

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 30: 18 to 24 July 2022

Data as reported by: 17:00; 24 July 2022



World Health
Organization

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

2

New events

153

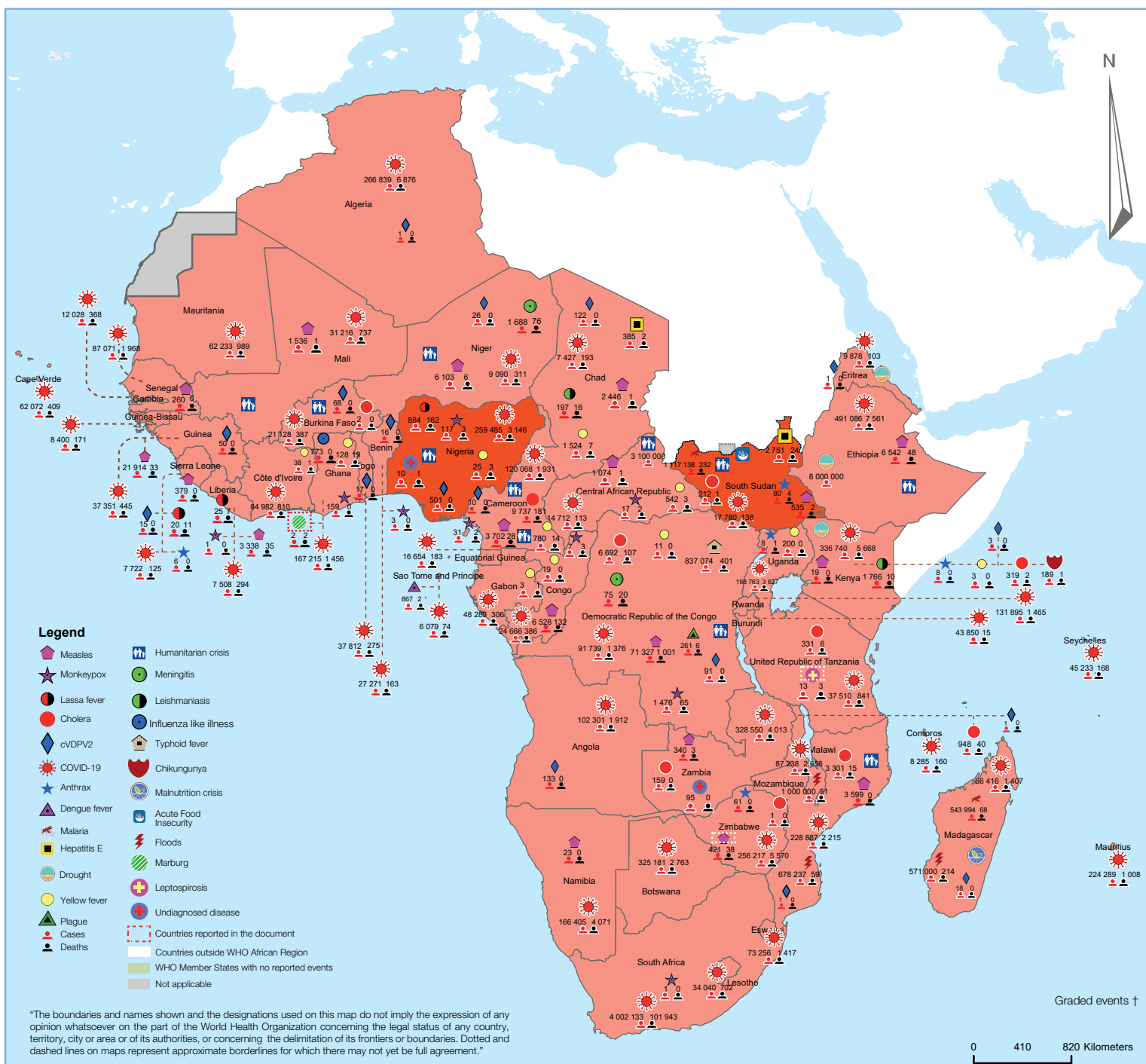
Ongoing events

134

Outbreaks

21

Humanitarian
crises



4

Grade 3 events

31

Grade 2 events

1

Grade 1 events

2

Protracted 3 events

3

Protracted 2 events

0

Protracted 1 events

59

Ungraded events

Overview

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6 All events currently being monitored

This Weekly Bulletin focuses on public health emergencies occurring in the WHO African region. This week's articles cover:

- [Marburg virus disease in Ghana](#)
- [Leptospirosis in the United Republic of Tanzania](#)
- [Measles in Zimbabwe](#)

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:

- Ghana is currently responding to its first-ever confirmed outbreak of Marburg virus disease (MVD). The two identified fatal cases in the Ashanti region, succumbed to MVD within two days of presenting to the health facility. In the past week, Institut Pasteur in Dakar, Senegal, confirmed MVD in the collected samples. The source of the infection has not yet been identified; however in-depth epidemiological investigations continue around the cases in the three affected regions. Support is needed for immediate actions, including planning and coordination of the response, sample transportation, laboratory reagents, procurement of risk-specific personal protective equipment and enhanced community engagement activities.
- The United Republic of Tanzania has recently notified cases of an unknown disease later confirmed as Leptospirosis. Although, a swift response to the outbreak has been mounted, there remain insufficient technical expertise, material and financial resources to properly address the gaps. In addition, the country is concurrently engaged in responding to the COVID-19 pandemic and the cholera outbreak in Kigoma and Katavi Regions that have overwhelmed the country's health system. Moreover, there are several population movements in and out of the affected areas which are left with very limited basic social services including water supply, sanitation and hygiene, and health care services. This might contribute in amplifying and spreading the disease.
- The ongoing measles outbreak which has caused several deaths and infected hundreds of other children in the eastern part of Zimbabwe is showing a declining trend. Poor community health seeking behaviour that has led to the high mortalities coupled with vaccine hesitancy from some religious affiliations continues to jeopardise response efforts. There is urgent need to implement a nationwide Measles-Rubella supplementary immunization activities that had already been planned for September/October 2022 to control further spread of the outbreak.

Ongoing events

Marburg virus disease

Ghana

2
cases

2
Death

100%
CFR

EVENT DESCRIPTION

Two suspected viral hemorrhagic fever (VHF) cases were notified to health authorities in the Ashanti region, the most populated region in Ghana on 28 June 2022.

The first case was a 26-year-old male farm laborer and resident of Adansi North District who arrived from Bogoso (Western Region) on 24 June prior to onset of symptoms and later died on 27 July 2022. The case-patient reportedly had no history of contact with sick or dead animals, sick humans and had not participated in any social gatherings in the three weeks prior to onset of symptoms.

The second case was a 51-year-old male who reported to the hospital on 28 June with history of fever, difficulty in breathing, abdominal pain, general malaise, bleeding from the nose and mouth, and sub-conjunctival bleeding. Furthermore, he had no history of contact with dead animals, sick persons or animals during the previous three weeks before symptom onset. The case died on the same day within 12 hours of reporting.

Blood samples were collected and sent to Noguchi Memorial Institute of Medicine Research (NMIMR) for testing. On 1 July, both cases tested positive for Marburg virus by reverse transcriptase polymerase chain reaction (RT-PCR). On 12 July, samples collected from the two cases were sent to Institute Pasteur in Dakar, Senegal (IPD) which confirmed the results from NMIMR on 14 July 2022.

As of 20 July 2022, all the 108 contacts completed their 21-days follow up period. These contacts included health care workers and immediate family members of the cases. One contact reported some symptoms, but a blood sample from the suspect tested negative at NMIMR on 7 July. All the other contacts reported to be in good health during the follow up period.

