WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 16: 10 - 16 April 2023
Data as reported by: 17:00; 16 April 2023

1 New event
155 Ongoing events
133 Outbreaks
23 Humanitarian crises

Legend
- Malaria
- Measles
- Dengue fever
- Typhoid fever
- COVID-19
- Anthrax
- Yellow fever
- Measles
- Epidemic
- Skin disease of unknown etiology
- Countries outside WHO African Region
- Countries reported in the document
- Countries 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."
Overview

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

- Marburg virus disease in Equatorial Guinea
- Measles in Cameroon
- Mpox 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:

- As of the ninth week since its declaration, the ongoing outbreak of Marburg Virus Disease (MVD) in Equatorial Guinea has not spread to any new districts or provinces. WHO and other partners continue to support the government by strengthening different response activities however some gaps are yet to be solved including the establishment of transmission chains for all the reported cases, the identification of source of transmission and the required resources to be deployed in all the affected areas.

- The measles outbreak in Cameroon has continued to affect the country since the beginning of 2023. The main factors contributing to the outbreak include sup-optimal immunization coverage among the population, delay in case investigations, low response capacity at the decentralized level for information management, reporting and planning making responding difficult at the lower levels.
Ongoing events

Equatorial Guinea

Marburg Virus Disease

EVENT DESCRIPTION

Since the last report on this event covering week 13, 2023 (ending 2 April), one confirmed case and one confirmed death have been reported. The last confirmed case was reported on 7 April 2023 from Bata district.

As of 16 April 2023, 15 confirmed cases and 11 deaths have been reported since the declaration of the outbreak on 13 February 2023. Among the 15 confirmed cases, three are survivors, and one case has an unknown outcome. In addition, 23 probable cases have been reported.

A total of five districts (Bata, Ebebiyin, Evinayong, Nsok Nsomo and Nsork) in four provinces (Centro Sur, Kie Ntem, Litoral and Wele-Nzas) are affected by the outbreak, with Bata district reporting the majority of confirmed cases with nine cases (60.0%) and six deaths (54.5%). Other districts reporting confirmed cases are Ebebiyin (two cases), Evinayong (two cases), Nsork (one case). The district for one case is unknown. Ebebiyin district has reported the highest number of probable cases (11, 47.8%).

Among the confirmed cases, nine are female, five are male and one is unknown. The most affected age group remains 30-44 years with six cases reported, followed by the 0-14 years old age group and 45-64 years old group with three cases each. The number of health care workers infected remains four, of which two have died. Of the 11 deaths recorded among confirmed cases, six are from Bata district, two from Ebebiyin district, two from Evinayong district, and one from Nsork district.

Since the beginning of the outbreak, a total of 1 418 contacts have been listed, with 391 under active follow-up as of 16 April 2023. Most contacts were listed in Ebebiyin district (684), followed by Bata district (321), Nsok Nsomo district (159) and Evinayong district (102). Mongomo and Nsork districts have less than 100 cumulative number of contacts listed so far with 88 and 64 contacts listed, respectively. Of the 391 contacts under active follow-up, the majority (148) are in Bata district which is leading in number of confirmed cases, the contact to case ratio in Bata district is 35.7:1 which is relatively low compared to its high population density.

PUBLIC HEALTH ACTIONS

- The Government has activated a regional public health emergency operation center in Bata under the leadership of the Ministry of Health (MoH).
- Regular meetings are held by the MoH to coordinate response activities.
- An alert and dispatch call centre in Bata district for MVD alert management across the region has been established.
- Training for surveillance activities, including case investigation, contact tracing and active case search in health facilities and the community is ongoing. The revised case definition has been approved by the MoH and disseminated.
- Technical support to the MoH in epidemiological data collection and management system continues.
- With the support of United States Centers for Disease Control and Prevention, a laboratory with RT-PCR capacities has been set-up in Bata for diagnosis of MVD and discussions are ongoing to support the establishment of sequencing capacities.
- Trainings for health workers on Infection Prevention and Control measures are in progress, including decontamination and training on protocols for safe and dignified burials for the teams in charge.
- A needs and capacity assessment has been conducted to strengthen response capacities at points of entry.
- Coordination among key partners for joint support to Risk Communication and Community Engagement (RCCE) activities (UNICEF, IFRC etc.) under the MoH leadership is ongoing.
- Support to public awareness and capacity building for RCCE national experts, social mobilisers, and community leaders (religious leaders, women etc.) is ongoing.
SITUATION INTERPRETATION

While support from WHO and other partners to the government efforts are being intensified, the risks posed by the ongoing outbreak remain concerning. Efforts are still needed for the epidemiological investigations of all the reported cases to establish transmission chains and identify the source of the outbreak. There is also a need to improve surveillance and awareness, as the daily number of alerts registered so far remains relatively low.
An ongoing outbreak of measles is occurring in Cameroon where the disease is endemic. From weeks 1-13, 2023, a total of 1,440 suspected cases and no deaths have been reported in the country. Of the total reported cases, 223 have been confirmed with IgM+ results, 949 have had an epidemiological link, and 21 cases were clinically compatible with the measles case definition.

Centre region has reported the most cases accounting for 597 (42.6%) of the total amount of cases reported in 2023, followed by Littoral (381, 26.5%), Nord (146, 10.4%), Sud Ouest (92, 6.6%), Extreme Nord (82, 5.9%), Nord Ouest (59, 4.2%), Est (37, 2.6%), Ouest (22, 1.6%), Adamaoua (12, 0.9%), and Sud (12, 0.9%). The incidence rate of measles at the national level is 5.1 cases per 100,000 people with the highest burden in the Centre region at 11.3 cases per 100,000 people.

