

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 45: 1 – 7 November 2021

Data as reported by: 17:00; 7 November 2021



World Health
Organization

REGIONAL OFFICE FOR

Africa

WHO Health Emergencies Programme

2

New events

132

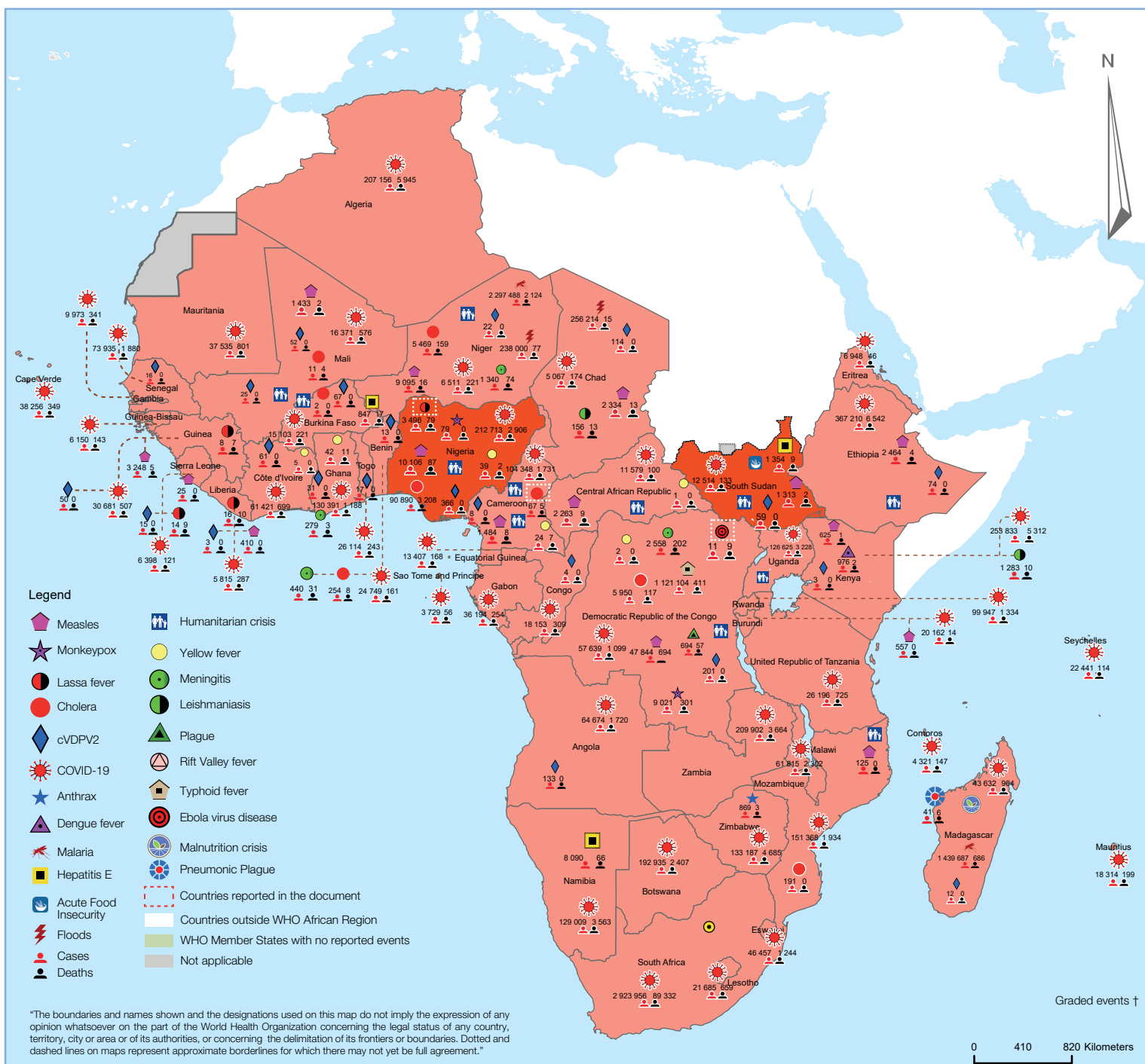
Ongoing events

119

Outbreaks

15

Humanitarian
crises



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

3

Grade 3 events

3

Protracted 3 events

28

Grade 2 events

4

Protracted 2 events

2

Grade 1 events

3

Protracted 1 events

45

Ungraded events

Overview

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This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 134 events in the region. This week's articles cover:

- [Ebola Virus Disease in the Democratic Republic of the Congo](#)
- [COVID-19 across the WHO African region](#)
- [Cholera in Cameroon](#)
- [Lassa fever in Nigeria](#)

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

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

Major issues and challenges include:

- There was no new confirmed Ebola virus disease case in the Democratic Republic of the Congo during the reporting week, however three probable cases were identified. Response activities continue amidst several challenges namely, weak community surveillance, poor communication, and inadequate logistics. The ongoing COVID-19 pandemic coupled with other emergencies, have overwhelmed the country's capacity to respond to this outbreak.
- All sub-regions in the WHO African region continue to see a lessening in COVID-19 case numbers and deaths. Nonetheless, seven countries still observed increases in new daily cases. Botswana has a very high incidence of transmission, as is Seychelles where COVID-19 vaccination coverage is very high. Even with the observed fall in cases and deaths, the threat of another resurgence during the end of year travel and festive season remains and WHO teams are ramping up preparedness measures, by strengthening laboratory sequencing capacities, securing additional oxygen supplies, and making sure oxygen plants are functioning.
- Sporadic cases of cholera have been reported in Cameroon since the beginning of 2021 although the outbreak was confirmed and declared by health authorities during the week ending 31 October. Five regions of Far North, North, Centre, Littoral and South-West have reported at least one suspected case of cholera this year. The outbreak is still active in the Centre and South-West regions and occurs in a regional epidemiological context where cholera outbreaks are already ongoing in some West African countries namely Nigeria, Mali, Niger, Benin, etc. The South-west region is a humanitarian zone due to the insecurity which has caused population displacements. In addition, cholera cases are reported in areas that are inaccessible, thus challenging response activities implementation.
- The Lassa fever outbreak in Nigeria continues to show a downward trend since epidemiological week 11 2021. Progress has been made in reducing the extent of new infections considering annual figures in recent years. However, annual trends must be interpreted with caution since the national health system has been overwhelmed with other ongoing outbreaks including cholera, yellow fever and the COVID-19 pandemic that might have affected the response.

Ongoing events

Ebola virus disease

Democratic Republic of the Congo

11 Cases | 9 Death | 81.80% CFR

EVENT DESCRIPTION

The Ebola virus disease (EVD) outbreak continues in Beni Health Zone (HZ) in North Kivu Province of the Democratic Republic of the Congo with no new confirmed case reported in the past seven days. The latest known confirmed case was reported on the 30 October 2021.

As of 6 November 2021, a total of 11 EVD cases including eight confirmed cases (with four community deaths) and three probable cases have been reported in Beni HZ. Additional three deaths were notified as probable cases after in-depth investigations established epidemiological links to confirmed cases on the 13, 16 and 22 October 2021, respectively.

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

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

In Beni HZ 510 contacts are listed and 443 (86.9%) are under active follow-up in 11 HAs.

Of the total contacts, 44 (8.6%) had never been seen and nine contact are lost to follow-up.

On 6 November 2021, a total of 669 alerts were notified including 17 deaths from three HZs, of these 664 (99.3%) were investigated, 28 (4.2%) were validated as suspected cases of EVD and samples were collected from eight suspected cases. Samples were not collected from the other suspected cases who declined.

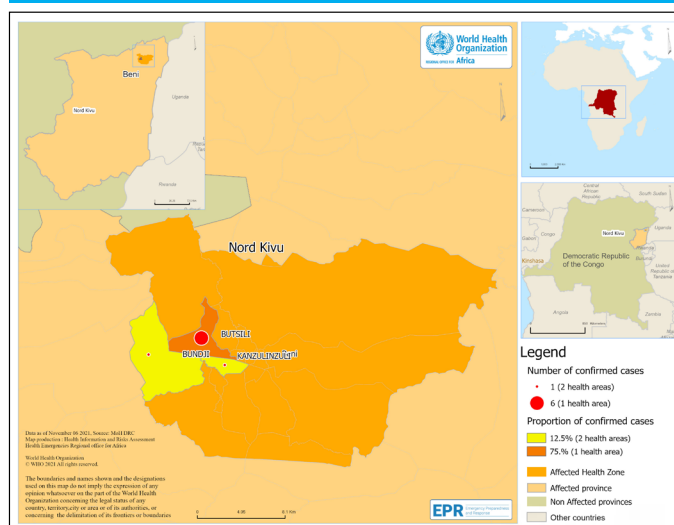
A total of 485 persons have been vaccinated against EVD from the inception of the vaccination activities. These include 97 high risk contacts, 256 contacts of contacts and 132 probable contacts. Seventy frontline health care workers were vaccinated including 10 high risk contacts, nine contacts of contacts and 51 probable contacts.

