WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 20: 9 – 15 May 2022 Data as reported by: 17:00; 15 May 2022

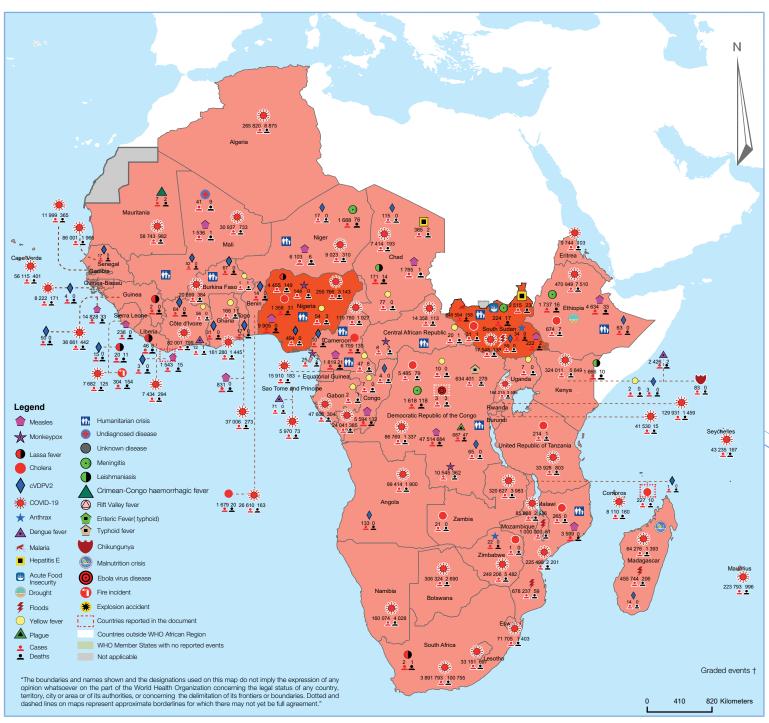


New event

151
Ongoing events

133
Outbreaks

19
Humanitarian crises



Grade 3 events

Protracted 3 events

Grade 2 events

4 Protracted 2 events Grade 1 events

Protracted 1 events

50
Ungraded 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 152 events in the region. This week's articles cover:

- Ebola Virus Disease in the Democratic Republic of the Congo
- OVID-19 across the WHO African region
- Cholera in Malawi

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:

- No new confirmed case of Ebola virus disease has been reported from the Democratic Republic of the Congo for almost two weeks since the last confirmed case was identified. However, the source of the current outbreak is still under investigation. Despite the rapid public health response mounted by the government and partners, challenges around vaccine hesitancy, limited Infection prevention and control infrastructure, and funding constraints persist. It is critical that these challenges are addressed quickly to control the outbreak or prevent any flare-up of the situation.
- Recent tropical storm and cyclone in the Southern Africa amidst limited water sanitation and hygiene infrastructure has fuelled the ongoing outbreak of cholera in Southern Malawi. Health authorities need to race against time to contain the outbreak as cases are on the rise. Strengthened surveillance and response measures including cross-border collaboration are critical in the current context of this cholera outbreak and must be enhanced.

Ongoing events

Ebola Virus Disease

Democratic Republic of the Congo

3 cases **Deaths**

100% **CFR**

EVENT DESCRIPTION

There was no new confirmed case of Ebola virus disease (EVD) reported in the DRC in the past week. The last confirmed case was notified on 4 May 2022. However, the EVD outbreak is still confined to the Mbandaka Health Zone, one of the three health zones of Mbandaka City in Equateur Province. Only two (13.3%) health areas of Libiki and Motema Pembe out of the 15 for Mbandaka health zone are affected.

As of 15 May 2022, a total of three confirmed cases with three deaths (case fatality ratio 100%) have been reported. Among the cases, two are males and one is female. Libiki Health Area has reported two cases while there is one from Motema Pembe Health Area.

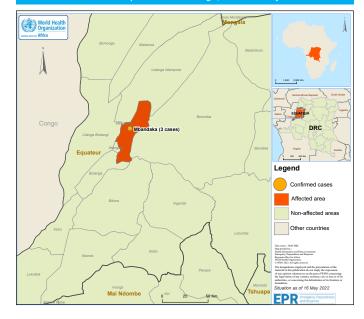
As of 15 May 2022, 295 contacts have been identified and are under follow-up. A total of 186 alerts have been notified and 176 (94.6%) investigated of which 26 (14.7%) were validated as suspected cases of EVD from which 23 samples have been collected. Of all 186 alerts, 33 are from active case finding, 78 from health facilities, 67 from the community, four from Pointsof-entry.

Of 258 samples collected and tested since the onset of the outbreak, three were confirmed positive for EVD.

PUBLIC HEALTH ACTIONS

- Public health response activities continue to be coordinated by the Provincial Health Division with technical and operational support from the national Ministry of Health, WHO, and partners.
- Surveillance activities continue with the reporting and investigation of alerts as well as tracing and follow-up of contacts of confirmed cases.
- Vaccination activities, which started since 27 April 2022, continue using the 'ring vaccination' strategy targeting contacts and contacts-of-contacts. A total of 733 persons have been vaccinated as of 15 May 2022. These include 439 frontline health workers. Functional ultra-cold chain is in place with 2 336 doses in stock (1200 in Kinshasa, 730 doses in Mbandaka and 406 in Goma).
- As of 15 May 2022, two suspected patients are treated at Wangata Ebola Treatment Center. In addition, seven suspects are isolated in health facilities of the Bolenge health zone (3) and Wangata (4).
- Infection prevention and control (IPC) activities are being implemented with provision of kits to health facilities, training of healthcare workers, and construction of IPC infrastructures in targeted facilities in the affected areas.
- Risk communication and community engagement activities for compliance to vaccination uptake and adherence to contact tracing measures continue with 5 567 households in the three health zones of Mbandaka City reached

Location of confirmed cases of Ebola virus disease in Equateur Province, Democratic Republic of the Congo, as of 15 May 2022



- Messaging on preventive measures against EVD and sexual exploitation and abuse continue to be disseminated through local community radio stations.
- Psychosocial support continued to be offered to unvaccinated contacts, orphans, members of the deceased family, and suspected cases.
- Screening of travelers continued at 16 points-of-entry established in the city of Mbandaka. Over 74 414 (90.5%) were screened among the 82 252 travelers who had been registered.

SITUATION INTERPRETATION

Almost two weeks have passed since the last EVD case was reported in the DRC. It is likely that the rapid public health response mounted by the government with support from WHO and partners is paying off to swiftly control this outbreak. However, challenges around vaccine hesitancy among the population, infection prevention and control infrastructure and compliance, and financial resources to maintain response efforts remain of concern. Health workers are also racing against time to identify the source of infection of this outbreak which remains crucial for a longer-term control of the disease. It is important that these identified challenges and gaps are quickly addressed to prevent any potential resurgence or spread of the outbreak.

Go to map of the outbreaks

EVENT DESCRIPTION

The number of weekly COVID-19 cases has risen for the fourth consecutive week as the COVID-19 pandemic continues to propagate in the African region. In the past week (week ending 15 May 2022), the number of new confirmed COVID-19 cases increased from 50 238 to 53 548, marking a 6.6% week-on-week increase. The majority of new cases (99%, n= 53 548) were reported from South Africa (50 405), Eswatini (603), Zimbabwe (591), Burundi (364), and Seychelles (277). The upward trend of cases reported from South Africa persisted for the fourth straight week while Eswatini and Namibia have also shown an upward trend in the number of weekly cases in the past two weeks.

COVID-19 associated deaths also increased by 39% over the past week in the African region with a total of 245 new deaths reported compared to 176 in the previous week. All new deaths were reported from seven countries namely, South Africa (232), Zimbabwe (5), Eswatini (3), Malawi (2), Namibia (2), Niger (1), and Seychelles (1).

Cumulatively, a total of 8.45 million cases with 171 153 deaths (case fatality ratio 2.0%) have been recorded in the WHO African region since the onset of the pandemic. The WHO African region which includes Sub-Saharan Africa and Algeria accounts of 71.8% and 67.5% of the African continent's cumulative 11.78 million cases and 253 405 deaths respectively reported since the onset of the pandemic.

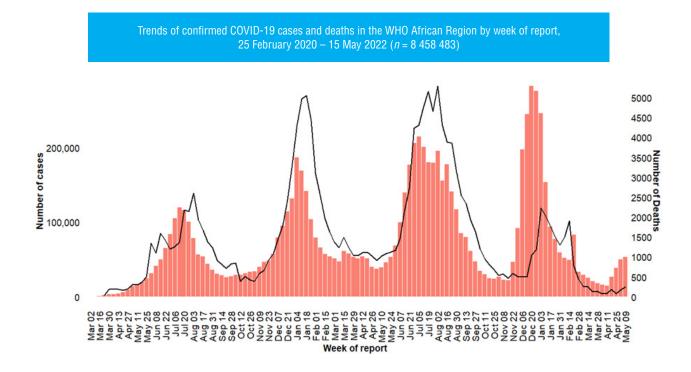
South Africa is the only country currently in resurgence following the sustained surge in the number of cases reported in the country over the past four weeks. Other countries on high alert include Burundi and Eswatini as they have recently experienced increased incidence of COVID-19 in recent weeks. Seychelles and Mauritius remain have a very high incidence considering the

number of cases per population.

The recent surge in cases is mainly driven by the resurgence of cases in South Africa and accounts for 94.1% of the new cases and 94.7% of the new deaths reported in the past week. New cases increased for the fourth consecutive week in South Africa with an 11% week-on-week rise in the past week. Deaths also rose by 45% (from 160 to 232). The countries fifth wave is driven by the highly transmissible BA.4 and BA.5 sub-lineages of the SARS-CoV-2 Omicron variant. Although all provinces in the country are reporting an increase weekly incidence of COVID-19 cases, Gauteng province remains at the epi-centre of the pandemic and reported the highest number of cases in the past week.

SITUATION INTERPRETATION

The surge in cases in the region has continued for the fourth consecutive week, driven by the transmission of the BA.4 and BA.5 sub-lineages of the Omicron variant in South Africa. The country has been classified as being in resurgence and the national authorities last week declared the onset of the fifth wave of the pandemic in South Africa. As observed in the previous wave driven by the parent Omicron variant, there is a decoupling of the number of admissions and deaths as they are not increasing at the same rate as observed with the COVID-19 cases. Nonetheless, close monitoring of trends and the number of hospitalizations is essential should the epidemiological outlook vary considerably. Furthermore, countries in the region, especially those neighbouring South Africa, should intensify preparedness measures including early warning surveillance systems to detect COVID-19 cases promptly, risk communication and community engagement, and vaccination of vulnerable populations.



EVENT DESCRIPTION

The outbreak of cholera in Malawi which was declared on 3 March 2022, continues to evolve with an increase in new cases over the past three consecutive weeks. The declaration came, following confirmation of the index case, a 57-year-old male from Southern Malawi, who developed watery diarrhoea on 28 February and sought care at a district hospital. Samples from the patient tested positive by culture and *Vibrio cholerae* 01, serotype Inaba was isolated on 2 March. The case had a history of travel to two cities – Blantyre and Machinga, prior to visiting the district hospital. Although an epidemiological investigation was carried out, the source of the infection was not identified.

On 7 March 2022, another case was identified involving an 11-yearold boy at a local health centre in Nsanje district. The case was displaced to Mozambique following floods caused by the tropical cyclone and returned to Malawi while symptomatic. Subsequently, several other cases have been reported in Nsanje and other districts, bordering Mozambique where cholera is endemic. The number of cases in rural areas of Malawi is also increasing.

As of 15 May 2022, a total of 242 cases with 10 deaths (CFR 4.1%) have been reported since the onset of the outbreak.

The cases have been reported from five districts: Nsanje (106), Blantyre (64), Neno (48), Chikwawa (22), and Machinga (2). The 10 deaths were registered from Nsanje (7), Blantyre (2), and Neno (1).

