

# WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 7: 7 – 13 February 2022

Data as reported by: 17:00; 13 February 2022



World Health  
Organization

REGIONAL OFFICE FOR **Africa**  
WHO Health Emergencies Programme

**3**

New events

**132**

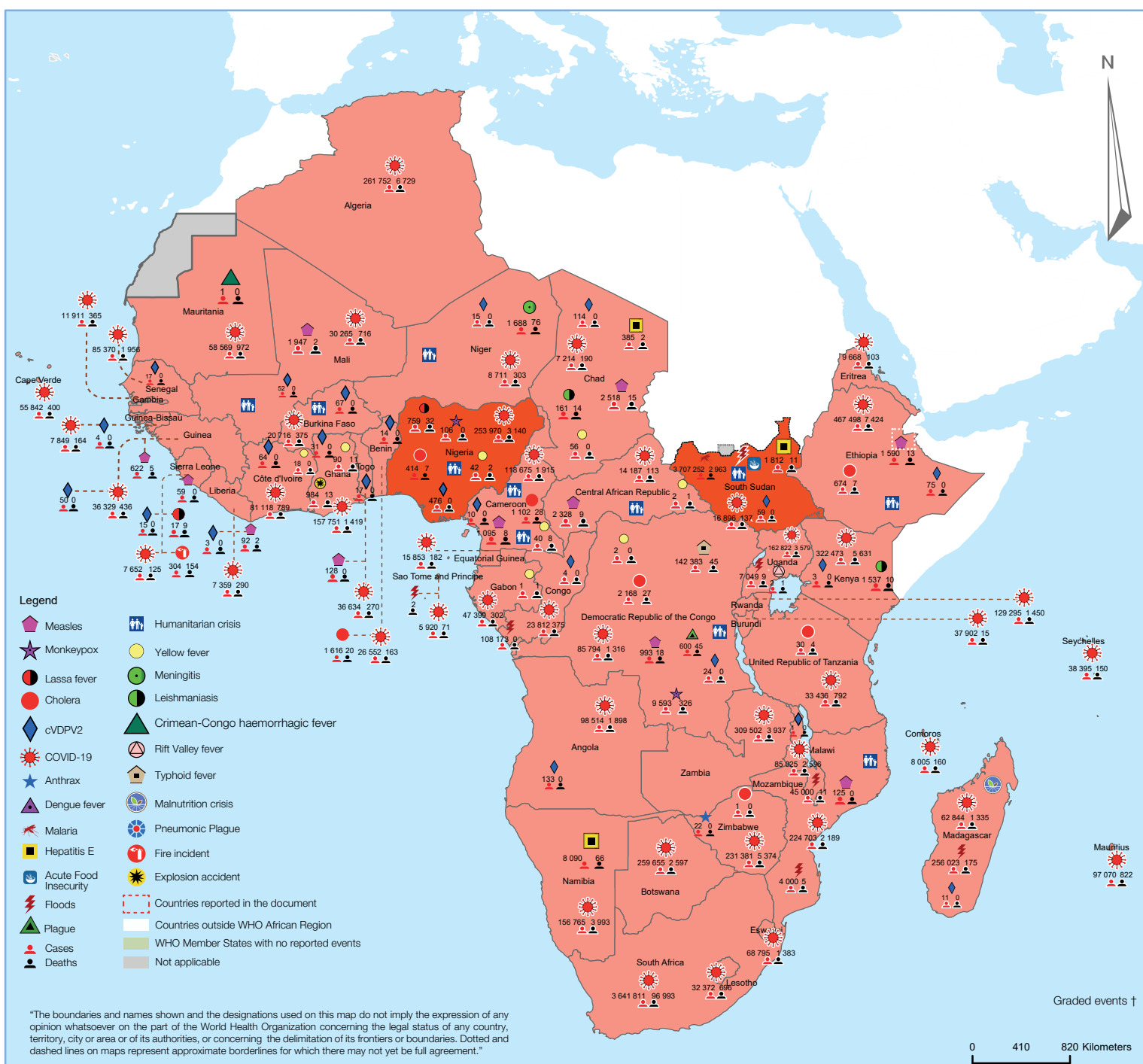
Ongoing events

**112**

Outbreaks

**23**

Humanitarian  
crises



**3**

Grade 3 events

**39**

Grade 2 events

**2**

Grade 1 events

**3**

Protracted 3 events

**4**

Protracted 2 events

**3**

Protracted 1 events

**35**

Ungraded events

# Overview

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8 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 135 events in the region. This week's articles cover:

- [Measles in Ethiopia](#)
- [COVID-19 across the WHO African region](#)
- [Humanitarian Crisis in the Sahel Region \(Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria\)](#)

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

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

### Major issues and challenges include:

- Ethiopia is experiencing an active measles outbreak and the most affected regions are Southern Nations, Nationalities and Peoples' Region (SNNPR); Oromia and Somali. This outbreak occurs against a complex humanitarian context caused by the ongoing armed conflict, with a presence of refugees and internal displaced populations. There are significant risk factors for a larger measles outbreak in the affected areas, including suboptimal measles immunization coverage, poor living conditions in overcrowded settings, the ongoing drought and high rate of malnutrition, and the recurrent conflict leading to the interruption of routine immunization activities. The challenges reported so far include lack of sufficient funding to support response activities, limited health personnel training on case management and delays in outbreak investigation and reporting.
- Africa's fourth wave is gradually slowing down. Nearly all countries in the WHO African region saw a decline in COVID-19 weekly cases except for Sierra Leone. Even with the continued decline, the number of cases remains high in some countries, which are still experiencing a resurgence. New cases decreased in Algeria, marking the third week the country is seeing a fall following the latest wave's peak. With many Africans not having received a single vaccine dose, the vaccination rate needs to increase six-fold if the continent is to meet the 70% coverage target set for mid-2022.
- The longstanding humanitarian situation has further deteriorated in six countries of the Sahel: Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria. While problems such as violence, poverty, climate change, food insecurity, disease outbreaks, and military coups have persisted in the area for over a decade, incidents have been on the rise in recent months. The humanitarian situation causes additional challenges for the health of the population who are faced with weakened health systems against a context of food insecurity due to climate change.

## Measles

## Ethiopia

1 590  
cases

13  
Deaths

0.8%  
CFR

### EVENT DESCRIPTION

Since early January 2022, Ethiopia has been experiencing a measles outbreak. Three regions of SNNPR, Oromia and Somali are most affected to-date with a total of 1 590 cases and 13 deaths (case fatality ratio (CFR) = 0.8%) reported.

As of 9 February 2022, the SNNPR has reported the highest number of infections with 1 005 cases (63.2%), followed by Somali region with 495 cases (31.1%), and Oromia with 90 cases (5.7%). Regarding deaths, the Somali region is leading with 9 out of 13 (69.2%) deaths, then SNNPR region with 4 deaths (30.7%). No death has been reported in Oromia region.

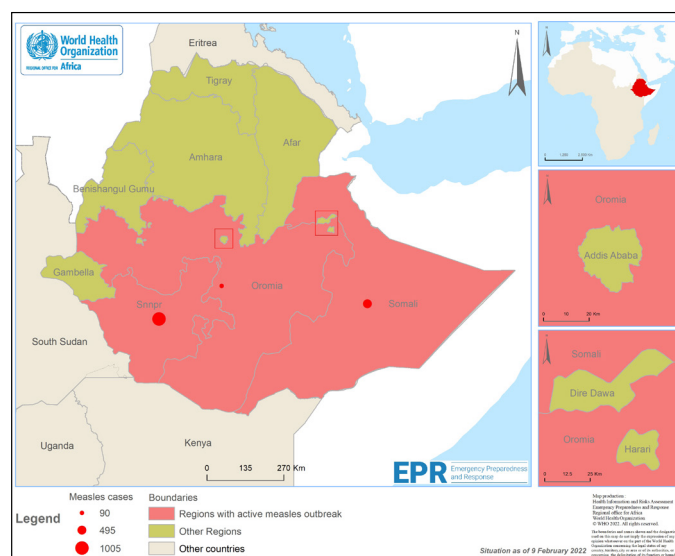
Among the eight districts reporting cases in SNNPR, South Ari district has reported most cases with 449 cases (44.7%) and 0 deaths. In this district, 182 (40.5%) of the reported cases are unvaccinated against measles and the most affected age group is 1-4 years (49.2%) and 5-9 years (33.0%) old. The identified risk factors for a larger measles outbreak in this region are recurrent conflict and interruption of routine immunization activities, high rate of malnutrition, pastoralist or mobile communities, and the low routine immunization coverage.

Regarding Somali region, Dollo Ado district has reported 410 cases (83.0%) with eight deaths (CFR= 1.9%). The 0-4 years age group is the most affected (52.5%), followed by the 5-9 years age group (31.8%). More than half of the cases, (74.0%; 303 cases) reported in Dollo Ado district are unvaccinated. Notably, about 85.3% of the total cases reported in the Dollo Ado district are from refugees' settings. The identified risk factors for a larger measles outbreak in this region are drought and malnutrition, pastoralist/mobile communities who moves from one place to the other, high influx of asylum seekers (300 - 350 families per day) living in congregate settings, and low routine immunization coverage (Measles-containing-vaccine second dose (MCV2) immunization coverage in Dollo are 18%, 50% and 11% in 2019, 2020 and 2021, respectively).

### PUBLIC HEALTH ACTIONS

- The national technical working group, including the Ministry of Health, local and international organizations has been established and conducts regular coordination meetings.
- An outbreak response plan is being developed focusing on critical areas such as mass vaccination campaign, capacity building of health workers to strengthen case management, and integration of nutritional screening with mass vaccination.
- Cross-border coordination of Ethiopia-Somalia-Kenya bordering districts has been initiated.
- Active case search in both communities and health facilities as well as outbreak investigations are ongoing.
- Tents to serve as isolation centre were erected and equipped for case management mostly in the refugees' areas.

