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

- Marburg virus disease in the United Republic of Tanzania
- Complex humanitarian crisis in The Democratic Republic of Congo
- Mpox in Africa

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:**

- The ongoing first ever Marburg virus disease outbreak to be reported in the United Republic of Tanzania has nearly completed 42 days after the second negative test of the last confirmed MVD case in the country. Despite the outbreak nearly ending, the origin of the outbreak is still unknown. Therefore, strict surveillance must be maintained so that future cases are prevented.

- The Democratic Republic of the Congo is one of the African countries facing complex humanitarian crisis for several decades, mainly caused by the internal population displacements fleeing armed conflicts and also due to natural disasters. The most recent natural disaster happened in Kalehe health zone, South Kivu province where heavy rains caused the overflow of rivers with floods and landslides leading to extensive damages with fatalities, injuries, and infrastructural losses. The ongoing protracted complex humanitarian crisis has extremely impacted the country’s development momentum and placed the affected population in extreme socio-economic vulnerability.
**Marburg Virus Disease**

**EVENT DESCRIPTION**

The United Republic of Tanzania reported its first ever outbreak of Marburg virus disease (MVD) on 21 March 2023. The investigation confirmed that the index case had the first symptoms of the disease on 27 February.

As of 28 May 2023, a total of nine cases, including eight laboratory-confirmed cases and one probable (the index case), have been reported in this outbreak. The last confirmed case was reported on 19 April 2023. A total of six deaths have been reported, the case fatality rate (CFR) of 67%, of which five were confirmed and one was a probable case. Out of the total cases, two were healthcare workers of which one died.

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

All cases were reported from the Bukoba Rural district in Kagera region in the northwest of Tanzania mainland. The cases had a median age of 35 years (1 to 59 years), and a majority (67%) were males. Six cases were close relatives of the index case, and two were healthcare workers who provided medical care to the cases.

**PUBLIC HEALTH ACTIONS**

- The Ministry of Health, together with WHO and other partners, initiated response measures to control the outbreak and prevent further spread to other country regions and neighboring countries. Regular coordination meetings were held to coordinate response.
- Active case search and alert management were implemented with a total of 229 alerts reported between 21 March to 31 May 2023, of which 60 MVD suspected cases were detected, and samples sent for laboratory confirmation.
- A total of 212 contacts were identified and monitored with 210 having completed their 21-day follow up period. Of the remaining two contacts, one developed symptoms and subsequently tested positive for MVD while the other died due to other causes.
- A total of 94 samples were tested since the beginning of the outbreak (including eight confirmed cases).
- Travellers were screened using the MVD case definition at points of entry into the country as well as domestically at several points.
- Public awareness and community sensitization were conducted through national and local media, social media networks, community-based radio stations, dissemination of disease prevention materials, political and faith leaders as well as key influencers mainly promoting prevention messages.

**SITUATION INTERPRETATION**

In line with the WHO recommendations, the first ever outbreak of MVD in the United Republic of Tanzania will be declared over following an elapse of 42 days since the second negative test of the last confirmed MVD case in Tanzania. Tremendous concerted efforts by the government and implementing partners has led to the effective control of this outbreak. However, preparedness and readiness activities should be boosted across the country to prevent future infections.
Location of confirmed cases of Marburg virus disease in The United Republic of Tanzania, as of 28 May 2023
Democratic Republic of the Congo

Complex humanitarian Situation

EVENT DESCRIPTION

The Democratic Republic of the Congo (DRC) is experiencing recurrent armed conflicts with huge humanitarian consequences that have lasted for decades. The situation has further deteriorated due to the scale and multiplication of armed conflicts for the last two decades. In addition to manmade crises due to armed conflicts, DRC is also experiencing natural disasters and remains at risk for many natural hazards, including volcanic eruptions, earthquakes, floods, and droughts.

From January to May 2023, nearly 677,000 people have been displaced bringing the total to more than 6.29 million displaced people in the country. The main causes of displacement are armed attacks and clashes, followed by inter-community conflicts and natural disasters with respectively 87% (5.3 million), 9.4% (594,000) and 3% (187,000) of displaced people.

Although humanitarian events have been reported almost everywhere on the national territory over the past three decades, the eastern side of the country (Ituri, North Kivu, South Kivu, and Tanganyika provinces) is severely affected due to a relatively high frequency of the reported humanitarian situations in that part of the country.

In Ituri province, approximately 3,535 internally displaced persons (IDPs) were registered around Biakato in Mandima health zone, Mambassa territory between 28 April and 2 May 2023 following two incursions by alleged elements of the Allied Democratic Forces which resulted in several people killed.

About 14,088 IDPs from around ten villages in Rwampara and Bambu health zones have been received since 28 April 2023 in Kunda health area and in Mwanga health area in Rwampara health zone, Irumu territory. According to the local authorities, this population fled clashes opposing two rival community military groups. About 30 people were killed and more than thousands of houses burned following the violent clashes.

On 3 May 2023, unidentified armed people killed 16 civilians during an armed attack in the Aforwoth locality of the Yilo health area; the Yilo health center was looted and burned in December 2022 by unidentified armed people.

For North Kivu province, on 18 April 2023, at least nine civilians were killed in the villages of Katerrain, Tapis Rouge and Mambume Mbumbe in Oicha health zone, Beni territory and about 15 others are missing. This armed attack came less than two weeks after another attack that killed 26 civilians in the Musandaba village. Since the beginning of this year the ongoing violence in Oicha health zone has already recorded more than 50 civilian deaths. In Lubero and Musienene health zones, Lubero territory, at least five civilians have been killed and more than 24,000 displaced following fighting between armed groups that occurred since mid-April 2023. It is reported that nearly 90,000 displaced people who have returned to Rwanguba and Rutshuru health zones in Rutshuru territory since October 2022, are in urgent need of humanitarian assistance.

