EMERGENCY PREPAREDNESS AND RESPONSE WEEKLY SITUATION REPORT

WEEK 30: 20th TO 26th July 2026 | KENYA

0 **New Events**	**0** **Ongoing Events**	**3** **Outbreaks**	**0** **Humanitarian Crisis**

0 **Grade 3**	**0** **Grade 2**	**0** **Grade 1**	**2** **Ungraded**
0 **Protracted 3**	**1** **Protracted 2**	**0** **Protracted 1**	

Overview of the Current Health Emergencies in Kenya 2026

Kenya is responding to multiple concurrent public health emergencies, including mpox in 21 counties in 2026, measles in six counties and dengue fever in two counties. The country is also at high-risk of Bundibugyo virus disease importation following the current outbreak in the Democratic Republic of the Congo and Uganda.

Summary of Ongoing Public Health Emergencies in Kenya, July 2026

Event	Total Cases	New Cases	Confirmed cases	Deaths	Case Fatality Rate	Case Contacts	Counties	Start of reporting period	WHO Grade
Mpox	**1,211**	**22**	**1,211**	**19**	**1.6%**	**1,376**	**39**	**31 July 2024**	**Protracted 2**
Twenty-two (22) new confirmed cases have been reported from Mombasa (5), Nairobi (5), Embu (4), Busia (3), Kiambu (1), Makueni (1), Bungoma (1), Nyeri (1) and Kericho (1) in the past week. Total of 262 cases reported from 21 counties in 2026.									
Measles	**484**	**0**	**89**	**1**	**0.2%**	**N/A**	**4**	**Nov 2025**	**Ungraded**
No new cases reported in the past week. Outbreak remains active in six sub counties for four counties. Cumulative 484 cases including 89 confirmed and one death since 2026.									
Dengue Fever	**1,679**	**0**	**60 (PCR)**	**5** suspected deaths	**N/A**	**N/A**	**1**	**2026**	**Ungraded**
No new cases reported in the past week in either county. Cumulative 1,679 cases (Garissa 1,583, Wajir 96) including 5 suspected deaths; the outbreak is stabilizing in Garissa, but transmission remains active in Wajir.									

1. Bundibugyo Virus Disease (BVD) outbreak in the Democratic Republic of Congo and Uganda

The Bundibugyo virus disease (BVD) outbreak in the Democratic Republic of the Congo continued to intensify during the reporting period, with sustained transmission, increasing mortality, and ongoing geographic expansion. The cumulative number of reported cases has exceeded the two previously documented Bundibugyo virus disease outbreaks, making this the largest outbreak caused by the Bundibugyo virus to date. WHO declared the outbreak a Public Health Emergency of International Concern (PHEIC) on 16 May 2026, and Africa CDC subsequently declared a Public Health Emergency of Continental Security. Although no new cases have been reported outside the Democratic Republic of the Congo, persistent transmission along major national and cross-border mobility corridors continue to sustain a high risk of regional spread.

Country	New Confirmed Cases (last 7 days)	New Confirmed Deaths (last 7 days)	Confirmed Cases (total)	Confirmed Deaths (total)	Total Cases (Confirmed & Probable)	Total Deaths (Confirmed & Probable)	CFR (%)
DRC	567	296	3,262	1,437	3,262	1,437	44.1%
Uganda	0	0	20	2	21	3	14.3%
France	0	0	1	0	1	0	0.0%

* ***Data source****: Data as of 26 July 2026 | Weekly External Situation Report 11, WHO AFRO*

Figure 1: **Readiness status for BVD outbreak by pillar, Kenya, May 2026**

At the beginning of the outbreak, the overall readiness for the BVD response was rated as moderate, with a score of 66% in May 2026. Efforts are ongoing to strengthen the areas identified as weak during the assessment. A reassessment has been conducted and is under review to see the progress made so far in the preparedness actions.

Contact Tracing	Rapid Response Teams	Laboratory	Public Awareness and RCCE	Safe and Dignified Burials	Coordination	Surveillance	Travel Points of Entry	Logistics	Case Management	IPC
100%	90%	87%	75%	75%	67%	67%	60%	49%	36%	25%

Kenya Preparedness and Readiness Actions

Risk assessment has identified 13 counties as very high risk, 12 counties as high risk, and the remaining 22 counties as medium risk (Figure 2).

