

# WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

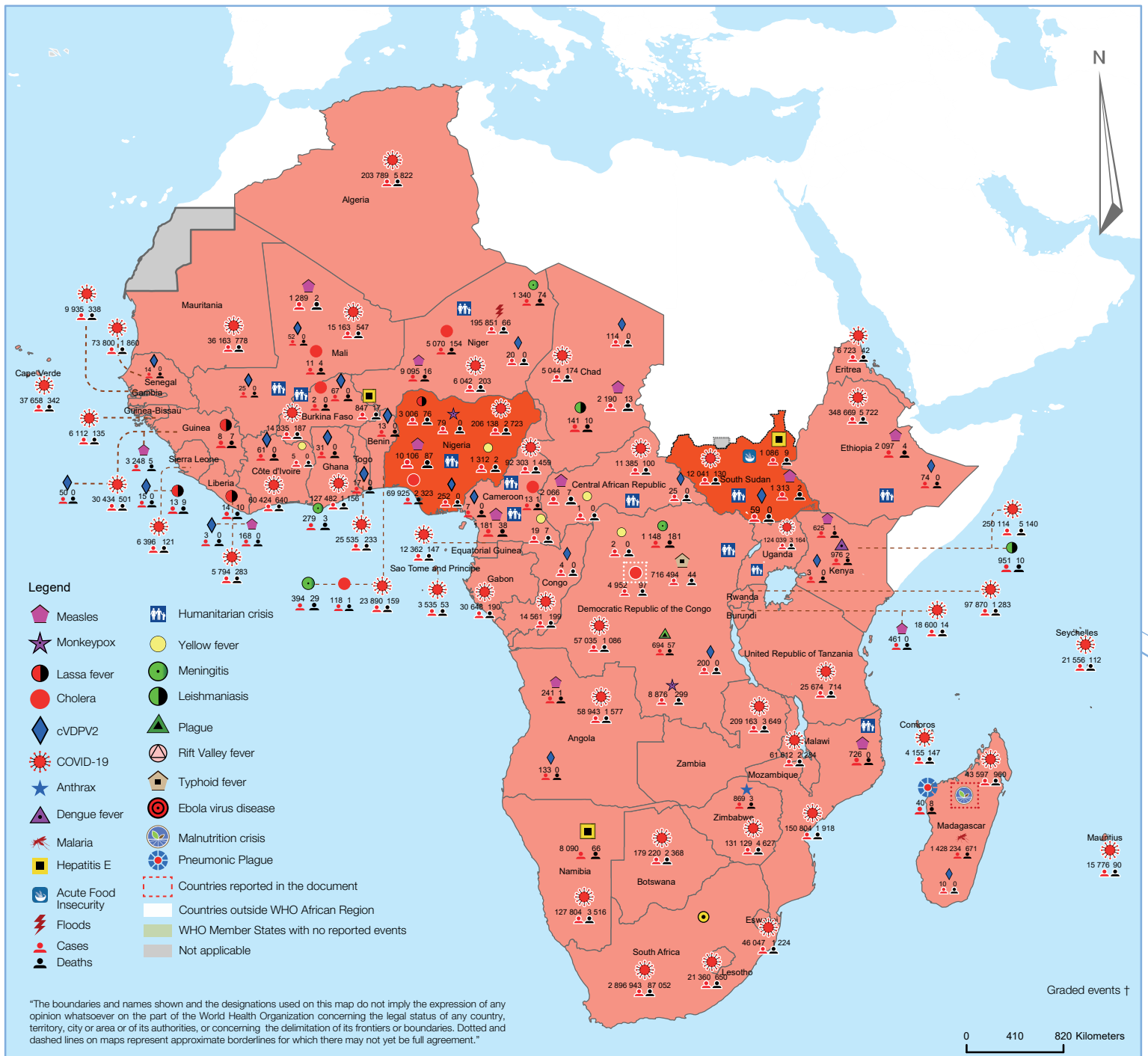
Week 40: 27 September - 3 October 2021  
Data as reported by: 17:00; 3 October 2021

**0**  
New event

**129**  
Ongoing events

**115**  
Outbreaks

**14**  
Humanitarian crises



**49**

Grade 3 events

**28**

Grade 2 events

**2**

Grade 1 events

**3**

Protracted 3 events

**4**

Protracted 2 events

**3**

Protracted 1 events

**40**

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

- [COVID-19 across the WHO African region](#)
- [Cholera in the Democratic Republic of the Congo](#)
- [Humanitarian Crisis in Grand Sud, Madagascar](#)

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

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

### Major issues and challenges include:

- New COVID-19 cases have declined for the eleventh consecutive week since the third pandemic wave peaked in early July 2021. However, the observed decline has been slower than in previous waves. Cases are currently trending downward in most countries except Angola, Benin, Gabon, Equatorial Guinea, Ethiopia, Mauritius, and Sao Tome and Principe that reported an upward trend in the past week. South Africa continues to report more than half of all new cases in the region, followed by Ethiopia and Angola. The number of deaths reported across the region declined in the past week. At the moment, seven countries are experiencing uncontrolled community transmission; Botswana, Cabo Verde, Eswatini, Mauritius, Sao Tome and Principe, Seychelles and South Africa. The African region has made modest progress in COVID-19 vaccination, with just 12 countries meeting the target of fully vaccinating 10% of the population by the end of September. Countries still need to double their efforts to reach the year-end target of fully vaccinating 40% of the population
- Cholera is endemic in the Democratic Republic of the Congo and the most often affected regions (North Kivu, South Kivu, Tanganyika, Haut Katanga and Haut Lomami) are in the Eastern part of the country and along the great lakes. However, during the rainy season, other regions of the country are also affected. Insufficient access to drinking water and sanitation and poor hygiene practices in the communities have always been identified as risk factors for cholera outbreaks in the country. Suspected cases of cholera and associated deaths have been reported since the beginning of 2021 in 73 health districts across the 26 regions of the country. Two regions (Tanganyika and South Kivu) have new hotspots since week 33 and have reported almost all cases notified in week 36 (week ending 12 September 2021) for the whole country. Democratic Republic of the Congo is also affected by a complex humanitarian crisis with the presence of thousands of internally displaced persons mainly in the Eastern part of the country, living in overcrowded host families or camps, which is a favorable condition for the spread of cholera.
- The humanitarian Crisis in Madagascar continued with an increase in moderate acute malnutrition rates in the past few weeks. At the same time, severe acute malnutrition rates have been high all year compared to the past 3-year averages. Two successive episodes of drought between November 2019 to January 2020 and between October 2020 to January 2021 have contributed to food insecurity for an estimated 1.1 million people in the Grand Sud area. The health of the population is also weakened by lack of livelihoods and growing insecurity. In addition, there is low utilization of health services due to inaccessible health facilities, insufficient or lack of medicines for essential health care in health facilities, an absence of appropriate health services at the various levels of health centres, and challenges around retention of trained staff.

