WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES
Week 15: 3-9 April 2023
Data as reported by: 17:00; 9 April 2023

1 New event
156 Ongoing events
134 Outbreaks
23 Humanitarian crises

Legend
- Measles
- Meningitis
- Polio
- Typhoid fever
- COVID-19
- Anthrax
- Dengue fever
- Malaria
- Hepatitis E
- Drought
- Chikungunya
- Marburg
- Plague
- COVID-19
- Cholera
- Leishmaniasis
- Monkeypox
- Diphtheria
- Acute Food Insecurity
- Measles
- AFRAREGION
- Influenza like illness
- Typhoid fever
- Rift Valley fever
- Diphteria
- Acute Food Insecurity
- Countries reported in the document
- Countries outside WHO African Region
- WHO Member States with no reported events
- Not applicable

"The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement."
This Weekly Bulletin focuses on public health emergencies occurring in the WHO African region. This week’s articles cover:

- Marburg virus disease in Tanzania
- Meningitis in Niger
- COVID-19 in 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:**

- Since the initial report of Marburg virus disease (MVD) cases in Tanzania on 16 March 2023, no further cases have been confirmed. Despite sensitization efforts, the community still struggles with misconceptions of the disease. Mental health and psychosocial support experts have been deployed to address these challenges alongside supporting the needs of individuals currently quarantined as contacts. The first recovered case was discharged from treatment centre on 4 April 2023. It is essential to sensitize communities ahead of integration of MVD survivors.

- The meningitis outbreak that began in Dungass District of Zinder Region of Niger in November 2022 has spread to other districts within the region during 2023. Surveillance areas from two new health districts have crossed the epidemic threshold. Additional doses of the vaccine are needed for the response in the newly affected areas, which were not covered by the reactive vaccination campaign conducted earlier this year. Additional funding is also needed to support field activities.
Ongoing events

United Republic of Tanzania

Marburg Virus Disease

EVENT DESCRIPTION

As of 8 April 2023, the United Republic of Tanzania has reported eight confirmed cases of Marburg virus disease (MVD) including five deaths yielding a 62.5% case fatality rate (CFR). Out of the eight total cases, two were healthcare workers of which one died. The other healthcare worker affected is still undergoing treatment. One of the three surviving cases has been discharged from the treatment centre following full recovery.

All cases were reported from the Bukoba Rural district in Kagera region in the northwest of Tanzania mainland.

The first case reportedly travelled from Goziba island in Lake Victoria and developed symptoms after returning to their village in Bukoba Rural district. The first case and four other members of the family died. The first patient died in the community, however, all others were buried using safe and dignified burial protocols.

As part of response interventions, contact tracing is conducted daily. A total of 212 individuals were identified as contacts of a confirmed MVD case.

As of 8 April 2023, 173 (81.6%) contacts have completed their follow-up period while 39 remain under daily monitoring. Among the contacts, 89 (42%) were healthcare workers that provided medical care to the cases in health facilities.

PUBLIC HEALTH ACTIONS

- MoH holds daily outbreak response meetings with the technical pillars and partners.
- Resource mobilization efforts are coordinated by the MoH and partners.
- Rapid response teams were deployed from district and regional levels to conduct investigations and implement infection control measures.
- Mental health and psychosocial support experts were deployed to support cases, recovered patients, contacts, and other aspects of the response.

SITUATION INTERPRETATION

The MVD outbreak in Tanzania has not spread to other individuals since the first reports of the disease on 16 March 2023. One of the three surviving cases has been discharged. The outbreak now requires support of mental health and psychosocial experts to increase sensitization of the community as survivors reunite with their families and reenter the community.
Location of confirmed cases of Marburg virus disease in The United Republic of Tanzania, as of 8 April 2023

© WHO/AFRO
Meningitis

EVENT DESCRIPTION

Niger health authorities continue to respond to the meningitis outbreak that began in November 2022 in Dungass health district (HD) in the Zinder region. Cases continue to be reported and the outbreak has spread to additional HDs in the Zinder region.

In week 13 alone, 67 new cases were reported including seven deaths. During this week, four surveillance areas of 100,000 inhabitants exceeded the epidemic threshold. In the early stages (late 2022 to early 2023) of this outbreak, Neisseria meningitidis serogroup C (NmC) was identified in most confirmed cases.

From week 1-13 of 2023, a total of 831 suspected cases were reported including 41 deaths yielding a case fatality rate (CFR) of 4.9%.

Cases were reported in eight of the 11 health districts in the Zinder region (which shares an international border with Jigawa State in Nigeria): Mirriah (309 cases, 13 deaths), Zinder ville (195 cases, 6 deaths), Magaria (134 cases, 13 deaths), Matamèye (109 cases, 8 deaths), Dungass (71 cases, 0 deaths), Takéita (10 cases, 0 deaths), Gouré (2 cases, 0 deaths) and Tanout (1 case, 1 death).

Males accounted for 58% of cases. The most affected age group is 5-14 years with 400 cases (48.1%), followed by 15 years and older with 245 cases (29.5%), 1-4 years with 151 cases (18.2%), and 0-11 months with 35 cases (4.2%).

PUBLIC HEALTH ACTIONS

- The technical committee established in the Zinder region continues to coordinate the response to the outbreak.
- Active case finding at the community level and in health facilities for early detection of new cases continues.
- Household sensitization through community relays and volunteers continues in affected districts.
- Case management activities have been intensified, including procurement of ceftriaxone, case isolation, deployment of health workers for case management, distribution of case management guidelines, and provision of free treatment to cases.
- Reactive vaccination campaigns with ACW trivalent meningococcal polysaccharide vaccine have been implemented in the initially affected HDs.
- Risk communication and community engagement activities continue in close collaboration with administrators and community leaders in the affected districts.

SITUATION INTERPRETATION

Niger is largely within the African meningitis belt and experiences seasonal outbreaks every year. The current outbreak shows an increase in the number of cases and in the number of health districts exceeding the epidemic threshold. The meningitis epidemic season generally runs from January to June and the spread of the outbreak is likely to be exacerbated by mixing of populations, other ongoing epidemics in the same region like measles, diphtheria, and COVID-19, insecurity, and population displacement occurring in the context of a humanitarian crisis.
Weekly meningitis cases and deaths in the Zinder region of Niger, weeks 1-13, 2023

Health districts reporting meningitis cases and deaths in the Zinder region, weeks 1-13, 2023
As of 8 April 2023, a total of 8,980,841 laboratory-confirmed cases including 174,230 related COVID-19 deaths have been reported in the WHO African region (AFRO) since the beginning of the pandemic, resulting in an overall case fatality rate of 1.9%. It is estimated that 92% (8,268,136) of individuals infected fully recovered from the disease. Cumulatively, five countries have reported the highest number of cases: South Africa 4,072,533 (45.4%), Ethiopia 500,678 (5.6%), Zambia 343,415 (3.8%), Kenya 342,988 (3.8%), and Botswana 329,837 (3.7%).

At the same time, the following five countries have cumulatively reported the highest number of deaths: South Africa 102,595 (59.0% of all deaths), Ethiopia 7,573 (4.4%), Algeria 7,481 (4.0%), Kenya 5,688 (3.3%), and Zimbabwe 5,681 (3.3%).

