

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES



World Health Organization

Week 4: 16 to 22 January 2023

Data as reported by: 17:00; 22 January 2023

African Region

Emergency Preparedness and Response

0

New event

151

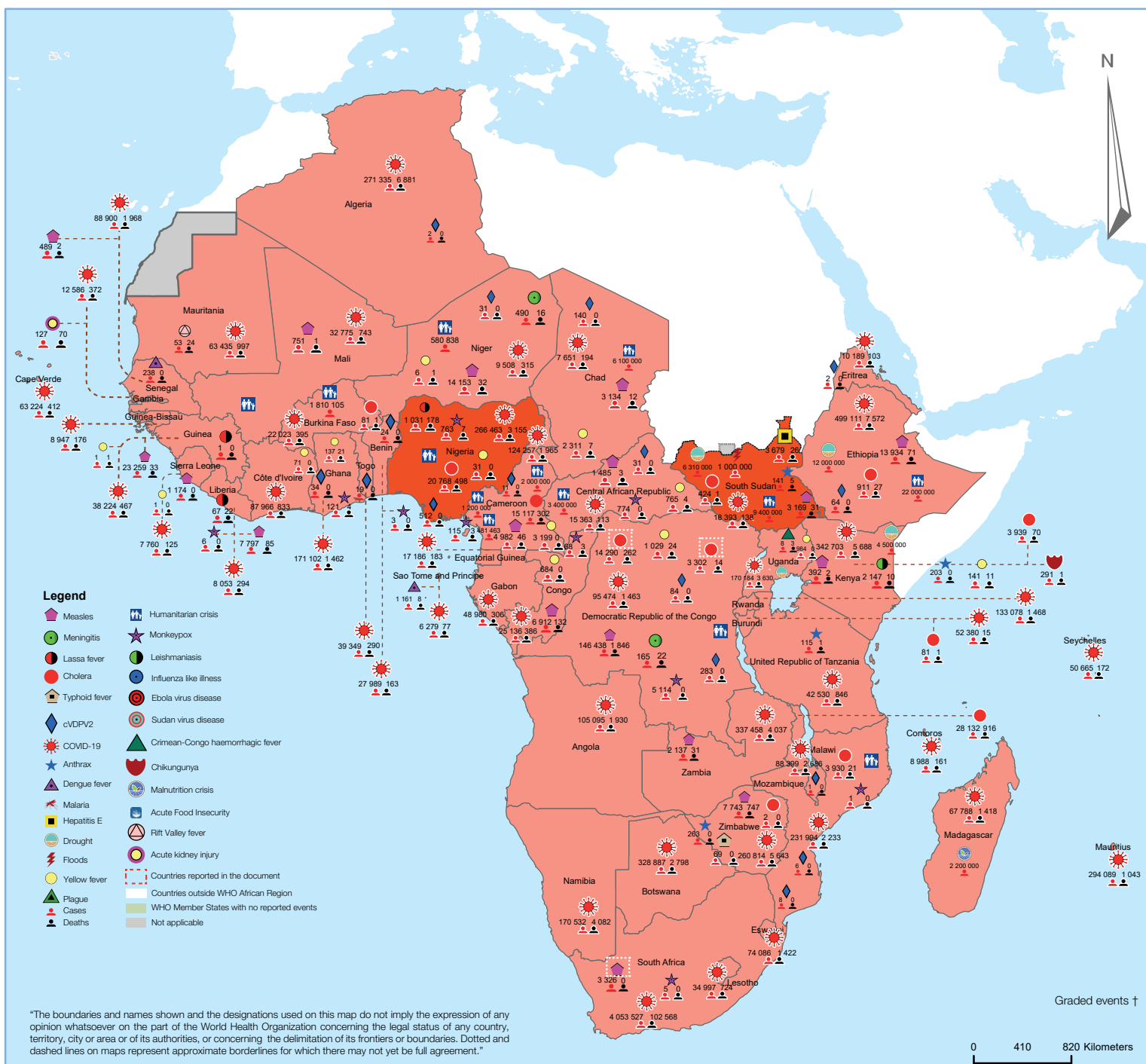
Ongoing events

131

Outbreaks

20

Humanitarian
crises



"The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement."

5

Grade 3 events

22

Grade 2 events

2

Grade 1 events

2

Protracted 3 events

5

Protracted 2 events

0

Protracted 1 events

40

Ungraded events

Overview

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9 All events currently being monitored

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

- [Cholera in the Democratic Republic of the Congo](#)
- [Measles in South Africa](#)
- [Monkeypox in the WHO African Region](#)

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

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

Major issues and challenges include:

- The resurgence of armed conflicts in North-Kivu province of the Democratic Republic of the Congo in March 2022 has resulted in a massive influx of internally displaced populations (IDPs) in Nyiragongo and Karisimbi health zones, leading to an outbreak of cholera. The outbreak is mostly located in IDP camps which are faced with challenges including, overcrowding, poor hygiene and sanitation conditions, and very limited access to drinking water, latrines and basic health services. In addition, infection prevention and control (IPC) and management kits are insufficient to cover the increasing needs, and the bed capacity remains low. Furthermore, the global shortage in case management kits and oral cholera vaccines could hamper quick and efficient containment of this outbreak.
- Although the ongoing measles outbreak in South Africa is seeing a declining trend, outbreak response efforts need to continue. The fall in the number of confirmed cases could be due to poor health seeking behaviour of the communities. Strengthening routine immunisation is paramount in prevention of future outbreaks.

Ongoing events

Cholera

Eastern Democratic Republic of the Congo

3 677
cases

15
Deaths

0.4%
CFR

EVENT DESCRIPTION

Although cholera is endemic in the North-Kivu province of the Democratic Republic of the Congo (DRC), an upsurge in suspected cases of cholera above the epidemic threshold has been observed in Nyiragongo and Karisimbi health zones (HZs) of the same province. The upsurge started respectively from weeks 47 (ending 27 November) and 50 (ending 18 December) of 2022.

In particular, the number of suspected cases of cholera in Nyiragongo HZ increased from 51 cases in week 47 to 556 cases (990% increase) in week 50 and 683 cases (1 239% increase) in the last week of December 2022 (week 52).

Consequently, an outbreak of cholera was officially declared on 14 December 2022, after isolation of *Vibrio cholerae* in stools of suspected cases of cholera in Nyiragongo HZ.

As of 19 January 2023, 3 677 suspected cases of cholera including 15 deaths (CFR 0.4%) have been reported, including 3514 cases and 14 deaths (CFR 0.4%) in Nyiragongo HZ, and 163 cases and one death (CFR 0.6%) in Karisimbi HZ.

Since the beginning of the outbreak, an average of 500 and 60 cases are being notified weekly in Nyiragongo and Karisimbi HZs, respectively. Almost 50% of these cases have been laboratory-confirmed.

In Nyiragongo HZ, the 5-14 years represent the most affected age group (33%), followed by the 1-4 years (29%) and the 15-29 years (17%); the under-one constitute almost 7% of cases. More than 60% of cases present with dehydration, in either moderate (28.6%) or severe (32.1%) form.

A total of 14 health areas including eight in Nyiragongo (Kanyaruchinya, Kibati, Kibumba, Kiziba, Mudja, Munigi, Ngangi III, and Turunga) and six in Karisimbi (Baraka, Bujovu, Kasika, Katoyi, Methodiste, and Mugunga) have so far been affected. In Nyiragongo HZ, Kanyaruchinya is the epicentre of the outbreak, with 73.6% (n=2 586 cases) of cases, followed by Munigi (574 cases; 16.3%) and Kibati (266 cases; 7.6%). In Karisimbi HZ, almost 60% of cases have been reported from Methodiste health area.

The cholera outbreak follows a massive influx of internally displaced populations (IDPs) in Nyiragongo, Karisimbi and other HZs of North-Kivu province, as a consequence of intense armed conflicts between DRC security and defence forces and the non-state armed group.

As a result, more than 450 857 IDPs have abandoned their homes and livelihood, of whom around 53.4% (240 579 IDPs) have settled in Nyiragongo, either in IDP camps (235 111 IDPs; 97.7%) or in host communities, as of 6 December 2022.

These IDP sites do not meet the standards and are characterized by overcrowding, poor hygiene and sanitation conditions, very limited access to drinking water, latrines and basic health services. IDPs represent more than 90% of cases in Nyiragongo

HZ, and almost 40% of cases in Karisimbi HZ. However, there is an extension of the outbreak out of IDP sites within the community, with almost 10% and 60% of cases which originate from host communities, respectively in Nyiragongo and Karisimbi HZs.

PUBLIC HEALTH ACTIONS

Coordination

- The outbreak has been officially declared by the North-Kivu Governor.
- A multi-sectorial coordination mechanism has been set-up at provincial level and daily coordination meetings are being held in Kanyaruchinya (Nyiragongo).
- An incident management system has been activated at the Goma WHO sub-office.
- A number of partners are actively involved in response activities including WHO, UNHCR, IOM, MSF, UNICEF, WFP, GRAM, MEDAIR, JOHANNITER, and Save the Children.
- A costed strategic preparedness and response plan is available.
- A coordination meeting has been put in place at national level to prepare the reactive oral cholera vaccination (OCV) campaign planned for end of January 2023.

Surveillance and laboratory

- Surveillance activities are ongoing, including field investigations, active case finding, alert notification and investigation, and contact tracing and follow-up. On 19 January, 382 alerts were received including three community deaths; of these, 365 alerts (95.5%) were investigated and 335 alerts (91.8%) were validated as suspected cases of cholera.
- Surveillance kits have been provided to teams on ground.
- IT kits have been granted to information management teams, and support is being provided for data entry and management.
- Community health workers have been briefed on the community-based surveillance of cholera.

Case management and psychosocial support

- A total of 34 rehydration points have been put in place and are currently operational. In addition, six case management units are functional including four cholera treatment units (CTUs), one each in Kibati, Kanyaruchinya, Kahembe, and Don Bosco, and two cholera treatment centres (CTCs), one each in Munigi and Kiziba. The total bed capacity is of 205 beds.
- Infection, prevention and control (IPC), and water, sanitation and hygiene (WASH)

[Go to overview](#)

[Go to map of the outbreaks](#)

- IPC interventions are being carried-out both in health care facilities (HCFs) and in the community.
- Twelve priority HCFs have been identified including eight in Nyiragongo and four in Karisimbi.
- Health care workers are being briefed on cholera preventive measures, and IDPs are educated on the importance and practice of hand washing.
- The grid approach (household decontamination) has been set-up in IDP sites and grid teams have been deployed on ground, accordingly.
- Water supply is being closely monitored.
- Risk communication and community engagement
- Community engagement activities are ongoing, targeting traditional authorities and community leaders.
- Mass sensitization, educational talks and household visits are ongoing in all affected areas.
- Messages on the importance of vaccination are under development.

Operations support and logistics

- Case management kits and other materials are being provided in CTUs/CTCs.
- IPC kits are also being made available both in CTUs/CTCs and other HCFs, and in the community.
- The expansion of Don Bosco CTU is ongoing.

