

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 30: 24 - 30 July 2023

Data as reported by: 17:00; 30 July 2023



World Health
Organization

African Region

Emergency Preparedness and Response

1

New event

139

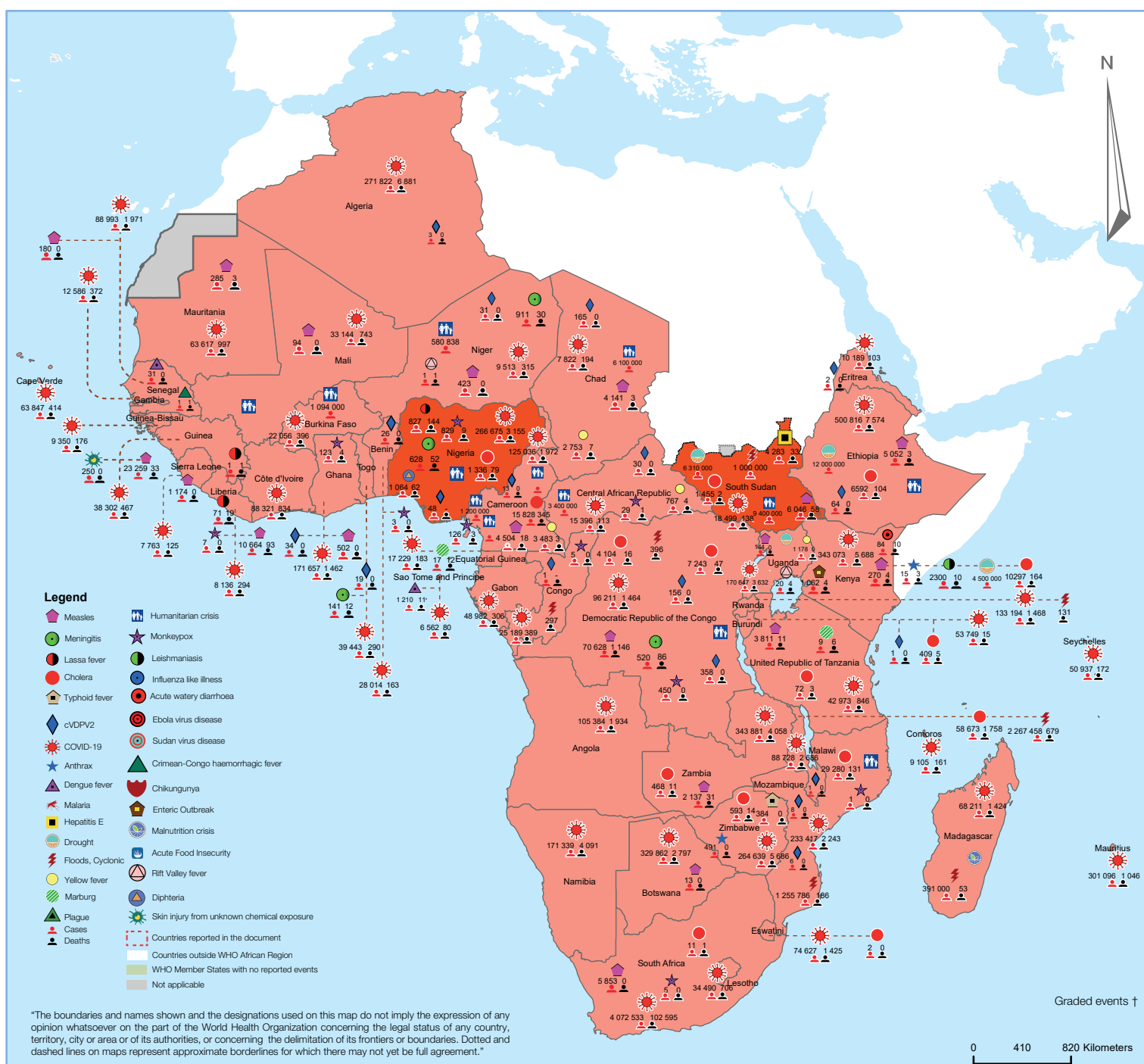
Ongoing events

120

Outbreaks

20

Humanitarian crises



4

Grade 3 events

4

Grade 2 events

1

Grade 1 events

2

Protracted 3 events

6

Protracted 2 events

0

Protracted 1 events

33

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 Ethiopia
- ▶ Cholera, Shigellosis, and Typhoid fever outbreaks in the Republic of Congo
- ▶ Cholera outbreak in Mozambique

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:

- ▶ Ethiopia is facing a complex humanitarian crisis driven by conflicts, drought, food insecurity, and epidemics. The situation has been exacerbated by the arrival of refugees fleeing the conflict in neighbouring Sudan, leading to an overwhelming demand for humanitarian assistance. Millions of people are in urgent need of basic livelihood services, including healthcare, which exceeds the available resources on the ground. Addressing this crisis requires a comprehensive and multi-dimensional approach from donors and humanitarian actors to ensure the well-being and resilience of affected communities in Ethiopia.
- ▶ The Ministry of Health of Congo has declared concurrent outbreaks of cholera, shigellosis, and typhoid fever in five departments, raising concerns about a potential common source of contamination or underlying public health issues. Urgent investigation and response are crucial to safeguard public health in the Republic of Congo, addressing the concurrent outbreaks and potential co-infections. The high number of cases with intestinal perforation and the associated high case fatality rate is alarming, necessitating accelerated efforts for early detection and management of cases.

Ethiopia

4.5 million
Need humanitarian assistance **3**
Grade

Humanitarian crisis

EVENT DESCRIPTION

Ethiopia is currently facing a complex humanitarian crisis driven by conflicts, drought, food insecurity, and epidemics, leading to widespread population displacement, frequent infectious disease outbreaks, limited access to healthcare and social services, and severe malnutrition among affected communities. Approximately 4.5 million internally displaced people across the country are in urgent need of humanitarian assistance. In the Tigray Region, despite a cessation of hostilities since November 2022, over one million people remain internally displaced, and in the Amhara Region, there are more than 500 000 internally displaced persons spread across 15 woredas. The humanitarian situation in both regions remains critical, with limited access to basic livelihood services, including healthcare. Additionally, the Afar Region is grappling with the challenges of over 837 100 returnees who have minimal access to basic services and humanitarian support, requiring immediate rehabilitation and recovery assistance.

The ongoing Kiremt rainy season, occurring from mid-June to mid-September, is anticipated to result in flash floods putting at risk approximately 1.5 million people across Ethiopia. Of these, more than 480,000 individuals in flood-prone areas spanning nine regions, including Afar, Amhara, Gambela, Oromia, Sidama, SNNP, Somali Southwest, and Tigray, are expected to be affected. Among the regions, Somali (238,600), Afar (73,640), SNNPR (40,939), and Oromia (37,558) are projected to face the greatest impact, necessitating early preparedness and risk mitigation measures. The floods may lead to compromised access to clean water, sanitation, and healthcare services, potentially facilitating the spread of water and vector-borne diseases and exacerbating the food crisis among the affected population.

As of 27 July 2023, the country is facing several outbreaks of infectious disease, including cholera, measles, malaria, and dengue fever. The current cholera outbreak, which commenced in late August 2022, has resulted in a total of 16 346 reported cases with 212 deaths across 69 woredas in five regions. Of particular concern is the recent spike in cholera cases within the Amhara region. Over the past two weeks alone, there have been more

than 2 154 new cases with 28 deaths recorded in this region. In addition to cholera, measles is also posing a significant threat, with a total of 22 400 reported cases with 200 deaths nationwide since the beginning of the year. The Somali Region has been severely impacted by protracted and recurrent measles outbreaks, and currently, the outbreak remains active in eight woredas in this region. Malaria outbreaks are ongoing in the Tigray, Amhara, and Southwest Ethiopia Peoples' Region (SWEPR), with higher incidence rates compared to the previous year. The Afar Region is grappling with a Dengue fever outbreak, which has resulted in more than 6 200 cases, with an additional 150 new cases recorded in week 26 (ending 25 June 2023).

Ethiopia is also not immune to the crisis occurring in neighboring Sudan, as evidenced by the influx of over 70 500 people who have sought refuge in the country. This mass migration is putting significant strain on the already limited resources available to host communities in Ethiopia. Unfortunately, the current level of support provided to these arrivals falls short of meeting the scale of demands, and the situation is expected to deteriorate further as more newcomers continue to arrive.

PUBLIC HEALTH ACTIONS

- The Government of Ethiopia and its humanitarian partners are actively coordinating response to the humanitarian crisis across the country. Humanitarian partners are providing technical and operational support to meet the needs of the internally-displaced population as well as those fleeing the conflict in neighbouring Sudan.
- A total of \$545 750 United States Dollars as part of Central Emergency Response Fund(CERF) allocation has been received to strengthen response activities.
- Health clusters, comprised of various organizations and agencies, have been actively involved in delivering emergency healthcare services to affected communities.
- Humanitarian partners have also mobilized resources for food and non-food item assistance, providing critical support to vulnerable populations in Internally-displaced Persons (IDP) camps and returnee areas.

