

# WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 21: 20 - 26 May 2024

Data as reported by: 17:00; 26 May 2024



African Region

Emergency Preparedness and Response

**1**

New events

**117**

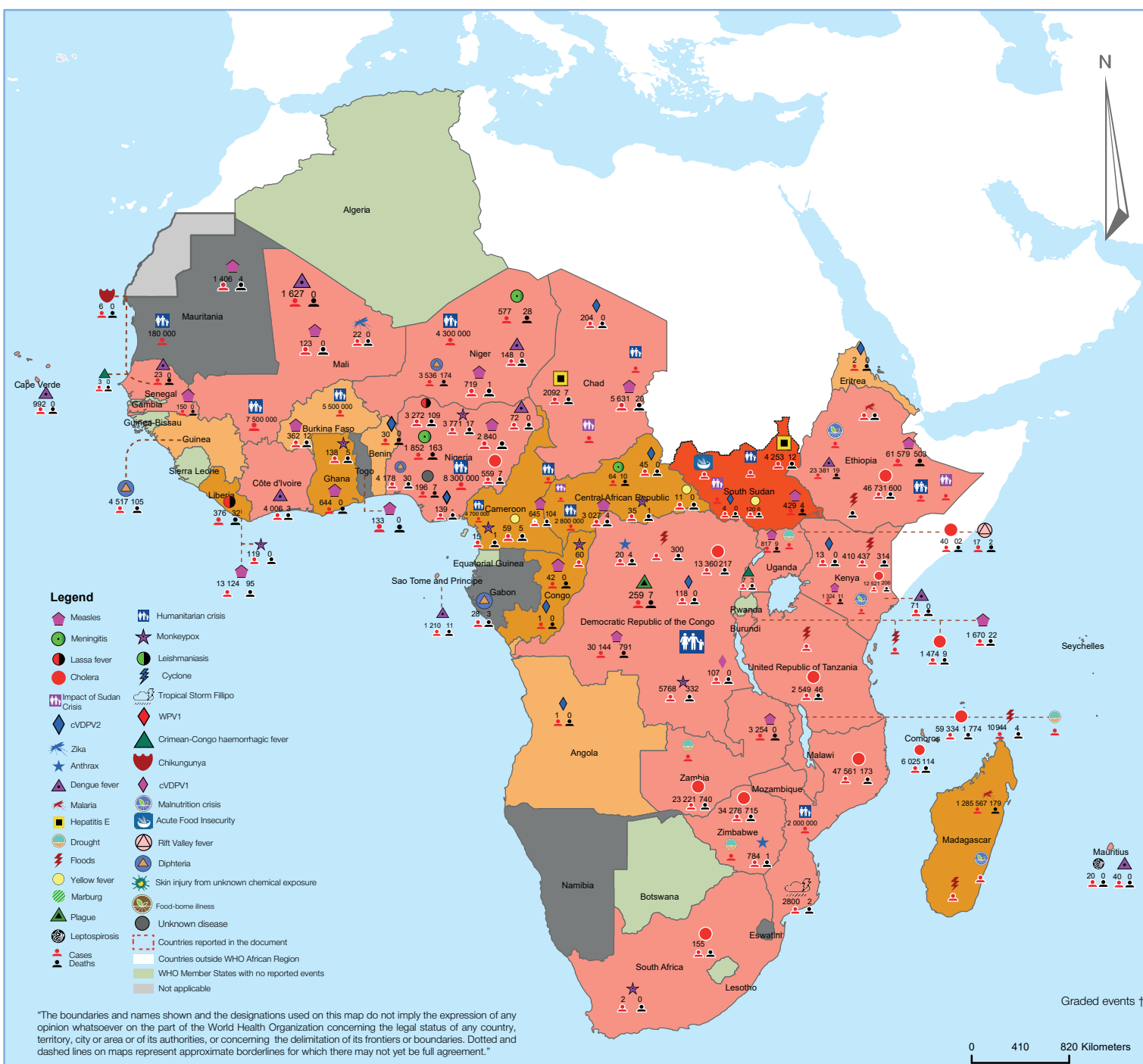
Ongoing events

**85**

Outbreaks

**33**

Humanitarian crises



**6**

Grade 3 events

**6**

Grade 2 events

**0**

Grade 1 events

**1**

Protracted 3 events

**5**

Protracted 2 events

**0**

Protracted 1 events

**50**

Ungraded events

# Overview

## Contents

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

- [Dengue in Mauritius](#)
- [Cholera in Zimbabwe](#)
- [Humanitarian Crisis in the Sahel Region](#)

For each of these events, a brief description, followed by public health measures implemented and an interpretation of the situation, is provided.

A table is provided at the end of the bulletin with information on all new and ongoing public health events currently being monitored in the region, as well as recent events that have been controlled and closed.

### Major issues include

- The dengue outbreak, which was declared on 11 December 2023 in Mauritius, continues, however, with some challenges. Risk Communication and community engagement activities need further strengthening, especially locally. Inconsistent data sharing has impacted surveillance and response efforts. Laboratory capacity gaps exist, including shortages of reagents for polymerase chain reaction, serotyping, and genomic sequencing. Enhancing vector control measures and conducting quality assessments are crucial to effectively managing the outbreak.
- The decline in cholera cases in Zimbabwe is evidence of collaborative efforts by the Ministry of Health and Child Care, WHO, and partners. Despite current numbers being higher than the previous year, the reduction from the alarming surge between November 2023 and January 2024 is promising. Continued support for communities is vital to strengthening prevention efforts and ensuring sustained public health impact. By prioritising prevention strategies and community engagement, the government can build on this progress and work towards a future free from the threat of cholera in Zimbabwe.

# Mauritius

8 660

Cases

9

Deaths

0.1%

CFR

## Dengue

### EVENT DESCRIPTION

Mauritius continues to respond to the dengue outbreak declared by the Ministry of Health and Wellness (MoHW) on 11 December 2023. However, during the last four weeks (29 April to 26 May 2024), there has been a decline in reported cases, with 1 477 cases, including one death. Of these, 1 251 cases (85.0%) and one death occurred on Mauritius' main island, while 226 cases (15.0%) with zero deaths were reported on the autonomous island of Rodrigues.

As of 26 May 2024, the cumulative number of confirmed dengue cases stands at 8,660, with nine reported deaths and a case fatality rate of 0.1%. Mauritius reported an additional 20 deaths attributed to comorbidities, which are pre-existing health conditions that can worsen the effects of dengue. These comorbidities include diabetes, hypertension, and heart disease, among others.

Mauritius' main island accounts for 72.4% (6 268) of all reported cases and (100%) all nine deaths. The cumulative attack rate is 4.8 per 1 000 population. The outbreak peaked on this island in week 8 of 2024 with 747 cases, followed by fluctuating numbers, with 177 cases reported in week 21. The most affected health offices are Rivière du Rempart, Port Louis, and Pamplemousses in the north, with sporadic cases reported across the island, mainly from individuals working in highly affected regions. Most cases are adults, with a recent increase in those over 60 years. Additionally, 54.0% of cases are male.

As of 26 May, Rodrigues Island had recorded 2 392 confirmed cases, representing 27.6% of the cumulative cases, with a cumulative attack rate of 54.4 per 1 000 population. The epi curve shows that the peak of the outbreak was reached in week 9, with 312 cases. Subsequently, the number of cases gradually declined, with 21 cases reported in week 21.

### PUBLIC HEALTH ACTIONS

- The MoHW leads the dengue outbreak response in Mauritius with support from various sectors and the World Health Organization. Weekly strategic meetings coordinated by the Minister of Health and Wellness guide the response.
- Surveillance efforts have been enhanced with real-time electronic reporting systems, ensuring accurate and timely data flow. A data management working group supports surveillance activities and has ongoing quality improvement initiatives.

- Field assessments and on-site training missions have been conducted in Rodrigues Island to strengthen local capacity.
- Case management includes home-based management and follow-up of dengue cases to ensure appropriate care and reduce pressure on healthcare facilities.
- Vector control activities have been intensified, including training 260 vector control staff with WHO support. Weekly field visits focus on breeding site searches, community education, and vector control personnel training.
- WHO has provided logistical support, including rapid antigen tests, repellent creams, respirators, impregnated mosquito nets, and insecticide sensitivity kits.
- Risk communication and community engagement (RCCE) efforts have been strengthened with the approval and implementation of the RCCE plan, supported by a dynamic risk assessment framework and a data management working group.

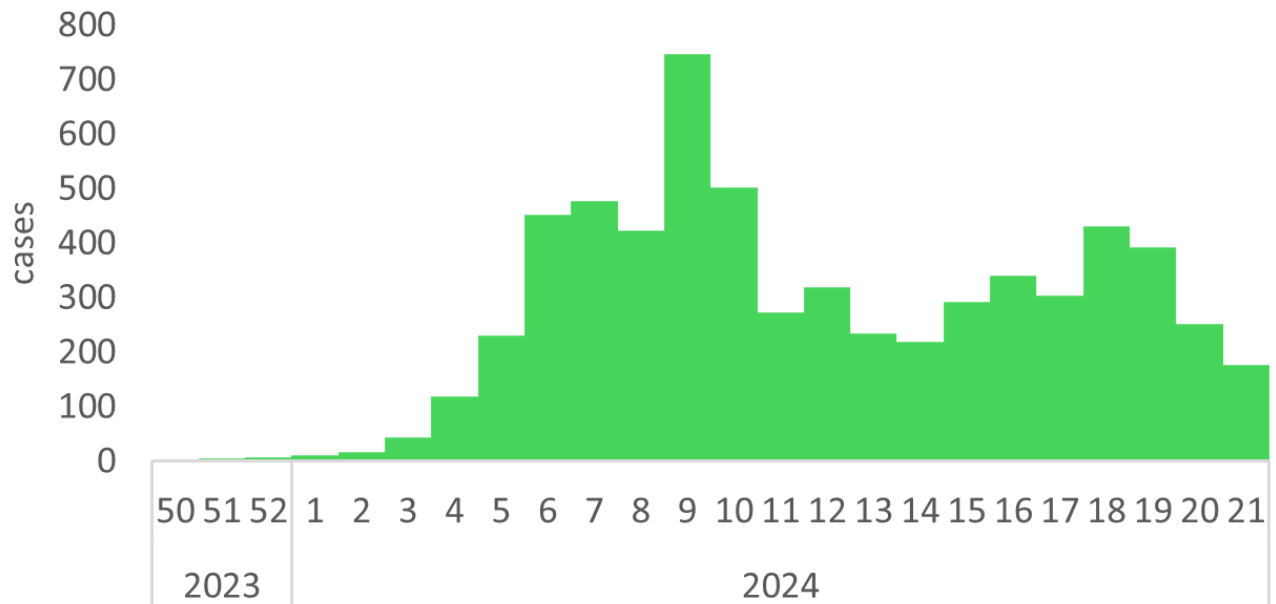
### SITUATION INTERPRETATION

The dengue outbreak in Mauritius shows a higher burden of cases and deaths on the main island compared to Rodrigues. Both Islands have declined in cases, indicating a downward trend in the outbreak. However, the number of cases reported on the main island remains high. The main island's lower cumulative attack rate suggests more widespread but less intense transmission, while Rodrigues has fewer cases, with a higher attack rate, indicating a more concentrated outbreak. The decline in cases can be attributed to the intensified response from the MoHW and the recent drop in temperatures across the island.