The epidemiological situation began to deteriorate around week 42 of 2022 (ending 23 October) towards a peak in week 6 of 2023 (ending 12 February).

From weeks 14, 2022 (ending 10 April 2022) to week 13, 2023 (ending 2 April), Cameroon has reported 3,212 cases. From week 14, 2022 to week 13, 2023, 83 health districts from 10 regions have reported active measles outbreaks. Of the total cases reported during this period, 12.6% have been among children aged 0-8 months and 54.1% have been among children aged 9 months to 5 years old.

From the same time period, 98.1% of cases have not been vaccinated against measles. Routine vaccination rates in 2022 are low among health districts that have been affected. As of February 2023, 27.2% of health districts that are experiencing active outbreaks had a routine round 1 vaccination coverage of less than 50%. Similarly, 79.2% of health districts that are experiencing active outbreaks had a routine round 2 vaccination rate of less than 50%. The optimal vaccination coverage for measles needs to be maintained around 95% or more in order to provide adequate immunity.

### PUBLIC HEALTH ACTIONS
- Case investigations are ongoing at the health district level.
- Response plans are being proposed (and in some cases implemented) at the health district level.
- Collection and regular transmission of measles case line lists.
- Epidemiological and immunization databases are being harmonized to provide a clearer picture of the data.
- Strengthening of the routine immunizations programme.
- Community awareness and social mobilization for immunization.

### SITUATION INTERPRETATION
The ongoing measles outbreak in Cameroon has continued with a declining trend since mid-February 2023. The most affected health districts still continue to have low rates of immunization while the risk profile remains similar with the majority of cases being unvaccinated children under the age of 5. Health districts have struggled to create response plans and make efforts towards encouragement of vaccination in the community.
Confirmed cases of measles in Cameroon, Week 14, 2022-Week 12, 2023

Distribution of suspected cases of measles in Cameroon, as of 2 April 2023

Go to overview | Go to map of the outbreaks
**EVENT DESCRIPTION**

Fourteen newly confirmed mpox cases were reported in the WHO African region in the past two weeks, resulting in a 5.6% increase. Three new deaths were reported. Of all reported cases, ten new cases were reported from the Democratic Republic of the Congo (DRC); seven for week 11 (ending 19 March 2023) and three for week 12 (ending 05 March).

Four new cases were reported from Nigeria in week 13 (ending 02 April). Only five African countries (Central African Republic (CAR), DRC, Ghana, Liberia and Nigeria) have reported mpox cases in 2023.

The number of mpox cases in DRC has increased from 440 to 450 (2.3% increase) as the country reported ten new cases in weeks 11 and 12. Since the start of 2023, DRC has reported 171 laboratory-confirmed cases. No laboratory-confirmed mpox related death has been reported from DRC since the outbreak in 2022. About half of the cases reported in DRC are females (50.7%), and a larger proportion is within the 0 – 14 years, (56.4%) age group.

The four newly reported cases in Nigeria in the past week have increased the number of mpox cases to 70 in 2023. Nigeria has cumulatively reported 833 cases from 1 January 2022 to 09 April 2023. The top five states reporting cases in Nigeria in 2023 include Lagos (19), Ogun (9), Abia (6), Edo (4), and Imo (4). Together, the five states reported (60.0%) cases in 2023. Most cases reported in 2023 are males (71%), and a larger proportion is within the 21 – 50 years (72.9%) age group.

Between 1 January 2022 and 16 April 2023, 1,502 laboratory-confirmed cases have been reported from 13 African countries, including Nigeria (833), the DRC (450), Ghana (124), CAR (29), Cameroon (18), Sudan (18), Liberia (9), Congo (5), South Africa (5), Benin Republic (3), Morocco (3), Egypt (1), and Mozambique (1).

The top three countries with the highest number of confirmed cases include Nigeria, 833 (55.5%), DRC 450 (30.0%), and Ghana, 124 (8.3%). Together, the three countries have reported 1,407 (93.7%) of all confirmed cases.

There are eight countries that recorded ongoing outbreaks in 2022 with no reported new mpox cases in 2023; Benin, Cameroon, Congo, Egypt, Mozambique, Morocco, South Africa, and Sudan.

Nineteen (19) deaths have been reported in the African region since 2022 from Nigeria (9), Ghana (4), Cameroon (3), CAR (1), Mozambique (1), and Sudan (1).

**PUBLIC HEALTH ACTIONS**

- Risk communication and community engagement activities, such as social listening, key message development, and capacity building for communication about control measures, are ongoing.
- WHO is supporting Nigeria and The Democratic Republic of the Congo in conducting an extensive epidemiological investigation on mpox.
- WHO is providing technical assistance and coordinating efforts to contain and prevent transmission of mpox in the region.
- WHO is leading efforts to enhance mpox surveillance and response across the region, with a focus on improving laboratory capacity, information management, and genomic sequencing.
- WHO is collaborating with countries to study the potential impact of mpox on animal populations and wastewater systems in Africa.
New mpox cases were reported from Nigeria and the Democratic Republic of the Congo in the past two weeks. Five countries have reported new cases in 2023, including the Central Africa Republic, the DRC, Ghana, Liberia, and Nigeria. DRC and Nigeria have been reporting weekly new mpox cases since January 2023.
Update on Reporting - Epidemiological Week 15: 10 – 16 April, 2023

