

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 41: 5 - 11 October 2020

Data as reported by: 17:00; 11 October 2020

2

New events

115

Ongoing events

105

Outbreaks

12

Humanitarian crises



Graded events †

49

Grade 3 events

19

Grade 2 events

2

Grade 1 events

40

Ungraded events

2

Protracted 3 events

2

Protracted 2 events

3

Protracted 1 events

Overview

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- 7 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 117 events in the region. This week's main articles cover the following events:

- [Coronavirus disease 2019 \(COVID-19\) in Democratic Republic of the Congo](#)
- [Cholera in Cameroon](#)
- [Measles in Central African Republic](#)
- [Ebola virus disease \(EVD\) in Équateur Province, Democratic Republic of the Congo.](#)

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 largely been controlled and thus closed.

Major issues and challenges include:

- Democratic Republic of the Congo ranks 14 in the Region in terms of case numbers, but with very few recorded deaths. As with all countries in the region, the number of cases has been declining steadily since late June/early July. However, the populous area of Kinshasa is the worst affected region of the country and there has been a protracted strike of response workers here, which means that surveillance is adversely affected. In addition, the country is affected by a protracted humanitarian crisis, an outbreak of Ebola virus disease and multiple other infectious disease outbreaks. Democratic Republic of the Congo needs to continue to implement all public health measures such as physical distancing, wearing cloth masks, hand hygiene and cough etiquette to ensure that the declining trend continues.
- The cholera outbreak in Cameroon, declared in late January 2020, is ongoing, with no signs of being brought under control. Gaps in response are numerous and include weak coordination, poorly trained response staff because of high staff turnover and stock outs of essential materials such as rapid diagnostic kits. In addition, there is vaccine resistance. All this comes in the context of the COVID-19 pandemic and inadequate funding for cholera response.
- The measles outbreak in Central African Republic continues to show a steadily declining trend after implementation of two successful vaccination campaigns, which is to be commended, particularly in the context of COVID-19 and continuing insecurity. However, the campaigns have delivered only one dose to vaccine naïve children, and experience elsewhere suggests that two doses are needed for full immunity, so momentum needs to be maintained for vaccine programmes for all vaccine preventable diseases to ensure no further outbreaks.
- The EVD outbreak in Équateur Province, Democratic Republic of the Congo, continues to evolve, once again with a gap in reported new cases and deaths, which is to be cautiously welcomed. However, challenges remain around known confirmed cases still living in the community and contacts lost to follow-up. Lack of funding for the response continues, with inadequate human resources for risk communication and community engagement in affected health zones and hotspots. Strong and robust surveillance systems need to be sustained in order to detect, isolate, test and treat new suspected cases as early as possible.

Ongoing events

Coronavirus disease 2019

Democratic Republic of the Congo

10 841 Cases : 276 Deaths : 2.5% CFR

EVENT DESCRIPTION

The COVID-19 outbreak in Democratic Republic of the Congo continues, with the country ranking 14 in the WHO African Region in terms of case numbers, but with relatively few recorded deaths. Following the trend observed across the region, the number of confirmed cases in the country is declining from a peak at the end of June/beginning of July 2020.

As of 9 October 2020 six new cases of COVID-19 were confirmed, with two from Kinshasa, two in South Kivu and two in Lualaba provinces. No new deaths were reported on that day. Since the start of the outbreak there have been 10 841 confirmed cases, with one probable case notified and 276 deaths (case fatality ratio 2.5%). A total of 10 249 (94.5%) of reported cases have recovered.

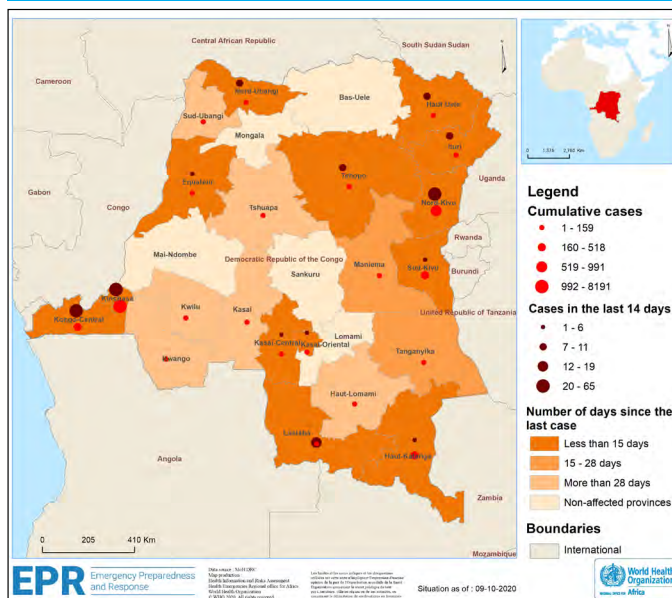
Kinshasa remains the most affected province in the country, with 75.6% (8 192/10 841) of the cases, followed by North Kivu province, with 9.1% (991/10 841) cases. Congo Central follows, with 4.8% (518/10 841) of the cases. In the 305 cases for which information was provided in South Kivu, the affected health zones are Ibanda (206/305; 67.5%), Kadutu (53/305; 17.4%), Bagira (16/305; 5.2%), Miti Murhesa (7/305; 2.3%), Nyantende (7/305; 2.3%), Katana (4/305; 1.3%), Kitutu (4/305; 1.3%), Shabunda (2/305; 0.3%), Lamera (2/305; 0.3%) and Uvira (2/305; 0.3%). In the last 14 days, 248 confirmed cases have been reported in 50 health zones in 13 of the 21 affected provinces in the country.

PUBLIC HEALTH ACTIONS

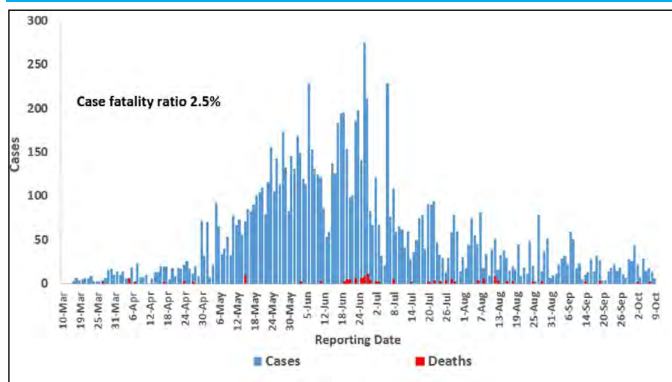
- Surveillance continues, with screening at points of entry and health checkpoints. A total of 1 850 international travellers were screened on 9 October 2020, with no alerts. A cumulative total of 3.2 million national and 298 136 international travellers have been screened, with 338 and 49 alerts, respectively, with 18 and 11 confirmed cases in each group.
- A strike of COVID-19 responders continues in Kinshasa for 61 consecutive days, significantly affecting monitoring of points of entry in the province.
- A total of 1 006 alerts were reported on 9 October 2020, of which 991 were new and 988 (98.2%) were investigated, with 70 (7.1%) validated.
- A total of 68 910 laboratory samples have been tested since the start of response operations, with an overall positivity of 16.7%.
- Risk communication and community engagement is ongoing, with nearly 60 759 people sensitized and briefed on COVID-19 and prevention measures in 13 health zones, along with rumour management and alert raising.
- The Canadian ambassador visited the Kasika Health Centre to give an update on current patients and the community perception of the response to COVID-19 in Karisimbi Health Zone, North Kivu.
- An interview was held with 12 school principals on compliance with COVID-19 barrier measures in the run up to the start of the new school year in the Gbadolite catchment area.
- A briefing was held for 100 motorbike taxis on risk communication and community engagement at the health checkpoints in the

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Geographical distribution of confirmed COVID-19 cases and deaths in Democratic Republic of the Congo by reporting date, 10 March to 9 October 2020



The distribution of confirmed COVID-19 cases and deaths in Democratic Republic of the Congo by reporting date, 10 March – 11 October 2020 (n= 10 841)



Mbandaka and Wangata health zones, followed by a guided visit to the Wangata Ebola treatment centre, supported by IOM.

SITUATION INTERPRETATION

The Democratic Republic of the Congo was one of the first countries in the African Region to report confirmed cases of COVID-19 in March 2020. Cases rose steadily to a peak around the end of June and beginning of July 2020 and are now declining. However, there is no cause for complacency with Democratic Republic of the Congo facing a long-standing and complex humanitarian crisis, a fresh Ebola virus disease outbreak in Équateur Province and regular outbreaks of cholera, measles and other infectious diseases. At the same time, surveillance systems are generally robust, although currently hampered by striking workers in Kinshasa, and should be supported nationally and by partners in order to continue the response to these multiple challenges. Democratic Republic of the Congo needs to continue with all current public health measures such as physical distancing, wearing cloth masks in public, hand sanitation and cough etiquette. Authorities need to urgently bring the strike of responders in Kinshasa to a close in order to strengthen surveillance in this most affected region of the country.

