

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 8: 17 - 23 February 2020

Data as reported by: 17:00; 23 February 2020



World Health
Organization

REGIONAL OFFICE FOR
Africa
WHO Health Emergencies Programme

0

New event

68

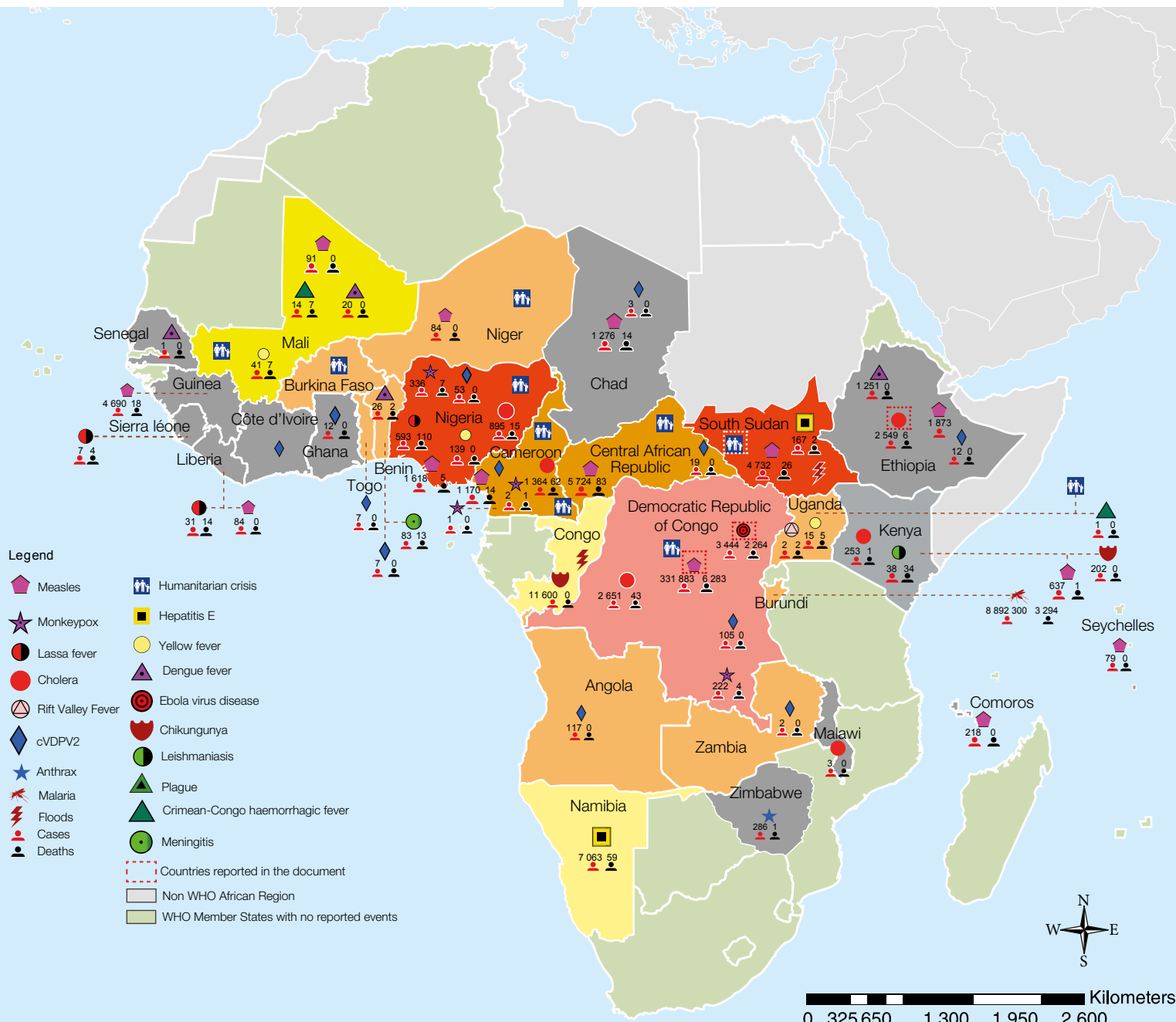
Ongoing events

56

Outbreaks

12

Humanitarian
crises



Graded events ↑

3

Grade 3 events

15

Grade 2 events

1

Grade 1 events

2

Protracted 3 events

2

Protracted 2 events

3

Protracted 1 events

42

Ungraded events

Overview

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- 7 All events currently being monitored

This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 68 events in the region. This week's main articles cover key new and ongoing events, including:

- [Measles in Democratic Republic of the Congo](#)
- [Cholera in Ethiopia](#)
- [Ebola virus disease in Democratic Republic of the Congo](#)
- [Humanitarian crisis in South Sudan](#)

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

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

Major issues and challenges include:

- On 23 February 2020, the Republic of South Sudan formed a new Transitional Government of National Unity (ToGNU). There are high expectations that the formation of ToGNU, this week, will usher in lasting peace and security in South Sudan. The humanitarian community welcomes this momentous event as a turning point towards the restoration of and improvement in the livelihood of the population. Cognizant of the fact that the translation of this event into tangible improvement in livelihood of anyone in the remote community will be a tedious and tortuous process, the aid actors should continue providing for the immediate and life-saving needs of the community while aiming for early recovery, reconstruction and development of the nation, in support of the new government. Top of the agenda will be repatriation and resettlement of the internally displaced persons and refugees in a coordinated manner.
- The measles outbreak in Democratic Republic of the Congo remains serious although the overall situation has been improving in the past two months. Large numbers of children have been vaccinated and more supplemental immunization activities are being planned. However, given the large scale of the outbreak, the ongoing response is facing several operational challenges, including inadequate logistics and funding. There is a need for the national authorities and partners to scale up and sustain the ongoing response to the measles outbreak to continue with the positive trend being observed. It is also important to start working towards improving routine immunization coverage, including the introduction of the second dose of measles vaccine.

Ongoing events

Measles

Democratic Republic of the Congo

20 475 : 252 : 1.2%
Cases : Deaths : CFR

EVENT DESCRIPTION

The measles outbreak in Democratic Republic of the Congo continues, with continuous improvement being observed. While the overall situation remains serious, the weekly incidence of cases and deaths has continued to reduce in the past 10 weeks. Since our last report on 12 January 2020 (*Weekly Bulletin 2*), there have been an additional 20 412 suspected measles cases and an additional 238 deaths. Of these cases, 2 915 were laboratory confirmed. During week 6 (week ending 9 February 2020), a total of 2 529 suspected cases and 22 deaths were reported across the country, compared to 2 827 cases with 23 deaths reported in week 5 and 3 398 cases with 52 deaths reported in week 4.

Between weeks 1-6, 2020, a cumulative total of 20 475 suspected measles cases, including 252 associated deaths (case fatality ratio 1.2%) have been reported from all 26 provinces in the country. The provinces that recorded the highest burden of measles cases and deaths in the past four weeks (weeks 3-6 of 2020) were Maindombe (1 739 cases, 28 deaths), Congo Central 1 609, 4 deaths), Equateur (1 395 cases, 18 deaths), Bas-Uele (1 238 cases, 30 deaths) and Mongala (1 234 cases, 1 death). Other provinces with high mortality figures were Kasai (417 cases, 18 deaths), Tshuapa (549 cases, 17 deaths) and South Kivu (525 cases, 14 deaths). There is a small declining trend shown in reported cases in the provinces of Haut Katanga, Kinshasa, Congo Central, Kwango, Lomani, Maniema, Tanganyika and Tshopo.