[Go to overview](#)

[Go to map of the outbreaks](#)

Trend of weekly confirmed cases of dengue in Mauritius main island, week 50, 2023 – week 21, 2024



Source: WHO AFRO

A WHO expert conducting an education session for a vector control team



# Zimbabwe

**34 276**

**Cases**

**715**

**Deaths**

**2.1%**

**CFR**

## Cholera

### EVENT DESCRIPTION

Zimbabwe has been experiencing a cholera outbreak since February 2024, with a total of 34 276 suspected cases, 3 964 confirmed cases by culture, and 715 deaths reported as of May 26, 2024. Of the 715 deaths, 87 were confirmed positive by culture, and 628 were among suspected cases.

During the reporting period, the outbreak has spread its reach to 63 districts nationwide, with the highest number of confirmed cases reported in Harare 36% (n=1 441 cases), Manicaland 32% (n=1 285), Mat North 7% (n=280) and Masvingo 7% (n=279) provinces. The most concerning aspect is the vulnerability of certain population groups. According to UNICEF, children, women of childbearing age, religious decliners, artisanal miners, and farmers in rural settings continue to be at high risk, with 51.0% of the cumulative cholera cases being women while 14% are children under five years, a fact that should stir our collective empathy.

The risk factors for cholera in Zimbabwe are multifaceted, including contaminated water sources such as boreholes and water with high fluoride levels, inadequate sanitation and hygiene, limited access to healthcare, and migration and movement of people. Additionally, poor knowledge about cholera transmission and prevention and religious objections to vaccination also contribute to the spread of the disease.

### PUBLIC HEALTH ACTIONS

- The Ministry of Health (MoH) activated its incident management system at the onset of the cholera outbreak, enabling a coordinated and effective response to the outbreak and ensuring a swift and robust deployment of resources to contain the spread of the disease. The (MoH) convenes coordination meetings twice a week and ensures the effective implementation of cholera intervention measures, fostering a collaborative and proactive response to the outbreak
- During this cholera outbreak, an Oral Cholera Vaccination (OCV) campaign was conducted with 2 121 784 people vaccinated, achieving a 92.0% coverage rate. The campaign specifically targeted 26 districts with the highest number of reported cases. An intensified OCV campaign has been launched in Sanyati District to protect high-risk populations and prevent the further spread of the disease in the area.
- The Ministry of Health, supported by WHO, have

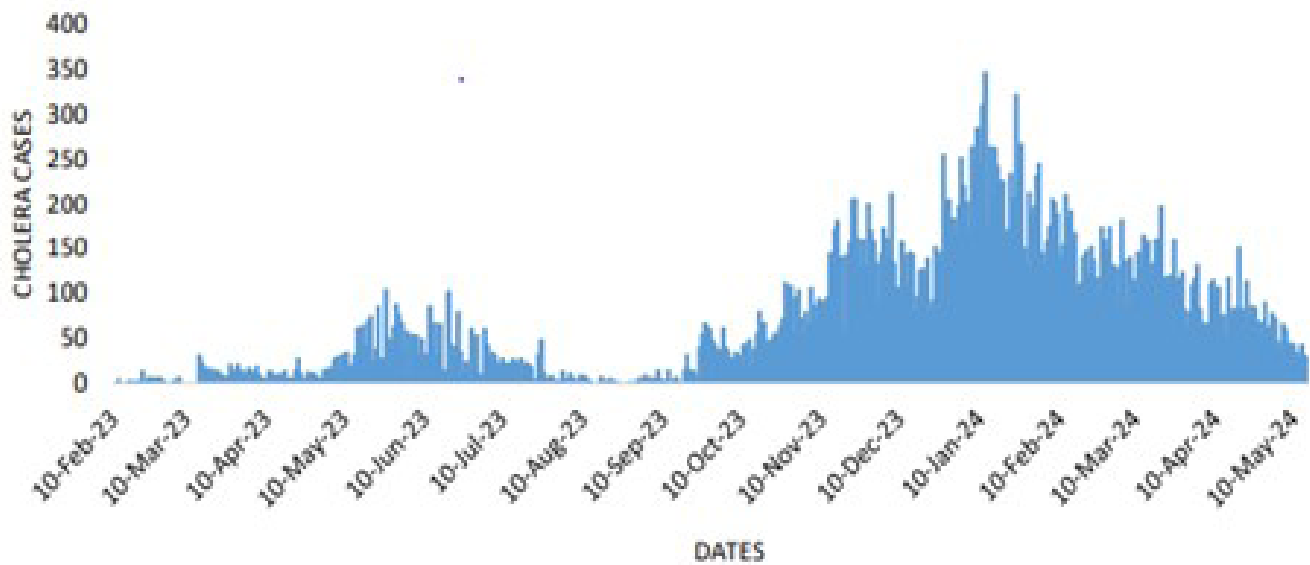
boosted cholera treatment and monitoring capacity by expanding cholera treatment centres and oral rehydration points. They conducted ongoing training for healthcare workers and implemented Event-Based Surveillance along migration routes. Active surveillance was employed to trace and monitor cases, contacts, and hotspots. Furthermore, they have drilled and repaired water boreholes in Buhera District (17 boreholes were drilled, 20 were repaired, and six were equipped with solar panels) to improve access to safe water and reduce the risk of cholera transmission.

- Specimens are being collected and sent to laboratories for testing, confirming cholera cases and guiding response efforts to ensure targeted and effective interventions.
- Cholera information has been disseminated through various channels (street hailing, community radio platforms, social media, Cholera Flipcharts, and IEC material) to reach a wide audience and engage community health workers and volunteers through intensified interpersonal communication to leverage trusted community members in the response efforts.
- Non-food item kits are being distributed in affected areas to provide essential items for households, promote hygiene, and prevent cholera transmission.

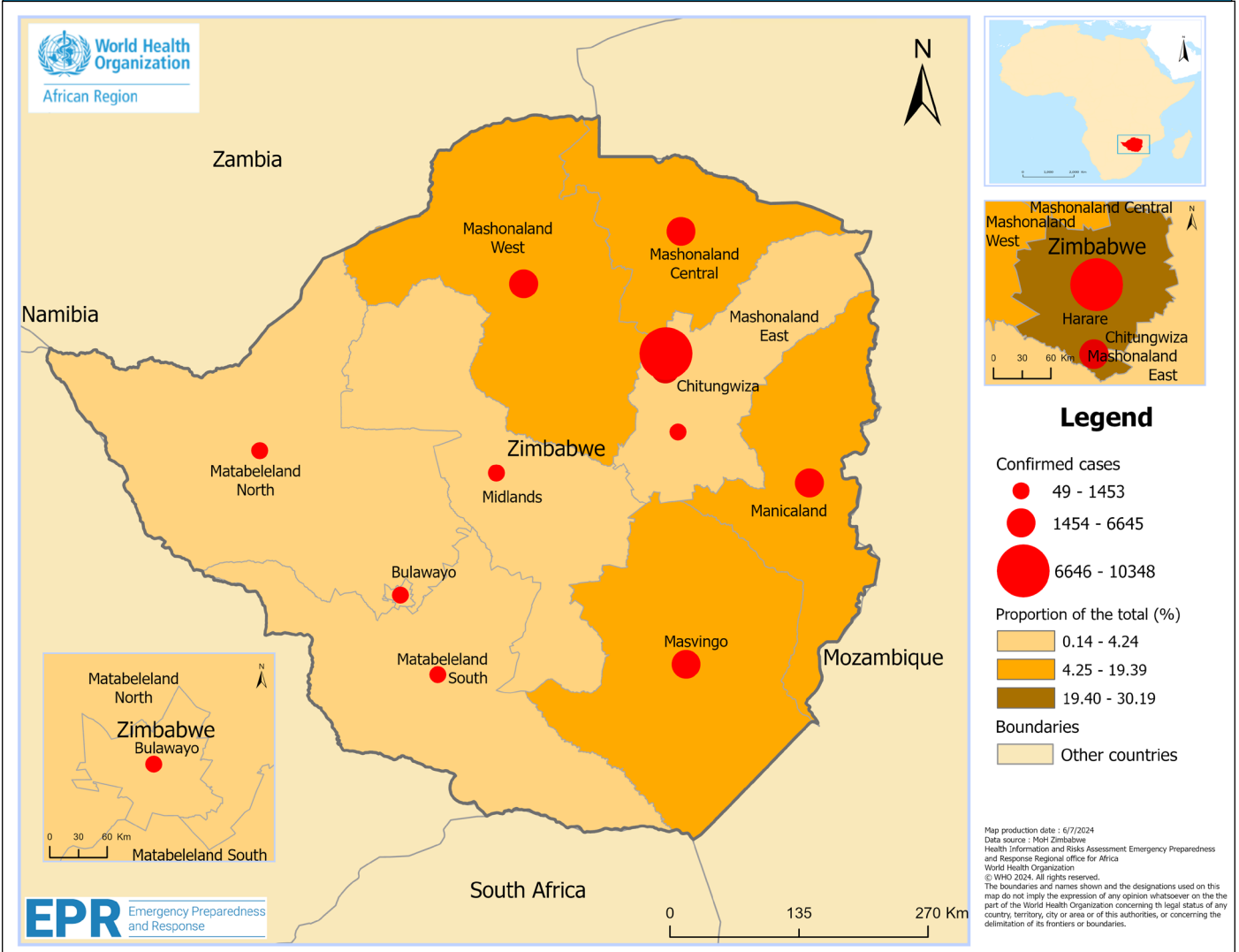
### SITUATION INTERPRETATION

The current trajectory of the cholera outbreak in Zimbabwe shows a consistent downward trend since early April 2024. Despite efforts to control the outbreak, challenges persist, including inadequate water, sanitation, and hygiene infrastructure, as well as ongoing religious objections, which continue to hinder the response and put communities at risk. Continued surveillance and contact tracing are crucial to monitor the outbreak and prevent further transmission. Overall, the situation requires sustained efforts to control the outbreak, ensure effective case management, and prevent further transmission through improved water sanitation and hygiene infrastructure.

Trend of cholera cases in Zimbabwe from 10 February 2023 –10 May 2024



Distribution of suspected cases of Cholera by Province in Zimbabwe, as of 26 May 2024



# Sahel Region

## Humanitarian Crisis

### EVENT DESCRIPTION

Countries within the Sahel region have consistently been ranked among the globe's most impoverished, burdened with many challenges, including poverty, food insecurity, high unemployment rates, and the world's fastest population growth. Violence, conflict, and crime have surged over the last decade, crossing national borders and posing significant challenges to countries both in and outside the region.

The Sahel countries face internal dynamics of inequality, where state power tends to be concentrated in southern, urban regions while rural, northern areas remain underdeveloped. Thus, Sahel countries consistently rank high on the Fragile State Index, particularly Chad, Mali, and Nigeria. Frequent transfers of power are also a problem: Chad, Burkina Faso, Mali, Mauritania, and Niger experienced a combined 25 successful coups d'état between 1960 and 2022. Consecutive military coups in Mali in 2020 and 2021, and recently in Niger in July 2023, resulting in Mali's current interim government under a military junta, launched the region's most recent so-called coup epidemic, which saw similar occurrences in Burkina Faso, Chad, and Niger.

Since 2012, the Sahel has been grappling with a chronic security crisis, which interweaves development, governance and stability challenges across vast transboundary areas. With dire food insecurity across the region, perhaps the most affected in 2023 were Burkina Faso and Mali, which had populations facing catastrophic levels of acute food insecurity. In Nigeria, in July 2023, the President declared a state of emergency on food security in the country as a crucial and timely step towards addressing the pressing issue of food scarcity and clean water availability in the country. The declaration brought up issues with food inflation, fuel prices and the sustainability of the food value chain and agriculture. Massive population displacement, socio-political instability, climate change and global crisis are other key contributing factors to the hunger crisis in the Central Sahel.