[Go to map of the outbreaks](#)

EVENT DESCRIPTION

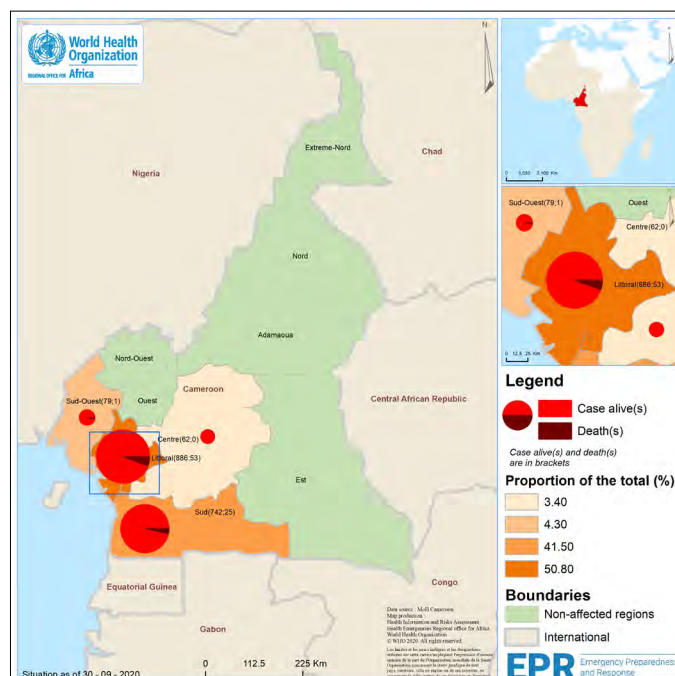
The cholera outbreak, which was notified on 1 April 2020, is ongoing, with fluctuating numbers of cases reported from Central, Littoral, South and South West regions. The outbreak first affected the Littoral region, followed by South West. From week 17 (week ending 25 April 2020), South and Littoral regions were the most affected, with cases reported in Central from week 28 (week ending 11 July 2020). In week 38 (week ending 19 September 2020), South West started to report cases again for the first time since week 16 (week ending 18 April 2020). As of 30 September 2020, the cumulative number of cases is 1 848, with 79 deaths (case fatality ratio 4.3%). A total of 63 cases have been confirmed by culture. Littoral remains the most affected region, with 939 (50.8%) cases and 53 (67%) deaths, followed by South, with 767 (41.5%) cases and 24 (30.4%) deaths. Central region has not notified any new cases for 21 days (as of 30 September 2020). Currently, there are three active regions, with five health active health districts, out of 18 originally affected.

The most affected age range is that between 25-35 years, accounting for 21.3% of cases. Notably, 15.5% of cases are infants below the age of 5 years. Males are more affected than females in the ratio of 1,4.

PUBLIC HEALTH ACTIONS

- Regular coordination meetings are held to monitor regional response activities.
- Workshops were held to validate and contextualize training modules for the cholera response in the context of COVID-19 from 22-25 September 2020.
- In Central region, surveillance and response activities included clarification of notification/investigation and case definition forms, along with review of registers kept in health districts.
- In South region, in the health district of Kribi, 142 households were provided with cholera awareness raising, along with 99 people in the Grand-Batanga health area.
- Oral cholera vaccination programmes are underway.

Geographical distribution of confirmed cholera cases in Cameroon, March to 30 September 2020.



SITUATION INTERPRETATION

The ongoing cholera outbreak in Cameroon is showing little signs of being controlled, with fluctuating case numbers and moving geographical areas. There are several gaps in the response, with inadequate management of deaths in affected areas, poor multisectoral inputs available for comprehensive cholera management, inexperienced and untrained response staff due to high staff turnover and weak coordination of interventions. Rapid diagnostic tests are out of stock in Central region, along with a lack of awareness-raising tools. Vaccine resistance is being encountered in the population, and there are insufficient financial resources for response across the regions. National authorities and partners need urgently to address these challenges, particularly the issue around funding, which will be central to all response measures.

EVENT DESCRIPTION

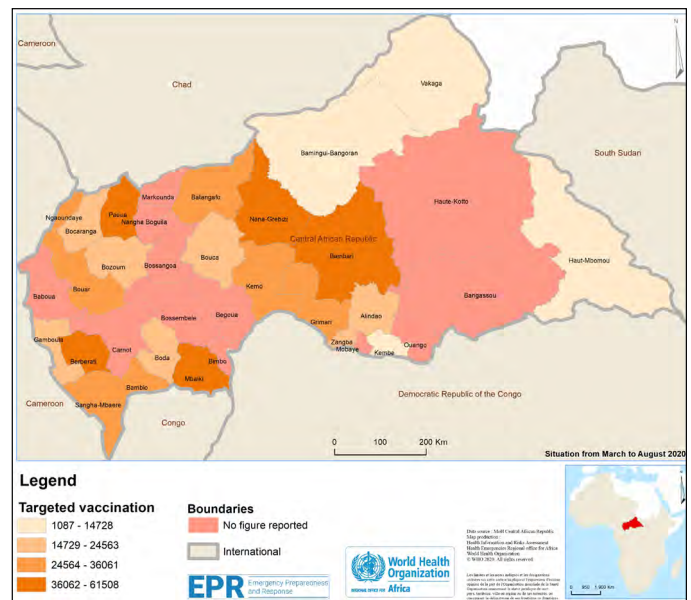
The measles outbreak in Central African Republic, which was declared on 24 January 2020, continues to show a declining trend after peaking in week 10 (week ending 7 March 2020). In week 38 (week ending 19 September 2020), 32 new cases were reported, with zero laboratory confirmed cases and zero deaths. As of 29 September 2020, a cumulative total of 28 633 cases with 137 deaths (case fatality ratio 0.5%) had been reported in 21 health districts across the country. The capital, Bangui, the west of the country and centre-east are the most affected areas of the country.

After the growth phase of the outbreak from weeks 1 to 11 (week ending 14 March 2020), there was a clear decrease in the number of suspected cases reported, which was most marked by week 13 (week ending 28 March 2020) after phase 1 (February-March-May) of the responsive vaccination programme in the 13 most affected health districts. Phase 2 conducted from 9-20 August 2020, which took place in the remaining 22 health districts in the country resulted in a second downward trend from week 33 (week ending 15 August 2020). A total of 2.6 million children were targeted in both phases of the vaccination campaigns, with particular emphasis on children aged 6-59 months. Twenty out of the 22 health districts in phase 2 of the responsive vaccination campaign achieved the overall objective of immunization coverage above 95% in both the priority age group of children from 6-59 months (113%) and the extended age group from 6 months to 10 years (96%). The two districts that did not achieve this are Vakaga (77%) bordering Sudan, where the response was hampered by floods, and Haut-Mbomou (47%) bordering South Sudan, where the supervisory team were abducted by an armed gang.

PUBLIC HEALTH ACTIONS

- The two phase vaccination campaigns took place from March to May 2020 and again from 9-20 August 2020 in different regions of the country, planned in this way because of limitations due to the COVID-19 response.
- Vitamin A supplementation and deworming with albendazole took place in parallel with the vaccination campaigns.
- COVID-19 personal protective kits-19 were made available through support from MSP, WHO, UNICEF and Gavi for vaccination response workers.
- Community dialogue sessions organized before the campaign helped to overcome potential anti-vaccination rumours.
- Overall performance for vitamin A supplementation was 103% and for albendazole de-worming was 98%.

Distribution of targeted measles vaccination campaigns in Central African Republic between March and August 2020.



SITUATION INTERPRETATION

The two reactive vaccination campaigns in Central African Republic would appear to have been largely successful in slowing the measles outbreak that was declared at the start of 2020. This is to be commended, particularly in the context of limitations imposed by the COVID-19 response, flooding in some districts and ongoing insecurity in the country. However, children aged 6 months to 10 years will have received only one dose of measles vaccination and the lack of a second dose has been seen to lead to declining immunity elsewhere in the region and this needs to be taken into account when planning future activities. National authorities and partners need to keep up the momentum for ongoing, regular vaccination against vaccine preventable diseases, particularly with the disruption of the COVID-19 outbreak, in order to prevent future outbreaks.

EVENT DESCRIPTION

The Ebola virus disease (EVD) outbreak in Équateur Province, Democratic Republic of the Congo, has once again slowed considerably, with no new cases or deaths reported since 28 September 2020. The number of affected health areas remains at 42 out of 13 health zones. Only one health area and one health zone have been active in the past 21 days (20 September to 10 October 2020), with a single case confirmed in this period in the Lusengo health area, Makanza Health Zone. Bekungu health area in Monieka Health Zone has had 42 days without a report of a confirmed or probably case of EVD.

