

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 12: 14 – 20 March 2022

Data as reported by: 17:00; 20 March 2022



World Health
Organization

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

3

New events

151

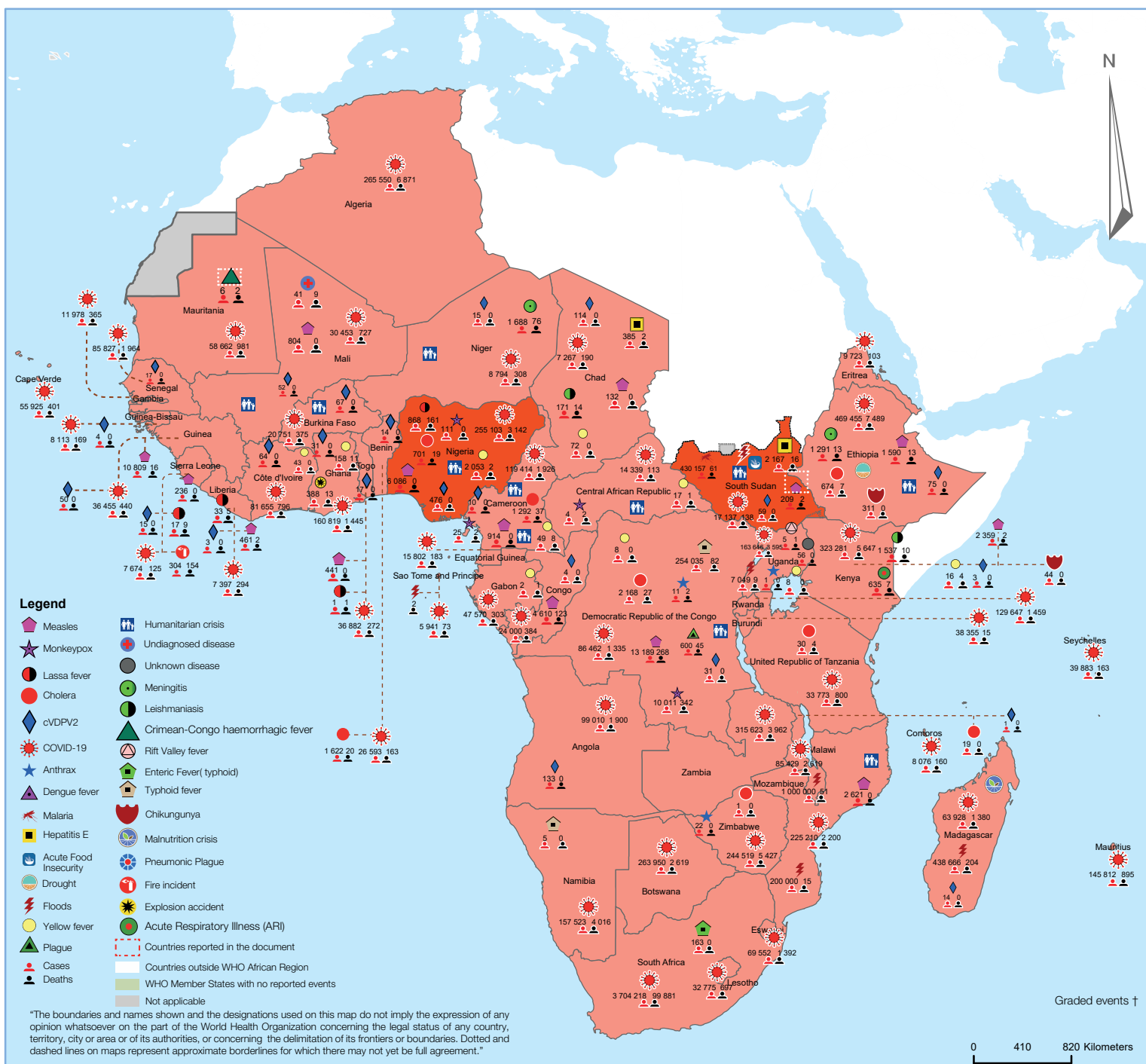
Ongoing events

131

Outbreaks

23

Humanitarian
crises



3

Grade 3 events

42

Grade 2 events

2

Grade 1 events

52

Ungraded events

3

Protracted 3 events

4

Protracted 2 events

2

Protracted 1 events

Overview

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This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 151 events in the region. This week's articles cover:

- [Crimean Congo hemorrhagic fever in Mauritania](#)
- [COVID-19 across the WHO African region](#)
- [Measles 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 been controlled and closed.

Major issues and challenges include:

- The ongoing Crimean-Congo hemorrhagic fever outbreak in Mauritania has affected six Moughataas, with a total of six cases and two deaths reported. Contact follow-up is underway and a One Health approach has been initiated. The response continues to face several challenges: suspected cases are not rapidly detected and isolated and contacts are not exhaustively identified and followed-up, hence transmissions are not fully controlled. In addition, long distances and bad road conditions seriously hamper safe transportation of samples to the national laboratory, which currently has insufficient reagents to perform analyses.
- New COVID-19 cases in the WHO African region have declined since January 2022. Deaths recorded in the past week also declined. Only Mauritius is currently undergoing a resurgence of the COVID-19 pandemic. The sustained decline in new COVID-19 cases does not signal the end of the pandemic. We have to close all avenues for a COVID-19 resurgence. This can be achieved with increased vaccination, regular testing, and observing tried-and-true public health measures.
- Health authorities in South Sudan declared a measles outbreak on 23 February 2022. The outbreak was first confirmed in two counties (Torit and Maban) and further spread to Tambura County. In Maban County, cases have been reported from the refugee's camps, mostly in Dolo refugee camp but also sporadically in Gendrassa and Batil refugee's camps as well as from host communities. Poor living conditions in the camps is one of the factors that have contributed to the rapid spread of the disease. The situation is likely to escalate if appropriate measures are not put in place. Reactive vaccination campaigns have started in some of the affected areas. Health authorities have appealed to partners and donors to support the response. The protracted humanitarian crisis in the country remains a big challenge to the response.

Ongoing events

Crimean-Congo Haemorrhagic fever

Mauritania

6
cases

2
Deaths

33.3%
CFR

EVENT DESCRIPTION

A Crimean-Congo hemorrhagic fever (CCHF) outbreak has been ongoing in Mauritania since 5 February 2022 after confirmation of the first case. The Nouakchott National Hospital Centre notified this case during epidemiological week 4 (ending 30 January 2022) and four additional confirmed cases were subsequently notified: two by the same hospital, one by Kiffa Regional Hospital Centre and another by Cheik Zayed Hospital Centre.

The sixth case was notified on 11 March 2022 by Hamed Hospital of Boutilimit. This is a 35-year-old breastfeeding female residing in Bir Barka village in Nebakhiya community, near Boutilimit, 157kms from the capital city Nouakchott. She has no history of contact with the previous confirmed cases. However, her husband lives in Nouakchott where a confirmed case was identified and occasionally comes to visit her. She reported history of travel to Boutilimit where a confirmed case had been reported, with her last travel date being 28 February 2022. Her family possesses a herd of goats.

On 6 March 2022, she reported onset of fever, diarrhea, body weakness, gingival and vaginal bleeding, prompting her to visit Bir El Barka health post two days later. As no significant improvement was observed, she consulted Hamed Hospital of Boutilimit on 11 March 2022 where she was immediately hospitalized, isolated and a sample was collected. Laboratory results turned positive for CCHF on 12 March 2022. An investigation was conducted on 13 March and 10 contacts were identified and listed around the case.

As of 14 March 2022, 58 suspected cases have been tested for CCHF and a cumulative number of six confirmed cases and two deaths (CFR 33.3%) have been registered. Three cases have fully recovered, while the sixth case is currently hospitalized and receiving appropriate care.

The ages of the confirmed cases range from 25 to 80 years, with a male predominance (66.7%; male/female sex ratio: 2:1). Three of the four men are shepherds and the other is a butcher. The two females are housewives.

The epidemic has affected six Moughataas so far, located in three Waliyas: Kobenni and Tintane Moughataas in Hodh El Gharbi Waliya, Ouad Naga, R'Kiz and Boutilimit Moughataas in Trarza Waliya, and Arafat Moughataas in South-Nouakchott Waliya.