[Go to overview](#)

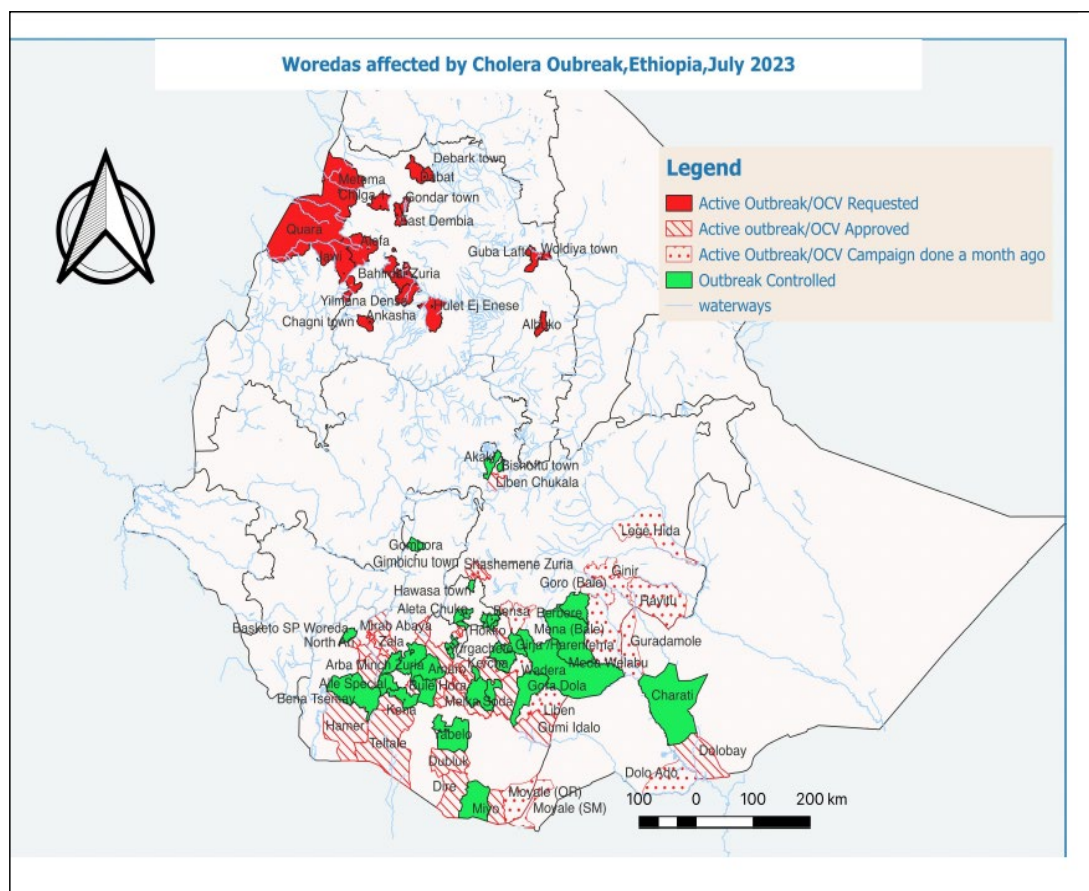
[Go to map of the outbreaks](#)

- WHO and its health partners are actively supporting the Ethiopian government's efforts in responding to disease outbreaks, including cholera, measles, and malaria.
- Crucial interventions in areas of case management, risk communication, and community engagement are being implemented to control the spread of cholera and other diseases.
- Efforts have been made to improve access to clean water, sanitation, and hygiene services in affected areas to prevent the spread of diseases.
- WHO and its health partners are also supporting reactive and routine vaccination activities across the country in response to measles outbreaks.
- Technical and logistical support for malaria outbreak response in the Northern Ethiopia region are being provided with the supply of drugs, insecticide-treated nets, and other essentials to the affected regions.

SITUATION INTERPRETATION

The complex humanitarian crisis in Ethiopia requires immediate attention and action due to the internal displacement of millions of people, deadly disease outbreaks, and food insecurity. This crisis has strained the country's resources, leaving vulnerable populations without access to basic services and livelihoods. Urgent and sustained action from the international community and humanitarian partners is needed to provide the necessary resources, support, and expertise to alleviate the suffering of millions and implement both short-term and long-term solutions to ensure the well-being and resilience of affected communities. Mobilizing resources for essential assistance, promoting access to basic services, and strengthening health interventions are crucial steps in addressing this dire situation.

Woredas affected by cholera outbreaks in Ethiopia as of 27 July 2023



Source: IOM humanitarian situation report, 24 July 2023

Republic of Congo

1 689 **37** **2.2 %** **Ungraded**
Cases **Deaths** **CFR**

Cholera | Shigellosis | Typhoid Fever

EVENT DESCRIPTION

On 14 July 2023, the Ministry of Health of the Republic of Congo notified WHO regarding a cluster of cases of unknown aetiology in Dolisie City, Niari Department. The notification followed an observed increase in persons presenting at local health facilities in the city with signs and symptoms of fever, abdominal pain, headache, vertigo, anorexia, asthenia, diarrhoea, and vomiting. The index case in this cluster was registered on 28 June 2023.

The Directorate of Health of Niari Department commenced an investigation of the cases following the observed increase on 8 July 2023. From 8 to 13 July 2023, a total of 78 stool samples were collected from case patients who presented at local health facilities in the department and sent to the National Public Health Laboratory for testing. The samples were subjected to culture and microscopic examinations. Results of laboratory analysis released on 16 July 2023 showed bacteria isolates in 63 samples, while 15 were negative. All 63 positive samples had isolates of *Campylobacter jejuni*, a bacterium that causes a common foodborne illness known as campylobacteriosis. *Vibrio cholerae*, the pathogen that causes cholera, was also isolated from 15 samples, while *Shigella flexneri*, the bacteria causing shigellosis or bloody diarrhoea was isolated from 34 samples. *Salmonella* spp, the pathogen which causes typhoid fever, and *Escherichia coli* O157 were also isolated from two stool samples respectively. Further clinical examination also showed 61 patients with intestinal perforations indicative of typhoid fever infection. Antibiotic sensitivity tests showed all bacteria isolates were sensitive to ciprofloxacin. Except for *Vibrio cholerae*, the other bacteria isolated were sensitive to Amikacin and Gentamycin. Meropenem showed strong activity against *Vibrio cholerae* isolates.

Following the release of the results of laboratory investigation and clinical examinations, the Ministry of Health of the Republic of Congo officially declared a concurrent outbreak of cholera, shigellosis, and typhoid fever in the country on 17 July 2023.

From 28 June to 29 July 2023, a cumulative total of 1 689 cases with 37 deaths (case fatality ratio 2.2%) have been reported from five departments (Niari, Pointe Noire, Bouenza, Kouilou, and Brazzaville) in the country. Based on clinical diagnosis and laboratory investigations, the cases have been disaggregated according to disease conditions as follows: shigellosis (919 cases), typhoid fever (705 cases), and cholera (65 cases). Dolisie City in Niari department remains the epicentre of the outbreaks, reporting 93.8% (n = 61) of the cholera cases, 98.0% (n = 901) of shigellosis cases, and 95.9% (n = 649) of typhoid fever cases.

Children between 5-14 years old are the most affected in all three disease outbreaks, constituting 18% of the cholera cases, 43% of the cases of shigellosis, and 31% of typhoid fever cases. Sex distribution of the cases showed that females appear to be the most affected by cholera and typhoid, accounting for 61% and 52% of the respective cases. Conversely, males show a slightly higher incidence in the shigellosis outbreak, constituting 51% of the total cases for this particular disease. The current outbreak is suspected to have originated in early June 2023 among primary school students who were exposed to contaminated food and drinks sold by street vendors during the national examination period.

PUBLIC HEALTH ACTIONS

- ▶ The Ministry of Health of Congo officially declared the outbreak on 17 July 2023, emphasizing the importance of early detection, confirmation, and management of cases.
- ▶ An outbreak management team involving the Ministry of Health, WHO and partners have been set up to coordinate response to the event. Daily meetings of the team are being held to assess the event and coordinate technical and operational support to the response.
- ▶ Health workers at the facility and community levels in the affected departments have been orientated with the case definitions as part of enhanced surveillance for the early detection of cases. Case investigation activities are also ongoing.

[Go to overview](#)

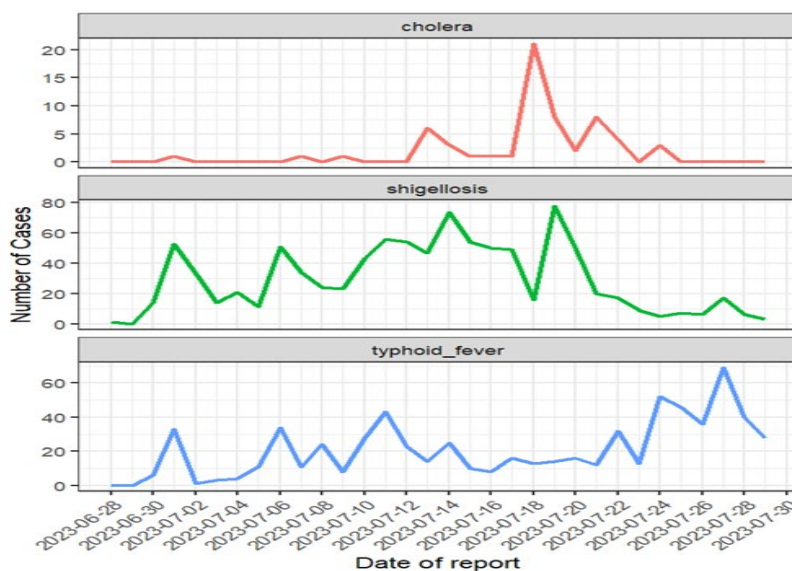
[Go to map of the outbreaks](#)

- ▶ Samples are being routinely collected from suspected cases and sent to the National Public Health Laboratory in Brazzaville for testing.
- ▶ Case management activities are ongoing at local health facilities in the affected departments. Additional clinicians have been deployed to manage cases, including the provision of surgical services for those with intestinal perforation. Drugs and other medical supplies have been dispatched to facilities in the affected department to enhance the clinical management of cases.
- ▶ Risk communication activities have been scaled up in the affected areas. Local non-government organizations are also involved with community engagement activities, including town hall meetings to create awareness and promote preventive practices in the affected areas.