Point du rapportage hebdomadaire – Semaine 15: 10 – 16 avril 2023

35 Countries out of 47, reported for week 15
74 % Completeness for weekly reporting
64 % Timeliness for weekly reporting

2023 Summary of Reporting - Frequency of weekly reports received at AFRO

<table>
<thead>
<tr>
<th>Country/Region</th>
<th>Week 15</th>
<th>Week 16</th>
<th>Week 17</th>
<th>Week 18</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Received on time</td>
<td>Received late</td>
<td>Missed submitted</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Africa</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Africa Central</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Africa Eastern</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Africa Western</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asia-West Pacific</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Europe</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle East</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>North America</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Week</th>
<th>Start Date</th>
<th>End Date</th>
<th>Deadline / Date limite</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>10-Avr. -2023</td>
<td>16-Avr. -2023</td>
<td>19-Avr. -2023</td>
</tr>
<tr>
<td>16</td>
<td>17-Avr. -2023</td>
<td>23-Avr. -2023</td>
<td>26-Avr. -2023</td>
</tr>
<tr>
<td>17</td>
<td>24-Avr. -2023</td>
<td>30-Avr. -2023</td>
<td>03-May -2023</td>
</tr>
<tr>
<td>18</td>
<td>01-May -2023</td>
<td>07-May -2023</td>
<td>10-May -2023</td>
</tr>
</tbody>
</table>

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
# All events currently being monitored by WHO AFRO

## New Events

<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>Guinea</td>
<td>Skin disease of unknown aetiology</td>
<td>Ungraded</td>
<td>12-Apr-23</td>
<td>12-Apr-23</td>
<td>13-Apr-23</td>
<td>53</td>
<td>0</td>
<td>0</td>
<td>0.0%</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.

## Ongoing Events

<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>Algeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Feb-20</td>
<td>25-Feb-20</td>
<td>9-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 182 894 recovered.

| Algeria | Poliomyelitis (cVDPV2) | Grade 2 | 14-Jul-22 | 11-Apr-22 | 22-Mar-23 | 2 | 2 | - | - |

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.

| Angola | COVID-19 | Grade 3 | 21-Mar-20 | 21-Mar-20 | 13-Apr-23 | 105 353 | 105 353 | 1 934  | 1.8%|

The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 13 April 2023, a total of 105 353 confirmed COVID-19 cases have been reported in the country with 1 934 deaths.

| Benin | COVID-19 | Grade 3 | 17-Mar-20 | 16-Mar-20 | 27-Feb-20 | 27 999 | 27 999 | 163 | 0.6%|

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 cases have been reported in the country, with 165 deaths and 27 830 recoveries.

| Benin | Mpox | Grade 3 | 14-Jun-22 | 14-Jun-22 | 1-Feb-23 | 3 | 3 | 0 | 0.0%|

Three suspected cases of Monkeypox were notified to WHO by the Benin Ministry of Health on 3 June 2022. Two of the three suspected cases were from Nigeria, and one person was from the North of the country. Laboratory samples were taken and sent to the Institute Pasteur laboratory in Dakar, which confirmed the three samples positive on 14 June 2022.

| Benin | Poliomyelitis (cVDPV2) | Grade 2 | 8-Aug-19 | 24-Aug-19 | 8-Mar-23 | 25 | 25 | 0 | 0.0%|

Two cVDPV2-positive environmental samples were reported this week, from Donga and Oueme provinces, collected in January and February 2023. There are 10 cases reported in 2022. Six cases were reported in 2021 and 2020, and 8 in 2019. In 2023, one cVDPV2-positive case has been reported, with onset of paralysis on 2 January 2023, from Littoral province.

## Botswana COVID-19 Grade 3 30-Mar-20 9-Apr-23 279 613 279 613 4 0.0%|

On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 14 March 2023, a total of 329 841 confirmed COVID-19 cases were reported in the country including 2 796 deaths.

| Botswana | Measles | Ungraded | 28-Mar-23 | 28-Mar-23 | 31-Mar-23 | 13 | 13 | 0 | 0.0%|

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.

| Burkina Faso | Humanitarian crisis (Sahel Region) | Grade 2 | 1-Jan-19 | 1-Jan-19 | 15-Mar-23 | 1 094 000 | - | - | - |

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 094000 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.

| Burkina Faso | COVID-19 | Grade 3 | 10-Mar-20 | 9-Mar-20 | 23-Mar-23 | 22 056 | 22 056 | 396 | 1.8%|

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.

| Burundi | Cholera | Grade 3 | 1-Jan-21 | 1-Jan-21 | 16-Apr-23 | 281 | 151 | 1 | 0.4%|

An outbreak of cholera has been declared in Burundi on 1 January 2023. As of 16 April 2023, 281 suspected cases and one death (CFR 0.4%) have been reported, including more than 151 laboratory-confirmed cases. The most affected age group is the 11-20 years (20.6%).

| Burundi | COVID-19 | Grade 3 | 31-Mar-20 | 18-Mar-20 | 22-Mar-23 | 53 686 | 53 686 | 15 | 0.0%|

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 poliovirus 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.

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 humanitarian 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 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 Charfi. The Ouzal Health Center was also attached by armed individuals in Mayo-Sava.

As of Week 13, of 2023 (ending 2 April), a total of 1 440 total confirmed cases including: 223 IgM+; 949 epidemiologically linked and 21 measles clinically compatible. A total of 83 districts experienced measles outbreaks this year.

From week 1 to week 13, 2023 (ending 2 April), 11 new suspected case of Mpox have been reported. Since January 2022 a total of 126 suspected cases including 18 confirmed and three deaths have been reported in the country.

From the beginning of the outbreak in February 2021 to 2 April 2023, 3 483 suspected cases of YF have been reported and investigated, including 84 laboratory-confirmed cases and 311 deaths (CFR 3.8%). From weeks 1-13 in 2023, 250 new suspected cases have been reported. Cases have been reported from all ten regions of the country in 2023, but Extreme Nord accounts for the most cases (47, 18.8%).

From week 1 to week 13, 2023 (ending 2 April), 11 new suspected case of Mpox have been reported. Since January 2022 a total of 126 suspected cases including 18 confirmed and three deaths have been reported in the country.

