COVID-19 Weekly Epidemiological Update

Edition 42, published 1 June 2021

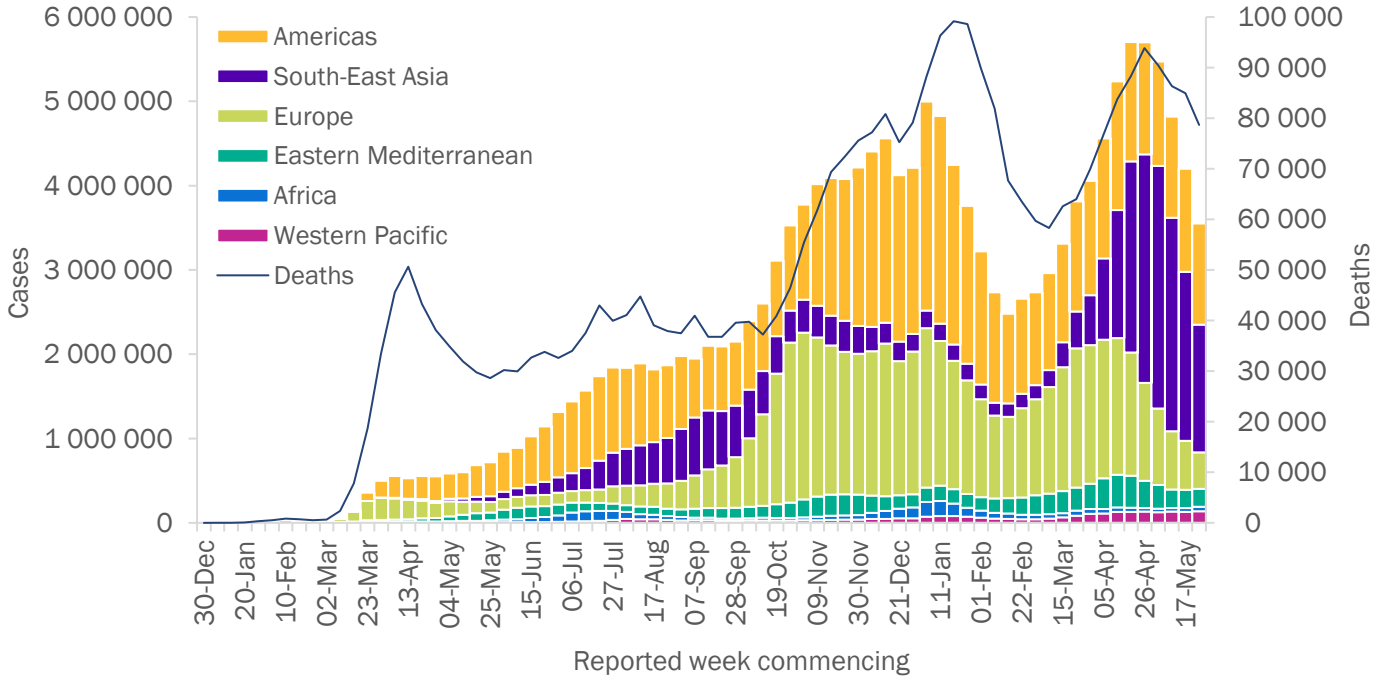
In this edition:

Global overview

Data as of 30 May 2021

The number of new COVID-19 cases and deaths continues to decrease, with over 3.5 million new cases and 78 000 new deaths reported globally in the past week; a 15% and 7% decrease respectively, compared to the previous week (Figure 1). The European and South-East Asia Regions reported the largest decline in new cases and deaths in the past week, while case incidence increased in the African and Western Pacific regions (Table 1). The numbers of cases reported by the Americas and Eastern Mediterranean Regions were similar to those reported in the previous week. An increase in death incidence was reported in the African Region, whereas the Europe and the Eastern Mediterranean Regions reported decreases, and the reported death incidence in the Western Pacific and the Americas Regions was similar to the death incidence in the previous week. Although the number of global cases and deaths continued to decrease for a fifth and fourth consecutive week respectively, case and death incidences remain at high levels and significant increases have been reported in many countries in all regions.

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 30 May 2021**



**See *Annex 3: Data, table and figure notes*

The highest numbers of new cases were reported from India (1 364 668 new cases; 26% decrease), Brazil (420 981 new cases; 7% decrease), Argentina (219 910 new cases; 3% increase), the United States of America (153 587 new cases; 18% decrease), and Colombia (150 517 new cases; 40% increase).

Table 1. Newly reported and cumulative COVID-19 cases and deaths, by WHO Region, as of 30 May 2021**

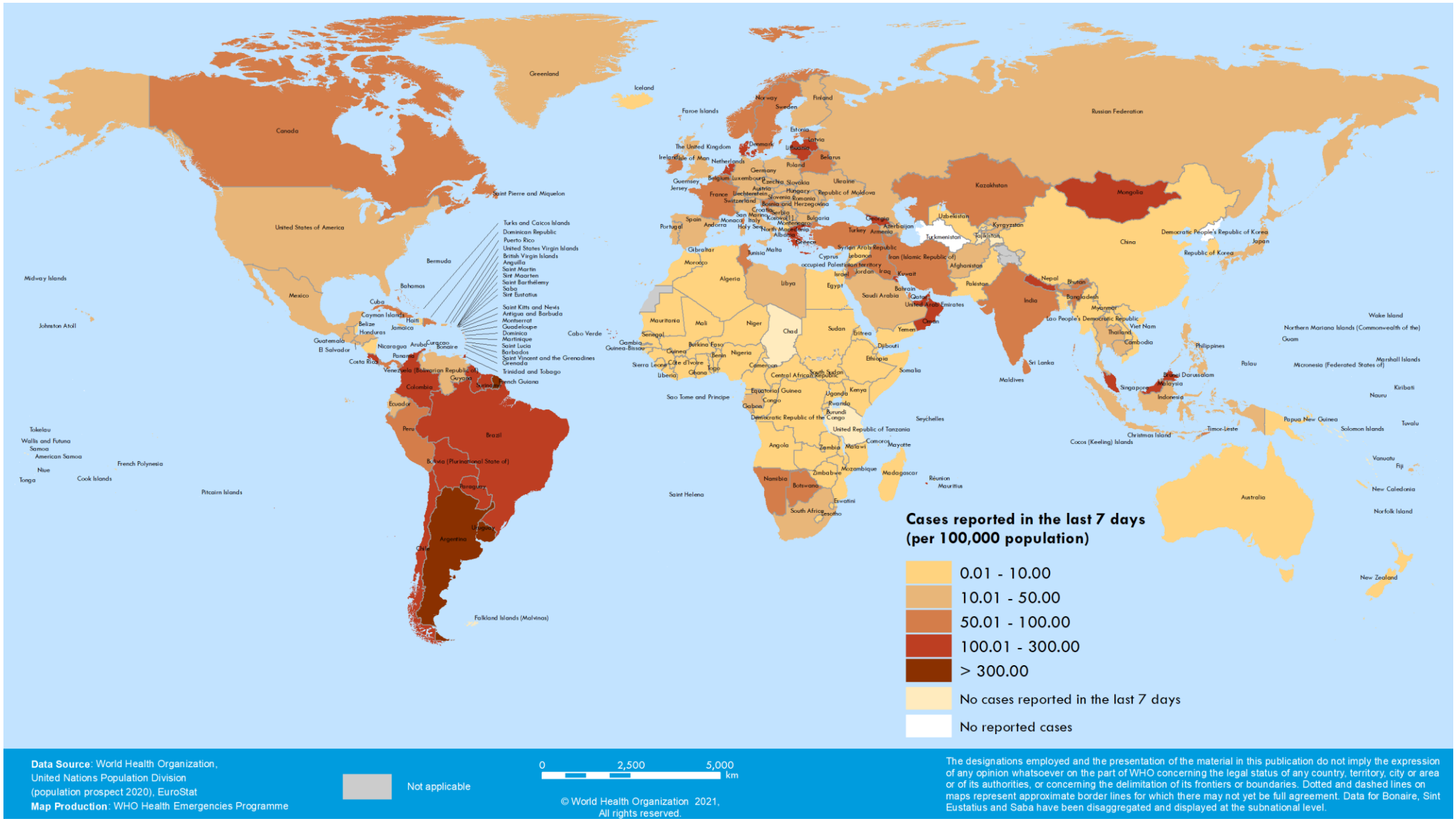
WHO Region	New cases in last 7 days (%)	Change in new cases in last 7 days *	Cumulative cases (%)	New deaths in last 7 days (%)	Change in new deaths in last 7 days *	Cumulative deaths (%)
Americas	1 198 427 (34%)	-2%	67 178 933 (40%)	31 286 (40%)	-1%	1 646 407 (47%)
Europe	430 945 (12%)	-26%	54 244 552 (32%)	11 113 (14%)	-17%	1 148 766 (33%)
South-East Asia	1 516 572 (43%)	-24%	31 605 221 (19%)	29 477 (37%)	-8%	401 754 (11%)
Eastern Mediterranean	212 568 (6%)	-1%	10 076 696 (6%)	3 556 (5%)	-18%	201 642 (6%)
Africa	52 710 (1%)	22%	3 497 924 (2%)	1 143 (1%)	11%	87 107 (2%)
Western Pacific	139 234 (4%)	6%	3 000 768 (2%)	2 090 (3%)	-2%	45 148 (1%)
Global	**3 550 456 (100%)**	**-15%**	**169 604 858 (100%)**	**78 665 (100%)**	**-7%**	**3 530 837 (100%)**

**Percent change in the number of newly confirmed cases/deaths in past seven days, compared to seven days prior*
**See *Annex 3: Data, table and figure notes*

For the latest data and other updates on COVID-19, please see:

- WHO COVID-19 Dashboard
- WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update

Figure 2. COVID-19 cases per 100 000 population reported by countries, territories and areas, 24 May – 30 May 2021**



**See *Annex 3: Data, table and figure notes*

Special Focus: Update on SARS-CoV-2 Variants of Interest (VOIs) and Variants of Concern (VOCs)

WHO, in collaboration with national authorities, institutions and researchers, routinely assesses if variants of SARS-CoV-2 alter clinical presentation and severity, or if they show increases in transmissibility that require national health authorities to implement strengthened public health and social measures (PHSM) to control disease spread. Systems have been established in WHO to detect "signals" of potential Variants of Concern (VOCs) or Variants of Interest (VOIs) and assess these based on the risk posed to global public health. Here we provide updates on new WHO labels and classifications of VOCs and VOIs, as well as the updated geographical distribution of VOCs. National authorities may choose to designate other variants of local interest/concern.