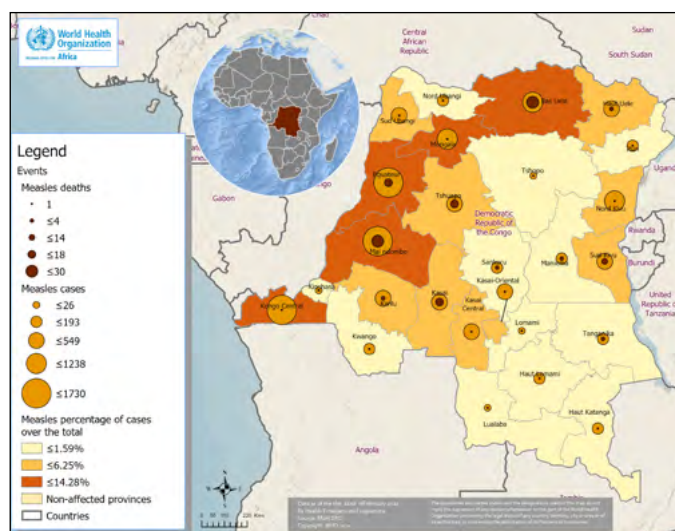
Children under the age of five years remain the most affected in all provinces, accounting for 71% of all confirmed cases. The vaccination status is known in 36% of confirmed cases, while 14% were not vaccinated and 50% had unknown vaccination status.

Reactive vaccination campaigns have reached 5 789 008 children aged 6-59 months in 179/261 health zones. In addition, 18 million children aged 6-59 months have been vaccinated in supplementary vaccination activities in 518/129 health zones.

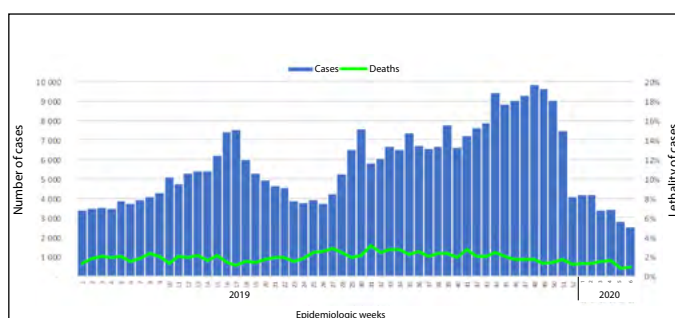
PUBLIC HEALTH ACTIONS

- The Institut National de Recherche Biomédicale (INRB) and WHO conducted a joint mission to the provinces to strengthen laboratory surveillance, including case confirmation and collection of nasopharyngeal samples.
- Focal points have been identified at national, provincial and health zone level, along with regular information sharing from consultants deployed at hotspot health zones.
- A validation workshop for technical guidelines for measles cases was held from 20-21 February 2020; recruitment of a paediatrician for Kasai Province is underway.
- Communication messages are being updated in the provinces with support from sub-coordination teams, along with continuation of community engagement.
- A reactive vaccination exercise is being prepared in eight health zones in Tshuapa Province, planned for 24-28 February 2020 and the Minister of Health signed the release of funds for the purchase of 1.6 million doses of vaccines.
- Technical support mission by MSP partners at all levels are ongoing.

Geographic distribution of suspected measles cases and deaths in Democratic Republic of the Congo, weeks 1- 6, 2020.



Weekly trend of suspected measles cases and deaths in Democratic Republic of the Congo, week 1, 2019 – week 6, 2020 (n= 331 883).



SITUATION INTERPRETATION

Although the number of new cases of measles reported is showing a steady declining trend, there is no room for complacency as multiple operational challenges confound the ongoing response. Challenges include mobilization of resources for the government's three-month operational plan and its implementation; systematization of daily notification, strengthening of the multi-sectoral coordination and collaboration; difficulties with rapid routing of samples to the INRB and Lubumbashi Laboratory and delay in confirmation of biological samples. This, coupled with limited supply of kits in health facilities and issues around provision of free medical care in affected areas and the inaccessibility of some health zones and provinces makes it difficult to dispatch and deliver logistical resources. Communication is also an issue. These challenges need urgently to be addressed, along with careful planning of logistics, implementation of operational plans and funding. Continuing transmission of the virus shows that vaccination activities are still falling short and there is an urgent need to introduce the second dose of measles vaccine. National authorities and partners need to step up their response to cover these shortfalls.

EVENT DESCRIPTION

The Ebola virus disease (EVD) outbreak in North Kivu, South Kivu and Ituri provinces in Democratic Republic of the Congo remains stable, with a low transmission level. No new confirmed EVD case has been reported for the fifth-consecutive day from 22 February 2020. Since our last report on 16 February 2020 ([Weekly Bulletin 7](#)), there has been one new confirmed case and 1 new death. Beni remains the only health zone to report confirmed cases in the past seven days. In the past 21 days (2 to 12 February 2020), five new confirmed cases were reported from two health areas in Beni Health Zone.

As of 22 February 2020, a total of 3 444 EVD cases, including 3 310 confirmed and 134 probable cases have been reported. To date, confirmed cases have been reported from 29 health zones: Ariwara (1), Bunia (4), Komanda (56), Lolwa (6), Mambasa (82), Mandima (347), Nyakunde (2), Rwampara (8) and Tchomia (2) in Ituri Province; Alimbongo (5), Beni (721), Biena (19), Butembo (295), Goma (1), Kalunguta (198), Katwa (653), Kayna (28), Kyondo (25), Lubero (31), Mabalako (463), Manguredjipa (18), Masereka (50), Musienene (85), Mutwanga (32), Nyiragongo (3), Oicha (65), Pinga (1) and Vuhovi (103) in North Kivu Province and Mwenga (6) in South Kivu Province.

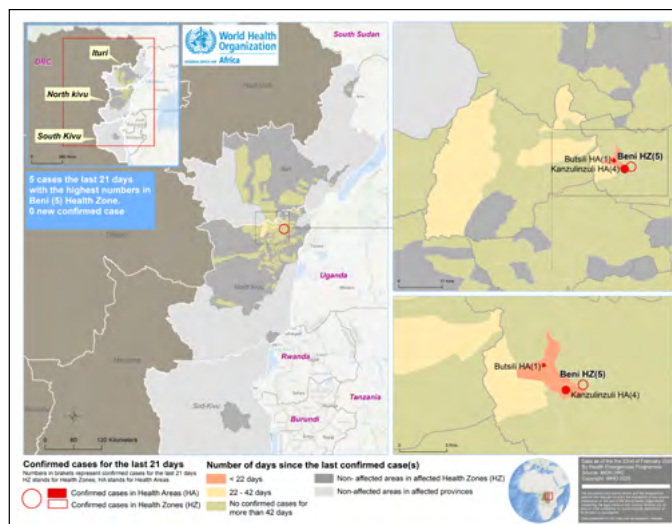
As of 22 February 2020, a total of 2 264 deaths were recorded, including 2 130 among confirmed cases, resulting in a case fatality ratio among confirmed cases of 64% (2 130/3 310). As of 22 February 2020, the total number of health workers affected remains at 172, representing 5% of confirmed and probable cases.

Contact tracing is ongoing in one health zone. A total of 620 contacts are under follow-up as of 22 February 2020, of which 601 (96.9%) have been seen in the past 24 hours. Thirty-four out of 50 health zones raised alerts on 22 February 2020. Of 5 262 alerts processed (of which 5 196 were new) in reporting health zones on 22 February 2020, 5 202 were investigated and 447 (8.6%) were validated as suspected cases.