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In South Kivu province, heavy rains that occurred between 2 and 5 May 2023 caused the overflow of Chishova, Kabushungu, Lukungula, Lwano and Nyamukubi rivers with floods and landslides leading to extensive damages with fatalities, injuries, and infrastructural losses. According to the latest estimates regarding human toll as of 26 May 2023, at least 443 people were killed, 206 injured, 2,536 people missing, 6,221 people affected and 34,556 people in need of humanitarian assistance in relation to this event.

The affected area is also hosting 107,700 displaced people, mainly from North Kivu fleeing armed conflict. The immediate needs include supplies to ensure dignified and safe burials, medical care for the affected and injured, food aid for all affected, and shelter for people who have lost their homes as well as safe drinking water.
PUBLIC HEALTH ACTIONS

- At least 227 humanitarian partners including (157, 69%) national NGOs, are operational in the country implementing about 421 humanitarian projects. These projects target at least 1.5 million people affected by the ongoing humanitarian crisis.

- For the Kalehe disaster response in Sud-Kivu province, WHO and partners continue to support the government efforts on the management of the disaster’s consequences through direct live saving assistance to the affected population and local capacity strengthening of the vital damaged infrastructures including health facilities.

SITUATION INTERPRETATION

One of major challenges for response to the complex humanitarian crisis in DRC is the reduction of humanitarian access. This reduction affects not only the affected populations but mostly humanitarian actors who are supposed to bring relief to the affected population. Humanitarian partners operating in the country have reported at least 217 incidents affecting humanitarian access between January and March. National and international NGOs are the most affected due to their large operational capacity involving numerous movements in the field. This year there was at least one humanitarian actor that suspended its operations due to insecurity. This reduction of humanitarian access makes the ongoing humanitarian crises more complex increasing the number of avoidable fatalities among the affected populations due to lack of access to the humanitarian services.
EVENT DESCRIPTION

One hundred and thirty-five (135) newly confirmed mpox cases were reported from four countries in the past two weeks, increasing the number of cases in Africa to 1,817 (8.0% increase) since January 2022. Two new mpox-related deaths were reported from the Democratic Republic of the Congo (DRC) in the same reporting period. The new cases were reported from DRC (117), Cameroon (11), Nigeria (5) and Ghana (2). Six (6) African countries (Cameroon, Central African Republic (CAR), DRC, Ghana, Liberia, and Nigeria) have reported 576 mpox cases in 2023.

Cameroon reported 11 newly laboratory-confirmed mpox cases for the first time in 2023. Two of the 11 cases were reported in week 19 (ending 14 May 2023) and nine in week 20 (ending 21 May 2023). The country has cumulatively reported 29 cases from 1 January 2022 to 25 May 2023. The 11 confirmed cases in 2023 were reported from Logbaba district (1) of Litoral region and two districts, Mbonge (7) and South (3) of South Western region. Most cases reported in 2023 are males (872.2%) and 6 (54.5%) are within the 25–44 age group.

Since the start of 2023, DRC has reported 460 laboratory-confirmed cases. Cumulatively, the Country has reported 739 cases including 117 new cases in weeks 18 (66 cases) and 19 (51 cases). Additionally, two laboratory-confirmed deaths were reported from the DRC for the first time in 2023. More than half of the cases reported in DRC in 2023 are males (53.5%), and a larger proportion is within the 0–19 years (57.8%) age group.

Five newly confirmed cases were reported in Nigeria in the past two weeks. Nigeria has cumulatively reported 842 cases on 1 January 2022 to 25 May 2023. The top five states reporting cases in Nigeria in 2023 include Lagos (22), Ogun (15), Abia (6), Imo (5), and Rivers (5). The five states reported (67.1%) of cases in 2023. Most cases reported in 2023 are males (71%), and a larger proportion is within the 21–50 years (74.7%) age group.

Furthermore, Ghana retrospectively reported two newly confirmed cases for weeks 17 (1) and 18 (1), totalling 127 cases, including four deaths (CFR = 3.1%).

Fourteen out of 16 regions, comprising 55 districts, have confirmed mpox cases in Ghana since 2022. Most cases are concentrated in districts located in the southern parts of the country. Greater Accra has the highest number of cases (75), followed by the Ashanti region (12). Only Ahafo and Savanah regions have not recorded mpox cases in Ghana. Males constitute 58.3% (74) of all cases; the median age of all confirmed cases is 26. However, 97 (76.4%) cases are aged 16–39.

Between 1 January 2022 and 28 May 2023, 1,817 laboratory-confirmed cases have been reported from 13 African countries, including; Nigeria (842), the DRC (739), Ghana (127), CAR (29), Cameroon (29), Sudan (18), Liberia (12), Congo (5), South Africa (5), Benin Republic (3), Morocco (3), Egypt (3), and Mozambique (1).

The top three countries with the highest number of confirmed cases include Nigeria, 842 (46.3%), DRC 739 (40.7%), and Ghana, 127 (7.0%). The three countries have reported 1,708 (94.0%) of all confirmed cases.