New easy-to-say VOI and VOCs labels for public communication

On 31 May 2021, WHO announced new easy-to-say/easy-to-remember VOI and VOC labels to facilitate public communication about SARS-CoV-2 variants. The need for easy-to-say labels of SARS-CoV-2 VOI and VOC arose for several reasons, including:

- the existence of different genomic nomenclature systems, which serve important scientific purposes but complicate public communication around variants due to the complexities of the labels assigned (e.g., B.1.617.2, 21A/S:478K),
- the common but potentially stigmatizing use of the name of the country or area of first detection of a variant as an easily recognizable label.

WHO has now assigned labels based upon the Greek alphabet to globally classified VOCs and VOIs (Table 2), and will sequentially assign new labels for newly-designated global VOCs and VOIs in the future. If all 24 letters become assigned, other lists of labels will be announced by WHO. As VOIs and VOCs are reclassified based on the evolving situation, it is expected that these will retain their label, and labels of formed VOIs/VOCs will not be reused for labeling new emerging variants.

We recommend Member States, health authorities, media and others communicating on SARS-CoV-2 variants to adopt the WHO labels in public communication as soon as practical. Importantly, these labels do not replace the three current nomenclature systems for tracking and scientific reporting of SARS-CoV-2 genetic evolution: GISAID, Nextstrain, and Pango – these systems remain critical and will continue to be used in scientific communications.

Recent changes to the VOIs and VOCs classifications

As the global public health risks posed by specific SARS-CoV-2 variants becomes better understood and evolves, WHO will continue to update the list of global VOIs and VOCs. This is necessary to adjust to the emergence of new variants, their changing epidemiology (e.g., the incidence of some variants is rapidly declining), and our understanding of their phenotypic impacts as new evidence becomes available and is shared.

First, available information allows for the delineation of VOC B.1.617. B.1.617 viruses are divided in three lineages: B.1.617.1, B.1.617.2 and B.1.617.3. Available findings for lineages B.1.617.1 and B.1.617.2 were initially used to designate B.1.617 a global VOC on 11 May 2021. Since then, it has become evident that greater public health risks are currently associated with B.1.617.2, while lower rates of transmission of other lineages have been observed. To reflect this updated information, B.1.617 has been delineated as follows:

- B.1.617.2 remains a VOC and labelled variant Delta – we continue to observe significantly increased transmissibility and a growing number of countries reporting outbreaks associated with this variant. Further studies into the impact of this variant remain a high priority for WHO.
- B.1.617.1 has been reclassified to a VOI and labelled variant Kappa – while also demonstrating increased transmissibility (in specified locations), global prevalence appears to be declining. This variant will continue to be monitored and reassessed regularly.
- B.1.617.3 is no longer classified as either a VOI or VOC – relatively few reports of this variant have been submitted to date.

Second, variant B.1.616, which was first detected in France following investigations into an unusual cluster of cases in a hospital, is no longer classified as a VOI. Local authorities have reported that the outbreak has been controlled, and no further detections within or outside of France have been reported since late-April 2021.[1] Further local and regional monitoring remains prudent, given B.1.616 was associated with potential increased disease severity and reduced detections via nasopharyngeal samples.[2]

Variants no longer classified as VOCs or VOIs will continue to be monitored as part of the overall evolution of SARS-CoV-2, and may be reassessed pending new evidence indicating an increased public health risk.

Table 2: SARS-CoV-2 Variants of Concern (VOCs) and Variants of Interest (VOIs), as of 31 May 2021

WHO label	Pango lineage	GISAID clade	Nextstrain clade	Earliest documented samples	Date of designation
Variants of Concern (VOCs)					
Alpha	B.1.1.7	GRY (formerly GR/501Y.V1)	20I/501Y.V1	United Kingdom, Sep-2020	18-Dec-2020
Beta	B.1.351	GH/501Y.V2	20H/501Y.V2	South Africa, May-2020	18-Dec-2020
Gamma	P.1	GR/501Y.V3	20J/501Y.V3	Brazil, Nov-2020	11-Jan-2021
Delta	B.1.617.2	G/452R.V3	21A/S:478K	India, Oct-2020	VOI: 4-Apr-2021 VOC: 11-May-2021
Variants of Interest (VOIs)					
Epsilon	B.1.427/ B.1.429	GH/452R.V1	20C/S.452R	United States of America, Mar-2020	5-Mar-2021
Zeta	P.2	GR	20B/S.484K	Brazil, Apr-2020	17-Mar-2021
Eta	B.1.525	G/484K.V3	20A/S484K	Multiple countries, Dec-2020	17-Mar-2021
Theta	P.3	GR	20B/S:265C	Philippines, Jan-2021	24-Mar-2021
Iota	B.1.526	GH	20C/S:484K	United States of America, Nov-2020	24-Mar-2021
Kappa	B.1.617.1	G/452R.V3	21A/S:154K	India, Oct-2020	4-Apr-2021

[1] Santé publique France, COVID-19 : point épidémiologique du 27 mai 2021. https://www.santepubliquefrance.fr/maladies-et-traumatismes/maladies-et-infections-respiratoires/infection-a-coronavirus/documents/bulletin-national/covid-19-point-epidemiologique-du-27-mai-2021

[2] Fillatre et al. A new SARS-CoV-2 variant poorly detected by RT-PCR on nasopharyngeal samples, with high lethality (preprint). https://www.medrxiv.org/content/10.1101/2021.05.05.21256690v1

Geographic distribution

As surveillance activities to detect SARS-CoV-2 variants are strengthened at local and national levels, including by strategic genomic sequencing, the number of countries/areas/territories (hereafter countries) reporting VOCs has continued to increase (Figures 3, Annex 2). This distribution should be interpreted with due consideration of surveillance limitations, including differences in sequencing capacities and sampling strategies between countries.