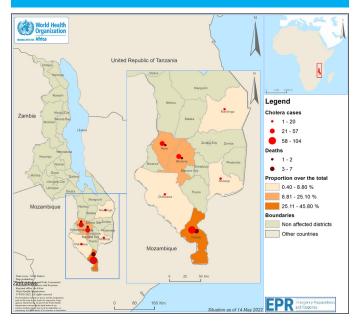
Sex and age distribution shows males and individuals aged 5-14 years as the most affected respectively. Currently 26 cases are on admission in the treatment centers and 169 cases discharges so far

PUBLIC HEALTH ACTIONS

The Ministry of Health and partners are supporting the implementation of the National Cholera Response Plan in Malawi with specific activities to control the ongoing Outbreak:

- National and district-level emergency operation centres (EOCs) were activated and are currently coordinating the response in collaboration with other health sectors and partners.
- Initial mapping of the high risk/ hotspot districts was conducted in late February 2022, after the landfall of a tropical storm, and an update was conducted on 25 March 2022.
- Cholera preparedness training was conducted from 21 to 22 April 2022 in Nsanje district.
- WHO provided cholera kits and other supplies to the affected districts.
- The International Coordination Group (ICG) on vaccine provision has approved a request of more than 3.8 million doses of oral cholera vaccine for reactive campaign targeting eight high-risk district. So far, over 1.9 million OCV doses have been shipped to the country for the first round of reactive vaccination campaign.
- Preparatory activities are ongoing for the first phase of the reactive OCV campaign which is expected to commence during

Distribution of Cholera cases in Malawi by District, as of 15 May 2022



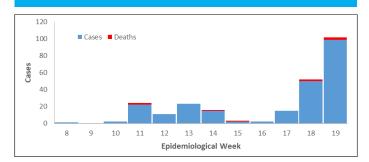
the third week of May 2022.

- Community sensitization on hand washing as well as provision of water purification tablets are ongoing.
- Surveillance activities including, trainings and active case search, for cholera and other diarrheal diseases have been enhanced in health facilities and communities.

SITUATION INTERPRETATION

The current cholera outbreak comes in the aftermath of the recent tropical storm Ana and cyclone Gombe that hit the Southern region of Malawi in February 2022. Plagued by poor water sanitation and hygiene (WASH) infrastructure, the region has been among the hotspots for cholera in the country with the floods exacerbating the situation. While reactive vaccinations have been planned and other public health response activities are ongoing, medium to long term interventions should focus on the investment in improving access to WASH infrastructures to prevent the recurrence of cholera and other food-and-water-borne disease outbreaks in the region.

Number of cholera cases by epidemiological week, Malawi, Week 1 to 19, 2022



Go to map of the outbreaks

Go to overview

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 | | | | | | | | | |
| South Africa | Lassa fever | Ungraded | 13-May-2022 | 14-May-2022 | 14-May-2022 | 2 | 1 | 1 | 50.0% |
| months precedi | nt of South Africa ing illness. He ent National Institute f ndex case | ered RSA on 25 / | April 2022 and wa | as hospitalized or | 1 May 2022 and | died on 6 May 2 | 022. The case wa | s tested positive | for Lassa fever |
| Ongoing Events | | | | | | | | | |
| Algeria | COVID-19 | Grade 3 | 25-Feb-2020 | 25-Feb-2020 | 15-May-2022 | 265 820 | 265 820 | 6 875 | 2.6% |
| From 25 Februa 374 cases have | ary 2020 to 15 Ma recovered. | y 2022, a total of | 265 820 confirm | ed cases of COV | ID-19 with 6 875 (| deaths (CFR 2.69 | %) have been rep | orted from Algeria | a. A total of 178 |
| Angola | COVID-19 | Grade 3 | 21-Mar-20 | 21-Mar-20 | 8-May-2022 | 99 414 | 99 414 | 1 900 | 1.9% |
| | i-19 confirmed cas 900 deaths and 97 | | | larch 2020. As of | 8 May 2022, a to | tal of 99 414 cor | nfirmed COVID-19 | ocases have beer | reported in the |
| Angola | Poliomyelitis (cVDPV2) | Grade 2 | 8-May-2019 | 1-Jan-19 | 24-Apr-2022 | 133 | 133 | 0 | 0.0% |
| | ulating vaccine-de 38. These cases a | | | | | e 3 cases reporte | d in 2020. The to | tal number of cas | es reported in |
| Benin | Cholera | Grade 1 | 28-Mar-21 | 28-Mar-21 | 13-Mar-22 | 1 679 | 46 | 20 | 1.2% |
| are reported. A | (ending 28 March decreasing trend ted age group is 1 | for nine consecu | tive weeks. Howe | ver, geographic e | xtension of the ou | ıtbreak to be con | | | |
| Benin | COVID-19 | Grade 3 | 17-Mar-20 | 16-Mar-20 | 3-May-2022 | 26 610 | 26 610 | 163 | 0.6% |
| | Health in Benin ar 3 deaths and 26 4 | | st confirmed case | of COVID-19 on | 16 March 2020. A | As of 3 May 2022 | , a total of 26 610 | cases have beer | reported in the |
| Benin | Poliomyelitis (cVDPV2) | Grade 2 | 8-Aug-2019 | 8-Aug-2019 | 24-Apr-2022 | 14 | 14 | 0 | 0.0% |
| | of circulating vacci ked to the Jigawa | | | PV2) were report | ed this week. Thre | ee cases were rep | oorted in 2021 an | d 2020, and 8 in | 2019. These |
| Botswana | COVID-19 | Grade 3 | 30-Mar-20 | 28-Mar-20 | 5-May-2022 | 306 324 | 306 324 | 2 690 | 0.9% |
| | 020, the Minister o s were reported in | | | | | of COVID-19. As | of 5 May 2022, a | total of 306 324 | confirmed |
| Burkina Faso | Humanitarian crisis | Grade 2 | 1-Jan-19 | 1-Jan-19 | 28-Feb-2022 | - | - | - | - |
| mass displacen Centre-Nord (35 insecure during | e security situation nent of 1 814 283 5.9%) and Sahel (1 the 2022 lean sea of 179 non function | internally displact 31.7%) regions. ason, with over 4 | ced persons as of According to OCI 36 000 in the pre | 28 Feb 2022. Th HA, 3.5 million Bu -famine phase. A | ere have been IDP urkinabe will need ccess to health se | es from all 13 reg humanitarian aid ervices remain a | gions, however, th d in 2022, includi challenge for the | ne majority have c ng 2.6 million sev | ome from verely food |
| Burkina Faso | COVID-19 | Grade 3 | 10-Mar-20 | 9-Mar-20 | 1-May-2022 | 20 899 | 20 899 | 384 | 1.8% |
| Between 9 Marc | ch 2020 and 1 Ma | y 2022, a total of | 20 899 confirme | d cases of COVID |)-19 with 384 dea | ths and 20 497 r | ecoveries have b | een reported from | Burkina Faso. |
| Burkina Faso | Poliomyelitis (cVDPV2) | Grade 2 | 1-Jan-20 | 1-Jan-20 | 24-Apr-2022 | 67 | 67 | 0 | 0.0% |
| | of circulating vacci breaks, one linked | | | | | | in 2021, and 65 | in 2020. The cour | ntry is affected |
| Burkina Faso | Yellow fever | Ungraded | 21-Apr-2022 | 1-Feb-2022 | 24-Apr-2022 | 1 | 1 | 1 | 100.0% |
| for yellow fever positive case is | 22, 105 samples to by plaque reducting a 45-year-old main and the patient die | ion neutralization le from Bagayiri v | test (PRNT) of th village, Boussé di | ne two IgM positi strict, Plateau Ce | ve samples shippe ntral Region, with | ed to Institut Pas history of yellov | teur in Dakar on | 29 March 2022. T | he PRNT |
| Burundi | COVID-19 | Grade 3 | 31-Mar-20 | 18-Mar-20 | 15-May-2022 | 41 530 | 41 530 | 15 | 0.0% |
| | 020, the Minister o , including 15 dea | | | irst two confirme | d cases of COVID | -19. As of 15 Ma | y 2022, the total | number of confire | med COVID-19 |





| Country | Event | Grade | Date notified to WCO | Start of reporting period | End of reporting period | Total cases | Cases Confirmed | Deaths | CFR |
|---|--|--|--|---|--|--|---------------------------------------|---|-----------------------------------|
| Cameroon | Humanitarian crisis (Far North, North, Adamawa & East) | Protracted 2 | 31-Dec-2013 | 27-Jun-2017 | 11-May-2022 | - | - | - | - |
| According to UI of 30 April 2022 | | reports, an estima | nted 1 942 054 p | eople need assist | ance, 357 631 pe | ople are internally | / displaced and 1 | 35 257 people ar | e returnees, as |
| Cameroon | Humanitarian crisis (NW & SW) | Protracted 2 | 1-0ct-16 | 27-Jun-2018 | 11-May-2022 | - | - | - | - |
| such as traditio attacks. There h | nal leaders, schoo nas been an increa | estimated 579 13 ol staff, students, ase in the use of in tion, there are 478 | and humanitaria mprovised explo | n workers are still sive devices (IEDs | l being reported. s), carjacking, and | Schools resumed d clashes betweer | session, but tead security forces | chers and student and NSAGs, leadi | s are still facing |
| Cameroon | Cholera | Grade 2 | 1-Jan-21 | 25-0ct-21 | 2-May-2022 | 6 759 | 293 | 135 | 2.0% |
| Cameroon from cases, no death in five regions (| South-West (4 7), and North (15 (| 2, a total of 6 759 '25 cases, 78 deat cases, no death) r lorth, South, Sout | hs), Littoral (1 7 egions. There ha | 04 cases, 51 deat s been a geograp | ths), South (183 o hical expansion o | cases, two deaths of the outbreak sir |), Centre (125 ca nce March 2022 a | ses, four deaths) and the outbreak l | , Far North (8 nas been active |
| Cameroon | COVID-19 | Grade 3 | 6-Mar-20 | 6-Mar-20 | 6-Apr-2022 | 119 780 | 119 780 | 1 927 | 1.6% |
| | | announced the c and 117 791 reco | | e first COVD-19 o | case on 6 March 2 | 2020. As of 6 Apr | il 2022, a total of | 119 780 cases h | ave been |
| Cameroon | Measles | Ungraded | 2-Apr-2019 | 1-Jan-22 | 10-Apr-2022 | 1 819 | 688 | 21 | 1.2% |
| 1.2%) have bee 663 cases inves | n reported in Can stigated with bloo | g 10 April), throug neroon through IC d samples ; 408 c % known to have r | OSR database. Ar ases confirmed I | nong 688 confirn by epi linkage; an | ned cases, 250 lg d 30 compatible o | M+ for measles (| 37.8 positivity); 8 | I tested IgM+ for | rubella out of |
| Cameroon | Monkeypox | Ungraded | 24-Feb-2022 | 15-Dec-2021 | 22-Feb-2022 | 25 | 3 | 2 | 8.0% |
| | | monkey pox fron ned and two death | | | | | | uary 2022, 25 su | spected cases |
| Cameroon | Poliomyelitis (cVDPV2) | Grade 2 | 1-Jan-20 | 1-Jan-20 | 4-May-2022 | 10 | 10 | 0 | 0.0% |
| No case of circu | ulating vaccine-de | erived poliovirus ty | /pe 2 (cVDPV2) v | was reported this | week. There are | three cases repor | ted in 2021 and s | even cases in 20 | 20. |
| Cameroon | Yellow fever | Grade 2 | 7-Feb-2021 | 4-Jan-21 | 10-Apr-2022 | 47 | 35 | 8 | 17.0% |
| Pasteur in Cam | eroun, of which e | 2022, a total of 4 ight deaths were in, Far North region. | recorded. These | cases originated t | from ten different | regions with a to | tal of 30 health d | istricts affected: / | Adamaoua |
| Cape Verde | COVID-19 | Grade 3 | 19-Mar-20 | 18-Mar-20 | 14-May-2022 | 56 115 | 56 115 | 401 | 0.7% |
| | | se was reported in the | | 19 March 2020. / | As of 14 May 202 | 2, a total of 56 11 | 5 confirmed CO\ | /ID-19 cases incl | uding 401 |
| Central African Republic | Humanitarian crisis | Protracted 2 | 11-Dec-2013 | 11-Dec-2013 | 5-May-2022 | - | - | - | - |
| internally displa | iced as of 31 Mar | million people (63 2022 mostly hos ins are still the ma | ted in Ouaka, Ou | ham-Pende, Bass | e-Kotto, and Ouh | am Prefectures. | There are also 73 | 8K persons who a | re refugees |
| Central African Republic | COVID-19 | Grade 3 | 14-Mar-20 | 14-Mar-20 | 24-Apr-2022 | 14 358 | 14 358 | 113 | 0.8% |
| | | ation announced 113 deaths and 1 | | | 0-19 case in the C | entral African Re | public on 14 Mar | ch 2020. As of 24 | April 2022, a |
| Central African Republic | Monkeypox | Ungraded | 3-Mar-22 | 4-Mar-22 | 10-Apr-2022 | 6 | 6 | 2 | 33.3% |
| The Central Afri | : can Republic reco of Mbaïki and Bin | : orded six confirmonbo. | ed cases of monl | keypox including | two deaths betwe | en epi week 8 an | d epi week 13 (er | nding 10 April 202 | 22), in the |
| Central African Republic | Yellow fever | Grade 2 | 14-Sep-21 | 1-Apr-2021 | 10-Apr-2022 | 20 | 10 | 1 | 5.0% |
| On 3 August 20 neutralization te | | -old girl from Mal Pasteur Cameroun | | | | | | | |