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.

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 others reported in 2021, and seven cases reported in 2020.

From the beginning of the outbreak in February 2021 to 2 April 2023, 3 483 suspected cases of YF have been reported and investigated, including 84 laboratory-confirmed cases among whom three have died (CFR 3.6%). From weeks 1-13 in 2023, 250 new suspected cases have been reported. Cases have been reported from all ten regions of the country in 2023, but Extreme Nord accounts for the most cases (47, 18.8%).

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 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 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 4 March 2022 through 27 March 2023, a total of 29 confirmed cases of Mpox and one death have been reported in the country. The number of mpox 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.
## Health Emergency Information and Risk Assessment

### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 16: 10-16 APRIL 2023

**Central African Republic**

**Yellow Fever**

- **Grade:** Ungraded
- **Date notified to WCO:** 17-Aug-21
- **Start of reporting period:** 1-Apr-21
- **End of reporting period:** 8-Jan-23
- **Total cases:** 767
- **Confirmed cases:** 23
- **Deaths:** 4
- **CFR:** 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. As of 8 January 2023, 767 suspected cases of YF have been reported including 6 probable and 23 lab-confirmed cases (14 cases in 2022). Two new suspected cases were reported in week 1 (ending 8 January). In total, five regions have so far been affected including RS1, RS2, RS3, RS4 and RS6; RS3 has reported 70% of confirmed cases.

### Chad

**Humanitarian crisis (Sahel region)**

- **Grade:** Ungraded
- **Start of reporting period:** 11-Feb-22
- **End of reporting period:** 1-Mar-23
- **Total affected districts:** 610000

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 of 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 381K internally displaced persons and hosts 596K refugees.

**COVID-19**

- **Grade:** Grade 3
- **Date notified:** 19-Mar-20
- **Start of reporting period:** 19-Mar-20
- **End of reporting period:** 26-Mar-23
- **Total cases:** 7688
- **Deaths:** 194
- **CFR:** 2.5%

The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 26 March 2023, a total of 7688 confirmed COVID-19 cases were reported in the country including 194 deaths.

### Democratic Republic of the Congo

**Poliomyelitis** (cVDPV2)

- **Grade:** Grade 2
- **Start of reporting period:** 24-May-19
- **End of reporting period:** 9-Apr-23
- **Total cases:** 30
- **Confirmed cases:** 30
- **Deaths:** 0
- **CFR:** 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.

**Humanitarian crisis**

- **Grade:** Protracted
- **Start of reporting period:** 20-Dec-16
- **End of reporting period:** 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 330 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, 26 new security incidents directly affecting humanitarian workers were recorded in the DRC.

**Cholera**

- **Grade:** Grade 3
- **Start of reporting period:** 16-Jan-15
- **End of reporting period:** 19-Mar-23
- **Total cases:** 7243
- **Deaths:** 47
- **CFR:** 0.6%

From epidemiological week 1 to 11, 2023, 7 245 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.

### Other Countries

**Côte d’Ivoire**

**COVID-19**

- **Grade:** Grade 3
- **Start of reporting period:** 11-Feb-22
- **End of reporting period:** 25-Mar-23
- **Total cases:** 25188
- **Deaths:** 389
- **CFR:** 1.6%

The Government of Côte d’Ivoire announced the confirmation of the first case of COVID-19 in Côte d’Ivoire on 14 March 2020. As of 16 April 2023, a total of 25 188 cases including 389 deaths have been reported in the country.

**Democratic Republic of the Congo**

**Cholera**

- **Grade:** Grade 3
- **Start of reporting period:** 16-Jan-15
- **End of reporting period:** 19-Mar-23
- **Total cases:** 7243
- **Deaths:** 47
- **CFR:** 0.6%

From epidemiological week 1 to 11, 2023, 7 245 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.

### Table: Epidemiological Events Reported to WCO

<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>Central African Republic</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>24-May-19</td>
<td>24-May-19</td>
<td>9-Apr-23</td>
<td>30</td>
<td>30</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Central African Republic</td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>17-Aug-21</td>
<td>1-Apr-21</td>
<td>8-Jan-23</td>
<td>767</td>
<td>23</td>
<td>4</td>
<td>0.5%</td>
</tr>
<tr>
<td>Chad</td>
<td>Measles</td>
<td>Ungraded</td>
<td>24-May-18</td>
<td>1-Jan-23</td>
<td>19-Mar-23</td>
<td>2 766</td>
<td>332</td>
<td>3</td>
<td>0.1%</td>
</tr>
<tr>
<td>Chad</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>18-Oct-19</td>
<td>9-Sep-19</td>
<td>9-Apr-23</td>
<td>164</td>
<td>164</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Chad</td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>13-Nov-21</td>
<td>1-Nov-21</td>
<td>2-Apr-23</td>
<td>2 753</td>
<td>31</td>
<td>7</td>
<td>0.3%</td>
</tr>
<tr>
<td>Chad</td>
<td>Measles</td>
<td>Ungraded</td>
<td>24-May-18</td>
<td>1-Jan-23</td>
<td>19-Mar-23</td>
<td>2 766</td>
<td>332</td>
<td>3</td>
<td>0.1%</td>
</tr>
<tr>
<td>Comoros</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>30-Apr-20</td>
<td>30-Apr-20</td>
<td>14-Apr-23</td>
<td>9 104</td>
<td>9 104</td>
<td>161</td>
<td>1.8%</td>
</tr>
<tr>
<td>Congo</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>16-Apr-23</td>
<td>25 188</td>
<td>25 188</td>
<td>389</td>
<td>1.6%</td>
</tr>
<tr>
<td>Congo</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>23-May-22</td>
<td>1-Jan-22</td>
<td>2-Apr-23</td>
<td>5</td>
<td>5</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Democratic Republic of Congo</td>
<td>Humanitarian crisis</td>
<td>Protracted</td>
<td>20-Dec-16</td>
<td>17-Apr-17</td>
<td>19-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>11-Mar-20</td>
<td>11-Mar-20</td>
<td>7-Apr-23</td>
<td>88 308</td>
<td>88 308</td>
<td>834</td>
<td>0.9%</td>
</tr>
<tr>
<td>Democratic Republic of Congo</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>16-Jan-15</td>
<td>1-Jan-23</td>
<td>19-Mar-23</td>
<td>7 243</td>
<td>462</td>
<td>47</td>
<td>0.6%</td>
</tr>
</tbody>
</table>

Since as of 28 Feb 2023, Chad has 381K internally displaced persons and hosts 596K refugees.
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%) have been reported 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.