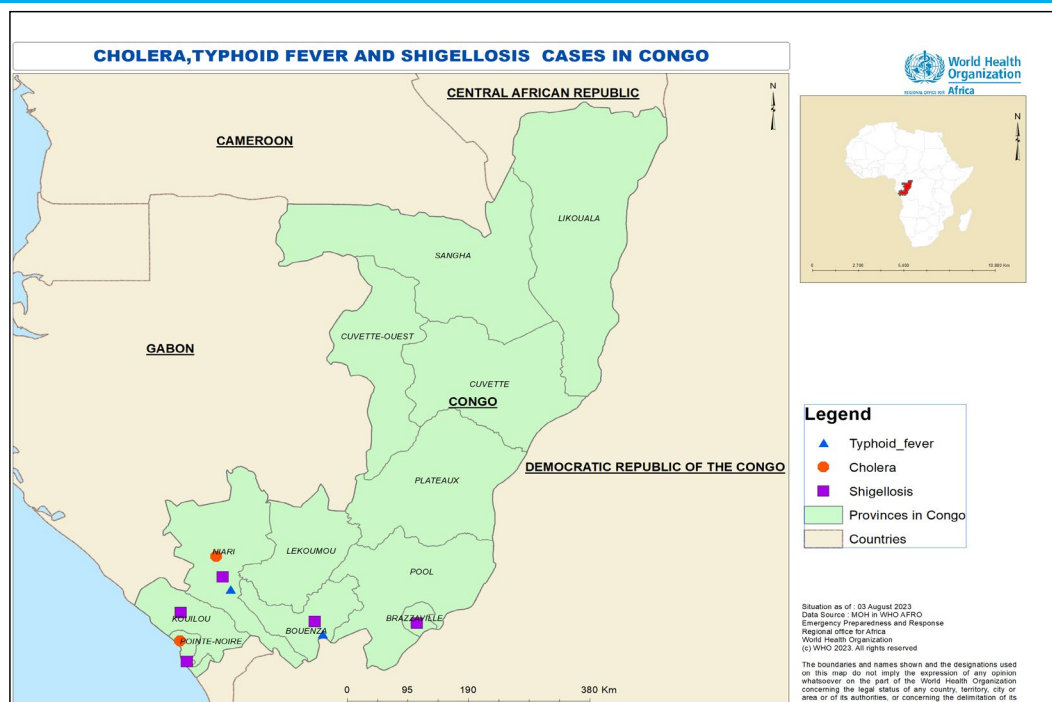
SITUATION INTERPRETATION

The occurrence of concurrent outbreaks of cholera, shigellosis, and typhoid fever, along with co-infections among case patients, is unusual and concerning, requiring further investigation. The high number of cases with intestinal perforation indicates a severe form of typhoid fever, demanding close monitoring and appropriate management. Health authorities in the Republic of Congo need to implement a comprehensive and multidisciplinary response, including active surveillance, epidemiological investigations, early case management, improved hygiene measures, and effective communication strategies to control the spread of infections and mitigate their impact on public health.

Geographic distribution of cases and deaths of cholera, shigellosis, and typhoid fever by department, Republic of Congo, 28 June – 27 July 2023



Daily trend of cases of cholera, shigellosis, and typhoid fever, Republic of Congo, 28 June – 27 July 2023



[Go to overview](#)

[Go to map of the outbreaks](#)

Mozambique

33 534

Case

141

Deaths

0.4%

CFR

2

Grade

Cholera

EVENT DESCRIPTION

Since our last article on the cholera outbreak in Mozambique on 16 July 2023, the country continues to report a gradual decline in the number of new cases. In epidemiological week 30 (week ending 30 July 2023), a total of 91 new cases with zero deaths were reported from Nampula (n=69) and Cabo Delgado (n=22) provinces. This represents an 8% decrease in the number of new cases compared to the preceding week when 99 cases were reported. The new cases were reported from five districts across the two provinces. In Nampula Province, the districts reporting cases were Nampula City (n=49), Erati (n=19), and Meconta (n=1), while in Cabo Delgado they were Mueda (n=16) and Mocimboa da Praia (n=6). No cholera deaths have been reported for seven consecutive weeks in the country.

The current outbreak peaked in epidemiological week 12 (week ending 26 March 2023), with 6 288 cases reported in the aftermath of Cyclone Freddy, which traversed the southern Indian Ocean for more than five weeks and made landfall in Mozambique's northern province of Zambézi on 11 March 2023, causing flooding, destruction of structures and massive displacement of the local population. A bimodal peak in deaths was observed in epidemiological weeks 11 and 14, with 22 deaths reported, respectively.

Cumulatively, 33 534 cases with 141 deaths (CFR 0.4%) have been reported from 67 districts across all of the country's 11 provinces. Zambézia Province has been the most affected, accounting for 40% (n=13 400) of the cumulative cases, followed by Sofala (n=7 527), Niassa (n=3 501), Tete (n=2 966), and Nampula (n=2 910) provinces which together constitute 91% of all cases reported across the country since the onset of the outbreak. Most (n=112, 79%) of the deaths have occurred in four provinces, namely, Zambézi (n=38), Sofala (n=30), Niassa (n=25), and Tete (n=19).

The current outbreak appears to be receding in intensity and geographic coverage, with cases now limited to 10 active districts in four provinces – Cabo Delgado, Nampula, Sofala, and Zambezia. However, this is not uniform across the country. Nampula Province remains the current epicentre of the outbreak, with new cases increasing in Nampula City over the past week by 123% (from 22 to 49). All other districts have shown a decline

or stability in the number of new cases.

Nampula City, the capital and largest city of Nampula Province, known for its high population density, harbours hotspots for cholera in the country due to inadequate water sanitation and hygiene (WASH) services. Another hotspot province, Cabo Delgado, has been plagued with insecurity in recent years due to insurgency from armed groups. This has further challenged efforts to provide basic services, including clean water sanitation and hygiene to the local population. Many of the province's local population have been forced to flee their homes and live in internally displaced persons (IDP) camps where living conditions are suboptimal and water-borne disease outbreaks such as cholera can quickly spread as the population remain highly vulnerable.

PUBLIC HEALTH ACTIONS

- At the national level, the response to the cholera outbreak is coordinated by a dedicated cholera task force led by the National Public Health Directorate. In Sofala, Nampula, and Cabo Delgado provinces, weekly coordination meetings are regularly held to address the ongoing cholera outbreak.
- A three-day high-level cross-border coordination meeting involving the Ministries of Health of Mozambique and Malawi was held in Lilongwe, Malawi, from 26 to 28 July 2023 to enhance strategy and timely information sharing for cross-border collaboration. The meeting highlighted the need for strong advocacy and continued provincial and district levels coordination where the outbreak is still active on both sides of the border.
- Surveillance activities are being strengthened in the affected provinces through routine supervision to reinforce case detection and reporting at facility and community levels, as well as the conduct of in-depth case investigations for new clusters of cases. In-service training, including the conduct of simulation exercises for investigation and monitoring of community cases, was held for surveillance focal points in Erati District in the past week.
- Response activities are underway, including field investigations, enhanced surveillance, laboratory testing, case management, risk communication and

[Go to overview](#)

[Go to map of the outbreaks](#)

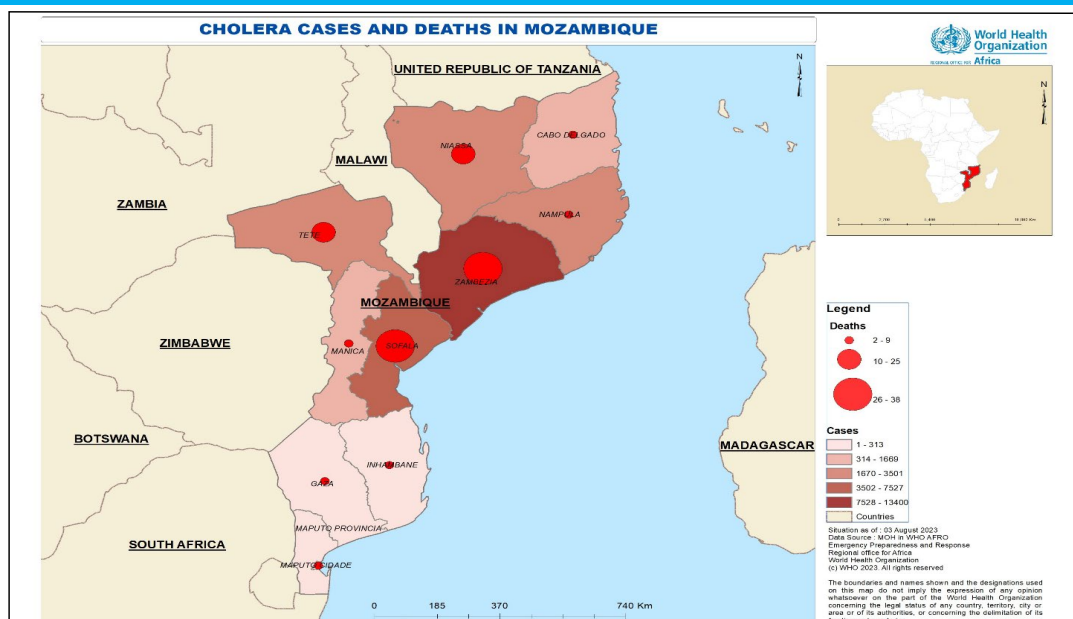
community engagement, and WASH activities to control the spread of the disease.