On 6 November 2021, 33 samples including 21 swabs from three HZ (Beni 17, Butembo 14 and Mabalako 2) were received and analysed at the laboratory. Non tested positive for EVD. Cumulatively, a total 696 samples including 246 swabs have been collected and 694 (99.7%) analysed, of which eight were confirmed EVD cases.

PUBLIC HEALTH ACTIONS

- The coordination sub-pillar continues to over-see and give direction towards the outbreak response activities. A zonal coordination meeting chaired by the Chief Health Officer of Beni was held.
- Twenty local leaders of the Kansaga HA were engaged, and 14 531 home visits were conducted, during which 44 094 persons were sensitized on EVD prevention.
- On 6 November 2021, 296 alerts including four deaths were notified.
- As of 6 November 2021, six EVD suspected cases were being treated at Beni (2), Kanzulinzuli (1), Butsili (1) and Malepe (2) health treatment and isolation facilities. The bed occupancy at the isolation facilities is 13.3%.

Distribution of confirmed cases of Ebola Virus Disease in the Democratic Republic of the Congo, as of 6 November 2021



- Alert monitoring continues using both active and passive surveillance in health facilities and communities.
- Vaccination efforts continue around all confirmed cases.
- A total of 100 858 (98.3%) travellers were screened among the 102 520 people who went through the different points of control; eight alerts were investigated and two validated as suspect cases and these were isolated.
- Psychosocial care is being offered to the seven suspected cases including two at Beni EVD treatment centre and five admitted at Butsili, Malepe and Kanzulinzuli isolation facilities, and 24 caretakers and visitors. Psychosocial follow-up is also being conducted on the two recovered persons, two separated children, 10 affected families, nine discharged persons and two orphans. In the community 292 persons participated in 33 psychosocial sessions on different aspects of the EVD response.
- Laboratory analysis of samples from suspected EVD cases is also ongoing.

SITUATION INTERPRETATION

- The EVD outbreak in the Democratic Republic of the Congo continues in the three affected health areas in Beni with no spread to further areas in the past week. However, the high number of contacts lost to follow-up remains a concern as this poses risk of silent transmission and increased spread of the virus in the community. The response efforts against EVD in Beni is currently being affected by inadequate resources, health care workers strike, lack of functional standardized isolation Centres in some areas, and low water supply at the points of entry.

PROPOSED ACTIONS

- National and regional authorities, and partners need to urgently strengthen surveillance in health zones and ensure that the treatment centres in Beni are operational for both suspected and confirmed cases. More resources need to be mobilized to strengthen response activities.
- Challenges around community surveillance, contact follow-up and other response measures need urgent action in the face of geographical spread of EVD within the province.
- Accelerate the operationalisation of standardised isolation centres/sites in health areas.



The WHO African region reported a total of 16 149 new cases of coronavirus disease (COVID-19) in the past seven days (1 – 7 November 2021), reflecting a 13.0% decrease compared to the previous week when 18 589 new cases were reported. Seven (Botswana, Eritrea, Eswatini, Guinea-Bissau, Mali, Niger, Seychelles and Zambia) countries saw a 20% or more increase in weekly cases compared to the previous week.

A total of 29 (62.0%) countries reported a decrease of 20% or more in the number of new cases compared to the previous week. These countries are Angola, Benin, Burkina Faso, Burundi, Cameroon, Cabo Verde, Central African Republic, Chad, Congo, Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Liberia, Madagascar, Malawi, Namibia, Nigeria, Rwanda, Senegal, Sierra Leone, South Africa, Togo, Uganda, the United Republic of Tanzania, and Zimbabwe.

The top five countries account for 68.2% (11 008) of the cases recorded in the past week; namely Botswana (5 654 new cases, 336.3% increase, 231.0 new cases per 100 000); Ethiopia (2 043 new cases, 28.0% decrease, 1.8 new cases per 100 000); South Africa (1 840 new cases, 26.0% decrease, 3.1 new cases per 100 000 population); Nigeria (752 new cases, 55.0% decrease, 0.4 new cases per 100 000); and Mauritius (719 new cases, 7.5% increase, 57.0 new cases per 100 000).

A fall in weekly COVID-19 deaths in the African region was also seen in the week ending 7 November 2021 as 463 deaths were reported in 28 countries, a 33% decline compared with the previous week. The highest numbers of new deaths were reported from South Africa (155 new deaths; 2000.0% increase; 0.3 new deaths per 100 000 population), Ethiopia (83 new deaths; 18.0% decrease; 0.1 new deaths per 100 000), Mauritius (37 new deaths; 85.3% decrease; 2.9 new deaths per 100 000), Kenya (31 new deaths; 23.0% decrease; 0.1 new deaths per 100 000), and the Republic of Congo (31 new deaths; 35.0% increase; 0.6 new deaths per 100 000).

Since the beginning of the COVID-19 pandemic in the African region, the cumulative number of confirmed COVID-19 cases is 6 096 957, with more than 5.7 million recoveries, yielding a recovery rate of 94.0%. The total number of deaths now stands at 150 636, accounting for a case fatality ratio (CFR) of 2.5%. The WHO African Region remains one of the least affected regions in the world, accounting for 2.5% of global cases and 3.0% of global deaths.

Right now, there are seven countries in the region that are experiencing a resurgence of COVID-19 cases: Angola, Cameroon, Republic of Congo, Equatorial Guinea, Ethiopia, Gabon, and Mauritius. Of these countries, the Republic of Congo and Mauritius are experiencing an upward trend or a high plateau.

Overall, South Africa has recorded the highest number of COVID-19 cases in the region with 2 923 956 cases (48.0%), followed by Ethiopia 367 210 (6.0%), Kenya 253 833 (4.2%), Nigeria 212 713 (3.5%), and Zambia 209 902 (3.4%), accounting for (3 967 614, 65.1%) of all cases. The average cumulative attack rate (number of cases per million) in the African region is estimated at 5 587 per million population, ranging from 286 to 229 869 per million. Seychelles (229 869 cases per million

population), Botswana (78 761 cases/million), Cabo Verde (69 565 cases/million), (Namibia 51 700 cases/million) and South Africa (49 932 cases/million), have the highest attack rate, while Burkina Faso (731 cases/million), Democratic Republic of the Congo (664 cases/million), United Republic of Tanzania (452 cases/million), Chad (320 cases/million) and Niger (286 cases/million), have the lowest cumulative attack rates.

Similarly, most reported deaths occurred in South Africa, which accounts for 59.3% (89 332) of all deaths. Ethiopia has the second-highest number of deaths (6 542 deaths, 4.3%) followed by Algeria (5 943, 4.0%), Kenya (5 312, 3.5%) and Zimbabwe (4 685, 3.1%), all accounting for 74.0% (111 816) of all deaths reported in the region. The median number of deaths per million in the African region is estimated at 63.7/million population (range: 1.1/million – 1 525/million) with an average cumulative death rate (per million) in the African region estimated at 138 million population. South Africa (1 525 deaths/million population), Namibia (1 426/million), Seychelles (1 168/million), Eswatini (1 083 million), Botswana (983 million) and Cabo Verde (635/million) are the five countries with the highest number of COVID-19 related deaths per million population. Burundi (1.1/million population), Niger (9.7/million population) Burkina Faso (10.7/million), Chad (11.0/million), South Sudan (12.0/million) and United Republic of Tanzania (12.5/million) have the lowest number of COVID-19 related deaths per million population.

In the past seven days, 62 new health worker infections were reported from Cameroon (32), Kenya (29), and Namibia (1). An extra 829 health worker infections were reported retrospectively from Côte d'Ivoire. At the moment, there have been 144 440 COVID-19 infections (2.4% of all cases) among health workers in the region, with South Africa accounting for 49.0% (71 113) of the total infections. Algeria (11 936, 8.3%), Kenya (7 821, 5.4%), Zimbabwe (5 402, 3.7%) and Mozambique (4 779, 3.3%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. The United Republic of Tanzania (13.0%), Liberia (6.0%), Algeria (5.8%), Chad (5.7%), and Niger (5.5%) have the highest proportion of health worker infections by country. Only Eritrea has not reported any healthcare worker infections.

The African continent has recorded more than 8.6 million cases of COVID-19, with more than 220 000 deaths (CFR 2.5%) and nearly 8.0 million people have recovered. The African continent accounts for 3.5% of global cases and 4.4% of global deaths.