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.

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 Clade I.

According to the Global Polio Eradication Initiative (GPEI), this week, one cVDPV1 case was reported in Haut Katanga bringing the total number of 2023 cases to nine. There were 132 cVDPV1 cases reported in 2022.

For this week, the Global Polio Eradication Initiative (GPEI), Six cVDPV2 cases were reported; one each in Haut Lomami and Tshopo and four in Kasai Oriental bringing the total number of 2023 cases to 14. There were 344 cVDPV2 cases reported in 2022.

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.

A total of 15 confirmed cases and 11 deaths since the declaration of the outbreak on 13 February 2023 through 10 April 2023 have been reported. Among the 15 confirmed cases, three are survivors, 11 deaths and one with unknown outcome.

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.

No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in week 14, 2023 (ending 9 Apr 2023). There has so far been one case reported in 2022 and another one reported in 2021. This latter one was however confirmed on 2 June 2022 by the Ethiopian National Polio laboratory.

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. 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.

The first case of COVID-19 was confirmed in the kingdom of Eswatini on 17 March 2020. As of 14 April 2023, a total of 74,520 cases have been reported with 1,425 associated deaths.
Health Emergency Information and Risk Assessment

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 16: 10-16 APRIL 2023**

- **Ethiopia**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 13-Apr-17
    - Start of reporting period: 1-Jan-22
    - End of reporting period: 31-Dec-23
    - Total cases: 500 774
    - Cases Confirmed: 500 774
    - Deaths: 7 574
    - CFR: 1.5%

- **Guinea**
  - **Lassa Fever**
    - Grade: Ungraded
    - Date notified to WHO: 21-Mar-23
    - Start of reporting period: 27-Mar-23
    - End of reporting period: 17-Apr-23
    - Total cases: 3 270
    - Cases Confirmed: 3 270
    - Deaths: 51
    - CFR: 2.2%

- **Ethiopia**
  - **Cholera**
    - Grade: Ungraded
    - Date notified to WHO: 12-Mar-20
    - Start of reporting period: 1-Mar-20
    - End of reporting period: 7-Apr-23
    - Total cases: 12 586
    - Cases Confirmed: 12 586
    - Deaths: 467
    - CFR: 3.0%

- **Gambia**
  - **COVID-19**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 1-Mar-20
    - End of reporting period: 4-Nov-22
    - Total cases: 12 586
    - Cases Confirmed: 12 586
    - Deaths: 372
    - CFR: 3.0%

- **Ghana**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 1-Mar-20
    - End of reporting period: 16-Apr-23
    - Total cases: 4 126
    - Cases Confirmed: 4 126
    - Deaths: 3
    - CFR: 0.1%

- **Ghana**
  - **COVID-19**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 1-Mar-20
    - End of reporting period: 7-Apr-23
    - Total cases: 1 182
    - Cases Confirmed: 1 182
    - Deaths: 1
    - CFR: 0.8%

- **Ghana**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 1-Mar-20
    - End of reporting period: 16-Apr-23
    - Total cases: 4 126
    - Cases Confirmed: 4 126
    - Deaths: 3
    - CFR: 0.1%

- **Ghana**
  - **Lassa Fever**
    - Grade: Ungraded
    - Date notified to WHO: 9-Feb-20
    - Start of reporting period: 9-Feb-20
    - End of reporting period: 24-Feb-20
    - Total cases: 27
    - Cases Confirmed: 27
    - Deaths: 4
    - CFR: 14.8%

- **Ghana**
  - **Polio**
    - Grade: Ungraded
    - Date notified to WHO: 24-Mar-20
    - Start of reporting period: 24-Mar-20
    - End of reporting period: 5-Apr-20
    - Total cases: 123
    - Cases Confirmed: 123
    - Deaths: 4
    - CFR: 3.3%

- **Ghana**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 9-Feb-20
    - Start of reporting period: 9-Feb-20
    - End of reporting period: 24-Feb-20
    - Total cases: 27
    - Cases Confirmed: 27
    - Deaths: 1
    - CFR: 3.7%

- **Guinea**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 17-Mar-20
    - End of reporting period: 16-Apr-23
    - Total cases: 4 126
    - Cases Confirmed: 4 126
    - Deaths: 3
    - CFR: 0.1%

- **Guinea**
  - **COVID-19**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 17-Mar-20
    - End of reporting period: 4-Nov-22
    - Total cases: 12 586
    - Cases Confirmed: 12 586
    - Deaths: 467
    - CFR: 3.7%

- **Guinea**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 17-Mar-20
    - End of reporting period: 16-Apr-23
    - Total cases: 4 126
    - Cases Confirmed: 4 126
    - Deaths: 3
    - CFR: 0.1%

- **Guinea**
  - **COVID-19**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 17-Mar-20
    - End of reporting period: 4-Nov-22
    - Total cases: 12 586
    - Cases Confirmed: 12 586
    - Deaths: 467
    - CFR: 3.7%

- **Guinea**
  - **Measles**
    - Grade: Ungraded
    - Date notified to WHO: 17-Mar-20
    - Start of reporting period: 17-Mar-20
    - End of reporting period: 16-Apr-23
    - Total cases: 4 126
    - Cases Confirmed: 4 126
    - Deaths: 3
    - CFR: 0.1%
Malawi is responding to its worst humanitarian crisis to date in the aftermath of tropical cyclone Freddy landfall on 12 March 2023. This weather system affected more than two million people, causing 679 deaths with an additional 537 people reported as missing, as of 29 March 2023. More than 600 000 people lost their homes and have been obliged to relocate in accommodation centres set up by the Government across 14 affected districts.