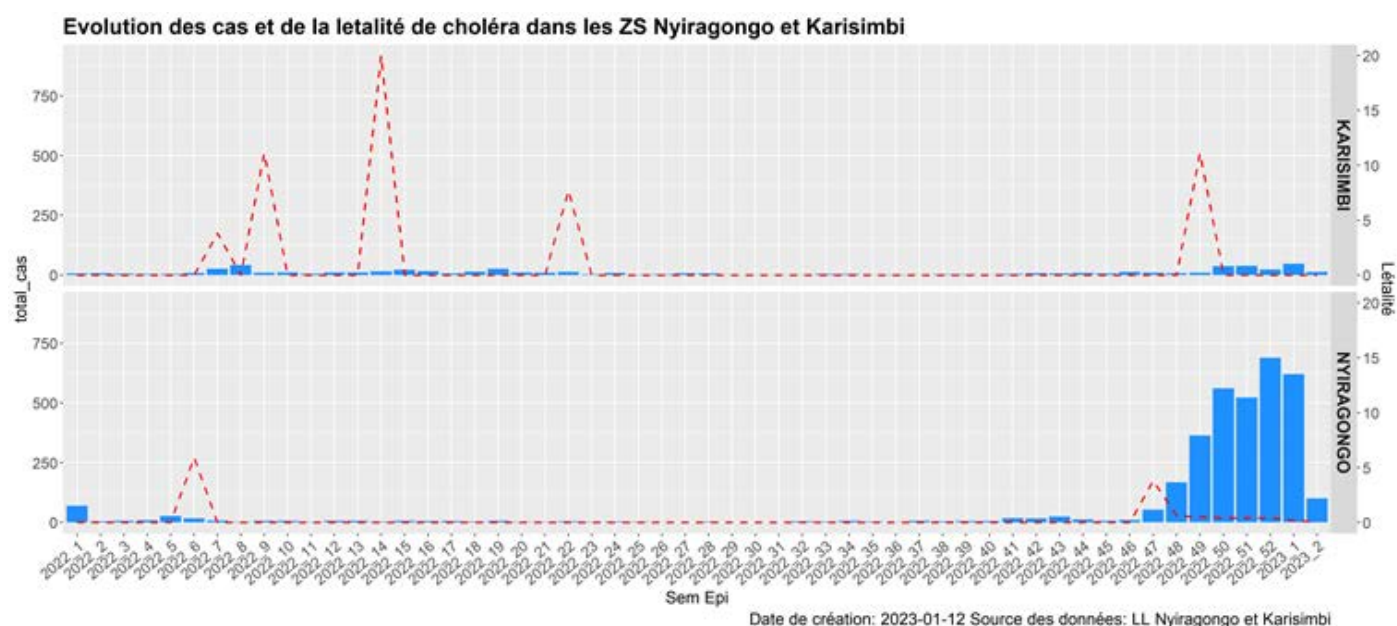
Vaccination

- A reactive OCV campaign is in preparation, scheduled for 25 January 2023, in 11 health areas of Nyiragongo HZ and one health area of Karisimbi HZ, targeting both IDPs and host communities.
- Vaccines have already arrived in Kinshasa and are now being distributed to Goma.

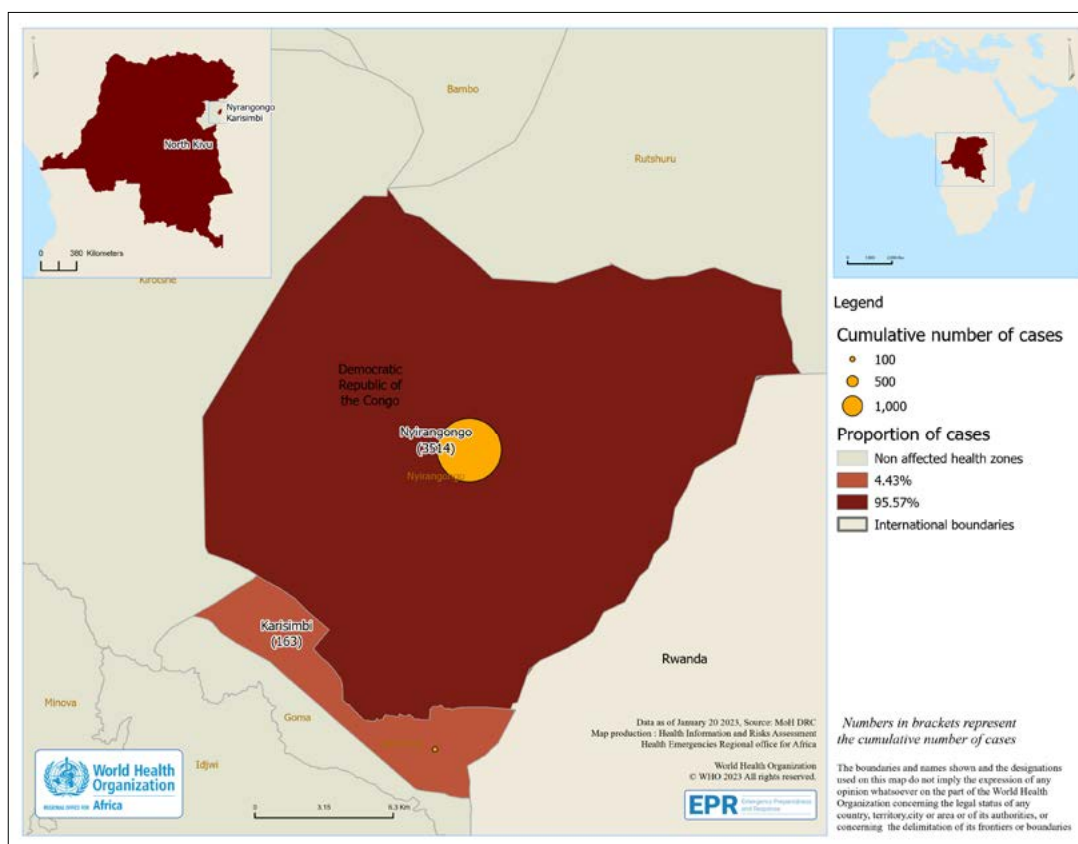
SITUATION INTERPRETATION

The ongoing cholera outbreak has resulted from a massive influx of IDPs in Nyiragongo and other territories, due to ongoing armed conflicts opposing DRC security and defence forces. The likelihood of the situation getting worse is high if the conflict continues to intensify over time with more people arriving in IDP camps. Although the CFR remains low, the proportion of moderate and severe cases is concerning, perhaps inferring late detection and referral of cases. Additionally, there is a high risk of further spread of the disease to other HZs and provinces of the country, given population movements due to the ongoing crisis, poor WASH conditions and very limited access to health care services in those areas, and the current rainy season. There is also a major risk of spread to neighbouring countries considering population movements between DRC and Rwanda or Uganda. Cross-border collaboration and surveillance should be enhanced, accordingly.

Epidemic curve showing suspected cases of cholera in Nyiragongo and Karisimbi health zones of North-Kivu province in DRC by week of notification, as of 12 January 2023



Distribution of cases of cholera in affected health zones in North-Kivu province in the Democratic Republic of the Congo, as of 20 January 2023



@WHO/AFRO

EVENT DESCRIPTION

The Measles outbreak that was declared in Limpopo province on 11 October 2022 continues with an increasing trend.

Since the start of the outbreak on 11 October 2022 to 18 January 2023, the NICD has tested 3 326 serum samples for measles, of which 397 (11.9%) were confirmed measles cases.

As of 18 January, 382 confirmed cases have been reported in the five provinces with active measles outbreaks: Limpopo (145 cases), North West (125 cases), Mpumalanga (79 cases), Gauteng (18 cases), and Free State (15 cases), with Limpopo and North West accounting for 71% of all reported cases. No measles related deaths have been reported.

The age of reported cases across the five affected provinces ranges from two months to 60 years. Children between the 5-9 years age group are the most affected 153 (40%), followed by 112 (29%) in the 1-4 years age group and 64 (17%) in the 10-14 year group. Disease severity has been observed within the less than 1-year age group as evidenced by majority of health facility admissions in this age-group (56%).

The highest attack rate has been observed among the 5-9 (5.9 per 100 000 population) and 1-4 years (5.0 per 100 000 population) age groups.

Vaccination status for laboratory-confirmed measles cases in provinces with a declared measles outbreak indicates that 75 (20%) have known vaccination status, while 175 have an unknown vaccination history.

EVENT DESCRIPTION

The South African Health authority are supporting the following activities in response to the measles outbreak. The public health response to the measles outbreak in provinces is targeted at improving measles immunity in all affected provinces.

- Provinces are currently conducting vaccination campaigns in the affected areas. Routine immunization should be reinforced as the outbreak is an opportunity to identify and correct vaccination programme weaknesses.
- Routine Immunization has been strengthened in affected districts and provinces
- Strengthening surveillance and coordination of the response to the outbreak implemented at both provincial and district levels is ongoing.
- Follow up on laboratory-confirmed measles cases for case management support

- Follow up and vaccinate the contacts of laboratory confirmed cases.
- Continue to support the response with additional logistics including, medicines and medical consumables for case management.

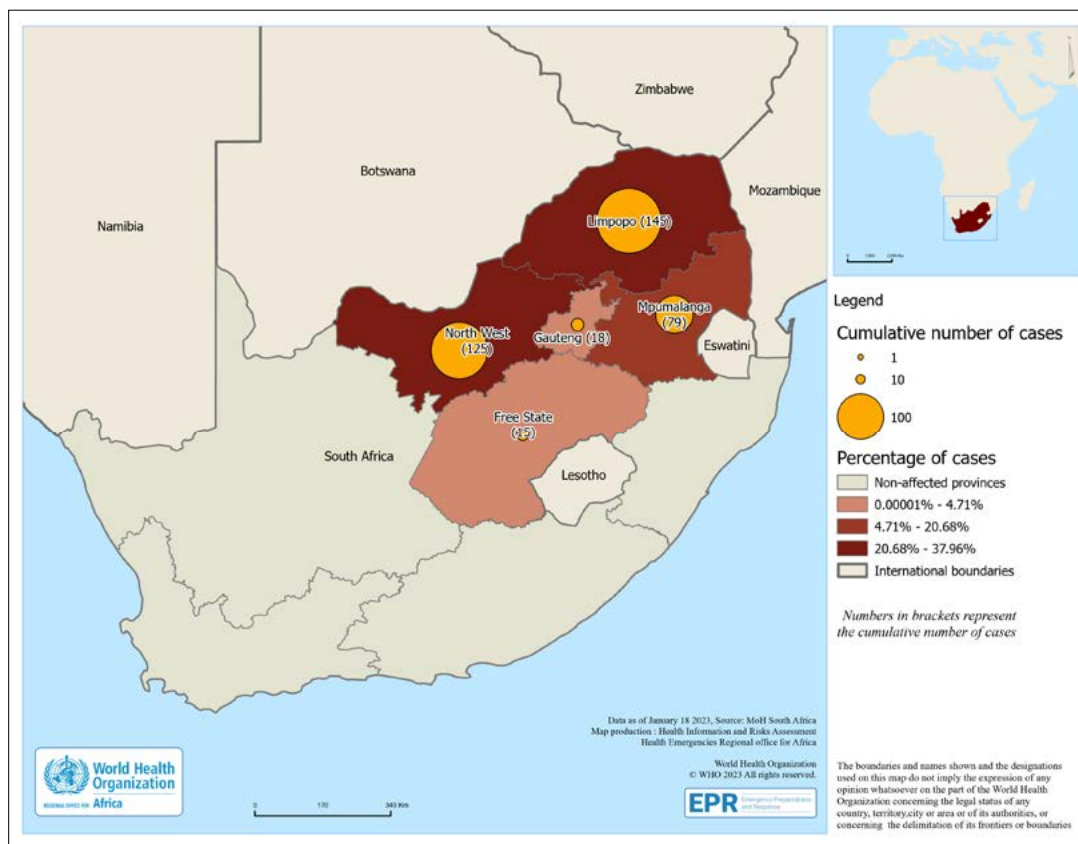
SITUATION INTERPRETATION

South Africa has seen a declining trend in the number of laboratory-confirmed measles cases. Even when this may signify decreasing transmission rates, other reasons for the decline in cases may have arisen through decreased health seeking behaviour. Clinicians should be on high alert as the opening of schools may lead to localised outbreaks where vaccination rates are sub-optimal. Vaccination strengthening efforts must continue to get the outbreak under control.



