WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 29: 17 - 23 July 2023 Data as reported by: 17:00; 23 July 2023

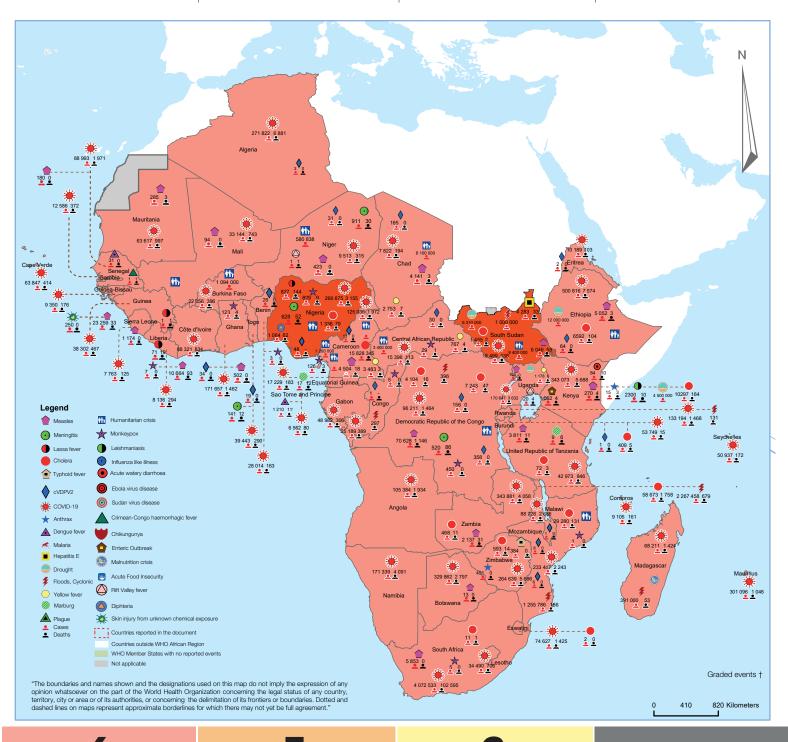


New events

Ongoing events

Outbreaks

Humanitarian crises



Grade 3 events

Protracted 3 events Protracted 2 events

Grade 2 events

Grade 1 events

Protracted 1 events

Ungraded events

Overview

Contents

- 1 Overview
- 2-7 Ongoing events
- 8 IDSR Report
- 9 All events currently being monitored

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

- Humanitarian crisis in South Sudan
- Circulating vaccine-derived poliovirus type 2 in Kenya
- Ocirculating vaccine-derived poliovirus type 2 in the United Republic of Tanzania

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:

- South Sudan's ongoing humanitarian crisis is being compounded by an influx of refugees fleeing the armed conflict in neighbouring Sudan. Available resources are overstretched, and only 39% of the 2023 humanitarian response plan has been funded, creating a critical funding gap to sustain response activities. With more people expected to arrive in the weeks and months ahead, as well as the internal crises the country faces resulting from its armed violence and climate-related emergencies, the situation looks dire, necessitating urgent support from donors and partners to meet the increasing humanitarian demands in the country.
- Kenya and Tanzania have recently reported cases of circulating vaccine-derived poliovirus linked to cross-border spread, where suboptimal vaccination coverage and immunization levels coupled with mass transboundary population movements pose a high risk for the potential spread of polio infection. In all instances, the continued spread of existing outbreaks as well as the emergence of new outbreaks of cVDPV2 point to gaps in routine immunization coverage and inadequate outbreak response vaccination. It is important to respond with a high-quality reactive vaccination campaign in the current outbreak as well as maintain uniformly high routine immunization coverage at the subnational levels to minimize the consequences of any new virus introduction.

South Sudan

9.4 million

3

Need humanitarian assistance Grade

Humanitarian crisis

EVENT DESCRIPTION

South Sudan's complex humanitarian crisis continues to unfold and has been exacerbated by the influx of returnees and refugees from the armed conflict in neighbouring Sudan. More than 193 000 returnees and refugees have already arrived in the country as of 23 July 2023, and more are expected over the coming weeks and months as the security situation deteriorates in Sudan. This mass influx of refugees and returnees has caused increased pressure on available services, limiting access to basic services, including healthcare for both the refugees and local host communities. Women and children bear the brunt of the crisis as those arriving in South Sudan are becoming increasingly vulnerable due lack of access to cash and productive assets to meet their daily livelihood needs. Incidents of harassment and robbery from armed groups experienced by the displaced population as they flee the crisis in Sudan as well as physical injuries sustained from gunshot wounds and other forms of violence do not only manifest as traumatic events but also highlight the critical need for psychosocial, medical, and other livelihood services to alleviate the pains and suffering faced.

South Sudan's already existing internal humanitarian crisis due to years of armed conflict, with sectarian violence and climate-induced emergencies fuelling severe food insecurity, floods, droughts, and epidemics, among others, also continues to unfold in parallel with the humanitarian crisis induced by the conflict in neighbouring Sudan. About 9.4 million people are projected to need humanitarian and/or protection assistance across the country in 2023. Malnutrition remains a major public health problem across the country, with 59 out of 79 counties categorized as experiencing serious or critical phases of acute malnutrition and an estimated 2.2 million women and children in need of treatment for acute malnutrition. The ongoing lean season is expected to exacerbate the acute malnutrition crisis, particularly in Jonglei, Upper Nile, Unity and Warrap states.

Epidemics also remain rife as the country is currently dealing with concurrent outbreaks of measles, cholera, hepatitis E, and COVID-19. Since the beginning of 2023,

17 out of the country's 79 counties have been affected by measles outbreaks. One of the states heavily affected, Eastern Nile, on the border with Sudan, has recorded over 2 310 cases with 64 deaths (case fatality ratio 1.4%) as of epidemiological week 26 (week ending 02 July 2023), which is largely fuelled by low immunization coverage among refugees and the host population. A cholera outbreak which was declared in Upper Nile State on 7 March 2023, has so far recorded 1 471 cases with two deaths. Children below five years old are the most affected by this outbreak. An outbreak of hepatitis E was also recently declared in Western Bahr el-Ghazal State, with about 91 cases reported.

These frequent and concurrent outbreaks highlight the challenges faced by the health system to provide routine care, including immunization services, amidst the complexity of the country's situation. Resources for responding to these outbreaks and other humanitarian needs are overstretched, outstripping the huge demands. As of 23 June 2023, only 39.4 per cent of the country's US\$1.7 billion Humanitarian Response Plan is funded. This highlights a critical funding gap that needs to be breached.

PUBLIC HEALTH ACTIONS

- · South Sudan's Humanitarian Country Team, involving inter-agency partners, continues to support the government in coordinating response to the humanitarian crisis. WHO and its health cluster partners are providing support to the health needs of the population.
- Emergency Medical Teams are being deployed, including a dedicated ambulance team stationed at Juba International Airport, to provide critical care or refer those needing such care among refugees and returnees from Sudan.
- Reactive vaccination campaigns are being conducted in response to outbreaks of measles.
- Health emergency kits have been prepositioned in six locations, benefiting approximately 101 555 people for three months.
- Training has commenced for stabilization centres to provide inpatient management of Severe Acute

Go to map of the outbreaks

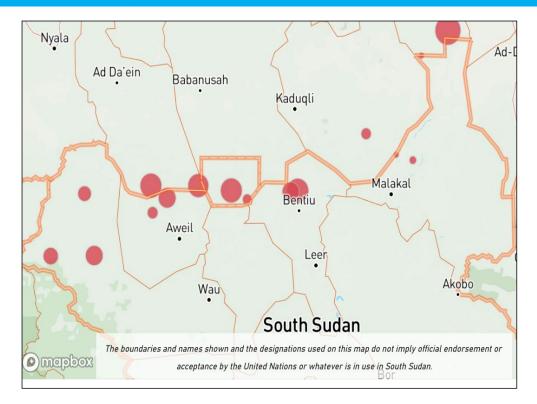
Malnutrition (SAM) cases with medical complications.

- Daily active case search by WHO and CHD in health facilities
- WHO supported Case management training conducted on 13 15 June 2023 for 42 healthcare workers in Renk county
- An oral Cholera vaccination campaign commenced on 16 March 2023, targeting 66 121 individuals aged one year and above in the Points of Entry (POC) and Malakal town. A total of 54 538 people were vaccinated (Malakal town and POC) with Oral Cholera Vaccine (OCV) achieving 82% coverage.

SITUATION INTERPRETATION

South Sudan is facing a dire humanitarian crisis resulting from a protracted conflict, weak socio-economic infrastructure, and climate-induced emergencies, which is being exacerbated by the current influx of displaced population from neighbouring Sudan. Coordinated and concerted efforts to meet the growing demand, including mobilization of additional resources to breach the funding gap required for delivering critical humanitarian interventions, is more than urgently needed.

A map showing the designated points of entry along South Sudan's border used by returnees and refugees from neighbouring Sudan



Kenya

cases Deaths

Grade

Circulating Vaccine-derived Poliovirus type 2

EVENT DESCRIPTION

The Ministry of Health of Kenya has notified WHO of two cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) confirmed on 28 June 2023 in Hagadera Refugee Camp, Fafi Sub-county, Garissa County. The cases were detected and confirmed as part of routine Acute Flaccid Paralysis (AFP) surveillance activities ongoing across the country.

The first case is a 34-month-old male with onset of paralysis on 26 May 2023, while the second case, who has a recent history of travel to Somalia, is a 19-monthold female with onset of paralysis on 27 May 2023. Both cases are residents of the Hagadera Refugee Camp in

Analysis of stool samples among asymptomatic contacts of the cases also shows cVDPV2 isolates from a 2-yearold male in the same area. This asymptomatic community contact reportedly had a recent travel history to the Lower Juba region of southern Somalia.

Genetic sequencing analysis revealed that all three isolates have between 65 and 73 nucleotide changes from Sabin and are linked to cVDPV2s currently circulating in the Banadir region of southern Somalia. Residents of the Hagadera Refugee Camp are known to have frequent population movements with neighbouring Somalia.

The last reported case of cVDPV2 in Kenya was in January 2021. The country remains wild poliovirus free since it reported its last indigenous wild polio cases in 2013. According to the WHO-UNICEF estimates of national immunization coverage, the oral polio vaccine third dose (OPV3) and the inactivated polio vaccine first dose (IPV1) was 87% and 89%, respectively in 2022.