# Ongoing events

Coronavirus disease 2019

African region

5 977 536 : 146 434 : 2.4%  
Cases : Deaths : CFR

In the past seven days (27 September – 3 October 2021), the WHO African region reported a total of 37 348 new cases of coronavirus disease (COVID-19), a 38.0% decrease compared to the preceding week when 60 010 new cases were reported. Eight (17.0%) countries saw a 20% or more increase in weekly cases compared to the previous week: Angola, Burundi, Chad, Comoros, Congo, Eritrea, Mali, and Niger.

In the same reporting period, 33 (70.0%) countries reported a decrease of 20% or more in the number of new cases reported compared to the previous week. These countries are Benin, Botswana, Cameroon, Cabo Verde, Central African Republic, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Eswatini, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Lesotho, Liberia, Madagascar, Malawi, Mauritania, Mauritius, Mozambique, Namibia, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Seychelles, South Africa, South Sudan, Togo, Uganda, the United Republic of Tanzania and Zambia.

Most of the region's cases are concentrated in five countries which account for 63% (23 591) of the cases recorded in the past week, namely South Africa (9 479 new cases, 33.8% decrease, 16.2 new cases per 100 000 population); Ethiopia (6 955 new cases, 20.5% decrease, 6.2 new cases per 100 000); Angola (3 822 new cases, 41.7% increase, 13.1 new cases per 100 000); Nigeria (1 682 new cases, 37.0% decrease, 0.8 new cases per 100 000); and Kenya (1 653 new cases, 14.4% decrease, 3.1 new cases per 100 000).

A 22% ( $n=1\ 532$ ) decline in weekly deaths was recorded from 35 countries against 1 969 deaths reported by 40 countries in the previous week. The highest numbers of new deaths were reported from South Africa (728 new deaths; 17.1% decrease; 1.2 new deaths per 100 000 population), Ethiopia (321 new deaths; 18.5% decrease; 0.3 new deaths per 100 000), Angola (76 new deaths; 31.0% decrease; 0.3 new deaths per 100 000), Nigeria (45 new deaths; 96.0% increase; 0 new deaths per 100 000), and Algeria (45 new deaths; 46.0% decrease; 0.1 new deaths per 100 000).

Since the COVID-19 pandemic was declared in the African region, the cumulative number of confirmed COVID-19 cases is nearly 6 million. More than 5.5 million recoveries have been recorded, giving a recovery rate of 93.0%. The total number of deaths reported is now at 146 434, accounting for a case fatality ratio (CFR) of 2.5%. The WHO African Region is one of the least affected regions in the world, accounting for 2.6% of global cases and 3.1% of global deaths.

Presently, there are 14 countries that meet the criteria for 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. Four countries, Algeria, Benin, Mauritius and Kenya are experiencing their fourth wave.

Overall, death trends are on the rise in four countries, Angola, Benin, Cote d'Ivoire, and Ethiopia. Sixteen 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.

Collectively, the highest number of COVID-19 cases in the region has been recorded in South Africa with 2 906 422 cases (49.0%), followed by Ethiopia 348 669 (5.8%), Kenya 250 114 (4.2%), Zambia 209 163 (3.5%), and Nigeria 206 138 (3.4%), accounting for 65.6% (3 920 506) of all cases. South Africa also has the highest number of deaths in the region (87 780 deaths, 60.0% of all deaths); followed by Algeria (5 822, 4.0%), Ethiopia (5 722, 3.9%), Kenya (5 140, 3.5%) and Zimbabwe (4 627, 3.2%), all accounting for 74.5% (109 091) of all deaths reported in the region.

A total of 329 new health worker infections were reported during this reporting period (27 September – 3 October 2021) from Cameroon (253), Malawi (40), Equatorial Guinea (19), Eswatini (11), Namibia (5), and Sierra Leone (1). The United Republic of Tanzania retrospectively reported an additional 49 health worker infections. Thus far, there have been 125 928 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 (13.0%), 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 region continues to observe divergent transmission classifications. Seven (15.0%) countries are reporting uncontrolled incidence (Botswana, Cabo Verde, Eswatini, Mauritius, Sao Tome and Principe, Seychelles and South Africa, 13 (28.0%) with high incidence, 17 (36.0%) with moderate incidence and nine (20.0%) with low incidence community transmission namely; Burkina Faso, Central African Republic, Chad, Democratic Republic of the Congo, Eritrea, Liberia, Mali, Niger and Sierra Leone.

The African continent has recorded more than 8.4 million cases of COVID-19, with more than 212 600 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, Sao Tome and Principe and Zimbabwe. Almost 201 million doses have been received in the 52 African countries, of which 71% (143 million) of these doses have already been administered. Almost 61 million people in Africa are fully vaccinated, and this represents 4.5% of the African population. In comparison, 66% of people in the United Kingdom have been fully vaccinated; 55% in the US; and 63% in the European Union.