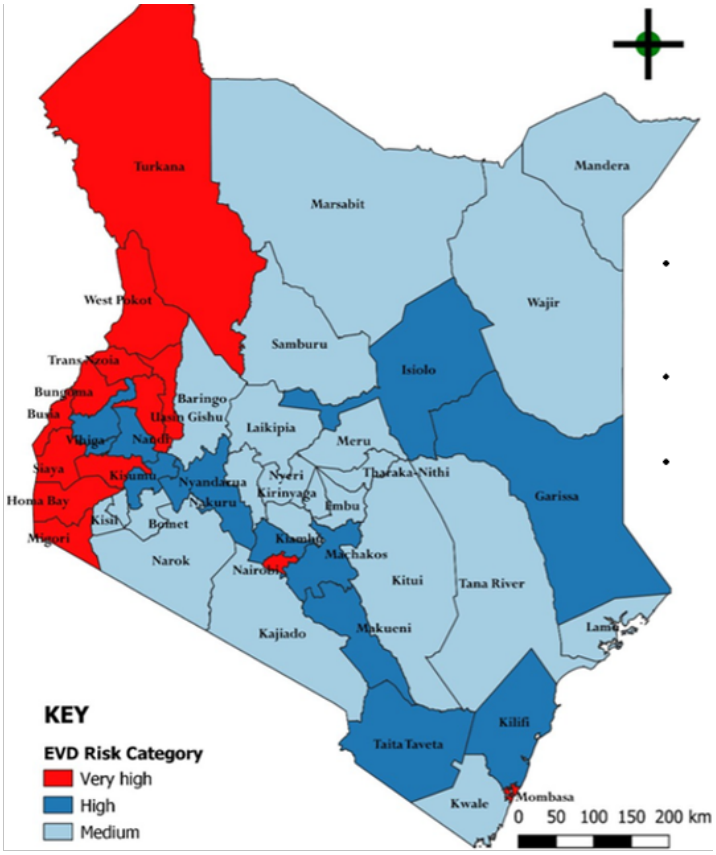


Figure 2: Risk classification status for BVD by county, Kenya, June 2026

Very High Risk: Counties sharing a border with Uganda and South Sudan or serving as international travel hubs (including Nairobi). High Risk: Counties with significant population movement through Points of Entry (land borders and airports). Medium Risk: Counties near high-risk counties with potential spillover due to cross-county interaction.

Pillar	Capacity	Implementation of priority readiness actions
Points of Entry (PoE)		▪ Enhanced screening continues at high-risk Points of Entry for travelers arriving from DRC and Uganda. ▪ A total of 4,082 travelers were screened in the last 24 hours. ▪ As of 26th July 2026, a cumulative 302,242 travelers have been screened for Ebola Virus Disease since the outbreak was declared in DRC and Uganda.
Rapid Response Teams		▪ Two Rapid Response Team (RRT) trainings were completed for Migori and Kisumu in the past week. ▪ RRT trainings for Nairobi and Mombasa are ongoing this week.
Risk communication and community engagement		▪ Over 50 participants from WHO, MOH, KNPHI, Africa CDC and partners for a sensitization workshop with key population representatives along the Northern Transport Corridor, strengthening capacity in RCCE, community-based surveillance, cross-border collaboration, and countering misinformation for cholera, mpox and VHFs.

Leadership and Coordination		▪ WHO joined MOH, KNPHI and partners at a National EVD Stakeholders Coordination Meeting to review preparedness, strengthen coordination, and align partner support, spanning case management, IPC, laboratory, surveillance, RCCE, points of entry, and logistics, with Kenya Red Cross, Amref Kenya and AFENET.

2. Mpox

* *Source: Ministry of Health of Kenya*

New cases*	Cumulative cases	Deaths	Recovered	Case Contacts	Counties
22	**1,211`**	**19**	**1,168**	**1,376**	**39**

Twenty-two (**22**) new confirmed cases reported from Mombasa (5), Nairobi (5), Embu (4), Busia (3), Kiambu (1), Makueni (1), Bungoma (1), Nyeri (1) and Kericho (1) in the past week. A total of 262 cases, including three deaths, have been reported across 21 counties in 2026. Only 24 cases are currently active, with three in facility care and 21 in home-based isolation and care. Cumulatively, 1,211 cases have occurred across 39/47 counties since the onset of the outbreak in July 2024. Of these,

- 69% (456) of the cases are aged 15-44 years
- A total of 19 deaths, 10 (53%) females; 13 (68%) are HIV Positive
- 1,376 contacts listed, 1,141 completed follow-ups; 16 contacts confirmed as cases after developing symptoms
- Nairobi County accounted for the majority of the 2026 cases (38%, 99/262) and is the current hotspot.
- A total of 10,956,038 travellers screened at 26 points of entry since the beginning of the outbreak in July 2024
- Laboratory testing: 3,075 total samples tested, 1,211 positive (positivity rate 39%); thirty-one tests done in the past one week.
- Genomic sequencing: 257 samples sequenced, Sub-clade 1b virus identified in all positive samples