PUBLIC HEALTH ACTIONS

- The Ministry of Health, through the Division of Disease Surveillance and Response and the Public Health Emergency Operations Center, has activated a Technical Coordinating Committee to mount an emergency response to the outbreak.
- Field investigation and risk assessment of the event, led by the Ministry of Health with support from the Global Polio Eradication Initiative (GPEI) partners

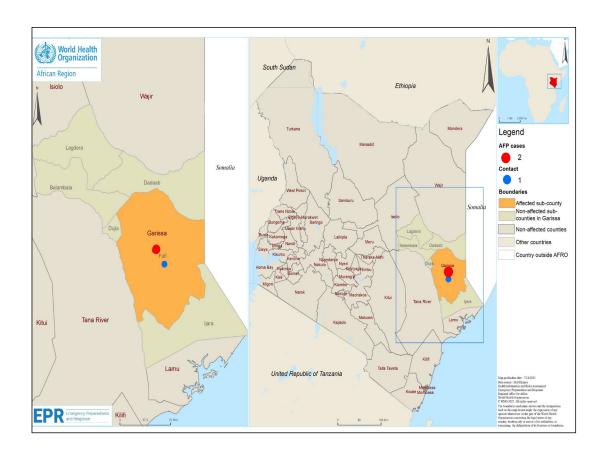
have been conducted.

- The response to the outbreak is designed to be consistent with internationally agreed guidelines for outbreak response, including the rapid implementation of large-scale supplementary immunization activities with the most appropriate and available type 2 polio vaccine.
- Routine acute flaccid paralysis surveillance for the detection of polio cases remains ongoing across the affected areas and the rest of the country.
- An analysis of population immunity levels with focus on subnational areas is being conducted to identify under-immunized populations for targeted interventions

SITUATION INTERPRETATION

The recent detection of cVDPV2 cases in Kenya, linked to an ongoing outbreak in Somalia where frequent population movements and exchanges between the two countries can facilitate transboundary exposure and spread of the pathogen is of concern. This is occurring in the context of suboptimal immunization coverage among the refugee population, where overcrowding, high rates of malnutrition, inadequate water and sanitation, and an influx of new arrivals to the camp from Somalia can exacerbate the situation. WHO advises Member States and State Parties to maintain uniformly high routine immunization coverage at the subnational level to minimize the consequences of any new virus introduction. The current outbreak response strategy should be comprehensive in nature, including encompassing areas in neighbouring Somalia for an effective response.

Cases of circulating vaccine-derived poliovirus type 2, Kenya, July 2023



United Republic of Tanzania

Case Deaths CFR

Grade

Circulating Vaccine-derived Poliovirus type 2

EVENT DESCRIPTION

The Ministry of Health of Tanzania has notified the World Health Organization of a case of circulating vaccinederived poliovirus type 2 (cVDPV2) detected in a 23-month-old female child with acute flaccid paralysis (AFP) on 17 July 2023 following laboratory confirmation. The case patient, with an onset of paralysis on 26 May 2023, was detected in Sumbawanga Municipality, Rukwa Region, Tanzania, following routine AFP surveillance for poliomyelitis. The confirmation followed the collection of two stool samples from the case patient on 30 and 31 May 2023, which were sent to a regional reference laboratory at the Uganda Viral Research Institute (UVRI) for laboratory testing.

Genomic sequencing analysis showed that the virus isolate had undergone 15 nucleotide changes and is genetically related to cVDPV2 circulating in South Kivu, Democratic Republic of the Congo. Lake Tanganyika, which forms a border between Tanzania and the Democratic Republic of the Congo, is located west of the Rukwa Region, indicating possible cross-border infection in the area.

This is the first recorded case of cVDPV2 in Tanzania since 2000, and the country has remained free from wild poliovirus since reporting its last indigenous case in 1996. However, since 2022 the country has been actively participating in a multi-country coordinated outbreak response across East and Southern Africa subregions in response to the detection of different strains of poliovirus in these sub-regions. According to the 2022 WHO-UNICEF estimates of national immunization coverage in Tanzania, the oral polio vaccine third dose (OPV3) and the inactivated polio vaccine first dose (IPV1) coverages were 88%, respectively.

PUBLIC HEALTH ACTIONS

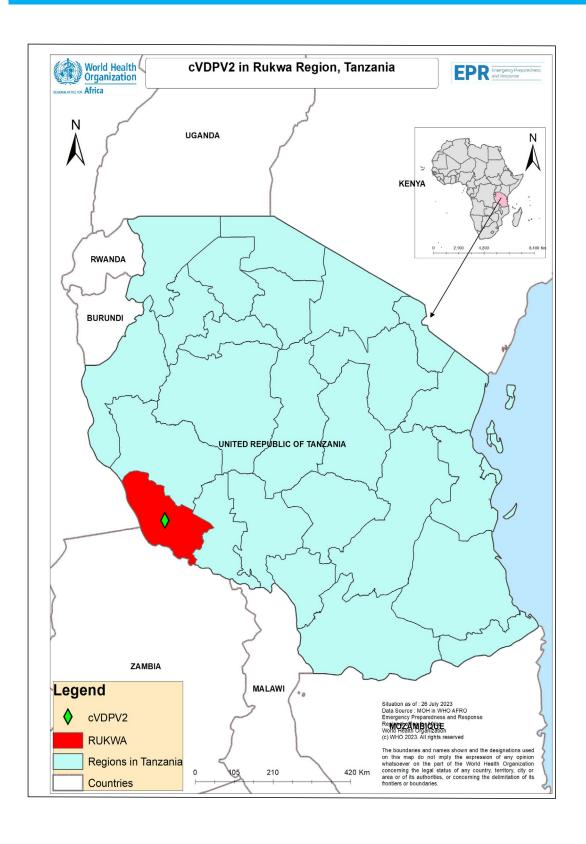
- The Ministry of Health of Tanzania, together with its Global Polio Eradication Initiative partners, is coordinating the response to the event.
- A risk assessment is being implemented, led by the Ministry of Health and supported by Global Polio Eradication Initiative partners, along with a field investigation and planning of appropriate response.

- Enhanced surveillance for additional AFP cases is being conducted in the affected areas. Routine surveillance activities are also ongoing across the rest of the country.
- An analysis of population immunity levels with a focus on subnational areas is being conducted to identify under-immunized populations for targeted interventions.

SITUATION INTERPRETATION

Tanzania has reported its first case of cVDPV2 after several years of no cases and more than a year of coordinated subregional response activities. The current outbreak highlights the potential for cross-border spread and importation of polio cases among populations with suboptimal immunity levels. A swift response, including enhanced surveillance and a reactive circumscribed immunization campaign, will be needed to avert any potential expansion of the outbreak.

Map showing region affected by circulating vaccine-derived poliovirus type 2 case in the United Republic of Tanzania, July 2023



All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
New Events									
South Sudan	Unknown disease	Ungraded	17-Jul-23	18-Jul-23	18-Jul-23	359		19	5.30%
in South Sudan 2023, a total of (VHFs), malaria	. Cases reportedly 359 cases with 1 , measles, and sh	y presented with 9 9 deaths (CFR 5.3	vomiting blood, b 3%) have been re ie rest are being i	loody diarrhoea, ported. Of 45 sar processed. All tes	sore throat, red on the sore throat, red of the sore t	g supportive supervisio eyes, running nose, blu rom the case patients, negative for VHFs, 10 a	irry vision, cough 13 have been test	, and itching. As o	of 18 July rrhagic fevers
Tanzania, United Republic of	Poliomyelitis (cVDPV2)	Grade 2	19-Jul-23	17-Jul-23	17-Jul-23	1	1	0	0.00%
Tanzania has re Tanzania.	ported its first ca	se of cVDPV2 sin	ce 2000, in a 22-	month-old female	child with acute	flaccid paralysis. The o	case is from Rukv	va region, Southv	vestern
Ongoing Events									
Algeria	COVID-19	Protracted 3	25-Feb-20	25-Feb-20	3-Jul-23	271 852	271 852	6 881	2.50%
From 25 Februa	ry 2020 to 3 July	2023, a total of 2	271 852 confirme	d cases of COVID)-19 with 6 881 c	deaths have been repor	ted from Algeria,	with 183 061 rec	overed.
Algeria	Poliomyelitis (cVDPV2)	Grade 2	14-Jul-22	11-Apr-22	14-Jun-23	3	3	-	-
According to GI 2022.	obal Polio Eradica	ation Initiative, no	case of circulation	ng vaccine-derive	d poliovirus type	e 2 (cVDPV2) was repo	rted this week. Th	ere were three ca	ises reported in
Angola	COVID-19	Protracted 3	21-Mar-20	21-Mar-20	20-Apr-23	105 384	105 384	1 934	1.80%
The first COVID country with 1 9		se was reported i	n Angola on 21 N	larch 2020. As of	² 20 April 2023, a	total of 105 384 confir	rmed COVID-19 c	ases have been r	eported in the
Benin	COVID-19	Protracted 3	17-Mar-20	16-Mar-20	3-May-23	28 014	28 014	163	0.60%
	Health in Benin a 33 deaths and 27		t confirmed case	of COVID-19 on	16 March 2020.	As of 26 March 2023, a	a total of 28 014 o	cases have been r	eported in the
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	24-Aug-19	19-Jul-23	27	27	0	0.00%
One cVDPV2 ca and 2020, and 6		in Oueme this we	ek. There have be	en three cases re	ported in 2023.	There are 10 cases repo	orted in 2022. Six	cases were repo	rted in 2021
Botswana	COVID-19	Protracted 3	30-Mar-20	30-Mar-20	6-May-23	329 862	329 862	2 797	0.90%
		of Health and We try including 2 79		a reported three	confirmed cases	of COVID-19. As of 6 N	May 2023, a total	of 329 862 confir	med COVID-19
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	1-Jan-19	1-Jan-19	27-Jun-23	2 100 000	-	-	-
000 registered of the night of Jun The Gourga, Fei	displaced persons e 18, 2023, inflic	s as of January 3 ⁻ ted severe damag insé sites in Ouah	I, 2023. Access to e upon temporar	o healthcare serv y hosting sites fo	ices remains a m r internally displa	orated due to attacks by lajor challenge for the a aced persons (IDPs) in among humanitarian a	affected populatio Ouahigouya, the	n. Furthermore, to regional seat of t	orrential rain on he Nord Region.
Burkina Faso	COVID-19	Protracted 3	10-Mar-20	9-Mar-20	3-May-23	22 056	22 056	396	1.80%
Between 9 Marc		ay 2023, a total of	22 056 confirme	·)-19 with 396 de	aths and 21 596 recove	eries have been re	ported from Burk	ina Faso.
Burundi	Cholera	Grade 3	1-Jan-23	14-Dec-22	9-Jul-23	574	175	9	1.60%
(CFR 1.6%) hav Bujumbura Sou	re been reported. th (33 cases; 1 de	Cases have origin	nated from eight (cases), Bujumbu	districts including	Isare (261 case	spected cases, includin s; 6 deaths), Bujumbur cases), and Rwibaga (1	a North (147 case	es; 2 deaths), Citi	toke (94 cases),
Burundi	COVID-19	Protracted 3	31-Mar-20	18-Mar-20	2-Jul-23	54 321	54 321	15	0.00%
		of Health in Burui veries and 15 dea		irst two confirme	d cases of COVII	D-19. As of 2 July 2023	, the total numbe	r of confirmed CC	OVID-19 cases