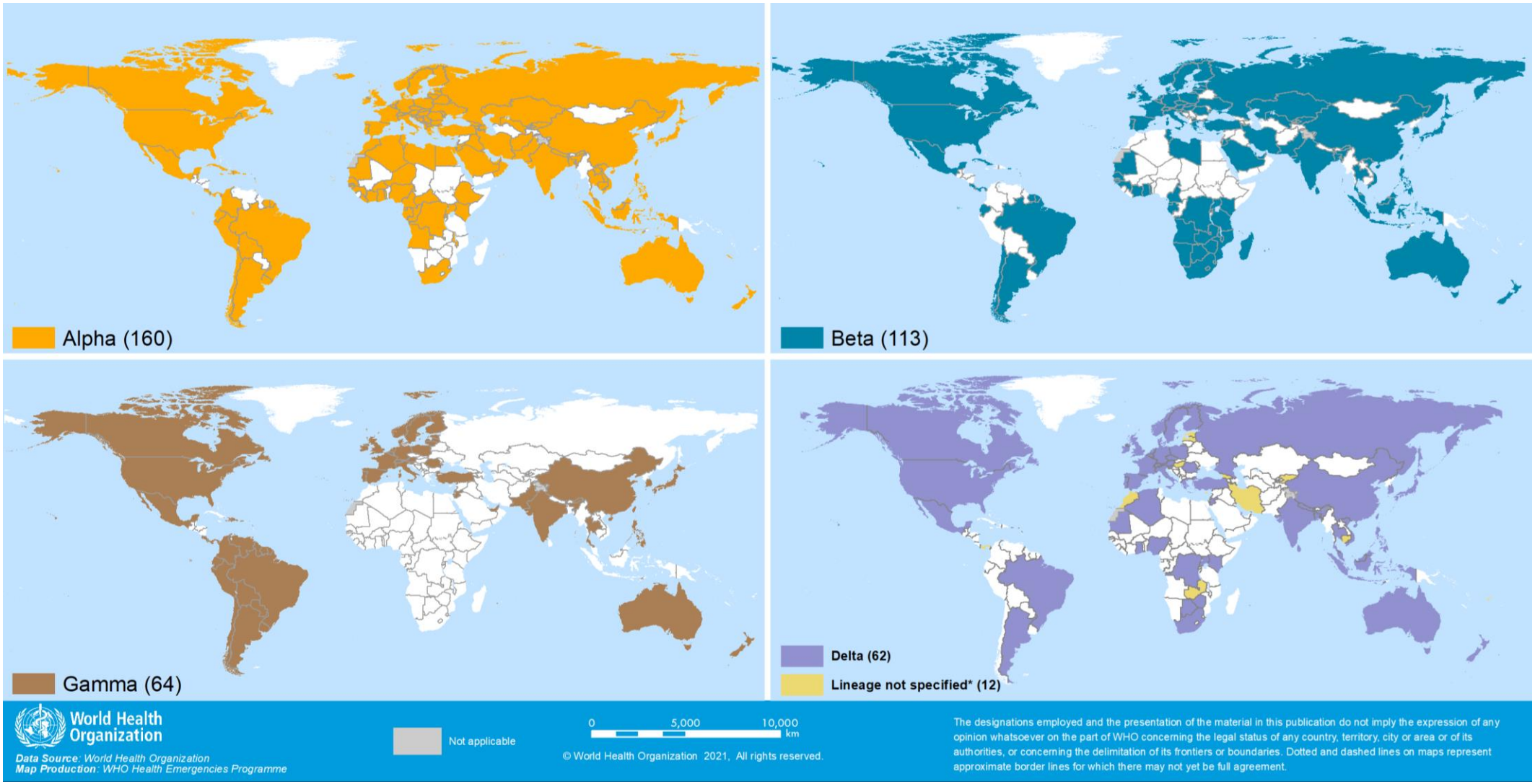
WHO recommendations

Virus evolution is expected, and the more SARS-CoV-2 circulates, the more opportunities it has to evolve. Reducing transmission through established and proven disease control methods such as those outlined in the COVID-19 Strategic Preparedness and Response Plan, as well as avoiding introductions into animal populations are crucial aspects of the global strategy to reduce the occurrence of mutations that have negative public health implications. PHSM remain critical to curb the spread of SARS-CoV-2 and its variants. Evidence from multiple countries with extensive transmission of VOCs has indicated that the PHSM, including infection prevention and control (IPC) measures in health facilities has been effective in reducing COVID-19 case incidence, which has led to a reduction in hospitalizations and deaths among COVID-19 patients. National and local authorities are encouraged to continue strengthening existing PHSM, IPC and disease control activities. Authorities are also encouraged to strengthen surveillance and sequencing capacities and apply a systematic approach to provide a representative indication of the extent of transmission of SARS-CoV-2 variants based on the local context, and to detect unusual events.

Additional resources

- Tracking SARS-CoV-2 variants
- Working definitions of SARS-CoV-2 Variants of Interest and Variants of Concern
- COVID-19 new variants: Knowledge gaps and research
- Genomic sequencing of SARS-CoV-2: a guide to implementation for maximum impact on public health
- Considerations for implementing and adjusting PHSM in the context of COVID-19
- COVID-19 Situation Reports from WHO Regional Offices and partners: AFRO, AMRO/PAHO, EMRO, EURO/ECDC, SEARO, WPRO
- ACT accelerator diagnostic pillar, FIND test directory

Figure 3. Countries, territories and areas reporting variants Alpha (B.1.1.7), Beta (B.1.351), Gamma (P.1) and Delta (B.1.617.2), as of 1 June 2021**



**Includes countries/territories/areas reporting the detection of B.1.617 without further specification of lineage at this time. These will be reallocated as further details become available.*
***Countries/territories/areas highlighted include both official and unofficial reports of VOC detections, and do not presently differentiate between detections among travellers (e.g., at Points of Entry) or local community cases. Please see Annex 2 for further details.*

Special focus: Early lessons from country implementation of COVID-19 vaccination

Safe and effective vaccines, together with non-pharmaceutical interventions are a game-changing tool in the response to the COVID-19 pandemic. As of 26 May 2021, over 1.5 billion vaccine doses have been administered globally, and over 736 million individuals have received at least one dose (see the WHO COVID-19 Dashboard for the latest figures). However, vaccination rates are not uniform across countries. The lowest-income countries had access to vaccines later than higher-income countries, and have vaccinated a substantially lower proportion of their target populations.[3] We briefly summarize early lessons learned by thematic areas and share qualitative insights gained during the early phases of rolling out COVID-19 vaccines, based on anecdotal reports from regional early learning webinars and discussions with countries, particularly in low-and-middle-income countries (LMICs).

Planning and coordination

Most LMICs prepared National Deployment and Vaccination Plans in anticipation of vaccine supply becoming available. They also established governance structures and coordination processes for planning and overseeing deployment of vaccination activities as part of national response plans. In several countries, engaging with the offices of heads of state facilitated collaboration across health programmes and sectors, which enabled coordinated vaccination.

Identifying and prioritizing groups at the highest risk of exposure or severe outcomes facilitated operational planning. While many countries were able to roughly estimate the size of their priority target groups, information on who they are and where they resided was often unknown. Several countries established digital platforms and used community mobilizers to identify and pre-register priority target groups to facilitate vaccine delivery.

The findings from scenario-based simulation exercises or drills helped identify unanticipated operational bottlenecks, and were used to update operational plans. At the subnational level, micro plans facilitated vaccine roll-out and session planning, through estimation of the target population size at each administrative level, requisite resources including vaccine doses, supplies and human resources. When such micro plans did not exist or were inadequately prepared at the district and lower administrative levels, it contributed to delayed or slower vaccine roll-out.

Costing and financing

While costing tools were developed to assist countries in estimating vaccine and operational costs, these tools were complex, and many countries lacked the capacity to use them to develop timely and robust cost estimates. Some LMICs were quickly able to mobilize domestic resources to support vaccine rollout, whereas other LMIC governments did not allocate adequate domestic resources. In the past, vaccination for epidemics was accompanied by external support to partially cover operational costs. This was not the case with the COVID-19 vaccine roll-out. The dependency on donors and failure to secure funds in time led to delays in conducting health worker training, compromise on the quality of these trainings, or lowered motivation among health workers due to delayed payment of salaries. In addition, disbursement and distribution of funds to the lowest administrative levels was not streamlined in some countries, leading to a lack of funds, even though funds were available at the national level.

[3] pandem-ic. 2021.Vaccination by income. Available from: https://pandem-ic.com/vaccination-trackers/

Supply chain and logistics

Most LMICs utilized findings from national Effective Vaccine Management (EVM) assessments and benefited from support by Gavi, the Vaccine Alliance, to optimize their cold chain equipment. Therefore, most had sufficient cold chain capacity to handle the initial shipment of vaccines. Several countries also successfully managed vaccines requiring ultra-cold chain storage and transport; some of them using equipment procured for Ebola vaccines.

Several countries had multiple vaccine products through donations, the COVAX facility, and direct procurement from manufacturers. Managing multiple vaccines with different cold chain requirements without vaccine vial monitors led to logistical challenges. A few of these products had not received WHO Emergency Use Listing and countries did not have the requisite information on product characteristics to enable logistical planning. The initial doses of vaccines that countries received had a relatively short shelf-life of six months at the time of release, often with a shorter shelf-life at the time of delivery to countries. Where there was slow roll-out of vaccines, it was challenging to use them in a timely manner. On occasion, vaccines were re-distributed to other countries to avoid wastage.

Vaccine delivery

While most LMICs had experience with conducting mass vaccination campaigns, Infection Prevention and Control (IPC) at vaccination sites added some challenges to maintain a smooth workflow. Countries provided safe spaces for observation of vaccinees for severe allergic reactions following vaccination, and trained personnel and provided supplies to manage such reactions. Several countries reported lower than expected turn-out at sessions due to vaccine hesitancy, resulting in a high volume of open vials to be wasted.

Demand creation and hesitancy

Early communication to create awareness and prepare communities for the vaccine roll-out, as well as public vaccination of the political and religious leaders improved vaccine uptake. Several countries also successfully utilized social media to heighten public awareness. However, not all countries had the capacity to cope with the magnitude of misinformation or disinformation being disseminated on media platforms and to mount a timely and comprehensive response.

Hesitancy, especially among health and care workers, driven by fear of adverse effects of specific products reported in the media, further fuelled by suspension of some vaccines in high-income countries contributed to low vaccine uptake. Hesitancy among health and care workers was reported to have a ripple effect in other priority groups.

Digital monitoring

Digital registration and data monitoring systems played a key role in monitoring vaccination, generating digital vaccination certificates in several countries, and sending reminders for follow-up vaccination. Digital pre-registration systems, where established, also improved operational flow and enabled the achievement of vaccination targets for each session. However, the lack of digital tools for data entry at the service delivery points impeded data collection in a few countries. In at least one country where hybrid paper-based and digital platforms were used, the lack of proper planning led to inadequate numbers of data entry clerks and delayed data entry and transmission. Several countries reported delayed and incomplete reporting from the lower administrative levels and the limited granular and timely data may have prohibited operational decisions.

Safety monitoring

Most countries leveraged the existing safety surveillance system for immunization to establish reporting of adverse events following vaccination and regularly reported data to WHO and global pharmacovigilance

databases. A few countries lacked the capacity to investigate and conduct causality assessments of serious adverse events and in some, key information was not collected to enable adequate investigation. In other instances, decisions to halt vaccination following a reported death contributed to misperceptions about the safety of the vaccine.