Temperatures in the Sahel are rising 1.5 times faster than the global average, threatening the livelihoods of millions dependent on natural resources. Niger loses 100 000 to 120 000 hectares of arable land annually due to soil erosion and desertification. This scarcity of land and water resources has heightened conflicts between herding, farming, and fishing communities. A recent deadly heatwave saw temperatures exceed 45°C in late March and early April across the Sahel and West Africa. However, inadequate data from affected nations makes it impossible to determine

the precise number of recorded casualties, underscoring the urgent need for action in this vulnerable region.

The table below outlines the numbers of People in Need of health services and Health Cluster targets across the Sahel countries, according to the individual Humanitarian Response Plans (HRP 2024).

Country	People in Need of Health Services	Health Cluster Target
Burkina Faso	3.5 million people	1.6 million people
Cameroon	1.6 million people	n/a
Chad	2.1 million people	1.1 million people
Mali	3.5 million people	2.1 million people
Niger	2.3 million people	1.7 million people
Nigeria	5.3 million people	3.7 million people

### HUMANITARIAN ACCESS ACROSS SAHEL

Conflict, direct threats to aid workers, administrative barriers, natural disasters, and the COVID-19 pandemic all hindered humanitarian access in the region. Constrained humanitarian access leaves communities without essential assistance and protection, exposing aid workers to increased risks. Notably, armed conflicts perpetrated by non-state armed groups seriously hindered access to certain areas, disrupting humanitarian aid deployment. In addition, the COVID-19 pandemic restriction measures, including the closure of markets, significantly reduced economic activities, impacting the global supply chain, including medical and pharmaceutical goods.

### POPULATION MORTALITY

On average, people in the Sahel live 20 years shorter than in Switzerland; maternal mortality is 100 times higher. Access to health has become more limited due to COVID-19, increasing violence and damaged health facilities. In 2021 alone, WHO recorded 122 deaths linked to attacks on health care. Life expectancy at birth is very low across the Sahel. While infant and child mortality has declined dramatically in recent decades, they are still high relative to other subregions in Africa. The Sahel region has a persistently youthful, rapidly growing, highly-fertile population. Notably, the fertility rate in Niger is the highest in the world, with an estimated 6.7 children per woman.

## VACCINE COVERAGE

Vaccination coverage is direly suboptimal across the region. Chad, in particular, has suboptimal coverage, and the country is far from meeting the 90.0% target coverage rates for vaccination in children, reaching only 58.0% with the third dose of DTP-containing vaccine and 55.0% with the first dose of measles-containing vaccine in 2021. Mali's coverage, too, has been historically below the 90.0% target rate. After a dip in 2020, vaccination rates recovered in 2021.

## MALNUTRITION

The malnutrition risks across several Sahel countries are concerning. In Burkina Faso, insecurity is driving more than one in 10 children under five into acute malnutrition, with high prevalence rates in multiple areas. Cameroon faces approximately 400 000 cases of acute malnutrition among children, along with over 12 000 acutely malnourished pregnant and breastfeeding women. Chad is grappling with a dire situation, with 3.4 million people projected to be acutely food insecure, including nearly 1.8 million children and over 270 000 pregnant and lactating women expected to suffer from acute malnutrition. Mali and Niger are also deeply affected, with millions of children and pregnant or lactating women facing acute malnutrition due to various factors, including conflict and food insecurity. In Nigeria, around 4.4 million children and over 585 000 pregnant or lactating women are suffering from acute malnutrition, with the situation projected to worsen slightly in some regions.

## WATER SANITATION AND HYGIENE (WASH)

WASH indicators are direly suboptimal across the region. In Chad, for example, only 5.6% of the population had access to adequate WASH services, according to the 2019 MICS results, with a significant urban (22.0%) vs rural (1.8%) disparity. Open defecation was estimated at 65.6%. Besides, only 30.0% of healthcare facilities had access to potable water, and 24.0% had adequate sanitation installations. In Niger, access to safe drinking water and basic sanitation is low, as it is hindered by limited financial resources, hydrogeological constraints, weak operation and maintenance mechanisms, and the impacts of climate change. Only 46.0% of the population has access to basic water supply services, and open defecation percentages are still high at 71.0% in 2017. According to a UNICEF 2021 report, it is estimated that 48 million people in Nigeria still practice open defecation, and only 8.0% apply safe handwashing techniques. Over 23.0% of the population cannot access basic water supply services.

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## SURVEILLANCE/EARLY WARNING, ALERT, AND RESPONSE CAPACITY

Each of the six countries has adapted the 3rd edition of the Integrated Disease Surveillance and Response Technical Guidelines. It is being vulgarised at the operational level across the region. These countries also use the District Health Information System 2 to track and report health data. These activities are being conducted under the close support and guidance of the World Health Organization.

The Sahel remains a principal transit point for migrants from sub-Saharan Africa to northern coastal states and Europe. Further violence could exponentially increase the rate of displacement and migration from the region, compounding pressures on northern and coastal African states and Europe. The epicentres of violence and humanitarian disaster are in the Liptako-Gourma and Lake Chad Basin subregions.

## SITUATION INTERPRETATION

The persistent and growing strength of violent extremist organisations in the Sahel threatens to exacerbate the humanitarian crisis and spread instability across Africa. The continuing collapse of international counterterrorism support, as well as weakening leadership in regional efforts, has created a vacuum in which violent extremism can expand. The Sahel serves as a major transit point for migrants to Europe, and increased violence could escalate displacement. Humanitarian aid is vital but not sufficient; Investments in resilience, sustainable development and social cohesion are critical to helping communities move forward and preventing further increases in humanitarian needs. Inclusive and effective participation channels are also needed to enable the diverse voices of affected communities to contribute to programmes and decision-making.





**79 %**  
Completeness  
for weekly  
reporting

**Point du rapportage hebdomadaire – Semaine 21: 20 – 26 mai 2024**

2024

**Legend**

- Received consistently
- Received but not consistently
- Stopped to share
- Data never received
- Not applicable

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

afrooutbreak@who.int  
afrogoeprhir@who.int

*Dr Etien Luc Koua, HIR Programme Area  
Manager (kouae@who.int)  
Emergency Preparedness and Response, WHO  
Regional Office for Africa*

**Southern Africa**

Southern Africa	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51
Burundi																																																			
Cameroon																																																			
Central African Republic																																																			
Chad																																																			
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**Southern Africa**

Southern Africa	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51
Angola																																																			
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Comoros																																																			
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Lesotho																																																			
Madagascar																																																			
Malawi																																																			
Mauritius																																																			

	Week 21	Week 22	Week 23	Week 24
Start date	20-May. -2024	27-May. -2024	03-Jun. -2024	10-Jun. -2024
End date	26-May -2024	02-Jun. -2024	09-Jun. -2024	16-Jun -2024
Deadline / Date limite	<b>29-May -2024</b>	<b>05-Jun. -2024</b>	<b>12-Jun. -2024</b>	<b>19-Jun -2024</b>

## 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
<b>New Events</b>									
Uganda	Rift Valley Fever (RVF)	Ungraded	24-May-2024	23-Feb-2024	12-May-2024	17	11	2	11.80%
Three districts are currently experiencing Rift Valley Fever outbreak (RVF). Ntungamo (five cases, four confirmed and one death) since 23 February 2024, Mbarara (10 cases, five confirmed and one death) since 10 March 2024 and Sheema (two confirmed cases) since 27 March 2024. Cumulatively, 17 cases, 11 confirmed and two deaths (CFR12%) are reported as of 12 May 2024									
<b>Ongoing Events</b>									
Angola	Poliomyelitis (cVDPV2)	Grade 2	15-May-2024	15-May-2024	15-May-2024	1	1	0	0.00%
On 3 May, 2024, Angolan health authorities announced that polio had been detected in Chitato Municipality, Lunda Norte province, which borders the Democratic Republic of Congo. A person infected with 'circulating vaccine-derived poliovirus type 2 was confirmed. According to the Global Polio Eradication Initiative, this is the only case reported this year in the country as of 15 May 2024.									
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	1-Jan-2019	1-Jan-2019	18-Apr-2024	5,500,000	5,500,000	-	-
Since 2015, the security situation in the Sahel and Eastern Burkina Faso has gradually deteriorated due to attacks by armed groups. Access to healthcare services remains a major challenge for the affected population. As of February 2024, 5.5 million People needed humanitarian assistance, 3.2 million of which are children and over 2.06 million IDPs registered and 5478 schools closed. The situation remains fluid.									
Burkina Faso	Measles	Ungraded	6-Feb-2024	14-Jan-2024	9-Mar-2024	3817	362	12	0.30%
Burkina Faso is experiencing an increase in measles cases. Between week 1 and week 10 of 2024, a total of 3 817 suspected measles cases, resulting in 12 deaths, have been recorded. This rise indicates a growing trend in 2024 compared to previous years during the same period.									
Burundi	Flood	Grade 2		1-Sep-2023	26-Apr-2024	-	-	-	-
Since the beginning of the rainy season in September 2023, Burundi has been affected by heavy rains, floods and landslides, exacerbated by the El niño phenomenon. As of 26 April 2024, more than 237 000 people have been affected and more than 42 000 are internally displaced. A total of 175 people have been injured and 29 deaths have been recorded. From January to mid-April 2024, more than 179, 200 people have been affected and more than 31 200 have been displaced. The most affected health districts are located in the western part of the country, including Cibitoke, Bubanza, Rumonge, Makamba and Bujumbura.									
Burundi	Cholera	Grade 3	1-Jan-2023	14-Dec-2022	24-Mar-2024	1 474	175	9	-
The ongoing cholera outbreak was officially declared on 1 January 2023. As of 24 March 2024, a total of 1,474 cases have already been reported since the start of the epidemic. The health districts affected are Cibitoke, Bujumbura Nord, Bujumbura Centre, Bujumbura Sud, Isare, Kabezi, Mpanda, Rwibaga, Bubanza, Mabayi, Rumonge and ugarama. There were 2 new cases in Epi Week 10 of 2024									
Burundi	Measles	Ungraded	15-Feb-2024	1-Jan-2023	12-Feb-2024	1670	1 670	22	1.30%
On 14 February 2024, Burundi's Ministry of Health reported a measles outbreak, with 20 of the country's 49 health districts experiencing active outbreaks. These districts were identified as having unvaccinated children in the 2022 National Vaccination Coverage Survey. The epidemic curve indicates a steady increase in cases since May 2023. In 2023, there were 1670 confirmed cases resulting in 22 deaths, representing a case fatality rate of 1.3%. Among the confirmed cases, 55% were aged 6-59 months, and 82% were under 15 years old. From 1 January to 12 February 2024, 34 deaths were reported in five health districts.									
Cameroon	Humanitarian crisis (North-West & South-West)	Protracted 2	1-Oct-2016	27-Jun-2018	13-Feb-2024	4,700,000	4,700,000	-	-
In the North-West and South-West regions, the unstable security situation and persistent violence are exacerbating humanitarian needs. Affected people continue to flee their homes to neighbouring villages and communities. By February 2024, the following observations were made: 4.7M people in need, 2.7M people targetted, 1M IDPs, 658k Returnees and 485K Refugees and Asylum Seekers.									
Cameroon	Humanitarian crisis (Sahel Region)	Grade 2	31-Dec-2013	27-Jun-2017	13-Feb-2024	-	-	-	-
The Far North region of Cameroon is still facing humanitarian crisis. The region situated at the border area with Nigeria and Chad, as well as the Lake Chad area, remain the most affected by the armed conflict. Between August and September this year, nearly 6 000 newly displaced people were registered in the Mokolo district following repeated attacks by non-state armed groups. More than 2 200 new asylum seekers/refugees were registered for the same period at the Gourenghel transit site, in Mokolo district of Mayo-Tsanaga department.									
Cameroon	Measles	Ungraded	2-Apr-2019	1-Jan-2024	31-Mar-2024	645	232	104	16.10%
From Week 1 to Week 13 (ending 31 March 2024), 645 suspected measles cases including 104 deaths (CFR 16%) were reported in Cameroon. A cumulative number of 232 cases were confirmed, including 129 IgM positive, 88 epidemiologically linked and 15 clinically compatible. In 2023, 6088 confirmed measles cases and at least 75 related deaths have been reported in Cameroon.									
Cameroon	Mpox	Protracted 2	24-Feb-2022	1-Jan-2024	4-Apr-2024	15	2	1	6.70%
From 1 January to 4 April 2024, 15 suspected cases of Mpox including 2 laboratory-confirmed and 1 death have been reported. From 1 January to 28 December 2023, 113 suspected cases of Mpox, including 27 laboratory-confirmed and no death were reported. In 2022, 18 confirmed cases and three deaths were reported in the country.									

