

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 23 : 30 May - 5 June 2022
Data as reported by: 17:00; 5 June 2022

3

New events

151

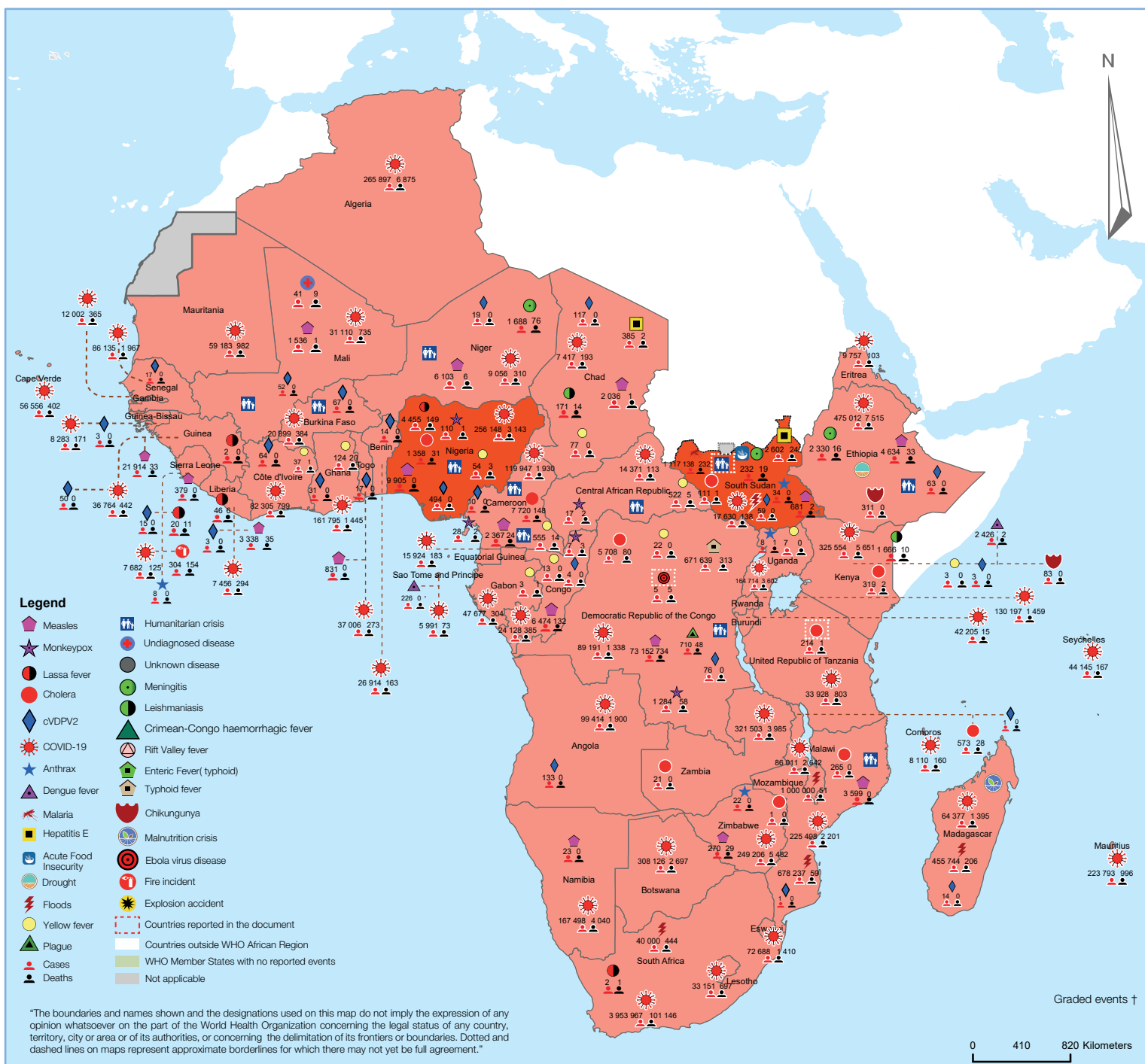
Ongoing events

134

Outbreaks

20

Humanitarian
crises



4

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Overview

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This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 154 events in the region. This week's articles cover:

- [Humanitarian crisis in South Sudan](#)
- [Ebola Virus Disease in the Democratic Republic of the Congo](#)
- [COVID-19 in the WHO African Region](#)
- [Cholera in Kenya](#)

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

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

Major issues and challenges include:

- The humanitarian crisis in South Sudan continues to unfold with a grim outlook projected for the coming months. With more than two million people internally displaced and an estimated 8.9 million in need of humanitarian assistance, exacerbation of the crisis due to anticipated floods, worsening food insecurity, inter-communal violence, and infectious disease outbreaks could plunge the country on the brink of disaster. The limited and overstretched resources available to address the crisis raises concern, thus highlighting the urgency for humanitarian partners and actors to mobilize additional funding to mount an effective response to the situation.
- The Ebola virus disease outbreak in the Democratic Republic of the Congo continues with health workers racing against time to prevent new flare-ups and further transmission of the disease. No new cases have been reported over the past 17 days, but this comes amidst strike actions staged by local health workers resulting to suboptimal surveillance and response activities. The coming weeks will be crucial to bring to an end this outbreak through enhanced surveillance and response, therefore, resolution of the strike actions must be given utmost priority. Renewed efforts are required to address community resistance and increase vaccination uptake particularly among close contacts.

Ongoing events

Humanitarian Crisis

South Sudan

EVENT DESCRIPTION

The situation in South Sudan remains dire, with more than two million people internally displaced and an estimated 8.9 million people requiring humanitarian assistance due to floods, food insecurity, and conflict.

The country is still reeling from its 2021 floods, the worst since 1960, with floodwaters not having fully receded. The floods caused more than 800 000 people to be internally displaced, leading to new internally displaced persons (IDP) camps and spontaneous informal settlements on higher ground areas. The most affected states were Jonglei, Upper Nile and Unity states.

The Camp Coordination and Camp Management (CCCM) Cluster in South Sudan estimated that as of March 2022, 190 000 people were still living in six formal Protection of Civilian (PoC) camps, and another 900 000 were estimated to be in spontaneous sites or informal settlements. With the advent of the current rainy season amidst the presence of flood waters from the previous year, population displacements to higher ground areas will likely continue placing further strain on the inadequate infrastructure available, including access to clean water and sanitation.

Food insecurity in the country continues to worsen, driven largely by climatic shock (floods, dry spells, and droughts), conflict, disease outbreaks, pests, and the cumulative effects of prolonged years of asset depletion that continue to erode households' coping capacities, and the loss of livelihoods. Malnutrition levels have risen, with an estimated 1.4 million under-five children suffering from acute malnutrition.

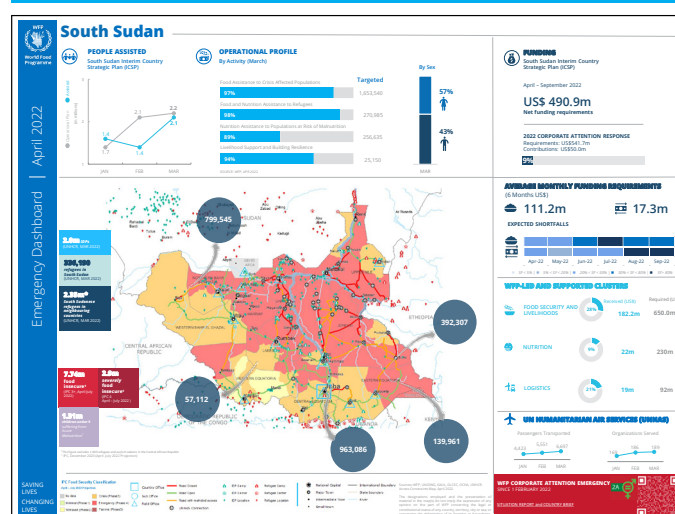
Projections showed that 7.74 million people are expected to experience high acute food insecurity in the second quarter of 2022 (April to July), a 13.3% increase over the previous quarter. Of these, Fangak, Canal/Pigi, Ayod, Pibor, Cueibet, Rumbek North, Leer, and Mayendit counties are expected to be the worst affected and will experience the highest level of food insecurity, phase 5, which indicates extreme levels of famine and starvation. Close to half of all counties in the country are projected to experience phase 4, the emergency phase of food insecurity, that reflects very high acute malnutrition and excess mortality.

The country is also facing multiple concurrent infectious disease outbreaks, including meningitis, measles, anthrax, hepatitis E, COVID-19, and cholera, which has overstretched its national response capacity. The recently announced 24% reduction in funding for primary health care will further constrain access to essential health care in the country, thus denting the health system's resilience, constraining surveillance, and limiting response capacities to outbreaks.

PUBLIC HEALTH ACTIONS

- The Ministry of Health is coordinating the response to the current disease outbreaks.

A snapshot of emergency dashboard in South Sudan, as of April 2022.



- The national emergency preparedness and response technical working group is coordinating the implementation of Integrated Disease Surveillance and Response (IDSR) and Early Warning Alert and Response Network (EWARN) for timely detection of alerts from health facilities and IDP camps with support from humanitarian partners.
- Measles and cholera vaccination campaigns have been planned for implementation in targeted areas.
- The United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) has released US\$19 million to support communities prepare for severe flooding expected during the rainy season in Bentiu IDP and surrounding areas in Unity State. The fund is expected to be used for reinforcing dikes around vital access roads, displaced people's homes, the airstrip, the protection of latrines and water wells from flood waters, among others.
- The World Food Programme has reprioritized its operational plan for the distribution of food and other supplies according to the food insecurity risk levels, with those classified in the phase 5 category given the highest priority.

SITUATION INTERPRETATION

South Sudan's humanitarian crisis remains unabated, and complex characterized by the armed conflict, natural disasters, food insecurity and infectious disease outbreaks all having their toll on the population. The outlook for the coming months looks dire and the need to rapidly mobilize additional resources to mitigate the impact cannot be overemphasized. Humanitarian partners and actors must weigh in to breach the funding gap to strengthen the response efforts on the ground.

EVENT DESCRIPTION

Since last reported on 19 May 2022, 17 days have passed without reports of a new case of Ebola virus disease (EVD) in the Democratic Republic of the Congo. As of 5 June 2022, a total of five cases (four confirmed and one probable) have been recorded, all of whom have died. Equateur remains the only affected province of the country, with two affected health zones (Mbandaka and Wangata) and three affected health areas (Libiki, Mama Balako and Motema Pembe).