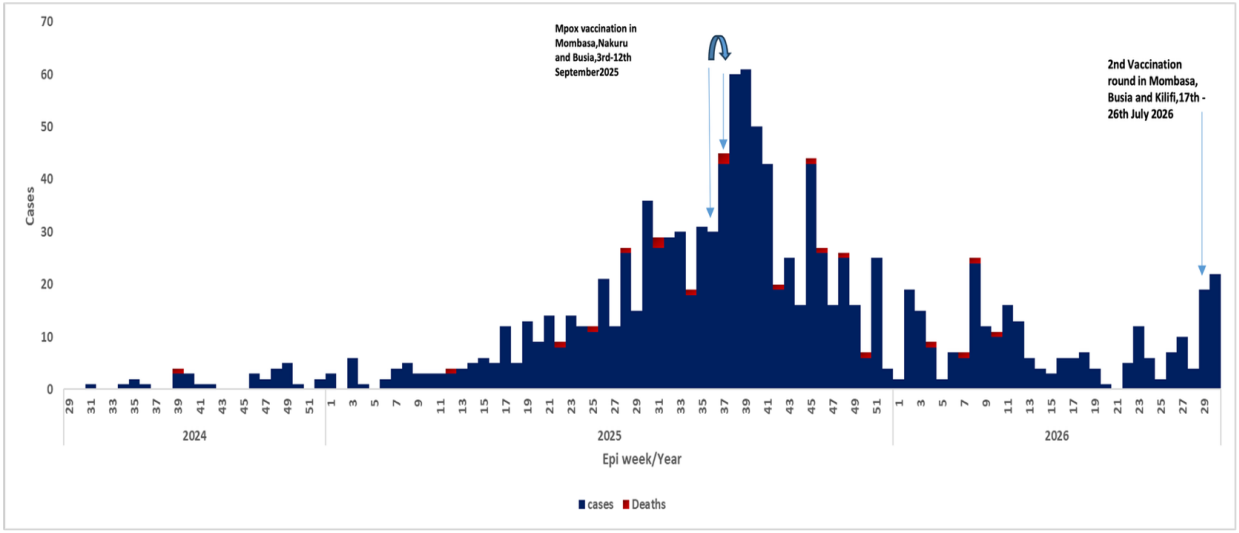


Figure 3: Epi curve of mpox cases in Kenya, July 2024 - July 2026

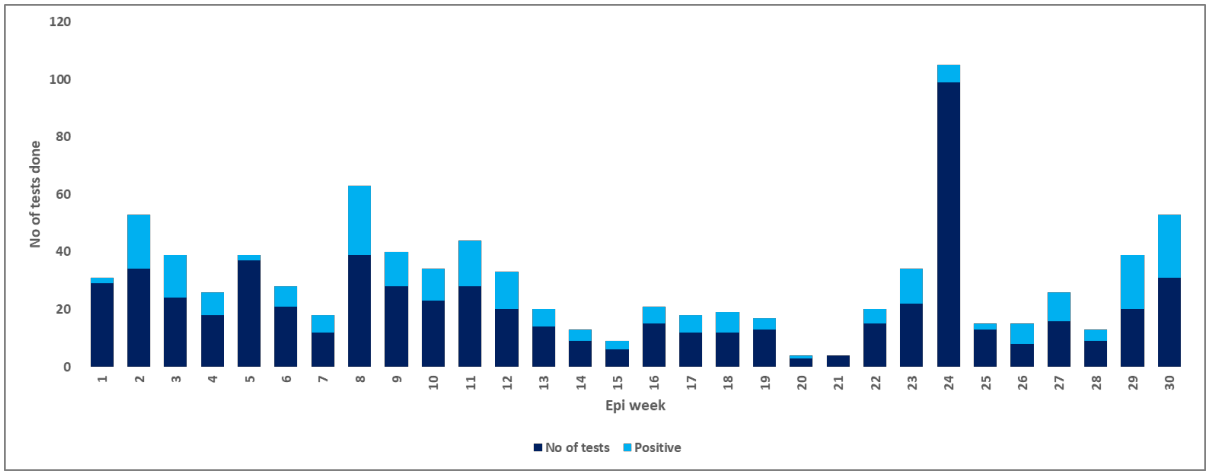


Figure 4: Trends in Laboratory testing of mpox, Kenya, January - July 2026

- Surveillance is still active in many counties
- Most of the samples tested in week 24 are from Nairobi County 92/99
- Most samples tested from Nairobi County were collected from healthcare workers who had been identified as contacts of confirmed cases managed at Kenyatta University Teaching, Referral and Research Hospital (KUTRRH).
- Enhanced surveillance activities conducted during the vaccination campaign led to an increase in the number of suspected cases identified and tested.

