

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 11: 7 – 13 March 2022

Data as reported by: 17:00; 13 March 2022



World Health
Organization

REGIONAL OFFICE FOR **Africa**
WHO Health Emergencies Programme

0

New events

151

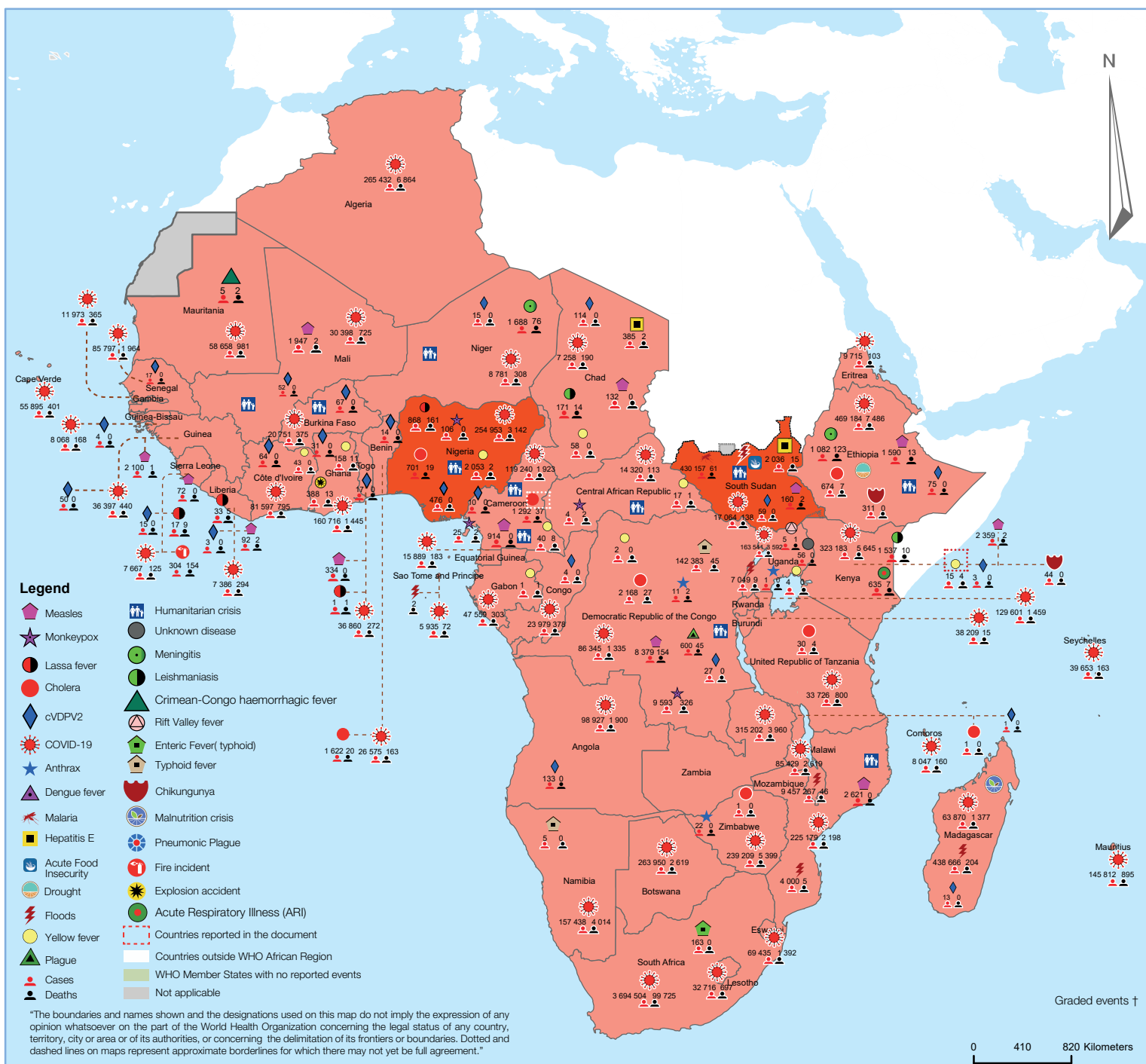
Ongoing events

128

Outbreaks

23

Humanitarian
crises



3

Grade 3 events

42

Grade 2 events

2

Grade 1 events

49

Ungraded events

3

Protracted 3 events

4

Protracted 2 events

2

Protracted 1 events

Overview

Contents

1 Overview

2 -6 Ongoing events

7 All events currently being monitored

This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 151 events in the region. This week's articles cover:

- [Yellow fever in Kenya](#)
- [COVID-19 across the WHO African region](#)
- [Cholera in Cameroon](#)

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:

- On 4 March 2022, Kenya declared an outbreak of yellow fever in Isiolo County. As of 10 March 2022, eight villages in three sub-counties have been affected. The detection of yellow fever cases is concerning as Kenya has negligible population immunity in the districts reporting confirmed cases. In addition, the overall national immunity is thus far below threshold necessary to provide herd immunity. Furthermore, there is also massive refugee migration from the neighbouring Somalia into Garissa County, Kenya. This increases the risk for further amplification and international spread, coupled with the low population immunity in the cross-border areas.
- For the past two months, new COVID-19 cases in the WHO African region have declined, following the peak of the fourth wave in January. Deaths recorded in the past week also declined. Only Mauritania is currently undergoing a resurgence of the COVID-19 pandemic. The vaccination pace in Africa is picking up with an average of 16 million doses given each week. But countries need to vaccinate even faster to meet June's 70% vaccination target.
- Cameroon continues to experience a cholera outbreak, with the epicentre of the outbreak lying in the South-West region. Response efforts to the outbreak remains a big challenge in this region, considering the current labile security context characterized by violence and armed conflicts, with consequential increase in people's vulnerabilities and limited access to basic social services including health, water, and sanitation.