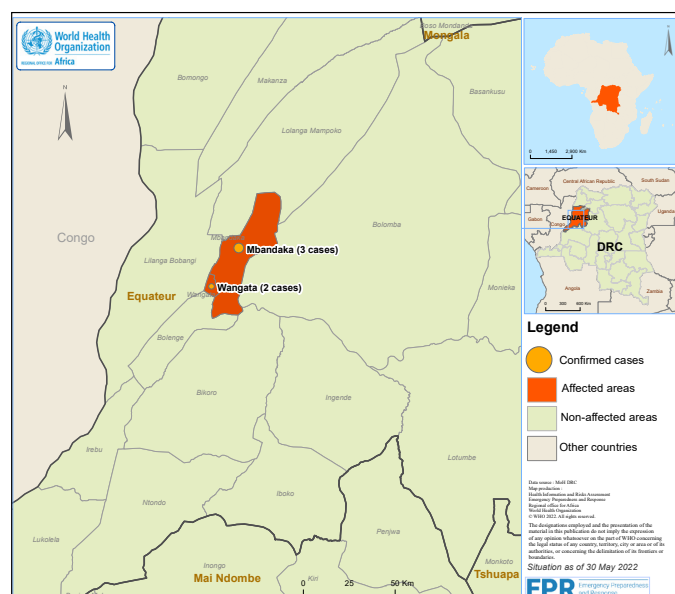
Surveillance activities, including investigation of alerts, contact tracing, and testing of suspected cases, continue to be performed, although at sub-optimal levels due to strike actions from health workers. In total, 1 076 contacts have been identified and listed since the onset of the outbreak, with 418 still under 21 days of follow-up. As of 5 June 2022, 611 samples have been tested since the onset of the outbreak. Four were confirmed positive for Ebola virus disease.

Source of the outbreak remains elusive, and investigators continue to search for additional information, including identifying exposure history of cases and contacts. Earlier analysis from genomic sequencing indicated that the current outbreak represents a new spillover event from the host reservoir of the Ebola virus and is not directly linked to previous outbreaks of the disease.

PUBLIC HEALTH ACTIONS

- Response activities at the field level continue to be coordinated by the Provincial Health Division with technical and operational support from the national Ministry of Health, WHO, and other partners.
- Albeit the strike actions from health workers, some public health response activities are ongoing.
- In the past week, 87 175 travelers were registered and screened for EVD at points of entry. In total, 418 516 (92.7%) of 451 641 travelers registered at the points of entry since the onset of the outbreak have been screened for EVD. Of these, 110 were suspected of EVD and tested. None were positive.
- A total of 418 contacts remains under follow-up, with 381 (91.1%) seen on 5 June 2022.
- Forty-four new persons (four contacts and 40 contacts-of-contacts) were vaccinated in the past week. As of 5 June 2022, 1 564 persons in the affected health zones have been vaccinated against EVD using the ring strategy targeting contacts and contacts-of-contacts. A total of 300 are contacts and 1 264 are contacts-of-contacts. There are 787 frontline health workers among those vaccinated.
- Fifty-three new samples were tested for EVD in the past week bringing to a total 611 analyze by the laboratory as of 5 June 2022. A total of 217 GeneXpert cartridges remain in stock across the country, with 36 available at the laboratory in Mbandaka City.

Location of confirmed cases of Ebola virus disease in Equateur Province, Democratic Republic of the Congo, as of 4 June 2022



- Other activities are also ongoing, including IPC interventions in health care facilities and the community, psycho-social support and RCCE actions to boost contact tracing and vaccination activities.

SITUATION INTERPRETATION

The report of no new cases of EVD in the Equateur Province for the past 17 days is encouraging, however, caution needs to be exercised as strike actions from local health workers have hampered optimal surveillance and response activities. Amidst community resistance and low vaccination coverage among close contacts, the potential for flare-ups cannot be ruled out.

Resolution of the current strike actions staged by local health workers must be prioritized to enhance surveillance for timely detection of any new cases and put the response efforts back on course.

EVENT DESCRIPTION

COVID-19 cases decreased in the African region for the third week following four consecutive weeks of increasing trend. In the past week (week ending 5 June 2022), a total of 24 422 new cases were reported compared to 32 697 in the preceding week (week ending 29 May 2022), marking a 25% week-on-week decrease. The majority of new cases (82%, $n = 20\,112$) were reported from South Africa (14 238), Ethiopia (2 666), Zimbabwe (1 305), Tanzania (1 060), and Namibia (843).

COVID-19 associated deaths increased modestly by 4% over the past week in the African region with a total of 241 new deaths reported compared to 232 in the preceding week. The majority of new deaths (96%, $n = 231$) were reported from six countries, namely South Africa (171), Tanzania (37), Zimbabwe (12), Nigeria (5), Eswatini (3), and Zambia (3).

Cumulatively, 8.5 million cases with 171 947 deaths (case fatality ratio 2.0%) have been recorded in the WHO African region since the onset of the pandemic. The WHO African region, which includes Sub-Saharan Africa and Algeria, accounts for 72.0% and 67.6% of the African continent's cumulative 11.9 million cases and 254 326 deaths respectively reported since the onset of the pandemic.

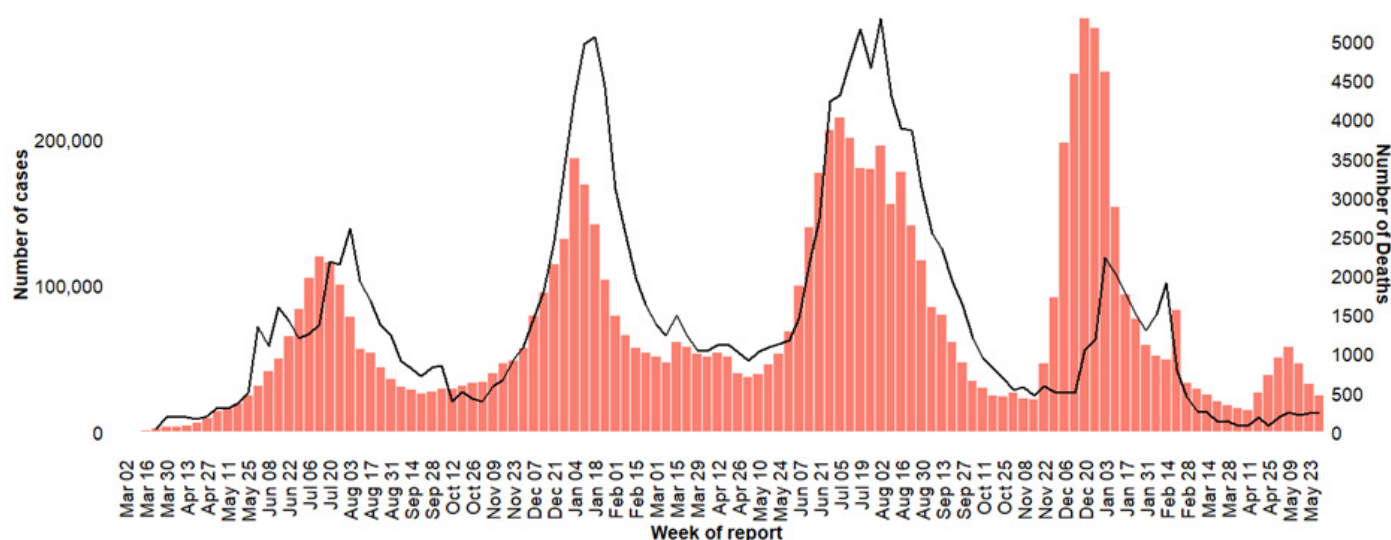
No country in the African region is currently experiencing a resurgence of the COVID-19 pandemic, however, five countries – Ethiopia, Mauritius, Namibia, Seychelles, and Zimbabwe – are being closely monitored due to either high incidence or recent uptick in new cases.

The SARS-CoV-2 Omicron variant remains dominant during this fifth wave of the pandemic in the African region, with the highly transmissible BA.4 and BA.5 sub-lineages detected largely among new cases.

SITUATION INTERPRETATION

The declining trend of cases in South Africa, the country with the largest burden of COVID-19 in the region, has largely influenced the regional trajectory. However, some countries are still experiencing a high incidence or slight uptick in new cases. The risk for new or emerging variants of the SARS-CoV-2 virus remains, and WHO continue to advise all countries to enhance pandemic response measures, including early warning surveillance, risk communication and community engagement, and vaccination of vulnerable populations.

Trends of confirmed COVID-19 cases and deaths in the WHO African Region by week of report, 25 February 2020 – 05 June 2022 ($n = 8\,575\,143$)



EVENT DESCRIPTION

The outbreak of cholera in Kenya continues to evolve with increasing trend and geographic spread since it was first detected in early May 2022 in Kisumu County and announced by the health authorities. In epidemiological week 20 (week ending 22 May 2022), 312 new cases were reported from three counties – Nairobi, Kisumu, and Kiambu – across the country. This represents a dramatic increase from four cases reported in the previous week 19 (week ending 15 May 2022).

As of 31 May 2022, a total of 319 cases with two deaths (CFR 0.6%) have been reported from three affected counties: Nairobi, Kisumu, and Kiambu. *Vibrio cholerae* has been isolated from two samples culture at the laboratory in Nairobi. Kisumu County is at the epi-centre of the outbreak with 97.5% (n=311) of the reported cases. Nairobi County has reported seven cases with two deaths (CFR 28.6%) and Kiambu county has one case with zero deaths.

In Nairobi, cases have been reported from five sub-counties out of the 17 for the city: Mathare, Starehe, Kamukunji, Westlands and Roy Sambu. The two deaths were reported from Mathare and Kamukunji. Among the seven cases reported in Nairobi, two were confirmed by culture and the outbreak is still active in all the affected sub-counties.

- Risk communication activities are ongoing with awareness on cholera prevention messages for the community to adhere to simple hygienic measures such as hand washing and sanitizing.
- Active case search, contacts tracing and case management are ongoing as well as logistics and cholera supplies provided to the affected sub-counties.

SITUATION INTERPRETATION

Kenya joins the list of three other countries, South Sudan, Tanzania, and Somalia, in the East African sub-region that are experiencing ongoing outbreaks of cholera. No epidemiological linkage has yet been established between the ongoing cholera outbreak in Kenya and its neighbouring countries. However, the sub-regional context calls for enhanced collaboration across the affected countries to prevent transborder transmissions resulting from mass population movements across national borders. Measures such as regular hand washing, which were instituted as a result of the COVID-19 pandemic may have helped to reduce the spread of cholera. However, as compliance to these measures dwindle, there is likelihood of resurgence of cholera outbreaks. Health authorities need to strengthen response efforts, including enhanced risk communication, to quickly control this outbreak.