Globally, more than 6.3 billion doses have been administered, only 2.4% of which have been administered in Africa. This sums to a cumulative total of 75 doses per 100 people worldwide, over 10 doses/100 in Africa and just over 6 doses/100 in sub-Saharan Africa.

[Go to overview](#) ◀

▶ [Go to map of the outbreaks](#)

High-income countries have administered 35 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

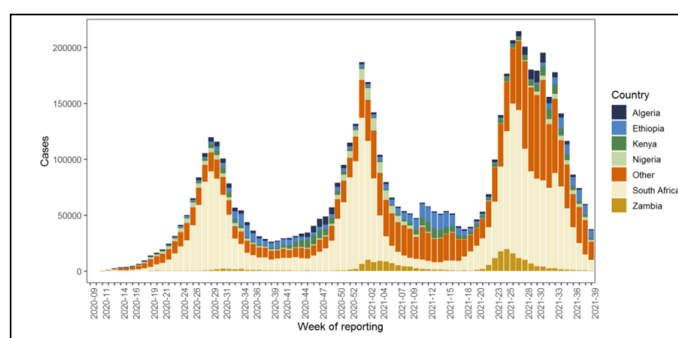
Even with the observed stable decline in the number of new cases in the WHO African region, country specific case trends continue to differ. The decline is driven largely by more than half of region's countries observing a fall in weekly cases. At the same time, weekly COVID-19 deaths in the region decreased in the past week, with South Africa accounting for more than half of all fatalities. Twelve countries in the African region have reached the 10% target of their population vaccinated by the end of September 2021 and except for South Africa, these countries have relatively small populations. In addition, most have had the resources to acquire vaccines or strike bilateral deals over and above COVAX deliveries and almost half are small island developing states.

### PROPOSED ACTIONS

WHO, Africa CDC and other partners should continue working jointly across COVID-19 response areas and technical response pillars to harmonize support to countries. We encourage all countries to submit data to WHO on their operational readiness, as this helps us understand their experience better and offer the tailored and targeted support they need.

- ▶ Countries should adapt vaccination strategies to accommodate for different vaccines to ensure doses are administered efficiently.
- ▶ The WHO advises strict adherence to the basic precautionary and control measures including vaccination, hand hygiene, physical distancing, and wearing a face covering when physical distancing is impractical to prevent the spread of disease.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 3 October 2021 (n = 5 977 536)



Fifteen African countries hit 10% COVID-19 vaccination goal

Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 3 October 2021

Country	Total Cases	Total Deaths	Recovered Cases	Case Fatality Ratio (%)	Health Worker infections
South Africa	2 906 422	87 780	2 779 906	3.0	56 180
Ethiopia	348 669	5 722	315 171	1.6	3 354
Kenya	250 114	5 140	242 535	2.1	7 542
Zambia	209 163	3 649	205 187	1.7	1 121
Nigeria	206 138	2 723	194 097	1.3	3 175
Algeria	203 789	5 822	139 619	2.9	11 936
Botswana	179 220	2 368	174 549	1.3	61
Mozambique	150 804	1 918	147 397	1.3	4 779
Zimbabwe	131 129	4 627	123 787	3.5	5 366
Namibia	127 756	3 515	123 092	2.8	4 330
Ghana	127 482	1 156	123 238	0.9	4 763
Uganda	124 039	3 164	96 137	2.6	2 880
Rwanda	97 870	1 283	93 283	1.3	682
Cameroon	92 303	1 459	85 657	1.6	3 176
Senegal	73 800	1 860	71 854	2.5	419
Malawi	61 612	2 284	55 771	3.7	2 213
Côte d'Ivoire	60 424	640	58 296	1.1	1 084
Angola	58 943	1 577	48 192	2.7	939
Democratic Republic of the Congo	57 034	1 086	50 907	1.9	728
Eswatini	46 047	1 224	44 326	2.7	974
Madagascar	43 597	960	42 637	2.2	70
Cabo Verde	37 658	342	36 816	0.9	140
Mauritania	36 163	778	34 834	2.2	24
Gabon	30 648	190	26 947	0.6	345
Guinea	30 434	379	28 908	1.2	682
United Republic of Tanzania	25 846	719	180	2.8	3 316
Togo	25 535	233	23 366	0.9	891
Benin	23 890	159	21 993	0.7	139
Seychelles	21 556	112	21 142	0.5	945
Lesotho	21 360	650	11 597	3.0	473
Burundi	18 600	14	17 926	0.1	38
Mauritius	15 776	90	14 158	0.6	30
Mali	15 288	549	14 327	3.6	87
Congo	14 561	199	13 558	1.4	203
Burkina Faso	14 335	187	13 917	1.3	288
Equatorial Guinea	12 362	147	11 008	1.2	531
South Sudan	12 041	130	11 617	1.1	294
Central African Republic	11 385	100	11 125	0.9	51
Gambia	9 935	338	9 589	3.4	142
Eritrea	6 723	42	6 650	0.6	0
Sierra Leone	6 396	121	4 390	1.9	264
Guinea-Bissau	6 112	135	5 338	2.2	23
Niger	6 042	203	5 776	3.4	355
Liberia	5 799	286	5 504	4.9	346
Chad	5 046	174	4 859	3.4	292
Comoros	4 155	147	3 968	3.5	155
Sao Tome and Principe	3 535	53	2 813	1.5	102
<b>Cumulative Cases (N=47)</b>	<b>5 977 536</b>	<b>146 434</b>	<b>5 577 944</b>	<b>2.4</b>	<b>125 928</b>

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

## EVENT DESCRIPTION

The Democratic Republic of the Congo has been experiencing a cholera outbreak since the beginning of this year. From week 1 to week 36 (ending 12 September 2021), a total of 4 671 suspected cases of cholera, including 91 deaths (Case Fatality Ratio (CFR) = 2.0%), were reported from 73 health districts in 14 regions. The weekly average number of suspected cases is around 130. The national incidence per 100 000 inhabitants is 13 and the regions of Tanganyika (38 cases per 100 000 inhabitants), Haut-Katanga (24 cases per 100 000 inhabitants) and Haut-Lomami (18 cases per 100 000 inhabitants) have the highest incidences.