Response Activities

- A second vaccination campaign, utilizing the 20,000 vaccines which was in country, was planned for Busia, Mombasa, Kilifi, Machakos, Makueni, and Nakuru counties. The campaign was successfully conducted in Busia, Mombasa, and Kilifi counties from 17 to 26 July 2026, while implementation in Machakos, Makueni, and Nakuru is planned for a later date.
- Ongoing clinical care and isolation of active cases in health facilities and home-based care
- Surveillance and screening at PoEs underway
- Decision on transitioning of the response to routine health system under review in line continental IMST guidance

Target Population and achievements-17th-26th July 2026 Mpox Campaign

County	Subcounty	Target	Total vaccinated	Coverage (%)
BUSIA	MATAYOS	2280	2400	105.3
	MALABA	2280	2399	105.2
	Busia Total	4560	4799	105.2
MOMBASA	CHANGAMWE	1283	1350	105.3
	JOMVU	1140	1200	105.3
	MVITA	998	1050	105.3
	NYALI	998	1050	105.3
	KISUANI	998	1050	105.3
	LIKONI	998	1049	105.2
	Mombasa Total	6413	6749	105.2

KILIFI	**KALOLENI**	1140	1200	105.3
	RABAI	1140	1200	105.3
	Kilifi Total	2280	2400	105.3
Total		**13,253**	**13,948**	**105.2**

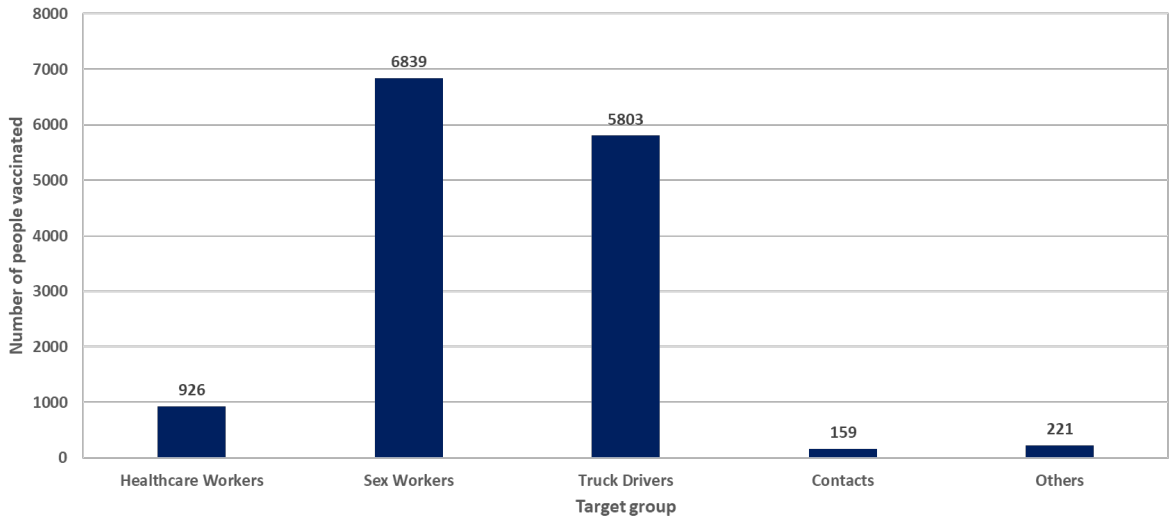


Figure 5: Distribution of Vaccination by target population

3. Dengue Fever

* *Source: Ministry of Health of Kenya*

New cases	Cumulative cases	Deaths	Recovered	Case Contacts	Counties
0	**1,679**	**5 suspected**	**0**	**0**	**3**

The most recent case was reported on 9 June 2026, with no new cases in the past week, suggesting the outbreak in this county may be waning.

- Wajir County, a total of 96 cases has been reported across five sub-counties, with Wajir East accounting for the majority (91%) of the cases. Transmission in Wajir remains active, though no new cases were reported in the past week.
- In Garissa County, a cumulative total of 1,583 cases has been recorded since April 2026, with five suspected deaths attributable to dengue (four in Garissa Township and one in Hagadera refugee camp.

