WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 7: 6 to 12 February 2023 Data as reported by: 17:00; 12 February 2023

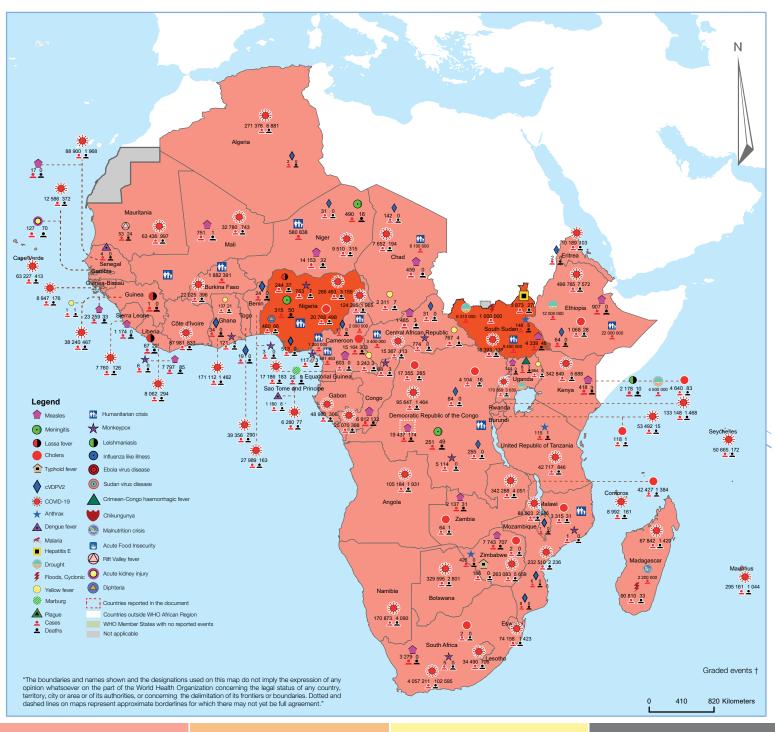


New events

144
Ongoing events

126
Outbreaks

20
Humanitarian crises



Grade 3 events

Protracted 3 events

Grade 2 events

5 Protracted 2 events

Grade 1 events

O Protracted 1 events 38
Ungraded events

Overview

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- All events currently being monitored

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

- Oholera in the WHO African Region
- Measles in the Democratic Republic of the Congo
- OVID-19 across the WHO African Region

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

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

Major issues and challenges include:

Cholera remains endemic in several African countries. Since mid-2021, there has been an increase in global reported cholera outbreaks, with countries mainly in the WHO African Region reporting outbreaks to WHO. While the WHO African region is still battling the COVID-19 pandemic and other outbreaks and emergencies, cholera cases are rising significantly, with broadened geographic spread. In 2022, 14 countries reported cholera cases or outbreaks. Four countries reported higher case numbers and case fatality ratios than previous years (3% and above), well above the acceptable (<1%) and the highest recorded in over a decade. The burden of cholera could get worse unless member states and implementing partners put measures in place to control and prevent outbreaks.

Ongoing events

Cholera

WHO African Region

119 077

2 781 **Deaths**

2.3% CFR

EVENT DESCRIPTION

The WHO African Region has observed an increase in the number of cases of cholera reported since 2021. Consequently, the number of countries reporting outbreaks of cholera has also increased.

The ongoing conflict in the Democratic Republic of Congo's (DRC) province of North Kivu led to an increased influx of internally displaced persons (IDPs) in the last months of 2022 in camps close to Goma, where the lack of access to water and sanitation has fueled the ongoing cholera outbreak. Furthermore, the rainy season is worsening the cholera situation in other eastern provinces, increasing the risk of regional spread. Burundi recently declared a cholera outbreak in the city of Bujumbura along the shores of Lake Tanganyika and near the border with South Kivu.

While the number of reported cases in some countries with widespread outbreaks in 2022 such as Cameroon and Nigeria is declining, the situation in Malawi continued to deteriorate in early 2023. The country is experiencing its worst cholera outbreak in history, with a continued high case fatality ratio (CFR) of 3.3% since early 2022.

In addition, the neighboring country of Mozambique has registered a sharp increase in cases and alerts since mid-December 2022, with cases reported from several provinces bordering Malawi. The geographic spread continues, with Zambia, just notifying WHO of a cholera outbreak on 26 January 2023, confirmed by culture, confirmed by culture in Vubwi district, which borders Malawi. The current rain/cyclone season, which is forecasted to be severe, has the potential to severely impact already affected countries and further spread the disease across southern Africa.

In Kenya, the cholera outbreak first reported in October 2022 is compounded by and exacerbating the ongoing drought and food insecurity. The cholera outbreak has affected 15 counties with active transmission in seven. Of the affected counties, three share long porous borders with Somalia, one with Tanzania, and one with Ethiopia. To the North, Cholera outbreak has been reported in Oromia and regions of Ethiopia.

With the index case was reported in August 2022 the outbreak in Ethiopia is happening in the context of humanitarian crisis affecting four regions of Tigray, Amhara, Afar and Benishangul Gumuz; Drought response affecting five Regions of Oromia, Somali, SNNPR, Afar and Dire Dawa/Harar; as well as other outbreaks. The cholera outbreak is Somali region has been fully controlled following 50 days no new cases.

Cholera outbreaks linked to the ongoing outbreaks in the region have been reported in South Africa and suspected cases in the United Republic of Tanzania in the past two weeks.

As of 13 February 2023, a cumulative total of 119 077 cases of cholera with 2 781 deaths (case fatality ratio 2.3%) has been reported across the WHO African region.

Go to overview

Malawi accounts for 36% of all cumulative cholera cases reported since October 2021, followed by Nigeria (20%), the Democratic Republic of Congo (DRC) (18) %, and Cameroon (13%). The same countries also account for the highest mortality, accounting for 50%, 22%, 11% and 11% of all deaths, respectively.

The average cholera CFR reported regionally since 2021 is about 2.3%, which is above acceptable CFR, with Malawi, Nigeria, and Cameroon, recording CFRs of 2% and above.

FOCUS ON MALAWI

Cholera transmission rates spiked in the aftermath of the 2022 festive season in Malawi, where transmission had spread to new areas, particularly in the capital Lilongwe. Overall, Malawi has reported 42 957 cumulative cases with 1 399 deaths (CFR = 3.3%).

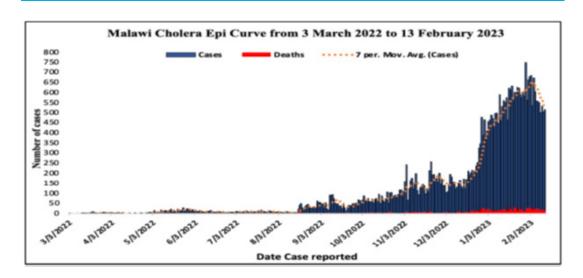
On 13 February 2023, the country recorded 516 new cases and 14 deaths. Fifty five percent (55%) of all new cases during the week were from Lilongwe, Blantyre and Balaka, while 55% of the deaths were from Lilongwe and Balaka. On the overall, Mangochi, Blantyre and Lilongwe districts have reported the highest number of cases.

The highest proportion of cases (61%) 15 953, is among persons aged 10-39 (n=26 088). Men account for (56%) 14 867 of all cases (n=26 409). Between 6 and 12 February 2023, new cases decreased by 15%, with new deaths also decreasing by 32% over the same period.

Most deaths (29%) are occurring among people aged 50 years old and above, and the CFR in this age group is significantly higher at 7.7%. Notably, males are disproportionately affected, accounting for 65% of all deaths. Eighty-one percent (81%) of all deaths have occurred in health facilities

Delay in seeking care, and weak clinical management of cases are likely contributors of the high mortality reported. The country is currently in the rainy season, and with heavy rains and flash flooding ongoing amidst contamination of the environment, there is an elevated risk of increased cholera transmission in the country.

Malawi Epi Curve, March 03 2022 to 13 February 2023



PUBLIC HEALTH ACTIONS IN MALAWI

- Ministry of Health (MoH) with support from WHO and partners is coordinating response activities. The National Incident Management team continues to coordinate technical response to the outbreak.
- The national Presidential task force on cholera is active and continues to coordinate the government's response to the cholera outbreak.
- Mapping of partners and resources has been initiated and is ongoing to support the response.
- Surveillance is being enhanced in facilities and communities, including integrated community-based surveillance. Data management and production of information products are also being strengthened.
- WHO is supporting the MoH to set up laboratory testing capacity for genomic sequencing, capacity building, provision of reagents, and developing Standard Operating Procedures (SOPs). Supplies for case management and laboratory confirmation of cholera are pre-positioned in health facilities and district laboratories.
- Treatment guidelines, SOPs and other job aids have been developed and adapted, and supportive supervision is being conducted in cholera treatment units (CTUs).
- A community case management and referral system is being developed with the aim of reducing CFR, Clinical audits of cholera deaths are ongoing.
- Partners are supporting the government of Malawi to enhance Infection Prevention and Control (IPC)/WASH in facilities and communities, and to develop key messages for the utilization of oral rehydration points (ORPs). Communities across affected districts continue to be sensitized on early care-seeking and good hygiene practices.