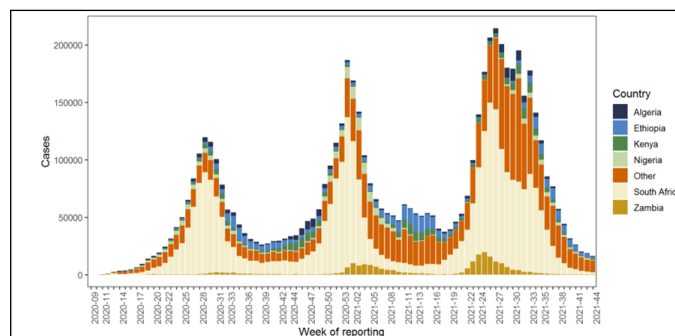
Two trainings on laboratory sequencing data production and analysis for 12 southern countries and countries in East Africa are ongoing. They will end in the third week of November. The training sessions are done in collaboration with Africa CDC and other partners.

After the US Food and Drug Administration (FDA) advisory committee recommended the Pfizer vaccine for children ages 5 to 11, South Africa now offers vaccination for children ages 12 to 18. Together with partners, the WHO is working towards vaccinating 40% of the population in all African countries by the end of 2021. To achieve this, Africa needs an additional 275 million doses.

SITUATION INTERPRETATION

- New COVID-19 cases and deaths reported in the past week continued to decline for four consecutive months since the third pandemic wave peaked in early July. However, there are a few observed slight increase in some countries. This marks the fourth consecutive week that South Africa has not reported the highest number of new cases. In the past week, Botswana recorded the highest number of new cases, followed by Ethiopia. As part of scaling-up laboratory sequencing capacity, sequencing machines will be sent to Namibia, Mozambique, Seychelles, Lesotho, Angola, and Comoros in November to help the countries produce their own sequencing data by the end of 2021.

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 7 November 2021
($n = 6\,096\,957$)



PROPOSED ACTIONS

- The WHO and its partners urge member states to be on high alert and maintain a heightened state of readiness for possible resurgences.
- Intense communication campaigns and community engagement are still required to increase awareness around physical distancing, avoiding crowded places and hand washing.



Countries with reported laboratory-confirmed COVID-19 cases and deaths: Data as of 7 November 2021

Country	Total cases	Total Deaths	Recovered Cases	Case Fatality Ratio (%)	Health Worker infections
South Africa	2 923 956	89 332	2 818 103	3.1	71 113
Ethiopia	367 210	6 542	343 107	1.8	3 354
Kenya	253 833	5 312	247 300	2.1	7 821
Nigeria	212 713	2 906	204 379	1.4	3 175
Zambia	209 902	3 664	206 068	1.7	1 121
Algeria	207 156	5 945	142 186	2.9	11 936
Botswana	192 935	2 407	188 000	1.2	2 082
Mozambique	151 368	1 934	149 299	1.3	4 779
Zimbabwe	133 187	4 685	128 050	3.5	5 402
Ghana	130 391	1 188	127 702	0.9	4 763
Namibia	128 967	3 558	124 938	2.8	4 353
Uganda	126 625	3 228	96 878	2.5	2 880
Cameroon	104 348	1 731	100 832	1.7	3 521
Rwanda	99 947	1 334	98 005	1.3	682
Senegal	73 935	1 880	72 043	2.5	419
Angola	64 674	1 720	60 016	2.7	939
Malawi	61 815	2 302	58 002	3.7	2 213
Côte d'Ivoire	61 421	699	60 251	1.1	1 913
Democratic Republic of the Congo	57 638	1 099	50 994	1.9	728
Eswatini	46 457	1 244	45 182	2.7	980
Madagascar	43 632	964	42 668	2.2	70
Cabo Verde	38 256	349	37 804	0.9	140
Mauritania	37 703	801	36 206	2.1	24
Gabon	36 194	254	29 241	0.7	345
Guinea	30 681	385	29 571	1.3	682
United Republic of Tanzania	26 196	725	180	2.8	3 351
Togo	26 114	243	25 784	0.9	891
Benin	24 804	161	24 501	0.6	139
Seychelles	22 441	114	22 116	0.5	945
Lesotho	21 685	659	12 804	3	473
Burundi	20 162	14	20 061	0.1	38
Mauritius	18 531	213	17 159	1.1	30
Congo	18 153	309	15 205	1.7	203
Mali	16 372	576	14 739	3.5	87
Burkina Faso	15 103	221	14 661	1.5	288
Equatorial Guinea	13 407	168	12 918	1.3	536
South Sudan	12 514	133	12 169	1.1	294
Central African Republic	11 579	100	11 125	0.9	51
Gambia	9 973	341	9 618	3.4	142
Eritrea	6 948	46	6 775	0.7	0
Niger	6 511	221	6 138	3.4	355
Sierra Leone	6 398	121	4 395	1.9	264
Guinea-Bissau	6 150	143	5 737	2.3	23
Liberia	5 815	287	5 526	4.9	346
Chad	5 107	175	4 874	3.4	292
Comoros	4 321	147	4 102	3.4	155
Sao Tome and Principe	3 729	56	3 633	1.5	102
Cumulative cases (N=47)	6 096 957	150 636	5 751 045	2.5	144 440

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

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EVENT DESCRIPTION

The ongoing cholera outbreak was declared in week 43 (ending 31 October) by Cameroonian health authorities following confirmation of cholera in stool samples from health districts of Ekondo Titi in the South-West region and Biyem-Assi in the Centre region (in the capital city of Yaoundé). However, suspected cases of cholera have been reported in five (50%) (Far North, North, Center, Littoral and Southwest) out of ten regions since the beginning of this year but had not been confirmed.

As of 2 November 2021, a total of 67 suspected cases including three confirmed and five deaths (case fatality ratio (CFR 7.4%) had been reported in Cameroon. Deaths have been reported from the regions of Sud-Ouest (3 deaths), Center (1 death) and Littoral (1 death). The outbreak is still active in two regions: Centre and South-West. Males have been more affected than females. Among the reported cases, children under 5 years (13 cases, 18%) are the most affected.

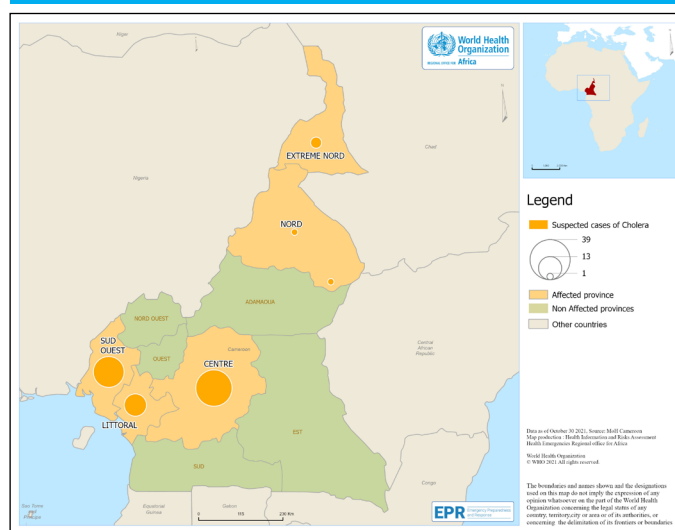
For the Centre region, 32 suspected cases of cholera, one confirmed by culture and one death (CFR 3.1%) have been reported since the beginning of this year. The urban health district of Biyem-Assi is the only one affected so far and located in the capital city of Yaoundé. The index case is a 40-year-old lady living in the health area of Akok-Ndoo. She is reported to having prepared and served a traditional meal with water from an unprotected community water point during a meeting of ten women. These ten members fell ill in turn and many of them were admitted for severe dehydration as well as several of their close contacts.

Regarding the South-West region, as of 2 November 2021, a total of 23 suspected cases of cholera, including two confirmed by culture, three deaths (CFR 13.1%) have been reported. On 27 October 2021, a nurse working at the Bamusso Integrated Health Center, in the health district of Ekondo Titi collected two samples from two cholera suspects. These samples were from two Nigerian fishermen, aged 36-years and 23-years old living in Bamusso city of Ekondo Titi health district. Ekondo Titi health district is part of the cholera belt in the South-West region of Cameroon.

PUBLIC HEALTH ACTIONS

- Central and regional cholera crisis meetings were organized with the activation of the incident management systems at each level.
- Investigation teams have been deployed in the affected areas
- Ministry of health together with its partners are currently conducting community sensitization on cholera and disinfecting households of affected families.
- The provision of the cholera supplies for case management and infection prevention and control in the affected districts have been done
- Strengthening of surveillance in all health areas of the affected health districts and surrounding health districts is ongoing .