PUBLIC HEALTH ACTIONS

- Response and surveillance activities continue in all affected areas.
- Insecurity continues, with clashes between regular and militia forces in Nyankunde and ongoing military operations in Biakato areas, adversely affecting response activities; the ETC in Mangina was re-opened after a temporary closure due to insecurity and security arrangements have been strengthened.
- As of 22 February 2020, a cumulative total of 297 275 people have been vaccinated since the start of the outbreak in August 2018.
- Point of Entry/Point of Control (PoE/PoC) screening continues, with over 155 million screenings to date. A total of 106/109 (97.2%) PoE/PoC transmitted reports as of 22 February 2020.

Geographical distribution of confirmed Ebola virus disease cases reported from 26 January 2020 to 15 February 2020, North Kivu, South Kivu and Ituri provinces, Democratic Republic of the Congo.



- Water, sanitation and hygiene (WASH) activities continue and as of 22 February 2020, a total of 22 MONUSCO healthcare providers were trained in Mavivi, Beni Health Zone, and 186 health facilities were monitored and supported in Beni, Oicha, Katwa, Musienene and Mabalako health zones, along with evaluation of 667 handwashing points.
- As of 22 February 2020, the Risk Communication and Engagement teams continued the community dialogues in Beni, Biakato and Aloya.

SITUATION INTERPRETATION

The EVD outbreak in Democratic Republic of the Congo remains stable, with Beni the only health zone reporting confirmed cases for the second week running. While there is room for cautious optimism around the decline in new confirmed cases, continued access and heightened vigilance is required to maintain case investigation and contact tracing activities in all health zones.

EVENT DESCRIPTION

The cholera outbreak in Ethiopia, which initially started on 24 September 2019 in Hudet woreda (district) in Somali region, continues, although the situation has continuously been improving. In week 7 (week ending 16 February 2020), a total of 65 suspected cholera cases were reported compared to 167 cases reported in week 6. The new cases reported during the week (week 7) came from 17 woredas in seven zones of the three regions. The number of cases reported weekly has been on a downward trend since week 2 (week ending 11 January 2020) when 570 cases were reported.

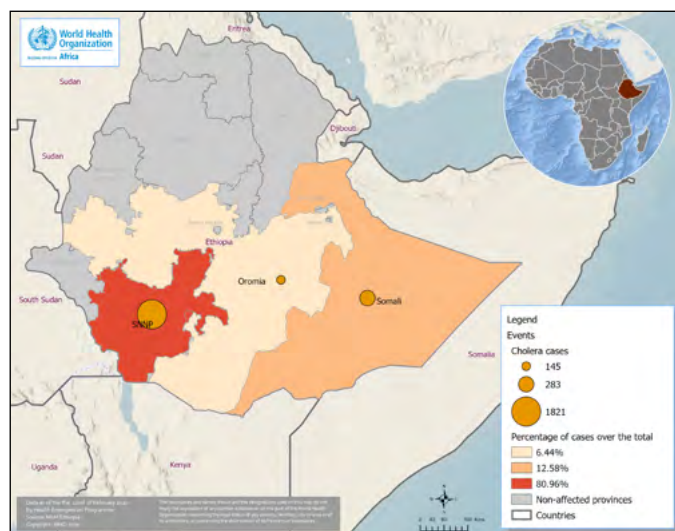
Since the beginning of the cholera outbreak on 24 September 2019, a cumulative total of 2 549 suspected cases were reported from seven zones in three regions, as of 16 February 2020. The regions most affected are Southern Nations Nationalities Peoples (SNNP) and Somali where 94% of suspected cases have been reported.

The most affected people are between the ages of 15 and 44 years, accounting for 52% of all cases. The outbreak has affected more males than females with a ratio of 1.1:1. The main propagating factors of the outbreak include insufficient potable water, poor sanitary and hygiene facilities amongst populations in many of the affected communities.

PUBLIC HEALTH ACTIONS

- The Ethiopian Public Health Institute (EPHI), in collaboration with WHO and other health partners, are responding to the outbreak in the affected woredas. Technical experts in water, sanitation and hygiene (WASH); risk communication; surveillance; health information management; case investigation and logistics are deployed to support the response.
- The Federal Ministry of Health, with support from partners, conducted the first round of oral cholera vaccination campaign in Afar, Oromia, Somali and SNNP regions, reaching 581 973 of the 616 643 targeted persons, giving a coverage of 94.4%.
- EPHI, in partnership with technical support from WHO, UNICEF, John Hopkins University and others, is developing a cholera control and elimination plan.
- The Federal Ministry of Health, with support of WHO, continues to provide cholera investigation and cholera treatment kits to the affected woredas.
- The Federal Ministry of Health, together with WHO and other partners, continues to provide technical support to the response through deployment of experts in surveillance, case investigation, and health information management.
- Risk communication and community engagement activities on preventive and control of cholera are ongoing in the affected Woredas.

Geographic distribution of suspected cholera cases in Ethiopia, 24 September 2019 - 16 February 2020.



- Water, sanitation and hygiene activities, including water quality surveillance and monitoring, chlorination of water sources and provision of water purification tablets to the affected communities have been extensively provided to ensure consumption of safe water by the affected communities.

SITUATION INTERPRETATION

The cholera outbreak in Ethiopia continues to improve, with the number of new cases gradually going down. Outbreak control activities led by EPHI are ongoing in affected communities focusing on enhanced surveillance, case management, WASH and community engagement. The national authorities and partners should ensure targeted interventions based on sound epidemiologic analysis.

EVENT DESCRIPTION

On 23 February 2020, the formation of a new Transitional Government of National Unity (ToGNU) in South Sudan, is expected to bring lasting peace and security. Otherwise, the complex humanitarian crisis has shown minimal signs of improving. Between 31 January 2020 and 14 February 2020, security incidents continued, with 40 casualties reported as a result of cattle raids in Cueicok, Rumbek Centre County on 31 January 2020. There are conflicts and access constraints in Lopua, Kapoeta East County and fighting was reported in Gumuruk Centre, Pibor County. The security situation and access to Baggari has somewhat improved compared to a few weeks ago, but the situation is still fragile. During the reporting period 1 373 displaced individuals fled to Kuperia after fighting in Loka Round, Laiyna County. In addition, over 600 internally displaced persons (IDPs) from approximately 100 households were displaced due to armed conflict between government forces and unknown insurgents in Landili, Maridi County.

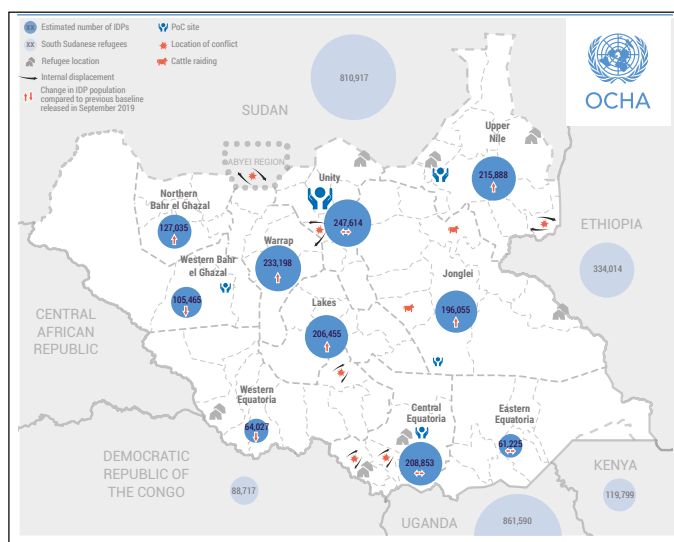
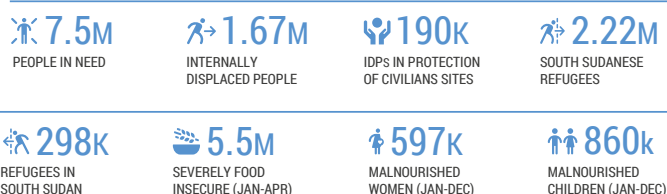
In the past four weeks, most of the flood-affected areas have been dry and water levels are receding, making it increasingly difficult to access areas in need by boat, while road access remains difficult.