OVERALL CHALLENGES

- All the affected countries have reported having inadequate financial and human resources necessary for enhanced surveillance, case management, IPC, risk communication and community engagement (RCCE) and WASH activities.
- Several countries are in the midst of complex humanitarian crises including drought, conflict and floods, with fragile health systems, inadequate access to clean water and sanitation, and have insufficient capacity to respond to the outbreaks. A number of these countries also have divided government authorities, complicating operational challenges. Furthermore, many countries are responding to multiple other disease outbreaks including mpox, wild polio, measles, and the ongoing COVID-19 pandemic. This also strains the overall response capacity to cholera, particularly with the reports of limited resources.
- Many countries have sub-optimal or delayed surveillance due to lack of or limited and poor data, which hinders response. Some of the country and surveillance-specific reasons for the lack of data:
 - 1. Countries with inadequate surveillance systems overall
 - 2. Countries with robust surveillance systems, which only report cholera from sentinel sites or do not include cholera at all
 - 3. Lack of data sharing from subnational to national level
 - 4. Breakdown of surveillance systems during humanitarian crises
 - 5. Insufficient capacity for laboratory confirmation and use of heterogenous case definitions (e.g., cholera versus acute watery diarrhea).

Global supply of cholera kits is depleted, and suppliers are struggling to meet demand. Delays or shortages of medical supplies can lead to preventable and avoidable deaths. The global stockpile of OCV is also currently insufficient to meet all requests for two doses of preventive vaccination.

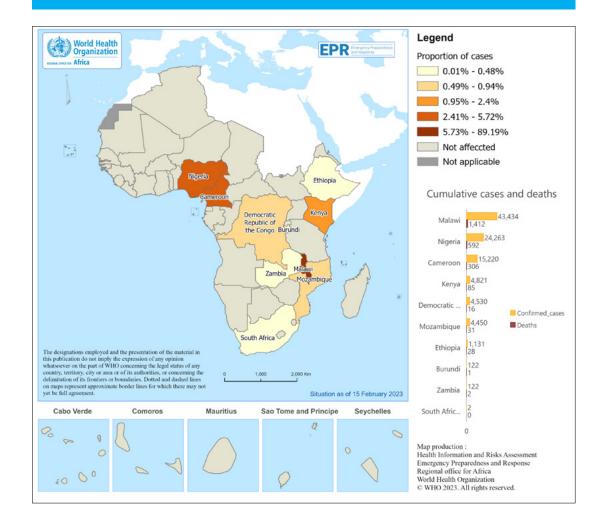
CONCLUSION

Cholera has persisted in Africa partly because of worsening sanitation, poor and unreliable water supplies and worsening socioeconomic conditions. Many countries in the WHO-African region experience protracted humanitarian situations that lead to displacement of vulnerable populations to overcrowded areas

with poor sanitation. The cholera outbreak in the WHO African region is increasing in terms of number of outbreaks, case load and geographical expansion. The number of confirmed cases reported continues to rise with three countries, Malawi, Nigeria and Cameroon contributing to 85% of the total cases, and 93% of all reported deaths. While Nigeria and Cameroon have recently reported fewer cholera cases, the outbreak in Malawi continues to trend upwards with the doubling time shortening to just three weeks.

WHO acknowledges the efforts of all partners supporting cholera preparedness and response activities in different countries.

Distribution of confirmed cases of cholera in the WHO African Region, as of 12 February 2023



Distribution of cases and deaths of cholera by country:

COUNTRY	CUMULATIVE CASES	CUMULATIVE DEATHS	CFR (%)	OUTBREAK START DATE	REPORTING DATE
Malawi	42 957	1 399	3.3	Mar 2022	13 Feb 2023
*DRC	21 885	301	1.4	Jan 2022	**08 Feb 2023
Nigeria	24 263	612	2.5	Jan 2022	05 Feb 2022
Cameroon	15 220	306	2.0	Oct 2021	30 Jan 2023
Kenya	4821	85	1.8	Oct 2022	14 Feb 2023
Mozambique	4 50	31	0.7	Sep 2022	13 Feb 2023
Ethiopia	1131	28	2.5	Aug 2022	10 Feb 2023
Burundi	122	1	0.8	Jan 2023	13 Feb 2023
Zambia	122	2	1.6	Jan 2023	13 Feb 2023
South Africa	2	0	0	Feb 2023	03 Feb 2023
TOTAL	119 077	2 781	2.3		

^{*}Nord Kivu outbreak declared on 14 December 2022

^{**} Only Nord Kivu



15 459 **cases**

152 **Deaths** 1.0% CFR

EVENT DESCRIPTION

The measles outbreak in the Democratic Republic of the Congo continues to evolve with an increasing trend observed in the first weeks of 2023.

Cumulatively, since epidemiological week 1 to week 4, 2023 (week ending 28 January 2023), a total of 15 459 suspected measles cases, including 152 deaths (CFR: 1.0%) were notified from 264 health zones of 26 provinces. This shows a 62% increase in the number of suspected cases compared to the same period in 2022 (5 936 cases and 118 deaths). In addition, 16 health zones have crossed the epidemic threshold in the past four weeks, including three health zones that crossed the epidemic threshold in week 4, 2023.

Of the 264 samples of suspected cases analysed in the National Laboratory of the Institute National Research Biomedical since the beginning of 2023, 151 (57%) were confirmed positive for measles (IgM+). Eighty percent (80%) of the confirmed cases are less than five years old, and 68% have an unknown vaccination status. In addition, 36 cases tested positive for Rubella (IgM+).

Most of the measles suspected cases (81%) (n=12 591) were reported from Lomami province (n=5 055), South Kivu (n= 3 033 cases), Tshopo (n=991) and Sankuru (n=103).

In epidemiological week 4 (ending 28 January 2023), 3 119 suspected measles cases, including 32 deaths (CFR=1.0%), were notified in 264 health zones of the 26 provinces. Half (50%) of the new cases were reported from Sankuru (Ototo health zone, n=89), Maniema province (Punia health zone, n=89), North Kivuovince (Masisi (n=99), Karisimbi (n=109), Mweso (n=136), Oicha (n=203) health zones) and in Lomami province (Mulumba health zone, n=843).

PUBLIC HEALTH ACTIONS

- The National Measles Coordination Committee continues to coordinate the response to the measles outbreak across the country, working with the various sub-committees and supported by WHO and partners.
- Ocordination meetings are held regularly at the national level
- Epidemiological surveillance and laboratory activities are ongoing, including the investigation of suspected measles cases with a collection of samples and throat swabs in affected health zones.
- WHO is distributing laboratory sample collections kits in affected districts.
- Vaccination activities are ongoing in 13 provinces, including the effective introduction of VAR2/VPI2 and reinforcement of the cold chain system at different levels.

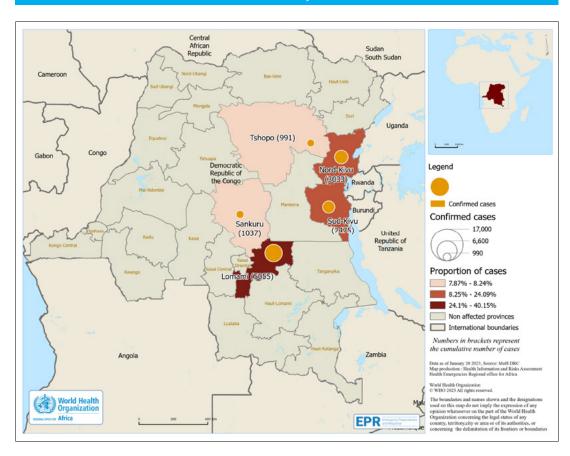
• Measles follow-up campaign preparation for 2022-2023 for children aged of 20 789 882 children aged 6 to 59 months with a budget of 6.2 million are under preparation. Vaccines VAR 2 (flacons de five doses) and VPI 2 are available in the country. Risk communication and community engagement activities are ongoing: Training materials for community health workers to raise parents' awareness on vaccination are available.

SITUATION INTERPRETATION

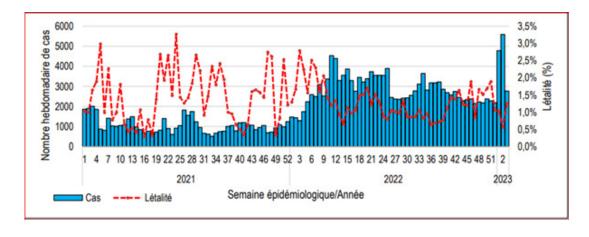
The measles outbreak in the Democratic Republic of Congo continues to evolve, however with an increasing trend. The continuous emergence of cases is likely a result of suboptimal vaccination coverage. To interrupt further outbreak propagation, there is a need to scale up ongoing response activities accordingly, with comprehensive coverage.



Distribution of suspected cases of measles in affected provinces in the Democratic Republic of the Congo, as of 28 January 2023



Distribution of weekly number of suspected cases and deaths of measles in the Democratic Republic of the Congo from epi week 1, 2021, to epi week 4, 2023



EVENT DESCRIPTION

Since the beginning of the COVID-19 pandemic, a total of 8 959 641 confirmed cases including 174 164 related fatalities have been reported in the WHO African region, accounting for an overall case fatality ratio of 1.9%. Ninety-two percent (8 264 434) of the confirmed cases have fully recovered from the disease.