In the past 28 days, the following five countries reported the highest number of new cases: South Africa 6,790 (59.8%), Mauritius 1,421 (12.5%), Ethiopia 541 (4.8%), Zambia 280 (2.5%), and Ghana 246 (2.2%). During the same period, five countries reported the highest number of deaths: Zimbabwe 9 (47.37%), Sao Tome and Principe 2 (10.53%), Cameroon 2 (10.53%), Uganda 2 (10.53%), and Ethiopia 1 (5.26%).

A decrease in reported weekly new cases of COVID-19 has been observed in epi week 13 (ending on 2 April 2023) with a total of 773 confirmed cases reported in AFRO based on data submitted from 17 countries; while 28 countries reported 3,327 cases in epi week 12 (ending on 26 March 2023). Of the 773 new cases reported in epi week 13, Mauritius accounted for 339 (29%), followed by Ethiopia 135 (24%), Ethiopia 1,043 (19%), Burundi 329 (6%) and Botswana 205 (4%).

The number of new COVID-19-related deaths in the region has remained low, with one fatality recorded in epi week 13 from Sao Tome and Principe. In epi week 12, five COVID-19 deaths were reported from Zimbabwe (2), Angola, Cameroon, and Sao Tome and Principe reported one each.
Epidemiological curve of COVID-19 laboratory-confirmed cases and deaths in the WHO AFRO region, as of 8 April 2023

Distribution of cases of COVID-19 in the WHO African Region, as of 8 April 2023
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

Reminder: Upcoming deadlines for weekly data submission

Rappel : Dates limites prochaines de soumission des données hebdomadaires

<table>
<thead>
<tr>
<th>Start date</th>
<th>End date</th>
<th>Deadline / Date limite</th>
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<tbody>
<tr>
<td>27-Mar.-2023</td>
<td>02-Avr.-2023</td>
<td>05-Avr.-2023</td>
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<td>03-Avr.-2023</td>
<td>09-Avr.-2023</td>
<td>12-Avr.-2023</td>
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<td>10-Avr.-2023</td>
<td>16-Avr.-2023</td>
<td>19-Avr.-2023</td>
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<td>17-Avr.-2023</td>
<td>23-Avr.-2023</td>
<td>26-Avr.-2023</td>
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### All events currently being monitored by WHO AFRO

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eswatini</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>03-Apr-23</td>
<td>03-Apr-23</td>
<td>03-Apr-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

On 3 April, health authorities released a press statement confirming a case of cholera in the country. The patient has a travel history from Mozambique, where there is an ongoing cholera outbreak. The patient arrived in the country on 27 March 2023. He became ill with diarrhoea and vomiting within two days of arriving in the country (27-29 March 2023) and was admitted to the local hospital on 29 March 2023.

### Ongoing Events

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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Feb-20</td>
<td>25-Feb-20</td>
<td>09-Apr-23</td>
<td>271 613</td>
<td>271 613</td>
<td>6 881</td>
<td>2.5%</td>
</tr>
</tbody>
</table>

From 25 February 2020 to 9 April 2023, a total of 271 613 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 182 949 recovered.

According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains two.

<table>
<thead>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>17-Mar-20</td>
<td>16-Mar-20</td>
<td>27-Feb-23</td>
<td>27 999</td>
<td>27 999</td>
<td>163</td>
<td>0.6%</td>
</tr>
</tbody>
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The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 27 February 2023, a total of 27 999 COVID-19 cases have been reported in the country, with 163 deaths and 27 830 recoveries.

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<tr>
<th>Country</th>
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<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>Measles</td>
<td>Ungraded</td>
<td>28-Mar-23</td>
<td>28-Mar-23</td>
<td>31-Mar-23</td>
<td>13</td>
<td>13</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

The Botswana Ministry of Health notified a total of 13 cases of measles and one case of rubella on 28 March 2023 in Greater Gaborone DHMT, Kweneng DHMT, Greater Francistown DHMT, Serowe/Palapye DHMT and Greater Selebi Phikwe DHMT. In collaboration with health partners, the ministry has activated its rapid response teams to investigate, manage and conduct contact tracing of confirmed cases.

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<tbody>
<tr>
<td>Burkina Faso</td>
<td>Humanitarian crisis (Sahel Region)</td>
<td>Grade 2</td>
<td>01-Jan-19</td>
<td>01-Jan-19</td>
<td>15-Mar-23</td>
<td>1 094 000</td>
<td>-</td>
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<td>-</td>
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Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated due to attacks by armed groups. A total of 1 094 000 displaced persons are registered in Burkina Faso as of 31 January 2023. We observed a 3% increase in the total IDPs in January 2023 compared to December 2022. It is estimated that a total of 4.7 million people will need humanitarian aid in 2023. Access to health services remains a challenge for the population in affected areas.

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<tr>
<td>Burkina Faso</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>10-Mar-20</td>
<td>09-Mar-20</td>
<td>23-Mar-23</td>
<td>22 056</td>
<td>22 056</td>
<td>396</td>
<td>1.8%</td>
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Between 9 March 2020 and 23 March 2023, a total of 22 056 confirmed cases of COVID-19 with 396 deaths and 21 596 recoveries have been reported from Burkina Faso.

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<tr>
<td>Burundi</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>01-Jan-23</td>
<td>01-Jan-23</td>
<td>08-Apr-23</td>
<td>247</td>
<td>66</td>
<td>0</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

An outbreak of cholera has been declared in Burundi on 1 January 2023. As of 8 Apr 2023, 247 suspected cases and one death (CFR 0.4%) have been reported, including more than 66 laboratory-confirmed cases. The most affected age group is the 11-20 years (19.4%).

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<tr>
<td>Burundi</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>31-Mar-20</td>
<td>18-Mar-20</td>
<td>22-Mar-23</td>
<td>53 686</td>
<td>53 686</td>
<td>15</td>
<td>0.0%</td>
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On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 22 March 2023, the total number of confirmed COVID-19 cases is 53 686, including 15 deaths.
The health authorities of Burundi have declared an outbreak of circulating poloivirus type 2 on 17 March 2023. The case is a 4-year-old male child with acute flaccid paralysis (AFP) with onset date of 24 November 2022 that was reported in Isale District in Bujumbura Rural province. Two additional cases of AFP were reported in contacts of the case.

The humanitarian situation in the Northwest region of Cameroon remains dire, marked by continued violent attacks on schools and children, as well as on healthcare. Continued fighting between non-Sate armed groups (NSAGs) and State security forces led to the killing and displacement of civilians. Humanitarian activities continue to be hampered by roadblocks, theft of humanitarian supplies, bureaucratic impediments, and risk of IEDs in public spaces and roads used by humanitarians. As of 28 Feb 2023, 628K people are internally displaced in the area.

The security situation in the Far-North region of Cameroon remains volatile. Some 1,652 people were newly displaced in Feb 2023 due to insecurity in the area. Additionally, an estimated 700 Nigerians registered in Minawao camp between 1-15 Feb 2023. More than 82 civilians were abducted in Feb by armed individuals in Logone and Chari. The Oual Health Center was also attached by armed individuals in Mayo-Sava.