The situation in the Great Southeast of Madagascar could get even worse following cyclone Freddy, which hit on the night of February 21, 2023. Tropical Storm Freddy has become one of the longest-tracked tropical systems of all time. Agriculture production and other livelihoods have been destroyed which could result in a rapid deterioration of the food security situation if assistance is not provided. The affected households are in need of food assistance as well as livelihood support to salvage the agricultural season, including for corn, beans, Bambara peas, and market gardening.

On 25 March 2023, 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 being continuous from year 2022. The outbreak has affected eight counties in 2023: Garissa, 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.

A total of 29 districts have reported Cholera cases since the confirmation of the first case in Machinga district. As of 16 April 2023, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 57 843 and 1 737 respectively, with Case Fatality Rate at 3.0%.

Liberia has recorded a total of 8 102 cases including 294 deaths and 7 783 recoveries have been reported.
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 12 March 2023, a total of 171,222 confirmed cases with 4,090 deaths have been reported.

Of 13 of the country's 75 health districts (17.3%).

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 humanitarian crisis 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 Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 14 April 2023, a total of 298,814 confirmed COVID-19 cases and 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.

The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 14 April 2023, a total of 233,334 confirmed COVID-19 cases with 2,686 deaths.
Humanitarian access in Niger has deteriorated because of growing insecurity in Diffa, Maradi, Tahoua, and Tillabéri regions. Niger hosts 850,838 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).

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.

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% (6/72) of the districts of Niger notified at least one suspected case of measles during this reporting period.

A meningitis outbreak has been declared in the Dungass health district in the Zinder region. The first case was reported on 31 October 2022 and confirmed on 23 November 2022 with Neisseria meningitidis identified as the causative agent. As of 26 February 2023, 911 suspected cases of meningitis including 105 laboratory confirmed cases and 30 deaths (CFR 3.3%) were reported.

One cVDPV2-positive environmental sample was reported this week, collected on 23 January 2023 from Niamey. There are 15 cases reported in 2022. There were 18 cases reported in 2021.

Niger reported on 23 February 2023 a confirmed case of Rift Valley fever (RVF) following laboratory confirmation in a 38-year-old male resident of the village of Zangon Natsira in Zinder region.

The conflict in northeastern, northwestern, and north central Nigeria affects 9.3 million people, including 5.7 million children. Of these, more than 2.5 million people are internally displaced, while one million live in inaccessible areas. Humanitarian crises caused by protracted armed conflict, armed violence, and community clashes between farmers and herdsmen have resulted in alarming food insecurity and malnutrition, compounded by epidemics and childhood illnesses in the context of deteriorating water, sanitation, and hygiene conditions.

The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 7 April 2023, a total of 266,675 confirmed cases with 259,953 recovered and 3,155 deaths have been reported.

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.

<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>Nigeria</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>1-Feb-15</td>
<td>1-Feb-15</td>
<td>16-Dec-22</td>
<td>580,838</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>19-Mar-20</td>
<td>19-Mar-20</td>
<td>18-Feb-23</td>
<td>9,512</td>
<td>9,512</td>
<td>315</td>
<td>3.3%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Measles</td>
<td>Ungraded</td>
<td>5-Apr-22</td>
<td>1-Jan-22</td>
<td>18-Mar-23</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>7-Dec-22</td>
<td>31-Oct-22</td>
<td>26-Mar-23</td>
<td>911</td>
<td>105</td>
<td>30</td>
<td>3.3%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>1-Jan-20</td>
<td>1-Jan-21</td>
<td>22-Mar-23</td>
<td>31</td>
<td>33</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>1-Oct-16</td>
<td>10-Oct-16</td>
<td>13-Jan-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>27-Feb-20</td>
<td>27-Feb-20</td>
<td>7-Apr-23</td>
<td>266,675</td>
<td>266,675</td>
<td>3,155</td>
<td>1.2%</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>Diphtheria</td>
<td>Grade 1</td>
<td>1-Dec-22</td>
<td>1-Dec-22</td>
<td>4-Mar-23</td>
<td>1,064</td>
<td>389</td>
<td>62</td>
<td>5.8%</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>Lassa Fever</td>
<td>Ungraded</td>
<td>8-Jan-23</td>
<td>1-Jan-23</td>
<td>26-Mar-23</td>
<td>827</td>
<td>823</td>
<td>144</td>
<td>17.4%</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>Measles</td>
<td>Grade 2</td>
<td>1-Oct-16</td>
<td>1-Jan-22</td>
<td>29-Mar-23</td>
<td>829</td>
<td>829</td>
<td>9</td>
<td>1.1%</td>
</tr>
</tbody>
</table>

<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>Nigeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>1-Jun-18</td>
<td>1-Jan-22</td>
<td>22-Mar-23</td>
<td>48</td>
<td>48</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<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>Rwanda</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>26-Feb-23</td>
<td>133,194</td>
<td>133,194</td>
<td>1,468</td>
<td>-</td>
</tr>
</tbody>
</table>

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.
**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 16: 10-16 APRIL 2023**

### South Sudan

- **Floods Ungraded**
  - **Country:** South Sudan
  - **Event:** Floods
  - **Date notified to WCO:** 14-Mar-23
  - **Start of reporting period:** 14-Mar-23
  - **End of reporting period:** 21-Mar-23
  - **Total cases:** 38,978
  - **Cases Confirmed:** 8,897
  - **Deaths:** 1,971
  - **CFR:** 2.2%

In South Sudan, 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 Mpunamula, 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.