Outbreaks of infectious disease continue to complicate the humanitarian situation. The top common alerts reported through the IDSR system in week 5 (week ending 7 February 2020) were malaria, acute watery diarrhoea, measles and bloody diarrhoea. Measles outbreaks have been confirmed in three counties, Tonj East, Magwi and Bor. Jebel Boma in Pibor County reported 96 measles cases with 11 community deaths. On 22 January 2020, Uganda confirmed two cases of yellow fever in Moyo District. Both were South Sudanese refugees who were trading between Uganda and Kajo-Keji in South Sudan.

PUBLIC HEALTH ACTIONS

- Mobile health outreaches are being conducted in flood-affected areas of greater Pibor, Mayom and Nassir County and EMMT is in Akobo to assess health consequences of floods and deliver seven emergency health kits, plus anti-venom and tents; vector control activities will be informed by vector assessment by the WHO entomologist in Pibor County.
- An oral cholera vaccination campaign is scheduled to start on 26 February 2020 and a cold chain has been installed in Pibor county.
- Emergency medical mobile outreaches have been deployed in Kajo-Keji County and 147 women and children have been vaccinated against vaccine preventable diseases; 21 health workers have been trained in case management in Kajo-Keji and Raja and infection prevention and control, and medical supplies have been delivered to cover gaps in delivery in these areas for the next three months.
- Coronavirus preparedness measures continue, with public media briefings and health alerts to inform state Ministries of Health, County Health Departments and health facility workers, as well as travel alerts; a COVID-19 Incident Management Structure has been established in the Public Health Emergency Operations Centre.
- Yellow fever outbreak investigations are being conducted in Kajo-Keji County.
- On 4 February 2020, a countrywide vaccination campaign against measles was launched, targeting over 2.5 million children aged 6-59 months, in cooperation between the Ministry of Health, GAVI, the Vaccine Alliance, WHO and UNICEF. In addition, the children will receive vitamin A supplements and deworming tablets.

Map of Internally Displaced Persons in South Sudan, as of January 2020.



- WHO and the Ministry of Health conducted post campaign evaluation for reactive measles campaigns in Ikotos (69%), Budi (85%) and Aweil East (92%) counties.

SITUATION INTERPRETATION

The complex humanitarian emergency in South Sudan continues. The challenges of limited resources to cover all affected counties, weak coordination at sub-national level, inadequate human resources for health and insecurity in conflict-affected counties continue, as does the problem of massive operational costs measured against available donor funds. These challenges need urgently to be addressed by national authorities and partners, the international community and donors. The formation of ToGNU should create an environment conducive to the provision of aid assistance to the people in need, as well as preparation for repatriation and resettlement.

Summary of major issues, challenges and proposed actions

Major issues and challenges

- The humanitarian crisis in South Sudan remains serious, with multiple security incidents and several operational challenges being reported. The formation of the new unity government is being viewed as a defining moment to mitigate and alleviate the prevailing situation. The aid actors should aim to work closely with this new initiative in order to mitigate the continuing operational challenges in the country.
- The measles outbreak in Democratic Republic of the Congo has been improving in the past weeks although the overall situation remains serious, with over 2 000 cases being reported weekly. Large numbers of children have been vaccinated and preparation for more supplemental immunization activities are ongoing. Given the large scale of the operations, the ongoing response is facing several operational challenges, calling for continuous support in various forms. There is a need for the national authorities and partners to sustain the ongoing response to the measles outbreak to avoid further escalation of the situation. It is particularly important to step up implementation of supplemental immunization activities alongside strengthening routine immunization coverage.

Proposed actions

- The national authorities and partners in South Sudan need to continue provision of urgent life-saving interventions while preparing for a coordinated repatriation and resettlement of refugees and internally displaced persons. The donor community need to increase the funding for the provision of aid assistance and well as for early recovery, reconstruction and development.
- The national authorities and partners in Democratic Republic of the Congo need to sustain the implementation of measles control activities, including supplemental immunization campaigns and related interventions. The national authorities and partners also need to focus on improving routine immunisation coverage as a longer-term measure to addressing the multiple vaccine-preventable diseases. The donor communities and development partners are also urged to continue providing the required inputs (especially funding) in the face of the multiples health emergencies in the country.