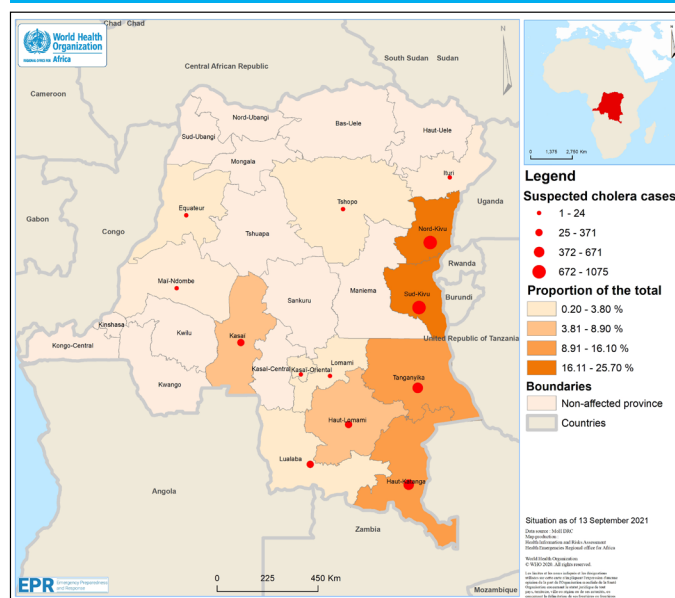
During the last four weeks, 434 suspected cases of cholera including 5 deaths (CFR 1.2%), were reported in five active regions of North Kivu, South Kivu, Tanganyika, Haut Katanga and Haut Lomami. New cholera hotspots were reported in the regions of Tanganyika and South Kivu since week 33 (ending 22 August 2021). The risk of an upsurge in cholera cases in other regions of the country is significant due to the limited access to drinking water, poor hygiene and sanitation conditions and the onset of the new rainy season.

In week 36, there was an increase in number of new cases reported with 186 cases and one death (CFR 0.1%) and this increase has been seen for four consecutive weeks. In addition, 96.2% (179/186) of cases reported during week 36 were from two regions (Tanganyika and South Kivu) which declared new outbreaks since week 33. The Tanganyika region reported most cases 77.4% (144/186) of cases and no deaths in week 36. The health districts of Kalemie and Nyemba remain the most affected. The South Kivu region is also active, and it has notified 35 cholera cases and one death (CFR 2.9%) in week 36 from five health areas (Mitoba, Espoitre, Nyamibungu, Busakizi and Mwangaza) of the Kitutu health district. All cases are 5 years and above and females are most affected (59%).

## PUBLIC HEALTH ACTIONS

- Support missions from the central level of the Ministry of Health (MoH) to the affected regions are being conducted.
- The regular coordination meetings between MoH and its partners as well as the prepositioning of cholera supplies in the affected health districts are ongoing.
- Continued strengthening of surveillance around cases detected in the regions of Tanganyika and South Kivu with the WHO support is ongoing
- Preparation for training of regional teams in management of cholera outbreaks as well as the training of community health workers in the affected health districts are underway.
- Provision of cholera kits to the affected health districts of Tanganyika and South Kivu regions with the support of the regional governments and its partners
- Sensitization of the population on cholera prevention and good hygiene practices at household level and through local radios and churches are ongoing
- Household decontamination and water chlorination at the water points in the affected health districts and distribution of Aquatab are being implemented

## Distribution of suspected cases of Cholera in the Democratic Republic of the Congo, as of 13 September 2021.



- Preparation for the first round of preventive oral vaccination campaign against cholera in 106 health areas of 13 health districts of South Kivu, Tanganyika, and Haut-Lomami regions targeting 2 600 959 people aged one year and above is being finalized.

## SITUATION INTERPRETATION

The Democratic Republic of the Congo faces cholera outbreaks every year since 1974 when *Vibrio cholerae* was detected for the first time in the country. Overtime, the recorded case fatality ratio has always been above 1%, the acceptable threshold established by WHO. For 2021, the cholera outbreak shows a much lower intensity compared to the same period in the previous four years. This could be because of the positive impact of response interventions put in place in recent years, in particular the strengthening of water-sanitation and hygiene, the capacity building of health facilities in the detection and management of cholera cases and cholera vaccination in some at risk areas. Nevertheless, efforts are still needed to reduce the case fatality rate which is still above the WHO recommended threshold.

## PROPOSED ACTIONS

Although the number of cholera cases reported is lower compared to the previous four years, it is important that efforts made so far continue with an aim to eliminate the sources of contamination and further reduce the case fatality ratio.

- Access to potable water and adequate sanitation facilities in the Democratic Republic of the Congo is still poor. It is therefore paramount to improve this access and promote good hygiene practices in the communities. Sustainable programs for access to drinking water, sanitation and hygiene must be considered as a priority in all areas regularly affected.
- Both rural and urban at-risk areas should receive equal attention as regards to financing cholera control interventions.
- Vaccination is an important pillar in the fight against cholera and should be considered whenever necessary.

## EVENT DESCRIPTION

According to World Food Programme, Madagascar's famine crisis has been caused mostly by the effects of climate change. The country experiences extreme weather conditions including cyclones, floods, and droughts, with the latter becoming most severe in the Grand Sud area of Madagascar since 1981. For three consecutive years, the area has experienced dry conditions from two successive episodes of drought. The first drought occurred between November 2019 and January 2020 and was the most acute experienced in the last ten years, and the second drought occurred between October 2020 and January 2021 and was more severe and most acute of the last 40 years.