Geographic distribution of Cholera cases in Cameroon, as of 30 October 2021



SITUATION INTERPRETATION

- Cameroon is particularly exposed to cholera due to several factors: its geographical location in the cholera endemic Lake Chad and Congo basins, the circulation of the vibrio cholerae in the country especially in the northern, Littoral, Centre, and South-West regions, and the limited access to drinking water in some areas including in the capital city of Yaoundé as well as cultural orientation that promote unsafe practices for cholera spread. Although the magnitude of the ongoing cholera outbreak seems to be less than the prior year, the risk of rapid spread throughout the country is high given the cross-border movements with countries that are experiencing cholera outbreak as well as the occurrence of the cholera outbreak in the South-West region which is characterized by difficult access and insecurity.

PROPOSED ACTIONS

- In the affected areas, coordination of all partners involved in the outbreak response is necessary to ensure the effectiveness of the response. Appropriate response strategies must be developed for the difficult-to-reach areas. It is also important to strengthen cross-border collaboration in order to limit the trans-border transmissions.
- Cameroon has mapped at-risk areas for cholera, it is therefore important to strengthen preparedness in these hotspot areas, especially to reinforce surveillance, risk communication, the pre-positioning of cholera supplies and capacity building of human resources for cholera outbreak management.

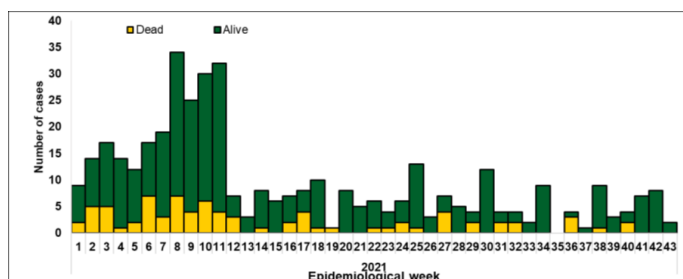
EVENT DESCRIPTION

Lassa fever is an endemic disease in Nigeria where cases have continuously been reported for years. The largest number of Lassa fever cases recorded in a single year for Nigeria was in 2020 when 1 189 cases were confirmed including 244 deaths, case fatality rate (CFR: 20.5%) among them. Thus far in 2021 through week 43 (ending 31 October), 3 496 suspected cases have been reported with 403 (11.5%) of them confirmed. A total of 79 individuals have died among those who had confirmed results, yielding a 19.6% CFR this year. The CFR during the same period last year was slightly higher at 20.7%.

During 2021, Lassa fever cases have thus far peaked in week 8 (ending 28 February) when 34 confirmed cases and six deaths were recorded for that specific week. Since week 11 2021 (ending 11 March) trends have somewhat stabilized and only two cases were confirmed during week 43. Nigeria mostly experiences Lassa fever outbreaks during the dry season (November to April) which is consistent with this year's trend (Figure 1). A total of 61 local government areas (LGAs) from 15 states have reported at least a confirmed case, of which Edo State has reported 178 (44.0%) confirmed cases, followed by Ondo State with 141 (35.0%) cases, and Taraba State with 20 (5.0%) cases.

The main group affected is young males between the ages of 21-30 years. The male to female confirmed case ratio is 1:0.8. The demographic disease trends are similar to the 2020 trends when the median age of a confirmed case was 30 years old and the male to female case ratio was 1:0.9.

Epidemic curve of confirmed Lassa fever cases in Nigeria, as of 31 October 2021

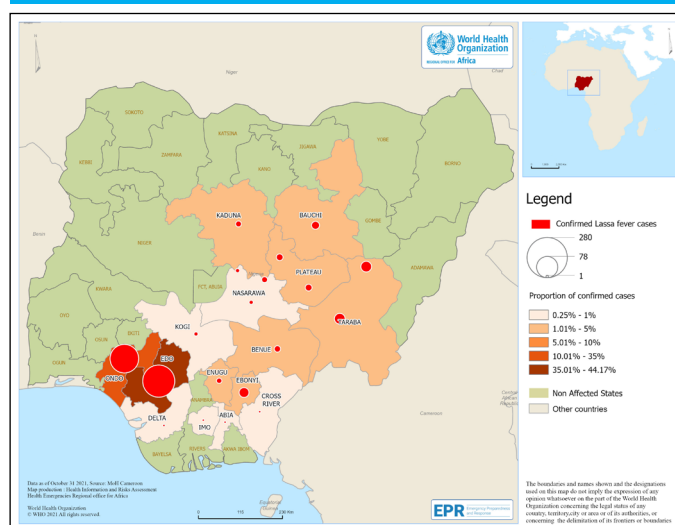


PUBLIC HEALTH ACTIONS

- The Nigerian Emergency Operations Centre activated alert mode allowing for a multi-partner, multi-sectoral technical working group to coordinate response activities at all levels
- A preparedness and response engagement meeting was conducted for high-burden states
- State Public Health Emergency Operations Centres were activated for affected states
- Three states have benefited from the deployment of national rapid response teams to support Lassa fever response
- Five Lassa fever laboratories with molecular capacity are working at full capacity to ensure all samples are tested and results are provided in a timely manner
- Confirmed cases are treated at identified treatment centres across the states

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Geographic distribution of Lassa fever cases in Nigeria, as of 31 October 2021



- Guidelines for case management and safe burial practices have been disseminated
- Risk communications and community engagement activities have been scaled up across states using television, radio, print, social media, and other media
- The Federal Ministry of Environment has implemented the Lassa fever environmental response campaign in high-burden states.

SITUATION INTERPRETATION

The cases of Lassa fever in the country have been generally low since the end of March of this year. Historical trends in Nigeria from the past five years have shown that Lassa fever outbreaks mostly occur during the country's dry season from November to April which has been the situation this year. Furthermore, the cumulative number of cases in 2021 are likely to be the lowest reported in at least a couple of years if the trends stay relatively the same as in previous years.

PROPOSED ACTIONS

- Continued response efforts need to be sustained in order to maintain low rates of Lassa fever infections across affected states.

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									
Ghana	Yellow fever	Ungraded	3-Nov-21	15-Oct-21	3-Nov-21	42	3	11	26.20%
From 15 October 2021 to 3 November 2021, a total of 42 suspected cases of yellow fever (YF) were reported mostly among nomadic settlers from 14 communities in two districts (West Gonja and North Gonja) in Savannah Region, northwest Ghana (bordering Côte d'Ivoire). Eleven out of the 42 suspected cases, including all the three PCR positive cases died, case fatality rate (CFR) 36%. Three blood samples collected from suspected cases tested YF PCR positive at Noguchi Memorial Institute for Medical Research (NMIMR) and six additional samples tested YF IgM positive by ELISA at the National Public Health and Reference Laboratory.									
Sierra Leone	Measles	Ungraded	1-Nov-21	19-Oct-21	31-Oct-21	25	3	0	0.00%
On 29 October 2021, Sierra Leone's Ministry of Health and Sanitation declared a measles outbreak in Kambia District following the confirmation of three cases at the Central Public Health Reference Laboratory (CPHRL) in Freetown. The date of onset of symptoms for the first two cases was 11 October 2021. As of 31 October 2021, 25 cases of which 3 confirmed, 0 deaths and 2 recovered have been reported.									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	7-Nov-21	207 156	207 156	5 945	2.90%
From 25 February 2020 to 7 November 2021, a total of 207 156 confirmed cases of COVID-19 with 5 945 deaths (CFR 2.9%) have been reported from Algeria. A total of 142 186 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	7-Nov-21	64 674	64 674	1 720	2.70%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 7 November 2021, a total of 64 674 confirmed COVID-19 cases have been reported in the country with 1 720 deaths and 60 016 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	5-Nov-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	28-Mar-21	28-Mar-21	31-Oct-21	254	16	8	3.10%
Since week 12 (ending 28 March 2021) of this year, cases of cholera have been reported in Benin. As of 31 October 2021, a total of 254 cases with eight deaths (CFR 3.1%) are reported so far.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	24-Oct-21	24 749	24 749	161	0.70%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 24 October 2021, a total of 24 749 cases have been reported in the country with 161 deaths and 24 346 recoveries.									
Benin	Meningitis	Ungraded	1-Jun-21	1-Jan-21	15-Oct-21	440	82	31	7.00%
A total of 440 cases and 31 deaths (CFR 7.0%) resulting from meningitis were reported from Week 1 to week 41 of 2021 in Benin.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	5-Nov-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	1-Nov-21	192 935	192 935	2 407	1.20%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 1 November 2021, a total of 192 935 confirmed COVID-19 cases were reported in the country including 2 407 deaths and 192 935 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	30-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 1 407 685 million internally displaced persons as of 30 September 2021 in all 13 regions in the country. The regions most affected were Sahel (493 708, 35.1%) and Centre-Nord (466 314, 33.1%). 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. There are also some 23 610 refugees in the country of which the majority (23 173, 98.1%) are from Mali. According to the World Food Programme, 3.5 million people are in need of humanitarian assistance and 2.87 million people are food insecure as of September 2021.									
Burkina Faso	Cholera	Ungraded	15-Aug-21	18-Aug-21	16-Oct-21	2	2	0	0.00%
The WHO office was informed by the Ministry of Health on 15 August 2021, of the detection of a suspected case of cholera in the village of Tanwalbougou, Fada health district 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 were isolated, and the patient treated. The sample taken and sent to Ouagadougou at National Laboratory of Public Health confirmed Vibrio cholerae O1 Ogawa, the same serotype and serogroup as identified in Niger.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	31-Oct-21	15 103	15 103	221	1.50%
Between 9 March 2020 and 18 October 2021, a total of 15 103 confirmed cases of COVID-19 with 221 deaths and 14 661 recoveries have been reported from Burkina Faso.									

