

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 25: 13 - 19 June 2022

Data as reported by: 17:00; 19 June 2022



World Health
Organization

REGIONAL OFFICE FOR

Africa

WHO Health Emergencies Programme

2

New events

157

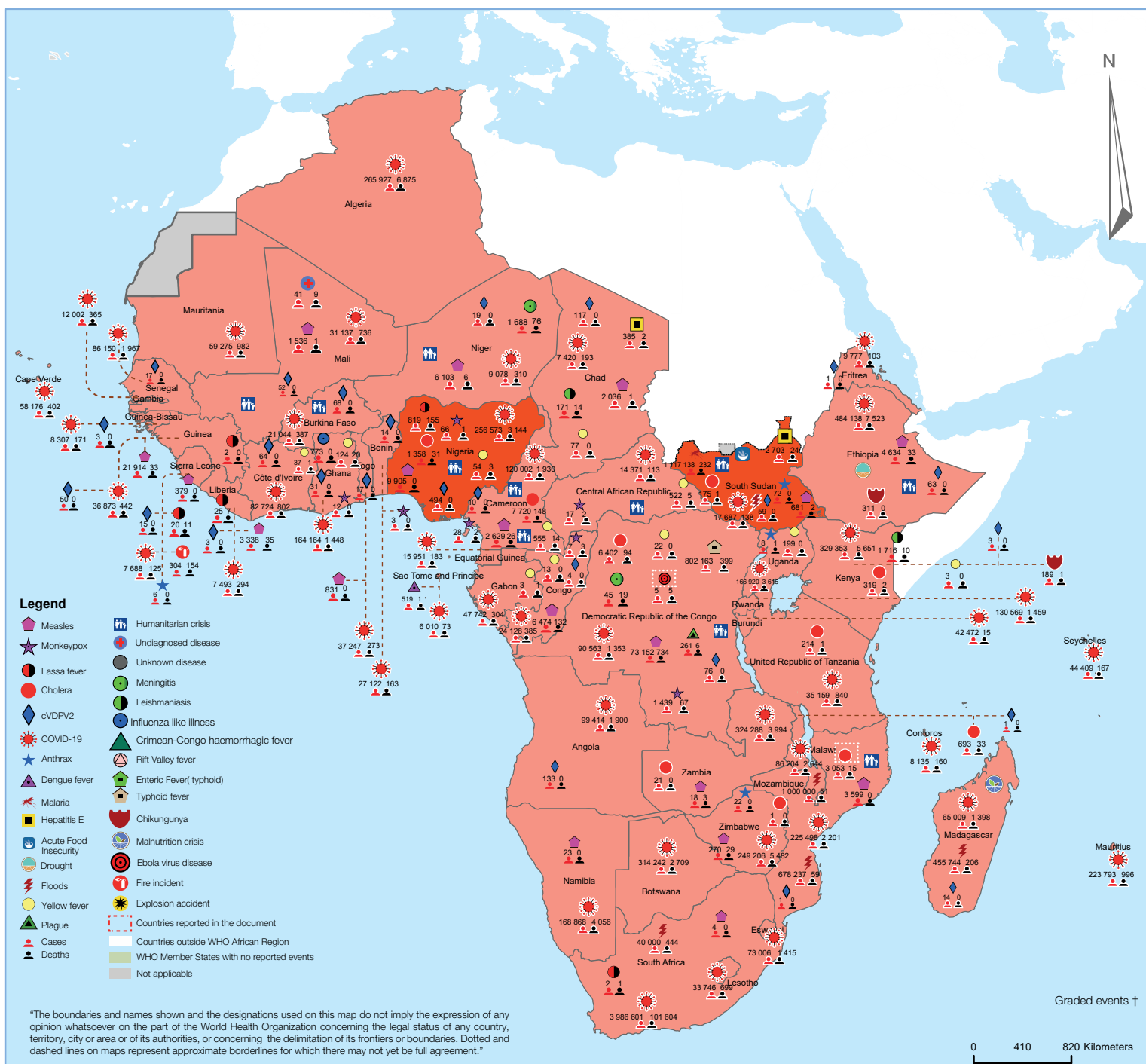
Ongoing events

137

Outbreaks

22

Humanitarian
crises



4

Grade 3 events

40

Grade 2 events

1

Grade 1 events

55

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

- [Cholera in Mozambique](#)
- [Ebola Virus Disease in the Democratic Republic of the Congo](#)
- [COVID-19 across the WHO African region](#)

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 countdown to the end of the current Ebola virus disease outbreak in the Democratic Republic of the Congo continues with 31 consecutive days of no new cases reported. Despite efforts to control the outbreak, the response has been challenged by community resistance and strike actions staged by local health workers. A critical challenge will be to maintain a high level of vigilance and strengthen response actions amidst community reluctance as the count down elapse. Although some efforts have been initiated by the government, full resolution of the strike actions will enhance opportunities for taking stock of the current response actions.
- An outbreak of cholera is ongoing in Mozambique in the aftermath of two cyclones that recently affected the country. Already endemic for cholera, the cyclone events have exacerbated the challenges of limited access to clean water sanitation and hygiene, a key driver of the cholera outbreak recurrence in the country. While a public health response has been mounted to mitigate the impact of the event, enhanced investment in sustainable access to water sanitation and hygiene (WASH) services is needed to prevent frequent outbreaks of cholera in the country.

Ongoing events

Cholera

Mozambique

3 053
case

15
Deaths

0.5%
CFR

EVENT DESCRIPTION

The cholera outbreak recently declared by Mozambique's health authorities affecting Sofala and Zambézia provinces continues. During epidemiological week 23 (week ending 12 June 2022), 57 new cases were reported across the two affected provinces. The outbreak peaked during epidemiological week 13 (week ending 3 April 2022) when 296 cases were reported. Since then, the overall trend continues to decline although the cases reported during week 13 were slightly higher than the preceding week when 53 cases were reported.

From 13 January to 12 June 2022, a total of 3 053 cholera cases with 15 deaths (CFR 0.5%) were reported from seven districts across the two provinces, Sofala (n=2 284) and Zambézia (n=769). Caia (n=707) and Morrumbala (n=1 333) districts in Sofala Province and Mopeia district (n=589) in Zambézia Province have been at the epicentre of the outbreak. These three districts combined account for 86% (n=2 629) of the cumulative cases reported. The other affected districts include Quelimane (n=180) in Zambezia Province and Chemba (n=36), Maringue (n=30), and Marromeu (n=178) districts in Sofala Province. The 15 deaths reported so far are from Chemba (n=1), Mopeia (n=4), and Morrumbala (n=10) districts.

Females account for 51.0% (n=1 555) of the cumulative cases reported. According to the available information, cases distribution by age groups are as follows: less than five years old (n=412), 5 – 14 years old (n=783), and 15 years and above (n=1 747).

The outbreak of cholera in Mozambique followed the, tropical storm Ana and cyclone Gombé, which made landfall between January and March 2022 and affected six provinces across the country: Nampula, Zambézia, Tete, Niassa, Sofala and Manica. Both cyclones resulted in mass displacement and deaths, destruction of infrastructures including disruption of water supply.

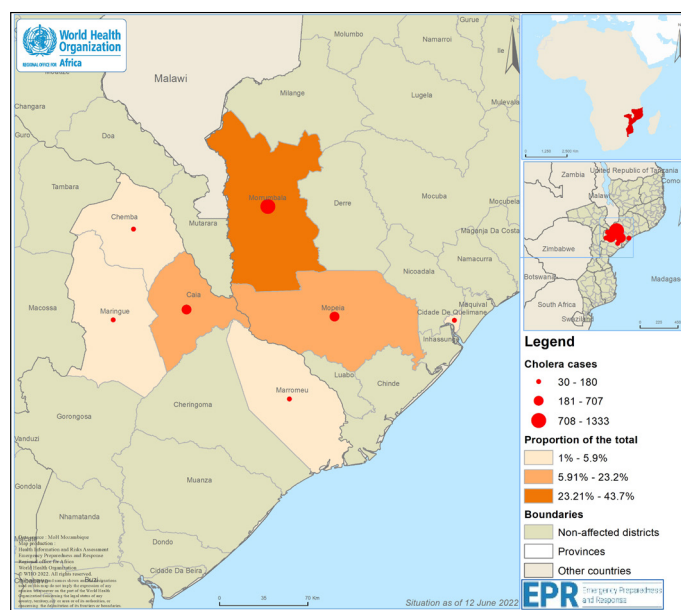
PUBLIC HEALTH ACTIONS

- In line with a national response plan, the Ministry of Health of Mozambique, with support from WHO and partners have mounted public health response through the implementation of targeted activities to control the outbreak.
- A coordination mechanism is in place at the provincial and district levels.
- Surveillance activities, including case detection and investigation across the affected districts remain ongoing.
- Rapid diagnostic tests, including training have been provided to health workers to aid in the laboratory confirmation of cases.
- Cholera kits have been pre-deployed and distributed in the affected health districts.
- Ten cholera treatment centres, four in Sofala and six in Zambezi province, have been set up for the management of cases. Training on infection prevention and control measures have been provided to health workers at the treatment facilities.
- Risk communication and messaging on cholera prevention have been intensified using community leaders and volunteers as well as mass media platforms to target affected communities.

[Go to overview](#)

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Distribution of cases of cholera in Mozambique by district, as of 12 June 2022

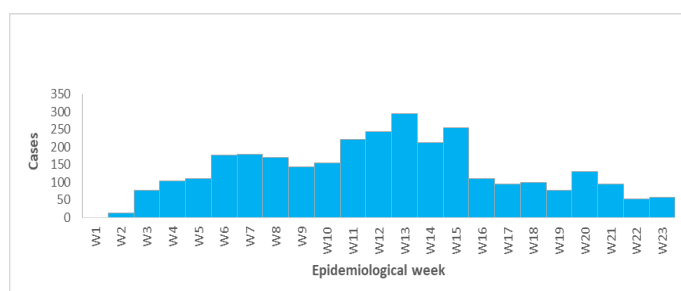


- Cross-border collaboration with neighbouring Malawi is being strengthened through routine engagements and information sharing.
- A reactive cholera vaccination is being planned.