From the beginning of the outbreak in February 2021 to 22 January 2023, 3,243 suspected cases of yellow fever including 83 laboratory-confirmed cases and 311 deaths (CFR 2.0%) have been reported from eight Regions. Patients’ ages range from 2 months to 103 years with a median of 27 years, and females remain twice less affected than males.

No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in week 14, 2023 (ending 9 Apr 2023). There were three cases reported in 2022, three confirmed and three deaths have been reported in the country.

From 31 March 2023 through 9 April 2023, 276 suspected cases of yellow fever including 22 laboratory-confirmed cases and 1 death (CFR 4.5%) have been reported from eight Regions. Patients’ ages range from 9 months to 78 years with a median of 30 years, and females remain twice less affected than males.

The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 9 April 2023, a total of 63,281 confirmed COVID-19 cases including 413 deaths and 62,803 recoveries were reported in the country.

The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 26 March 2023, a total of 124,834 cases have been reported, including 1,970 deaths and 122,762 recoveries.

As a result of the ongoing crisis in Far-Northern Cameroon and neighbouring countries, there has been a massive influx of internally displaced populations and refugees in Adamawa, North and East regions. As of 31 Mar 2023, a total of 385,372 people are internally displaced in the area.

The humanitarin situation in the NWSW regions remained dire, marked by continued violent attacks on schools and children, as well as on healthcare. Continued fighting between non-Sate armed groups (NSAGs) and State security forces led to the killing and displacement of civilians. Humanitarian activities continue to be hampered by roadblocks, theft of humanitarian supplies, bureaucratic impediments, and risk of IEDs in public spaces and roads used by humanitarians. As of 28 Feb 2023, 628K people are internally displaced in the area.

The humanitarian crisis in the Central African Republic (CAR) continues to deteriorate. In 2023, 3.4 million people will need humanitarian assistance and protection, an increase of 10% compared to 2022. A recent analysis for the period October 2022-August 2023 showed an expected 16% and 20% increase in the burden of acute malnutrition, respectively among under-five children and pregnant women as compared to last year projections. As of 28 Feb 2023, an estimated 483K people were internally displaced in the area.

The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 9 April 2023, a total of 63,281 confirmed COVID-19 cases including 413 deaths and 62,803 recoveries were reported in the country.

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 22 January 2023, a total of 15,367 confirmed cases, 113 deaths and 15,200 recovered were reported.

From 31 March 2023 through 9 April 2023, a total of 29 confirmed cases of Mpxo and one death have been reported in the country. The number of mpxo cases in CAR has increased from 27 to 29 (4.8% increase) after the country reported two new cases in weeks 10 and 11. Since the start of 2023, the country has reported 12 laboratory-confirmed cases, including one death. The last case was reported on 27 March 2023 in the Mbaiki health district. This case was a contact being followed from a confirmed case during week 10.
Central African Republic
Poliomyelitis (cVDPV2) Grade 2 24-May-19 24-May-19 09-Apr-23 30 30 0 0.0%

No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in week 14, 2023 (ending 9 Apr 2023). There are five cases reported in 2022. Although no new cases were reported in 2021, 4 cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.

Central African Republic
Yellow Fever Ungraded 17-Aug-21 01-Apr-21 08-Jan-23 767 23 4 0.5%

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.

Republic of the Congo
Humanitarian crisis (Sahel region) Grade 2 11-Feb-22 01-Mar-16 01-Mar-23 6 100 000 - - -

The Lac Chad province is experiencing a double security and environmental crisis. Since 2015, the region is impacted by attacks of non-state armed groups which have forced local communities to flee their homes. The province experienced heavy rainfall which has affected some 229,000 people between October and December 2022, and has destroyed large surfaces of cropland, washed away more than 6,000 cattle, and caused extensive damage to homes and schools. The floods added a new challenge to an already critical situation. As of 28 Feb 2023, Chad has 381,000 internally displaced persons and hosts 596,000 refugees.

Chad
COVID-19 Grade 3 19-Mar-20 19-Mar-22 26-Mar-23 7688 7688 194 2.5%

The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 26 March 2023, a total of 7,688 confirmed COVID-19 cases were reported in the country including 194 deaths.

Chad
Measles Ungraded 24-May-18 01-Jan-23 12-Mar-23 1973 210 2 0.1%

As at week 10 of 2023 (ending 12 March), 1,973 suspected cases are reported from 112 out of 150 health districts in the country this year. A total of 210 cases tested IgM+ for measles and 58 IgM+ for rubella out of 62 cases investigated with blood samples; 87 cases are confirmed by epi linkage, and 59 cases confirmed clinically; two measles deaths reported and 20 health districts with confirmed measles outbreaks since the start of 2023.

Chad
Yellow Fever Ungraded 13-Nov-21 01-Nov-21 02-Apr-23 2753 31 7 0.3%

On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 2 April 2023, 2,753 suspected cases of yellow fever have been reported. Of these, 1,989 cases have been investigated, including 25 probable and 31 lab-confirmed cases. A total of 74 deaths have been reported (CFR 3.0%) including one among probable and six among confirmed cases. A total of 27/126 districts in 10/23 provinces have been affected since the beginning of the outbreak.

Comoros
COVID-19 Grade 3 30-Apr-20 30-Apr-20 05-Apr-23 9093 9093 160 1.8%

The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 5 April 2023, a total of 9,093 confirmed COVID-19 cases, including 160 deaths were reported in the country.

Congo
COVID-19 Grade 3 14-Mar-20 14-Mar-22 26-Mar-23 25143 25143 389 1.6%

The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 19 March 2023, a total of 25,143 cases including 389 deaths have been reported in the country.

Congo
Mpxx Grade 3 23-May-22 01-Jan-22 02-Apr-23 5 5 0 0.0%

From 1 January 2022 to 2 April 2023, the Republic of Congo has reported five laboratory-confirmed cases, with zero death (CFR 0.0%).

Congo
Poliomyelitis (cVDPV1) Grade 2 21-Mar-23 01-Mar-23 25-Mar-23 1 1 - -

A case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was confirmed on 1 March 2023 in a 15-year-old child living in Dolisie, Niari Department, with onset of paralysis on 28 September 2022.

Côte d’Ivoire
COVID-19 Grade 3 11-Mar-20 11-Mar-20 07-Apr-23 88308 88308 834 0.9%

Since 11 March 2020, a total of 88,308 confirmed cases of COVID-19 have been reported from Côte d’Ivoire including 834 deaths, and a total of 87,468 recoveries.

Democratic Republic of the Congo
Humanitarian crisis Protracted 3 20-Dec-17 17-Apr-17 19-Mar-23 - - -

Since the beginning of 2022, more than 1.56 million people have been in a situation of internal displacement (IDPs) in the DRC. In Ituri Province, intercommunal violence escalated in the last quarter where there is a worrying increase in attacks in the territories of Djugu and Irumu, with more than 70 civilians were killed during Feb 2023. In addition, around 380 houses had been burnt down in repeated attacks in Ituri province since Jan 2023. Humanitarian partners are also affected by access constraints linked to armed clashes, popular demonstrations, the presence of illegal barriers, but also logistical constraints and incidents of violence against them. In Feb 2023, 28 new security incidents directly affecting humanitarian workers were recorded in the DRC.

