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

- Dengue fever in Ethiopia
- Measles in Mauritania

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:**

- There is an ongoing dengue fever outbreak in Afar region situated in the north-eastern part of Ethiopia since April 2023 and the affected districts are Logia and Mille. Afar region is one of the recently flood-affected regions (together with Somali, Oromia, Southern Nations Nationalities & Peoples, and South-west Ethiopia Peoples) following a short rainy season between February and April. With the ongoing floods producing stagnant waters, which become breeding grounds for mosquitoes, the region is also struggling to control the spread of malaria while facing the ongoing dengue fever outbreak. Ethiopia is one of the African countries experiencing recurrent emergency situations requiring support from its international partners to mitigate impact on the population lives.

- The ongoing measles outbreak in Mauritania has affected 28 districts (Mouaghataa) in 11 regions (wilayas) this year, with most cases reported from Bassiknou district, home to an affected refugee camp. Two additional districts reported confirmed cases in the last reporting week. There are challenges in monitoring travellers at border crossings, underreporting of suspected cases, weak community surveillance, and low immunization coverage among the population, as the last follow-up campaign was conducted in 2018.
Ongoing events

ETHIOPIA

DENGUE FEVER

EVENT DESCRIPTION
Since 4 April 2023, two districts (Logia and Mille) of Afar region in north-eastern Ethiopia are experiencing Dengue fever outbreak. As of 10 May 2023, a total of 1,638 suspected and confirmed cases and nine associated deaths (case fatality ratio= 0.5%) have been reported. Mille district has reported most cases (1,573, 96%) while Logia district has reported 4% (65) of the total cases. Of the nine suspected deaths reported, four occurred at the health facility and five at community level.

Of the 10 samples tested by Reverse Transcriptase – Polymerase Chain Reaction (RT-PCR), eight (80%) were positive for Dengue virus. Furthermore, 48 (50%) samples out of 97 tested through Rapid Diagnostic Tests (RDTs) in Mille district were positive while 47 (67%) samples out of 70 tested in Logia district were also positive for Dengue fever with RDTs.

Out of the 1,615 cases listed, 837 (51.1%) are male and 778 are female (48.0%). Most cases are 15 years old and above (1,147, 70%). Most common clinical manifestations were joint pain (99.4%), headache (98%), chills (97%), vomiting (80%) and fever (64%).

As per the epi-curve, the trend in number of reported cases increased from 11 April and peaked on 22 April, 11 days of the ascending phase of the first wave, followed by a decrease in number of cases reported through 10 May.

PUBLIC HEALTH ACTIONS
- Response activities are being coordinated by Afar regional Emergency Operating Centre and coordination meeting are being organized with health cluster partners working in Afar region.
- Dengue fever response plan was developed and shared with partners and stakeholders for support.
- Surveillance tools (case definition, line list form, guidelines) distributed to at-risk districts.
- Line listing of cases at health facility still ongoing as well as daily data cleaning, analysis, and visualization
- Case management of cases still ongoing at Mille and Logia health centers
- Training on Dengue fever outbreak response was provided to health workers in the afar region and onsite orientation was provided to Dubti General hospital staff on Dengue fever.
- Sensitization and social mobilization activities are conducted in neighbouring districts (Aysaita, Chifra, Adaar, and Dubti) as well as in the two affected districts (Logia and Mille).
- Entomological survey activities were conducted, and onsite orientation was provided about vector behavior and control measure for district Health office worker, health facility staff, kebele leaders, schoolteachers and visited household’s head.

SITUATION INTERPRETATION
Dengue fever infections were first reported in Ethiopia in 2013 when a dengue fever related outbreak occurred in Dire Dawa city administration. Since then, dengue cases and outbreaks have increased with a significant public health impact. Ethiopia has had nearly annual outbreaks since 2013, devastating an already fragmented health system and economy. Some of the following contributing
Factors for contracting dengue in Ethiopia have been reported: non-uses of bed nets, the presence of stagnant water around communities, and the weakened nutritional status of the population due to prolonged drought. The control on the ongoing outbreak is facing some challenges, among these are include the poor surveillance system in the affected areas and limited vector control and environmental management activities.

**Distribution of cases of Dengue fever in affected districts in Ethiopia, as of 10 May 2023**

**Trend of Dengue Fever outbreak, 4 April to 10 May 2023**
Measles

**EVENT DESCRIPTION**

According to our last update on measles in Mauritania published weekly bulletin 20, 47 additional suspected cases, 17 laboratory confirmed cases and one death were reported as of 14 May 2023. Two new districts have reported confirmed cases.

Cumulatively, since the beginning of the year and as of 14 May 2023, 332 suspected cases were reported. Of the suspected cases, (61%) 203 were confirmed, of which 128 were laboratory-confirmed and 75 were epidemiologically linked. A total of four deaths were reported, resulting in a case fatality rate of 2.0%.

The confirmed cases originate from 28 districts (moughataas) in 11 regions (wilayas). Of the affected districts, 17 have crossed the epidemic threshold since the beginning of the year, including 10 districts currently reporting an active outbreak. The most affected districts are Bassiknou (52.7 cases per 100,000 inhabitants), Touil (41.5 cases per 100,000 inhabitants), Aoujet (31.7 cases per 100,000 inhabitants) and Ksar (25.2 cases per 100,000 inhabitants).

In Bassiknou district, cases have been recorded mainly in the Malian refugee camp of M’berra. The highest number of confirmed cases was recorded in the 15 years and older age group with 64 cases, followed by the 5-14 years age group with 57 cases, 1-4 years with 51 cases and <1 year with 31 cases. The <1 year age group has the highest attack rate of 19.4%. The male-to-female sex ratio of confirmed cases is 0.8. Among children aged 9-59 months, 57% were not vaccinated against measles.

**PUBLIC HEALTH ACTIONS**

- The National Public Health Emergency Operations Center was activated and an Incident Management System was established on 14 March 2023.
- Samples are being analyzed at the National Institute for Public Health Research (INRSP) in Nouakchott. Cumulatively, 217 samples were collected and tested, of which 128 were IgM positive. Two (2) cases of rubella were also recorded.
- An emergency vaccination campaign in Nouakchott is being planned.
- Other public health activities include enhanced surveillance, investigation, case management, public awareness, etc.

**SITUATION INTERPRETATION**

The trend in confirmed measles cases reported in Mauritania remains high. This situation could be related to the gradual build-up of susceptible unvaccinated populations, in particular the population of the M’berra refugee camp. In addition, follow-up vaccination campaigns have not been organized since 2018.