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

Nineteen (21) deaths have been reported in the African region since 2022 from Nigeria (9), Ghana (4), Cameroon (3), DRC (2), CAR (1), Mozambique (1), and Sudan (1). Five deaths have been reported from three countries DRC (2), Nigeria (2) and CAR (1) in 2023.
SITUATION INTERPRETATION

Mpox cases increased in Africa as four and two countries reported new cases and new deaths respectively in the past two weeks. Six countries have reported new cases in 2023, including Cameroon, Central Africa Republic, the DRC, Ghana, Liberia, and Nigeria. Notably, Cameroon reported eleven mpox cases for the first time in 2023, while two laboratory-confirmed deaths were reported from the DRC for the first time in 2023.
Please refer to the calendar below to submit your IDSР data on a weekly basis:

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

afrooutbreak@who.int

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

<table>
<thead>
<tr>
<th>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>
### 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>Namibia</td>
<td>Crimean-Congo haemorrhagic fever (CCHF)</td>
<td>Ungraded</td>
<td>22-May-23</td>
<td>22-May-23</td>
<td>22-May-23</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

Namibia has confirmed a single case of Crimean-Congo hemorrhagic fever (CCHF). The case is a 55-year-old male farmer. He was seen at a private clinic on 14 May 2023 with a history of a tick bite. Samples were collected and sent to the National Institute for Communicable Diseases (NICD) for testing, and confirmation of CCHF was made on 21 May 2023. The case died on 18 May 2023.

### 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>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Feb-20</td>
<td>25-Feb-20</td>
<td>21-May-23</td>
<td>271 822</td>
<td>271 822</td>
<td>6 881</td>
<td>2.50%</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>17-Mar-20</td>
<td>16-Mar-20</td>
<td>26-Mar-23</td>
<td>28 014</td>
<td>28 014</td>
<td>163</td>
<td>0.60%</td>
</tr>
</tbody>
</table>

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 confirmed COVID-19 cases have been reported in the country, with 163 deaths and 27 847 recoveries.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
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<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

On 30 March 2020, the Ministry 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.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
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<th>CFR</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

No cVDPV2 case was reported this week. There have been two cases reported in 2023. There are 10 cases reported in 2021 and 2020, and eight in 2019.

<table>
<thead>
<tr>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

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

<table>
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<th>Deaths</th>
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</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

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.

<table>
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</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>Country</th>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burundi</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>1-Jan-23</td>
<td>1-Jan-23</td>
<td>28-May-23</td>
<td>450</td>
<td>175</td>
<td>7</td>
<td>1.60%</td>
</tr>
</tbody>
</table>

An outbreak of cholera has been declared in Burundi on 1 January 2023. As of 28 May 2023, 450 suspected cases and seven deaths (CFR 1.7%) have been reported.

<table>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 8 May 2023, the total number of confirmed COVID-19 cases is 53 749, including 15 deaths.
<table>
<thead>
<tr>
<th>Country</th>
<th>Disease</th>
<th>Grade</th>
<th>Onset Date</th>
<th>End Date</th>
<th>Start Date</th>
<th>End Date</th>
<th>Start Date</th>
<th>End Date</th>
<th>Start Date</th>
<th>End Date</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burundi</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>17-Mar-23</td>
<td>17-Mar-23</td>
<td>17-May-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (North, Adamawa &amp; East)</td>
<td>Protracted 2</td>
<td>31-Dec-13</td>
<td>27-Jun-17</td>
<td>30-Apr-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
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</tr>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (NW &amp; SW)</td>
<td>Protracted 2</td>
<td>1-Oct-16</td>
<td>27-Jun-18</td>
<td>30-Apr-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cameroon</td>
<td>Measles</td>
<td>Ungraded</td>
<td>2-Apr-19</td>
<td>1-Jan-23</td>
<td>7-May-23</td>
<td>4 504</td>
<td>4 152</td>
<td>18</td>
<td>0.40%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cameroon</td>
<td>Measles</td>
<td>Grade 3</td>
<td>24-Feb-22</td>
<td>1-Jan-22</td>
<td>7-May-23</td>
<td>126</td>
<td>18</td>
<td>3</td>
<td>2.40%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cameroon</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>23-May-19</td>
<td>1-Jan-20</td>
<td>17-May-23</td>
<td>13</td>
<td>13</td>
<td>0</td>
<td>0.00%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cameroon</td>
<td>Suspected deadly drug intoxication in children</td>
<td>Ungraded</td>
<td>9-Mar-23</td>
<td>2-May-23</td>
<td>11</td>
<td>10</td>
<td>90.90%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cape Verde</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>19-Mar-20</td>
<td>18-Mar-20</td>
<td>20-May-23</td>
<td>63 847</td>
<td>63 847</td>
<td>414</td>
<td>0.60%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central African Republic</td>
<td>Humanitarian crisis</td>
<td>Protracted 2</td>
<td>11-Dec-13</td>
<td>11-Dec-13</td>
<td>1-May-23</td>
<td>3 400 000</td>
<td>-</td>
<td>-</td>
<td></td>
<td></td>
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</tbody>
</table>

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).

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.

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-State 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 continues to be impacted by conflict in the Lake Chad basin, North-West, South-West, and by the Central African Republic crisis 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.

From 25 Oct 2021 to 15 May 2023, a total of 17 081 cases of cholera including 1 856 laboratory-confirmed cases and 384 deaths (CFR 2.25%) have been reported from eight Regions. Patients' ages range from 2 months to 103 years with a median of 28 years, and the sex ratio M/F is 1.3.

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.
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 : Bozoum, Bossembélé, Haut-Mbomou, Boda, Bambari, Bangui 1, Bimbo and Bouar-Baoro.

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.

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.

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.

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

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.

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

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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. The affected population is estimated at 34 556 people and those in need of humanitarian assistance in relation to this situation are estimated at 100 000.

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 520K 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.

From epidemiological week 1 to 18, 2023 (ending 7 May), 18 794 cases of cholera, including 104 deaths (CFR 0.6%), have been recorded. Nord Kivu province is leading in number of cases reported with 14 276 cases and 20 deaths followed by Tanganyika province with 1 501 cases and four deaths and Sud Kivu province with 1 449 cases and four deaths, Haut Katanga province with 1 029 cases with 41 deaths.