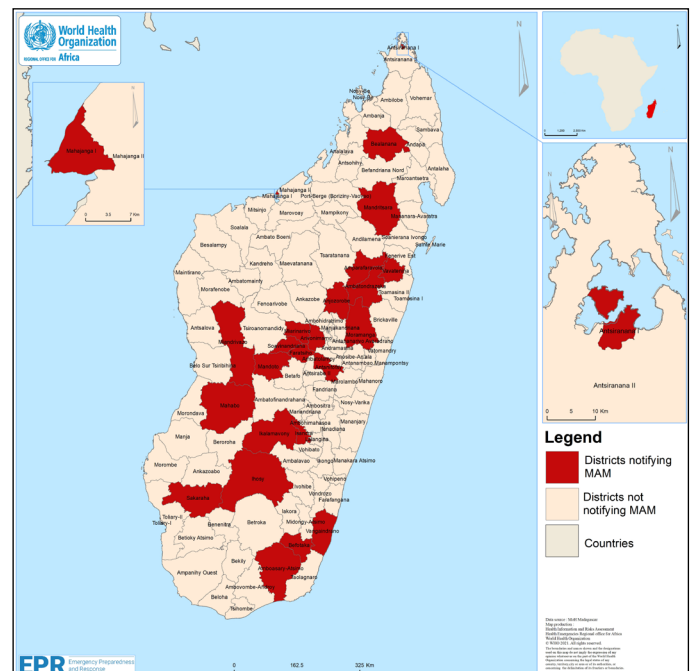
As of 15 September 2021, a total of 1 137 633 people was in need of food assistance classified as Integrated Food Security Phase Classification (IPC) Phase 3 and above according to the latest IPC reports. However, a total of 1 313 336 in IPC Phase 3 are expected to need assistance from October to December 2021, including twice as many people in IPC 5 (from 14 000 to 28 000 people). All 10 districts of Grand Sud have been affected, however, Amboasary Atsimo has been the most impacted where 75% of its population is in IPC Phase 3 or above, and nearly 14 000 people are in catastrophe phase (IPC Phase 5).

During 2021, a total of 9 591 severe acute malnutrition (SAM) cases from 108 districts have been reported through week 37 (weekending 19 September 2021). Comparing weekly incidence rates of SAM, they have surpassed 3-year averages for all but five weeks throughout the year (weeks 17, 25, 29, 35, and 37) and the highest incidence was recorded during week 11 (beginning March 15 2021) when rates reached 2.2 cases per 100 000 people. A total of 11 047 moderate acute malnutrition (MAM) cases have been reported from 109 districts through week 37. Comparing weekly incidence rates of MAM, the rates surpassed 3-year averages for the first 16 weeks of the year (until 25 April 2021) and then the trend fluctuated for some time, however, weekly rates have again surpassed averages for the six consecutive weeks for which there is data (between weeks 32-37).

Similar to SAM weekly rates, MAM rates were also the highest during week 11 reaching 1.9 cases per 100 000 people. According to the latest IPC Acute Malnutrition analysis conducted in ten districts in the Grand Sud, at least 500 000 children under 5 years of age are expected to be acutely malnourished through April 2022 in southern Madagascar, including 110 000 severely malnourished requiring urgent life-saving assistance.

According to joint WHO/UNICEF/World Bank estimates, 40% of children under 5 years are affected by stunting making Madagascar the 9th worst country for stunting in the world. The key drivers of acute malnutrition in Grand Sud include (1) the acute food insecurity, (2) inadequate food intake with 9 children in 10 not having access to a diet adequate for their physical growth, (3) poor access to water and sanitation (only 2.9% of the population in the 10 most affected districts have access to improved sanitation facilities while 57% do not use improved drinking water sources), (4) delayed introduction of food supplements in only 51% of children 6 months and more in some districts.

Geographical location of Moderate acute malnutrition cases in the affected districts of Grand Sud, Madagascar, as of 21 September 2021.



Problems also persist with increasing food costs due to monetary inflation. Poor harvest production due to the drought has also caused prices to increase for some foods such as cassava, however, local rice prices have remained stable due to governmental initiatives to distribute low-cost rice to low economic households. The crisis has also caused the displacement of people trying to reach assistance in several districts, and criminality leading people to engage in risky behaviours like cattle raiding, theft, prostitution, child labour, child marriage, etc. Although COVID-19 lockdown measures were lifted, labour demands remain low affecting migrants from the south who attempt to find work in other urban areas of the country causing some to participate in illegal forest exploitation.

The fragility of the health status of the population coupled with the recurrent weakness of the health system leads to the resurgence of diseases. The major diseases that are reported in the region are: malaria, acute respiratory infections as well as diarrhoeal diseases that are also favoured by the precarious hygiene and the lack of drinking water. The country has been experiencing an outbreak of derived-polio virus type 1 (cVDVP1) since December 2020, the first case of which was ever reported in the area.

## PUBLIC HEALTH ACTIONS

- A Flash Appeal was launched in January 2021 to support the governmental priorities and response plan (including health sector response) providing life-saving assistance to the people in southern Madagascar via United Nations agencies, the Red Cross, and non-governmental organizations. The initial Flash Appeal ran through May 2021 and is being revised to reflect the ongoing crisis which is expected to last until at least April 2022.

- Regular meetings of the Health District of Amboasary-Sud which is one of the hardest hit districts with communes that are classified as catastrophic (IPC5)
- SAM cases are being managed in nutritional rehabilitation centres
- Critical food aid rations were distributed to more than 829 000 people.
- An estimated 188 000 children and pregnant and lactating women received nutritional support or treatment required.
- Water, sanitation, and hygiene services are being provided by partners as well as dissemination of hygiene kits.
- Partners are providing people with prevention of gender-based violence and reproductive health awareness campaigns.
- Vaccines such as COVID-19 and polio are being coordinated to increase immunization coverage among the vulnerable groups.