As of 10 October 2020, the cumulative total of EVD cases is 128 (119 confirmed and nine probable) including 53 deaths (case fatality ratio 41.4%). The case fatality ratio among confirmed cases 37.0% (44 deaths/119 confirmed cases). The number of health workers affected remains at three, making up 2.3% of all cases.

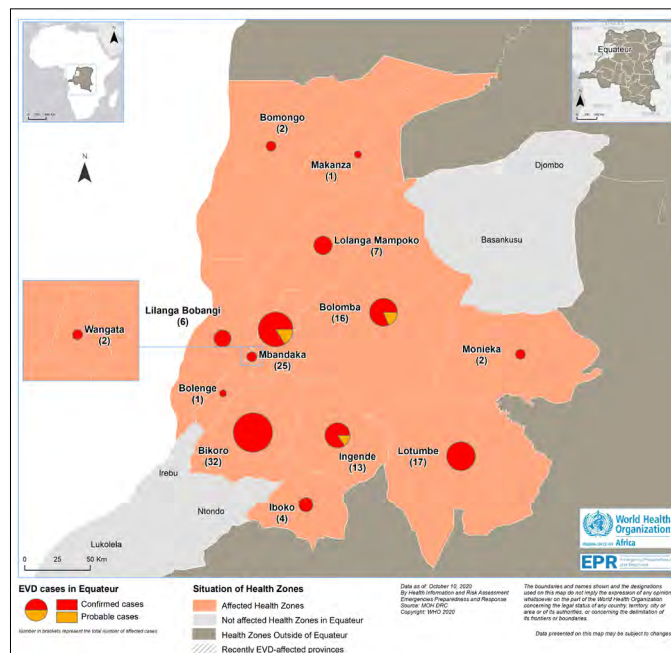
No new contacts were listed on 10 October 2020, with only Makanza actively following contacts. Out of 169 active contacts, 136 (80.5%) have been followed-up. Of the 31 contacts who were not seen, 18 (58.1%) have never been seen, four (12.9%) were lost to follow-up and nine (29%) were not seen in the previous 24 hours. A total of 813 new alerts (including 20 deaths) were reported in 12 health zones. Of the 865 alerts recorded to date 829 (95.8%) were investigated and 80 (36.4%) were validated.

PUBLIC HEALTH ACTIONS

- On 10 October 2020 three new points of control (POCs) were made operational. Of the 54 active POCs, 32 reported. A total of 39 591 (94.4%) travellers passed through these PoCs and 37 358 (94.5%) were screened. Since the start of the response activities, 1 918 914 (92.7%) screenings have been performed among the 2 070 594 travellers who have passed through the active PoCs. Out of these 221 alerts have been detected, with 113 validated.
- As of 10 October 2020, 204 samples were received in four operational laboratories. Since the start of the outbreak a total of 10 269 samples have been tested.
- A total of 294 new people were vaccinated with rVSV-ZEBOV-GP on 10 October 2020, including three contacts-of-contacts, and 291 probable contacts; these figures include 179 first line providers.
- Since 5 June 2020, a total of 36 816 people has been vaccinated.
- A total of 74 patients, all suspected cases, were managed in the transit centres and Ebola treatment centres in affected areas as of 10 October 2020.
- Since the start of specific EVD therapy, 32 (41%) confirmed patients have been treated, out of 78 patients.
- Six confirmed cases of EVD remain in the community, including three in Lotumbe, two in Lolanga Mampoko and one in Mbandaka.
- On 10 October 2020 there were 18 community death alerts in Ingende (5), Wangata (5), Bolenge (3), Mbandaka (3) and Bikoro (2). Nine samples were taken and three safe and dignified burials conducted.

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Geographical distribution of confirmed Ebola virus disease cases reported from 10 October 2020, Équateur Province, Democratic Republic of the Congo.



- On 10 October 2020, a total of 11 Red Cross volunteers were briefed on the 12 steps of a safe and dignified burial in Makanza Health Zone, 23 hygienists from Wangata and 45 IPC focal points from Bikoro completed their IPC training and two health facilities were equipped with IPC/WASH kits in Bomongo Health Zone; aquatabs were distributed in Lotumbe Health Zone; IPC assessments of 10 health facilities also took place.
- Risk communication, mobilization and community engagement continues, with briefing of community and religious leaders, as well as 100 motorcycle taxi drivers in Bolenge, Mbandaka and Wangata health zones, with support from IOM; in addition 13 school principals were trained on EVD and COVID-19 prevention measures during the back-to-school period.

SITUATION INTERPRETATION

The EVD outbreak in this area of Democratic Republic of the Congo has once again shown signs of slowing, with a few days with no new confirmed cases or deaths and one health zone with 42 days since the last confirmed case. However, this trend needs to be interpreted cautiously since there are still contacts lost to follow up, confirmed cases still remain in the community and safe and dignified burials continue to be a challenge. Funding remains inadequate, community resistance continues, as well as the problem of inadequate laboratory reagents and commodities. Continued advocacy is required with donors and funding agencies to strengthen response activities. EVD awareness activities are taking place in tandem with COVID-19 response activities, which is to be commended, and which will hopefully continue, to help to break the stigma associated with both diseases.

[Go to map of the outbreaks](#)

Summary of major issues, challenges and proposed actions

Major issues and challenges

- Democratic Republic of the Congo is experiencing the continuing decline in cases seen across the region, but a responders' strike, the precarious humanitarian situation and multiple other infectious disease outbreaks threaten the country's response.
- The cholera outbreak in Cameroon is ongoing, with fluctuating case numbers and shifting geographical areas. Gaps in response including, crucially, poor coordination, lack of test kits, poor case management and vaccine resistance are all serious challenges.
- The measles outbreak in Central Africa Republic is declining in line with reactive vaccination campaigns, which is to be welcomed. However, there is no room for complacency in a context of diversion of resources to COVID-19 and continuing insecurity in the region.
- The Ebola virus disease outbreak in Équateur Province, Democratic Republic of the Congo, appears to have slowed, with no new confirmed cases and deaths reported recently. However, while there are still confirmed cases at large in the community and difficulties with safe and dignified burials, transmission risks remain. Challenges remain around inadequate funding and personnel for the response, particularly in hotspot areas, and problems with screening at points of control.

Proposed actions

- Democratic Republic of the Congo needs to urgently resolve the issues around the strike of response workers in Kinshasa in order to strengthen response in the worst affected region of the country. In addition, serious attention needs to be paid to ensuring that people adhere to physical distancing, wearing cloth masks in public, hand hygiene and cough etiquette.
- Authorities and partners in Cameroon must urgently address the major challenges in the cholera response, particularly weak coordination mechanisms. Effective response mechanisms are needed to bring this outbreak under control, particularly in the context of COVID-19 and diversion of resources to this outbreak.
- Central African Republic needs to continue with vaccine campaigns for vaccine preventable diseases and reinforce the mechanisms for ensuring that these campaigns reach targeted populations in order to prevent further outbreaks of diseases such as measles.
- Even though the Ebola virus disease outbreak appears to be slowing, robust response activities are still required, particularly around positive cases at large in the community and challenges around safe and dignified burials. The response to EVD should continue to be linked to existing COVID-19 activities in order to use resources efficiently. These efforts should be encouraged and supported nationally and by partners.