SITUATION INTERPRETATION

The current outbreak of cholera in Mozambique comes in the aftermath of two major cyclones that hit the southern African nation earlier in the year compromising access to clean water, sanitation, and hygiene. Cholera remains endemic in the country, and such events can exacerbate the situation. Support from WHO and partners has helped national authorities respond to the event, however, long-term investment in sustainable access to clean water, sanitation, and hygiene for the population would be crucial to prevent the recurrent outbreaks of cholera in the country.

Weekly epidemic curve of cholera cases in Mozambique, Week 1-23, 2022



[Go to map of the outbreaks](#)

EVENT DESCRIPTION

The countdown to end of the 14th Ebola virus disease (EVD) outbreak recently declared in the Democratic Republic of the Congo continues, with no new case reported since 20 May 2022. This marks 31 consecutive days without a confirmed case of EVD reported in the Democratic Republic of the Congo. The outbreak is expected to be declared over after 42 consecutive days without a new case of the disease.

As of 19 June 2022, five (four confirmed and one probable) cases of EVD have cumulatively been reported, with a case fatality ratio of 100%. Three health areas (Libiki, Mama Balako and Motema Pembe) across two health zones (Mbandaka and Wangata) in Equateur Province have been affected so far.

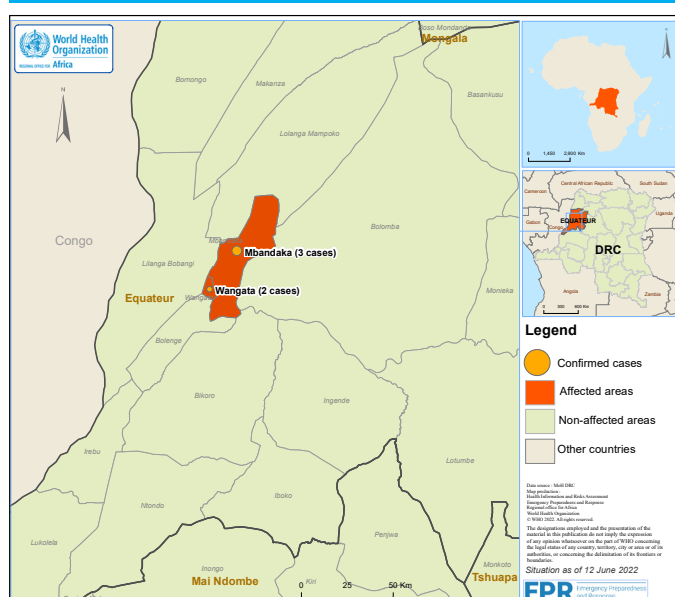
Surveillance activities, including active case search, investigation of alerts and testing of suspected cases, are still ongoing, though partially affected by strike actions staged by local health workers. A total of 1 076 contacts were identified and listed since the beginning of the outbreak. No contact is currently under follow-up as the last batch completed 21 days of monitoring on 12 June 2022. A total of 742 samples have been tested for EVD since the onset of the outbreak, of which four were positive for the Ebola virus.

Local healthcare workers who have been on strike for more than a month are gradually resuming work as some remedial actions have been initiated by the government to address their concerns. A full resolution remains pending.

PUBLIC HEALTH ACTIONS

- Response activities at the field level are still being coordinated by the Provincial Health Division with technical and operational support from the national Ministry of Health, WHO, and other partners.
- Rapid response teams from Ingende and Bolomba health zones are being trained on surveillance activities.
- No new contacts are being followed-up; all remaining contacts completed their 21 days of follow-up on 12 June 2022.
- As of 16 June 2022, 493 676 (92.9%) of 531 334 travellers registered at the points of entry were screened for EVD, 245 of whom were suspected of EVD and tested. None were positive.
- As of 18 June 2022, 1 643 persons in the affected health zones have been vaccinated against EVD using the ring strategy targeting contacts and contacts-of-contact. A total of 302 are contacts and 1 341 are contacts-of-contacts. There are 846 frontline health workers among those vaccinated.
- Seventy-four new samples were tested for EVD in the past week, giving a total of 742 samples tested since the onset of the outbreak including four positive cases. A total of 1 078 GeneXpert cartridges remained in stock across the country as of 18 June 2018, with 189 available at the laboratory in Mbandaka City.

Location of confirmed cases of Ebola virus disease in Equateur Province, Democratic Republic of the Congo, as of 19 June 2022



- Other activities continue to be undertaken on ground, including IPC interventions in health care facilities and the community, psycho-social support, and RCCE actions to boost contact tracing and vaccination activities.

SITUATION INTERPRETATION

Even when the outbreak seems to be under control, the need to strengthen surveillance activities and other preventive public health measures remain paramount. The strike action from local health workers has been evolving for more than one month, hampering the optimal implementation of response activities on the ground. The effort by the government to address the problem is welcomed and should be pursued. Despite the enormous challenges, the swift response of national authorities and partners has paid off in controlling this outbreak so far.



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EVENT DESCRIPTION

COVID-19 cases decreased in the WHO African region for the fifth consecutive week following the surge reported in early April. In the past week (week ending 19 June 2022), a total of 16 724 new cases were reported compared to 24 422 in the preceding week (week ending 12 June 2022), marking a 32% week-on-week decrease. The majority of new cases (81%, $n=13\,170$) were reported from South Africa (6 240), Ethiopia (3 311), Kenya (2 132), Cabo Verde (807), and Zambia (680).

COVID-19-associated deaths decreased by 57% over the past week in the African region, with a total of 103 new deaths reported compared to 241 in the preceding week. The majority of new deaths (83%, $n=91$) were reported from six countries, namely South Africa (64), Zimbabwe (10), Zambia (7), Ethiopia (6), and Eswatini (4).

Cumulatively, 8.6 million cases with 172 301 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 for 72.0% and 67.6% of the African continent's cumulative 11.9 million cases and 254 690 deaths respectively reported since the onset of the pandemic.

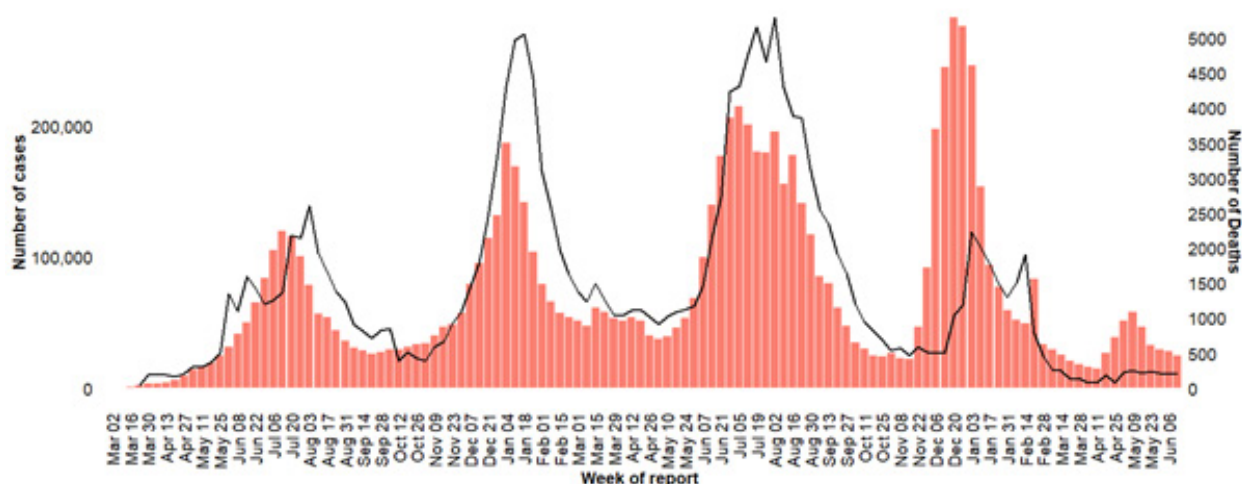
No country in the African region is currently experiencing a resurgence of the COVID-19 pandemic, however, six countries – Botswana, Cape Verde, Ethiopia, Ghana, Kenya, and Madagascar – are being closely monitored due to either high incidence or a recent uptick in new cases.

The SARS-CoV-2 Omicron variant remains dominant in the African region since the start of the fifth wave of the pandemic in December 2021, with the highly transmissible BA.4 and BA.5 sub-lineages detected largely among new cases.

SITUATION INTERPRETATION

Although trends continue to decline across the African region, this is not uniform among countries. The slight upsurge in cases reported from Botswana, Cape Verde, Ethiopia, Ghana, Kenya, and Madagascar indicates that the risk of new infection and spread of the disease persists. National authorities need to continue to monitor trends, investigate new clusters swiftly, and implement risk-based public health response measures, including increasing vaccination uptake among vulnerable populations. Preventing the potential resurgence of the pandemic in the African region will require enhanced efforts to put communities at the centre of the response.