### Sao Tome and Principe

- **COVID-19**
  - **Country:** Sao Tome and Principe
  - **Event:** COVID-19
  - **Grade:** Grade 3
  - **Date notified to WCO:** 7-Apr-20
  - **Start of reporting period:** 6-Apr-20
  - **End of reporting period:** 2-Apr-23
  - **Total cases:** 6,500
  - **Cases Confirmed:** 6,500
  - **Deaths:** 79
  - **CFR:** 1.2%

On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country’s first case of COVID-19. As of 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.

### Senegal

- **Measles**
  - **Country:** Senegal
  - **Event:** Measles
  - **Grade:** Ungraded
  - **Date notified to WCO:** 14-Nov-22
  - **Start of reporting period:** 1-Jan-23
  - **End of reporting period:** 26-Mar-23
  - **Total cases:** 31
  - **Cases Confirmed:** 31
  - **Deaths:** 0
  - **CFR:** 0.0%

A total of 31 dengue confirmed cases including 10 males and 21 females have been reported in Thilong (30) and Popenguine (1) districts from week 1 to week 12 of 2023. In 2022, 238 cases were recorded including 203 confirmed by PCR (85.3%) and 35 by IgM testing (14.7%). They were mostly concentrated in the first and last quarters of 2022. Eleven regions were affected. The Matam region had reported the highest number of cases (134 cases, 56.3%), followed by Dakar (41 cases, 17.2%), Kaffrine (17 cases, 7.1%), and Thiès (17 cases, 7.1%).

### Seychelles

- **COVID-19**
  - **Country:** Seychelles
  - **Event:** COVID-19
  - **Grade:** Grade 3
  - **Date notified to WCO:** 14-Mar-20
  - **Start of reporting period:** 1-Jan-23
  - **End of reporting period:** 26-Mar-23
  - **Total cases:** 50,937
  - **Cases Confirmed:** 50,937
  - **Deaths:** 125
  - **CFR:** 0.3%

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.

### Sierra Leone

- **Measles**
  - **Country:** Sierra Leone
  - **Event:** Measles
  - **Grade:** Ungraded
  - **Date notified to WCO:** 1-Nov-21
  - **Start of reporting period:** 1-Jan-22
  - **End of reporting period:** 31-Dec-22
  - **Total cases:** 1,174
  - **Cases Confirmed:** 178
  - **Deaths:** 0
  - **CFR:** 0.0%

By 31 December 2022 (Week 52), 16 out of 16 districts reported a total of 1,174 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.

- **COVID-19**
  - **Country:** Sierra Leone
  - **Event:** COVID-19
  - **Grade:** Grade 3
  - **Date notified to WCO:** 31-Mar-20
  - **Start of reporting period:** 27-Mar-20
  - **End of reporting period:** 13-Mar-23
  - **Total cases:** 7,763
  - **Cases Confirmed:** 7,763
  - **Deaths:** 125
  - **CFR:** 1.6%

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 4,898 recovered cases.

### South Africa

- **Floods**
  - **Country:** South Africa
  - **Event:** Floods
  - **Grade:** Ungraded
  - **Date notified to WCO:** 14-Feb-23
  - **Start of reporting period:** 13-Feb-23
  - **End of reporting period:** 10-Mar-23
  - **Total cases:** -
  - **Cases Confirmed:** -
  - **Deaths:** -
  - **CFR:** -

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.

- **Cholera**
  - **Country:** South Africa
  - **Event:** Cholera
  - **Grade:** Grade 3
  - **Date notified to WCO:** 3-Feb-23
  - **Start of reporting period:** 3-Feb-23
  - **End of reporting period:** 6-Apr-23
  - **Total cases:** 11
  - **Cases Confirmed:** 11
  - **Deaths:** 1
  - **CFR:** 9.1%

Gauteng Province has reported 11 cases cumulatively, and one death since January 2023. Since the upsurge of cases in the African region in the last quarter of 2022, Gauteng provincial DoH has been working on strengthening efforts towards cholera readiness, preparedness, and response activities. A total of 64% (7/11) of cases are suspected cholera 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 cases. Surveillance and immunisation activities have been intensified in all districts.

- **COVID-19**
  - **Country:** South Africa
  - **Event:** COVID-19
  - **Grade:** Grade 3
  - **Date notified to WCO:** 5-Mar-20
  - **Start of reporting period:** 5-Mar-20
  - **End of reporting period:** 7-Apr-23
  - **Total cases:** 4,072,533
  - **Cases Confirmed:** 4,072,533
  - **Deaths:** 102,595
  - **CFR:** 2.5%

Since the first COVID-19 confirmed cases were reported in South Africa through 7 April 2023, a cumulative total of 4,072,533 confirmed cases and 102,595 deaths have been reported.

- **Mpx**
  - **Country:** South Africa
  - **Event:** Mpx
  - **Grade:** Grade 3
  - **Date notified to WCO:** 23-Jun-22
  - **Start of reporting period:** 23-Jun-22
  - **End of reporting period:** 14-Apr-23
  - **Total cases:** 5
  - **Cases Confirmed:** 5
  - **Deaths:** 0
  - **CFR:** 0.0%

From 22 June 2022 to 14 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 Johannesburg (n = 1) provinces. No new cases have been reported since October 2022.