Mauritania

203 Cases 4 Deaths 2.0% CFR
Distribution of confirmed cases of measles in affected Wilaya of Mauritania, as of Week 19, 2023

Confirmed cases (IgM+ and epidemiologically linked) of measles in Mauritania, week 52, 2022 to week 18, 2023
Update on Reporting - Epidemiological Week 19: 08 – 14 May, 2023
Point du rapportage hebdomadaire – Semaine 19: 08 – 14 mai 2023

Please, refer to the calendar below to submit your IDS 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

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

| All regions and countries | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 |
| **AFRO**                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| **All countries**         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

### Reminder: Upcoming deadlines for weekly data submission

**Rappel** : Dates limites prochaines de soumission des données hebdomadaires

<table>
<thead>
<tr>
<th>Week 18</th>
<th>Week 19</th>
<th>Week 20</th>
<th>Week 21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start date</td>
<td>01-May - 2023</td>
<td>08-May - 2023</td>
<td>15-May - 2023</td>
</tr>
<tr>
<td>End date</td>
<td>07-May - 2023</td>
<td>14-May - 2023</td>
<td>21-May - 2023</td>
</tr>
<tr>
<td>Deadline / Date limite</td>
<td>10-May - 2023</td>
<td>17-May - 2023</td>
<td>24-May - 2023</td>
</tr>
</tbody>
</table>

**AFRO** Regional Office for Africa
Manager (Dr Etien Luc Koua)

All the correspondences related to this document should be directed to
Dr Etien Luc KOUA
AFRO Regional Office for Africa
WHO/EPR/Africa/AFRO
Health Emergency Information and Risk Assessment Programme

2031 Countries out of 47, reported for week 19
66 % Completeness for weekly reporting
55 % Timeliness for weekly reporting
### 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><strong>New Events</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>17-May-23</td>
<td>8-May-23</td>
<td>8-May-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.00%</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>A polymerase chain reaction (PCR)-positive case of yellow fever was reported in Côte d’Ivoire on 8 May following confirmation at the Institut Pasteur in Dakar. The patient is a 35-year-old male from Cocody-Bengerville in Abidjan. His yellow fever vaccination status is unknown. The date of onset of illness is 4 April 2023 and the sample was collected on 6 April 2023.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethiopia</td>
<td>Dengue</td>
<td>Ungraded</td>
<td>16-May-23</td>
<td>10-May-23</td>
<td>10-May-23</td>
<td>1 638</td>
<td>103</td>
<td>9</td>
<td>0.50%</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>Since 4 April 2023, two districts (Logia and Milie) in the Afar region of northeastern Ethiopia have been experiencing an outbreak of dengue fever. As of 10 May 2023, a total of 1 638 suspected and confirmed cases and nine associated deaths (case fatality ratio = 0.5%) have been reported.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Ongoing Events</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Algeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Feb-20</td>
<td>25-Feb-20</td>
<td>21-May-23</td>
<td>271 822</td>
<td>271 822</td>
<td>6 881</td>
<td>2.50%</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>From 25 February 2020 to 21 May 2023, a total of 271 822 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 183 038 recovered.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Angola</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>21-Mar-20</td>
<td>21-Mar-20</td>
<td>20-Apr-23</td>
<td>105 384</td>
<td>105 384</td>
<td>1 934</td>
<td>1.80%</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>The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 20 April 2023, a total of 105 384 confirmed COVID-19 cases have been reported in the country with 1 934 deaths.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benin</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>17-Mar-20</td>
<td>16-Mar-20</td>
<td>26-Mar-23</td>
<td>28 014</td>
<td>28 014</td>
<td>163</td>
<td>0.60%</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>The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 26 March 2023, a total of 28 014 cases have been reported in the country, with 163 deaths and 27 847 recoveries.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benin</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>14-Jun-22</td>
<td>14-Jun-22</td>
<td>1-Feb-23</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>0.00%</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>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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benin</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>8-Aug-19</td>
<td>24-Aug-19</td>
<td>3-May-23</td>
<td>26</td>
<td>26</td>
<td>0</td>
<td>0.00%</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>No cVDPV2 case was reported this week. There have been two cases reported in 2022. Six cases were reported in 2021 and 2020, and eight in 2019.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Botswana</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>30-Mar-20</td>
<td>30-Mar-20</td>
<td>6-May-23</td>
<td>329 862</td>
<td>329 862</td>
<td>2 797</td>
<td>0.90%</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>On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 6 May 2023, a total of 329 862 confirmed COVID-19 cases were reported in the country including 2 797 deaths.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Botswana</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>0.00%</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>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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>Humanitarian crisis (Sahel Region)</td>
<td>Grade 2</td>
<td>1-Jan-19</td>
<td>1-Jan-19</td>
<td>15-Mar-23</td>
<td>1 094 000</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>
<tr>
<td></td>
<td>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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>10-Mar-20</td>
<td>9-Mar-20</td>
<td>23-Mar-23</td>
<td>22 056</td>
<td>22 056</td>
<td>396</td>
<td>1.80%</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>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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burundi</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>1-Jan-23</td>
<td>1-Jan-23</td>
<td>14-May-23</td>
<td>409</td>
<td>175</td>
<td>5</td>
<td>1.20%</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>An outbreak of cholera has been declared in Burundi on 1 January 2023. As of 14 May 2023, 409 suspected cases and three deaths (CFR 1.2%) have been reported, including 175 laboratory-confirmed cases. The most affected age group is children less than five years old (21.8%).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burundi</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>31-Mar-20</td>
<td>18-Mar-20</td>
<td>8-May-23</td>
<td>53 749</td>
<td>53 749</td>
<td>15</td>
<td>0.00%</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>An outbreak of cholera has been declared in Burundi on 1 January 2023. As of 14 May 2023, 409 suspected cases and three deaths (CFR 1.2%) have been reported, including 175 laboratory-confirmed cases. The most affected age group is children less than five years old (21.8%).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Country** | **Event** | **Grade** | **Date notified to WCO** | **Start of reporting period** | **End of reporting period** | **Total cases** | **Cases Confirmed** | **Deaths** | **CFR**
---|---|---|---|---|---|---|---|---|---
Burundi | Poliomyelitis (cVDPV2) | Grade 2 | 17-Mar-23 | 17-Mar-23 | 17-May-23 | 1 | 1 | 0 | 0.00%

The health authorities of Burundi have declared an outbreak of circulating poliovirus type 2 (cVDPV2) 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. No cVDPV2 case was reported this week (as of 17 May).

Cameroon | Humanitarian crisis (North, Adamawa & East) | Protracted 2 | 31-Dec-13 | 27-Jun-17 | 30-Apr-23 | - | - | - | -

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 30 Apr 2023, a total of 385 372 people are internally displaced in the area.

Cameroon | Humanitarian crisis (NW & SW) | Protracted 2 | 1-Oct-16 | 27-Jun-18 | 30-Apr-23 | - | - | - | -

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 30 Apr 2023, 628 196 people are internally displaced in the area.

Cameroon | Humanitarian crisis (Sahel Region) | Grade 2 | 31-Dec-13 | 27-Jun-17 | 11-May-23 | 1 200 000 | - | - | -

Cameroon continues to be impacted by conflict in the Lake Chad basin, North-West, South-West, and by the Central African Republic conflict in the eastern regions (East, Adamawa, and North). An estimated 4.7 million people need humanitarian assistance across the country (affecting the equivalent to one out of six people). Women and children make up 77% of those in need. An estimated three million people are facing acute food insecurity in 2023 and more than two million people are on the move as internally displaced persons, returnees, or refugees, many of whom are lacking essential services. In Feb 2023, 1 652 people were newly displaced due to insecurity and an estimated 700 Nigerians were newly registered in Minawao camp between 1-15 Feb 2023. More than 82 civilians were abducted in Feb 2023 by armed individuals in Logone and Chari. The Ouzal Health Center was also attacked by armed individuals in Mayo-Sava.

Cameroon | Cholera | Grade 3 | 31-Aug-21 | 25-Oct-21 | 7-May-23 | 15 828 | 1 808 | 345 | 2.20%

During 25 Oct 2021 to 7 May 2023, 15 828 suspected cases of cholera including 1 808 laboratory-confirmed cases and 345 deaths (CFR 2.2%) 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.

Cameroon | COVID-19 | Grade 3 | 6-Mar-20 | 6-Mar-20 | 3-May-23 | 125 036 | 125 036 | 1 972 | 1.60%

The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 3 May 2023, a total of 125 036 cases have been reported, including 1 972 deaths.

Cameroon | Measles | Ungraded | 2-Apr-19 | 1-Jan-23 | 7-May-23 | 4 504 | 4 152 | 18 | 0.40%

From week 1 to week 148of 2023 (ending 7 May), a total of 4 504 suspected cases with 18 deaths (CFR 0.4%) have been reported including 4 152 total confirmed cases. The number of deaths reported this year has been reviewed.