Lessons learned

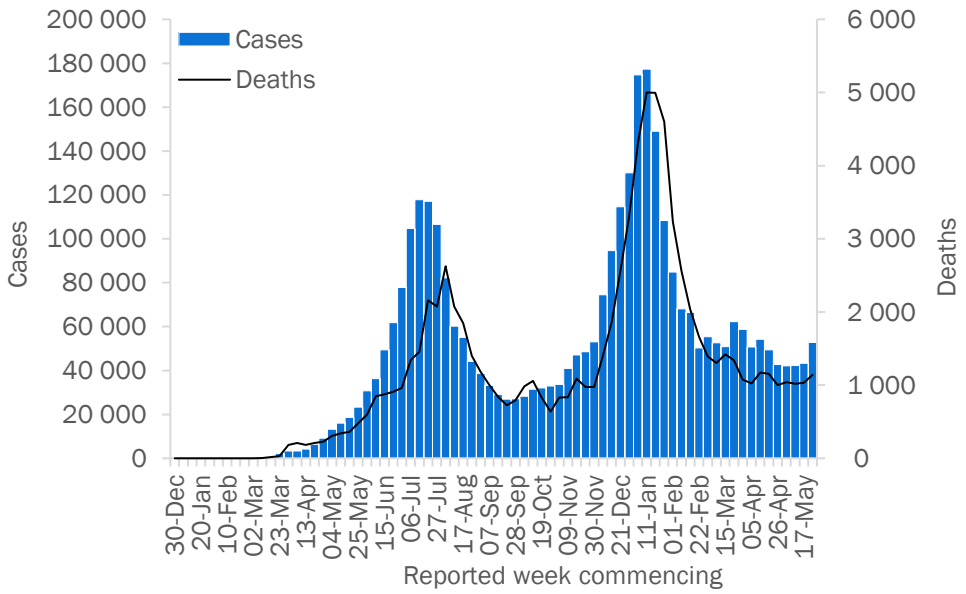
Lessons learned from the early phases of vaccine introduction will inform ongoing vaccination activities. Sharing early lessons through periodic webinars and peer-to-peer exchanges allowed countries to adopt best practices or successfully implement solutions to operational challenges. Additionally, WHO and partner agencies have used these insights to develop or update guidance and information notes to support countries. In the area of costing and financing, the COVID-19 Vaccine Introduction and deployment Tool (CVIC) was updated and a mechanism to provide direct technical support to countries was established to help improve operational cost estimates. New sources of funding are being developed to support LMICs with filling budgetary gaps to meet immediate operational needs and longer-term financing. Insights from the early introduction of COVID-19 vaccination can further be leveraged to create more resilient immunization systems, foster greater integration in primary health care delivery, and accelerate the implementation of the life-course approach to deliver a package of primary health care interventions.

WHO regional overviews

African Region

The African Region reported over 52 000 new cases and over 1100 new deaths, a 22% and an 11% increase respectively compared to the previous week. Case incidence increased after four consecutive weeks of a plateau in new weekly cases. The highest numbers of new cases were reported from South Africa (26 498 new cases; 44.7 new cases per 100 000 population; a 24% increase), Uganda (2424 new cases; 5.3 new cases per 100 000; a 191% increase), and Kenya (2377 new cases; 4.4 new cases per 100 000; a 13% decrease).

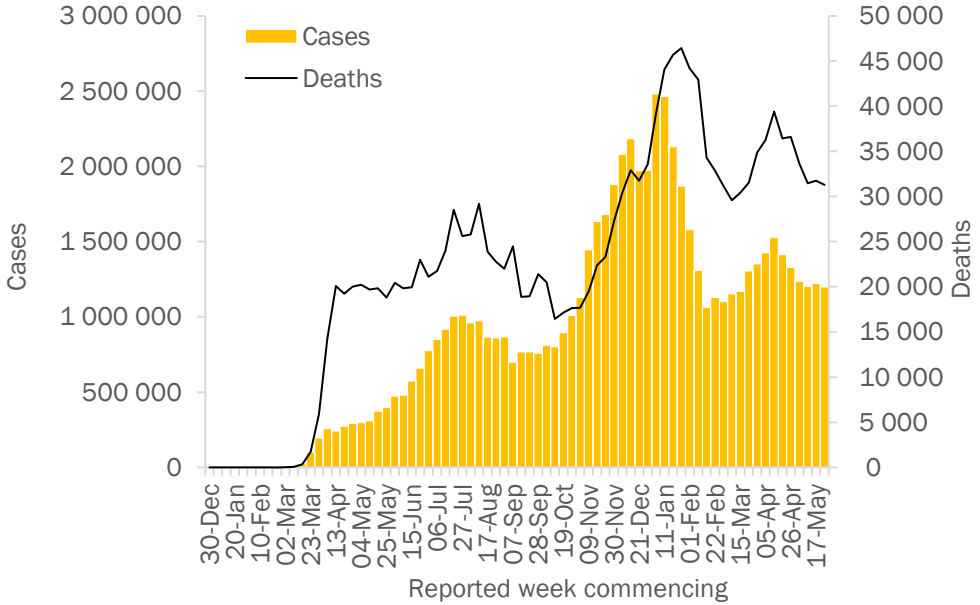
The highest numbers of new deaths were reported from South Africa (591 new deaths; 1.0 new deaths per 100 000 population; similar to the number reported in the previous week), Kenya (92 new deaths; 0.2 new deaths per 100 000; a 92% increase), and Ethiopia (75 new deaths; 0.1 new deaths per 100 000; an 18% decrease).



Region of the Americas

The Region of the Americas reported just under 1.2 million new cases and over 31 000 new deaths, figures similar to those of the previous week. The number of new cases has remained relatively stable for a fourth consecutive week, while the number of deaths has remained stable for a third consecutive week. The highest numbers of new cases were reported from Brazil (420 981 new cases; 198.1 new cases per 100 000; a 7% decrease), Argentina (219 910 new cases; 486.6 new cases per 100 000; a 3% increase), and the United States of America (153 587 new cases; 46.4 new cases per 100 000; an 18% decrease).

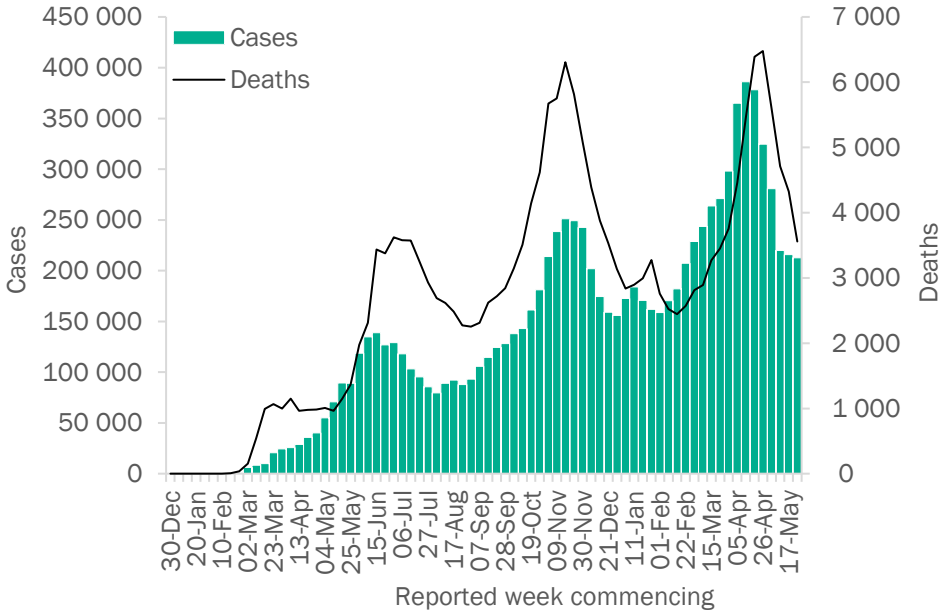
The highest numbers of new deaths were reported from Brazil (12 736 new deaths; 6.0 new deaths per 100 000; a 7% decrease), the United States of America (4596 new deaths; 1.4 new deaths per 100 000; a 14% increase), and Colombia (3488 new deaths; 6.9 new deaths per 100 000; similar to the number reported in the previous week).



Eastern Mediterranean Region

The Eastern Mediterranean Region reported over 212 000 new cases, similar to the number reported in the previous week, and over 3500 new deaths, an 18% decrease compared to the previous week. While small decreases have been seen in case incidence for the past three weeks, death incidence continued a steep decline for a fifth consecutive week. The highest numbers of new cases were reported from the Islamic Republic of Iran (69 331 new cases; 82.5 new cases per 100 000; a 17% decrease), Iraq (29 459 new cases; 73.2 new cases per 100 000; an 8% increase), and Bahrain (20 829 new cases; 1224.1 new cases per 100 000; a 32% increase).

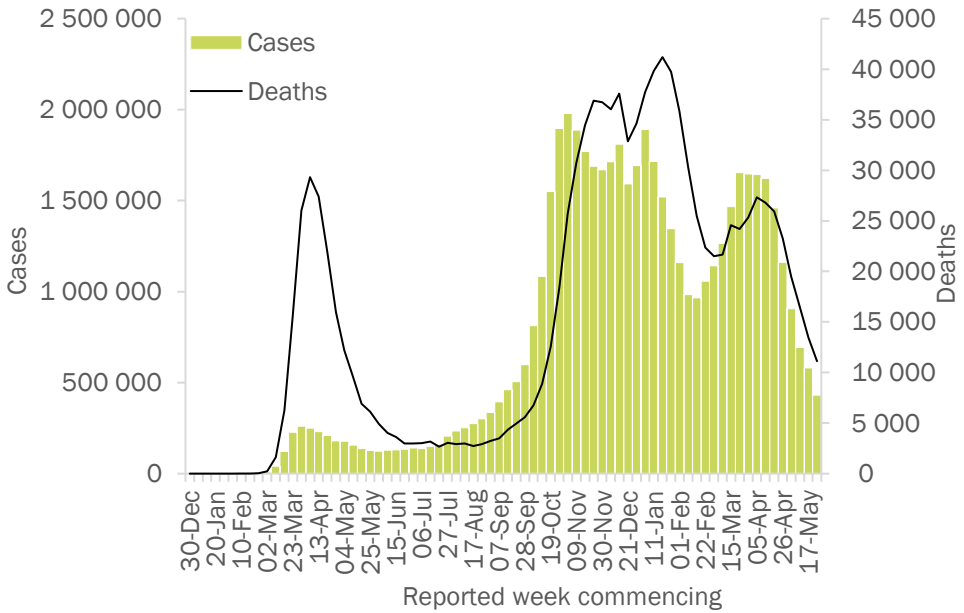
The highest numbers of new deaths were reported from the Islamic Republic of Iran (1360 new deaths; 1.6 new deaths per 100 000; a 22% decrease), Pakistan (503 new deaths; 0.2 new deaths per 100 000; a 29% decrease), and Tunisia (392 new deaths; 3.3 new deaths per 100 000; a 3% decrease).