### Geographical location of active measles outbreaks in Ethiopia, as of 9 February 2022



- Mass social mobilisation and sensitization activities are ongoing with involvement of religious and clan leaders to support measles outbreak response and prevention activities.

### SITUATION INTERPRETATION

The ongoing measles outbreak occurs in a very complicated country's health and humanitarian context. The health context is dominated by the response to COVID-19 pandemic, which has already almost exhausted the health system, the co-existence of other ongoing outbreaks in the country like cholera, circulating vaccine-derived polio type 2 (cVDPV2), suspected meningitis etc. The humanitarian context is aggravated by the ongoing armed conflict in Tigray region, which is generating millions of internally displaced persons, the presence of refugee camps living in difficult conditions in the affected areas and the newly declared drought in the Horn of Africa, which is impacting on the nutritional and food situations for the population. All ingredients for the worsening of this measles outbreak are in place and this calls for urgent implementation of strong control measures.

### PROPOSED ACTIONS

- The support from humanitarian partners present in the country is highly required to address the identified needs and gaps. All the required resources should be immediately mobilized to control this measles outbreak.
- Measles routine vaccination coverage should be improved in all affected and at-risk areas to reduce the risk of future outbreaks.

## EVENT DESCRIPTION

During the week of 7 to 13 February 2022, the number of new COVID-19 cases in the WHO African Region decreased by 30.4% as compared to the number reported during the previous week. The number of new deaths increased by 15.0%. Across the region, over 34 045 new COVID-19 infections and just under 1 463 new deaths were reported from 40 and 29 countries, respectively.

Majority of countries (74.0%) reported a decrease of 20% or more in the number of new cases (Table 1), whereas only Sierra Leone saw a 20% or more increase in weekly cases compared to the past week. Benin, Cameroon, Chad, Gambia, Ghana, and the United Republic of Tanzania did not report any new cases in the past seven days.

The top five countries recorded the highest number of new cases (27 819, 82.0%) with South Africa recording the highest number (17 849 new cases, 11.0% decrease, 30.0 new cases per 100 000 population); followed by Algeria (3 776 new cases, 48.0% decrease, 8.4 new cases per 100 000); Botswana (2 488 new cases, 40.0% decrease, 103.0 new cases per 100 000), Zambia (2 296 new cases, 1.0% increase, 12.0 new cases per 100 000); and Madagascar (1 410 new cases, 33.3% decrease, 5.0 new cases per 100 000).

For the period (7 to 13 February 2022), a lessening in weekly COVID-19 deaths was observed in the African region as 1 463 deaths were reported. Of all countries reporting deaths, a total of 18 (62.0%) reported a decline in reported deaths, while 10 (35.0%) had an increase. The highest numbers of new deaths were reported from South Africa (1 158 new deaths; 42.4% increase; 1.9 new deaths per 100 000 population), Algeria (83 new deaths; 4.0% increase; 0.2 new deaths per 100 000), Ethiopia (61 new deaths; 91.0% increase; 0.1 new deaths per 100 000), Madagascar (28 new deaths; 15.2% decrease; 0.1 new deaths per 100 000) and Malawi (25 new deaths; 92.3% increase; 0.1 new deaths per 100 000).

Eight countries meet the criteria for resurgence: Algeria, Botswana, Cameroon, Chad, Guinea-Bissau, Madagascar, Mauritius, and Seychelles.

As of 13 February 2022, over 7 936 101 confirmed COVID-19 cases and 166 295 deaths have been reported in the WHO African Region, resulting in a CFR of 2.1%. More than 7.3 million recoveries have been recorded, giving a recovery rate of 93.0%.

Overall South Africa has recorded the highest number of COVID-19 cases in the region, with 3 641 811 cases (46.0%), followed by Ethiopia 467 498 (5.9%), Kenya 322 473 (4.1%), Zambia 309 502 (3.9%), and Algeria 261 752 (3.3%), accounting for (63.0%) 5 003 036, of all cases.

In the same way, most reported deaths occurred in South Africa, which accounts for 58.2% (96 993) of all deaths recorded in the region. Ethiopia has the second-highest number of deaths (7 424 deaths, 4.5%) followed by Algeria (6 729, 4.0%), Kenya (5 631, 3.4%) and Zimbabwe (5 374, 3.2%), all accounting for 74.0% (122 151) of all deaths reported in the region.

During this reporting period, a total of 82 health worker infections were reported from Cameroon (62), Kenya (12), Namibia (6) and Liberia (2) in the past week. Eswatini reported an additional 11 new health worker infections. An aggregate total of 153 182 COVID-19 infections (2.0% of all cases) among health workers in the region, with South Africa accounting for 47.0% (71 113) of the total infections. Kenya (12 713, 7.2%), Algeria (11 936, 8.0%), Zimbabwe (6 015, 4.0%) and Namibia (5 293, 3.5%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. The United Republic of Tanzania (10.0%), Liberia (6.0%), Algeria (5.0%), Chad (4.1%), and Niger (4.1%) have the highest proportion of health worker infections by country. Only Eritrea has not reported any healthcare worker infections.

Cumulative COVID-19 infections on the African continent stand at 11 335 270. In addition, more than 244 734 deaths (CFR 2.4%) and more than 10.2 million people have recovered. The African continent accounts for 2.9% of global cases and 4.2% of global deaths.

Around 152 million people are fully vaccinated, or 11% of the African population. In comparison, 70% of people in the United Kingdom and European Union have been fully vaccinated, and 66% in the United States. Around 85% of Africans have not received a single vaccine dose. The vaccination rate needs to increase six-fold if the continent is to meet the 70% target set for mid-2022.

The COVID-19 vaccine rollout is the largest vaccine campaign in the continent's history and requires massive coordination and logistical undertaking. Many countries continue to struggle with inadequate financial planning, and an absence of detailed micro-plans to guide rollout at district level. Other issues making adequate rollout difficult are vaccine hesitancy, low risk-perception, and lack of understanding about the role of vaccination in preventing COVID-19.

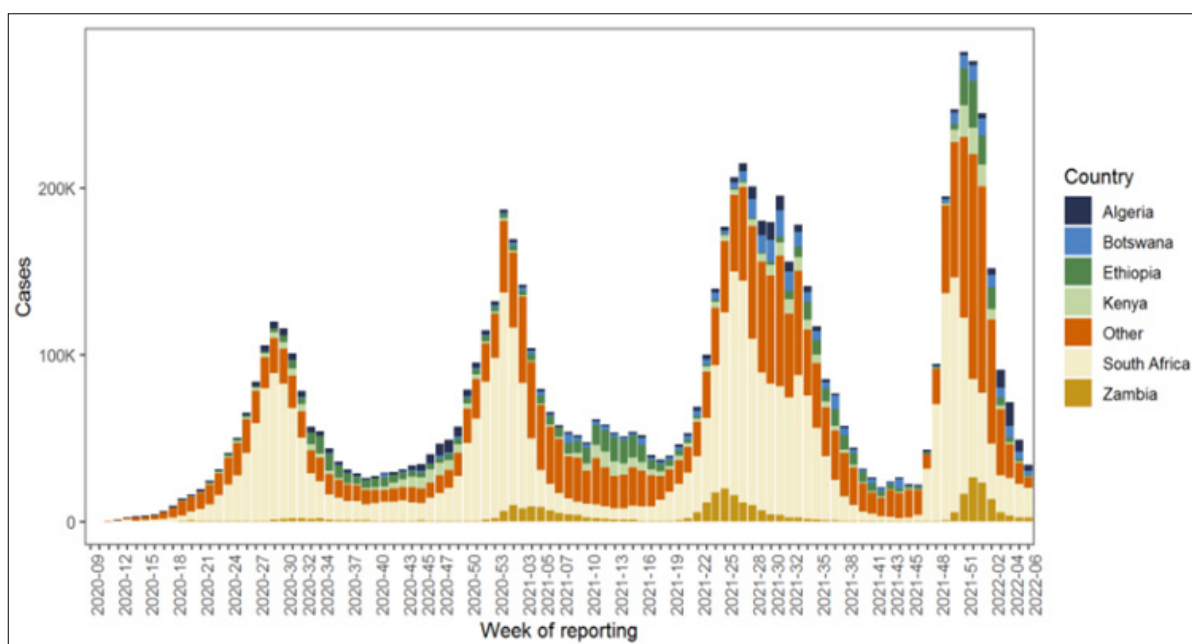
## SITUATION INTERPRETATION

New weekly cases on the African continent dropped for another week. Only Sierra Leone reported a significant increase in new cases when compared to the preceding week. Although deaths increased overall, some countries reported decreases. Countries with recent increases in death trends were Algeria, Democratic Republic of Congo, Madagascar, and South Africa. However, the increase in deaths in South Africa had been attributed to batch reporting of backlog.