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%) have been reported. The number of deaths has been reviewed.

Since the start of the COVID-19 outbreak, declared on 14 March 2020, a total of 96 211 cases have been reported in the country with 183 deaths and 16 907 recoveries.

A total of 84 576 people have recovered.

A total of 82 601 suspected cases with 1 442 measles related deaths (CFR 1.70%), 1 546 IgM+ for measles from 2 722 tested samples and 282 IgM+ for Rubella, have been reported since the beginning of this year as of 23 April 2023. A total of 141 health zones with confirmed outbreaks since the beginning of this year.

All confirmed cases belong to Clade I.

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.

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

The suspected meningitis outbreak is ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 14 May 2023, a total of 557 suspected cases with 95 deaths (CFR 17.1%) have been reported.

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.

### Table: Outbreaks and Other Emergencies

<table>
<thead>
<tr>
<th>Disease</th>
<th>Grade</th>
<th>Reporting Period</th>
<th>Country</th>
<th>Total Confirmed</th>
<th>Total Deaths</th>
<th>CFR</th>
<th>Total Recovered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholera (Nord Kivu: Nyiragongo and Karisimbi HZs)</td>
<td>Grade 3</td>
<td>14-Dec-22</td>
<td>Democratic Republic of the Congo</td>
<td>8 486</td>
<td>8</td>
<td>0.10%</td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td>Ungraded</td>
<td>12-Oct-21</td>
<td>Democratic Republic of the Congo</td>
<td>82 601</td>
<td>1 442</td>
<td>1.70%</td>
<td></td>
</tr>
<tr>
<td>Mpox</td>
<td>Grade 3</td>
<td>30-Mar-19</td>
<td>Democratic Republic of the Congo</td>
<td>556</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Poliomyelitis (cVDPV1)</td>
<td>Grade 2</td>
<td>27-Aug-22</td>
<td>Democratic Republic of the Congo</td>
<td>157</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>26-Feb-21</td>
<td>Democratic Republic of the Congo</td>
<td>384</td>
<td>0</td>
<td>0.00%</td>
<td></td>
</tr>
<tr>
<td>Suspected Meningitis</td>
<td>Ungraded</td>
<td>31-May-22</td>
<td>Democratic Republic of the Congo</td>
<td>557</td>
<td>95</td>
<td>17.10%</td>
<td></td>
</tr>
<tr>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>Equatorial Guinea</td>
<td>17 229</td>
<td>183</td>
<td>1.10%</td>
<td></td>
</tr>
<tr>
<td>Marburg virus disease</td>
<td>Grade 3</td>
<td>7-Feb-23</td>
<td>Equatorial Guinea</td>
<td>17</td>
<td>12</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>
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 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 SNPPR, and SWEPR 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 SNPPR and lowland woredas of Dawuro and West Omo zones. Zabagezo woreda in Dawuro 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 Floods Ungraded 16-May-23 12-May-23 24-May-23 58 909 45 Floods have caused widespread destruction and displacement in Somali, Oromia, Southern Nations Nationalities & Peoples’, South-West Ethiopia Peoples’ and Afar regions. About 58 909 people have been affected, 35 350 households are displaced, 45 human lives lost, over 23 000 livestock perished, and more than 99 713 hectares of farmland destroyed.

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 28 Feb 2023. Humanitarian partners have assisted more than 3.7 million people as of 4 January 2023, representing 68.5% of the total planned caseload of 5.4 million people in Tigray under the current round (Round 2) of food distribution. Hundreds of thousands of people continue to be uprooted from their homestead, with a consequential increase in humanitarian needs. 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 four new deaths reported 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 487 836 recoveries.

Ethiopia Dengue Ungraded 16-May-23 10-May-23 10-May-23 1 638 103 9 0.50%
Since 4 April 2023, two districts (Logia and Mille) 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.

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%
The first COVID-19 confirmed case was reported in The Gambia on 17 March 2020. As of 4 November 2022, a total of 12 586 confirmed COVID-19 cases including 372 deaths, and 12 189 recoveries have been reported in the country.
Ghana COVID-19 Grade 3 12-Mar-20 12-Mar-20 24-Apr-23 171 657 171 657 1 462 0.90%
As of 24 April 2023, a total of 171 657 confirmed COVID-19 cases have been reported in Ghana. There have been 1 462 deaths and 170 188 recoveries reported.

Ghana Measles Ungraded 1-Jan-23 1-Jan-22 17-Feb-23 502 123 0 0.00%
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.

Ghana Mpox Grade 3 8-Jun-22 24-May-22 29-Mar-23 124 124 4 3.20%
On 8 June 2022, the Director General of the Ghana Health Service confirmed that five cases of monkeypox have been detected in the country. From 24 May-23 February 2023, there have been 123 confirmed and four deaths reported from 13 over 16 administrative regions, with the Greater Accra region reporting the most cases.

Ghana Polioyelitis (cVDPV2) Grade 2 23-Aug-19 23-Jul-19 17-May-23 34 34 - -
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.

Guinea COVID-19 Grade 3 13-Mar-20 13-Mar-20 19-Feb-23 38 302 38 302 467 1.20%
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.