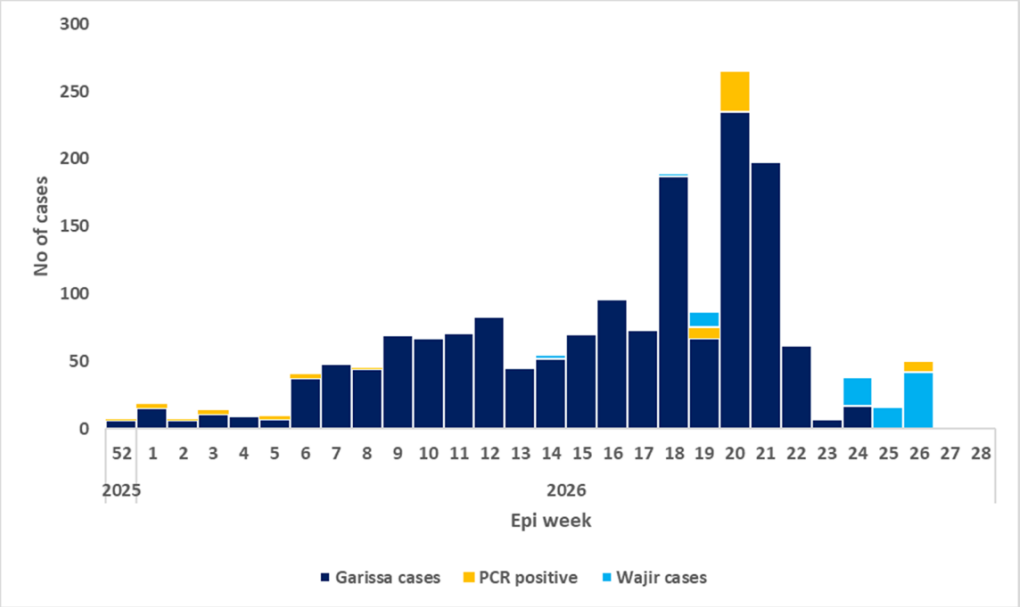


Figure 6: Epi curve of Dengue fever in Garissa County January – July 2026

4. Measles

New cases	Cumulative cases	Deaths	Case Contacts	Counties
0	**484**	**1**	**0**	**6**

* *Source: Ministry of Health of Kenya*

No new cases were reported during the past week. However, the outbreak remains active in six sub counties across four counties, as 30 days has not elapsed since the last suspected/ confirmed case in line with the Kenya IDSR guidelines. Since the onset of the outbreak in November 2025, a total of 484 cases, including 89 laboratory-confirmed cases and one death, have been reported. Currently active in four counties: Kilifi County (Kilifi South and Kaloleni subcounties), Tana River County (Galole Subcounty), Nairobi County (Kibra Subcounty), and Kiambu County (Thika Subcounty).