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-20	1-Jan-20	5-Nov-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	5-Nov-21	20 162	20 612	14	0.10%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 05 November 2021, the total number of confirmed COVID-19 cases is 20 162, including 14 deaths and 20 061 recovered.									
Burundi	Measles	Ungraded	23-Mar-20	1-Jan-21	17-Oct-21	557	496	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 41 of 2021, Burundi has reported a total of 557 suspected cases, 496 reported by case-by-case surveillance and no death, 72 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	30-Sep-21	-	-	-	-
According to UNHCR and OCHA reports, an estimated 1.2 million people need assistance, 341 535 people are internally displaced as of 30 September 2021. IDPs have been leaving the Mayo-Sava division during the last months due to attacks by NSAG. There have been attacks in Goudoumboul village leading 1 154 IDPs to join 1 600 others in Kouyape village as of 8 July. IDPs currently have need for water, hygiene, sanitation, food, shelter, protection, and education services.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	30-Sep-21	-	-	-	-
According to reports from UNHCR, an estimated 711 056 IDPs have been registered while 466 578 returnees have been reported as of 30 September 2021. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. There has been an increase in the use of improvised explosive devices (IEDs), carjacking, and clashes between security forces and NSAGs, leading to civilian population displacement. Due to roadblocks, over 40K people were denied food assistance in the NW and SW regions where 1.1 million people are severely food insecure. There were also 453 767 refugees as of 30 September 2021, of which more than 332K (73.3%) arrived from Central African Republic.									
Cameroon	Cholera	Ungraded	1-Jan-21	5-Aug-21	2-Nov-21	67	3	5	7.50%
Since the beginning of this year, 67 suspected cases of Cholera have been notified from Far-North, North, Centre, South West and Littoral regions. Five death are reported so far (CFR 7.5%) as of 2 November 2021. The intensification of disease surveillance as well as the management of notified cases are ongoing.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	27-Oct-21	104 348	104 348	1 731	1.70%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 27 October 2021, a total of 104 348 cases have been reported, including 1 731 deaths and 100 832 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-21	14-Oct-21	1 484	424	8	0.50%
From Epi week 1 to Epi week 42 of 2021, Cameroon has reported 1 484 suspected with 8 deaths (CFR 1.9%). Out of investigated cases, 1 000 with blood samples, 445 was positive including 224 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	29-Oct-21	8	8	0	0.00%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in the Extreme North province making it the first in 2021. There were seven cases reported in 2020.									
Cameroon	Yellow fever	Ungraded	7-Feb-21	4-Jan-21	17-Sep-21	24	24	7	29.20%
From 1 January to 17 September 2021, a total of 21 presumptive cases of Yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur Cameroun, of which seven deaths were recorded. These cases originated from eight different regions with a total of 19 health districts (HDs) affected: Adamaoua region (Ngaoundere rural HD), Central region (Eséka HD), Far North region (Maga, Mogode, Yagoua, Kousseri, Goulfey, Vele and Makary HDs), Littoral region (Yabassi, Cité des palmiers, and Nylon HDs), North region (Guider, Garoua 1 HDs), and North-West region (Bamenda HD), and West region (Dschang, Bafang, and Malentouen HDs). Some of the PRNT-positive cases had a history of vaccination against Yellow fever.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	7-Nov-21	38 256	38 256	349	0.90%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 07 November 2021, a total of 38 256 confirmed COVID-19 cases including 349 deaths and 37 804 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	19-Oct-21	-	-	-	-
According to OCHA figures, 3.1 million people are in need of assistance, 722 101 people are internally displaced as of 31 September 2021, and 733K persons are refugees in neighboring countries. In September 2021, 23 482 new IDPs were registered mainly from the sub-prefectures of Kabo, Bozoum, Bocaranga, Ouanda-Djallé, Bangui, Bri, Paoua, Abba and Alindao. Displacements were mostly caused by clashes between the Central African Armed Forces (FACA) and their allies against armed groups, fear of abuses by armed groups, and flooding as well. Food insecurity has also increased to an estimated 2.6 million people at risk (57% of the population).									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	27-Oct-21	11 579	11 579	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 October 2021, a total of 11 579 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	10-Oct-21	2 263	246	9	0.40%
From 1 January to 19 September 2021 : 2 263 suspected cases have been reported, 210 cases with blood samples out of a total 608 investigated, 246 confirmed cases (65 IgM+ cases, 170 by epidemiological link and 11 compatible cases) and 9 deaths (CFR : 0.2%). Eight health districts (out of 35) have reached the epidemic threshold (Bossebelé, Berbérati, Sangha-Mbaéré; Nanga-Boguila, Batangafo, Mbaiki, Nana Gebrizi and Vakaga); 49% of children are less than 5 years of age; 42% were not vaccinated. From the beginning of outbreak in 2019 to 19 August 2021, a total of 35 468 suspected cases have been notified and 197 deaths (CFR of 0.56%) within affected districts.									
Central African Republic	Yellow fever	Ungraded	14-Sep-21	1-Apr-21	9-Sep-21	1	1	0	0.00%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test at the Centre Pasteur Cameroun (CPC). She is reportedly not vaccinated against yellow fever. The onset of symptoms was 1 April 2021 with febrile jaundice. Her sample was sent to the CPC for quality control after it tested IgM negative at the Institut Pasteur in Bangui. A thorough investigation is ongoing. Laboratory tests are underway for two additional suspected cases.									
Chad	Floods	Ungraded	6-Oct-21	26-Sep-21	6-Oct-21	256 214	-	15	0.00%
The floods since June 2021 has affected about 256 214 people (42 765 households) in 400 villages across 8 regions of Chad (Borkou, Ennedi West, Logone Oriental, Mandoul, Moyen-Chari, Ouaddai, Sila and Tandjile). As of 6 October 2021, a total of 15 people died, and 17 others are missing and 329 people have been injured. Authorities have appealed to partners and to people of goodwill for assistance. Priority needs identified so far are food, shelter, household supplies/kits, livelihood, twelve health facilities need support (drug and medical supplies), water points treatment (wells) and vaccination.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	15-Oct-21	5 067	5 067	174	3.40%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 15 October 2021, a total of 5 067 confirmed COVID-19 cases were reported in the country including 174 deaths and 4 874 cases who have recovered.									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	30-Sep-21	156	15	13	8.30%
Since 1 January 2018, a total of 156 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai) and 13 deaths (CFR 8.3%). For the year 2020 the country registered 74 cases including 3 deaths. Since the beginning of 2021 up to 30 September 2021, 49 cases have been reported including 7 deaths (CFR 14.3%) .									
Chad	Measles	Ungraded	24-May-18	1-Jan-21	17-Oct-21	2 334	254	13	0.60%
Since 01 January 2021 up to Epi week 42, It has been reported 2 334 suspected cases from 97 out of 129 districts in the country (71% of districts), 527 cases investigated with blood samples recorded, 254 of which were confirmed by IgM, 36 were compatible cases and 13 deaths from 4 districts (CFR 0.6%), 26 districts with confirmed outbreaks since the start of the year. In 2020, Chad reported 8 785 cases, with 363 confirmed cases and 41 deaths.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	5-Nov-21	114	114	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in this week. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 8 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	7-Nov-21	4 321	4 321	147	3.40%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 07 November 2021, a total of 4 321 confirmed COVID-19 cases, including 147 deaths and 4 102 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	4-Nov-21	18 153	18 153	309	1.70%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 04 November 2021, a total of 18 153 cases including 309 deaths and 15 205 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	5-Nov-21	4	4	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, 2 cases have been reported in 2021. There were two cases reported in 2020.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	7-Nov-21	61 421	61 421	699	1.10%
Since 11 March 2020, a total of 61 421 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 699 deaths, and a total of 60 251 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	5-Nov-21	61	61	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. The number of 2020 cases is still 61.									
Côte d'Ivoire	Yellow fever	Ungraded	14-Sep-21	13-Aug-21	6-Sep-21	5	3	-	-
On 13 August 2021, five Yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Based on differential tests returned on 6 September 2021, the results of three cases are consistent with a recent Yellow fever infection. Two other cases had cross-reactions with other flaviviruses, one of which was more consistent with dengue and one with a flavivirus infection (PRNT positive for Yellow fever, Zika, and dengue).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	3-Oct-21	-	-	-	-
Approximately 279K people have been displaced in the territory of Djugu of Ituri Province due to people fleeing clashes between the national army and NSAGs during July and August. In Irumu territory, 100K people (many of whom are from the territory) have moved to Komanda and its outskirts since 23 September 2021. The Kamako border crossing continues to register new returnees from Angola, but the number of arrivals per day is decreasing. Updated statistics from OCHA show 8 298 returnees. In South Kivu Province, humanitarian operations are resuming in Fizi, Itombwe and Uvira, despite insecurity. There has been a relatively calm period in the health zone of Minembwe in recent weeks with the latest clashes dating back to mid-August when the FARDC clashed with an armed group. This has allowed local and international NGOs return to the area. The violence in the Ruzizi health zone continued during the month of September 2021 with clashes between the Congolese army and armed men which resulted in casualties and displacement of more than 2 600 people to the outskirts of Sangé and Kigoma.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	17-Oct-21	5 950	-	117	2.00%
In 2021, from epidemiological week 1 to 41 (ending 17 October 2021), 5 950 suspected cholera cases including 117 deaths (case-fatality rate 1.9%) were recorded in 79 health zones across 15 provinces of the Democratic Republic of the Congo. Tanganyika province reported most cases in week 41 (285 out of 298 cases, 95.6%). 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	4-Nov-21	57 639	57 637	1 099	1.90%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 57 637 confirmed cases and two probable case, including 1 099 deaths have been reported. A total of 50 994 people have recovered.									
Democratic Republic of the Congo	Ebola virus disease	Grade 2	8-Oct-21	8-Oct-21	6-Nov-21	11	8	9	81.80%
On 8 October 2021, a case of Ebola virus disease (EVD) was confirmed by PCR in a 29-month-old male child living in the Butsili health area in the Beni health zone, North Kivu province in the Democratic Republic of the Congo. The patient, treated in turn in three health facilities in the Beni health zone since 27 September 2021, died on 6 October 2021 in a local health facility in a hemorrhagic event. This case follows three suspected clustered deaths of EVD in the same family in the Butsili health area on 14, 19 and 29 September 2021 respectively. These three deaths were not sampled or given a dignified and safe burial. By 6 November 2021, 11 cases, of which 8 confirmed and 3 probable, and nine deaths have been reported.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jun-21	17-Oct-21	47 844	1 193	694	1.50%
From week 1 through week 41 of 2021 (ending 17 October) 47 844 suspected measles cases and 694 deaths (CFR 1.5%) have been reported. The outbreak has been confirmed in 92 health districts across 23 affected provinces including the capital city of Kinshasa. A total of 1 193 cases are IgM + for measles among which 65% are children under five and 29% known to be vaccinated, half of them have an unknown vaccination status. A total of 436 cases are IgM+ of rubeola among which 5.5% are more than 14 years old.									
Democratic Republic of the Congo	Meningitis	Grade 2	30-Jul-21	1-Jun-21	31-Oct-21	2 558	29	202	7.90%
On 28 July 2021, an alert was reported in the locality of Panga, Banalia territory, in Kisangani district in DRC as a result of an illness with signs similar to those of meningitis. As of 31 October 2021, 2 558 cases have been reported including 202 deaths (CFR= 7.9%). Twenty nine samples have been confirmed on the 181 analysed samples including 27 for Neisseria meningitidis serogroup W, 1 Hemophilus influenzae and 1 Sp)									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	17-Oct-21	9 021	39	301	3.30%
Since epidemiological week 1 up to week 41 in 2021, 2 764 cases have been reported with 72 deaths (CFR 2.6%). 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	17-Oct-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 for confirmatory testing. From epidemiological week 1 to 36, 2021 (ending on 12 September), 118 suspected pneumonic plague cases including 13 deaths were reported in eight health zones in Ituri province. From January to December 2020, 461 suspected plague cases of which 31 deaths were reported in eight health zones of Ituri. The health zones of Biringi, Rethy, and Aru reported the most cases.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	5-Nov-21	201	201	0	0.00%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Maniema province bringing the number of 2021 cases to 11. The total number of 2020 cases remains at 81.									