Yellow fever

Kenya

15
cases

4
Deaths

27.0%
CFR

EVENT DESCRIPTION

Suspected yellow fever (YF) cases have been reported from eight villages within three sub-counties in Kenya since 12 January 2022. Consequently, on 4 March 2022, health authorities in Kenya declared an outbreak of YF in Isiolo County, central Kenya, which is around 270 km north of the capital city of Nairobi.

As of 10 March 2022, there are a total of 15 suspect YF cases (including four deaths) reported. Three sub-counties of Chari (33%), Cherab (46%) and Garba Tulla (20%) have been affected in Isiolo County.

The majority of the presumptive YF cases are from Merti village (40%) in Cherab sub-county, followed by Biliqo Marara village (13%), Chari sub-county and Grafarsa village (13%) in Garba Tulla sub-county. The symptoms described are fever, jaundice, muscle, and joint pain.

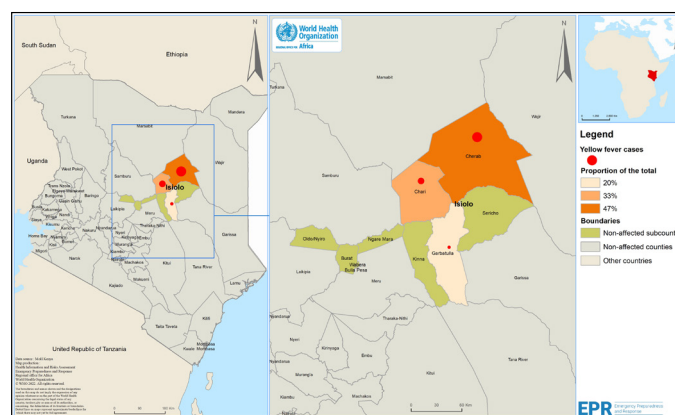
Of the 15 cases, 13 (87%) are males and two (13%) females. The age range reported is between 11 and 65 years, with the most affected age group being between 21-30 years (35%). There is no information on the vaccination status of the reported cases, however both the origin and the surrounding counties have no history of vaccination campaign or routine immunization.

Six samples have been collected from Isiolo County with a representative distribution of all areas reporting suspected YF cases for confirmation. Two samples tested positive by reverse transcriptase polymerase chain reaction (RT-PCR) at the national laboratory (Kenya Medical Research Institute (KEMRI)). In addition, three samples were presumptive YF IgM positive by the enzyme-linked immunosorbent assay (CDC MAC-ELISA) and another five samples were equivocal. Further information is pending regarding the differential diagnosis tests performed. On 8 March 2022, the samples were shipped to the YF regional reference laboratory - Uganda Virus Research Institute (UVRI) for confirmatory testing.

PUBLIC HEALTH ACTIONS

- On 4 March 2022, the National authorities activated the alert mode in all the 47 counties, especially in the following high-risk counties: Wahir, Garissa, Marsabit, Mery, Samburu, Baringo, Elgeyo Marakwet, West Pokot and Turkana.
- The National Government and partners (UNICEF and CDC) are mobilising resources to support response activities.
- A National Incident Management Structure has been put in place and is developing a response plan to deploy a rapid response team to Isiolo and neighbouring counties to investigate the outbreak, conduct a risk assessment, initiate risk communication and community engagement activities, implement integrated vector control measures and build capacity in clinical management.
- The Ministry of Health is planning to conduct YF vaccination campaign in outbreak affected areas, as informed by ongoing investigations and laboratory results.

Distribution of yellow fever cases in Isiolo County, Kenya, as of 10 March 2022



SITUATION INTERPRETATION

Kenya is endemic for YF and is classified as a high-risk country in the "Eliminate Yellow Fever Epidemics" (EYE) Strategy. However, YF hasn't been documented previously in Isiolo County. Previous outbreaks have been reported in 1992, 1993, 1994, and 2016 (where two cases were imported from Angola). Kenya has not yet benefited from large-scale preventive mass vaccination campaigns and has not introduced YF vaccine into routine immunization (RI) nation-wide (YF RI is limited to four counties in the north west of country, not directly bordering Isiolo). Due to the minimal population immunity, there is high risk of outbreak amplification.