European Region

The European Region reported just under 431 000 new cases and over 11 000 new deaths, a 26% and a 17% decrease respectively compared to the previous week. The number of cases and deaths have steeply decreased for the past six and seven weeks respectively. The highest numbers of new cases were reported from the Russian Federation (61 937 new cases; 42.4 new cases per 100 000; similar to the number reported in the previous week), France (60 600 new cases; 93.2 new cases per 100 000; a 26% decrease), and Turkey (57 330 new cases; 68.0 new cases per 100 000; a 20% decrease).

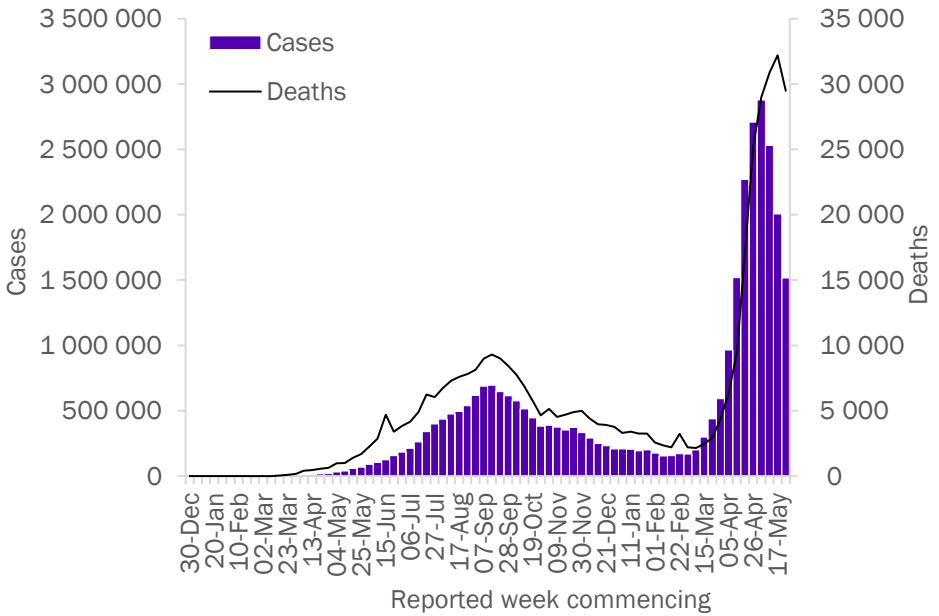
The highest numbers of new deaths were reported from the Russian Federation (2680 new deaths; 1.8 new deaths per 100 000; a 3% increase), Turkey (1200 new deaths; 1.4 new deaths per 100 000; a 22% decrease), and Ukraine (1104 new deaths; 2.5 new deaths per 100 000; a 15% decrease).



South-East Asia Region

The South-East Asia Region reported over 1.5 million new cases and over 29 000 new deaths, a 24% and an 8% decrease respectively compared to the previous week. Case incidence continued to follow a sharp decline for a third consecutive week, and death incidence decreased for the first time since early March 2021, primarily driven by trends reported in India. The highest numbers of new cases were reported from India (1 364 668 new cases; 98.9 new cases per 100 000; a 26% decrease), Nepal (47 779 new cases; 164.0 new cases per 100 000; an 18% decrease), and Indonesia (39 986 new cases; 14.6 new cases per 100 000; a 20% increase).

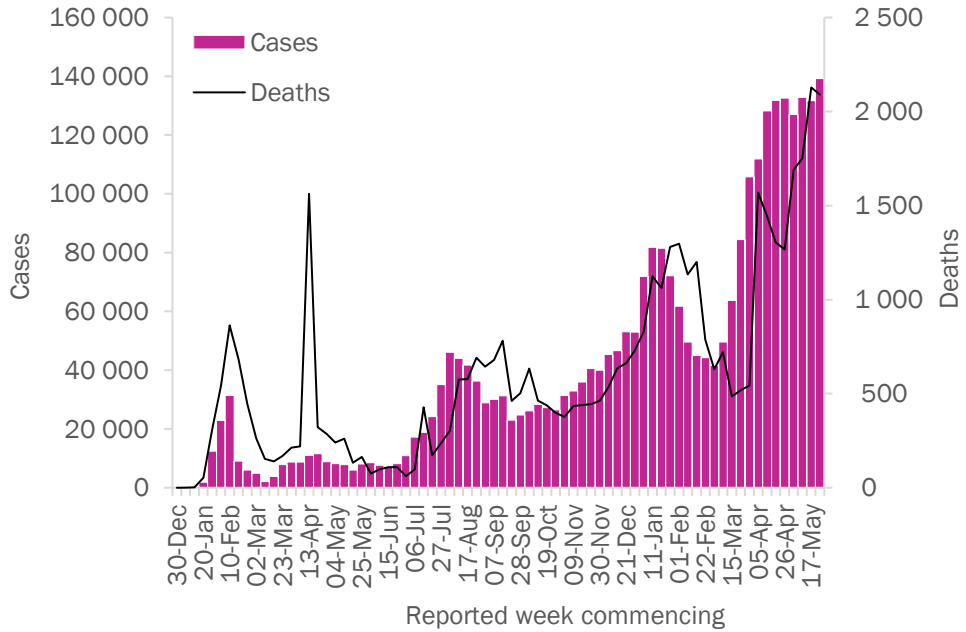
The highest numbers of new deaths were reported from India (26 706 new deaths; 1.9 new deaths per 100 000; an 8% decrease), Indonesia (1057 new deaths; 0.4 new deaths per 100 000; a 15% decrease), and Nepal (1010 new deaths; 3.5 new deaths per 100 000; a 22% decrease).



Western Pacific Region

The Western Pacific Region reported over 139 000 new cases, a 6% increase compared to the previous week and just under 2100 new deaths, a similar number to the previous week. The numbers of both cases and deaths remain at the highest levels since the beginning of the pandemic. The highest numbers of new cases were reported from Malaysia (53 419 new cases; 165.0 new cases per 100 000; a 38% increase), the Philippines (38 362 new cases; 35.0 new cases per 100 000; a 4% decrease), and Japan (27 400 new cases; 21.7 new cases per 100 000; a 24% decrease).

The highest numbers of new deaths were reported from the Philippines (776 new deaths; 0.7 new deaths per 100 000; a 13% decrease), Japan (684 new deaths; 0.5 new deaths per 100 000; a 12% decrease), and Malaysia (451 new deaths; 1.4 new deaths per 100 000; a 35% increase).



Key weekly updates

WHO Director-General's key messages

- In his opening remarks at the media briefing on COVID-19 – 28 May 2021, the Director-General called on world leaders to support a massive push to vaccinate at least 10% of the population of every country by September, and 30% by the end of the year. If countries immediately share doses with COVAX, and if manufacturers prioritize COVAX, this target can be reached and lives saved.
- Ultimately, the fastest way to bring this pandemic to an end is to dramatically increase global manufacturing of vaccines, tests, treatments and other medical supplies, and ensure equitable access. A year ago, more than 40 Heads of State joined WHO to form C-TAP, the COVID-19 Technology Access Pool.
- In his closing remarks at the 74th World Health Assembly, the Director-General reminded that the theme of this Assembly was "Ending this pandemic, preventing the next: building together a healthier, safer and fairer world" while stressing that we still have a lot of work to do to end this pandemic. The tailored and consistent use of public health measures, in combination with equitable vaccination, remains the way out.

Updates and publications

- COVAX Joint Statement: Call to action to equip COVAX to deliver 2 billion doses in 2021
- Technical note on delayed shipments for theChAdOx1-S [recombinant] vaccines: what are the implications for the administration of second doses?
- Critical preparedness, readiness and response actions for COVID-19
- Operational guide for engaging communities in contact tracing
- World Health Assembly recommends reinforcement of measures to protect mental health during public health emergencies
- Improving family medicine in China and battling COVID-19 with smart systems
- A New Commitment for Vaccine Equity and Defeating the Pandemic

Technical guidance and other resources

- Technical guidance
- WHO Coronavirus Disease (COVID-19) Dashboard
- Weekly COVID-19 Operational Updates
- WHO COVID-19 case definitions
- COVID-19 Supply Chain Inter-Agency Coordination Cell Weekly Situational Update
- Research and Development
- Online courses on COVID-19 in official UN languages and in additional national languages
- The Strategic Preparedness and Response Plan (SPRP) outlining the support the international community can provide to all countries to prepare and respond to the virus
- Updates from WHO regions:
  - African Region
  - Region of the Americas
  - Eastern Mediterranean Region
  - South-East Asia Region
  - European Region
  - Western Pacific Region
- Recommendations and advice for the public:
  - Protect yourself
  - Questions and answers
  - Travel advice
- EPI-WIN: tailored information for individuals, organizations and communities
- WHO Academy COVID-19 mobile learning app

Annex

Annex 1. COVID-19 confirmed cases and deaths reported in the last seven days by countries, territories and areas, and WHO Region, as of 30 May 2021**