PUBLIC HEALTH ACTIONS

- A coordination meeting was held on 15 February 2022, involving the MoH and WHO. In addition, the One-Health Committee held four meetings, While WHO held a 3-level teleconference on 15 February 2022. These various meetings purposed to organize and support the response in-country.
- A national response plan was developed and is being implemented.
- Teams already deployed in the field for polio surveillance were briefed on CCHF.
- Investigations have been conducted around confirmed cases and contact tracing is ongoing. Ten contacts were listed around the last confirmed case and are under follow-up.



- A sero-prevalence study of CCHF among domestic animals belonging to confirmed cases was carried-out to investigate the potential source of infection.
- The Mauritania National Institute of Research in Public Health continues to receive samples and is using RT-PCR for laboratory confirmation.
- National and regional hospitals have been capacitated to properly isolate and manage suspected and confirmed cases.
- Educational messages are being broadcast to sensitize the population on preventive measures against the outbreak and early referral to appropriate care in health care facilities.

SITUATION INTERPRETATION

The CCHF outbreak has affected three regions and six districts, with no clear history of contact between the confirmed cases. Although the primary source of infection is not yet clearly identified, the outbreak seems under control with only six cases reported over the past six weeks. However, quick activation of the One-Health Committee has permitted a rapid implementation of a comprehensive response, with joined interventions by human and animal health authorities. Response teams on the ground to rapidly identify the various hotspots.

PROPOSED ACTIONS

- The national surveillance system should be reinforced to enable early detection of CCHF cases and other public health threats.
- Multidisciplinary rapid response teams should be trained and ready to be deployed, both at national, regional and district levels.
- Considering that two of the affected Moughataas share borders with Mali, there is need to put in place a cross-border surveillance and collaboration between Mauritania and Mali local health authorities.

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EVENT DESCRIPTION

The number of new COVID-19 cases in the WHO African Region decreased by 51.0% during the week of 14 to 20 March 2022 as compared to the previous week. The number of new deaths decreased by 18.0% in the reporting week. Across the region, over 14 255 new COVID-19 infections and 203 new deaths were reported from 37 and 13 countries, respectively.

In the past seven days, a total of 27 countries (58.0%) reported a decrease of 20% or more in the number of new cases (Table 1), while only Burundi, Cabo Verde, Chad, Congo, Côte d'Ivoire, Ethiopia, Guinea, Mali, Sao Tome and Principe, Sierra Leone, and South Sudan saw a 20% or more increase in weekly cases compared to the past week. Benin, Burkina Faso, Cameroon, Democratic Republic of the Congo, Gabon, Lesotho, Liberia, Mauritius, and the United Republic of Tanzania did not report any new cases in the past seven days.

Almost all the new cases were reported from the top five countries (12 870, 90.3%), with South Africa recording the highest number (9 714 new cases, 5% decrease, 16 new cases per 100 000 population), followed by Zimbabwe (2 004 new cases, 39.4% decrease, 13.2 new cases per 100 000), Zambia (690 new cases, 50.0% decrease, 4.0 new cases per 100 000), Ethiopia (271 new cases, 24.3% increase, 0.2 new cases per 100 000), and Seychelles (191 new cases, 16.5% increase, 192.2 new cases per 100 000).

Similarly, a fall in weekly COVID-19 deaths was observed in the African region for the period (14 to 20 March 2022), compared to the previous week. South Africa reported the highest numbers of new deaths (156 new deaths; 14.3% decrease; 0.3 new deaths per 100 000 population), followed by Zimbabwe (13 new deaths; 13.3% increase; 0.1 new deaths per 100 000), Algeria (7 new deaths; 22.2% decrease; 0.0 new deaths per 100 000), Congo (6 new deaths; 0.0% decrease; 0.1 new deaths per 100 000), and Zambia (3 new deaths; 200% increase; 0.0 new deaths per 100 000).

Only one country, Mauritius met the criteria for resurgence (a 20% increase in new COVID-19 cases for a period of at least two consecutive weeks) where cases in the past week have reached 30% or more of the country's highest weekly number of cases. Mauritius had a doubling time of 13.2 days during its second wave (late December 2021 to mid-February 2022) and a 19.7-day halving time is observed. The country has been undergoing partial lockdown since mid-January 2021, with public gatherings limited to 50 people, religious establishments admitting 10 people at a time and in-person classes suspended for primary and secondary schools. Just like other countries, the impact of recent COVID-19 wave on healthcare capacity, dominated by Omicron, is currently low.

As of 20 March 2022, the cumulative number of infections stands at 8 167 677 and 169 951 deaths have been reported in the WHO African Region, resulting in a CFR of 2.1%. More than 7.5 million recoveries have been recorded, giving a recovery rate of 92.0%.

In general, South Africa has recorded the highest number of COVID-19 cases in the region, with 3 704 218 cases (45.4% of all reported cases), followed by Ethiopia (469 455, 5.7%), Kenya (323 281, 4.0%), Zambia (315 592, 3.9%), and Algeria (265 550, 3.3%); the five countries accounting for 62.2% (5 078 396) of all cases.

Similarly, most reported deaths occurred in South Africa, which accounts for 59.0% (99 881) of all deaths recorded in the region. Ethiopia has the second-highest number of deaths (7 489 deaths, 4.4%), followed by Algeria (6 871, 4.0%), Kenya (5 647, 3.3 %) and Zimbabwe (5 427, 3.2%), all accounting for 74.0% (125 315) of all deaths reported in the region.

Thus far, a cumulative total of 159 430 COVID-19 infections (2.0% of all cases) occurred among health workers in the region, with South Africa accounting for 45.0% (71 113) of the total infections. Kenya (12 720, 8.0%), Algeria (11 936, 8.0%), Zimbabwe (11 609, 7.3%) and Namibia (5 323, 3.3%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. The United Republic of Tanzania (10.0%), Liberia (6.0%), Zimbabwe (4.7%), Algeria (4.5%), and Burkina Faso (4.2%) have the highest proportion of health worker infections by country. Only Eritrea has not reported any healthcare worker infections.

The African continent has reported a cumulative total of 11.6 million infections. In addition, more than 252 043 deaths (CFR 2.2%) and more than 10.8 million people have recovered. The African continent accounts for 2.5% of global cases and 4.1% of global deaths.

WHO is working with member states to make sure there is broad awareness about the available therapeutics, under what circumstances they should be used, and how they can be procured through the WHO Access to COVID-19 Tools Accelerator. Relevant information was disseminated through a recent WHO webinar that reached nearly 110 people. WHO is in the process of providing training to seven countries on how to improve basic emergency care. Those trained during the ongoing session will return to their countries and share information across health facilities. Universal access to diagnostics, vaccines and therapeutics will pave the shortest path to the end of this pandemic.