PROPOSED ACTIONS

- Vaccination is the primary means for prevention and control of YF. As the country plans to introduce YF vaccination into the routine immunization program, expedited planning and implementation of these activities will help avert risk of future outbreaks.
- WHO recommends vaccination against YF for all international travellers aged nine months and above going to Kenya. Yellow fever vaccination is safe, highly effective and a single dose provides life-long protection.
- WHO also recommends avoiding mosquito bites including the use of repellents. The highest risk for transmission of YF virus is during the day and early evening. Communities should be made aware of yellow fever symptoms and signs and instructed to rapidly seek medical advice if presenting signs and symptoms suggestive of YF infection.

EVENT DESCRIPTION

The number of new COVID-19 cases in the WHO African Region decreased by 48.0% during the week of 7 to 13 March 2022 as compared to the previous week. The number of new deaths decreased by 44.4% in the reporting week. Across the region, over 16 936 new COVID-19 infections and 245 new deaths were reported from 38 and 20 countries, respectively.

In the past seven days, a total of 26 countries (55.3%) reported a decrease of 20% or more in the number of new cases (Table 1), while only Nigeria, Togo and Zambia saw a 20% or more increase in weekly cases compared to the past week. Cameroon, Guinea, Lesotho, Mauritius, and the United Republic of Tanzania did not report any new cases in the past seven days.

Nearly all the new cases were reported from the top five countries (15 406, 91.0%), with South Africa recording the highest number (10 185 new cases, 9% decrease, 170 new cases per 100 000 population), followed by Zimbabwe (3 306 new cases, 2.2% increase, 22.0 new cases per 100 000), Zambia (1 381 new cases, 24.0% increase, 7.0 new cases per 100 000), Nigeria (316 new cases, 182.0% increase, 0.0 new cases per 100 000), and Ethiopia (218 new cases, 25.3% decrease, 0.0 new cases per 100 000).

For the period (7 to 13 March 2022), a decrease in weekly COVID-19 deaths was observed in the African region compared to the previous week. South Africa reported the highest numbers of new deaths (182 new deaths; 42.0% decrease; 0.3 new deaths per 100 000 population), followed by Zimbabwe (15 new deaths; 200% increase; 0.1 new deaths per 100 000), Ethiopia (10 new deaths; 38.0% decrease; 0.0 new deaths per 100 000), Algeria (9 new deaths; 62.5% decrease; 0.0 new deaths per 100 000), and Kenya (4 new deaths; 100% increase; 0.0 new deaths per 100 000).

Only one country, Mauritania met the criteria for resurgence (a 20% increase in new COVID-19 cases for a period of at least two consecutive weeks) where cases in the past week have reached 30% or more of the country's highest weekly number of cases.

As of 13 March 2022, the cumulative number of infections stands at 8 141 247 and 169 743 deaths have been reported in the WHO African Region, resulting in a CFR of 2.1%. More than 7.5 million recoveries have been recorded, giving a recovery rate of 92.0%.

In general, South Africa has recorded the highest number of COVID-19 cases in the region, with 3 693 532 cases (45.4% of all reported cases), followed by Ethiopia (469 170, 5.8%), Kenya (323 171, 4.0%), Zambia (315 148, 3.9%), and Algeria (265 410, 3.3%); the five countries accounting for 62.4% (5 066 431) of all cases.

Similarly, most reported deaths occurred in South Africa, which accounts for 59.0% (99 712) of all deaths recorded in the region. Ethiopia has the second-highest number of deaths (7 485 deaths, 4.4%), followed by Algeria (6 862, 4.0%), Kenya (5 644, 3.3%) and Zimbabwe (5 414, 3.2%), all accounting for 74.0% (125 117) of all deaths reported in the region.

Cameroon and Namibia reported three and one new health worker infections, respectively, in the past week. Furthermore, Zimbabwe retrospectively reported 5 594 health worker infections. Thus far, a cumulative total of 158 851 COVID-19 infections (2.0% of all cases) occurred among health workers in the region, with South Africa accounting for 45.0% (71 113) of the total infections. Kenya (12 720, 8.0%), Algeria (11 936, 8.0%), Zimbabwe (11 609 7.3%) and Namibia (5 321, 3.3%) have also recorded high numbers of health worker infections. Other countries reporting health worker infections are shown in Table 1. The United Republic of Tanzania (10.0%), Liberia (6.0%), Zimbabwe (4.8%), Algeria (4.5%), and Niger (4.0%) have the highest proportion of health worker infections by country. Only Eritrea has not reported any healthcare worker infections.

The African continent has reported a cumulative total of 11.6 million infections. In addition, more than 251 743 deaths (CFR 2.2%) and more than 10.7 million people have recovered. The African continent accounts for 2.6% of global cases and 4.2% of global deaths.

The number of COVID-19 vaccine doses administered in the past four weeks increased by 15% when compared to the number of doses administered in previous weeks. Africa accounts for only 3.8% of the 10.8 billion doses administered globally. Approximately, 190 million people are fully vaccinated, 14.3% of the African population. Of the 1.4 billion booster doses administered globally, less than 1% of these have been given in Africa. Only Eritrea has not yet begun an operational vaccination programme in the continent.