Democratic Republic of the Congo
Cholera Grade 3 16-Jan-15 01-Jan-23 19-Mar-23 7243 462 47 0.6%

From epidemiological week 1 to 11, 2023, 7,243 suspected cases of cholera, including 47 deaths (CFR 0.6%), have been recorded in 62 Health Zones of nine provinces. Areas with active outbreaks include North Kivu, Haut Katanga, and Tanganyika. The incidence (per 100,000 inhabitants) is 14 for the entire. Between weeks 1-10 of 2023, at total of 1,912 samples were tested and 634 (33.2%) were found positive for Vibrio cholerae.

From epidemiological week 1 to 11, 2023, 7,243 suspected cases of cholera, including 47 deaths (CFR 0.6%), have been recorded in 62 Health Zones of nine provinces. Areas with active outbreaks include North Kivu, Haut Katanga, and Tanganyika. The incidence (per 100,000 inhabitants) is 14 for the entire. Between weeks 1-10 of 2023, at total of 1,912 samples were tested and 634 (33.2%) were found positive for Vibrio cholerae.
**Democratic Republic of the Congo**  

**Cholera Grade 3**  

Date notified to WCO: 14-Dec-22  
End of reporting period: 19-Mar-23  
Total cases: 4,104  
Cases Confirmed: 1464  
Deaths: 16  
CFR: 0.4%

An outbreak of cholera was officially declared in North Kivu province of DRC on 14 December 2022, following a massive influx of IDPs in Nyiragongo and Karisimbi health zones (HZs). Between outbreak inception on week 47, 2022 (21-27 November) and 27 January 2023, a cumulative of 4,104 suspected cases of cholera including 16 deaths (CFR 0.4%) in Nyiragongo HZ, and 306 cases and zero death (CFR 0.0%) in Karisimbi HZ. An OCV campaign has been officially launched on 25 January 2023 and is scheduled from 26-30 January 2023. A sharp increase in cases was observed in the camps for displaced persons from the M23 crisis in Nyiragongo, Goma and Karisimbi sanitation zones as of week 10 of 2023.

**Measles Ungraded**  

Date notified to WCO: 12-Oct-21  
End of reporting period: 03-Apr-23  
Total cases: 515  
Cases Confirmed: 909  
Deaths: 649  
CFR: 1.1%

Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 95,944 confirmed cases and two probable case, including 1,464 deaths have been reported. A total of 84,489 people have recovered.

**Measles Ungraded**  

Date notified to WCO: 31-May-22  
End of reporting period: 03-Apr-23  
Total cases: 515  
Cases Confirmed: 10  
Deaths: 86  
CFR: 16.7%

As of week 12 of 2023 (ending 26 March), the country has reported 57,167 suspected measles cases with 649 related deaths, 909 are IgM+ for measles from 1,819 tested samples and 146 IgM+ for Rubella. About 91 health zones are experiencing confirmed measles outbreak since January 2023.

**Meningitis Ungraded**  

Date notified to WCO: 31-May-22  
End of reporting period: 03-Apr-23  
Total cases: 515  
Cases Confirmed: 10  
Deaths: 86  
CFR: 16.7%

The meningitis outbreak is ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 4 April 2023, a total of 515 suspected cases with 86 deaths (CFR 16.7%) have been reported.

**Mpox Grade 3**  

Date notified to WCO: 26-Feb-21  
End of reporting period: 08-Feb-22  
Total cases: 352  
Cases Confirmed: 140  
Deaths: 0  
CFR: 0.0%

From 1 January 2022 through 19 March 2023, the Democratic Republic of the Congo (DRC) reported 439 confirmed Mpox cases with no death among the confirmed cases. All confirmed cases belong to Clause I.

**Poliomyelitis (cVDPV1) Grade 2**  

Date notified to WCO: 27-Aug-22  
End of reporting period: 05-Apr-23  
Total cases: 439  
Cases Confirmed: 140  
Deaths: 0  
CFR: 0.0%

According to the Global Polio Eradication Initiative (GPEI), this week, 12 cVDPV1 cases were reported; six in Tanganyika, one in Haut Lomami and five in Haut Katanga bringing the total number of 2023 cases to eight. There were 132 cVDPV1 cases in 2022.

**Poliomyelitis (cVDPV2) Grade 2**  

Date notified to WCO: 26-Feb-21  
End of reporting period: 08-Feb-22  
Total cases: 352  
Cases Confirmed: 140  
Deaths: 0  
CFR: 0.0%

For this week, the Global Polio Eradication Initiative (GPEI), has reported that nine cVDPV2 cases were reported; one each in Tanganyika, Haut Katanga, Lualaba, Tshopo and Sud-Kivu, and four in Haut Lomami, bringing the total number of 2023 cases to eight. There were 344 cVDPV2 cases reported in 2022.

**Equatorial Guinea COVID-19 Grade 3**  

Date notified to WCO: 14-Mar-20  
End of reporting period: 09-Apr-23  
Total cases: 17229  
Cases Confirmed: 17229  
Deaths: 183  
CFR: 1.1%

The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 23 February 2023, a total of 17,229 cases have been reported in the country with 183 deaths and 16,907 recoveries.

**Marburg virus disease Grade 3**  

Date notified to WCO: 07-Feb-23  
End of reporting period: 09-Apr-23  
Total cases: 14  
Cases Confirmed: 14  
Deaths: 10  
CFR: 71.4%

Since the Marburg Virus Disease (MVD) outbreak was declared in the country on 13 February 2023 through 9 April 2023, a total of 14 confirmed cases including 10 deaths and one survived have been reported.

**Eritrea COVID-19 Grade 3**  

Date notified to WCO: 21-Mar-20  
End of reporting period: 30-Oct-22  
Total cases: 10189  
Cases Confirmed: 10189  
Deaths: 103  
CFR: 1.0%

The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 30 October 2022, a total of 10,189 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 10,085 patients have recovered from the disease.

**Ethiopia Drought/food insecurity Grade 3**  

Date notified to WCO: 17-Feb-22  
End of reporting period: 18-Jan-23  
Total cases: 1200000  
Cases Confirmed: 1200000  
Deaths: -  
CFR: -% 

Poor rainfall during the October-to-December dry rainy season marks the fifth consecutive below-average rainy season in the Horn of Africa, contributing to continued emergency-levels of humanitarian need for vulnerable populations across the region. At present, nearly 12 million people are estimated to be food insecure, and 8.6 million people are being targeted for water, sanitation and hygiene assistance across the drought-affected areas.
In Ethiopia, some 2.7 million people have been displaced and another 887K refugees are located in the country as of 28 Feb 2023. Humanitarian partners have assisted more than 3.7 million people as of 4 January 2023, representing 68.5% of the total planned caseload of 5.4 million people in Tigray under the current round (Round 2) of food distribution. Hundreds of thousands of people continue to be uprooted from their homestead, with a consequential increase in humanitarian needs.

Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 500 678 cases of COVID-19 as of 6 April 2023, with 7 573 deaths and 487 704 recoveries.

On 12 March 2020, the Ministry of Health announced the first confirmed COVID-19 case in the country. As of 24 February 2023, a total of 48 981 cases including 306 deaths and 48 675 recoveries have been reported in the country.

On 21 March 2023, the Ministry of Health of Guinea notified WHO of a confirmed fatal case of Lassa fever in a three-year-old male child from the Kobela health area, Nzerekore health district. The date of onset of symptoms was 13 March 2023, with fever, asthenia, anorexia, and dry cough. On 20 March 2023, the child was taken to the regional hospital for medical attention due to the persistence of the disease. On 21 March 2023, the child presented with bleeding from the mouth and blackish blood from the hospital. A safe and dignified burial was not performed. Public health measures are being taken.

In Ethiopia, some 2.7 million people have been displaced and another 887K refugees are located in the country as of 28 Feb 2023. Humanitarian partners have assisted more

### Table: Outbreaks and Other Emergencies - Week 15: 3-9 April 2023

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WHO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethiopia</td>
<td>Measles</td>
<td>Ungraded</td>
<td>13-Apr-17</td>
<td>01-Jan-23</td>
<td>31-Mar-23</td>
<td>3 529</td>
<td>2 168</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>Polioymeilitis</td>
<td>Grade 2</td>
<td>24-Jun-19</td>
<td>20-May-19</td>
<td>09-Apr-23</td>
<td>64</td>
<td>64</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Gabon</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>12-Mar-20</td>
<td>12-Mar-20</td>
<td>24-Feb-23</td>
<td>48 981</td>
<td>48 981</td>
<td>306</td>
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</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>24-Feb-23</td>
<td>04-Feb-23</td>
<td>12-Mar-23</td>
<td>27</td>
<td>27</td>
<td>1</td>
<td>3.7%</td>
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<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>01-Jan-23</td>
<td>01-Jan-22</td>
<td>17-Feb-23</td>
<td>502</td>
<td>123</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>08-Jun-22</td>
<td>24-May-22</td>
<td>23-Feb-23</td>
<td>123</td>
<td>123</td>
<td>4</td>
<td>3.3%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>09-May-18</td>
<td>01-Jan-22</td>
<td>31-Dec-22</td>
<td>23 259</td>
<td>432</td>
<td>33</td>
<td>0.1%</td>
</tr>
<tr>
<td>Guinea</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>13-Mar-20</td>
<td>13-Mar-20</td>
<td>19-Feb-23</td>
<td>38 302</td>
<td>38 302</td>
<td>467</td>
<td>1.2%</td>
</tr>
<tr>
<td>Guinea</td>
<td>Measles</td>
<td>Ungraded</td>
<td>24-Feb-23</td>
<td>04-Feb-23</td>
<td>12-Mar-23</td>
<td>27</td>
<td>27</td>
<td>1</td>
<td>3.7%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>24-Feb-23</td>
<td>04-Feb-23</td>
<td>12-Mar-23</td>
<td>27</td>
<td>27</td>
<td>1</td>
<td>3.7%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>01-Jan-23</td>
<td>01-Jan-22</td>
<td>17-Feb-23</td>
<td>502</td>
<td>123</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>08-Jun-22</td>
<td>24-May-22</td>
<td>23-Feb-23</td>
<td>123</td>
<td>123</td>
<td>4</td>
<td>3.3%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>09-May-18</td>
<td>01-Jan-22</td>
<td>31-Dec-22</td>
<td>23 259</td>
<td>432</td>
<td>33</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

On 21 March 2023, the Ministry of Health of Guinea notified WHO of a confirmed fatal case of Lassa fever in a three-year-old male child from the Kobela health area, Nzerekore health district. The date of onset of symptoms was 13 March 2023, with fever, asthenia, anorexia, and dry cough. On 20 March 2023, the child was taken to the regional hospital for medical attention due to the persistence of the disease. On 21 March 2023, the child presented with bleeding from the mouth and blackish blood from the anus. Laboratory tests on the blood sample taken the same day were positive for Lassa fever varus. The child died in the community, in a remote village, after escaping from the hospital. A safe and dignified burial was not performed. Public health measures are being taken.

Since the beginning of 2022 up to week 52 (ending 31 December), a total of 23 259 suspected measles cases with 432 confirmed and 33 death (CFR 0.1%) have been reported in Guinea through the Integrated disease surveillance and response.
### Health Emergency Information and Risk Assessment

#### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 15: 3-9 APRIL 2023

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guinea-Bissau</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Mar-20</td>
<td>19-Mar-23</td>
<td>9,350</td>
<td>9,350</td>
<td>176</td>
<td>1.9%</td>
</tr>
<tr>
<td>Kenya</td>
<td>Drought/food insecurity</td>
<td>Grade 3</td>
<td>17-Feb-22</td>
<td>19-Mar-23</td>
<td>4,500,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>19-Oct-22</td>
<td>09-Apr-23</td>
<td>8,584</td>
<td>282</td>
<td>137</td>
<td>1.6%</td>
</tr>
<tr>
<td>Mali</td>
<td>Lassa fever</td>
<td>Ungraded</td>
<td>03-Mar-21</td>
<td>19-Mar-23</td>
<td>2,233</td>
<td>2,051</td>
<td>10</td>
<td>0.4%</td>
</tr>
<tr>
<td>Kenya</td>
<td>Measles</td>
<td>Ungraded</td>
<td>29-Jun-22</td>
<td>19-Mar-23</td>
<td>99</td>
<td>64</td>
<td>3</td>
<td>3.0%</td>
</tr>
<tr>
<td>Lesotho</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>13-May-20</td>
<td>12-Sep-22</td>
<td>34,490</td>
<td>34,490</td>
<td>706</td>
<td>2.1%</td>
</tr>
<tr>
<td>Liberia</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>16-Mar-20</td>
<td>30-Mar-23</td>
<td>8,102</td>
<td>8,102</td>
<td>294</td>
<td>3.6%</td>
</tr>
<tr>
<td>Liberia</td>
<td>Lassa Fever</td>
<td>Ungraded</td>
<td>03-Mar-22</td>
<td>01-Feb-23</td>
<td>84</td>
<td>84</td>
<td>26</td>
<td>31.0%</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Cyclones</td>
<td>Grade 2</td>
<td>25-Jan-23</td>
<td>01-Apr-23</td>
<td>391,000</td>
<td>53</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Malnutrition crisis</td>
<td>Protracted 2</td>
<td>01-Jul-21</td>
<td>09-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Madagascar</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>20-Mar-20</td>
<td>07-Apr-23</td>
<td>68,105</td>
<td>68,105</td>
<td>1,425</td>
<td>2.2%</td>
</tr>
</tbody>
</table>

A total of 53 cases of dermatosis of unknown origin have been reported in fisherman. The men are said to have developed itchy rashes which worsened to wounds predominantly on the face, mouth, genitals, and other parts of the body. Some also developed symptoms of headache and fever. Investigations are ongoing, however, according to an investigative report by the Ministry of Maritime and Fisheries, the event is said to have been brought on by contamination due to a spill at sea of chemical products.