PUBLIC HEALTH ACTIONS

- National response team has been deployed to the affected counties to support local responses teams in implementing response activities.



The rush to deliver cholera vaccines

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									
Democratic Republic of the Congo	Suspected Meningitis	Ungraded	31-May-22	31-May-22	31-May-22	26		14	53,80%
Local health authorities were alerted on 25 May 2022 of four successive deaths with features typical of meningitis involving two males and females from Gombari Health Zone, Haut Uele Province, the Democratic Republic of the Congo. An investigation launched by local health authorities has identified a total of 26 cases with 14 deaths (CFR 53.8%) as of 31 May 2022. Gram-negative coccobacilli, suggestive of Haemophilus Influenza, were isolated from cerebrospinal fluid (CSF) samples obtained from three of the cases. Further analyses are ongoing at the National Reference Laboratory in Kinshasa (INRB-Kinshasa).									
Kenya	Cholera	Ungraded	30-May-22	3-May-22	31-May-22	319	2	2	0,60%
see article above									
Namibia	Measles	Ungraded	2-Jun-22	4-Apr-22	16-May-22	23	5	0	0,00%
On 2 June 2022, the Ministry of Health and Social Services of Namibia notified WHO about a confirmed outbreak of measles in Outapi district, Omusati region, on the border with Angola. Of 23 suspected cases reported, five were laboratory-confirmed. All cases have been identified among children between five months and 12-years-old.									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	5-Jun-22	265 897	265 897	6 875	2,60%
Ethiopia is experiencing a prolonged drought after three consecutive failed rainy seasons since late 2020 affecting nearly 8 million people living in Oromia, SNNP (Southern Nations, Nationalities, and Peoples), Southwest and Somali: several areas in southern and southeastern Ethiopia, including in the regions of Somali (10 zones), Oromia (8 zones), Southwest (1 zone) and SNNP (7 zones). More than 286,000 people have been displaced in search of water, pasture or assistance, fleeing their homes to survive as crops, livestock and livelihoods are wiped out. The number of livestock deaths has reached a staggering 1.46 million (67% in Somali, 31% in Oromia, and 7% in Southwest and SNNP regions) and is still increasing.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	8-May-22	99 414	99 414	1 900	1,90%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 8 May 2022, a total of 99 414 confirmed COVID-19 cases have been reported in the country with 1 900 deaths and 97 441 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	24-Apr-22	133	133	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were 3 cases reported in 2020. The total number of cases reported in 2019 remains 138. These cases are from several outbreaks which occurred in 2019.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	29-May-22	26 914	26 914	163	0,60%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 29 May 2022, a total of 26 914 cases have been reported in the country with 163 deaths and 26 558 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	24-Apr-22	14	14	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Three cases were reported in 2021 and 2020, and 8 in 2019. These cases are all linked to the Jigawa outbreak in Nigeria.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	2-Jun-22	308 126	308 126	2 697	0,90%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 2 June 2022, a total of 308 126 confirmed COVID-19 cases were reported in the country including 2 697 deaths and 303 845 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	18-May-22	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated as a result of attacks by armed groups. This has resulted in a current mass displacement of 1 850 293 internally displaced persons as of 30 April 2022. There have been IDPs from all 13 regions, however, the majority have come from Centre-Nord (35.9%) and Sahel (31.7%) regions. Armed group attacks in Oudalan (Sahel) and Kompienga (Est) province on 14 May 2022 killed at least 43 people including at least 27 civilians. In April 2022, there were an increased use of improvised explosive devices (IEDs) along the main access routes in North centre and the encirclement of Djibo, the second largest city in the Sahel region. According to OCHA, 3.5 million Burkinabe will need humanitarian aid in 2022, including 2.6 million severely food insecure during the 2022 lean season, with over 436 000 in the pre-famine phase. Access to health services remain a challenge for the population in affected areas. There is a total of 179 non functional health facilities and 353 facilities that function at a minimum level of their capacity.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	1-May-22	20 899	20 899	384	1,80%
Between 9 March 2020 and 1 May 2022, a total of 20 899 confirmed cases of COVID-19 with 384 deaths and 20 497 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	1-Jun-22	67	67	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 were reported this week. There were two cases reported in 2021, and 65 in 2020. The country is affected by different outbreaks, one linked to the Jigawa outbreak in Nigeria and one to the Savanes outbreak in Togo.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	4-Jun-22	42 205	42 205	15	0,00%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 4 June 2022, the total number of confirmed COVID-19 cases is 42 205, including 15 deaths and 42 072 recovered.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	11-May-22	-	-	-	-
According to UNHCR and OCHA reports, an estimated 1 942 054 people need assistance, 357 631 people are internally displaced and 135 257 people are returnees, as of 30 April 2022.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	11-May-22	-	-	-	-
According to UNHCR reports, an estimated 579 136 Internally Displaced People (IDPs) have been registered as of 30 April 2022. Targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers are still being reported. Schools resumed session, but teachers and students are still facing attacks. There has been an increase in the use of improvised explosive devices (IEDs), carjacking, and clashes between security forces and NSAGs, leading to civilian population displacement. In addition, there are 478 066 refugees, of whom nearly 345 622 (72.3%) arrived from Central African Republic.									
Cameroon	Cholera	Grade 2	1-Jan-21	25-Oct-21	2-Jun-22	7 720	537	148	1,90%
From 25 Oct 2021 to 22 May 2022, a total of 7 720 suspected cases of cholera including 537 confirmed by culture and 148 deaths (CFR 1.9%) have been reported in Cameroon, from South-West (5 258 cases, 84 deaths; CFR 1.6%), Littoral (2 101 cases, 57 deaths; CFR 2.7%), South (182 cases, two deaths; CFR 1.1%), Centre (130 cases, four deaths; CFR 3.2%), Far-North (8 cases, no death), and North (26 cases, one death; CFR 3.8%) regions. In addition, on 20 May 2022, the Mifi district in the West region of the country started reporting new cases, with 15 cases and no death recorded so far. The outbreak is currently active in four regions (Centre, Littoral, South-West and West) and 15 districts, out of the 30 that have already reported a suspected cholera case since October 2021. Cases are aged between 2 months and 99 years with a median age of 27 years. Females are twice less affected than males (M/F sex ratio = 2:1).									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	11-May-22	119 947	119 947	1 930	1,60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 11 May 2022, a total of 119 947 cases have been reported, including 1 930 deaths and 117 980 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-22	8-May-22	2 367	1 170	24	1,00%
From week 1 to week 18, 2022 (ending 8 May), through Integrated disease surveillance and response (IDSR) reporting, a total of 2 367 measles cases and 1 170 confirmed (49.4%) with 24 deaths (CFR 1.0%) have been reported in Cameroon. Of the total reported cases, 1 686 were investigated (71.2%). The following are the regions and health districts where measles outbreak has been declared in 2022 : Adamaoua (Ngaoundal, Tibati); Centre (Akonolinga, Biyem Assi, Djoungolo, Mbalmayo, Mfou, Nkolondongo, Yoko); East (Belabo, Bertoua); Far-North (Mada, Makary, Roua, Hina); Littoral (Bangue, Boko, Cité des Palmiers, Deido, Edea, Logbaba, New Bell, Nylon, Bonas Sama); North (Gashiga, Guider, Pitoa, Poli); North-West (Ako); West (Bangourain, Massangam); South (Ebolowa, Lolodorf, Sangmelima, Olamze,)									
Cameroon	Monkeypox	Ungraded	24-Feb-22	1-Jan-22	2-Jun-22	28	3	2	7,10%
Cameroon has reported 28 suspected cases with two deaths from four districts across three regions since the beginning of 2022. Three cases have been laboratory-confirmed from Kumba Health District in the South-West (2) and Ayos Health District in the Centre Region (1).									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	2-Jun-22	10	10	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported during epi week 20, 2022. There are three cases reported in 2021 and seven cases in 2020. No case has yet been reported for 2022									
Cameroon	Yellow fever	Grade 2	7-Feb-21	4-Jan-21	2-Jun-22	555	3	14	2,50%
From 1 January 2022 to 22 May 2022, a total of 555 suspected cases of yellow fever were investigated including 25 probable cases (tested IgM positive) and three confirmed cases (tested positive by plaque reduction neutralization test. Fourteen deaths were recorded, giving a CFR of 2.5%. All ten regions of the country notified suspected cases; the 3 confirmed cases are from Adamawa (Ngaoundere Urbain health district) and West (Foumbot and Malantouen health districts) regions of the country.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	4-Jun-22	56 556	56 556	402	0,70%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 4 June 2022, a total of 56 556 confirmed COVID-19 cases including 402 deaths and 55 847 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	5-May-22	-	-	-	-
According to OCHA figures, 3.1 million people (63% of the total population) are in need of assistance and protection in 2022. There are 649 794 people that are internally displaced as of 31 Mar 2022 mostly hosted in Ouaka, Ouham-Pende, Basse-Kotto, and Ouham Prefectures. There are also 738K persons who are refugees in neighbouring countries. Civilians are still the main victims of violence. Food insecurity is also estimated to affect 2.2 million (45% of the total population) people in 2022.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-May-22	14 371	14 371	113	0,80%
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 16 May 2022, a total of 14 371 confirmed cases, 113 deaths and 14 210 recovered were reported.									
Central African Republic	Monkeypox	Ungraded	3-Mar-22	4-Mar-22	23-May-22	17	8	2	11,80%
As of 19 May 2022, Central African Republic has so far recorded 17 suspected cases of monkey pox including eight confirmed cases and two deaths (CFR 11.8%), for year 2022. The confirmed cases were reported from three health districts: Mbaïki (six cases, two deaths), Alindao (one case, no death) and Bimbo (one case, no death).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-21	23-May-22	522	23	5	1,00%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test (PRNT) at the Centre Pasteur of Cameroun. As of 8 May 2022, a total of 522 suspected cases of yellow fever have been reported from three regions and six health districts of the country, including five deaths (CFR 1.0%). Of the 391 suspected cases investigated, 23 tested positive to yellow fever by PRNT and 1 tested positive by PCR. A reactive campaign is planned on 8-12 June 2022.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	30-May-22	7 417	7 417	193	2,60%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 30 May 2022, a total of 7 417 confirmed COVID-19 cases were reported in the country including 193 deaths.									