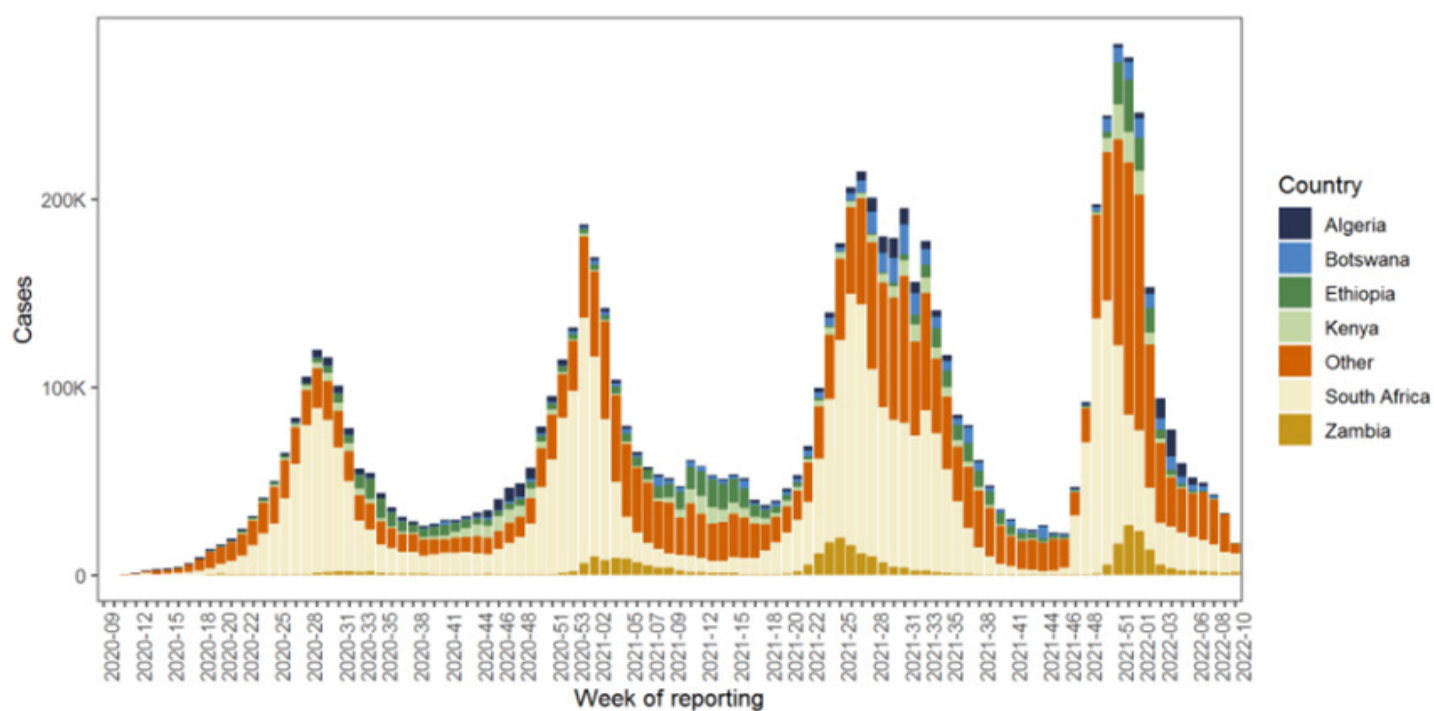
SITUATION INTERPRETATION

- ▶ The WHO African region has observed a sustained decline in both cases and deaths. Even with the observed fall in cases, more countries had an increase in weekly cases compared to the previous week when only three countries had an increase. WHO continues to support countries to respond to the COVID-19 pandemic.

Africa's COVID-19 vaccine uptake increases by 15%



The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 20 March 2022 ($n = 8\,167\,677$)



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New cases reported in the past seven days and cumulative totals by country: Data as of 20 March 2022 (8 167 677)

Country	Total Cases	New Cases	Percent change in new Cases	Total Deaths	New Deaths	Percent change in new Deaths	Health Worker infections
South Africa	3 704 218	9 714	-4.6	99 881	156	-14.3	71 113
Ethiopia	469 455	271	24.3	7 489	3	-70.0	3 354
Kenya	323 281	98	-9.3	5 647	2	-50.0	12 720
Zambia	315 892	690	-50.0	3 963	3	200.0	1 121
Algeria	265 550	118	-29.3	6 871	7	-22.2	11 936
Botswana	263 950	0	0.0	2 619	0	0.0	2 082
Nigeria	255 103	150	-52.5	3 142	0	0.0	3 175
Zimbabwe	244 519	2 004	-39.4	5 427	13	-13.3	11 609
Mozambique	225 210	31	-20.5	2 200	2	0.0	4 779
Mauritius	192 558	0	-100.0	934	0	0.0	30
Uganda	163 646	49	-65.7	3 595	3	50.0	3 025
Ghana	160 819	58	-52.1	1 445	0	-100.0	4 763
Namibia	157 503	54	-45.5	4 014	0	0.0	5 323
Rwanda	129 647	46	-8.0	1 459	0	-100.0	682
Cameroon	119 414	18	100.0	1 926	0	0.0	4 417
Angola	99 010	83	-31.4	1 900	0	0.0	939
Democratic Republic of the Congo	86 461	0	-100.0	1 335	0	0.0	728
Senegal	85 827	30	-25.0	1 964	0	-100.0	419
Malawi	85 561	62	-11.4	2 626	3	-25.0	3 026
Côte d'Ivoire	81 655	58	41.5	796	0	-100.0	1 913
Eswatini	69 552	117	-14.6	1 392	0	-100.0	1 215
Madagascar	63 928	58	-26.6	1 380	3	-25.0	70
Mauritania	58 662	4	-55.6	981	0	-100.0	24
Cabo Verde	55 925	0	-100.0	401	0	0.0	140
Gabon	47 570	0	-100.0	303	0	0.0	345
Seychelles	39 883	191	16.5	163	0	0.0	945
Burundi	38 372	93	32.9	15	0	0.0	38
Togo	36 882	22	-43.6	272	0	0.0	891
Guinea	36 455	20	150.0	440	0	0.0	682
United Republic of Tanzania	33 773	0	-100.0	800	0	0.0	3 351
Lesotho	32 775	0	-100.0	697	0	0.0	473
Mali	30 454	33	50.0	727	1	0.0	87
Benin	26 952	0	-100.0	163	0	0.0	139
Congo	24 062	13	62.5	384	6	0.0	303
Burkina Faso	20 813	0	-100.0	379	0	0.0	864
South Sudan	17 137	73	49.0	138	0	-100.0	294
Equatorial Guinea	15 899	1	-75.0	183	0	0.0	608
Central African Republic	14 339	5	-37.5	113	0	0.0	51
Gambia	11 978	5	-70.6	365	0	0.0	142
Eritrea	9 723	2	-66.7	103	0	0.0	0
Niger	8 794	13	-13.3	308	0	-100.0	355
Guinea-Bissau	8 113	42	10.5	169	0	-100.0	23
Comoros	8 076	7	-66.7	160	0	0.0	155
Sierra Leone	7 674	7	600.0	125	0	0.0	269
Liberia	7 397	0	-100.0	294	0	0.0	418
Chad	7 269	9	200.0	190	0	0.0	292
Sao Tome and Principe	5 941	6	500.0	73	1	0.0	102
Cumulative Cases (N=47)	8 167 677	14 255	-50.9	169 951	203	-17.5	159 430

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

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EVENT DESCRIPTION

Sporadic cases of measles have been reported in South Sudan since late 2021. Consequently, a measles outbreak was declared in the country on 23 February 2022. The outbreak has so far affected three counties of Torit, Maban and Tambura. These three counties are from Eastern Equatoria, Upper Nile and Western Equatoria States, respectively.

As of week 9 (ending 6 March 2022), a total of 209 measles cases and two deaths (CFR = 0.9%) have been reported. Most cases are children under five years old (59.3%) and males have been more affected (53.0%) than female.

Maban County has reported the highest measles cases (77.0%, 161/209) with zero death, and majority of the cases have been reported from Dolo refugee's camp. Wadaga and Balila villages are the most affected within Dolo camp. About 51% of cases are male and 56% of cases are children under five years old. Of the 10 samples tested at National Public Health Laboratory (NPHL), four tested measles IgM positive, while five tested rubella IgM positive.

Torit county started reporting measles cases in week 49, 2021 (ending 12 December) and a total of 43 cases have been listed with two deaths (CFR= 4.6%). Out of the 10 samples collected from this county, seven tested measles IgM positive and one positive for rubella IgM. Over 82% of the cases are children under five years old. To date, the most affected area is Himuro village with 36 cases out of 43 reported in the county.

Tambura County started reporting measles cases in week 8, 2022 (ending 27 February). A total of five cases have been listed and two new cases reported in week 9, 2022, with 60% male; and 40% of the cases are children under five years old. Most affected area is Tambura and Nzara villages. Out of the nine samples tested in the NPHL, three turned measles IgM positive and six rubella IgM positive.

PUBLIC HEALTH ACTIONS

- In Maban County, trainings on vaccination and adverse events following immunization as well as social mobilization were conducted on 5 and 6 March 2022, before reactive vaccination campaign that started on 7 March 2022.

- For Torit County, reactive vaccination campaign was planned to start on 16 March 2022 targeting 25 150 children aged 6-59 months.
- In Tamboura County, a vaccination micro plan was developed targeting children aged 6-59 months in the IDP camps. Line listing continues as well as case management and enhancing community awareness on case reporting and routine immunization.

SITUATION INTERPRETATION

The measles outbreak reported within a camp is of grave concern given the poor living conditions that may escalate the outbreak. As per health authorities, the ongoing measles outbreaks are attributed to suboptimal measles routine immunization coverage in Eastern Equatoria and Upper Nile States. Improvement in vaccination coverage is highly recommended to reduce the risk for future outbreaks. Apart from measles, rubella outbreaks have also been confirmed in Gogial West and Cueibet counties. South Sudan is among countries with protracted humanitarian situation with huge health needs that require supports from its partners.