Cameroon | Mpox | Grade 3 | 24-Feb-22 | 1-Jan-22 | 7-May-23 | 126 | 18 | 3 | 2.40%

From week 1 to week 18, 2023 (ending 7 May), 17 new suspected case of Mpox have been reported and no confirmed case. Since January 2022 a total of 126 suspected cases including 18 confirmed and three deaths have been reported in the country.

Cameroon | Poliomyelitis (cVDPV2) | Grade 2 | 23-May-19 | 1-Jan-20 | 17-May-23 | 13 | 13 | 0 | 0.00%

No cVDPV2 case was reported this week as of 17 May 2023. There were three cases reported in 2022, three others reported in 2021, and seven cases reported in 2020.

Cameroon | Suspected deadly drug intoxication in children | Ungraded | 9-Mar-23 | 2-May-23 | 11 | 10 | - | 90.90%

Health authorities in Cameroon have communicated through press releases on deaths among children under five related to a consumption of a fake cough syrup. Since 9 March 2023 through 24 April 2023, a total of 11 cases including 10 deaths have been reported. Among deaths, six deaths are from North-West region, three deaths are from South-West region and one death is from Littoral region.

Cape Verde | COVID-19 | Grade 3 | 19-Mar-20 | 18-Mar-20 | 20-May-23 | 63 847 | 63 847 | 414 | 0.60%

The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 20 May 2023, a total of 63 847 confirmed COVID-19 cases including 414 deaths and 63 272 recoveries were reported in the country.

Central African Republic | Humanitarian crisis | Protracted 2 | 11-Dec-13 | 11-Dec-13 | 1-May-23 | 3 400 000 | - | - | -
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. As of 28 April 2023, CAR had received an estimated 6,000 refugees arriving from neighboring Sudan where the humanitarian situation is deteriorating, 94% are Sudanese asylum seekers and 6% are Central African returnees. Approximately 70% are females.

### Central African Republic

**COVID-19**
- **Grade**: 3
- **Date notified to WCO**: 14-Mar-20
- **Start of reporting period**: 14-Mar-20
- **End of reporting period**: 23-Apr-23
- **Total cases**: 15,396
- **Cases Confirmed**: 15,396
- **Deaths**: 113
- **CFR**: 0.70%

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 23 April 2023, a total of 15,396 confirmed cases, 113 deaths and 15,200 recovered were reported.

Since the beginning of 2023 to week 16 (ending 23 April), the Ministry of Health and Population has recorded a cumulative of 756 confirmed cases of measles including 105 laboratory-confirmed cases, 651 cases confirmed by epidemiological link and zero deaths. The measles outbreak is ongoing in eight (23%) out of 35 health districts, namely Béoumi, Bossembéle, Haut-Mbomou, Boda, Bambouto, Bangui 1, Bimbo and Bouar-Baoro.

**Measles**
- **Grade**: Ungraded
- **Date notified to WCO**: 13-Mar-22
- **Start of reporting period**: 13-Mar-22
- **End of reporting period**: 1-Jan-23
- **Total cases**: 756
- **Cases Confirmed**: 756
- **Deaths**: 0
- **CFR**: 0.00%

From 4 March 2022 through 23 April 2023, a total of 31 confirmed cases of Mpox and one death have been reported in the country. Since the start of 2023, the country has reported 14 laboratory-confirmed cases, including one death.

**Poliomyelitis (cVDPV2)**
- **Grade**: 2
- **Date notified to WCO**: 24-May-19
- **Start of reporting period**: 24-May-19
- **End of reporting period**: 17-May-23
- **Total cases**: 37
- **Cases Confirmed**: 37
- **Deaths**: 0
- **CFR**: 0.00%

Two cVDPV2 cases were reported this week as of 17 May. There have been seven cases reported in the country this year. Although no new cases were reported in 2021, four cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.

### Chad

**Measles**
- **Grade**: Ungraded
- **Date notified to WCO**: 24-May-19
- **Start of reporting period**: 24-May-19
- **End of reporting period**: 17-May-23
- **Total cases**: 37
- **Cases Confirmed**: 37
- **Deaths**: 0
- **CFR**: 0.00%

The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 26 April 2023, a total of 7,822 confirmed COVID-19 cases were reported in the country including 194 deaths.

**Humanitarian crisis (Sahel region)**
- **Grade**: 2
- **Date notified to WCO**: 11-Feb-22
- **Start of reporting period**: 1-Mar-16
- **End of reporting period**: 10-May-23
- **Total cases**: 6,100,000
- **Cases Confirmed**: -
- **Deaths**: -
- **CFR**: -

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 381,000 internally displaced persons and hosts 595,000 refugees. As of 10 May 2023, Chad has had an estimated 27,000 refugees arrive from neighboring Sudan where the humanitarian situation is deteriorating. The refugees are mainly displaced in Ouaddai, Sila, and Wadi Fira.

**COVID-19**
- **Grade**: 3
- **Date notified to WCO**: 19-Mar-20
- **Start of reporting period**: 19-Mar-20
- **End of reporting period**: 23-Apr-23
- **Total cases**: 194
- **Cases Confirmed**: 194
- **Deaths**: 1
- **CFR**: 0.50%

From 1 April 2020 to 23 April 2023, a total of 15,396 confirmed cases, 113 deaths and 15,200 recovered were reported.

### Comoros

**COVID-19**
- **Grade**: 3
- **Date notified to WCO**: 30-Apr-20
- **Start of reporting period**: 30-Apr-20
- **End of reporting period**: 27-Apr-23
- **Total cases**: 7,822
- **Cases Confirmed**: 7,822
- **Deaths**: 194
- **CFR**: 2.50%

The first COVID-19 confirmed case was reported in Comoros on 30 April 2020. As of 27 April 2023, a total of 9,109 confirmed COVID-19 cases, including 161 deaths were reported in the country.

### Congo

**Poliomyelitis (cVDPV1)**
- **Grade**: 2
- **Date notified to WCO**: 21-Mar-23
- **Start of reporting period**: 1-Mar-23
- **End of reporting period**: 17-May-23
- **Total cases**: 1
- **Cases Confirmed**: 1
- **Deaths**: -
- **CFR**: -

The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 14 May 2023, a total of 25,195 cases including 389 deaths have been reported in the country.

**COVID-19**
- **Grade**: 3
- **Date notified to WCO**: 14-Mar-20
- **Start of reporting period**: 14-Mar-20
- **End of reporting period**: 23-Apr-23
- **Total cases**: 25,195
- **Cases Confirmed**: 25,195
- **Deaths**: 389
- **CFR**: 1.56%

From 1 January 2022 to 14 May 2023, the Republic of Congo has reported five laboratory-confirmed cases, with zero death (CFR 0.0%).
### Health Emergency Information and Risk Assessment

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER**

**WEEK 21: 15-21 MAY 2023**

---

#### Côte d’Ivoire COVID-19 Grade 3

Since 11 March 2020, a total of 88 330 confirmed cases of COVID-19 have been reported from Côte d’Ivoire including 834 deaths, and a total of 87 495 recoveries.

---

#### Democratic Republic of the Congo Floods

From 2 to 4 May 2023, heavy rain fell throughout the territory of Kalehe of South Kivu which led to the overflow of rivers causing floods and landslides. As of 19 May 2023, a total of 430 deaths including 404 at community level and 26 deaths in health care facilities were recorded. A total of 197 people were injured and about 2 536 people missing.