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Distribution of cases of measles in affected provinces in South Africa, as of 18 January 2023



@WHO/AFRO

Mpox (Monkeypox)

Multiple Countries

1 319
cases

17
Deaths

1.3%
CFR

EVENT DESCRIPTION

Eighty-one newly confirmed mpox cases have been reported in Africa since the beginning of the year 2023 from Nigeria and the Democratic Republic of the Congo (DRC).

Nigeria reported 12 newly confirmed cases, nine cases in week 1 (ending 8 January) and three cases in week 2 (ending 15 January). Out of the 36 States in Nigeria, mpox cases have been reported from 34 states and the Federal Capital Territory FCT since 2022. Only Sokoto and Jigawa States have not reported mpox cases since the outbreak. Eight states (Lagos, Abia, Imo, Bayelsa, Ondo, Ogun, Rivers, and Delta) are responsible for over 63.4% of all confirmed cases. There is an ongoing contact tracing follow-up of the contacts of the newly confirmed cases.

In the same period, DRC reported 69 newly confirmed cases which include, 51 in week 1 and 17 in week 2, respectively. Sixty-four (92.7%) of the 69 cases confirmed in 2023 were from three regions (Maniema, Sankuru, and Tshuapa). Almost 90% (23/26) of the provinces are being affected.

However, there is an ongoing collaboration between the WHO, The Food and Agriculture Organization (FAO) and Environmental Surveillance Division team for joint interventions with a One-Health approach in response to mpox in the country.

Between 1 January 2022 and 22 January 2023, 1 319 laboratory-confirmed cases have been reported from 13 African countries, including Nigeria (775), the Democratic Republic of the Congo (348), Ghana (121), Sudan (18), Cameroon (18), Central African Republic (CAR) (13), Liberia (6), Congo (5), South Africa (5), Benin Republic (3), Morocco (3), Egypt (1), and Mozambique (1).

The top three countries with the highest number of confirmed cases include Nigeria (58.8%; n = 775), DRC (26.4%; n = 348), and Ghana (9.2%; n = 121). Together, the three countries accounted for 94.4% (n = 1,244) of all confirmed cases.

Nine countries: Benin, Cameroon, CAR, Congo, Liberia, Morocco, Mozambique, South Africa, and Sudan, have not reported any new cases in the past five weeks. Ghana and Egypt have not reported new cases in 28 days.

Seventeen (17) deaths have been reported in the African region since 2022 from Nigeria (8), Ghana (4), Cameroon (3), Mozambique (1), and Sudan (1).

- Ongoing technical support for the countries to identify target groups for mpox vaccination
- The WHO is supporting countries financially and technically to investigate modes of transmission and characterize mpox cases in the region.

SITUATION INTERPRETATION

Newly confirmed mpox were reported from Nigeria and the Democratic Republic of the Congo in the past week. An additional new mpox death was recorded in the past week from Nigeria.



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PUBLIC HEALTH ACTIONS

- Ongoing finalization of the terms of reference for the WHO technical support mission for mpox response in DRC.
- Upcoming workshop for harmonizing response pillar tools in the Democratic Republic of the Congo from 26 - 30 January 2023.



22 Countries
out of 47,
reported for
week 02

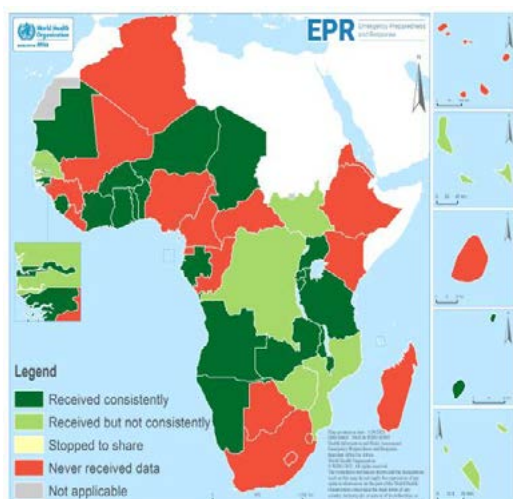
38 %
Timeliness
for weekly
reporting

47 %
Completeness
for weekly
reporting

Update on Reporting - Epidemiological Week 02: 09– 15 Jan., 2023

Point du rapportage hebdomadaire – Semaine 02: 09 – 15 Jan., 2023

2022 Summary of Reporting - Frequency of weekly reports received at AFRO



Please, refer to the calendar below to submit your IDSR data on a weekly basis :

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

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2023

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

	Week 2	Week 3	Week 4	Week 5
Start date	09-Jan-2023	16-Jan-2023	23-Jan-2023	30-Jan-2023
End date	15-Jan-2023	22-Jan-2023	29-Jan-2023	04-Feb-2023
Deadline / Date limite	18-Jan-2023	25-Jan-2023	01-Feb-2023	08-Feb-2023

All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	22-Jan-23	271 335	271 335	6 881	2.5%
From 25 February 2020 to 15 January 2023, a total of 271 335 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 182 716 recovered.									
Algeria	Poliomyelitis (cVDPV2)	Grade 2	14-Jul-22	11-Apr-22	11-Jan-23	2	2	-	-
According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains two.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	29-Dec-22	105 095	105 095	1 930	1.8%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 29 December 2022, a total of 105 095 confirmed COVID-19 cases have been reported in the country with 1 930 deaths and 103 050 recoveries.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	9-Jan-23	27 989	27 989	163	0.6%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 9 January 2023, a total of 27 989 cases have been reported in the country, with 163 deaths and 27 823 recoveries.									
Benin	Mpox	Grade 3	14-Jun-22	14-Jun-22	8-Jan-23	3	3	0	0.0%
Three suspected cases of Monkeypox were notified to WHO by the Benin Ministry of Health on 3 June 2022. Two of the three suspected cases were from Nigeria, and one person was from the North of the country. Laboratory samples were taken and sent to the Institute Pasteur laboratory in Dakar, which confirmed the three samples positive on 14 June 2022.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	24-Aug-19	11-Jan-23	24	24	0	0.0%
No cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There are 10 cases reported in 2022. Six cases were reported in 2021 and 2020, and 8 in 2019. No new cases were reported in 2023.									
Botswana	COVID-19	Grade 3	30-Mar-20	30-Mar-20	14-Jan-23	328 887	328 887	2 798	0.9%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 14 January 2023, a total of 328 887 confirmed COVID-19 cases were reported in the country including 2 798 deaths.									
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	1-Jan-19	1-Jan-19	30-Nov-22	1 810 105	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated due to attacks by armed groups. A total of 1 810 105 displaced persons are registered in Burkina Faso as of 30 November 2022. Access to health services remains a challenge for the population in affected areas. There are 192 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	9-Jan-23	22 023	22 023	395	1.8%
Between 9 March 2020 and 9 January 2023, a total of 22 023 confirmed cases of COVID-19 with 395 deaths and 21 621 recoveries have been reported from Burkina Faso.									
Burundi	Cholera	Ungraded	1-Jan-23	1-Jan-23	15-Jan-23	81	66	1	1.2%
An outbreak of cholera has been declared in Burundi on 1 January 2023. As of 15 January, 81 suspected cases and one death (CFR 1.2%) have been reported, including 66 laboratory-confirmed cases. Almost 46.7% of cases (n=38) are females, with a male/female sex ratio of 1.1. The most affected age group is the 21-30 years (18 cases, 22.2%); the under-five represent 17.3% of cases (n=14). Twenty-one (21) health areas have reported one or several cases, distributed in five districts including Budjumbura North (32 cases), Cibitoke (25 cases), Isale (21 cases), Bujumbura Centre (two cases), and Bujumbura South (one case).									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	7-Jan-23	52 380	52 380	15	0.0%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 6 January 2023, the total number of confirmed COVID-19 cases is 52 380, including 15 deaths and 51 855 recovered.									
Cameroon	Humanitarian crisis (North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	30-Dec-22	481 463			-
As a result of the ongoing crisis in Far-Northern Cameroon and neighbouring countries, there has been a massive influx of internally displaced populations and refugees in Adamawa, North and East regions. For 2022, there is an estimated 481 463 refugees and asylum seekers in Cameroon, including more than 325 000 refugees coming from Central African Republic.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	30-Dec-22	2 000 000	-	-	-
The humanitarian situation in the NWSW regions remained dire, marked by continued violent attacks on schools and children, as well as on healthcare. Continued fighting between non-State armed groups (NSAGs) and State security forces (SSF) led to the killing and displacement of civilians. Parties to the conflict continue to attack or hamper healthcare services accusing health personnel of supporting either side. Civilians continue to be caught in crossfire due to frequent clashes between NSAGs and SSF as well as clashes between different NSAG factions competing for power and control over localities. Humanitarian activities continue to be hampered by roadblocks, theft of humanitarian supplies, bureaucratic impediments, and risk of IEDs in public spaces and roads used by humanitarians.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (Sahel Region)	Grade 2	31-Dec-13	27-Jun-17	30-Dec-22	1 200 000	-	-	-
The security situation in the Far-North region of Cameroon remains volatile. The Mayo-Sava department concentrates the greatest number of incidents in November. In the Mayo-Tsanaga department, attacks of NSAGs led to the displacement of more than 2 935 households (24 192 people) and for which humanitarian assistance remains insufficient. Moreover, floods continued in several localities of Logone & Chari department, while a drop in water was observed in the Mayo-Danay department. In addition to physical access difficulties, limited financial resources remain a constant concern and a major constraint to humanitarian response in Far-Northern Cameroon.									
Cameroon	Cholera	Grade 2	31-Aug-21	25-Oct-21	5-Jan-23	15 117	1 805	302	2.0%
Between 30 December 2022 and 5 January 2023, nine new suspected cases of cholera with no deaths have been reported in two Regions: Littoral (eight cases), and Centre (one case). As of 5 January 2023, 15 117 suspected cases including 1 802 laboratory-confirmed cases and 302 deaths (CFR 2.0%) have been reported since October 2021, from eight Regions and 52 Districts of which five remain active in two Regions. Patients' ages range from 2 months to 103 years with a median of 27 years, and females remain twice less affected than males.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	8-Jan-23	124 257	124 257	1 965	1.6%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 8 January 2023, a total of 124 257 cases have been reported, including 1 965 deaths and 122 223 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-22	31-Dec-22	4 982	2 642	46	0.9%
In 2022, from week 1 to week 52, a total of 4 982 suspected measles cases with 46 measles related deaths (CFR 0.9%), 2 642 total confirmed cases by: lab investigation (605 IgM+); epi-linkage (1 971) and measles compatible 66 cases have been reported. A total of 65 health have had outbreaks in the year ; 72% of confirmed cases (lab, epi link, compatible) are not vaccinated or unknown measles vaccination status. The number of deaths has been revised.									
Cameroon	Mpox	Grade 3	24-Feb-22	1-Jan-22	5-Jan-23	115	18	3	2.6%
From 30 December 2022 to 5 January 2023, one new suspected case of Mpox was reported from Tombel district of South-West region. Between 1 January 2022 and 5 January 2023, the country has notified 115 suspected cases of Mpox from 23 districts across seven regions, including 18 laboratory-confirmed cases and three deaths (CFR 2.6%). Males are slightly more affected than females (sex ratio M/F 3/2). Ages range from six months to 53 years with a median of 12.5 years; the under-five represent the most affected age group (n=21; 19.8%).									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	23-May-19	1-Jan-20	11-Jan-23	11	11	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Cameroon during epi week 1, 2023 (ending 8 January). There was one case reported in 2022, three cases reported in 2021 and seven cases reported in 2020. No case has yet been reported for 2023, as of 11 January 2023.									
Cameroon	Yellow Fever	Grade 2	7-Feb-21	4-Jan-21	1-Jan-23	3 199	38	0	0.0%
As of 1 January 2023, 3 199 suspected cases of YF have been reported and investigated since February 2021, including 63 probable and 38 laboratory-confirmed cases. Nine suspected cases have been reported during epi week 52, 2022.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	18-Jan-23	63 224	63 224	412	0.7%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 18 January 2023, a total of 63 224 confirmed COVID-19 cases including 412 deaths and 62 752 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	13-Jan-23	3 400 000	-	-	-
The humanitarian crisis in the Central African Republic (CAR) continues to deteriorate. As a result of violence against civilians and insecurity in areas outside urban centres, several million people are increasingly vulnerable and their livelihoods are eroding. Their access to food and basic services such as health care and water supply is drastically limited. In 2023, 3.4 million people will need humanitarian assistance and protection, an increase of 10% compared to 2022. Notwithstanding, humanitarian partners in CAR have provided life-saving multi-sectoral assistance to 1.5 million people during the first nine months of 2022, despite a volatile security context.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	1-Jan-23	15 363	15 363	113	0.7%
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 1 January 2023, a total of 15 363 confirmed cases, 113 deaths and 15 200 recovered were reported.									
Central African Republic	Measles	Ungraded	13-Mar-22	1-Jan-22	31-Dec-22	1 485	148	3	0.2%
In 2022, from week 1 through week 52 , a total of 1 485 suspected cases of measles and three deaths (CFR 0.2%) were reported through Integrated Diseases Surveillance and Response (IDSR) system. Among cases reported, 148 are confirmed including 99 laboratory-confirmed and 49 by epidemiological link. A total of 10 districts confirmed measles outbreaks: Bangui 1 confirmed at week 33; Batangafo-Kabo at week 30, Ouango-Gambo at week 30, Bimbo at week 10, Kouango-Grimari at week 11, Alindao at week 14 , Haute-Kotto at week 20, Kembé-Satema at week 41, Bocaranga-Koui at week 43 and Mobaye-Zangba at week 46. About 97% of districts (34/35) investigated the outbreak and collected sample for at least one suspected measles case									
Central African Republic	Mpox	Grade 3	3-Mar-22	4-Mar-22	11-Dec-22	774	13	0	0.0%
From 1 January to 14 December 2022, Central African Republic has reported 13 laboratory-confirmed cases of monkeypox with no deaths. The last confirmed case was reported on 3 November from Bayanga in Sangha-Mbaéré district. Cumulatively, six districts have so far been affected: Sangha-Mbaéré, Bangui I, Alindao, Bimbo, Ouango-Gambo and Bangassou. Men represent 69.2% (n=9) of cases; ages range from 4 to 40 years with a median of 18 years. The 0-14 years represent 38.5% (n=5) of cases.									
Central African Republic	Poliomyelitis (cVDPV2)	Grade 2	24-May-19	24-May-19	11-Jan-23	31	31	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this epiweek 1, 2023 (ending 8 January). There are six cases reported in 2022. Although no new cases were reported in 2021, 4 cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.									