[Go to overview](#)
[Go to map of the outbreaks](#)

Cameroon	Yellow Fever	Ungraded	20-Nov-2023	23-Jan-2023	10-Mar-2024	59	30	5	8.50%
In Cameroon, three cases of yellow fever confirmed by polymerase chain reaction (PCR) were reported in the last quarter of 2023, specifically in weeks 42 and 45. Probable and confirmed cases of yellow fever were reported consistently throughout 2023, from week 4 onward. As of week 2 of 2024, a total of 32 confirmed cases have been reported in 10 regions, including 23 PRNT-positive and nine PCR-positive cases. Of these reported cases, 30 have been classified as confirmed, including six in Douala's densely populated urban area.									
Cape Verde	Dengue	Grade 3	6-Nov-2023	6-Nov-2023	24-Mar-2024	992	543		0.00%
On 6 November 2023, the Ministry of Health Surveillance Service reported two confirmed cases of Dengue through Polymerase Chain Reaction (PCR) testing and one borderline case in the city of Praia, Santiago Island, Cabo Verde. The same day three more suspected cases were reported from the Central Hospital Dr. Agostinho Neto giving a total of six cases including two confirmed with zero deaths. As of 11 March 2024, a total of 992 suspected cases, including 543 confirmed cases and no deaths, were reported.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-2013	11-Dec-2013	15-Apr-2024	2,800,000	2,800,000	-	-
The Central African Republic has been facing a humanitarian crisis for more than a decade following military-political conflicts. In 2023, an estimated 2 million people were assisted and in 2024, 1.9 million people have been targeted. Of the country's population of 6.1 million inhabitants, more than half (3.4 million), need humanitarian assistance in 2024. More than 512 000 people are currently internally displaced, 2.5 million suffer from food insecurity, and 751 000 are CAR refugees.									
Central African Republic	Impact of Sudan crisis in CAR	Grade 3	1-May-2023	1-May-2023	10-May-2024	-	-	-	
For CAR, the country is the least affected among the four AFRO countries regarding the ongoing Sudan conflict with 29 444 forcibly displaced people from Sudan who arrived in CAR since 15 April 2023, of which 6 158 are returnees and 23 286 Sudanese refugees/asylum seekers.									
Central African Republic	Measles	Ungraded	13-Mar-2022	1-Jan-2023	26-Nov-2023	3,027	1,145	4	0.10%
At the end of epi-week 47, 2023, the country recorded 3 027 suspected cases and 4 deaths. Since the start of 2023, 15 out of 35 health districts (43%) experienced measles outbreak.									
Central African Republic	Meningitis	Ungraded	27-Mar-2024	22-Mar-2024	26-Apr-2024	64	5	10	15.60%
On 22 March 2024, health authorities declared a meningitis outbreak in Batangafo-Kabo district. From week 7 to week 16 (ending 21 April 2024), a total of 64 suspected meningitis cases including 10 deaths (CFR: 16%) were reported from three communes of Batangafo-Kabo health district, namely Kabo, Sido and Ouaki communes. A total of 52 cerebrospinal fluid samples were collected from the suspected cases and analyzed at Institut Pasteur of Bangui. Bacterial pathogens were identified in 5 (9.6%) samples by PCR test. <i>Neisseria meningitidis</i> serotype W135 and <i>Streptococcus pneumoniae</i> were identified in 3 and 2 samples respectively.									
Central African Republic	Mpox	Protracted 2	3-Mar-2022	4-Mar-2022	26-Nov-2023	35	35	1	2.90%
From 4 March 2022 to 26 November 2023, 35 confirmed cases of Mpox and one death have been reported in the country. Since the start of 2023, the country has reported 18 laboratory-confirmed cases, including one death.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-2019	24-May-2019	13-Dec-2023	45	45		0.00%
A total of 14 cases have been reported in the country in 2023. 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. The number of confirmed cases reported in 2023 was revised to 14 so far.									
Central African Republic	Yellow Fever	Ungraded	12-Jun-2023	1-Jan-2023	21-Apr-2024	11	5		0.00%
Chad has recorded one new probable yellow fever case, which tested positive using the plaque reduction neutralization test (PRNT) in week 15, in the Vakaga health district, bringing the total number of probable cases in 2024 to six. Other probable cases for the year have been reported in the Mbaïki and Kémo health districts. In 2023, five confirmed cases of yellow fever were recorded for the following districts : Sangha-Mbaéré (1), Berbérati (1), Bambari (2), and Bossembélé (1). The number of the confirmed cases this year has been reviewed.									
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-2022	1-Mar-2016	11-Feb-2024	-	-	-	-
Chad is among the African countries most affected by the armed conflict in Sudan, hosting 46.7% of Sudanese refugees to date. As of 11 February 2024, a total of 6 380 new refugees have been registered in the four crisis-affected provinces in the East, bringing the total number of Sudanese refugees to 553 150 (with 54.1% located in Adré, the epicenter of the crisis) and 144 105 Chadian returnees since the start of the conflict in Sudan.									
Chad	Impact of Sudan crisis in Chad	Grade 3	15-Apr-2023	15-Apr-2023	10-May-2024	-	-	-	-
Chad is the AFRO country most affected by the armed conflict in Sudan. The country hosts about 1 million refugees impacted by the conflict in Sudan. These Sudanese refugees are mainly hosted in the refugee's camps across Ennedi Est, Wadi Fira, Ouaddai and Sila provinces. Regarding the ongoing Sudan Conflict, from 15 April 2023 to 3 May 2024, about 588 825 Sudanese refugees have been welcomed in the country including 96 181 that have crossed the border since January 2024. Most new arrivals are women and children (88%), and 14% are persons with specific needs									
Chad	Hepatitis E	Ungraded	17-Feb-2024	2-Jan-2024	28-Apr-2024	2092	36	7	0.30%
From 2 January to 28 April 2024, a total of 2 092 suspected cases including 7 deaths (CFR 0.3%) were reported from two health districts of the Ouaddai province (Adré and Hadjer-Hadid). Thirty-six (36) cases were laboratory-confirmed by RT-PCR at Institut Pasteur of Dakar between 1 and 19 March 2024. The most affected age-groups are 6-17 years (1 113 cases) and 18-59 years (500 cases), representing 53.2% and 23.9% of the suspected cases respectively. Males (1 160 cases; 55.4%) are the most affected.									

Chad	Measles	Ungraded	24-May-2018	1-Jan-2024	5-May-2024	5,631		20	0.40%
Between 1 January and 5 May 2024, a total of 5 631 suspected measles cases, including 20 deaths, have been reported in various health districts, including Moissala, Guelo, Dono Manga, Kouloudia, Arada, N'Djamena Centre, N'Djamena East, Gagal, Gore, N'Djamena North, Amtiman, Pala, Kouno, Massakory, and Koukou Angarana. Among these, 182 suspected cases were recorded in the crisis-affected eastern provinces, with no deaths reported. Fourteen health districts in these eastern provinces have reached the epidemic threshold since April 2023.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-2019	9-Sep-2019	13-Dec-2023	204	204		0.00%
One cVDPV2 case was reported this week, bringing the total number of cases this year to 45. This latest reported case had onset of paralysis on 15 September, from Salamat region of Chad, 44 cVDPV2 cases were reported in 2022, 106 cVDPV2 cases were reported in 2020 from three different outbreaks and nine others were reported in 2019.									
Comoros	Cholera	Grade 3	2-Feb-2024	2-Feb-2024	15-May-2024	6 025		114	1.90%
The first cholera case was reported in the Union of the Comoros on 2 February 2024, and subsequently, cases were reported from all three regions (Ngazidja, Mwali, and Ndzuwani), spanning across 17 health districts. As of 15 May 2024, a cumulative total of 6 025 cases were reported, with the majority of cases reported from Ndzuwani (5016 cases, 83.2%), followed by Ngazidja (545 cases, 9.1%), and Mwali (464 cases, 7.7%); 114 deaths are also reported.									
Congo	Measles	Ungraded	15-May-2024	2-Apr-2024	21-Apr-2024	42	42	0	0.00%
Since the beginning of this year, there is an ongoing measles outbreak for Congo affecting three districts of Etoumbi (25 confirmed cases: 10 laboratory confirmed and 15 epi-link), Poto-poto (five confirmed cases: one through laboratory and four cases by epidemiological link) and Impfondo (12 confirmed cases: seven through laboratory and five by epidemiological link).									
Congo	Mpox	Protracted 2	23-May-2022	1-Jan-2024	23-Apr-2024	60	19		0.00%
From 9 January to 23 April 2024, a total of 60 suspected cases were reported from nine health districts in five departments: Cuvette, Likouala, Plateaux, Pointe-Noire and Brazzaville. From 22 August to 27 November 2023, 60 suspected cases including 21 confirmed and 5 deaths (CFR 8.3%) were reported from four health districts in three departments: Brazzaville, Cuvette and Likouala.									
Congo	Poliomyelitis (cVDPV1)	Grade 2	21-Mar-2023	1-Mar-2023	13-Dec-2023	1	1	-	-
No Circulating vaccine-derived poliovirus type 1 (cVDPV1) cases were reported this week. As of 6 December 2023, only one case reported this year.									
Côte d'Ivoire	Dengue	Grade 3	10-Jul-2023	19-Jun-2023	25-Feb-2024	4,006	325	3	0.10%
An outbreak of Dengue fever is ongoing in Ivory Coast. A total of 4 006 cases have been reported from 1 January 2023 to 25 February 2024, with 325 confirmed cases and 3 deaths (CFR: 0.1 %).									
Democratic Republic of the Congo	Flood	Ungraded	9-Jan-2024	9-Jan-2024	28-Mar-2024			300	
Severe floods in the Democratic Republic of Congo have caused catastrophic impacts across multiple regions for weeks. By December 2023, the affected area had expanded to over 1.6 million hectares, with significant damage along the Congo River and in provinces such as Equateur and Kongo Central. The most impacted crops included cassava, corn, and peanuts, particularly in the Kinshasa peri-urban and central agricultural savannahs. As of 7 February 2024, 422,732 households had been affected, and 2,196,562 houses had collapsed across 17 provinces.									
Democratic Republic of the Congo	Humanitarian crisis	Grade 3	20-Dec-2016	17-Apr-2017	20-Feb-2024	-	-	-	-
In the eastern region of the Democratic Republic of Congo (DRC), particularly in North Kivu, a protracted and complex conflict persists, characterized by the presence of numerous armed groups and the Congolese Armed Forces (FARDC) and their respective allies. This situation has led to widespread instability and an unprecedented humanitarian crisis in North Kivu province. Between February 2nd and 8th, armed clashes between the FARDC and M23 rebels resulted in the displacement of approximately 150 000 people in North Kivu, including around 50% children. Most of these displaced individuals have experienced repeated displacements, particularly from collective centers in Bweremana, Kirotshu, and Shasha in the Masisi territory, and Katsiru in the Rutshuru territory. Additionally, the fighting has also triggered the displacement of around 60,000 people southward, towards Minova and Bunyakiri in South Kivu province.									
Democratic Republic of the Congo	Anthrax	Grade 2	16-Nov-2023	4-Nov-2023	3-Jan-2024	20	1	4	20.00%
A human case of anthrax was confirmed on 16 November 2023 in Lume health area, Mutwanga health zone, North Kivu Province. From 4 November 2023 to 3 January 2024, a total of 20 suspected cases including 4 deaths (CFR 20%) were reported from four health zones of the North Kivu Province: Mutwanga (7 cases, 2 deaths), Mabalako (4 cases, 1 death), Beni (5 cases), and Vuhovi (4 cases, 1 death).									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-2015	1-Jan-2024	14-Apr-2024	13,360	1,571	217	1.60%
From week 1 to week 15, 2024 (week ending 14 April), 13 360 suspected cholera cases including 217 deaths (CFR 1.6%) were reported from 13/26 provinces. North Kivu, Haut Katanga, South Kivu, and Haut Lomami are the most affected provinces, accounting for 58.5% (n=7 815), 17.1% (n=2 287), 10.2% (n=1 365), and 9.2% (n=1 230) of cases respectively. The majority of deaths (59%) have been reported from the Haut Katanga province. In 2023, more than 62 000 cases and more than 700 deaths were reported.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-2021	1-Jan-2024	17-Mar-2024	30,144	1,178	791	2.60%
In 2023, a total of 311 500 suspected measles cases and 5 799 deaths were reported. This year, from week 1 through week 11 (ending 17 March), a total of 30 144 cases, 1 178 confirmed and 791 deaths are reported so far; 18 out of 26 provinces have reported confirmed measles outbreak since the beginning of this year.									
Democratic Republic of the Congo	Mpox	Protracted 2	30-Mar-2019	1-Jan-2024	21-Apr-2024	5,768	632	332	5.80%
In 2024, cumulatively from week 1 through week 16 (ending 21 April 2024), a total of 5 768 cases, 632 confirmed and 332 deaths (CFR 5.8%) have been reported in DRC; 19 out of 26 Provinces (73%) and 143 out of 519 health zones (28%) have reported at least one suspected case of mpox in 2024. In 2023, a total of 14 626 mpox cases and 654 deaths (CFR 4.5%) were reported.									