#### Democratic Republic of the Congo Humanitarian crisis

As of 30 Apr 2023, more than 6.2 million people are in a situation of internal displacement (IDPs) in the DRC mostly located within North Kivu (2.4 million, 39%), South Kivu (1.7 million, 27%), and Ituri (1.6 million, 26%) provinces of the country. There are also another 320K refugees in the country mostly now located in the provinces of North Kivu (165K, 32%) and North Ubangi (112K, 21.7%) and mostly coming from Central African Republic (210K, 40%) and Rwanda (208K, 40%). 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.

#### Democratic Republic of the Congo Cholera

Following a massive influx of Internal Displaced Persons (IDPs) in Nyiragongo and Karisimbi health zones (HZs), the cholera outbreak was declared in those two HZs on 14 December 2022 after an increase in number reported of cholera cases above the epidemic threshold in these HZs. From week 1 through week 18, 2023 (ending 7 May) a total of 8 486 cases with 8 deaths (CFR 0.1%) has been reported. The number of deaths has been reviewed.

#### Democratic Republic of the Congo Measles

As at Week 14 of 2023 (ending 9 April), 70 628 suspected cases with 1 146 measles related deaths (CFR 1.7%) have been reported including 1 297 IgM+ for measles from 2 433 tested samples and 188 IgM+ for Rubella. A total of 125 health zones with confirmed outbreaks since January 2023.

#### Democratic Republic of the Congo Meningitis

The meningitis outbreak is ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 7 April 2023, a total of 520 suspected cases with 86 deaths (CFR 16.5%) have been reported. A total of 12 out of 20 health areas are affected. The number cerebrospinal fluid (CSF) samples tested so far is 143 and 10 positive ( five for Neisseria meningitidis W ; two for Streptococcus pneumoniae; two for Hameophilus influenzae non b and one Hameophilus influenzae b )

#### Democratic Republic of the Congo Mpox

From 1 January 2022 through 13 April 2023, the Democratic Republic of the Congo (DRC) reported 556 confirmed Mpox cases with no death among the confirmed cases. All confirmed cases belong to Clade I.

#### Democratic Republic of the Congo Poliomyelitis (cVDPV1)

According to the Global Polio Eradication Initiative (GPEI), this week , One cVDPV1 case was reported in Haut Lomami bringing the number of 2022 cases to 145. There are 12 cVDPV1 cases reported this year.

#### Democratic Republic of the Congo Poliomyelitis (cVDPV2)

No cVDPV2 cases were reported this week. The number of 2023 cases remains 22. There were 362 cVDPV2 cases last year.

---

### Country | Event | Grade | Date notified to WHO | Start of reporting period | End of reporting period | Total cases | Cases Confirmed | Deaths | CFR |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<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>21-May-23</td>
<td>88 330</td>
<td>88 330</td>
<td>834</td>
<td>0.90%</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Floods</td>
<td>Ungraded</td>
<td>5-May-23</td>
<td>6-May-23</td>
<td>19-May-23</td>
<td>-</td>
<td>-</td>
<td>430</td>
<td></td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Humanitarian crisis</td>
<td>Protracted 3</td>
<td>20-Dec-16</td>
<td>17-Apr-17</td>
<td>30-Apr-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Cholera (Nord Kivu : Nyiragongo and Karisimbi HZs)</td>
<td>Grade 3</td>
<td>14-Dec-22</td>
<td>1-Jan-23</td>
<td>7-May-23</td>
<td>8 486</td>
<td>8</td>
<td>0.10%</td>
<td></td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Measles</td>
<td>Ungraded</td>
<td>12-Oct-21</td>
<td>1-Jan-23</td>
<td>9-Apr-23</td>
<td>70 628</td>
<td>1 297</td>
<td>1 146</td>
<td>1.60%</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Meningitis</td>
<td>Ungraded</td>
<td>31-May-22</td>
<td>2-Jun-22</td>
<td>7-Apr-23</td>
<td>520</td>
<td>10</td>
<td>86</td>
<td>16.50%</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Mpox (cVDPV1)</td>
<td>Grade 2</td>
<td>27-Aug-22</td>
<td>27-Aug-22</td>
<td>17-May-23</td>
<td>157</td>
<td>157</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>26-Feb-21</td>
<td>1-Jan-22</td>
<td>17-May-23</td>
<td>384</td>
<td>384</td>
<td>0</td>
<td>0.00%</td>
</tr>
</tbody>
</table>
### Health Emergency Information and Risk Assessment

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EVENTS**

**WEEK 21: 15-21 MAY 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>Equatorial Guinea</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>23-Feb-23</td>
<td>17 229</td>
<td>17 229</td>
<td>183</td>
<td>1.10%</td>
</tr>
</tbody>
</table>

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.

| Equatorial Guinea | Marburg virus disease                | Grade 3 | 7-Feb-23               | 8-Feb-23                  | 4-May-23               | 17          | 17              | 12     | -    |

As of 4 May 2023, a total of 17 confirmed cases and 12 deaths have been reported since the declaration of the outbreak on 13 February 2023. Among the 17 confirmed cases, four have recovered, 12 have died, and one has an unknown outcome.

| Eritrea         | COVID-19                             | Grade 3 | 21-Mar-20             | 21-Mar-20                 | 30-Oct-22              | 10 189      | 10 189          | 103    | 1.00% |

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.

| Eritrea         | Poliomyelitis (cVDPV2)               | Grade 2 | 2-Jun-22               | 7-Jun-22                  | 14-May-23              | 2           | 2               | 0      | 0.00% |

No cVDPV2 case was reported this week. There was one case reported in 2022. 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.

| Eswatini        | Cholera                             | Grade 3 | 3-Apr-23               | 3-Apr-23                  | 8-May-23               | 2           | 2               | 0      | 0.00% |

The Kingdom of Eswatini reported the first confirmed case of cholera on 29 March 2023 (non-Swazi 20yr-old male) in the Manzini Region. The second confirmed case is a 14-year-old male national from Shiselweni region without any travel history or epi-link to the first case. Samples from both patients were positive for Vibrio cholerae and serotypes 01 Ogawa.

| Eswatini        | COVID-19                             | Grade 3 | 13-Mar-20             | 13-Mar-20                 | 29-Apr-23              | 74 670      | 74 670          | 1 425  | 1.90% |

The first case of COVID-19 was confirmed in the kingdom of Eswatini on 17 March 2020. As of 29 April 2023, a total of 74 670 cases have been reported with 1 425 associated deaths.

| Ethiopia        | Drought/food insecurity              | Grade 3 | 17-Feb-22             | 1-Jan-22                  | 23-Apr-23              | 12 000 000  | -               | -      | -    |

The conditions of drought and insecurity-affected regions in Ethiopia is ongoing. The regions of Oromia, Somali, and parts of SNNPR, and SWEP are facing an extremely dire situation with high need for humanitarian response. There has been a dramatic increase in food insecurity, malnutrition, displacements, as well as deteriorating health and protection conditions with lack of access to clean water. A total of 2 million people (out of targeted 13 million) are prioritized for assistance through a four-month Drought Response Operational Action Plan. The drought situation remains severe in the southern parts of SNNPR and lowland woredas of Davuro and West Omo zones. Zabagezo woreda in Davuro are reportedly the most affected, with more than 45K people in need of food assistance and requiring more partner presence and technical support for all sectors including health, nutrition, water, health, and hygiene.

| Ethiopia        | Humanitarian crisis (Conflict in Tigray) | Grade 3 | 4-Nov-20             | 4-Nov-20                  | 10-May-23              | -           | -               | -      | -    |