Chad	Leishmaniasis	Ungraded	8-Sep-20	16-Oct-20	31-Jan-22	171	15	14	8,20%
Since 1 January 2018, a total of 171 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai) and 14 deaths (CFR 8.2%). For the year 2020 the country registered 74 cases including 4 deaths. Since the beginning of 2021 up to 30 November 2021, 54 cases have been reported including 8 deaths (CFR 14.8%). From 1 December 2021 to 31 January 2022, 10 new cases have been reported with no death.									
Chad	Measles	Ungraded	24-May-18	1-Jan-22	8-May-22	2 036	51	1	0,00%
From week 1 to week 18, 2022(ending 8 May), a total of 2 036 suspected cases of measles, 51 confirmed and one death (0.05%) reported from 110 out of 139 districts. A total of 22 other districts are suspected in outbreak (more than five reported cases/month); Due to lack of test kits in country, a total of 250 specimens were shipped to Cameroon (Centre Pasteur Yaoundé) for testing and the results are awaited.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	23-May-22	117	117	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported during epi week 18, 2022. Two cases have already been reported since the beginning of 2022. No cases were however reported in 2021. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 9 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high. The number of cases reported in 2019 has been revised from 8 to 9.									
Chad	Yellow fever	Grade 2	13-Nov-21	1-Nov-21	10-Apr-22	77	35	0	0,00%
On 13 November 2021, the Institut Pasteur in Dakar shared the results of 17 samples of yellow fever cases from the Mandoul district, Chad, of which two tested positive by polymerase chain reaction (PCR), six were IgM positive with cross-reactions with other flaviviruses, and six other IgM positive without cross-reactions. As of 10 April 2022, a total of 77 yellow fever IgM positive cases were reported from seven provinces (Mandoul, Guéra, Mayo Kebbi Ouest, Moyen Chari, and le Lac), including nine confirmed cases by PCR and 26 by plaque reduction neutralization test.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	14-May-22	8 110	8 110	160	2,00%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 14 May 2022, a total of 8 110 confirmed COVID-19 cases, including 160 deaths and 7 948 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	29-May-22	24 128	24 128	385	-
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 29 May 2022, a total of 24 128 cases including 385 deaths and 23 644 recovered cases have been reported in the country.									
Congo	Measles	Ungraded	14-Mar-22	1-Jan-22	15-May-22	6 474	6 474	132	2,00%
From week 1 to week 19, 2022 (ending 15 May); a total of 198 lab confirmed measles cases and 6 276 cases confirmed through Epi-linkage are reported; 21 health districts in nine departments are having outbreaks. Outbreak response vaccination planned in integration with yellow fever preventive mass vaccination campaign. All 12 departments for the country to be reached with the planned measles vaccination campaign									
Congo	Monkeypox	Ungraded	23-May-22	1-Jan-22	30-May-22	7	2	3	42,90%
Since the beginning of 2022, seven suspected cases with three deaths have been reported from Impfondo District in the country's northern department of Likouala on the border with the Democratic Republic of Congo and Central Africa. Samples from two cases sent to the National Institute of Biomedical Research (INRB) Laboratory in Kinshasa on 12 April 2022 were laboratory-confirmed.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	1-Jun-22	4	4	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There were two cases reported in 2021 and two cases also reported in 2020									
Congo	Yellow fever	Ungraded	31-Mar-22	31-Mar-22	1-Jun-22	13	4	0	0,00%
In Congo, since 2021 to 1 June 2022, a total of 13 probable cases of yellow fever including four confirmed and zero death among confirmed cases have been reported. The figures have been reviewed following final cases classification. An integrated campaign for yellow fever and measles is planned. Measles vaccines are expected by 8 June 2022, with a tentative launch of an integrated campaign on 30 June 2022									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	5-Jun-22	82 305	82 305	799	1,00%
Since 11 March 2020, a total of 82 305 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 799 deaths, and a total of 81 442 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	4-May-22	64	64	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are no reported cases in 2021. There are 64 cases reported in 2020.									
Côte d'Ivoire	Yellow fever	Grade 2	14-Sep-21	13-Aug-21	19-May-22	37	7	1	2,70%
From 13 August 2021 as of 19 May 2022, a total of 30 probable and 7 confirmed cases of yellow fever were recorded in Côte d'Ivoire.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	9-May-22	-	-	-	-
<p>Since the beginning of 2022, 69 security incidents directly affecting humanitarian workers or their property have been recorded in 7 provinces of the DRC: Tanganyika (21), South Kivu (20), North Kivu (14), Maniema (6), Ituri (5), Haut-Katanga (2), Kasai-Central (1). Four aid workers were killed, 10 abducted and one injured. Reported security incidents include acts of violence committed by armed groups and those of a criminal nature. Also, since the beginning of 2022, more than 355 000 people have been internally displaced with a total of nearly 5.97 million in the country. Women make up 51% of IDPs. The largest number of them is recorded in Ituri (1.9 million), North Kivu (1.9 million) and South Kivu (1.4 million) provinces. Nearly 5.2 million (87%) displacements are due to attacks and armed clashes. From May 1 to 9, 2022, three attacks took place on the axis between Komanda and Mambasa. These attacks make the security situation uncertain, preventing humanitarian organizations from reaching IDPs from Toly-toly to Mambasa, where the presence of nearly 87 500 new IDPs have been confirmed.</p>									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-22	8-May-22	5 708	-	80	1,40%
<p>In 2022, from epidemiological week 1 to 18 (ending 8 May 2022), 5 708 suspected cholera cases including 80 deaths (CFR: 1.4%) were recorded in 54 health zones across 11 provinces of the Democratic Republic of the Congo. Response measures are being implemented in the main active hot spots including a vaccination campaign.</p>									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	29-May-22	89 191	89 189	1 338	1,50%
<p>Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 89 189 confirmed cases and two probable case, including 1 338 deaths have been reported. A total of 82 562 people have recovered.</p>									
Democratic Republic of the Congo	Ebola virus disease	Grade 2	22-Apr-22	22-Apr-22	5-Jun-22	5	4	5	100,00%
<p>The ongoing Ebola virus disease (EVD) outbreak in the Democratic Republic of the Congo (DRC) has spread out to a new Health Zone with a new confirmed case reported on 19 May 2022 in Mama Balako Health Area, Wangata Health Zone in Mbandaka City, Equateur Province. Two Health Zones (Mbandaka and Wangata) and three Health areas are now affected (Libiki, Motema Pembe for Mbandaka Health Zone and Mama Balako for Wangata health Zone). As of 5 June 2022, a total of five cases including four confirmed cases and one probable case with five deaths (case fatality ratio (CFR)= 100 %) are reported.</p>									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	22-May-22	73 152	4 890	734	1,00%
<p>From week 1 to week 20 of 2022 (ending 22 May) , 73 152 suspected cases and 734 measles related deaths (CFR 1.0%) are reported ; 2 992 cases investigated through the case based surveillance system; 1 268 tested IgM+ for Measles and 630 tested IgM+ for Rubella; 63% laboratory confirmed measles cases are less than 5 years of age with only 25% of that category with history of vaccination; a total of 110 health districts out of 519 for the country with confirmed epidemics since the beginning of the year</p>									
Democratic Republic of the Congo	Monkeypox	Ungraded	30-Mar-19	1-Jan-22	8-May-22	1 284	10	58	4,50%
<p>From 1 January – 8 May 2022, the Democratic Republic of the Congo has reported 1 284 suspected cases with 58 deaths (CFR 4.5%) from 87 health zones across 18 provinces. The most affected provinces account for 71% of the total cases reported in 2022: Sankuru (n=468, 36.4%), Tshopo (169; 13.2%), Ecuador (168; 13.1%), and Tshuapa (108; 8.4%). Ten of the 19 cases sampled were confirmed positive for monkeypox virus infection.</p>									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-20	8-May-22	710	-	48	6,80%
<p>Between epidemiological weeks 1-18 of 2022, 111 cases of plague have been reported with 3 deaths (2.7% CFR). Lokpa has reported the majority of cases in 2022. During 2021, a total of 138 suspected cases including 14 deaths (CFR 10.1%) were reported. During 2020, a total of 461 suspected cases including 31 deaths (CFR 6.7%) were reported.</p>									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-21	1-Jan-21	1-Jun-22	76	76	0	0,00%
<p>One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Maniema bringing the number of 2022 cases to 48. There were 28 cases in 2021</p>									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-22	8-May-22	671 639	-	313	0,00%
<p>In 2022, from epidemiological week 1 to 18 (ending 8 May 2022), 671 639 suspected cases of typhoid fever including 313 deaths were recorded in the Democratic Republic of the Congo. In 2021, from Epi week 1 to 49, 1 380 955 suspected cases of typhoid fever have been reported including 502 deaths (CFR 0.03%).</p>									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-21	21-Apr-21	19-May-22	22	10	0	0,00%
<p>Since 2021 to 19 May 2022, Democratic Republic of the Congo (DRC) has reported a total of 22 probable cases of yellow fever with 10 confirmed</p>									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	2-Jun-22	15 924	15 924	183	1,10%
<p>The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 2 June 2022, a total of 15 924 cases have been reported in the country with 183 deaths and 15 704 recoveries.</p>									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	3-Jun-22	9 767	9 767	103	1,10%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 3 June 2022, a total of 9 767 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 653 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Jun-22	72 688	72 688	1 410	1,90%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 5 June 2022, a total of 72 688 cases have been reported in the country including 71 050 recoveries. A total of 1 410 associated deaths have been reported.									
Ethiopia	Drought/food insecurity	Grade 2	17-Feb-22	1-Jan-22	11-May-22	-	-	-	-
Ethiopia is experiencing a prolonged drought after three consecutive failed rainy seasons since late 2020 affecting nearly 8 million people living in Oromia, SNNP (Southern Nations, Nationalities, and Peoples), Southwest and Somali: several areas in southern and southeastern Ethiopia, including in the regions of Somali (10 zones), Oromia (8 zones), Southwest (1 zone) and SNNP (7 zones). More than 286,000 people have been displaced in search of water, pasture or assistance, fleeing their homes to survive as crops, livestock and livelihoods are wiped out. The number of livestock deaths has reached a staggering 1.46 million (67% in Somali, 31% in Oromia, and 7% in Southwest and SNNP regions) and is still increasing.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	23-May-22	-	-	-	-