- **Drought/food insecurity**
  - **Country:** South Sudan
  - **Event:** Drought/food insecurity
  - **Grade:** Grade 3
  - **Date notified to WCO:** 18-Dec-20
  - **Start of reporting period:** 5-Apr-21
  - **End of reporting period:** 16-Mar-23
  - **Total cases:** 6,310,000
  - **Cases Confirmed:** -
  - **Deaths:** -
  - **CFR:** -

The food insecurity situation in South Sudan is projected to worsen during the lean season from April-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.

- **Floods**
  - **Country:** South Sudan
  - **Event:** Floods
  - **Grade:** Ungraded
  - **Date notified to WCO:** 7-Oct-22
  - **Start of reporting period:** 28-Feb-23
  - **End of reporting period:** 1,000,000
  - **Total cases:** -
  - **Cases Confirmed:** -
  - **Deaths:** -
  - **CFR:** -

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 state including Bentiu and into Jonglei State. An estimated 7,380 people are displaced by flooding in areas of Rubkonha county.
An estimated 9.4 million people including 2.2 million women, 4.9 million children, and 337K refugees are projected to need humanitarian assistance and protection services in 2023. Communities faced critical needs in January 2023 owing to the impact of multiple emergencies such as recurring subnational violence, food insecurity, flooding, inaccessibility, and public health emergencies. Floodwater levels remained high in Bentiu and Rubkona towns in Unity, and multiple locations in Jonglei and Upper Nile impeding livelihood activities, exposing people to waterborne diseases, and disrupting the provision of basic services. United Nations Mission in South Sudan brought the communities of Yorika (Tijor in Juba County) and Jonkop-Papaya (Rejon in Terekeka County) together for a peace and reconciliation conference resulting in nine concrete resolutions.

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

The choler 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.

Since June 2022, Tanzania is experiencing measles outbreaks, cumulatively 3 811 suspected measles cases have been tested, resulting in cumulative 710 laboratory confirmed measles cases and 11 deaths (CFR 0.3%) and 313 laboratory confirmed rubella cases. Currently measles outbreak is ongoing in 12 councils of the following districts: Muleba, Tabora, Bagamoyo, Sumbawanga, Nzega, Chakechake, Sumbawanga, Chunya, Mtwar, Uvinza, Mpimbwe and Malinyi.

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 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.
# Weekly Bulletin on Outbreaks and Other Emergencies - Week 16: 10-16 April 2023

<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>Uganda</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>21-Mar-20</td>
<td>21-Mar-20</td>
<td>25-Mar-23</td>
<td>170,510</td>
<td>170,510</td>
<td>3,632</td>
<td>2.1%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Crimean-Congo haemorrhagic fever (CCHF)</td>
<td>Ungraded</td>
<td>23-Oct-22</td>
<td>12-Jul-22</td>
<td>17-Jan-23</td>
<td>8</td>
<td>8</td>
<td>3</td>
<td>37.5%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Measles</td>
<td>Ungraded</td>
<td>8-Dec-22</td>
<td>2-Feb-23</td>
<td>1-Feb-23</td>
<td>144</td>
<td>12</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rift Valley fever</td>
<td>Ungraded</td>
<td>1-Mar-23</td>
<td>2-Mar-23</td>
<td>17-Mar-23</td>
<td>20</td>
<td>19</td>
<td>4</td>
<td>20.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zambia</td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>7-Mar-22</td>
<td>2-Jan-22</td>
<td>20-Mar-23</td>
<td>1,053</td>
<td>3</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cholera</td>
<td>Grade 3</td>
<td>24-Jan-23</td>
<td>20-Jan-23</td>
<td>16-Apr-23</td>
<td>334</td>
<td>103</td>
<td>8</td>
<td>2.4%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>18-Mar-20</td>
<td>18-Mar-20</td>
<td>14-Apr-23</td>
<td>343,753</td>
<td>343,753</td>
<td>4,058</td>
<td>1.2%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>Anthrax</td>
<td>Ungraded</td>
<td>20-Jan-20</td>
<td>1-Jan-22</td>
<td>19-Mar-23</td>
<td>491</td>
<td>88</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cholera</td>
<td>Grade 3</td>
<td>23-Feb-23</td>
<td>12-Feb-23</td>
<td>27-Mar-23</td>
<td>317</td>
<td>25</td>
<td>8</td>
<td>2.5%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>20-Mar-20</td>
<td>20-Mar-20</td>
<td>4-Apr-23</td>
<td>264,555</td>
<td>264,555</td>
<td>5,681</td>
<td>2.1%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Typhoid fever</td>
<td>Ungraded</td>
<td>17-Oct-22</td>
<td>17-Oct-22</td>
<td>19-Mar-23</td>
<td>384</td>
<td>28</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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 Bukwe also tested IgM+ and had unknown vaccination status.

Zambia’s case index was confirmed in Vubwi district on 21 January 2023 and was linked to the Mozambique outbreak. Cumulatively, 334 cases and eight deaths (CFR = 2.4%) have reported as of 16 April 2023. There are three districts in three provinces currently reporting cases; Chipata in Eastern Province, Nchelenge district in Luapula Province and Nsama and Mufumbwe Districts, the cholera hotspot area in Northern Province.

The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 14 April 2023, a total of 343,753 confirmed COVID-19 cases were reported in the country including 4,058 deaths.

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 investing 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 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.

<table>
<thead>
<tr>
<th>Closed Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namibia</td>
</tr>
</tbody>
</table>

A single patient has been confirmed for West Nile Virus and Chikungunya and was reported in the Ondjokwe District, Oshikoto Region, Namibia. The patient presented on 19 Feb 2023 and was reported on 8 Mar 2023 as positive for both diseases by the National Institute of Pathology.
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.