Africa needs to ramp up COVID-19 vaccination six-fold

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 13 February 2022 ( $n = 7\,936\,101$ )



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New cases reported in the past seven days and cumulative totals by country: Data as of 13 February 2022 (7 936 101)

Country	Total Cases	New Cases	Percent change in new cases	Total Deaths	New Deaths	Percent change in new deaths	Health Worker infections
South Africa	3 641 811	17 849	-11.2	96 993	1 158	42.4	71 113
Ethiopia	467 498	959	-40.4	7 424	61	90.6	3 354
Kenya	322 473	377	-50.5	5 631	10	-75.6	12 713
Zambia	309 502	2 296	0.5	3 937	7	-53.3	1 121
Algeria	261 752	3 776	-47.6	6 729	83	3.8	11 936
Botswana	259 655	2 488	-39.8	2 597	4	-66.7	2 082
Nigeria	254 016	289	-58.9	3 141	2	-50.0	3 175
Zimbabwe	231 381	979	3.9	5 374	12	-52.0	6 015
Mozambique	224 703	364	-31.1	2 189	6	-53.8	4 779
Uganda	162 822	380	-25.9	3 579	11	-63.3	3 025
Ghana	157 751	0	-100.0	1 419	0	-100	4 763
Namibia	156 604	160	-70.6	3 991	11	-15.4	5 293
Rwanda	129 295	170	-40.1	1 450	4	-50.0	682
Cameroon	118 675	0	-100.0	1 915	0	-100.0	4 400
Angola	98 514	150	-47.9	1 898	2	100.0	939
Democratic Republic of the Congo	85 793	50	-76.6	1 316	0	-100.0	728
Senegal	85 412	206	-23.7	1 957	1	-91.7	419
Malawi	85 025	212	-46.1	2 596	25	92.3	3 026
Côte d'Ivoire	81 118	198	-12.0	789	3	200.0	1 913
Mauritius	70 862	0	0.0	786	0	0.0	30
Eswatini	68 795	242	14.7	1 383	5	66.7	1 193
Madagascar	62 844	1 410	-33.3	1 335	28	-15.2	70
Mauritania	58 569	111	-57.3	972	5	-64.3	24
Cabo Verde	55 842	40	-68.0	400	2	-33.3	140
Gabon	47 399	37	-94.2	302	0	-100	345
Seychelles	38 659	565	-41.9	150	3	-40.0	945
Burundi	37 902	146	-54.9	15	0	0.0	38
Togo	36 660	62	-42.1	271	2	100.0	891
Guinea	36 329	59	-77.0	436	4	-75	682
United Republic of Tanzania	33 436	0	-100.0	792	0	-100.0	3 351
Lesotho	32 372	8	-93.0	696	1	-50.0	473
Mali	30 266	109	-1.8	716	1	-75.0	87
Benin	26 552	0	-100.0	163	0	0.0	139
Congo	23 874	20	-67.7	375	0	0.0	302
Burkina Faso	20 716	31	-13.9	375	0	-100.0	288
South Sudan	16 897	46	-19.3	137	0	0.0	294
Equatorial Guinea	15 853	8	-81.4	182	0	0.0	607
Central African Republic	14 187	33	-25.0	113	2	100.0	51
Gambia	11 911	0	-100.0	365	0	-100	142
Eritrea	9 668	31	-72.3	103	3	50.0	0
Niger	8 711	25	-32.4	303	1	-75.0	355
Comoros	8 005	41	-68.9	160	0	0.0	155
Guinea-Bissau	7 849	77	-58.6	164	6	200	23
Sierra Leone	7 648	20	233.3	125	0	0.0	269
Liberia	7 359	13	-82.4	290	0	0.0	418
Chad	7 216	0	-100.0	190	0	0.0	292
Sao Tome and Principe	5 920	8	-70.4	71	0	-100.0	102
<b>Cumulative total (N=47)</b>	<b>7 936 101</b>	<b>34 045</b>	<b>-30.4</b>	<b>166 295</b>	<b>1 463</b>	<b>14.7</b>	<b>153 182</b>

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

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## EVENT DESCRIPTION

The humanitarian situation is rapidly deteriorating in the Sahel region of Africa including the countries of Burkina Faso, northern Cameroon (Far-North region), Chad, Mali, Niger, and north-east Nigeria (Adamawa, Borno and Yobe States). There are two main crisis areas in the Sahel, the Liptako Gourma area along the borders between Burkina Faso, Mali and Niger; and the Lake Chad Basin area of Cameroon (Far North), Chad, Niger and Nigeria (North-East).

The combined effect of violent conflict, poverty, climate change, food insecurity, COVID-19 pandemic, and military coups have caused a need for humanitarian assistance. Furthermore, armed conflicts are worsening and spreading to new areas like Benin and Cote d'Ivoire. Security incidents, attacks and kidnapping have become a daily reality for millions of civilians who are caught between non-state armed groups, intra- and inter-community violence, and military operations. From 2015 to 2020, the number of violent attacks increased eight-fold in the Central Sahel and tripled in the Lake Chad Basin. In 2020, 302 security incidents occurred monthly in the region.

Insecurity and violence are threatening lives and livelihoods, increasing human rights violations, and jeopardizing social cohesion. Additionally, humanitarian access is constrained leaving communities without essential assistance and exposing aid workers to increased risks.

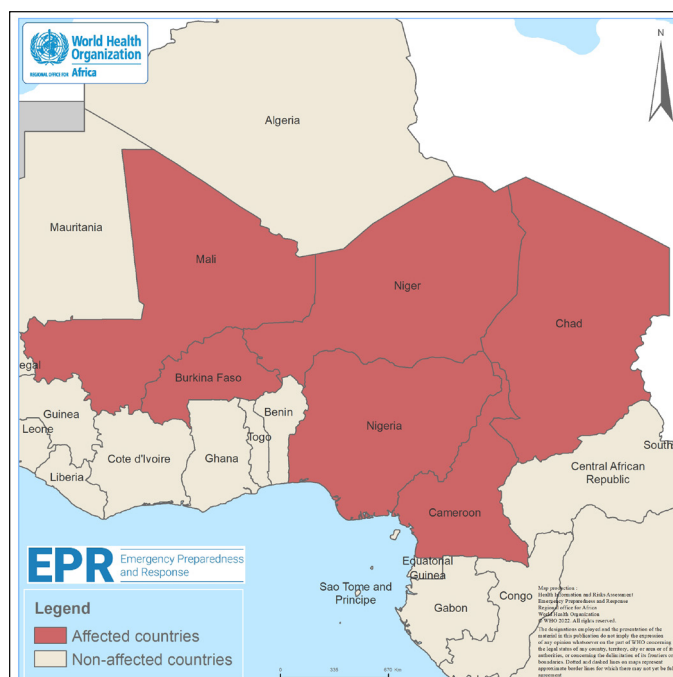
These multiple shocks evolve in a context of deep poverty, climate change and natural hazards (floods, drought, etc.), high food insecurity, and malnutrition. As a result, populations are experiencing high levels of vulnerability worsened by displacements. As the crisis deepens, more and more people are forced to flee their homes in search of safety and security leaving behind their livelihoods and increasing their vulnerability.

Between 2019 and 2021, the number of displaced people has increased by 61% in the region where it was estimated that almost 5.4 million people were uprooted across the region in 2021 alone. Large-scale population displacement is heavily constricting weak services and scarce natural resources. Many of the displaced populations have also been forced to flee several times, which has further aggravated their vulnerabilities.

The short- and long-term humanitarian needs have consequentially increased over time. From 2019 to 2021 for instance, the number of people in need increased by 52%. In 2021, out of a population of 121 million in the region, 29 million (24.0%) were found in need and 21 million (17.4%) were targeted for humanitarian assistance including 14 million (11.6%) with food insecurity at crisis and emergency levels, 4.4 million (3.6%) internally displaced persons (IDPs), 0.89 million (0.7%) refugees and 1.6 million (1.3%) severely malnourished children. This required a funding of \$3.7 billion, but only 9% of these resources were available as of April 2021. Between 2016 and 2020, a 43% average funding gap was witnessed. Projections for 2022 announce 30.6 million people in need, 21.6 million people targeted among whom 7 million IDPs and 13.9 million people in need of health assistance. The requirements are around \$3.6 billion including \$186 million for the health sector.

Sahel countries share a disproportional load of epidemics such as cholera, yellow fever, measles, meningitis, cVDPV2 and COVID-19. In 2021, notable outbreaks in the sub-region have been cholera

A snapshot of humanitarian crisis in the Sahel Region (Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria), as of 13 February 2022



(Nigeria, Niger, Cameroon, Mali, Burkina Faso), yellow fever (Chad, Cameroon, Nigeria, Niger), meningitis (Niger), Lassa fever (Nigeria), as well as cVDPV2 and COVID-19 (all six countries).

Populations of the Sahel are faced with very limited access to basic social services, livelihoods, and assistance. Across the Central Sahel, 137 health centres remained closed due to insecurity, lack of personnel, lack of equipment, lack of financial means, and physical inaccessibility, while most facilities still opened are not fully functional depriving millions of people to access of medical care. Unfortunately, attacks on health care personnel are also common. In 2021, 50 attacks and 122 deaths were reported on health care personnel in the region. Women and girls of reproductive age, who constitute more than half of the affected population have also been primarily impacted. Moreover, measures taken by governments to slow the spread of the COVID-19 pandemic have significantly impacted people mobility as well as trade flows with the restriction of movements within and between countries.

## PUBLIC HEALTH ACTIONS

- In Burkina Faso, as of September 2021, 28 humanitarian organizations (21 international NGOs, five UN agencies and two red-cross movements) and one Governmental structure were acting on the ground.
- In Far-northern Cameroon, 17 humanitarian health actors were implementing 43 projects on the field targeting 135 000 people, as of April 2020.
- In Chad, as of August 2021, 53 organizations were implementing humanitarian health interventions on the field: 19 international NGOs, 13 national NGOs, nine UN agencies and six governmental structures.



- In Mali, 43 humanitarian health actors were present as of 31 January 2022, running 62 projects.
- In Niger, as of April 2021, 32 organizations were implementing humanitarian health interventions: 15 international NGOs, three national NGOs, 6 UN agencies and two Governmental structures.
- In North-East Nigeria, 148 humanitarian organizations were present on the ground, as of June 2021.

## SITUATION INTERPRETATION

The deteriorating security in the countries of the Sahel have been ongoing for more than a decade. There has been waning interest in the humanitarian situation causing decreased support received. The lack of access to basic social services further increases violence and extremism, which is causing further limitations. Health systems are too weak to provide needed health services, with many health facilities inaccessible due to insecurity.