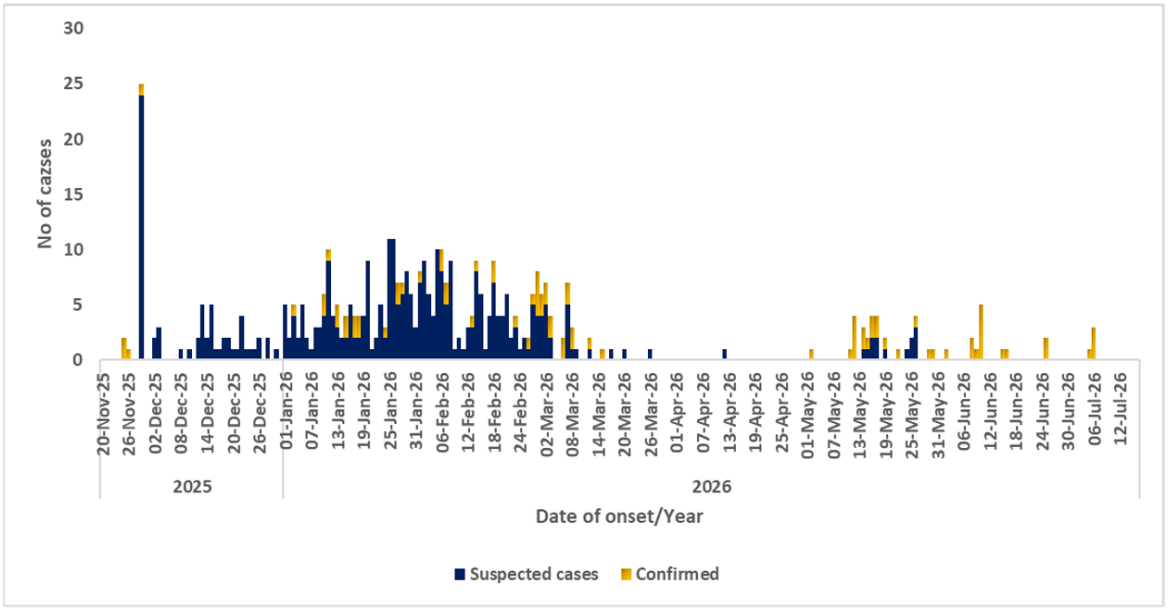


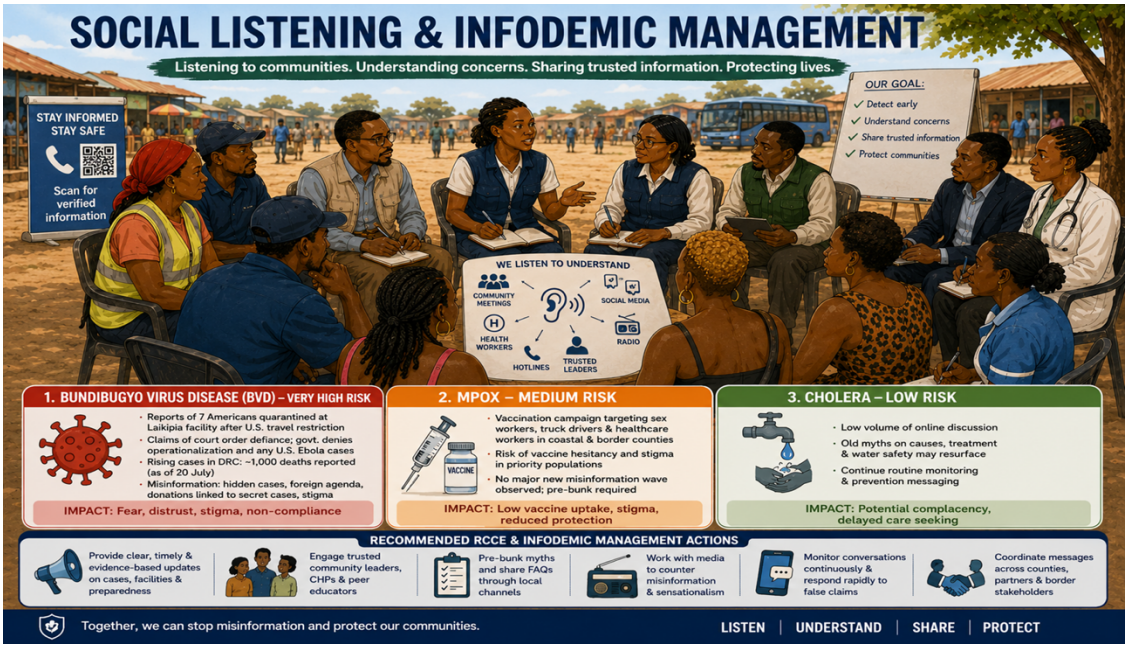
Figure 7: Epi Curve of Measles Cases, Kenya Nov 2025 - July 2026

Response Activities

- Active Case Search: Health facility and community levels to identify suspected cases promptly.
- Enhanced Surveillance: For timely detection and response currently ongoing in the health facility and community in the affected counties
- Provision of supportive care at health facilities reporting cases

6. Misinformation Risks and RCCE Actions (Issue 05 | 27 July 2026)

Issue	Key Infodemic Findings	Risk	Recommended RCCE & Infodemic Management Actions
Bundibugyo Virus Disease (BVD)	Conflicting narratives on Laikipia quarantine; distrust of official statements; stigma toward travellers; preparedness donations interpreted as evidence of hidden outbreak.	Very High	▪ Issue unified, evidence-based updates ▪ Clarify preparedness vs. confirmed cases ▪ Publish FAQs and myth-busting content ▪ Strengthen media engagement & social listening ▪ Engage border communities and trusted leaders
Regional BVD Outbreak	Catastrophic headlines driving fear and fatalism.	Very High	▪ Frame regional data with Kenya context ▪ Anti-stigma messaging ▪ Risk-based travel communication ▪ Rapid rumour monitoring and response
Mpox Vaccination	Potential vaccine hesitancy and stigma toward truck drivers, sex workers and HCWs.	Medium	▪ Peer-led community engagement ▪ Targeted FAQs ▪ Explain risk-based vaccination ▪ Monitor AEFI rumours and misinformation
Cholera & Other Signals	Low misinformation currently but risk of resurgence.	Low-Medium	▪ Maintain routine monitoring ▪ Pre-position WASH messages ▪ Rapid response to emerging rumours ▪ Continue community feedback mechanisms