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Africa	**52 710**	**3 497 924**	**311.8**	**1 143**	**87 107**	**7.8**	
South Africa	26 498	1 659 070	2 797.3	591	56 363	95.0	Community transmission
Uganda	2 424	45 931	100.4	12	362	0.8	Community transmission
Kenya	2 377	170 485	317.1	92	3 141	5.8	Community transmission
Ethiopia	2 299	271 200	235.9	75	4 143	3.6	Community transmission
Botswana	2 162	56 313	2 394.6	47	831	35.3	Community transmission
Angola	2 031	34 180	104.0	42	757	2.3	Community transmission
Namibia	1 947	54 659	2 151.2	55	818	32.2	Community transmission
Algeria	1 805	128 456	292.9	49	3 460	7.9	Community transmission
Zambia	1 645	94 751	515.4	9	1 276	6.9	Community transmission
Cameroon	1 226	77 982	293.8	40	1 270	4.8	Community transmission
Cabo Verde	1 075	30 273	5 444.9	7	263	47.3	Community transmission
Seychelles	982	11 415	11 606.9	2	40	40.7	Community transmission
Democratic Republic of the Congo	553	31 416	35.1	3	782	0.9	Community transmission
Madagascar	454	41 234	148.9	36	829	3.0	Community transmission
Rwanda	356	26 780	206.8	1	349	2.7	Community transmission
Mauritania	349	19 463	418.6	5	463	10.0	Community transmission
Senegal	308	41 331	246.8	9	1 138	6.8	Community transmission
Nigeria	306	166 285	80.7	4	2 071	1.0	Community transmission
Burundi	260	4 754	40.0	0	6	0.1	Community transmission
Gabon	258	24 365	1 094.7	3	150	6.7	Community transmission
Zimbabwe	254	38 933	261.9	8	1 594	10.7	Community transmission
Côte d'Ivoire	253	47 195	178.9	3	301	1.1	Community transmission
Ghana	192	93 775	301.8	1	784	2.5	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Guinea	184	23 172	176.4	3	161	1.2	Community transmission
Congo	182	11 658	211.3	3	153	2.8	Community transmission
Mozambique	156	70 724	226.3	5	836	2.7	Community transmission
Eritrea	129	4 061	114.5	0	14	0.4	Community transmission
Equatorial Guinea	93	8 529	607.9	5	118	8.4	Community transmission
Togo	80	13 432	162.2	0	125	1.5	Community transmission
Central African Republic	75	7 085	146.7	2	98	2.0	Community transmission
Mauritius	71	1 393	109.5	0	17	1.3	Clusters of cases
Malawi	55	34 329	179.5	1	1 154	6.0	Community transmission
Niger	46	5 410	22.3	0	192	0.8	Community transmission
Eswatini	39	18 589	1 602.3	0	672	57.9	Community transmission
Liberia	37	2 179	43.1	1	86	1.7	Community transmission
Benin	33	8 058	66.5	0	101	0.8	Community transmission
Mali	29	14 265	70.4	5	517	2.6	Community transmission
Sierra Leone	23	4 140	51.9	0	79	1.0	Community transmission
Lesotho	19	10 825	505.3	6	326	15.2	Community transmission
South Sudan	18	10 688	95.5	0	115	1.0	Community transmission
Burkina Faso	16	13 430	64.2	1	166	0.8	Community transmission
Gambia	15	5 993	248.0	1	179	7.4	Community transmission
Guinea-Bissau	12	3 761	191.1	0	68	3.5	Community transmission
Sao Tome and Principe	11	2 345	1 070.0	1	37	16.9	Community transmission
Comoros	9	3 949	454.1	0	146	16.8	Community transmission
Chad	5	4 928	30.0	0	173	1.1	Community transmission
United Republic of Tanzania	0	509	0.9	0	21	0.0	Pending
Territories[iii]							
Réunion	1 335	24 901	2 781.3	13	189	21.1	Community transmission
Mayotte	24	19 325	7 083.6	2	173	63.4	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Americas	**1 198 427**	**67 178 933**	**6 568.3**	**31 286**	**1 646 407**	**161.0**	
Brazil	420 981	16 391 930	7 711.7	12 736	459 045	216.0	Community transmission
Argentina	219 910	3 702 422	8 192.0	3 302	76 693	169.7	Community transmission
United States of America	153 587	32 916 501	9 944.5	4 596	588 292	177.7	Community transmission
Colombia	150 517	3 342 567	6 569.1	3 488	87 207	171.4	Community transmission
Chile	46 343	1 369 756	7 165.4	661	29 047	151.9	Community transmission
Peru	31 989	1 947 555	5 906.7	1 409	68 978	209.2	Community transmission
Uruguay	23 658	282 198	8 123.8	358	4 118	118.5	Community transmission
Canada	22 154	1 374 275	3 641.2	278	25 440	67.4	Community transmission
Paraguay	20 955	348 184	4 881.6	777	8 892	124.7	Community transmission
Bolivia (Plurinational State of)	18 500	364 570	3 123.2	520	14 377	123.2	Community transmission
Mexico	16 034	2 408 778	1 868.2	1 816	223 072	173.0	Community transmission
Costa Rica	14 883	314 102	6 166.0	197	3 962	77.8	Community transmission
Venezuela (Bolivarian Republic of)	9 105	230 147	809.4	112	2 595	9.1	Community transmission
Cuba	8 255	140 087	1 236.8	80	943	8.3	Community transmission
Dominican Republic	7 841	290 526	2 678.2	22	3 628	33.4	Community transmission
Ecuador	6 901	424 741	2 407.4	305	20 485	116.1	Community transmission
Guatemala	6 731	253 837	1 416.9	125	8 121	45.3	Community transmission
Honduras	4 891	236 451	2 387.3	151	6 284	63.4	Community transmission
Trinidad and Tobago	3 685	22 620	1 616.3	110	458	32.7	Community transmission
Panama	3 546	376 854	8 734.1	44	6 365	147.5	Community transmission
Suriname	1 563	14 305	2 438.5	39	282	48.1	Community transmission
El Salvador	1 026	73 246	1 129.3	30	2 241	34.6	Community transmission
Guyana	981	16 724	2 126.2	31	380	48.3	Community transmission
Haiti	523	14 258	125.0	27	307	2.7	Community transmission
Jamaica	475	48 374	1 633.6	30	942	31.8	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Bahamas	246	11 745	2 986.7	4	229	58.2	Clusters of cases
Nicaragua	102	5 833	88.1	1	186	2.8	Community transmission
Saint Lucia	100	5 035	2 742.0	0	77	41.9	Community transmission
Saint Vincent and the Grenadines	54	2 027	1 827.1	0	12	10.8	Community transmission
Belize	27	12 791	3 216.8	1	324	81.5	Community transmission
Barbados	24	4 009	1 395.0	0	47	16.4	Community transmission
Saint Kitts and Nevis	22	68	127.8	0	0	0.0	Clusters of cases
Antigua and Barbuda	4	1 259	1 285.6	0	42	42.9	Clusters of cases
Dominica	4	188	261.1	0	0	0.0	Clusters of cases
Grenada	0	161	143.1	0	1	0.9	Sporadic cases
Territories[iii]							
French Guiana	983	23 763	7 956.0	4	116	38.8	Community transmission
Puerto Rico	875	138 485	4 840.7	28	2 499	87.4	Community transmission
Guadeloupe	357	16 874	4 217.2	0	255	63.7	Community transmission
Martinique	190	11 979	3 192.1	2	95	25.3	Community transmission
Saint Martin	114	2 009	5 196.7	0	15	38.8	Community transmission
United States Virgin Islands	96	3 442	3 296.1	0	27	25.9	Community transmission
Aruba	65	10 957	10 262.6	1	107	100.2	Community transmission
Sint Maarten	58	2 404	5 606.1	1	28	65.3	Community transmission
British Virgin Islands	41	289	955.8	0	1	3.3	Clusters of cases
Cayman Islands	7	581	884.1	0	2	3.0	Sporadic cases
Saint Barthélemy	7	1 023	10 349.0	0	1	10.1	Clusters of cases
Bonaire	5	1 585	7 578.3	0	17	81.3	Community transmission
Curaçao	5	12 271	7 478.1	0	122	74.3	Community transmission
Turks and Caicos Islands	4	2 412	6 229.7	0	17	43.9	Clusters of cases
Bermuda	3	2 491	4 000.1	0	32	51.4	Community transmission
Anguilla	0	109	726.6	0	0	0.0	Clusters of cases