Go to overview

Go to map of the outbreaks

Burundi	Poliomyelitis (cVDPV2)	Grade 2	17-Mar-23	17-Mar-23	12-Jul-23	1	1	0	0.00%
No cVDPV2 cas	e was reported th	is week. There wa	as one cVDPV2 c	ase reported in tl	he country in 202	2	·	*	•
Cameroon	Humanitarian crisis (North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	30-Jun-23	-	-		-
						n the Central African Re ua and Est regions).	public and Niger	ia. Most of the 35	0 428 Central
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-0ct-16	27-Jun-18	11-Jul-23	-	-	-	-
Northwest and 3 West (SW) regionalize, potatoes key exceptions a crops. In these November 2023	Southwest region ons. Regarding fo , and pulses and are Momo (NW), areas, Crisis (IPC B, even household	s of Cameroon . Nood Security outlo income from crop Menchum (NW), Phase 3) outcom ds that harvested	Mobile clinics cor ok for the period o sales and harve and Lebialem (S) les are expected will begin to run	ntinue to provide from June 2023 sting labor will lil W) divisions, who to persist; some out of their stock	urgent health ser - January 2024, kely drive improvere the impacts o of the worst-affects and shift back	ne 2023 due to insecuri vices to the affected po in most divisions of the ement to Stressed (IPC f conflict are more seve ted households will lik to primarily purchasing in both regions from (pulations in the length and SW regern Phase 2) outcorere, and many poelly be in Emergeretheir food, but he	North-West (NW) lions, access to o nes from July to or households di ncy (IPC Phase 4 igh staple food p	and South- wn produced September. The I not cultivate I. By October or
Cameroon	Humanitarian crisis (Sahel Region)	Grade 2	31-Dec-13	27-Jun-17	14-Jul-23	-	-	-	-
forced to flee in Alifa and Mokol during the attac conducting an a due to attacks b	the Logone et Ch o districts, resulti ks in the Hile Alifa issessment to det y non-state arme	nari and Mayo-Tsa ng in displaceme a district. Addition termine the needs d groups.	inaga divisions d nt as people seek nally, around 30 f of the displaced	ue to escalating variety from the ishermen were reindividuals. Sinc	violence. Non-state looting of goods eportedly abducted January, Mayo-	ding to OCHA, Betweer te armed groups have t and livestock. Tragically d in the Logone et Cha Tsanaga alone has with	peen launching co y, one person wa ri area. A rapid re nessed the displa	ontinuous attacks s killed, and five o esponse mechani cement of over 1	in the Hilé others injured om is currently 0 000 people
Cameroon	Cholera	Grade 3	31-Aug-21	25-Oct-21	22-Jun-23	19 400	1 880	460	2.40%
2021 to 22 June	e 2023, a total of	ises of cholera inc 19 400 cases of c ths to 103 years v	holera including	1 880 laboratory	-confirmed cases	re (116 cases; 3 deaths and 460 deaths (CFR 1 1.3.) and Littoral reg 2.4%) have been	ions (5 cases). Fi reported from eig	om 25 Oct Jht Regions.
Cameroon	COVID-19	Protracted 3	6-Mar-20	6-Mar-20	28-Jun-23	125 098	125 098	1 974	1.60%
The Cameroon I including 1 974		announced the c	onfirmation of th	e first COVD-19	case on 6 March	2020. As of 28 June 20	23, a total of 125	098 cases have	been reported,
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-23	2-Jul-23	5 019	5 019	30	0.60%
	rough week 26, 2 . 0.6%) reported i		ly), a total of 5 0	19 measles cases	s with epidemiolo	ogical link have been re	ported in Camero	on including 386	lgM+, a total o
Cameroon	Мрох	Protracted 2	24-Feb-22	1-Jan-22	22-Jun-23	207	23	3	1.40%
		, 92 suspected ca nfirmed and three				nd no deaths have been	reported. Since	January 2022, a	otal of 207
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	23-May-19	1-Jan-20	21-Jun-23	13	13	0	0.00%
No cVDPV2 cas	e was reported th	is week ending 2	1 June 2023. The	re were three cas	ses reported in 20	022, three others repor	ted in 2021, and	seven cases repo	rted in 2020.
Cape Verde	COVID-19	Protracted 3	19-Mar-20	18-Mar-20	8-Jul-23	64 143	64 143	414	0.60%
	-19 confirmed ca es were reported		n Cape Verde on	19 March 2020. <i>i</i>	As of 8 July 2023	, a total of 64 143 conf	irmed COVID-19	cases including 4	14 deaths and
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	10-Jul-23	-	-	-	-
the humanitaria first quarter of 2	n community in C	CAR plans to assis g 28 % of the Hui	st 2.4 million mos	st vulnerable peo	ple. Humanitariar	ravaged by conflict an actors provided life-sa population not eating e	aving assistance t	to 658 000 people	during the
Central African Republic	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	18-Jun-23	15 404	15 404	113	0.70%
The Ministry of	Health and popul cases, 113 deaths				D-19 case in Cent	ral African Republic on	14 March 2020.	As of 18 June 20	23, a total of 1

Central African Republic	Measles	Ungraded	13-Mar-22	1-Jan-23	2-Jul-23	1 736	1 003	1	0.10%
laboratory-conf	irmed cases, 874	cases confirmed	by epidemiologic	al link and one d	eath. The measles	corded a cumulative o s outbreak is ongoing i 2, Bangassou, Vakaga	n twelve (34%) o	ut of 35 health dis	
Central African Republic	Мрох	Protracted 2	3-Mar-22	4-Mar-22	28-May-23	31	31	1	3.20%
						reported in the country new suspected cases w			
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	21-Jun-23	38	38	0	0.00%
						reported in the country 21 cases in 2019 from			ere reported in
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-22	1-Mar-16	2-Jul-23	6 900 000	-	-	-
emergencies an 2023 Humanita situation in Cha	nd the effects of cl rian Response Pla d, where nearly 2	imate change. Th an (HRP), compai 00 000 people, in	e situation in 202 red to 6.1 million cluding 38 099 0	23 is more worryi people in need ir hadian returnees	ng than in 2022, 2022, including , have already arr	oulation movements, fo with 6.9 million people 3.6 million targeted. Thi ived on Chadian territo d Wadi Fira in the next	in need, including ne crisis in Sudan ry. Projections in	g 4.4 million targ is aggravating th	eted in the ne humanitarian
Chad	COVID-19	Protracted 3	19-Mar-20	19-Mar-22	3-May-23	7 822	7 822	194	2.50%
The first COVID including 194 d		se was reported i	n Chad on 19 Ma	rch 2020. As of 2	6 April 2023, a to	tal of 7 822 confirmed	COVID-19 cases	were reported in	the country
Chad	Measles	Ungraded	24-May-18	1-Jan-23	25-Jun-23	8 189	518	4	0.00%
			spected cases ar			R 0.1%) have been rep blood samples (31.5%)			s in the
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	19-Jul-23	174	174	0	0.00%
						nd two in Lac. There ha ent outbreaks, and nine			
Comoros	COVID-19	Protracted 3	30-Apr-20	30-Apr-20	27-Apr-23	9 109	9 109	161	1.80%
			· '	· '	r ·	a total of 9 109 confir			
reported in the					,				
Congo	Cholera/ Shigellosis/ Salmonellosis	Ungraded	14-Jul-23	30-Jun-23	20-Jul-23	1 856		27	
Noire. A total of	f 39 cases have be	en operated for i	ntestinal perforat	ion including 28	cases from Dolisi	from five departments: e and 11 cases from P esents 97 % of the cun	ointe-Noire depar	tments. Most cas	
Congo	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	14-May-23	25 195	25 195	389	1.60%
	nt of Congo annou en reported in the		ation 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
Congo	Мрох	Protracted 2	23-May-22	1-Jan-22	14-May-23	5	5	0	0.00%
			-		i	cases, with zero death	-	-	
Congo	Poliomyelitis (cVDPV1)	Grade 2	21-Mar-23	1-Mar-23	14-Jun-23	1	1	-	-
	<u> </u>		pe 1 (cVDPV1) w	as confirmed on	1 March 2023 in a	a 15-year-old child livir	ig in Dolisie, Niar	i Department, wit	h onset of
Côte d'Ivoire	COVID-19	Protracted 3	11-Mar-20	11-Mar-20	29-May-23	88 330	88 330	835	0.90%
						l'Ivoire including 835 d			
Côte d'Ivoire	Dengue fever	Ungraded	10-Jul-23	19-Jun-23	25-Jun-23	107	22	0	0.00%
The Ministry of Treichville-Marc	Health in Ivory Co	past has officially uest, and Soubre	informed the Wo	rld Health Organi been reported fro	zation (WHO) abo om 19 to 25 June	out an outbreak of Den 2023, with 22 confirm include conducting in	gue fever in four ed cases and no	districts: Cocody- fatalities. Cocody-	-Bingerville, -Bingerville is