In Ethiopia, some 2.7 million people have been displaced and another 887K refugees are located in the country as of 23 Feb 2023. Humanitarian partners have assisted more than 3.7 million people as of 1 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. Approximately, 18K individuals have crossed into Ethiopia fleeing conflict in neighboring Sudan between 15-10 May 2023.

| Ethiopia        | Cholera                             | Grade 3 | 17-Sep-22             | 17-Sep-22                 | 13-May-23              | 6 592       | 39              | 104    | 1.60% |

A cholera outbreak has been ongoing in Ethiopia since 27 August 2022. The index case was reported from Bekay Kebele, Oromia Region and the outbreak was confirmed on 9 September. As of 13 May 2023, a total of 6 592 suspected cases of cholera with 104 deaths (CFR 1.6%) have been reported. There were 128 cases and frou new deaths repored in week 19, 2023. At least 62 woredas have reported cholera cases since the beginning of the outbreak, however, during week 18, 53 woredas have active cholera outbreaks.

| Ethiopia        | COVID-19                             | Grade 3 | 13-Mar-20             | 13-Mar-20                 | 26-Apr-23              | 500 816     | 500 816         | 7 574  | 1.50% |

Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 500 816 cases of COVID-19 as of 26 April 2023, with 7 574 deaths and 487 838 recoveries.

| Ethiopia        | Measles                             | Ungraded | 13-Apr-17             | 1-Jan-23                  | 28-Apr-23              | 5 052       | 2 972           | 3      | 0.10% |

A total of 5 052 suspected measles cases reported as of week 17 current year (ending 28 April). Confirmed cases are 2 972 including 517 (17%) laboratory confirmed, 2 439 (82%) epidemiologically linked cases and 16 (1%) clinically compatible. Total of 45 confirmed active outbreaks affecting eight regions as of week 17, 2023.

| Ethiopia        | Poliomyelitis (cVDPV2)              | Grade 2  | 24-Jun-19             | 20-May-19                 | 17-May-23              | 64          | 64              | 0      | 0.00% |

No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week 19 of 2023 (ending 14 May 2023). There was one case reported in 2022. In addition, ten cases were reported in 2021, 38 in 2020 and 15 in 2019.

| Ethiopia        | Visceral leishmaniasis              | Ungraded | 1-Jan-23             | 1-Jan-23                  | 30-Apr-23              | 180         | 21              | 11.70% |

From 1 January 2023 to 30 April 2023, a total of 180 cases of visceral leishmaniasis and 21 deaths (CFR 11.7%) were reported. WHO is supporting capacity building, active case finding and scaling up of rapid serological testing in health facilities. In addition, Médecins Sans Frontières (MSF) is supporting case management.

| Gabon           | COVID-19                             | Grade 3 | 12-Mar-20             | 12-Mar-20                 | 30-Apr-23              | 48 982      | 48 982          | 307    | 0.60% |

On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 30 April 2023, a total of 48 982 cases including 307 deaths and 48 676 recoveries have been reported in the country.

| Gambia          | COVID-19                             | Grade 3 | 17-Mar-20             | 17-Mar-20                 | 4-Nov-22              | 12 586      | 12 586          | 372    | 3.00% |
WEEKLY BULLETIN ON OUTBREAKS AND OTHER
WEEK 21: 15-21 MAY 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>Ghana</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>12-Mar-20</td>
<td>12-Mar-20</td>
<td>24-Apr-23</td>
<td>171 657</td>
<td>171 657</td>
<td>1 462</td>
<td>0.90%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>1-Jan-23</td>
<td>1-Jan-22</td>
<td>17-Feb-23</td>
<td>502</td>
<td>123</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Ghana</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>8-Jun-22</td>
<td>24-May-22</td>
<td>29-Mar-23</td>
<td>124</td>
<td>124</td>
<td>4</td>
<td>3.20%</td>
</tr>
</tbody>
</table>

There is an ongoing outbreak of measles in the Northern region of Ghana. From epidemiological week 1 to week 5 (ending 17 February 2023), a total of 209 suspected cases, including three confirmed, were reported in eleven districts. The attack rate per one million population is 209 (suspected cases). Cumulatively, a total of 502 suspected cases, including 123 confirmed cases of measles, were reported in the Northern region from epidemiological week 1, 2022, to epidemiological week 5, 2023.

According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are three cases in 2022. No cases were reported in 2021. In addition, 12 cases were reported in 2020, and 19 were reported in 2019.

The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 19 February 2023, a total of 38 302 cases, including 37 320 recovered cases and 467 deaths, have been reported in the country.

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 virus. The child died in the community, 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.

Kenya Drought/food insecurity Grade 3 | 17-Feb-22 | 1-Jan-22 | 11-May-23 | 4 500 000 | - | - |

The drought situation thus remains critical in twenty-two (21) of the 23 arid and semi-arid (ASAL) counties, during the month of March 2023. Two (2) counties namely Marsabit and Turkana remain in Emergency drought phase. Eight (8) counties namely Isiolo, Mandera, Kajiado, Samburu, Tana River, Wajir, Kiﬁli and Kitui are in Alarm drought phase. Eleven (11) counties including; Baringo, Embu, Garissa, Lamu, Makueni, Laikipia, Narok, Nyeri, Meru, Kwale and Taita Taveta are in the Alert drought phase. While two (2) counties; West Pokot and Tharaka Nithi are in Normal drought phase. Drought is affecting about 4.5 million people, compared to 2.1 million in September 2021. Of these, approximately 2.14 million are children. The projection for Mar-Jun 2023 is expected increase affecting 5.4 million people in the country who will be in Integrated Food Security Phase Classification (IPC) Phase 3 and above. Of those 5.4 million people, 1.2 million people will likely be in Phase 4 and above.

Kenya Acute watery diarrhoea Ungraded | 3-Apr-23 | 17-Mar-23 | 14-Apr-23 | 84 | 84 | 10 | 11.90% |

A total of 84 cases of acute watery diarrhoea have been reported from Mombasa county. All six sub-counties have reported cases, however the most affected have been Kisauni with 33 cases (39.3%) and Nyali with 17 cases (20.2%) reported. A surge of diarrhoeal cases was officially notified on 3 April 2023. Approximately, 47 (56%) of cases are males while 35 (41.7%) are females with the age group of 0-3 years accounting for 31% of cases. Cumulatively, 21 samples have been collected with nine samples returning positive for rotavirus, Vibrio cholerae has been ruled out.

The outbreak has been reported from Muranga County. A total of 15 cases and three deaths have been reported from five sub counties; Gatanga (1), Kandaara (5, including 2 deaths), Kigumo (7, including 1 death, Maragua (1) and Mathioya (1).

Kenya Cholera Grade 3 | 19-Oct-22 | 5-Oct-22 | 7-May-23 | 10 297 | 464 | 164 | 1.60% |
Kenya COVID-19
Grade 3
13-Mar-20
13-Mar-20
4-May-23
343 073
343 073
5 688
1.70%

On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 4 May 2023, there have been 343 073 confirmed COVID-19 cases including 5 688 deaths and 337 333 recoveries have been reported in the country.

An outbreak of gastrointestinal symptoms has affected two schools in Kakamega County in Kenya. The MOH was originally notified of the outbreaks on 31 March 2023. The onset of symptoms is estimated to be around 1 March 2023 with initial cases reported on 14 March 2023 at the Mukumu Girls Schools. Subsequent reports from Butere Boys School in the same county were reported as early as 3 April 2023. Both schools were closed following the reports. As of 20 April 2023, a total of 1 062 cases have been line-listed, four deaths have been reported from the school which involved one teacher and three students. Most of the documented affected persons were students 1 (96%), and 39 (4%) were non-students, and 19 (2%) had no identification. The Mukumu Girls School in Kakamega County was closed on 3 April 2023, following that outbreak of enteric fever at the school. Since the school re-opening on 8 May 2023, some girls have sought treatment in health facilities due to ill health, majority of the girls have been confirmed to have malaria and have been managed, a cumulative total of 91 students have been reported as of 18 May 2023. It’s important to note that almost all of the admitted students reported back to school while already symptomatic of disease.