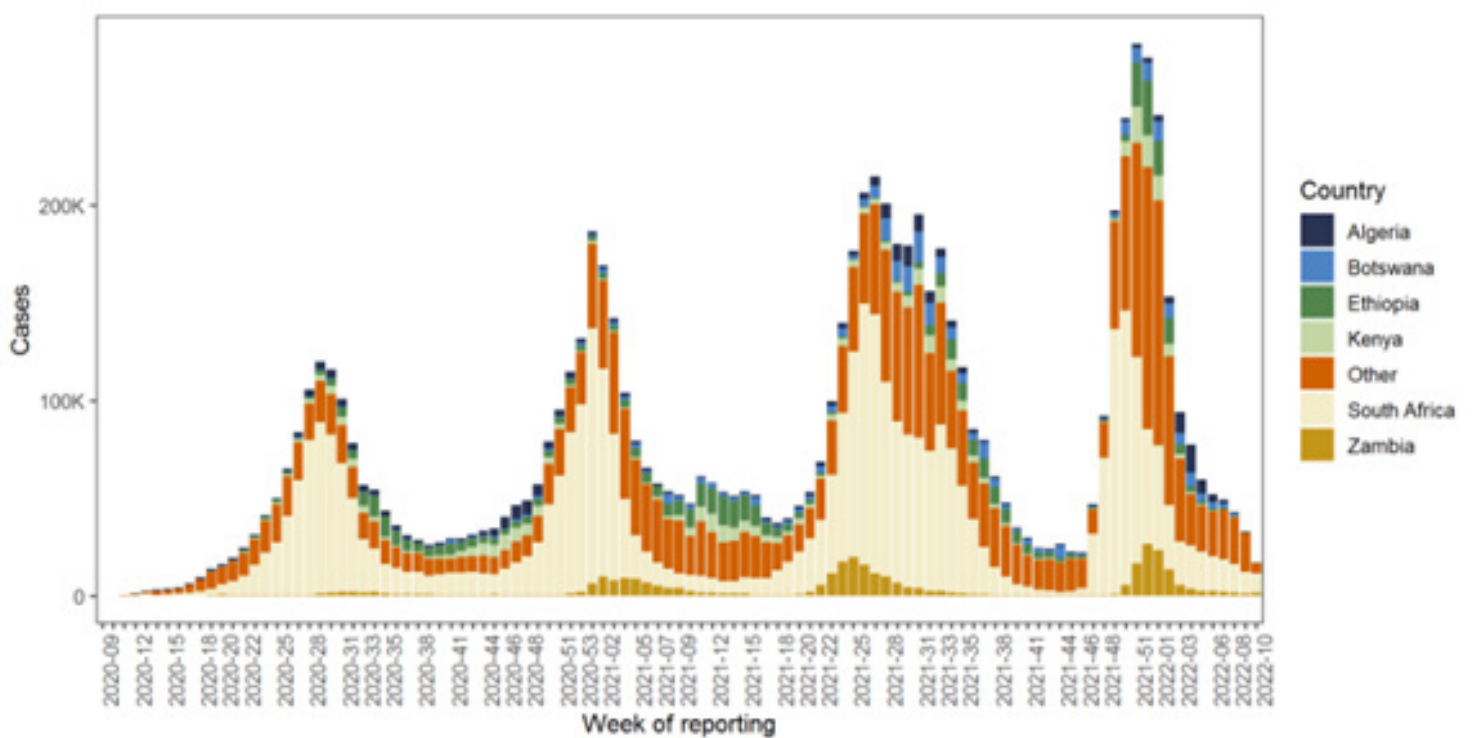
WHO, UNICEF, Gavi, the Vaccine Alliance, and partners are supporting mass vaccination campaigns in priority countries to reach 100 million people by the end of April 2022. The countries are conducting mass vaccination campaigns in a range of urban settings such as shopping centres and markets, as well as in hard-to-reach rural communities. Six countries have begun mass vaccination campaigns (Côte d'Ivoire, Democratic Republic of Congo, Ethiopia, Ghana, Guinea Bissau, and Kenya), whereas five campaigns are planned in March and April in Chad, Mali, Nigeria, South Sudan, and Tanzania.

SITUATION INTERPRETATION

- ▶ The number of new weekly cases and deaths on the WHO African region continues to fall. Only Angola and Zimbabwe reported a significant increase in new cases when compared to the prior week. The vaccination pace in Africa is picking up with an average of 16 million doses given each week. But countries need to vaccinate even faster to meet the June 2022 target of 70%. WHO is currently supporting countries to meet this target, having deployed experts to priority countries who are working with local health authorities to ramp up vaccinations.