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Falkland Islands (Malvinas)	0	63	1 808.8	0	0	0.0	Sporadic cases
Montserrat	0	20	400.1	0	1	20.0	No cases
Saba	0	7	362.1	0	0	0.0	Sporadic cases
Saint Pierre and Miquelon	0	25	431.4	0	0	0.0	No cases
Sint Eustatius	0	20	637.1	0	0	0.0	No cases
Eastern Mediterranean	**212 568**	**10 076 696**	**1 378.8**	**3 556**	**201 642**	**27.6**	
Iran (Islamic Republic of)	69 331	2 893 218	3 444.6	1 360	79 741	94.9	Community transmission
Iraq	29 459	1 193 608	2 967.5	176	16 334	40.6	Community transmission
Bahrain	20 829	235 699	13 851.8	130	939	55.2	Community transmission
Pakistan	18 771	916 239	414.8	503	20 680	9.4	Community transmission
United Arab Emirates	12 747	567 263	5 735.5	25	1 673	16.9	Community transmission
Tunisia	9 275	343 374	2 905.4	392	12 574	106.4	Community transmission
Kuwait	8 494	306 717	7 182.1	40	1 764	41.3	Community transmission
Saudi Arabia	8 437	448 284	1 287.7	97	7 334	21.1	Community transmission
Egypt	7 969	260 659	254.7	331	15 001	14.7	Clusters of cases
Oman	5 442	215 366	4 217.4	65	2 321	45.5	Community transmission
Jordan	5 433	735 139	7 205.0	86	9 443	92.5	Community transmission
Afghanistan	5 033	70 761	181.8	117	2 919	7.5	Community transmission
Morocco	2 056	518 868	1 405.7	19	9 138	24.8	Community transmission
Libya	1 916	184 815	2 689.7	11	3 116	45.3	Community transmission
Lebanon	1 914	540 132	7 913.5	48	7 718	113.1	Community transmission
Qatar	1 881	217 041	7 533.4	11	554	19.2	Community transmission
Sudan	408	35 479	80.9	60	2 628	6.0	Clusters of cases
Syrian Arab Republic	388	24 440	139.7	34	1 763	10.1	Community transmission
Yemen	82	6 735	22.6	15	1 320	4.4	Community transmission
Djibouti	36	11 527	1 166.7	2	154	15.6	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Somalia	30	14 653	92.2	1	768	4.8	Community transmission
Territories[iii]							
occupied Palestinian territory	2 637	336 679	6 599.7	33	3 760	73.7	Community transmission
Europe	**430 945**	**54 244 552**	**5 813.6**	**11 113**	**1 148 766**	**123.1**	
Kosovo [1]	169	107 339		4	2 233		Community transmission
Russian Federation	61 937	5 063 442	3 469.7	2 680	121 162	83.0	Clusters of cases
France	60 600	5 557 673	8 545.1	811	108 543	166.9	Community transmission
Turkey	57 330	5 235 978	6 208.2	1 200	47 271	56.0	Community transmission
Germany	30 190	3 679 148	4 423.8	1 026	88 406	106.3	Community transmission
Italy	24 865	4 213 055	7 064.0	849	126 002	211.3	Clusters of cases
Netherlands	22 068	1 644 633	9 447.8	81	17 615	101.2	Community transmission
The United Kingdom	20 499	4 480 949	6 600.7	59	127 775	188.2	Community transmission
Ukraine	18 951	2 201 472	5 033.8	1 104	50 472	115.4	Community transmission
Spain	16 066	3 663 176	7 739.2	78	79 888	168.8	Community transmission
Kazakhstan	12 081	441 801	2 352.9	172	7 321	39.0	Clusters of cases
Belgium	11 493	1 061 196	9 209.8	91	24 935	216.4	Community transmission
Greece	11 466	400 395	3 735.5	290	12 024	112.2	Community transmission
Sweden	7 831	1 068 473	10 345.8	5	14 451	139.9	Community transmission
Belarus	6 864	391 637	4 144.6	60	2 821	29.9	Community transmission
Denmark	6 775	279 434	4 799.0	9	2 516	43.2	Community transmission
Poland	6 328	2 871 950	7 566.1	810	73 738	194.3	Community transmission
Georgia	6 030	343 603	8 613.4	135	4 757	119.2	Community transmission
Switzerland	3 670	689 924	7 971.7	12	10 196	117.8	Community transmission
Portugal	3 402	848 213	8 238.3	6	17 023	165.3	Clusters of cases
Lithuania	3 350	274 199	9 813.5	72	4 257	152.4	Community transmission
Austria	3 301	640 162	7 192.0	54	10 334	116.1	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Norway	3 275	124 029	2 310.7	2	783	14.6	Clusters of cases
Czechia	3 266	1 661 159	15 533.6	84	30 104	281.5	Community transmission
Ireland	2 899	261 157	5 260.6	0	4 941	99.5	Community transmission
Serbia	2 373	712 046	10 279.7	78	6 844	98.8	Community transmission
Hungary	2 360	804 032	8 230.0	149	29 624	303.2	Community transmission
Latvia	2 206	132 918	6 967.5	47	2 370	124.2	Community transmission
Romania	2 190	1 077 426	5 574.2	362	30 247	156.5	Community transmission
Croatia	2 155	356 141	8 775.9	111	8 014	197.5	Community transmission
Kyrgyzstan	2 044	104 555	1 602.6	52	1 803	27.6	Clusters of cases
Slovenia	1 967	253 496	12 095.1	8	4 692	223.9	Clusters of cases
Uzbekistan	1 673	100 124	299.2	10	690	2.1	Clusters of cases
Bulgaria	1 656	418 221	6 016.3	170	17 657	254.0	Clusters of cases
Azerbaijan	1 488	333 723	3 291.4	52	4 903	48.4	Clusters of cases
Estonia	894	129 486	9 743.3	11	1 251	94.1	Clusters of cases
Slovakia	855	389 690	7 140.0	47	12 339	226.1	Clusters of cases
Finland	839	92 244	1 669.5	16	948	17.2	Community transmission
Armenia	688	222 636	7 513.3	40	4 432	149.6	Community transmission
Bosnia and Herzegovina	685	203 938	6 216.1	105	9 222	281.1	Community transmission
Republic of Moldova	504	255 105	6 323.9	28	6 100	151.2	Community transmission
Luxembourg	344	69 889	11 162.5	4	814	130.0	Community transmission
Cyprus	323	72 159	8 126.0	4	357	40.2	Clusters of cases
Montenegro	314	99 597	15 857.8	9	1 583	252.0	Clusters of cases
North Macedonia	218	155 246	7 451.6	102	5 398	259.1	Clusters of cases
Israel	141	839 454	9 698.5	4	6 408	74.0	Community transmission
Albania	121	132 297	4 597.2	7	2 449	85.1	Clusters of cases
Andorra	84	13 693	17 722.1	0	127	164.4	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Malta	30	30 529	5 933.0	2	419	81.4	Clusters of cases
Iceland	20	6 576	1 805.9	1	30	8.2	Community transmission
Liechtenstein	9	3 099	7 998.0	0	57	147.1	Sporadic cases
Monaco	2	2 503	6 378.0	0	32	81.5	Sporadic cases
San Marino	1	5 090	14 997.9	0	90	265.2	Community transmission
Holy See	0	26	3 213.8	0	0	0.0	Sporadic cases
Tajikistan	0	13 714	143.8	0	91	1.0	Pending
Territories[iii]							
Faroe Islands	36	712	1 457.1	0	1	2.0	Sporadic cases
Gibraltar	7	4 293	12 742.3	0	94	279.0	Clusters of cases
Greenland	6	40	70.5	0	0	0.0	No cases
Jersey	5	3 243	3 008.5	0	69	64.0	Community transmission
Isle of Man	1	1 592	1 872.2	0	29	34.1	No cases
Guernsey	0	822	1 275.1	0	14	21.7	Community transmission
South-East Asia	**1 516 572**	**31 605 221**	**1 563.5**	**29 477**	**401 754**	**19.9**	
India	1 364 668	27 894 800	2 021.4	26 706	325 972	23.6	Clusters of cases
Nepal	47 779	553 422	1 899.4	1 010	7 163	24.6	Community transmission
Indonesia	39 986	1 809 926	661.7	1 057	50 262	18.4	Community transmission
Thailand	24 807	154 307	221.1	236	1 012	1.4	Clusters of cases
Sri Lanka	19 351	180 593	843.4	227	1 405	6.6	Clusters of cases
Bangladesh	9 660	797 386	484.2	201	12 549	7.6	Community transmission
Maldives	8 541	62 906	11 637.5	35	158	29.2	Clusters of cases
Timor-Leste	1 271	6 752	512.1	5	16	1.2	Community transmission
Myanmar	298	143 526	263.8	0	3 216	5.9	Clusters of cases
Bhutan	211	1 603	207.7	0	1	0.1	Clusters of cases
Western Pacific	**139 234**	**3 000 768**	**152.7**	**2 090**	**45 148**	**2.3**	
Malaysia	53 419	558 534	1 725.7	451	2 650	8.2	Community transmission

Reporting Country/Territory/Area[i]	New cases in last 7 days	Cumulative cases	Cumulative cases per 100 thousand population	New deaths in last 7 days	Cumulative deaths	Cumulative deaths per 100 thousand population	Transmission classification[ii]
Philippines	38 362	1 216 569	1 110.2	776	20 722	18.9	Community transmission
Japan	27 400	741 674	586.4	684	12 920	10.2	Clusters of cases
Mongolia	4 690	56 621	1 727.2	24	268	8.2	Clusters of cases
Cambodia	4 199	29 404	175.9	33	209	1.3	Sporadic cases
China	4 052	110 765	7.5	82	4 945	0.3	Clusters of cases
Republic of Korea	3 989	139 910	272.9	26	1 957	3.8	Clusters of cases
Viet Nam	1 789	6 908	7.1	6	47	0.0	Clusters of cases
Papua New Guinea	714	15 901	177.7	6	162	1.8	Community transmission
Singapore	204	62 003	1 059.8	0	32	0.5	Sporadic cases
Fiji	154	360	40.2	0	4	0.4	Sporadic cases
Lao People's Democratic Republic	126	1 908	26.2	1	3	0.0	Sporadic cases
Australia	79	30 083	118.0	0	910	3.6	Clusters of cases
New Zealand	9	2 316	48.0	0	26	0.5	Sporadic cases
Brunei Darussalam	5	241	55.1	0	3	0.7	Sporadic cases
Solomon Islands	0	20	2.9	0	0	0.0	No cases
Territories[iii]							
Guam	22	7 918	4 691.5	0	139	82.4	Clusters of cases
French Polynesia	16	18 860	6 713.9	1	142	50.6	Sporadic cases
New Caledonia	3	128	44.8	0	0	0.0	Sporadic cases
Northern Mariana Islands (Commonwealth of the)	2	183	317.9	0	2	3.5	Pending
Marshall Islands	0	4	6.8	0	0	0.0	No cases
Samoa	0	1	0.5	0	0	0.0	No cases
Vanuatu	0	3	1.0	0	0	0.0	No cases
Wallis and Futuna	0	454	4 037.0	0	7	62.2	Sporadic cases
Global	**3 550 456**	**169 604 858**		**78 665**	**3 530 837**		

*See *Annex 3: Data, table and figure notes*

Annex 2. List of countries/territories/areas reporting Variants of Concern as of 1 June 2021**