Trends of confirmed COVID-19 cases and deaths in the WHO African Region by week of report, 25 February 2020 – 19 June 2022 ($n = 8\,626\,182$)



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									
Benin	Monkeypox	Ungraded		14-Jun-2022	14-Jun-2022	3	3	0	0.0%
Three cases of monkeypox have been confirmed in Benin, according to laboratory reports released on 14 June 2022. Two of the cases reportedly had recent travel history to Nigeria. The other case was detected in the North of the country with no reported history of recent travel.									
Zambia	Measles	Ungraded		13-Jun-2022	13-Jun-2022	18		3	16.7%
An outbreak of measles involving 18 cases with three deaths have been reported from Mushindano district, North-Western Province, Zambia. The outbreak is reportedly occurring in a setting with low immunisation coverage against the disease.									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-2020	25-Feb-2020	19-Jun-2022	265 975	265 975	6 875	2.6%
From 25 February 2020 to 19 June 2022, a total of 265 975 confirmed cases of COVID-19 with 6 875 deaths (CFR 2.6%) have been reported from Algeria. A total of 178 464 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	8-May-2022	99 414	99 414	1 900	1.9%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 8 May 2022, a total of 99 414 confirmed COVID-19 cases have been reported in the country with 1 900 deaths and 97 441 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-2019	1-Jan-19	24-Apr-2022	133	133	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 138. These cases are from several outbreaks which occurred in 2019.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	12-Jun-2022	27 122	27 122	163	0.6%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 12 June 2022, a total of 27 122 cases have been reported in the country with 163 deaths and 26 742 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-2019	8-Aug-2019	15-Jun-2022	14	14	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Six 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	16-Jun-2022	314 242	314 242	2 709	0.9%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 16 June 2022, a total of 314 424 confirmed COVID-19 cases were reported in the country including 2 709 deaths and 306 118 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	9-Jun-2022	-	-	-	-
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 a current mass displacement of 1 850 293 internally displaced persons as of 30 April 2022. There have been IDPs from all 13 regions, however, the majority have come from Centre-Nord (35.9%) and Sahel (31.7%) regions. More than 50 people were killed in an attack by a non-state armed group on 25 May 2022 while trying to flee Madjoali commune (Est region). Armed groups have blockaded the area since February 2022 and residents cannot move freely. In April 2022, there was an increased use of improvised explosive devices (IEDs) along the main access routes in North centre and the encirclement of Djibo, the second largest city in the Sahel region. 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. Access to health services remain a challenge for the population in affected areas. There is a total of 179 non functional health facilities and 353 facilities that function at a minimum level of their capacity.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	31-May-2022	21 044	21 044	387	1.8%
Between 9 March 2020 and 31 May 2022, a total of 21 044 confirmed cases of COVID-19 with 387 deaths and 20 497 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	15-Jun-2022	68	68	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 were reported this week. There were two cases reported in 2021, and 66 in 2020. The country is affected by different outbreaks, one linked to the Jigawa outbreak in Nigeria and one to the Savanes outbreak in Togo.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	19-Jun-2022	42 472	42 472	15	0.0%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 19 June 2022, the total number of confirmed COVID-19 cases is 42 472, including 15 deaths and 42 354 recovered.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-2013	27-Jun-2017	11-May-2022	-	-	-	-
According to UNHCR and OCHA reports, an estimated 1 942 054 people need assistance, 357 631 people are internally displaced and 135 257 people are returnees, as of 30 April 2022.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-2018	11-May-2022	-	-	-	-
According to UNHCR reports, an estimated 579 136 Internally Displaced People (IDPs) have been registered as of 30 April 2022. Targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers are still being reported. Schools resumed session, but teachers and students are still facing 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. In addition, there are 478 066 refugees, of whom nearly 345 622 (72.3%) arrived from Central African Republic.									
Cameroon	Cholera	Grade 2	1-Jan-21	25-Oct-21	2-Jun-2022	7 720	537	148	1.9%
From 25 Oct 2021 to 22 May 2022, a total of 7 720 suspected cases of cholera including 537 confirmed by culture and 148 deaths (CFR 1.9%) have been reported in Cameroon, from South-West (5 258 cases, 84 deaths; CFR 1.6%), Littoral (2 101 cases, 57 deaths; CFR 2.7%), South (182 cases, two deaths; CFR 1.1%), Centre (130 cases, four deaths; CFR 3.2%), Far-North (8 cases, no death), and North (26 cases, one death; CFR 3.8%) regions. In addition, on 20 May 2022, the Mifi district in the West region of the country started reporting new cases, with 15 cases and no death recorded so far. The outbreak is currently active in four regions (Centre, Littoral, South-West and West) and 15 districts, out of the 30 that have already reported a suspected cholera case since October 2021. Cases are aged between 2 months and 99 years with a median age of 27 years. Females are twice less affected than males (M/F sex ratio = 2:1).									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	25-May-2022	120 002	120 002	1 930	1.6%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 25 May 2022, a total of 120 002 cases have been reported, including 1 930 deaths and 118 039 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-2019	1-Jan-22	5-Jun-2022	2 629	1 196	26	1.0%
From week 1 to week 22, 2022 (ending 5 June), through Integrated disease surveillance and response (IDSR) reporting, a total of 2 629 measles cases and 1 196 confirmed (45.5%) with 26 deaths (CFR 1.0%) have been reported in Cameroon. Of the total reported cases, 1 801 were investigated (68.5%)									
Cameroon	Monkeypox	Ungraded	24-Feb-2022	1-Jan-22	2-Jun-2022	28	3	2	7.1%
Cameroon has reported 28 suspected cases with two deaths from four districts across three regions since the beginning of 2022. Three cases have been laboratory confirmed from Kumba Health District in the South-West (2) and Ayos Health District in the Centre Region (1).									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	10-Jun-2022	10	10	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported during epi week 22, 2022. There are three cases reported in 2021 and seven cases in 2020. No case has yet been reported for 2022									
Cameroon	Yellow fever	Grade 2	7-Feb-2021	4-Jan-21	2-Jun-2022	555	3	14	2.5%
From 1 January 2022 to 22 May 2022, a total of 555 suspected cases of yellow fever were investigated including 25 probable cases (tested IgM positive) and three confirmed cases (tested positive by plaque reduction neutralization test. Fourteen deaths were recorded, giving a CFR of 2.5%. All ten regions of the country notified suspected cases; the 3 confirmed cases are from Adamawa (Ngaoundere Urbain health district) and West (Foumbot and Malantouen health districts) regions of the country.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	18-Jun-2022	58 176	58 176	402	0.7%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 18 June 2022, a total of 58 176 confirmed COVID-19 cases including 402 deaths and 56 692 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-2013	11-Dec-2013	1-Jun-2022	-	-	-	-
The conflict in CAR has intensified again since the beginning of 2022. According to UN OCHA, between January 2021 and May 2022, 31 civilians were killed and 49 injured in 75 accidents and incidents involving landmines and other explosive devices. In April 2022, CAR reported one of the highest proportions of critically food insecure people in the world: nearly 50% of the population (2.2 million people) do not have enough to eat and do not know where their next meal will come from. The situation is particularly worrying in the Bakouma, Kouï, Ngaoundaye, Obo and Zémio Sub-prefectures where the proportion of people affected by food insecurity is between 65% and 75%. In particular, 638,000 people are already in the emergency phase, on the verge of famine. During the first quarter of 2022, humanitarian partners provided life-saving food and nutritional assistance to 277,750 people, representing only 22.3% of the target. Humanitarian access remains very limited, if not impossible, in several localities in Ouham-Pendé, Haut-Mbomou, Basse-Kotto and Ouaka Prefectures.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-May-2022	14 371	14 371	113	0.8%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in Central African Republic on 14 March 2020. As of 16 May 2022, a total of 14 371 confirmed cases, 113 deaths and 14 210 recovered were reported.									
Central African Republic	Monkeypox	Ungraded	3-Mar-22	4-Mar-22	14-Jun-2022	17	8	2	11.8%
As of 12 June 2022, Central African Republic has so far recorded 17 suspected cases of monkey pox including eight confirmed cases and two deaths (CFR 11.8%), for year 2022. The confirmed cases were reported from three health districts: Mbaïki (six cases, two deaths), Alindao (one case, no death) and Bimbo (one case, no death).									
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-2021	12-Jun-2022	522	23	5	1.0%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test (PRNT) at the Centre Pasteur of Cameroun. During epi week 23 (ending 12 June 2022), four new suspected cases were reported; As of 12 June 2022, a total of 538 suspected cases of yellow fever have been reported from three regions and five health districts of the country, including five deaths (CFR 1.0%). Of the 448 suspected cases investigated, 25 tested positive to yellow fever by PRNT and 1 tested positive by PCR.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	13-Jun-2022	7 420	7 420	193	2.6%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 13 June 2022, a total of 7 420 confirmed COVID-19 cases were reported in the country including 193 deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-Jan-22	171	15	14	8.2%
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-2018	1-Jan-22	8-May-2022	2 036	51	1	0.0%
From week 1 to week 18, 2022(ending 8 May), a total of 2 036 suspected cases of measles, 51 confirmed and one death (0.05%) reported from 110 out of 139 districts. A total of 22 other districts are suspected in outbreak (more than five reported cases/month); Due to lack of test kits in country, a total of 250 specimens were shipped to Cameroon (Centre Pasteur Yaoundé) for testing and the results are awaited.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	10-Jun-2022	117	117	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported during epi week 22, 2022. Three cases have already been reported since the beginning of 2022. No cases were however reported in 2021. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 9 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high. The number of cases reported in 2019 has been revised from 8 to 9.									
Chad	Yellow fever	Grade 2	13-Nov-21	1-Nov-21	10-Apr-2022	77	35	0	0.0%
On 13 November 2021, the Institut Pasteur in Dakar shared the results of 17 samples of yellow fever cases from the Mandoul district, Chad, of which two tested 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 10 April 2022, a total of 77 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.									
Comoros	COVID-19	Grade 3	30-Apr-2020	30-Apr-2020	11-Jun-2022	8 135	8 135	160	2.0%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 11th June 2022, a total of 8 135 confirmed COVID-19 cases, including 160 deaths and 7 969 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	29-May-2022	24 128	24 128	385	-
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 29 May 2022, a total of 24 128 cases including 385 deaths and 23 644 recovered cases have been reported in the country.									
Congo	Measles	Ungraded	14-Mar-22	1-Jan-22	15-May-2022	6 474	6 474	132	2.0%
From week 1 to week 19, 2022 (ending 15 May); a total of 198 lab confirmed measles cases and 6 276 cases confirmed through Epi-linkage are reported; 21 health districts in nine departments are having outbreaks. Outbreak response vaccination planned in integration with yellow fever preventive mass vaccination campaign. All 12 departments for the country to be reached with the planned measles vaccination campaign									
Congo	Monkeypox	Ungraded	23-May-2022	1-Jan-22	30-May-2022	7	2	3	42.9%
Since the beginning of 2022, seven suspected cases with three deaths have been reported from Impfondo District in the country's northern department of Likouala on the border with the Democratic Republic of Congo and Central Africa. Samples from two cases sent to the National Institute of Biomedical Research (INRB) Laboratory in Kinshasa on 12 April 2022 were laboratory-confirmed.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	15-Jun-2022	4	4	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported during epi week 22, 2022. There were two cases reported in 2021 and two cases also reported in 2020									
Congo	Yellow fever	Ungraded	31-Mar-22	31-Mar-22	1-Jun-2022	13	4	0	0.0%
In Congo, since 2021 to 1 June 2022, a total of 13 probable cases of yellow fever including four confirmed and zero death among confirmed cases have been reported. The figures have been reviewed following final cases classification. An integrated campaign for yellow fever and measles is planned. Measles vaccines are expected by 8 June 2022, with a tentative launch of an integrated campaign on 30 June 2022									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	19-Jun-2022	82 724	82 724	802	1.0%
Since 11 March 2020, a total of 82 724 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 802 deaths, and a total of 81 780 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	4-May-2022	64	64	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are no reported cases in 2021. There are 64 cases reported in 2020.									
Côte d'Ivoire	Yellow fever	Grade 2	14-Sep-21	13-Aug-2021	19-May-2022	37	7	1	2.7%
From 13 August 2021 as of 19 May 2022, a total of 30 probable and 7 confirmed cases of yellow fever were recorded in Côte d'Ivoire.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-2016	17-Apr-2017	29-May-2022	-	-	-	-
In the DRC, humanitarian partners reported at least 126 incidents affecting humanitarian access between January and March 2022, including 38 (30%) in North Kivu province, 32 (25%) in Tanganyika, 24 (19%) in South Kivu province, 19 (15%) in Ituri. About 37% of incidents reported between Jan-March 2022 quarter related to violence against humanitarian personnel, property and facilities and 22% of reported incidents are related to armed conflict. In addition, 7 health care facilities have been either destroyed or damaged since the beginning of 2022. In North Kivu province, clashes between the Congolese army and suspected M23 fighters have been observed since May 19, 2022 in the territories of Rutshuru and Nyiragongo. As a result, the fighting has displaced at least 61 000 people, according to humanitarian sources. After a brief lull, clashes resumed on 6 June 2022 in the Jomba groupement (Rutshuru territory) halting socio-economic activities. Although the area of clashes is currently almost deserted, the continuation of the fighting could slow down the return of the populations to the outlying villages. The humanitarian actors present on the ground continue their operations in the reception and return areas of IDPs.									