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
Ongoing Events									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	12-Feb-20	117	117	0	0.00%
Three new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported since the beginning of 2020 with one each from Bié, Huambo and Namibe provinces. There were 114 cVDPV2 cases from 7 outbreaks reported in 2019.									
Benin	Dengue fever	Ungraded	13-May-19	10-May-19	29-Nov-19	26	14	2	7.70%
Between 10 May and 29 November 2019, a total of 26 suspected cases of dengue fever, including 2 deaths, were reported from Atlantique, Littoral, Ouémé and Couffo Departments. Cumulatively, 14 cases from Atlantique Department (4 cases), Littoral Department (4 cases) and Ouémé Department (6 cases) were confirmed by serology and PCR at the Benin National VHF Laboratory. Two deaths, one of which occurred in a dengue haemorrhagic fever case, were notified among the confirmed cases (CFR 14%).									
Benin	Meningitis	Ungraded	6-Jan-20	9-Dec-19	22-Jan-20	83	24	13	15.70%
On 6 January 2019, the Ministry of Health of Benin notified WHO of an outbreak of meningitis in Banikoara Commune, Alibori Department, Northern Benin. The current outbreak reportedly began in week 50 (week ending 15 December 2019) when a cluster of four case-patients with signs and symptoms suggestive of meningitis were reported from Banikoara Commune. Of these, three were subsequently confirmed as having bacterial meningitis infection. In the following week, an additional 13 cases were reported from the same area, thus exceeding the epidemic threshold for the disease. From 9 December 2019 to 22 January 2020, a cumulative total of 83 cases with 13 deaths (case fatality ratio 16%) have been reported Banikoara Commune. Of these, 16 cases with six deaths have been confirmed for bacterial meningitis infection.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	12-Feb-20	7	7	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported since the beginning of 2020. There were 7 cVDPV2 cases reported in 2019 linked to the Jigawa outbreak in Nigeria.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	27-Jan-20	-	-	-	-
Since 2015, the security situation initially in the regions of the Sahel and later in the east of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement leading to a total of 560 033 internally displaced persons registered as of 9 December 2019 in all 13 regions in the country. The regions of Sahel, Centre-North, the North, the East and Boucle du Mouhoun are the most affected. Health services are severely affected and as of 13 January 2020, According to the report of the Ministry of Health, 8.3% (n=98) of the health facilities located in the six regions affected by insecurity are closed, thus depriving more than 1.2 million people of healthcare, and 11.8% (n=135) have reduced their services to a minimum, following insecurity. Morbidity due to epidemic-prone diseases remains high and Malnutrition thresholds are alarming in the areas hosting IDPs, mainly in Barsalogho, Djibo, Matiacoali, Arbinda, and Titao.									
Burundi	Malaria	Grade 2		1-Jan-19	29-Dec-19	8 892 300		3 294	0.00%
Since week 48 of 2018 (week ending 2 December 2018), there has been a progressive increase in the number of malaria cases reported across the 46 districts of Burundi, with the epidemic threshold surpassed in week 18 of 2019 (week ending 5 May 2019). From 1 January to 29 December 2019, a cumulative total of 8 892 300 cases and 3 294 deaths (CFR 0.04%) were reported. There is an 88% increase in the number of cases and a 62% increase in the number of deaths reported in 2019 compared to 2018.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	27-Jan-20	-	-	-	-
Cameroon continues to face a humanitarian crisis in the Far North Region linked to the terrorist attacks by Boko Haram group, with significant population displacement. Since 1 January 2020, there have been 16 attacks by alleged Boko Haram insurgents, resulting in 20 missing people, 67 injuries and 27 deaths. This situation is hindering humanitarian access and limiting operations and has resulted in suspension of activities beyond Fotokol and Makary in Logone and Chari division. The Minawao Refugee Camp in the Mokolo Health District continues to host Nigerian refugees, with spontaneous refugee arrivals being recorded weekly. As of December 2019, the total camp population was 59 977 persons.									
Cameroon	Humanitarian crisis (NW & SW)	Grade 2	1-Oct-16	27-Jun-18	27-Jan-20	-	-	-	-
The humanitarian situation in the Northwest and Southwest (NW & SW) of Cameroon continues to deteriorate with rising tensions between separatists and military forces. Between 9 and 15 December 2019, an estimated 5 475 people (782 households) were forced to flee their villages following a series of military operations and community clashes throughout the North West region. Military operations in the Momo, Mezam, Boyo, Ngo Ketunjia, Donga Mantung and Bui Divisions have led to the displacement of 2 775 people, while community clashes in the Boyo division has led 2 700 people to flee their homes. This unrest continues to affect access to basic services including healthcare, education, shelter, food security and WASH.									
Cameroon	Cholera	Ungraded	1-Mar-19	1-Mar-19	6-Feb-20	1 364	285	62	4.50%
The Cholera outbreak continues to improve in the 3 affected regions of Cameroon (North, Far North, South West) reporting cases in 2019. An additional region (Littoral) notified cases of cholera since the beginning of the year 2020. Since 1 January 2020 to date, cholera cases are reported in South Ouest and littoral regions only. A total of 24 new cholera cases, with two deaths were reported in the littoral region in epidemiological week 5 (week ending 6 February 2020). Though the epidemiological situation in the South west region is relatively calm, it is important to note that the insecurity prevailing in that area is hindering community active search of cholera cases. No new cases of cholera were reported in North and Far North regions since epidemiological weeks 51 and 48 respectively. From January 2019 to date, a total of 1364 cases of cholera, with 62 deaths were reported from the four affected regions.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-19	17-Nov-19	1 170	382	14	0%
A measles outbreak is ongoing in Cameroon. Since the beginning of 2019, a total of 1 170 suspected cases have been reported. Of these, 382 were confirmed as IgM-positive. The outbreak is currently affecting 43 districts, namely, Kousseri, Mada, Goulfey, Makary, Kolofata, Koza, Ngaoundéré rural, Bangué, Guider, Figuil, Ngong, Mora, Maroua 3, Vélé, Pitoa, Maroua 1, Bourha, Touboro, Mogodé, Bibémi, Garoua 1, Garoua 2, Lagdo, Tcholliré, Guidiguis, Moutourwa, Mokolo, Cité verte, Djoungolo, Nkolondongo, Limbé, Garoua Boulai, Ngaoundéré Urbain, Ekondo Titi, Gazawa, Meiganga, New Bell, Deido, Bertoua, Biyem assi, Cité des palmiers, Logbaba, and Nylon district.									
Cameroon	Monkeypox	Ungraded	14-Jan-20	8-Jan-20	17-Jan-20	2	1	1	50.00%
WHO was notified of an outbreak of monkeypox on 14 January 2020 by the Ministry of Public Health in Cameroon following the confirmation of the monkeypox case by the Institut Pasteur laboratory on 08 January 2020. The index case is a 13-month-old child from Tomba1 village, health area of Ayos Urbain, Ayos Health district, centre region, who consulted at Arche de Noé health centre on 20 December 2019 with signs compatible with smallpox. The child was referred to the Regional Hospital annex of Ayos, then at Chantal Biya hospital on 24 and 26 December 2019 respectively. The child died on 2 January 2020. The second confirmed case is the mother of the dead child.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	23-May-19	23-May-19	12-Feb-20	-	-	-	-
No case of cVDPV2 was reported in the past week. On 23 May 2019, WHO received notification through the Global Polio Laboratory Network (GPLN) of the detection of circulating vaccine-derived poliovirus type 2 (cVDPV2) from an environmental sample collected on 20 April 2019 in the Northern Province of Cameroon which borders Borno State in Nigeria and Chad. There are no associated cases of paralysis detected so far.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	2-Feb-20	-	-	-	-
Civil unrest and food insecurity in most parts of the country including major cities, are continuing to cause a complex humanitarian situation. The security situation remains tense with the persistence of inter-ethnic tensions within rival armed groups in the Northeast of the country mainly in Ndele, Birao and Bri. Clashes between armed groups, the persistence of inter-community tensions and the increase in crime across the country continue to result in population displacement. As of 31 January 2020, OCHA estimates the number of internally displaced people in the country at 670 000.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-19	9-Feb-20	5 724	220	83	1.50%