- Case management activities are being implemented through clinical care for patients at designated cholera treatment centres/units (CTC/CTU) in the affected provinces. Technical and logistical support is being provided to these CTC/CTUs to improve cholera case management. Oral rehydration points (ORPs) have also been set up for quick access to oral rehydration salts (ORS), which are also being distributed to affected households during home visits by the response team.
- Essential supplies for the management of cholera cases have been pre-positioned in at-risk and affected districts. These include peripheral and community cholera kits.
- Public messages about cholera and the current situation are being disseminated through media and digital platforms to raise awareness of cholera prevention measures and encourage early treatment seeking.
- On 29 July 2023, an urban community cleaning and sensitization campaign was launched by the Nampula Provincial Environmental Services as part of the response to the outbreak. Over 1 471 water purifiers (Certeza) have also been distributed to communities in Nampula (1,440) and Cabo Delgado for water purification. Another 20 hygiene kits were distributed to families in Nampula District.
- Mapping of water sources during case investigation and routine water quality testing are ongoing in Nampula and Cabo Delgado provinces.

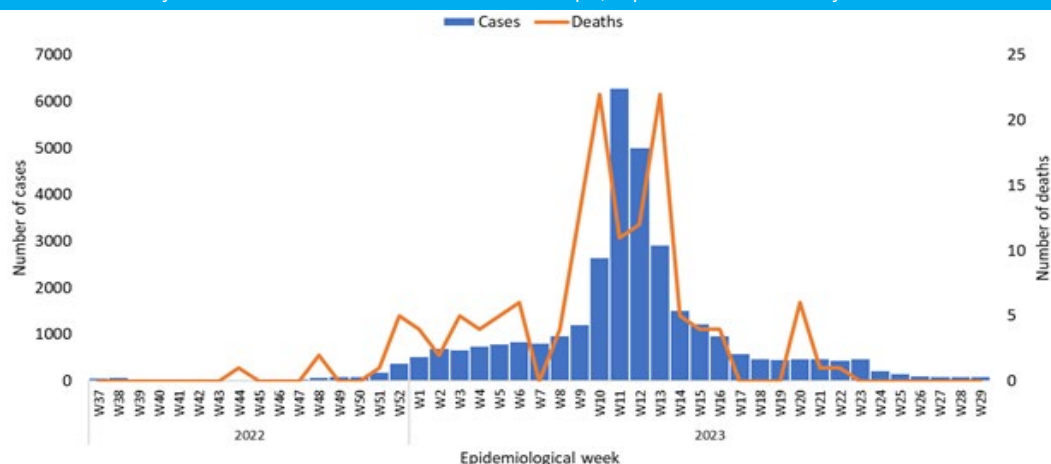
SITUATION INTERPRETATION

The cholera outbreak in Mozambique shows signs of improvement as the number of cases gradually declines. Yet, the recent increase in cases reported from Nampula raises alarm. Given its high population density, health authorities must act swiftly to implement heightened surveillance and response strategies, aiming to prevent any potential resurgence of the outbreak. Focusing on targeted surveillance, case management, clear risk communication and community engagement, and ensuring access to clean water, sanitation, and hygiene services should be prioritized to successfully bring the outbreak to an end in the districts that are still affected.

Geographic distribution of cumulative cholera cases and deaths by province, Mozambique, September 2022 – 30 July 2023



Weekly trend of cholera cases and deaths in Mozambique, September 2022 to 30 July 2023



[Go to overview](#)

[Go to map of the outbreaks](#)

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									
Uganda	Cholera	Grade 3	25-Jul-23	25-Jul-23	27-Jul-23	4	3	0	0.00%
An outbreak of cholera was officially confirmed on 25 July 2023 in Sigulu Island, Namayingo District, Eastern Uganda. Out of four suspected cases reported from the area, three were confirmed by culture for <i>Vibrio cholerae</i> infection									
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 February 2020 to 3 July 2023, a total of 271 852 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 183 061 recovered.									
Algeria	Poliomyelitis (cVDPV2)	Grade 2	14-Jul-22	11-Apr-22	26-Jul-23	3	3	-	-
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.									
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-19 confirmed case was reported in Angola on 21 March 2020. As of 20 April 2023, a total of 105 384 confirmed COVID-19 cases have been reported in the country with 1 934 deaths.									
Benin	COVID-19	Protracted 3	17-Mar-20	16-Mar-20	3-May-23	28 014	28 014	163	0.60%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 3 May 2023, a total of 28 014 cases have been reported in the country, with 163 deaths and 27 847 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	24-Aug-19	19-Jul-23	30	30	0	0.00%
There have been three cases reported in 2023. There are 13 cases reported in 2022. Six cases were reported in 2021 and 2020, and eight in 2019.									
Botswana	COVID-19	Protracted 3	30-Mar-20	30-Mar-20	6-May-23	329 862	329 862	2 797	0.90%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 6 May 2023, a total of 329 862 confirmed COVID-19 cases were reported in the country including 2 797 deaths.									
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	1-Jan-19	1-Jan-19	27-Jun-23	2 100 000	-	-	-
Since 2015, the security situation in the Sahel and East regions of Burkina Faso has gradually deteriorated due to attacks by armed groups. Access to healthcare services remains a major challenge for the affected population. In addition, torrential rain on June 18, 2023, inflicted severe damage upon temporary hosting sites for internally displaced persons in Ouahigouya.									
Burkina Faso	COVID-19	Protracted 3	10-Mar-20	9-Mar-20	3-May-23	22 056	22 056	396	1.80%
Between 9 March 2020 and 3 May 2023, a total of 22 056 confirmed cases of COVID-19 with 396 deaths and 21 596 recoveries have been reported from Burkina Faso.									
Burundi	Cholera	Grade 3	1-Jan-23	14-Dec-22	9-Jul-23	574	175	9	1.60%
An outbreak of cholera was been declared in Burundi on 1 January 2023. As of 09 July 2023, 574 suspected cases, including 175 laboratory-confirmed, and nine deaths (CFR 1.6%) have been reported. Cibitoke, Kabezi, and Rwibaga districts have reported no further case for more than five weeks.									
Burundi	COVID-19	Protracted 3	31-Mar-20	18-Mar-20	2-Jul-23	54 321	54 321	15	0.00%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 2 July 2023, the total number of confirmed COVID-19 cases is 54 321, including 54 190 recoveries and 15 deaths.									
Burundi	Poliomyelitis (cVDPV2)	Grade 2	17-Mar-23	1-Jan-22	26-Jul-23	1	1	0	0.00%
No cVDPV2 case was reported this week. There was one cVDPV2 case reported in the country in 2022.									
Cameroon	Humanitarian crisis (North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	30-Jun-23	-	-	-	-
Cameroon hosts about 469 276 refugees as of 30 June 2023. These refugees are predominantly from the Central African Republic and Nigeria. Most of the 350 428 Central African Republic refugees reside in towns and villages in Cameroon's eastern façade (North, Adamaoua and Est regions).									

Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	11-Jul-23	-	-	-	-
More than 1 000 people newly displaced in the Mezam division in the North-West (NW) region in June 2023 due to insecurity. Regarding food Security outlook for the period June 2023 - January 2024, in most divisions of the NW and SW regions, access to own produced maize, potatoes, and pulses and income from crop sales and harvesting labor will likely drive improvement to Stressed (IPC Phase 2) outcomes from July to September. By October or November 2023, even households that harvested will begin to run out of their stocks. A return to widespread Crisis (IPC Phase 3) outcomes is expected in both regions from October to January.									
Cameroon	Humanitarian crisis (Sahel Region)	Grade 2	31-Dec-13	27-Jun-17	14-Jul-23	-	-	-	-
The ongoing violence in the Far North region continues to force thousands to flee their homes. According to OCHA, Between 3 and 9 July, over 6 000 individuals were forced to flee in the Logone and Chari and Mayo-Tsanaga divisions due to escalating violence. A rapid response mechanism is currently conducting an assessment to determine the needs of the displaced individuals. Since January, Mayo-Tsanaga alone has witnessed the displacement of over 10 000 people due to attacks by non-state armed groups.									
Cameroon	Cholera	Grade 3	31-Aug-21	25-Oct-21	22-Jun-23	19 400	1 880	460	2.40%
From 25 Oct 2021 to 22 June 2023, a total of 19 400 cases of cholera including 1 880 laboratory-confirmed cases and 460 deaths (CFR 2.4%) 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.									
Cameroon	COVID-19	Protracted 3	6-Mar-20	6-Mar-20	16-Jul-23	125 110	125 110	1 974	1.60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 16 July 2023, a total of 125 110 cases have been reported, including 1 974 deaths.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-23	2-Jul-23	5 019	5 019	30	0.60%
From week 1 through week 26, 2023 (ending 2 July), a total of 5 019 measles cases with epidemiological link have been reported in Cameroon including 386 IgM+, and 30 deaths (CFR 0.6%) reported in 2023.									
Cameroon	Mpox	Protracted 2	24-Feb-22	1-Jan-22	22-Jun-23	207	23	3	1.40%
From 1 January to 22 June 2023, 92 suspected cases of Mpox including five laboratory-confirmed and no deaths have been reported. Since January 2022, a total of 207 suspected cases including 23 confirmed and three deaths have been reported in the country.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	23-May-19	1-Jan-20	26-Jul-23	13	13	0	0.00%
There were three cases reported in 2022, three others reported in 2021, and seven cases reported in 2020.									
Cape Verde	COVID-19	Protracted 3	19-Mar-20	18-Mar-20	8-Jul-23	64 143	64 143	414	0.60%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 8 July 2023, a total of 64 143 confirmed COVID-19 cases including 414 deaths and 63 645 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	10-Jul-23	-	-	-	-
In Central African Republic (CAR), the civilian population continues to pay a heavy price, in a country ravaged by conflict and subsequent violence for over a decade. In 2023, the humanitarian community in CAR plans to assist 2.4 million most vulnerable people. With 50 % of the population not having enough food, CAR has one of the highest proportions of critically food-insecure people in the world									
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 population announced the confirmation of the first COVID-19 case in Central African Republic on 14 March 2020. As of 18 June 2023, a total of 15 404 confirmed cases, 113 deaths and 15 252 recovered were reported.									
Central African Republic	Measles	Ungraded	13-Mar-22	1-Jan-23	2-Jul-23	1 736	1 003	1	0.10%
Since the beginning of 2023 to 2 July, the Ministry of Health and Population has recorded 1 736 confirmed cases of measles including 129 laboratory-confirmed cases, 874 epidemiologically linked cases and one death. The measles outbreak is ongoing in 12 (34%) out of 35 health districts; Bouar, Bozoum-Bossemptélé, Bossembélé, Haut Mbomou, Boda, Bimbo, Bambari, Bangui 1, Bangui 2, Bangassou, Vakaga and Ouango-Gambo.									
Central African Republic	Mpox	Protracted 2	3-Mar-22	4-Mar-22	28-May-23	31	31	1	3.20%
From 4 March 2022 to 28 May 2023, a total of 31 confirmed cases of Mpox and one death has been reported in the country. Since the start of 2023, the country has reported 14 laboratory-confirmed cases, including one death. During week 21 (ending 28 May), two new suspected cases were reported from Baboua-Abba and Paoua districts.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	26-Jul-23	37	37	0	0.00%
Ten cases have been reported in the country this year. In addition, six cases were reported in 2022. Although no new cases were reported in 2021, four cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.									
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-22	1-Mar-16	2-Jul-23	6 900 000	-	-	-

The humanitarian situation in Chad is characterised by a combination of four major crises: forced population movements, food insecurity and malnutrition, health emergencies and the effects of climate change. The situation in 2023 is more worrying than in 2022, with 6.9 million people in need, including 4.4 million targeted in the 2023 Humanitarian Response Plan (HRP). The crisis in Sudan is aggravating the humanitarian situation in Chad. Projections indicate that nearly 310 000 people including 60 000 Chadian returnees are expected to arrive in the provinces of Ouaddaï, Sila and Wadi Fira in the next six months.									
Chad	COVID-19	Protracted 3	19-Mar-20	19-Mar-22	3-May-23	7 822	7 822	194	2.50%
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.									
Chad	Measles	Ungraded	24-May-18	1-Jan-23	25-Jun-23	8 189	518	4	0.00%
As at Week 25 of 2023 (ending 26 June), 8 189 suspected cases and four measles-related deaths (CFR 0.1%) have been reported from 143 out of 150 districts in the country. A total of 518 samples tested IgM positive for measles out of 1 535 cases investigated with blood samples (31.5%); and 171 tested IgM+ for rubella.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	26-Jul-23	174	174	0	0.00%
There have been 15 cases reported this year. In addition 44 cVDPV2 cases were reported in 2022, 106 cVDPV2 cases were reported in 2020 from three different outbreaks, and nine other cases were reported in 2019.									
Comoros	COVID-19	Protracted 3	30-Apr-20	30-Apr-20	27-Apr-23	9 109	9 109	161	1.80%
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.									
Congo	Cholera/ Shigellosis/ Salmonellosis	Ungraded	14-Jul-23	30-Jun-23	20-Jul-23	1689	-	37	2.20%
Cumulatively, from 28 June through 20 July 2023, a total of 1 856 cases with 27 deaths are reported from five departments: Bouenza, Brazzaville, Kouilou, Niari and Pointe-Noire. A total of 39 cases have been operated for intestinal perforation including 28 cases from Dolisie and 11 cases from Pointe-Noire departments. Most cases are reported from Niari department with Dolisie city the epicenter reporting 1 793 cases and 18 deaths, representing 97% of the cumulative cases reported.									
Congo	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	14-May-23	25 195	25 195	389	1.60%
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.									
Congo	Mpox	Protracted 2	23-May-22	1-Jan-22	14-May-23	5	5	0	0.00%
From 1 January 2022 to 14 May 2023, the Republic of Congo has reported five laboratory-confirmed cases, with zero death (CFR 0.0%).									
Congo	Poliomyelitis (cVDPV1)	Grade 2	21-Mar-23	1-Mar-23	14-Jun-23	1	1	-	-
A case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was confirmed on 1 March 2023 in a 15-year-old child living in Dolisie, Niari Department, with onset of paralysis on 26 September 2022.									
Côte d'Ivoire	COVID-19	Protracted 3	11-Mar-20	11-Mar-20	11-Jul-23	88 338	88 338	835	0.90%
Since 11 March 2020, a total of 88 338 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 835 deaths, and a total of 87 497 recoveries.									
Côte d'Ivoire	Dengue fever	Ungraded	10-Jul-23	19-Jun-23	6/25/2023	107	22	0	0.00%
The Ministry of Health in Ivory Coast officially informed the World Health Organization about an outbreak of Dengue fever in four districts: Cocody-Bingerville, Treichville-Marcory, Yopougon Ouest, and Soubre. 107 cases have been reported from 19 to 25 June 2023, with 22 confirmed cases and no fatalities. Cocody-Bingerville is the most affected, accounting for 95% (n=107) of all cases. Ongoing public health response activities include conducting in-depth epidemiological investigations									
Côte d'Ivoire	Yellow Fever	Ungraded	17-May-23	8-May-23	15-Jun-23	1	1	0	0.00%
A polymerase chain reaction (PCR)-positive case of yellow fever was reported in Côte d'Ivoire on 8 May following confirmation at the Institut Pasteur in Dakar. The patient is a 35-year-old male from Cocody-Bengerville in Abidjan. His yellow fever vaccination status is unknown. The date of onset of illness is 4 April 2023 and the sample was collected on 6 April 2023.									
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-16	17-Apr-17	27-Jun-23	-	-	-	-
The Democratic Republic of the Congo (DRC) is classified as one of the largest hunger hotspots worldwide, with the largest number of IDPs in Africa. The revised Integrated Food Security Phase Classification (IPC) estimates that 6.7 million people are in crisis and at emergency levels of food insecurity in North Kivu, South Kivu and Ituri (34% of the population). The conflicts in these provinces have caused a 10% rise in food insecurity since July 2022 (up from 6.1 million), driven by poor harvests, violence-driven displacement, disease, unemployment, and collapsing infrastructure.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-23	15-Jul-23	23 926	1 866	63	0.30%
From epidemiological week 1 to 28, 2023 (ending 7 May), 23 926 cases of cholera, including 63 deaths (CFR 2.6%), have been recorded in from 37 health zone across four over six provinces. Nord Kivu province is leading in number of cases reported with 20 466 cases.									
Democratic Republic of the Congo	COVID-19	Protracted 3	10-Mar-20	10-Mar-20	27-Jul-23	96 215	96 215	1 468	1.50%

Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 96 211 confirmed cases and two probable case, including 1 464 deaths have been reported. A total of 84 576 people have recovered. As at week 29 of 2023: deaths 1468, 4 new cases (cum. 96215)									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-23	15-Jul-23	101 833	2 210	1 301	1.30%
A total of 101 833 suspected cases with 1 301 measles related deaths (CFR 1.30%), 2210 IgM+ for measles from 3 482 tested samples and 394 IgM+ for Rubella, have been reported since the beginning of this year as of 15 July 2023 in 148 health zones across six provinces.									
Democratic Republic of the Congo	Mpox	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 Republic of the Congo (DRC) reported 734 confirmed Mpox cases with three death among the confirmed cases.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV1)	Grade 2	27-Aug-22	27-Aug-22	26-Jul-23	182	182	0	0.00%
According to the Global Polio Eradication Initiative (GPEI), no cVDPV1 cases were reported this week. There have been 36 cases reported in 2023 and 146 cases in 2022									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-21	1-Jan-22	26-Jul-23	424	424	0	0.00%
One cVDPV2 case was reported in Haut Katanga. There have been 57 cases so far this year and 367 cases reported last year.									
Democratic Republic of the Congo	Suspected Meningitis	Ungraded	31-May-22	2-Jun-22	15-Jul-23	1 416		109	7.70%
Since the beginning of the year, a total of 1 416 cases and 109 deaths have been reported in six provinces. The most affected provinces are North Kivu (536 cases, 16 deaths; CFR: 3 %), Tshopo (430 cases, 60 deaths, CFR: 14 %), and South Kivu (213 cases, 10 deaths; CFR: 4.7%).									
Equatorial Guinea	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	26-Jul-23	17 229	17 229	183	1.10%
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.									
Eritrea	COVID-19	Protracted 3	21-Mar-20	21-Mar-20	3-May-23	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	21-Jun-23	2	2	0	0.00%
No new case of cVDPV2 was reported this week ending 21 June. There was one case reported in 2022 and another one reported in 2021. This latter one was however confirmed on 2 June 2022 by the Ethiopian National Polio laboratory.									
Eswatini	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 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	14-Jul-23	20 100 000	-	-	-
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.									
Ethiopia	Floods	Ungraded	16-May-23	12-May-23	5-Jul-23	119 769		91	0.10%
Since the beginning of March 2023, heavy rainfall has affected several regions in Ethiopia. In 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 deaths reported. In the Oromia region, flooding has displaced over 5 803 households, and eight people dead. In Southern Nations, Nationalities, and Peoples' (SNNP) Region has experienced significant loss of life and property due to flooding. 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.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	3-Jul-23	-	-	-	-
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 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.									
Ethiopia	Cholera	Grade 3	17-Sep-22	17-Sep-22	31-Jul-23	16 324	16 346	212	1.30%
Population at risk 15,638,620 and cumulative attack rate 104.6 per 100,000 population since the beginning of the outbreak on 27 August 2022. Spread of cholera transmission is increasing in Ethiopia, a total of 16,346 cholera cases officially reported to WHO including 2154 cases reported from a newly affected Amhara region (AR 104.6/100,000 population) as on 27 July 2023. The cholera outbreak in Amhara is reported to have started on 14th July and reported to WHO on 15th July 2023.									
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.									