7. Integrated Disease Surveillance (IDSR) Overview

* *Source: Weekly IDSR reports, KHIS*

Kenya has implemented the third edition of the Integrated Disease Surveillance and Response (IDSR) strategy, which supports the routine surveillance and weekly reporting of 46 priority diseases, conditions, and public health events. These priorities are classified into four categories: epidemic-prone diseases, diseases targeted for elimination or eradication, diseases of public health importance, and public health events of international concern

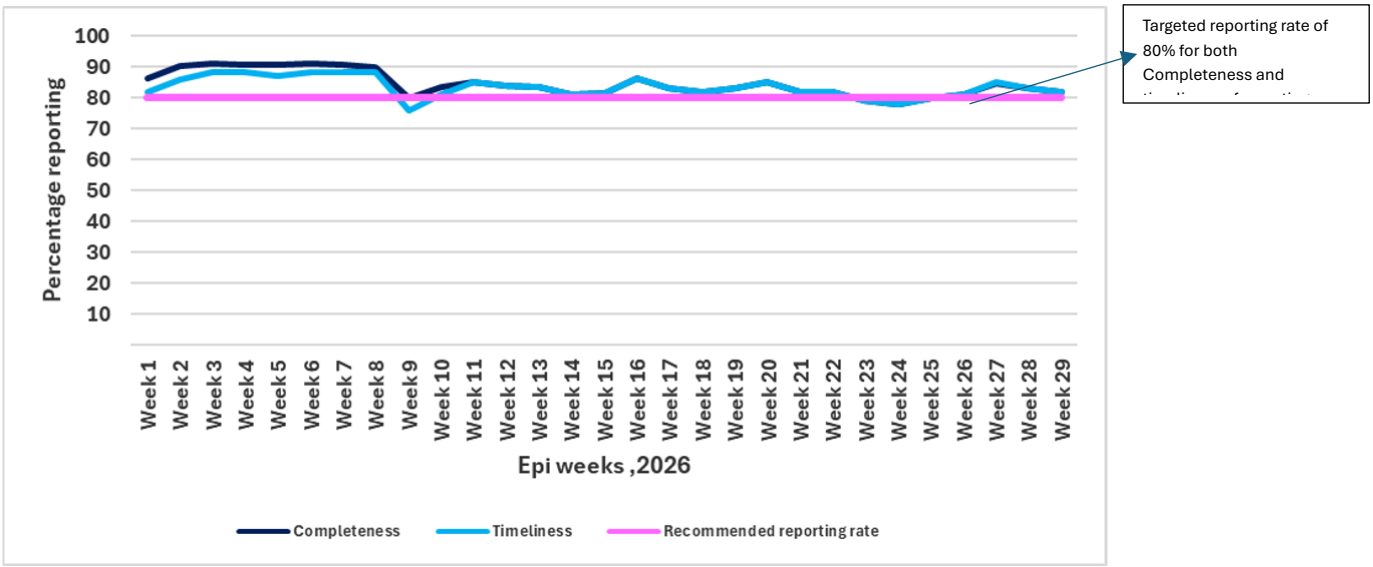


Figure 8: Overview of key indicators of IDSR, Kenya from Epi week 1-29,2026

- The average overall completeness of reporting from Epidemiological Week 1 to 29 was 84%.
- The average overall timeliness of reporting during the same period was 83%.
- Notably, Epi Week 9 recorded the lowest timeliness at 76%.