From Week 1, 2019 (week ending on 7 January 2019) till week 6, 2020 (week ending on 9 February 2020), a total of 5 724 measles cases including 220 confirmed cases and 83 deaths have been reported in twelve affected districts in Central Africa. A total of 1498 new suspected measles cases were notified from epidemiological week 1 to week 6 of 2020 in 13 districts among which there are 5 new districts reporting cases in this year. The majority of cases are under five years of age, followed by the age group 5 to 10 years old. Response activities are ongoing in the affected health districts.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	12-Feb-20	19	19	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported since the beginning of 2020. There were 19 cVDPV2 cases reported in 2019 from 6 different outbreaks.									
Chad	Measles	Ungraded	24-May-18	1-Jan-19	9-Feb-20	1 276	31	14	1.10%
In week 6 (week ending 9 February 2020), 352 suspected cases were reported. 26 districts were in the epidemic phase in week 6. Since the beginning of the year, a total of 1 276 suspected cases and 14 deaths (CFR 1.1%) have been reported from Beboto, Kyabe, Korbol and Kelo.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	12-Feb-20	3	3	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported since the beginning of 2020. There were three cVDPV2 cases reported in 2019 linked to the Jigawa outbreak in Nigeria.									
Comoros	Measles	Ungraded	26-May-19	20-May-19	22-Dec-19	218	59	0	0.00%
As of 22 December 2019, a total of 218 suspected cases with zero deaths have been reported from health facilities in Grande Comore Island. Of these, 59 cases have been confirmed (40 laboratory-confirmed and 19 by epidemiological link). IgM-positive cases were reported in five districts of Grande Comore, namely, Moroni (28), Mitsamiouli (6), Mbeni (3), Mitsoudjé (2), and Oichili (1). The 19 epi-linked cases are from Moroni district.									
Congo	Floods	Ungraded	22-Nov-19	3-Oct-19	10-Dec-19	-	-	-	-
Since 3 October 2019, heavy rains resulted in floods in 8 out of 12 departments of the Republic of Congo, namely: Likouala, Cuvette, Plateaux, Sangha, Kouilou, Niari, Brazzaville and Pointe-Noire. As a result of the floods, homes and public infrastructure have been destroyed leaving the affected population in precarious living conditions and with limited access to healthcare. Furthermore, the floods have caused significant damage to the agricultural and farming sectors thus posing a threat to food security. On 19 November 2019, the Congolese government declared a state of emergency in the affected areas. As of 10 December 2019, at least 170 000 people have been affected.									
Congo	Chikungunya	Grade 1	22-Jan-19	7-Jan-19	29-Dec-19	11 600	148	0	0.00%
In week 52 (from 23 to 29 December 2019), a total of 10 new chikungunya cases were reported across the country against 14 cases in week 51. The cases reported in week 52 came from four departments namely: Kouilou (4), Lekoumou (4), Bouenza (1) and Plateaux (1). Since the beginning of the outbreak, a total of 11 600 cases have been reported in 44 out of the 52 health districts in 10 out of 12 departments. The departments of Bouenza (3102 cases), Kouilou (2844 cases) and Niari (2589) were the most affected by the outbreak accounting for 74% of cases reported since the beginning of the outbreak.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Ungraded	29-Oct-19	29-Oct-19	12-Feb-20	-	-	-	-
Three cVDPV2 positive environmental samples were reported: one from Abidjan 2 province and two from Abidjan 1 Grands Ponds province, all linked to the Jigawa outbreak in Nigeria									
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-16	17-Apr-17	9-Feb-20	-	-	-	-
The Democratic Republic of the Congo continues to experience a complex humanitarian crisis involving armed conflicts and inter-community tension resulting in large number of people in need of humanitarian assistance. Populations movement due to armed clashes and inter-community fighting continue to be reported in North-Kivu, Tanganyika, Ituri, Kasai central and South-Kivu provinces. In Ituri, Irumu and Mambasa territories armed group attacks which resulted in 60 civilian victims and kidnapping of around 20 persons were reported. In Tanganyika province, a new confrontation between Twa militias and FARDC resulted in several cases of wounds and some cases of rape. A total of 45 000 internally displaced persons registered in the Nyunzu Center (Nyunzu territory) continue to suffer from a lack of health humanitarian assistance. Due to insecurity caused by Twa-Bantou conflicts, nine health centres of Nyunzu Health Zone remain unfunctional.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-20	26-Jan-20	2 651	-	43	1.60%
During week 4 (week ending 26 January 2020), a total of 529 suspected cases of cholera and 7 deaths (CFR 1.3%) were notified from 8 out of the 26 provinces in the country. The majority (99%) reported in week 4 came from five provinces: North-Kivu, South-Kivu, Tanganyika, Tshopo and Haut-Katanga. The weekly case incidence has been on a decreasing trend since week 1 of 2020; a similar trend was observed in previous years. The case fatality ratio decreased during week 4 (CFR 0.8%) compared to week 3 (CFR 1.8%) of 2020. The province of Katanga continues to report high mortality rates which are above 5%. Between week 1 and week 52 of 2019, a total of 30 304 cases including 514 deaths (CFR 1.7%) were notified from 23 out of 26 provinces.									
Democratic Republic of the Congo	Ebola virus disease	Grade 3	31-Jul-18	11-May-18	22-Feb-19	3 444	3 310	2 264	66.00%
Detailed update given above.									
Democratic Republic of the Congo	Measles	Grade 2	10-Jan-17	1-Jan-20	9-Feb-20	331 883	-	6 283	1.90%
Detailed update given above.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	26-Jan-20	222	-	4	1.80%
During week 4 (week ending 26 January 2020), a total of 73 suspected cases including one death were reported across the country, compared to 46 suspected cases and no deaths in the previous week. The majority of cases in week 4, were reported from Sankuru province (78%). In the past 4 weeks (weeks 1 to 4 of 2020) a total of 222 suspected cases with 4 deaths (CFR 1.8%) were notified in the country, with the majority of cases being reported from the provinces of Sankuru (31%), Bas-Uele (18%), Equateur (15%) and Mai-Ndombe (9%). There has been an increase in the weekly case incidence since week 2 of 2020. Between weeks 1 and 52 of 2019 a cumulative total of 5 288 monkeypox cases, including 107 deaths (CFR 2%) were reported from 133 health zones in 19 provinces.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	15-Feb-18	1-Jan-18	19-Feb-20	105	105	0	0.00%
No new cases of cVDPV2 were reported this week. There were 85 cVDPV2 cases reported in 2019 and 20 in 2018.									
Ethiopia	Cholera	Ungraded	14-May-19	12-May-19	16-Feb-20	2 549	-	-	0.00%
Detailed update given above.									
Ethiopia	Dengue	Ungraded	3-Nov-19	9-Sep-19	8-Dec-19	1 251	6	0	0.00%
Between week 37 and week 49 in 2019, a total of 1 251 suspected cases and 6 confirmed cases of dengue fever were reported from Afar region. The peak of the outbreak was observed in week 38 when more than 300 suspected cases were reported.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-19	2-Feb-20	1 873	-	-	-
In week 5 (week ending 2 February 2020), the measles outbreak is still ongoing in Oromia, SNNPR and Somali regions. A total of 1 873 suspected cases with were reported as of week 5 with the majority of suspected cases being reported from Oromia region.									
Ethiopia	Poliomyelitis (cVDPV2)	Ungraded	24-Jun-19	20-May-19	12-Feb-20	12	12	0	0.00%
Seven cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Ethiopia: 4 from Oromiya province and 3 from the Southern Nations Nationalities and Peoples' Regional State (SNNPR), one of them being the first case in 2020. There are 12 cVDPV2 cases reported in Ethiopia so far; 4 cases linked to the outbreak in neighbouring Somalia and 8 cases part of 3 different outbreaks in Ethiopia.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	12-Feb-20	12	12	0	0.00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported since the beginning of 2012. There are 12 cVDPV2 cases reported in 2019.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Guinea	Measles	Ungraded	9-May-18	1-Jan-19	3-Nov-19	4 690	1 091	18	0.30%
During week 44 (week ending 3 November 2019), 127 suspected cases of measles were reported. From week 1 to 44 (1 January – 3 November 2019), a total of 4 690 suspected cases including 18 deaths (CFR 0.4%) have been reported. Of the 4 690 suspected cases, 1 773 were sampled, of which 1 091 tested positive for measles by serology. Three localities in three health districts are in the epidemic phase, namely, Wanindara in Ratoma health district, Dounet in Mamou health district and Soumpoura in Tougue health district.									