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	29-May-2022	6 402	400	94	1.5%
In 2022, from epidemiological week 1 to 21 (ending 29 May 2022), 6 402 suspected cholera cases including 94 deaths (CFR: 1.5%) were recorded in 54 health zones across 11 provinces of the Democratic Republic of the Congo. Suspected cases have mostly been reported from South Kivu (2 186 cases), Upper Lomami (1 423 cases), Tanganyika (1 339 cases), and North Kivu (1 120 cases). The overall national incidence is 10 cases per 100 000 inhabitants. The provinces of Tanganyika (39), Haut-Lomami (32) and South Kivu (26) have the highest incidences (per 100 000 inhabitants) in the country. Response measures are being implemented in the main active hot spots including a vaccination campaign.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	12-Jun-2022	90 563	90 561	1 353	1.5%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 90 561 confirmed cases and two probable case, including 1 353 deaths have been reported. A total of 82 593 people have recovered.									
Democratic Republic of the Congo	Ebola virus disease	Grade 2	22-Apr-2022	22-Apr-2022	5-Jun-2022	5	4	5	100.0%
The ongoing Ebola virus disease (EVD) outbreak in the Democratic Republic of the Congo (DRC) has spread out to a new Health Zone with a new confirmed case reported on 19 May 2022 in Mama Balako Health Area, Wangata Health Zone in Mbandaka City, Equateur Province. Two Health Zones (Mbandaka and Wangata) and three Health areas are now affected (Libiki, Motema Pembe for Mbandaka Health Zone and Mama Balako for Wangata health Zone). As of 5 June 2022, a total of five cases including four confirmed cases and one probable case with five deaths (case fatality ratio (CFR)= 100 %) are reported.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	22-May-2022	73 152	4 890	734	1.0%
From week 1 to week 20 of 2022 (ending 22 May) , 73 152 suspected cases and 734 measles related deaths (CFR 1.0%) are reported ; 2 992 cases investigated through the case based surveillance system; 1 268 tested IgM+ for Measles and 630 tested IgM+ for Rubella; 63% laboratory confirmed measles cases are less than 5 years of age with only 25% of that category with history of vaccination; a total of 110 health districts out of 519 for the country with confirmed epidemics since the beginning of the year									
Democratic Republic of the Congo	Monkeypox	Ungraded	30-Mar-19	1-Jan-22	29-May-2022	1 439	10	67	4.7%
From 1 January – 29 May 2022, the Democratic Republic of the Congo has reported 1 439 suspected cases with 67 deaths (CFR 4.7%) from 97 health zones across 19 provinces. The most affected provinces account for 76% of the total cases reported in 2022: Sankuru (499, 34.7%), Maniema (181, 12.6%), Tshopo (193, 13.4%), Tshuapa (115, 8.0%), and Sud-Ubangi (105, 7.3%). At least 10 of the cases sampled were confirmed positive for monkeypox virus infection.									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-22	5-Jun-2022	261	-	6	2.3%
Between epidemiological weeks 1-22 of 2022, 261 cases of suspected bubonic plague have been reported with 6 deaths (2.3% CFR). All cases have been reported from Ituri Province from the Rethy sanitation zone from six sanitation areas: Lokpa, Rethy, Gudjo, Rassia, Uketha, and Kpadroma. The Lokpa sanitation area has reported the majority of suspected cases (217, 83.1%) in 2022. Cases are up by more than 100% from the same period in 2021, when a total of 115 were suspected including 13 deaths (11.3% CFR). This increase is a consequence of the intensification of active search for cases in the community as part of a collaborative response to the plague epidemic.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-2021	1-Jan-21	15-Jun-2022	76	76	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2022 cases stand at 48. There were 28 cases in 2021.									
Democratic Republic of the Congo	Suspected Meningitis	Ungraded	31-May-2022	31-May-2022	9-Jun-2022	45	3	19	42.2%
The head of the Akpandau health area sent an alert to the Gombari health zone team on Wednesday 25 May 2022 reporting the successive deaths of four adult patients (two men and two women) of unknown cause, all the four patients were residents of the Konzokonvu village, in Apodo health area. The clinical picture presented by all patients was suggestive of meningitis. Culture of cerebrospinal fluid (CSF) samples taken on 30 May 2022 from three patients showed Gram negative coccobacillus, suggestive of Haemophilus Influezae. Other samples are being sent to the National Reference Laboratory in Kinshasa (INRB-Kinshasa) for more analysis and one sample tested positive for Neisseria Meningitidis. As of 9 June 2022, a total of 45 cases and 19 deaths (CFR 42.2%) have been reported with 40 cases reported from Apodo health area ,one case from Kossia health area, two cases from Akpandau health area and two cases from Tangi health area. More samples are still needed for testing in order to confirm the outbreak and detect the predominant germ for vaccination									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-2021	1-Jan-22	29-May-2022	802 163	-	399	-
In 2022, from epidemiological week 1 to 21 (ending 29 May 2022), 802 163 suspected cases of typhoid fever including 399 deaths were recorded in the Democratic Republic of the Congo. In 2021, from Epi week 1 to 49, 1 380 955 suspected cases of typhoid fever have been reported including 502 deaths (CFR 0.03%).									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-2021	21-Apr-2021	19-May-2022	22	10	0	0.0%
Since 2021 to 19 May 2022, Democratic Republic of the Congo (DRC) has reported a total of 22 probable cases of yellow fever with 10 confirmed									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-Jun-2022	15 951	15 951	183	1.1%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 16 June 2022, a total of 15 951 cases have been reported in the country with 183 deaths and 15 719 recoveries.									
Eritrea	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-22	10-Jun-2022	-	-	-	-
The Horn of Africa is experiencing one of the harshest droughts in recent history. Eritrea has been included as one of the countries affected. As of 10 June 2022 according to UNOCHA, at least 18.4 million people are facing acute food insecurity and rising malnutrition across Ethiopia, Kenya and Somalia, and this figure could increase to 20 million by September 2022. At least 7 million livestock—which pastoralist families rely upon for sustenance and livelihoods—have died in the Horn of Africa area. Malnutrition rates are rising: more than 7.1 million children are acutely malnourished, including about 2 million who are severely acutely malnourished, according to UNICEF.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	18-Jun-2022	9 777	9 777	103	1.1%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 18 June 2022, a total of 9 777 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 667 patients have recovered from the disease.									
Eritrea	Poliomyelitis (cVDPV2)	Ungraded	2-Jun-2022	7-Jun-2022	13-Jun-2022	1	1	0	0.0%
An AFP case was reported from Barentu, Eritrea on 3 September 2021 of a 3 years old female child. A sample was confirmed on 02/06/2022 to be Poliovirus type 2 (PV2) by Ethiopian National Polio laboratory and communicated to the MoH of Eritrea, Surveillance unit. The sample was found to be serotype: Type 15-PV2. The National Polio Outbreak Response Coordination Committee (NPORC) has been activated and the relevant response activities initiated.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Jun-2022	73 006	73 006	1 415	1.9%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 19 June 2022, a total of 73 006 cases have been reported in the country including 71 538 recoveries. A total of 1 415 associated deaths have been reported.									
Ethiopia	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-22	11-May-2022	-	-	-	-
Ethiopia is experiencing a prolonged drought after three consecutive failed rainy seasons since late 2020 affecting nearly 8 million people living in Oromia, SNNP (Southern Nations, Nationalities, and Peoples), Southwest and Somali: several areas in southern and south-eastern Ethiopia, including in the regions of Somali (10 zones), Oromia (8 zones), Southwest (1 zone) and SNNP (7 zones). More than 286 000 people have been displaced in search of water, pasture or assistance, fleeing their homes to survive as crops, livestock and livelihoods are wiped out. The number of livestock deaths has reached a staggering 1.46 million (67% in Somali, 31% in Oromia, and 7% in Southwest and SNNP regions) and is still increasing.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	23-May-2022	-	-	-	-
The humanitarian situation in Northern Ethiopia remain fragile and unpredictable, affecting civilians and limiting humanitarian aid deliverance. More than 3.9 million people are in need and 2.4 million people are displaced as of 1 Apr 2022. In Afar, 22 districts are affected by the ongoing active conflict with more than more than 300K newly displaced. The corridor for cargo by land has been opened and more than 20 trucks have delivered and food and nutrition supplies. The worsening malnutrition situation in Tigray region and parts of Afar and Amhara continue to be of concern.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Jun-2022	484 138	484 138	7 523	1.6%
Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 484 138 cases of COVID-19 as of 19 June 2022, with 7 523 deaths and 458 280 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-22	15-May-2022	4 634	2 897	33	0.7%
As of week 19, 2022 (ending 15 May), seven districts (E Gojjam, N Shewa, S Omo, Afder, Fafan, Jarar, and Liben) from three regions (Amhara, SNNPR and Somali) are experiencing an active measles outbreak. From week 1 to 19 of 2022, a total of 4 634 suspected cases with 2 987 confirmed and 33 deaths (CFR 0.7%) have been reported in Ethiopia									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-2019	20-May-2019	19-Jun-2022	63	63	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Ten cases were reported in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	15-Jun-2022	47 742	47 742	304	0.6%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 15 June 2022, a total of 47 742 cases including 304 deaths and 47 330 recoveries have been reported in the country.									
Gabon	Yellow fever	Ungraded	12-Feb-2022	17-Sep-21	23-May-2022	3	1	1	33.3%