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	17-Aug-21	1-Apr-21	29-Nov-22	765	23	4	0.5%
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. As of 29 November 2022, 765 suspected cases of YF have been reported including 6 probable and 23 lab-confirmed cases. Four suspected cases were reported on week 46, 2022 (ending 20 November). In total, five regions have so far been affected including RS1, RS2, RS3, RS4 and RS6; RS3 has reported 70% of confirmed cases.									
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-22	1-Mar-16	15-Jan-23	6 100 000	-	-	-
The Lac Chad province is experiencing a double security and environmental crisis. Since 2015, the region is impacted by attacks of non-state armed groups (NSAG) which have forced local communities to flee their homes. The province experienced heavy rainfall which has affected some 229 000 people between October and December 2022, and has destroyed large surfaces of cropland, washed away more than 6 000 of cattle, and caused extensive damage to homes and schools. The floods added a new challenge to an already critical situation.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-22	15-Jan-23	7 651	7 651	194	2.5%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 15 January 2023, a total of 7 651 confirmed COVID-19 cases were reported in the country including 194 deaths.									
Chad	Measles	Ungraded	24-May-18	1-Jan-22	31-Dec-22	3 134	194	12	0.4%
From January through December 2022, a total of 3 134 suspected measles cases and 12 deaths (0.4%) were reported through Integrated Diseases Surveillance and Response system. A total of 13 districts with confirmed outbreaks. Among confirmed cases, 47.5% are below 5 years of age and only 17.5% known to have received the measles vaccine.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	11-Jan-23	140	140	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported on week 1, 2023 (ending 8 January). A total of 25 cVDPV2 cases were reported in 2022. In addition, there were 106 cVDPV2 cases reported in 2020 from three different outbreaks, while nine other cases were reported in 2019.									
Chad	Yellow Fever	Grade 2	13-Nov-21	1-Nov-21	25-Dec-22	2 311	30	7	0.3%
On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 25 December 2022, 2 491 suspected cases of yellow fever have been reported. Of these, 1 910 cases have been investigated, including 25 probable and 31 lab-confirmed cases. A total of 74 deaths have been reported (CFR 3.0%) including one among probable and six among confirmed cases. In 2022, 1 388 suspected cases were reported, including 12 probable and 12 lab-confirmed cases. A total of 27/126 districts in 10/23 provinces have been affected since the beginning of the outbreak.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	15-Jan-23	8 992	8 992	161	1.8%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 15 January 2023, a total of 8 992 confirmed COVID-19 cases, including 161 deaths were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	25-Dec-22	25 136	25 136	386	1.6%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 24 November 2022, a total of 25 136 cases including 386 deaths and 23 644 recovered cases have been reported in the country.									
Congo	Measles	Ungraded	14-Mar-22	1-Jan-22	31-Dec-22	6 912	6 717	132	1.9%
From week 1 through week 52, 2022 (ending 1 January 2023), a total of 6 912 suspected measles cases were reported in Congo including 6 717 confirmed (6 385 through epi-link and 332 laboratory), about 132 deaths registered (CFR 1.9%). A reactive measles vaccination campaign was organized from 4 to 11 August 2022. Three districts (Alima, Madingou, Makélékélé) experienced measles outbreak 28 days after the reactive campaign. The total number of confirmed cases have been revised									
Congo	Mpox	Grade 3	23-May-22	1-Jan-22	15-Jan-23	68	5	3	4.4%
From 1 January 2022 to 15 January 2023, the Republic of Congo has reported 68 suspected cases of monkeypox including five probable and five laboratory-confirmed cases, with three deaths among the probable (CFR 4.4%). The suspected cases have been reported from four Departments and nine Districts. Impfondo is the epicentre of the outbreak, with five probable and two confirmed cases. The other confirmed cases have been detected in Ouessou (2) and Ngoyo (1) Districts. Sixty percent of the probable and confirmed cases are females, and 40% are aged less than 10 years.									
Congo	Yellow Fever	Grade 2	31-May-21	1-Jan-21	31-Dec-22	684	4	0	0.0%
From January 2021 through December 2022, a total of 684 yellow fever suspected cases have been reported in Congo, four cases were confirmed, two for 2021 and two in 2022									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	22-Jan-23	87 966	87 966	833	0.9%
Since 11 March 2020, a total of 87 966 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 833 deaths, and a total of 87 128 recoveries.									
Côte d'Ivoire	Yellow Fever	Grade 2	14-Sep-21	13-Aug-21	29-Nov-22	71	8	0	0.0%
From 13 August 2021 to 29 November 2022, a total of 63 probable and eight confirmed cases of yellow fever were recorded in Côte d'Ivoire, with no deaths.									
Countries	Floods in West and Central Africa	Ungraded	16-Aug-22	16-Aug-22	19-Dec-22	5 900 000	-	-	-
In 2022, the worst flooding in years affected over 5.9 million people in West and Central Africa countries. On 13 December, the Democratic Republic of Congo (DRC), suffered heavy rains in Kinshasa killing more than 141 people and affected nearly 38 800 families. In Cameroon, since 15 November, floods have affected more than 54 800 new people in the Logone et Chari alone. This brings the number of people affected in the region to over 310 000 as of 13 December. In Mali, the humanitarian situation was marked by the flooding of more than 1 000 hectares in the commune of Alafia, region Timbuktu region, which led to population movements									