The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 13 March 2022 ($n = 8\,141\,247$)



New cases reported in the past seven days and cumulative totals by country: Data as of 13 March 2022 (8 141 247)

Country	Total cases	New cases	Percent change in new Cases	Total Deaths	New Deaths	Percent change in new Deaths	Health Worker infections
South Africa	3 693 532	10 185	-7.9	99 712	182.0	-42.0	71 113
Ethiopia	469 170	218	-25.3	7 485	10	-37.5	3 354
Kenya	323 171	108	-25.5	5 644	4	100	12 720
Zambia	315 148	1 381	24.0	3 960	1.0	-85.7	1 121
Algeria	265 410	167	-59.3	6 862	9	-62.5	11 936
Botswana	263 950	0	0.0	2 619	0.0	0.0	2 082
Nigeria	254 945	316	182.1	3 142	0.0	0.0	3 175
Zimbabwe	242 357	3 306	2.2	5 414	15	200	11 609
Mozambique	225 173	39	-61.8	2 198	2	-50	4 779
Mauritius	181 362	0	-100.0	934	0	-100	30
Uganda	163 541	87	-22.3	3 592	2.0	0.0	3 025
Ghana	160 693	76	-87.6	1 445	1	-50	4 763
Namibia	157 410	60	-52.0	4 014	0	-100	5 321
Rwanda	129 589	50	-19.4	1 459	1.0	0.0	682
Cameroon	119 322	0	-100.0	1 926	0	-100	4 416
Angola	98 909	121	15.2	1 900	0	-100	939
Democratic Republic of the Congo	86 344	29	-81.9	1 335	0.0	0.0	728
Senegal	85 792	40	-50.6	1 964	3	200	419
Malawi	85 495	70	-30.7	2 620	4.0	0.0	3 026
Côte d'Ivoire	81 577	41	-53.9	795	1.0	-66.7	1 913
Eswatini	69 429	137	-18.5	1 392	1.0	0.0	1 215
Madagascar	63 870	79	-40.2	1 377	4.0	-42.9	70
Mauritania	58 657	9	-47.1	981	1.0	0.0	24
Cabo Verde	55 906	8	-33.3	401	0.0	0.0	140
Gabon	47 564	2	-89.5	303	0.0	0.0	345
Seychelles	39 635	125	-24.7	163	0.0	0.0	945
Burundi	38 274	65	-20.7	15	0.0	0.0	38
Togo	36 850	39	69.6	272	0.0	0.0	891
Guinea	36 427	0	-100.0	440	0.0	0.0	682
United Republic of Tanzania	33 726	0	-100.0	800	0	-100	3 351
Lesotho	32 716	0	-100.0	697	0.0	0.0	473
Mali	30 415	22	10.0	726	1.0	-66.7	87
Benin	26 575	0	0.0	163	0.0	0.0	139
Congo	24 049	8	-61.9	378	0.0	0.0	303
Burkina Faso	20 751	0	0.0	375	0.0	0.0	288
South Sudan	17 061	49	16.7	138	1.0	0.0	294
Equatorial Guinea	15 895	1	-90.0	183	0	-100	608
Central African Republic	14 320	0	0.0	113	0.0	0.0	51
Gambia	11 963	17	0.0	365	0.0	0.0	142
Eritrea	9 721	6	-60.0	103	0.0	0.0	0
Niger	8 780	15	0.0	308	1.0	0.0	355
Comoros	8 054	15	7.1	160	0.0	0.0	155
Guinea-Bissau	8 050	35	9.4	168	1.0	0.0	23
Sierra Leone	7 667	1	0.0	125	0.0	0.0	269
Liberia	7 392	5	-16.7	294	0.0	0.0	418
Chad	7 260	3	-66.7	190	0.0	0.0	292
Sao Tome and Principe	5 934	1	0.0	72	0.0	0.0	102
Cumulative Cases (N=47)	8 141 247	16 936	48.2	169 743	245	44.4	158 851

*Total cases includes one probable case from Democratic Republic of the Congo

[Go to overview](#)

5

[Go to map of the outbreaks](#)

EVENT DESCRIPTION

Since late October 2021, a cholera outbreak has been ongoing in Cameroon, with four (40%) of the 10 regions of the country active: Littoral, North, South and South-West.

A total of 151 cases and six deaths were reported during epi-week 9 (ending on 6 March 2022), from three regions: North (one case), Littoral (71 cases and 4 deaths), and South-West (79 cases and 4 deaths). Notably, 21 new cases and three deaths in the Littoral region, and 51 cases and two deaths in the South-West region were retrospectively reported in week 9. No new cases were notified by the Southern region during week 9, as well as the Far-North region where the last case was reported on 23 January 2021.

As of 7 March 2022, 1 881 cases and 59 deaths have cumulatively been reported since the beginning of the outbreak, a CFR of 3.1%. The median age of patients is 25 years (range: 2 months to 89 years). Men remain more affected than women, with a sex ratio of 2:1.