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	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	3-Oct-21	1 121 104	19 734	411	0.00%
In 2021, from Epi week 1 to 39, 1 121 104 suspected cases of typhoid fever have been reported including 411 deaths (CFR 0.0%) and 19 734 confirmed cases in the epi week 39. In 2020, a total of 715 920 suspected cases of typhoid fever were reported, including 178 deaths (CFR 0.0%).									
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 Abuzi health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. 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	3-Nov-21	13 407	13 407	168	1.30%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 03 November 2021, a total of 13 407 cases have been reported in the country with 168 deaths and 12 918 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	7-Nov-21	6 948	6 948	46	0.70%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 7 November 2021, a total of 6 948 confirmed COVID-19 cases with 46 deaths were reported in the country. A total of 6 775 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	7-Nov-21	46 457	46 457	1 244	2.70%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 7 November 2021, a total of 46 457 cases have been reported in the country including 45 129 recoveries. A total of 1 244 associated deaths have been reported.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	4-Nov-21	-	-	-	-
The conflict in the Tigray area has reached the 1 year mark and violence continues. The country declared a state of emergency on 2 November 2021 amid concerns that the Tigray People's Liberation Front soldiers would take on Addis Ababa. On 28 October 2021, air strikes were carried out in Mekelle killing 6 people and injuring 24 others. No humanitarian supplies have been able to enter Tigray since 18 October 2021. The security situation in Northern Ethiopia is also escalating in North Gondar, Wag Hemra, North and South Wello zones causing massive displacement of people who are living among the host community and others living in crowded centers, including schools. Humanitarian assistance has also been restricted in Amhara and Afar regions. Food assistance is likely to increase in Amhara due to continued disruption of livelihoods, displacements and increased food prices.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	7-Nov-21	367 210	367 210	6 542	1.80%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 367 210 cases of COVID-19 as of 07 November 2021, with 6 542 deaths and 343 107 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-21	5-Nov-21	2 464	1 330	4	0.20%
In 2021, as of 05 November (Epi week 45), a total of 2 464 cases have been reported of which 1 330 have been confirmed (918 epi-link, 368 IgM and 44 measles compatible) and 4 deaths recorded (CFR 0.4%). Out of the 2 464 suspected cases, 1 256 were under 5 years of age, 786 were between 5 and 14 years of age and 422 were over 15 years of age.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	5-Nov-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	4-Nov-21	36 194	36 194	254	0.70%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 04 November 2021, a total of 36 194 cases including 254 deaths and 29 241 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	31-Oct-21	9 973	9 973	341	3.40%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 31 October 2021, a total of 9 973 confirmed COVID-19 cases including 341 deaths, and 9 618 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	30-Oct-21	130 391	130 391	1 188	0.90%
As of 30 October 2021, a total of 130 391 confirmed COVID-19 cases have been reported in Ghana. There have been 1188 deaths and 127 702 recoveries reported.									
Ghana	Meningitis	Ungraded	1-Jan-21	1-Jan-21	26-Aug-21	279	-	3	1.10%
Since the beginning of the year 2021, 279 cases of meningitis have been reported with 3 deaths (CFR of 1.1%). The Nandom district in the Upper West Region crossed the epidemic threshold and four other districts are on alert (Lawra, Lambussie, Nadowli-Kaleo, Wa Municipal). In Ghana, the Streptococcus pneumoniae is the germ mostly identified by the country laboratory.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	5-Nov-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	3-Nov-21	30 681	30 681	507	1.70%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 03 November 2021, a total of 30 681 cases including 29 571 recovered cases and 507 deaths 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
Guinea	Lassa Fever	Ungraded	8-May-21	8-May-21	21-Oct-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 (23 years old man, resident of Yomou prefecture) was notified on 8 May 2021. The patient was also confirmed to be positive for COVID-19 and later died. Contact tracing of 88 people was done, and no secondary cases found. However, the prefecture of Bheeta is regarded as active, with the prefectures of Yomou-Centre, Péla, Yomou and Bignamou on alert. More cases have been reported with the recent case, a 9 years old female from Faranah health district confirmed on 19 September 2021 by the Gueckerou laboratory and died the same day.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-21	20-Oct-21	3 248	234	5	0.20%
In 2021, as of 20 October, 3 248 suspected cases have been reported, 392 samples taken, 353 samples tested of which 234 tested positive; 5 deaths have been reported. Out of the 183 positive persons, 11 (6%) were vaccinated. In 2020 at the same epi week, 6070 suspected cases, 870 cases sampled, 767 samples tested of which 524 positive, 269 negative and 48 undetermined; 15 deaths have been reported. Since 2020, a total of 9 318 suspected cases, 1 120 tests analysed, 707 confirmed cases, 19 deaths have been reported.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	29-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	6-Nov-21	6 150	6 150	143	2.30%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 6 November 2021, the country has reported 6 150 confirmed cases of COVID-19 with 5 737 recoveries and 143 deaths.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	7-Nov-21	253 833	253 833	5 312	2.10%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 07 November 2021, 253 833 confirmed COVID-19 cases including 5 312 deaths and 247 300 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	4-Nov-21	1 283	1 120	10	0.80%
Since January 2020, a total of 1 283 visceral leishmaniasis confirmed cases with 10 deaths (CFR 0.9%), have been reported in eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir, and Tharaka Nithi. The outbreak is active in four counties; Kitui, Tharaka Nithi, West Pokot, and Wajir. 10 new cases were recorded during week 42.									
Kenya	Measles	Ungraded	6-May-19	20-Oct-19	30-Oct-21	625	31	1	0.20%
Since October 2019 through 21 October 2021 (Epi week 41), a total of 625 measles cases were reported of which 31 were confirmed and one death (CFR 0.2%) were reported. Currently, the counties of Garissa and West Pokot have active outbreaks.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-21	10-Feb-21	5-Nov-21	3	3	0	0.00%
No cVDPV2 positive environmental sample was reported this week. There was one cVDPV2 positive environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	6-Nov-21	21 685	21 685	659	3.00%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 6 November 2021, a total of 21 685 cases of COVID-19 have been reported, including 12 804 recoveries and 659 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	28-Oct-21	5 815	5 815	287	4.90%
From 16 March 2020 to 28 October 2021, Liberia has recorded a total of 5 815 cases including 287 deaths and 5 523 recoveries have been reported.									
Liberia	Lassa fever	Ungraded	23-Jul-21	1-Jan-21	23-Oct-21	16	16	10	62.50%
The numbers of confirmed and death cases have been reviewed. From January 2021 to 23 October 2021, a total of 117 suspected cases were reported, of which 16 (13.6%) were confirmed, and 10 deaths (CFR 62.5 %) among the confirmed cases. Two counties are currently in outbreak to : Grand Bassa and Montserrado									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	23-Oct-21	410	191	0	0.00%
In week 42 (week ending 23 July 2021), 15 suspected cases were reported from Nimba (4), Montserrado (3), Grand Gedeh (2), Bomi (2), Grand Bassa (1), Maryland (1), Rivercess (1), and Sinoe (1) Counties. Among the 15 suspected cases, 8 cases are <5 years (83%) and 7 case are >5 years (17%). Since the beginning of 2021, 410 total cases were reported of which 191 were confirmed (54 laboratory-confirmed, 127 clinically confirmed and 10 epi-linked), 217 negative.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	5-Nov-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	29-Oct-21	43 632	43 632	964	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 29 October 2021, a total of 43 632 cases have been reported in the country, out of which 42 702 have recovered and 964 deaths reported.									