Five countries account for the highest number of cumulative cases: South Africa 4 057 134 (45.3%), Ethiopia 499 738 (5.6%), Kenya 342 849 (3.8%), Zambia 341 690 (3.8%), and Botswana 329 595 (3.7%). The five countries that have reported the highest number of cumulative deaths are South Africa 102 595 (59.0%), Ethiopia 7 572 (4.4%), Algeria 6 881 (4.0%), Kenya 5 688 (3.3%), and Zimbabwe 5 659 (3.3%).

In the last two epidemiological weeks – epi weeks 5 (ending 5 February 2023) and 4 (ending on 29 January 2023) -, there was a 13% decrease in the number of confirmed COVID-19 cases observed with a total of 4 627 cases reported in during epi week 5(average of 763 cases daily), compared to 5 341 cases reported in epi week 4 (average of 661 cases daily). The five countries that accounted for the majority (83%) of confirmed cases reported during epi week 5 were South Africa 1 478(32%), Zambia 1 167 (25%), Zimbabwe 759 (16%), Mauritius 246 (5%), and Namibia 186 (4%).

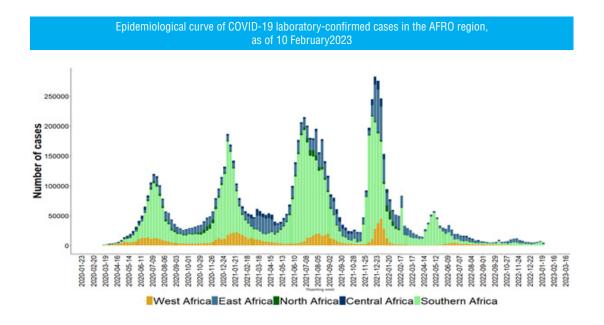
The number of new COVID-19-related deaths in the region has remained low with 5 fatalities reported in epi week 5 by 5 countries (one each) including Botswana, Eswatini, Madagascar, Zambia, and Zimbabwe. Comparing epi weeks 5 (ending 5 February 2023) to 4 (ending 29 January 2023) with 14 deaths reported, there was 64% decline in the number of deaths reported in the region.

Zambia and Zimbabwe remain classified as being in resurgence following the sustained surge in COVID-19 cases and deaths observed in the past five weeks. In Zimbabwe, 759 new cases were reported in epi week 5 with 32 new hospital admissions and no death compared to 718 new cases in epi week 4, with 20 new hospital admissions 6 deaths). There is an improvement in the COVID-19 testing rate in the last two weeks, with 10 208 tests performed in epi week 5 (Test Positivity Rate (TPR) of 7.4%) compared to 8 222 tests performed in epi week 4 (TPR: 8.7%).

Following a steady increase in the number of new COVID-19 cases over the course of at least two consecutive weeks, Namibia and Côte d'Ivoire are also being actively monitored. New hospitalizations, ICU admissions and severe presentation of the disease have all remained low in the region.

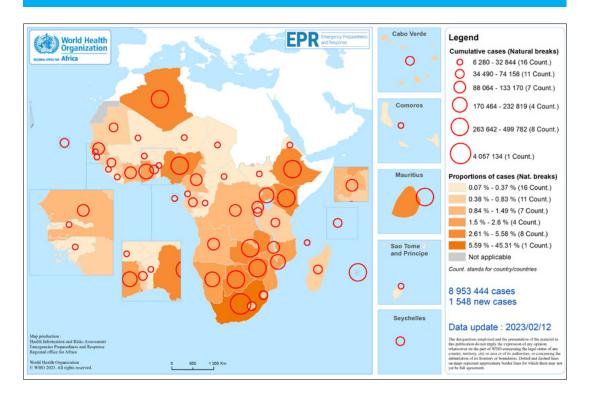
SITUATION INTERPRETATION

In the region, the number of new COVID-19 cases and related deaths recorded in the recent 7 days has decreased compared to the previous 7 days. However, two countries, Zambia and Zimbabwe, remain in resurgence status, while two others, Côte d'Ivoire and Namibia, have shown a sustained increase in new cases for the previous two weeks, necessitating additional monitoring. African countries should continue to monitor the evolution of the pandemic by reinforcing multi-faceted, integrated approaches to COVID-19 surveillance (including representative populations. event-based surveillance. sentinel wastewater surveillance, sero-surveillance, and animal-humanenvironmental surveillance), targeted sequencing to monitor the evolution of variants of concern and interest, and by increasing the vaccination coverage of vulnerable people.





Distribution of cases of COVID-19 in the WHO African Region, as of 12 February 2023







Integrated Disease Surveillance and Response Weekly data submission report

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Health Emergency Information Management & Risk Assessment Programme

Update on Reporting - Epidemiological Week 05: 30 January - 5 February 202

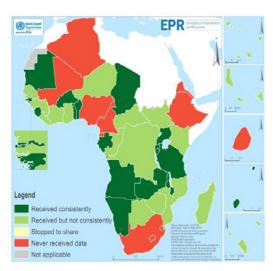
Point du rapportage hebdomadaire - Semaine 05: 30 janvier - 5 fevrier 2023

29 Countries out of 47, reported for week 05

40 % Timeliness for weekly reporting

62 % Completeness for weekly reporting

2022 Summary of Reporting - Frequency of weekly reports received at AFRO



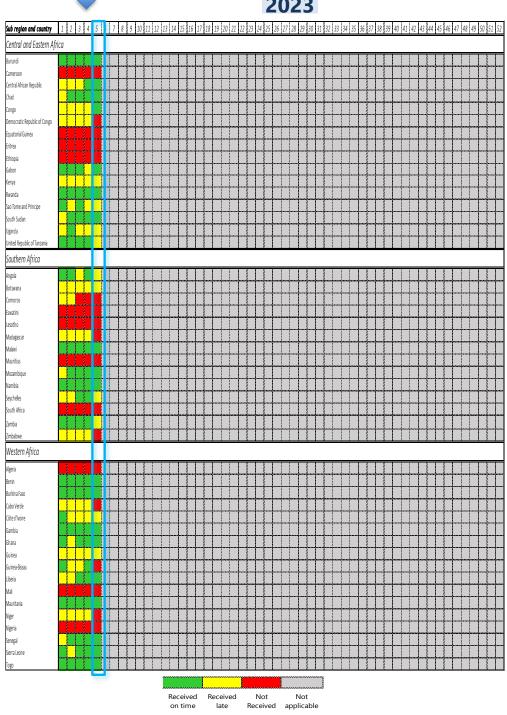
Please, refer to the calendar below to submit your IDSR data on a weekly basis :

Veuillez-vous référer au calendrier ci-dessous pour soumettre vos données de la SIMR sur une base hebdomadaire :

> afrooutbreak@who.int afrgoeprhir@who.int

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Reminder : Upcoming deadlines for weekly data submission **Rappel**: Dates limites prochaines de soumission des données hebdomadaires

	Week 5	Week 6	Week 7	Week 8
Start date	30-Jan-2023	06-Feb2023	13-Feb2023	20-Feb2023
End date	05-Feb-2023	12-Feb2023	19-Feb2023	26-Feb2023
Deadline / Date limite	08-Feb-2023	15-Feb2023	22-Feb2023	01-Mar2023