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	21-Jun-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	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 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.									
Gambia	COVID-19	Protracted 3	17-Mar-20	17-Mar-20	31-Jul-23	12 607	12 607	372	3.00%
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. In June 2023, no new cases were reported but in July, 25 new cases resurfaced.									
Ghana	COVID-19	Protracted 3	12-Mar-20	12-Mar-20	25-Jul-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. As of Epi week 25 of 2023, there was only one active case. Surveillance is ongoing and it's integrated with the ILI sentinel surveillance.									
Ghana	Mpox	Protracted 2	8-Jun-22	24-May-22	25-Jul-23	127	129	4	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. Last cases reported were on 15 May 2023.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	23-Aug-19	23-Jul-19	27-Jul-23	34	34	-	-
cVDPV2 outbreak was first reported in 2019. The country has a cumulative of 34 cVDPV2 AFP cases. Nineteen cVDPV2 cases were documented in 2019, 12 in 2020 and 3 in 2022. No case documented as of JULY 26 2023. Date of onset of recent cVDPV2 in an AFP case - 14/09/2022, Nanumba South District, Northern Region, EPID Number - GHA-NOR-NAS-22-005									
Guinea	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	3-May-23	38 462	38 462	467	1.20%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 3 May 2023, a total of 38 462 cases, including 37 407 recovered cases and 467 deaths, have been reported in the country.									
Guinea-Bissau	COVID-19	Protracted 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	1-Jul-23	-	-	-	-
According to the 2023 Global report on food crises for the Intergovernmental Authority on Development, despite abundant precipitation in most parts of the country since the onset of the March-May long rains, the drought situation and its effects on food security remain critical. The negative impacts of the prolonged drought are likely to persist throughout 2023, especially for pastoralists who have lost a significant number of animals. While above average rains have improved vegetation conditions and water levels, recovery of livestock body conditions and productivity will take longer, impacting on livelihoods and limiting access to income.									
Kenya	Anthrax	Ungraded		10-Apr-23	22-Jun-23	17		3	17.60%
The outbreak has been reported from Muranga County. A total of 17 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) Mathioya (1), and Maragwa (2). The last case has been reported between 22-29 May 2023.									
Kenya	Cholera	Grade 3	19-Oct-22	5-Oct-22	26-Jul-23	11 891	567	194	1.60%
The cholera outbreak has affected 26 counties namely : Twenty-six (26) counties have reported cases with Garissa (2 853), Mandera (2 259), Nairobi (2 177), Wajir (944), and Tana River (780), reporting the highest number of cases. A total of 11 891 cases, with 567 confirmed by culture, and 194 deaths (CFR 1.6%) have been reported.									
Kenya	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	26-Jul-23	343 918	343 918	5 689	1.70%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 26 July 2023, there have been 343 918 confirmed COVID-19 cases including 5 689 deaths have been reported in the country.									
Kenya	Leishmaniasis (visceral)	Ungraded	31-Mar-19	3-Jan-20	26-Jul-23	2 387	2 387	10	0.40%
The outbreak has been continuous since 2020. A total of 22 new cases were reported in the week ending 26 July 2023, making a cumulative of 2 387 cases and 10 deaths (CFR 0.5%). The outbreak is active in West Pokot County. No new cases were reported in the last epi week.									
Kenya	Measles	Ungraded	29-Jun-22	1-Jan-23	26-Jul-23	873	177	16	1.80%
The outbreak has been continuous from 2022, affecting 13 counties in 2023. Cumulatively, 873 cases, with 177 confirmed cases and 16 deaths (CFR 2.0%) have been reported as of 26 July 2023.									

Kenya	Poliomyelitis (cVDPV2)	Grade 2	6-Jul-23	26-May-23	26-Jul-23	3	2	0	0.00%
A circulating vaccine-derived poliovirus type 2 (cVDPV2) has been confirmed in Kenya. Three genetically linked cVDPV2s were isolated from two acute flaccid paralysis (AFP) cases, with onset of paralysis on 26 and 27 May 2023, and one asymptomatic community contact, from Fafi district, Garissa province. Genetic sequencing confirms the isolated cVDPV2s are linked to cVDPV2s currently circulating in Banadir, Somalia									
Lesotho	COVID-19	Protracted 3	13-May-20	13-May-20	12-Sep-22	34 490	34 490	706	2.10%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 12 September 2023, a total of 34 490 cases of COVID-19 have been reported, and 706 deaths.									
Liberia	COVID-19	Protracted 3	16-Mar-20	16-Mar-20	26-Jul-23	8 161	8 161	294	3.60%
As of 17 July 2023, no new confirmed COVID-19 cases have been reported, and there are currently zero active cases in the country. In the previous months, there were 40 cases in April, 5 cases in May, and 6 cases in June 2023. Cumulatively, from March 16, 2020, when the first case was confirmed in Liberia, until July 17, 2023, there have been 8,161 confirmed cases, 294 deaths. Additionally, 404 health workers have been infected, while 7,867 patients recovered from the virus.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	27-Jul-23	82	82	24	29.30%
From January 1 to July 5, 2023: Two new confirmed cases reported, Six contacts recorded and followed up. Cumulative confirmed cases: 39, with 14 deaths (CFR: 36%). Among the cases, 7 are health workers with 3 deaths. From January 6, 2022, to July 5, 2023: Total recorded cases: 82, Total deaths: 24.									
Liberia	Measles	Ungraded	3-Feb-22	13-Dec-21	26-Jul-23	12 637	11 995	95	0.80%
Since the measles outbreak started on 13 December 2021, Cumulative cases: 12,637 suspected, 11,995 confirmed, 95 deaths (CFR 1.0%). Confirmed cases: 6.1% lab confirmed, 7.2% clinically confirmed, 86.7% Epi linked. Montserrado county: highest deaths (69), others in 8 counties as of 12 JULY 2023. There were 41 new cases, no deaths from 6-12 July 2023 in 9 counties. Most affected age group: 1-4yrs.									
Liberia	Mpox	Protracted 2	21-Jul-22	23-Jul-22	27-Jul-23	10	10	0	0.00%
Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public health Reference Laboratory in the country. As of 29 March 2023, 10 confirmed cases of monkeypox with 0 deaths were reported. as of July 24 2023, no Mpox cases. The country is currently having a stock out of both specimens collection materials and reagents for Mpox. Mpox proficiency testing (PT) panels from AFRO are also still pending testing due to reagent stock out									
Madagascar	Malnutrition crisis	Protracted 2	1-Jul-21	1-Jan-21	1-Jun-23	2 200 000	-	-	-
According to Reliefweb, 2.2 million people face food insecurity and need humanitarian assistance. 479 000 children suffer acute malnutrition in the Grand South and Grand South-east. 115,000 children need to be treated for acute malnutrition this year.									
Madagascar	COVID-19	Protracted 3	20-Mar-20	20-Mar-20	12-May-23	68 266	68 266	1 424	2.20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 12 May 2023, a total of 68 266 confirmed cases including 1 424 deaths have been reported in the country.									
Malawi	Cholera	Grade 3	3-Mar-22	3-Mar-22	30-Jul-23	58 964	58 964	1 768	3.00%
A total of 29 districts have reported Cholera cases since March 2022 in Machinga district. As of 30 July 2023, cumulative confirmed cases and deaths reported since the onset of the outbreak is 58 964 and 1 768 respectively, with Case Fatality Rate at 3.0%.									
Malawi	COVID-19	Protracted 3	2-Apr-20	2-Apr-20	23-Jul-23	88 825	88 825	2 686	3.00%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 23 July 2023, the country has a total of 88 825 confirmed cases with 2 686 deaths.									
Malawi	Poliomyelitis (WPV1)	Grade 2	31-Jan-22	1-Feb-22	26-Jul-23	1	1	0	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 control the WPV1 outbreak.									
Mali	Humanitarian crisis (Sahel region)	Grade 2		11-Sep-17	31-Jul-23	-	-	-	-
Mali is facing prolonged conflict, poverty, climate shocks, and growing insecurity. In 2021, humanitarian partners were able to reach 2.8 million people in the country. But, the current Humanitarian Response Plan for Mali is severely underfunded, with only 11% of the required funding secured. During the first quarter of 2023, the number of IDPs fell from 412,387 in December 2022 to 375,539 in April 2023, a decrease of 8.9%. However, there has been a significant increase in IDPs in the regions of Kidal (32.8%) and Ménaka (20%). As of week 30, over 7.5 million people in Mali are in need of humanitarian assistance. The lean season from June to August in 2023 will be particularly challenging, with a staggering 1.8 million people facing acute food insecurity.									
Mali	COVID-19	Protracted 3	25-Mar-20	25-Mar-20	11-Jun-23	33 150	33 150	743	2.20%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 11 June 2023, a total of 33 150 confirmed COVID-19 cases have been reported in the country including 743 deaths and 32 331 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-23	2-Jul-23	276	276	0	0.00%
From the beginning of the year through 2 July 2023, 634 suspected measles cases were tested in Mali and 276 were laboratory confirmed.									
Mauritania	COVID-19	Protracted 3	13-Mar-20	13-Mar-20	2-Jul-23	63 712	63 712	997	1.70%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 2 July 2023, a total of 63 712 cases including 997 deaths and 62 713 recovered have been reported in the country.									
Mauritania	Measles	Ungraded	7-Mar-23	26-Dec-22	11-Jun-23	508	224	4	0.80%