Democratic Republic of the Congo	Plague suspected	Ungraded	26-Feb-2024	1-Jan-2024	20-Apr-2024	259		7	2.70%
Health Authorities announced an outbreak of plague since the second epidemiological week of 2024. As of week 14, a total of 259 cases and seven deaths were reported, most of cases are bubonic plague, but with a few cases of pneumonic plague. Three health districts (Rethy, Logo, Rimba) are affected in Ituri province where the disease is endemic.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV1)	Grade 2	27-Aug-2022	1-Jan-2023	15-May-2024	107	107		0.00%
As per the Global Polio Eradication Initiative (GPEI), no cVDPV1 case was reported this week. There is one case reported this year and 106 cases in 2023.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-2021	1-Jan-2023	15-May-2024	118	118		0.00%
As per the Global Polio Eradication Initiative (GPEI), no cVDPV2 cases were reported this week. The number of 2023 cases remains 118.									
Ethiopia	Flood	Grade 2	15-May-2024	1-May-2024	24-May-2024	-	-	-	
According to the Ethiopian Disaster Risk Management Commission, more than 560 000 people have been affected by the heavy rains and flooding experienced in April and early May in several districts, including Afar, Amhara, Central Ethiopia, Oromia, Sidama, Somali, South Ethiopia, Southwest Ethiopia People's, Tigray regions and Dire Dawa City Administration									
Ethiopia	Food insecurity (Horn of Africa crisis)	Grade 3	17-Feb-2022	1-Jan-2022	10-May-2024	-	-	-	-
In Tigray and northeastern Amhara, Emergency (IPC Phase 4) and Crisis (IPC Phase 3) outcomes are expected to remain widespread. In the pastoral south and southeast of the country, food security conditions are expected to improve by June. In northern pastoral areas, rainfall is expected to improve pasture availability and support improvements in livestock body conditions and milk availability. In northern Ethiopia, levels of acute malnutrition remain high and of concern, with a recent SMART survey in Wag Himra Zone of Amhara Region indicating concerning levels of acute malnutrition in the Alert to Critical range.									
Ethiopia	Humanitarian crisis (Northern Ethiopia)	Grade 3	4-Nov-2020	4-Nov-2020	9-May-2024	-	-	-	-
As of 9 May 2024, armed clashes continue to drive displacement in Amhara, Afar, and Tigray regions and impede humanitarian relief operations. In Amhara region, battles between the Ethiopian National Defense Force (ENDF) and Fano militias continues, with clashes reported in North Shewa and North Wello zones. Tensions between Tigray and Amhara regions continued to rise in contested territories along the Amhara and Tigray regional borders. In Afar region, since February 2024 renewed clashes between Afar and Somali-Issa communities in Garani and Madane sites have resulted in heavy casualties and displacement of several thousand people.									
Ethiopia	Impact of Sudan crisis in Ethiopia	Grade 3	1-May-2023	1-May-2023	10-May-2024	-	-	-	
For Ethiopia, since the outbreak of conflict in Sudan in mid-April 2023 through 5 May 2024, a total of 53 923 individuals in need of international protection crossed the border from Sudan to Ethiopia including 33 852 Sudanese refugees, 10 491 other nationalities refugees/asylum seekers and 9 580 returnees.									
Ethiopia	Cholera	Grade 3	17-Sep-2022	1-Aug-2022	17-May-2024	46,731		600	1.30%
The ongoing cholera outbreak in Ethiopia started since 27 August 2022. As of 17 May 2024, a total of 46 731 cases, 600 deaths (CFR 1.3%) are reported. %).									
Ethiopia	Dengue	Grade 3	16-May-2023	10-May-2023	18-Apr-2024	23 381	23 381	19	0.00%
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 7 April 2024, a total of 23 209 cases and 19 deaths associated deaths (CFR 0.08%) have been reported from five affected regions. 699 of the cumulative cases have been reported in 2024 only. The outbreak is currently active in one out of the 26 initially affected Woredas									
Ethiopia	Malaria	Ungraded	31-Jan-2023	1-Jan-2023	28-Apr-2024	-	-	-	
Ethiopia is still experiencing malaria outbreak. From 1 January to 28 April 2024, a total of 1 439 429 new malaria cases including 248 deaths were reported from Oromia (35%), followed by Amhara (19%), Southwest (13%), and South (10%). Number of malaria cases so far this year is higher than reported during the same period in 2023.									
Ethiopia	Measles	Ungraded	13-Apr-2017	1-Jan-2023	18-Apr-2024	61 579	61 579	503	0.80%
Since August 12, 2023, 237 Woredas across all regions in Ethiopia have been affected by the measles outbreak. The outbreak is active in 101 Woredas across the country out of the 359 Woredas affected. As of 24 March 2024, a total of 61 579 cases with 503 deaths have been reported, a Case Fatality Rate (CFR) of 0.82%. 15 536 of the cumulative cases and 112 deaths were reported in 2024 only. 4 new Cases and zero deaths were reported in the last seven days of the reporting period.									
Gabon	Diphtheria	Ungraded	23-Jan-2024	1-Dec-2023	19-Mar-2024	28	2	3	10.70%
On 23 January 2024, Cameroon reported a confirmed case of Diphtheria. The affected individual is a 9-year-old male from Bitam Health District in Gabon. The onset of symptoms occurred on 1 December 2023, and he sought medical consultation on 3 December 2023 in the Enongal health area, Ebolowa health district in Cameroon. The person died on 7 December 2023. The sample tested positive for Diphtheria on 23 January 2024. As of 19 March 2024, a total of 28 suspected cases, including 2 laboratory confirmed cases, 8 clinically compatible cases and three deaths (CFR: 10 %) were notified.									
Ghana	Measles	Ungraded	1-Apr-2024	1-Jan-2024	25-Feb-2024	1398	644		0.00%
From Week 1 to Week 8 of 2024, Ghana reported 1 398 suspected cases of measles, including 619 confirmed IgM positive cases and 25 compatible cases. Over the past four weeks, 30 health districts experienced a measles epidemic, yielding an incidence rate of 20 cases per one million inhabitants. In response to this outbreak, a measles reactive campaign is scheduled for late 2024.									
Ghana	Mpox	Protracted 2	8-Jun-2022	24-May-2022	13-Feb-2024	138	138	5	3.60%
As of week 5 of 2024, there have been 138 confirmed cases and 5 deaths(CFR 3.6%) reported from the 261 Districts.									