PROPOSED ACTIONS

- Good vaccination coverage against measles remains the key for outbreaks prevention. It is therefore important to deploy the required efforts to improve the current routine vaccination coverage.
- While implementing response activities in the camps, the same efforts should also be deployed for host communities to avoid reversing the control efforts put in place in these camps.
- Since a rubella outbreak has been confirmed in some areas, country-wide vaccination is required to interrupt the transmission of both measles and rubella.

Mothers and babies aged between 0 and 5 years are lining up in Al Sabah Children Hospital waiting for the measles vaccine, Vitamin A and deworming



All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
New Events									
Congo	Measles	Ungraded	14-Mar-22	1-Jan-22	20-Mar-22	4 610	4 610	123	2,70%
A measles outbreak is ongoing in Congo, a total of 15 health districts are in outbreak including eight health districts (Enyelle-Betou, Loandjili, Lumumba, Mvoumvou, Ngoyo, Tie-Tie, Ouessou, Mongo Poukou) affected since the last quarter of 2021 despite targeted outbreak response implemented and seven health districts newly confirmed in outbreak in 2022 (Enyelle-Betou, Hinda-Loango, Kinkala, Mouyondzi, Mvouti-Kakamoeka, Ouessou, Talangaï). As of 20 March 2022, a total of 4 610 cases with 123 deaths (CFR 2.7 %) have been reported across the country. About 59 % of cases are children below 5years of age and 50% of cases are not vaccinated. The Investigation result in Pointe Noire has found : 219 cases investigated with blood samples collected out of 1 903 reported cases , 99 tested IgM+ for measles (45% of positivity rate)									
Mali	Undiagnosed disease	Ungraded	14-Mar-22	1-Nov-21	28-Feb-22	41		9	22,00%
In Farabougou village, Segou region of Mali, a disease of unknown cause has been reported. The first investigation on this disease was conducted since November last year. In 2022, the first alert about this disease was voiced on 23 February. A total of 41 cases with 9 deaths (CFR 22.0%) have been reported. The results of the investigation including laboratory analysis is still awaited									
Nigeria	Measles	Ungraded	14-Mar-22	1-Jan-22	27-Feb-22	6 086	254	0	0,00%
Since epi-week 1 to epi-week 8 (ending 27 February), a total of 6 086 suspected cases of measles with zero death have been reported in Nigeria. Zamfara and Katsina states are experiencing measles outbreak declared by the authorities with 1 250 and 1 070 suspected cases reported respectively. In January 2022, a total of 254 confirmed cases have been reported.									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	20-Mar-22	265 550	265 550	6 871	2,60%
From 25 February 2020 to 20 March 2022, a total of 265 550 confirmed cases of COVID-19 with 6 871 deaths (CFR 2.6%) have been reported from Algeria. A total of 178 188 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	18-Mar-22	99 010	99 010	1 900	1,90%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 18 March 2022, a total of 99 010 confirmed COVID-19 cases have been reported in the country with 1 900 deaths and 96 962 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	20-Feb-22	133	133	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 138. These cases are from several outbreaks which occurred in 2019.									
Benin	Cholera	Grade 1	28-Mar-21	28-Mar-21	6-Feb-22	1 622	44	20	1,20%
Since week 12 (ending 28 March 2021) of 2021, cases of cholera have been reported in Benin. As of 6 February 2022, a total of 1 622 cases with 20 deaths (CFR 1.2%) are reported.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	13-Mar-22	26 593	26 593	163	0,60%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 13 March 2022, a total of 26 593 cases have been reported in the country with 163 deaths and 26 409 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	20-Mar-22	14	14	0	0,00%
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	28-Feb-22	263 950	263 950	2 619	1,00%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 21 February 2022, a total of 263 950 confirmed COVID-19 cases were reported in the country including 2 619 deaths and 259 434 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-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	18-Feb-22	20 751	20 751	375	1,80%
Between 9 March 2020 and 18 February 2022, a total of 20 751 confirmed cases of COVID-19 with 375 deaths and 20 309 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	20-Mar-22	67	67	0	0,00%
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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	18-Mar-22	38 355	38 355	15	0,00%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 18 March 2022, the total number of confirmed COVID-19 cases is 38 355, including 15 deaths and 38 206 recovered.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	31-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 Jan 2022. Following the lifting of security restrictions in Kousseri, the security situation in the Far North region of Cameroon has remained calm and stable since 20 January.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	31-Jan-22	-	-	-	-
According to reports from UNHCR, an estimated 579 136 Internally Displaced People (IDPs) have been registered as of 31 Jan 2022. 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 467 550 refugees as of 31 Jan 2022, of which more than 343 548 (73.5%) arrived from Central African Republic.									
Cameroon	Cholera	Grade 2	1-Jan-21	5-Aug-21	6-Feb-22	1 292	9	37	2,90%
Since the beginning of 2021 up to 6 February 2022, a total of 1 292 suspected cases of Cholera including 9 confirmed and 37 deaths (CFR 2.9%) 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	9-Mar-22	119 414	119 414	1 926	1,60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 9 March 2022, a total of 119 414 cases have been reported, including 1 926 deaths and 117 383 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-22	20-Feb-22	914	914	0	0,00%
From week 1, 2021 to week 7, 2022 (ending 20 February), the measles outbreak was declared in 39 health districts, of which 20 districts implemented local reactive vaccination campaigns. As of 20 February 2022, there are 27 health districts in active measles outbreak. Between week 1 of 2021 and week 7 of 2022, a total of 914 confirmed cases of measles were reported in Cameroon. Among these cases 75.3% are aged between 9 months and 9 years; 11.1% are infants under 9 months; 72.2% of cases are unvaccinated; 48.6% of unvaccinated cases are aged 9 to 59 months. No death reported so far in 2022. The last death case was reported in week 18 of 2021 (ending 9 May).									
Cameroon	Monkeypox	Ungraded	24-Feb-22	15-Dec-21	22-Feb-22	25	3	2	8,00%
On 15 December 2021, a case of monkey pox from Ayos Health District in the Central Region, Cameroon, was confirmed. As of 17 February 2022, 25 suspected cases of which three laboratory confirmed and two deaths have been reported from four Health Districts across three regions.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	16-Mar-22	10	10	0	0,00%
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-21	4-Jan-21	8-Mar-22	49	35	8	16,30%
From 1 January 2021 to 8 March 2022, a total of 46 cases of yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur Cameroun, of which eight deaths were recorded. These cases originated from ten different regions with a total of 30 health districts (HDs) affected: Adamaoua region, Central region, East region, Far North region, Littoral region, North region, North-West region, South region, South-West 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	19-Mar-22	55 925	55 925	401	0,70%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 19 March 2022, a total of 55 925 confirmed COVID-19 cases including 401 deaths and 55 457 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	31-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 652 036 people that are internally displaced as of 30 Jan 2022 and 202 908 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	14-Mar-22	14 339	14 339	113	0,80%
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 14 March 2022, a total of 14 339 confirmed cases, 113 deaths and 14 198 recovered were reported.									
Central African Republic	Monkeypox	Ungraded	3-Mar-22	4-Mar-22	4-Mar-22	4	2	2	50,00%
The Central African Republic recorded four cases of monkeypox, including 2 deaths, during epidemiological week 8, in the health districts of Mbaïki and Bimbo. The epidemiological investigation is ongoing.									
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-21	15-Feb-22	17	9	1	5,90%
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). As of 15 February 2022, a total of 17 probable cases (IgM positive) were reported of which nine were confirmed at the regional reference laboratory.									