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									
Equatorial Guinea	Marburg virus disease	Ungraded	7-Feb-2023	8-Feb-2023	8-Feb-2023	25	1	9	36.0%
situation has be following sympt COVID-19 and the laboratory in the	en registered in N oms: fever, weaki he results were al e African region w	sok Nsomo distr ness, bloody vom I negative. All cor ith WHO support deaths and 16 su	ict , province of k niting and diarrho ntacts of the dece On 13 February	Kie-Ntem, involvir ea. A team of exp eased persons we 2022, of the eigh	ng nine deaths in perts was sent to tre isolated and s at samples tested	cument stating that in two neighboring comn the affected villages fo tools, blood and urine at Institut Pasteur refe gue and blood-stained	nunities, in a sho r further investiga samples were col erence laboratory	rt period of time, ation; all villagers lected and sent to in Senegal, one t	with the were tested for the reference urned out ported.
Nigeria	Diphteria	Ungraded	1-Dec-2022	1-Dec-2022	5-Feb-2023	480	164	66	13.8%
laboratory-confi constitute 90% cases were repo so far been repo laboratory-confi	rmed, 410 cases, of the total cases orted in Lagos and orted from Kano, I	clinically compa Kano state has r I 1 case in Osun s	tible). Sixty-six de reported most of state were infecte	eaths (CFR 13.8% the suspected ca d by strains of C	%) have been rep ses (71.7%), and diphtheriae for v	ria. One hundred sixty- orted from 4 of the eigl I majority of the laborat which toxin production ory, of which Kano, Lag	nt states. The cas cory-confirmed ca was confirmed. 1	es among the age uses 78.6% (11/1 The 480 suspecte	e group 1-14 4), whereas 2 d cases have
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-2020	25-Feb-2020	29-Jan-2023	271 376	271 376	6 881	2.5%
From 25 Februa	ry 2020 to 29 Jan	uary 2023, a tota	al of 271 376 con	firmed cases of C	OVID-19 with 6	881 deaths have been r	eported from Alg	eria, with 182 74	3 recovered.
Algeria	Poliomyelitis (cVDPV2)	Grade 2	14-Jul-2022	11-Apr-2022	1-Feb-2023	2	2	-	-
According to Glo remains two.	obal Polio Eradica	tion Initiative, no	case of circulatin	ng vaccine-derive	d poliovirus type	2 (cVDPV2) was repor	ted this week. Th	e number of case	es in 2022
Angola	COVID-19	Grade 3	21-Mar-2020	21-Mar-2020	9-Feb-2023	105 184	105 184	1 931	1.8%
The first COVID- the country with		se was reported i	n Angola on 21 N	larch 2020. As of	9 February 2023	3, a total of 105 184 co	nfirmed COVID-19	9 cases have bee	n reported in
Benin	COVID-19	Grade 3	17-Mar-2020	16-Mar-2020	9-Jan-2023	27 989	27 989	163	0.6%
	Health in Benin ar 3 deaths and 27 t		t confirmed case	of COVID-19 on	16 March 2020.	As of 9 January 2023, a	a total of 27 989 o	cases have been i	reported in the
Benin	Мрох	Grade 3	14-Jun-2022	14-Jun-2022	1-Feb-2023	3	3	0	0.0%
Three suspected person was from on 14 June 2022	n the North of the	/pox were notifie country. Laborat	d to WHO by the tory samples wer	Benin Ministry of e taken and sent	Health on 3 Jun to the Institute P	e 2022. Two of the thre asteur laboratory in Da	e suspected case kar, which confirr	s were from Nige ned the three sar	eria, and one nples positive
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-2019	24-Aug-2019	1-Feb-2023	24	24	0	0.0%
	ulating vaccine-do lo new cases wer			were reported th	is week. There a	re 10 cases reported in	2022. Six cases	were reported in 3	2021 and 2020,
Botswana	COVID-19	Grade 3	30-Mar-2020	30-Mar-2020	7-Feb-2023	329 595	329 595	2 801	0.9%
On 30 March 20 COVID-19 cases	20, the Minister of were reported in	of Health and Wel the country inclu	Iness in Botswan uding 2 801 death	a reported three ones.	confirmed cases	of COVID-19. As of 7 F	ebruary 2023, a t	otal of 329 595 c	onfirmed
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	1-Jan-2019	1-Jan-2019	31-Jan-2023	1 882 391	-	-	-
registered in Bu	rkina Faso as of 3	1 December 202	2. We observed a	a 4% increase in t	he total IDPs in I	le to attacks by armed of December compared to the population in affect	November 2022.		
Burkina Faso	COVID-19	Grade 3	10-Mar-2020	9-Mar-2020	9-Jan-2023	22 025	22 025	396	1.8%
Between 9 Marc	h 2020 and 9 Jan	uary 2023, a tota	of 22 025 confi	rmed cases of CC)VID-19 with 396	deaths and 21 596 rec	overies have bee	n reported from I	Burkina Faso.
Burundi	Cholera	Grade 3	1-Jan-2023	1-Jan-2023	1-Feb-2023	118	66	1	0.8%
including more t		y-confirmed case				suspected cases and o les. The most affected			
Burundi	COVID-19	Grade 3	31-Mar-2020	18-Mar-2020	28-Jan-2023	53 492	53 492	15	0.0%
On 31 March 20		of Health in Burur ths and 53 394 r		irst two confirme	d cases of COVID)-19. As of 28 January	2023, the total nu	ımber of confirm	ed COVID-19

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (North, Adamawa & East)	Protracted 2	31-Dec-2013	27-Jun-2017	16-Jan-2023	481 463			-
	h and East region					en a massive influx of i kers in Cameroon, incl			
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-0ct-2016	27-Jun-2018	16-Jan-2023	2 000 000	-	-	-
between non-Sa	ate armed groups	(NSAGs) and Sta	ite security forces	s (SSF) led to the	killing and displa	on schools and childre cement of civilians. Huses and roads used by h	ımanitarian activi		
Cameroon	Humanitarian crisis (Sahel Region)	Grade 2	31-Dec-2013	27-Jun-2017	16-Jan-2023	1 200 000	-	-	-
the Mayo-Tsana insufficient. In a	ga department, a addition, more tha	ttacks of NSAGs I	ed to the displac and 151 schools	ement of more th	an 2 935 househ	ent concentrates the gr olds (24 192 people) a ectares of land have be	nd for which hum	nanitarian assista	nce remains
Cameroon	Cholera	Grade 3	31-Aug-2021	25-Oct-2021	26-Jan-2023	15 164	1 806	303	2.0%
January 2023, 1	15 164 suspected	cases of cholera	including 1 806 I	aboratory-confire	med cases and 30	orted from Littoral (4 c 03 deaths (CFR 2.0%) f les remain twice less a	nave been reporte	d since October	
Cameroon	COVID-19	Grade 3	6-Mar-2020	6-Mar-2020	22-Jan-2023	124 295	124 295	1 965	1.6%
		announced the cand 122 286 reco		e first COVD-19 (case on 6 March	2020. As of 22 January	2023, a total of	124 295 cases ha	ve been
Cameroon	Measles	Ungraded	2-Apr-2019	1-Jan-2023	29-Jan-2023	603		0	0.0%
disease surveilla	ance and respons		veek 5, 2022 thro	ugh week 4, 202		vith zero death (CFR 0. I confirmed cases have			
Cameroon	Mpox	Grade 3	24-Feb-2022	1-Jan-2022	22-Jan-2023	117	18	3	2.6%
Males are slight		than females (sex				Bertoua district in East years with a median of			
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	23-May-2019	1-Jan-2020	25-Jan-2023	13	13	0	0.0%
		ne-derived poliovi en cases reported		V2) was reported	this week 3, 202	23 (ending 22 January)	. There were thre	e cases reported	in 2022, three
Cameroon	Yellow Fever	Ungraded	7-Feb-2021	4-Jan-2021	22-Jan-2023	3 243	83	3	0.1%
confirmed cases	s among whom th		FR 3.6%). Of not			YF have been reported a een reported between			
Cape Verde	COVID-19	Grade 3	19-Mar-2020	18-Mar-2020	26-Jan-2023	63 227	63 227	413	0.7%
		se was reported i rted in the countr		19 March 2020. <i>I</i>	As of 26 January	2023, a total of 63 227	confirmed COVII	D-19 cases includ	ling 413 deaths
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-2013	11-Dec-2013	2-Feb-2023	3 400 000	-	-	-
an increase of 1	0% compared to		nalysis for the pe	riod October 202	2-August 2023 sl	nillion people will need nowed an expected 16% projections.			
Central African Republic	COVID-19	Grade 3	14-Mar-2020	14-Mar-2020	22-Jan-2023	15 367	15 367	113	0.7%
The Ministry of 15 367 confirm	Health and populed cases, 113 dea	ation announced aths and 15 200 r	the confirmation ecovered were re	of the first COVII ported.	0-19 case in Cent	ral African Republic on	14 March 2020.	As of 22 January	2023, a total o
Central African Republic	Measles	Ungraded	13-Mar-2022	1-Jan-2022	31-Dec-2022	1 485	148	3	0.2%
and Response s outbreaks: Banç	system. Among ca gui 1 confirmed at	ases reported, 14	8 are confirmed i jafo-Kabo at weel	ncluding 99 laboı k 30, Ouango-Gar	ratory-confirmed mbo at week 30, l	s (CFR 0.2%) were rep and 49 by epidemiolog Bimbo at week 10, Kou at week 46.	ical link. A total c	of 10 districts cor	firmed measles