## SITUATION INTERPRETATION

The food insecurity situation in southern Madagascar has continued to negatively impact the population. Fuelled by a prolonged drought which is most likely caused by climate change, the food insecurity

has caused various levels of acute malnutrition which has seen above average rates for much of 2021. Without immediate intervention, problems will persist, but it is with long-impacting interventions that a problem caused by climate change will be solved.

## PROPOSED ACTIONS

- Further efforts should be made to build resilience among food insecure communities which can include the harvesting of rainwater when rains eventually return to increase availability for agricultural purposes and benefit from extreme weather events which have occurred in Madagascar. This could also contribute to climate resilience which Madagascar needs to quickly build and which should be integrated with emergency food assistance plans to mitigate future crises.
- Essential health services need to be strengthened in the affected areas to allow for better access to quality health care for people living in situations of vulnerability. There are various health barriers at play that need to be addressed such as improvements of vaccination coverage, access to free health care, and building capacity of health workers particularly in the areas of maternal and child health and nutrition.



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A mother waits to receive food for her child in drought-affected southern Madagascar.



# 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>Ongoing Events</b>									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	3-Oct-21	203 789	203 789	5 822	2.90%
From 25 February 2020 to 3 October 2021, a total of 203 789 confirmed cases of COVID-19 with 5 822 deaths (CFR 2.9%) have been reported from Algeria. A total of 139 619 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	3-Oct-21	58 943	58 943	1 577	2.70%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 3 October 2021, a total of 58 943 confirmed COVID-19 cases have been reported in the country with 1 577 deaths and 48 192 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	1-Oct-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	Cholera	Ungraded		1-Jan-21	26-Sep-21	118	7	1	0.80%
Since week 13 (ending 4 April 2021) of this year, cases of cholera have been reported in Benin. As of 26 September 2021, a total of 118 cases with 1 death (CFR 0.8%) are reported so far. Seven cases have been confirmed by culture.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	26-Sep-21	23 890	23 890	159	0.70%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 26 September 2021, a total of 23 890 cases have been reported in the country with 159 deaths and 21 993 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	1-Oct-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	27-Sep-21	179 220	179 220	2 368	1.30%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 27 September 2021, a total of 179 220 confirmed COVID-19 cases were reported in the country including 2 368 deaths and 174 549 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	22-Sep-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 1.4 million internally displaced persons as of 31 August 2021 in all 13 regions in the country. The regions most affected were Central North and Sahel. The displacement has had a strong impact on natural resources which in turn is affecting the IDP and host community populations causing social distress between the groups. 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 September 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	1-Oct-21	14 335	14 335	187	1.30%
Between 9 March 2020 and 1 October 2021, a total of 14 335 confirmed cases of COVID-19 with 187 deaths and 13 917 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	1-Oct-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	2-Oct-21	18 600	18 600	14	0.10%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 02 October 2021, the total number of confirmed COVID-19 cases is 18 600, including 14 deaths and 17 926 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 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	22-Sep-21	92 303	92 303	1 459	1.60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 22 September 2021, a total of 92 303 cases have been reported, including 1 459 deaths and 85 657 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	1-Oct-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	3-Oct-21	37 658	37 658	342	0.90%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 03 October 2021, a total of 37 658 confirmed COVID-19 cases including 342 deaths and 36 816 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	27-Sep-21	11 385	11 385	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 27 September 2021, a total of 11 385 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%
<p>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.</p>									
Central African Republic	Yellow fever	Ungraded	14-Sep-21	1-Apr-21	9-Sep-21	1	1	0	0.00%
<p>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.</p>									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	3-Oct-21	5 044	5 044	174	3.40%
<p>The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 03 October 2021, a total of 5 044 confirmed COVID-19 cases were reported in the country including 174 deaths and 4 859 cases who have recovered.</p>									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-Jul-21	141	14	10	7.10%
<p>Since 1 January 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.</p>									
Chad	Measles	Ungraded	24-May-18	1-Jan-21	4-Sep-21	2 190	231	13	0.60%
<p>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.</p>									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	1-Oct-21	114	114	0	0.00%
<p>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.</p>									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	2-Oct-21	4 155	4 155	147	3.50%
<p>The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 03 October 2021, a total of 4 155 confirmed COVID-19 cases, including 147 deaths and 3 968 recoveries were reported in the country.</p>									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	30-Sep-21	14 561	14 561	199	1.40%
<p>The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 30 October 2021, a total of 14 561 cases including 199 deaths and 13 558 recovered cases have been reported in the country.</p>									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	1-Oct-21	4	4	0	0.00%
<p>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.</p>									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	3-Oct-21	60 424	60 424	640	1.10%
<p>Since 11 March 2020, a total of 60 424 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 640 deaths, and a total of 58 296 recoveries.</p>									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	1-Oct-21	61	61	0	0.00%
<p>No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The number of 2020 cases is still 61.</p>									
Côte d'Ivoire	Yellow fever	Ungraded	14-Sep-21	13-Aug-21	6-Sep-21	5	3	-	-
<p>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).</p>									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	12-Sep-21	-	-	-	-
<p>As of 12 September 2021, there are an estimated 5.26 million people internally displaced and 19.6 million are in need of emergency food assistance in the entire country. From 30 August - 5 September at least 82 people were reported killed and several others abducted in the villages of the Oïcha and Kalunguta and some 3 418 newly displaced households were accommodated in Beni territory of North Kivu province. They fled incursions by armed men into localities in southern Irumu territory in Ituri, including the southern part of Beni territory. More than 90% of these IDPs live in fragile conditions with host families and present needs in all sectors. In Irumu territory of Ituri province there is population displacement from Otmaber, Ndimbo etc., following the attack by alleged elements of the Allied Democratic Forces (ADF) in the village of Mahala (Komnda-Luna axis) who have mostly found refuge in Bunia and outlying districts. In Tshopo province, 12 050 people have been displaced from the areas of Babise, Mosanda, Banalia centre, Malila, and Bandindi due to the ongoing meningitis outbreak. In Kamako of Kasai province, an influx of 5 857 voluntary Congolese returnees previously settled in Angola have thus far been reported by UNHCR following a call for their removal by Angolan authorities. There have been reports of physical violence, injury, and extortion of property among this population.</p>									