The humanitarian situation in Northern Ethiopia remain fragile and unpredictable, affecting civilians and limiting humanitarian aid deliverance. More than 3.9 million people are in need and 2.4 million people are displaced as of 1 Apr 2022. In Afar, 22 districts are affected by the ongoing active conflict with more than more than 300K newly displaced. The corridor for cargo by land has been opened and more than 20 trucks have delivered and food and nutrition supplies. The worsening malnutrition situation in Tigray region and parts of Afar and Amhara continue to be of concern.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Jun-22	475 012	475 012	7 515	1,60%
Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 475 012 cases of COVID-19 as of 5 June 2022, with 7 515 deaths and 456 181 recoveries.									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-22	15-May-22	4 634	2 897	33	0,70%
As of week 19, 2022 (ending 15 May), seven districts (E Gojjam, N Shewa, S Omo, Afder, Fafan, Jarar, and Liben) from three regions (Amhara, SNNPR and Somali) are experiencing an active measles outbreak. From week 1 to 19 of 2022 , a total of 4 634 suspected cases with 2 987 confirmed and 33 deaths (CFR 0.7%) have been reported in Ethiopia									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	5-Jun-22	63	63	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Ten cases were reported in 2021. The total number of cases for 2020 is 38 and 2019 is 15.									
Ethiopia	Suspected Meningitis	Ungraded	17-Feb-22	1-Jan-22	15-May-22	2 330	12	16	0,70%
From week 1 to week 19 (ending 15 May) , a total of 2 330 suspected meningitis cases and 16 deaths (CFR 0.7%) were reported with a total of 52 woredas reported at least one suspected meningitis case. In general, these five (Oromia, Somali, Amhara, SNNPR & Harari) regions accounted 87.4% among total suspected meningitis cases reported; 69 Cerebrospinal fluid (CSF) samples (32 from health facilities and 37 from sentinel sites) were collected and are being processed, and 12 samples tested positive for meningococcus, additional testing is being made.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	31-May-22	47 677	47 677	304	0,60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 31 May 2022, a total of 47 677 cases including 304 deaths and 47 312 recoveries have been reported in the country.									
Gabon	Yellow fever	Ungraded	12-Feb-22	17-Sep-21	23-May-22	3	1	1	33,30%
On 24 January 2022, a case of yellow fever tested positive by seroneutralization at the Institut Pasteur in Dakar. The patient was a 42-year-old male from the Ogooué-Maritime province in Gabon. He was reportedly not vaccinated against yellow fever. He presented with jaundice on 17 September 2021 and died on 23 September 2021 in Port Gentil. Two other probable cases have been recorded, as of 7 May 2022.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	19-May-22	12 002	12 002	365	3,00%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 19 May 2022, a total of 12 002 confirmed COVID-19 cases including 365 deaths, and 11 634 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	2-Jun-22	161 795	161 795	1 445	0,90%
As of 2 June 2022, a total of 161 795 confirmed COVID-19 cases have been reported in Ghana. There have been 1 445 deaths and 159 980 recoveries reported.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	24-Apr-22	31	31	0	0,00%
No cases have been reported in 2022 nor 2021, 12 cases were reported in 2020, and 19 were reported in 2019.									
Ghana	Yellow fever	Grade 2	3-Nov-21	15-Oct-21	19-May-22	124	60	20	16,10%
From 15 October 2021, suspected cases of yellow fever were reported mostly among nomadic settlers in the Savannah Region, northwest Ghana (bordering Côte d'Ivoire). As of 19 May 2022, a total of 64 probable and 60 confirmed cases of yellow fever were reported from 13 regions in Ghana.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	22-May-22	36 764	36 764	442	1,20%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 22 May 2022, a total of 36 764 cases including 36 182 recovered cases and 442 deaths have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Guinea	Lassa fever	Ungraded	22-Apr-22	20-Apr-22	5-Jun-22	2	2	0	0,00%
On 22 April 2022, the Ministry of Health of Guinea declared an outbreak of Lassa fever after a case was confirmed by PCR at the Gueckedou haemorrhagic fever laboratory. The case is a 17-year-old girl from the sub-prefecture of Kassandou located 65 kilometers from the capital of the prefecture of Guéckédou. An additional confirmed Lassa fever confirmed case without any known epidemiological link with the first case was notified on 28 April in Tekoulo sub-province, Gueckedou province.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-22	27-May-22	21 914	397	33	0,20%
Since the beginning of 2022 up to week 21 (ending 27 May), a total of 21 194 measles suspected cases with 397 confirmed and 33 death (CFR 0.2 %) have been reported in Guinea from 29 health districts including the capital city Conakry through Integrated disease surveillance and response (IDSR)									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	1-Jun-22	50	50	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. So far, we have 6 cases reported in 2021. The total number of 2020 cases has been corrected to 44.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	1-Jun-22	8 283	8 283	171	2,10%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 1 June 2022, the country has reported 8 283 confirmed cases of COVID-19 with 8 042 recoveries and 171 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	24-Apr-22	3	3	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. Three cases were reported in 2021 which were linked to the Jigawa outbreak in Nigeria.									
Horn of Africa	Drought/food insecurity	Grade 3	20-May-22	20-May-22	20-May-22				
The Horn of Africa is experiencing one of the harshest droughts in living memory, with more than 15 million people facing high levels of acute food insecurity and severe water shortages across the region. The number could reach 20 million if the current below-average rains fail. The crisis threatens not only lives but people's way of life. About 5.7 million children are acutely malnourished, while over three million livestock -- which pastoralist families rely on for sustenance and livelihoods -- have died.									
Kenya	Chikungunya	Ungraded	3-Mar-22	13-Feb-22	28-Apr-22	83	5	0	0,00%
Chikungunya outbreak has been reported in Wajir County, Tarbaj sub county in Kutulo village. A total of forty-four (83) cases have been reported with two (5) confirmed cases. Case search in all health facilities, health education to the health care workers and the community is ongoing in the sub county.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	5-Jun-22	325 554	325 554	5 651	1,70%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 5 June 2022, 325 554 confirmed COVID-19 cases including 5 651 deaths and 265 787 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	3-Mar-22	1-Jan-21	28-Apr-22	2 426	68	2	0,10%
The outbreak has been reported in two Counties, Mombasa, Mander and Garissa. The cases are spread from 2021 for Mander and Mombasa Counties. In Mander the reported cases are from Mander east sub county while in Mombasa, six-subcounties (Nyali, Mvita, Kisauni, Nyali, Liikoni and Jomvu) have been affected. Garissa County has reported the latest outbreak from Fafi sub county, Hagadera camp. A total of 2 426 cases (68 confirmed through Polymerase Chain Reaction and 2 358 Probable cases) with two deaths (CFR 0.1%) have been reported.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	7-May-22	1 666	1 481	10	0,60%
Since January 2020 through 7 May 2022, a total of 1 666 visceral leishmaniasis (185 suspected and 1 481 confirmed) cases have been reported in Marsabit, Garissa, Kitui, Baringo, West Pokot, Mander, and Wajir Counties with a total of 10 deaths reported (CFR 0.6%). The outbreak is active in three counties, West Pokot County in Pokot North, Pokot south and West Pokot Sub Counties, Wajir County in Wajir North, Eldas and Wajir West Sub – Counties and Kitui county from Mwingi North and Mwingi Central Sub-counties									
Kenya	Yellow fever	Grade 2	3-Mar-22	12-Jan-22	1-Jun-22	3	3	0	0,00%
On 4 March 2022, Kenya declared an outbreak of yellow fever in Isiolo County. As of 15 March 2022, there are a total of 53 suspect cases of yellow fever including six deaths reported from 12 January to 15 March 2022 in 11 wards of Isiolo county. Of the suspected cases, three were confirmed by PCR at the Kenya Medical Research Institute (KEMRI). Epidemiological investigations are ongoing.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	3-May-22	33 151	33 151	697	2,10%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 3 May 2022, a total of 33 151 cases of COVID-19 have been reported, including 24 653 recoveries and 697 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	4-Jun-22	7 456	7 456	294	3,90%
From 16 March 2020 to 4 June 2022, Liberia has recorded a total of 7 456 cases including 294 deaths and 7 161 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	4-Apr-22	46	19	6	13,00%
Since the beginning of 2022 up to 4 April 2022, a total of 46 suspected cases of Lassa fever including 19 confirmed and 6 deaths (CFR 13%) have been reported in Liberia. Three Counties are currently in an outbreak: Grand Bassa, Nimba, and Bong.									
Liberia	Measles	Ungraded	3-Feb-22	1-Jan-22	22-May-22	3 338	3 027	35	1,00%
As of 22 May 2022, 3 338 suspected cases, including 3 027 confirmed and 35 deaths (CFR: 1 %) were reported from 47 health districts in 14 counties. Of the confirmed cases, 9% (287 cases) were laboratory confirmed, 15% (448 cases) were clinically confirmed, and 76% (2 292 cases) by epidemiological link. Montserrado county is the most affected with 56% (1 861 suspected cases) of all suspected cases reported. The median age of the affected population is 5 years (range: 1 month-67 years). Measles vaccination coverage in confirmed cases is 43% and the vaccination status of 10 % of confirmed is unknown.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	24-Apr-22	3	3	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The country reported 3 cases in 2021.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	Floods	Grade 2	19-Jan-22	16-Jan-22	27-Apr-22	455 744		206	0,00%
Heavy rains in Madagascar from multiple weather systems (Tropical Storm (TS) Ana, Cyclone Batsirai, TS Dumako, Cyclone Emnati, TS Gombe, and TS Jasmine) have flooded parts of the country. The TS Ana weather system affected the country during week 3 of 2022, Cyclone Batsirai occurred in week 5, TS Dumako in week 7, Cyclone Emnati in week 8, TS Gombe in week 10, and TS Jasmine in week 16. As of 19 Feb 2022, there have been 131 549 victims affected including 55 deaths by the TS Ana weather system in 12 regions though Analamanga area was most affected. Damages from Cyclone Batsirai affected 143 718 people causing 121 deaths in 10 region but mostly in the areas of Atsimo Atsinanana, Vatovavy and Fitovinany. A total of 61 489 people had been displaced by the effects of Cyclone Batsirai. Damages by TS Dumako have affected approximately 9 959 people including 14 deaths. A total of 4 323 people have been displaced from 7 regions but mostly affecting Atsinanana and Analanjirofo. Cyclone Emnati affected 169 583 people causing 14 deaths. A total of 86 995 people were displaced in 12 regions but mostly from Atsimo Atsinanana, Fitovinany, and Ihorombe. TS Gombe affected 935 people causing one death in 3 regions but mostly affecting Analanjirofo, Sava, and Sofia. Finally, TS Jasmine affected the country last week causing at least 1 death as of 27 April 2022.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-21	1-Jan-21	11-Mar-22	-	-	-	-