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-Mar-22	7 267	7 267	190	2,60%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 14 March 2022, a total of 7 267 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	0,50%
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 (57.0%) 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	31-Jan-22	171	15	14	8,20%
Since 1 January 2018, a total of 171 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai) and 14 deaths (CFR 8.2%). 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%). From 1 December 2021 to 31 January 2022, 10 new cases have been reported with no death.									
Chad	Measles	Ungraded	24-May-18	1-Jan-22	13-Feb-22	132	4	0	0,00%
Since the beginning of 2022, a total of 132 suspected measles cases, 4 confirmed IgM positive and zero death have been reported in 36 out of 139 health districts for the country, the N'Djamena Sud health district is in outbreak since January 2022; 6 health districts are in a suspected outbreak situation at week 6 (ending 13 February) while waiting for laboratory confirmation: Ndjamen Center, Ndjamen North, Dourbali, Moissala, Oum Hadjer and Adré. In 2021, a total of 2 577 suspected measles cases, 278 confirmed and 18 deaths (CFR 0.7%) were reported in Chad.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	16-Mar-22	114	114	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. 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	15-Feb-22	72	35	0	0,00%
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 positive by polymerase chain reaction (PCR), six were IgM positive with cross-reactions with other flaviviruses, and six other IgM positive without cross-reactions. As of 8 March 2022, a total of 72 yellow fever IgM positive cases were reported from seven provinces (Mandoul, Guéra, Mayo Kebbi Ouest, Moyen Chari, and le Lac), including nine confirmed cases by PCR and 26 by plaque reduction neutralization test (PRNT).									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	19-Mar-22	8 076	8 076	160	2,00%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 19 March 2022, a total of 8 076 confirmed COVID-19 cases, including 160 deaths and 7 901 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	17-Mar-22	24 000	24 000	384	-
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 17 March 2022, a total of 24 000 cases including 384 deaths and 23 405 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	16-Mar-22	4	4	0	0,00%
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	19-Mar-22	81 655	81 655	796	1,00%
Since 11 March 2020, a total of 81 655 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 796 deaths, and a total of 80 805 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	16-Mar-22	64	64	0	0,00%
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-21	15-Feb-22	43	13	0	0,00%
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 15 February 2022, a total of 43 cases tested IgM positive of which 13 were confirmed by PRNT.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	6-Mar-22	-	-	-	-
As of 6 Mar 2022, there are an estimated 5.5 million people internally displaced, 533 204 new refugees and asylum seekers, 2.8 million returnees, and 27 million people need emergency food assistance in the entire country. Additionally, 8.9 million need health assistance. A total of 27 security incidents directly affecting humanitarian personnel or property were reported in Jan 2022. One aid worker was killed, six abducted and three injured. In Irumu territory, 9 of the 18 health areas in the Gethy health zone have hosted more than 72K displaced people from Boga, Komanda and Nyankunde health zones since last year. A total of 1 889 895 displaced persons have been registered in this province as of 7 March 2022. Nearly 1.2 million of these displaced people live in sanitation areas not supported by health sector partners and face significant difficulties in accessing primary health care.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-22	20-Feb-22	2 168	-	27	1,20%
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	12-Mar-22	86 462	86 460	1 335	1,50%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 86 460 confirmed cases and two probable case, including 1 335 deaths have been reported. A total of 64 656 people have recovered.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	20-Feb-22	13 189	338	268	2,00%
From Week 1 to Week 7 of 2022 (ending 20 February), a total of 13 189 suspected measles cases and 268 deaths (CFR 2.0%), were reported in 214 health districts. A total of 544 cases were investigated, with 338 positives (IgM+) for measles of which 55.9% were children under 5 years and 79% of these children had unknown vaccination status. The outbreak has been confirmed in 20 out of 26 provinces for the country since the beginning of 2022 with a total of 64 health districts in outbreak. The majority of suspected measles cases (8 696/13 189 cases or 65.9%) were reported from five provinces including Haut-Katanga (2 421 cases or 18.4%), Maniema (2 415 cases or 18.3%), Sankuru (1 563 cases or 11.9%), Sud-Ubangi (1 173 cases or 8.9%) and Haut-Lomami (1 124 cases or 8.5%). The preparation of a response activities including vaccination is underway in four health areas of the health district of Miabi (Kasaï-Oriental province), in the health district of Manono (Tanganyika province), the health district of Nundu (South Kivu province) as well as in the health districts of the capital city Kinshasa. The vaccination around cases is also ongoing in the several health districts with confirmed outbreak.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	6-Mar-22	10 011	39	342	3,40%
During week 9 of 2022, a total of 75 cases and 2 deaths due to monkeypox were reported. Between epidemiological weeks 1-9 of 2022, 704 cases have been reported with 37 deaths (CFR 5.3%). Compared to weeks 1-9 in 2021, 754 cases were reported with 24 deaths (CFR 3.2%). 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	6-Mar-22	600	-	45	7,50%
During week 9 of 2022, no plague cases were reported. Between epidemiological weeks 1-9 of 2022, 1 case of plague has been reported with no deaths. Compared to weeks 1-9 in 2021, 70 cases were reported with 1 death (1.4% CFR). 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-21	1-Jan-21	16-Mar-22	31	31	0	0,00%
Three cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Maniema; one being from 2021 and two from 2022. There are now three cases in 2022 and 28 cases from 2021									
Democratic Republic of the Congo	Suspected Anthrax	Ungraded	17-Feb-22	17-Feb-22	17-Feb-22	11	-	2	18,20%
Suspected cases of anthrax were notified in the Kalonge health zone, Kalehe territory not far from the Kahuzi Biega national park. On 30 January 2022, a family prepared guinea pig meat to serve a visitor. A total of 11 people from three different families ate this meat. All 11 people who ate the meat presented a clinical picture made diarrhoea, vomiting, abdominal pain, fatigue, and dehydration. Two people, one of 12 years old and another of 15 years old, died the same day (CFR 18.2%) presenting severe dehydration. Nine people among the 11 were admitted, recovered, and discharged from the hospital. The results of the laboratory analysis carried out are still awaited. Currently, a team from the regional ministry of health is in the affected health zone for in-depth investigation.									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	20-Feb-22	254 035	-	82	0,00%
In 2022, from epidemiological week 1 to 7 (ending 20 February 2022), 254 035 suspected cases of typhoid fever including 82 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-21	21-Apr-21	8-Mar-22	8	8	0	0,00%
On 18 July 2021, two yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Centre Pasteur in Cameroon (CPC). The first case is a 34-year-old male from the Abuzi health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. As of 8 March 2022, a total of eight PRNT positive cases have been reported.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	17-Mar-22	15 802	15 802	183	1,20%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 17 March 2022, a total of 15 802 cases have been reported in the country with 183 deaths and 15 688 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	20-Mar-22	9 723	9 723	103	1,10%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 20 March 2022, a total of 9 723 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 619 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	20-Mar-22	69 552	69 552	1 392	2,00%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 20 March 2022, a total of 69 552 cases have been reported in the country including 68 131 recoveries. A total of 1 392 associated deaths have been reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Drought/food insecurity	Grade 2	17-Feb-22	1-Jan-22	31-Jan-22	-	-	-	-
Ethiopia is experiencing a prolonged drought after three consecutive failed rainy seasons since late 2020 affecting 6.8 million people living in Oromia, SNNP (Southern Nations, Nationalities, and Peoples), Southwest and Somali: several areas in southern and southeastern Ethiopia, including in the regions of Somali (10 zones), Oromia (8 zones), Southwest (1 zone) and SNNP (7 zones).									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	24-Feb-22	-	-	-	-
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. Humanitarian organizations have airlifted 97 metric tonnes of medical supplies to Mekelle, Tigray, since 24 January 2022. However, any partners have scaled-down operations due to the lack of supplies and resources.									
Ethiopia	Chikungunya	Ungraded	17-Feb-22	12-Jan-22	9-Feb-22	311	3	0	0,00%
On 17 January 2022, Chikungunya Outbreak was confirmed in Dolo ado district of Liben zone, Somali region. A total of 311 suspected cases are reported, of which three cases were confirmed by PCR at Ethiopian Public Health Institute (EPHI) laboratory. No deaths were reported.									
Ethiopia	Cholera	Grade 2	31-Aug-21	31-Aug-21	31-Jan-22	674	2	7	1,00%
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	20-Mar-22	469 455	469 455	7 489	1,60%
Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 469 455 cases of COVID-19 as of 21 March 2022, with 7 489 deaths and 421 638 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-22	9-Feb-22	1 590		13	0,80%