| 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 | 9-May-2022 | 7 414 | 7 414 | 193 | 2.6% |
| The first COVID including 193 c |)-19 confirmed cas leaths. | se was reported i | n Chad on 19 Ma | rch 2020. As of 9 | May 2022, a tota | al of 7 414 confirr | ned COVID-19 ca | ses were reporte | d in the country |
| Chad | Leishmaniasis | Ungraded | 8-Sep-20 | 16-0ct-20 | 31-Jan-22 | 171 | 15 | 14 | 8.2% |
| the country reg | y 2018, a total of 1 istered 74 cases in nber 2021 to 31 Ja | ncluding 4 deaths | s. Since the begin | ning of 2021 up t | to 30 November 2 | | | | |
| Chad | Measles | Ungraded | 24-May-2018 | 1-Jan-22 | 24-Apr-2022 | 1 785 | 51 | 1 | 0.1% |
| out of which 51 5 that were invedistricts are in | of 2022 (ending 2 I tested IgM+ (15% estigated had recei suspected outbrea o Centre Pasteur o | % positivity) ; 219 ived at least 1 do k (more than 5 re | % of confirmed case of Measles vac eported cases/mo | ases are children ccine; 5 districts v onth); challenges | below 5 years of with confirmed or in laboratory inve | age and another authreaks, including stigations due to | 24% between 5-9 g 3 out of the 5 d lack of test kits. A |) years; 51% of cl listricts in Ndjame A total of 128 spe | nildren below ena ; 21 other |
| Chad | Poliomyelitis (cVDPV2) | Grade 2 | 18-Oct-19 | 9-Sep-19 | 11-May-2022 | 115 | 115 | 0 | 0.0% |
| reported in 202 | of circulating vacci O from three differ cases reported in | rent outbreaks. T | here were 9 cases | s reported in 201 | | | | | |
| Chad | Yellow fever | Grade 2 | 13-Nov-21 | 1-Nov-21 | 10-Apr-2022 | 77 | 35 | 0 | 0.0% |
| positive by poly As of 10 April 2 | er 2021, the Institu merase chain read 2022, a total of 77 confirmed cases b | ction (PCR), six v yellow fever IgM | vere IgM positive positive cases we | with cross-reacti ere reported from | ions with other fla seven provinces | aviviruses, and six | other IgM posit | ive without cross- | -reactions. |
| Comoros | COVID-19 | Grade 3 | 30-Apr-2020 | 30-Apr-2020 | 14-May-2022 | 8 110 | 8 110 | 160 | 2.0% |
| | f confirmed COVIE veries were report | | |) in Comoros. As | of 14 May 2022, | a total of 8 110 c | onfirmed COVID- | 19 cases, includi | ng 160 deaths |
| Congo | COVID-19 | Grade 3 | 14-Mar-20 | 14-Mar-20 | 24-Apr-2022 | 24 041 | 24 041 | 385 | - |
| | nt of Congo annou 23 602 recovered | | | |) in Congo on 14 | March 2020. As o | of 24 April 2022, a | a total of 24 041 (| cases including |
| Congo | Measles | Ungraded | 14-Mar-22 | 1-Jan-22 | 17-Apr-2022 | 5 594 | 5 594 | 132 | 2.4% |
| cases and 108 | 2022 (ending 17 A (82%) related deal children below 5y | ths are from Poir | te Noire; 56.6% (| of cases are child | ren below 5years | of age. Only 4% | of infants below | 12 months are va | ccinated; 83% |
| Congo | Poliomyelitis (cVDPV2) | Grade 2 | | 29-Jan-21 | 11-May-2022 | 4 | 4 | 0 | 0.0% |
| No new cases of | of circulating vacci | ne-derived poliov | virus type 2 (cVDI | PV2) were report | ed this week. Two | cases were repo | rted in 2020 as w | ell as in 2021. | |
| Congo | Yellow fever | Ungraded | 31-Mar-22 | 31-Mar-22 | 10-Apr-2022 | 7 | 6 | - | - |
| case was repor | 10 April 2022, a to ted from Talangai he context is conc | district, Brazzavil | le, confirmed thro | ough plaque redu | ction neutralization | on test at Institut | Pasteur in Dakar. | | |
| Côte d'Ivoire | COVID-19 | Grade 3 | 11-Mar-20 | 11-Mar-20 | 15-May-2022 | 82 001 | 82 001 | 799 | 1.0% |
| Since 11 March | 1 2020, a total of 8 | 2 001 confirmed | cases of COVID- | 19 have been rep | orted from Côte o | l'Ivoire including | 799 deaths, and | a total of 81 173 | recoveries. |
| Côte d'Ivoire | Dengue | Ungraded | 22-Mar-22 | 10-Jan-22 | 20-Mar-22 | 12 | 12 | 1 | 8.3% |
| | 022, the Ministry of including 1 death. | | | | | | | | |
| Côte d'Ivoire | Poliomyelitis (cVDPV2) | Grade 2 | 29-0ct-19 | 29-0ct-19 | 4-May-2022 | 64 | 64 | 0 | 0.0% |
| No case of circ | ulating vaccine-de | rived poliovirus t | ype 2 (cVDPV2) v | vas reported this | week. There are | no reported cases | in 2021. There a | re 64 cases repo | rted in 2020. |
| Côte d'Ivoire | Yellow fever | Grade 2 | 14-Sep-21 | 13-Aug-2021 | 10-Apr-2022 | 56 | 13 | 0 | 0.0% |
| returned on 6 S | 2021, five yellow fe September 2021, tl ch 13 were confirm | ne results of thre | | | | | | | |
| Democratic Republic of the Congo | Humanitarian crisis | Protracted 3 | 20-Dec-2016 | 17-Apr-2017 | 1-May-2022 | - | - | - | - |
| (21), South Kiv security incider have been inter | ning of 2022, 69 s u (20), North Kivu nts include acts of nally displaced wit Kivu (1.9 million) | (14), Maniema (violence commit th a total of nearl | 6), Ituri (5), Haut ted by armed gro y 5.97 million in t | -Katanga (2), Kas ups and those of the country. Wom | saï-Central (1). Fo a criminal nature nen make up 51% | our aid workers we . Also, since the b of IDPs. The larg | ere killed, 10 abd peginning of 2022 lest number of th | ucted and one inj 2, more than 355 em is recorded in | ured. Reported 000 people |

| 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 | Cholera | Grade 3 | 16-Jan-15 | 1-Jan-22 | 1-May-2022 | 5 485 | - | 79 | 1.4% |
| | | | | | | luding 79 deaths nented in the mai | | | nealth zones |
| Democratic Republic of the Congo | COVID-19 | Grade 3 | 10-Mar-20 | 10-Mar-20 | 8-May-2022 | 87 635 | 87 633 | 1 338 | 1.5% |
| | | outbreak, declared e have recovered. | | 20, a total of 87 (| 633 confirmed ca | ses and two prob | able case, includ | ing 1 338 deaths | have been |
| Democratic Republic of the Congo | Ebola virus disease | Grade 2 | 22-Apr-2022 | 22-Apr-2022 | 8-May-2022 | 3 | 3 | 3 | 100.0% |
| confirmed on 22 (RT-PCR) at the province since 2 fever and heada measures, betw signs (gingivorr in a 25-year-old HZ, both known points of entry a | 2 April 2022, in M provincial labora 2018. The case w. che and, after at leen 16 and 21 Ap hages, conjunctive woman from the contacts of the f | Ibandaka, a city in itory in Mbandaka as a 31-year-old r least eight days o oril 2022. On 21 A val injection, pers Libiki HA in the l irst case and fatal isolation of suspe | n the northwester a and then at the male from the Lib f home care, he v pril, the patient v istent bleeding at Mbandaka HZ and I cases. Control ii | n Équateur Provi Institut National o liki health area (H was admitted suc was admitted to a injection sites) a d a third case was nterventions are o | nce. The case tes de Recherche Bior A) in the Mbanda cessively to two h n Ebola Treatmen nd died the same s reported on 4 M ongoing in the fiel | e resurgence of Et ted positive by re médicale (INRB) i ka Health Zone (I nealth facilities wi t Center for inten- day overnight. A ay in a 48-year-ol d and include casention and contro | verse transcripta: n Kinshasa. This IZ). Symptoms b th inadequate info sive care after he second confirme d man from the I se investigation, o | se polymerase ch is the third outbr egan on 5 April 2 ection prevention presented with h d case was repor Motema Pembe H contact tracing, si | ain reaction eak in the 022, with and control emorrhagic ted on 25 April A in the same urveillance at |
| Democratic Republic of the Congo | Measles | Ungraded | 12-0ct-21 | 1-Jan-22 | 1-May-2022 | 47 514 | 1 126 | 684 | 1.4% |
| KatakoKombe (5 Budjala (2 405 c | 5 338 cases) and cases) in Sud-Uba | Dikungu (1 521 c angi, Kambove (1 | cases) in Sankuru 560 cases) in Ha | ı province, Manoı aut-Katanga, Fizi (| no (4 854 cases) | eported in 349 he in Tanganyika pro I Lemera (1 082 c r 47.7%). | vince, Mulongo (| (3 060 cases) in F | laut-Lomami, |
| Democratic Republic of the Congo | Monkeypox | Ungraded | n/a | 1-Jan-20 | 1-May-2022 | 10 545 | 39 | 362 | 3.4% |
| reported with 57 | deaths (CFR 4.6 | 6%). Compared to | weeks 1-17 in 2 | 021, 1 376 cases | were reported w | epidemiological v ith 41 deaths (CF including 222 dea | R 3.0%). During | 2021, a total of 3 | |
| Democratic Republic of the Congo | Plague | Ungraded | 12-Mar-19 | 1-Jan-20 | 1-May-2022 | 687 | - | 47 | 6.8% |
| however, Lokpa | remains the epic | entre reporting 9 | 5% of cases repo | rted this year. Du | | 2.0% CFR). Cases of 138 suspected | | | |
| Democratic Republic of the Congo | Poliomyelitis (cVDPV2) | Grade 2 | 26-Feb-2021 | 1-Jan-21 | 11-May-2022 | 65 | 65 | 0 | 0.0% |
| | circulating vaccir ere are 28 cases | | rus type 2 (cVDP | V2) were reporte | d this week; Ten i | n Maniema and o | ne in Sud-Kivu. 1 | The number of 20 | 22 cases now |
| Democratic Republic of the Congo | Suspicion of Meningitis outbreak | Ungraded | 28-Mar-22 | 1-Jan-22 | 13-Mar-22 | 1 618 | 3 | 118 | 7.3% |
| 9, 2022 (ending in the meningitis meningitis and 6 | 6 March), the ale s belt of Democra 6 deaths (CFR 7.3 nophilus Influenza | ert threshold for s atic Republic of th 3%) with some he | suspected mening le Congo. In addi ealth areas (Sante | gitis outbreak has tion, from week 1 Plus and 8eme (| been crossed in to week 10, 202 Cepac) crossing t | deaths (CFR 7.3% the health district 2, the Walikale he he epidemic thres ingitidis. Respons | of Walikale in th alth district recor shold. Two cerebr | e North Kivu prov rded 82 suspecter ospinal fluid sam | rince located d cases of ples were |
| Democratic Republic of the Congo | Typhoid fever | Ungraded | 1-Jul-2021 | 1-Jan-21 | 1-May-2022 | 634 401 | - | 279 | 0.0% |
| | | | | | | id fever including lave been reporte | | | |