PUBLIC HEALTH ACTIONS

- National-level coordination meetings with the ministry of health, partners (WHO, US CDC and UNICEF), Foreign, Commonwealth and Development Office (FCDO) and the Wildlife Division of the Veterinary Service have been held
- Regional Public Health Emergency Committees were activated. Outbreak response coordination mechanisms have been activated in the Ashanti Region and district levels
- A health alert has been sent to all Regions, health facilities and teaching hospitals
- Fact sheets on MVD have been disseminated to health facilities
- Case definitions, including community case definitions for MVD have been distributed to all regions and health facilities
- MVD surveillance is heightened across the country, community-based surveillance volunteers in the Adansi North District have been engaged to support community level case search.
- Adansi North Health and Savannah Region Rapid Response Team were deployed for investigation with the support from

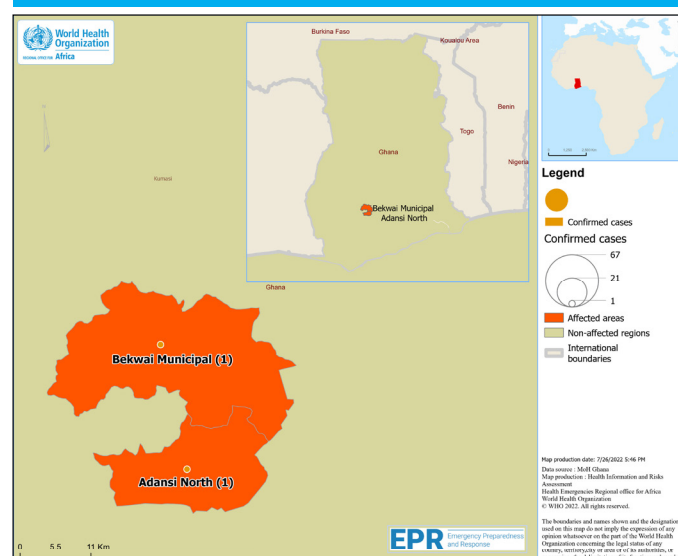
national level experts including WHO. Western region has commenced investigation to trace the community in which the first case earlier visit. The community has been identified and community engagement and case search are to be commenced.

- Contact tracing and active case search in communities and health facilities are ongoing. About 13 samples from the contacts were taken, all tested negative in-country.
- The national testing site has been linked with the WHO Regional Office for Africa laboratory focal point for logistical support
- The District Assembly supplied additional personal protective equipment to the health facility managing the case
- Clinician sensitization on-going on case detection, management, and infection prevention. Case management needs assessment on-going
- Information on MVD disseminated to all regions and community members in Adansi North district sensitized on the diseases and
- WHO country office supporting with transportation of specimen to IPD for confirmation.

SITUATION INTERPRETATION

The confirmation of a Marburg virus disease outbreak in Ghana is of great concern, as the disease is associated with a high case fatality ratio. The source of infection is unknown. Preliminary investigations have shown that neither of these cases had a history of contact with dead animals, or sick persons, and had not attended any social gathering within three weeks of symptoms onset. Even when both cases were farmers from communities living in a forest environment, they were unrelated and experienced the onset of symptoms, including bleeding events, within two days of each other. In-depth investigations to identify the source of the outbreak, continues.

Location of Marburg virus disease cases in Ghana, as of 19 July 2022



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[Go to map of the outbreaks](#)

EVENT DESCRIPTION

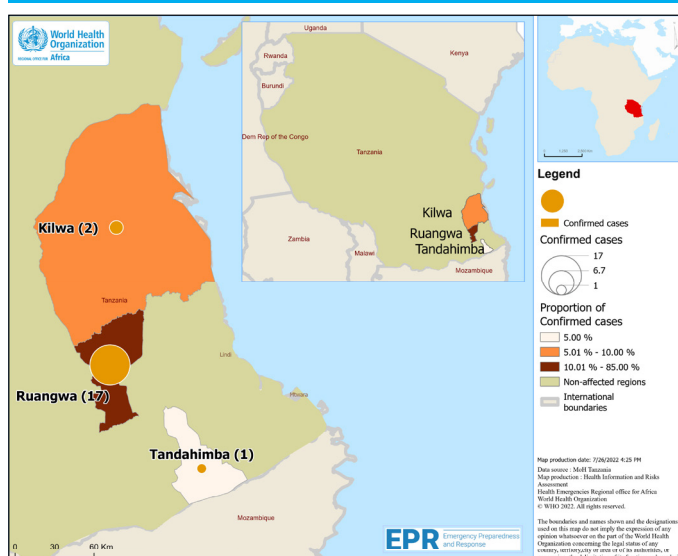
Two patients presented at the Mbekenyera Health Centre located in Ruangwa District Council, Lindi Region, with similar symptoms including fever, nose bleeding, headache, coughing blood and general body weakness on 5 and 7 July 2022. The Ministry of Health was alerted by the Chief Medical Officer of Lindi Region on 7 July 2022 and a rapid response team was deployed to the field to further investigate and assist in control of the unknown disease.

Overall, 18 samples were collected and tested at the National Public Health Laboratory and the Tanzania Veterinary Laboratory Agency and returned negative for Ebola virus disease, Marburg virus disease, Influenza, Crimean-Congo haemorrhagic fever, yellow fever, Chikungunya, West Nile virus and Rift Valley fever. However, 15 cases were confirmed positive for Leptospirosis following further laboratory testing performed at the Sokoine University of Agriculture reference laboratory. The last case was notified on 15 July 2022. Two patients remain hospitalised.

As of 19 July 2022, a total of 20 cases and three deaths (case fatality ratio 15%) have been reported. A total of 15 contacts have been identified, none of whom has so far shown any of the reported symptoms.

Patients' ages ranged from 18 to 77 years, with a median of 45 years. Majority of cases (n=15; 75%) were aged between 31 and 60 years. Males (n=15; 75%) were thrice more affected than women. All cases were peasant farmers detected in Naungo Hamlet located in Kilwa District where they lived in a temporary camp for agricultural activities. Three districts have so far been affected, all of which are located in Lindi Region: Ruangwa (17 cases; 85%), Kilwa (2 cases; 10%) and Tandahimba (1 case; 5%).

Distribution of cases of Leptospirosis in the United Republic of Tanzania, as of 20 July 2022



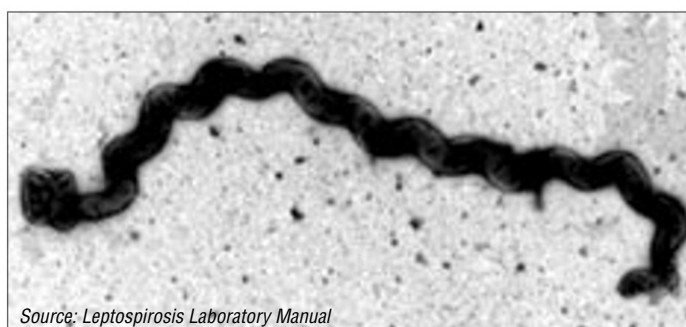
PUBLIC HEALTH ACTIONS

- An official press release produced on 18 July 2022 by MoH to publicly notify the outbreak and coordination mechanisms at national and regional levels were put in place.
- A detailed health sector costed response plan is being developed.
- A multidisciplinary rapid response team was deployed to the field and response activities are ongoing.
- Surveillance activities including epidemiological investigations have been enhanced and active case search are ongoing.
- Sensitization activities of health care workers on case definitions and infection prevention are ongoing.
- More samples have been collected from human, animal and water sources, for laboratory testing.
- Cases have been isolated and provided adequate medical care. Medicines and medical equipment including personal protective equipment are in place.
- Health education is being provided to the community.

SITUATION INTERPRETATION

Tanzania has previously reported an outbreak of Leptospirosis in 2014, in Buhigwe District Council, Kigoma Region. Although the source of the disease remains to be determined, all cases were peasant farmers temporarily living in Naungo village. Naungo is characterized by fertile land that attracts farmers from other areas who make temporary settlements while farming. The area has a seasonal influx, and very limited social services including water supply, sanitation and hygiene, and health care services, inferring that many other people can be exposed to the same contaminated environment. Therefore, surveillance activities should be reinforced especially at community level to early and quickly detect any new case. Additionally, infection, prevention and control interventions at health care and community levels as well as community health education would be paramount to control the outbreak.

Electronmicrograph of leptospires (45,000X) © WHO/INDIA



EVENT DESCRIPTION

The measles outbreak, which has been ongoing in Zimbabwe since 10 April 2022, continues, however with a decrease in new cases in the past two weeks. The first case was detected after a village health worker notified Mutasa District health team of a suspected measles community death in Makabvepi village.

Following the community signal, health workers conducted preliminary investigation on 11 April that confirmed another suspected death and several children with similar symptoms of a body rash. Majority of the suspected cases and the two deaths belonged to a religious group that does not accept immunisation. The deaths were reported in Guta area, Chidazembe village and Marange village, both in Mutasa district. Anecdotal community reports also confirmed earlier cases of measles in March 2022. Notably, there was a mass gathering which reportedly occurred in the first week of April that could have fuelled the spread on the bug in an already compromised community with suboptimal immunisation coverage.

A total of 26 blood samples were collected from suspected cases between 12–13 April from Roli and Makabvepi village and 13 samples (33.3%) from the patients were confirmed Measles IgM positive and 11 negative for Rubella on 22 April. Subsequently, more cases have been reported in the communities and at health facilities in Mutasa district, which borders Mozambique to the East.