Since the beginning of 2023, measles cases have been reported in the three wilayas of Nouakchott and in eight other wilayas in the country. As of 11 June 2023, the country has reported 508 suspected cases of measles, of which 224 have been confirmed, including 133 laboratory-confirmed cases and 91 epidemiologically linked cases. Four deaths, including two community deaths, have been reported among the confirmed cases.									
Mauritius	COVID-19	Protracted 3	18-Mar-20	18-Mar-20	7-May-23	304 233	304 233	1 050	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.									
Mauritius	Dengue fever	Ungraded	10-Jul-23	8-Jun-23	7-Jul-23	147		0	0.00%
Mauritius has been experiencing an outbreak of dengue fever since early June. As of 7 July, 147 suspected cases have been reported, including 96 in Mauritius Island and 51 in Rodrigues Island. Rapid diagnostic tests and polymerase chain reaction (PCR) are being used to confirm cases. Response activities include intensified surveillance, case investigation, contact tracing and vector control.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	21-May-23	-	-	-	-
Most poor and very poor households in Mozambique face Minimal (IPC Phase 1) outcomes as the ongoing harvest improves food access and availability. In Cabo Delgado, ongoing humanitarian assistance is driving stressed (IPC Phase 2) outcomes, with Crisis (IPC Phase 3) outcomes persisting in conflict-affected areas. There have been reduced number of attacks.									
Mozambique	Cholera	Grade 3	14-Sep-22	16-Nov-22	30-Jul-23	33 534	33 534	141	0.40%
In week 30 (week ending 30 July 2023), 91 new cases were reported from two provinces, Nampula (69) and Cabo Delgado (22) in the country. Overall, case numbers have declined consecutively, but Nampula Province reported an increase in new cases compared to the previous week. Cumulatively, 33 534 cases with 141 deaths (CFR 2.2%) have been reported across the country.									
Mozambique	COVID-19	Protracted 3	22-Mar-20	22-Mar-20	24-Apr-23	233 417	233 417	2 243	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	Poliomyelitis (cVDPV2)	Grade 2	7-Dec-18	1-Jan-21	31-May-23	6	6	0	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.									
Mozambique	Poliomyelitis (WPV1)	Grade 2	17-May-22	18-May-22	26-Jul-23	8	8	0	0.00%
According to the Global Polio Eradication Initiative, there was no WPV1 case reported this week. There were eight cases reported 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 of COVID-19 was detected in Namibia on the 14 March 2020. As of 9 July 2023, a total of 171 998 confirmed cases with 4 098 deaths have been reported.									
Niger	Humanitarian crisis (Sahel region)	Grade 2	1-Feb-15	1-Feb-15	31-Jul-23	-	-	-	-
The number of internally displaced people in Niger has reached a record high, with an increase from 1.9 million in 2017 to 4.3 million individuals (15% of the population) in 2023, indicating a significant rise in the need for humanitarian assistance. As of June 2023, Niger is facing a significant displacement crisis, with 358,185 internally displaced people (IDPs) and 285,654 refugees and asylum-seekers recorded in the country. The number of IDPs has increased by 35.5% compared to June 2022, but there has been a slight decrease (1%) since March 2023. The region of Assamaka in Agadez is experiencing a critical humanitarian situation due to the arrival of 9,192 vulnerable migrants since the beginning of the year. Over 95% of these migrants are citizens of West African countries, and approximately 2,000 of them remain stranded as of June 1, 2023. 987 schools closed across Niger, affecting 85,534 children, including 41,759 girls. The Tillabéri region bears the brunt of school closures, accounting for 93% of the total. However, efforts by UNICEF and its partners have resulted in the reopening of 49 schools, benefiting 6,651 children, including 3,127 girls.									
Niger	COVID-19	Protracted 3	19-Mar-20	19-Mar-20	1-May-23	9 513	9 513	315	3.30%
From 19 March 2020 to 1 May 2023, a total of 9 513 cases with 315 deaths have been reported across the country. A total of 9 203 recoveries have been reported from the country.									
Niger	Measles	Ungraded	5-Apr-22	1-Jan-22	15-Jul-23	1 678	517	0	0.00%
As of epidemiological week 28, 2023, a 1 678 suspected cases of measles were reported, of which 923 were investigated across 65 districts in the eight regions. Of these cases, 56% (517/923) were laboratory-confirmed. Additionally, 90 % (65/72) of the districts reported at least one suspected case of measles. Furthermore, 35 health districts, accounting for 49%, have reached the epidemic threshold at least once since the beginning of the year.									
Niger	Meningitis	Ungraded	7-Dec-22	31-Oct-22	15-Jul-23	2 162	325	129	6.00%
A meningitis outbreak has been declared in the Dungass health district in the Zinder region. The first case was reported on 31 October 2022 and confirmed on 23 November 2022 with Neisseria meningitidis identified as the causative agent. As of 15 July 2023, 2 162 suspected cases of meningitis including 325 laboratory confirmed cases and 129 deaths (CFR 6.1 %) were reported.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	26-Jul-23	34	34	0	0.00%
No new case of cVDPV2 was reported during this week. The total number of cases reported in 2022 is 16. There were 18 cases reported in 2021.									
Nigeria	Humanitarian crisis (Sahel region)	Grade 2	10-Oct-16	10-Oct-16	27-Jul-23	-	-	-	-
People 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. As at week 28 2023, over 6 million people are targetted for humanitarian aid, 8.3 million people are in need of humanitarian assistance, 2.2 million IDPs, 4.3 million people in need of food security aid and 4.24 in need of nutrition assistance.									
Nigeria	Cholera	Grade 3		1-Jan-23	2-Jul-23	2 052		55	2.70%