| 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 | Yellow Fever | Grade 2 | 21-Apr-2021 | 21-Apr-2021 | 10-Apr-2022 | 10 | 8 | 0 | 0.0% |
| | 1, two yellow feve iitive cases have l | | sitive by plaque i | reduction neutral | ization test (PRNT | at Centre Paste | ur in Cameroon (| CPC). As of 10 Ap | ril 2022, a total |
| Equatorial Guinea | COVID-19 | Grade 3 | 14-Mar-20 | 14-Mar-20 | 12-May-2022 | 15 910 | 15 910 | 183 | 1.2% |
| | | re announced the 15 701 recoverie | | COVID-19 case or | n 14 March 2020. | As of 12 May 20 | 22, a total of 15 9 | 910 cases have be | en reported in |
| Eritrea | COVID-19 | Grade 3 | 21-Mar-20 | 21-Mar-20 | 13-May-2022 | 9 744 | 9 744 | 103 | 1.1% |
| | | ise was reported i f 9 632 patients h | | | 13 May 2022, a t | otal of 9 745 con | firmed COVID-19 | cases with 103 d | eaths were |
| Eswatini | COVID-19 | Grade 3 | 13-Mar-20 | 13-Mar-20 | 15-May-2022 | 71 705 | 71 705 | 1 403 | 2.0% |
| | | confirmed in the kotal of 1 403 asso | | | 2020. As of 15 Ma | ay 2022, a total o | f 71 705 cases ha | ve been reported | in the country |
| Ethiopia | Drought/food insecurity | Grade 2 | 17-Feb-2022 | 1-Jan-22 | 11-May-2022 | - | - | - | - |
| (Southern Natio zones), Oromia their homes to s | ns, Nationalities, (8 zones), South survive as crops, | and Peoples), So west (1 zone) and | outhwest and Son I SNNP (7 zones) Ilihoods are wiped | nali: several areas . More than 286, d out. The numbe | asons since late 20 s in southern and 000 people have b er of livestock dea | southeastern Eth been displaced in | iopia, including in search of water, | n the regions of So pasture or assista | omali (10 nce, fleeing |
| Ethiopia | Humanitarian crisis (Conflict in Tigray) | Grade 3 | 4-Nov-20 | 4-Nov-20 | 1-Apr-2022 | - | - | - | - |
| people are in ne newly displaced | ed and 2.4 millio I. The corridor for | n people are disp | laced as of 1 Apr is been opened a | 2022. In Afar, 22 nd more than 20 | fecting civilians ar ? districts are affec trucks have delive | cted by the ongoi | ng active conflict | with more than m | ore than 300K |
| Ethiopia | Cholera | Grade 2 | 31-Aug-2021 | 31-Aug-2021 | 20-Mar-22 | 674 | | 7 | 1.0% |
| 7 associated de | ath (CFR 1.0%), | | r. Five sample we | | s reported on 31 A o were positive for | | | | |
| Ethiopia | COVID-19 | Grade 3 | 13-Mar-20 | 13-Mar-20 | 15-May-2022 | 470 949 | 470 949 | 7 510 | 1.6% |
| Since the confir 757 recoveries. | mation of the firs | st case on 21 Mar | ch 2020, Ethiopia | has confirmed a | total of 470 949 | cases of COVID-1 | 19 as of 15 May 2 | 2022, with 7 510 d | eaths and 455 |
| Ethiopia | Measles | Ungraded | 14-Jan-17 | 1-Jan-22 | 15-May-2022 | 4 634 | 2 897 | 33 | 0.7% |
| | g an active measl | | | | , Afder, Fafan, Jara 4 634 suspected (| | | | |
| Ethiopia | Meningitis | Ungraded | 17-Feb-2022 | 12-Dec-2021 | 12-Apr-2022 | 1 737 | 10 | 16 | 0.9% |
| (CFR 0.9%) wer analysed at Nati Meningitidis (Ni sample positive | re reported. The fonal Institute of (m), 1 sample postor both Nm+HH | following regions: Communicable Di sitive for haemorr | Oromia, Somali, sease in South A hagic signs (Ging for both Sp+Ebst | Afar, SNNP and frica (NICD), 2 saival haemorrhage | oril), a cumulative Harari are reportin amples were posit e, haemophilus in BV). More CSF sal | ng most cases. An ive for human he fluenzae (HI), 1 s | mong the 83 sam rpesvirus 7 (HH7 ample for Strepto | ples of cerebrosp) ,4 sample positi ococcus Pneumon | inal fluid (CSF) ve for Neisseria iae (Sp), 1 |
| Ethiopia | Poliomyelitis (cVDPV2) | Grade 2 | 24-Jun-2019 | 20-May-2019 | 15-May-2022 | 63 | 63 | 0 | 0.0% |
| No case of circu and 2019 is 15. | ılating vaccine-de | erived poliovirus t | ype 2 (cVDPV2) | was reported this | week. Ten cases | were reported in | 2021. The total n | umber of cases fo | or 2020 is 38 |
| Gabon | COVID-19 | Grade 3 | 12-Mar-20 | 12-Mar-20 | 8-May-2022 | 47 608 | 47 608 | 304 | 0.6% |
| | | of Health announes have been repo | | | OVID-19 case in tl | he country. As of | 8 May 2022, a to | tal of 47 608 case | es including |
| Gabon | Yellow fever | Ungraded | 12-Feb-2022 | 17-Sep-21 | 10-Mar-22 | 2 | 1 | 1 | 50.0% |
| | | | | | he Institut Pasteu He presented with | | | | |
| Gambia | COVID-19 | Grade 3 | 17-Mar-20 | 17-Mar-20 | 10-May-2022 | 11 999 | 11 999 | 365 | 3.0% |
| | | ise was reported i ave been reported | | 17 March 2020. | As of 10 May 202 | 2, a total of 11 99 | 99 confirmed CO\ | /ID-19 cases inclu | iding 365 |

| Country | Event | Grade | Date notified to WCO | Start of reporting period | End of reporting period | Total cases | Cases Confirmed | Deaths | CFR |
|-------------------------------------|--|--|---------------------------------------|---------------------------------------|---|---------------------------------------|---|--|----------------------|
| Ghana | COVID-19 | Grade 3 | 12-Mar-20 | 12-Mar-20 | 9-May-2022 | 161 280 | 161 280 | 1 445 | 0.9% |
| As of 2 May 202 | 22, a total of 161 | 280 confirmed Co | OVID-19 cases ha | ave been reported | in Ghana. There | have been 1 445 | deaths and 159 7 | 88 recoveries re | ported. |
| Ghana | Poliomyelitis (cVDPV2) | Grade 2 | 9-Jul-2019 | 8-Jul-2019 | 24-Apr-2022 | 31 | 31 | 0 | 0.0% |
| No cases have b | been reported in 2 | 2022 nor 2021, 12 | 2 cases were rep | orted in 2020, and | d 19 were reporte | d in 2019. | | | |
| Ghana | Yellow fever | Grade 2 | 3-Nov-21 | 15-0ct-21 | 10-Apr-2022 | 166 | 71 | 11 | 6.6% |
| From 15 Octobe d'Ivoire). As of | er 2021, suspecte 10 April 2022, a t | d cases of yellow otal of 166 yellow | fever were repor fever probable of | ted mostly amon cases (IgM positiv | g nomadic settler /e) including 71 c | s in the Savannal onfirmed cases v | n Region, northwe vere reported fror | est Ghana (borden n 13 regions in (| ering Côte Ghana. |
| Guinea | COVID-19 | Grade 3 | 13-Mar-20 | 13-Mar-20 | 8-May-2022 | 36 661 | 36 661 | 442 | 1.2% |
| | Health in Guinea s and 442 deaths | | | | n 13 March 2020. | As of 8 May 202 | 2, a total of 36 66 | 1 cases includin | g 36 138 |
| Guinea | Lassa fever | Ungraded | 22-Apr-2022 | 20-Apr-2022 | 24-Apr-2022 | 2 | 2 | 0 | 0.0% |
| laboratory. The | 22, the Ministry of case is a 17-year a fever confirmed | -old girl from the | sub-prefecture o | f Kassandou loca | ted 65 kilometers | from the capital | of the prefecture | of Guéckédou. A | n additional |
| Guinea | Measles | Ungraded | 09-May-2018 | 1-Jan-22 | 10-Apr-2022 | 14 828 | 316 | 33 | 0.2% |
| | ning of 2022 up t nea from 29 healt | | | | | | | | have been |
| Guinea | Poliomyelitis (cVDPV2) | Grade 2 | 22-Jul-2020 | 22-Jul-2020 | 4-May-2022 | 50 | 50 | 0 | 0.0% |
| | of circulating vacc corrected to 44. | ine-derived poliov | virus type 2 (cVD | PV2) were report | ed this week. So t | far, we have 6 cas | ses reported in 20 | 21. The total nu | mber of 2020 |
| Guinea-Bissau | COVID-19 | Grade 3 | 25-Mar-20 | 25-Mar-20 | 13-May-2022 | 8 222 | 8 222 | 171 | 2.1% |
| | 020, the Ministry cases of COVID-1 | | | | -19 confirmed cas | se in the country. | As of 13 May 20 | 22, the country h | nas reported 8 |
| Guinea-Bissau | Poliomyelitis (cVDPV2) | Grade 2 | 9-Nov-21 | 9-Nov-21 | 24-Apr-2022 | 4 | 4 | 0 | 0.0% |
| No case of circuin Nigeria. | ulating vaccine-de | rived poliovirus t | ype 2 (cVDPV2) | was reported this | week. Three case | es were reported | in 2021 which we | re linked to the | ligawa outbreak |
| Kenya | Chikungunya | Ungraded | 3-Mar-22 | 13-Feb-2022 | 28-Apr-2022 | 83 | 5 | 0 | 0.0% |
| | utbreak has been arch in all health f | | | | | | | reported with tw | o (5) confirmed |
| Kenya | COVID-19 | Grade 3 | 13-Mar-20 | 13-Mar-20 | 15-May-2022 | 324 011 | 324 011 | 5 649 | 1.7% |
| | 020, the Ministry 5 649 deaths and | | | | | the country. As o | f 15 May 2022, 32 | 24 011 confirme | d COVID-19 |
| Kenya | Dengue | Ungraded | 3-Mar-22 | 1-Jan-21 | 28-Apr-2022 | 2 426 | 68 | 2 | 0.1% |
| the reported cas County has repo | as been reported ses are from Man orted the latest ou) with two deaths | dera east sub cou utbreak from Fafi : | inty while in Mon sub county, Haga | nbasa, six-subcoi | untiies (Nyali, Mvi | ita,Kisauni,Nyali,L | _iikoni and Jomνι | ı) have been affe | cted. Garissa |
| Kenya | Leishmaniasis | Ungraded | 31-Mar-19 | 3-Jan-20 | 7-May-2022 | 1 666 | 1 481 | 10 | 0.6% |
| Kitui, Baringo, V | 2020 through 7 M West Pokot, Mand okot south and W Sub-counties | dera, and Wajir Co | unties with a total | al of 10 deaths re | ported (CFR 0.6% | 6). The outbreak i | s active in three o | counties, West P | okot County in |
| Kenya | Yellow fever | Grade 2 | 3-Mar-22 | 12-Jan-22 | 10-Apr-2022 | 2 | 2 | 0 | 0.0% |
| deaths reported | 22, Kenya declare I from 12 January cal Research Inst | to 23 February 2 | 022 in eight villa | ges within three s | sub county of Isio | lo county. Of the | | | |
| Lesotho | COVID-19 | Grade 3 | 13-May-2020 | 13-May-2020 | 3-May-2022 | 33 151 | 33 151 | 697 | 2.1% |
| | confirmed COVID- ies and 697 death | | rted in Lesotho d | on 13 May 2020, | until 3 May 2022, | a total of 33 151 | cases of COVID- | 19 have been rep | oorted, including |
| Liberia | COVID-19 | Grade 3 | 16-Mar-20 | 16-Mar-20 | 27-Apr-2022 | 7 434 | 7 434 | 294 | 4.0% |
| From 16 March | 2020 to 27 April | 2022, Liberia has | recorded a total | of 7 434 cases in | cluding 294 deatl | hs and 7 106 reco | overies have been | reported. | |
| Liberia | Lassa Fever | Ungraded | 3-Mar-22 | 6-Jan-22 | 4-Apr-2022 | 46 | 19 | 6 | 13.0% |
| | ning of 2022 up t Counties are curre | | | | | 19 confirmed ar | nd 6 deaths (CFR | 13%) have been | reported in |