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	27-Nov-22	-	-	-	-
Since the beginning of 2022, more than 1.56 million people have been in a situation of internal displacement (IDPs) in the DRC. In North Kivu, MONUSCO reported that 131 civilians were killed on 29-30 Nov in Rusthuru Territory injuring 8 people with 60 others abducted. In Irumu territory of Ituri Province, approximately 4 980 were displaced between 18-25 Nov as people fled clashes between elements of armed groups in the localities Walu, Balazana, Bunda, Sota, and Kombokabo and were mainly in the area of Tser where they face pressing needs for access to food and essential household items.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	3-Jan-22	30-Dec-22	14 290	1 356	262	1.8%
From epidemiological week 1 to 47 (ending 27 November 2022), 14 290 suspected cholera cases, including 262 deaths (CFR: 1.7%), were recorded in 97 health zones across 17 provinces of the Democratic Republic of the Congo. Suspected cases have mostly been reported from South Kivu (4 519), Haut-Lomami (2 727), Tanganyika (2 840), and North Kivu (2 599). Karisimbi and Nyiragongo health zones are among the cholera hotspot sites in North Kivu province. The number of cholera cases increased in Nyiragongo and Karisimbi health zones from weeks 47 and 50 of 2022, respectively. Since then, there has been a steady weekly increase in the number of new cases in Nyiragongo Health Zone, up to 720 new cases at week 52 in 2022.									
Democratic Republic of the Congo	Cholera	Ungraded	14-Dec-22	1-Jan-23	9-Jan-23	3 302		14	0.4%
An outbreak of cholera was officially declared in North Kivu province of DRC on 14 December 2022, following a massive influx of IDPs in Nyiragongo and Karisimbi health zones (HZs). Between week 47, 2022 (21-27 November) when the epidemic threshold was crossed and 9 January 2023, a cumulative of 3 302 suspected cases of cholera including 14 deaths (CFR 0.4%) have been reported, including 3 098 cases and 13 deaths (CFR 0.4%) in Nyiragongo HZ, and 204 cases and one death (CFR 0.5%) in Karisimbi HZ. In Nyiragongo HZ, the health area of Kanyaruchinya is the epicenter of the outbreak, with 76.7% (2 375 and 13 deaths) cases. IDPs represent almost all (2 812 cases; 90.8%) of the cases reported in Nyiragongo HZ. However, there is an extension of the outbreak outside the IDP sites towards the host communities.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	15-Jan-23	95 474	95 472	1 463	1.5%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 95 472 confirmed cases and two probable case, including 1 463 deaths have been reported. A total of 84 227 people have recovered.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	31-Dec-22	146 438	2 852	1 846	1.3%
In 2022, a total of 146 438 suspected measles cases and 1 846 measles-related deaths (CFR 1.3%) were reported , 6 740 of these cases have been investigated and 2 852 measles IgM positive, and 1 412 rubella IgM positive . About 62% of laboratory confirmed measles cases are children under five years of age, and only 35% have history of measles vaccination.									
Democratic Republic of the Congo	Mpox	Grade 3	30-Mar-19	1-Jan-22	31-Dec-22	5 114	279	0	0.0%
From 1 January – 31 December 2022, the Democratic Republic of the Congo (DRC) reported 5 114 suspected cases including 279 confirmed from 23 out of 26 provinces. All confirmed cases belong to Clade I.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV1)	Grade 2	27-Aug-22	27-Aug-22	18-Jan-23	84	84	0	0.0%
According to the Global Polio Eradication Initiative (GPEI), 16 cVDPV1 cases were reported; two each in Haut Katanga and Tanganyika and 12 in Haut Lomami bringing the number of cVDPV1 cases in 2022 to 84.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-21	1-Jan-21	18-Jan-23	283	283	0	0.0%
According to the Global Polio Eradication Initiative (GPEI), 19 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported ; five each in Haut Katanga and Haut Lomami, one each in Nord Ubangi and Tsope and seven in Tanganyika bringing the total number of cVDPV2 cases in 2022 to 255 and 28 in 2021.									
Democratic Republic of the Congo	Suspected meningitis	Ungraded	31-May-22	2-Jun-22	30-Dec-22	165		26	15.8%
The suspected meningitis outbreak is still ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 30 December 2022, a total of 165 suspected cases with 26 deaths (CFR 15.8%) have been reported. Three health areas are the hotspots: Mangi, Bongonza and Akuma. Cerebrospinal fluid samples have been collected and laboratory investigations are ongoing.									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-21	1-Jan-22	25-Dec-22	1 029	6	24	2.3%
From week 1 trough week 51, 2022 (ending 25 December), a total of 1 029 suspected cases of yellow fever have been reported in the country with six confirmed cases and one death among confirmed cases (CFR 16.7%) . The total deaths reported among all suspected cases are 24 (CFR 2.3%) and ten cases have been classified as probable cases.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	2-Jan-23	17 186	17 186	183	1.1%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 2 January 2023, a total of 17 186 cases have been reported in the country with 183 deaths and 16 880 recoveries.									