Guinea	Diphtheria	Grade 2	21-Aug-2023	4-Jul-2023	9-Apr-2024	4,517	4,307	105	2.30%
An outbreak of diphtheria has been reported in the Kankan region of Guinea since 4 July 2023. As of 9 April 2024, 4 517 suspected cases were reported from the Kankan, Faranah, Labé, Mamou, Conakry and N'Zérékoré regions, including 4 307 confirmed cases and 105 deaths. Of the confirmed cases, 29 were laboratory-confirmed, 4 173 were clinically compatible and 105 were epidemiologically linked. The Siguiri health district in the Kankan region is the epicenter of the outbreak, with 98.4% of suspected cases reported.									
Kenya	Flood	Grade 2	24-Apr-2024	24-Apr-2024	25-May-2024	410437		314	0.10%
Kenya is experiencing heavy rains and flash floods since mid April 2024 resulting in loss of lives, property and disruption of services. A total of 41 Counties have been affected, with major flooding occurring in Nairobi, Kiambu and Machakos Counties. More than 314 people dead, 188 injured, 21 missing, 274 410 people displaced and nearly 410 437 affected across the country. Humanitarian partners are supporting the Government-led response to scale up relief efforts for the affected population.									
Kenya	Food insecurity (Horn of Africa crisis)	Grade 3	17-Feb-2022	1-Jan-2022	10-May-2024	-	-	-	-
The key drivers of food insecurity in Kenya are high prices of staple foods, the impacts of El Niño and floods – resulting in the loss of livestock, damage to infrastructure, property, and farmland, - as well as localized resource-based and human-wildlife conflicts. During the projection period (April to June 2024), the forecasted MAM (March, April, and May) rains are expected to further improve the seasonal performance and thus improve the food security situation. Approximately, 1.2 million people (7 % of the population analyzed) are classified in IPC Phase 3 or above, including about 26 000 people classified in Phase 4 and 1.2 million in Phase 3.									
Kenya	Cholera	Grade 3	19-Oct-2022	5-Oct-2022	4-Apr-2024	12,521	577	206	1.60%
A cholera outbreak has been ongoing in Kenya since 26 October 2022. As of 4 April 2024, a total of 12 521 cases, with 577 confirmed by culture, and 206 deaths (CFR 1.7%) have been reported in 28 affected Counties.									
Kenya	Dengue	Grade 3	24-Mar-2024	21-Mar-2024		71	38	0	0.00%
The event happened in Karikoini C village, Kirinyaga Central sub county. The outbreak has been reported from Dagahaley camp in Dadaab sub county, Garissa county. A total of seventy one (71) cases with thirty eight (38) positive by RDT and five (5) positive by PCR.									
Kenya	Measles	Ungraded	29-Jun-2022	1-Jan-2023	19-May-2024	1,324	195	11	0.80%
The measles outbreak has been continuous since January 2023. Nine counties are actively reporting measles cases; Garissa, Kilifi, Mombasa, Turkana, Samburu, Wajir, Meru, Kwale, and Mandera, since early 2024. A total of 1 324 cases with 11 deaths (CFR 1.8%) have been reported.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	6-Jul-2023	26-May-2023	10-Jan-2024	13	13		0.00%
According to Global Polio Eradication Initiative, no cVDPV2 cases were reported this week. There have been eight cases reported in 2023.									
Liberia	Lassa Fever	Ungraded	3-Mar-2022	6-Jan-2022	13-Feb-2024	376	110	32	8.50%
From January 6, 2022, to week 6 of 2024, a cumulative total of 376 cases of Lassa Fever have been reported with 110 confirmed and 32 deaths (CFR 29%).									
Liberia	Measles	Ungraded	3-Feb-2022	13-Dec-2021	13-Feb-2024	13,124	12,475	95	0.70%
Since the measles outbreak started on 13 December 2021, there have been 13 124 suspected cases, 12 475 confirmed cases, and 95 deaths with CFR 0.7%, as of week 5 of 2024. Only Maryland County remains in outbreak with 433 ongoing cases.									
Liberia	Mpox	Protracted 2	21-Jul-2022	23-Jul-2022	13-Feb-2024	119	7		0.00%
Liberia confirmed its first case of Mpox on 23 July 2022, with a cumulative total of 119 suspected cases reported and 7 confirmed. The most recent case was in week 42 of 2023 in Grand Kru and Nimba counties. No new cases have been reported in 2024.									
Madagascar	Cyclone Gamane/Flood	Grade 2	26-Feb-2024	5-Feb-2024	18-Feb-2024	-	-	-	-
Since weeks 6 and 7, 2024 heavy rainfall has triggered flooding in the central and northeastern parts of Madagascar. This has resulted in population displacements and the loss of homes and infrastructure, including roads, bridges, agriculture, health facilities, water, sanitation, and hygiene infrastructure. The three regions affected by the situation are Atsinanana, Analanjiroro, and Analamanga									
Madagascar	Malnutrition crisis	Protracted 2	1-Jul-2021	1-Jan-2021	21-Mar-2024			-	-
The humanitarian situation in the Grand Sud remained fragile and is expected to deteriorate further, thus reversing the marginal gains made in 2023. Malnutrition rates are expected to reach IPC Phase 4 (Emergency) in Ikongo and Varika during the lean season. Nearly 196 500 children under the age of five may suffer from acute malnutrition from October 2023 to April 2024. Two districts will reach a critical phase, nine will be in a serious phase, and four will be on alert for acute malnutrition between February and April 2024.									
Madagascar	Malaria	Ungraded	28-Feb-2024	1-Jan-2024	28-Apr-2024	1285567		179	0.00%
Madagascar has been experiencing a malaria outbreak since last year and the same trend continues in 2024. From week 1 to week 7, 2024, a total of 1 285 567 cases and 178 deaths are reported, 72 districts are in outbreak and 26 in alert									
Malawi	Drought	Ungraded	26-Mar-2024	28-Mar-2024	28-Mar-2024	-	-	-	-
Malawi has formally declared on 23 March 2024 a state of disaster due to drought in 23 out of its 28 districts. Preliminary assessments conducted by the Malawian government suggest that approximately 44% of the country's corn crop has either failed or suffered significant damage, directly impacting 2 million households.									
Malawi	Flood	Ungraded	28-Feb-2024	27-Feb-2024	3-Mar-2024	10944		4	0.00%
Malawi experienced torrential rains since the night of 27 February to March 2024 leading to Flooding emergencies in Nkhhotakota and Karonga, affecting more than 15,000 people, 7 reported deaths and 2 missing people. Nkhhotakota district, Dwangwa town is the most affected.									
Malawi	Cholera	Grade 3	3-Mar-2022	3-Mar-2022	7-Apr-2024	59,334	59,334	1,774	3.00%
Twenty-nine districts have reported Cholera cases since March 2022 in the Machinga district. As of 7 April 2024, a cumulative total of 59 334 cases and 1 774 deaths (CFR 3.0%) have been reported since the onset of the outbreak.									

Mali	Humanitarian crisis (Sahel region)	Grade 2	11-Sep-2017	11-Sep-2017	24-Mar-2024	7,500,000	7,500,000		0.00%
Mali is facing prolonged conflict, poverty, climate shocks, and growing insecurity. However, the current Humanitarian Response Plan for Mali needs to be more funded, with only 11% of the required funding secured for the 4.1M(million) people targeted. There has been a significant increase in IDPs in the regions of Kidal (32.8%) and Ménaka (20%). As of March 2024, over 7.1M people require humanitarian assistance and as long as it persists, 2M people have access to water, 2.5M children are at risk of Acute Malnutrition, 1.6M excluded from alert/response mechanisms and 1.8M children are deprived the right education.									
Mali	Dengue	Grade 3	12-Sep-2023	1-Jan-2024	3-Mar-2024	1,627	296		0.00%
From 1 January to 3 March 2024, Mali reported 1 627 suspected cases of dengue and no deaths across 10 health districts in three regions. Of the 1 627 samples tested with a rapid diagnostic test, 296 were positive, resulting in a positivity rate of 18.2%. The attack rate at week 9 was 1.2 cases per 100 000 population.									
Mali	Measles	Ungraded	20-Feb-2018	1-Jan-2024	3-Mar-2024	123	68		0.00%
Between week 1 and week 9 of 2024, out of 123 samples tested, 68 were IgM positive for measles, representing a positivity rate of 51%. There were 53 negative results and two were indeterminate. The incidence rate at week 9 is 0.3 per 100 000 population. No deaths have been reported. In 2023, 780 suspected measles cases were laboratory tested in Mali, of which 354 were positive and 426 were negative. A total of 32 of the 75 health districts (42.7%) recorded at least one confirmed measles outbreak in 2023.									
Mali	Zika	Ungraded	7-Dec-2023	10-Dec-2023	18-Mar-2024	22	22		0.00%
On 6 December 2023, the Ministry of Health of Mali reported 12 cases and zero deaths of Zika virus disease confirmed by real time polymerase chain reaction (RT-PCR) at the Molecular and Genomic Biology Laboratory of the University Center for Clinical Research (UCRC) of Point G. Three cases were confirmed on 1 December 2023 and nine cases on 4 December 2023. As of 18 March 2024, a total of 22 confirmed cases and zero deaths were reported from 10 health districts in Koulikoro region (9), Sikasso region (1), and Bamako district (12).									
Mauritania	Influx of refugees from Mali	Ungraded	11-Mar-2024	14-Mar-2024	19-Mar-2024	180000	-	-	-%
The humanitarian situation in the Hodh Chargui region (HEC) of Mauritania is becoming critical with the massive arrival of thousands of Malian refugees fleeing insecurity and violence. It is estimated that over 180 000 refugees and returnees are registered or awaiting registration in the Bassiknou district. According to UNHCR data, over 40% are outside the formal camp system, many with livestock, putting pressure on natural resources (such as water and grazing land) and basic social services. Both displaced populations and host communities require protection, shelter, clean water, hygiene and sanitation facilities, as well as healthcare for their well-being.									
Mauritania	Measles	Ungraded	7-Mar-2023	1-Jan-2024	17-Mar-2024	1,406	170	4	0.30%
From 1 January to 17 March 2024, Mauritania reported 1 406 suspected cases of measles, of which 170 were laboratory-confirmed, resulting in four deaths. Forty-one (41) Moughataas in the 15 wilayas have reported confirmed cases of measles in 2024. The worst affected Moughataa is Bir Mogrein. Of the 38 moughataas that have crossed the epidemic threshold this year, 25 are currently experiencing an outbreak, while 13 others are in the post-epidemic phase.									
Mauritius	Dengue	Grade 3	17-Dec-2023	17-Dec-2023	14-Jan-2024	40	40	0	0.00%
From week 50, 2023 (ending 17 December 2023) to week 2, 2024 (ending 14 January 2024), the country has recorded an upsurge in dengue cases (40 confirmed cases reported). In week 2, 2024 (ending 14 January 2024), 16 laboratory confirmed cases were reported. With the recent rains that have fallen on Mauritius, this situation is expected to worsen.									
Mauritius	Leptospirosis	Ungraded	10-May-2024	1-Jan-2024	30-Apr-2024	20	20	0	
On 4 May 2024, the Ministry of Health and wellness of Mauritius notified the public of a rising incidence of leptospirosis cases in Mauritius with a total of 20 cases reported since the beginning of 2024. In April 2024, five cases were reported. Prevention and response activities are ongoing.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-2020	12-Oct-2023	21-Mar-2024	2 000 000	2 000 000	-	-
From 22 December 2022, 112 894 people have been displaced in Cabo Delgado due to NSAGs' attacks, including 91 239 farmers who abandoned their lands during harvest season. Children, women, and men comprise 62%, 23%, and 15% of the displaced. Food aid reached over 64,000 individuals, and 24,000 received shelter. By 5 March 2024, 154 children were missing, and 182 were unaccompanied. Additionally, there are 6 732 cholera cases and a conjunctivitis outbreak affecting 1 225 people, with schools disrupted.									
Mozambique	Tropical Storm Filipo	Ungraded	11-Mar-2024	14-Mar-2024	14-Mar-2024	2800	2 800	2	
As of 15 March 2024, the low-pressure system, named Filipo, delivered abundant, intense rain and strong gusts of rain as it hit multiple countries, with Mozambique the worst affected. Two people have died due to the system, and around 2 800 people have been displaced. Many structures collapsed in coastal areas due to the severe storm at sea. In the south of the country, waves exceeded 21 feet in height. Meanwhile, in Maputo, the capital, streets were flooded, and traffic was significantly impeded. In this city of more than one million inhabitants, dozens of vehicles were swept away. Rainfall was heavy, exceeding eight inches in some areas. Combined with wind speeds of more than 50 mph, it created a dangerous weather situation in a country still recovering from Freddy cyclone.									
Mozambique	Cholera	Grade 3	14-Sep-2022	12-Oct-2023	18-Apr-2024	47 561	47 561	173	-
The current cholera outbreak in the country started in Niassa province on 14 September 2022. As of 7 April 2024, 47 561 cholera cases have been recorded, with 173 deaths (CRF 0.4%) in 11 affected provinces. The outbreak is currently active in eight provinces.									
Niger	Humanitarian crisis (Sahel region)	Grade 2	1-Feb-2015	1-Feb-2015	18-Apr-2024	4,300,000	4,300,000		0.00%
Niger is contending with a severe humanitarian crisis due to regional instability in the Tillabéri, Maradi, Diffa, and Tahoua regions. The instability stems from conflicts spilling over from Mali, Burkina Faso, and Nigeria, compounded by the country's internal political turmoil following a military coup on 28 July 2023 — the third such coup in the Sahel in under three years. International sanctions, environmental challenges, deep-seated poverty, and frail social support have further strained the relief efforts. Despite these adversities, there has been a slight decrease in refugee and asylum seeker figures, although new arrivals from Chad, Mali, Burkina Faso, and Nigeria persist post-21 March 2024. Concurrently, Niger has seen the internally displaced population escalate dramatically, from 1.9 million in 2017 to 4.3 million individuals, which is 15% of the population in 2024, significantly amplifying the demand for humanitarian aid. Acute food insecurity currently afflicts 3.3 million residents, with an alarming 7.3 million more at risk of deteriorating conditions amid the ongoing turmoil.									
Niger	Dengue	Grade 3	3-Nov-2023	1-Jan-2023	24-Mar-2024	148			0.00%
A total of 148 cases of dengue fever, including zero deaths, have been reported in Niger since its onset in 2023. No new cases or deaths have been reported since the last update shared on 19th December 2023 till week 13 of 2024.									