Additionally, the population faces related issues such as food insecurity further causing health problems like malnutrition.

## PROPOSED ACTIONS

- Increase humanitarian action before the crises further escalates and possibly spills over to more countries in the region to avoid a huge increase in people in need, lives and livelihoods lost as well as financial costs.
- Strengthen public health coordination, preparedness, and response by public authorities in collaboration with health partners.
- Strengthen the timely identification of disease outbreaks in order to prevent widescale disasters in the region.

A group of displaced Burkinabés sit outside the home of a district leader in Kaya, Burkina Faso. © UNHCR/Sylvain Cherkaoui





# 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
<b>New Events</b>									
Gabon	Yellow fever	Ungraded	12-Feb-2022	17-Sep-21	7-Sep-21	1	1	1	100.0%
On 24 January 2022, a case of yellow fever tested positive by seroneutralization at the Institut Pasteur in Dakar. The patient was a 42-year-old male from the Ogooué-Maritime province in Gabon. He was reportedly not vaccinated against yellow fever. He presented with jaundice on 17 September 2022 and died on 23 September 2021 in Port Gentil.									
Mauritania	CCHF	Ungraded	8-Feb-2022	8-Feb-2022	12-Feb-2022	1	1	0	0.0%
On 4 February 2022, a case of Crimean-Congo haemorrhagic fever (CCHF) was confirmed by polymerase chain reaction at the Institut National de Recherche en Santé Publique in Nouakchott, Mauritania. The patient is a 52-year-old male farmer living in the department (moughataa) of Koubeni in the region (wilaya) of Hodh Elgharbi. He presented with epistaxis and hematemesis for which he consulted five health facilities in Koubeni and Nouakchott between 27 January and 4 February 2022. A thorough investigation is underway.									
Sahel region	Humanitarian crisis	Grade 2	11-Feb-2022	-	11-Feb-2022	-	-	-	
The humanitarian situation has further deteriorated in six countries of the Sahel: Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria. Problems such as violence, poverty, climate change, food insecurity, disease outbreaks, and military coups have persisted in the area for over a decade, however, incidents have been on the rise in recent months. The humanitarian situation causes additional challenges for the health of the population who are faced with weakened health systems among a context of food insecurity due to climate change.									
<b>Ongoing Events</b>									
Algeria	COVID-19	Grade 3	25-Feb-2020	25-Feb-2020	13-Feb-2022	261 752	261 752	6 729	2.6%
From 25 February 2020 to 13 February 2022, a total of 261 752 confirmed cases of COVID-19 with 6 729 deaths (CFR 2.6%) have been reported from Algeria. A total of 174 708 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	12-Feb-2022	98 514	98 514	1 898	1.9%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 12 February 2022, a total of 98 514 confirmed COVID-19 cases have been reported in the country with 1 898 deaths and 96 274 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-2019	1-Jan-19	6-Feb-2022	133	133	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 138. These cases are from several outbreaks which occurred in 2019.									
Benin	Cholera	Grade 1	28-Mar-21	28-Mar-21	30-Jan-22	1 616	44	20	1.2%
Since week 12 (ending 28 March 2021) of 2021, cases of cholera have been reported in Benin. As of 30 January 2022, a total of 1 616 cases with 20 deaths (CFR 1.2%) are reported.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	6-Feb-2022	26 552	26 552	163	0.6%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 6 February 2022, a total of 26 552 cases have been reported in the country with 163 deaths and 26 311 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-2019	8-Aug-2019	6-Feb-2022	14	14	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Three cases were reported in 2021 and 2020, and 8 in 2019. These cases are all linked to the Jigawa outbreak in Nigeria.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	7-Feb-2022	259 655	259 655	2 597	1.0%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 7 February 2022, a total of 259 655 confirmed COVID-19 cases were reported in the country including 2 597 deaths and 253 846 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	17-Jan-22	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in mass displacement of over 1.57 million internally displaced persons as of 31 December 2021 in all 13 regions. According to OCHA, 3.5 million Burkinabe will need humanitarian aid in 2022, including 2.6 million severely food insecure during the 2022 lean season, with over 436,000 in the pre-famine phase. Non-state armed groups attacks are worsening the security situation, causing displacements and producing needs for the affected population, including food, water, shelter, and psycho-social support.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	11-Feb-2022	20 716	20 716	375	1.8%
Between 9 March 2020 and 11 February 2022, a total of 20 716 confirmed cases of COVID-19 with 375 deaths and 20 289 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	6-Feb-2022	67	67	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were two cases reported in 2021, and 65 in 2020. The country is affected by different outbreaks, one linked to the Jigawa outbreak in Nigeria and one to the Savanes outbreak in Togo.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	11-Feb-2022	37 902	37 902	15	0.0%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 11 February 2022, the total number of confirmed COVID-19 cases is 37 902, including 15 deaths and 37 732 recovered.									

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Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-2013	27-Jun-2017	24-Jan-22	-	-	-	-
According to UNHCR and OCHA reports, an estimated 1.2 million people need assistance, 357 631 people are internally displaced as of 31 December 2021. A resurgence of organized crime by criminals who often loot and kidnap populations against ransom demands. Inter-community clashes in Logone Birni district have caused 70 000 to relocate since 5 Dec 2021. Clashes are also impacting people in Mayo-Sava, Diamaré, and Mayo-Danay where some displaced people are staying in makeshift shelters.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-2018	31-Dec-2021	-	-	-	-
According to reports from UNHCR, an estimated 575 507 IDPs have been registered as of 31 December 2021. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. Schools resumed session, but teachers and students faced attacks. There has been an increase in the use of improvised explosive devices (IEDs), carjacking, and clashes between security forces and NSAGs, leading to civilian population displacement. There were also 466 263 refugees as of 31 December 2021, of which more than 342 877 (73.5%) arrived from Central African Republic.									
Cameroon	Cholera	Grade 2	1-Jan-21	5-Aug-2021	30-Jan-22	1 102	9	28	2.5%
Since the beginning of 2021 up to 30 January 2022, a total of 1102 suspected cases of Cholera including 9 confirmed and 28 deaths (CFR 3.4%) have been reported in Cameroon. The intensification of disease surveillance as well as the management of cases are ongoing.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	2-Feb-2022	118 675	118 675	1 915	1.6%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 2 February 2022, a total of 118 675 cases have been reported, including 1 915 deaths and 115 662 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-2019	1-Jan-21	5-Dec-2021	1 095	663	8	0.7%
From week 1 to 48 (ending 5 December), 2021, Cameroon has reported 1 095 measles suspected cases with 8 deaths (CFR 0.7%). Of the 1 000 investigated cases, 663 were positive including 268 cases IgM+, 98 clinically compatible and 297 epidemiologically linked; 66% of children with measles are under 5 years of age and only 38% of suspected measles cases and 32% of confirmed measles cases are vaccinated with at least 1 dose.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	9-Feb-2022	10	10	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are three cases reported in 2021 and seven cases in 2020.									
Cameroon	Yellow fever	Grade 2	7-Feb-2021	4-Jan-21	31-Jan-22	40	29	8	20.0%
From 1 January 2021 to 31 January 2022, a total of 38 presumptive cases of yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur Cameroun, of which seven deaths were recorded. These cases originated from nine different regions with a total of 25 health districts (HDs) affected: Adamaoua region, Central region, East region, Far North region, Littoral region, North region, North-West region, South region, and West region. Some of the PRNT-positive cases had a history of vaccination against yellow fever.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	12-Feb-2022	55 842	55 842	400	0.7%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 12 February 2022, a total of 55 842 confirmed COVID-19 cases including 400 deaths and 55 349 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-2013	11-Dec-2013	17-Jan-22	-	-	-	-
According to OCHA figures, 3.1 million people (63% of the total population) are in need of assistance and protection in 2022. There are 670K people that are internally displaced as of 30 Nov 2021 and 744K persons are refugees in neighbouring countries. Civilians are still the main victims of violence. On 11 January 2022, an IDP camp was partially destroyed leaving 3 000 people in need of shelter, food, and water. Food insecurity is also estimated to be 2.4 million people in 2022.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	8-Feb-2022	14 187	14 187	113	0.8%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in the Central African Republic on 14 March 2020. As of 8 February 2022, a total of 14 187 confirmed cases, 113 deaths and 12 018 recovered were reported.									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	15-Dec-2021	2 328	283	9	0.4%
From 1 January to 15 December 2021 : 2 328 suspected cases have been reported, 283 confirmed cases (75 IgM+ cases, 196 by epidemiological link and 12 compatible cases) and 9 deaths (CFR:0.4%). Ten health districts out of 35 have reached the epidemic threshold (Bossebelé, Berbérati, Sangha-Mbaéré; Nanga-Boguila, Batangafo, Mbaiki, Nana Gebrizi and Vakaga); 49% of children are less than 5 years of age; 42% were not vaccinated. From the beginning of outbreak in 2019 to 19 August 2021, a total of 35 468 suspected cases have been notified and 197 deaths (CFR:0.6%) within affected districts.									
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-2021	5-Jan-22	2	2	1	50.0%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test at the Centre Pasteur Cameroun (CPC). She is reportedly not vaccinated against yellow fever. The onset of symptoms was 1 April 2021 with febrile jaundice. In early December, a yellow fever positive PCR result was reported in a five-year-old male child from the locality of Moyen Sido.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	14-Feb-2022	7 214	7 214	190	2.6%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 7 February 2022, a total of 7 214 confirmed COVID-19 cases were reported in the country including 190 deaths.									
Chad	Hepatitis E	Ungraded	4-Nov-21	1-Oct-21	30-Nov-21	385	12	2	0.5%
Hepatitis E outbreak had been declared by Chadian health authorities mid-November 2021 in Sategui health area, Lai health district in the Tandjile region. As of 30 Nov 2021, there have been 385 suspected cases and 2 deaths (CFR 0.5%) reported. Among those affected, the majority have been men with 219 cases (57%) and the most affected age group has been less than 10 years of age with 90 cases (23.4%).									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	30-Nov-21	161	15	14	8.7%
Since 1 January 2018, a total of 161 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai) and 14 deaths (CFR 8.7%). For the year 2020 the country registered 74 cases including 4 deaths. Since the beginning of 2021 up to 30 November 2021, 54 cases have been reported including 8 deaths (CFR 14.8%).									
Chad	Measles	Ungraded	24-May-2018	1-Jan-21	5-Dec-2021	2 518	704	15	0.6%
From 1 January 2021 up to week 48 (ending 5 December 2021), a total of 2 518 suspected cases, 704 confirmed and 15 deaths (CFR 0.6%) have been reported from 26 health districts. In 2020, Chad reported 8 785 cases, with 363 confirmed and 41 deaths.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	9-Feb-2022	114	114	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. One cVDPV2 positive environmental sample was reported in N'djamena. This positive environmental sample is linked to the Zamfara outbreak in Nigeria. There were no cases reported in 2021. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 8 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Chad	Yellow fever	Grade 2	13-Nov-21	1-Nov-21	9-Jan-22	56	10	0	0.0%
On 13 November 2021, the Institut Pasteur in Dakar shared the results of 17 samples of yellow fever cases from the Mandoul district, Chad, of which two tested PCR positive, six were IgM positive with cross-reactions with other flaviviruses, and six other IgM positive without cross-reactions. As of 9 January 2022, a total of 56 yellow fever IgM positive cases were reported from seven provinces (Mandoul, Guéra, Mayo Kebbi Ouest, Moyen Chari, and le Lac), including two confirmed cases by PCR and eight by plaque reduction neutralization test (PRNT).									
Comoros	COVID-19	Grade 3	30-Apr-2020	30-Apr-2020	13-Feb-2022	8 005	8 005	160	2.0%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 13 February 2022, a total of 8 005 confirmed COVID-19 cases, including 160 deaths and 7 689 recoveries were reported in the country.									
Congo	Floods	Ungraded	10-Jan-22	29-Nov-21	7-Jan-22	108 173	-	0	0.0%
Following the heavy rains since September 2021, the northern part of the country is affected with floods. Authorities declared a state of humanitarian disaster on 29 November 2021. Four departments are affected: Likouala; Cuvette; Sangha and Plateaux. As of 7 January 2022, 108 173 people affected (22 770 households), no information on deaths. Authorities are seeking supports from partners in term of food, non-food items, essentials medicines etc									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	10-Feb-2022	23 812	23 812	375	1.6%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 10 February 2022, a total of 23 812 cases including 375 deaths and 22 245 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	9-Feb-2022	4	4	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Two cases were reported in 2020 as well as in 2021.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	12-Feb-2022	81 118	81 118	789	1.0%
Since 11 March 2020, a total of 81 118 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 789 deaths, and a total of 78 893 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	9-Feb-2022	64	64	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are no reported cases in 2021. There are 64 cases reported in 2020.									
Côte d'Ivoire	Yellow fever	Grade 2	14-Sep-21	13-Aug-2021	9-Jan-22	18	7	0	0.0%
On 13 August 2021, five yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Based on differential tests returned on 6 September 2021, the results of three cases are consistent with a recent yellow fever infection. As of 9 January 2022, a total of 18 cases tested positive by PRNT of which seven without cross-reaction with other flaviviruses.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-2016	17-Apr-2017	1-Feb-2022	-	-	-	-
As of 31 Jan 2022, there are an estimated 5.5 million people internally displaced, 517 140 new refugees and asylum seekers, 1.2 million returnees, and 27 million people need emergency food assistance in the entire country. Additionally, 8.9 million need health assistance. In the Bambu health zone, more than 24K people left in three phases from 9-30 Jan 2022 in several localities. On 29 Jan 2022, Zengo health area experienced an incursion by militiamen looting homes and health centres (looting of equipment, furniture, supplies, mattresses, medicines and others). Significant needs such as food and health care remain to be satisfied.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-22	30-Jan-22	2 168	-	27	1.2%
In 2022, from epidemiological week 1 to 4 (ending 31 January 2022), 2 168 suspected cholera cases including 27 deaths (CFR:1.2%) were recorded in 28 health zones across seven provinces of the Democratic Republic of the Congo, an increase of more than 100% compared to the same period in 2021 (604 cases).									



Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	8-Feb-2022	85 794	85 792	1 316	1.5%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 85 792 confirmed cases and two probable case, including 1 316 deaths have been reported. A total of 64 656 people have recovered. The number of recoveries cases has been adjusted									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	26-Jan-22	993	51	18	1.8%
Since early January 2022, 993 measles suspected cases and 18 deaths have been reported; 51 of 83 suspected cases investigated became positive for measles IgM. In 2021, up to epi week 48 (ending 15 December) 55 940 suspected measles cases and 825 deaths (CFR 1.5%) were reported. The outbreak has been confirmed in 93 health districts across 23 affected provinces including the capital of Kinshasa. A total of 3 079 suspected cases was investigated, 1 271 cases are IgM + for measles among which 64% are children under five and 29% known to be vaccinated, half of them have an unknown vaccination status, 72% of measles confirmed cases are either zero dose or unknown vaccination status. A total of 483 cases are IgM+ of rubella among which 94.2% are more than 14 years old.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	30-Jan-22	9 593	39	326	3.4%
Between epidemiological weeks 1-4 of 2022, 286 cases have been reported with 21 deaths (CFR 7.3%). Compared to weeks 1-4 in 2021, 272 cases were reported with 6 deaths (CFR 2.2%). During 2021, a total of 3 091 suspected cases including 83 deaths (CFR 2.7%) were reported. During 2020, a total of 6 216 suspected cases including 222 deaths (CFR 3.6%) were reported.									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-20	30-Jan-22	600	-	45	7.5%
Between epidemiological weeks 1-4 of 2022, 1 case of plague has been reported with no deaths. Compared to weeks 1-4 in 2021, 61 cases were reported with 1 death. During 2021, a total of 138 suspected cases including 14 deaths (CFR 10.1%) were reported. During 2020, a total of 461 suspected cases including 31 deaths (CFR 6.7%) were reported.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-2021	1-Jan-21	9-Feb-2022	24	25	0	0.0%
One cVDPV2 case was reported in Maniema bringing the total number of 2021 cases to 25.									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-2021	1-Jan-21	30-Jan-22	142 383	-	45	0.0%
In 2022, from epidemiological week 1 to 4 (ending 31 January 2022), 142 383 suspected cases of typhoid fever including 45 deaths were recorded in the Democratic Republic of the Congo. In 2021, from Epi week 1 to 49, 1 380 955 suspected cases of typhoid fever have been reported including 502 deaths (CFR 0.03%).									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-2021	21-Apr-2021	21-Nov-21	2	2	0	0.0%
On 18 July 2021, two yellow fever cases tested positive by Plaque Reduction Neutralization Test (PRNT) at Centre Pasteur in Cameroon (CPC). The first case is a 34-year-old male from the Abuzi health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. As of 21 November 2021, confirmatory results are pending for six additional presumptive positive cases.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	9-Feb-2022	15 853	15 853	182	1.1%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 6 February 2022, a total of 15 853 cases have been reported in the country with 182 deaths and 15 546 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	13-Feb-2022	9 668	9 668	103	1.1%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 13 February 2022, a total of 9 668 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 471 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Feb-2022	68 795	68 795	1 383	2.0%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 13 February 2022, a total of 68 795 cases have been reported in the country including 67 223 recoveries. A total of 1 383 associated deaths have been reported.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	3-Feb-2022	-	-	-	-
The security situation in the country remains volatile, affecting civilians and limiting humanitarian aid deliverance. Adequate communication, electricity, and banking services remain intermittent. The conflict in the Tigray area has been spilling over into the Afar and Amhara regions for some time but heavy clashes were reported along the border in both regions recently. In the Afar region, fighting has caused 200K people to be displaced. Due to the ongoing conflict many health facilities in the region are unfunctional, but nine health partners have been providing healthcare services through mobile health and nutrition teams. On 24 Jan 2022, 3.5 metric tonnes of medication were delivered into Mekelle which will go to primary health care and nutrition programs and is said to benefit an estimated 35K people. Humanitarian access to the region remains a challenge where no access has been given since 15 Dec 2021 causing many partners to scale down operations due to the lack of supplies and resources.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Cholera	Grade 2	31-Aug-2021	31-Aug-2021	31-Jan-22	674	2	7	1.0%
The outbreak of cholera is ongoing in Oromia and Somali regions. The first case was reported on 31 August 2021. As of 31 January 2022, a total of 674 cases with 7 associated death (CFR 1.0%), are reported so far. Five sample were tested and two were positive for cholera. Response activities are ongoing including outbreak investigation, case management, cholera supplies delivery.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Feb-2022	467 498	467 498	7 424	1.6%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 467 498 cases of COVID-19 as of 13 February 2022, with 7 424 deaths and 408 950 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-22	9-Feb-2021	1 590		13	0.8%
An active measles outbreak is ongoing in Ethiopia since the beginning of January 2022. Three regions (Southern Nations, Nationalities, and Peoples' Region (SNNPR), Oromia and Somali) are most affected so far with a total of 1590 cases and 13 deaths (case fatality ratio (CFR)= 0.8%) reported from these 3 regions. As of 9 February 2022, the SNNPR region has reported more cases with 1005 cases (63.2%) followed by Somali region with 495 cases (31.1%) then Oromia, 90 cases (5.7%).									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-2019	20-May-2019	6-Feb-2022	75	75	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Ten cases were reported in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	8-Feb-2022	47 399	47 399	302	0.6%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 8 February 2022, a total of 47 399 cases including 302 deaths and 43 508 recoveries have been reported in the country.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	6-Feb-2022	11 911	11 911	365	3.1%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 6 February 2022, a total of 11 911 confirmed COVID-19 cases including 365 deaths, and 11 521 recoveries have been reported in the country.									
Ghana	Explosion accident	Ungraded	20-Jan-22	20-Jan-22	22-Jan-22	984		13	1.3%
An explosion accident involving a vehicle transporting mining explosives occurred on 20 January 2022. The incident occurred in Apatikrom village near the mining town of Bogoso in the Prestea-Huni Valley district in the Western Region. The transport vehicle was involved in a road traffic accident with a motorcycle and subsequently caught fire resulting in the explosion which essentially destroyed the entire Apatikrom and resulted in several casualties. As of 22 January 2021, based on data from the National Disaster Management Organization (NADMO) and the Western Regional Health Directorate showed over 900 persons affected with 13 persons confirmed dead. A total of 75 persons were on admission with various degrees of injuries (mainly burns) including 6 critically injured									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	3-Feb-2022	157 751	157 751	1 419	0.9%
As of 3 February 2022, a total of 157 751 confirmed COVID-19 cases have been reported in Ghana. There have been 1 419 deaths and 155 322 recoveries reported.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-2019	8-Jul-2019	6-Feb-2022	31	31	0	0.0%
No cases have been reported in 2022 nor 2021, 12 cases were reported in 2020, and 19 were reported in 2019.									
Ghana	Yellow fever	Grade 2	3-Nov-21	15-Oct-21	18-Jan-22	90	53	11	12.2%
From 15 October 2021, suspected cases of yellow fever were reported mostly among nomadic settlers in the Savannah Region, northwest Ghana (bordering Côte d'Ivoire). As of 20 December 2021, a total of 386 yellow fever suspected cases including 90 probable (IgM positive) and 21 confirmed cases were reported from eight regions in Ghana.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	10-Feb-2022	36 329	36 329	436	1.2%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 10 February 2022, a total of 36 329 cases including 32 684 recovered cases and 436 deaths have been reported in the country.									
Guinea	Measles	Ungraded	09-May-2018	1-Jan-21	1-Dec-2021	622	321	5	0.8%
In 2021, as of Epi week 49, 622 suspected cases have been reported, 601 samples taken, 601 samples tested of which 321 tested positive; 5 deaths have been reported. Out of the 321 positive persons, 64 (12%) were vaccinated. In 2020 at the same epi week, 6070 suspected cases, 870 cases sampled, 767 samples tested of which 524 positive, 269 negative and 48 undetermined; 15 deaths have been reported. Since 2020, a total of 6 623 suspected cases, 1 120 tests analysed, 1 141 confirmed cases, 19 deaths have been reported.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-2020	22-Jul-2020	9-Feb-2022	50	50	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases reported in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	12-Feb-2022	7 849	7 849	164	2.1%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 12 February 2022, the country has reported 7 849 confirmed cases of COVID-19 with 6 893 recoveries and 164 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	6-Feb-2022	4	4	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Three cases were reported in 2021 which were linked to the Jigawa outbreak in Nigeria.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Feb-2022	322 473	322 473	5 631	1.7%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 13 February 2022, 322 473 confirmed COVID-19 cases including 5 631 deaths and 302 744 recoveries have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	6-Feb-2022	1 537	1 356	10	0.7%
Since January 2020, a total of 1 537 visceral leishmaniasis suspected and confirmed cases with 10 deaths (CFR 0.7%), have been reported in eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir, and Tharaka Nithi. The outbreak is active in four counties, Kitui, West Pokot, Wajir and Tharaka Nithi. Fourteen (14) new cases were reported in week 48.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-2021	10-Feb-2021	6-Feb-2022	3	3	0	0.0%
No cVDPV2 positive environmental sample was reported this week. There was one cVDPV2 positive environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia.									
Lesotho	COVID-19	Grade 3	13-May-2020	13-May-2020	7-Feb-2022	32 372	32 372	696	2.2%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 7 February 2022, a total of 32 372 cases of COVID-19 have been reported, including 22 812 recoveries and 696 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	10-Feb-2022	7 359	7 359	290	3.9%
From 16 March 2020 to 10 February 2022, Liberia has recorded a total of 7 359 cases including 290 deaths and 7 049 recoveries have been reported.									
Liberia	Measles	Ungraded	3-Feb-2022	1-Jan-22	3-Feb-2022	92	20	2	2.2%
There is currently an ongoing measles outbreak in 2 counties: Montserrado County in Commonwealth district and Bong County in Zota district. Cumulatively, 92 suspected cases including 2 deaths (CFR 2.2%) have been recorded in the country. Of these, 20 laboratory-confirmed, 20 clinically compatible, 1 Epi-link, and 24 non-measles (negative), and 27 pending testing. Current interventions include active case search, isolation and management of cases, and mini vaccination campaign in Montserrado county.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-2020	17-Dec-2020	6-Feb-2022	3	3	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The country reported 3 cases in 2021.									
Madagascar	Floods	Grade 2	19-Jan-22	16-Jan-22	12-Feb-2022	256 023		175	0.1%
Heavy rains in Madagascar from the Tropical Storm Ana and Cyclone Batsirai weather systems have flooded parts of the country including major impacts on the capital Antananarivo. The Tropical Storm Ana weather system affected the country during week 3 of 2022, while Cyclone Batsirai occurred in week 5. As of 3 Feb 2022, there have been 131 555 victims affected including 55 deaths by the Tropical Storm Ana weather system in 12 regions. A total of 651 people are currently internally displaced and are housed currently in 4 accommodation sites. Damages from Cyclone Batsirai have been reported as of 12 Feb 2022 where 124 468 people have been affected causing 120 deaths mostly in the district of Ikongo of Fitovinany Region. As of 12 Feb 2022, 29 567 people have been displaced by the effects of Cyclone Batsirai and currently reside in 108 accommodation sites.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-2021	1-Jan-21	24-Jan-22	-	-	-	-
A prolonged three-year drought in southern Madagascar has contributed to food insecurity issues for an estimated 1.3 million people in the Grand Sud area, of which 14K people were classified as IPC Phase 5 or catastrophically food insecure. The Integrated food security Phase Classification (IPC) analysis for January 2022 has classified 405 000 people in emergency (phase 4). About 309 000 children are projected to suffer from moderate acute malnutrition and 60 000 children aged of 6-59 months are projected to suffer from severe acute malnutrition.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	11-Feb-2022	62 844	62 844	1 335	2.1%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 11 February 2022, a total of 62 844 cases have been reported in the country, out of which 56 500 have recovered and 1 335 deaths reported.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-2021	28-Apr-2021	9-Feb-2022	11	11	0	0.0%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. There are 11 cases reported in 2021									
Malawi	Floods	Ungraded	26-Jan-22	26-Jan-22	9-Feb-2022	9 457 267		46	0.0%
On 26 January 2022 the State President declared a State of National Disaster following the Tropical Storm ANA, which caused heavy flooding in several districts in the country, especially in the Southern Region due to heavy rainfall and strong winds. 19 districts and 2 cities have been impacted with tropical storm Ana which hit Malawi from 23 January 2022. Reports indicate 945,7267 people (221,127 households) affected by the floods of which 152,786 (32,935 households) are displaced, 46 deaths, 18 missing and 206 injuries recorded according to the Government									
Malawi	COVID-19	Grade 3	2-Apr-2020	2-Apr-2020	13-Feb-2022	85 025	85 025	2 596	-
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 13 February 2022, the country has a total of 85 025 confirmed cases with 2 596 deaths and 72 491 recoveries.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-2022	1-Feb-2022	1	1	0	0.0%
One positive case of circulating vaccine-derived polio virus type 2 (cVDPV2) was detected in Lilongwe from a patient presenting in November 2021 confirmed by the National Institute for Communicable Diseases (NICD) reference laboratory. There has not been a reported case of polio in the country for three decades. Further laboratory sequencing on the sample is being conducted.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	31-Dec-2021	-	-	-	-
The situation in northern and central regions of the country remains unstable, marked by an increase in direct or indirect attacks against national and international armed forces and the civilian population. Issues such as inter and intra-community conflicts, activism of non-state armed groups, consequences of counter-insurgency operations, crime and banditry continue to weaken the Malian context. As of 31 December 2021, there were 401 736 IDPs in the country and 49 977 refugees. However, 85 939 returnees have come back to the country. Due to the humanitarian crisis, 5% of health facilities are not fully functional with a limited presence of partners working in the management of primary health care in the northern and central regions.									



Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	13-Feb-2022	30 265	30 265	716	2.4%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 13 February 2022, a total of 30 265 confirmed COVID-19 cases have been reported in the country including 716 deaths and 28 032 recoveries.									
Mali	Measles	Ungraded	20-Feb-2018	1-Jan-21	2-Jan-22	1 947	828	2	0.1%
From January 2021 up to Epi week 51 (ending the 02 January 2022), Mali has reported a total of 1 947 suspected cases including two deaths, 1 516 samples tested of which 828 were positive, 644 negative and 44 undetermined. There is an increase of 93.01 % of confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-2020	18-Aug-2020	9-Feb-2022	52	52	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. No cases have been reported in 2021. The total number of cases since 2020 are 52.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Feb-2022	58 569	58 569	972	-
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 13 February 2022, a total of 58 569 cases including 972 deaths and 57 291 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	18-Jan-22	97 070	97 070	822	0.8%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 18 Janvier 2022, a total of 97 070 confirmed COVID-19 cases including 822 deaths and 92 838 recovered cases have been reported in the country.									
Mozambique	Floods	Ungraded	24-Jan-22	26-Jan-22	26-Jan-22	4 000		5	0.1%
The tropical storm Ana made landfall in Angoche district, Nampula province on 24 January. The storm subsequently headed westwards, significantly affecting Zambezia and Tete provinces. Five fatalities, 66 injured people, 660 damaged houses and 4 000 affected people across Nampula, Zambezia, Tete and Cabo Delgado Provinces are reported. A total of 546 private houses were also partially destroyed while 115 were totally destroyed. Moreover, one health center and 16 classrooms were affected. Mozambique, which is already struggling with multiple crises, is a low-income country and third in Africa for exposures to extreme climatic events, with a yearly tropical storm cycle that does not give affected people time to recover.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	31-Dec-2021	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. As of 31 Dec 2021, the nationwide estimate of people in need of humanitarian assistance is 1.3 million and there are 744 949 people displaced by conflict.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	13-Feb-2022	224 703	224 703	2 189	1.0%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 13 February 2022, a total of 224 703 confirmed COVID-19 cases were reported in the country including 2 189 deaths and 218 278 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-2020	1-Jan-21	10-Oct-21	125	2	0	0.0%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 10 October 2021 (week 40), there were 125 cases reported including 2 confirmed cases and no death. During the same period in 2020, there were 185 confirmed cases and no death.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	12-Feb-2022	156 765	156 765	3 993	0.0%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 13 February 2022, a total of 156 765 confirmed cases with 151 992 recovered and 3 993 deaths have been reported.									
Namibia	Hepatitis E	Protracted 1	18-Dec-2017	8-Sep-17	15-Aug-2021	8 090	8 090	66	0.8%
The current outbreak in Namibia started in December 2017. As of 15 August 2021, a cumulative total of 8 090 cases (2 117 laboratory-confirmed, 4 738 epidemiologically linked, and 1 235 suspected cases) including 66 deaths (CFR=0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 5 004 (62.0%) of reported cases, followed by Erongo 1 717 (21.2%).									
Niger	Humanitarian crisis	Protracted 1	1-Feb-2015	1-Feb-2015	24-Jan-22	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2022. As of 31 Dec 2021, 264 257 people are internally displaced, 249 945 are refugees, and 2.3 million are food insecure (phase 3+ and above). Recent sanctions imposed by the Economic Community of West African States have severely impacted migration. Currently, 1 070 Malian migrants are stranded in Niger, unable to return home, awaiting authorization from Niger's Ministry of Foreign Affairs and Cooperation.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	13-Feb-2022	8 711	8 711	303	3.5%
From 19 March 2020 to 13 February 2022, a total of 8 711 cases with 303 deaths have been reported across the country. A total of 8 362 recoveries have been reported from the country.									
Niger	Meningitis	Ungraded		1-Jan-21	16-Jan-22	1 688	-	76	4.5%
Since the beginning of the year 2021 to week 2 of 2022 ending 16 January 2022, 1 688 cases have been reported with 76 deaths (CFR 4.5%). The reports shared by the country shows that 2 health districts in Zinder region crossed the alert threshold: Dungass with an attack rate (AR) of 4.5 cases per 100 000 inhabitants and Magaria with an attack rate (AR) of 4.8 cases per 100,000 inhabitants. An analysis of data by sub-districts indicates that some health areas crossed the epidemic threshold on week 49 of 2021 (ending 12 December). Neisseria meningitidis serogroup C (NmC) is the predominant germ identified in the 2 health districts. An International Coordinating Group (ICG) for vaccine provision request is underway for a vaccine campaign response.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	9-Feb-2022	15	15	0	0.0%
Five cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported; one each in Maradi, Tillaberi and Zinder and two in Agadez, bringing the number of 2021 cases to 15									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	20-Jan-22	-	-	-	-
Attacks in Nigeria have continued in Local Government Agencies of Borno, Adama, and Yobe (BAY) states making the North-Eastern part of the country volatile. As of 31 December 2021, there were 77 143 refugees from other countries within Nigeria with almost 73 000 (or 95%) coming from Cameroon. More than 2.2 million IDPs (72.5% of all IDPs in the country) are in the North-East, while the rest (27.5%) are in the North-West/North-Central part of the country. On 20 January 2022, Non-State Armed Groups killed two civilians in the south of Borno state and abducted four women during the raid. This caused the displacement of hundreds residents. The groups also set houses and churches on fire and looted food supplies from homes and shops.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	30-Jan-22	414		7	1.7%
From epidemiological week 1 to week 3, 2022, a total of 414 suspected cases including 7 deaths (CFR 1.7%) have been reported from four states and FCT. Of the suspected cases, the less than 5 years age group is the most affected, while males and females are equally affected.									
Nigeria	COVID-19	Grade 3	27-Feb-2020	27-Feb-2020	12-Feb-2022	253 970	253 970	3 140	1.2%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 12 February 2022, a total of 253 970 confirmed cases with 230 317 recovered and 3 140 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	1-Jan-21	1-Jan-21	23-Jan-22	759	170	32	18.8%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 3 of 2022, the number of new confirmed cases was 74. These were reported from Ondo, Bauchi, Edo, Oyo, Ebonyi, Benue, Katsina, Kaduna and Taraba States. Cumulatively from week 1 to week 3 of 2022, a total of 170 confirmed cases including 32 deaths among confirmed cases have been reported with a case fatality rate of 18.8 % across 12 states. In total, 759 cases are suspected in 2022. This is higher than the same period reported in 2021. Of all confirmed cases, 74% are from Edo (28%), Ondo (28%) and Bauchi (23%) States.									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	31-Jan-22	106	37	0	0.0%
According to the Nigeria Centre for Disease Control (NCDC), in Jan 2022, seven cases of suspected monkeypox were reported from four states: Adamawa (4), FCT (1), Imo (1), and Edo (1). Three of these cases were confirmed and no deaths have been reported. In 2021, a total of 98 suspected cases were reported throughout the year. Of the suspected cases, 34 were confirmed from nine states Delta (9), Lagos (6), Bayelsa (6), Rivers (6), Edo (3), Federal Capital Territory (1), Niger (1), Ogun (1), Cross River (1) and no deaths recorded.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-2018	1-Jan-18	13-Feb-2022	476	409	0	0.0%
Two cases were reported this week. There were 397 cases and 14 cVDPV2 positive environmental samples were reported in 2021.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	31-Dec-2021	42	42	2	4.8%
From 1 January 2021 to 31 December 2021, a total of 2 053 yellow fever (YF) suspected cases were reported from 37 states including in 497 Local Government Areas (LGA) in Nigeria. Of suspected cases, 42 tested positive for YF by plaque reduction neutralization test at Institut Pasteur in Dakar. Some PRNT-positive cases had a history of YF vaccination.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	12-Feb-2022	129 295	129 295	1 450	1.1%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 12 February 2022, a total of 129 295 cases with 1 450 deaths and 127 131 recovered cases have been reported in the country.									