| 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-2022 | 1-Jan-22 | 11-Apr-2022 | 1 543 | 1 435 | 15 | 1.0% |
| total confirmed Montserrado co | 022, 1 543 suspe cases, 13.7 % (19 bunty is the most tion is 6 years (ra | 97 cases) were la affected with 55% | boratory confirm 6 (843 suspected | ed, 26% (374 cascases) of all sus | ses) was clinically pected cases and | confirmed, and 73.3% (11 death | 60 % (861 cases) s) of all deaths re |) by epidemiologi eported. The med | cal link. an age of the |
| Liberia | Poliomyelitis (cVDPV2) | Grade 2 | 10-Dec-2020 | 17-Dec-2020 | 24-Apr-2022 | 3 | 3 | 0 | 0.0% |
| No case of circu | ulating vaccine-de | rived poliovirus t | ype 2 (cVDPV2) v | was reported this | week. The count | ry reported 3 case | es in 2021. | | |
| Madagascar | Floods | Grade 2 | 19-Jan-22 | 16-Jan-22 | 27-Apr-2022 | 455 744 | | 206 | 0.0% |
| Damages by TS Atsinanana and Atsinanana, Fito | t mostly in the are Dumako have aff Analanjirofo. Cyc ovinany, and Ihoro d the country last | ected approxima lone Emnati affec imbe. TS Gombe | tely 9 959 people ted 169 583 peop affected 935 peop | including 14 dea ole causing 14 de ple causing one c | ths. A total of 4 3 aths. A total of 86 | 23 people have b 3 995 people were | een displaced fro e displaced in 12 | m 7 regions but regions but most | mostly affecting ly from Atsimo |
| Madagascar | Malnutrition crisis | Grade 2 | 1-Jul-2021 | 1-Jan-21 | 11-Mar-22 | - | - | - | - |
| 14 000 people v classified 405 0 months are pro | ee-year drought i were classified as 100 people in eme jected to suffer fro ons according to | IPC Phase 5 or c rgency (phase 4) om severe acute | atastrophically fo . About 309 000 o malnutrition. The | od insecure. The children are proje re are at least 470 | Integrated food s cted to suffer fro 0 000 people in u | security Phase Cla m moderate acute rgent need of food | assification (IPC) e malnutrition and d assistance in Va | analysis for Janu d 60 000 children | ary 2022 has aged of 6-59 |
| Madagascar | COVID-19 | Grade 3 | 20-Mar-20 | 20-Mar-20 | 13-May-2022 | 64 276 | 64 276 | 1 393 | 2.2% |
| | nistry of Health ar deaths have beer | | | irst COVID-19 ca | se on 20 March 2 | 2020. As of 13 Ma | y 2022, a total of | 64 276 confirme | d cases |
| Madagascar | Poliomyelitis (cVDPV1) | Grade 2 | 28-Apr-2021 | 28-Apr-2021 | 4-May-2022 | 14 | 14 | 0 | 0.0% |
| No case of circu | ılating vaccine-de | rived poliovirus t | ype 1 (cVDPV1) v | was reported this | week. The numb | er of 2021 cases | remains 13. Ther | e is one case in 2 | 022. |
| Malawi | Floods | Grade 2 | 26-Jan-22 | 26-Jan-22 | 18-Mar-22 | 1 000 000 | | 51 | 0.0% |
| displaced a nun | ntly responding to nber of household kimately, more tha | ls, damaged hous | sehold property, i | njuries as well as | damage to infras | structure and caus | sed several death | s in the southern | |

| displaced a nur | ntly responding to t nber of households kimately, more than | , damaged house | eholď property, i | njuries as well as | damage to infras | tructure and caus | ed several death | s in the southern | |
|---|---|--|---|---|---|---------------------------------------|------------------------------------|--------------------|---------------|
| Malawi | Cholera | Ungraded | 3-Mar-22 | 3-Mar-22 | 14-May-2022 | 227 | 13 | 10 | 4.4% |
| district. He had stool specimen | linistry of Health de onset of symptoms was collected from irmed cholera case: | on 25 February him. Laboratory | 2022 and sough results by culture | ht medical care at ure confirmed him | t Muchinga Distric n positive for Chol | ct Hospital on 28 era on 3 March 2 | February 2022 w 022.Three new d | here he was iden | tified, and a |
| Malawi | COVID-19 | Grade 3 | 2-Apr-2020 | 2-Apr-2020 | 15-May-2022 | 85 888 | 85 888 | 2 636 | 3.10% |
| _ | | | | | | | | | |
| |), the president of N s with 2 636 deaths | | | med cases of CO | VID-19 in the cou | ntry. As of 15 Ma | y 2022, the coun | try has a total of | 85 888 |
| | | | | med cases of CO' | VID-19 in the cou 1-May-2022 | ntry. As of 15 Ma | y 2022, the coun 1 | try has a total of | 0.0% |
| confirmed case Malawi One positive ca | s with 2 636 deaths | and 82 709 rec Ungraded as detected in Lil | overies. 31-Jan-22 ongwe from a p | 1-Feb-2022 atient with the da | 1-May-2022 te of onset of para | 1 | 1 | 0 | 0.0% |

Mali is facing a humanitarian crisis since 2012 which is affecting three regions of the country namely the North, centre and one part of the Soth region. 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 56 212 refugees as of 31 March 2022. However, 659 005 returnees have come back to the country.

31-Mar-22

n/a

| Mali | COVID-19 | Grade 3 | 25-Mar-20 | 25-Mar-20 | 8-May-2022 | 30 937 | 30 937 | 733 | 2.4% | | | |
|------|--|----------|-------------|-----------|-------------|--------|--------|-----|------|--|--|--|
| | On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 cases have been reported in the country including 733 deaths and 30 025 recoveries. | | | | | | | | | | | |
| Mali | Measles | Ungraded | 20-Feb-2018 | 1-Jan-22 | 24-Apr-2022 | 1 536 | 421 | 1 | 0.1% | | | |

As of week 16, (ending 24 April) of 2022, a total of 1 536 suspected cases of measles and 421 confirmed and 1 death (CFR 0.1) have been reported in Mali through integrated disease surveillance and response (IDSR) system. A total of 37 out of 75 health districts have confirmed measles outbreak, of which 13 health districts have received vaccines for response. The most affected age group is from 0 to 59 months.