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 2021 and died on 23 September 2021 in Port Gentil. Two other probable cases have been recorded, as of 7 May 2022.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	19-May-2022	12 002	12 002	365	3.0%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 19 May 2022, a total of 12 002 confirmed COVID-19 cases including 365 deaths, and 11 634 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	16-Jun-2022	164 164	164 164	1 448	0.9%
As of 16 June 2022, a total of 164 164 confirmed COVID-19 cases have been reported in Ghana. There have been 1 448 deaths and 161 405 recoveries reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ghana	Influenza A (H3N2)	Ungraded	9-Jun-2022	1-Jan-22	8-Jun-2022	773	773	0	0.0%
Cumulatively, 3 460 samples have been tested with 773 confirmed as Influenza A(H3) positive. Approximately, 74.5% of cases were reported by Eastern (33.1%), Greater Accra (29.5%) and Volta (11.9%). Cases have been confirmed in all regions except, Upper East, Upper West and North East Regions.									
Ghana	Monkeypox	Ungraded	8-Jun-2022	24-May-2022	8-Jun-2022	12	5	0	0.0%
On 8 June 2022, the Director General of the Ghana Health Service confirmed that 5 cases of monkeypox have been detected in the country. From 24 May-8 June, 2022 there have been 12 suspected cases and no deaths reported from Eastern, Western, and Greater Accra.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-2019	8-Jul-2019	24-Apr-2022	31	31	0	0.0%
No cases have been reported in 2022 nor 2021, 12 cases were reported in 2020, and 19 were reported in 2019.									
Ghana	Yellow fever	Grade 2	3-Nov-21	15-Oct-21	19-May-2022	124	60	20	16.1%
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 19 May 2022, a total of 64 probable and 60 confirmed cases of yellow fever were reported from 13 regions in Ghana.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Jun-2022	36 873	36 873	442	1.2%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 05 May 2022, a total of 36 873 cases including 36 235 recovered cases and 442 deaths have been reported in the country.									
Guinea	Lassa fever	Ungraded	22-Apr-2022	20-Apr-2022	20-Jun-2022	2	2	0	0.0%
On 22 April 2022, the Ministry of Health of Guinea declared an outbreak of Lassa fever after a case was confirmed by PCR at the Gueckedou haemorrhagic fever laboratory. The case is a 17-year-old girl from the sub-prefecture of Kassandou located 65 kilometers from the capital of the prefecture of Guéckédou. An additional confirmed Lassa fever confirmed case without any known epidemiological link with the first case was notified on 28 April in Tekoulo sub-province, Gueckedou province.									
Guinea	Measles	Ungraded	09-May-2018	1-Jan-22	27-May-2022	21 914	397	33	0.2%
Since the beginning of 2022 up to week 21 (ending 27 May), a total of 21 194 measles suspected cases with 397 confirmed and 33 death (CFR 0.2 %) have been reported in Guinea from 29 health districts including the capital city Conakry through Integrated disease surveillance and response (IDSR)									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-2020	22-Jul-2020	15-Jun-2022	50	50	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases reported in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	11-Jun-2022	8 307	8 307	171	2.1%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 11 June 2022, the country has reported 8 307 confirmed cases of COVID-19 with 8 085 recoveries and 171 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	24-Apr-2022	3	3	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Three cases were reported in 2021 which were linked to the Jigawa outbreak in Nigeria.									
Kenya	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-22	10-Jun-2022	-	-	-	-
At least 4.1 million (27% of total population) are estimated to face high levels of acute food insecurity (IPC Phase 3 or above) during March-June 2022. About 1.1 million of those are IPC phase 4 (emergency) and 3 million are in IPC phase 3 (crisis). An estimated 229 000 children <5 years are projected to have severe acute malnutrition (SAM) and another 713 000 will have moderate acute malnutrition (MAM). Kenya's Arid and Semi-Arid Lands (ASAL) region is the most affected. Climate experts warned rains from March-April 2022 would be scarce affecting 23 counties. The dwindling of vegetation and drying up of water sources has also led to livestock deaths and loss of livelihoods for most pastoral communities. This has forced Kenyan herders to trek longer distances—sometimes as far as Uganda, South Sudan and Ethiopia—in search of water and pasture, increasing the risk of resource-based conflict and family separation, which in turn heightens the risk of gender-based violence. The Horn of Africa is experiencing one of the harshest droughts in recent history. As of 10 June 2022 according to UNOCHA, at least 18.4 million people are facing acute food insecurity and rising malnutrition across Ethiopia, Kenya and Somalia, and this figure could increase to 20 million by September 2022. At least 7 million livestock—which pastoralist families rely upon for sustenance and livelihoods—have died. So far in 2022, about 6.5 million drought-affected people have been reached with humanitarian assistance across Somalia (almost 2.8 million), Ethiopia (3.3 million) and Kenya (367 000).									
Kenya	Chikungunya	Ungraded	3-Mar-22	13-Feb-2022	5-Jun-2022	189	5	1	0.5%
Chikungunya outbreak has been reported in Wajir County, Tarbaj sub county in Kutulo village. A total of one hundred and eighty nine (189) cases have been reported with five confirmed cases and one death (CFR 0.5%). No new cases was reported in week 22 (ending 5 June 2022).									
Kenya	Cholera	Ungraded	30-May-2022	3-May-2022	31-May-2022	319	2	2	0.6%
Cholera outbreak is ongoing in Kenya affecting three counties: Nairobi, Kisumu and Kiambu. As of 31 May 2022, a total of 319 cases with two confirmed by culture and two deaths (CFR 0.6%) have been reported. Kisumu has reported more cases (311), followed by Nairobi (7) and Kiambu (1). Response activities are ongoing to control the outbreak									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	19-Jun-2022	329 353	329 353	5 651	1.7%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 19 June 2022, 329 353 confirmed COVID-19 cases including 5 651 deaths and 320 566 recoveries have been reported in the country.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	5-Jun-2022	1 716	1 531	10	0.6%
Since January 2020, a total of 1 716 visceral leishmaniasis confirmed and suspected cases with ten deaths (CFR 0.6 %), have been reported in eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir and Tharaka Nithi. The outbreak is active in three counties, Kitui, West Pokot and Wajir. A total of 19 new cases were reported in the last week (week 22, ending 5 June 2022)									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	Yellow fever	Grade 2	3-Mar-22	12-Jan-22	17-Jun-2022	3	3	0	0.0%
On 4 March 2022, Kenya declared an outbreak of yellow fever in Isiolo County. As of 15 March 2022, there are a total of 53 suspect cases of yellow fever including six deaths reported from 12 January to 15 March 2022 in 11 wards of Isiolo county. Of the suspected cases, three were confirmed by PCR at the Kenya Medical Research Institute (KEMRI). Epidemiological investigations are ongoing.									
Lesotho	COVID-19	Grade 3	13-May-2020	13-May-2020	7-Jun-2022	33 746	33 746	699	2.1%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 7 June 2022, a total of 33 746 cases of COVID-19 have been reported, including 25 009 recoveries and 699 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	16-Jun-2022	7 493	7 493	294	3.9%
From 16 March 2020 to 16 June 2022, Liberia has recorded a total of 7 493 cases including 294 deaths and 7 162 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	8-Jun-2022	25	25	7	28.0%
Since the beginning of 2022 up to 8 June 2022, a total of 70 suspected cases of Lassa fever including 25 confirmed and 7 deaths (CFR 28%) have been reported in Liberia. Two Counties are currently in an outbreak: Grand Bassa and Bong Counties.									
Liberia	Measles	Ungraded	3-Feb-2022	1-Jan-22	22-May-2022	3 338	3 027	35	1.0%
As of 22 May 2022, 3 338 suspected cases, including 3 027 confirmed and 35 deaths (CFR: 1 %) were reported from 47 health districts in 14 counties. Of the confirmed cases, 9% (287 cases) were laboratory confirmed, 15% (448 cases) were clinically confirmed, and 76% (2 292 cases) by epidemiological link. Montserrado county is the most affected with 56% (1 861 suspected cases) of all suspected cases reported. The median age of the affected population is 5 years (range: 1 month-67 years). Measles vaccination coverage in confirmed cases is 43% and the vaccination status of 10 % of confirmed is unknown.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-2020	17-Dec-2020	24-Apr-2022	3	3	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The country reported 3 cases in 2021.									
Madagascar	Floods	Grade 2	19-Jan-22	16-Jan-22	27-Apr-2022	455 744		206	0.0%
Heavy rains in Madagascar from multiple weather systems (Tropical Storm (TS) Ana, Cyclone Batsirai, TS Dumako, Cyclone Emnati, TS Gombe, and TS Jasmine) have flooded parts of the country. The TS Ana weather system affected the country during week 3 of 2022, Cyclone Batsirai occurred in week 5, TS Dumako in week 7, Cyclone Emnati in week 8, TS Gombe in week 10, and TS Jasmine in week 16. As of 8 June 2022, there have been 571 000 victims affected including 214 deaths by the six tropical cyclones: Ana, Batsirai, Dumako, Emnati, Gombe and Jasmine in 18 regions though Analamanga area was most affected. Health risk identified: Malaria, diarrhoeal diseases, plague, malnutrition, VPD, COVID 19. With increase in malaria cases since week 17; In week 20, 19/114 districts in 4 regions were in epidemic phase and 21/114 were in alert phase in 2 regions. A total of 172 000 persons displaced by the effects of these Cyclones.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-2021	1-Jan-21	30-Apr-2022	-	-	-	-
Extreme weather producing droughts during part of the year and heavy rains causing flooding during other parts of the year have contributed to food insecurity issues for an estimated 1.7 million people (32% of the total population) in Madagascar who are projected to face Integrated food security Phase Classification (IPC) 3 or higher during April to August 2022. IPC projections estimate that 189 056 people are classified as emergency phase 4 and a little more than 1.5 million are classified as IPC Phase 3. Food insecurity and malnutrition improved in the first quarter of 2022 following a large scale-up in humanitarian assistance.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	19-Jun-2022	65 009	65 009	1 398	2.2%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 19 June 2022, a total of 65 009 confirmed cases including 1 398 deaths have been reported in the country.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-2021	28-Apr-2021	4-May-2022	14	14	0	0.0%