Côte d'Ivoire	Yellow Fever	Ungraded	17-May-23	8-May-23	15-Jun-23	1	1	0	0.00%
	male from Cocod					ay following confirmati own. The date of onset			
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-16	17-Apr-17	27-Jun-23	-	-	-	-
insecure, making are in crisis and in food insecurit has the largest r in violence with	g DRC among the at emergency lev by since July 2022 number of interna 6.3 million people	e most food insec yels of food insec 2 (up from 6.1 mi Illy displaced peo e internally displa	eure country in th urity in North Kiv Ilion), driven by p ple (IDP) on the A aced in Ituri, Nort	e world. The revisu, South Kivu and ooor harvests, vic African continent. Kivu and South	sed Integrated Fo d Ituri (34% of th blence-driven disp Over the past 12 Kivu. Of those di	dwide. Across the coun od Security Phase Clas e population). The confolacement, disease, une months, the humanita splaced, 2.3 million we cene of inter-communa	sification (IPC) e flicts in these pro employment, and rian situation ha ere displaced in N	estimates that 6.7 ovinces have caus I collapsing infras s been exacerbate	million people ed a 10% rise tructure. DRC d by a spike
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-23	7-May-23	18 794	1 324	104	0.60%
number of cases		4 276 cases and 2	20 deaths followe	d by Tanganyika		eaths (CFR 0.6%), have 01 cases and four deat			
Democratic Republic of the Congo	COVID-19	Protracted 3	10-Mar-20	10-Mar-20	23-Apr-23	96 211	96 211	1 464	1.50%
	of the COVID-19 of people have rec		l on 10 March 20	20, a total of 96 2	211 confirmed ca	ses and two probable c	ase, including 1	464 deaths have	been reported.
Democratic Republic of the Congo	Measles	Ungraded	12-0ct-21	1-Jan-23	23-Apr-23	82 601	1 546	1 442	1.70%
						easles from 2 722 teste led outbreaks since the			ella, have been
Democratic Republic of the Congo	Мрох	Protracted 2	30-Mar-19	1-Jan-22	4-Jul-23	734	734	3	0.40%
From 1 January	2022 through 13	April 2023, the [Democratic Repul	blic of the Congo	(DRC) reported 7	'34 confirmed Mpox ca	ses with three d	eath among the c	onfirmed cases
Democratic Republic of the Congo	Poliomyelitis (cVDPV1)	Grade 2	27-Aug-22	27-Aug-22	5-Jul-23	174	174	0	0.00%
According to the	e Global Polio Era	dication Initiative	(GPEI), no cVDF	V1 cases were re	ported ithis week	c. There have been 28 c	cases reported in	n 2023 and 146 ca	ises in 2022
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-21	1-Jan-22	5-Jul-23	407	407	0	0.00%
No cVDPV2 case	e reported this we	eek . There have l	oeen 43 cases so	far this year and	364 cases report	ed last year.			
Democratic Republic of the Congo	Suspected Meningitis	Ungraded	31-May-22	2-Jun-22	14-May-23	557	10	95	17.10%
	neningitis outbrea pected cases with				ovince in the Dem	nocratic Republic of the	Congo. From 2	June 2022 to 14	May 2023, a
Equatorial Guinea	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	23-Feb-23	17 229	17 229	183	1.10%
	Health and Welfai 183 deaths and			COVID-19 case or	14 March 2020.	As of 23 February 202	3, a total of 17 2	29 cases have be	en reported in
Eritrea	COVID-19	Protracted 3	21-Mar-20	21-Mar-20	3-May-23	10 189	10 189	103	1.00%
	-19 confirmed cas country. A total of				30 October 2022	, a total of 10 189 conf	irmed COVID-19	cases with 103 d	eaths were
Eritrea	Poliomyelitis (cVDPV2)	Grade 2	2-Jun-22	7-Jun-22	21-Jun-23	2	2	0	0.00%
	cVDPV2 was repo June 2022 by the				e reported in 202	2 and another one repo	orted in 2021. Th	is latter one was	nowever
Eswatini	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	29-Apr-23	74 670	74 670	1 425	1.90%
The first case of associated death		onfirmed in the k	ingdom of Eswat	ini on 17 March 2	2020. As of 29 Ap	ril 2023, a total of 74 6	70 cases have b	een reported with	1 425
Ethiopia	Drought/food	Grade 3	17-Feb-22	1-Jan-22	14-Jul-23	20 100 000			

Floods

Following the pause of food distributions due to reports of significant diversion of humanitarian food assistance, Humanitarian partners in Ethiopia as well as Government counterparts have put various efforts into tackling humanitarian aid misuse. In Northern Ethiopia, humanitarian partners are supporting areas of IDP returns in the Tigray Region. In the Amhara Region, malnutrition continues at an alarming rate. According to the Nutrition Cluster, between 5 - 18 June, out of 29 353 children under five (CU5) and 12 123 pregnant and lactating women (PLW) in IDPs sites and host communities across the region, medium and severe malnutrition cases were identified with a proxy Global Acute Malnutrition (GAM) rate of 12 % for CU5, and 19 % for PLWs. In Afar region, the trend of admission of children to therapeutic feeding programmes shows a worrisome increase, according to the Nutrition Cluster. Admission of over 570 severe acute malnutrition (SAM) cases with medical complications have been observed between January and April 2023, showing a 68.7 % increase (233 more admissions) compared to the same period in 2022. Overall, more than 10 100 children with SAM have been admitted to therapeutic feeding programmes in the first four months of the year, showing an increase by 10 % (981 more cases) compared with the same period in 2022

16-May-23 12-May-23 Ethiopia Ungraded 5-Jul-23 Since the beginning of March 2023, heavy rainfall has affected several regions in Ethiopia (Particularly Somali, Afar, SNNP and Oromia Region). In the Somali Region, data from the Disaster Risk Management Bureau reveals that 58 909 households have been impacted by the floods since March, with 35 350 households displaced and 45 human casualties reported. In the Oromia region, flooding has displaced over 5 803 households, affecting approximately 29 015 individuals, and eight people dead. In the Southern Nations, Nationalities, and Peoples' (SNNP) Region has experienced significant loss of life and property due to flooding. As of 05 May 2023, 38 fatalities have been reported, a total of 12 585 people have been affected and displaced. The Afar region has faced unexpected flash and river floods, as indicated by a regional government-led assessment conducted as of 1 May. At least 19 260 people have been affected, with an estimated 9 110 individuals displaced

119 769

Humanitarian crisis (Conflict 3-Jul-23 Grade 3 4-Nov-20 4-Nov-20 Ethiopia in Tigray)

As per the OCHA report, humanitarian partners are supporting areas of IDP returns in the Tigray Region. More than a reported 54 600 people who returned to Gulo Mekeda Woreda in the Eastern Zone have received emergency shelter and non-food item (ESNFI) assistance, services in health, water, sanitation, and hygiene (WASH), as well as with agricultural seeds to support farmers in the current planting season, as of 22 June 2023.

Cholera Grade 3 17-Sep-22 17-Sep-22 13-May-23 6 592 39

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 Protracted 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.

16-May-23 10-May-23 10-May-23 Ethiopia Denaue Ungraded 1 638 103 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 Ungraded 13-Apr-17 1-Jan-23 28-Apr-23 5 052 2 972 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

Poliomyelitis Ethiopia Grade 2 24-Jun-19 20-May-19 21-Jun-23 64 64 N 0.00% (cVDPV2)

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.

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

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 Protracted 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.

17-Mar-20 Gambia COVID-19 Protracted 3 17-Mar-20 4-Nov-22 12 586 12 586 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

Anthrax Ghana Ungraded 5-Jun-23 1-Jun-23 1-Jun-23 12 8.30% outbreak suspected

On 31 May 2023, the Veterinary officer in Binduri district received report that community in Bologo village, Binduri District shared a carcass of a dead cow and consumed . As a result, two people were taken ill and were admitted to hospital and both had history of consuming the meat from the dead cow. They were presenting with swollen face and cutaneous lesions on the hands and face. One person succumbed to the illness, On 1 June, a multisectoral investigative team (made up of veterinary, public health and environmental health units) was deployed to the affected area to conduct further investigation. The following are preliminary findings: one person with symptoms died in the hospital, 11 people showing symptoms of cutaneous lesions on hands and faces, diarrhoea, stomach pains suggestive of cutaneous Anthrax. Samples have been taken from all the eleven people and sent to the laboratory for confirmation

COVID-19 12-Mar-20 12-Mar-20 24-Apr-23 171 657 171 657 Ghana Protracted 3 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. 15-May-23 Ghana Mpox Protracted 2 8-Jun-22 24-May-22 127 127 3.10%

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-15 May 2023, there have been 127 confirmed and four deaths reported from 14 over 16 administrative regions, with the Greater Accra region reporting the most cases.

deaths, and 12 189 recoveries have been reported in the country.