Kenya	Chikungunya	Ungraded	24-Jan-20	31-Dec-19	16-Feb-20	202	17	0	0.00%
A chikungunya outbreak was reported in Kenya and has affected Hagadera Sub County in Garissa County. As of the reporting date, a total of 163 cases with 17 confirmed positives have been reported. The index case was seen on 31 December 2019.									
Kenya	Cholera	Ungraded	21-Jan-19	1-Jan-20	16-Feb-20	253	3	1	0.40%
In week 7 (week ending 16 February 2020), 62 new suspected cases were reported from Turkana county. Since 1 January 2020, cholera outbreak has been reported in three counties namely: Garissa, Wajir and Turkana. Cumulatively, a total of 253 cases with no deaths have been reported. The outbreak in all the three counties is a continuous wave from 2019. The transmission is active in all the affected counties.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	16-Feb-20	38	15	0	0.00%
In week 7 (week ending 16 February 2020), no new case was reported. Since the beginning of the outbreak, suspected and confirmed cases of leishmaniasis have been reported from Mandera, Marsabit, Wajir and Garissa counties.									
Kenya	Measles	Ungraded	6-May-19	20-Mar-19	16-Feb-20	637	15	1	0.20%
A total of 198 cases with 5 confirmed have been reported new outbreak of measles has been reported from Pokot North sub county, Alale location since 20 October 2019. The last measles cases were reported in Kajiado County, Kajiado West Sub-County on 8 September 2019 (425 suspected cases, 4 confirmed and 1 death). Additionally, 10 cases including 6 laboratory-confirmed cases were reported from Garissa County in Dadaab Sub-County in May 2019.									
Liberia	Lassa fever	Ungraded	23-Jan-19	1-Jan-20	16-Feb-20	31	30	14	45.20%
Of 73 suspected cases reported across the country from 1 January to 16 February 2020, 30 were confirmed, 42 discarded, and 1 pending test result. A total of 14 deaths (CFR 45.2%) have been reported among the cases (confirmed and pending).									
Liberia	Measles	Ungraded	24-Sep-17	1-Jan-19	2-Feb-20	84	13	0	0.00%
In week 5 (week ending on 2 February 2020), 25 suspected cases were reported from 9 out of 15 counties across the country. Since the beginning of 2020, 84 cases have been reported across the country, of which 13 are laboratory-confirmed, 0 are epi-linked, and 27 are clinically confirmed.									
Malawi	Cholera	Ungraded	9-Jan-20	9-Jan-20	24-Jan-20	3	3	0	0.00%
An outbreak of cholera is ongoing in Malawi, Blantyre district. Since the notification of the first case on 9 January 2020 till 24 January 2020, a total of 3 confirmed cases with zero deaths was reported from Limbe health facility. Blantyre is the largest commercial city in Malawi, and is in the southern part of the country. Response activities are going in the affected district and active surveillance was enhanced in all districts of the country.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	7-Dec-19	-	-	-	-
The security situation continues to worsen as violence spreads from the north to the more populated central regions of the country. The number of internally displaced persons is increasing, and it was estimated at 199 385 in October 2019. This increase is associated with repeated violences in Mopti, Gao, Menaka and zones in the neighbourhood of Burkina Faso border. The country is also facing infectious diseases outbreaks which include yellow fever, measles, and dengue. Cases of malnutrition continue to be reported at the country level. In week 48, a total of 5 206 cases of acute malnutrition were reported.									
Mali	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	2-Feb-20	5-Jan-20	7-Feb-20	14	3	7	50.00%
The regional Directorate of Health in Mopti notified a total of 14 suspected haemorrhagic fever including 7 deaths on 2 February 2020. All notified cases are from Mopti Health district, Korienze health area, Kera village. Three out of nine laboratory samples that were sent to the Public health institute turned positive for Crimean Congo Hemorrhagic fever. Response activities are ongoing in the affected health district.									
Mali	Dengue	Ungraded		1-Jan-19	7-Dec-19	20	9	0	0.00%
Cases of dengue continue to be reported in Communes IV (2 cases), V (3 cases) and VI (4 cases) of Bamako district. From Week 1 to week 48, a total of nine out of 16 samples tested positive. The last confirmed case was notified in week 47. Outbreak responses measures are being implemented in affected communes.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-19	9-Feb-20	91	17	0	0.00%
During week 6 (week ending on 9 February 2020), 37 suspected cases of measles were reported from four regions in the country. Of these, 8 were confirmed IgM-positive. Since 1 January 2020, 91 suspected cases, 17 of which were confirmed have been reported. No associated deaths have been reported so far.									
Mali	Yellow fever	Ungraded	3-Dec-19	3-Nov-19	22-Dec-19	41	5	7	17.10%
As of 22 December 2019, a total of 41 cases have been reported including 33 suspected cases, 3 probable cases and 5 confirmed from two regions: Sikasso and Koulikoro. Five deaths have been reported including 2 among confirmed cases.									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	29-Dec-19	7 063	1 731	59	0.80%
In weeks 51 and 52 (week ending 29 December 2019), 82 cases were reported from six regions of Namibia with the majority (49 cases) from Khomas region. There was an increase in the number of cases reported in weeks 51 and 52 compared to weeks 49 and 50. As of 29 December 2019, a cumulative total of 1 731 laboratory-confirmed, 4 345 epidemiologically linked, and 987 suspected have been reported countrywide. A cumulative number of 59 deaths have been reported nationally (CFR 0.8%), of which 24 (41%) occurred in pregnant or post-partum women. Cases have been reported from 12 out of 14 regions of Namibia, namely, Khomas, Omusati, Erongo, Oshana, Oshikoto, Kavango, Ohangwena, Omaheke, Hardap, Karas, Otjozondjupa, and Kunene regions.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	23-Jan-20	-	-	-	-
The security situation continues to worsen in bordering areas of Burkina fasso, Mali and Nigeria following armed groups attacks in the region. The military camp of Sinogodou situated in the health district of Banibangou, Tillabery region was attacked on 9 January 2020. A total of 89 governments defence and security forces was killed. The number of displaced people is increasing in Tillabery, Maradi, Diffa. This security situation is hampering the humanitarian access and affecting the access to basic health and social services. A total of 46 health posts and 10 health centers have closed due to insecurity. According to OCHA statistics, 2.9 million people are in need of humanitarian assistance, 190 248 people are internally displaced, and 217 858 are refugees in the country.									
Niger	Measles	Ungraded	10-May-19	1-Jan-20	19-Jan-20	84	-	0	0.00%
During week 3 of 2020 (week ending 19 January 2020) an additional 21 suspected cases were reported in the country. Between weeks 1 and 3 of 2020, a total of 84 suspected cases were reported from 5 regions in the country. In 2019 a total of 10 207 suspected measles cases were reported from 8 regions in the country.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	31-Jan-20	-	-	-	-
The humanitarian crisis in the North-eastern part of Nigeria persists with continued population displacement from security compromised areas leading to overcrowding in many camps in the region. Due to shrinking humanitarian space health partners are facing challenges in delivery of timely and urgent life-saving assistance as access challenges are impacting movement of mobile medical teams, ambulances, immunization staff and medical cargo in many locations across Borno state. The cholera outbreak in Adamawa state is ongoing, though the number of cases being reported is showing a downward trend.									
Nigeria	Cholera	Ungraded	19-Jun-19	15-May-19	15-Dec-19	895	207	15	1.70%
Three new cases of cholera were reported in Adamawa State from 27 November to 6 December 2019 from Yola North (2) and Yola South (1) Local Government Areas. From 15 May to 6 December 2019, a cumulative total of 839 suspected cases with four deaths have been reported from four LGAs: Yola North (513 cases with two deaths), Girei (200 cases with one death), Yola South (125 cases with one death), and Song (1 case with zero deaths). Of 539 stool specimens collected and analysed at the state specialist hospital, 206 cultured <i>Vibrio cholerae</i> as the causative agent. An outbreak of cholera has also been reported in Andoni Local Government Area, Rivers State. From 27 November to 9 December 2019, a total of 56 cases with 11 deaths were reported from 15 communities in Andoni LGA.									
Nigeria	Lassa fever	Ungraded	24-Mar-15	1-Jan-20	16-Feb-20	593	586	110	18.50%