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	16-Mar-22	1 000 000		51	0.0%
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 were affected, with 51 deaths recorded. The decommissioning of IDP camps in affected districts is ongoing. Mulanje and Balaka districts have decommissioned all IDP camps whilst Nsanje has only six active IDP camps.									
Malawi	Cholera	Ungraded	3-Mar-22	3-Mar-22	19-Jun-2022	693	13	33	4.8%
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 businessman, resident of Balaka district. Laboratory results by culture confirmed him positive for Cholera on 3 March 2022. As of 19 June 2022, Malawi has reported a total of 693 cholera cases with 33 deaths from eight districts.									
Malawi	COVID-19	Grade 3	2-Apr-2020	2-Apr-2020	19-Jun-2022	86 204	86 204	2 644	3.10%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 19 June 2022, the country has a total of 86 204 confirmed cases with 2 644 deaths and 82 963 recoveries.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-2022	16-Jun-2022	1	1	0	0.0%
One positive case of wild WPV1 was detected in Lilongwe from a child with the date of onset of paralysis on 19 November 2021. No other cases have been reported. However, response activities including community sensitisation and mass polio vaccination campaigns continue.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	31-May-2022	-	-	-	-
People in Mali are reeling from the impact of years of conflict, deep poverty, climate shocks and mounting insecurity. In May 2022, 7.5 million people need humanitarian assistance. One Malian out of four (4.8 million people) is currently food insecure because of insecurity and the impacts of climate change. During this year's lean season (June to August), a staggering 1.8 million people will be acutely food insecure. However, the Humanitarian Response Plan for Mali is currently funded at only 11 per cent.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	19-Jun-2022	31 137	31 137	736	2.4%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 19 June 2022, a total of 31 137 confirmed COVID-19 cases have been reported in the country including 736 deaths and 30 314 recoveries.									
Mali	Measles	Ungraded	20-Feb-2018	1-Jan-22	5-Jun-2022	1 536	563	1	0.1%
As of 5 June of 2022, a total of 1 536 suspected cases of measles and 563 confirmed and one 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	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-2020	18-Aug-2020	16-Mar-22	52	52	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. No cases have been reported in 2021. The total number of cases since 2020 are 52.									
Mali	Undiagnosed disease	Ungraded	14-Mar-22	1-Nov-21	11-May-2022	41		9	22.0%
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. From 12 to 13 April, the Regional Ministry of Health conducted a mission to the affected area, according to the preliminary information, among cases reported 3 have oedema, 12 have non-specified chronic diseases and 26 had malnutrition. No further details provided so far. The investigation report including laboratory analysis are still awaited. The affected area is highly insecure therefore difficult for access.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	15-Jun-2022	59 275	59 275	982	1.7%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 15 June 2022, a total of 59 275 cases including 982 deaths and 58 185 recovered have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	5/8/2022	223 793	223 793	996	0.4%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 8 May 2022, a total of 223 793 confirmed COVID-19 cases including 996 deaths have been reported in the country.									
Mozambique	Floods	Grade 2	24-Jan-22	26-Jan-22	12-Mar-22	678 237		59	0.0%
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. Figures on people affected and damage following the passage of Cyclone Gombe continues to rise. According to the latest information released by the National Institute for Disaster Management and Risk Reduction (INGD), to date Gombe has affected 478 237 people (93 497 families), caused 59 deaths, and injured 82 people. 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-Mar-22	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. As of 31 Mar 2022, the nationwide estimate of people in need of humanitarian assistance is 622 108 and 266 246 people are displaced by conflict.									
Mozambique	Cholera	Ungraded	23-Mar-22	13-Jan-22	12-Jun-2022	3 053	0	15	0.5%
Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 13 January to 12 June 2022, a total of 3 053 cases and 15 deaths (CFR 0.5%) have been reported. In Sofala province, cases have been reported from Caia (707, 23.2%), Maringue (30, 1.0%), Chemba (36, 1.2%), and Marromeu districts (178, 5.8%). In Zambezia province, cases have reported from Morrumbala (1 333, 43.7%), Mopeia (589, 19.3%), and Quelimane City (180, 5.9%) districts. A total of 63 samples have been tested, of which 41 have returned positive for cholera by rapid diagnostic test (RDT) and 16 turned positive by culture. Response activities are ongoing.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	15-May-2022	225 498	225 498	2 201	1.0%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 15 May 2022, a total of 225 498 confirmed COVID-19 cases were reported in the country including 2 201 deaths and 223 190 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-2020	1-Jan-21	17-Apr-2022	3 599	903	0	0.0%
From week 1 to week 15, 2022 (ending 17 April), a total of 582 suspected cases of measles and zero death have been reported through IDSR (Integrated Disease Surveillance and Response). The cumulative number of the reported cases since January 2021 is now 3 599									
Mozambique	Poliomyelitis (WPV1)	Ungraded	17-May-2022	18-May-2022	17-Jun-2022	1	1	0	0.0%
A wild poliovirus type 1 (WPV1) was detected in Mozambique from samples collected in late March 2022 from Changara district in Tete province. This new WPV1 is an orphan virus and is linked to the virus detected in Malawi (for which outbreak response vaccinations are ongoing in Malawi and neighbouring countries). The patient, a 12-year old female, had onset of paralysis on 25 March 2022. Her stool samples were collected on 1 April and 2 April 2022, and sent to the laboratory on 4 April 2022. No other case has been reported to date.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	17-Jun-2022	168 868	168 868	4 056	0.0%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 17 June 2022, a total of 168 868 confirmed cases with 163 598 recovered and 4 056 deaths have been reported.									
Namibia	Measles	Ungraded	2-Jun-2022	6-Jun-2022	6-Jun-2022	23	5	0	0.0%
On 2 June 2022, the Ministry of Health and Social Services of Namibia notified WHO about a confirmed outbreak of measles in Omusati region, Outapi district. A total of 23 cases are suspected in the region which shares a border with Angola. The majority of suspected cases (14, 61% of total) have been reported from a school in Outapi District, however, Tsandi (8 cases) and Okahao (1 case) Districts have also reported suspected cases. Among the cases, five had positive IgM results for measles. All confirmed/compatible cases are <15 years of age, ranging between 5 months- 12 years. Four of the confirmed/compatible cases are females and two are males.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Niger	Humanitarian crisis	Protracted 1	1-Feb-2015	1-Feb-2015	1-Jun-2022	-	-	-	-
According to OCHA statistics, 3.7 million people need humanitarian assistance in 2022. There is an increasing number of security incidents reported in the first five months of the year. The Far West, Far South East and the central party of the country are more affected. In Far Ouest, Tillabery region, the security situation is worse with 136 cases of insecurity incidents reported from January to 16 May 2022 against 93 incidents during the same period in 2021 according to OCHA estimates. During the same period (January to 16 May 2022), the security incidents resulted into 54 588 new internally displaced persons. Since the beginning of the security crisis till 16 May 2022, 115 150 people are internally displaced. Food insecurity remains one of the major challenges faced by the country. Diffa and Tillaberi regions are the most affected by food insecurity with 24% and 29% of the population affected respectively.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	19-Jun-2022	9 078	9 078	310	3.4%
From 19 March 2020 to 19 June 2022, a total of 9 078 cases with 310 deaths have been reported across the country. A total of 8 756 recoveries have been reported from the country.									
Niger	Measles	Ungraded	5-Apr-2022	1-Jan-22	17-Apr-2022	6 103	323	6	0.1%
From week 1 to week 15 (ending 17 April) of 2022, a total of 6 103 cases and 6 deaths (CFR: 0.1%) have been reported. Among the 8 regions for the country, Agadez has the highest attack rate (59.8 cases per 100 000 inhabitants), followed by Niamey (46.7 cases /100 000) and Zinder (44.2 cases /100 000). Risk assessment found: 17 districts out of 72 for the country are at very high risk while 21 districts are at high risk. The response plan is being finalized in order to vaccinate in the 38 high risk and very high-risk districts as well as 11 districts in outbreak but not yet reflected in the risk profile									
Niger	Meningitis	Ungraded		1-Jan-21	22-May-2022	1 688	-	76	4.5%
Since the beginning of the year 2021 to week 2 of 2022 ending 16 January 2022, 1 688 cases have been reported with 76 deaths (CFR 4.5%). Two 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. A request to the International Coordinating Group (ICG) for vaccine provision is underway for a vaccine campaign response.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	15-Jun-2022	19	19	0	0.0%
No case of circulating vaccine-derived poliovirus type 2(cVDPV2) was reported this week. There are two cases reported in 2022. In addition a total of 17 cases was reported in 2021.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	1-Apr-2022	-	-	-	-