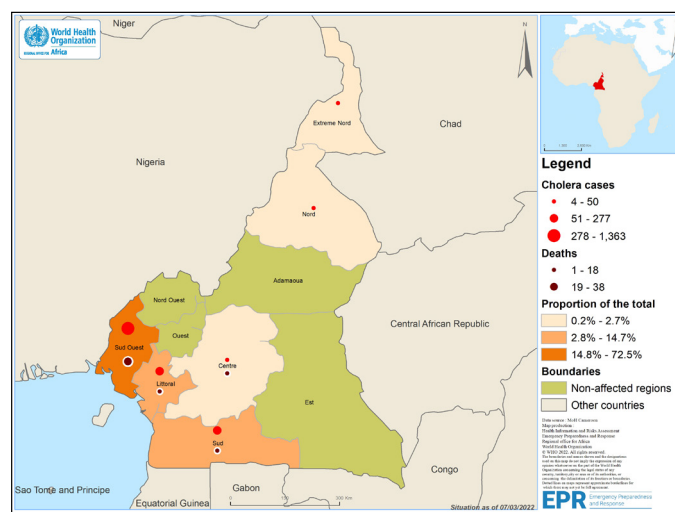
Since the beginning of the outbreak in Cameroon, six regions have reported at least one case of cholera: Centre (50 cases and 1 death; CFR 2.0%), Far-North (8 cases), Littoral (277 cases and 18 deaths; CFR 6.5%), North (4 cases), South (179 cases and one death; CFR 1.1%) and South-West (1 363 cases and 38 deaths; CFR 2.8%). In total, 22 health districts have notified cholera cases, of which 18 are still active. A total of 71 stool samples have tested positive for cholera by culture.

South-West remains the epicentre of the outbreak with 1 363 cases (72.5%), while Littoral has the highest CFR of 6.5%.

PUBLIC HEALTH ACTIONS

- Coordination activities are ongoing including regular joint coordination meetings of WHO IMS team with Ministry of Health authorities and other health partners involved in cholera response activities, both at national and regional levels.
- A reactive oral cholera vaccination (OCV) campaign was organized in four health districts of the South-West region: Bakassi, Ekondo Titi, Mbonge and Mundemba. In total, 178 632 persons were vaccinated, giving an overall administrative coverage of 85.5%. The second round of reactive OCV vaccination campaign is planned.
- Surveillance activities including alert verification by focal points at regional and district levels.
- Hygienists are being trained at regional and district levels on proper disinfection of households, latrines, and water sources.
- Health care professionals have been trained on adequate sampling and transportation of cholera samples, as well as diagnosis of cholera through culture.

Distribution of cholera cases in Cameroon, as of 7 March 2022



- Community leaders are being engaged in response activities while home visits are being organized in affected areas during which communities are sensitized on preventive measures against the outbreak.

SITUATION INTERPRETATION

The ongoing cholera outbreak in Cameroon is currently showing a declining trend. However, this should be interpreted with caution, given the insufficient detection, low data quality and delays in data reporting. In addition, a dire lack of communication and sensitization of populations around the disease, low level of community-based surveillance, reluctance from patients to early search for adequate care, and insufficient capacity in health care facilities to properly manage cholera cases remain challenges to the outbreak response. Improvements in these areas will surely help to better capture the true dynamic of the outbreak.

PROPOSED ACTIONS

- Community-based surveillance should be reinforced for early detection and referral of cases.
- Data flow and reporting must be strengthened to better capture the real dynamic of the outbreak and respond adequately. Data managers at regional and district levels should be trained and regularly supervised, accordingly, and necessary materials should be prepositioned.
- Community engagement should be reinforced. As such, all administrative, traditional and religious authorities as well as community leaders should actively play a role in educating their respective communities on preventive measures against cholera, and break people's reluctance to rapidly search for adequate care in health care facilities.