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
New Events									
Burkina Faso	Hepatitis E	Ungraded	9-Oct-20	1-Jul-20	25-Sep-20	71	8	10	14.10%
<p>From 1 July to 25 September 2020, a total of 71 cases of febrile and non-febrile jaundice and 10 deaths have been officially recorded by the national authorities, including 58 cases in the health district of Barsalogo, in the North Center region of Burkina Faso: 14 cases were evacuated from the Medical facility of Barsalogo to the regional hospital (CHR) of Kaya. The 10 deaths are reported in pregnant women and postpartum women. In terms of laboratory results, 8 out of 9 samples were tested IgM positive for Hepatitis E in a hospital laboratory in Montpellier, France on 25 September 2020 and one sample tested IgM positive for yellow fever at LNR-FHV (Center Muraz, Bobo Dioulasso), awaiting confirmation from the Institut Pasteur in Dakar in Senegal. To date, there are 71 reported cases of jaundice. The Barsalogo health district alone records 83% (58 cases) of all notified cases</p>									
Mauritania	Rift Valley Fever	Ungraded	9-Oct-20	4-Sep-20	28-Sep-20	36	36	13	36.10%
<p>The Ministry of Health notified the WHO of 8 cases, including 7 deaths of Rift Valley Fever (RVF) (PCR positive) in breeders, which occurred between 13 September 2020 and 1 October 2020, in several localities in the departments of Tidjikja and Moudjéria (Tagant region), Guerou department (Assaba region) and Chinguetty department (Adrar region). The 7 deaths occurred in the Tagant region (5) and in the Assaba region (2). All these deaths occurred among hospitalized cases with fever and haemorrhagic syndrome (petechiae, gingivorrhagia) and vomiting, in the 3 departments of the region. As of 5 October 2020, a total of 88 samples of suspected cases have been sent to the National Institute for Public Health Research (INRSP): 36 were positive (by PCR and Elisa), 46 were negative. Six samples are still pending for results. Confirmed cases have been reported in 9 regions (Adrar, Assaba, Brakna, Hodh Elchargui, Hodh El Gharby, Tagant, Trarza, Gorgol et Noukchott Sud). The continuous surveillance of RVF at the animal level has confirmed the outbreaks in the Assaba, Tagant, Brakna, Trarza and Hodh Elgharbi regions. The results of 165 samples taken in the period from September 16 to 23, 2020, show that 33 camels, 4 small ruminants and 6 cattle were positive.</p>									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	11-Oct-20	53 072	53 072	1 801	3.40%
<p>From 25 February to 11 October 2020, a total of 53 072 confirmed cases of COVID-19 with 1 801 deaths (CFR 3.4%) have been reported from Algeria. A total of 37 274 cases have recovered. The majority of the cases have been reported from the Wilaya of Blida.</p>									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	11-Oct-20	6 366	6 366	218	3.40%
<p>The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 11 October 2020, a total of 6 366 confirmed COVID-19 cases have been reported in the country with 218 deaths and 2 743 recoveries.</p>									
Angola	Measles	Ungraded	4-May-19	12-Dec-19	16-Sep-20	1 252	1 025	5	0.40%
<p>From 1 January 2020 to 16 September 2020, Angola reported a total measles suspected case count of 1 252 from 56 districts in 15 provinces, mostly from Luanda Province. There are 1 025 confirmed measles (lab and epi-link). There was a total of 5 deaths reported from 1 January to 1 July in 14 provinces across Angola; there is no further information regarding deaths for this current period. 80% of the confirmed cases are <5 years of age; 14% are aged 5-9 years; 3% are 10-14 years of age. 15 out of 18 provinces are affected. The most affected provinces are Cabinda, Malanje, Bie, Luanda, Huambo and Uige.</p>									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	7-Oct-20	133	133	0	0.00%
<p>No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There have been three cases reported in 2020 so far. The total number of 2019 cases remain 130. These cases are from several outbreaks which occurred in 2019.</p>									
Benin	Cholera	Ungraded		17-Aug-20	27-Sep-20	198	1	5	2.50%
<p>As of Week 39, Benin reported a total of 198 suspected cases of cholera. There is only 1 culture confirmed case and 5 deaths reported for 2020.</p>									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	6-Oct-20	2 411	2 411	41	1.70%
<p>The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 6 October 2020, a total of 2 411 cases have been reported in the country with 41 deaths and 2 287 recoveries.</p>									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	7-Oct-20	10	10	0	0.00%
<p>No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Two cases have been reported in 2020, with 8 cases reported in 2019. These cases are all linked to the Jigawa outbreak in Nigeria.</p>									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	5-Oct-20	3 219	3 219	18	0.60%
<p>On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 5 October 2020, a total of 3 219 confirmed COVID-19 cases were reported in the country including 18 deaths and 834 recovered cases.</p>									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-Jul-20	-	-	-	-
<p>Since 2015, the security situation in the Sahel and the East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement leading to a total of 978 744 internally displaced persons registered as of 31 July 2020 in all 13 regions in the country. The presence of jihadist groups and self-defence units have created an increasingly volatile security situation. Humanitarian access is restricted in Sahel, North, Centre-North and East regions, while IDP numbers are rising, along with protection concerns. From January to the end of July 2020, a cumulative number of 1 217 security incidents were reported, 19 of which were directed against humanitarian actors. Health services are severely affected.</p>									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	7-Oct-20	2 241	2 241	60	2.70%
<p>Between 9 March and 7 October 2020, a total of 2 241 confirmed cases of COVID-19 with 60 deaths and 1 506 recoveries have been reported from Burkina Faso.</p>									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2		1-Jan-19	23-Sep-20	10	10	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. A total of 10 cases of circulating vaccine-derived poliovirus have been reported from Benin since 2019 with no new cases reported in 2020. The last case had onset of paralysis on 10 May 2020. All cases were linked to the Jigawa outbreak in Nigeria.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	11-Oct-20	525	525	1	0.20%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 11 October 2020, the total confirmed COVID-19 cases is 525, including one death and 497 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	4-Nov-19	9-Aug-20	989	989	0	0.00%
Burundi has been experiencing measles outbreaks since November 2019 in camps hosting Congolese refugees and the disease has recently been spreading in the host community in the district of Citiboke. As of 9 August 2020, Burundi has reported a total of 989 confirmed measles cases of which 154 are lab-confirmed and the rest were clinically compatible cases and epidemically linked. The current outbreak is affecting the following districts: Bukinyanya (Cibitoke province), Ngozi (Ngozi province), Bujumbura Nord (Bujumbura province). There have been no deaths reported.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	18-Aug-20	-	-	-	-
Cameroon continues to face a humanitarian crisis in the Far North Region linked to the terrorist attacks by the Boko Haram group resulting in significant population displacement. More than 6 000 internally displaced people, refugees and host communities reportedly left their homes in and around Kordo and Gadero in Cameroon's Far-North to seek protection and refuge in the Kolofata district last week. It is alleged that this pre-emptive displacement of people followed the dismantling and subsequent relocation of military outposts from Kordo and Gadero to Grea last week. Since the beginning of the humanitarian crisis in 2014, more than 500 000 people were displaced in Cameroon's Far-North according to latest figures available from OCHA (July 2020). The Minawao Refugee Camp in the Mokolo Health District continues to host Nigerian refugees, with spontaneous refugee arrivals being recorded.									
Cameroon	Humanitarian crisis (NW & SW)	Grade 2	1-Oct-16	27-Jun-18	11-Aug-20	-	-	-	-
The humanitarian situation in the Northwest and Southwest (NW & SW) regions of Cameroon continues to deteriorate with rising tensions between separatists and military forces despite calls for a COVID-19 ceasefire by the UN Secretary General. Attacks against aid workers are increasing. On 17 June 2020, an attempted abduction of NGO workers in Fon Baba, followed by the killing of an MSF aid worker in Kumba on 10 July 2020 were reported. On 7 August 2020, an aid worker with the Community Initiative for Sustainable Development (COMINSUD) in Batibo Subdivision (Northwest region) was kidnapped and killed by unidentified individuals. Shelter, NFI (non-food items), protection and food continue to be the most urgent needs of the displaced populations.									
Cameroon	Cholera	Ungraded	1-Mar-19	1-Jan-20	27-Sep-20	1 846	39	86	4.70%
Detailed update given above.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	9-Oct-20	21 333	21 333	423	2.00%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 12 October 2020, a total of 21 333 cases have been reported, including 423 deaths and 20 153 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-20	9-Aug-20	1 423	1 423	13	0%
The measles outbreak is improving in Cameroon. Since 1 January 2020 to date, a total of 1 423 confirmed cases and 13 deaths have been reported in the country. Twenty-nine out of 79 health districts that were affected have not reported cases in the last four epidemiological weeks. A total of 13 deaths were reported to date in six districts, namely Kribi (4 cases), Gashiga (2 cases), Betaré Oya (1 case), Kolofata (2 cases), Awae (1 case), Ngaoundal (1 case), Ngong (1 case), Guidiguis (1 case). Fifty percent of cases are aged between 9 to 59 months.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	23-Sep-20	4	4	0	0.00%
One cVDPV2 positive environmental sample was reported in Sud province. Four cVDPV2 cases have been reported from the country so far in 2020.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	11-Oct-20	7 072	7 072	75	1.10%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 11 October 2020, a total of 7 072 confirmed COVID-19 cases including 75 deaths and 5 981 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	4-Aug-20	-	-	-	-
Civil unrest and food insecurity in most parts of the country, including major cities, continue to cause a complex humanitarian situation. The security situation remains tense with the persistence of inter-ethnic tensions within rival armed groups in the Northeast of the country, mainly in Ndele, Birao, Batangafo and Bria. In the first half of 2020, 192 incidents affecting humanitarian workers were recorded, including 2 deaths and 17 injured. Around 659 000 people are internally displaced in Central Africa.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	7-Oct-20	4 854	4 854	62	1.30%
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 7 October 2020, a total of 4 854 confirmed cases and 62 deaths 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-19	20-Sep-20	28 633	443	137	0.50%
Detailed update given above.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	7-Oct-20	23	23	0	0.00%
No case of cVDPV2 case was reported this week. There have been 2 cases reported in 2020 so far and 21 cases in 2019 from several outbreaks giving a total of 23 cases.									
Chad	Chikungunya	Grade 1	27-Aug-20	28-Aug-20	3-Oct-20	34 445	22	1	0.00%
From 14 August to 3 October 2020, there have been 34 445 cases of Chikungunya recorded and 1 death. The age range most affected is 15 years of age and older, and females are more affected than males. Cases have been confirmed in health districts of Abéché (Ouaddai Province), Biltine (Wadi Fira Province), and d'Abdi, Gozbeida (Sila Province). More than three quarters of patients develop severe fevers, headaches, excruciating and disabling joint pain; a third of these patients developed pruritic maculopapular rashes.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	11-Oct-20	1 304	1 304	92	7.10%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 11 October 2020, a total of 1 304 confirmed COVID-19 cases were reported in the country including 92 deaths and 1 115 cases who have recovered.									
Chad	Measles	Ungraded	24-May-18	1-Jan-19	16-Aug-20	8 494	357	39	0.50%
In week 33 (week ending 16 August 2020), 11 suspected cases were reported. No districts were in the epidemic phase during the week. Since the beginning of the year, a total of 8 494 suspected cases and 39 deaths (CFR 0.5%) have been reported from Beboto, Kyabe, Goundi, Korbol, Kelo and Guelao.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	7-Oct-20	80	80	0	0.00%
Three cVDPV2 cases were reported; two in Logone Occidental and one in Logone Oriental. There are 69 cases from two different outbreaks in the country, one being the Jigawa outbreak. There were 11 cases reported in 2019.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	11-Oct-20	495	495	7	1.40%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 11 October 2020, a total of 495 confirmed COVID-19 cases, including 7 deaths and 475 recoveries were reported in the country.									
Congo	Chikungunya	Grade 1	22-Jan-19	1-Jan-20	2-Aug-20	71	0	0	0.00%
No suspected case of chikungunya was reported in week 31 (week ending 2 August 2020). From week 1 to week 31, 71 cases with no deaths were reported in six departments: Kouilou (31 cases), Bouenza (8 cases), Brazzaville (9 cases), Lekoumou (1 case), Plateau (13 cases) and Pool (9 cases). From weeks 1 to 52 of 2019, a total of 11 600 cases have been reported in 44 out of the 52 health districts in 10 out of 12 departments. The departments of Bouenza (3 102 cases), Kouilou (2 844 cases) and Niari (2 589) were the most affected by the outbreak accounting for 74% of cases reported since the beginning of the outbreak.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	5-Oct-20	5 118	5 118	90	1.80%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 5 October 2020, a total of 5 118 cases including 90 deaths and 4 395 recovered cases have been reported in the country.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	3-Oct-20	19 849	19 849	120	0.60%
Since 11 March 2020, as of 3 October 2020, 19 849 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 120 deaths, and a total of 19 421 patients have recovered.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	7-Oct-20	29	29	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The total number of cVDPV2 cases reported is 29.									
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-16	17-Apr-17	20-Sep-20	-	-	-	-
The Democratic Republic of the Congo continues to experience a complex humanitarian crisis involving armed conflicts and inter-community tension resulting in large numbers of people in need of humanitarian assistance. Population movement due to armed clashes and inter-community fighting continues to be reported in North-Kivu, Tanganyika, Ituri, Kasai Central and South-Kivu provinces. In Ituri, According to an alert from UNICEF Rapid Response (UniRR) on 18 September, 2020, approximately 9 000 people including 1 500 South Sudanese refugees were forced to move from several villages (Kindio, Ukaraba, Liga, Ulembere, etc.) to the health (AS) of Iri and Rikazu (ZS of Adi, Aru Territory). In North Kivu province, a resurgence of violence between two factions of Nduma Defense of Congo rénové de Guidon (NDF-R), was reported to Pinga in the Walikale territory since September 14, 2020. Clashes forced the population of the Nkasa and Katanga districts, estimated at 24 542 inhabitants, to move, some of whom took refuge in the forest surrounding the city of Pinga and others in the general hospital. In Kasai Central, Heavy torrential rain was observed in the health zones (ZS) of Dibaya, Tshikula and Bunkonde. It caused important material damage including the destruction of roofs, houses, churches and schools in Dibaya. In addition, more than 300 homeless families in the villages of Tshikuma and Kapena (ZS Bukonde), with the collapse of 289 houses causing 10 wounded were registered. The displaced persons are in need of basic humanitarian assistance, including access to food, clean water, non-food items, shelters and health care assistance.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	9-Aug-20	13 421	-	190	1.40%
The cholera outbreak in the Democratic Republic of Congo is improving. During week 32 (week ending 9 August 2020), a total of 246 cases of cholera and 2 deaths were notified in 26 health zones (7 provinces) in the country. From week 29 to 32 of 2020, 81.5% of the cases have been reported from two provinces: North-Kivu and South-Kivu. Between week 1 and week 52 of 2019, a total of 30 304 cases including 514 deaths (CFR 1.7%) were notified from 23 out of 26 provinces.									