In north-eastern Nigeria, humanitarian needs remain high, with 8.4 million people, including 58% children (4.9 million), requiring humanitarian assistance in 2022. A total of 2.1 million internally displaced persons (IDPs) remain displaced in the three north-eastern states of Borno, Adamawa, and Yobe due to the ongoing conflict. In north-western Nigeria, violence is multifaceted and multidimensional. Over 360 000 persons are displaced in three States, with Katsina (173 856) having the highest number of IDPs, followed by Zamfara (123 102) the epicentre of the banditry attacks. Over 81% of the IDPs reside in host communities, while the rest are living in camp like settings.									
Nigeria	COVID-19	Grade 3	27-Feb-2020	27-Feb-2020	17-Jun-2022	256 573	256 573	3 144	1.2%
The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 17 June 2022, a total of 256 573 confirmed cases with 250 155 recovered and 3 144 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	1-Jan-21	1-Jan-21	5-Jun-2022	819	782	155	19.8%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 22 of 2022 (ending 5 June), the number of new confirmed cases increased from 3 in week 21 to seven cases, with no deaths. These were reported from Edo, Ondo, Kogi and Gombe States. Cumulatively from week 1 to 22 of 2022, a total of 819 cases including 782 confirmed, 37 probable and 155 deaths among confirmed cases have been reported with a case fatality rate (CFR) of 19.8% across 23 states. In total, 4 939 cases are suspected in 2022. Of all confirmed cases, 68% are from Ondo (28%), Edo (25%) and Bauchi (15%) States.									
Nigeria	Measles	Ungraded	14-Mar-22	1-Jan-22	20-Mar-22	9 905	1 294	0	0.0%
As of week 11, 2022 (ending 20 March), a total of 9 905 suspected measles cases were reported from all states across 516 (67%) LGAs. A total of 161 LGAs across 33 states have experienced an outbreak this year 2022. Ongoing outbreak in 134 new LGAs across 30 states with new outbreak in 31 new LGAs across 10 states. A total of 4 447 samples were collected and 1 294 were IgM+ (29%).									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-22	27-May-2022	66	21	1	1.5%
From 1 January to 29 May 2022, Nigeria has reported 66 suspected cases with one death from nine states across the country. Of these, 21 cases were laboratory confirmed from the following states: Adamawa (5), Bayelsa (2), Cross River (2), Delta (2), Federal Capital Territory (2), Imo (1), Kano (2), Lagos (4), and River (1). One death was recorded in a 40-year-old male with renal co-morbidity.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-2018	1-Jan-18	8-May-2022	494	423	0	0.0%
In 2022, 20 cVDPV2 cases have been reported in the country. There were 415 cVDPV2 cases and 18 environmental samples reported in 2021.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	30-Apr-2022	54	54	3	5.6%
From 1 January 2021 to 30 April 2022, a total of 54 yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Some of these cases had a history of YF vaccination.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	18-Jun-2022	130 569	130 569	1 459	1.1%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 18 June 2022, a total of 130 569 cases with 1 459 deaths and 128 697 recovered cases have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sahel region	Humanitarian crisis	Grade 2	11-Feb-2022	-	20-May-2022	-	-	-	
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 30 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.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-2020	6-Apr-2020	12-Jun-2022	6 010	6 010	73	1.2%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 12 June 2022, a total of 6 010 confirmed cases of COVID-19 have been reported, including 73 deaths. A total of 5 930 cases have been reported as recoveries.									
Sao Tome And Principe	Dengue	Grade 2	11-Apr-2022	15-Apr-2022	14-Jun-2022	519	519	1	0.2%
Sao Tome and Principe is experiencing its first ever documented dengue outbreak. From 15 April-14 June 2022, a total of 519 cases and 1 death (CFR 0.2%) have been confirmed via RDT from: Água Grande (420, 80.9%), Mézôchi (52, 10.0%), Lobata (25, 4.8%), Lembá (8, 1.5%), Caué (3, 0.6%), Cantagalo (6, 1.2%) and RAP (5, 1.0%). During week 23 (ending 14 June), there were 116 new cases were registered in the country. Água Grande's attack rate is by far the highest (49.8 per 10 000 inhabitants). The age group attack rates are: 0-9 years (13.9), 10-19 years (22.8), 20-29 years (25.1), 30-39 years (30.8), 40-49 years (28.9), 50-59 years (34.5) and 60+ years (25.5). The 3 main clinical signs are fever (461, 89%), headache (349, 67%) and myalgia (162, 31%).									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	10-Jun-2022	86 150	86 150	1 967	2.3%
From 2 March 2020 to 10 June 2022, a total of 86 150 confirmed cases of COVID-19 including 1 967 deaths and 84 169 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 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	12-Jun-2022	44 409	44 409	167	0.4%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020 as of 12 June 2022, a total of 44 409 cases have been confirmed, including 43 984 recoveries and 167 deaths have been reported.									
Sierra Leone	Anthrax	Ungraded	20-May-2022	20-May-2022	17-Jun-2022	6	5	0	0.0%
The Ministry of Health and Sanitation in Sierra Leone has declared an outbreak of human anthrax in the country after identifying 3 lab confirmed cutaneous anthrax cases in Karene district. This is subsequent to an investigation of 7 suspected anthrax cases, all residing in Buya chiefdom, of whom 4 blood samples and swabs were collected and sent to the laboratory for confirmation. The investigation was conducted as follow up to reports of sickness and death of animals in the adjacent Port Loko district between March and April, with reported consumption of meat in surrounding communities. There was also prior confirmation of anthrax from tissues collected from some of the affected animals during epi week 19. As of 17 June 2022, a total of six cases was reported including five confirmed cases and one probable case. Majority of them are among the age group of 15 years and above (43%) followed by 12-59 months (29%), 0-11 months (14%) and 5-15 years (14%).									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	19-Jun-2022	7 688	7 688	125	1.6%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 19 June 2022, a total 7 688 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 819 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-2021	1-Jan-21	29-May-2022	20	20	11	55.0%
From the beginning of 2021 to 20 March 2022, a total of 20 cases and 11 deaths (55% CFR) have been reported due to Lassa fever in Sierra Leone. Cases were reported from Kenema (15), Kailahun (3), and Tonkolili (2) districts since the beginning of 2021. From these cases, 65% were females and 35% were <5 years old. 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).									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	11-May-2022	379	379	0	0.0%
By 11 May 2022 (Week 19), 12 out of 16 districts reported 379 confirmed measles cases (106 lab confirmed and 273 epi linked; 64% (208) of these cases are below five years, 26.4 % (100) above five years and 18.7%, (71) age missing. Currently, three districts (Western Rural, Western Urban and Port Loko District) are experiencing measles outbreak. Surveillance and immunization activities have been intensified in all districts.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-2020	10-Dec-2020	8-Jun-2022	15	15		0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. Five cases were reported in 2021, and 10 were reported in 2020.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	19-Jun-2022	3 986 601	3 986 601	101 604	3.4%
Since the start of the COVID-19 pandemic in South Africa through 19 June 2022, a cumulative total of 3 986 601 confirmed cases and 101 604 deaths have been reported with 3 870 895 recoveries.									
South Africa	Lassa fever	Ungraded	13-May-2022	14-May-2022	20-May-2022	1	1	1	100.0%
The Government of South Africa notified AFRO IHR of an imported case of Lassa fever from Nigeria to South Africa. He entered RSA on 25 April 2022 and was hospitalized on 1 May 2022 and died on 6 May 2022. Response activities identified 50 possible contacts and are being monitored. Four possible contacts presented with minor symptoms and were tested for Lassa virus as a cautionary measure; all four tested negative for Lassa. As at 20 May 2022, there have been no additional imported cases or secondary cases of Lassa fever associated with the imported case. In addition, there are no suspected cases of Lassa fever in South Africa at present.									
South Africa	Measles	Ungraded		6-Jun-2022	6-Jun-2022	4	4	0	0.0%
Four individuals have been confirmed for measles by the National Institute for Communicable Diseases. All cases detected reside in Gauteng province, three in Tshwane and one in West Rand. All cases are isolated and recovering.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	Drought/food insecurity	Grade 3	18-Dec-2020	5-Apr-2021	19-Jun-2022	-	-	-	-
From April to July 2022 an estimated 7.74 million people (63% of total population) faced crisis levels of food insecurity phase (IPC) 3 or worse. Of the total number, 87 000 are in IPC 5, 2.89 million are in IPC 4, and 4.77 million are in IPC 3. Counties expected to be in IPC phase 5 are Fangak, Canal/Pigi and Ayod counties in Jonglei State; Pibor County in Greater Pibor Administrative Area; Cueibet and Rumbek North counties in Lakes State; and Leer and Mayendit counties in Unity State. Food insecurity in South Sudan is driven by climatic shocks (floods, dry spells, and droughts), insecurity (caused by sub-national and localized violence), population displacements, persistent annual cereal deficits, diseases and pests, the economic crisis, the effects of COVID-19, limited access to basic services, and the cumulative effects of prolonged years of asset depletion that continue to erode households' coping capacities, and the loss of livelihoods.									
South Sudan	Floods	Grade 2	15-Jul-2021	1-May-2021	15-May-2022	-	-	-	-