A prolonged three-year drought in southern Madagascar has contributed to food insecurity issues for an estimated 1.3 million people in the Grand Sud area, of which 14 000 people were classified as IPC Phase 5 or catastrophically food insecure. The Integrated food security Phase Classification (IPC) analysis for January 2022 has classified 405 000 people in emergency (phase 4). About 309 000 children are projected to suffer from moderate acute malnutrition and 60 000 children aged of 6-59 months are projected to suffer from severe acute malnutrition. There are at least 470 000 people in urgent need of food assistance in Vatovavy, Fitovinany, and Atsimo Atsinanana regions according to the latest estimate established by the authorities after the passage of Cyclones Batsirai and Emnati.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	28-May-22	64 377	64 377	1 395	2,20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 22 May 2022, a total of 64 377 confirmed cases including 1 395 deaths have been reported in the country.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-21	4-May-22	14	14	0	0,00%
No case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. The number of 2021 cases remains 13. There is one case in 2022.									
Malawi	Floods	Grade 2	26-Jan-22	26-Jan-22	18-Mar-22	1 000 000		51	0,00%
Malawi is currently responding to the aftermath of the cyclone Ana and Gombe that occurred on 28 January 2022 and 13 March 2022 respectively. The disaster displaced a number of households, damaged household property, injuries as well as damage to infrastructure and caused several deaths in the southern part of the country. Approximately, more than 1 million people have been affected, death toll stands at 51 (46 due to tropical storm Ana, 5 due to cyclone Gombe).									
Malawi	Cholera	Ungraded	3-Mar-22	3-Mar-22	5-Jun-22	573	13	28	4,90%
The Malawian Ministry of Health declared a cholera outbreak on 3 March 2022. This was after a case was identified in a 53-years old businessman, resident of Balaka district. Laboratory results by culture confirmed him positive for Cholera on 3 March 2022. The seven districts affected include Nsanje (205 cases, 10 deaths), Neno (91 cases, one death), Blantyre (201 cases, with 14 deaths, Machinga (12 cases, 2 death), Chikwawa (52 cases), Mulanje (1 case) and Balaka (11 cases, one death). As of 5 June 2022, Malawi has reported a total of 573 cholera cases with 28 deaths.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	5-Jun-22	86 011	86 011	2 642	3,10%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 5 June 2022, the country has a total of 86 011 confirmed cases with 2 642 deaths and 82 885 recoveries.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-22	1-May-22	1	1	0	0,00%
One positive case of wild WPV1 was detected in Lilongwe from a patient with the date of onset of paralysis on 19 November 2021 confirmed by the National Institute for Communicable Diseases (NICD) reference laboratory. No other cases have been reported this week. However, response activities including mass polio vaccination campaigns continue.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	31-May-22	-	-	-	-
People in Mali are reeling from the impact of years of conflict, deep poverty, climate shocks and mounting insecurity. In May 2022, 7.5 million people need humanitarian assistance. One Malian out of four (4.8 million people) is currently food insecure because of insecurity and the impacts of climate change. During this year's lean season (June to August), a staggering 1.8 million people will be acutely food insecure. However, the Humanitarian Response Plan for Mali is currently funded at only 11 per cent.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	5-Jun-22	31 110	31 110	735	2,40%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 5 June 2022, a total of 31 110 confirmed COVID-19 cases have been reported in the country including 735 deaths and 30 259 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-22	24-Apr-22	1 536	421	1	0,10%
As of week 16, (ending 24 April) of 2022, a total of 1 536 suspected cases of measles and 421 confirmed and 1 death (CFR 0.1) have been reported in Mali through integrated disease surveillance and response (IDSR) system. A total of 37 out of 75 health districts have confirmed measles outbreak, of which 13 health districts have received vaccines for response. The most affected age group is from 0 to 59 months.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	16-Mar-22	52	52	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. No cases have been reported in 2021. The total number of cases since 2020 are 52.									
Mali	Undiagnosed disease	Ungraded	14-Mar-22	1-Nov-21	11-May-22	41		9	22,00%
In Farabougou village, Segou region of Mali, a disease of unknown cause has been reported. The first investigation on this disease was conducted since November last year. In 2022, the first alert about this disease was voiced on 23 February. A total of 41 cases with 9 deaths (CFR 22.0%) have been reported. From 12 to 13 April, the Regional Ministry of Health conducted a mission to the affected area, according to the preliminary information, among cases reported 3 have oedema, 12 have non-specified chronic diseases and 26 had malnutrition. No further details provided so far. The investigation report including laboratory analysis are still awaited. The affected area is highly insecure therefore difficult for access.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	4-Jun-22	59 183	59 183	982	1,70%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 4 June 2022, a total of 59 183 cases including 982 deaths and 58 043 recovered cases have been reported in the country.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	5/8/2022	223 793	223 793	996	0,40%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 8 May 2022, a total of 223 793 confirmed COVID-19 cases including 996 deaths have been reported in the country.									
Mozambique	Floods	Grade 2	24-Jan-22	26-Jan-22	12-Mar-22	678 237		59	0,00%
On 11 March 2022, a severe tropical cyclone Gombe made landfall over the coastal area of central Nampula province, with maximum sustained winds up to 190km/h. Figures on people affected and damage following the passage of Cyclone Gombe continues to rise. According to the latest information released by the National Institute for Disaster Management and Risk Reduction (INGD), to date Gombe has affected 478 237 people (93 497 families), caused 59 deaths, and injured 82 people. These figures on the impact are expected to rise as widespread damage has occurred though in-depth assessments have not yet taken place. This cyclone Gombe follows tropical storm Ana which hit the country in January, and tropical depression Dumako which struck in February. Together, these previous storms have already affected more than 200 000 people in Nampula, Zambezia and Tete provinces.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	31-Mar-22	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. As of 31 Mar 2022, the nationwide estimate of people in need of humanitarian assistance is 622 108 and 266 246 people are displaced by conflict.									
Mozambique	Cholera	Ungraded	23-Mar-22	13-Jan-22	18-Mar-22	265	0	0	0,00%
Cholera outbreak has been reported from Sofala province, central region, Mozambique, on 13 January 2022. From 13 January 2022 as of 18 March 2022, 265 cases were reported with no deaths in Caia district. Of the eight samples collected, three tested positive for cholera by rapid diagnostic test (RDT) and five turned negative by culture. Response activities are ongoing.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	15-May-22	225 498	225 498	2 201	1,00%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 15 May 2022, a total of 225 498 confirmed COVID-19 cases were reported in the country including 2 201 deaths and 223 190 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	17-Apr-22	3 599	903	0	0,00%
From week 1 to week 15 ,2022 (ending 17 April), a total of 582 suspected cases of measles and zero death have been reported through IDSR (Integrated Disease Surveillance and Response). The cumulative number of the reported cases since January 2021 is now 3 599									
Mozambique	Poliomyelitis (WPV1)	Ungraded	17-May-22	18-May-22	1-Jun-22	1	1	0	0,00%
A wild poliovirus type 1 (WPV1) was detected in Mozambique from samples collected in late March 2022 from Changara district in Tete province. This new WPV1 is an orphan virus and is linked to the virus detected in Malawi (for which outbreak response vaccinations are ongoing in Malawi and neighbouring countries). The patient, a 12-year old female, had onset of paralysis on 25 March 2022. Her stool samples were collected on 1 April and 2 April 2022, and sent to the laboratory on 4 April 2022. No other case has been reported to date.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	3-Jun-22	167 498	167 498	4 040	0,00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 3 June 2022, a total of 167 498 confirmed cases with 161 174 recovered and 4 040 deaths have been reported.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	7-Mar-22	-	-	-	-
According to OCHA statistics, 3.7 million people need humanitarian assistance in 2022. There is an increasing number of security incidents reported in the first four months of the year. Compared to the last year, security incidents have doubled in the same period from January to April 2022 (93 incidents in 2021 against 136 security incidents in 2022). As of 16 May 2022, 115 150 people are internally displaced. Food insecurity remains one of the major challenges faced by the country. Diffa and Tillabéri regions are the most affected by food insecurity with 24% and 29% of the population affected respectively.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	5-Jun-22	9 056	9 056	310	3,40%
From 19 March 2020 to 5 June 2022, a total of 9 056 cases with 310 deaths have been reported across the country. A total of 8 730 recoveries have been reported from the country.									
Niger	Measles	Ungraded	5-Apr-22	1-Jan-22	17-Apr-22	6 103	323	6	0,10%
From week 1 to week 15 (ending 17 April) of 2022, a total of 6 103 cases and 6 deaths (CFR: 0.1%) have been reported. Among the 8 regions for the country, Agadez has the highest attack rate (59.8 cases per 100 000 inhabitants), followed by Niamey (46.7 cases /100 000) and Zinder (44.2 cases /100 000). Risk assessment found: 17 districts out of 72 for the country are at very high risk while 21 districts are at high risk. The response plan is being finalized in order to vaccinate in the 38 high risk and very high-risk districts as well as 11 districts in outbreak but not yet reflected in the risk profile									
Niger	Meningitis	Ungraded		1-Jan-21	22-May-22	1 688	-	76	4,50%
Since the beginning of the year 2021 to week 2 of 2022 ending 16 January 2022, 1 688 cases have been reported with 76 deaths (CFR 4.5%). Two health districts in Zinder region crossed the alert threshold: Dungass with an attack rate (AR) of 4.5 cases per 100 000 inhabitants and Magaria with an attack rate (AR) of 4.8 cases per 100 000 inhabitants. An analysis of data by sub-districts indicates that some health areas crossed the epidemic threshold on week 49 of 2021 (ending 12 December). Neisseria meningitidis serogroup C (NmC) is the predominant germ identified in the 2 health districts. A request to the International Coordinating Group (ICG) for vaccine provision is underway for a vaccine campaign response.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	1-Jun-22	19	19	0	0,00%
No case of circulating vaccine-derived poliovirus type 2(cVDPV2) was reported this week. There are two cases reported in 2022. In addition a total of 17 cases was reported in 2021.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	31-Mar-22	-	-	-	-