Ghana	Poliomyelitis	Grade 2	23-Aug-19	23-Jul-19	17-May-23	34	34	-	_
According to G	(cVDPV2) lobal Polio Eradica	ation Initiative, no	case of circulatin	ng vaccine-derive	d poliovirus type	e 2 (cVDPV2) was repo		ere are three case	s in 2022. No
	orted in 2021. In a				1	-	20, 100	407	1.000/
Guinea	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	3-May-23	38 462	38 462	467	1.20%
cases and 467	deaths, have been	announced the fir reported in the c	est confirmed cas ountry.	e of GUVID-19 of	1 13 March 2020). As of 3 May 2023, a t	otal of 38 462 cas	ses, including 37 4	107 recovered
Guinea-Bissau	COVID-19	Protracted 3	25-Mar-20	25-Mar-20	9-Apr-23	9 614	9 614	177	1.80%
	020, the Ministry of soft COVID-19 with				-19 confirmed ca	ase in the country. As o	f 9 April 2023, the	e country has repo	orted 9 614
Kenya	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	1-Jul-23	-	-	-	-
since the onset persist through	of the March-May out 2023, especia	/ long rains, the d lly for pastoralist	rought situation s who have lost a	and its effects on significant numl	food security re per of animals. V	nent (IGAD), despite ab emain critical. The nega While above average rai ds and limiting access	tive impacts of the ns have improved	e prolonged droug	to the likely to
Kenya	Anthrax	Ungraded		10-Apr-23	22-Jun-23	17		3	17.60%
The outbreak had deaths), Kigum	as been reported f o (7, including 1 c	rom Muranga Co Jeath, Maragwa (unty. A total of 17 1) Mathioya (1), a	7 cases and three and Maragwa (2)	deaths have be The last case h	en reported from five so as been reported betwe	ub counties; Gatar en 22-29 May 202	nga (1), Kandara (23.	5, including 2
Kenya	Cholera	Grade 3	19-0ct-22	5-0ct-22	21-Jul-23	11 872	567	194	1.60%
						s with Garissa (2 853), d by culture, and 194 d			
Kenya	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	20-Jul-23	343 915	343 915	5 689	1.70%
	020, the Ministry of sincluding 5 689				OVID-19 case in	the country. As of 20	July 2023, there h	ave been 343 915	confirmed
Kenya	Leishmaniasis (visceral)	Ungraded	31-Mar-19	3-Jan-20	20-Jul-23	2 387	2 387	10	0.40%
						ing 20 July 2023, maki ot and Pokot Central Su		f 2 387 cases and	10 deaths
Kenya	Measles	Ungraded	29-Jun-22	1-Jan-23	7-Jul-23	710	141	10	1.40%
The outbreak ha		is from 2022, affe	ecting 13 counties	s in 2023. Cumul	atively, 836 case	s, with 177 confirmed	cases and 14 deat	ths (CFR 2.0%) ha	ive been
Kenya	Poliomyelitis (cVDPV2)	Grade 2	6-Jul-23	26-May-23	8-Jul-23	2	2	0	0.00%
	leaths (CFR=2.3%					Mashonaland West Pro- rity of the cases report			
Lesotho	COVID-19	Protracted 3	13-May-20	13-May-20	12-Sep-22	34 490	34 490	706	2.10%
Since the first of 706 deaths.	confirmed COVID-	19 case was repo	rted in Lesotho o	on 13 May 2020,	until 12 Septemb	per 2023, a total of 34 4	190 cases of COVI	D-19 have been r	eported, and
Liberia	COVID-19	Protracted 3	16-Mar-20	16-Mar-20	21-May-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 in	cluding 294 dea	ths and 7 853 recoverie	es have been repo	rted.	
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	21-Apr-23	71	71	19	26.80%
Since the begin	ning of 2022 up to	o 21 April 2023, a	total of 71 confi	rmed cases of La	ssa fever with 1	9 deaths (CFR 27%) ha	ve been reported	in Liberia.	
Liberia	Measles	Ungraded	3-Feb-22	13-Dec-21	21-Mar-23	10 664	10 664	93	0.90%
	all the 15 counties					pected cases, including y confirmed, 11.6% (1			
Liberia	Мрох	Protracted 2	21-Jul-22	23-Jul-22	29-Mar-23	10	10	0	0.00%
	ed a case of Monk h 0 deaths were re		2022 through th	ne National Public	health Reference	e Laboratory in the cou	intry. As of 29 Ma	arch 2023, 10 con	firmed cases of
Madagascar	Malnutrition crisis	Protracted 2	1-Jul-21	1-Jan-21	1-Jun-23	2 200 000	-	-	-
					an assistance. 4	79,000 children suffer a	acute malnutrition	in the Grand Sou	th and Grand
Madagascar	COVID-19	Protracted 3	20-Mar-20	20-Mar-20	12-May-23	68 266	68 266	1 424	2.20%
						2020. As of 12 May 20			
424 deaths hav	e been reported ir	the country.	. ,				,		· · · · · · · · · · · · · · · · · · ·

Malawi	Cholera	Grade 3	3-Mar-22	3-Mar-22	22-Jul-23	58 947	58 947	1 766	3.00%
						22 in Machinga distric			
	orted since the ons							,	
Malawi	COVID-19	Protracted 3	2-Apr-20	2-Apr-20	7-Jul-23	88 791	88 791	2 686	3.00%
On 2 April 2020 cases with 2 68		Malawi announce	ed the first confir	med cases of CO	/ID-19 in the cou	ntry. As of 7 July 2023	, the country has	a total of 88 791	confirmed
Malawi	Poliomyelitis (WPV1)	Grade 2	31-Jan-22	1-Feb-22	19-Jul-23	1	1	0	0.00%
						ysis on 19 November 2 V1 outbreak affecting t		ses have been rep	orted. Malawi
Mali	Humanitarian crisis (Sahel region)	Grade 2		11-Sep-17	31-May-23	-	-	-	-
people in Mali. effects of clima	Today, 7.5 million	people are in nee this year's lean s	d of humanitaria	n assistance. One	in four Malians (wing insecurity. In 202 (4.8 million people) are cople will be acutely foo	currently food in	secure due to ins	ecurity and the
Mali	COVID-19	Protracted 3	25-Mar-20	25-Mar-20	11-Jun-23	33 150	33 150	743	2.20%
	020, the Ministry on reported in the c					country. As of 11 June	2023, a total of 3	33 150 confirmed	COVID-19
Mali	Measles	Ungraded	20-Feb-18	1-Jan-23	2-Jul-23	276	276	0	0.00%
	, , , , , , , , , , , , , , , , , , , 		· ·			li and 276 were laborat			
Mauritania	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	2-Jul-23	63 712	63 712	997	1.70%
	t of Mauritania and been reported in t		confirmed COVID)-19 case on 13 N	larch 2020. As of	f 2 July 2023, a total of	63 712 cases inc	cluding 997 death	s and 62 713
Mauritania	Measles	Ungraded	7-Mar-23	26-Dec-22	11-Jun-23	508	224	4	0.80%
has reported 50		s of measles, of v	vhich 224 have b	een confirmed, in	cluding 133 labo	d in eight other wilayas ratory-confirmed cases			
Mauritius	COVID-19	Protracted 3	18-Mar-20	18-Mar-20	7-May-23	304 233	304 233	1 050	0.40%
	f Mauritius annour deaths have been			of COVID-19 on 1	8 March 2020. A	s of 7 May 2023, a tota	of 304 233 con	firmed COVID-19	cases
Mauritius	Dengue fever	Ungraded	10-Jul-23	8-Jun-23	7-Jul-23	147		0	0.00%
in Rodrigues Is	een experiencing a land. Rapid diagno ontact tracing and	stic tests and po	ngue fever since lymerase chain r	early June. As of eaction (PCR) are	7 July, 147 susp being used to co	ected cases have been onfirm cases. Respons	reported, includi e activities includ	ng 96 in Mauritius e intensified surve	s Island and 51 eillance, case
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	21-May-23	-	-	-	-
Most poor and ongoing humar reduced number	itarian assistance	olds in Mozambio is driving stresse	ue face Minimal ed (IPC Phase 2)	(IPC Phase 1) ou outcomes, with C	tcomes as the on crisis (IPC Phase	going harvest improve 3) outcomes persisting	s food access and in conflict-affect	d availability. In C ted areas. There h	abo Delgado, ave been
Mozambique	Cholera	Grade 3	14-Sep-22	16-Nov-22	29-May-23	31 327	31 327	138	0.40%
	ak has been report /e been reported fr				oique. From 14 Se	eptember 2022 to 29 N	lay 2023, a total o	of 31 327 cases a	nd 138 deaths
Mozambique	COVID-19	Protracted 3	22-Mar-20	22-Mar-20	24-Apr-23	233 417	233 417	2 243	1.00%
	1-19 confirmed cas ng 2 243 deaths.	e was reported in	n Mozambique or	1 22 March 2020.	As of 24 April 20	023, a total of 233 417	confirmed COVID	-19 cases were re	eported in the
Mozambique	Poliomyelitis (cVDPV2)	Grade 2	7-Dec-18	1-Jan-21	31-May-23	6	6	0	0.00%
	e Global Polio Erac here were two cas			lating vaccine-de	rived poliovirus t	ype 2 (cVDPV2) was re	ported this week	. The number of c	ases in 2022
Mozambique	Poliomyelitis (WPV1)	Grade 2	17-May-22	18-May-22	19-Jul-23	8	8	0	0.00%
According to th	e Global Polio Erad	dication Initiative	there was no WF	PV1 case reported	I this week. There	were eight cases repo	rted in 2022.		
Namibia	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	9-Jul-23	171 998	171 998	4 098	2.40%
The first case o	f COVID-19 was d	etected in Namib	a on the 14 Marc	ch 2020. As of 9 J	uly 2023, a total	of 171 998 confirmed	cases with 4 098	deaths have been	reported.
	Humanitarian								