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	30-Oct-22	10 189	10 189	103	1.0%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 30 October 2022, a total of 10 189 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 10 085 patients have recovered from the disease.									
Eritrea	Poliomyelitis (cVDPV2)	Grade 2	2-Jun-22	7-Jun-22	11-Jan-23	2	2	0	0.0%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported on week 1, 2023 (ending 8 January). There has so far been one case reported in 2022 and another one reported in 2021. This latter one was however confirmed on 2 June 2022 by the Ethiopian National Polio laboratory.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	15-Jan-23	74 086	74 086	1 422	1.9%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 16 March 2020. As of 15 January 2023, a total of 74 086 cases have been reported with 1 422 associated deaths.									
Ethiopia	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	5-Jan-23	12 000 000	-	-	-
In eastern and southern Ethiopia, communities continue to suffer from the devastating drought affecting the Horn of Africa. Livelihoods of vulnerable pastoralists and agro-pastoralists continue to be severely eroded driving food insecurity and malnutrition. It is estimated that more than 4.5 million livestock have died since late 2021, and at least 30 million weakened and emaciated livestock are at risk. At present, nearly 12 million people are estimated to be food insecure, and 8.6 million people are being targeted for water, sanitation and hygiene assistance across the drought-affected areas. The drought is also causing a health crisis where health risks related to complications from malnutrition and disease outbreaks have increased at a time when access to health services has decreased.									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	5-Jan-23	22 000 000	-	-	-
Humanitarian partners have assisted more than 3.3 million people representing 61% of the total planned caseload of 5.4 million people in Tigray under the current round (Round 2) of food distribution for 2022. In Afar Region, malnutrition rates remain critical in at least four of the five targeted zones. Some 30 woredas reported the average global acute malnutrition above 15% which categorized as critical. In Oromia Region, despite an increased humanitarian need, the humanitarian access situation remains very challenging and impacting humanitarian operations in Guji and West Guji zones, with ongoing conflict induced displacement in the region.									
Ethiopia	Cholera	Ungraded	17-Sep-22	17-Sep-22	15-Jan-23	911	27	27	3.0%
A cholera outbreak has been ongoing in Ethiopia since 27 August 2022. The index case was reported from Bekay Kebele, Oromia Region and the outbreak was confirmed on 9 September. As of 15 January 2023, a total of 911 suspected cases of cholera have been reported including 712 cases from Oromia region and 199 cases from Somali region. Around 27 of these cases have been laboratory-confirmed through culture. Twenty-seven (27) deaths have been reported, for a CFR of 3.0%. A total of 66 kebeles (villages) have so far been affected, distributed in ten woredas. About 191 suspected cases of cholera were also reported in IDP locations.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	15-Jan-23	499 111	499 111	7 572	1.5%
Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 499 111 cases of COVID-19 as of 15 January 2023, with 7 572 deaths and 485 313 recoveries.									
Ethiopia	Measles	Ungraded	13-Apr-17	1-Jan-22	31-Dec-22	13 934	8 554	71	0.5%
In 2022, a total of 13 934 suspected measles cases were reported in Ethiopia including 8 554 confirmed and 71 deaths (CFR 0.5%) , the number of deaths was revised.									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-22	11-Jan-23	64	64	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week 1 of 2023 (ending 8 January). There was one case reported in 2022. In addition, ten cases were reported in 2021, 38 in 2020 and 15 in 2019.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	16-Jan-23	48 980	48 980	306	0.6%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 2 January 2023, a total of 48 980 cases including 306 deaths and 48 668 recoveries have been reported in the country.									
Gambia	Acute kidney injury	Grade 2	1-Aug-22	27-Jun-22	23-Dec-22	127	82	70	55.1%
On 1 August 2022, the Epidemic and Disease Control Unit of the Ministry of Health in The Gambia reported an unusual event detected at the main tertiary hospital in the country. The highest number of cases was among children under two years of age. The index case was traced to 4 July 2022. Patients presented with symptoms such as inability to urinate, fever, vomiting, and diarrhoea. Samples of medicines taken by these children were sent for toxicology testing, and four of the medicines were found to contain diethylene glycol and ethylene glycol. As of 23 December 2022, 127 cases were reported including 82 confirmed, six probable and 39 suspected cases. Of the confirmed cases, 70 deaths were recorded (CFR 85.4%). The last confirmed case was identified on 5 October 2022. Response activities are going on.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	4-Nov-22	12 586	12 586	372	3.0%
The first COVID-19 confirmed case was reported in The Gambia on 17 March 2020. As of 4 November 2022, a total of 12 586 confirmed COVID-19 cases including 372 deaths, and 12 189 recoveries have been reported in the country.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	17-Jan-23	171 102	171 102	1 462	0.9%
As of 17 January 2023, a total of 171 102 confirmed COVID-19 cases have been reported in Ghana. There have been 1 462 deaths and 169 627 recoveries reported.									
Ghana	Mpox	Grade 3	8-Jun-22	24-May-22	10-Jan-23	121	121	4	3.3%
On 8 June 2022, the Director General of the Ghana Health Service confirmed that five cases of monkeypox have been detected in the country. From 24 May-10 January 2023, there have been 121 confirmed and four deaths reported from 13 over 16 administrative regions, with the Greater Accra region reporting the most cases. Of the confirmed cases, 64 (62 %) are males. The age of confirmed cases ranges from 13 days to 67 Years (min-max).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ghana	Poliomyelitis (cVDPV2)	Grade 2	23-Aug-19	23-Jul-19	11-Jan-23	34	34	-	-
According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are three cases in 2022. No cases were reported in 2021. In addition, 12 cases were reported in 2020, and 19 were reported in 2019.									
Ghana	Yellow Fever	Grade 2	25-Oct-21	25-Oct-21	29-Nov-22	137	62	21	15.3%
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 29 November 2022, a total of 75 probable and 62 confirmed cases of yellow fever were reported from 13 regions in Ghana. Of the reported cases, nine deaths were recorded among probable cases and 12 deaths among confirmed cases.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	2-Jan-23	38 224	38 224	467	1.2%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 2 January 2023, a total of 38 224 cases, including 37 295 recovered cases and 467 deaths, have been reported in the country.									
Guinea	Lassa Fever	Ungraded	10-Dec-22	8-Dec-22	4-Jan-23	1	1	0	0.0%
One confirmed case of Lassa Fever was notified on 8 December 2022 in the Health District of Gueckedou. It is a female patient greater than 60 years old. A total of 27 contacts were identified and are being followed. Public health response activities are ongoing, including the in-depth epidemiological investigation to determine the source of infection. Since the notification of the first case on 8 December, no new case of confirmed Lassa fever was reported in the country, and the confirmed case was released from the hospital on 29 December 2022. The countdown to declare the end of this outbreak has started.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-22	31-Dec-22	23 259	432	33	0.1%
Since the beginning of 2022 up to week 52 (ending 31 December), a total of 23 259 suspected measles cases with 432 confirmed and 33 death (CFR 0.1%) have been reported in Guinea through the Integrated disease surveillance and response.									
Guinea	Yellow Fever	Ungraded	6-Jan-23	4-Jan-23	4-Jan-23	1	1	1	100.0%
On 20 November 2022, a suspected case of yellow fever was reported from Dabola health district, Faranah health region, in Guinea. This is a 9-years-old child who died and whose yellow fever vaccination status is unknown. The sample collected on 22 November 2022 was positive for Enzyme-linked immunosorbent assay test (ELISA) and polymerase chain reaction (PCR) in Guinea (Conakry) on 2 December 2022. A confirmation test was conducted at the Dakar Institute Pasteur laboratory on 4 January 2023 and the results for ELISA and PCR received by the Ministry of Health on 6 January 2023 confirmed yellow fever infection.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	18-Dec-22	8 947	8 947	176	2.0%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 18 December 2022, the country has reported 8 947 confirmed cases of COVID-19 with 8 656 recoveries and 176 deaths.									
Kenya	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	12-Jan-23	4 500 000	-	-	-
The drought situation continued to worsen in twenty (20) of the 23 ASAL counties in Kenya. Seven (7) counties including Isiolo, Mandera, Samburu, Turkana, Wajir, Laikipia and Marsabit are in Alarm drought phase. Thirteen (13) counties including Embu, Garissa, Kajiado, Kitui, Makueni, Meru, Narok, Nyeri, Tharaka Nithi, Taita Taveta, Tana River, Kwale and Kilifi are in Alert drought phase. Drought is affecting about 4.5 million people, compared to 2.1 million in September 2021. Of these, approximately 2.14 million are children.									
Kenya	Anthrax Suspected	Ungraded	15-Jul-22	30-Jun-22	25-Dec-22	203	-	-	-
Suspected anthrax outbreak is still ongoing in Kenya, with cases reported from different counties. On week 50 and week 51, two cases were reported from Imenti South and Narok South sub county with no death. From January to 25 December 2022, a total of 203 cases have been reported through weekly Integrated Disease Surveillance and Response report.									
Kenya	Chikungunya	Ungraded	3-Mar-22	14-Nov-21	11-Dec-22	291	5	1	0.3%
Wajir County has continued to report the cases from Tarbaj sub-county in Kutulo village. A total of 291 cases have been reported with five confirmed cases and one death (CFR 0.3%). No new cases reported in the last week 49 (ending 11 December 2022).									
Kenya	Cholera	Ungraded	19-Oct-22	16-Oct-22	8-Jan-23	3 939	142	70	1.8%
The ongoing cholera outbreak has affected now 14 counties: Garissa, Homa Bay, Kiambu, Kajiado, Kitui, Machakos, Meru, Murang'a, Nairobi, Nakuru, Nyeri, Tana River, UasinGishu and Wajir. A total of 3 939 cases with 142 Confirmed by culture and 70 deaths (CFR 1.8 %) have been reported.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	15-Jan-23	342 703	342 703	5 688	1.7%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 15 January 2023, 342 703 confirmed COVID-19 cases including 5 688 deaths and 336 874 recoveries have been reported in the country.									
Kenya	Leishmaniasis (visceral)	Ungraded	31-Mar-19	3-Jan-20	8-Jan-23	2 147	1 965	10	0.5%
Since January 2020, a total of 2 147 visceral leishmaniasis confirmed (1 965) and suspected (182) cases with 10 deaths (CFR 0.5%), have been reported in nine counties namely: Baringo, Garissa, Isiolo, Kitui, Mandera, Marsabit, Wajir, Tharaka Nithi and West Pokot. The outbreak is active in West Pokot County.									
Kenya	Measles	Ungraded	29-Jun-22	26-Jun-22	8-Jan-23	392	85	2	0.5%
The outbreak has affected six counties: Garissa, Mandera, Marsabit, Nairobi, Turkana and Wajir, Counties. A total of 392 cases with 85 confirmed and two deaths (CFR 0.5%) have been reported.									
Kenya	Yellow Fever	Grade 2	3-Mar-22	12-Jan-22	16-Dec-22	141	3	11	7.8%
No new cases were reported during week 49. From 12 Jan to 16 Dec 2022, there were a total of 141 suspected cases of yellow fever including 11 deaths (CFR 7.8%) reported from 11 counties in Kenya. An outbreak was reported officially in Isiolo and Garissa counties. Of the suspected cases, only three were confirmed by PCR at the Kenya Medical Research Institute.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	9-Dec-22	34 997	34 997	724	2.1%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 9 January 2023, a total of 34 997 cases of COVID-19 have been reported, including 30 639 recoveries and 724 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	30-Dec-22	8 053	8 053	294	3.7%
From 16 March 2020 to 30 December 2022, Liberia has recorded a total of 8 053 cases including 294 deaths and 7 752 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	1-Dec-22	67	67	22	32.8%
Since the beginning of 2022 up to 1 December 2022, a total of 67 confirmed cases of Lassa fever with 22 deaths (CFR 32%) have been reported from five out of 15 counties in Liberia. A total of 108 contacts are under follow up.									
Liberia	Measles	Ungraded	3-Feb-22	13-Dec-21	30-Nov-22	7 797	7 797	85	1.1%
Since the measles outbreak started on 13 December 2021 as of 30 November 2022, a total of 8 338 suspected cases, including 7 797 confirmed and 85 deaths (CFR: 1%) were reported from 52 out of 93 health districts in 15 counties in Liberia. Among the confirmed cases, 6.1% (470) were laboratory confirmed, 7.2% (558) clinically confirmed and 86.7% (6 769) epidemiologically linked.									
Liberia	Mpox	Grade 3	21-Jul-22	23-Jul-22	29-Dec-22	6	6	0	0.0%
Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public Health Reference Laboratory in the country. The case is a 43-year-old male who resides and works in Ebokayville Une, La Côte D'Ivoire but sought treatment at the Pleabo Health centre in Maryland County, Liberia where he was detected and isolated with 4 contacts being line-listed. As of 29 December 2022, six confirmed cases of monkeypox and 0 deaths were reported.									
Madagascar	Malnutrition crisis	Protracted 2	1-Jul-21	1-Jan-21	20-Jan-23	2 200 000	-	-	-
Approximately 2.2 million people in the Grand Sud and Grand Sud-Est will likely experience Crisis—IPC 3—levels of acute food insecurity or worse between November 2022 and March 2023, according to a January 2023 IPC TWG analysis. This figure includes more than 250,000 people likely to face Emergency—IPC 4—levels of acute food insecurity.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	13-Jan-23	67 788	67 788	1 418	2.2%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 13 January 2023, a total of 67 788 confirmed cases including 1 418 deaths have been reported in the country.									
Malawi	Cholera	Grade 2	3-Mar-22	3-Mar-22	20-Jan-23	28 132	28 132	916	3.3%