On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 19 March 2023, the country has reported 9,350 confirmed cases of COVID-19 with 8,929 recoveries and 176 deaths.

The outbreak is active in West Pokot County; 33 new cases were reported in the last Epi week.

Cases reported are 2,233 with 10 deaths (CFR 0.4%), from eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandra, Wajir, Tharaka Nithi, and Isiolo.

A total of 4,478 (52%) of the cumulative cases are males, while 4,106 (48%) are females. Most cases, 3,002 (35%) are in the age group of less than 10 years old.

A total of 8584 cholera cases have been reported since the index case was reported on 5 October 2022 through 9 April 2023. A total of 4,478 (52%) of the cumulative cases are males, while 4,106 (48%) are females. Most cases, 3,002 (35%) are in the age group of less than 10 years old.

The outbreak is active in West Pokot County; 33 new cases were reported in the last Epi week.

Cases reported are 2,233 with 10 deaths (CFR 0.4%), from eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandra, Wajir, Tharaka Nithi, and Isiolo.

A total of 99 cases with 64 confirmed and three deaths (CFR 3.0%) have been reported since the beginning of this year.

The outbreak is being continuous from year 2022. The outbreak has affected eight counties in 2023: Garissa, Nairobi, Turkana, Kitui, Lamu, Mombasa, Kwale and Tana River. A total of 99 cases with 64 confirmed and three deaths (CFR 3.0%) have been reported since the beginning of this year.

Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 12 September 2023, a total of 34,490 cases of COVID-19 have been reported, and 706 deaths.

From 16 March 2020 to 30 March 2023, Liberia has recorded a total of 8,102 cases including 294 deaths and 7,783 recoveries have been reported.

Since the beginning of 2022 up to 1 February 2023, a total of 84 confirmed cases of Lassa fever with 26 deaths (CFR 31%) have been reported in Liberia. Eleven confirmed cases with two deaths have been reported between week 1 and week 4 of 2023.

Since the measles outbreak started on 13 December 2021 as of 5 March 2023, a total of 9,959 suspected cases, including 9,459 confirmed and 92 deaths (CFR: 1%) were reported from all the 15 counties in Liberia. Among the confirmed cases, 5.4% (452) were laboratory confirmed, 6.5% (570) clinically confirmed and 88.1% (8,407) epidemiologically linked.

Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public health Reference Laboratory in the country. As of 8 February 2023, sept confirmed cases of monkeypox and 0 deaths were reported.

On 19 Jan 2023, the cyclonic system Chenoso landed in Madagascar north of Aintlahas district, SAVA region, with an average wind speed of 90 km/h and gusts up to 120 km. Last reports provided by the National Bureau for the Management of risks and catastrophes released on 31 January 2023 indicated that 91,960 people had been affected, 52,275 displacements and 36 deaths. Cyclone Freddy made landfall in Madagascar 5 Mar 2023, and affected nearly 290,000 people, displacing 72,700, and causing at least 17 deaths. Therefore, since the beginning of 2023, a total of 391,000 people have been affected by cyclones in the country causing 53 deaths and 124,975 displacements.

The situation in the Great Southeast of Madagascar could get even worse following cyclone Freddy, which hit on the night of February 21, 2023. According to projections, 115,000 children in these regions will need to be treated for acute malnutrition this year. Humanitarian actors, including UNICEF, are focused on rolling out a coordinated and large-scale response to avoid deaths and support the health system.

Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 7 April 2023, a total of 68,105 confirmed cases including 1,425 deaths have been reported in the country.
At least 679 deaths have been registered and 659,278 people are displaced as of 7 April 2023, following the affects of Cyclone Freddy which caused heavy rains, strong winds, and mudslides. Rainfall occurred from 11-13 March 2023 with 14 districts and two cities. A total of 63 health care facilities are currently affected.

A total of 29 districts have reported Cholera cases since the confirmation of the first case in March 2022 in Machinga district. As of 9 April 2023, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 57,325 and 1,731 respectively, with Case Fatality Rate at 3.0%.

On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 9 April 2023, the country has a total of 88,713 confirmed cases with 2,686 deaths.

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. Malawi continues to participate in the multi-country, subregional outbreak response, to urgently stop the WPV1 outbreak affecting the area.

The humanitarian situation in Mali remains of concern in 2023, still in the northern and central regions. The humanitarian crisis is taking place amidst COVID-19 and measles outbreak, with the risk of other emerging and re-emerging diseases. The situation in the centre and north of the country is likely related to the increase in direct and indirect attacks against national and international forces and civilians. The number of internally displaced persons (IDPs) reached 412,387 at the end of December 2022, according to the Displacement Tracking Matrix.

The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 2 April 2023, a total of 63,562 cases including 997 deaths and 62,471 recovered have been reported in the country.

The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 7 April 2023, a total of 298,099 confirmed COVID-19 cases including 1,044 deaths have been reported in the country.

Between 31 Jan and 12 Mar 2023, heavy rainfall has occurred in 10/11 Provinces of Mozambique, including rains from the Freddy cyclone system which has made landfall twice. As of 31 March, 1,255,786 people have been affected by Freddy's double landfall in Mozambique, in eight provinces including Zambezia, Sofala, Inhambane, Tete, Maputo City, Niassa, Gaza, and Manica. A total of 186 deaths have been reported, including 157 deaths in Zambezia which is by far the most affected province after Freddy's second passage. Nearly 200,870 people have been displaced and relocated across accommodation centres in Zambezia, Sofala, Tete, Inhambane, and Niassa.

Thousands of people fled the northern districts of Cabo Delgado, in Mozambique, and they came looking for safety and livelihoods opportunities in areas such as where attacks have taken place since the beginning of the conflict since the beginning of the conflict. This additional population presents enormous pressure on the district's basic services, particularly access to water and healthcare, which were already precarious before the conflict.

Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 14 September 2022 to 9 April 2023, a total of 25,643 cases and 119 deaths (CFR 0.5%) have been reported from eight provinces and 48 districts.

The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 7 April 2023, a total of 233,334 confirmed COVID-19 cases were reported in the country including 2,424 deaths.

The case was diagnosed Wednesday, 12 October 2022 in Maputo City in a man, Health minister Arminho Tiafo said. As of 31 March 2023, no additional case has been reported.

According to the Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains four. There were two cases reported in 2021.
Health Emergency Information and Risk Assessment

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 15: 3-9 APRIL 2023

Niger - Humanitarian crisis (Sahel region)
Grade 2
01-Feb-15
01-Feb-15
16-Dec-22
580,838
-
-
-

Humanitarian access in Niger has deteriorated because of growing insecurity in Diffa, Maradi, Tahoua, and Tillabéri regions. Niger hosts 580,838 people whose situation is of concern, of which 48% are internally displaced persons (IDPs), 43% refugees, 6% returnees, 2% asylum seekers and other people whose situation is worrying (mainly Burkinabés).

Niger - COVID-19
Grade 3
19-Mar-20
19-Mar-20
18-Feb-23
9,512
9,512
315
3.3%

From 19 March 2020 to 18 February 2023, a total of 9,512 cases with 315 deaths have been reported across the country. A total of 9,082 recoveries have been reported from the country.