As of 19 July 2022, a total of 421 cases have so far been identified in Mutasa District. Of these, 55 (13.0%) are vaccinated against measles, 330 (78.4%) are not vaccinated and 36 (8.6%) have unknown vaccination status. A total of 38 deaths have so far been recorded, yielding a case fatality ratio of 9.0%. Of the 38 deaths, 29 were unvaccinated, while the nine had an unknown vaccination status.

The age-group between 1-4 years (Attack rate=1.2/1 000 population) were the most affected while those above 15 years were the least affected (Attack rate= 0.01/1 000 population). Of the reported cases, 56.0% are males and while 44% are females.

The ministry of health is currently conducting a reactive measles campaign targeting the 6 months to under 15yrs age group with a projected population of 78 968 children. Vaccinations are being done at all static facilities with support of six mobile teams. Vaccine doses were mobilized from provincial vaccine stores and additional doses were distributed from the central vaccine stores.

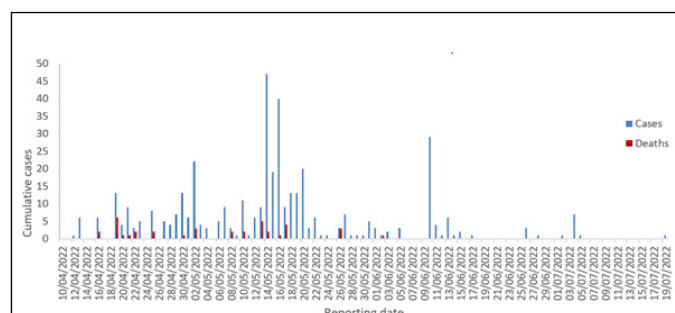
PUBLIC HEALTH ACTIONS

- All districts in Manicaland Province were notified of the outbreak and advised to be on high alert and strengthen measles surveillance. The districts updated their Epidemic Preparedness plan. Response activities are currently underway in collaboration with key partners.
- Community surveillance has been strengthened through sensitization of all village health workers, village heads and

community case definitions are being used. Active case search is being conducted at all health facilities in the district.

- In response to the outbreak, National, Province and District leadership are rolling out a measles vaccination campaign in Mutasa district. Measles rubella supplementary immunization activities were commenced on the 25 April in the northern part of the district where majority of cases were reported.
- The districts have developed their micro-plans and facility based outreaches are complementing static facility-based vaccination. District mobile outreach teams and health facilities have gone further to re-establish outreach points with the community.
- Facilities are offering health education to all individuals seeking health services simultaneously providing awareness on measles outbreak.
- Community engagement meetings have been conducted, with community leaders, community/village health workers (VHW) and the health care workers. Overall, social mobilization activities are ongoing with VHW conducting door to door awareness.
- Measles case definitions and case management guidelines have been distributed to all health facilities.

An epicurve of cases of measles in Mutasa district, Macinaland Province, 10 April to 19 July 2022

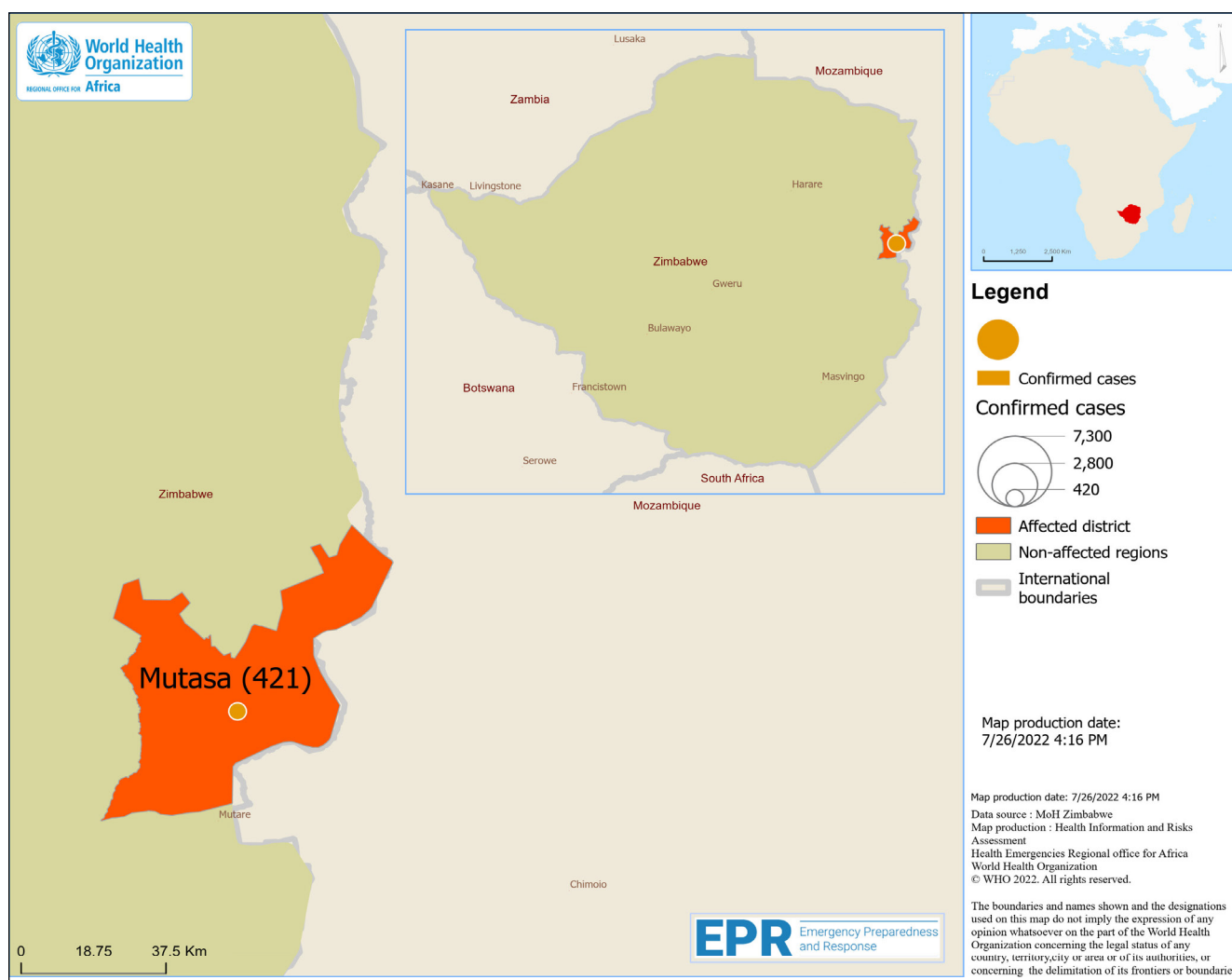


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SITUATION INTERPRETATION

Zimbabwe is having a measles outbreak for the first time in twelve years. Because of COVID-19 restrictions at various points since March 2020, access to immunization services for vaccine preventable diseases have been negatively affected with a significant drop in measles and other vaccination antigen coverages. According to recently conducted Measles risk assessment, 10 districts of 62 are in high risk on population immunity and an additional 20 districts are in medium risk. There has also been unusually high numbers of suspected measles cases reported in districts of Hwedza, Makonde, Zvishavane and Centenary. The Ministry of Health is currently conducting a mass vaccination in Mutasa district in response to the measles outbreak. Risk communication and community engagement remains key to prevention and containment of the outbreak and need for continued implementation of response activities.