Rains in South Sudan are projected to cause a fourth year of flooding in areas where large swathes of land are still inundated from last rainy season. Unity State is expected have displacement of more than 320 000 people who could experience loss of livelihoods, disease outbreaks and food insecurity. In 2021 the flooding began in May and affected over 835K people in 33 counties. A rapidly worsening situation was noted in October 2021. Measures are being taken to avert humanitarian crises by reinforcing peoples' homes and key infrastructure such as latrines and water wells.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-2016	n/a	5-Jun-2022	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. In 2022, there is a total of 8.9 million people in need of humanitarian assistance and 2.02 million people internally displaced people as of 30 April 2022. South Sudan continues to have issues with violence, flooding, food insecurity, and disease threats. An estimated 7.7 million people are expected to be food insecure during April-July 2022 with at least 87 000 in IPC Phase 5, 2.9 million people in IPC Phase 4, and 4.8 million IPC Phase 3. Floods caused many people to become internally displaced as well as problems for water, sanitation, and hygiene conditions in formalized camps and informal settlements. Waters have not receded and are expected to worsen by the forthcoming rainy season.									
South Sudan	Anthrax	Ungraded	25-Apr-2022	13-Mar-22	29-May-2022	72	8	4	5.6%
A total of 72 suspected cases have been reported from Gogrial West county of in Warrap state. A total of 8 samples returned positive for bacillus anthracis bacteria. Cases were reported from 13 March - 18 May 2022 from registered hospital patients where the majority of cases have been female (67%).									
South Sudan	Cholera	Ungraded	21-Apr-2022	21-Mar-22	12-Jun-2022	175	15	1	0.6%
As of 12 June 2022, 175 cases and 1 death (CFR 0.6%) have been reported from Rubkona County of Unity State, mostly (83.4%) from the Bentiu IDP camp. A total of 31 cases have been confirmed positive by RDT for cholera and 15 tested positive by culture at the National Public Health Laboratory in Juba. Females account for 62% of all cases. Rubkona county experienced unprecedented floods in 2021 with flood waters persisting up to the end of the current dry season and the flood surface water is often used for bathing and playing.									
South Sudan	COVID-19	Grade 3	5-Apr-2020	5-Apr-2020	19-Jun-2022	17 687	17 687	138	0.8%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 19 June 2022, a total of 17 687 confirmed COVID-19 cases were reported in the country including 138 deaths and 15 774 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	05-Jun-2022	2 703	104	24	0.9%
The current outbreak in the Bentiu IDP camp is ongoing. As of 5 June 2022, a total of 2 703 cases of hepatitis E including 24 deaths (CFR: 0.9%) have been reported since January 2019. During week 22 (ending 5 June), a total of 45 cases were reported. Approximately 54% of cases are male.									
South Sudan	Malaria	Ungraded	28-Dec-2021	1-Jan-22	22-May-2022	1 117 138	1 117 138	232	0.0%
Between weeks 1-20 of 2022 (ending 22 May), 1 117 138 malaria cases including 232 deaths (CFR 0.02%) have been reported in South Sudan. There were 3 counties exceeding third quartile malaria trends for the past five years including Aweil Centre, Torit, and Jur River counties during week 20. 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.									
South Sudan	Measles	Ungraded	23-Feb-2022	1-Jan-22	15-May-2022	681	421	2	0.3%
A measles outbreak was declared by health authorities of South Sudan on 23 February 2022 in two counties, Torit and Maban. As of week19, 2022 (ending 15 May), eight counties (of 79 counties nationally) have now confirmed measles outbreaks (Aweil Centre, Aweil East, Aweil West, Gogrial West, Maban, Raja, Tambura, and Torit). Overall, 681 suspected measles cases and two deaths (CFR 0.3%) have been reported using the early warning alert and response system (EWARS) and investigated countrywide as part of integrated disease surveillance and response (IDSR) since the beginning of 2022. Among those 681, 421 have been reported from the eight counties with confirmed outbreaks. Most cases are children under five years old (59%) and 53% of cases are male.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	19-Jun-2022	59	59	0	0.0%
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	25-Apr-2022	14-Apr-2022	23-May-2022	214	24	1	0.5%
The Ministry of Health of The United Republic of Tanzania notified WHO on 25 April 2022 of an outbreak of cholera in Kigoma and Katavi Regions. From 14 Apr to 12 May 2022, 214 cumulative cases and 1 death (CFR 0.5%) have been reported from the Districts of Tanganyika in Katavi Region (88, 41.1%) and Uvinza in Kigoma Region (126, 58.8%). A total of 24 cases have been confirmed positive for Vibrio cholerae. About 37% of cases have been reported among children 3-10 years.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	10-Jun-2022	35 159	35 159	840	2.4%
The Ministry of Health, Community Health, Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 10 June 2022, a total of 35 159 confirmed cases have been reported in Tanzania Mainland including 840 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	18-Jun-2022	37 247	37 247	273	0.7%
On 6 March 2020, the Ministry of Health and Public Hygiene of Togo announced the confirmation of its first case of COVID-19. As of 18 June 2022, a total of 37 247 cases including 273 deaths and 36 900 recovered cases have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Togo	Measles	Ungraded	9-Feb-2022	31-Dec-2021	20-Mar-22	831	134	0	0.0%
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 20 March, a total of 831 cases and 0 death, have been reported through Integrated Disease Surveillance and Response (IDSR). The outbreak stated in November 2021 in the Zio district.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	15-Jun-2022	17	17	0	0.0%
No new case of cVDPV2 was reported during the past week. No cases have been reported in 2021. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Uganda	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-22	19-Jun-2022	-	-	-	-
At least 517 850 people (41% of total population) are estimated to face high levels of acute food insecurity (IPC Phase 3 or above) during August 2022-February 2023. About 89 900 of those are IPC phase 4 (emergency) and 427 950 are in IPC phase 3 (crisis). An estimated 23 000 children <5 years are projected to have severe acute malnutrition (SAM) and another 69 000 will have moderate acute malnutrition (MAM). The Horn of Africa is experiencing one of the harshest droughts in recent history. Uganda has been included as one of the countries affected with the Karamoja region being the most affected due to factors related to inadequate food access, poor dietary diversity, structural poverty, low value livelihood options, poor hygiene and sanitation, and morbidity.									
Uganda	Anthrax	Ungraded	26-May-2022	16-May-2022	16-May-2022	8	7	1	12.5%
An anthrax outbreak has been confirmed in Buduba District, Uganda. Eight suspected human cases were reported and clinically evaluated in four villages. Of these, seven were sampled and one died on 16 May without being sampled. The date of onset of symptoms was between 2 and 12 May 2022. The district performed a preliminary test using Gram stain which was positive with purple rods in chains. A total of 14 cows have been reported dead so far									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	17-Jun-2022	166 920	166 920	3 615	2.2%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 17 June 2022, a total of 166 920 confirmed COVID-19 cases with 3 615 deaths were reported.									
Uganda	Yellow fever	Grade 2	3-Mar-21	2-Jan-22	17-Jun-2022	199	1	0	0.0%
There have been 199 suspected cases of yellow fever during 2 January-4 June 2022 in Uganda with no deaths reported. As of 4 June 2022, there have been five total samples testing positive by plaque reduction neutralization test (PRNT) at the Uganda Virus Research Institute (UVRI), however, only one case from Wakiso District was classified as confirmed after thorough investigation. The case is of an unvaccinated female 49-years-old who has recovered. Rapid Response Team was activated and deployed in March 2022 to conduct additional investigations and support the affected districts.									
Zambia	Cholera	Ungraded	13-Apr-2022	11-Apr-2022	28-May-2022	21	21	0	0.0%
A cholera outbreak was declared in Zambia on 3 May 2022. A total of 21 cases have been registered with no deaths as of 29 May 2022. Three districts are affected: Lusaka (7 cases), Chilanga (9 cases) and Nsama (5 cases).									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	19-Jun-2022	324 288	324 288	3 994	1.2%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 19 June 2022, a total of 324 288 confirmed COVID-19 cases were reported in the country including 3 994 deaths and 319 124 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-2019	1-Jan-22	20-Mar-22	22	0	0	0.0%
The anthrax outbreak is ongoing in Zimbabwe. Six new cases were reported in Week 3 of 2022 with the cumulative for the year being 22. The cases were reported by Gokwe North District and Gokwe South District in Midlands Province. This outbreak started in Week 36 of 2019, affecting mainly Buhera and Gokwe North and South districts but a surge in cases started appearing in week 38 when cases were reported in some other areas. The cumulative figures for anthrax are 747 cases and 3 deaths in 2020 and 306 cases and 0 deaths in 2021.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	14-May-2022	249 206	249 206	5 482	2.2%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 14 May 2022, a total of 249 206 confirmed COVID-19 cases were reported in the country including 5 482 deaths and 242 417 cases that recovered.									
Zimbabwe	Measles	Ungraded	29-Apr-2022	19-May-2022	19-May-2022	270		29	10.7%
A total of 270 cases have so far been identified since the first rumours surfaced on 10 April 2022 in Mutasa District. 31 are vaccinated, 171 are not vaccinated and 28 have unknown vaccination status. 29 deaths have so far been recorded with a fatality rate of 12.6%. Of the 29 deaths, 20 were unvaccinated and 9 vaccination status is unknown. Zindi clinic has reported 179 cases so far contributing 66.3%.									
Closed Events									
Kenya	Dengue	Ungraded	3-Mar-22	1-Jan-21	28-Apr-2022	2 426	68	2	0.1%
The outbreak has been reported in three Counties, Mombasa, Mandera and Garissa. The cases are spread from 2021 for Mandera and Mombasa Counties. In Mandera the reported cases are from Mandera east sub county while in Mombasa, six-subcounties (Nyali, Mvita, Kisauni, Nyali, Liikoni and Jomvu) have been affected. Garissa County has reported the latest outbreak from Fafi sub county, Hagadera camp. A total of 2 426 cases (68 confirmed through Polymerase Chain Reaction and 2 358 Probable cases) with two deaths (CFR 0.1%) have been reported.									

†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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