Niger - Measles
Grade 2
05-Apr-22
01-Jan-22
18-Mar-23
423
50
0
0.0%

From week 1 to week 11 (ending on 18 March 2023), 423 cases of measles including 50 confirmed cases have been reported in 30 districts from 8 regions. 8% (67/2) of the districts of Niger notified at least one suspected case of measles during this reporting period.

Niger - Meningitis
Ungraded
07-Dec-22
31-Oct-22
26-Mar-23
911
105
30
3.3%

Refer to the article above

Table:

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Confirmed cases</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>17-May-22</td>
<td>18-May-22</td>
<td>22</td>
<td>22</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Namibia</td>
<td>Arbovirus infection</td>
<td>Ungraded</td>
<td>15-Mar-23</td>
<td>08-Mar-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Niger</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>01-Feb-15</td>
<td>01-Feb-15</td>
<td>580,838</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Namibia</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>171,222</td>
<td>171,222</td>
<td>4,090</td>
<td>2.4%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>01-Jan-20</td>
<td>01-Jan-21</td>
<td>31</td>
<td>33</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Lassa Fever</td>
<td>Ungraded</td>
<td>08-Jan-23</td>
<td>01-Jan-23</td>
<td>827</td>
<td>823</td>
<td>144</td>
<td>17.4%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Diptheria</td>
<td>Grade 1</td>
<td>01-Dec-22</td>
<td>01-Dec-22</td>
<td>1,064</td>
<td>389</td>
<td>62</td>
<td>5.8%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Measles</td>
<td>Ungraded</td>
<td>05-Apr-22</td>
<td>01-Jan-22</td>
<td>423</td>
<td>50</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Meningitis</td>
<td>Ungraded</td>
<td>07-Dec-22</td>
<td>31-Oct-22</td>
<td>911</td>
<td>105</td>
<td>30</td>
<td>3.3%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Rift Valley fever</td>
<td>Ungraded</td>
<td>23-Feb-23</td>
<td>02-Feb-23</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100.0%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>01-Jan-23</td>
<td>29-Jan-23</td>
<td>429</td>
<td>17</td>
<td>4.0%</td>
<td></td>
</tr>
<tr>
<td>Nigeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>27-Feb-20</td>
<td>27-Feb-20</td>
<td>266,675</td>
<td>266,675</td>
<td>3,155</td>
<td>1.2%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Diphtheria</td>
<td>Grade 1</td>
<td>01-Dec-22</td>
<td>01-Dec-22</td>
<td>1,064</td>
<td>389</td>
<td>62</td>
<td>5.8%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Meningitis</td>
<td>Grade 1</td>
<td>01-Oct-22</td>
<td>01-Oct-22</td>
<td>628</td>
<td>157</td>
<td>52</td>
<td>8.3%</td>
</tr>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>17-May-22</td>
<td>18-May-22</td>
<td>22</td>
<td>22</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Namibia</td>
<td>Arbovirus infection</td>
<td>Ungraded</td>
<td>15-Mar-23</td>
<td>08-Mar-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Namibia</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>171,222</td>
<td>171,222</td>
<td>4,090</td>
<td>2.4%</td>
</tr>
</tbody>
</table>

From 1 October 2022 to 15 March 2023, 66 Local Government Areas (LGAs) from 21 out of 36 administrative states and the Federal Capital Territory (FCT) reported 628 suspected meningitis cases, including 160 confirmed cases and 52 deaths (CFR 8.3%). Males account for 62% of the suspected cases. Age group 5-14 years is the most affected age group. Neisseria meningitides serogroup C is the dominant strain among confirmed cases. 91% of all cumulative cases were from four (4) states – Jigawa (509 cases), Bauchi (232 cases), Zamfara (22 cases) and Oyo (14 cases).
From 1 January to 29 March 2023, Nigeria has reported 829 monkeypox confirmed cases with nine deaths.

According to Global Polio Eradication Initiative, four cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Zamfara with one case being the first of 2023. There are now 47 cases detected in 2022.

The Rwandan Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 26 February 2023, a total of 133 194 cases with 1 468 deaths and 131 647 recovered cases have been reported in the country.

On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country’s first case of COVID-19. As of 2 April 2023, a total of 6 500 confirmed cases of COVID-19 have been reported, including 79 deaths. A total of 6 358 cases have been reported as recoveries.

From epidemic week 1 to 12 of 2023 (ending 26 March 2023), 180 confirmed cases of measles including 178 laboratory confirmed cases were reported in Senegal, with the most affected regions being Diourbel (118 cases), Kédougou (12 cases), Tambacounda (12 cases), Louga (11 cases), and Théies (17 cases). Most of the reported cases (151; 83.9%) were unvaccinated against measles.

Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 28 February 2023, a total of 50 937 cases have been confirmed, including 50 750 recoveries and 172 deaths have been reported.

On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 13 March 2023, a total of 7 763 confirmed COVID-19 cases were reported in the country, including 125 deaths and 4 995 recovered cases.

By 31 December 2022 (Week 52), 16 out of 16 districts reported a total of 1174 suspected measles cases, including 178 laboratory confirmed measles cases. Of the total suspected measles cases, 303 (26%) cases are above five years. In December 2022, three districts, namely Western Area Rural, Western Area Urban and Karene districts reported more than 3 measles cases. Surveillance and immunisation activities have been intensified in all districts.

The Government has declared on Monday 13 February 2023 a National State of Disaster to enable an intensive, coordinated response to the impact of floods that are affecting Mpumalanga, the Eastern Cape, Gauteng, KwaZulu-Natal, Limpopo, the Northern Cape, and Northwest provinces. Fatalities and missing people are reported. Material damages reported are ranging from flooded homes, vehicles swept away by floodwaters and overflowing dams and sewerage facilities, to the loss of basic infrastructure and damage to roads, bridges and a Limpopo hospital.

Since the start of the COVID-19 pandemic in South Africa through 31 March 2023, a cumulative total of 4 072 533 confirmed cases and 102 595 deaths have been reported.

From 8 October 2022 to 6 April, 2023, a total of 905 laboratory-confirmed cases were reported from eight provinces with declared measles outbreaks in Limpopo (362 cases), Mpumalanga (107 cases), North West (213 cases), Gauteng (156 cases), Free State (30 cases), Western Cape (12), KwaZulu-Natal (18) and Northern Cape (7).

From 22 June 2022 to 7 April 2023, there have been five unlinked laboratory-confirmed monkeypox cases in South Africa. The cases were reported from Gauteng (n = 1), Western Cape (n = 2), Limpopo (n = 1) and Johanesburg (n = 1) provinces. No new cases have been reported since October 2022.
The food insecurity situation in South Sudan is projected to worsen during the lean season from Apr-Jul 2023, as some 7.8 million people (63% of the population) will likely face Crisis (IPC Phase 3) or worse acute food insecurity, with 43K people likely to be in Catastrophe (IPC Phase 5) acute food insecurity in Akobo, Canal/Pigi and Fangak counties of Jonglei State, and Leer and Mayendit counties of Unity State.