Kenya Leishmaniasis (visceral)
Ungraded
31-Mar-19
3-Jan-20
11-May-23
2 300
2 097
10
0.40%

The outbreak has been continuous since 2020. A total of 2 300 cases and 10 deaths (CFR 0.4 %) have been reported. Overall, 2 097 cases have been confirmed from the following counties: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir, Tharaka Nithi, and Isiolo. The outbreak is active in West Pokot County from Pokot North, Pokot south, West Pokot and Pokot Central Sub Counties.

Kenya Measles
Ungraded
29-Jun-22
1-Jan-23
11-May-23
270
108
4
1.50%

The outbreak has been continuous from year 2022, nine counties this year have been affected as follows: Garissa, Isiolo, Kitui, Kwale, Lamu, Mombasa, Nairobi, Tana River and Turkana. A total of 270 cases and four deaths (CFR 2.0%) have been reported. A total of 108 cases have been confirmed.

Lesotho COVID-19
Grade 3
13-May-20
13-May-20
12-Sep-22
34 490
34 490
706
2.10%

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.

Liberia COVID-19
Grade 3
16-Mar-20
16-Mar-20
20-Apr-23
8 136
8 136
294
3.60%

From 16 March 2020 to 20 April 2023, Liberia has recorded a total of 8 136 cases including 294 deaths and 7 853 recoveries have been reported.

Liberia Lassa Fever
Ungraded
3-Mar-22
6-Jan-22
21-Apr-23
71
71
19
26.80%

Since the beginning of 2022 up to 21 April 2023, a total of 71 confirmed cases of Lassa fever with 19 deaths (CFR 27%) have been reported in Liberia.

Liberia Measles
Ungraded
3-Feb-22
13-Dec-21
21-Mar-23
106 664
10 664
93
0.90%

Since the measles outbreak started on 13 December 2021 as of 21 April 2023, a total of 11 181 suspected cases, including 10 664 confirmed and 93 deaths (CFR: 1%) were reported from all the 15 counties in Liberia. Among the confirmed cases, 4.5% (482) were laboratory confirmed, 11.6% (1 233) clinically confirmed and 83.9% (8 949) epidemiologically linked.

Liberia Monkeypox
Grade 3
21-Jul-22
23-Jul-22
29-Mar-23
10
10
0
0.00%

Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public Health Reference Laboratory in the country. As of 29 March 2023, 10 confirmed cases of monkeypox with 0 deaths were reported.

Malawi COVID-19
Grade 3
2-Apr-20
2-Apr-20
1-May-23
88 728
88 728
2 686
3.00%

Malawi confirmed a case of Monkeypox on 23 July 2022 through the National Public Health Reference Laboratory in the country. As of 29 March 2023, 10 confirmed cases of monkeypox with 0 deaths were reported.

Malawi Measles
Ungraded
26-Mar-20
24-Dec-21
25-Mar-22
2 300 000
2 097 000
103
0.40%

Since the measles outbreak started on 13 December 2021 as of 21 April 2023, a total of 11 181 suspected cases, including 10 664 confirmed and 93 deaths (CFR: 1%) were reported from all the 15 counties in Liberia. Among the confirmed cases, 4.5% (482) were laboratory confirmed, 11.6% (1 233) clinically confirmed and 83.9% (8 949) epidemiologically linked.

Malawi Malaria
Ungraded
31-May-20
30-Jun-21
3-May-22
1 092 000
1 092 000
0
0.00%

According to OCHA, some 3.86 million people are in need of urgent humanitarian assistance in Madagascar in 2023, following devastating cyclones in the Grand Sud-Est (Vatovavy, Fitovinany and Atsimo Atsinanana regions) in 2022 and 2023 and the catastrophic drought in the Grand Sud (Atsimo Andrefana, Androy and Anosy regions) from 2022 to 2023.

Malawi Mpox
Grade 3
2-Apr-20
2-Apr-20
1-May-23
88 728
88 728
2 686
3.00%

The Government of Malawi and Humanitarian Partners continue to respond to the consequences of cyclopes passage in the 16 local authorities of the Southern region between 12-15 March 2023, including Balaka, Blantyre (plus city), Chikwawa, Chiradzulu, Machinga, Mangochi, Mulanje, Mwanza, Neno, Nsanje, Ntcheu, Phalombe, Thyolo, Zomba (plus city). Freddy has impacted the lives and livelihoods of about 2.3 million of Malawians, of whom an estimated 1.3 million people were identified in the most urgent need of assistance.

Madagascar COVID-19
Grade 3
20-Mar-20
20-Mar-20
12-May-23
68 266
68 266
1 424
2.08%

Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 12 May 2023, a total of 68 266 confirmed cases including 1 424 deaths have been reported in the country.

Madagascar Cyclones
Grade 2
25-Jan-23
19-Jan-23
3-May-23
391 000
53

On 19 Jan 2023, the cyclonic system Cheneso landed in Madagascar north of Antalaha 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 299 000 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.

Madagascar Lassa Fever
Protracted 2
1-Jan-21
1-Jan-21
28-Apr-23
-1
-1
-1
-1

According to OCHA, some 3.86 million people are in need of urgent humanitarian assistance in Madagascar in 2023, following devastating cyclones in the Grand Sud-Est (Vatovavy, Fitovinany and Atsimo Atsinanana regions) in 2022 and 2023 and the catastrophic drought in the Grand Sud (Atsimo Andrefana, Androy and Anosy regions) from 2022 to 2023.

Madagascar Measles
Grade 5
14-Mar-23
19-Mar-23
3-May-23
2 267 458
679
0.00%

The Government of Malawi and Humanitarian Partners continue to respond to the consequences of cyclopes passage in the 16 local authorities of the Southern region between 12-15 March 2023, including Balaka, Blantyre (plus city), Chikwawa, Chiradzulu, Machinga, Mangochi, Mulanje, Mwanza, Neno, Nsanje, Ntcheu, Phalombe, Thyolo, Zomba (plus city). Freddy has impacted the lives and livelihoods of about 2.3 million of Malawians, of whom an estimated 1.3 million people were identified in the most urgent need of assistance.

Madagascar Measles
Protracted 2
1-Jan-21
1-Jan-21
28-Apr-23
-1
-1
-1
-1

According to OCHA, some 3.86 million people are in need of urgent humanitarian assistance in Madagascar in 2023, following devastating cyclones in the Grand Sud-Est (Vatovavy, Fitovinany and Atsimo Atsinanana regions) in 2022 and 2023 and the catastrophic drought in the Grand Sud (Atsimo Andrefana, Androy and Anosy regions) from 2022 to 2023.
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 1 May 2023, the country has a total of 88 728 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.

Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 14 May 2023, a total of 63 669 cases including 997 deaths and 62 653 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 May 2023, a total of 304 233 confirmed COVID-19 cases including 1 050 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.

According to Relief web, the United Nations World Food Programme (WFP) has welcomed a US$ 1.5 million contribution from the Government of Japan to provide emergency food and nutrition assistance to more than 52,000 people affected by the conflict in northern Mozambique. The contribution will help provide emergency in-kind food assistance to more than 25,800 displaced people. The funds will also help WFP to provide nutrition support to some 15,000 children under the age of five and 12,000 pregnant and nursing women.

Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 14 September 2022 to 15 May 2023, a total of 30 425 cases and 131 deaths (CFR 0.4%) have been reported from 10 provinces and 60 districts.

The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 24 April 2023, a total of 233 417 confirmed COVID-19 cases were reported in the country including 1 050 deaths.

The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 30 April 2023, a total of 171 339 confirmed cases with 4 091 deaths have been reported.

### Table: Country, Event, Grade, Date notified to WCO, Start of reporting period, End of reporting period, Total cases, Cases Confirmed, Deaths, CFR

<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>Malawi</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>31-Jan-22</td>
<td>1-Feb-22</td>
<td>17-May-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Mali</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>11-Sep-17</td>
<td>16-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Mali</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Mar-20</td>
<td>14-May-24</td>
<td>33 147</td>
<td>33 147</td>
<td>743</td>
<td>2.20%</td>
<td></td>
</tr>
<tr>
<td>Mauritania</td>
<td>Measles</td>
<td>Ungraded</td>
<td>20-Feb-18</td>
<td>26-Mar-23</td>
<td>94</td>
<td>94</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Mauritania</td>
<td>Measles</td>
<td>Ungraded</td>
<td>7-Mar-23</td>
<td>26-Dec-22</td>
<td>285</td>
<td>186</td>
<td>3</td>
<td>1.10%</td>
<td></td>
</tr>
<tr>
<td>Mauritania</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>13-Mar-20</td>
<td>14-May-23</td>
<td>63 669</td>
<td>63 669</td>
<td>997</td>
<td>1.70%</td>
<td></td>
</tr>
<tr>
<td>Mauritania</td>
<td>Measles</td>
<td>Ungraded</td>
<td>1-Jan-20</td>
<td>7-May-23</td>
<td>304 233</td>
<td>304 233</td>
<td>1 050</td>
<td>0.40%</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Floods</td>
<td>Grade 2</td>
<td>13-Feb-23</td>
<td>11-Feb-23</td>
<td>1-Apr-23</td>
<td>1 255 786</td>
<td>186</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>14-Sep-22</td>
<td>15-May-23</td>
<td>30 425</td>
<td>30 425</td>
<td>131</td>
<td>0.40%</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>22-Mar-20</td>
<td>24-Apr-23</td>
<td>233 417</td>
<td>233 417</td>
<td>2 243</td>
<td>1.00%</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>6-Oct-22</td>
<td>5-May-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>7-Dec-18</td>
<td>17-May-23</td>
<td>6</td>
<td>6</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>17-May-22</td>
<td>17-May-23</td>
<td>8</td>
<td>8</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Namibia</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>30-Apr-23</td>
<td>171 339</td>
<td>171 339</td>
<td>4 091</td>
<td>2.40%</td>
<td></td>
</tr>
<tr>
<td>Country</td>
<td>Event</td>
<td>Grade</td>
<td>Date notified to WCO</td>
<td>Start of reporting period</td>
<td>End of reporting period</td>
<td>Total cases</td>
<td>Cases Confirmed</td>
<td>Deaths</td>
<td>CFR</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>Namibia</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>
<tr>
<td>Niger</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>19-Mar-20</td>
<td>19-Mar-20</td>
<td>1-May-23</td>
<td>9 513</td>
<td>9 513</td>
<td>315</td>
<td>3.30%</td>
</tr>
<tr>
<td>Niger</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>0.00%</td>
</tr>
<tr>
<td>Niger</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>1-Jan-20</td>
<td>1-Jan-21</td>
<td>3-May-23</td>
<td>31</td>
<td>33</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>1-Jan-23</td>
<td>2-Apr-23</td>
<td>1 336</td>
<td>79</td>
<td>5.90%</td>
<td></td>
<td></td>
</tr>
<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>5.80%</td>
</tr>
<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>17.40%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Meningitis</td>
<td>Grade 1</td>
<td>1-Oct-22</td>
<td>1-Oct-22</td>
<td>5-Mar-23</td>
<td>628</td>
<td>157</td>
<td>52</td>
<td>8.30%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>31-Jan-22</td>
<td>1-Jan-22</td>
<td>29-Mar-23</td>
<td>829</td>
<td>829</td>
<td>9</td>
<td>1.10%</td>
</tr>
<tr>
<td>Rwanda</td>
<td>Floods</td>
<td>Ungraded</td>
<td>4-May-23</td>
<td>4-May-23</td>
<td>5-May-23</td>
<td>131</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Humanitarian access in Niger has deteriorated because of growing insecurity in Diffa, Maradi, Tahoua, and Tillabére 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 Burkinabé).**

From 19 March 2020 to 1 May 2023, a total of 9 513 cases with 315 deaths have been reported across the country. A total of 9 203 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.

The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 21 April 2023, a total of 266 675 confirmed cases with 259 953 recovered and 3 155 deaths have been reported.

Between week 19 of 2022 and week 9 of 2023, 1064 suspected cases of diphtheria were reported from 21 states in Nigeria, Kano (843), Yobe (86), Katsina (45), and Lagos (22) states have reported the most cases (95%). A total of 62 deaths were recorded among all confirmed cases, with a CFR of 15.9%. Of suspected cases, 389 cases were confirmed, including 45 laboratory-confirmed and 343 clinically compatible. Both sexes are affected, and children aged 2-14 years account for the majority of confirmed cases (78%).

Since the beginning of 2023 to 26 March, 823 confirmed and four probable cases of Lassa fever with 144 deaths (CFR 17%), have been reported in 23 states and the Federal Capital Territory (FCT). Of all confirmed Lassa fever cases, 71% were reported from Ondo (32%), Edo (29%) and Bauchi (10%) States. The National Multisectoral Emergency Operations Centers for Lassa Fever have been activated at national level and in affected sates to coordinate and strengthen the ongoing response activities.

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 meningitidis serogroup C is the dominant strainamong confirmed cases. 91% of all cumulative cases were from four (4) states – Jigawa (509 cases), Bauchi (232cases), Zamfara (22 cases) and Oyo (14 cases).

Two cVDPV2 cases were reported this week, each in Sokoto and Kebbi. There are six cVDPV2 cases reported this year and 48 cases reported in 2022.
Floods and landslides hit Rwanda’s Northern and Western provinces during the night of 2-3 May 2023 following heavy rains. As of 5 May 2023, the disaster has so far claimed the lives of 131 people and caused 77 others to be injured. The majority of deaths were reported from Rutsiro (27) accounting for 20%. A total of 7 408 people have been internally displaced and have sought shelter at temporary sites. Infrastructural damage has been recorded for 5 174 houses (majority reported from Rubavu district), 3 371 houses, 65% of total), eight national roads, nine district roads, and 26 bridges. Furthermore, damage was also reported for agricultural lands, water treatment plants, and sewage systems.

The Rwanda 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 26 April 2023, a total of 6 562 confirmed cases of COVID-19 have been reported, including 80 deaths. A total of 6 358 cases have been reported as recoveries.

The Rwanda 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.

From 22 June 2022 to 12 May 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.

The food insecurity situation in South Sudan is projected to worsen during the lean season from April-July 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.
### Health Emergency Information and Risk Assessment

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER WEEK 21: 15-21 MAY 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><strong>South Sudan</strong></td>
<td>Flooding</td>
<td>Ungraded</td>
<td>7-Oct-22</td>
<td>3-May-23</td>
<td>1 000 000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>South Sudan</strong></td>
<td>Humanitarian crisis</td>
<td>Protracted 3</td>
<td>15-Aug-16</td>
<td>9-May-23</td>
<td>9 400 000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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 where the water, sanitation, and hygiene situation in the IDP camps have become worse as of May 2023. An estimated 7 380 people are displaced by flooding in areas of Rubkona 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. From 16 Apr - 9 May, 47 901 people have been registered to have crossed the border from Sudan into South Sudan as civilians are fleeing. Those crossing are South Sudanese returnees, Sudanese seeking asylum, and Eritrean refugees. People have been registered at Malakal, Maban, Bentiu, and Northern Bahr el Ghazal.