Sao Tome and Principe	Floods	Ungraded	30-Dec-2021	30-Dec-2021	20-Jan-22	-	-	2	
On 28 and 29 December 2021, after heavy rainfall on the island of São Tomé, the rivers flooded and caused floods and landslides, affecting mainly the districts of Água Grande (capital city with 40% of the country's population) and Lembá (8% of the population). Broken bridges and landslides have left inaccessible districts of Lembá, Cantagalo and Mezochi. Dwellings have been destroyed and washed away by floods. Such heavy rainfall has not been recorded for 30 years. Several communities are without access to drinking water due to the destruction of water pipes. So far, 2 deaths are reported and several missing persons. Current responses in the country are focused on the capital city and the areas most in need are found in the Lembá and Me-Zochi districts, with about 9 000 people affected out of 15 000 according to the population data.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-2020	6-Apr-2020	12-Feb-2022	5 920	5 920	71	1.2%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 12 February 2022, a total of 5 920 confirmed cases of COVID-19 have been reported, including 71 deaths. A total of 5 828 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	12-Feb-2022	85 370	85 370	1 956	2.3%
From 2 March 2020 to 12 February 2022, a total of 85 370 confirmed cases of COVID-19 including 1 956 deaths and 83 082 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-2021	9-Feb-2022	17	17	0	0.0%
One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week in Matam. There are 17 cases reported in 2021.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	9-Feb-2022	38 395	38 395	150	0.4%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 9 February 2022 a total of 38 395 cases have been confirmed, including 37 023 recoveries and 150 deaths have been reported.									
Sierra Leone	Mass fire incident	Ungraded	5-Nov-21	6-Nov-21	18-Jan-22	304	304	154	50.7%
On 5 November 2021, there was a mass fire accident involving a fuel tank that ruptured its tanks after a collision with another vehicle. The fuel ignited and caused a mass burn affecting a number of persons with various degrees of burns including instant deaths. As of 18 January 2022, a total of 304 victims have been reported with 154 deaths and 3 are currently in admission. So far 87 patients have been discharged and are being treated as outpatients for burns.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	12-Feb-2022	7 652	7 652	125	1.6%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 13 February 2022, a total 7 652 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 762 recovered cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sierra Leone	Lassa fever	Ungraded	12-Feb-2021	1-Jan-21	9-Jan-22	17	15	9	52.9%
As of 9 January 2022, 17 cases of Lassa fever have been reported from Kenema (14) and Kailahun (3) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 52.9%. Lassa fever is known to be endemic in Sierra Leone and surrounding countries. From 2016-2020 Sierra Leone experienced gradually declining trends in annual Lassa fever case totals, however, in 2021, cases doubled compared to 2020 (from 8 total reported in 2020 to 16 total in 2021). During 2021, females (69%) and the 1-4 years (38%) age group were predominately affected.									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	8-Feb-2022	59		0	0.0%
In 2022, another measles outbreak was declared on 8 February 2022 in the Kambia district. The current outbreak started on 20 January 2022 with 7 new cases. The outbreak attained its highest peak on 4 February 2022 with 10 cases while more cases occurred in January as well. The transmission is still in progress. A cumulative number of 59 cases have been recorded from three communities (Makuma in Samu chiefdom, and Romando, Kalainkay in Mambolo chiefdom respectively. All these cases have been investigated, line listed, and treatment given for accordingly.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-2020	10-Dec-2020	6-Feb-2022	15	15		0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. Five cases were reported in 2021, and 10 were reported in 2020.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	13-Feb-2022	3 641 811	3 641 811	96 993	3.4%
Since the start of the COVID-19 pandemic in South Africa by 13 February 2022, a cumulative total of 3 641 811 confirmed cases and 96 993 deaths have been reported with 3 502 319 recoveries.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-2020	5-Apr-2021	30-Nov-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people (60% of country's total population) faced crisis levels of food insecurity phase (IPC) 3 or worse from April to July 2021 - a figure that increased by 25% compared to the previous three months. Of the total number, 108 000 are in IPC 5, 2.4 are in IPC 4, and 4.6 million are in IPC 3. The total number includes 1.9 million acutely malnourished women and children suffering and 1.71 million internally displaced people. The six most affected counties are Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East. In 2021, the World Food Programme has reached some 498 887 flood-affected people with food and nutrition assistance.									
South Sudan	Floods	Grade 2	15-Jul-2021	1-May-2021	25-Jan-22	-	-	-	-
The escalating flooding began in May 2021 and has affected over 835K people in 33 counties as of 31 December 2021. Flooding has affected over 30 counties across 8 states. A rapidly worsening situation was noted in October 2021. In Unity State, there are over 200 000 people affected by floods. Water levels are now stabilizing, no rains for the past few weeks and partners are providing humanitarian services. Dykes are being repaired and reinforced to prevent further damage and displacement. About 70 health facilities were either cut-off, submerged, or damaged by the severe flooding. In Unity State, 27 health facilities have been relocated to higher grounds due to rising water levels.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-2016	n/a	25-Jan-22	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. In 2022, there is a total of 8.3 million people in need of humanitarian assistance, 2 million people internally displaced and 189 000 people living in protection of civilian sites across the country. Flooding, violence and COVID-19 are the major drivers of humanitarian needs. Renewed sub-national violence in several locations has led to displacement and disruption of health service provision.									
South Sudan	COVID-19	Grade 3	5-Apr-2020	5-Apr-2020	12-Feb-2022	16 896	16 896	137	0.8%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 12 February 2022, a total of 16 896 confirmed COVID-19 cases were reported in the country including 137 deaths and 13 077 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	23-Jan-22	1 812	104	11	0.6%
The current outbreak in the Bentiu IDP camp is ongoing. As of 23 Jan 2022, a total of 1 812 cases of hepatitis E including 11 deaths (CFR: 0.6%) have been reported since Jan 2019. Hepatitis E cases have been above the epidemic threshold since week 19 of 2021. There were 50 new HEV cases in week 3, 2022.									
South Sudan	Malaria	Ungraded	28-Dec-2021	1-Jan-21	19-Dec-2021	3 707 252		2 963	0.1%
Between epidemiological weeks 1 and 51 of 2021 (ending 19 December), 3 707 252 malaria cases including 2 963 deaths were reported. Epidemic thresholds have been exceeded in several districts in the states with an upsurge occurring in Rubkona, Duk, Twic East and Raga counties in week 3 of 2022.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	6-Feb-2022	59	59	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There are 59 cVDPV2 cases in the country; 9 in 2021 and 50 in 2020.									
Tanzania, United Republic of	Cholera	Ungraded	13-Dec-2021	13-Dec-2021	19-Jan-22	30	-	4	13.3%
As of 31 January 2022, at least 30 cases of cholera have been reported in Tanzania's southern highlands regions of Rukwa and Kigoma. The first three cases of cholera were reported at Korongwe ward dispensary in early December 2021.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	4-Feb-2022	33 436	33 436	792	2.4%
The Ministry of Health, Community Health, Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 4 February 2022, a total of 33 436 cases have been reported in Tanzania Mainland including 792 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	11-Feb-2022	36 634	36 634	270	0.7%
On 6 March 2020, the Ministry of Health and Public Hygiene of Togo announced the confirmation of its first case of COVID-19. As of 11 February 2022, a total of 36 634 cases including 270 deaths and 34 635 recovered cases have been reported in the country.									



Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Togo	Measles	Ungraded	2-Feb-2022	12-Jan-22	2-Feb-2022	128	40	0	0.0%
A measles outbreak has been declared in Zio health district of Togo where a total of 116 suspected cases of measles and 23 confirmed are reported. No death recorded so far. The reactive vaccination campaign is ongoing. Four other health districts (Agoe : 7 cases and 3 confirmed, Golfe : 4 cases with 3 confirmed, Bassar: 3 confirmed cases and Ave : 3 confirmed cases ) have reported measles cases and investigation is still ongoing.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	9-Feb-2022	17	17	0	0.0%
No new case of cVDPV2 was reported during the past week. No cases have been reported in 2021. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Uganda	Floods	Ungraded	24-Jan-22	31-Jan-22	31-Jan-22	7 049	-	9	
On 24 January 2022, following heavy rains that triggered mudslides that affected Nyarusiza and Muramba sub-counties in Kisoro district, Uganda. 9 deaths were reported. Crops, livestock, shelter, water sources, shops, roads and schools are damaged. Two primary schools were affected and learning of at least 900 pupils have been interrupted. One health center with a catchment population of about 30 000 was affected and interrupted services. More than 4 000 children and other vulnerable groups were affected. No adequate shelter and wash facilities for the affected community posing a risk disease outbreaks.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	12-Feb-2022	162 822	162 822	3 579	2.2%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 12 February 2022, a total of 162 822 confirmed COVID-19 cases, 99 597 recoveries with 3 579 deaths.									
Uganda	Rift Valley fever	Ungraded	14-Jan-22	12-Jan-22	7-Feb-2022	2	2	1	50.0%
On 12 January 2022, the Ugandan Ministry of Health was notified of a confirmed case of Rift Valley fever (RVF). The patient was a 35-year-old male, resident of Kiruhura village, Mabare subcounty, Kagadi district. The date of onset was 2 January 2022 and he presented with fever, general body weakness and unexplained bleeding in vomitus, stool and cough. He was admitted successively in 2 hospitals and died on 10 January 2022. As of 7 February 2022, a total of two confirmed cases of RVF have been recorded.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	13-Feb-2022	309 502	309 502	3 937	1.3%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 13 February 2022, a total of 309 502 confirmed COVID-19 cases were reported in the country including 3 937 deaths and 302 928 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-2019	1-Jan-22	22-Jan-22	22	0	0	0.0%
The anthrax outbreak is ongoing in Zimbabwe. Six new cases were reported in Week 3 of 2022 with the cumulative for the year being 22. The cases were reported by Gokwe North District and Gokwe South District in Midlands Province. This outbreak started in Week 36 of 2019, affecting mainly Buhera and Gokwe North and South districts but a surge in cases started appearing in week 38 when cases were reported in some other areas. The cumulative figures for anthrax are 747 cases and 3 deaths in 2020 and 306 cases and 0 deaths in 2021.									
Zimbabwe	Cholera	Ungraded	27-Jan-22	27-Jan-22	27-Jan-22	1	1	0	0.0%
A case of cholera was detected on 19 January 2022 in Chiredzi District in Masvingo Province. The case is a 51-year-old male patient who began to show signs and symptoms of cholera on 19 January 2022. Rapid laboratory test of stool done on 20 January was positive for cholera. A subsequent stool sample collected for culture done on the same day was positive for cholera. An additional sample analyzed at the National Microbiology Reference Laboratory (NMRL) in Harare confirmed cholera. Zimbabwe has gone without reporting any cholera case for almost 3 years as the last case reported was in March 2019. Chiredzi district is known to be one of the cholera hotspots for Zimbabwe.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	13-Feb-2022	231 381	231 381	5 374	2.3%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 13 February 2022, a total of 231 381 confirmed COVID-19 cases were reported in the country including 5 374 deaths and 223 133 cases that recovered.									
<b>Closed Events</b>									
Burundi	Measles	Ungraded	23-Mar-20	1-Jan-21	23-Oct-21	557	496	0	0.0%
The measles outbreak has been declared since November 2019 in camps hosting Congolese refugees and then spread to other communities. In 2020, a total of 1 968 cases were reported in 46 of the country's 47 districts throughout 2020, 1 585 confirmed, 6 deaths. As of week 41, 2021, Burundi has reported a total of 557 suspected cases, 496 reported by case-by-case surveillance with no death, 72 confirmed by IgM+ 274 by epidemiological link and 6 clinical cases. Six districts are currently in outbreak mode : Bubanza, Mpanda, Bugarama, Muyinga, Rumonge and Cibitoke. As of 13 February 2022, no active measles outbreak.									
South Sudan	Measles	Ungraded	24-Nov-18	19-Sep-19	28-Nov-21	1 313	151	2	0.2%
In 2021, the Measles Outbreak has been suspected in Western Equatoria State (WES). WES started to report cases of suspected Measles in week 2, 2021. Up to week 47 2021 a total of 151 cases have been listed. There were 2 new cases reported in week 47 with no deaths, 51% are female and 49% are male. Less than 5 years of age is 34%. Since week 38 of 2019 to 2020, a total of 1 313 cases of measles were reported including 52 confirmed cases and two deaths, the outbreak is controlled in 9 counties (Tonj East, Juba, Bor, Kapoeta East, Jebel Boma, Aweil East, Wau, Pibor and Ibba). The outbreak was controlled and no ongoing active measles outbreak in 2022.									

†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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