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Мрох	Grade 3	3-Mar-2022	4-Mar-2022	24-Jan-2023	774	20	0	0.0%
probable cases	were reported in	2022 while four o	confirmed cases h	ave already been	reported since tl	rmed cases of monkeyn he beginning of 2023. T Bangui I, Alindao, Bimb	The last confirmed	d case was notifie	ed on 10
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-2019	24-May-2019	25-Jan-2023	31	31	0	0.0%
						s, 2023 (ending 22 Janı in 2019 from several o		ix cases reported	in 2022.
Central African Republic	Yellow Fever	Ungraded	17-Aug-2021	1-Apr-2021	8-Jan-2023	767	23	4	0.5%
As of 8 January	2023, 767 suspe	cted cases of YF	have been report	ed including 6 pr	obable and 23 lat	olic, tested positive for o-confirmed cases (14 RS2, RS3, RS4 and RS	cases in 2022). To	wo new suspecte	d cases were
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-2022	1-Mar-2016	15-Jan-2023	6 100 000	-	-	-
have forced loc 2022, and has o	al communities to	flee their homes urfaces of croplan	. The province ex	perienced heavy	rainfall which has	gion is impacted by att s affected some 229 00 ised extensive damage	0 people between	October and Dec	cember
Chad	COVID-19	Grade 3	19-Mar-2020	19-Mar-2022	5-Feb-2023	7 652	7 652	194	2.5%
The first COVID including 194 d		se was reported i	n Chad on 19 Ma	rch 2020. As of 5	February 2023,	a total of 7 652 confirm	ned COVID-19 cas	ses were reported	in the country
Chad	Measles	Ungraded	24-May-2018	1-Jan-2023	30-Jan-2023	459	38	0	0.0%
		reak including tw 23 confirmed and				suspected measles case	es and 38 confirm	ned were reported	f. In 2022, a
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-2019	9-Sep-2019	25-Jan-2023	142	142	0	0.0%
						23 (ending 25 January) ile nine other cases we			reported in
Chad	Yellow Fever	Ungraded	13-Nov-2021	1-Nov-2021	25-Dec-2022	2 311	30	7	0.3%
cases of yellow	fever have been r	reported. Of these	, 1 910 cases hav	ve been investiga	ted, including 25	thad, positive for yellov probable and 31 lab-co 6 districts in 10/23 pro	onfirmed cases. A	total of 74 death	s have been
Comoros	COVID-19	Grade 3	30-Apr-2020	30-Apr-2020	29-Jan-2023	8 992	8 992	161	1.8%
The first case o were reported in		D-19 was notified	on 30 April 2020) in Comoros. As	of 29 January 20	023, a total of 8 992 co	nfirmed COVID-19	9 cases, includinç	g 161 deaths
Congo	COVID-19	Grade 3	14-Mar-2020	14-Mar-2020	29-Jan-2023	25 070	25 070	388	1.6%
		inced the confirm d cases have beer			9 in Congo on 14	March 2020. As of 29	January 2023, a t	otal of 25 070 ca	ses including
Congo	Measles	Ungraded	14-Mar-2022	1-Jan-2022	31-Dec-2022	6 912	6 717	132	1.9%
	! laboratory), abo					ses were reported in C gou, Makélékélé) exper			
Congo	Mpox	Grade 3	23-May-2022	1-Jan-2022	18-Jan-2023	68	5	3	4.4%
cases, with three the outbreak, w	e deaths among t th five probable a	the probable (CFF	R 4.4%). The susp d cases. The othe	pected cases have r confirmed case	e been reported f	f monkeypox including rom four Departments cted in Ouesso (2) and	and nine Districts	. Impfondo is the	epicentre of
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-2020	11-Mar-2020	22-Jan-2023	87 981	87 981	833	0.9%
Since 11 March	2020, a total of 8	37 981 confirmed	cases of COVID-	19 have been rep	orted from Côte	d'Ivoire including 833 d	deaths, and a tota	l of 87 136 recov	eries.
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-2016	17-Apr-2017	30-Jan-2023	-	-	-	-
have been inter	nally displaced to		ies of Lubero, Ma	asisi, Rutshuru, N	lyiragongo and th	cement (IDPs) in the D ne city of Goma since N			

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-2015	3-Jan-2022	30-Dec-2022	17 355	1 356	285	1.6%
across 17 provi	nces of the Demo	cratic Republic o	of the Congo. Sus	pected cases hav	e mostly been rep	cluding 285 deaths (CF ported from South Kivu ew cases in Nyiragong	(5 707), Haut-L	omami (2 869), Ta	anganyika (3
Democratic Republic of the Congo	Cholera	Grade 3	14-Dec-2022	1-Jan-2023	24-Jan-2023	4 104		16	0.4%
zones (HZs). Be (CFR 0.4%) hav	tween outbreak in e been reported,	nception on week including 3 798 o	47, 2022 (21-27	November) and the (CFR 0.4%) in	27 January 2023, Nyiragongo HZ,	ollowing a massive infl a cumulative of 4 104 and 306 cases and zer 3.	suspected cases	of cholera includ	ing 16 deaths
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-2020	10-Mar-2020	5-Feb-2023	95 647	95 645	1 464	1.5%
	of the COVID-19 o 2 people have rec		d on 10 March 20	20, a total of 95 (645 confirmed ca	ses and two probable o	case, including 1	464 deaths have	been reported.
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-2021	1-Jan-2023	30-Jan-2023	19 437	151	174	0.9%
rubella from 26		ses have been rep				74 related deaths (CFR ere were 146 438 suspe			
Democratic Republic of the Congo	Mpox	Grade 3	30-Mar-2019	1-Jan-2022	25-Jan-2023	5 114	370	0	0.0%
	– 25 January 202 ases. All confirme			Congo (DRC) re	ported more than	5 114 suspected case	s including 370 d	confirmed with no	death among
Democratic Republic of the Congo	Poliomyelitis (cVDPV1)	Grade 2	27-Aug-2022	27-Aug-2022	1-Feb-2023	84	84	0	0.0%
			e (GPEI), no case PV1 and cVDPV2 i			ovirus type 1 (cVDPV1) was reported th	is week. There ar	e 84 cases
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-2021	1-Jan-2022	1-Feb-2023	255	255	0	0.0%
			e (GPEI), no case PV1 and cVDPV2			ovirus type 2 (cVDPV2)) was reported th	is week. There ar	e 255 cases
Democratic Republic of the Congo	Suspected meningitis	Ungraded	31-May-2022	2-Jun-2022	23-Jan-2023	251		49	19.5%
						Democratic Republic o reas are the hotspots: I			23 January
Equatorial Guinea	COVID-19	Grade 3	14-Mar-2020	14-Mar-2020	2-Jan-2023	17 186	17 186	183	1.1%
	Health and Welfa 3 deaths and 16 8		e first confirmed (COVID-19 case or	14 March 2020.	As of 2 January 2023,	a total of 17 186	cases have been	reported in the
Eritrea	COVID-19	Grade 3	21-Mar-2020	21-Mar-2020	30-0ct-2022	10 189	10 189	103	1.0%
			n Eritrea on 21 M have recovered fi		30 October 2022	, a total of 10 189 conf	irmed COVID-19	cases with 103 d	eaths were
Eritrea	Poliomyelitis (cVDPV2)	Grade 2	2-Jun-2022	7-Jun-2022	25-Jan-2023	2	2	0	0.0%
						: (ending 25 January). T opian National Polio la		been one case rep	orted in 2022
Eswatini	COVID-19	Grade 3	13-Mar-2020	13-Mar-2020	12-Feb-2023	74 158	74 158	1 423	1.9%
The first case of associated deat		onfirmed in the k	kingdom of Eswat	ini on 16 March 2	2020. As of 12 Fe	bruary 2023, a total of	74 158 cases ha	ve been reported	with 1 423

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-2022	18-Jan-2023	12 000 000	-	-	-
emergency-leve	els of humanitaria		able populations a	across the region	. At present, near	rage rainy season in th rly 12 million people ar eas.			
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-2020	4-Nov-2020	18-Jan-2023	22 000 000	-	-	-
	nt round (Round					g 68.5% of the total pla be uprooted from thei			
Ethiopia	Cholera	Grade 3	17-Sep-2022	17-Sep-2022	2-Feb-2023	1 068	39	28	2.6%
9 September. A 1.5%) from Ord	s of 2 February 2	023, a total of 1 0 99 cases and 15	68 suspected cas	es of cholera wit	h 28 deaths (CFR	from Bekay Kebele, Or 2.6%) have been repo 6 kebeles (villages) hav	rted, including 8	69 cases and 13 o	deaths (CFR
Ethiopia	COVID-19	Grade 3	13-Mar-2020	13-Mar-2020	12-Feb-2023	499 765	499 765	7 572	1.5%
Since the confir 963 recoveries.	mation of the fire	st case on 21 Mar	ch 2020, Ethiopia	has confirmed a	total of 499 765	cases of COVID-19 as	of 2 February 202	23, with 7 572 de	aths and 486
Ethiopia	Measles	Ungraded	13-Apr-2017	1-Jan-2023	12-Feb-2023	907	466	0	0.0%
lab-confirmed,		nked cases and 2				e period last year. A tot 134 suspected measles			
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-2019	20-May-2019	25-Jan-2023	64	64	0	0.0%
		erived poliovirus t , 38 in 2020 and 1		vas reported this	week 3 of 2023	(ending 25 January). Ti	nere was one cas	e reported in 202	2. In addition,
Gabon	COVID-19	Grade 3	12-Mar-2020	12-Mar-2020	16-Jan-2023	48 980	48 980	306	0.6%
		of Health announ we been reported		ion of the first CO	OVID-19 case in t	he country. As of 2 Jar	uary 2023, a tota	al of 48 980 cases	including 306
Gambia	Acute kidney injury	Grade 2	1-Aug-2022	27-Jun-2022	23-Dec-2022	127	82	70	55.1%
country. The high inability to uring to contain dieth	ghest number of ate, fever, vomitir ylene glycol and	cases was among ng, and diarrhoea. ethylene glycol. A	children under tv Samples of medi s of 23 December	vo years of age. T cines taken by th r 2022, 127 cases	The index case was ese children were s were reported in	oorted an unusual even as traced to 4 July 202 e sent for toxicology te ncluding 82 confirmed, October 2022. Respon	Patients prese sting, and four of six probable and	nted with sympto the medicines w I 39 sespected ca	ms such as ere found
Gambia	COVID-19	Grade 3	17-Mar-2020	17-Mar-2020	4-Nov-2022	12 586	12 586	372	3.0%
		ise was reported i ave been reported		17 March 2020.	As of 4 Novembe	er 2022, a total of 12 58	6 confirmed CO\	/ID-19 cases incl	uding 372
Ghana	COVID-19	Grade 3	12-Mar-2020	12-Mar-2020	23-Jan-2023	171 112	171 112	1 462	0.9%
As of 23 Januar	ry 2023, a total of	f 171 112 confirm	ed COVID-19 cas	es have been rep	orted in Ghana. T	here have been 1 462	deaths and 169 6	40 recoveries rep	orted.
Ghana	Мрох	Grade 3	8-Jun-2022	24-May-2022	25-Jan-2023	121	121	4	3.3%
there have beer	121 confirmed a		ported from 13 of	ver 16 administra	ative regions, with	eypox have been detect h the Greater Accra reg			
Ghana	Poliomyelitis (cVDPV2)	Grade 2	23-Aug-2019	23-Jul-2019	25-Jan-2023	34	34	-	-
	obal Polio Eradic	ation Initiative, no addition, 12 cases				2 (cVDPV2) was repor 019.	ted this week. Th	ere are three cas	es in 2022. No
Ghana	Yellow Fever	Ungraded	25-0ct-2021	25-0ct-2021	29-Nov-2022	137	62	21	15.3%
As of 29 Novem	nber 2022, a total		nd 62 confirmed o	cases of yellow fe		rs in the Savannah regi d from 13 regions in G			
Guinea	COVID-19	Grade 3	13-Mar-2020	13-Mar-2020	2-Jan-2023	38 240	38 240	467	1.2%
		announced the fi , have been repor			n 13 March 2020.	As of 2 January 2023,	a total of 38 240	cases, including	37 303