A total of 29 districts have reported Cholera cases since the confirmation of the first case in March 2022 in Machinga district. As of 20 January 2023, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 28 132 and 916 respectively, with Case Fatality Rate at 3.3%.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	20-Jan-23	88 399	88 399	2 686	3.0%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 20 January 2023, the country has a total of 88 399 confirmed cases with 2 686 deaths.									
Malawi	Poliomyelitis (WPV1)	Grade 2	31-Jan-22	1-Feb-22	18-Jan-23	1	1	0	0.0%
One positive case of wild WPV1 was detected in Lilongwe from a child with the date of onset of paralysis on 19 November 2021. No other cases have been reported. Malawi continues to participate in the multi-country, subregional outbreak response, to urgently stop the WPV1 outbreak affecting the area.									
Mali	Humanitarian crisis (Sahel region)	Grade 2		11-Sep-17	20-Dec-22	-	-	-	-
The humanitarian situation was recently marked by the flooding of more than 1 000 hectares in the commune of Alafia, Timbuktu region, which caused population movements. Overall, the number of internally displaced persons (IDPs) increased from 422 660 in August 2022 to 440 436 in September 2022, representing a 4% increase. The largest number of IDPs was in the Mopti region.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	22-Jan-23	32 775	32 775	743	2.3%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 22 January 2023, a total of 32 775 confirmed COVID-19 cases have been reported in the country including 743 deaths and 31 953 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-22	11-Dec-22	751	751	1	0.1%
As of 11 December 2022, a total of 1 256 samples from suspected cases of measles were tested in Mali. Of these, 751 cases have been confirmed with one death.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	15-Jan-23	63 435	63 435	997	1.7%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 15 January 2023, a total of 63 435 cases including 997 deaths and 62 433 recovered have been reported in the country.									
Mauritania	Rift Valley fever	Grade 1	31-Aug-22	26-Aug-22	25-Dec-22	53	53	24	45.3%
A new confirmed case of Rift Valley fever (RVF) was reported by the Mauritanian Ministry of Health on 29 August 2022. The index case is a 25-year-old male breeder from the Moughataa (district) of Tintane in Hodh El Gharbi region. He presented to a health facility with high fever and headache. On 26 August, he developed a haemorrhagic syndrome (epistaxis) with severe thrombocytopenia. He died on 29 August. As of 25 December 2022, a total of 53 cases have been confirmed with 24 deaths (CFR 45.3%). Response activities are underway including enhanced surveillance and investigations.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	15-Jan-23	294 089	294 089	1 043	0.4%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 18 January 2023, a total of 294 089 confirmed COVID-19 cases including 1 043 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
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	20-Jan-23	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. Throughout 2022, various levels of authorities have announced “returns” of IDPs to some districts, such Mocimboa da Praia, Palma, Quissanga, Muidumbe and Macomia.									
Mozambique	Cholera	Ungraded	23-Mar-22	25-Jun-22	18-Dec-22	3 930	16	21	0.5%
Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 13 January to 28 December 2022, a total of 3 930 cases and 21 deaths (CFR 0.5%) have been reported. Cholera outbreak has been reported from Niassa province since 14th of September 2022. As of 18th of December, 380 cases and 7 deaths, CFR 1.8% were reported from 2 districts.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	15-Jan-23	231 994	231 994	2 233	1.0%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 15 January 2023, a total of 231 994 confirmed COVID-19 cases were reported in the country including 2 233 deaths.									
Mozambique	Mpox	Grade 3	6-Oct-22	7-Oct-22	18-Dec-22	1	1	0	0.0%
The case was diagnosed Wednesday, 12 October 2022 in Maputo City in a man, Health minister Armindo Tiago said. As of 4 January 2023, no additional case has been reported.									
Mozambique	Poliomyelitis (cVDPV2)	Grade 2	7-Dec-18	1-Jan-21	18-Jan-23	6	6	0	0.0%
According to the Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains four. There were two cases reported in 2021.									
Mozambique	Poliomyelitis (WPV1)	Grade 2	17-May-22	18-May-22	18-Jan-23	8	8	0	0.0%
No wild poliovirus type 1 (WPV1) case was reported this week. There are eight cases reported in 2022. Intensified surveillance efforts continue across the country.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	8-Jan-23	170 532	170 532	4 082	2.4%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 8 January 2023, a total of 170 532 confirmed cases with 4 082 deaths have been reported.									
Niger	Humanitarian crisis (Sahel region)	Grade 2	1-Feb-15	1-Feb-15	16-Dec-22	580 838	-	-	-
Humanitarian access in Niger has deteriorated because of growing insecurity in Diffa, Maradi, Tahoua, and Tillabéri regions. Access to services such as education is challenging, particularly for people displaced in areas with limited humanitarian access. Niger hosts 580 838 people whose situation is of concern, of which 48% are internally displaced persons (IDPs), 43% refugees, 6% returnees, 2% asylum seekers and other people whose situation is worrying (mainly Burkinabés).									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	15-Jan-23	9 508	9 508	315	3.3%
From 19 March 2020 to 15 January 2023, a total of 9 508 cases with 315 deaths have been reported across the country. A total of 8 952 recoveries have been reported from the country.									
Niger	Measles	Ungraded	5-Apr-22	1-Jan-22	14-Jan-23	14 153	722	32	0.2%
From week 1 to week 52 (ending on 31 December) of 2022, 14 127 cases and 32 deaths (CFR: 0.2%) have been reported. 94% (68/72) of the districts of Niger notified at least one suspected case of measles. In week 1 of 2023, 26 cases and zero deaths were notified in five regions, namely Dosso (7 suspected cases), Zinder (7 suspected cases), Diffa (6 suspected cases), Tahoua (7 suspected cases) and Maradi (2 suspected cases).									
Niger	Meningitis	Ungraded	7-Dec-22	31-Oct-22	15-Jan-23	490	111	16	3.3%
The first case of meningitis was reported on 31 October 2022 and confirmed on 23 November 2022 with Neisseria meningitidis identified as the causative agent. As of 15 January 2023, Zinder has reported 490 cases of meningitis including 111 laboratory confirmed cases and 16 deaths (CFR 3.3%). These cases were reported from six health districts (HD): Dungass (331 cases, 6 deaths), Gouré (1 case, 0 deaths), Magaria (28 cases, 4 deaths), Matamèye (83 cases, 3 deaths), Mirriah (46 cases, 2 deaths), and Zinder ville (2 cases, 1 death). A reactive vaccination campaign is underway in the region.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	4-Jan-23	31	31	0	0.0%
No new cases were reported during this week. There are 13 cases reported in 2022. There were 18 cases reported in 2021.									
Niger	Yellow Fever	Grade 2	19-Oct-22	9-Jun-22	29-Nov-22	6	4	1	16.7%
In September and October 2022, the Institut Pasteur in Dakar confirmed four yellow fever cases from Niger, including one death. The cases were confirmed by plaque reduction neutralization test (PRNT) and were reported from Dosso, Zinder, Tahoua, and Adadez districts. The date of onset of symptoms for the last case was 14 August 2022. Two probable cases were reported during the same period.									
Nigeria	Humanitarian crisis (Sahel region)	Grade 2	10-Oct-16	10-Oct-16	13-Jan-23	-	-	-	-
The conflict in northeastern, northwestern, and north central Nigeria affects 9.3 million people, including 5.7 million children. Of these, more than 2.9 million people are internally displaced, while one million live in inaccessible areas. Humanitarian crises caused by protracted armed conflict, armed violence, and community clashes between farmers and herders have resulted in alarming food insecurity and malnutrition, compounded by epidemics and childhood illnesses in the context of deteriorating water, sanitation, and hygiene conditions.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	Cholera	Ungraded		1-Jan-22	27-Nov-22	20 768		498	2.4%
From 01 January to 27 November 2022 (EW 47), a cumulative 20,768 suspected cholera cases and 498 deaths (CFR 2.4%) have been reported from 258 Local Governmental Areas (LGAs), in 31 states, mainly in northwest and northeast of the country. Three states, namely Borno, Taraba and Yobe, have reported a combined total of 15,495 (75%) cases and 382 (77%) deaths with a CFR of 2.4%. Children under five years and age 5-14 years the most affected age groups (52.7%), and 47% of affected cases are males while 53% are females.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	6-Jan-23	266 463	266 463	3 155	1.2%
The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 6 January 2023, a total of 266 463 confirmed cases with 259 850 recovered and 3 155 deaths have been reported.									
Nigeria	Lassa Fever	Grade 1	1-Jan-21	1-Jan-21	27-Nov-22	1 031	994	178	17.9%
From week 1 to 47 of 2022 (ending 27 November), a total of 1 031 Lassa fever cases including 994 confirmed, 37 probable and 178 deaths among confirmed cases have been reported with CFR of 18% across 26 States. In week 47, four new confirmed cases were reported from Ondo, Edo and Nasarawa States. In total, 7 590 cases are suspected in 2022. Of all confirmed cases, 71% are from Ondo (33%), Edo (26%), and Bauchi (12%) States.									
Nigeria	Mpox	Grade 3	31-Jan-22	1-Jan-22	31-Dec-22	763	763	7	0.9%
From 1 January to 31 December 2022, Nigeria has reported 763 monkeypox confirmed cases with seven deaths.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	11-Jan-23	512	512	-	-
According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 42 cVDPV2 cases reported in 2022. There were 410 cVDPV2 cases reported in 2021 and 512 cases since 1 January 2018.									
Nigeria	Yellow Fever	Grade 2	12-Sep-17	1-Jan-21	29-Nov-22	31	24	0	0.0%
From January 2021 to 29 November 2022, a total of 31 yellow fever cases including seven probable and 24 confirmed cases have been reported in Nigeria.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	15-Jan-23	133 078	133 078	1 468	1.1%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 15 January 2023, a total of 133 078 cases with 1 468 deaths and 131 537 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	7-Apr-20	6-Apr-20	15-Jan-23	6 279	6 279	77	1.2%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 15 January 2023, a total of 6 279 confirmed cases of COVID-19 have been reported, including 77 deaths. A total of 6 202 cases have been reported as recoveries.									
Sao Tome And Principe	Dengue	Grade 2	11-Apr-22	15-Apr-22	1-Jan-23	1 161	1 161	8	0.7%
Sao Tome and Principe is experiencing its first ever documented dengue outbreak. From 15 April to 1 January 2023, a total of 1 161 cases and 8 deaths (CFR 0.7%) have been confirmed via RDT from: Água Grande (781, 67.3%), Mézôchi (179, 15.5%), Lobata (97, 8.3%), Cantagalo (47, 4.1%), Caué (23, 2.0%), Lembá (20, 1.6%), and RAP (14, 1.2%). During week 52, there was 1 new case registered in the country. Água Grande's attack rate is by far the highest (91.8 per 10 000 inhabitants). Those aged 30-39 years are experiencing the highest attack rate at 73.1 cases per 10 000.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	29-Dec-22	88 900	88 900	1 968	2.2%
From 2 March 2020 to 29 December 2022, a total of 88 900 confirmed cases of COVID-19 including 1 968 deaths and 86 915 recoveries have been reported in Senegal.									
Senegal	Dengue	Ungraded	14-Nov-22	1-Jan-22	3-Jan-23	238	238	0	0.0%
In 2022, dengue has been confirmed in Senegal since 4 January. As of 3 January 2023, 238 cases have been recorded including 203 confirmed by PCR (85.3%) and 35 by IgM testing (14.7%). Cases are mostly concentrated in the first and last quarters of 2022. Eleven regions are affected. The Matam region has reported the highest number of cases (134 cases, 56.3%), followed by Dakar (41 cases, 17.2%), Kaffrine (17 cases, 7.1%) and Thies (17 cases, 7.1%).									
Senegal	Measles	Ungraded	4-Jul-22	1-Jan-22	1-Jan-23	489	489	2	0.4%
From epidemic week 1 to 52 of 2022 (ending 1 January 2023), 489 confirmed cases of measles with two deaths were reported from 13 regions in Senegal. Dakar and Tambakounda regions reported over half of the cases (285 cases, 60.9%). Of these cases, 239 were children aged nine months to 5 years, of whom 208 were unvaccinated against measles, accounting for 87% of the unvaccinated measles cases.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	31-Dec-22	50 665	50 665	172	0.3%
Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 31 December 2022, a total of 50 665 cases have been confirmed, including 50 440 recoveries and 172 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	27-Dec-22	7 760	7 760	125	1.6%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 27 December 2022, a total of 7 760 confirmed COVID-19 cases were reported in the country, including 125 deaths and 4 898 recovered cases.									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	31-Dec-22	1 174	178	0	0.0%
By 31 December 2022 (Week 52), 16 out of 16 districts reported a total of 1174 suspected measles cases, including 178 Laboratory confirmed measles cases. of the total suspected measles cases, 303 (26%) cases are above five years, The majority of cases (26%) were reported from Western Area Urban, followed by Kambia districts (17.8%). In December 2022, three districts, namely Western Area Rural, Western Area Urban and Karene districts reported more than 3 measles cases. Surveillance and immunisation activities have been intensified in all districts.									
Sierra Leone	Yellow Fever	Grade 2	13-Dec-22	25-May-22	29-Nov-22	1	1	0	0.0%
A suspected case of yellow fever (YF), a 67-year-old male farmer resident of Kono District, Eastern Province, Sierra Leone, tested positive for YF by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar on 19 October 2022. Investigation carried out from 5 to 6 November 2022 showed that he is unvaccinated against YF. No additional suspected cases were found during active case finding. The patient fully recovered after treatment in the health facility and has since resumed his normal farming activities. According to WHO and UNICEF estimates (WUENIC), YF vaccination coverage was 85% in Sierra Leone in 2021.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Africa	COVID-19	Grade 3	5-Mar-20	5-Mar-20	19-Jan-23	4 053 527	4 053 527	102 568	2.5%
Since the start of the COVID-19 pandemic in South Africa through 19 January 2023, a cumulative total of 4 053 527 confirmed cases and 102 568 deaths have been reported.									
South Africa	Measles	Ungraded	17-Oct-22	13-Oct-22	18-Jan-23	3 326	382	0	0.0%