Mali

Protracted 1

crisis

n/a

| 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-2020 | 18-Aug-2020 | 16-Mar-22 | 52 | 52 | 0 | 0.0% |
| No case of circuare 52. | ulating vaccine-de | erived poliovirus t | ype 2 (cVDPV2) v | was reported this | week. No cases h | nave been reporte | ed in 2021.The tot | al number of cas | es since 2020 |
| Mali | Undiagnosed disease | Ungraded | 14-Mar-22 | 1-Nov-21 | 11-May-2022 | 41 | | 9 | 22.0% |
| last year. In 202 the Regional Mi non-specified c | 22, the first alert a inistry of Health o hronic diseases a | bout this disease onducted a missi | was voiced on 2 on to the affected trition. No further | cause has been ro 3 February. A tota I area, according to details provided | l of 41 cases with to the preliminary | n 9 deaths (CFR 2 v information, am | 2.0%) have been ong cases report | reported. From 1 ed 3 have oedema | 12 to 13 April, a, 12 have |
| Mauritania | COVID-19 | Grade 3 | 13-Mar-20 | 13-Mar-20 | 8-May-2022 | 58 743 | 58 743 | 982 | 1.7% |
| | | nnounced its first eported in the co | |)-19 case on 13 N | larch 2020. As of | 8 May 2022, a to | otal of 58 743 cas | es including 982 | deaths and 57 |
| Mauritania | Crimean- Congo haemorrhagic fever (CCHF) | Ungraded | 8-Feb-2022 | 8-Feb-2022 | 27-Apr-2022 | 7 | 7 | 2 | 28.6% |
| en Santé Publiq Elgharbi. He pre | ue in Nouakchott esented with epis | , Mauritania. The taxis and hemater | patient is a 52-ye nesis for which h | (CCHF) was confi ear-old male farme e consulted five h deaths were repo | er living in the de nealth facilities in | partment (mough Kubeni and Noua | natàa) of Koubeni Ikchott between 2 | in the region (wil 7 January and 4 | aya) of Hodh |
| Mauritius | COVID-19 | Grade 3 | 18-Mar-20 | 18-Mar-20 | 8-May-2022 | 223 793 | 223 793 | 996 | 0.4% |
| | | nced the first thre reported in the co | | of COVID-19 on 1 | 8 March 2020. A | s of 8 May 2022, | a total of 223 79 | 3 confirmed COV | ID-19 cases |
| Mozambique | Floods | Grade 2 | 24-Jan-22 | 26-Jan-22 | 12-Mar-22 | 678 237 | | 59 | 0.0% |
| figures on the intropical storm A | mpact are expected and which hit the common three conditions on the common three co | ed to rise as wide | spread damage h ry, and tropical de | be has affected 47 as occurred thoug pression Dumako es. 1-Jan-20 | gh in-depth asses | sments have not | yet taken place. | This cyclone Gom | be follows |
| | | ado remains unp displaced by con | | latile. As of 31 Ma | ar 2022, the natio | nwide estimate o | f people in need o | of humanitarian a | |
| | | | | 22-Mar-20 | 45.14 0000 | | | | ssistance is |
| The first COVID | -19 confirmed ca | i . | | 22 20 | 15-Mav-2022 | 225 498 | 225 498 | 2 201 | |
| | uding 2 201 deat | | | n 22 March 2020. | | | 225 498 498 confirmed C | 2 201 OVID-19 cases w | 1.0% |
| Mozambique | Measles | hs and 223 190 r | | n 22 March 2020. 1-Jan-21 | | | | | 1.0% |
| From week 1 to | Measles week 15 ,2022 (| hs and 223 190 r Ungraded ending 17 April), | ecoveries. 25-Jun-2020 a total of 582 sus | | As of 15 May 20 17-Apr-2022 neasles and zero | 22, a total of 225 3 599 death have been | 498 confirmed C | OVID-19 cases w | 1.0% vere reported in 0.0% |
| From week 1 to | Measles week 15 ,2022 (| hs and 223 190 r Ungraded ending 17 April), | ecoveries. 25-Jun-2020 a total of 582 sus | 1-Jan-21 pected cases of n | As of 15 May 20 17-Apr-2022 neasles and zero | 22, a total of 225 3 599 death have been | 498 confirmed C | OVID-19 cases w | 1.0% vere reported in 0.0% |
| From week 1 to Surveillance and Mozambique Cholera outbrea were reported v | Measles week 15 ,2022 (id Response). The Suspected cholera ik has been repor | hs and 223 190 n Ungraded ending 17 April), cumulative num Ungraded ted from Sofala p Caia district. Of th | 25-Jun-2020 a total of 582 susper of the reporte 23-Mar-22 rovince, central r | 1-Jan-21 pected cases of n d cases since Jan | As of 15 May 20 17-Apr-2022 neasles and zero luary 2021 is now 18-Mar-22 ue, on 13 January | 3 599 death have been v 3 599 265 y 2022. From 13 | 498 confirmed C 903 reported through 0 January 2022 as | OVID-19 cases w 0 IDSR (Integrated 0 of 18 March 2022 | 1.0% vere reported in 0.0% Disease 0.0% |
| From week 1 to Surveillance and Mozambique Cholera outbrea were reported v | Measles week 15 ,2022 (d Response). The Suspected cholera ak has been repor | hs and 223 190 n Ungraded ending 17 April), cumulative num Ungraded ted from Sofala p Caia district. Of th | 25-Jun-2020 a total of 582 susper of the reporte 23-Mar-22 rovince, central r | 1-Jan-21 pected cases of n d cases since Jan 13-Jan-22 egion, Mozambiq | As of 15 May 20 17-Apr-2022 neasles and zero luary 2021 is now 18-Mar-22 ue, on 13 January | 3 599 death have been v 3 599 265 y 2022. From 13 | 498 confirmed C 903 reported through 0 January 2022 as | OVID-19 cases w 0 IDSR (Integrated 0 of 18 March 2022 | 1.0% vere reported in 0.0% Disease 0.0% |
| From week 1 to Surveillance and Mozambique Cholera outbrea were reported v culture. Respon | Measles week 15 ,2022 (d Response). The Suspected cholera ak has been repor vith no deaths in ise activities are of | hs and 223 190 m Ungraded ending 17 April), cumulative num Ungraded ted from Sofala p Caia district. Of the original of the or | 25-Jun-2020 a total of 582 susper of the reporte 23-Mar-22 rovince, central ree eight samples | 1-Jan-21 pected cases of n d cases since Jan 13-Jan-22 egion, Mozambiq collected, three te | As of 15 May 20 17-Apr-2022 neasles and zero nuary 2021 is now 18-Mar-22 ue, on 13 January sted positive for | 3 599 death have been v 3 599 265 y 2022. From 13 cholera by rapid of | 903 reported through 0 January 2022 as diagnostic test (R | OVID-19 cases w 0 IDSR (Integrated 0 of 18 March 2022 DT) and five turn 4 028 | 1.0% vere reported in 0.0% Disease 0.0% 2, 265 cases ed negative by 0.0% |
| From week 1 to Surveillance and Mozambique Cholera outbrea were reported v culture. Respon Namibia The first case o | Measles week 15 ,2022 (d Response). The Suspected cholera ak has been repor vith no deaths in ise activities are of | hs and 223 190 m Ungraded ending 17 April), cumulative num Ungraded ted from Sofala p Caia district. Of the original of the or | 25-Jun-2020 a total of 582 susper of the reporte 23-Mar-22 rovince, central ree eight samples | 1-Jan-21 pected cases of n d cases since Jan 13-Jan-22 egion, Mozambiq collected, three te | As of 15 May 20 17-Apr-2022 neasles and zero nuary 2021 is now 18-Mar-22 ue, on 13 January sted positive for | 3 599 death have been v 3 599 265 y 2022. From 13 cholera by rapid of | 903 reported through 0 January 2022 as diagnostic test (R | OVID-19 cases w 0 IDSR (Integrated 0 of 18 March 2022 DT) and five turn 4 028 | 1.0% vere reported in 0.0% Disease 0.0% 2, 265 cases ed negative by 0.0% |
| From week 1 to Surveillance and Mozambique Cholera outbrea were reported v culture. Respon Namibia The first case of deaths have been Niger According to Od are refugees, and | Measles week 15 ,2022 (d Response). The Suspected cholera ak has been repor vith no deaths in use activities are concentrated to the concentrate of the covidence of the coviden | hs and 223 190 n Ungraded ending 17 April), cumulative num Ungraded ted from Sofala p Caia district. Of the ongoing. Grade 3 detected in Namib Protracted 1 7 million people n | 25-Jun-2020 a total of 582 susper of the reporte 23-Mar-22 rovince, central releight samples 14-Mar-20 ia on the 14 Mare 1-Feb-2015 eed humanitariar | 1-Jan-21 pected cases of n d cases since Jan 13-Jan-22 egion, Mozambiq collected, three te 14-Mar-20 ch 2020. As of 15 | As of 15 May 20 17-Apr-2022 neasles and zero nuary 2021 is now 18-Mar-22 ue, on 13 January sted positive for of 13-May-2022 May 2022, a tota 7-Mar-22 22. As of 07 Marc | 22, a total of 225 3 599 death have been v 3 599 265 v 2022. From 13 cholera by rapid of 160 074 all of 160 074 continues of 160 0 | 903 reported through 0 January 2022 as diagnostic test (R 160 074 firmed cases with | OVID-19 cases w 0 IDSR (Integrated) 0 of 18 March 2022 DT) and five turn 4 028 153 662 recover - ally displaced, 25 | 1.0% Pere reported in 0.0% Disease 0.0% 2, 265 cases ed negative by 0.0% Ped and 4 028 - 50 000 |
| From week 1 to Surveillance and Mozambique Cholera outbrea were reported v culture. Respon Namibia The first case of deaths have been Niger According to Od are refugees, and | Measles week 15 ,2022 (d Response). The Suspected cholera ak has been repor vith no deaths in use activities are concentrated. COVID-19 ff COVID-19 was concentrated. Humanitarian crisis CHA statistics, 3.3 and 3.6 million are | hs and 223 190 n Ungraded ending 17 April), cumulative num Ungraded ted from Sofala p Caia district. Of the ongoing. Grade 3 detected in Namib Protracted 1 7 million people n | 25-Jun-2020 a total of 582 susper of the reporte 23-Mar-22 rovince, central releight samples 14-Mar-20 ia on the 14 Mare 1-Feb-2015 eed humanitariar | 1-Jan-21 pected cases of n d cases since Jan 13-Jan-22 egion, Mozambiq collected, three te 14-Mar-20 ch 2020. As of 15 1-Feb-2015 | As of 15 May 20 17-Apr-2022 neasles and zero nuary 2021 is now 18-Mar-22 ue, on 13 January sted positive for of 13-May-2022 May 2022, a tota 7-Mar-22 22. As of 07 Marc | 22, a total of 225 3 599 death have been v 3 599 265 v 2022. From 13 cholera by rapid of 160 074 all of 160 074 continues of 160 0 | 903 reported through 0 January 2022 as diagnostic test (R 160 074 firmed cases with | OVID-19 cases w 0 IDSR (Integrated) 0 of 18 March 2022 DT) and five turn 4 028 153 662 recover - ally displaced, 25 | 1.0% Pere reported in 0.0% Disease 0.0% 2, 265 cases ed negative by 0.0% Ped and 4 028 - 50 000 |