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	13-Mar-22	265 432	265 432	6 864	2,60%
From 25 February 2020 to 13 March 2022, a total of 265 432 confirmed cases of COVID-19 with 6 864 deaths (CFR 2.6%) have been reported from Algeria. A total of 178 050 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	13-Mar-22	98 927	98 927	1 900	1,90%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 13 March 2022, a total of 98 927 confirmed COVID-19 cases have been reported in the country with 1 900 deaths and 96 857 recoveries.									
Angola	Poliomyelitis (cVDPV2)	Grade 2	8-May-19	1-Jan-19	20-Feb-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	Cholera	Grade 1	28-Mar-21	28-Mar-21	6-Feb-22	1 622	44	20	1,20%
Since week 12 (ending 28 March 2021) of 2021, cases of cholera have been reported in Benin. As of 6 February 2022, a total of 1 622 cases with 20 deaths (CFR 1.2%) are reported.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	27-Feb-22	26 575	26 575	163	0,60%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 27 February 2022, a total of 26 575 cases have been reported in the country with 163 deaths and 26 392 recoveries.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	8-Aug-19	27-Feb-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	28-Feb-22	263 950	263 950	2 619	1,00%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 21 February 2022, a total of 263 950 confirmed COVID-19 cases were reported in the country including 2 619 deaths and 259 434 recovered cases.									
Burkina Faso	Humanitarian crisis	Grade 2	1-Jan-19	1-Jan-19	31-Jan-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 mass displacement of over 1.57 million internally displaced persons as of 31 December 2021 in all 13 regions. 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. Non-state armed groups attacks are worsening the security situation, causing displacements and producing needs for the affected population, including food, water, shelter, and psycho-social support.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	18-Feb-22	20 751	20 751	375	1,80%
Between 9 March 2020 and 18 February 2022, a total of 20 751 confirmed cases of COVID-19 with 375 deaths and 20 309 recoveries have been reported from Burkina Faso.									
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	6-Mar-22	67	67	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) 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	5-Mar-22	38 209	38 209	15	0,00%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 5 March 2022, the total number of confirmed COVID-19 cases is 38 209, including 15 deaths and 38 093 recovered.									
Cameroon	Humanitarian crisis (Far North, North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	31-Jan-22	-	-	-	-
According to UNHCR and OCHA reports, an estimated 1.2 million people need assistance, 357 631 people are internally displaced as of 31 Jan 2022. Following the lifting of security restrictions in Kousséri, the security situation in the Far North region of Cameroon has remained calm and stable since 20 January.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	31-Jan-22	-	-	-	-
According to reports from UNHCR, an estimated 579 136 Internally Displaced People (IDPs) have been registered as of 31 Jan 2022. There have continued to be reports of targeted attacks on various groups such as traditional leaders, school staff, students, and humanitarian workers. Schools resumed session, but teachers and students faced 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. There were also 467 550 refugees as of 31 Jan 2022, of which more than 343 548 (73.5%) arrived from Central African Republic.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Cholera	Grade 2	1-Jan-21	5-Aug-21	6-Feb-22	1 292	9	37	2,90%
Since the beginning of 2021 up to 6 February 2022, a total of 1 292 suspected cases of Cholera including 9 confirmed and 37 deaths (CFR 2.9%) have been reported in Cameroon. The intensification of disease surveillance as well as the management of cases are ongoing.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	23-Feb-22	119 240	119 240	1 923	1,60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 23 February 2022, a total of 119 240 cases have been reported, including 1 923 deaths and 117 089 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-22	20-Feb-22	914	914	0	0,00%
From week 1, 2021 to week 7, 2022 (ending 20 February), the measles outbreak was declared in 39 health districts, of which 20 districts implemented local reactive vaccination campaigns. As of 20 February 2022, there are 27 health districts in active measles outbreak. Between week 1 of 2021 and week 7 of 2022, a total of 914 confirmed cases of measles were reported in Cameroon. Among these cases 75.3% are aged between 9 months and 9 years; 11.1% are infants under 9 months; 72.2% of cases are unvaccinated; 48.6% of unvaccinated cases are aged 9 to 59 months. No death reported so far in 2022. The last death case was reported in week 18 of 2021 (ending 9 May).									
Cameroon	Monkeypox	Ungraded	24-Feb-22	15-Dec-21	22-Feb-22	25	3	2	8,00%
On 15 December 2021, a case of monkey pox from Ayos Health District in the Central Region, Cameroon, was confirmed. As of 17 February 2022, 25 suspected cases of which three laboratory confirmed and two deaths have been reported from four Health Districts across three regions.									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	23-Feb-22	10	10	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are three cases reported in 2021 and seven cases in 2020.									
Cameroon	Yellow fever	Grade 2	7-Feb-21	4-Jan-21	31-Jan-22	40	29	8	20,00%
From 1 January 2021 to 31 January 2022, a total of 38 presumptive cases of yellow fever tested positive by plaque reduction neutralization test (PRNT) and three by PCR at the Centre Pasteur Cameroun, of which seven deaths were recorded. These cases originated from nine different regions with a total of 25 health districts (HDs) affected: Adamaoua region, Central region, East region, Far North region, Littoral region, North region, North-West region, South region, and West region. Some of the PRNT-positive cases had a history of vaccination against yellow fever.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	5-Mar-22	55 895	55 895	401	0,70%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 5 March 2022, a total of 55 895 confirmed COVID-19 cases including 401 deaths and 55 430 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	31-Jan-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 652 036 people that are internally displaced as of 30 Jan 2022 and 202 908 persons are refugees in neighbouring countries. Civilians are still the main victims of violence. On 11 January 2022, an IDP camp was partially destroyed leaving 3 000 people in need of shelter, food, and water. Food insecurity is also estimated to be 2.4 million people in 2022.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	27-Feb-22	14 320	14 320	113	0,80%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in the Central African Republic on 14 March 2020. As of 27 February 2022, a total of 14 320 confirmed cases, 113 deaths and 12 018 recovered were reported.									