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	19-Sep-21	4 952	4 952	97	2.00%
In 2021, from epidemiological week 1 to 37 (ending 19 September 2021), 4 952 suspected cholera cases including 97 deaths (case-fatality rate 2.0%) were recorded in 76 health zones across 14 provinces of the Democratic Republic of the Congo. Tanganyika province is reported to be experiencing an exponential increase in suspected cases over the last three weeks and has reported 86.8% (244 cases) of suspected cases in week 37. In 2020, a total of 30 304 suspected cholera cases including 514 deaths (case fatality 1.7%) were reported in 179 health zones across 23 provinces.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	30-Sep-21	57 035	57 033	1 086	1.90%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 57 033 confirmed cases and two probable case, including 1 086 deaths have been reported. A total of 50 907 people have recovered.									
Democratic Republic of the Congo	Meningitis	Grade 2	30-Jul-21	1-Jun-21	28-Sep-21	1 148	14	181	15.80%
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 28 September 2021, 1 148 cases have been reported including 181 deaths (CFR= 15.6%). Thirteen samples have been confirmed for <i>Neisseria meningitidis</i> serogroup W.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	13-Sep-21	8 876	39	299	3.40%
Since epidemiological week 1 up to week 36 in 2021, 2 619 cases have been reported with 70 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 36, 2021 (ending on 12 September), 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	1-Oct-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	29-Sep-21	12 362	12 362	147	1.20%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 29 September 2021, a total of 12 362 cases have been reported in the country with 147 deaths and 11 008 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	2-Oct-21	6 723	6 723	42	0.60%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 2 October 2021, a total of 6 723 confirmed COVID-19 cases with 42 deaths were reported in the country. A total of 6 650 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	3-Oct-21	46 047	46 047	1 224	2.70%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 3 October 2021, a total of 47 047 cases have been reported in the country including 44 326 recoveries. A total of 1 224 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	3-Oct-21	348 669	348 669	5 722	1.60%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 348 669 cases of COVID-19 as of 03 October 2021, with 5 722 deaths and 315 171 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 1 215 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	1-Oct-21	74	74	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Nine cases have been reported so far in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	30-Sep-21	30 648	30 648	190	0.60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 30 September 2021, a total of 30 648 cases including 190 deaths and 26 947 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	1-Oct-21	9 935	9 935	338	3.40%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 1 October 2021, a total of 9 935 confirmed COVID-19 cases including 338 deaths, and 9 589 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	27-Sep-21	127 482	127 482	1 156	0.90%
As of 27 September 2021, a total of 127 482 confirmed COVID-19 cases have been reported in Ghana. There have been 1156 deaths and 123 238 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 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	1-Oct-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	30-Sep-21	30 434	30 434	501	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 30 434 cases including 28 908 recovered cases and 510 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 September 2021 has been confirmed on 19 September 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, 6 070 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	1-Oct-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	2-Oct-21	6 112	6 112	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 2 October 2021, the country has reported 6 112 confirmed cases of COVID-19 with 5 338 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	3-Oct-21	250 114	250 114	5 140	2.10%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 03 October 2021, 250 114 confirmed COVID-19 cases including 5 140 deaths and 242 535 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	17-Sep-21	625	31	1	0.20%
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.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-21	10-Feb-21	1-Oct-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 Bouralguy, 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	2-Oct-21	21 360	21 360	650	3.00%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 2 October 2021, a total of 21 360 cases of COVID-19 have been reported, including 11 597 recoveries and 650 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 2021 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 5 September 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	1-Oct-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	27-Sep-21	43 597	43 597	960	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 27 September 2021, a total of 43 597 cases have been reported in the country, out of which 42 643 have recovered and 960 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	1-Jan-21	12-Sep-21	1 428 234	-	671	-
From January 2021 to 12 September 2021, 1 428 234 cases were reported including 671 deaths. The number of malaria cases reported in week 36 was 7 649 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	26-Sep-21	40	30	8	20.00%
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 26 September 2021, a total of 40 suspected cases of pneumonic plague including 30 confirmed and 8 death cases (CFR 20%) 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	10	10	0	0.00%
Two cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported in Boeni and Menabe bringing the number of 2021 cases to eight. There were two cases reported in 2020.. There were two cases from 2020.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	3-Oct-21	61 612	61 612	2 284	3.70%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 3 October 2021, the country has a total of 61 612 confirmed cases with 2 284 deaths and 55 771 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	8-Aug-21	-	-	-	-
The security situation continues to gradually spread to the southern regions of the country. Issues such as inter and intra-community conflicts, activism of non-state armed groups, consequences of counter-insurgency operations, crime and banditry continue to weaken the Malian context. Natural disasters (droughts and floods) and COVID-19 compound the health and non-health impacts affecting all basic social sectors as well as the protection of household livelihoods. On 8 August NSAGs simultaneously attacked villages in 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	26-Sep-21	11	2	4	36.40%