Distribution of cases of measles in Zimbabwe, as of 19 July 2022



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									
Liberia	Monkeypox	Ungraded	21-Jul-22	23-Jul-2022	25-Jul-22	1	1	0	0.0%
Liberia confirmed a case of Monkeypox on 23 rd July 2022 through the National Public health Reference Laboratory in the country. The case is a 43-year-old male who resides and works in Ebokayville Une, La Côte D'Ivoire but sought treatment at the Pleabo Health centre in Maryland County, Liberia where he was detected and isolated with 4 contacts being line-listed. The Minister of Health of Liberia held a press conference today and declared an outbreak of Monkeypox.									
Nigeria	Undiagnosed disease (movement disorder condition)	Ungraded	21-Jul-22	2-Jun-22	15-Jul-22	10		1	10.0%
An Increase in the report of seizure disorder was noticed among secondary school students of Marymount College Boji-Boji Owa in Ika North East Local Government Area of Delta State and escalated to the State Ministry of Health and World Health Organization on 14th July 2022. The first case of this seizure disorder was noticed among a student of the school in December 2021 and the second on 2 and June 2022. Later (between 2 nd June and 12th July 2022), 8 more cases were reported among students of the school. The school is about 20 metres away from a gas refilling station, separated by a fence and an about 4m width road. The State rapid response team has activated officers from the Ministry of Oil and Gas to commence an investigation and assessment of the gas refilling station. Plans are ongoing to commence the collection of water samples from the source of drinking water and food samples from the kitchen for investigation. As of 15th July 2022, only one death has been reported among the cases (The patient died when undergoing Magnetic Resonance Imaging (MRI) investigation on 15th June 2022									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	24-Jul-22	266 839	266 839	6 876	2.6%
From 25 February 2020 to 24 July 2022, a total of 266 839 confirmed cases of COVID-19 with 6 876 deaths (CFR 2.6%) have been reported from Algeria, with 179 034 recovered.									
Algeria	Poliomyelitis (cVDPV2)	Grade 2	14-Jul-22	11-Apr-22	07-Jul-22	1	1	-	-
The IHR focal point from Algeria notified WHO of a confirmed case of Circulating Vaccine-Derived Poliovirus type 2 (cVDPV2). The case is a 1-year old girl residing in Tamanrasset Wilaya (commune of Tamanrasset). She was admitted on 11 April 2022 to the hospital, for acute flaccid paralysis of both lower limbs. The epidemiological investigation carried out on the same day showed that she had not received any dose of OPV or IPV and that she had no history of travel outside the city of Tamanrasset. However, the siblings (3) were correctly vaccinated.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	18-Jul-22	102 301	102 301	1 912	-
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 18 July 2022, a total of 102 301 confirmed COVID-19 cases have been reported in the country with 1 912 deaths and 100 063 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	08-May-19	01-Jan-19	24-Apr-22	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.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	10-Jul-22	27 271	27 271	163	-
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 10 July 2022, a total of 27 271 cases have been reported in the country with 163 deaths and 27 044 recoveries.									
Benin	Monkeypox	Ungraded		14-Jun-2022	26-Jun-22	3	3	0	0.0%
Three suspected cases of Monkeypox were notified to WHO by the Benin Ministry of Health on 3 June 2022. Two of the three suspected cases were from Nigeria and one person from the North of the country. Laboratory samples were taken and sent to the Institute Pasteur laboratory in Dakar, which confirmed the three samples positive on 14 June 2022. Epidemiological investigations are ongoing									
Benin	Poliomyelitis (cVDPV2)	Grade 2	08-Aug-19	8-Aug-2019	13-Jul-22	16	16	0	0.0%
Two cases of Circulating Vaccine-derived poliovirus type 2 (cVDPV2) were reported, one each in Atlantique and Oueme making them the first cases in 2022. Six cases were reported in 2021 and 2020, and 8 in 2019.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	21-Jul-22	325 181	325 181	2 763	0.9%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 21 July 2022, a total of 325 181 confirmed COVID-19 cases were reported in the country including 2 763 deaths and 321 815 recovered cases.									
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	01-Jan-19	01-Jan-19	26-Jun-22	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. On 11 June, at least 86 civilians were killed in an attack by an unidentified armed group in Seytenga commune (Sahel). 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 remains 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	Cholera	Ungraded	03-Jul-22	03-Jul-22	05-Jul-22	2	1	0	0.0%
A Cholera case was confirmed in Kantachari medical center, Diapaga health district in the East region of Burkina Faso in a 25-year-old male patient from Niger, where he had stayed before the onset of symptoms. On 5 July 2022, a second suspected case, a female of 30 years old from Kantchari has been reported. There is no epidemiological link with the confirmed case reported on 2 July 2022.									

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[Go to map of the outbreaks](#)

