarian assistance, 1.6 million people internally displaced and 175 000 people living in protection of civilian sites across the country. According to OCHA, 90K people have been affected by flooding from 1 January - 6 August 2021 in 11 counties including Ayod, Fangak, Renk, Guit, Gogrial West, Aweil South, Mayendit, Koch, Nhaildu Rubkona and Malakal from Fangak.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	26-Sep-21	11 948	11 948	128	1.10%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 26 September 2021, a total of 11 948 confirmed COVID-19 cases were reported in the country including 121 deaths and 11 422 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	3-Jan-18	5-Sep-21	1 086	104	9	0.80%
The current outbreak in the Bentiu IDP camp, which started at the beginning of 2018, is ongoing. As of 5 Sep 2021, a total of 1 086 cases of hepatitis E including 9 deaths (CFR: 0.83%) have been reported. Hepatitis E cases have been above the epidemic threshold since week 19 of 2021 which has been mostly attributed to declining water, sanitation and hygiene services in the camp due to reduced funding.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	8-Aug-21	1 313	54	2	0.20%
Since week 38 of 2019 to 08 August 2021 (week 31 of 2021), a total of 1 313 cases of measles were reported including 52 confirmed cases and two deaths. The outbreak is controlled in 9 counties (Tonj East, Juba, Bor, Kapoeta East, Jebel Boma, Aweil East, Wau, Pibor and Ibba). No county has reported outbreak in 2021.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	24-Sep-21	59	59	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 59 cVDPV2 cases in the country; 9 in 2021 and 50 in 2020.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	17-Sep-21	25 674	25 674	714	2.80%
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 17 September 2021, a total of 25 674 cases have been reported in the country including 714 deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	26-Sep-21	25 218	25 218	226	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 26 September 2021, a total of 25 218 cases including 226 deaths and 22 321 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	24-Sep-21	17	17	0	0.00%
No new case of cVDPV2 was reported during the past week. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	26-Sep-21	123 245	123 245	3 148	2.60%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 25 September 2021, a total of 123 245 confirmed COVID-19 cases, 96 027 recoveries with 3 148 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	26-Sep-21	208 857	208 857	3 646	1.70%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 26 September 2021, a total of 208 857 confirmed COVID-19 cases were reported in the country including 3 646 deaths and 204 745 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	12-Sep-21	869	0	3	0.30%
The anthrax outbreak is ongoing in Zimbabwe. Twelve new anthrax cases and no death were reported in week 36 of 2021. The cases were reported by Gokwe South District (3) and Gokwe North District (9) in Midlands Province. From Week 1 to 36 of 2021, the cumulative figures for anthrax are 122 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	26-Sep-21	129 625	129 625	4 604	3.60%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 26 September 2021, a total of 129 625 confirmed COVID-19 cases were reported in the country including 4 604 deaths and 122 249 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

Daouda SIMPARA (Mali)
Abdoulaye HASSANE (Mali)
Clement Peter (Ethiopia)
Boureima Hama SAMBO (Ethiopia)

Graphic design

A. Moussongo

Editorial Team

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

Production Team

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

Editorial Advisory Group

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

Data sources

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.