Guinea Lassa Fever Ungraded 21-Mar-23 21-Mar-23 25-Mar-23 1 1 1 100.00%
On 21 March 2023, the Ministry of Health of Guinea notified WHO of a confirmed fatal case of Lassa fever in a three-year-old male child from the Kobela health area, Nzerekore health district. The date of onset of symptoms was 13 March 2023, with fever, asthenia, anorexia, and dry cough. On 20 March 2023, the child was taken to the regional hospital for medical attention due to the persistence of the disease. On 21 March 2023 the child presented with bleeding from the mouth and blackish blood from the anus. Laboratory test results on blood sample taken the same day were positive for Lassa fever virus. The child died in the community, in a remote village, after escaping from the hospital. A safe and dignified burial was not performed. Public health measures are being taken.

Guinea Measles Ungraded 9-May-18 1-Jan-22 31-Dec-22 23 259 432 33 0.10%
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.

Guinea Skin injury from unknown chemical exposure Ungraded 19-Apr-23 12-Apr-23 21-Apr-23 250 250 0 0.00%
On 7 April 2023, about 270 kilometers off the west coast of Conakry, several fishermen, including Guineans, Sierra Leoneans, Liberians and Ghanaians, were exposed to an unknown chemical. According to the fishermen, a boat was seen dumping a product into the open sea. The product emitted a fizzy, pungent cloud and left a yellowish substance on the surface of the water. As of 21 April, 250 cases of burns, including 0 deaths, have been reported among fishermen only. The cases were reported in the Conakry (240 cases, 96%) and Kindia (10 cases, 4%) regions. On 21 April alone, 26 new cases were reported. Only six cases were severe enough to require hospitalization. Investigations are ongoing to identify the chemical product involved.

Guinea-Bissau COVID-19 Grade 3 25-Mar-20 25-Mar-20 9-Apr-23 9 614 9 614 177 1.80%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 9 April 2023, the country has reported 9 614 confirmed cases of COVID-19 with 9 315 recoveries and 177 deaths.

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, Kilifi and Kitui are in 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.

Kenya Anthrax Ungraded 10-Apr-23 11-May-23 3 15 3 20.00%
The outbreak has been reported from Murang’a County. A total of 15 cases and three deaths have been reported from five sub-counties; Gatanga (1), Kandara (5, including 2 deaths), Kigumo (7, including 1 death, Maragwa (1) and Mathioya (1).

Kenya Cholera Grade 3 19-Oct-22 5-Oct-22 7-May-23 10 297 464 164 1.60%
The cholera outbreak has affected 23 counties namely : Nairobi, Kiambu, Nakuru, UasinGishu, Kajiado, Murang’a, Machakos, Garissa, Meru, Nyeri, Wajir, Tana River, Kitui, Homa Bay, Mandera, West Pokot, Bomet, Samuru, Marsabit, kirinyaga,Kisumu, Siaya and Isiolo counties. A total of 10 297 cases, with 464 confirmed by culture, and 164) deaths (CFR 1.6 %) have been reported.

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.
## Kenya

### Enteric Outbreak
- **Ungraded**
- **Start**: 13-Apr-23
- **End**: 31-Mar-23
- **Cases**: 1062
- **Deaths**: 4
- **CFR**: 0.40%

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 Butepe 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 1,004 (95%), 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 with symptoms of disease.

### Leishmaniasis (Visceral)
- **Ungraded**
- **Start**: 31-Mar-19
- **End**: 3-Jan-20
- **Cases**: 270
- **Deaths**: 108
- **CFR**: 40.3%

The outbreak has been continuous since 2020. A total of 2,300 cases in 2020 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.

### Measles
- **Ungraded**
- **Start**: 3-Feb-22
- **End**: 13-Dec-21
- **Cases**: 10
- **Deaths**: 0
- **CFR**: 0.00%

Since the measles outbreak started on 13 December 2021 as of 21 April 2023, a total of 71 confirmed cases of Lassa fever with 19 deaths (CFR 27%) have been reported in Liberia.

### Mumps
- **Grade 3**
- **Start**: 21-Jul-22
- **End**: 23-Jul-22
- **Cases**: 34,490
- **Deaths**: 706
- **CFR**: 2.10%

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.

## Madagascar

### Cyclones
- **Grade 2**
- **Start**: 25-Jan-23
- **End**: 19-Jan-23
- **Cases**: 391,000
- **Deaths**: 36
- **CFR**: 0.09%

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, 52,750 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.

### Malnutrition Crisis
- **Protracted 2**
- **Start**: 1-Jan-21
- **End**: 28-Apr-23
- **Cases**: 679
- **CFR**: 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 2020 to 2022.

### Measles
- **Grade 2**
- **Start**: 14-Mar-23
- **End**: 16-Mar-23
- **Cases**: 58,805
- **Deaths**: 1
- **CFR**: 0.00%

A total of 29 districts have reported cholera cases since the confirmation of the first case in March 2022 in Machanga district. As of 28 May 2023, cumulative confirmed cases and deaths reported since the onset of the outbreak is 58,805 and 1,761 respectively, with Case Fatality Rate at 3.0%.

### Polio (WPV1)
- **Grade 2**
- **Start**: 31-Jan-22
- **End**: 1-Feb-22
- **Cases**: 1
- **Deaths**: 0
- **CFR**: 0.00%

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.