Since July 2022, an estimated 1 million people were affected by severe flooding in 36 counties across South Sudan and in the southern part of the Abyei Administrative Area. Flood waters continue to block humanitarian access in Unity State, especially in the southern part of the state including Bentiu and into Jonglei State. An estimated 7 380 people are displaced by flooding in areas of Rukpok county.

On 7 March 2023, the Ministry of health of South Sudan declared cholera outbreak in Malakal, Upper Nile State. From 22 February to 29 March 2023, a total of 590 cases including four confirmed for Vibrio cholerae and two deaths (CFR 0.4%) have been reported. Cases were reported from Malakal town and the IDP camp. Approximately 54% of cases are male and the majority of them are children aged 1-4 accounting for 56% of all cases. An oral cholera vaccination campaign in the affected areas is ongoing with targets of 53K individuals.

On 5 April 2020, the Ministry of Health of South Sudan reported the country’s first case of COVID-19. As of 21 Mar 2023, a total of 18 368 confirmed COVID-19 cases were reported in the country including 138 deaths and 18 115 recovered cases.

The current outbreak in the Bentiu IDP camp is ongoing. As of 19 Mar 2023, a total of 4 009 cases of hepatitis E including 27 deaths (CFR: 0.7%) have been reported since January 2019. A total of 15 new cases were reported in week 10 (ending 19 Mar 2023). Approximately 54% of cases are male and the majority of them are children aged 1-4 accounting for 56% of all cases. An oral cholera vaccination campaign in the affected areas is ongoing with targets of 53K individuals.

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 26 March 2023, a total of 39 443 cases, 290 deaths and 39 127 recovered cases, have been reported in the country. The epidemic threshold has been crossed in week 6 (ending 12 February), with a cumulative of 105 suspected cases with 10 deaths (CFR 9.5%) reported between week 51 of 2022 (ending 25 December) and week 13 of 2023 (ending 2 April 2023). Twenty-two (22) cases have been laboratory-confirmed for Streptococcus pneumoniae. More than 80% of cases are aged above 10 years.

Tanzania, United Republic of

The cholera outbreak is ongoing in the regions of Katavi, Kigoma, Rukwa and Ruvuma in Tanzania. From 22 January to 13 Mar 2023, Ruvuma Region reported 13 cases, Katavi Region reported 34 cases, Rukwa Region reported 18 cases, and Kigoma Region reported 7 cases. Three cases (CFR 4.2%) have been reported as deaths all occurring in Nyasa District of Ruvuma Region. A total of 23 cases have been laboratory-confirmed as positive.

Tanzania, United Republic of

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 24 March 2023, a total of 42 959 confirmed cases have been reported in Tanzania Mainland including 846 deaths.

Refer to the article above

Togo

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 26 March 2023, a total of 39 443 cases, including 290 deaths and 39 127 recovered cases, have been reported in the country.

Togo

On 15 February 2023, an outbreak of meningitis was officially declared by the Ministry of Health of Togo, in Oti South district of Savana region in the northern part of the country. The epidemic threshold has been crossed in week 6 (ending 12 February), with a cumulative of 105 suspected cases with 10 deaths (CFR 9.5%) reported between week 51 of 2022 (ending 25 December) and week 13 of 2023 (ending 2 April 2023). Twenty-two (22) cases have been laboratory-confirmed for Streptococcus pneumoniae. More than 80% of cases are aged above 10 years.
No case was reported this week. There were 2 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported in 2022. No cases were reported in 2021. There were nine cases in 2020, while the total number of cVDPV2 cases reported in 2019 remains at eight.

According to the Famine Early Warning Systems Network report covering projections from Oct 2022 to May 2023, below-average crop production and high food and non-food inflation are to drive acute food insecurity in Uganda. In Karamoja, significantly below-average crop production (estimated to be only around half of normal levels) for a third consecutive season and localized insecurity continue to disrupt typical livelihoods and reduce income-earning. According to the Integrated Food Security Phase Classification (IPC) initiative, Adjumani district is expected to be in IPC Phase 2 during the Aug 2022-Jan 2023 period. In the refugee hosting districts, all of them were classified in IPC Phase 1.

The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 25 March 2023, a total of 170 510 confirmed COVID-19 cases with 3 632 deaths were reported.

From 23 June 2022 to 17 January 2023, eight cases of Crimean-Congo haemorrhagic fever (CCHF) have been confirmed in Uganda from Kanungu (2), Masaka (2), Amuru (1), Kaberamaido (1), Nakasongola (1) and Rakai (1) districts with three deaths. The last confirmed case was registered on 4 December 2022.

A measles outbreak has been ongoing in Bunyoro Region of Uganda since 7 December 2022. As of 1 February 2023, a cumulative total of 144 suspect cases, 12 confirmed cases and no deaths have been reported since the onset of the outbreak.

A total of 20 cases of Rift Valley fever including 19 confirmed, one probable and four deaths have been reported for the ongoing outbreak in Uganda since January this year.

Among deaths, one is probable and three confirmed. The affected District are two : Mbarara district and City of Mbarara.

In 2022 and as of 20 March 2023, a total of 1 053 have been reported. Two cases were classified IgM+ in Kasese district and had not been previously vaccinated against yellow fever. Another case in Bukuwe also tested IgM+ and had unknown vaccination status.

Zambia’s index case was confirmed in Vubwi district on 21 January 2023 and was linked to the Mozambique outbreak. Cumulatively, 331 cases and eight deaths (CFR = 2.4%) have reported as of 9 April 2023. There are three districts in three provinces currently reporting cases; Chipata in Eastern Province, Nchelenge district in Luapula Province and Nsama and Mpulungundisteicts, the cholera hotspot area in Northern Province.

The first COVID-19 confirmed case was reported in Zambia on 20 March 2020. As of 26 March 2023, a total of 343 415 confirmed COVID-19 cases with 4 057 deaths were reported.

A measles outbreak continues to evolve in Lusaka, North-western and Southern provinces affecting several districts. Cumulatively, the provinces have recorded 2 137 measles cases and 31 deaths as of 5 February 2023. WHO is supporting the Ministry of Health investigating other cases with similar symptoms.

The anthrax outbreak is ongoing in Zimbabwe. In February 2023, four new cases have been reported from Gokwe North district. As of 5 March 2023, the cumulative figures for anthrax are 481 suspected cases and 0 deaths.

A total of 317 suspected cases of cholera with eight deaths were reported as of 27 March 2023. In addition, there have been 25 laboratory confirmed cases and six deaths reported. The District Rapid Response Team has been activated. Investigations are underway to determine the source of infection.

Zimbabwe has recorded 384 suspected cases of typhoid fever since 17 October 2022. Of these, 69 cases were reported in the last epidemiological week. The cases have been reported mainly from Harare Province and Bulawayo (6 cases) which are the largest cities in the country. Harare has heightened surveillance and has responded to the outbreak by rolling out TCV vaccine to the affected areas/suburbs.

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

Data are taken from the most recently available situation reports sent to WHO AFRO. Numbers are subject to change as the situations are dynamic.
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Data sources
Data and information is provided by Member States through WHO Country Offices via regular situation reports, teleconferences and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.