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Guinea	Lassa Fever	Ungraded	10-Dec-2022	8-Dec-2022	4-Jan-2023	1	1	0	0.0%
contacts were i	dentified and are I	peing followed. S	ince the notificati	on of the first cas	se on 8 December	dou. It is a female pati r, no new case of confi the end of this outbrea	rmed Lassa fever		
Guinea	Measles	Ungraded	9-May-2018	1-Jan-2022	31-Dec-2022	23 259	432	33	0.1%
			g 31 December), surveillance and		suspected measl	es cases with 432 con	firmed and 33 dea	ath (CFR 0.1%) h	ave been
Guinea	Yellow Fever	Ungraded	6-Jan-2023	4-Jan-2023	4-Jan-2023	1	1	1	100.0%
whose yellow fe	ver vaccination s	tatus is unknown		test was conducte	ed at the Dakar In	ranah health region, in stitute Pasteur laborat			
Guinea-Bissau	COVID-19	Grade 3	25-Mar-2020	25-Mar-2020	18-Dec-2022	8 947	8 947	176	2.0%
			ea Bissau reporte overies and 176 d		-19 confirmed ca	se in the country. As o	f 18 December 20	22, the country h	as reported 8
Kenya	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-2022	12-Jan-2023	4 500 000	-	-	-
and Marsabit ar	e in Alarm drougl	nt phase. Thirteer	n (13) counties in	cluding Embu, Ga	arissa, Kajiado, K	') counties including Is itui, Makueni, Meru, N o 2.1 million in Septerr	arok, Nyeri, Thara	ka Nithi, Taita Tav	eta, Tana River,
Kenya	Cholera	Grade 3	19-0ct-2022	16-0ct-2022	5-Feb-2023	4 640	163	83	1.8%
						chakos, Garissa, Meru nave been reported. In			
Kenya	COVID-19	Grade 3	13-Mar-2020	13-Mar-2020	5-Feb-2023	342 849	342 849	5 688	1.7%
			ced the confirmat we been reported		OVID-19 case in	the country. As of 5 Fe	bruary 2023, 342	849 confirmed C	OVID-19 cases
Kenya	Leishmaniasis (visceral)	Ungraded	31-Mar-2019	3-Jan-2020	5-Feb-2023	2 178	1 996	10	0.5%
						eaths (CFR 0.5%) , ha is active in West Poko			
Kenya	Measles	Ungraded	29-Jun-2022	26-Jun-2022	5-Feb-2023	418	105	3	0.7%
			s : Marsabit, Wajir were reported fro			era and Kitui .A total of County.	418 cases with 1	05 confirmed and	three deaths
Lesotho	COVID-19	Grade 3	13-May-2020	13-May-2020	12-Sep-2022	34 490	34 490	706	2.1%
Since the first of 706 deaths.	onfirmed COVID-	19 case was repo	orted in Lesotho o	on 13 May 2020,	until 12 Septemb	er 2023, a total of 34 4	90 cases of COVI	D-19 have been r	eported, and
Liberia	COVID-19	Grade 3	16-Mar-2020	16-Mar-2020	24-Jan-2023	8 062	8 062	294	3.6%
From 16 March	:	ary 2023, Liberia	has recorded a to	otal of 8 062 case		eaths and 7 766 recov	eries have been re		
Liberia	Lassa Fever	Ungraded	3-Mar-2022	6-Jan-2022	1-Dec-2022	67	67	22	32.8%
in Liberia. A tot	al of 108 contacts	are under follow	up.		·	h 22 deaths (CFR 32%	,	-	
Liberia	Measles	Ungraded	3-Feb-2022	13-Dec-2021	30-Nov-2022	7 797	7 797	85	1.1%
1%) were report		f 93 health distri	cts in 15 counties			suspected cases, inclu cases, 6.1% (470) wer			
Liberia	Мрох	Grade 3	21-Jul-2022	23-Jul-2022	18-Jan-2023	6	6	0	0.0%
and works in El	okayville Une, La	Côte D'Ivoire bu		nt at the Pleabo H	lealth centre in M	e Laboratory in the cou aryland County, Liberia ere reported.			
Madagascar	Cyclonic system CHENESO	Grade 2	25-Jan-2023	19-Jan-2023	31-Jan-2023	90 810		33	
and gusts up to have died and 2 115 shelter site	120 km. Last rep 0 people were sti s. Nearly 26 403 l	orts provided by Il missing. A tota nouses have beer	the National Bure I of 90 870 people	eau for the Manage e (8 456 househo le 1 073 others h	gement of risks a olds) have so far t ave been totally o	laha district, SAVA reg nd catastrophes releas been affected including lestroyed. Administrat d 53 districts.	ed on 31 January 34 114 displaced	2023 indicated the people currently	nat 33 people settled in

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				Start of	End of				
Country	Event	Grade	Date notified to WCO	reporting period	reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	Malnutrition crisis	Protracted 2	1-Jul-2021	1-Jan-2021	3-Feb-2023	2 200 000	-	-	-
						PC 3—levels of acute f 250,000 people likely t			
Madagascar	COVID-19	Grade 3	20-Mar-2020	20-Mar-2020	5-Feb-2023	67 842	67 842	1 420	2.2%
	nistry of Health a ve been reported		firmation of the f	irst COVID-19 ca	se on 20 March 2	2020. As of 5 February	2023, a total of 6	7 842 confirmed	cases including
Malawi	Cholera	Grade 3	3-Mar-2022	3-Mar-2022	12-Feb-2023	42 427	42 427	1 384	3.3%
						022 in Machinga distric y, with Case Fatality Ra		ary 2023, the cum	nulative
Malawi	COVID-19	Grade 3	2-Apr-2020	2-Apr-2020	12-Feb-2023	88 543	88 543	2 686	3.0%
On 2 April 2020 confirmed cases	, the president of s with 2 686 deat	Malawi announc hs.	ed the first confir	med cases of CO	VID-19 in the cou	untry. As of 12 February	y 2023, the count	ry has a total of 8	8 543
Malawi	Poliomyelitis (WPV1)	Grade 2	31-Jan-2022	1-Feb-2022	8-Feb-2023	1	1	0	0.0%
						ysis on 19 November 2 V1 outbreak affecting t		ses have been rep	oorted. Malawi
Mali	Humanitarian crisis (Sahel region)	Grade 2		11-Sep-2017	20-Dec-2022	-	-	-	-
movements. Ov	erall, the number	recently marked b of internally disp in the Mopti region	laced persons (ID	more than 1 000 PS) increased fro	hectares in the c om 422 660 in A	ommune of Alafia, Tim ugust 2022 to 440 436	buktu region, which in September 202	ch caused popula 22, representing a	tion a 4% increase.
Mali	COVID-19	Grade 3	25-Mar-2020	25-Mar-2020	29-Jan-2023	32 780	32 780	743	2.3%
		of Health of Mali country including				country. As of 29 Janu	ary 2023, a total o	of 32 780 confirm	ned COVID-19
Mali	Measles	Ungraded	20-Feb-2018	1-Jan-2022	11-Dec-2022	751	751	1	0.1%
As of 11 Decem	ber 2022, a total	of 1 256 samples	from suspected	cases of measles	were tested in N	Mali. Of these, 751 case	s have been confi	rmed with one de	eath.
Mauritania	COVID-19	Grade 3	13-Mar-2020	13-Mar-2020	22-Jan-2023	63 436	63 436	997	1.7%
		nnounced its first ed in the country.	confirmed COVID	-19 case on 13 N	/larch 2020. As o	f 22 January 2023, a to	otal of 63 436 case	es including 997	deaths and 62
Mauritania	Rift Valley fever	Grade 1	31-Aug-2022	26-Aug-2022	25-Dec-2022	53	53	24	45.3%
the Moughataa	(district) of Tinta	ne in Hodh El Gha	ırbi region. He pro	esented to a healt	h facility with hig	n 29 August 2022. The gh fever and headache. P, a total of 53 cases ha	On 26 August, he	developed a hae	morrhagic
Mauritius	COVID-19	Grade 3	18-Mar-2020	18-Mar-2020	9-Feb-2023	295 161	295 161	1 044	0.4%
The Republic of including 1 044	Mauritius annou deaths have bee	nced the first thre n reported in the o	ee positive cases country.	of COVID-19 on 1	8 March 2020. <i>A</i>	As of 9 February 2023,	a total of 295 161	confirmed COVII	D-19 cases
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-2020	1-Jan-2020	6-Feb-2023	-	-	-	-
their livelihoods	. The UN Human		ervice (UNHAS) tr	ansported 1,206		do and Nampula, currer d 5.76 metric tons of ca			
Mozambique	Cholera	Grade 3	14-Sep-2022	16-Nov-2022	3-Feb-2023	3 315	68	31	0.9%
						eptember 2022 to 3 Fe Muembe and Mandimb		al of 3 315 cases	and 31 deaths
Mozambique	COVID-19	Grade 3	22-Mar-2020	22-Mar-2020	22-Jan-2023	232 510	232 510	2 236	1.0%
	-19 confirmed ca uding 2 236 deat		n Mozambique or	22 March 2020.	As of 22 Januar	y 2023, a total of 232 5	510 confirmed CO	VID-19 cases we	re reported in
Mozambique	Mpox	Grade 3	6-0ct-2022	7-0ct-2022	18-Dec-2022	1	1	0	0.0%
The case was direported.	agnosed Wednes	sday, 12 October 2	2022 in Maputo C	ity in a man, Hea	lth minister Armi	ndo Tiago said. As of 4	January 2023, no	o additonal case l	nas been
Mozambique	Poliomyelitis (cVDPV2)	Grade 2	7-Dec-2018	1-Jan-2021	8-Feb-2023	6	6	0	0.0%
		adication Initiative ses reported in 20		lating vaccine-de	rived poliovirus t	type 2 (cVDPV2) was re	eported this week.	The number of o	cases in 2022