From epidemiological week 40 2022 to week 3, 2023, a total of 382 laboratory-confirmed cases were reported from five provinces with declared measles outbreaks in Limpopo (145 cases), Mpumalanga (79 cases), North West (125 cases), Gauteng (18 cases), and Free State (15 cases).									
South Africa	Mpox	Grade 3	23-Jun-22	23-Jun-22	18-Jan-23	5	5	0	0.0%
From 22 June 2022 to 18 January 2023, there have been five unlinked laboratory-confirmed monkeypox cases in South Africa. The cases were reported from Gauteng (n = 1), Western Cape (n = 2), Limpopo (n = 1) and Johannesburg (n = 1) provinces. No new cases have been reported since October 2022.									
South Sudan	Drought/food insecurity	Grade 3	18-Dec-20	5-Apr-21	12-Jan-23	6 310 000	-	-	-
People across South Sudan have experienced critical needs in December 2022. An estimated 6.31 million people experienced high levels of acute food insecurity (IPC Phase 3/Crisis or above), with 33,000 people projected to be in IPC Phase 5/Catastrophe in Akobo and Fangak, Jonglei State; and Pibor County in the Greater Pibor Administrative Area (GPAA) in December 2022 - March 2023. Over 1.4 million children below the age of five are estimated to be acutely malnourished with 345 893 experiencing severe acute malnutrition (SAM) and another 1.1 million experiencing moderate acute malnutrition (MAM).									
South Sudan	Floods	Ungraded		7-Oct-22	15-Jan-23	1 000 000			
Since July 2022, an estimated 1 million people were affected by severe flooding in 36 counties across South Sudan and in the southern part of the Abyei Administrative Area. People in Northern Bahr el Ghazal, Warrap, Unity and Western Equatoria states are the worst affected and 80 per cent of those affected were from Jonglei, Unity and Upper Nile states. People were forcibly displaced repeatedly due to multiple compounding shocks, both in areas of displacement and return. Floodwater levels remained high in Bentiu and Rubkona towns in Unity, impeding livelihood activities, exposing people to waterborne diseases and disrupting the provision of basic services. An assessment team found 17,000 newly displaced people sheltering in three locations in Pibor town, following armed clashes that broke out in Gumuruk area in Pibor County.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	15-Aug-16	29-Dec-22	9 400 000	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. In 2022, there were a total of 8.9 million people in need of humanitarian assistance and 2.23 million people internally displaced people as of 30 November 2022. Over the past three years, seasonal floods have caused thousands of people to be displaced as well as caused problems for water, sanitation, and hygiene conditions in formalized camps and informal settlements. Recent clashes in mid-November 2022, had already caused the displacement of civilians in Fashoda County, Upper Nile State.									
South Sudan	Anthrax	Ungraded	25-Apr-22	13-Mar-22	4-Dec-22	141	8	5	3.5%
A total of 141 suspected cases and 5 deaths (CFR 3.5%) have been reported from eight payams in Warrap state but mostly from Kuajok North. A total of 8 samples returned positive for bacillus anthracis bacteria. Cases were reported from 13 March - 4 December 2022 where the majority of cases have been females (62%) aged 5-9 years.									
South Sudan	Cholera	Ungraded	21-Apr-22	21-Mar-22	20-Nov-22	424	56	1	0.2%
From 19 March to 20 November 2022, 424 cases and 1 death (CFR 0.2%) have been reported from Unity State and Ruweng Administrative Area, however most cases have been reported from the Bentiu IDP camp (89% of cumulative total). A total of 56 cases have been confirmed positive by RDT for cholera and 29 tested positive for Vibrio cholerae by culture at the National Public Health Laboratory in Juba. Females account for 62% of all cases and children ages 0-4 years have been the most affected age group accounting for 32.3% of all cases. More than 1.58 million doses of cholera vaccine doses have been administered in 2022 and more vaccination campaigns are being planned.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	26-Dec-22	18 393	18 393	138	0.8%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 26 December 2022, a total of 18 393 confirmed COVID-19 cases were reported in the country including 138 deaths and 18 115 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	4-Dec-22	3 679	104	26	0.7%
The current outbreak in the Bentiu IDP camp is ongoing. As of 5 November 2022, a total of 3 679 cases of hepatitis E including 26 deaths (CFR: 0.7%) have been reported since January 2019. Approximately 54% of cases are male.									
South Sudan	Measles	Ungraded	23-Feb-22	1-Jan-22	31-Dec-22	3 169	299	31	1.0%
From January to December 2022, 49 counties across all 10 States have reported suspected measles cases. A total of 3 169 suspected measles cases including 299 lab-confirmed cases and 31 deaths (CFR 1.0 %) have been reported through Integrated Disease Surveillance and Response (IDSR) mechanisms. On 10 December, health authorities declared a measles outbreak in South Sudan, the second declaration for the year after the first one done on 23 February.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	13-Jan-23	42 530	42 530	846	2.0%
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 13 January 2023, a total of 42 530 confirmed cases have been reported in Tanzania Mainland including 846 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	8-Jan-23	39 349	39 349	290	0.7%
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 8 January 2023, a total of 39 349 cases, including 290 deaths and 39 051 recovered cases, have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	11-Jan-23	19	19	0	0.0%
No case was reported this week. There were 2 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported in 2022. No cases were reported in 2021. There were nine cases in 2020, while the total number of cVDPV2 cases reported in 2019 remains at eight.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Uganda	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	6-Dec-22	-	-	-	-
According to the Famine Early Warning Systems Network report covering projections from October 2022 to May 2023, Below-average crop production and high food and non-food inflation are to drive acute food insecurity in Uganda. In Karamoja, significantly below-average crop production (estimated to be only around half of normal levels) for a third consecutive season and localized insecurity continue to disrupt typical livelihoods and reduce income-earning. Given this and above-average prices, the number of households facing Crisis (IPC Phase 3) and Emergency (IPC Phase 4) outcomes remains atypically high for a postharvest period.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	7-Jan-23	170 184	170 184	3 630	2.1%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 7 January 2023, a total of 170 184 confirmed COVID-19 cases with 3 630 deaths were reported.									
Uganda	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	23-Oct-22	12-Jul-22	17-Jan-23	8	8	3	37.5%
From 23 June 2022 to 17 January 2023, eight cases of Crimean-Congo haemorrhagic fever (CCHF) have been confirmed in Uganda from Kanungu (2), Masaka (2), Amuru (1), Kaberamaido (1), Nakasongola (1) and Rakai (1) districts with three deaths. The last confirmed case was registered on 4 December 2022.									
Uganda	Yellow Fever	Grade 2	7-Mar-22	2-Jan-22	13-Jan-23	984	2	0	0.0%
In 2022 and as of 13 January 2023, a total of 984 samples have been collected and tested for yellow fever (YF), of which 28 tested IgM+ for YF. Two cases were classified as laboratory-confirmed, including one in Masaka district and another one in Wakiso district. There are currently six cases under investigation, from five districts including Kasese (2), Buikwe (1), Buvuma (1), Masaka (1), and Wakiso (1).									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	15-Jan-23	337 458	337 458	4 037	1.2%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 15 January 2023, a total of 337 458 confirmed COVID-19 cases were reported in the country including 4 037 deaths.									
Zambia	Measles	Ungraded	13-Jun-22	13-Jun-22	25-Dec-22	2 137	288	31	1.5%
A measles outbreak continues to evolve in Lusaka, North-western and Southern provinces affecting several districts. Cumulatively, the provinces have recorded 2 137 measles cases and 31 deaths as of 25 December 2022. WHO is supporting the Ministry of Health investing other cases with similar symptoms.									
Zimbabwe	Anthrax	Ungraded	20-Jan-20	1-Jan-22	14-Dec-22	263	0	0	0.0%
The anthrax outbreak is ongoing in Zimbabwe. 27 new anthrax cases and no deaths was reported this week. The cases were reported from Gokwe North District (12), Gokwe South District (14) in Midlands Province and Zaka District (1) in Masvingo Province. The cumulative figures for anthrax are 263 cases and 0 deaths.									
Zimbabwe	Cholera	Ungraded	22-Nov-22	24-Nov-22	24-Nov-22	2	2	0	0.0%
One new confirmed cholera case was reported from Chiredzi District in Masvingo Province and no deaths were reported this week. The cumulative figures for cholera are two cases and zero deaths both cases were reported from the same district. All provinces and cities are expected to capacitate their Rapid Response Teams on cholera surveillance and case management.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	13-Jan-23	260 814	260 814	5 643	2.2%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 13 January 2023, a total of 260 814 confirmed COVID-19 cases were reported in the country including 5 643 deaths.									
Zimbabwe	Measles	Ungraded	29-Apr-22	19-May-22	18-Dec-22	7 743	355	747	9.7%
A measles outbreak has been ongoing in Zimbabwe since 10 April 2022. As of 18 December 2022, A cumulative total of 7 743 Cases, 355 confirmed cases and 747 Deaths have been reported since the onset of the outbreak. No new-suspected measles cases and zero suspected deaths were reported this week ending week 50									
Zimbabwe	Typhoid fever	Ungraded	17-Oct-22	17-Oct-22	29-Dec-22	69	17	0	0.0%
The Harare capital city of Zimbabwe is experiencing a typhoid fever outbreak since October 2022. As of 29 December 2022, a total of 69 cases with 17 confirmed have been reported. The age group of 1 – 4 years accounts for 16% of the total cases. Males account for 47% of all typhoid cases and females contribute 45% and 8% of the cases have no stated gender. All the tested samples were sensitive to Ciprofloxacin, Azithromycin, cefotaxime, and ceftriaxone and resistant to Ampicillin, cotrimoxazole and azithromycin									
Closed Events									
Malawi	Floods	Grade 2	26-Jan-22	26-Jan-22	21-Oct-22	1 000 000		51	0.0%
The aftermath of the cyclone Ana and Gombe in Malawi has largely been contained. 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 were affected, with 51 deaths recorded. The decommissioning of IDP camps in affected districts. Mulanje and Balaka districts have decommissioned all IDP camps whilst Nsanje has only six active IDP camps.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	31-Aug-22	29-Aug-22	25-Dec-22	4	4	2	50.0%
The Mauritanian Ministry of Health reported a new confirmed case of Crimean-Congo haemorrhagic fever (CCHF) on 29 August 2022. The patient was a 28-year-old pregnant woman from an area located 2 kilometers from M' Bagne city in Brakna region. She presented with a febrile syndrome during the prenatal consultation on 28 August 2022 and a sample was taken the same day. CCHF was confirmed on 29 August 2022 by polymerase chain reaction at the Institut National de Recherche en Santé Publique (INRSP). As of 25 December 2022, a total of four confirmed cases with two 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
South Africa	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	2-Oct-22	1-Mar-22	19-Nov-22	3	3	1	33.3%
In 2022, South Africa has reported three confirmed cases of CCHF from the Western Cape Province (n=2) and Eastern Cape Province (n=1). A case from Western Cape, detected in March 2022, succumbed to their illness. The last case reported was a 36-year-old man from the Cape Winelands District of Western Cape Province and is suspected to have exposure to infected sheep blood and tissue by way of occupation. He had an onset of symptoms on 8 Oct 2022. The patient is stable and recovering from his illness.									
Tanzania, United Republic of	Cholera	Ungraded	15-Nov-22	31-Oct-22	11-Dec-22	24	3	1	4.2%
Cholera was first reported on 27 October 2022 in Babati District Council in Manyara Region, three samples tested were positive for <i>Vibrio cholerae</i> . Cumulative total of 18 cases have been reported with one death (CFR 5.6%) reported in Babati District Council. As of 17 November 2022, no new case reported, last recorded case was on 12 November 2022. On 16 January 2023, the WHO Country office shared information on another cholera outbreak detected on 5 December 2022 with a total of six cases with no death reported as of 11 December and the end of outbreak was declared by the Ministry of Health on 27 December 2022.									
Tanzania, United Republic of	Suspected Anthrax	Ungraded	15-Nov-22	1-Nov-22	18-Dec-22	124	0	2	1.6%
On 5 November 2022, the Ministry of Health in Tanzania received information of a suspected outbreak of anthrax in Momba District Council of Songwe region. As of 18 December 2022, a cumulative of 124 suspected cases and 2 deaths (CFR 1.6%) have been reported. A total of 22 samples have been collected and all tested negative for anthrax and monkeypox. Majority of cases were males, and aged between 16-49 years. No further cases have been reported until the event was closed on 18 January 2023.									
Uganda	Anthrax	Ungraded	26-May-22	16-May-22	14-Dec-22	51	5	2	3.9%
An anthrax outbreak has been confirmed in Bududa District, Uganda, in early May 2022. As of 14 December, a total of 51 suspected cases have been reported including two deaths (CFR 4%). Two Districts have so far reported human cases: Kween (31 cases and one death) and Bududa (20 cases and one death). Eleven samples have been collected in Bududa, five of which tested positive for anthrax. No new suspected cases have been reported in Kween and the last suspected case from Bududa was admitted on 1 August 2022. Around 10 000 doses of vaccines have been received and 1196 animals have been vaccinated in Bududa District over the past week, bringing the total to 3716. As no new cases have been reported since August 2022, the event was suggested for closure this 18 January 2023 (epiweek 3).									

†Grading is an internal WHO process, based on the Emergency Response Framework. For further information, please see the Emergency Response Framework: <http://www.who.int/hac/about/erf/en/>.

Data are taken from the most recently available situation reports sent to WHO AFRO. Numbers are subject to change as the situations are dynamic.

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Data sources

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