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burkina Faso	COVID-19	Grade 3	10-Mar-20	09-Mar-20	06-Jul-22	21 128	21 128	387	-
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	01-Jan-20	01-Jan-20	13-Jul-22	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	21-Jul-22	43 850	43 850	15	-
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 21 July 2022, the total number of confirmed COVID-19 cases is 43 850, including 15 deaths and 42 472 recovered.									
Cameroon	Humanitarian crisis (Far-North; Sahel Region)	Grade 2	31-Dec-13	27-Jun-17	11-May-22	-	-	-	-
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.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	01-Oct-16	27-Jun-18	11-May-22	-	-	-	-
According to UNHCR reports, an estimated 579 136 Internally Displaced People 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. There has been an increase in the use of improvised explosive devices, 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	01-Jan-21	25-Oct-21	03-Jul-22	9 737	537	181	-
During epi week 26 (ending on 3 July 2022), 227 new suspected cholera cases including two deaths were reported in Cameroon. As of 3 July, a total of 9 737 suspected cases of cholera and 181 deaths (CFR 1.9%) have been reported since October 2021. South-West (5 993 cases, 92 deaths), and Littoral (3 148 cases, 77 deaths), have reported the most cases. The general trend of the outbreak is increasing and its epicentre has shifted from South-West to Littoral. 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	06-Mar-20	06-Mar-20	08-Jun-22	120 068	120 068	1 931	-
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 8 June 2022, a total of 120 068 cases have been reported, including 1 931 deaths and 118 080 recoveries.									
Cameroon	Measles	Ungraded	02-Apr-19	01-Jan-22	03-Jul-22	3 702	1 387	28	-
From week 1 to 26, 2022 (ending 3 July), a total of 3 702 measles cases and 1 387 confirmed (37.5%) with 28 deaths (CFR 0.8%) have been reported in Cameroon. Of the total reported cases, 2 005 were investigated (54.2%).									
Cameroon	Monkeypox	Ungraded	24-Feb-22	01-Jan-22	26-Jun-22	31	6	2	6.5%
As of 26 June 2022, the Cameroon has notified 31 suspected cases of monkeypox with two deaths (CFR 6.5%) from six districts across three regions, since the beginning of 2022. Ten samples have been collected and six cases have been laboratory confirmed from Ayos Health District (3), Kumba Health District in the South-West region (2) and Benakuma Health District in the North-West region (1). Males and females are equally affected and the median age is 17.3 years (range 1-36 years).									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	01-Jan-20	01-Jan-20	26-Jun-22	10	10	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported during epi week 25, 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	07-Feb-21	04-Jan-21	26-Jun-22	780	15	14	1.8%
From 1 January 2022 to 26 June 2022, a total of 780 suspected cases of yellow fever were investigated including 27 probable cases (tested IgM positive) and 15 confirmed cases (tested positive by plaque reduction neutralization test). Fourteen deaths were recorded, giving a CFR of 1.8%. All 10 regions of the country have notified one or several suspected cases. The confirmed cases are from six regions and 15 Health Districts of the country.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	23-Jul-22	62 072	62 072	409	0.7%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 23 July 2022, a total of 62 072 confirmed COVID-19 cases including 409 deaths and 61 466 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-2013	29-Jun-22	3 100 000	-	-	-
The conflict in CAR has intensified 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. The situation is concerning in the Bakouma, Kouï, Ngaoundaye, Obo and Zémio Sub-prefectures where the proportion of people affected by food insecurity is between 65% and 75%. Overall, 3.1 million people (63% of the total population) are in need of assistance and protection in 2022.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	04-Jul-22	14 712	14 712	113	-
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 4 July 2022, a total of 14 712 confirmed cases, 113 deaths and 14 310 recovered were reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Measles	Ungraded	13-Mar-22	01-Jan-22	26-Jun-22	1 074	99	1	0.1%
From week 1 to week 25 2022 (ending 26 June), a total 1 074 suspected cases of measles including one death (CFR 0.1%) have been reported through IDSR system; among the cases, 99 were confirmed including 49 by laboratory confirmation and 50 by epidemiological link. Four districts are in confirmed measles outbreak (Bimbo confirmation at week 10, Kouango-Grimari at week 11, Alindao at week 14 and Haute-Kotto at week 20.)									
Central African Republic	Monkeypox	Ungraded	03-Mar-22	04-Mar-22	14-Jun-22	17	8	2	11.8%
As of 14 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: Mbaiki (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-21	28-Jun-22	542	20	3	0.6%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test at the Centre Pasteur of Cameroun. As of 28 June 2022, a total of 542 suspected cases of yellow fever have been reported including five probable and 20 confirmed cases. Three deaths have so far been recorded (CFR 0.6%). Three regions are currently affected, with 70% of confirmed cases reported from RS3.									
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-22	-	15-Jul-22	-	-	-	-
More than 2.1 million people are in food and nutrition insecurity in Chad. The Decline in agro-pastoral productivity is affecting nutritional status of the populations. According to OCHA, more than 1.5 million of the most vulnerable people are at risk of not receiving assistance.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	11-Jul-22	7 427	7 427	193	-
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 11 July 2022, a total of 7 427 confirmed COVID-19 cases were reported in the country including 193 deaths.									
Chad	Leishmaniasis	Ungraded	08-Sep-20	01-Jan-18	31-May-22	197	13	16	8.1%
Since 1 January 2018 to 31 May 2022, a total of 197 cases and 16 deaths (CFR 8.1%) have been reported from four provinces (N'Djamena, Borkou, Tibesti and Ouaddai). The majority of cases are male (70.1%). The under five years old patients are 74 (38.0%). In 2022, 30 cases and two deaths have been reported.									
Chad	Measles	Ungraded	24-May-18	01-Jan-22	19-Jun-22	2 446	109	1	-
A total of 2 446 measles suspected cases reported since the start of 2022, across 119 out of 139 districts for the country; among the 109 measles cases IgM positive reported, 46 confirmed measles cases are children under five years old ; 20 cases aged 5 – 9 years old.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	09-Sep-19	19-Jun-22	122	122	0	0.0%
As of epi week 24 (ending on 19 June 2022), seven cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported since the beginning of 2022. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks, while nine other cases were reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Chad	Yellow fever	Grade 2	13-Nov-21	01-Nov-21	28-Jun-22	1 524	24	7	-
On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 28 June 2022, there has been 1 524 suspected cases of yellow fever reported, including 24 probable and 24 confirmed cases with seven deaths (CFR 0.5%). Of note, there has been a decrease in the number of cases over the past ten weeks. Mandoul and Moyen Chari provinces are the current hotspots, having reported 45% and 32% of confirmed cases, respectively. A total of 19/126 districts in 7/23 provinces have been affected since the beginning of the outbreak.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	20-Jul-22	8 285	8 285	160	-
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 20 July 2022, a total of 8 285 confirmed COVID-19 cases, including 160 deaths and 8 061 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	21-Jul-22	24 666	24 666	386	1.6%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 21 July 2022, a total of 24 666 cases including 386 deaths and 23 644 recovered cases have been reported in the country.									
Congo	Measles	Ungraded	14-Mar-22	01-Jan-22	12-Jun-22	6 528	6 528	132	-
From week 1 to week 23, 2022 (ending 12 June) , a total of 214 lab confirmed measles cases and 6 314 epidemiologically linked cases and 132 deaths (CFR 2%) have been reported in Congo ; 23 out of 52 districts for the country (44%) are in outbreak mode. Nationwide multi-intervention campaigns including measles outbreak response vaccination, Vitamin A supplementation and deworming are planned.									
Congo	Monkeypox	Ungraded	23-May-22	01-Jan-22	30-May-22	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 Laboratory in Kinshasa on 12 April 2022 were laboratory-confirmed.									
Congo	Yellow fever	Grade 2	31-Mar-22	31-Mar-22	15-Jun-22	19	4	0	0.0%
As of 15 June 2022, a total of 15 probable cases of yellow fever and four confirmed and zero deaths have been reported. The figures have been reviewed following final case classification. An integrated campaign for yellow fever and measles is planned 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	24-Jul-22	84 982	84 982	810	1.0%
Since 11 March 2020, a total of 84 982 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 810 deaths, and a total of 83 910 recoveries.									
Côte d'Ivoire	Yellow fever	Grade 2	14-Sep-21	13-Aug-21	15-Jun-22	38	7	1	2.6%
From 13 August 2021 to 15 June 2022, a total of 38 probable and seven confirmed cases of yellow fever were recorded in Côte d'Ivoire, including one death among probable cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-2017	05-Jun-22	-	-	-	-
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. 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 25 000 people, according to humanitarian sources. Traffic has been interrupted on the axis linking Burayi and Bunagana, where thousands of displaced and returnees have been waiting for assistance since the start of the violence last March.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	01-Jan-22	05-Jun-22	6 692	404	107	-
From epidemiological week 1 to 22 (ending 5 June 2022), 6 692 suspected cholera cases including 107 deaths (CFR: 1.6%) 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 (2 272), Upper Lomami (1 539), Tanganyika (1 361), and North Kivu (1 175). The overall national incidence is 11 cases per 100 000 inhabitants. The provinces of Tanganyika (39), Haut-Lomami (34) and South Kivu (27) 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	03-Jul-22	91 739	91 737	1 376	-
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 91 737 confirmed cases and two probable case, including 1 376 deaths have been reported. A total of 82 922 people have recovered.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	01-Jan-22	19-Jun-22	71 327	4 735	1 001	-
From week 1 to week 24 of 2022 (ending 19 June), 71 327 suspected cases and 1 001 measles related deaths (1.4%); 3 347 cases investigated through the case based surveillance system; 1 388 tested IgM+ for Measles ; 63% lab confirmed measles cases are children under five years old, and only 25% with history of vaccination. The number of total suspected cases and confirmed cases have been revised following data cleaning process (from 73 152 and 4 890 to 71 327 and 4 735 respectively).									
Democratic Republic of the Congo	Monkeypox	Ungraded	30-Mar-19	01-Jan-22	05-Jun-22	1 476	107	65	-
From 1 January – 5 June 2022, the Democratic Republic of the Congo reported 1 476 suspected cases with 65 deaths (CFR 4.4%) from 103 health zones across 20 provinces. The most affected provinces in 2022 are: Sankuru (525 cases, 35.6%), Tshopo (198 cases, 13.4%), Maniema (182 cases, 12.3%), Tshuapa (123 cases, 8.3%) and Sud-Ubangi (111 cases, 7.5%). At least 107 of the cases sampled were confirmed positive for monkeypox virus infection.									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	01-Jan-22	05-Jun-22	261	-	6	2.3%
Between epidemiological weeks 1-22 of 2022, 261 cases of suspected bubonic plague have been reported with 6 deaths (CFR 2.3%). All cases have been reported from Ituri Province 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 (CFR 11.3%). 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-21	01-Jan-21	13-Jul-22	91	91	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2022 cases stands at 63 and 28 for 2021.									
Democratic Republic of the Congo	Suspected Meningitis (Gombari health Zone)	Ungraded	31-May-22	31-May-22	27-Jun-22	75	1	20	26.7%
Gombari health zone team investigated an alert of successive meningitis deaths of four adult patients of unknown cause, all residents of the Konzokonvu village, in Apodo health area. Samples were sent to the National Reference Laboratory in Kinshasa for further analysis and one sample tested positive for Neisseria Meningitidis. As of 27 June 2022, a total of 75 cases and 20 deaths (CFR 26.7%) have been reported from four health areas (Apodo, Kossia, Akpandau and Tangi) of the Gombari health zone, in the North-East of the Democratic Republic of Congo. 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	01-Jul-21	01-Jan-22	05-Jun-22	837 074	-	401	-
In 2022, from epidemiological week 1 to 22 (ending 5 June 2022), 837 074 suspected cases of typhoid fever including 401 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 0.3%).									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-21	21-Apr-21	13-Jun-22	11	4	0	0.0%
Since 2021, 138 out of 519 districts have reported at least one suspect case of yellow fever with an average of about 16 suspect cases reported every week. As of 13 June 2022, 11 probable cases and four confirmed yellow fever cases have been reported in three provinces including Kasai, Nord Ubangui and Kinshasa. The two confirmed cases in Kinshasa Province were reported in Limete and Kingasani health zones. The figures of probable and confirmed cases have been revised following data cleaning									