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 1 590 cases and 13 deaths (case fatality ration (CFR)= 0.8%) reported from these 3 regions. As of 9 February 2022, the SNNPR region has reported more cases with 1 005 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-19	20-May-19	20-Mar-22	75	75	0	0,00%
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.									
Ethiopia	Suspected Meningitis	Ungraded	17-Feb-22	12-Dec-21	6-Mar-22	1 291		13	1,00%
Between week 49 of 2021 ending 12 December and week 9 of 2022 ending 6 March, a cumulative number of 1 291 suspected cases of meningitis and 13 deaths (CFR 1.0 %) were reported. In general, these five (Oromia, Somali, SNNPR, Amhara & Harari) regions accounted for 88.5% (1143 cases) among total suspected meningitis cases. Investigations are still ongoing including laboratory confirmation of meningitis.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	13-Mar-22	47 570	47 570	303	0,60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 13 March 2022, a total of 47 570 cases including 303 deaths and 47 244 recoveries have been reported in the country.									
Gabon	Yellow fever	Ungraded	12-Feb-22	17-Sep-21	15-Jan-22	2	1	1	50,00%
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.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	16-Mar-22	11 978	11 978	365	3,00%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 16 March 2022, a total of 11 978 confirmed COVID-19 cases including 365 deaths, and 11 601 recoveries have been reported in the country.									
Ghana	Explosion accident	Ungraded	20-Jan-22	20-Jan-22	27-Jan-22	388		13	3,40%
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. On 20 January 2022, 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. As of 27 January 2022, total of 388 persons were seen in the health facilities with about 319 treated as outpatients and 19 admitted.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	16-Mar-22	160 819	160 819	1 445	0,90%
As of 16 March 2022, a total of 160 819 confirmed COVID-19 cases have been reported in Ghana. There have been 1 445 deaths and 159 307 recoveries reported.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	20-Mar-22	31	31	0	0,00%
No cases have been reported in 2022 nor 2021, 12 cases were reported in 2020, and 19 were reported in 2019.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ghana	Yellow fever	Grade 2	3-Nov-21	15-Oct-21	15-Feb-22	158	71	11	7,00%
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 8 March 2022, a total of 744 yellow fever suspected cases including 158 probable (IgM positive) and 71 confirmed cases were reported from 13 regions in Ghana.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	18-Mar-22	36 455	36 455	440	1,20%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 18 March 2022, a total of 36 455 cases including 35 977 recovered cases and 440 deaths have been reported in the country.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-22	13-Mar-22	10 809	207	16	0,10%
Since the beginning of 2022 up to week 10 (ending 13 March), a total of 10 809 measles suspected cases with 207 confirmed and 16 death (CFR 0.1 %) have been reported in Guinea through IDSR.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	16-Mar-22	50	50	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases 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	18-Mar-22	8 113	8 113	169	2,10%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 18 March 2022, the country has reported 8 113 confirmed cases of COVID-19 with 7 095 recoveries and 169 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	20-Mar-22	4	4	0	0,00%
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	Acute Respiratory Illness (ARI)	Ungraded	21-Feb-22	1-Dec-20	20-Feb-22	635	635	7	1,10%
On 10 February 2022, Nakuru county notified increased reports of acute respiratory infections among children to the national authorities. The highest number of cases were reported from Nakuru East sub-county accounting for 380 (61.0%) cases followed by Nakuru West which had 82 (13.0%). The median age of the confirmed cases was 15 months, with the youngest being 0.1 months and the oldest 60 months. Males were more affected by the disease (60.4%). Transmission has been sustained since the beginning of December 2021 and has thus far peaked around 10 February 2022. Field investigations and laboratory analysis are currently being conducted.									
Kenya	Chikungunya	Ungraded	3-Mar-22	13-Feb-22	23-Feb-22	44	2	0	0,00%
Chikungunya outbreak has been reported in Wajir County, Tarbaj sub county in Kutulo village. A total of forty four (44) cases have been reported with two (2) confirmed cases. Case search in all health facilities, health education to the health care workers and the community is ongoing in the sub county.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	20-Mar-22	323 281	323 281	5 647	1,70%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 21 March 2022, 323 281 confirmed COVID-19 cases including 5 647 deaths and 317 581 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	3-Mar-22	1-Jan-21	23-Feb-22	2 359	1 966	2	0,10%
The outbreak has been reported in two Counties, Mombasa and Mandera. The cases are spread from 2021 in both Counties. In Mandera, the reported cases are from Mandera east sub county while in Mombasa, six sub-counties (Nyali, Mvita, Kisauni, Nyali, Liikoni and Jomvu) have been affected. As of 23 February 2022, a total of 2 359 cases with two deaths have been reported.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	6-Feb-22	1 537	1 356	10	0,70%
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-21	10-Feb-21	20-Mar-22	3	3	0	0,00%
No cVDPV2 positive environmental sample was reported this week. There was one cVDPV2 positive environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia.									
Kenya	Yellow fever	Grade 2	3-Mar-22	12-Jan-22	10-Mar-22	16	2	4	25,00%
On 4 March 2022, Kenya declared an outbreak of yellow fever in Isiolo County. As of 10 March 2022, there are a total of 15 suspect cases of yellow fever including four deaths reported from 12 January to 23 February 2022 in eight villages within three sub county of Isiolo county. Of the suspected cases, two were confirmed by PCR at the Kenya Medical Research Institute (KEMRI). Epidemiological and additional laboratory investigations are ongoing.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	12-Mar-22	32 775	32 775	697	2,10%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 12 March 2022, a total of 32 775 cases of COVID-19 have been reported, including 23 900 recoveries and 697 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	14-Mar-22	7 397	7 397	294	4,00%
From 16 March 2020 to 14 March 2022, Liberia has recorded a total of 7 397 cases including 294 deaths and 7 092 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	28-Feb-22	33	17	5	15,20%
Since the beginning of this year 2022 up to 28 February 2022, a total of 33 suspected cases of Lassa Fever including 17 confirmed and 5 deaths (CFR 15.2%) have been reported in Liberia. The confirmed cases have been reported from: Bong County (5 cases and 0 death) ; Grand Bassa County (5 cases and 1 death) and Nimba County (7 cases and 4 deaths). A total of 36 contacts are under follow up.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Liberia	Measles	Ungraded	3-Feb-22	1-Jan-22	27-Feb-22	461	359	2	0,40%
Cumulatively as of week 8 (ending 27 February 2022), 461 suspected cases have been reported with 359 (78%) confirmed (131 (36%) lab-confirmed (positive), 136 (38%) clinically compatible and 92 (26%) epidemiological linked). The following counties are currently in outbreak: Montserrado County (264 suspected cases reported including one death); Bong County (a total of 49 suspected cases reported including one death); Nimba County (a total of 67 suspected cases have been reported) and Maryland County (a total of 29 suspected cases have been reported with 9 confirmed).									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	20-Mar-22	3	3	0	0,00%
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	26-Feb-22	438 666		204	0,00%
Heavy rains in Madagascar from multiple weather systems (Tropical Storm Ana, Cyclone Batsirai, Tropical Storm Dumako, and Cyclone Emnati) have flooded parts of the country. The Tropical Storm Ana weather system affected the country during week 3 of 2022, while Cyclone Batsirai occurred in week 5, Tropical Storm Dumako occurred in week 7, and Cyclone Emnati occurred in week 8. As of 19 Feb 2022, there have been 131 549 victims affected including 55 deaths by the Tropical Storm Ana weather system in 12 regions. Damages from Cyclone Batsirai have been reported as of 16 Feb 2022 where 143 718 people have been affected causing 121 deaths mostly in the district of Ikongo of Fitovinany Region. As of 26 Feb 2022, 61 489 people have been displaced by the effects of Cyclone Batsirai. Damages by Tropical Storm Dumako have affected approximately 9 959 people including 14 deaths. A total of 4 323 people have been displaced. Cyclone Emnati has also affected the country causing 153 440 victims and 14 deaths as of 26 Feb 2022. There are currently 43 602 people who have been displaced in 12 regions.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-21	1-Jan-21	11-Mar-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 14 000 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. There are at least 470 000 people in urgent need of food assistance in Vatovavy, Fitovinany, and Atsimo Atsinanana regions according to the latest estimate established by the authorities after the passage of Cyclones Batsirai and Emnati. At least 60 000 hectares of rice fields have been flooded twice, with potentially significant consequences for the upcoming harvest in May. Cash crops such as cloves, coffee and pepper were also badly affected. It is estimated that 90 % of crops could be destroyed in certain areas of the affected regions.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	18-Mar-22	63 928	63 928	1 380	2,20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 18 March 2022, a total of 63 928 cases have been reported in the country, out of which 59 225 have recovered and 1 380 deaths reported.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-21	16-Mar-22	14	14	0	0,00%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. The number of 2021 cases remains 13. There is one case in 2022.									