Niger	Diphtheria	Ungraded	28-Aug-2023	4-Jul-2023	25-Feb-2024	3,536	3,536	174	4.90%
An outbreak of diphtheria has been confirmed in Matameye health district, Zinder region. The first case was reported on 17 July 2023. As of 25 February 2024, 3536 suspected cases, including 174 deaths (CFR 4.9 %) were reported. Public health response activities are ongoing in affected districts.									
Niger	Measles	Ungraded	5-Apr-2022	1-Jan-2024	10-Mar-2024	719	214	1	0.10%
As of epidemiological week 10, 2024 ( ending 10 March ), 719 suspected measles cases were reported, of which 404 were investigated across 42 districts in the eight regions. Of these cases, 53% (n=214) were laboratory-confirmed. Additionally, 58 % (n=42) of the districts reported at least one suspected case, and 13 health districts have reached the epidemic threshold since the beginning of the year.									
Niger	Meningitis	Ungraded	7-Dec-2022	1-Jan-2024	10-Mar-2024	577	281	28	4.90%
Niger continues to notify meningitis cases. From epidemiological week 1 to week 10, 2024 , a total of 577 suspected cases including 281 confirmed cases and 28 deaths (CFR 4.9%) were notified in eight regions, namely Agadez, Diffa, Dosso, Maradi, Niamey, Tahoua, Tilaberi and Zinder. Niamey and Zinder regions are the most affected.									
Nigeria	Humanitarian crisis (Sahel region)	Grade 2	10-Oct-2016	10-Oct-2016	21-Mar-2024	8,300,000	8,300,000		0.00%
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 of week 11, 2024, over 6 million people are targeted for humanitarian aid, 8.3 million people need humanitarian assistance, 2.2 million IDPs, and 4.3 million people need food security aid. Due to the fluidity of the situation, the numbers are constantly changing.									
Nigeria	Cholera	Grade 3		1-Jan-2024	24-Mar-2024	559		7	1.30%
From 1 January to 24 March 2024, there were 559 suspected cholera cases reported in Nigeria, including seven deaths (CFR: 1.3%). Reports came from 18 states, with Bayelsa State registering 356 cases (64% of all suspected cases). Other affected states include Cross River (42 cases), Bauchi (38), Abia (24), Delta (24), Nasarawa (19), Ondo (11), Katsina (9), and Osun (8), accounting for 31% of the cases this year. Suspected cholera cases and deaths have decreased by 71% and 87%, respectively, compared to the same period in 2023. The most affected age groups are children under five years, followed by those aged 5-14 years.									
Nigeria	Dengue	Grade 3	1-Nov-2023	1-Jan-2023	24-Mar-2024	72	14		0.00%
Nigeria is responding to Dengue outbreak that started in 2023. As of 3 March 2024, there has been 72 suspected cases reported with 14 confirmed and zero deaths since 19 December 2023.									
Nigeria	Diphtheria	Ungraded	1-Dec-2022	1-Jan-2024	10-Mar-2024	4,178	2,009	30	0.70%
Between weeks 1 and 10 of 2024, a total of 4 178 diphtheria cases have been reported in Nigeria, including 2 009 confirmed cases and 30 deaths.									
Nigeria	Lassa Fever	Ungraded	8-Jan-2023	1-Jan-2024	3-Mar-2024	3,272	676	109	3.30%
As of week 9 of 2024, 3914 suspected cases, including 682 laboratory-confirmed cases, were reported, with 128 reported deaths among confirmed cases, resulting in a CFR of 18.8 %. Confirmed cases, including 25 HCWs, were reported from 27 states and 117 LGAs. three out of 36 states (Edo, Ondo, and Bauchi) account for 62% of confirmed cases.									
Nigeria	Measles	Ungraded	1-Apr-2024	1-Jan-2024	24-Mar-2024	4646	2 840		0.00%
From Week 1 to Week 12 of 2024, Nigeria reported a total of 4,646 suspected cases of measles, comprising 581 confirmed IgM positive cases, 2,011 cases confirmed by epidemiological link, and 248 compatible cases. Additionally, there were 88 IgM+ cases of rubella, with 339 samples pending laboratory results. A total of 63 out of 774 Local Government Areas (8%) have reported a measles outbreak since the beginning of the year.									
Nigeria	Meningitis	Ungraded	29-Jan-2024	8-Oct-2023	10-Mar-2024	1852	135	163	8.80%
Between 1 October 2023 and 10 March 2024, a total of 1852 suspected cases including 1135 confirmed cases and 163 deaths (CFR: 8.8%) were reported from 22 out of 33 states. Of the 135 confirmed cases, 119 (82%) were caused by Neisseria meningitidis serogroup C(NmC) while 5 cases (3.7%) were caused by streptococcus pneumoniae, 10 cases (7.4 %) by Haemophilus influenzae and 1 (0.7%) by Neisseria meningitidis serogroup X (NmX). As of 10 March 2024, the outbreak remains active in six states, namely Yobe, Jigawa, Bauchi, Gombe, Katsina, and Zamfara.									
Nigeria	Mpox	Protracted 2	31-Jan-2022	1-Jan-2022	31-Dec-2023	3,771	1,086	17	0.50%
Overall, since the re-emergence of Mpox in September 2017, 3771 suspected cases have been reported from 36 States and FCTs in the country. Of these 3771 suspected cases, 1086 (28.7%) were confirmed (with males predominantly affected) from 34 States and FCT. seventeen (17) deaths have been recorded since the re-emergence in 2017.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-2018	1-Jan-2022	20-Mar-2024	139	139	-	-
No cVDPV2 case was reported this week. There were four cases reported in 2024, 87 cVDPV2 cases reported in 2023 and 48 cases in 2022.									
Nigeria	Unknown disease	Ungraded	20-Mar-2024	20-Mar-2024	22-Apr-2024	196	0	7	3.60%
On 20 March 2024, NCDC notified of the outbreak of an unknown illness through IDSR by the Sokoto State Ministry of Health. The index case presented is a 6-year-old girl from Isa LGA, who presented with symptoms including abdominal pain and distension, and vomiting on 6 February 2024. Cumulatively, from weeks 6 to week 15, a total of 196 cases with 7 deaths (CFR 3.6%) were reported. 70% are aged 0 – 10 years, followed by 11 – 20 years (20%), >30 years (6%), and 21 – 30 years (4%). 55.1% of the cases are female. Cases initially reported from Isa LGA, Sokoto State, with reports extending to Sabon Birni LGA (7 cases) in Sokoto State									
Senegal	Chikungunya	Ungraded	8-Jun-2023	1-Jan-2024	17-Mar-2024	6	6		0.00%
From 1 January to 17 March 2024, six confirmed cases of Chikungunya were reported from the regions of Dakar (1), Kolda (1), Matam (2), and Tambacounda (2) in Senegal. In 2023, the total number of confirmed cases was 344.									
Senegal	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	26-Mar-2024	22-Mar-2024	26-Apr-2024	3	3	0	0.00%
On 22 March 2024, the Institut Pasteur in Dakar (IPD) confirmed a case of Crimean-Congo Haemorrhagic fever (CCHF) in a 25-year-old male farmer. The patient, originally from the Guinguinéo district, probably contracted the disease while working in the Ndoffane district. Investigations are ongoing in all the areas visited by the patient. So far 11 samples collected from contacts at the Dakar hospital have tested negative. On 26 April 2024, WHO was informed of the confirmation of two additional CCHF cases in a 40-year-old male and a 25-year-old male from Pikine and Yeumbeul districts of Dakar respectively. Blood samples collected from the two male cases on 17 and 19 April 2024 respectively returned positive for CCHF on PCR on 25 April 2024. PCR testing returned negative for yellow fever, dengue, RVF, west nile, chikungunya, and zika. Both cases are alive. In-depth investigations are ongoing.									