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mozambique	Poliomyelitis (WPV1)	Grade 2	17-May-2022	18-May-2022	8-Feb-2023	8	8	0	0.0%
No wild poliovir	us type 1 (WPV1) case was report	ed this week. The	ere are eight case	s reported in 202	2. Intensified surveillar	nce efforts contin	ue across the cou	ıntry.
Namibia	COVID-19	Grade 3	14-Mar-2020	14-Mar-2020	29-Jan-2023	170 873	170 873	4 090	2.4%
The first case of	f COVID-19 was c	detected in Namib	ia on the 14 Mar	ch 2020. As of 29	January 2023, a	total of 170 873 confi	rmed cases with 4	4 090 deaths have	e been reported.
Niger	Humanitarian crisis (Sahel region)	Grade 2	1-Feb-2015	1-Feb-2015	16-Dec-2022	580 838	-	-	-
						, and Tillabéri regions. asylum seekers and otl			
Niger	COVID-19	Grade 3	19-Mar-2020	19-Mar-2020	15-Jan-2023	9 510	9 510	315	3.3%
From 19 March the country.	2020 to 22 Janua	ary 2023, a total o	of 9 510 cases wi	th 315 deaths ha	ve been reported	across the country. A t	otal of 9 007 reco	overies have beer	reported from
Niger	Measles	Ungraded	5-Apr-2022	1-Jan-2022	14-Jan-2023	14 153	722	32	0.2%
least one suspe	cted case of mea		2023, 26 cases a	and zero deaths v	vere notified in fiv) have been reported. 9 e regions, namely Dos			
Niger	Meningitis	Ungraded	7-Dec-2022	31-0ct-2022	15-Jan-2023	490	111	16	3.3%
January 2023, Z districts (HD): [Zinder has reporte Dungass (331 cas	ed 490 cases of m	neningitis includir uré (1 case, 0 de	ng 111 laboratory aths), Magaria (2	confirmed cases 8 cases, 4 deaths	vith Neisseria meningit and 16 deaths (CFR 3), Matamèye (83 cases	.3%). These case	s were reported t	from six health
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-2020	1-Jan-2021	1-Feb-2023	31	31	0	0.0%
No new cases w	ere reported duri	ing this week. The	ere are 13 cases i	reported in 2022.	There were 18 ca	ses reported in 2021.			
Nigeria	Humanitarian crisis (Sahel region)	Grade 2	10-Oct-2016	10-Oct-2016	13-Jan-2023	-	-	-	-
internally displa farmers and her	ced, while one m	illion live in inacc ed in alarming foo	essible areas. Hu	manitarian crises	caused by protra	ing 5.7 million children acted armed conflict, a emics and childhood i	rmed violence, ar	nd community cla	shes between
Nigeria	Cholera	Grade 3		1-Jan-2022	27-Nov-2022	20 768		498	2.4%
Areas (LGAs), ii	n 31 states, mainl (77%) deaths with	ly in northwest ar	nd northeast of th	e country. Three	states, namely Bo	.98 deaths (CFR 2.4%) orno, Taraba and Yobe, ost affected age group	have reported a	combined total of	15,495 (75%)
Nigeria	COVID-19	Grade 3	27-Feb-2020	27-Feb-2020	6-Jan-2023	266 463	266 463	3 155	1.2%
The first case of deaths have been		irst detected in N	igeria on 27 Febr	uary 2020. As of	6 January 2023, a	a total of 266 463 conf	irmed cases with	259 850 recover	ed and 3 155
Nigeria	Lassa Fever	Grade 1	1-Jan-2021	1-Jan-2023	22-Jan-2023	244	244	37	15.2%
in 16 states and Benue (9). Of th	the Federal Capit ie reported cases	tal Territory (FCT) , five cases and o). The highest nur ne death were an	mber of cases wa nong health work	s reported in Ond ers. The Nigeria C	ling 37 deaths with a c o (90) and Edo (89) st entre for Disease Cont ne ongoing response a	ates, followed by trol and Preventic	Bauchi (13), Tara on has activated the	aba (10), and
Nigeria	Meningitis	Ungraded	1-0ct-2022	1-0ct-2022	31-Jan-2023	315	54	50	15.9%
deaths (CFR: 15	5.9%). In Jigawa s 43 wards. Of the	state, effective 1 (October 2022 to 3	31st January 202	3, 242 suspected	rted 315 suspected me cases (51 lab-confirm erogroup C, and one v	ed) and 47 deaths	s (CFR: 19.4%) w	ere reported in
Nigeria	Мрох	Grade 3	31-Jan-2022	1-Jan-2022	31-Dec-2022	763	763	7	0.9%
From 1 January	to 31 December	2022, Nigeria has	s reported 763 m	onkeypox confirn	ned cases with se	ven deaths.			
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-2018	1-Jan-2018	11-Jan-2023	513	513	-	-
		ation Initiative, no 0 cVDPV2 cases r				2 (cVDPV2) was repoi 18.	rted this week. Th	ere are 43 cVDP\	/2 cases
Rwanda	COVID-19	Grade 3	14-Mar-2020	14-Mar-2020	5-Feb-2023	133 148	133 148	1 468	1.1%
		nnounced the cor ve been reported		first COVD-19 cas	se on 14 March 2	020. As of 5 February	2023, a total of 1	33 148 cases with	n 1 468 deaths