From 19 March 2020 country. Niger M As of epidemiological Among these cases, 4 surpassing the target year. Niger Me A meningitis outbreak 2022 with Neisseria m deaths (CFR 6.1 %) w Niger Polic (c) No new case of cVDP) Nigeria Hum cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State according (187), Abia (1 Nigeria CO) The first case of COVII deaths have been reported.	OVID-19 Pro to 1 May 2023, a Measles Un I week 27, 2023, a 46% (342 out of 6 t of at least 80%. I Meningitis Un k has been declarmeningitidis ident were reported. Meningitis CVDPV2 PV2 was reported manitarian sis (Sahel region) ion people could function people could function people could function cute malnutrition Cholera General Country OVID-19 Pro OVID-19 Pro OVID-19 Pro OVID-19 I week 27, 2023, a 46% (342 out of 6 to fat least 80%. I I deningitis Country OVID-19 I week 27, 2023, a 46% (342 out of 6 to fat least 80%. I I deningitis Country OVID-19 I week 27, 2023, a 46% (342 out of 6 to fat least 80%. I I week 27, 2023, a 46%	otracted 3 total of 9 513 angraded a total of 1 656 a total of 1 656 bo2) were laborer to the calculation of 1 650 angraded ed in the Dung iffied as the calculation of 1 650 arade 2 during this were arade 2 face emergency	5-Apr-22 0 suspected cas pratory-confirment of the suspected cas pratory-confirment of the suspected case of t	1-Jan-22 ses of measles weed. Additionally, cits, accounting for 31-Oct-22 rict in the Zinder as of 9 July 2023 1-Jan-21 umber of cases re 10-Oct-16 insecurity, with	9-Jul-23 ere reported, of v 90 % (65 out of or 49%, have rea 9-Jul-23 region. The first v 2158 suspected 19-Jul-23 eported in 2022 i 25-May-23 very high rates o	1 650 which 866 were inversely of the districts received the epidemic the state of the epidemic that the state of the epidemic that the ep	477 stigated across 61 of eported at least one nreshold at least one 325 on 31 October 2022 including 325 labor 34	0 districts in the eight suspected case of cee since the beginn 129 and confirmed on oratory confirmed of	0.00% Intregions. If measles, Ining of the 6.00% 23 November
From 19 March 2020 country. Niger M As of epidemiological Among these cases, 4 surpassing the target year. Niger Me A meningitis outbreak 2022 with Neisseria m deaths (CFR 6.1 %) w Niger Polic (c) No new case of cVDP) Nigeria Hum cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acct Katsina (187), Abia (1) Nigeria CO The first case of COVII deaths have been reported.	Measles Universe Value V	ngraded a total of 1 650 602) were labor Furthermore, 3 ngraded ed in the Dung ified as the car Grade 2 during this we farade 2 face emergency	5-Apr-22 0 suspected case oratory-confirmed 35 health district 7-Dec-22 gass health district asative agent. A 1-Jan-20 gek. The total number of th	1-Jan-22 ses of measles wed. Additionally, cts, accounting for 31-Oct-22 rict in the Zinder is of 9 July 2023 1-Jan-21 umber of cases re 10-Oct-16 insecurity, with	9-Jul-23 ere reported, of v 90 % (65 out of or 49%, have rea 9-Jul-23 region. The first, 2158 suspected 19-Jul-23 eported in 2022 i	1 650 which 866 were inverted the epidemic the epidemic the example of the districts reched the epidemic the epidemic the example of the exam	477 stigated across 61 deported at least one areshold at least one as 325 and 31 October 2022 sincluding 325 labora 34	districts in the eight suspected case of ce since the beginn 129 and confirmed on oratory confirmed o	0.00% It regions. If measles, ning of the 6.00% 23 November cases and 129
As of epidemiological Among these cases, 4 surpassing the target year. Niger Me A meningitis outbreak 2022 with Neisseria m deaths (CFR 6.1 %) w Niger Polic (c) No new case of cVDP Nigeria ro More than half a millic and yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acco Katsina (187), Abia (1 Nigeria CO The first case of COVII deaths have been repo	I week 27, 2023, a 46% (342 out of 6 t of at least 80%. I leningitis U k has been declarmeningitidis ident were reported. Iliomyelitis EVDPV2) EV2 was reported manitarian sis (Sahel region) ion people could f upid scale-up of hu cute malnutrition Cholera	a total of 1 650 602) were labor Furthermore, 3 Ingraded ed in the Dung iffed as the call Grade 2 during this we Grade 2 face emergenc umanitarian as	O suspected cassoratory-confirm 35 health distric 7-Dec-22 gass health distric 1-Jan-20 eek. The total nu 10-Oct-16 cy levels of food esistance is need	ses of measles wed. Additionally, ots, accounting for 31-Oct-22 rict in the Zinder as of 9 July 2023 1-Jan-21 Jumber of cases re 10-Oct-16 insecurity, with years.	ere reported, of v 90 % (65 out of 90 49%, have rea 9-Jul-23 region. The first , 2158 suspected 19-Jul-23 eported in 2022 i 25-May-23	which 866 were inversely of the districts reched the epidemic the same of the epidemic that the epidem	stigated across 61 of eported at least one preshold at least on 325 on 31 October 2022 including 325 labor 34	suspected case of ce since the begins 129 and confirmed on pratory confirmed of	nt regions. If measles, Ining of the 6.00% 23 November cases and 129
Among these cases, 4 surpassing the target year. Niger Me A meningitis outbreak 2022 with Neisseria m deaths (CFR 6.1 %) w Niger Polic (c) No new case of cVDPN Nigeria Hum cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acct Katsina (187), Abia (1 Nigeria CO The first case of COVII deaths have been reported.	46% (342 out of 6 t of at least 80%. Ideningitis Unit k has been declaremeningitidis ident were reported. Identified by the composition of the could full be could full scale-up of his cute malnutrition Cholera	GO2) were labor Furthermore, 3 angraded ed in the Dung iffed as the call during this we have a call during the call during	pratory-confirme 35 health distric 7-Dec-22 pass health distric 1-Jan-20 peek. The total nu 10-Oct-16 ry levels of food sistance is need	ed. Additionally, ots, accounting for 31-Oct-22 rict in the Zinder as of 9 July 2023 1-Jan-21 cumber of cases results of 10-Oct-16 customer with the content of the conten	90 % (65 out of or 49%, have rea 9-Jul-23 region. The first , 2158 suspected 19-Jul-23 exported in 2022 in 25-May-23 very high rates o	72) of the districts reched the epidemic the 2 158 case was reported of acases of meningitis	aported at least one areshold at least one 325 an 31 October 2022 a including 325 labo	suspected case of ce since the beginn 129 and confirmed on oratory confirmed 0	f measles, ning of the 6.00% 23 November cases and 129
A meningitis outbreak 2022 with Neisseria m deaths (CFR 6.1 %) w Niger Polin (c\) No new case of cVDP\ Nigeria Hum cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acct Katsina (187), Abia (1 Nigeria CO The first case of COVII deaths have been reported.	k has been declaremeningitidis ident were reported. liomyelitis (VDPV2) PV2 was reported manitarian sis (Sahel region) ion people could fipid scale-up of hicute malnutrition Cholera	Grade 2 during this we have a common thin the during the	gass health distriction and the state of the	rict in the Zinder ts of 9 July 2023 1-Jan-21 umber of cases re 10-Oct-16 insecurity, with	region. The first, 2158 suspected 19-Jul-23 eported in 2022 i 25-May-23 very high rates o	case was reported of cases of meningitis	on 31 October 2022 s including 325 labo	and confirmed on ratory confirmed o	23 November cases and 129
2022 with Neisseria m deaths (CFR 6.1 %) w Niger Polic (c) No new case of cVDP Nigeria Cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acc Katsina (187), Abia (1 Nigeria CO The first case of COVII deaths have been reported.	meningitidis ident were reported. liomyelitis EVDPV2) PV2 was reported manitarian sis (Sahel region) ion people could f pid scale-up of hu cute malnutrition Cholera	Grade 2 during this we Grade 2 ace emergencumanitarian as	1-Jan-20 eek. The total nu 10-Oct-16 ey levels of food	1-Jan-21 umber of cases re 10-Oct-16 insecurity, with	19-Jul-23 eported in 2022 i 25-May-23 very high rates o	d cases of meningitis	s including 325 labo	oratory confirmed o	cases and 129
No new case of cVDPN Nigeria Cris More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acco Katsina (187), Abia (1 Nigeria CO The first case of COVII deaths have been repo	PV2 was reported manitarian sis (Sahel region) ion people could f pid scale-up of h cute malnutrition Cholera	during this we Grade 2 ace emergencumanitarian as	eek. The total nu 10-Oct-16 ey levels of food sistance is need	umber of cases re	eported in 2022 i 25-May-23 very high rates o				0.00%
Nigeria Hum cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State accord Katsina (187), Abia (1 Nigeria CO) The first case of COVII deaths have been reported.	manitarian sis (Sahel Gregion) ion people could f upid scale-up of h ccute malnutrition Cholera G	Grade 2 ace emergenc umanitarian as	10-Oct-16 cy levels of food ssistance is need	10-Oct-16	25-May-23 very high rates o	s 16. There were 18 -	cases reported in 2	2021.	
Nigeria cris re More than half a millic and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acco Katsina (187), Abia (1 Nigeria CO The first case of COVII deaths have been repo	sis (Sahel region) ion people could fipid scale-up of hicute malnutrition Cholera G	ace emergenc umanitarian as	ey levels of food	insecurity, with	very high rates o	-	-		
and Yobe states. A rap states are at risk of ac nourished children. Nigeria C From 1 January to 28 Cross River State acc Katsina (187), Abia (1 Nigeria CO The first case of COVI deaths have been repo	upid scale-up of hucute malnutrition Cholera	ımanitarian as	ssistance is need					-	-
From 1 January to 28 Cross River State according (187), Abia (1 Nigeria CO The first case of COVII deaths have been reported.	<u></u>					ng. An estimated two	million children ur	nder the age of five	in the three
Cross River State accordance (Ratsina (187), Abia (1 Nigeria CO) The first case of COVII deaths have been reported.	3 May 2023 a cun	Grade 3		1-Jan-23	28-May-23	1 851		52	2.80%
The first case of COVII deaths have been repo	counting for 39%	of the reported	d cases (718 ca	ses). Other state	s with the highes				
deaths have been repo	OVID-19 Pro	tracted 3	27-Feb-20	27-Feb-20	21-Apr-23	266 675	266 675	3 155	1.20%
Nigeria Di		etected in Nige	eria on 27 Febru	ary 2020. As of 2	21 April 2023, a	total of 266 675 con	firmed cases with 2	59 953 recovered	and 3 155
)iphteria G	Grade 1	1-Dec-22	1-Dec-22	9-Jul-23	2 732	969	86	3.10%
Between week 19 of 2 (29), FCT (38), Sokoto fatality rate of 9.9%. Caffected, and children	to (14), and Zamfa Of suspected case	ara (13) States es, 969 were c	s have reported confirmed, inclu	the most cases (ding 53 laborato	(98%). A total of ry-confirmed, 16	86 deaths were reco	orded among confir	med càses, resultii	ng in a case
Nigeria Las	ssa Fever Uı	ngraded	8-Jan-23	1-Jan-23	9-Jul-23	6 364	842	170	2.70%
In week 27 of 2023, N 28 states and 108 loca for 73% of all confirm ratio for confirmed cas	cal government ar ned cases. The ag ases stood at 1:0.	eas. Among the group most 9. Furthermore	nese cases, 842 affected by Las e, the number o	were confirmed, sa fever is 21-30 of suspected case	, and 170 resulte) years, ranging t es has shown an	d in death (CFR: 17. rom 1 to 93 years, v increase compared	2%). The states of (vith a median age o to the correspondin	Ondo, Edo, and Ba f 32 years. The ma g period in 2022.	uchi account lle-to-female
ů		tracted 2	31-Jan-22	1-Jan-22	9-Jul-23	843	843	9	1.10%
	liomyalitic	Grade 2	1-Jun-18	1-Jan-22	19-Jul-23	64	64	-	-
No cVDPV2 case was		ek. There have	e been 16 cVDP	V2 cases reporte	d this vear and 4	8 cases in 2022			
		tracted 3	14-Mar-20	14-Mar-20	26-Feb-23	133 194	133 194	1 468	-
The Rwanda Ministry and 131 647 recovered				irst COVD-19 cas	se on 14 March 2	020. As of 26 Febru	ary 2023, a total of	133 194 cases wit	h 1 468 deaths
Sao Tome and CO	OVID-19 Pro	tracted 3	7-Apr-20	6-Apr-20	26-Apr-23	6 562	6 562	80	1.20%
On 6 April 2020, the M COVID-19 have been r							April 2023, a total o	of 6 562 confirmed	cases of
San Tome And		Grade 2	11-Apr-22	15-Apr-22	30-Apr-23	1 210	1 210	11	0.90%
From 15 April to 30 April to 3	antagalo (48, 4.19	%), Caué (23,	2.0%), Lemba ((21, 1.6%), and F	RAP (14, 1.2%).	During Mar 2023, th	iere were 10 new ca	ises registered in t	he country.
Senegal Chik	ikungunya Ui	ngraded	8-Jun-23	8-Jun-23	9-Jul-23	1	1	0	0.00%