The weekly trend of Lassa fever cases continues to increase with 115 new confirmed cases reported from 16 states across Nigeria in week 7 (week ending 16 February 2020). From 1 January to 16 February 2020, a total of 593 cases (586 confirmed and 7 probable) with 110 deaths (CFR-18.5%) have been reported from 101 Local Government Areas across 26 states in Nigeria. A total of 2319 contacts are currently being followed.									
Nigeria	Measles	Ungraded	25-Sep-17	1-Jan-19	31-Jan-20	1 618	303	5	0.30%
Between epi weeks 1 - 5 (week ending 31 January 2019), a total of 1 618 suspected cases of measles were reported from 36 states including 5 deaths (CFR 0.3%). Katsina (356) Sokoto (324), Borno (165), and Yobe (88) states account for 62.3% of the cases reported in January 2020. Of the 720 samples tested, 303 were IgM positive for measles.									
Nigeria	Monkeypox	Ungraded	26-Sep-17	24-Sep-17	30-Nov-19	336	181	7	2.10%
The country continues to report monkeypox cases since September 2019. Eight new cases were reported in the month of November from 5 states with no associated deaths. Only one suspected case was confirmed in Oyo state. A total of 106 suspected cases have been reported so far in 2019, 44 of which were confirmed in 9 states.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	12-Feb-20	53	53	0	0.00%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported from Anambra province making it the first case in 2020. There were 18 cVDPV2 cases reported in 2019 and 34 in 2018.									
Nigeria	Yellow fever	Ungraded	14-Sep-17	1-Jan-20	31-Jan-20	139	0	0	0.00%
In January 2020, a total of 139 suspected yellow fever cases have been reported from 90 LGAs across 27 States 604. Of the 139 samples collected, 2 tested positive in Nigerian network laboratories. In 2019, a total of 4288 suspected cases were reported in 618 (83.1%) LGAs from all states in the country. Four States: Katsina, Kebbi, Bauchi and Benue had the highest attack rates. A total of 227 cases were confirmed in Nigeria and from IP Dakar and 231 deaths were reported.									
Seychelles	Measles	Ungraded	21-Jan-20	13-Jan-20	10-Feb-20	79	20	0	0.00%
As of 10 February 2020 a total of 79 suspected measles cases with no deaths were reported. All confirmed cases reported are from Praslin Island, although two were detected on Mahe island. All age groups have been affected.									
Sierra Leone	Lassa fever	Ungraded	22-Nov-19	30-Oct-19	6-Dec-19	7	5	4	57.10%
No new confirmed cases have been reported since 24 November 2019 from Tonkolili district. From 30 October to 6 December, a total of five cases (three confirmed and two probable) with three deaths have been reported in Tonkolili district. Of the total 71 contacts identified, 38 have completed 21 days of monitoring while 33 are still being followed. In a separate cluster, two-laboratory confirmed cases with one death were reported from Kenema district from 27 to 28 November 2019. A total of 119 contacts of these cases are being followed.									
South Sudan	Flood	Ungraded	28-Oct-19	29-Oct-19	14-Feb-20	-	-	-	-
In the last 4 weeks, most of the areas affected by floods did not experience rains at all, and as a result, the water levels are receding, improving access to communities that were initially cut off.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	30-Jan-20	-	-	-	-
Detailed update given above.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	Hepatitis E	Ungraded	-	3-Jan-18	26-Jan-20	167	41	2	1.20%
The current outbreak in Bentiu POC continues since the beginning of 2019. As of reporting date, a total of 155 cases and two deaths have been recorded from Bentiu POC and a total of 12 suspected cases including 4 confirmed cases in Lankein. The last cases in Lankein were reported in week 25 (week ending on 23 June 2019).									
South Sudan	Measles	Ungraded	24-Nov-18	1-Jan-19	26-Jan-20	4 732	247	26	0.50%
Between week 1 in 2019 to week 4 in 2020, a total of 4 731 suspected cases of measles which 247 laboratory-confirmed and 26 deaths (CFR 0.5%) have been reported. The outbreak has affected 23 counties (Pibor; Abyei; Mayom; Gogrial West; Aweil South; Melut; Gogrial East; Juba; Tonj North; Aweil West; Aweil East; Renk; Wau; Tonj North; Jur River; Yambio, Budi, Ikotos, Maban and Aweil East, Ikotos, Tonj East, Magwi and Bomaand) and 4 Protection of Civilians Sites POCs (Juba, Bentiu, Malakal and Wau).									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	12-Feb-20	7	7	0	0.00%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) has been reported since the beginning of 2020. There were seven cVDPV2 cases reported in 2019.									
Uganda	Humanitarian crisis - refugee	Ungraded	20-Jul-17	n/a	31-Jan-20	-	-	-	-
Between 1 and 31 January 2019, a total of 6 172 new refugee arrivals crossed into Uganda from the Democratic Republic of the Congo (3 799), South Sudan (1 932) and Burundi (441). Uganda hosted 1 394 678 asylum seekers as of 31 January 2019, with 95% living in settlements in 11 of Uganda's 128 districts and in Kampala. The majority of refugees are from South Sudan (62.9%), the Democratic Republic of the Congo (28.8%) and Burundi (3.5). Most are women within the age group 18 - 59 years.									
Uganda	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	13-Feb-20	21-Jan-20	10-Feb-20	1	1	0	0.00%
A 23-year-old male, lumberjack, from Kagadi district developed a fever on 7 January 2020 and had self-medication for malaria without improvement. No history of getting in contact with slaughtered animal meat or bush meat. He later developed generalized body weakness, abdominal pains and on 20 January 2020 followed by bleeding from the nose, vomiting and urinating blood. The bleeding increased and he was rushed to Kagadi hospital and isolated. A sample was collected and transported to UVRI on 21 January and the results were positive for CCHF on the same day. Nine contacts were followed up as of 10 February 2020.									
Uganda	Rift valley fever	Ungraded	28-Nov-19	15-Nov-19	19-Dec-19	2	2	2	100.00%
On 5 December a second confirmed case of Rift Valley fever was reported from Ntoroko district, Uganda. This was a 25-year-old male from the Democratic Republic of Congo who was living and working in Kimara Village, Butungama sub-county in Ntoroko district, Uganda. Following the presentation of haemorrhagic symptoms on 5 December 2019, a viral haemorrhagic disease was suspected, and the case was isolated in an ETC for treatment. A sample was collected and sent to UVRI on the same day and the case-patient later died on 6 December 2019. A safe and dignified burial was conducted on 17 December 2019. As of 19 December 2019, a total of 2 cases and 2 deaths have been reported from Ntoroko and Obongi Districts.									
Uganda	Yellow fever	Ungraded	22-Jan-20	31-Oct-19	30-Jan-20	15	5	5	33.30%
As of 30 January 2020, there are 15 cases reported from Moyo and Buliisa District in Uganda. In Moyo District, there are three confirmed cases, two probable cases and 8 suspected cases. There was a total of 11 deaths. In Buliisa, there are also two confirmed cases and 1 death reported. None of the confirmed cases was vaccinated against yellow fever virus.									
Zambia	Poliomyelitis (cVDPV2)	Grade 2	17-Oct-19	16-Jul-19	12-Feb-20	2	2	0	0.00%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) has been reported since the beginning of 2020. There were two cVDPV2 cases reported in 2019.									
Zimbabwe	Anthrax	Ungraded	6-May-19	6-May-19	20-Jan-20	286		1	0.30%
The anthrax outbreak is ongoing in Zimbabwe with a cumulative total number of 286 cases and one death notified since the beginning of the outbreak in week 36 (week starting 6 May 2019) of 2019. This outbreak started in week 36, 2019, affecting mainly Buhera and Gokwe North and South districts but a surge in cases started appearing in week 38 when cases were reported in some other areas. Since 1 January to 20 January 2020, a total of 178 cases were reported mainly in Masvingo (119 cases), Midlands (31 cases) and Mashonaland west (28 cases) provinces.									
Closed Events									
Niger	Flood	Ungraded	1-Jun-19	1-Jun-19	20-Dec-19	-	-	-	-%
Niger was affected by heavy rains followed by floods since June to September 2019. A total of 211 366 people was affected, including 57 people who died, and 16 375 houses collapsed during that period. A second wave of flood was reported since October in the Diffa and Tahoua regions. In Diffa region, following an exceptional flood from Komadougou Yobé river around 45 594 people were affected according to the Ministry of Humanitarian Action and Management of Catastrophe (AH / GC). The most affected municipalities are those of Diffa, Gueskerou and Chétimari. In Tahoua, heavy rainfall in the commune of Bombaye affected 249 households. There is an urgent need for basic health and social services such as shelters, food and non-food items, and WASH assistance.									

†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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