| Country | Event | Grade | Date notified to WCO | Start of reporting period | End of reporting period | Total cases | Cases Confirmed | Deaths | CFR |
|--|--|--|--|---|--|--|---|--|--|
| Niger | Measles | Ungraded | 5-Apr-2022 | 1-Jan-22 | 17-Apr-2022 | 6 103 | 323 | 6 | 0.1% |
| as the highes 7 districts ou | t attack rate (59.8 | cases per 100 00 ntry are at very hi | 0 inhabitants), fol gh risk while 21 c | llowed by Niame districts are at hi | ths (CFR: 0.1%) hey (46.7 cases /100 gh risk. The respo n the risk profile | 000) and Zinder | (44.2 cases /100 | 000). Risk asses | sment found: |
| Niger | Meningitis | Ungraded | | 1-Jan-21 | 20-Mar-22 | 1 688 | - | 76 | 4.5% |
| inder region (00 000 inhab leisseria men | crossed the alert the itants. An analysis | hreshold: Dungas s of data by sub-di o C (NmC) is the p | s with an attack ra stricts indicates t predominant germ | ate (AR) of 4.5 c hat some health | 688 cases have be ases per 100 000 areas crossed the 2 2 health districts. | inhabitants and M epidemic thresh | lagaria with an at old on week 49 of | tack rate (AR) of f 2021 (ending 12 | 4.8 cases per December). |
| Niger | Poliomyelitis (cVDPV2) | Grade 2 | 1-Jan-20 | 1-Jan-21 | 4-May-2022 | 17 | 17 | 0 | 0.0% |
| o case of circ | culating vaccine-de | erived poliovirus t | ype 2 (cVDPV2) v | vas reported this | s week. There are 1 | 17 cases reported | l in 2021. | | |
| Nigeria | Humanitarian crisis | Protracted 3 | 10-0ct-16 | n/a | 28-Feb-2022 | - | - | - | - |
| 8 Feb 2022, t | here were 80 691 | refugees from oth | ner countries with | in Nigeria with a | and Yobe (BAY) st Ilmost 76 339 (or 9 th-West/North-Ce | 95%) coming fro | m Cameroon. Mo | | |
| Nigeria | Cholera | Ungraded | 12-Jan-21 | 12-Jan-21 | 8-Apr-2022 | 1 358 | | 31 | 2.3% |
| eas (LGAs). o deaths we | Of these cases, 27 re reported from t | 7% (n=367) are aq wo LGAs in two S | ged 5-14 years an tates; no new stat | d 52% (n=706) te has reported a | | cally, during epi v | veek 12 (ending 2 | 7 March 2022), 1 | 4 cases and |
| Nigeria | COVID-19 | Grade 3 | 27-Feb-2020 | 27-Feb-2020 | 2-May-2022 | 255 766 | 255 766 | 3 143 | 1.2% |
| | of COVID-19 was f ve been reported. | first detected in N | igeria on the 27 F | ebruary 2020. A | s of 2 May 2022, a | total of 255 766 | confirmed cases | with 249 914 rec | overed and 3 |
| Nigeria | Lassa fever | Grade 1 | 1-Jan-21 | 1-Jan-21 | 1-May-2022 | 4 455 | 759 | 149 | 19.6% |
| 8 in week 16 onfirmed cas | to eight cases, wit es including 149 d | th three deaths. The leaths among con | nese were reporte firmed cases have | d from Edo, Ond been reported | ek 17 of 2022 (endo, Gombe and Ko with a case fatality of all confirmed cas | gi States. Cumula rate (CFR) of 19 | atively from week .6% across 23 sta | 1 to 17 of 2022, ates. This is lowe | a total of 759 than the CFF |
| Nigeria | Measles | Ungraded | 14-Mar-22 | 1-Jan-22 | 20-Mar-22 | 9 905 | 1 294 | 0 | 0.0% |
| ates have ex | , 2022 (ending 20 perienced an outbi were collected an | reak this year 202 | 2. Ongoing outbro | | were reported from _GAs across 30 sta | | | | |
| | | id i 254 Word igiv | I+ (29%). | | | | | | tates. A total |
| Nigeria | Monkeypox | Ungraded | 1+ (29%). 9-Sep-21 | 1-Jan-21 | 30-Apr-2022 | 144 | 53 | 0 | tates. A total of 0.0% |
| ccording to t een confirme ccurred amo | he Nigeria Centre f d from seven state ng suspected or co | Ungraded for Disease Contro es namely Adama onfirmed cases. Ir | 9-Sep-21 ol (NCDC), from 1 wa (3), Lagos (3), n 2021, a total of 9 | January to 30 A Cross River (2) 98 suspected ca | | pected cases of mal Territory (2), K throughout the y | nonkeypox were r ano (2), Delta (2) ear. Of the suspec | reported, of which and Imo (1). No cted cases, 34 we | 0.0% 15 have deaths have re confirmed |
| ccording to t een confirme ccurred amo | he Nigeria Centre f d from seven state ng suspected or co | Ungraded for Disease Contro es namely Adama onfirmed cases. Ir | 9-Sep-21 ol (NCDC), from 1 wa (3), Lagos (3), n 2021, a total of 9 | January to 30 A Cross River (2) 98 suspected ca | 30-Apr-2022 April 2022, 46 susp , the Federal Capit ses were reported | pected cases of mal Territory (2), K throughout the y | nonkeypox were r ano (2), Delta (2) ear. Of the suspec | reported, of which and Imo (1). No cted cases, 34 we | 0.0% 15 have deaths have re confirmed |
| ccording to t een confirme ccurred amor om nine state Nigeria | d from seven state of g suspected or co es Delta (9), Lagos Poliomyelitis (cVDPV2) | Ungraded for Disease Contro es namely Adama onfirmed cases. Ir s (6), Bayelsa (6), Grade 2 | 9-Sep-21 of (NCDC), from 1 wa (3), Lagos (3), i 2021, a total of 9 Rivers (6), Edo (3 1-Jun-2018 | January to 30 A Cross River (2) 98 suspected cas 3), Federal Capit 1-Jan-18 | 30-Apr-2022 April 2022, 46 sus , the Federal Capit ses were reported al Territory (1), Nio | pected cases of mal Territory (2), K throughout the y ger (1), Ogun (1), | nonkeypox were r ano (2), Delta (2) ear. Of the suspec Cross River (1) a 423 | eported, of which and Imo (1). No cted cases, 34 we and no deaths rec | 0.0% 15 have deaths have re confirmed orded. |
| ccording to t een confirme ccurred amor om nine state Nigeria | d from seven state of g suspected or co es Delta (9), Lagos Poliomyelitis (cVDPV2) | Ungraded for Disease Contro es namely Adama onfirmed cases. Ir s (6), Bayelsa (6), Grade 2 | 9-Sep-21 of (NCDC), from 1 wa (3), Lagos (3), i 2021, a total of 9 Rivers (6), Edo (3 1-Jun-2018 | January to 30 A Cross River (2) 98 suspected cas 3), Federal Capit 1-Jan-18 | 30-Apr-2022 April 2022, 46 sus , the Federal Capit ses were reported al Territory (1), Nig 8-May-2022 | pected cases of mal Territory (2), K throughout the y ger (1), Ogun (1), | nonkeypox were r ano (2), Delta (2) ear. Of the suspec Cross River (1) a 423 | eported, of which and Imo (1). No cted cases, 34 we and no deaths rec | 0.0% 15 have deaths have re confirmed orded. |
| coording to the seen confirmed courred amount on nine state. Nigeria | he Nigeria Centre f d from seven state ng suspected or co se Delta (9), Lagos Poliomyelitis (cVDPV2) DPV2 cases have Yellow fever y 2021 to 28 Februs pected cases, 5 | Ungraded for Disease Controls namely Adama's onfirmed cases. Ir is (6), Bayelsa (6), Grade 2 been reported in Grade 2 uary 2022, a total | 9-Sep-21 DI (NCDC), from 1 wa (3), Lagos (3), 1 2021, a total of 9 Rivers (6), Edo (3 1-Jun-2018 the country. There 12-Sep-17 of 2 456 yellow from 1 | January to 30 A Cross River (2) 88 suspected ca: 3), Federal Capit 1-Jan-18 e were 415 cVDF 1-Jan-21 ever (YF) suspec | 30-Apr-2022 April 2022, 46 susp, the Federal Capit ses were reported al Territory (1), Nice 8-May-2022 | pected cases of mal Territory (2), K throughout the y ger (1), Ogun (1), 494 environmental sa 54 ported from 526 | nonkeypox were r ano (2), Delta (2) ear. Of the suspec Cross River (1) a 423 mples reported in 54 Local Governmer | eported, of which and Imo (1). No cted cases, 34 we and no deaths rec 0 2021. 3 at Areas (LGA) in | 0.0% 15 have deaths have re confirmed orded. 0.0% 5.6% |
| ccording to t een confirme ccurred amor om nine state Nigeria 2022, 20 cV Nigeria rom 1 Januar | he Nigeria Centre f d from seven state ng suspected or co se Delta (9), Lagos Poliomyelitis (cVDPV2) DPV2 cases have Yellow fever y 2021 to 28 Februs pected cases, 5 | Ungraded for Disease Controls namely Adama's onfirmed cases. Ir is (6), Bayelsa (6), Grade 2 been reported in Grade 2 uary 2022, a total | 9-Sep-21 DI (NCDC), from 1 wa (3), Lagos (3), 1 2021, a total of 9 Rivers (6), Edo (3 1-Jun-2018 the country. There 12-Sep-17 of 2 456 yellow from 1 | January to 30 A Cross River (2) 88 suspected ca: 3), Federal Capit 1-Jan-18 e were 415 cVDF 1-Jan-21 ever (YF) suspec | 30-Apr-2022 April 2022, 46 susy, the Federal Capit ses were reported al Territory (1), Nic 8-May-2022 PV2 cases and 18 et 28-Feb-2022 Cted cases were re | pected cases of mal Territory (2), K throughout the y ger (1), Ogun (1), 494 environmental sa 54 ported from 526 | nonkeypox were r ano (2), Delta (2) ear. Of the suspec Cross River (1) a 423 mples reported in 54 Local Governmer | eported, of which and Imo (1). No cted cases, 34 we and no deaths rec 0 2021. 3 at Areas (LGA) in | 0.0% 15 have deaths have re confirmed orded. 0.0% 5.6% |
| coording to the confirme courred amount of the courred amount of t | he Nigeria Centre f d from seven state ng suspected or co es Delta (9), Lagos Poliomyelitis (cVDPV2) DPV2 cases have Yellow fever y 2021 to 28 Febrususpected cases, 5 accination. | Ungraded for Disease Contros s namely Adama onfirmed cases. Ir s (6), Bayelsa (6), Grade 2 been reported in Grade 2 uary 2022, a total 4 tested positive Grade 3 | 9-Sep-21 ol (NCDC), from 1 wa (3), Lagos (3), 1 2021, a total of 9 Rivers (6), Edo (3 1-Jun-2018 the country. There 12-Sep-17 of 2 456 yellow fror YF by plaque r 14-Mar-20 offirmation of the f | January to 30 A Cross River (2) 98 suspected car 3), Federal Capit 1-Jan-18 e were 415 cVDF 1-Jan-21 ever (YF) suspected car 14-Mar-20 irst COVD-19 car | 30-Apr-2022 April 2022, 46 susp, the Federal Capit ses were reported al Territory (1), Nig 8-May-2022 PV2 cases and 18 e 28-Feb-2022 cted cases were relization test (PRNT | pected cases of mal Territory (2), K throughout the y ger (1), Ogun (1), 494 environmental sa 54 ported from 526 129 931 | nonkeypox were r ano (2), Delta (2) ear. Of the suspec Cross River (1) a 423 mples reported in 54 Local Governmer eur in Dakar. Som | eeported, of which and Imo (1). No cted cases, 34 we and no deaths reconstruction of the control | 0.0% 15 have deaths have re confirmed orded. 0.0% 5.6% 37 states cases had a |

The humanitarian situation has further deteriorated in six countries of the Sahel: Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria. The total amount of people in need of humanitarian assistance is 13.9 million. Additionally, more than 7 million people are internally displaced, and 0.89 million refugees have been registered. 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.

| Country | Event | Grade | Date notified to WCO | Start of reporting period | End of reporting period | Total cases | Cases Confirmed | Deaths | CFR |
|--|---|---|--|---|---|---|---|--|---------------------------------------|
| Sao Tome and Principe | COVID-19 | Grade 3 | 6-Apr-2020 | 6-Apr-2020 | 8-May-2022 | 5 970 | 5 970 | 73 | 1.2% |
| | | | | eported the count I cases have beer | | | 8 May 2022, a tot | al of 5 970 confi | rmed cases of |
| Sao Tome And Principe | Dengue | Ungraded | 11-Apr-2022 | 25-Apr-2022 | 11-May-2022 | 71 | 20 | 0 | 0.0% |
| | | | | outbreak. As of 1 ntagalo (1, 1.4%) | | | nd no deaths have | been confirmed | via RDT from: |
| Senegal | COVID-19 | Grade 3 | 2-Mar-20 | 2-Mar-20 | 1-May-2022 | 86 001 | 86 001 | 1 966 | 2.3% |
| From 2 March 2 | : 2020 to 1 May 20: | 22, a total of 86 0 | 01 confirmed cas | ses of COVID-19 i | ncluding 1 966 d | eaths and 84 017 | recoveries have | been reported in | Senegal. |
| Senegal | Poliomyelitis (cVDPV2) | Grade 2 | | 4-Apr-2021 | 4-May-2022 | 17 | 17 | 0 | 0.0% |
| No case of circu | ılating vaccine-de | rived poliovirus t | ype 2 (cVDPV2) | was reported this | week. There are | 17 cases reported | d in 2021. | | |
| Seychelles | COVID-19 | Grade 3 | 14-Mar-20 | 14-Mar-20 | 9-May-2022 | 43 235 | 43 235 | 167 | 0.4% |
| | OVID-19 confirm 167 deaths have I | | ported in Seyche | les 14 March 202 | 20, as of 9 May 20 |)22 a total of 43 2 | 235 cases have be | een confirmed, ir | cluding 42 553 |
| Sierra Leone | COVID-19 | Grade 3 | 31-Mar-20 | 27-Mar-20 | 15-May-2022 | 7 682 | 7 682 | 125 | 1.6% |
| | | | | confirmed COVID recovered cases. | | ountry. As of 15 | May 2022, a total | 7 682 confirmed | COVID-19 |
| Sierra Leone | Lassa fever | Ungraded | 12-Feb-2021 | 1-Jan-21 | 20-Mar-22 | 20 | 20 | 11 | 55.0% |
| reported from k Lassa fever is k | Kenema (15), Kaila nown to be ender | ahun (3), and Ton mic in Sierra Leor | kolili (2) districts e and surroundir | since the beginn | ing of 2021. Fron n 2016-2020 Sier | n these cases, 65 ra Leone experie | o Lassa fever in S % were females a nced gradually de 1). | and 35% were <5 | years old. |
| Sierra Leone | Measles | Ungraded | 1-Nov-21 | 1-Jan-22 | 20-Mar-22 | 236 | 225 | 0 | 0.0% |
| | | | | | | | cases (Outbreak 's support to con | | |
| No new cases o | (- / | ine-derived policy | virus tyne 2 (cVD | PV2) reported this | s week. Five case | s were renorted i | n 2021, and 10 w | ere renorted in 2 | 020 |
| South Africa | COVID-19 | Grade 3 | 5-Mar-20 | 3-Mar-20 | 15-May-2022 | 3 891 793 | 3 891 793 | 100 755 | 3.4% |
| | | | | <u> </u> | - | | ned cases and 10 | | ! |
| South Sudan | Acute Food Insecurity | Grade 2 | 18-Dec-2020 | 5-Apr-2021 | 15-May-2022 | - | - | - | - |
| 000 are in IPC sinsecurity (causeffects of COVII | 5, 2.89 million are sed by sub-nation | in IPC 4, and 4.7 al and localized v ess to basic services | 7 million are in I iolence), populati | PC 3. Food insect on displacements | urity in South Sud s, persistent annu | lan is driven by c al cereal deficits, | y phase (IPC) 3 o limatic shocks (fle diseases and pes that continue to e | oods, dry spells, sts, the economic | and droughts), crisis, the |
| South Sudan | Floods | Grade 2 | 15-Jul-2021 | 1-May-2021 | 15-May-2022 | - | - | - | - |
| expected have on May and affe | displacement of moted over 835K pe | nore than 320 000 eople in 33 count | people who cou ies. A rapidly wor | Id experience loss | s of livelihoods, d was noted in Octo | lisease outbreaks | ndated from last i and food insecur ires are being tak | rity. In 2021 the f | looding began |
| South Sudan | Humanitarian crisis | Protracted 3 | 15-Aug-2016 | n/a | 30-Apr-2022 | - | - | - | - |
| 2.02 million per of more than 10 At least 60 peop sporadic clashe | ople internally dis 00 000 people wh ole died. In Upper s between farmin | placed people as o fled to Abyei to Nile state, fightin g communities an | of 30 April 2022. wn and neighbou g between factio nd herders in Ma | In March 2022, in the ring counties to Tensor in the area cau | nter-communal te wic, Warrap, and ise 14 000 people e 19 350 people to | ensions in the Ab Northern Bahr e to flee to Ethiop | eople in need of h yei Administrative I Ghazal state in v ia. In Eastern Equ Magwi Town and d | e Area led to disp arious displacem atoria State there | lacement ent sites. e have been |
| South Sudan | Anthrax | Ungraded | 25-Apr-2022 | 13-Mar-22 | 11-Apr-2022 | 34 | 8 | 0 | 0.0% |
| positive for bac | | cteria. Cases were | reported from 1 | 3 March - 11 Apr | | | mpled 18 individuations where the | | |