<table>
<thead>
<tr>
<th>Country</th>
<th>Disease</th>
<th>Grade</th>
<th>Start</th>
<th>End</th>
<th>Proportion of Risk</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kenya</td>
<td>Enteric Outbreak</td>
<td>Ungraded</td>
<td>13-Apr-23</td>
<td>31-Mar-23</td>
<td>1062</td>
<td>4</td>
</tr>
<tr>
<td>Kenya</td>
<td>Leishmaniasis (Visceral)</td>
<td>Ungraded</td>
<td>31-Mar-19</td>
<td>3-Jan-20</td>
<td>270</td>
<td>108</td>
</tr>
<tr>
<td>Kenya</td>
<td>Measles</td>
<td>Ungraded</td>
<td>29-Jun-22</td>
<td>1-Jan-23</td>
<td>270</td>
<td>108</td>
</tr>
<tr>
<td>Lesotho</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>13-May-20</td>
<td>13-May-20</td>
<td>34,490</td>
<td>706</td>
</tr>
<tr>
<td>Liberia</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>16-Mar-20</td>
<td>16-Mar-20</td>
<td>8,136</td>
<td>294</td>
</tr>
<tr>
<td>Liberia</td>
<td>Lassa Fever</td>
<td>Ungraded</td>
<td>3-Mar-22</td>
<td>6-Jan-22</td>
<td>71</td>
<td>71</td>
</tr>
<tr>
<td>Liberia</td>
<td>Measles</td>
<td>Ungraded</td>
<td>3-Feb-22</td>
<td>1-Dec-21</td>
<td>10,664</td>
<td>93</td>
</tr>
<tr>
<td>Liberia</td>
<td>Mumps</td>
<td>Grade 3</td>
<td>21-Jul-22</td>
<td>23-Jul-22</td>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Cyclones</td>
<td>Grade 2</td>
<td>25-Jan-23</td>
<td>19-Jan-23</td>
<td>391,000</td>
<td>53</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Malnutrition crisis</td>
<td>Protracted 2</td>
<td>1-Jan-21</td>
<td>28-Apr-23</td>
<td>679</td>
<td>-</td>
</tr>
<tr>
<td>Malawi</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>3-Mar-22</td>
<td>3-Mar-22</td>
<td>58,805</td>
<td>1,761</td>
</tr>
<tr>
<td>Malawi</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>2-Apr-20</td>
<td>2-Apr-20</td>
<td>88,728</td>
<td>2,686</td>
</tr>
<tr>
<td>Malawi</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>31-Jan-22</td>
<td>1-Feb-22</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Mali</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>16-Mar-23</td>
<td>16-Mar-23</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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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.

### Mali COVID-19
- **Grade:** 3
- **From:** 25-Mar-20 to 25-Mar-20, 14-May-23
- **Cases:** 33,147
- **Deaths:** 743
- **Recoveries:** 2.20%

On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 14 May 2023, a total of 33,147 confirmed COVID-19 cases have been reported in the country including 743 deaths and 32,355 recoveries.

From the beginning of the year through 26 March 2023, 283 suspected measles cases were tested in Mali and 94 were laboratory confirmed. Confirmed measles cases were reported in 13 of the country’s 75 health districts (17.3%).

### Mauritania COVID-19
- **Grade:** 3
- **From:** 13-Mar-20 to 14-May-23
- **Cases:** 63,669
- **Deaths:** 997
- **Recoveries:** 1.70%

The government of 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 recoveries have been reported in the country.

Since the beginning of 2023, cases of measles have been reported in the three wilayas of Nouakchott and eight other wilayas in the interior of the country. As of 7 May 2023, the country has reported 285 suspected measles cases of which 192 cases were collected and tested with 111 positive IgM+ cases. Active contact tracing resulted in 75 epidemiologically confirmed cases. Three deaths including two community deaths have been recorded to date.

### Mauritius COVID-19
- **Grade:** 3
- **From:** 18-Mar-20 to 24-Apr-23
- **Cases:** 304,233
- **Deaths:** 1,050
- **Recoveries:** 0.40%

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.

### Mozambique COVID-19
- **Grade:** 3
- **From:** 22-Mar-20 to 5-May-23
- **Cases:** 233,417
- **Deaths:** 2,243
- **Recoveries:** 1.00%

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 2,243 deaths.

### Mozambique Floods
- **Grade:** 2
- **From:** 13-Feb-23 to 1-Apr-23
- **Cases:** 1,255,786
- **Deaths:** 186

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, Tete, Inhambane, and Niassa.

### Mozambique Cholera
- **Grade:** 3
- **From:** 14-Sep-22 to 24-Apr-23
- **Cases:** 233,417
- **Deaths:** 1,243
- **Recoveries:** 0.40%

Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 14 September 2022 to 22 May 2023, a total of 30,843 cases and 132 deaths (CFR 0.4%) have been reported from 11 provinces and 60 districts.

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.

### Mozambique Poliomyelitis
- **WPV1**
- **Grade:** 2
- **From:** 17-May-22 to 24-May-23
- **Cases:** 8
- **Deaths:** 0
- **Recoveries:** 0.00%

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

### Namibia COVID-19
- **Grade:** 3
- **From:** 14-Mar-20 to 14-May-23
- **Cases:** 171,444
- **Deaths:** 4,091
- **Recoveries:** 2.40%

The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 14 May 2023, a total of 171,444 confirmed cases with 4,091 deaths have been reported.

### Niger COVID-19
- **Grade:** 3
- **From:** 14-Mar-20 to 14-May-23
- **Cases:** 144
- **Deaths:** 240
- **Recoveries:** 1.90%

The total number of internally displaced people has reached a record high. The number of people in need of humanitarian assistance in Niger has increased from 1.9 million in 2017 to 4.3 million (or 15% of the population) in 2023. More than 50% of children between the ages of 7 and 16 in Niger are out of school due to the conflict.

### Niger Measles
- **Grade:** Ungraded
- **From:** 5-Apr-22 to 18-Mar-23
- **Cases:** 31,923
- **Deaths:** 50
- **Recoveries:** 0.00%

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.