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	COVID-19	Grade 3	10-Mar-20	10-Mar-20	3-Oct-20	10 760	10 759	274	2.50%
Detailed update given above.									
Democratic Republic of the Congo	Ebola virus disease	Grade 2	31-May-20	17-May-20	29-Aug-20	128	119	53	41.40%
Detailed update given above.									
Democratic Republic of the Congo	Measles	Grade 2	10-Jan-17	1-Jan-20	6-Sep-20	70 899	1 317	1 026	1.40%
The ongoing measles outbreak in Democratic Republic of the Congo is showing a sustained decline in new cases and deaths, which started in week 49 of 2019 (week ending 4 December 2019), continued to week 6 of 2020 (week ending 8 February 2020), followed by a slight increase from weeks 11-13 (week ending 28 March 2020) with a declining trend thereafter. From 1 January 2020 to 6 September 2020, 70 899 suspected cases have been reported, including 1 026 deaths (case fatality ratio 1.4%). This is a decrease compared to the same period in 2019, when there were 184 289 suspected cases and 3 650 deaths reported.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	13-Sep-20	4 594	39	171	3.70%
During week 32 (week ending 13 August 2020), a total of 189 suspected cases of monkeypox with seven deaths were reported across the country compared to 258 cases the preceding week. Between week 1 and week 37, a total of 4 594 suspected cases including 171 deaths (CFR 3.7%) were reported in 127 health zones from 17 out of 26 provinces in the country. During the same period in 2019, 3 794 suspected cases and 73 deaths (CFR 1.9%) were reported in 120 health zones from 16 provinces while a total of 2 850 suspected cases (CFR 2.1%) were reported in 2018. One major challenge to the current emergency includes acquiring the required funding to respond to all the multiple ongoing outbreaks in the country.									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-20	9-Aug-20	91	-	17	18.70%
Ituri province has notified an upsurge of plague cases in the health zone of Rethy. From 11 June to 9 August 2020, a total of 73 cases with 10 deaths (CFR 13.6%) were notified in 5 out of 22 health areas of Rety health zone. Plague is endemic in Ituri province. Since the beginning of 2020 to date, Ituri Province has reported a total of 91 cases and 17 deaths (CFR 18.7%) in 5 health zones, namely Aungba, Linga, Rethy, Aru, Logo and Kambala. In 2019, from week 1 to 52, a total of 48 cases of bubonic plague including eight deaths have been reported in the country.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	7-Oct-20	159	159	0	0.00%
One cVDPV2 positive environmental sample was reported in Kinshasa this week. The total number of cases reported in 2020 is 50, while the 2019 case count remains 88. There were 20 cases reported in 2018. The country continues to be affected by several other genetically-distinct cVDPV2s (notably in Kasai, Kwilu, Kwango and Sankuru provinces).									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	10-Oct-20	5 063	5 063	83	1.60%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 10 October 2020, a total of 5 063 cases have been reported in the country with 83 deaths and 4 894 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	10-Oct-20	414	414	0	0.00%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 10 October 2020, a total of 398 confirmed COVID-19 cases with no deaths were reported in the country. A total of 372 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	11-Oct-20	5 669	5 669	113	2.00%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 11 October 2020, a total of 5 669 cases have been reported in the country including 5 310 recoveries. A total of 113 associated deaths have been reported.									
Ethiopia	Cholera	Ungraded	14-May-19	12-May-19	6-Sep-20	14 728		257	1.70%
In week 36 (week ending 6 September 2020), 171 new suspected cases with one associated death were reported. Since the beginning of the year, a total of 14 728 cases with 257 associated deaths have been reported from 12 woredas in Sidama, SNNP and Oromia regions.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	11-Oct-20	84 295	84 295	1 287	1.50%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 84 295 cases of COVID-19 as of 11 October 2020, 1 287 deaths and 38 316 recoveries have been reported.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-19	26-Apr-20	1 873		-	-
In week 17 (week ending 26 April 2020), the measles outbreak is still ongoing in Oromia, Amhara and Tigray regions. A total of 575 suspected cases and 7 deaths were reported during the week with the majority of suspected cases being reported from Oromia region.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	7-Oct-20	29	29	0	0.00%
No cVDPV2 cases were reported this week. So far, there have been 29 cases reported in Ethiopia.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	7-Oct-20	8 815	8 815	54	0.60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 7 October 2020, a total of 8 815 cases including 54 deaths and 8 164 recovered have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	2-Oct-20	3 594	3 594	115	3.20%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 2 October 2020, a total of 3 594 confirmed COVID-19 cases including 115 deaths and 2 226 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	1-Oct-20	46 829	46 829	303	0.60%
On 12 March 2020, the Ministry of Health announced two confirmed COVID-19 cases in the country. As of 1 October 2020, a total of 46 829 cases including 303 deaths and 46 060 recoveries have been reported in the country.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	7-Oct-20	29	29	0	0.00%
No cVDPV2 cases were reported this week. So far, there have been 11 cases reported in 2020, while the total number of 2019 cases remains 18.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	11-Oct-20	11 022	11 022	69	0.60%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 11 October 2020, a total of 11 022 cases including 10 324 recovered cases and 69 deaths have been reported in the country.									
Guinea	Lassa Fever	Ungraded	11-Jul-20	11-Jul-20	4-Aug-20	1	1	1	100.00%
A case of Lassa fever was confirmed on 11 July 2020 by the Haemorrhagic Fever laboratory in Guéckédou. The case patient is a 28-year-old, female, 22 weeks of pregnancy, living in the village of Kondian, in the rural district of Koundou Lengo Bengou. She fell ill on 07 June 2020 with chest pain and no history of travel or being in contact with a foreigner a month before her illness. She consulted at Koundou health centre on 10 July 2020, with fever, cough, myalgia, diarrhoea, vomiting, sore throat, and chest pain. The malaria RDT performed was positive. She was treated for malaria and transferred to Guéckédou hospital the same day, where the diagnosis of haemorrhagic fever was made. A diagnostic test for haemorrhagic fever performed at the Haemorrhagic Fever laboratory in Guéckédou was positive for lassa fever. The patient died the next day. A dignified and secure burial was carried out by the Red Cross on 12 July 2020.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-19	5-Jun-20	5 644	366	14	0.30%
During week 23 (week ending in 5 June) there has been a total of 5 644 cases with 366 confirmed and 14 deaths in 2020. During week 44 (week ending 3 November 2019), 127 suspected cases of measles were reported. From week 1 to 44 (1 January - 3 November 2019), a total of 4 690 suspected cases including 18 deaths (CFR 0.4%) have been reported. Of the 4 690 suspected cases, 1 773 were sampled, of which 1 091 tested positive for measles by serology. Three localities in three health districts are in the epidemic phase, namely, Wanindara in Ratoma health district, Dounet in Mamou health district and Soumpoura in Tougue health district.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	23-Sep-20	11	11	0	0.00%
Three cVDPV2 cases were reported; two in Kankan and one in N'zerekore. There are now 11 cVDPV2 cases in the country. Previously, 8 cVDPV2 cases were reported in Kankan province making them the first in the country. On 22 July 2020, WHO was notified by the Global Polio Laboratory Network of cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) from Guinea. These viruses were isolated from five acute flaccid paralysis (AFP) cases with onsets of paralysis between 22 March and 28 May 2020, from two separate districts in Kankan province (Kankan district, Mandiana district).									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	6-Oct-20	2 385	2 385	40	1.70%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 06 October 2020, the country has reported 2 385 confirmed cases of COVID-19 with 1 728 recoveries and 40 deaths.									
Kenya	Cholera	Ungraded	21-Jan-19	1-Jan-20	28-Aug-20	711	27	13	1.80%
The outbreak is currently active in Garissa and Turkana counties. A cholera outbreak has been reported in five counties; Garissa, Wajir, Turkana, Murang'a and Marsabit since the beginning of 2020. Cumulative cases are 711 with 13 deaths (CFR 1.9%). The Wajir, Murang'a, Marsabit and Garissa outbreaks are now controlled. The outbreak is active in Turkana County. Turkana County is reporting the fourth wave of the outbreak this year, with 42 cases, so far and a total of 279 cases with 1 death (CFR 0.4%).									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	11-Oct-20	41 546	41 546	766	1.80%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 cases in the country. As of 11 October 2020, 41 546 confirmed COVID-19 cases including 766 deaths and 31 000 recoveries have been reported in the country.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	15-Sep-20	293	272	7	2.40%
Since 1 January 2020, a total of 293 (suspected and confirmed) visceral leishmaniasis cases have been reported in Marsabit, Garissa, Kitui and Baringo Counties. No new cases were reported in the past week in any affected counties.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	15-Sep-20	529	49	2	0.40%