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
Afghanistan	●	-	-	-	-
Albania	●	-	-	-	-
Algeria	●	-	-	●	-
Angola	●	●	-	-	-
Argentina	●	●	●	●	-
Armenia	○	-	-	-	-
Aruba	●	●	●	●	-
Australia	●	●	●	○	-
Austria	●	●	●	●	-
Azerbaijan	●	-	-	-	-
Bahrain	●	●	-	●	-
Bangladesh	●	●	-	●	-
Barbados	●	-	-	-	-
Belarus	●	-	-	-	-
Belgium	●	●	●	●	-
Belize	●	-	-	-	-
Bolivia (Plurinational State of)	●	-	●*	-	-
Bonaire	●	-	-	-	-
Bosnia and Herzegovina	○	-	-	-	-
Botswana	-	●	-	●	-
Brazil	●	●	●	●	-
Brunei Darussalam	●	●	-	-	-
Bulgaria	●	-	-	-	-
Burkina Faso	●*	-	-	-	-
Cabo Verde	●	-	-	-	-
Cambodia	●	-	-	-	●*
Cameroon	●	●	-	-	-
Canada	●	●	●	●	-
Cayman Islands	●	-	-	-	-
Central African Republic	●	-	-	-	-
Chile	●	●	●	-	-
China	●	●	●	○	-
Colombia	●	-	●	-	-
Comoros	●*	●	-	-	-
Congo	●	-	-	-	-
Costa Rica	●	●	●	-	-
Croatia	●	●	-	-	-
Cuba	●	●	-	-	-
Curaçao	●	-	●	-	-
Cyprus	●	●	-	-	●
Czechia	●	●	-	●*	-
Côte d'Ivoire	●	●	-	-	-
Democratic Republic of the Congo	●	●	-	●	-
Denmark	●	●	●	●	-
Dominica	●	-	-	-	-
Dominican Republic	●	-	●*	-	-
Ecuador	●	●	●	-	-
Egypt	●	-	-	-	-
Equatorial Guinea	●	●	-	-	-
Estonia	●	●	○*	-	○*
Eswatini	-	●	-	-	-
Ethiopia	○	-	-	-	-
Faroe Islands	●*	-	●	-	-
Fiji	-	-	-	-	●
Finland	●	●	●	●	-
France	●	●	●	●	-
French Guiana	●	●	●	-	-
French Polynesia	●	-	●	-	-
Gabon	●	○	-	-	-
Gambia	●	-	-	●*	-
Georgia	●	-	-	-	○*
Germany	●	●	●	●	-
Ghana	●	●	-	●	-
Gibraltar	●	-	-	-	-
Greece	●	●	-	●	-
Grenada	●	-	-	-	-
Guadeloupe	●	●	-	-	-
Guam	●	-	-	-	-
Guinea	●	●	-	-	-
Guinea-Bissau	●	●	-	-	-
Guyana	-	-	●	-	-
Haiti	●	-	●	-	-
Hungary	●	○	-	-	○*
Iceland	●	-	-	-	-
India	●	●	●	●	-
Indonesia	●	●	-	●	-
Iran (Islamic Republic of)	●	●	-	-	●
Iraq	●	-	-	-	-

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
Ireland	●	●	●	●	-
Israel	●	●	●	●	-
Italy	●	●	●	●	-
Jamaica	●	-	-	-	-
Japan	●	●	●	●	-
Jordan	●	●	●	●	-
Kazakhstan	○	○	-	-	-
Kenya	●	●	-	●	-
Kosovo[1]	●	-	-	-	-
Kuwait	●	-	-	-	-
Kyrgyzstan	●	●	-	-	●
Lao People's Democratic Republic	●	-	-	-	-
Latvia	●	●	●	-	○*
Lebanon	●	-	-	-	-
Lesotho	-	●	-	-	-
Liberia	●	-	-	-	-
Libya	●	●	-	-	-
Liechtenstein	●	-	-	-	-
Lithuania	●	●	●	-	-
Luxembourg	●	●	●	●	-
Madagascar	-	●	-	-	-
Malawi	●	●	-	-	-
Malaysia	●	●	-	○	-
Malta	●	○	●	-	-
Martinique	●	●	-	-	-
Mauritania	●*	●*	-	●*	-
Mauritius	○	●	-	-	-

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
Mayotte	●	●	-	-	-
Mexico	●	●	●	●	-
Monaco	●	○	-	-	-
Montenegro	●	-	-	-	-
Morocco	●	-	-	-	●
Mozambique	-	●	-	-	-
Namibia	-	●	-	-	-
Nepal	●	-	-	●*	-
Netherlands	●	●	●	●	-
New Caledonia	●	-	-	-	-
New Zealand	●	●	○	○	-
Niger	●	-	-	-	-
Nigeria	●	-	-	●*	-
North Macedonia	●	●	-	-	-
Norway	●	●	●	●	-
Occupied Palestinian Territory	●	●	-	-	-
Oman	●	-	-	-	-
Pakistan	●	●	●	-	-
Panama	●	●	●	-	●*
Paraguay	-	-	●	-	-
Peru	●	-	●	-	-
Philippines	●	●	●	○	-
Poland	●	○	●	●	-
Portugal	●	●	●	○	-
Puerto Rico	●	●	●	●*	-
Qatar	●	●	-	●*	-
Republic of Korea	●	●	●	○	-

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
Republic of Moldova	○	-	-	-	-
Romania	●	●	●	●	-
Russian Federation	●	●	-	●	-
Rwanda	●	○	-	-	-
Réunion	●	●	●	○	-
Saint Barthélemy	●	-	-	-	-
Saint Lucia	●	-	-	-	-
Saint Martin	●	●	-	-	-
Sao Tome and Principe	●*	-	-	-	-
Saudi Arabia	●	●	-	-	-
Senegal	●	●*	-	-	-
Serbia	●	-	-	-	-
Seychelles	-	●	-	-	-
Singapore	●	●	●	●	-
Sint Maarten	●	●	-	-	-
Slovakia	●	●	-	-	-
Slovenia	●	●	●	●	-
South Africa	●	●	-	●	-
Spain	●	●	●	●	-
Sri Lanka	●	●	-	○	-
Suriname	●	●	●	-	-
Sweden	●	●	●	●	-
Switzerland	●	●	○	●	-
Thailand	●	●	●	●	-
Togo	●	●	-	-	-
Trinidad and Tobago	●	-	●	-	-
Tunisia	●	●	-	-	-
Turkey	●	●	●	●*	-

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
Turks and Caicos Islands	●	-	-	-	-
Uganda	●	●	-	●	-
Ukraine	●	○	-	-	-
United Arab Emirates	●	●	●	-	-
United Kingdom	●	●	●	●	-

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
United Republic of Tanzania	-	●	-	-	-
United States of America	●	●	●	●	-
Uruguay	●	-	●	-	-
Uzbekistan	●	●	-	-	-

Country/Territory/Area	Alpha	Beta	Gamma	Delta	Delta+
Venezuela (Bolivarian Republic of)	-	-	●	-	-
Viet Nam	●	●	-	●	-
Wallis and Futuna	●	-	-	-	-
Zambia	-	●	-	●*	○
Zimbabwe	-	○	-	●	-

**Newly reported in this update. Columns for B.1.617.1 (Kappa) and B.1.617.3 were removed this week according to changes in VOC designation.*
"Delta+" reflects countries/territories/areas reporting detection of B.1.617 without further specification of lineage at this time. These will be reallocated as further details become available.
"●" indicates that information for this variant was received by WHO from official sources.
"○" indicates that information for this variant was received by WHO from unofficial sources and will be reviewed as more information become available.
Variants Gamma for Bangladesh and Delta for Panama were excluded this week based on further information received.
***Includes countries/territories/areas reporting the detection of VOCs among travelers (e.g., imported cases detected at points of entry), or local cases (detected in the community). Efforts are ongoing to differentiate these in future reports. See also Annex 3: Data, table and figure notes.*

Annex 3. Data, table and figure notes

Data presented are based on official laboratory-confirmed COVID-19 case and deaths reported to WHO by country/territories/areas, largely based upon WHO case definitions and surveillance guidance. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change, and caution must be taken when interpreting these data as several factors influence the counts presented, with variable underestimation of true case and death incidence, and variable delays to reflecting these data at global level. Case detection, inclusion criteria, testing strategies, reporting practices, and data cut-off and lag times differ between countries/territories/areas. A small number of countries/territories/areas report combined probable and laboratory-confirmed cases. Differences are to be expected between information products published by WHO, national public health authorities, and other sources. Due to public health authorities conducting data reconciliation exercises which remove large numbers of cases or deaths from their total counts, negative numbers may be displayed in the new cases/deaths columns as appropriate. When additional details become available that allow the subtractions to be suitably apportioned to previous days, graphics will be updated accordingly.

A record of historic data adjustment made is available upon request by emailing epi-data-support@who.int. Please specify the country(ies) of interest, time period(s), and purpose of the request/intended usage. Prior situation reports will not be edited; see covid19.who.int for the most up-to-date data.

Global totals include 758 cases and 13 deaths reported from international conveyances.

The designations employed, and the presentation of these materials do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. Countries, territories and areas are arranged under the administering WHO region. The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

[1] All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999). In the map, number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes.

[i] Excludes countries, territories, and areas that have never reported a confirmed COVID-19 case (Annex 1), or the detection of a variant of concern (Annex 2).

[ii] Transmission classification is based on a process of country/territory/area self-reporting. Classifications are reviewed on a weekly basis and may be revised as new information becomes available. Differing degrees of transmission may be present within countries/territories/areas. For further information, please see: Considerations for implementing and adjusting public health and social measures in the context of COVID-19.

[iii] "Territories" include territories, areas, overseas dependencies and other jurisdictions of similar status.