In northeastern Nigeria, humanitarian needs remain high, with 8.4 million people, including 58% children (4.9 million), requiring humanitarian assistance in 2022. A total of 2.1 million internally displaced persons (IDPs) remain displaced in the three northeastern states of Borno, Adamawa, and Yobe due to the ongoing conflict. In northwestern Nigeria, violence is multifaceted and multidimensional. Over 360 000 persons are displaced in three States, with Katsina (173 856) having the highest number of IDPs, followed by Zamfara (123 102) the epicenter of the banditry attacks. Over 81% of the IDPs reside in host communities, while the rest are living in camp like settings.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	3-Jun-22	256 148	256 148	3 143	1,20%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 3 June 2022, a total of 256 148 confirmed cases with 250 065 recovered and 3 143 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	1-Jan-21	1-Jan-21	1-May-22	4 455	759	149	19,60%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 17 of 2022 (ending 1 May), the number of new confirmed cases decreased from 18 in week 16 to eight cases, with three deaths. These were reported from Edo, Ondo, Gombe and Kogi States. Cumulatively from week 1 to 17 of 2022, a total of 759 confirmed cases including 149 deaths among confirmed cases have been reported with a case fatality rate (CFR) of 19.6% across 23 states. This is lower than the CFR for the same period in 2021 (21.0%). In total, 4 455 cases are suspected in 2022. Of all confirmed cases, 68% are from Ondo (28%), Edo (25%) and Bauchi (15%) States.									
Nigeria	Measles	Ungraded	14-Mar-22	1-Jan-22	20-Mar-22	9 905	1 294	0	0,00%
As of week 11, 2022 (ending 20 March), a total of 9 905 suspected measles cases were reported from all states across 516 (67%) LGAs. A total of 161 LGAs across 33 states have experienced an outbreak this year 2022. Ongoing outbreak in 134 new LGAs across 30 states with new outbreak in 31 new LGAs across 10 states. A total of 4 447 samples were collected and 1 294 were IgM+ (29%).									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-22	5-Jun-22	110	31	1	0.9%
From 1 January to 29 May 2022, Nigeria has reported 66 suspected cases with one death from nine states across the country. Of these, 21 cases were laboratory-confirmed from the following states: Adamawa (5), Bayelsa (2), Cross River (2), Delta (2), Federal Capital Territory (2), Imo (1), Kano (2), Lagos (4), and River (1). One death was recorded in a 40-year-old male with renal co-morbidity.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	8-May-22	494	423	0	0,00%
In 2022, 20 cVDPV2 cases have been reported in the country. There were 415 cVDPV2 cases and 18 environmental samples reported in 2021.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	30-Apr-22	54	54	3	5,60%
From 1 January 2021 to 30 April 2022, a total of 54 yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Some of these cases had a history of YF vaccination.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	5-Jun-22	130 197	130 197	1 459	1,10%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 5 June 2022, a total of 130 197 cases with 1 459 deaths and 128 576 recovered cases have been reported in the country.									
Sahel region	Humanitarian crisis	Grade 2	11-Feb-22	-	20-May-22	-	-	-	-
The humanitarian situation has further deteriorated in six countries of the Sahel: Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria. The total amount of people in need of humanitarian assistance is 30 million. Additionally, more than 7 million people are internally displaced, and 0.89 million refugees have been registered. Problems such as violence, poverty, climate change, food insecurity, disease outbreaks, and military coups have persisted in the area for over a decade, however, incidents have been on the rise in recent months. The humanitarian situation causes additional challenges for the health of the population who are faced with weakened health systems among a context of food insecurity due to climate change.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	29-May-22	5 991	5 991	73	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 29 May 2022, a total of 5 991 confirmed cases of COVID-19 have been reported, including 73 deaths. A total of 5 909 cases have been reported as recoveries.									
Sao Tome And Principe	Dengue	Grade 2	11-Apr-22	15-Apr-22	31-May-22	226	226	0	0,00%
Sao Tome and Principe is facing the first ever documented dengue outbreak. From 15 April-31 May 2022, a total of 226 cases and no deaths have been confirmed via RDT from: Água Grande (193, 85.3%); Mézochi (20, 8.8%); Lobata (10, 4.4%); Cantagalo (1, 0.4%); and RAP (2, 0.9%). During week 21 (ending 31 May), there were 81 new cases registered in the country. Água Grande's attack rate is by far the highest (22.9 per 10 000 inhabitants). The age group attack rates are: 10-19 years (11.6), 20-29 years (11.4), 30-39 years (11.6), 40-49 years (11.6), 50-59 years (13.8) and 60+ years (10.6). The 3 main clinical signs are fever (194, 86%), headache (148, 65%) and myalgia (94, 42%).									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	5-Jun-22	86 135	86 135	1 967	2,30%
From 2 March 2020 to 5 June 2022, a total of 86 135 confirmed cases of COVID-19 including 1 967 deaths and 84 157 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	4-May-22	17	17	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 17 cases reported in 2021.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	3-Jun-22	44 145	44 145	167	0,40%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020 as of 3 June 2022, a total of 44 145 cases have been confirmed, including 43 698 recoveries and 167 deaths have been reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Sierra Leone	Anthrax	Ungraded	20-May-22	20-May-22	30-May-22	8	3	0	0,00%
The Ministry of Health and Sanitation in Sierra Leone has declared an outbreak of human anthrax in the country after identifying 3 lab confirmed cutaneous anthrax cases in Karene district. This is subsequent to an investigation of 7 suspected anthrax cases, all residing in Buya chiefdom, of whom 4 blood samples and swabs were collected and sent to the laboratory for confirmation. The investigation was conducted as follow up to reports of sickness and death of animals in the adjacent Port Loko district between March and April, with reported consumption of meat in surrounding communities. There was also prior confirmation of anthrax from tissues collected from some of the affected animals during epi week 19. As of 30 May 2022, a total of eight cases was reported. Majority of them are among the age group of 15 years and above (43%) followed by 12-59 months (29%), 0-11 months (14%) and 5-15 years (14%). Five of the cases reported symptoms onset from 11th to 27th April 2022 and the other two cases had symptoms onset on 5th May 2022.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	29-May-22	7 682	7 682	125	1,60%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 29 May 2022, a total 7 682 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 819 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	20-Mar-22	20	20	11	55,00%
From the beginning of 2021 to 20 March 2022, a total of 20 cases and 11 deaths (55% CFR) have been reported due to Lassa fever in Sierra Leone. Cases were reported from Kenema (15), Kailahun (3), and Tonkolili (2) districts since the beginning of 2021. From these cases, 65% were females and 35% were <5 years old. Lassa fever is known to be endemic in Sierra Leone and surrounding countries. From 2016-2020 Sierra Leone experienced gradually declining trends in annual Lassa fever case totals, however, in 2021, cases doubled compared to 2020 (from 8 total reported in 2020 to 16 total in 2021).									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	11-May-22	379	379	0	0,00%
By 11 May 2022 (Week 19), 12 out of 16 districts reported 379 confirmed measles cases (106 lab confirmed and 273 epi linked; 64% (208) of these cases are below five years, 26.4 % (100) above five years and 18.7%, (71) age missing. Currently, three districts (Western Rural, Western Urban and Port Loko District) are experiencing measles outbreak. Surveillance and immunization activities have been intensified in all districts.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	1-Jun-22	15	15		0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported this week. Five cases were reported in 2021, and 10 were reported in 2020.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	29-May-22	3 953 967	3 953 967	101 146	3,40%
Since the start of the COVID-19 pandemic in South Africa through 29 May 2022, a cumulative total of 3 953 967 confirmed cases and 101 146 deaths have been reported with 3 803 725 recoveries.									
South Africa	Lassa fever	Ungraded	13-May-22	14-May-22	4-Jun-22	2	1	1	50,00%
The Government of South Africa notified AFRO IHR of an imported case of Lassa fever from Nigeria to South Africa. The case had travel history to Nigeria during the six months preceding illness. He entered RSA on 25 April 2022 and was hospitalized on 1 May 2022 and died on 6 May 2022. The case was tested positive for Lassa fever RT PCR at the National Institute for Communicable Diseases. One suspected secondary case, a nurse who assisted the doctor intubating the index case was identified on 13 May 2022.									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	15-May-22	-	-	-	-
From April to July 2022 an estimated 7.74 million people (63% of total population) faced crisis levels of food insecurity phase (IPC) 3 or worse. Of the total number, 87 000 are in IPC 5, 2.89 million are in IPC 4, and 4.77 million are in IPC 3. Food insecurity in South Sudan is driven by climatic shocks (floods, dry spells, and droughts), insecurity (caused by sub-national and localized violence), population displacements, persistent annual cereal deficits, diseases and pests, the economic crisis, the effects of COVID-19, limited access to basic services, and the cumulative effects of prolonged years of asset depletion that continue to erode households' coping capacities, and the loss of livelihoods.									
South Sudan	Floods	Grade 2	15-Jul-21	1-May-21	15-May-22	-	-	-	-
Rains in South Sudan are projected to cause a fourth year of flooding in areas where large swathes of land are still inundated from last rainy season. Unity State is expected have displacement of more than 320 000 people who could experience loss of livelihoods, disease outbreaks and food insecurity. In 2021 the flooding began in May and affected over 835K people in 33 counties. A rapidly worsening situation was noted in October 2021. Measures are being taken to avert humanitarian crises by reinforcing peoples' homes and key infrastructure such as latrines and water wells.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	5-Jun-22	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. In 2022, there is a total of 8.9 million people in need of humanitarian assistance and 2.02 million people internally displaced people as of 30 April 2022. South Sudan continues to have issues with violence, flooding, food insecurity, and disease threats. An estimated 7.7 million people are expected to be food insecure during April-July 2022 with at least 87 000 in IPC Phase 5, 2.9 million people in IPC Phase 4, and 4.8 million IPC Phase 3. Floods caused many people to become internally displaced as well as problems for water, sanitation, and hygiene conditions in formalized camps and informal settlements. Waters have not receded and are expected to worsen by the forthcoming rainy season.									
South Sudan	Anthrax	Ungraded	25-Apr-22	13-Mar-22	29-Apr-22	34	8	0	0,00%