Senegal	Dengue	Grade 3	14-Nov-2022	31-Jan-2023	12-May-2024	23	23		0.00%
As of 12 May 2024, Senegal has reported a total of 23 confirmed dengue cases. The cases, ranging in age from 15 to 62 years with a median age of 32 years, include nine females and 14 males. The majority of cases have been reported in the Dakar region (15 cases, 65%), followed by Louga (4 cases, 17%), Saint-Louis (2 cases, 9%), Matam (1 case, 4%), and Thies (1 case, 4%). The first case was recorded on 1 January 2024, in Guediawaye, and the most recent case was on 4 March 2024, in Dakar-Ouest.									
Senegal	Measles	Ungraded	4-Jul-2022	1-Jan-2024	17-Mar-2024	150	150		0.00%
Depuis le début de l'année jusqu'au 17 mars 2024, 150 cas confirmés de rougeole ont été rapportés dans 11 régions du Sénégal. Les régions les plus touchées étant les régions de Louge (46), Matam (26), Kaffrine (23), Diourbel (16), Kaka (13), Saint-Louis (13).									
South Africa	Cholera	Grade 3	20-Jan-2024	20-Jan-2024	18-Apr-2024	155	12	0	0.00%
The cholera outbreak has been ongoing in South Africa since December 4, 2023. It started with imported cases linked to ongoing outbreaks in Southern Africa and two locally transmitted cases from Limpopo in January. As of 4 April 2024, 12 confirmed cases with no deaths have been reported. Limpopo province is most affected with 10 of the cases. Three of the cases were imported from Zimbabwe.									
South Africa	Mpox	Protracted 2	15-May-2024	15-May-2024	25-May-2024	2	2	0	0.00%
Through IHR notification from South Africa, WHO has received a report of one laboratory confirmed mpox case from Johannesburg. This case was confirmed after initial testing by Lancet Laboratory on 9 May 2024. A second case with no history of travel was reported from Durban on 25 May 2024.									
South Sudan	Food insecurity (Horn of Africa crisis)	Grade 3	18-Dec-2020	5-Apr-2021	10-May-2024	-	-	-	-
According to the latest Integrated Food Security Phase Classification (IPC) analysis, about 7.1 million people (56 % of the total population) are estimated to face IPC Phase 3 (Crisis) or worse levels of acute food insecurity during the lean season between April and July 2024. The highest prevalence of severe acute food insecurity, ranging between 65 and 75 %, is reported in the states of Unity, Upper Nile and Jonglei, in Pibor Administrative Area and among returnees from the conflict-affected Sudan. The main drivers of the dire food security situation are protracted macroeconomic challenges resulting in high inflation, insufficient food supplies, the lingering impact of consecutive years with widespread floods and episodes of intercommunal violence									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-2016	15-Aug-2016	10-May-2024	-	-	-	-
The humanitarian situation in South Sudan remains concerning with increasing needs and number of people requiring assistance. The influx of refugees and returnees due to Sudan crisis still ongoing with about 658 021 arrivals from Sudan since April 2023, mostly returnees. In April 2024, humanitarian partners called on the Government for the urgent removal of recently imposed taxes and charges as more than 60 000 people have already been affected after the United Nations was forced to pause life-saving airdrops of food assistance as fuel runs low. This number will increase to 145 000 by the end of May, should the measures remain in place.									
South Sudan	Impact of Sudan crisis in South Sudan	Grade 3	15-Apr-2023	1-May-2023	10-May-2024	-	-	-	-
In South Sudan, as of 5 May 2024, a total of 658 021 individuals have arrived from Sudan due to the ongoing conflict, of which 518 348 are returnees, 136 356 Sudanese refugees and 3 317 other nationalities refugees. These individuals have entered South Sudan via Abyei Administrative area, Northern Bahr al Ghazal, Unity, Upper Nile and Western Bahr al Ghazal									
South Sudan	Hepatitis E	Ungraded	3-Jan-2018	1-Jan-2019	3-Apr-2024	4,253	63	12	0.30%
As of 24 March 2024, Hepatitis E outbreak was ongoing in South Sudan. On 04 March 2024, Warrap State government in South Sudan officially declared an outbreak of hepatitis E in Twic County, prompted by a 3-year-old girl's positive test result, marking a significant public health concern in the region. This alarming declaration came after 2 individuals exhibited symptoms consistent with hepatitis E and one positive case was confirmed in Juba after laboratory tests. PH prevention measures are underway									
South Sudan	Measles	Ungraded	23-Feb-2022	1-Jan-2023	24-Mar-2024	429	116	4	0.90%
As of Epi week 9, 2024, a total of 429 suspected measles cases were reported, with 116(27%) lab-confirmed, four deaths, and a case fatality rate of 0.9%. However, there were five (5) ongoing outbreaks in Ibba, Juba, Yei, Rumbek Centre, and Tonj East, respectively. Suspected/confirmed cases in Abiemnhom, Aweil Centre, Aweil South, Aweil West, Baliet, Mundri West, Pibor, Tambura, Terekeka, Torit, and Maridi continue to be reported in February. These cases have not reached the outbreak threshold and require more samples to be collected for testing in accordance with the revised SOP.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-2024	1-Jan-2024	15-May-2024	4	4	0	0.00%
According to the Global Polio Eradication Initiative (GPEI), no cVDPV2 cases were reported this week. There are four cases reported this year and three cases reported last year.									
South Sudan	Yellow fever	Ungraded	24-Dec-2023	24-Dec-2023	28-Apr-2024	120	3	6	5.00%
Yellow fever outbreak is still ongoing in South Sudan since it was officially declared by the health authorities on 6 January 2024. As of 28 April 2024, a total of 120 yellow fever cases (117 suspected and 3 confirmed) were reported from seven counties in Western Equatoria state: Yambio (64), Tambura (26), Nzara (11), Ezo (11), Ibba (3), Maridi (3) and Mvolo (2) Counties. About six suspected deaths have been also reported.									
Tanzania, United Republic of	Flood	Grade 2	24-Apr-2024	24-Apr-2024	9-May-2024	-	-	-	-
Since November 2023, Tanzania has been experiencing heavy rains caused by an intense El Niño and Indian Ocean dipole system. The rains have continued into 2024, subsequently, severe floods and mudslides have occurred in several regions in April, including the devastating Rufiji and Kibiti floods in Pwani region. Other affected regions include Morogoro, Kilimanjaro, Arusha, Katavi, Kigoma, and Mara. On 25 April, the Prime Minister announced that the rains and floods since January had left 155 dead and 236 injured and affected 200 000 people and 51000 households.									
Tanzania, United Republic of	Cholera	Grade 3	3-Oct-2023	7-Sep-2023	24-Mar-2024	2 549	2 549	46	1.80%
As of 15 March 2024, since 5th September 2023 cholera outbreaks have been , seported in 18 regions (Mara, Arusha, Kilimanjaro, Kigoma, Kagera, Singida, Simiyu, Shinyanga, Tabora, Ruvuma, Mwanza, Geita, Rukwa, Dodoma, Manyara, Morogoro, Katavi and Dar es Salaam) in Tanzania Mainland, where a total of 2,549 cases and 46 deaths (CFR 1.8%) reported. Out of 18 regions, a Cholera outbreak was declared over in 6 regions (Geita, Mara, Arusha, Kilimanjaro, Ruvuma and Tabora).									
Togo	Measles	Ungraded	14-Mar-2024	14-Mar-2024	14-Mar-2024	133		0	0.00%
The Ministry of Health and Public Hygiene in Togo officially released a communication on 08 March informing the public about the notification of measles cases in the country, particularly in the districts of Kéran and Oti Sud, which have entered into an epidemic phase. Indeed, since the beginning of the year up to epidemiological week 9, the country has recorded a total of 133 confirmed cases of measles.									

Uganda	Food insecurity (Horn of Africa crisis)	Grade 3	17-Feb-2022	1-Jan-2022	10-May-2024	-	-	-	-
In Uganda, erratic first season rains likely to delay harvests, threaten crop production prospects. In bimodal areas, rainfall in April has been spatially and temporally erratic, with periodic heavy rains resulting in localized flooding interspersed with short dry spells. Minimal (IPC Phase 1) outcomes will be sustained by seasonal access to income and carryover stocks from 2023, followed by first season harvests beginning in June. In unimodal Karamoja, above-average rainfall in April is generally supporting a normal start to seasonal cultivation activities. While the sustained impacts of the multi-season drought, including low coping capacity and limited household assets, continue to result in widespread area-level Crisis (IPC Phase 3) outcomes, an increasing number of households will improve to Stressed (IPC Phase 2) through September.									
Uganda	Cholera	Grade 3	13-May-2024	11-May-2024	11-May-2024	40	2	2	5.00%
On 26 April 2024, the Kyotera District Surveillance Focal Person (DSFP) received reports of death of an adult male resident of Kasensero Town Council, and increased cases of Acute Watery Diarrhea in the community. On 8 May 2024, a team of epidemiologists from the Ministry of Health and other technical officers joined the District Rapid Response Team to investigate the outbreak. As of 11 May 2024, the cumulative number is 40 cases including two confirmed and 38 suspected (including two deaths of probable cases).									
Uganda	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	12-Feb-2024	28-Jan-2024	28-Apr-2024	7	5	3	42.90%
As of 28 April 2024, the Crimean-Congo Haemorrhagic fever (CCHF) outbreak is still active in Kiruhura district with one confirmed case reported. The outbreak was controlled in Lyantonde and Kyankwanzi districts.									
Uganda	Measles	Ungraded	4-Oct-2023	1-Jan-2024	28-Apr-2024	817	66	9	1.10%
As of 28 April, the measles outbreak is ongoing in the following districts: Kukumiro (72 cases, six confirmed and two deaths), Kamwenge ( six cases, four confirmed ) , Terego ( seven cases, four confirmed ) , Kikuube ( five confirmed cases). A total of 90 measles cases (19 confirmed) and two deaths (CFR 2.2%) are reported. The outbreak in Kasese, Amuru, Kassanda, Hoima, Obongi, Maracha, Koboko, Yumbe, Arua, Mbale has been contained. From January to 28 April , a total of 817 cases ( 66 confirmed cases ) and nine deaths were reported									
Zambia	Drought/food insecurity	Ungraded	8-Mar-2024	15-Jan-2024	29-Feb-2024	-	-	-	-
On 29 February 2024, the Zambia President declared the drought the country is currently facing a national disaster and emergency as it had devastated food production and power generation and the country struggles to recover a recent cholera outbreak. The lack of rain has devastated the agricultural sector, affecting more than one million families. The dry spell has from mid-January this year affected most of the central and southern half of the country, which has received less than normal rainfall leaving one million hectares of maize destroyed, almost half of the country's maize cultivation. It is also projected that the drought will lead to a power deficit and affect ground and surface water levels, with severe consequences for sectors beyond agriculture since more than 80 % of Zambia electricity generation comes from hydropower.									
Zambia	Cholera	Grade 3	24-Jan-2023	20-Jan-2023	6-May-2024	23,221	233,221	740	3.20%
The current cholera outbreak started with Lusaka Province confirming cases in the cholera-prone areas (peri-urban). From October 2023 to 6 May, 2024, nine provinces have reported cases of cholera with seven provinces confirming cholera outbreaks. A total of 40 districts have confirmed local transmission. Cumulative cases stand at 23 221 with 740 deaths (CFR 3.2%).									
Zambia	Measles	Ungraded	13-Jun-2022	13-Jun-2022	21-May-2024	3,254	121	-	0.00%
As of week 19, in 2024, Zambia has recorded 53 new suspected measles cases, a cumulative total of 3,254. Most cases are concentrated in Luapula (1241), Northern (1057), Central (374), and Northwestern (265) Provinces, with Western (8) and Southern (9) Provinces reporting the least.									
Zimbabwe	Drought/food insecurity	Ungraded	5-Apr-2024	5-Apr-2024	5-Apr-2024	-	-	-	-
On 3 April 2024, Zimbabwe authorities declared state of disaster over a devastating drought that's sweeping across much of southern Africa due to El Nino phenomenon. it needs \$ two billion for humanitarian assistance. Due to the El Niño-induced drought more than 80% of country received below normal rainfall.									
Zimbabwe	Anthrax	Grade 2	13-Nov-2023	14-Nov-2023	5-May-2024	784	-	1	0.10%
As of 5 May 2024, there have been a total of 784 cases reported in Zimbabwe. Ten districts have reported cases since beginning of 2023 with the majority of cases coming from Gokwe North (63.5%) and Gokwe South (32.6%). The confirmed death was reported in 2023, from Gokwe South.									
Zimbabwe	Cholera	Grade 3	12-Feb-2023	12-Feb-2023	26-May-2024	34,276	3,964	715	2.10%
The first cholera outbreak in the country in 2023 started on the 12 February 2023. Cumulatively there were 34 276 cholera cases with 715 deaths (CFR 2.0%) as of 26 May 2024. The outbreak has now spread to more than the 17 traditional cholera hotspot districts.									
<b>Closed Events</b>									
Eswatini	Tropical Storm Filipo	Ungraded	11-Mar-2024	14-Mar-2024	21-May-2024	638	638	0	0.00%
As of 14 March, heavy rain and strong winds caused by Cyclone Filipo affected the eastern Lubombo region of Eswatini. Member State reported event to have been contained, hence event closed.									
Kenya	Rift Valley fever (RVF)	Ungraded	24-Jan-2024	25-Jan-2024	24-May-2024	145	7	0	0.00%
The ongoing Rift valley fever (RVF) outbreak has been confirmed in two counties : Marsabit and Wajir counties. A total of 145 suspected cases with seven confirmed human cases have been reported. Marsabit has reported 82 suspected cases with five confirmed by RT-PCR, while Wajir reported 63 suspected cases with two confirmed by RT-PCR. The number of confirmed cases has been reviewed from 12 to seven. As of 24 May 2024, no more updates received on this event and the event is closed. The total number of cases reported remains 145 including seven confirmed cases. No death reported.									
Namibia	Suspected food poisoning	Ungraded	27-Feb-2024	26-Feb-2024	27-Feb-2024	10	10	2	20.00%
On 26 February 2024, suspected food poisoning was reported from Livayi village in Nyangana district of Kavango East region where ten people from four households presented with vomiting, abdominal pain, convulsions and fitting after consuming a meal made of maize porridge, fresh traditional vegetable (mutate) and soup. Two deaths were recorded. The situation has been contained in the country, hence closure of the event.									

†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.

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### 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.