### Mozambique Poliomyelitis
- **WPV1**
- **Grade:** 2
- **From:** 17-May-22 to 24-May-23
- **Cases:** 8
- **Deaths:** 0
- **Recoveries:** 0.00%

According to the Global Polio Eradication Initiative, there was no WPV1 case reported this week. There were eight cases reported in 2022.
### Nigeria Poliomyelitis

<table>
<thead>
<tr>
<th>Grade</th>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Deaths</th>
<th>CFR</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 2</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>1-Jun-18 - 1-Jan-22</td>
<td>54</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

No cVDPV2 case was reported this week. There were 15 cases reported last year 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 Nataira in Zinder region.

More than half a million people could face emergency levels of food insecurity, with very high rates of severe acute malnutrition that could lead to death in Borno, Adamawa and Yobe states. A rapid scale-up of humanitarian assistance is needed to prevent this from happening. An estimated two million children under the age of five in the three states are at risk of acute malnutrition this year. About 700,000 children are at risk of severe acute malnutrition, which means they are 11 times more likely to die than well-nourished children.

### Nigeria Cholera

<table>
<thead>
<tr>
<th>Grade</th>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Deaths</th>
<th>CFR</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 3</td>
<td>Cholera</td>
<td>1-Jan-23 - 2-Apr-23</td>
<td>1 336</td>
<td>79</td>
<td>5.90%</td>
<td>-</td>
</tr>
</tbody>
</table>

From 1 January to 2 April 2023, a cumulative 1 336 suspected cholera cases and 79 deaths (CFR: 5.9%) have been reported from 43 Local Governmental Areas (LGAs) in 12 states, namely Abia, Bauchi, Bayelsa, Cross River, Ebonyi, Kano, Katsina, Niger, Ondo, Osun, Sokoto and Zamfara. Males represent 53% of all cholera suspected cases.

### Nigeria COVID-19

<table>
<thead>
<tr>
<th>Grade</th>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Deaths</th>
<th>CFR</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 3</td>
<td>COVID-19</td>
<td>27-Feb-20 - 21-Apr-23</td>
<td>266 675</td>
<td>3 155</td>
<td>1.20%</td>
<td>-</td>
</tr>
</tbody>
</table>

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.

### Nigeria Meningitis

<table>
<thead>
<tr>
<th>Grade</th>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Deaths</th>
<th>CFR</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 1</td>
<td>Meningitis</td>
<td>1-Oct-11 - 26-Mar-23</td>
<td>827</td>
<td>823</td>
<td>117.40%</td>
<td>-</td>
</tr>
</tbody>
</table>

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 states to coordinate and strengthen the ongoing response activities.

### Nigeria COVID-19

<table>
<thead>
<tr>
<th>Grade</th>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Deaths</th>
<th>CFR</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 3</td>
<td>COVID-19</td>
<td>31-Jan-22 - 29-Mar-23</td>
<td>829</td>
<td>829</td>
<td>1.10%</td>
<td>-</td>
</tr>
</tbody>
</table>

From 1 January to 29 March 2023, Nigeria has reported 829 monkeypox confirmed cases with nine deaths.

### Nigeria Dengue

<table>
<thead>
<tr>
<th>Grade</th>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Deaths</th>
<th>CFR</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 2</td>
<td>Dengue</td>
<td>1-Jun-18 - 17-May-23</td>
<td>54</td>
<td>54</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Two cVDPV2 cases were reported this week; one each in Sokoto and Kebbi. There are six cVDPV2 cases reported this year and 48 cases reported in 2022.

### Rwanda Floods

<table>
<thead>
<tr>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floods</td>
<td>Ungraded</td>
<td>4-May-23 - 5-May-23</td>
<td>131</td>
</tr>
</tbody>
</table>

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.

### Rwanda COVID-19

<table>
<thead>
<tr>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20 - 26-Feb-23</td>
<td>133 194</td>
</tr>
</tbody>
</table>

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.

### Sao Tome and Principe COVID-19

<table>
<thead>
<tr>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19</td>
<td>Grade 3</td>
<td>7-Apr-20 - 26-Apr-23</td>
<td>6 562</td>
</tr>
</tbody>
</table>

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 February 2023, a total of 6 562 confirmed cases of COVID-19 have been reported, including 80 deaths. A total of 6 388 cases have been reported as recoveries.

### Sao Tome And Principe Dengue

<table>
<thead>
<tr>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dengue</td>
<td>Grade 2</td>
<td>11-Apr-22 - 30-Apr-23</td>
<td>1 210</td>
</tr>
</tbody>
</table>

From 15 April to 30 April 2023, a total of 1 210 cases and 11 deaths (CFR 0.9%) have been confirmed via RDT from: Água Grande (824 67.3%), Mêzbô (182, 15.5%), Lobata (98, 8.3%), Cantagalo (48, 4.1%), Cauê (23, 2.0%), Lembá (21, 1.6%), and RAP (14, 1.2%). During Mar 2023, there were 10 new cases registered in the country. Água Grande’s attack rate is by far the highest (95.8 per 10,000 inhabitants). Those aged 55-59 years are experiencing the highest attack rate at 78.3 cases per 10,000.

### Senegal COVID-19

<table>
<thead>
<tr>
<th>Disease Type</th>
<th>Reporting Years</th>
<th>Cases Reported</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19</td>
<td>Grade 3</td>
<td>2-Mar-20 - 26-Apr-23</td>
<td>88 997</td>
</tr>
</tbody>
</table>

From 2 March 2020 to 28 April 2023, a total of 88 997 confirmed cases of COVID-19 including 1 971 deaths and 87 024 recoveries have been reported in Senegal.
The Ministry of Health of Senegal has reported a confirmed case of Crimean-Congo hemorrhagic fever on 21 April 2023 in a 35-year-old male patient. He is a butcher residing in Fadia city, Guédiawaye district, Dakar region. The date of onset of symptoms was 10 April with fever and flu-like syndrome. Samples were collected on 20 April for suspected viral hemorrhagic fever after he developed a hemorrhagic syndrome and thrombocytopenia. He died on 22 April. On 9 May 2023, a second confirmed case was reported from the Lingueule district in the Louga region.