Malawi	Floods	Grade 2	26-Jan-22	26-Jan-22	18-Mar-22	1 000 000		51	0,00%
Malawi is currently responding to the aftermath of the cyclone Ana and Gombe that occurred on 28 January 2022 and 13 March 2022 respectively. The disaster displaced a number of households, damaged household property, injuries as well as damage to infrastructure and caused several deaths in the southern part of the country. Approximately, more than 1 million people have been affected, death toll stands at 51 (46 due to tropical storm Ana, 5 due to cyclone Gombe).									
Malawi	Cholera	Ungraded	3-Mar-22	3-Mar-22	20-Mar-22	19	4	1	5,30%
The Malawian Ministry of Health declared a cholera outbreak on 3 March 2022. This was after a case was identified in a 53-years old business man, resident of Balaka district. He had onset of symptoms on 25 February 2022 and sought medical care at Muchinga District Hospital on 28 February 2022 where he was identified and a stool specimen was collected from him. Laboratory results by culture confirmed him positive for Cholera on 3 March 2022. As of 20 March 2022, Malawi has reported a total of 19 cholera cases.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	20-Mar-22	85 561	85 561	2 626	-
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 20 March 2022, the country has a total of 85 561 confirmed cases with 2 626 deaths and 77 682 recoveries.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-22	18-Mar-22	1	1	0	0,00%
One positive case of wild WPV1 was detected in Lilongwe from a patient with the date of onset of paralysis on 19 November 2021 confirmed by the National Institute for Communicable Diseases (NICD) reference laboratory.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	31-Jan-22	-	-	-	-
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. According to UNHCR there were 350 110 IDPs in the country and 52 833 refugees as of 31 Jan 2022. However, 84 307 returnees have come back to the country.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	20-Mar-22	30 453	30 453	727	2,40%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 20 March 2022, a total of 30 453 confirmed COVID-19 cases have been reported in the country including 727 deaths and 29 598 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-22	6-Mar-22	804	300	0	0,00%
From January 2022 to 6 March 2022, a total of 804 suspected cases of measles with 300 confirmed and 0 death have been reported in Mali through integrated disease surveillance and response (IDSR) system									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	16-Mar-22	52	52	0	0,00%
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	20-Mar-22	58 662	58 662	981	1,70%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 21 March 2022, a total of 58 662 cases including 981 deaths and 57 672 recovered cases have been reported in the country.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	8-Feb-22	8-Feb-22	14-Mar-22	6	6	2	33,30%
On 4 February 2022, a case of Crimean-Congo haemorrhagic fever (CCHF) was confirmed by polymerase chain reaction (PCR) 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 Kubeni and Nouakchott between 27 January and 4 February 2022. As of 14 March 2022, a total of six confirmed cases including two deaths and three recovered were reported.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	21-Feb-22	145 812	145 812	895	0,60%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 21 February 2022, a total of 145 812 confirmed COVID-19 cases including 895 deaths and 126 710 recovered cases have been reported in the country.									
Mozambique	Floods	Ungraded	24-Jan-22	26-Jan-22	12-Mar-22	200 000		15	0,00%
On 11 March 2022, a severe tropical cyclone Gombe made landfall over the coastal area of central Nampula province, with maximum sustained winds up to 190km/h. According to preliminary information from the national authorities, a total of 18 345 people have been affected, 20 people have been injured and another ten have been killed in Nampula province. These figures on the impact are expected to rise as widespread damage has occurred though in-depth assessments have not yet taken place. This cyclone Gombe follows tropical storm Ana which hit the country in January, and tropical depression Dumako which struck in February. Together, these previous storms have already affected more than 200 000 people in Nampula, Zambezia and Tete provinces.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	31-Jan-22	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. As of 31 Jan 2022, the nationwide estimate of people in need of humanitarian assistance is 1.3 million and more than 820K people are displaced by conflict.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	20-Mar-22	225 210	225 210	2 200	1,00%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 20 March 2022, a total of 225 210 confirmed COVID-19 cases were reported in the country including 2 200 deaths and 222 024 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	24-Feb-22	2 621	903	0	0,00%
Since 2021 up to 24 February 2022, the total cases of measles classified as positive are 903 including compatible and EPI link. The total number of suspected measles cases is 2 621 with 2 576 cases (896 confirmed) in 2021 and 45 cases (7 confirmed) in 2022. The outbreak is ongoing in Niassa province, Mandimba district.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	20-Mar-22	157 523	157 523	4 016	0,00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 20 March 2022, a total of 157 523 confirmed cases with 153 069 recovered and 4 016 deaths have been reported.									
Namibia	Typhoid fever	Ungraded	2-Mar-22	3-Mar-22	3-Mar-22	5	5	0	0,00%
The Ministry of Health confirmed a case of typhoid fever on 27th January 2022 in Windhoek. The index case is a 28-year-old female Namibian citizen and a resident of Windhoek in Samora Michael constituency, Goreagab section. The case reported on 27th of January 2022 at Intermediate Katutura hospital via causality department with a history of acute right abdominal pains, vomiting and high fever. As of 3 March 2022, 5 cases of typhoid fever have been confirmed in Windhoek. All contacts are asymptomatic.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	31-Jan-22	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2022. As of 31 Jan 2021, 264 257 people are internally displaced, 280 583 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.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	20-Mar-22	8 794	8 794	308	3,50%
From 19 March 2020 to 20 March 2022, a total of 8 794 cases with 308 deaths have been reported across the country. A total of 8 468 recoveries have been reported from the country.									
Niger	Meningitis	Ungraded		1-Jan-21	16-Jan-22	1 688	-	76	4,50%
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	16-Mar-22	15	15	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2021 cases remains at 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	31-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 Jan 2021, there were 77 885 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.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	27-Feb-22	701		19	2,70%
From epidemiological week 1 to week 8, 2022 (27 February) , a total of 701 suspected cases including 19 deaths (CFR 2.7%) have been reported from 12 states and FCT. Of the suspected cases, the less than 5 years age group is the most affected, while 47% are males and 53 % are females. Three states-Taraba (242 cases), CrossRiver (111), Borno (91 cases), Bayelsa (76) and Adamawa (56 cases) account for 82% of all cumulative cases.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	18-Mar-22	255 103	255 103	3 142	1,20%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 18 March 2022, a total of 255 103 confirmed cases with 249 460 recovered and 3 142 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	1-Jan-21	1-Jan-21	13-Feb-22	868	868	161	18,50%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 6 of 2022, the number of new confirmed cases was 77. These were reported from Ondo, Edo, Bauchi, Ebonyi, Taraba, Enugu, Benue, Kogi, Nasarawa, and Niger States and the FCT. Cumulatively from week 1-6 of 2022, a total of 358 confirmed cases including 59 deaths among confirmed cases have been reported with a case fatality rate of 16.5% across 19 states. In total, 1 631 cases are suspected in 2022. This is higher than the same period reported in 2021. Of all confirmed cases, 73% are from Edo (32%), Ondo (23%) and Bauchi (18%) States.									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	28-Feb-22	111	38	0	0,00%
According to the Nigeria Centre for Disease Control (NCDC), from Jan-Feb 2022, 13 cases of suspected monkeypox were reported, of which 4 have been confirmed and no deaths have occurred. 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-18	1-Jan-18	20-Mar-22	476	409	0	0,00%
In 2022, 3 cVDPV2 case and 8 environmental samples have been reported. There were 415 cVDPV2 cases and 18 environmental samples reported in 2021.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	30-Dec-21	2 053	42	2	0,10%
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	20-Mar-22	129 647	129 647	1 459	1,10%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 20 March 2022, a total of 129 647 cases with 1 459 deaths and 128 124 recovered cases have been reported in the country.									
Sahel region	Humanitarian crisis	Grade 2	11-Feb-22	-	11-Feb-22	-	-	-	
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.									
Sao Tome and Principe	Floods	Ungraded	30-Dec-21	30-Dec-21	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-20	6-Apr-20	20-Mar-22	5 941	5 941	73	1,20%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 20 March 2022, a total of 5 941 confirmed cases of COVID-19 have been reported, including 73 deaths. A total of 5 862 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	20-Mar-22	85 827	85 827	1 964	2,30%
From 2 March 2020 to 20 March 2022, a total of 85 827 confirmed cases of COVID-19 including 1 964 deaths and 83 827 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	16-Mar-22	17	17	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 17 cases reported in 2021.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	19-Mar-22	39 883	39 883	163	0,40%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 19 March 2022 a total of 39 883 cases have been confirmed, including 39 455 recoveries and 163 deaths have been reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sierra Leone	Mass fire incident	Ungraded	5-Nov-21	6-Nov-21	18-Jan-22	304	304	154	50,70%