May 2023 and s	searched medical					ınya from Dioffior distr	ict, Fatick region	n. The date of dis	ease onset is 2
Senegal	COVID-19	Protracted 3	2-Mar-20	2-Mar-20	28-Apr-23	88 997	88 997	1 971	2.20%
From 2 March 2	2020 to 28 April 2	2023, a total of 88	997 confirmed c	ases of COVID-1	9 including 1 971	deaths and 87 024 rec	overies have bee	en reported in Se	negal.
Senegal	Crimean- Congo haemorrhagic fever (CCHF)	Ungraded	21-Apr-23	21-Apr-23	13-Jul-23	3	3	1	33.30%
residing in Fadi for suspected v	ia city, Guédiaway ⁄iral hemorrhagic	e district, Dakar re fever after he deve	egion. The date o eloped a hemorrh	of onset of symptome a	oms was 10 April and thrombocytop	er on 21 April 2023 in a with fever and flu-like enia. He died on 22 Ap ported from Yeumbeul	syndrome. Samp ril. On 9 May 20	ples were collected 23, a second cor	ed on 20 April
Senegal	Measles	Ungraded	4-Jul-22	1-Jan-23	9-Jul-23	410	410	0	0.00%
regions being D		es), Kédougou (27	7 cases), Tambac	counda (21 cases)), Louga (16 cases	deaths were reported fr s), Thiès (15 cases), Da			
Seychelles	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	28-Feb-23	50 937	50 937	172	0.30%
	COVID-19 confirm and 172 deaths h			lles on 14 March	2020 as of 28 Feb	oruary 2023, a total of	50 937 cases ha	ve been confirme	ed, including 5
Sierra Leone	COVID-19	Protracted 3	31-Mar-20	27-Mar-20	13-Mar-23	7 763	7 763	125	1.60%
	020, the Presiden orted in the count					ountry. As of 13 March	2023, a total of	7 763 confirmed	COVID-19
South Africa	Cholera	Grade 3	3-Feb-23	3-Feb-23	3-Jul-23	1 265	198	47	3.70%
Among these ca	ases, 55 % (477 d	out of 866) were la	aboratory-confirr	med. Additionally	, 85% (61 out of 7	which 866 were investion (72) of the districts reposited the epidemic three (184).	rted at least one	suspected case	of measles,
South Africa	COVID-19	Protracted 3	5-Mar-20	5-Mar-20	24-Apr-23	4 072 533	4 072 533	102 595	2.50%
Since the start	of the COVID-19 r	pandemic in Soutl	n Africa through	24 April 2023, a		f 4 072 533 confirmed	cases and 102 5	95 deaths have l	peen reported.
South Africa	Measles	Ungraded	17-0ct-22	13-0ct-22	21-Jul-23	6 523	1 106	0	0.00%
	alanga (112 cases)					m eight provinces with s), Western Cape (17),			
South Sudan	Drought/food insecurity	Grade 3	18-Dec-20	5-Apr-21	30-Jun-23	-	-	-	-
the lean season of people in cat conflict and ins More than 68 0	n of between April tastrophe (IPC5) a security. Regarding 100 children under	2022 and July 20 are expected to be g the nutrition situ r five were admitte	023. Of these, 4.8 43 000. The drivuation, an estimated to nutrition production production	3 million people w vers of acute food ted 1.4 million ch ogrammes for Se	vill be in crisis (IP(d insecurity in the nildren under five a evere Acute Malnu	population in the coun C3), 2.9 million are pro country are economic are acutely malnourish trition (SAM) manager orthern Bahr el Ghazal	jected to be in e decline, climatic ed with 346 000 nent in the first (mergency (IPC4) shocks, low pro in a severe cond quarter of 2023.	and the numb duction and lition in 2023. Nearly 50 000
South Sudan	Floods	Ungraded		7-0ct-22	30-Jun-23	1 000 000			
violence. In 202	n, persistent flood 23, heavy Rainfall	ing from July 202	2 into 2023 has	affected at least of	ana millian naanla	many of whom were	alvaadu faaina	raent needs due t	
	over northern par					stern, and southern pa			
South Sudan									
South Sudan co interference, pu have a severe in for women and humanitarian co by 500 000 pec since the confli Sudanese refug	Humanitarian crisis ontinues to face dublic health challe mpact on people's girls. People affe ommunity in Sout ople from 2022. Rict erupted on 15 /	Protracted 3 eteriorating humanges such as meas livelihoods, ham cted by violence het Sudan estimate legarding the impart April and the numsites remains a signal of the control of the c	15-Aug-16 anitarian condition asles and cholera per access to edunave limited access that 9.4 million act of the ongoing ber of arrivals is gnificant challeng	ns. The situation outbreaks and clucation and water people need hur g conflict in the n projected to increase due to the compensation and the compensation projected to increase due to the compensation in the number of the nu	is worsened by pelimatic shocks res r, sanitation and h ce as well as restr manitarian assista neighboring Sudan ease as the crisis	stern, and southern pa	rts of the countr lict, access cons flooding and loc ices. Protection nt and access to ing 76 % of Soul uals have been re	y and light rainfa estraints and opera- calized drought. To concerns remain basic needs suc th Sudan's popul ecorded arriving outh Sudanese re	ational These in turn high, especial h as food. The ation, increase in South Suda
South Sudan co interference, pu have a severe in for women and humanitarian co by 500 000 pec since the confli Sudanese refug	Humanitarian crisis ontinues to face dublic health challe impact on people's girls. People affeommunity in Sout ople from 2022. Rict erupted on 15 / gees from transit s	Protracted 3 eteriorating humanges such as meas livelihoods, ham cted by violence het Sudan estimate legarding the impart April and the numsites remains a signal of the control of the c	15-Aug-16 anitarian condition asles and cholera per access to edunave limited access that 9.4 million act of the ongoing ber of arrivals is gnificant challeng	ns. The situation outbreaks and clucation and water people need hur g conflict in the n projected to increase due to the compensation and the compensation projected to increase due to the compensation in the number of the nu	is worsened by pelimatic shocks res r, sanitation and h ce as well as restr manitarian assista neighboring Sudan ease as the crisis	9 400 000 ersistent violence, conficulting in extraordinary ygiene and health serviction in their movemence in 2023, a stagger, over 149 000 individicontinues. Onward trai	rts of the countr lict, access cons flooding and loc ices. Protection nt and access to ing 76 % of Soul uals have been re	y and light rainfa estraints and opera- calized drought. To concerns remain basic needs suc th Sudan's popul ecorded arriving outh Sudanese re	ational These in turn high, especial h as food. The ation, increase in South Suda
South Sudan co interference, pu have a severe in for women and humanitarian ci by 500 000 pec since the confli Sudanese refug additional logis South Sudan On 7 March 200 including two d	Humanitarian crisis ontinues to face dublic health challe mpact on people's girls. People affeommunity in Soutople from 2022. Rict erupted on 15 gees from transit stical challenges pocholera 23, the Ministry o	Protracted 3 leteriorating humanges such as meaning the livelihoods, ham cted by violence her by sudan estimate legarding the imparties and the number of the sudan estimate legarding the imparties remains a sign osed by the onset of the livelihood of the liveliho	15-Aug-16 Initarian condition asles and cholera per access to eduave limited access that 9.4 million act of the ongoing ber of arrivals is gnificant challeng of the rainy seas 7-Mar-23 Sudan declared cated. Cases were r	15-Aug-16 Ins. The situation outbreaks and clucation and waters to formal justin people need hur g conflict in the nation projected to increase due to the common 22-Feb-23 cholera outbreak reported from Ma	is worsened by pelimatic shocks res r, sanitation and h ce as well as restr manitarian assista neighboring Sudan ease as the crisis inbination of poor r	9 400 000 ersistent violence, confulting in extraordinary ygiene and health serviction in their movemence in 2023, a staggeria, over 149 000 individicontinues. Onward traioad infrastructure and	lict, access cons flooding and loc ices. Protection and access to ing 76 % of Soutuals have been resportation of Sc large distances,	straints and opersalized drought. I concerns remain basic needs such Sudan's populecorded arriving buth Sudanese reinsecurity in sor	ational These in turn high, especial th as food. The ation, increase in South Suda eturnees and me areas and the 0.10%
South Sudan co interference, pu have a severe in for women and humanitarian ci by 500 000 pec since the confli Sudanese refug additional logis South Sudan On 7 March 200 including two d	Humanitarian crisis ontinues to face dublic health challe mpact on people's girls. People affeommunity in Soutople from 2022. Rict erupted on 15 gees from transit stical challenges potential challenges potential challenges at the Ministry of deaths (CFR 0.1%)	Protracted 3 leteriorating humanges such as meaning the livelihoods, ham cted by violence her by sudan estimate legarding the imparties and the number of the sudan estimate legarding the imparties remains a sign osed by the onset of the livelihood of the liveliho	15-Aug-16 Initarian condition asles and cholera per access to eduave limited access that 9.4 million act of the ongoing ber of arrivals is gnificant challeng of the rainy seas 7-Mar-23 Sudan declared cated. Cases were r	15-Aug-16 Ins. The situation outbreaks and clucation and waters to formal justin people need hur g conflict in the nation projected to increase due to the common 22-Feb-23 cholera outbreak reported from Ma	is worsened by pelimatic shocks res r, sanitation and h ce as well as restr manitarian assista neighboring Sudan ease as the crisis inbination of poor r	9 400 000 ersistent violence, confulting in extraordinary ygiene and health serviction in their moveme nce in 2023, a stagger, over 149 000 individ continues. Onward trainoad infrastructure and	lict, access cons flooding and loc ices. Protection and access to ing 76 % of Soutuals have been resportation of Sc large distances,	straints and opersalized drought. I concerns remain basic needs such Sudan's populecorded arriving buth Sudanese reinsecurity in sor	ational These in turn high, especial th as food. The ation, increase in South Suda eturnees and me areas and the 0.10%
South Sudan cointerference, puhave a severe in for women and humanitarian cuby 500 000 pec since the confli Sudanese refugadditional logis South Sudan On 7 March 202 including two dithem are childr South Sudan On 5 April 2020	Humanitarian crisis ontinues to face dublic health challe mpact on people's girls. People affe ommunity in Soutople from 2022. Rict erupted on 15 gees from transit stical challenges produced to the control of the con	Protracted 3 eteriorating humanges such as meastivelihoods, ham cted by violence het Sudan estimate egarding the impart and the number of the sudan estimate egarding the impart and the number of the sudan estimate of the sudan estimate egarding the impart and the number of the sudan estimate of the sudan e	15-Aug-16 Initarian condition asles and cholera per access to eduave limited acces that 9.4 million act of the ongoing of the rainy seas 7-Mar-23 Sudan declared of ted. Cases were reall cases. No new	15-Aug-16 Ins. The situation is outbreaks and clucation and waters to formal justing people need hurg conflict in the inprojected to increase due to the component of the compo	is worsened by pelimatic shocks resr, sanitation and hoce as well as restrmanitarian assistate ighboring Sudan ease as the crisis abination of poor related town and the been reported. 3-May-23	9 400 000 ersistent violence, confulting in extraordinary ygiene and health serviction in their moveme nce in 2023, a stagger 1, over 149 000 individ continues. Onward trainoad infrastructure and 1 471 Nile State. From 22 Fe e IDP camp. Approxim	rts of the countr - lict, access cons flooding and loc ices. Protection nt and access to ing 76 % of Soul uals have been r insportation of So large distances, 19 bruary to 16 May ately 52% of cas	straints and oper- calized drought. To concerns remain basic needs sucth Sudan's popul ecorded arriving buth Sudanese re insecurity in sor 2 y 2023, a total of ses are male and	ational These in turn high, especial h as food. The lation, increase in South Suda eturnees and me areas and ti 0.10% 1 471 cases the majority of