From 1 January to 2 July 2023, a cumulative 2 052 suspected cholera cases and 55 deaths (CFR 2.7%) were reported from 96 Local Government Areas in 24 states, with Cross River State accounting for 35% of the reported cases (718 cases). Other states with the highest number of cases are Katsina (288 cases), Ebonyi (227 cases), Zamfara (216 cases), Bayelsa (205 cases), Abia (118 cases) and Niger (114 cases). Males account for 51% of all suspected cholera cases.									
Nigeria	COVID-19	Protracted 3	27-Feb-20	27-Feb-20	21-Apr-23	266 675	266 675	3 155	1.20%
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	Diphtheria	Grade 1	1-Dec-22	1-Dec-22	16-Jul-23	3 345	1 290	98	7.50%
Between week 19, 2022 and week 28, 2023, 3 345 suspected cases of diphtheria were reported from 25 states in Nigeria. Kano (2 818), Yobe (310), Katsina (61), Lagos (30), and FCT (40) States have reported the most cases. A total of 98 deaths were recorded among confirmed cases (CFR 7.5 %). Of suspected cases, 1290 were confirmed, including 54 laboratory-confirmed, 223 epidemiologically linked, and 1 013 clinically compatible. Children aged 2-14 years account for the majority of confirmed cases (57 %).									
Nigeria	Lassa Fever	Ungraded	8-Jan-23	1-Jan-23	23-Jul-23	6 597	1 009	171	2.60%
In week 29, 2023, Nigeria recorded 114 cases of Lassa fever, with zero deaths. From week 1 to week 29, a cumulative total of 6 597 suspected cases were reported across 28 states and 111 local government areas. Among these cases, 1 009 were confirmed, and 171 are deaths (CFR 16.9 %). The states of Ondo, Edo, and Bauchi account for 73% of all confirmed cases. The age group most affected is 21-30 years, ranging from 1 to 93 years. Furthermore, the number of suspected cases has shown an increase compared to the corresponding period in 2022.									
Nigeria	Mpox	Protracted 2	31-Jan-22	1-Jan-22	9-Jul-23	843	843	9	1.10%
From 1 January to 9 July 2023, Nigeria has reported 843 monkeypox confirmed cases with nine deaths (CFR 1.1%).									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-22	19-Jul-23	64	64	-	-
No cVDPV2 case was reported this week. There have been 16 cVDPV2 cases reported this year and 48 cases in 2022.									
Rwanda	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	26-Feb-23	133 194	133 194	1 468	-
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	Protracted 3	7-Apr-20	6-Apr-20	26-Apr-23	6 562	6 562	80	1.20%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 26 April 2023, a total of 6 562 confirmed cases of COVID-19 have been reported, including 80 deaths. A total of 6 358 cases have been reported as recoveries.									
Senegal	Chikungunya	Ungraded	8-Jun-23	8-Jun-23	9-Jul-23	2	2	0	0.00%
On 24 July 2023, the Dakar Pasteur Institute laboratory reported one IgM-confirmed case of Chikungunya from Sokone district, Fatick region. The date of disease onset is 9 July 2023 and searched medical care on the same day. There was another case notified on 4 July 2023 by the Dakar Pasteur Institute laboratory(IgM-confirmed case of Chikungunya) from Pikine district.									
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 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.									
Senegal	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	21-Apr-23	21-Apr-23	25-Jul-23	3	3	1	33.30%
The Ministry of Health of Senegal reported a confirmed case of Crimean-Congo hemorrhagic fever on 21 April 2023 in a 35-year-old male, butcher residing in Guédiawaye district, Dakar region. The date of onset of symptoms was 10 April with fever and flu-like syndrome. On 9 May 2023, a second confirmed case was reported from the Linguère district in the Louga region; and on 10 July, a third confirmed case was reported from Yeumbeul district in Dakar.									
Senegal	Measles	Ungraded	4-Jul-22	1-Jan-23	22-Jul-23	445	445	0	0.00%
From epidemic week 1 to 29 of 2023 (ending 22 July 2023), 445 confirmed cases of measles with no deaths were reported from 13 regions in Senegal, with the most affected regions being Diourbel (294 cases), Kédougou (27 cases), Tambacounda (24 cases), Louga (17 cases), Dakar (17 cases) and Thiès (24 cases). Of the 197 children aged 9 months to 5 years with confirmed measles, 168 (85%) were not vaccinated against measles.									
Seychelles	COVID-19	Protracted 3	14-Mar-20	14-Mar-20	28-Feb-23	50 937	50 937	172	0.30%
Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 28 February 2023, a total of 50 937 cases have been confirmed, including 50 750 recoveries and 172 deaths have been reported.									
Sierra Leone	COVID-19	Protracted 3	31-Mar-20	27-Mar-20	25-Jul-23	7 766	7 766	125	1.60%
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. As of July 16 2023, 7 766 cases, 125 deaths, CFR (1.6%). Since the beginning of 2023 there have been six confirmed COVID 19 cases.									
South Africa	Cholera	Grade 3	3-Feb-23	3-Feb-23	3-Jul-23	1 265	198	47	3.70%
A total of 1 275 suspected and 198 laboratory confirmed cholera cases have been reported from five provinces since the start of the outbreak. Since the peak, on 23 and 24 May 2023, there has been a steady decline of cases. Gauteng Province accounts for most(89%) of the cases reported from three districts, followed by Free State Province accounting for 6% of the cases, reported from one district.									
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 pandemic in South Africa through 24 April 2023, a cumulative total of 4 072 533 confirmed cases and 102 595 deaths have been reported.									
South Africa	Measles	Ungraded	17-Oct-22	13-Oct-22	28-Jul-23	6 541	1 115	0	0.00%
From 8 October 2022 to 28 July, 2023, a total of 1 116 laboratory-confirmed cases were reported from eight provinces with declared measles outbreaks in Limpopo (512 cases), Mpumalanga (112 cases), North West (217 cases), Gauteng (182 cases), Free State (32 cases), Western Cape (18), KwaZulu-Natal (32) and Northern Cape (7).									

South Sudan	Drought/food insecurity	Grade 3	18-Dec-20	5-Apr-21	30-Jun-23	-	-	-	-
The 2022 Integrated Phase Classification (IPC) analysis in South Sudan, projects that over half of the population in the country (63%) will be facing acute food insecurity between April 2022 and July 2023. Of these, 4.8 million people will be in crisis (IPC3), 2.9 million are projected to be in emergency (IPC4) and the number of people in catastrophe (IPC5) are expected to be 43 000. Regarding the nutrition situation, an estimated 1.4 million children under five are acutely malnourished with 346 000 in a severe condition in 2023.									
South Sudan	Floods	Ungraded		7-Oct-22	30-Jun-23	1 000 000			
In South Sudan, persistent flooding from July 2022 into 2023 has affected at least one million people, many of whom were already facing urgent needs due to conflict and violence. In 2023, heavy Rainfall (greater than 200 mm) is expected over isolated areas in central, western, and southern parts of the country and light rainfall (less than 50 mm) expected over northern parts of the country									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	15-Aug-16	29-Jun-23	9 400 000	-	-	-
South Sudan continues to face deteriorating humanitarian conditions. The situation is worsened by persistent violence, conflict, access constraints and operational interference, public health challenges and climatic shocks resulting in extraordinary flooding and localized drought. The humanitarian community in South Sudan estimates that 9.4 million people need humanitarian assistance in 2023, a staggering 76% of South Sudan's population. With the ongoing conflict in Sudan, over 149 000 individuals have been recorded arriving in South Sudan since the conflict erupted on 15 April and the number of arrivals is projected to increase as the crisis continues.									
South Sudan	Cholera	Grade 3	7-Mar-23	22-Feb-23	16-Jun-23	1 471	19	2	0.10%
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. No new case has since been reported.									
South Sudan	COVID-19	Protracted 3	5-Apr-20	5-Apr-20	3-May-23	18 499	18 499	138	0.70%
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.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	5-Jun-23	4 283	1 517	33	0.80%
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. Of total cases, 1 481 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. 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.									
South Sudan	Measles	Ungraded	23-Feb-22	1-Jan-22	25-Jun-23	6 447	4 828	69	1.10%
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, 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.									
Tanzania, United Republic of	COVID-19	Protracted 3	16-Mar-20	16-Mar-20	23-Apr-23	42 973	42 973	846	2.00%
The Ministry of Health, Community Health, Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 23 April 2023, a total of 42 973 confirmed cases have been reported in Tanzania Mainland including 846 deaths.									
Tanzania, United Republic of	Poliomyelitis (cVDPV2)	Grade 2	19-Jul-23	17-Jul-23	26-Jul-23	1	1	0	0.00%
A case of cVDPV2 from an Acute Flaccid Paralysis (AFP) case was isolated on 30 June 2023 in the United Republic of Tanzania. The case was a 22-month-old female child with AFP, with the onset of paralysis on 26 May 2023, from the Sumbawanga municipality council, Rukwa region, southwestern Tanzania bordering Lake Tanganyika to the west and Zambia to the south. The isolate is genetically related to cVDPV2 circulating in Burundi which also was linked with the one circulating in Burundi.									
Togo	COVID-19	Protracted 3	6-Mar-20	1-Mar-20	3-May-23	39 483	39 483	290	0.70%
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.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	19-Jul-23	19	19	0	0.00%
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.									
Uganda	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	30-Jun-23	-	-	-	-
According to the Integrated Food Security Phase Classification (IPC) in Karamoja region, 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), 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).									
Uganda	COVID-19	Protracted 3	21-Mar-20	21-Mar-20	6-May-23	170 775	170 775	3 632	2.10%
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.									
Uganda	Rift Valley fever	Ungraded	1-Mar-23	2-Mar-23	17-Mar-23	20	19	4	20.00%
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.									
Uganda	Yellow Fever	Ungraded	7-Mar-22	2-Jan-22	27-Jun-23	1 178	4	0	0.00%

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 was reported in February 2023. The National Yellow Fever vaccination campaign phase I has been completed and 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.									
Zambia	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	31	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.									
Zimbabwe	Cholera	Grade 3	23-Feb-23	12-Feb-23	29-Jul-23	3 798	846	82	2.20%
The first cholera outbreak in the country in 2023 started on the 12 February 2023. Cumulatively there were 3 798 cholera cases with 82 deaths (CFR 2.2%) as of 29 July 2023. All of the ten provinces are affected with majority of the cases reported from Manicaland, Harare, Mash West and Mash Cent provinces.									
Zimbabwe	COVID-19	Protracted 3	20-Mar-20	20-Mar-20	21-Jul-23	265 694	265 694	5 710	2.10%
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									
Ghana	Anthrax outbreak suspected	Ungraded	5-Jun-23	1-Jun-23	25-Jul-23	13		1	7.70%
Since 1 June 2023, no new cases of human infection have been reported. The last animal case was on 14 June 2023. The outbreak has been declared over by the government.									
South Sudan	Unknown disease/suspected viral hemorrhagic fever	Ungraded	17-Jul-23	18-Jul-23	18-Jul-23	359		19	5.30%
This event which was first reported on 17 July 2023, is considered closed following negative test results for arboviruses and viral haemorrhagic fevers. The positive cases of measles reported among those tested will be monitored under the measles event in this country.									

†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

- ADUGNA DADI, Fekadu (Ethiopia)
- ALI, Mohammed Seid (Ethiopia)
- MANGA, Lucien Alexis E.WHO (WR, Congo)
- KANDAKO, Youba (Congo)
- GEBRESILLASSIE, Israel (Mozambique)
- SITAO, Sinesia (Mozambique)
- RAFAEL Florentina (Mozambique)

AFRO Contributors

- G. Sie Williams
- J. Nguna
- J. Kimenyi
- F. Kambale
- R. Mangosa Zaza
- G. Akpan
- A. Atagbaza
- 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.