A total of 40 dengue confirmed cases have been reported in Thilogne (38), Pikine (1) and Popenguine (1) districts from week 1 to week 12 of 2023. The last confirmed case was recorded on 23 March 2023 (week 12).

From epidemic week 1 to 19 of 2023 (ending 14 May 2023), 371 confirmed cases of measles with no deaths were reported from 13 regions in Senegal, with the most affected regions being Diourbel (256 cases), Kédougou (18 cases), Tambacounda (17 cases), Louga (15 cases), Thiès (14 cases), Dakar (12), and Kolda (10). Of the 160 children aged 9 months to 5 years with confirmed measles, 140 (88%) were not vaccinated against measles.

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

On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 13 March 2023, a total of 7,763 confirmed COVID-19 cases were reported in the country, including 125 deaths and 4,898 recovered cases.

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 Karen districts reported more than 3 measles cases. Surveillance and immunisation activities have been intensified in all districts.

A total of 43 cholera cases and five deaths have been reported in Gauteng Province to date. A total of 32 cases were reported from Hammanskraal and 4 new deaths over the last seven days. Post mortem testing of suspected cholera deaths at Jubilee hospital will improve case finding and confirmation of suspected cholera deaths.

Since the start of the COVID-19 pandemic in South Africa through 24 April 2023, a cumulative total of 4,072,533 confirmed cases and 102,595 deaths have been reported.

From 8 October 2022 to 26 May 2023, a total of 1,018 laboratory-confirmed cases were reported from eight provinces with declared measles outbreaks in Limpopo (447 cases), Mpumalanga (108 cases), North West (217 cases), Gauteng (173 cases), Free State (32 cases), Western Cape (14), KwaZulu-Natal (20) and Northern Cape (7).

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.

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. Floodwaters 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 face 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 2023, 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.

The food insecurity situation in South Sudan is projected to worsen during the lean season from Apr-Jul 2023, as some 7.8 million people (63% of the population) will likely face Crisis (IPC Phase 3) or worse acute food insecurity, with 43K people likely to be in Catastrophe (IPC Phase 5) acute food insecurity in Akobo, Canal/Pigi and Fangak counties of Jonglei State; and Leer and Mayendit counties of Unity State.

On 7 March 2023, the Ministry of health of South Sudan declared cholera outbreak in Malakal, Upper Nile State. From 22 February to 16 May 2023, a total of 1,471 cases including two deaths (CFR 0.1%) have been reported. Cases were reported from Malakal town and the IDP camp. Approximately 52% of cases are male and the majority of them are children aged 1-4 accounting for 48% of all 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 current outbreak in the Bentiu IDP camp is ongoing. As of 8 May 2023, a total of 4,136 cases of hepatitis E including 27 deaths (CFR: 0.7%) have been reported since January 2019. Approximately 54% of cases are male. The most affected age group were those 15-44 years, accounting for 40% of all followed by children ages 1-4 years, accounting for 24%. On 14 April 2023, an outbreak was reported in Wau, Western Bahr el Ghazal state. Since 8 May 2023, 147 cases and 6 deaths were reported.
The country has reported 6,046 suspected measles cases including 592 laboratory confirmed (9.8%); 3,109 (51.4%) are epi-linked, 1,712 (28.6%) are clinically compatible and 633 (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.

For the cholera outbreak in Tanzania, nine days have passed since the last recorded case on 25 April 2023. As of 4 May 2023, a total of 82 cases, three deaths (CFR 3.6%) have been reported.

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.

On 21 March 2023, the Ministry of Health in Tanzania declared an outbreak of Marburg virus disease. As of 26 May 2023, nine cases including 8 confirmed and one probable, 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. The countdown to the end of the outbreak commenced on 20 April 2023. As of 27 May 2023, four days remain to the end of the outbreak.

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.

According to the Famine Early Warning Systems Network report covering projections from October 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 IPC phase 3 and above while 38,000 people are estimated to be in IPC phase 4 from August 2022-February 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.

Since 21 January 2023, Zambia has recorded a total of 577 cases of cholera from eight districts; Mpulungu (257), Vubwi (81), Nsama (73), Nchelenge (64), Mwansambwe (55), Chipata (40), Chipangali (25) and Lusangazi (1). A total of 12 deaths from Mpulungu (4), Nsama (3), Vubwi (2), Chipangali (1), Chipata (1) and Nchelenge (1) districts have been reported.

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 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

#### Tanzania, United Republic of

<table>
<thead>
<tr>
<th>Measles</th>
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<tbody>
<tr>
<td>18-Aug-22</td>
<td>30-Jun-22</td>
</tr>
<tr>
<td>21-Feb-23</td>
<td>3 811</td>
</tr>
<tr>
<td>710</td>
<td>0.30%</td>
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</tbody>
</table>

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, Nzega, Chakechake, Sumbawanga, Chunya, Mtwarara, Uvinza, Mpimbwe and Malinyi. As of 28 May 2023, no more updates from the Country and the event is closed.

#### Uganda

<table>
<thead>
<tr>
<th>Measles</th>
<th>Ungraded</th>
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</thead>
<tbody>
<tr>
<td>8-Dec-22</td>
<td>2-Feb-23</td>
</tr>
<tr>
<td>144</td>
<td>0.00%</td>
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</tbody>
</table>

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. As of 28 May 2023, no more updates from the Country and the event is closed.

†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/](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.
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.

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