The National IDSR reporting rate

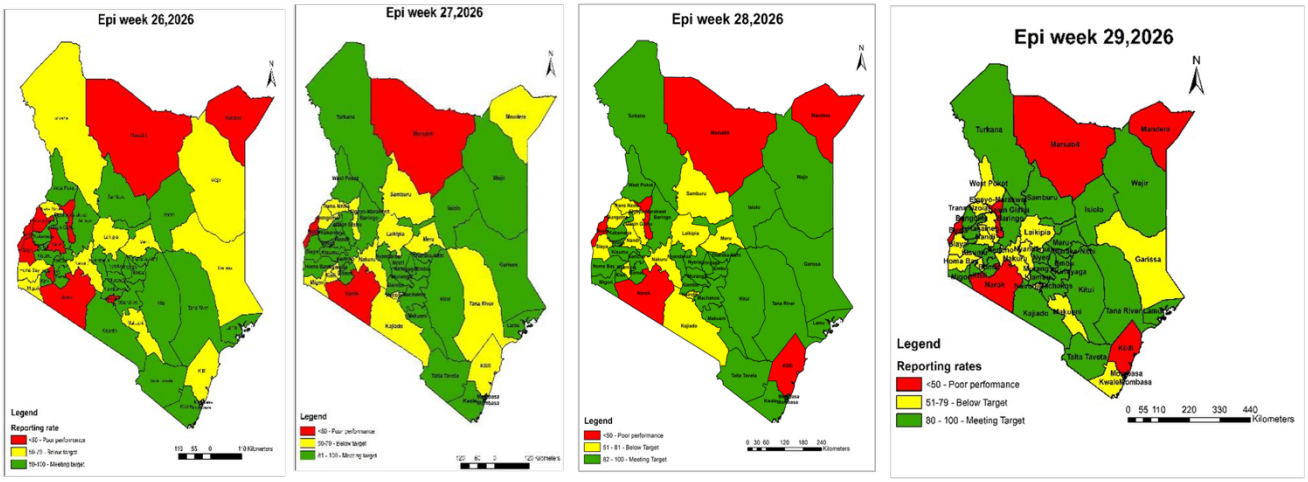
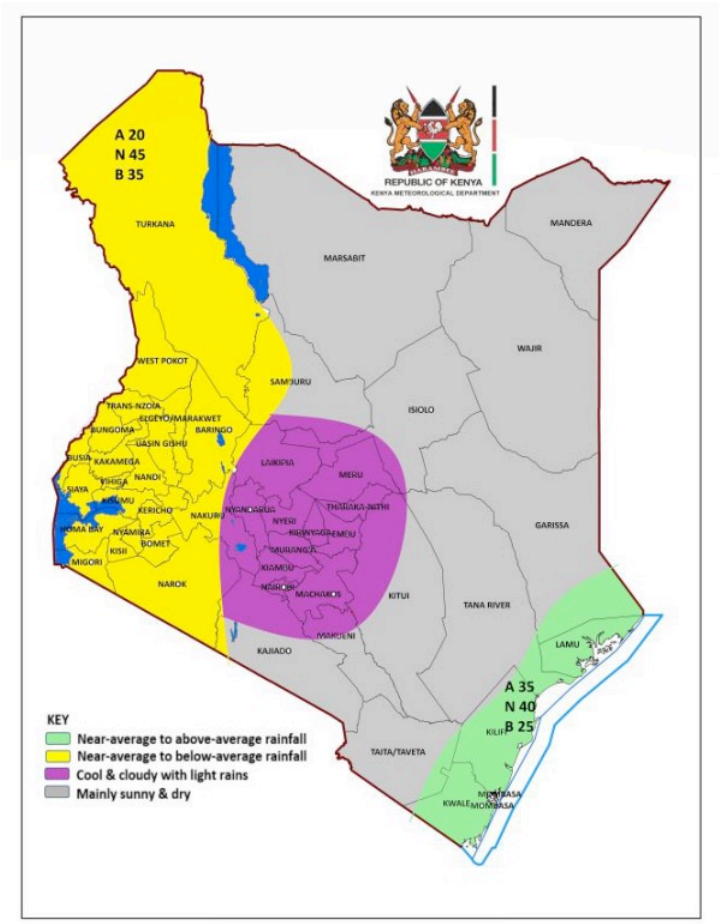


Figure 9: Completeness of IDSR reporting Epi 24-29,2026

- Targeted reporting rate of 80% for both Completeness and timeliness of reporting (IDSR Guidelines.
- Notably several counties are below the recommended reporting rate (counties with yellow).
- Marsabit , Narok and Mandera Counties has consistently reported below 50%.

7. Rainfall forecast for June-July-August 2026

* *Source: REF, Kenya Metrological Department*



The outlook indicates that near-average to below-average rainfall is likely to occur in the Highlands West of the Rift Valley, the Lake Victoria Basin, the Rift Valley and Northwestern Kenya. The Coast is expected to receive near-average to above-average rainfall

The Highlands East of the Rift Valley are likely to experience light rains. The South-eastern Lowlands and Northeastern Kenya are expected to be generally sunny and dry.

World Health Organization
Kenya

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ndahendekireg@who.int
afkeninfo@who.int