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	18-Jul-22	16 654	16 654	183	-
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 18 July 2022, a total of 16 654 cases have been reported in the country with 183 deaths and 16 018 recoveries.									
Eritrea	Drought/food insecurity	Grade 3	17-Feb-22	01-Jan-22	10-Jun-22	-	-	-	-
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. Eritrea has been included as one of the countries affected. Around 75 000 pastoralists and agro-pastoralists are affected by the drought in the Northern Red Sea and Southern Red Sea areas. Eritrea is among the countries at high risk of inflation due to the Ukraine war.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	17-Jul-22	9 878	9 878	103	-
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 17 July 2022, a total of 9 878 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 709 patients have recovered from the disease.									
Eritrea	Poliomyelitis (cVDPV2)	Ungraded	02-Jun-22	7-Jun-22	19-Jun-22	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. The sample was found to be serotype: Type 15-PV2. The National Polio Outbreak Response Coordination Committee has been activated and the relevant response activities initiated. No further case has been reported, as of epi week 24 (ending on 19 June 2022).									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	24-Jul-22	73 256	73 256	1 417	1.9%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 24 July 2022, a total of 73 256 cases have been reported in the country including 71 813 recoveries. A total of 1 417 associated deaths have been reported.									
Ethiopia	Drought/food insecurity	Grade 3	17-Feb-22	01-Jan-22	03-Jun-22	8 000 000	-	-	-
Ethiopia is experiencing one of the most severe La Niña-induced droughts in the last forty years following four consecutive failed rainy seasons since late 2020. The prolonged drought continues to compromise fragile livelihoods heavily reliant on livestock and deepening food insecurity and malnutrition. More than 8 million pastoralists and agro-pastoralists in Somali (3.5 million), Oromia (3.4 million), SNNP (1 million) and South-West (more than 15,000 people) regions are currently affected by the drought, of which more than 7.2 million people need food assistance and 4.4 million people need water assistance.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	04-Nov-20	04-Nov-20	23-May-22	-	-	-	-
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 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	17-Jul-22	491 086	491 086	7 561	-
Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 490 370 cases of COVID-19 as of 17 July 2022, with 7 561 deaths and 468 107 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	01-Jan-22	26-Jun-22	6 542	3 852	48	-
From week 1 to 25 of 2022 (ending 26 June), a total of 6 542 suspected cases with 3 852 confirmed and 48 deaths (CFR 0.7%) have been reported in Ethiopia. As of week 25, 2022, nine districts (Anded, Minjar, Dodola, Woba Ari, Raaso, Awbare, Babilee, Daroor, Menit Goldia) from five regions (Amhara, SNNPR, Oromia, South West and Somali) are experiencing an active measles outbreak.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	13-Jul-22	48 289	48 289	306	-
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 13 July 2022, a total of 48 289 cases including 306 deaths and 47 477 recoveries have been reported in the country.									
Gabon	Yellow fever	Ungraded	12-Feb-22	17-Sep-21	23-May-22	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	12-Jul-22	12 028	12 028	368	3.1%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 12 July 2022, a total of 12 028 confirmed COVID-19 cases including 368 deaths, and 11 645 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	09-Jul-22	167 215	167 215	1 456	0.9%
As of 9 July 2022, a total of 167 215 confirmed COVID-19 cases have been reported in Ghana. There have been 1 456 deaths and 165 153 recoveries reported.									
Ghana	Influenza A (H3N2)	Ungraded	09-Jun-22	01-Jan-22	08-Jun-22	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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ghana	Marburg virus disease	Grade 2	06-Jul-22	6-Jul-2022	06-Jul-22	2	2	2	100.0%
The Ministry of Health in Ghana notified two suspected cases of Marburg Virus Disease (MVD) on 7 July 2022 in Ashanti region. The two cases come from two different locations in the Ashanti Region and no epidemiological link was established during the preliminary epidemiological investigation. Preliminary laboratory results from the Noguchi Memorial Institute for Medical Research suggest that the infection is due to Marburg Virus. The samples sent to the Institute Pasteur in Dakar, Senegal for confirmation turned positive for MVD. As of 17 July a total of 98 contacts was listed and contacts are under quarantine and being followed.									
Ghana	Monkeypox	Ungraded	08-Jun-22	24-May-22	30-Jun-22	159	19	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-30 June, 2022 there have been 159 suspected cases including 19 confirmed and no deaths reported from Eastern, Western, and Greater Accra.									
Ghana	Yellow fever	Grade 2	03-Nov-21	15-Oct-21	15-Jun-22	128	60	19	14.8%
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 15 June 2022, a total of 68 probable and 60 confirmed cases of yellow fever were reported from 13 regions in Ghana. Of the reported cases, nine deaths were recorded among probable cases and 12 deaths among confirmed cases.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	03-Jul-22	37 351	37 351	445	-
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 3 July 2022, a total of 37 351 cases including 36 640 recovered cases and 445 deaths have been reported in the country.									
Guinea	Measles	Ungraded	09-May-18	01-Jan-22	27-May-22	21 914	397	33	-
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.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	13-Jul-22	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	07-Jul-22	8 400	8 400	171	2.0%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 7 July 2022, the country has reported 8 400 confirmed cases of COVID-19 with 8 151 recoveries and 171 deaths.									
Kenya	Drought/food insecurity	Grade 3	17-Feb-22	01-Jan-22	10-Jun-22	-	-	-	-
In Kenya, 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 and another 713 000 will have moderate acute malnutrition. 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, 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	Anthrax Suspected	Ungraded	15-Jul-22	30-Jun-22	30-Jun-22	8		0	0.0%
Eight suspected cases of anthrax were recorded in Ikolomani sub-county, Kakamega county in Kenya between 30 May and 20 June 2022. All reported suspected cases were exposed by either handling carcasses from the animals that died of suspected anthrax or eating suspected meat. All had fever, and 87.5% (7/8) of them had skin lesions. A total of five samples have been collected and being analyzed at Kenya Medical Research Institute (KEMRI).									
Kenya	Chikungunya	Ungraded	03-Mar-22	13-Feb-22	26-Jun-22	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 25 (ending 26 June 2022).									
Kenya	Cholera	Ungraded	30-May-22	3-May-22	19-Jun-22	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	17-Jul-22	336 740	336 740	5 668	-
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 17 July 2022, 336 740 confirmed COVID-19 cases including 5 668 deaths and 329 673 recoveries have been reported in the country.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	03-Jan-20	26-Jun-22	1 766	1 581	10	0.6%
Since January 2020, a total of 1 766 visceral leishmaniasis (185 suspected and 1 581 confirmed) cases have been reported in Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, and Wajir Counties with a total of 10 deaths reported (CFR 0.6%). The outbreak is active in three counties: West Pokot County in Pokot North, Pokot south and West Pokot Sub Counties; Wajir County in Wajir North, Eldas and Wajir West Sub – Counties and Kitui county from Mwingi North and Mwingi Central Sub-counties.									
Kenya	Measles	Ungraded	29-Jun-22	26-Jun-22	26-Jun-22	19	8	0	0.0%
Measles outbreak has been reported from Marsabit and Wajir Counties. A total of 19 cases with eight confirmed cases have been reported with no death. Active case search on the surrounding facilities is ongoing. In Wajir county, cases are reported from Wajir East sub county with six cases and three confirmed and in Marsabit county, cases were reported in North Horr sub county with 13 cases and five confirmed.									