The current outbreak in the Bentiu IDP camp is ongoing. As of 5 June 2023, a total of 4 165 cases of acute jaundice syndrome (AJS) including 27 deaths (CFR: 0.7%) have been reported since January 2019. Some 1 481 of these cases tested positive for HEV by RDT. In 2023, 326 cases of AJS have so far been reported, of whom 28 tested positive for HEV by RDT. Approximately 54% of cases are males. The most affected age group are those aged 15-44 years (40%), followed by children aged 1-4 years (24%). On 14 April 2023, an outbreak was declared in Wau, Western Bahr el Ghazal state. As of 5 June, 174 HEV cases have been reported, including seven deaths (CFR 4.0%). Most cases (129; 74%) are males and the median age is 20 years. 23-Feb-22 1-Jan-22 6 447 Measles Ungraded 25-Jun-23 4 828 Measles outbreaks cases continue to be reported in South Sudan with 6 447 suspected measles cases reported from January 2022 to 25 June 2023, with 69 related deaths giving a CFR of 1.1%. A total of 3 403 (53%) are epi-linked, 424 (7%) lab-confirmed, 1 001(16%) clinically compatible, and 674(10%) discarded cases from epidemiological week 1, 2022, to week 25, 2023. Since 16 April 2023, measles outbreak is reported in Renk County, with 247 cases and seven deaths giving a CFR of 2.8% as of week 25, 2023 (ending 25 June). Tanzania, United COVID-19 Protracted 3 16-Mar-20 16-Mar-20 42 973 42 973 846 2.00% 23-Apr-23 Republic of The Ministry of Health, Community Health, Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 23 April 2023, a total of 42 973 confirmed cases have been reported in Tanzania Mainland including 846 deaths. COVID-19 6-Mar-20 1-Mar-20 3-Mav-23 39 483 0.70% Protracted 3 290 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 3 May 2023, a total of 39 483 cases, including 290 deaths and 39 178 recovered cases, have been reported in the country. Poliomyelitis Togo Grade 2 18-0ct-19 13-Sep-19 19-Jul-23 19 19 0 0.00% (cVDPV2) 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. Drought/food Uganda Grade 3 17-Feb-22 1-Jan-22 30-Jun-23 insecurity According to the Integrated Food Security Phase Classification (IPC) In the Karamoja region of Uganda, the impact of ongoing average to below-average food and livestock production over the last three years due to climate related shocks / hazards and endemic pests/diseases, coupled with a currently fragile security situation are causing widespread food insecurity. In the current analysis (April – August 2023), which corresponds to the lean season of 2023, all the nine districts of Karamoja region are classified in IPC Phase 3 (Crisis), with 45 % of the population analysed (582 000 people) facing high levels of acute food insecurity (IPC Phase 3 or above). An estimated 102 000 people (8% of the population analysed) are classified in IPC Phase 4 (Emergency) while 480 000 people (37% of the population analysed) are classified in IPC Phase 3 (Crisis). Of all the nine districts analysed, Kaabong district has very high levels of acute malnutrition (18%). The food security situation in the region has continued to deteriorate with the population in IPC Phase 3 or above increasing from 27 percent in June 2020, to 30 % in April 2021, to 41 percent in April 2022 and to 45 % in May 2023. COVID-19 Protracted 3 21-Mar-20 21-Mar-20 6-May-23 Uganda The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 6 May 2023, a total of 170 775 confirmed COVID-19 cases with 3 632 deaths were reported Rift Valley Ungraded 1-Mar-23 2-Mar-23 17-Mar-23 20 4 20.00% Uganda 19 fever 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 7-Mar-22 2-Jan-22 27-Jun-23 Yellow Fever Ungraded 1 178 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. The last cases were reported in February 2023. The National Yellow Fever vaccination campaign phase I has been completed: 6/6 regions were covered; the second phase is scheduled for October 2023. Zambia Cholera Grade 3 24-Jan-23 20-Jan-23 22-Jun-23 757 263 14 1.80% Cumulatively, 757 cases from eight districts; Mpulungu, Vubwi, Nsama, Nchelenge, Mwansabombwe, Chipata, Chipangali and Lusangazi. Currently, two districts in two provinces - Chiengi district in Luapula province and Mpulungu district in Northern Province - of Zambia are reporting cholera cases. A total of 14 deaths have been reported. Public health actions are ongoing. 7ambia COVID-19 Protracted 3 18-Mar-20 18-Mar-20 11-May-23 343 995 343 995 4 058 1.20% The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 11 May 2023, a total of 343 995 confirmed COVID-19 cases were reported in the country including 4 058 deaths. Zambia Measles Ungraded 13-Jun-22 13-Jun-22 28-May-23 2 157 132 1.40% A measles outbreak continues to evolve in Lusaka, North-western and Southern provinces affecting several districts. Cumulatively, the provinces have recorded 2 157 measles cases and 31 deaths as of 28 May 2023. WHO is supporting the Ministry of Health investing other cases with similar symptoms. Grade 3 23-Feb-23 12-Feb-23 23-Jul-23 3 687 The first cholera outbreak in the country in 2023 started on the 12 February 2023 in Chegutu town, Mashonaland West Province. Cumulatively there were 3 687 cholera cases with 80 deaths (CFR=2.3%) as of 23 July 2023. All of the ten provinces are affected with majority of the cases reported from Manicaland, Harare, Mash West and Mash Cent provinces COVID-19 Protracted 3 20-Mar-20 20-Mar-20 21-Jul-23 265 694 265 694 7imbabwe The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 21 July 2023, a total of 265 694 confirmed COVID-19 cases were reported in the country including 5 710 deaths. **Closed Events** Benin xoaM Protracted 2 14-Jun-22 14-Jun-22 24-Jul-23 0 0.00%

The last three cases of Mpox were reported from the country on 14 June 2022. No new cases have been reported after this period. The outbreak is considered closed after

more than a year without a new case.

the Ministry of Health on 5 June 2023.

Mozambique	Mpox	Protracted 2	6-0ct-22	7-0ct-22	25-Jul-23	1	1	0	0.00%			
Since 12 Octobe	er 2022 when Mo	zambique reporte	d its single case	of Mpox, no new	case has been re	ported from the countr	У					
Nigeria	Meningitis	Grade 1	1-0ct-22	1-0ct-22	18-Jun-23	2 815	270	214	7.60%			
Since 1 January to 18 June 2023, Nigeria reported a cumulative total of 2 815 suspected cases of Meningitis and 214 deaths (CFR 7.6%). No new cases have been reported since then.												
Senegal	Rift Valley fever	Ungraded	5-Jun-23	1-Jun-23	1-Jun-23	1		0	0.00%			
Since 1 June when a confirmed case of Rift Valley fever was confirmed in Senegal, no new case has been reported.												
South Africa	Mpox	Protracted 2	23-Jun-22	23-Jun-22	12-May-23	5	5	0	0.00%			
	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 Johanesburg $(n = 1)$ provinces. No new cases have been reported since October 2022.											
Tanzania, United Republic of	Cholera	Grade 3	21-Feb-23	15-Feb-23	25-Jul-23	82	23	3	3.70%			
This outbreak is	closed, following	more than two r	nonths without a	new case since t	he last case was	reported on 8 May 202	3. The outbreak v	was officially decl	ared over by			

[†]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.

WCO Contributors

- BAYA, Sheila (South Sudan)
- LIVINUS, Martins Chibueze (Kenya)
- MWENGEE, William (Tanzania)

AFRO Contributors

- G. Sie Williams
- J. Nguna
- J. Kimenyi
- F. Kambale
- R. Mangosa Zaza
- G. Akpan
- A. Ataqbaza
- C. Okot

Editorial Advisory Group

Dr Salam Gueye, Regional Emergency Director

- E. Koua
- D. Chamla
- F. Braka

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.