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	20-Mar-22	7 674	7 674	125	1,60%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 20 March 2022, a total 7 674 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 816 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	9-Jan-22	17	15	9	52,90%
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 predominantly affected.									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	6-Mar-22	236		0	0,00%
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 72 cases have been recorded. All these cases have been investigated, line listed, and treatment given for accordingly. As of week 9 (ending 3 March 2022), a total of 236 suspected cases have been reported through Integrated disease surveillance and response (IDSR).									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	20-Mar-22	15	15		0,00%
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	20-Mar-22	3 704 218	3 704 218	99 881	3,40%
Since the start of the COVID-19 pandemic in South Africa through 20 March 2022, a cumulative total of 3 704 218 confirmed cases and 99 881 deaths have been reported with 3 589 451 recoveries.									
South Africa	Enteric Fever (typhoid)	Ungraded	22-Feb-22	16-Feb-22	16-Feb-22	163		0	0,00%
South African health authorities have reported that clusters (localized outbreaks) of enteric fever of typhoid have been identified in the country. As of 16 February, it is reported 64 cases in the Western Cape, in three separate outbreaks, 18 in Northwest, 45 in Gauteng, 12 in Mpumalanga, nine in KwaZulu-Natal, seven in the Eastern Cape, four in the Free State and four in Limpopo. No death reported so far. South Africa is endemic for enteric fever caused by Salmonella Typhi, although the prevalence of disease is much lower than most other countries in sub-Saharan Africa. The most recent large outbreak occurred in Delmas in 2005, with over 2 900 cases. After the Delmas outbreak in 2005, the number of enteric fever cases in South Africa has remained stable with less than 150 cases per year (an average of 97 cases per year).									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	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-21	1-May-21	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-16	n/a	27-Feb-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. In Unity State, fighting has escalated with issues arising in Mirmir Payam between the Sudan People's Liberation Army in Opposition and armed youths spreading to several villages in Koch, Mayiandit and Leer. Since February, civilians have been killed, raped, injured and forced to flee their homes. In Eastern Equatoria State there have been sporadic clashes between farming communities and herders in Magwi causing some 3K people to flee their homes and farms in Chomboro village.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	20-Mar-22	17 137	17 137	138	0,80%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 20 March 2022, a total of 17 137 confirmed COVID-19 cases were reported in the country including 138 deaths and 13 507 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	27-Feb-22	2 167	104	16	0,70%
The current outbreak in the Bentiu IDP camp is ongoing. As of 27 February 2022, a total of 2 167 cases of hepatitis E including 16 deaths (CFR: 0.7%) have been reported since January 2019. Hepatitis E cases have been above the epidemic threshold since week 19 of 2021. There were 71 new Hepatitis E cases in week 8, 2022.									
South Sudan	Malaria	Ungraded	28-Dec-21	1-Jan-22	20-Feb-22	430 157	430 157	61	0,00%
Between weeks 1-7 of 2022 (ending 20 February), 430 157 malaria cases including 61 deaths have been reported in South Sudan. Cases in Warrap, Western Bahr el Ghazal, and Northern Bahr el Ghazal States in 2022 are high when compared to the corresponding period of 2021. In 2021, a total of 3 749 210 malaria cases including 2 963 deaths were reported. Several upsurges occurred in the country in 2021 including the counties of Fangak.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	Measles	Ungraded	23-Feb-22	1-Jan-22	6-Mar-22	209		2	1,00%
Measles outbreak has been declared in South Sudan by health authorities on 23 February 2022 in two counties of Torit and Maban and later the outbreak was also confirmed in Tambura County. These three counties are from Eastern Equatoria, Upper Nile and Western Equatoria States respectively. As of week, 9 (ending 6 March 2022), a total of 209 measles cases and 2 deaths (case fatality ratio (CFR)= 0.9%) have been reported. Most cases are children under five years old (59.3%) and males are most affected (53.0%) than female (47.0%).									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	20-Mar-22	59	59	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were 9 cVDPV2 cases reported in 2021 and 50 in 2020.									
Tanzania, United Republic of	Cholera	Ungraded	13-Dec-21	13-Dec-21	19-Jan-22	30	-	4	13,30%
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	11-Mar-22	33 773	33 773	800	2,40%
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 11 March 2022, a total of 33 773 cases have been reported in Tanzania Mainland including 800 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	20-Mar-22	36 882	36 882	272	0,70%
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 20 March 2022, a total of 36 882 cases including 272 deaths and 36 565 recovered cases have been reported in the country.									
Togo	Lassa Fever	Ungraded	28-Feb-22	26-Feb-22	28-Feb-22	1	1	1	100,00%
A 35-year-old female died of Lassa fever complications in the Oti district of the Savanes region of Togo bordering Ghana. Onset of illness was 11 Feb 2022, she presented at three health facilities before her death on 26 Feb 2022. Retrospective investigation identified 26 contacts including 10 health care workers who had exposure to the case. As of 27 February 2022, 14 contacts provided samples for diagnostic testing for which all were reported negative for Lassa fever.									
Togo	Measles	Ungraded	2-Feb-22	25-Nov-21	27-Feb-22	441	134	0	0,00%
A measles outbreak has been declared by the Togolese health authorities on 9 February 2022 after confirmation at National Referral Laboratory for Epidemic prone Diseases. As of 27 February 2022, nine districts are experiencing the measles outbreak including Zio, Agoe, Golfe, Kpélé, Tchoudjo, Moyen-mono, Tone, Bassar and Lacs with a cumulative number of 441 suspected cases, 134 confirmed and 0 death (CFR 0.0%). Zio district has reported more cases 213 out of 441 (48.3%) with 29 confirmed. The outbreak stated in November 2021 in the Zio district. Among the 134 confirmed cases reported, 205 (46.9%) are unvaccinated, 119 cases (27.0%) have unknown vaccination status									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	16-Mar-22	17	17	0	0,00%
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	0,10%
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	Anthrax	Ungraded	14-Feb-22	12-Feb-22	19-Feb-22	1	1	0	0,00%
A 46-year-old male cattle rancher presented with skin lesions on his left thumb for two days after contact with a dead bull in his kraal on 28 January 2021. Previously, there had been three cattle deaths in the same kraal within a week. Samples taken tested positive for anthrax by polymerase chain reaction (PCR).									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	17-Mar-22	163 646	163 646	3 595	2,20%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 17 March 2022, a total of 163 646 confirmed COVID-19 cases, 100 134 recoveries with 3 595 deaths.									
Uganda	Rift Valley fever	Ungraded	14-Jan-22	12-Jan-22	4-Mar-22	5	5	1	20,00%
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 4 March 2022, a total of five confirmed cases of RVF have been recorded.									
Uganda	Unknown disease	Ungraded	3-Mar-22	14-Feb-22	21-Feb-22	56	56	-	-
Following a rumor that there was a strange disease in Namutumba District, Uganda, that killed about 70 children who presented with fever, hematuria, and anemia and then died, the surveillance team verified the rumor. Of the 56 samples collected, all tested positive for malaria by the rapid diagnostic test and 32 by microscopy (57%). Based on the preliminary results of the blood samples examined and the clinical assessment of the cases, the probable cause of this illness is malaria. However, further testing is underway to rule out other causes.									
Uganda	Yellow fever	Grade 2	3-Mar-21	1-Mar-22	16-Mar-22	8	8	0	0,00%
On 6 March 2022, the Uganda Ministry of Health reported four cases of yellow fever confirmed by plaque reduction neutralization test (PRNT) at the Uganda Virus Research Institute (UVRI), with specimens collected between 3 January 2022 and 18 February 2022. Three cases are from Wakiso district (Katabi, Masulita, and Kitende sub-counties) and one case is from Masaka district (Bukakata sub-county). As of 16 March 2022, a total of eight PRNT positive cases were reported, of which seven have been investigated and four have a history of vaccination against yellow fever.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	20-Mar-22	315 623	315 623	3 962	1,30%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 20 March 2022, a total of 315 623 confirmed COVID-19 cases were reported in the country including 3 962 deaths and 310 706 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	1-Jan-22	22-Jan-22	22	0	0	0,00%
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	0,00%
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 analysed 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	20-Mar-22	244 519	244 519	5 427	2,20%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 20 March 2022, a total of 244 519 confirmed COVID-19 cases were reported in the country including 5 427 deaths and 234 547 cases that recovered.									

†Grading is an internal WHO process, based on the Emergency Response Framework. For further information, please see the Emergency Response Framework: <http://www.who.int/hac/about/erf/en/>.

Data are taken from the most recently available situation reports sent to WHO AFRO. Numbers are subject to change as the situations are dynamic.

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