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sao Tome and Principe	COVID-19	Grade 3	7-Apr-2020	6-Apr-2020	5-Feb-2023	6 280	6 280	77	1.2%
		Health of Sao Tom Icluding 77 death:				COVID-19. As of 5 Febi overies.	ruary 2023, a tota	l of 6 280 confir	ned cases of
Sao Tome And Principe	Dengue	Grade 2	11-Apr-2022	15-Apr-2022	22-Jan-2023	1 180	1 180	8	0.7%
been confirmed (14, 1.2%). Dur	via RDT from: Ág ing week 3 , ther	gua Grande (799,	67.3%), Mézôchi registered in the	i (180, 15.5%), L country. Água G	obata (97, 8.3%)	2 January 2023, a tota , Cantagalo (47, 4.1%) e is by far the highest (, Caué (23, 2.0%)	, Lemba (20, 1.6	%), and RAP
Senegal	COVID-19	Grade 3	2-Mar-2020	2-Mar-2020	29-Dec-2022	88 900	88 900	1 968	2.2%
From 2 March 2	020 to 29 Decem	ber 2022, a total	of 88 900 confirr	ned cases of CO\	/ID-19 including	1 968 deaths and 86 91	5 recoveries hav	e been reported i	n Senegal.
Senegal	Dengue	Ungraded	14-Nov-2022	1-Jan-2023	22-Jan-2023	4	4	0	0.0%
including 203 c	onfirmed by PCR	(85.3%) and 35 I	by IgM testing (14	4.7%). They were	e mostly concentr	istrict from week 1 to vated in the first and las (41 cases, 17.2%), Kaf	t quarters of 202	2. Eleven regions	were affected.
Senegal	Measles	Ungraded	4-Jul-2022	1-Jan-2023	22-Jan-2023	17	17	0	0.0%
(10 cases), Kéd	ougou (4 cases),	Louga (1 case), a	and Matam (2 cas	ses). Almost all re	ported cases (16	o deaths were reported; 94.1%) were unvacci	nated against me	asles.	
Seychelles	COVID-19	Grade 3	14-Mar-2020	14-Mar-2020	31-Dec-2022	50 665	50 665	172	0.3%
440 recoveries	and 172 deaths h	ed cases were re ave been reported		les on 14 March	;	cember 2022, a total o	f 50 665 cases ha	ve been confirm	ed, including 50
Sierra Leone	COVID-19	Grade 3	31-Mar-2020	27-Mar-2020	31-Jan-2023	7 760	7 760	126	1.6%
		t of Sierra Leone ry, including 126	deaths and 4 898	recovered cases	S.	ountry. As of 31 Janua	ry 2023, a total o	f 7 760 confirme	
Sierra Leone	Measles	Ungraded	1-Nov-2021	1-Jan-2022	31-Dec-2022	1 174	178	0	0.0%
suspected meas	sles casès, 303 (2		ove five years. In	December 2022	, three districts, r	ases, including 178 La namely Western Area R n all districts.			
South Africa	Cholera	Grade 3	3-Feb-2023	3-Feb-2023	3-Feb-2023	2	2	0	0.0%
attend a funeral	. Resided with rel	South Africa noti atives in Malawi a stigations are ong	and utilised muni	imported cases on cipal water. They	of cholera. Both c travelled back to	ases reported history o South Africa via bus or	of travel to Lilong n 29th January. S	we, Malawi on 15 amples from bot	January to h cases tested
South Africa	COVID-19	Grade 3	5-Mar-2020	5-Mar-2020	12-Feb-2023	4 057 211	4 057 211	102 595	2.5%
Since the start (reported.	of the COVID-19 p	pandemic in Sout	h Africa through	12 February 2023	s, a cumulative to	tal of 4 057 211 confirm	ned cases and 10	2 595 deaths ha	ve been
South Africa	Measles	Ungraded	17-0ct-2022	13-0ct-2022	10-Feb-2023	3 279	484	0	0.0%
		uary, 2023, a tota North West (157				from five provinces wit es).	h declared measl	es outbreaks in L	impopo (167
South Africa	Мрох	Grade 3	23-Jun-2022	23-Jun-2022	18-Jan-2023	5	5	0	0.0%
						oox cases in South Afri en reported since Octo		re reported from	Gauteng (n =
South Sudan	Drought/food insecurity	Grade 3	18-Dec-2020	5-Apr-2021	12-Jan-2023	6 310 000	-	-	-
	f five are estimate					Area (GPAA) in Decemite malnutrition (SAM)			
South Sudan	Floods	Ungraded		7-0ct-2022	15-Jan-2023	1 000 000			
Floodwater leve	ls remained high s. An assessmen	in Bentiu and Rul	bkona towns in U	nity, impeding liv	elihood activities	s South Sudan and in to , exposing people to wa ions in Pibor town, foll	aterborne disease	s and disrupting	the provision
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-2016	15-Aug-2016	29-Dec-2022	9 400 000	-	-	-
as well as cause	ed problems for v		and hygiene cond	itions in formaliz		ars, seasonal floods ha ormal settlements. Rec			

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	Anthrax	Ungraded	25-Apr-2022	13-Mar-2022	25-Dec-2022	148	8	5	3.4%
most affected a	ge group remains	the 5-9 years (3	3 cases; 22.3%),	followed by the ι	ınder five (32 cas	the cumulative to 148 es; 21.6%). Females revo deaths) and Alek So	epresent 54.1% of	f cases (n=80). C	3.4%). The ases have been
South Sudan	COVID-19	Grade 3	5-Apr-2020	5-Apr-2020	30-Jan-2023	18 393	18 393	138	0.8%
			udan reported the and 18 115 reco		ase of COVID-19.	As of 26 December 20	022, a total of 183	393 confirmed Co	OVID-19 cases
South Sudan	Hepatitis E	Ungraded	3-Jan-2018	1-Jan-2019	22-Jan-2023	3 873	104	27	0.7%
		iu IDP camp is or ely 54% of cases		anuary 2023, a to	otal of 3 873 case	s of hepatitis E includi	ng 27 deaths (CFF	R: 0.7%) have be	en reported
South Sudan	Measles	Ungraded	23-Feb-2022	1-Jan-2022	1-Feb-2023	4 339	388	46	1.1%
						es, including 388 lab-co 3.3% case are less tha			
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-2020	16-Mar-2020	4-Feb-2023	42 717	42 717	846	2.0%
						Tanzania reported the and including 846 deat		e of COVID-19 o	n 16 March
Togo	COVID-19	Grade 3	6-Mar-2020	1-Mar-2020	4-Feb-2023	39 356	39 356	290	0.7%
			ic Hygiene of Tog , have been repor			ts first case of COVID-	19. As of 4 Februa	ıry 2023, a total d	of 39 356 cases,
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-2019	13-Sep-2019	1-Feb-2023	19	19	0	0.0%
			es of circulating v PV2 cases report			cVDPV2) reported in 2	022. No cases we	re reported in 20	21. There were
Uganda	Drought/food insecurity	Grade 3	17-Feb-2022	1-Jan-2022	6-Dec-2022	-	-	-	-
non-food inflati	on are to drive ac	ute food insecuri	ty in Uganda. In K	aramoja, signific	antly below-avera	022 to May 2023, belo age crop production (e: uce income-earning.			
Uganda	COVID-19	Grade 3	21-Mar-2020	21-Mar-2020	4-Feb-2023	170 369	170 369	3 630	2.1%
The first COVID reported.	-19 confirmed ca	se was reported i	n Uganda on 21 l	March 2020. As o	of 4 February 2023	3, a total of 170 369 co	onfirmed COVID-1	9 cases with 3 60	30 deaths were
Uganda	Crimean- Congo haemorrhagic fever (CCHF)	Ungraded	23-0ct-2022	12-Jul-2022	17-Jan-2023	8	8	3	37.5%
						ave been confirmed in ase was registered on			a (2), Amuru
Uganda	Measles	Ungraded	8-Dec-2022	2-Feb-2023	1-Feb-2023	144	12	0	0.0%
			Region of Ugand onset of the out		ber 2022. As of 1	February 2023, a cum		4 suspect cases,	12 confirmed
Uganda	Yellow Fever	Ungraded	7-Mar-2022	2-Jan-2022	25-Jan-2023	984	2	0	0.0%
as laboratory-co	onfirmed, includir		district and anoth			fever (YF), of which 28 re currently six cases u			
Zambia	Cholera	Grade 3	24-Jan-2023	20-Jan-2023	5-Feb-2023	64	19	1	1.6%
a 30-year-old fe	male, presented t	to Chikoma Zonal		tre with similar s	igns and symptor	Acute Watery Diarrhe ms to the index case. C			
Zambia	COVID-19	Grade 3	18-Mar-2020	18-Mar-2020	5-Feb-2023	342 288	342 288	4 051	1.2%
The first COVID		!	!		1	3, a total of 342 288 co			
Zambia	Measles	Ungraded	13-Jun-2022	13-Jun-2022	5-Feb-2023	2 137	557	31	1.5%
						everal districts. Cumul ing other cases with si		ces have recorde	d 2 137
Zimbabwe	Anthrax	Ungraded	20-Jan-2020	1-Jan-2022	24-Jan-2023	426	0	0	0.0%
			January 2023, 32 cases and 0 death		been reported fro	om Midland province (3	30) and Masvingo	province (2). As	of 24 January

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Zimbabwe	COVID-19	Grade 3	20-Mar-2020	20-Mar-2020	4-Feb-2023	263 083	263 083	5 659	2.2%
The first COVID 10 confirmed case was reported in 7 imbehye on 20 March 2020. As of 4 Entrusty 2022, a total of 262,022 confirmed COVID 10 confirm								10	conceted in the

The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 4 February 2023, a total of 263 083 confirmed COVID-19 cases were reported in the country including 5 659 deaths.

Zimbabwe Measles Ungraded 29-Apr-2022 19-May-2022 31-Dec-2022 7 743 355 707	Measles Ungrade	nnanwe : Meacle	/imnanwe :	imnanwe : i/leaclec : III			31-1166-20122	/ /43		/11/	9 / 1/2
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A measles outbreak has been ongoing in Zimbabwe since 10 April 2022. As of 31 December 2022, A cumulative total of 7 743 suspect cases, 355 confirmed cases and 707 Deaths have been reported since the onset of the outbreak.

17-0ct-2022

17-0ct-2022

The Harare capital city of Zimbabwe is experiencing a typhoid fever outbreak since October 2022. As of 27 January 2022, a total of 186 cases with 17 confirmed have been reported. The age group of 1 – 4 years accounts for 16% of the total cases. Males account for 47% of all typhoid cases and females contribute 45% and 8% of the cases have a stated goods.

27-Jan-2023

186

17

0.0%

Closed Events								
Kenya	Anthrax Suspected	Ungraded	15-Jul-2022	30-Jun-2022	1-Jan-2023	204	-	-

Suspected anthrax outbreak is still ongoing in Kenya, with cases reported from different counties. During week 52 of 2022 (ending 1 January 2023), one case was reported from Mwimbi sub county No deaths were reported in the week. The total suspected cases from week 1 through week 52, 2022 are 204.

†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.

Zimbabwe

Typhoid fever

Ungraded

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Data sources

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