During the week 36 of 2021 ( ending 12 September 2021 ), 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 26 September, a total of 11 cases including 2 confirmed and 4 deaths (CFR 36.4%) 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 03 October 2021, a total of 15 287 confirmed COVID-19 cases have been reported in the country including 549 deaths and 14 327 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	1-Oct-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	3-Oct-21	36 163	36 163	778	2.20%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 03 October 2021, a total of 36 163 cases including 778 deaths and 34 834 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	30-Sep-21	15 776	15 776	90	0.60%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 30 September 2021, a total of 15 776 confirmed COVID-19 cases including 90 deaths and 14 158 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	3-Oct-21	150 804	150 804	1 918	1.30%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 3 October 2021, a total of 150 804 confirmed COVID-19 cases were reported in the country including 1 918 deaths and 147 397 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	30-Sep-21	127 804	127 804	3 516	0.00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 30 September 2021, a total of 127 804 confirmed cases with 123 116 recovered and 3 516 deaths have been reported.									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	15-Aug-21	8 090	8 090	66	0.80%
The current outbreak in Namibia started in December 2017. As of 15 August 2021, a cumulative total of 8 090 cases (2 117 laboratory-confirmed, 4 738 epidemiologically linked, and 1 235 suspected cases) including 66 deaths (CFR=0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 5 004 (62.0%) of reported cases, followed by Erongo 1 717 (21.2%).									
Niger	Floods	Ungraded	15-Jul-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, Gawey, Assaguey in the Tillia department. In the Maradi region, insecurity, theft and looting have cause some population movement. The Maradi region also saw some voluntary returns of IDPs. In Tillaberi region the number of IDPs are expected to drop due to a new government policy of IDP returns. In Diffa region, around 30K people have already returned to their localities of origin due to this return policy.									
Niger	Cholera	Grade 1	7-Aug-21	7-Jun-21	27-Sep-21	5 070	180	154	3.00%
As of 27 September 2021, a total of 5 070 cases including 154 deaths (CFR 3.1%) have been reported. Seven regions out of eight have reported cases so far (Tahoua, Niamey, Tillaberi, Dosso, Maradi Zinder and Diffa). To date 33 out of 72 health districts have reported cases with 18 health districts currently active. 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	3-Oct-21	6 042	6 042	203	3.40%
From 19 March 2020 to 03 October 2021, a total of 6 042 cases with 203 deaths have been reported across the country. A total of 5 776 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	1-Oct-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. The 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	3-Oct-21	206 138	206 138	2 723	1.30%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 03 October 2021, a total of 206 138 confirmed cases with 194 097 recovered and 2 723 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	31-Aug-21	10 106	6 718	87	0.90%
In 2020, Nigeria reported 9 316 confirmed cases, with 55 deaths, CFR 0.6%. From January 2021 to 31 August 2021, 10 106 suspected cases have been reported in Nigeria including 87 deaths. Of the suspected cases reported, 6 718 (66.5%) were confirmed (1 065 lab confirmed 2 734 epi-linked and 2 919 clinically compatible), 3 272 (32.4%) were discarded and 116 (1.2%) are pending classification. The most affected state is Borno with 5 614 cases. The age group 9 - 59 months accounted for 5 048 (75.1%) of all confirmed cases. During the month of August, 189 were reported; no death was recorded among confirmed cases.									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	30-Sep-21	79	23	0	0.00%
According to the Nigeria Centre for Disease Control (NCDC), in September 2021, no additional cases of suspected monkeypox were reported. Therefore in 2021, the total remains at 79 suspected cases reported since the beginning of the year. Of the suspected cases, 23 were confirmed from eight states Delta (7), Lagos (4), Bayelsa (4), Rivers (4), Edo (1), FCT (1), Niger (1), Ogun (1) and, no deaths recorded from all States.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	1-Oct-21	252	252	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are now 152 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	3-Oct-21	97 870	97 870	1 283	1.30%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 03 October 2021, a total of 97 870 cases with 1 283 deaths and 93 168 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	3-Oct-21	3 535	3 535	53	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 03 October 2021, a total of 3 535 confirmed cases of COVID-19 have been reported, including 53 deaths. A total of 2 813 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	3-Oct-21	73 800	73 800	1 860	2.50%
From 2 March 2020 to 3 October 2021, a total of 73 800 confirmed cases of COVID-19 including 1 860 deaths and 71 854 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	1-Oct-21	14	14	0	0.00%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Kaolack bringing the number of 2021 cases to 14. Three cVDPV2 positive environmental samples were reported in Dakar.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	1-Oct-21	21 556	21 556	112	0.50%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 1 October 2021 a total of 21 556 cases have been confirmed, including 21 079 recoveries and 112 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	3-Oct-21	6 396	6 396	121	1.90%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 03 October 2021, a total of 6 396 confirmed COVID-19 cases were reported in the country including 121 deaths and 4 390 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	1-Oct-21	15	15		0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. So far, 5 cases have been reported in 2021, and the number of cases 2020 remains 10.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	3-Oct-21	2 906 422	2 906 422	87 780	3.40%
Since the start of the COVID-19 pandemic in South Africa by 03 October 2021, a cumulative total of 2 906 422 confirmed cases and 87 780 deaths have been reported with 2 779 906 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	3-Oct-21	12 041	12 041	130	1.10%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 03 October 2021, a total of 12 041 confirmed COVID-19 cases were reported in the country including 130 deaths and 11 617 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	1-Oct-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	3-Oct-21	25 535	25 535	233	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 03 October 2021, a total of 25 535 cases including 233 deaths and 23 366 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	1-Oct-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	2-Oct-21	124 039	124 039	3 164	2.60%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 2 October 2021, a total of 124 039 confirmed COVID-19 cases, 96 137 recoveries with 3 164 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	3-Oct-21	209 163	209 163	3 649	1.70%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 03 October 2021, a total of 209 163 confirmed COVID-19 cases were reported in the country including 3 649 deaths and 205 187 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	3-Oct-21	131 129	131 129	4 627	3.50%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 03 October 2021, a total of 131 129 confirmed COVID-19 cases were reported in the country including 4 627 deaths and 123 787 cases that recovered.									

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

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

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#### Data sources

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