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	03-Mar-22	12-Jan-22	17-Jun-22	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.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-2020	13-Jul-22	34 040	34 040	702	2.1%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 13 July 2022, a total of 34 040 cases of COVID-19 have been reported, including 25 623 recoveries and 702 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	17-Jul-22	7 508	7 508	294	3.9%
From 16 March 2020 to 17 July 2022, Liberia has recorded a total of 7 508 cases including 294 deaths and 7 208 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	03-Mar-22	06-Jan-22	08-Jun-22	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	03-Feb-22	01-Jan-22	22-May-22	3 338	3 027	35	-
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. 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.									
Madagascar	Floods	Grade 2	19-Jan-22	16-Jan-22	08-Jun-22	571 000		214	-
Heavy rains in Madagascar from multiple weather systems (Tropical Storm (TS) Ana, Cyclone Batsirai, TS Dumako, Cyclone Emnati, TS Gombe, and TS Jasmine) caused floods in 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 in 18 regions though Analamanga area was most affected. 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	01-Jul-21	01-Jan-21	08-Jun-22	-	-	-	-
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	24-Jul-22	66 416	66 416	1 407	2.2%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 24 July 2022, a total of 66 416 confirmed cases including 1 407 deaths have been reported in the country.									
Madagascar	Malaria	Ungraded		30-Jun-2022	30-Jun-22	543 994	543 994	68	0.0%
During epi week 22 (ending on 5 June 2022), Madagascar registered 15 576 cases of malaria, including three deaths (CFR 0.02%). From epi week 1-22, 543 994 cases and 68 deaths (CFR 0.01%) have been reported. Since epi week 21 (ending on 29 May 2022), 19 health districts have crossed their epidemic threshold: Ambohidratrimo and Antananarivo Renivohitra in Analamanga region; Taolagnaro in Anosy region; Farafangana in Atsimo Atsinanana region; Mitsinjo in Boeny region; Ambohimahasoa, Fianarantsoa I, Isandra, Lalangina and Vohibato in Haute Matsiatra region; Ivohibe in Ihorombe region; Arivonimamo and Miakinarivo in Itasy region; Ambatomainty, Antsalova and Morafenobe in Melaky region; Morondava in Menabe region; Antanifotsy in Vakinankaratra, and Ifanadiana in Vatovavy region.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-2021	19-Jul-22	18	18	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 are five cases in 2022 as of 19 July 2022.									
Malawi	Floods	Grade 2	26-Jan-22	26-Jan-22	05-Jun-22	1 000 000		51	-
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	03-Mar-22	03-Mar-22	24-Jul-22	948	13	40	4.2%
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 24 July 2022, Malawi has reported a total of 948 cholera cases with 40 deaths from 10 districts.									
Malawi	COVID-19	Grade 3	02-Apr-20	2-Apr-2020	24-Jul-22	87 238	87 238	2 658	3.10%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 24 July 2022, the country has a total of 87 238 confirmed cases with 2 658 deaths and 83 685 recoveries.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-2022	19-Jul-22	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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mali	Humanitarian crisis (Sahel region)	Grade 2	n/a	n/a	31-May-22	-	-	-	-
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.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	24-Jul-22	31 216	31 216	737	2.4%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 24 July 2022, a total of 31 216 confirmed COVID-19 cases have been reported in the country including 737 deaths and 30 389 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	01-Jan-22	05-Jun-22	1 536	563	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.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	22-Jul-22	62 233	62 233	989	1.7%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 22 July 2022, a total of 62 233 cases including 989 deaths and 60 196 recovered have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	10-Jul-22	224 289	224 289	1 008	0.4%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 10 July 2022, a total of 224 289 confirmed COVID-19 cases including 1008 deaths have been reported in the country.									
Mozambique	Floods	Grade 2	24-Jan-22	26-Jan-22	12-Mar-22	678 237		59	-
On 11 March 2022, a severe tropical cyclone Gombe made landfall over the coastal area of central Nampula province, with maximum sustained winds up to 190km/h. According to the latest information released by the National Institute for Disaster Management and Risk Reduction, 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	01-Jan-20	01-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	17-Jul-22	3 301	0	15	-
Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 13 January to 17 July 2022, a total of 3 301 cases and 15 deaths (CFR 0.5%) have been reported. In Sofala province, cases have been reported from Caia (707, 21.7%), Maringue (30, 0.9%), Chemba (36, 1.1%), and Marromeu districts (193, 5.9%). In Zambezia province, cases have reported from Morrumbala (1 333, 40.9%), Mopeia (589, 18.0%), and Quelimane City (253, 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	14-Jul-22	228 887	228 887	2 215	1.0%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 14 July 2022, a total of 228 887 confirmed COVID-19 cases were reported in the country including 2 215 deaths and 226 271 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	01-Jan-21	17-Apr-22	3 599	903	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-22	18-May-2022	19-Jul-22	1	1	0	0.0%
The WPV1 is an orphan virus, linked to the virus detected in Malawi (for which outbreak response vaccinations are ongoing in Malawi and neighbouring countries). No other case has been reported to date. The Government of Mozambique continues to respond to both WPV1 and cVDPV2 in the country.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	20-Jul-22	166 405	166 405	4 071	-
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 20 July 2022, a total of 166 405 confirmed cases with 165 227 recovered and 4 071 deaths have been reported.									
Namibia	Measles	Ungraded	02-Jun-22	6-Jun-2022	06-Jun-22	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.									
Niger	Humanitarian crisis (Sahel region)	Grade 2	01-Feb-15	1-Feb-2015	23-Jun-22	-	-	-	-
There is an increasing number of security incidents reported in the first five months of the year. Since the beginning of May 2022 , a total of 16 193 people have been forced to move to the communes of Torodi and Makalondi. More that 17 000 people also have fled Mali to settle in Niger's Tillaberi and Tahoua regions. As of 30 June 2022, a total 264 257 Internally Displaced Persons were registered. Diffa and Tillaberi regions are the most affected by food insecurity with 24% and 29% of the population affected respectively.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	01-Jul-22	9 090	9 090	311	-
From 19 March 2020 to 1 July 2022, a total of 9 090 cases with 311 deaths have been reported across the country. A total of 8 762 recoveries have been reported from the country.									
Niger	Measles	Ungraded	05-Apr-22	01-Jan-22	17-Apr-22	6 103	323	6	-
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 eight 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). Risk assessment found: 17 districts of 72 for the country 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		01-Jan-21	22-May-22	1 688	-	76	-
Since early 2021 to week 2, 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 of 4.5 cases per 100 000 inhabitants and Magaria with an attack rate 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 is the predominant germ identified in the 2 health districts. A request to the International Coordinating Group for vaccine provision is underway for a vaccine campaign response.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	01-Jan-20	01-Jan-21	13-Jul-22	26	26	0	0.0%
Four cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week; one in Maradi and three in Tillabéri bringing the number of cases in 2022 to eight. There were 18 cases reported in 2021.									
Nigeria	Humanitarian crisis (Sahel region)	Grade 2	10-Oct-16	n/a	01-Apr-22	-	-	-	-
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. 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-20	27-Feb-2020	18-Jul-22	259 485	259 485	3 146	1.2%
The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 18 July 2022, a total of 259 485 confirmed cases with 253 037 recovered and 3 146 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	01-Jan-21	01-Jan-21	17-Jul-22	884	847	162	19.1%
In week 28 of 2022 (ending 17 July), five new confirmed cases of Lassa fever with two deaths were reported from Edo and Ondo States. Cumulatively from week 1 to 28 of 2022, a total of 884 cases including 847 confirmed, 37 probable and 162 deaths among confirmed cases have been reported with a case fatality ratio (CFR) of 19.1% across 24 states. In total, 5 756 cases are suspected in 2022. Of all confirmed cases, 69% are from Ondo (30%), Edo (25%), and Bauchi (14%) States.									
Nigeria	Monkeypox	Ungraded	31-Jan-22	01-Jan-22	17-Jul-22	117	117	3	2.6%
From 1 January to 17 July 2022, Nigeria has reported 338 monkeypox suspected cases. Of these, 117 cases were laboratory confirmed from 25 States: Lagos (15), Adamawa (11), Delta (10), Rivers (9), Edo (8), Bayelsa (8), Nasarawa (7), Plateau (6), FCT (5), Ondo (5), Anambra (4), Cross River (3), Kwara (3), Borno (3), Taraba (3), Oyo (3), Imo (3), Kano (2), Katsina (2), Gombe (2), Niger (1), Ogun (1), Kogi (1), Bauchi (1) and Akwa Ibom (1). Three deaths were recorded among confirmed cases from Delta, Lagos and Ondo states.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	01-Jun-18	01-Jan-18	15-Jul-22	501	501	0	0.0%
In 2022, 34 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported in Nigeria, including one in week 26 from Taraba State. The date of onset of symptoms of the last reported case was 13 May 2022. There were 410 cVDPV2 cases reported in 2021.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	01-Jan-21	31-May-22	25	22	0	0.0%
From January to December 2021, a total of 25 yellow fever cases including 22 confirmed and 3 probable cases were reported in Nigeria. From 1 January to 31 May 2022, a total of 814 suspected cases have been reported from 36 states in 345 Local Government Areas. Of these suspected cases reported in 2022, none have been confirmed.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-Jul-22	131 895	131 895	1 465	-
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 16 July 2022, a total of 131 895 cases with 1 465 deaths and 129 613 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	06-Apr-20	6-Apr-2020	10-Jul-22	6 079	6 079	74	-
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 10 July 2022, a total of 6 079 confirmed cases of COVID-19 have been reported, including 74 deaths. A total of 5 990 cases have been reported as recoveries.									
Sao Tome And Principe	Dengue	Grade 2	11-Apr-22	15-Apr-2022	17-Jul-22	867	867	2	0.2%