Madagascar	Malaria	Ungraded	8-Mar-21	1-Jan-21	19-Sep-21	1 439 687	-	686	0.00%
From January 2021 to 19 September 2021, 1 439 687 cases were reported including 686 deaths. The number of malaria cases reported in week 37 was 6 951 cases. A decrease in the number of malaria cases has been observed from week 21.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	Pneumonic Plague	Grade 1	29-Aug-21	1-Sep-21	17-Oct-21	41	19	6	14.60%
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 17 October 2021, a total of 41 suspected cases of pneumonic plague including 19 confirmed and 6 death cases (CFR 14.6%) are reported so far. The number of cases and deaths on this outbreak have been updated by the MoH.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-21	5-Nov-21	12	12	0	0.00%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. The number of 2021 cases remains at 10. There were two cases reported in 2020. There were two cases reported in 2020.. There were two cases from 2020.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	7-Nov-21	61 815	61 815	2 302	3.70%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 7 November 2021, the country has a total of 61 815 confirmed cases with 2 302 deaths and 58 002 recoveries.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	30-Sep-21	-	-	-	-
There have been a total of 401 736 IDPs in the country and more than 156 700 refugees as of 30 September 2021. However, 83 712 returnees have come back to the country. From 2018-2020 violence has increased in the Central and Northern regions which has caused many of the internal displacements. The number of IDPs increased by 23,955 individuals between July to September 2021 which was caused by the worsening of the security situation in the regions of Ségou, Mopti and Timbuktu. Issues such as inter and intra-community conflicts, activism of non-state armed groups, consequences of counter-insurgency operations, crime and banditry continue to weaken the Malian context. COVID-19 also continues to compound the health impacts affecting all basic social sectors as well as the protection of household livelihoods.									
Mali	Cholera	Ungraded	11-Sep-21	12-Sep-21	31-Oct-21	11	2	4	36.40%
During the week 36 (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 31 October, a total of 11 cases including 2 confirmed and 4 deaths (CFR 36.4%) have been reported so. 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	7-Nov-21	16 371	16 371	576	3.50%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 07 November 2021, a total of 16 371 confirmed COVID-19 cases have been reported in the country including 576 deaths and 14 739 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-21	31-Oct-21	1 433	760	2	0.10%
From January 2021 up to Epi week 43 (ending the 31 October 2021), Mali has reported a total of 1 433 suspected cases including two deaths, 1 275 samples tested of which 760 were positive, 476 negative and 39 undetermined. There is an increase of 89.35% of confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	5-Nov-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	7-Nov-21	37 535	37 535	801	2.10%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 07 November 2021, a total of 37 535 cases including 801 deaths and 36 087 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	3-Nov-21	18 314	18 314	199	1.10%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 03 November 2021, a total of 18 314 confirmed COVID-19 cases including 199 deaths and 16 992 recovered cases have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	10-Oct-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 October 2021, security incidents occurred in Palma, Mueda, and Meluco districts as well as the death of an insurgent leader at the end of Sep 2021. From 29 Sep – 5 Oct 2021, a total of 1 912 internally displaced person (IDPs) arrived mostly in Metuge, Nangade, and Cidade de Pemba districts. As of 10 Oct 2021, the nation-wide estimate of people in need of humanitarian assistance is 1.3 million and there are 744K people displaced.									
Mozambique	Cholera	Ungraded	26-Oct-21	21-Jul-21	19-Oct-21	191	8	0	0.00%
On 28 September 2021, the WHO was notified about a Cholera outbreak in some communities of Caia District. By 19 October 2021, 191 cases were recorded with no deaths. Eight cases were confirmed (7 by RDT and 1 by culture).									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	7-Nov-21	151 368	151 368	1 934	1.30%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 7 November 2021, a total of 151 368 confirmed COVID-19 cases were reported in the country including 1 934 deaths and 149 299 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	10-Oct-21	125	2	0	0.00%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 10 October 2021 (week 40) , there were 125 cases reported including 2 confirmed cases and no death. In 2020 at the same period, there were 185 confirmed cases and no death.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	2-Nov-21	129 009	129 009	3 563	0.00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 2 November 2021, a total of 129 009 confirmed cases with 125 206 recovered and 3 563 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
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	30-Sep-21	238 000	-	77	0.00%
In Niger, torrential rainfall and floods affected more than 238,000 people and left 77 people dead. Since the start of the 2021 rainy season in June, torrential rainfall has led to the collapse of about 20,000 houses, the destruction of nearly 7,000 hectares of cultivable land, and the death of more than 10,000 livestock. Thousands of people have been rendered homeless and vulnerable due to the loss of their livelihoods. Floods have been followed by outbreaks of cholera across seven of the country's eight regions.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	1-Oct-21	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2021, 313 are internally displaced, 234K are refugees, and 2 million are food insecure (phase 3+ and above) as of 1 October 2021. Security tensions has had a negative impact on local markets and price of food in the Tillaberi region causing concern for nutrition levels in children in the region. The trend of children admitted into national food program has increased in certain areas of the country (including Tillaberi and Maradi) between July and August 2021. According to the Humanitarian Response Plan 2021, more than 1.8 million children <5 years need nutritional assistance, including 1.6 million children between 6-59 months for management of acute malnutrition and 178 228 children between 6-23 months for preventive supplementation.									
Niger	Cholera	Grade 1	7-Aug-21	7-Jun-21	25-Oct-21	5 469	190	159	2.90%
As of 25 October 2021, a total of 5 469 cases including 159 deaths (CFR 2.9%) have been reported. Seven regions out of eight have reported cases so far (Tahoua, Niamey, Tillaberi, Dosso, Maradi Zinder and Diffa). To date 35 out of 72 health districts have reported cases with 9 health districts currently actives. The rainy season is still ongoing causing floods that contribute to the spread of the outbreak.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	7-Nov-21	6 511	6 511	221	3.40%
From 19 March 2020 to 07 November 2021, a total of 6 511 cases with 221 deaths have been reported across the country. A total of 6 138 recoveries have been reported from the country.									
Niger	Malaria	Ungraded	4-Oct-21	1-Jan-21	19-Sep-21	2 297 488	2 297 488	2 124	0.10%
Between epidemiological weeks 1 and 37 2021 (ending 19 September), 2 297 488 confirmed malaria cases including 2 124 deaths were reported through routine surveillance in Niger. Although the weekly attack rates follow the trends seen in the last two years, epidemic thresholds have been exceeded in several districts in the regions with increases in malaria incidence and mortality. Investigations are being planned to better understand the situation.									
Niger	Measles	Ungraded	10-May-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, Baileya, 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	5-Nov-21	22	22	0	0.00%
Two cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Diffa making them the first in 2021. The number of 2020 cases remains at 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	30-Sep-21	-	-	-	-