As of 15 September 2020, a total of 529 measles cases including 49 confirmed cases and 2 deaths have been reported in Pokot North sub county, West Pokot county since 20 October 2019. The outbreak is active in five counties; West Pokot, Garissa, Wajir, Tana River and Kilifi.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	8-Oct-20	1 767	1 767	40	2.30%
On 13 May 2020, WHO was notified of the first confirmed COVID-19 case in Lesotho. As of 8 October 2020, 1 767 cases of COVID-19 have been reported, including 926 recoveries and 40 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	10-Oct-20	1 370	1 370	82	6.00%
From 16 March to 10 October 2020, a total of 1 370 cases including 82 deaths and 1 247 recoveries have been reported from all 15 counties of Liberia. Montserrado County, which hosts the country's capital city, remains at the epicenter of the outbreak.									
Liberia	Lassa fever	Ungraded	23-Jan-19	1-Jan-20	20-Sep-20	48	48	21	43.80%
No new confirmed case was reported during week 38 (week ending 20 September 2020). Of 151 suspected cases reported across the country from 1 January to 20 September 2020, 48 were confirmed. A total of 21 deaths (CFR 43.8%) have been reported among the confirmed cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	30-Aug-20	805	93	3	0.40%
In week 35 (week ending 30 August 2020), 11 suspected cases were reported from Nimba (3), Grand Gedeh (1), Cape Mount (2), Lofa (1), Margibi (1), Rivercess (1), Bong (1) and Sinoe (1) counties. Since the beginning of 2020, 805 cases with 3 associated deaths have been reported across the country, of which 93 are laboratory-confirmed, 312 are epi-linked, and 312 are clinically confirmed.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	11-Oct-20	16 718	16 718	237	1.40%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 11 October 2020, a total of 16 718 cases have been reported in the country, out of which 16 012 have recovered and 237 deaths reported.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	10-Oct-20	5 821	5 821	180	3.10%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 10 October 2020, the country has a total of 5 821 confirmed cases with 180 deaths and 4 647 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	13-Aug-20	-	-	-	-
The security situation continues to worsen as violence spreads from the north to the more populated central regions of the country. The presence and activities of armed groups not included in the 2015 agreement continues to influence the security situation, raising challenges for humanitarian access and safety. The country continues to record incidents targeting aid workers. Certain humanitarian operations in Timbuktu and Menaka regions were suspended as a result of violent security incidents. The country has had heavy rains since the end of June 2020, which have caused flooding in Mopti, Gao, Segou and Sikasso regions affecting over 13 200 people, including 5 400 IDPs.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	11-Oct-20	3 286	3 286	132	4.00%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 11 October 2020, a total of 3 286 confirmed COVID-19 cases have been reported in the country including 132 deaths and 2 527 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-19	27-Sep-20	733	382	2	0.30%
During week 32 (week ending 9 August 2020), two suspected cases of measles were reported from three regions in the country. Since 1 January 2020, 682 suspected cases, 353 of which were confirmed have been reported. No associated deaths have been reported so far.									
Mali	Yellow fever	Ungraded	3-Dec-19	1-Jan-20	4-Oct-20	134	4	1	0.70%
As of 4 October 2020, a total of 134 suspected cases have been reported including 4 confirmed cases and 1 death. The cumulative epidemiological situation in 2019 included 78 suspected cases including four 4 confirmed cases and three deaths (CFR 75%). Confirmed cases of yellow fever were reported from the Sikasso and Koulikoro regions.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	10-Oct-20	7 550	7 550	163	2.20%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 11 October 2020, a total of 7 550 cases including 163 deaths and 7 274 recovered cases have been reported in the country.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	11-May-20	2-May-20	11-May-20	1	1	0	0.00%
On 11 May 2020, one confirmed case of Crimean-Congo haemorrhagic fever was reported from the Moughataa of Mederdra in the district of Tiguint in the wilaya of Trarza. The case is a 60-year-old butcher from Tiguent who presented with symptoms of fever, fatigue, headaches and epistaxis, with onset on 2 May 2020. He had a history of handling meat carcasses but no recent travel history. He presented at a health facility of 7 May 2020 and a sample was collected for testing following the suspicion of a viral haemorrhagic fever disease. The case-patient was evacuated the same day in the Emergency Department in Nouakchott for further care. On 8 May 2020, the case was confirmed with CCHF by RT-PCR from the INRSP and transferred to the infectious diseases department where he was isolated and treated.									
Mauritania	Dengue	Ungraded	11-May-20	3-May-20	11-May-20	7	7	0	0.00%
On 3 May 2020, two suspected cases of dengue fever were admitted to hospital in Mauritania. On May 4 2020, it was found that the majority of consultations at the hospital had a history of unexplained fever. Thus, samples from the two suspected cases were collected and sent to the National Institute of Research in Public Health (INRSP). On 5 May 2020 the 2 cases were confirmed by RT-PCR positive for Dengue virus with DENV-1 serotype. The cases were discharged from hospital and declared cured after symptomatic treatment. A rapid investigation was carried out at city level and a further 5 additional cases (4 women and 1 man) distributed in 4 districts of Atar (Atar, Tineri, Aghnemrite and Edebaye) were detected.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	6-Oct-20	395	395	10	2.50%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 6 October 2020, a total of 395 confirmed COVID-19 cases including 10 deaths and 371 recovered cases have been reported in the country.									
Mozambique	Cholera	Ungraded	20-Feb-20	31-Jan-20	12-Jun-20	2 625	-	21	0.80%
A cholera outbreak is ongoing in Mozambique. From 11 January till 12 June 2020, a total of 2 625 cases including 21 deaths (CFR 0.8%) were reported in two provinces, namely Nampula (1 648 cases and 3 deaths) and Cabo Delgado (997 cases and 15 deaths). In total, 11 districts of Nampula province, namely Nampula City, Mogovolas, Memba, Nacala-à-Velha, Nacaroa, Namialo, Ribawé, Monapo, Larde, Angoche and Malema have been affected since the beginning of the outbreak and only two of them remain currently active (Monapo and Nampula city). In Cabo Delgado province, four districts, namely Mocimboa de Praia, macomia, Ibo and Pemba city are affected.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	11-Oct-20	10 001	10 001	71	0.70%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 11 October 2020, a total of 10 001 confirmed COVID-19 cases were reported in the country including 71 deaths and 7 203 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-20	22-Jul-20	862	140	0	0.00%
There are measles outbreaks in six districts of Zambezia. The outbreak was declared in March 2020 at the Nauela Administrative Post, Alto Molócuè district. As of week 21, there were 862 suspected cases reported, 711 suspected cases tested, 140 IgM+ for measles, no epi-linked cases reported, and no deaths. So far there are 67 cases from Nampula, 18 from Cabo Delgado, 17 from Zambezia and 13 from Niassa provinces. 42% are <5 years old; 48% are aged 5-14 years.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	10-Oct-20	11 936	11 936	128	1.10%
Two cases of COVID-19 were confirmed in Namibia on 14 March 2020. As of 10 October 2020, a total of 11 936 cases have been reported in the country including 9 817 cases who recovered with 128 deaths.									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	6-Sep-20	10 072	2 066	65	0.60%
In weeks 35 and 36 (24 August - 06 September 2020), a total of 19 HEV cases were reported country-wide. Since the beginning of the outbreak in December 2017, a cumulative total of 10 072 cases (2 066 laboratory-confirmed, 4 520 epidemiologically linked, and 1 368 suspected cases) including 65 deaths (CFR 0.7%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 5 071 (50%) of reported cases, followed by Erongo 1 864 (19%) since the outbreak began.									
Niger	Floods	Ungraded	9-Sep-20	9-Sep-20	1-Aug-20			3	-
In August 2020, widespread flooding caused by heavy rain and by overflow of the Niger river has affected several regions of Nigeria (Maradi most affected, Agadez, Niamei and Tahoua regions), leading to fatalities, people displaced and severe damage. Floods are reaching record breaking levels of 700 cubic centimetres - the highest was in 2019 with 639 cubic centimetres. As of 9 September 2020, around 39 655 households have been affected, with 342 263 victims. The WHO is supporting the country office in assessing the public health impact of flooding including access to essential lifesaving health services, surveillance of possible disease outbreaks and participating in joint needs assessments.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	13-Aug-20	-	-	-	-
The security situation continues to worsen in border areas of Burkina Faso, Mali and Nigeria following armed groups' attacks in the region. This security situation is hampering humanitarian access and affecting access to basic health and social services. Members of an unidentified armed group attacked seven humanitarians working for ACTED and their guide on 9 August 2020, killing all eight people. They were visiting a wildlife reserve near Kouré, in Tillabéri region. Niger is also facing flooding due to heavy rains, particularly in the western and central regions. As of 13 August 2020 over 88 000 people have been affected by floods, 33 people killed, and over 9 100 houses destroyed. According to OCHA statistics, 2.9 million people are in need of humanitarian assistance, 190 248 people are internally displaced, and 217 858 are refugees in the country. Food security remains a key challenge in Niger, particularly for displaced populations and host communities in Diffa, Tahoua, and Tillabéri regions.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	11-Oct-20	1 201	1 201	69	5.70%