Sao Tome and Principe is experiencing its first ever documented dengue outbreak. From 15 April-17 July 2022, a total of 867 cases and 2 deaths (CFR 0.2%) have been confirmed via RDT from: Água Grande (624, 71.9%), Mézôchi (105, 12.1%), Lobata (72, 8.3%), Cantagalo (37, 4.3%), Lomba (14, 1.6%), Caué (9, 1.0%), and RAP (6, 0.7%). During week 28 (ending 17 July), there were 13 new cases registered in the country. Água Grande's attack rate is by far the highest (74 per 10 000 inhabitants). Those aged 50-59 years are experiencing the highest attack rate at 52.9 cases per 10 000. The 3 main clinical signs are fever (790, 91%), headache (638, 74%) and myalgia (270, 31%).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Senegal	COVID-19	Grade 3	02-Mar-20	02-Mar-20	24-Jul-22	87 071	87 071	1 968	2.3%
From 2 March 2020 to 24 July 2022, a total of 87 071 confirmed cases of COVID-19 including 1 968 deaths and 84 810 recoveries have been reported in Senegal.									
Senegal	Measles	Ungraded	04-Jul-22	01-Jan-22	10-Jul-22	260	260	0	0.0%
From epidemic week 1 to 27 of 2022 (ending 10 July), 260 confirmed cases of measles were reported from 43 districts of Senegal, with 19 districts having crossed the epidemic threshold. Of the reported cases, 138 (53.1%) are females; the most affected age group is 1-5 years with 133 cases (51.2%) of which 88.7% were not vaccinated against measles.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	14-Jul-22	45 233	45 233	168	0.4%
Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 14 July 2022, a total of 45 233 cases have been confirmed, including 44 796 recoveries and 168 deaths have been reported.									
Sierra Leone	Anthrax	Ungraded	20-May-22	20-May-2022	17-Jun-22	6	5	0	0.0%
The Ministry of Health and Sanitation in Sierra Leone declared an outbreak of human anthrax in the country after identifying three lab confirmed cutaneous anthrax cases in Karene district. Investigation result, reported consumption of dead 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 were reported including five confirmed cases and one probable case. Majority of them are among the 15-year old age group 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	16-Jul-22	7 722	7 722	125	-
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 16 July 2022, a total 7 722 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 836 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	01-Jan-21	29-May-22	20	20	11	55.0%
From early 2021 to 20 March 2022, a total of 20 cases and 11 deaths (CFR 55%) 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. 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	01-Nov-21	01-Jan-22	11-May-22	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-20	10-Dec-2020	13-Jul-22	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	05-Mar-20	03-Mar-20	24-Jul-22	4 002 133	4 002 133	101 943	-
Since the start of the COVID-19 pandemic in South Africa through 20 July 2022, a cumulative total of 4 002 133 confirmed cases and 101 943 deaths have been reported.									
South Africa	Monkeypox	Ungraded	23-Jun-22	23-Jun-2022	23-Jun-22	1	1	0	0.0%
The Minister of Health in South Africa received a notification from the country's laboratory services of a confirmed case of monkeypox. The patient is a 30-year-old male from Johannesburg who had no travel history, surveillance has commenced to identify possible suspected cases.									
South Sudan	Drought/food insecurity	Grade 3	18-Dec-20	5-Apr-2021	19-Jun-22	-	-	-	-
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; Cueilbet 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	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	05-Jun-22	-	-	-	-
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. 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-22	13-Mar-22	12-Jun-22	80	8	4	5.0%
A total of 80 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 - 12 June 2022 from registered hospital patients where the majority of cases have been female (64%).									
South Sudan	Cholera	Ungraded	21-Apr-22	21-Mar-22	19-Jun-22	212	15	1	0.5%
At the end of week 24 (ending 19 June 2022), 212 cases and 1 death (CFR 0.5%) have been reported from Unity State and Ruweng Administrative Area, however most cases have been reported from the Bentiu IDP camp (177 cases, 83.5% of cumulative total). Two new areas, Roriak and Pariang have reported new cases during week 24. A total of 36 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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	COVID-19	Grade 3	05-Apr-20	5-Apr-2020	24-Jul-22	17 780	17 780	138	-
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 24 July 2022, a total of 17 780 confirmed COVID-19 cases were reported in the country including 138 deaths and 16 536 recovered cases.									
South Sudan	Hepatitis E	Ungraded	03-Jan-18	01-Jan-19	12-Jun-22	2 751	104	24	-
The current outbreak in the Bentiu IDP camp is ongoing. As of 12 June 2022, a total of 2 751 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-21	01-Jan-22	22-May-22	1 117 138	1 117 138	232	-
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 county of Fangak.									
South Sudan	Measles	Ungraded	23-Feb-22	01-Jan-22	12-Jun-22	535	68	2	0.4%
A measles outbreak was declared by health authorities of South Sudan on 23 February 2022. As of 12 June 2022, eight counties (of 79 counties nationally) have confirmed measles outbreaks (Gogrial West, Raja, Torit, Maban, Tambura, Aweil East, Aweil Centre, Aweil West) since the beginning of this year. Overall, 535 suspected measles cases and two deaths (CFR 0.3%) have been reported countrywide. A total of 68 samples tested positive for measles IgM out of 231 tested. The numbers of the suspected and confirmed cases have been revised from 681 and 421 to 535 and 68 respectively									
Tanzania, United Republic of	Cholera	Ungraded	25-Apr-22	14-Apr-2022	23-Jun-22	331	40	6	1.8%
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. However, the last case was reported in Kigoma Region on 22 May 2022. The outbreak is currently confined to Tanganyika District in Katavi Region. From 14 April to 23 June 2022, 331 cumulative cases and six deaths (CFR 1.8%) have been reported from the Districts of Tanganyika in Katavi Region (205 cases, six deaths, CFR 2.9%) and Uvinza in Kigoma Region (126 cases and zero death). In Katavi Region, a total of 78 samples have been tested among which 40 have been confirmed positive for Vibrio cholerae. About 24.7% of cases reported are aged between 21-30 years.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	08-Jul-22	37 510	37 510	841	-
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 8 July 2022, a total of 37 510 confirmed cases have been reported in Tanzania Mainland including 841 deaths.									
Tanzania, United Republic of	Leptospirosis	Ungraded	14-Jul-22	5-Jul-2022	14-Jul-22	13	0	3	23.1%
On 14 July 2022, the Ministry of Health of Tanzania notified WHO of cases of an unknown disease in Ruangwa District, Lindi Region. On 5 and 7 July 2022, two cases of fever, nose bleeding, headache, and general body weakness were reported. As of 12 July, 13 cases with three deaths were reported. No new cases have been reported. The initial human samples tested were negative for Ebola, Marburg, and COVID-19. Further epidemiological and laboratory investigations are ongoing.									
Togo	COVID-19	Grade 3	06-Mar-20	01-Mar-20	17-Jul-22	37 812	37 812	275	-
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 17 July 2022, a total of 37 812 cases including 275 deaths and 37 268 recovered cases have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	13-Jul-22	17	17	0	0.0%
No cVDPV2 positive environmental sample reported this week. One sample was reported last week, which is the first one in the Country. 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-22	01-Jan-22	19-Jun-22	-	-	-	-
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, and Uganda is 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-22	16-May-2022	16-May-22	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	15-Jul-22	168 763	168 763	3 627	-
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 15 July 2022, a total of 168 763 confirmed COVID-19 cases with 3 627 deaths were reported. The cumulative number has been revised.									
Uganda	Yellow fever	Grade 2	03-Mar-21	02-Jan-22	26-Jun-22	200	1	0	0.0%
There have been 200 suspected cases reported of yellow fever during 2 January-26 June 2022 in Uganda with no deaths reported. There have been five total samples that tested 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, confirmed on 18 Feb, is of an unvaccinated female 49-years-old who has since recovered. Rapid Response Team was activated and deployed in March 2022 to conduct additional investigations and support the affected districts.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Zambia	Cholera	Ungraded	13-Apr-22	11-Apr-2022	13-Jun-22	159	11	0	0.0%
A cholera outbreak was declared in Zambia on 3 May 2022. A total of 159 cases have been registered with no deaths as of 13 June 2022. Three districts are affected: Lusaka, Chilanga and Nsama.									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	24-Jul-22	328 550	328 550	4 013	-
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 24 July 2022, a total of 328 550 confirmed COVID-19 cases were reported in the country including 4 013 deaths and 323 022 recovered cases.									
Zambia	Measles	Ungraded		13-Jun-2022	13-Jun-22	340	94	3	0.9%
Mushindano district in North-western province is currently responding to a measles outbreak among some social-cultural and religious groupings with low immunisation coverages. As of 13 June 2022, 340 measles cases and 3 suspected deaths have been reported. WHO is supporting the Ministry of Health investing other cases with similar symptoms.									
Zambia	Undiagnosed disease (movement disorder condition)	Ungraded			05-Jul-22	95		0	0.0%
On 27 May 2022, a 13-year-old pupil presented with signs and symptoms of difficulty in walking, weakness, and painful knees and ankles. The case was immediately isolated at the school sickbay and later referred to Kasama General Hospital for further management. On 4 June 2022, the school recorded four more new cases presenting with similar signs and symptoms from another grade 8 dorm. By 8 June 2022, the school had a cumulative of nine pupils isolated in the sickbay. There has been a total number of 95 suspected conditions of which 15 stool samples were collected to rule out AFP since 10 June 2022, with a cumulative of 95 recoveries as of 5 July 2022.									
Zimbabwe	Anthrax	Ungraded	06-May-19	01-Jan-22	22-May-22	61	0	0	0.0%
The anthrax outbreak is ongoing in Zimbabwe. No new cases were reported in Week 20 of 2022 with the cumulative for the year being 61. 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 three deaths in 2020 and 306 cases and 0 deaths in 2021.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	21-Jul-22	256 217	256 217	5 570	2.1%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 21 July 2022, a total of 256 217 confirmed COVID-19 cases were reported in the country including 5 570 deaths and 250 112 cases that recovered.									
Zimbabwe	Measles	Ungraded	29-Apr-22	19-May-2022	19-Jul-22	421		38	9.0%
A measles outbreak has been ongoing in Mutasa district, Zimbabwe since 10 April 2022. As of 19 July, a total of 421 cases with 38 deaths have been recorded in Mutasa District; 55 (13.0%) are vaccinated against measles, 330 (78.4%) are not vaccinated and 36 (8.6%) have unknown vaccination status.									
Closed Events									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-2019	09-Jul-22	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.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	09-Jul-22	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.									

†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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