In 2021, more than 8.7 million require humanitarian assistance in Borno, Adamawa, and Yobe states. Attacks in Nigeria have continued in LGAs of Borno, Adama, and Yobe (BAY) states making the North-Eastern part of the country volatile. As of 31 August 2021, there were 3 024 199 IDPs according to UNHCR and 72 531 refugees from other countries within Nigeria, with more than 68K (or 95%) coming from Cameroon. More than 2.1 million IDPs (72.5% of all IDPs in the country) are in the North-East, while the rest (27.5%) are in the North-West/North-Central part of the country.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	10-Oct-21	90 890	90 890	3 208	3.50%
As of 10 October 2021, a total of 90 890 suspected cases including 3 208 deaths (CFR 3.5%) have been reported from 31 states and FCT in 2021. Of the suspected cases since the beginning of the year, the 5-14years age group is the most affected, while males and females are equally affected. Three States of Bauchi (19 452 cases), Kano (12 116 cases) and Jigawa (10 763 cases) have the majority of cases. Twelve local government authorities across six states (Bauchi (4), Zamfara (4), Jigawa (2), Kano (1), Yobe (1) and Katsina (1) have reported more than 1 000 cases each this year.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	7-Nov-21	212 713	212 713	2 906	1.40%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 07 November 2021, a total of 212 713 confirmed cases with 204 379 recovered and 2 906 deaths have been reported.									
Nigeria	Lassa fever	Ungraded	1-Jan-21	1-Jan-21	31-Oct-21	3 496	403	79	19.60%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 43 of 2021, the number of new confirmed cases was 2. These were reported from Ondo and Edo States. Cumulatively from week 1 to week 43 of 2021, a total of 403 confirmed cases including 79 deaths among confirmed cases have been reported with a case fatality rate of 19.6% across 15 states. In total, 3 496 cases are suspected in 2021. This is lower than the same period reported in 2020. Of all confirmed cases 44% are from Edo, 35% from Ondo and 5% are from Taraba States.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
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	5-Nov-21	366	366	0	0.00%
Eight cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported; one each in Borno, Kano, and Taraba, two in Jigawa and three in Katsina. There are now 274 cases reported in 2021. There were eight cases reported in 2020, 118 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	12-Sep-17	1-Jan-21	30-Sep-21	39	39	2	5.10%
From 1 January 2021 to 30 September 2021, a total of 1 518 suspect Yellow fever (YF) cases were reported in 428 Local Government Areas (LGAs) across all 37 States including the Federal Capital Territory. A total of 74 blood samples (59 presumptive positive and 15 inconclusive) were sent to the Institut Pasteur in Dakar and 39 samples tested positive for YF by plaque reduction neutralization test (PRNT). Some PRNT-positive cases had a history of YF vaccination. There were two deaths reported among the PRNT positive cases. The YF PRNT positive cases were reported from 11 states (Anambra, Benue, Delta, Enugu, Imo, Kogi, Nasarawa, Niger, Ondo, Osun, and Oyo states).									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	7-Nov-21	99 947	99 947	1 334	1.30%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 07 November 2021, a total of 99 947 cases with 1 334 deaths and 98 005 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	7-Nov-21	3 729	3 729	56	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 07 November 2021, a total of 3 729 confirmed cases of COVID-19 have been reported, including 56 deaths. A total of 3 633 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	7-Nov-21	73 935	73 935	1 880	2.50%
From 2 March 2020 to 7 November 2021, a total of 73 935 confirmed cases of COVID-19 including 1 880 deaths and 72 043 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	5-Nov-21	16	16	0	0.00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2021 cases remains at 16.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	6-Nov-21	22 441	22 441	114	0.50%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 6 November 2021 a total of 22 441 cases have been confirmed, including 22 116 recoveries and 114 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	3-Nov-21	6 398	6 398	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 November 2021, a total of 6 398 confirmed COVID-19 cases were reported in the country including 121 deaths and 4 395 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	30-Sep-21	14	14	9	64.30%
As of 30 September 2021, 14 cases of Lassa fever have been reported from Kenema (12) and Kailahun (2) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 64%. Lassa fever is known to be endemic in Sierra Leone and surrounding countries.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	5-Nov-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	7-Nov-21	2 923 956	2 923 956	89 332	3.40%
Since the start of the COVID-19 pandemic in South Africa by 07 November 2021, a cumulative total of 2 923 956 confirmed cases and 89 332 deaths have been reported with 2 818 103 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	17-Oct-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people (60% of the country's total population) faced crisis levels of food insecurity phase (IPC) 3 or worse from April to July 2021- a figure that increased by 25% compared to the previous three months. Of the total number, 108K are in IPC 5, 2.4 are in IPC 4, and 4.6 million are in IPC 3. The total number includes 1.9 million acutely malnourished women and children suffering and 1.47 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	7-Oct-21	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. From the start of 2021, there is a total of 8.3 million people in need of humanitarian assistance, 1.7 million people internally displaced and 175 000 people living in protection of civilian sites across the country. According to OCHA, 623K people have been affected by flooding from May-October 2021 in 27 counties in from 8 states. Inter-ethnic violence in Tambura county has escalated since late June 2021.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	7-Nov-21	12 514	12 514	133	1.10%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 07 November 2021, a total of 12 514 confirmed COVID-19 cases were reported in the country including 133 deaths and 12 169 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	3-Jan-18	17-Oct-21	1 354	104	9	0.70%
The current outbreak in the Bentiu IDP camp, which started at the beginning of 2018, is ongoing. As of 17 Oct 2021, a total of 1 354 cases of hepatitis E including 9 deaths (CFR: 0.7%) have been reported since 1 Jan 2018. Hepatitis E cases have been above the epidemic threshold since week 19 of 2021 which has been mostly attributed to declining water, sanitation and hygiene services in the camp due to reduced funding, however efforts are no underway to respond to the sanitation and outbreak needs.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	10-Oct-21	1 313	54	2	0.20%
Since week 38 of 2019 to 10 October 2021, a total of 1 313 cases of measles were reported including 52 confirmed cases and two deaths. The outbreak is controlled in 9 counties (Tonj East, Juba, Bor, Kapoeta East, Jebel Boma, Aweil East, Wau, Pibor and Ibba). No county has reported outbreak in 2021.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	5-Nov-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	29-Oct-21	26 196	26 196	725	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 29 October 2021, a total of 26 196 cases have been reported in the country including 725 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	6-Nov-21	26 114	26 114	243	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 06 November 2021, a total of 26 144 cases including 243 deaths and 25 784 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	5-Nov-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	6-Nov-21	126 625	126 625	3 228	2.50%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 6 November 2021, a total of 126 625 confirmed COVID-19 cases, 96 878 recoveries with 3 228 deaths.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	7-Nov-21	209 902	209 902	3 664	1.70%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 07 November 2021, a total of 209 902 confirmed COVID-19 cases were reported in the country including 3 664 deaths and 206 068 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 wee 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	7-Nov-21	133 187	133 187	4 685	3.50%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 07 November 2021, a total of 133 187 confirmed COVID-19 cases were reported in the country including 4 685 deaths and 128 050 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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