From 19 March to 4 October 2020, a total of 1 201 cases with 69 deaths have been reported across the country. A total of 1 123 recoveries have been reported from the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-20	31-May-20	2 079	241	4	0.20%
From week 1 to 22 of 2020, Niger reported a total measles suspected case count of 2 079 of which there were 241 lab confirmed (IgM positive) and 4 deaths in 8 regions: Agadez (50 cases, 0 deaths), Diffa: (4 cases, 0 deaths), Dosso (27 cases, 0 deaths), Maradi (101 cases, 2 deaths), Niamey (23 cases, 0 deaths), Tahoua (62 cases, 1 death), Tillabéri (67 cases, 0 deaths) and Zinder (167 cases, 1 death). In 2019 a total of 10 207 suspected measles cases were reported from eight regions in the country. So far, 72 districts have been affected by outbreaks in 2020.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	31-Aug-20	-	-	-	-
The humanitarian crisis in the North-eastern part of Nigeria persists, with continued population displacement from security compromised areas characterized by overcrowding in many camps in the region. Health Sector partners are supporting the government led COVID-19 response across the three states, including support through joint resource mobilization activities, overall coordination and monitoring of the response in the northeast.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	11-Oct-20	60 266	60 266	1 115	1.90%
The Federal Ministry of Health of Nigeria announced the first confirmed case of COVID-19 in Lagos, Nigeria on 27 February 2020. As of 11 October 2020, a total of 60 266 confirmed cases including 1 115 deaths and 51 735 recovered cases have been reported in the country.									
Nigeria	Lassa fever	Ungraded	24-Mar-15	1-Jan-20	27-Sep-20	1 109	1 095	241	21.70%
A total of seven new confirmed cases with one death were reported from Ondo (five cases with one death) and Edo (two cases) state in Nigeria in week 39 (week ending 27 September 2020). From 1 January to 27 September 2020, a total of 1 109 cases (1 095 confirmed and 14 probable) with 241 deaths (CFR 21.7%) have been reported from 129 Local Government Areas across 27 states in Nigeria. A total of eight contacts are currently being followed.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-20	7-Jun-20	420		14	3.30%
Between epi weeks 1 - 23 (week ending 7 June 2020), a total of 420 suspected cases of measles were reported from 88 LGAs in 20 states and FCT. None was laboratory confirmed and 14 deaths were recorded.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	7-Oct-20	55	55	0	0.00%
No cVDPV2 cases was reported this week. There are 3 cVDPV2 cases in 2020 including one environmental case, and 18 cVDPV2 cases were reported in 2019. There have been 3 cVDPV2 cases in 2020, and there were 18 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	14-Sep-17	1-Jan-20	2-Oct-20	1 843	5	0	0.00%
In week 25, there were 18 suspected cases reported from 16 LGA in 12 states. Between week 1 and 40 in 2020, a total of 1 843 suspected cases including 12 presumptive positive cases and 5 confirmed cases were reported. In 2019, a total of 4 288 suspected cases were reported in 618 (83.1%) LGAs from all states in the country. Four states: Katsina, Kebbi, Bauchi and Benue had the highest attack rates. A total of 227 cases were confirmed in Nigeria and from IP Dakar and 231 deaths were reported.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	12-Oct-20	4 896	4 896	31	0.60%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 11 October 2020, a total of 4 896 cases with 31 deaths and 3 606 recovered cases have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	11-Oct-20	929	929	15	1.60%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 11 October 2020, a total of 929 confirmed cases of COVID-19 have been reported, including 15 deaths. A total of 892 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	4-Oct-20	15 094	15 094	312	2.10%
Between 2 March 2020 and 4 October 2020, a total of 15 094 confirmed cases of COVID-19 including 312 deaths have been reported from Senegal. A total of 12 805 cases have recovered.									
Senegal	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	10-Aug-20	10-Aug-20	12-Aug-20	1	0	0	0.00%
A case of Crimean Congo haemorrhagic fever was notified in Senegal on 12 August 2020, as part of the epidemiological surveillance system in the country, in a 27-year-old woman, an artist, living in the Pikine district in Dakar. At the time of diagnosis, she presented with a fever with haemorrhagic signs (gingivorrhagia, metrorrhagia). The preliminary information shows that she visited 3 public structures, including two private structures and one private dispensary since the beginning of the disease. This was in the context of post-tabaski where she handled raw meat. Investigations by a multidisciplinary team is ongoing to document this outbreak.									
Senegal	Dengue	Ungraded	1-Sep-20	7-Sep-20	7-Sep-20	1	1	0	0.00%
A 36-year-old male tested positive for dengue serotype 2 (IgM) on 14 August 2020 by IP Dakar. Onset of symptoms began 10 July 2020 including fever, headaches, and arthralgia. Initial case investigations from the 1 June 2020 onward had found 6 suspect cases who then tested negative for dengue. No other cases have been reported as of 21 September 2020. Response actions include vector control entomological investigation and ongoing case identification.									
Senegal	Yellow Fever	Ungraded	30-Jul-20	30-Jul-20	30-Jul-20	1	1	0	0.00%
A 5-year-old girl presented with fever and abdominal pain a few days prior to consultation on 1 July 2020. She had no history of YF vaccination. A sample was sent to IP Dakar and the patient tested positive for YF via seroneutralization technique.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	4-Oct-20	147	147	0	0.00%
The first COVID-19 confirmed cases were reported in Seychelles 14 March 2020. After 78 days of reporting no confirmed cases, a fishing vessel replacement crew arrived by air in Seychelles on 23 June 2020, a group of them having tested positive for COVID-19 at the point of entry. As of 11 October 2020, 147 cases have been confirmed for COVID-19 in total, including 143 recoveries and no deaths.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	11-Oct-20	2 300	2 300	72	3.10%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 11 October 2020, a total of 2 300 confirmed COVID-19 cases were reported in the country including 72 deaths and 1 725 recovered cases.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	20-Sep-20	692 471	692 471	17 780	2.50%
The first case of COVID-19 was reported in South Africa on 5 March 2020. As of 11 October 2020, there has been a cumulative total of 692 471 cases, with 17 780 deaths and 623 765 recoveries.									
South Sudan	Floods	Ungraded	1-May-20	1-May-20	1-Sep-20				-
From early May 2020, several counties reported above-average rainfall and rising water levels in the River Nile, which has resulted in massive flooding affecting an estimated 500 000 individuals in 22 affected counties. Furthermore, most of the flood-affected counties are already experiencing multiple shocks such as large-scale displacement, intercommunal violence, and disease outbreaks including Covid-19.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	31-Aug-20	-	-	-	-
The humanitarian situation has escalated in recent weeks with inter-communal fighting in several parts of the country. On 22 June 2020 fighting in Pibor town caused displacement toward Verteth and Labarab. A presidential committee has been set up in response to the recent escalation. Floods in Bor South and Panyijar counties also continue to cause displacement of over 13 000 persons.									
South Sudan	COVID-19	Grade 3	5-Apr-20	2-Apr-20	11-Oct-20	2 787	2 787	55	2.00%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 11 October 2020, a total of 2 726 confirmed COVID-19 cases were reported in the country including 55 deaths and 2 604 recovered cases.									
South Sudan	Hepatitis E	Ungraded	-	3-Jan-19	21-Jun-20	337	41	2	0.60%
The current outbreak in Bentiu UN Protection of Civilians (POC), which started at the beginning of 2019, has continued since the beginning of 2019 with five new cases reported in week 25 (week ending 21 June 2020). As of the reporting date, a total of 337 cases of hepatitis E including two deaths have been reported from South Sudan, mostly from Bentiu POC (325 total cases), and a total of 12 suspected cases including 4 confirmed cases in Lankein. The last case in Lankein was reported in week 25 (week ending on 23 June 2019).									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	21-Jun-20	916	50	2	0.20%
Between week 38 of 2019 to week 25 of 2020, a total of 916 suspected cases of measles of which 50 were laboratory-confirmed and 2 deaths (CFR 0.6%) have been reported. The outbreak has affected 6 counties (Tonj East, Magwi, Bor, Kapoeta East, Aweil East and Wau) and Bentiu Protection of Civilians Sites (POC).									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	20-Sep-20	509	509	21	4.10%
The Ministry of Health, Community Health Community Development, Gender, Elderly and Children (MOHCDGEC) in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 20 September 2020, a total of 509 cases have been reported in the country including 21 deaths. The last information on confirmed COVID-19 cases was shared by Tanzania mainland on 29 April 2020 and Zanzibar last shared information on on-going COVID-19 outbreak on 7 May 2020.									