On 4 May 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 3 May 2023, a total of 18 499 confirmed COVID-19 cases were reported in the country including 138 deaths and 18 353 recovered cases.

On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 3 May 2023, a total of 18 499 confirmed COVID-19 cases were reported in the country including 138 deaths and 18 353 recovered cases.

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.

**South Sudan COVID-19** Grade 3 5-Apr-20 5-Apr-20 3-May-23 18 499 18 499 138 0.70%

The country has reported 6 046 suspected measles cases including 392 laboratory confirmed (9.8%); 3 109 (51.4%) are epi-linked, 1 712 (28.6%) are clinically compatible and 533 (10.5%) discarded cases from week 1 of 2022 to week 17 of 2023. A total of 58 measles-related deaths were reported since January 2022 with only three deaths among the lab-confirmed measles cases. The case fatality rate (CFR 1.0%), 15 counties are in outbreak situation in 2023. The Ministry of Health declared measles outbreak on 10 December 2022.

**South Sudan Measles** Ungraded 23-Feb-22 1-Jan-22 30-Apr-22 6 046 592 58 1.00%

**South Sudan Hepatitis E** Ungraded 3-Jan-18 1-Jan-19 8-May-23 4 283 1 517 33 0.80%

**South Sudan Cholera** Grade 3 7-Mar-23 22-Feb-23 14-May-23 1 455 19 2 0.10%

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.

**South Sudan COVID-19** Grade 3 5-Apr-20 5-Apr-20 3-May-23 18 499 18 499 138 0.70%

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 23 April 2023, a total of 42 973 confirmed cases have been reported in Tanzania Mainland including 846 deaths.

**Tanzania, COVID-19** Grade 3 16-Mar-20 16-Mar-20 23-Apr-23 42 973 42 973 846 2.00%

On 21 March 2023, the Ministry of Health in Tanzania declared an outbreak of Marburg virus disease. As of 4 May 2023, nine cases and six deaths (CFR 66.7%) have been reported. All surviving cases have been discharged following recovery from the disease. All cases were reported from the Bukoba Rural district in Kagera Region. The majority of cases (66.7%) were male with an average age of 35 years. A total of 212 contacts were monitored.

**Tanzania, Marburg virus disease** Grade 2 21-Mar-23 21-Mar-23 4-May-23 9 9 6 66.70%

Since June 2022, Tanzania is experiencing measles outbreak, 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, Ngoga, Chakechake, Sumbawanga, Chunya, Mtwarra, Uvinza, Mpimbwe and Malinyi.

**Tanzania, Measles** Ungraded 18-Aug-22 30-Jun-22 21-Feb-23 3 811 710 11 0.30%

### Tanzania, Measles

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, COVID-19** Grade 3 6-Mar-20 1-Mar-20 26-Mar-23 39 443 39 443 290 0.70%

No cVDPV2 case was reported this week. There were two cases 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.

**Togo, Poliomyelitis (cVDPV2)** Grade 2 18-Oct-19 13-Sep-19 3-May-23 19 19 0 0.00%

### Uganda

**Uganda, Drought/food insecurity** Grade 3 17-Feb-22 1-Jan-22 1-Mar-23 - - - -
<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>Uganda</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>21-Mar-20</td>
<td>21-Mar-20</td>
<td>26-Apr-23</td>
<td>170 847</td>
<td>170 847</td>
<td>3 632</td>
<td>2.10%</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>0.00%</td>
</tr>
<tr>
<td></td>
<td>Rift Valley</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>20.00%</td>
</tr>
<tr>
<td></td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>7-Mar-22</td>
<td>2-Jan-22</td>
<td>24-Apr-23</td>
<td>1 178</td>
<td>4</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td></td>
<td>Measles</td>
<td>Ungraded</td>
<td>13-Jun-22</td>
<td>13-Jun-22</td>
<td>16-Apr-23</td>
<td>2 137</td>
<td>557</td>
<td>31</td>
<td>1.50%</td>
</tr>
<tr>
<td></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>0.00%</td>
</tr>
<tr>
<td></td>
<td>Cholera</td>
<td>Grade 3</td>
<td>23-Feb-23</td>
<td>12-Feb-23</td>
<td>7-May-23</td>
<td>722</td>
<td>129</td>
<td>21</td>
<td>2.90%</td>
</tr>
<tr>
<td></td>
<td>Anthrax</td>
<td>Ungraded</td>
<td>20-Mar-20</td>
<td>20-Mar-20</td>
<td>14-May-23</td>
<td>264 848</td>
<td>264 848</td>
<td>5 692</td>
<td>2.10%</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>0.00%</td>
</tr>
<tr>
<td></td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>17-Aug-21</td>
<td>1-Apr-21</td>
<td>19-Mar-23</td>
<td>767</td>
<td>23</td>
<td>4</td>
<td>0.50%</td>
</tr>
<tr>
<td></td>
<td>Meningitis</td>
<td>Grade 2</td>
<td>15-Feb-23</td>
<td>15-Feb-23</td>
<td>2-Apr-23</td>
<td>141</td>
<td>22</td>
<td>12</td>
<td>8.50%</td>
</tr>
</tbody>
</table>

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, an estimated 315 000 people are projected to be in the IPC phase 3 and above while 38 000 people are estimated to be in IPC phase 4 from Aug 2022-Feb 2023 period. About 50% of the population of the districts of Kaabong, Kotido and Moroto, while 40% of the population is affected in Nabilatuk district.

The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 26 April 2023, a total of 170 647 confirmed COVID-19 cases with 3 632 deaths were reported.

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

From 1 January 2022 to 24 April 2023, a total of 1 178 suspected cases have been reported (984 during 2022, and 194 during 2023 so far). Four cases have been confirmed from the following districts Kasese (1), Buikwe (2), and Buvuma (1) classified by having positive PRNT results and no record of yellow fever vaccination.

Zambia has recorded 384 suspected cases of typhoid since 17 October 2022. Of these, 69 cases were reported in the last epi 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.

Since the beginning of the outbreak on 12 February 2023 and as of 7 May, 722 suspected cases and 129 confirmed cases have been reported from nine of the country’s ten provinces.

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.

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.

The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 7 May 2023, a total of 264 848 confirmed COVID-19 cases were reported in the country including 5 692 deaths.

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.

The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 7 May 2023, a total of 264 848 confirmed COVID-19 cases were reported in the country including 5 692 deaths.

Zimbabwe has recorded 384 suspected cases of typhoid since 17 October 2022. Of these, 69 cases were reported in the last epi 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.

### Closed Events

**Central African Republic**
- Yellow Fever
  - Ungraded
  - 17-Aug-21

**Togo**
- Meningitis
  - Grade 2
  - 15-Feb-23

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. As of 21 May 2023, no new confirmed case of YF reported, and the event was closed.

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.

---

†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.
© WHO Regional Office for Africa

This is not an official publication of the World Health Organization.

Correspondence on this publication may be directed to:
Dr Etien Luc Koua
Programme Area Manager, Health Emergency Information and Risk Assessment Programme.
WHO Emergency Preparedness and Response
WHO Regional Office for Africa
P O Box. 06 Cité du Djoué, Brazzaville, Congo
Email: afrooutbreak@who.int

Requests for permission to reproduce or translate this publication – whether for sale or for non-commercial distribution – should be sent to the same address.
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.