| Country | Event | Grade | Date notified to WCO | Start of reporting period | End of reporting period | Total cases | Cases Confirmed | Deaths | CFR |
|--|--|--|---|---|--|--|--|---|---|
| South Sudan | Cholera | Ungraded | 21-Apr-2022 | 21-Mar-22 | 7-May-2022 | 31 | 20 | 1 | 3.2% |
| confirmed posit group between | ive by RDT for ch 0-4 years accoun | olera and 8 teste ted for 45.2% of | d positive by cult all cases, followe | ure at the Nationa d by age group ≥ | entiu IDP camp in al Public Health La 20 years with 22. d of the current d | aboratory in Juba 6%, age group 1 | i. Females accoun 0-14 years accoui | nt for 52% of all c nted for 16.1%. F | ases. The age Rubkona county |
| South Sudan | COVID-19 | Grade 3 | 5-Apr-2020 | 5-Apr-2020 | 15-May-2022 | 17 548 | 17 548 | 138 | 0.8% |
| | , the Ministry of I n the country incl | | | | ase of COVID-19. | As of 15 May 20 | 22, a total of 17 5 | 548 confirmed CO | VID-19 cases |
| South Sudan | Hepatitis E | Ungraded | 3-Jan-18 | 1-Jan-19 | 08-May-2022 | 2 515 | 104 | 23 | 0.9% |
| The current outl since January 2 | | u IDP camp is or | igoing. As of 22 N | Aarch 2022, a tot | al of 2 515 cases | of hepatitis E inc | luding 23 deaths | (CFR: 0.9%) have | e been reported |
| South Sudan | Malaria | Ungraded | 28-Dec-2021 | 1-Jan-22 | 17-Apr-2022 | 848 594 | 848 594 | 158 | 0.0% |
| quartile malaria | trends for the pas | st five years inclu | iding Juba, Tonj r | orth, Aweil cente | B deaths have been er, Aweil south, an ang the counties o | d Rubkona. In 20 | | | |
| South Sudan | Measles | Ungraded | 23-Feb-2022 | 1-Jan-22 | 17-Apr-2022 | 222 | | 2 | 0.9% |
| deaths (CFR 0.9 Maban county, s with confirmed | 1%) have been rep 5 cases and 0 dea outbreaks, local r ee camp and 22 1 apaign | ported since the b th from Tambura eactive vaccination | peginning of this y County, 13 cases on campaigns hav | year including 43 s with 0 death fro ye been conducte | aks (Gogrial Wes cases and 2 deat om Raja and 6 cas d in Maban, Torit es while 32 411 (S | hs (CFR4.7%) from Ses and 0 death from and Tambura. In | om Torit County, 1 om Gogrial West Maban county 96 | 161 cases with 0County. Among t6% of cases were | death from he five counties residing within |
| South Sudan | Poliomyelitis (cVDPV2) | Grade 2 | 22-0ct-20 | 22-0ct-20 | 15-May-2022 | 59 | 59 | 0 | 0.0% |
| No case of circu | | rived poliovirus t | ype 2 (cVDPV2) v | were reported this | s week. There wei | re 9 cVDPV2 case | es reported in 202 | 21 and 50 in 2020 |). |
| South Sudan | Suspected Meningitis | Ungraded | 25-Apr-2022 | 1-Jan-22 | 13-May-2022 | 224 | 4 | 17 | 7.6% |
| (45%). Of these | suspected cases | , there have beer | 17 deaths (CFR | 7.6%) of which n | in NBeG from we nost have occurre orted the highest o | d in infants <1yr | (25% of all death | s). A spike in sus | spected cases |
| Tanzania, United Republic of | Cholera | Ungraded | 25-Apr-2022 | 14-Apr-2022 | 12-May-2022 | 214 | 24 | 1 | 0.5% |
| May 2022, 214 | cumulative cases | and 1 death (CFI | R 0.5%) have bee | n reported from t | 2022 of an outbre the Districts of Ta olerae. About 37% | nganyika in Katav | /i Region (88, 41. | 1%) and Uvinza i | n Kigoma |
| Tanzania, United Republic of | COVID-19 | Grade 3 | 16-Mar-20 | 16-Mar-20 | 6-May-2022 | 33 928 | 33 928 | 803 | 2.4% |
| | | | | | y and Children in ed in Tanzania Ma | | | st case of COVID | -19 on 16 |
| Togo | COVID-19 | Grade 3 | 6-Mar-20 | 1-Mar-20 | 8-May-2022 | 37 006 | 37 006 | 273 | 0.7% |
| | 20, the Ministry of 273 deaths and 3 | | | | confirmation of it ountry. | ts first case of CC |)VID-19. As of 8 l | May 2022, a total | of 37 006 |
| Togo | Measles | Ungraded | 2-Feb-2022 | 25-Nov-21 | 20-Mar-22 | 831 | 134 | 0 | 0.0% |
| Diseases. As of | | of 831 cases and | | | ary 2022 after co ugh Integrated Di | | | | |
| Togo | Poliomyelitis (cVDPV2) | Grade 2 | 18-Oct-19 | 13-Sep-19 | 16-Mar-22 | 17 | 17 | 0 | 0.0% |
| | cVDPV2 was repoin 2019 remains e | | oast week. No cas | ses have been rep | ported in 2021.Th | ere were nine cas | es in 2020 while | the total number | of cVDPV2 |
| Uganda | COVID-19 | Grade 3 | 21-Mar-20 | 21-Mar-20 | 14-May-2022 | 164 215 | 164 215 | 3 598 | 2.2% |
| The first COVID- were reported. | -19 confirmed ca | se was reported i | n Uganda on 21 I | March 2020. As o | of 14 May 2022, a | total of 164 215 | confirmed COVID | -19 cases with 3 | 598 deaths |
| Uganda | Yellow fever | Grade 2 | 3-Mar-21 | 1-Mar-22 | 10-Apr-2022 | 7 | 1 | 0 | 0.0% |
| 2022, that teste Research Institu | d positive for yell ite (UVRI). As of a anorexia, abdomi | ow fever by Enzy 25 March 2022, t | me-linked immur hree additional sa | osorbent assay (amples tested po | llow fever cases, v ELISA) and by pla sitive by PRNT at ore throat. Only o | aque reduction no the UVRI. Cases | eutralization test (presented with fe | PRNT), at the Ug ver, vomiting, na | anda Virus usea, diarrhoea, |

| Country | Event | Grade | to WCO | reporting period | reporting period | Total cases | Confirmed | Deaths | CFR |
|------------------------------------|--|------------------------------------|-------------------------------------|---------------------|---------------------|---------------------|-------------------|-------------------|----------------|
| Zambia | Cholera | Ungraded | 13-Apr-2022 | 11-Apr-2022 | 14-May-2022 | 21 | 21 | 0 | 0.0% |
| | reak was declared s), Chilanga (9 ca | | | of 21 cases have | been registered v | vith no deaths as | of 14 May 2022. | Three districts a | re affected: |
| Zambia | COVID-19 | Grade 3 | 18-Mar-20 | 18-Mar-20 | 15-May-2022 | 320 627 | 320 627 | 3 983 | 1.2% |
| | 0-19 confirmed ca ing 3 983 deaths a | | | March 2020. As o | f 15 May 2022, a | total of 320 627 (| confirmed COVID | -19 cases were r | eported in the |
| Zimbabwe | Anthrax | Ungraded | 6-May-2019 | 1-Jan-22 | 20-Mar-22 | 22 | 0 | 0 | 0.0% |
| Gokwe North D listricts but a s | tbreak is ongoing District and Gokwe surge in cases stal and 306 cases an | South District in ted appearing in | Midlands Provinc week 38 when ca | ce. This outbreak | started in Week 3 | 86 of 2019, affect | ing mainly Buher | a and Gokwe Nor | th and South |
| Zimbabwe | COVID-19 | Grade 3 | 20-Mar-20 | 20-Mar-20 | 14-May-2022 | 249 206 | 249 206 | 5 482 | 2.2% |
| | 0-19 confirmed ca luding 5 482 deat | | | | s of 14 May 2022 | , a total of 249 20 | 06 confirmed CO\ | /ID-19 cases wer | e reported in |
| Closed Events | | | | | | | | | |
| Ethiopia | Chikungunya | Ungraded | 17-Feb-2022 | 12-Jan-22 | 11-May-2022 | 439 | 0 | 0 | 0.0% |
| n 17 January | 2022, Chikungun | /a Outbreak was : | suspected in Dolo | ado district of L | iben zone, Somal | i region. A total o | f 439 suspected (| cases including 2 | 27 female |

End of

Start of

The South African Government declared a National State of Disaster in response to floods, which have wreaked havoc in KwaZulu-Natal and parts of the Eastern Cape. On 11 and 12 April 2022, parts of KwaZulu-Natal received between 200 and 400 millimetres of rainfall in a 24-hour period, which affected all parts of the province. The entire eThekwini metro and the districts of iLembe, Ugu, King Cetshwayo and uMgungundlovu were reported as being the most affected. In the Eastern Cape, particularly in the districts of Alfred Nzo, Joe Gqabi and OR Tambo, roads, bridges and houses have been extensively damaged, especially in the Port St Johns' area. As of 11 May 2022, 429 people are known to have died in KwaZulu-Natal. One death has also been reported in the Eastern Cape areas located close to rivers, waterways, particularly informal settlements, where many dwellings were swept away.

subjects (51.7%) have been reported until 27 February 2022. No deaths were registered. The number of cases sharply increased from 13 cases at epi week 3, 2022 to a

11-May-2022

12-Apr-2022

40 000

40 000

peak of 124 cases at epi week 4 before progressively dropping down, up to 30 cases reported at epi week 9.

14-Apr-2022

Ungraded

Floods

South Africa

Togo Lassa Fever Ungraded 28-Feb-2022 26-Feb-2022 9-Apr-2022 1 1 1 1 100.0%

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 9 April 2022, 22 contacts provided samples for diagnostic testing for which all were reported negative for Lassa fever.

†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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Data sources

Data and information is provided by Member States through WHO Country Offices via regular situation reports, teleconferences and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.