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	11-Oct-20	1 940	1 940	49	2.50%
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 11 October 2020, a total of 1 940 cases including 49 deaths and 1 457 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	7-Oct-20	17	17	0	0.00%
No new case of cVDPV2 was reported during the past week. There have been nine cases so far in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Togo	Yellow Fever	Ungraded	4-Feb-20	3-Feb-20	24-Aug-20	3	1	1	33.30%
On 28 April 2020, WHO received information regarding a confirmed yellow fever case in Mango village, Oti district, Savanes region in the northern part of Togo. The results were confirmed at the yellow fever reference laboratory, Institut Pasteur in Dakar, Senegal by seroneutralisation. The case is a 55-year-old female with no travel or vaccination history for yellow fever. On 3 February 2020, she presented to a health facility with symptoms of fever with aches. The following day she developed jaundice and a blood sample was taken and transported to the national laboratory as yellow fever was suspected. The case-patient died three days later while receiving treatment. On 17 March, the sample tested IgM positive for yellow fever. On 22 March 2020, an in-depth multi-disciplinary investigation was conducted, and no additional case was detected.									
Uganda	Humanitarian crisis - refugee	Ungraded	20-Jul-17	n/a	15-Sep-20	-	-	-	-
Between 1 and 31 July 2020, a total of 3 056 new refugee arrivals crossed into Uganda from the Democratic Republic of the Congo (3 056), South Sudan and Burundi. Uganda hosted 1 425 040 asylum seekers as of 30 June 2020, with 94% living in settlements in 11 of Uganda's 128 districts and in Kampala. Most are women within the age group 18 - 59 years.									
Uganda	Cholera	Ungraded	11-May-20	29-Apr-20	7-Sep-20	1 488	17	6	0.40%
As of 7 September 2020, we have 1 488 cases, 483 in Moroto, 543 in Nabilatuk, 72 in Napak, 390 in Kotido. On 11 May 2020, a cholera outbreak was confirmed in Moroto district. The index case was a 17-year-old male patient from Natapar Kocuc Village, Loputuk parish, Nadunget Subcounty who was seen on 29 April 2020 with acute watery diarrhoea and severe dehydration. On 4 May 2020 more cases with similar symptoms from the same location with the index case were seen and cholera was suspected. On 11 May 2020, CPHL confirming <i>Vibrio cholerae</i> serotype O1 Inaba detected in 7 out of 8 stool samples that were collected. As of 12 June 2020, the cumulative number of cases is 682 including 6 deaths.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	10-Oct-20	9 801	9 801	93	0.90%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 10 October 2020, a total of 9 801 confirmed COVID-19 cases, 6 109 recoveries with 93 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	11-Oct-20	15 458	15 458	336	2.20%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 11 October 2020, a total of 15 458 confirmed COVID-19 cases were reported in the country including 336 deaths and 14 599 recovered cases.									
Zambia	Poliomyelitis (cVDPV2)	Grade 2	17-Oct-19	16-Jul-19	7-Oct-20	2	2	0	0.00%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) has been reported since the beginning of 2020. There were two cVDPV2 cases reported in 2019.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	9-Aug-20	338		1	0.30%
The anthrax outbreak is ongoing in Zimbabwe with a cumulative total of 338 cases and one death notified since the beginning of the outbreak in week 36 (week starting 6 May 2019) of 2019. This outbreak started in week 36, 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. Since 1 January to 9 August 2020, a total of 338 cases were reported. As of week 32, the two recent cases reported were from Gokwe North District (1) in Midlands Province and Buhera District (1) in Manicaland Province.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	11-Oct-20	8 011	8 011	230	2.90%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 11 October 2020, a total of 8 011 confirmed COVID-19 cases were reported in the country including 230 deaths and 6 504 cases that recovered.									
Closed Events									
Gabon	Yellow Fever	Ungraded	15-Apr-20	15-Apr-20	19-Sep-20	1	1	1	100.00%
One isolated yellow fever case from Tchibanga District (Nyanga Province) was notified on 3 February 2020 and confirmed on 14 April 2020 by Institut Pasteur of Dakar. The patient died on 15 April 2020. There have been no other cases reported since.									

†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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