A total of 34 suspected cases have been reported from Kuajok in Warrap state. A rapid response team investigation sampled 18 individuals of which 8 (44%) returned positive for bacillus anthracis bacteria. Cases were reported from 13 March - 11 April 2022 from registered hospital patients where the majority of cases have been female (71%). Twenty-two cases (65%) are children under 10 years old.									
South Sudan	Cholera	Ungraded	21-Apr-22	21-Mar-22	29-May-22	111	13	1	0,90%
As of 29 May 2022, 111 cases and 1 death (CFR 0.9%) have been reported from Rubkona County of Unity State, mostly (86.5%) from the Bentiu IDP camp. Twenty-six cases have been confirmed positive by RDT for cholera and 13 tested positive by culture at the National Public Health Laboratory in Juba. Females account for 70.3% of all cases. The age group between 0-4 years accounted for 37.8% of all cases, followed by age group ≥20 years with 32.4%, age group 10-14 years accounted for 10.8%. Rubkona county experienced unprecedented floods in 2021 with flood waters persisting up to the end of the current dry season and the flood surface water is often used for bathing and playing.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	5-Jun-22	17 630	17 630	138	0,80%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 5 June 2022, a total of 17 630 confirmed COVID-19 cases were reported in the country including 138 deaths and 13 644 recovered cases.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	22-May-22	2 602	104	24	0,90%
The current outbreak in the Bentiu IDP camp is ongoing. As of 22 May 2022, a total of 2 602 cases of hepatitis E including 24 deaths (CFR: 0.92%) have been reported since January 2019. Approximately 52% of cases are male.									
South Sudan	Malaria	Ungraded	28-Dec-21	1-Jan-22	22-May-22	1 117 138	1 117 138	232	0,00%
Between weeks 1-20 of 2022 (ending 22 May), 1 117 138 malaria cases including 232 deaths (CFR 0.02%) have been reported in South Sudan. There were 3 counties exceeding third quartile malaria trends for the past five years including Aweil Centre, Torit, and Jur River counties during week 20. In 2021, a total of 3 749 210 malaria cases including 2 963 deaths were reported. Several upsurges occurred in the country in 2021 including the counties of Fangak.									
South Sudan	Measles	Ungraded	23-Feb-22	1-Jan-22	15-May-22	681	421	2	0,30%
A measles outbreak was declared by health authorities of South Sudan on 23 February 2022 in two counties, Torit and Maban. As of week19, 2022 (ending 15 May), eight counties (of 79 counties nationally) have now confirmed measles outbreaks (Aweil Centre, Aweil East, Aweil West, Gogrial West, Maban, Raja, Tambura, and Torit). Overall, 681 suspected measles cases and two deaths (CFR 0.3%) have been reported using the early warning alert and response system (EWARS) and investigated countrywide as part of integrated disease surveillance and response (IDSR) since the beginning of 2022. Among those 681, 421 have been reported from the eight counties with confirmed outbreaks. Most cases are children under five years old (59%) and 53% of cases are male.									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	5-Jun-22	59	59	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were 9 cVDPV2 cases reported in 2021 and 50 in 2020.									
South Sudan	Suspected Meningitis	Ungraded	25-Apr-22	1-Jan-22	22-May-22	232	4	19	8,20%
A total of 232 suspected cases of meningitis have been reported from all 5 counties in NBeG from week 1-20, 2022. Most cases were reported among those aged 15+ (44%). Of these suspected cases, there have been 19 deaths (CFR 8.2%) of which most have occurred in infants <1yr (58% of all deaths). Aweil Centre and Aweil West reported the highest cumulative attack rates.									
Tanzania, United Republic of	Cholera	Ungraded	25-Apr-22	14-Apr-22	23-May-22	214	24	1	0,50%
The Ministry of Health of The United Republic of Tanzania notified WHO on 25 April 2022 of an outbreak of cholera in Kigoma and Katavi Regions. From 14 Apr to 12 May 2022, 214 cumulative cases and 1 death (CFR 0.5%) have been reported from the Districts of Tanganyika in Katavi Region (88, 41.1%) and Uvinza in Kigoma Region (126, 58.8%). A total of 24 cases have been confirmed positive for Vibrio cholerae. About 37% of cases have been reported among children 3-10 years.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	6-May-22	33 928	33 928	803	2,40%
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 6 May 2022, a total of 33 928 confirmed cases have been reported in Tanzania Mainland including 803 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	13-May-22	37 006	37 006	273	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 13 May 2022, a total of 37 006 cases including 273 deaths and 36 713 recovered cases have been reported in the country.									
Togo	Measles	Ungraded	2-Feb-22	25-Nov-21	20-Mar-22	831	134	0	0,00%
A measles outbreak has been declared by the Togolese health authorities on 9 February 2022 after confirmation at National Referral Laboratory for Epidemic prone Diseases. As of 20 March, a total of 831 cases and 0 death, have been reported through Integrated Disease Surveillance and Response (IDSR). The outbreak stated in November 2021 in the Zio district.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	16-Mar-22	17	17	0	0,00%
No new case of cVDPV2 was reported during the past week. No cases have been reported in 2021. There were nine cases in 2020 while the total number of cVDPV2 cases reported in 2019 remains eight.									
Uganda	Anthrax	Ungraded	26-May-22	16-May-22	16-May-22	8	7	1	12,50%
An anthrax outbreak has been confirmed in Buduba District, Uganda. Eight suspected human cases were reported and clinically evaluated in four villages. Of these, seven were sampled and one died on 16 May without being sampled. The date of onset of symptoms was between 2 and 12 May 2022. The district performed a preliminary test using Gram stain which was positive with purple rods in chains. A total of 14 cows have been reported dead so far									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	4-Jun-22	164 714	164 714	3 602	2,20%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 4 June 2022, a total of 164 714 confirmed COVID-19 cases with 3 602 deaths were reported.									
Uganda	Yellow fever	Grade 2	3-Mar-21	1-Mar-22	1-Jun-22	7	1	0	0,00%
On 6 March 2022, the Uganda Ministry of Health notified WHO of four suspected yellow fever cases, with specimens collected between 2 January and 18 February 2022, that tested positive for yellow fever by Enzyme-linked immunosorbent assay (ELISA) and by plaque reduction neutralization test (PRNT), at the Uganda Virus Research Institute (UVRI). As of 25 March 2022, three additional samples tested positive by PRNT at the UVRI. Cases presented with fever, vomiting, nausea, diarrhoea, intense fatigue, anorexia, abdominal pain, chest pain, muscle pain, headache, and sore throat. Only one case from Wakiso District was classified as confirmed after thorough investigation.									
Zambia	Cholera	Ungraded	13-Apr-22	11-Apr-22	28-May-22	21	21	0	0,00%
A cholera outbreak was declared in Zambia on 3 May 2022. A total of 21 cases have been registered with no deaths as of 29 May 2022. Three districts are affected: Lusaka (7 cases), Chilanga (9 cases) and Nsama (5 cases).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	5-Jun-22	322 207	322 207	3 988	1,20%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 5 June 2022, a total of 322 207 confirmed COVID-19 cases were reported in the country including 3 988 deaths and 317 880 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	1-Jan-22	20-Mar-22	22	0	0	0,00%
The anthrax outbreak is ongoing in Zimbabwe. Six new cases were reported in Week 3 of 2022 with the cumulative for the year being 22. The cases were reported by Gokwe North District and Gokwe South District in Midlands Province. This outbreak started in Week 36 of 2019, affecting mainly Buhera and Gokwe North and South districts but a surge in cases started appearing in week 38 when cases were reported in some other areas. The cumulative figures for anthrax are 747 cases and 3 deaths in 2020 and 306 cases and 0 deaths in 2021.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	14-May-22	249 206	249 206	5 482	2,20%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 14 May 2022, a total of 249 206 confirmed COVID-19 cases were reported in the country including 5 482 deaths and 242 417 cases that recovered.									
Zimbabwe	Measles	Ungraded	29-Apr-22	19-May-22	19-May-22	270		29	10,70%
A total of 270 cases have so far been identified since the first rumours surfaced on 10 April 2022 in Mutasa District. 31 are vaccinated, 171 are not vaccinated and 28 have unknown vaccination status. 29 deaths have so far been recorded with a fatality rate of 12.6%. Of the 29 deaths, 20 were unvaccinated and 9 vaccination status is unknown. Zindi clinic has reported 179 cases so far contributing 66.3%.									
Closed Events									
Benin	Cholera	Grade 1	28-Mar-21	28-Mar-21	24-Apr-22	1 705	55	20	1,20%
Since week 12 (ending 28 March 2021) of 2021, cases of cholera have been reported in Benin. As of 24 April 2022, a total of 1 705 cases with 20 deaths (CFR 1.2%) are reported. A decreasing trend for more than nine consecutive weeks. The most affected age group is 16 - 45 years (62.3%) and males (55 %) more affected than females.									
Côte d'Ivoire	Dengue	Ungraded	22-Mar-22	10-Jan-22	20-Mar-22	12	12	1	8,30%
On 23 March 2022, the Ministry of Health of Côte d'Ivoire notified WHO of confirmed dengue cases. Between Epi week 2 and Epi week 11, 2022, 12 confirmed cases were recorded, including 1 death. These cases were reported from the districts of Cocody Bingerville (8), Adiake (2), Daloa (1) and Youpougon-Ouest-Songon (1).									
Democratic Republic of the Congo	Suspicion of Meningitis outbreak	Ungraded	28-Mar-22	1-Jan-22	1-May-22	2 645	3	183	6,90%
From week 1 to 18, 2022 (ending 1 May), a total of 2 645 suspected cases of meningitis and 183 deaths (CFR 6.9%) have been reported in the country through Integrated Disease Surveillance and Response system. Data are being revised for an update of the list of Health zones in alert or outbreak. In addition, from week 1 to week 10, 2022, the Walikale health district recorded 82 suspected cases of meningitis and 6 deaths (CFR 7.3%) with some health areas (Sante Plus and 8eme Cepac) crossing the epidemic threshold. Two cerebrospinal fluid (CSF) samples were positive for Hemophilus Influenza and one cerebrospinal fluid sample was positive for Neisseria Meningitidis. Response activities were organized in the Walikale health district with the support from WHO.									
Ethiopia	Cholera	Grade 2	31-Aug-21	31-Aug-21	23-May-22	674		7	1,00%
The cholera outbreak has been ongoing in Oromia and Somali regions of Ethiopia. The first case was reported on 31 August 2021. As of 23 May 2022, a total of 674 cases with 7 associated death (CFR 1.0%) have so far been reported. A declining trend has been reported in past few weeks, with no cases reported since 15 January 2022.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	8-Feb-22	8-Feb-22	27-Apr-22	7	7	2	28,60%
On 4 February 2022, a case of Crimean-Congo haemorrhagic fever (CCHF) was confirmed by polymerase chain reaction (PCR) at the Institut National de Recherche en Santé Publique in Nouakchott, Mauritania. The patient is a 52-year-old male farmer living in the department (moughataa) of Koubeni in the region (wilaya) of Hodh Elgharbi. He presented with epistaxis and hematemesis for which he consulted five health facilities in Kubeni and Nouakchott between 27 January and 4 February 2022. As of 27 April 2022, a total of seven confirmed cases including two deaths were reported. The last confirmed case was reported 46 days after the sixth.									

†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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