Central African Republic	Monkeypox	Ungraded	3-Mar-22	4-Mar-22	4-Mar-22	4	2	2	50,00%
The Central African Republic recorded four cases of monkeypox, including 2 deaths, during epidemiological week 8, in the health districts of Mbaïki and Bimbo. The epidemiological investigation is ongoing.									
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-21	15-Feb-22	17	9	1	5,90%
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 at the Centre Pasteur Cameroun (CPC). As of 15 February 2022, a total of 17 probable cases (IgM positive) were reported of which nine were confirmed at the regional reference laboratory.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	7-Mar-22	7 258	7 258	190	2,60%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 7 March 2022, a total of 7 258 confirmed COVID-19 cases were reported in the country including 190 deaths.									
Chad	Hepatitis E	Ungraded	4-Nov-21	1-Oct-21	30-Nov-21	385	12	2	0,50%
Hepatitis E outbreak had been declared by Chadian health authorities mid-November 2021 in Sategui health area, Lai health district in the Tandjile region. As of 30 Nov 2021, there have been 385 suspected cases and 2 deaths (CFR 0.5%) reported. Among those affected, the majority have been men with 219 cases (57.0%) and the most affected age group has been less than 10 years of age with 90 cases (23.4%).									
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	13-Feb-22	132	4	0	0,00%
Since the beginning of 2022, a total of 132 suspected measles cases, 4 confirmed IgM positive and zero death have been reported in 36 out of 139 health districts for the country, the N'Djamena Sud health district is in outbreak since January 2022; 6 health districts are in a suspected outbreak situation at week 6 (ending 13 February) while waiting for laboratory confirmation: Ndjamen Center, Ndjamen North, Dourbali, Moissala, Oum Hadjer and Adré. In 2021, a total of 2 577 suspected measles cases, 278 confirmed and 18 deaths (CFR 0.7%) were reported in Chad.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	23-Feb-22	114	114	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There were no cases reported in 2021. There were 106 cVDPV2 cases reported in 2020 from three different outbreaks. There were 8 cases reported in 2019. The risk of further cVDPV2 spread across the Lake Chad subregion remains high.									
Chad	Yellow fever	Grade 2	13-Nov-21	1-Nov-21	15-Feb-22	58	17	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 PCR positive, six were IgM positive with cross-reactions with other flaviviruses, and six other IgM positive without cross-reactions. As of 15 February 2022, a total of 58 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 eight by plaque reduction neutralization test (PRNT).									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-20	3-Mar-22	8 047	8 047	160	2,00%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 3 March 2022, a total of 8 047 confirmed COVID-19 cases, including 160 deaths and 7 865 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	3-Mar-22	23 979	23 979	378	1,60%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 3 March 2022, a total of 23 979 cases including 378 deaths and 23 025 recovered cases have been reported in the country.									
Congo	Poliomyelitis (cVDPV2)	Grade 2		29-Jan-21	23-Feb-22	4	4	0	0,00%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. Two cases were reported in 2020 as well as in 2021.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	13-Mar-22	81 597	81 597	795	1,00%
Since 11 March 2020, a total of 81 597 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 795 deaths, and a total of 80 717 recoveries.									
Côte d'Ivoire	Poliomyelitis (cVDPV2)	Grade 2	29-Oct-19	29-Oct-19	23-Feb-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	15-Feb-22	43	13	0	0,00%
On 13 August 2021, five yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Institut Pasteur in Dakar. Based on differential tests returned on 6 September 2021, the results of three cases are consistent with a recent yellow fever infection. As of 15 February 2022, a total of 43 cases tested IgM positive of which 13 were confirmed by PRNT.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-17	20-Feb-22	-	-	-	-
As of 20 Feb 2022, there are an estimated 5.5 million people internally displaced, 533 204 new refugees and asylum seekers, 2.8 million returnees, and 27 million people need emergency food assistance in the entire country. Additionally, 8.9 million need health assistance. In Ituri province, nearly 25K people are on the move in the localities of Aunngba, Rimba, Logo and Mahagi, following an attack by armed men reported on 18 Feb 2022 in the villages of the health area of Talitali Anghal (group 2). These newly displaced people have difficulty accessing primary health care. Approximately 95,626 IDPs are in a situation of vulnerability in the health zone of Fataki.									
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	1-Jan-22	30-Jan-22	2 168	-	27	1,20%
In 2022, from epidemiological week 1 to 4 (ending 31 January 2022), 2 168 suspected cholera cases including 27 deaths (CFR:1.2%) were recorded in 28 health zones across seven provinces of the Democratic Republic of the Congo, an increase of more than 100% compared to the same period in 2021 (604 cases).									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	7-Mar-22	86 345	86 343	1 335	1,50%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 86 343 confirmed cases and two probable case, including 1 335 deaths have been reported. A total of 64 656 people have recovered.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	6-Feb-22	8 379	142	154	1,80%
Since January 2022 up to 6 February 2022, 8 379 measles suspected cases and 154 deaths (CFR 1.8%) have been reported; 142 of 290 suspected cases investigated became positive for measles IgM. In 2021, for the same period, a total of 8 486 suspected cases and 132 deaths (CFR 1.6%) were reported.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	20-Feb-22	9 593	39	326	3,40%
During week 7 of 2022, a total of 51 cases and 1 death due to monkeypox were reported. Between epidemiological weeks 1-7 of 2022, 542 cases have been reported with 29 deaths (CFR 5.4%). Compared to weeks 1-7 in 2021, 569 cases were reported with 17 deaths (CFR 2.9%). During 2021, a total of 3 091 suspected cases including 83 deaths (CFR 2.7%) were reported. During 2020, a total of 6 216 suspected cases including 222 deaths (CFR 3.6%) were reported.									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-20	20-Feb-22	600	-	45	7,50%
During week 7 of 2022, no plague cases were reported. Between epidemiological weeks 1-7 of 2022, 1 case of plague has been reported with no deaths. Compared to weeks 1-7 in 2021, 68 cases were reported with 1 death (1.5% CFR). 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.									

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	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-21	1-Jan-21	23-Feb-22	27	27	0	0,00%
Two cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Maniema this week, one case being the first of 2022 and the other is from 2021. The number of 2021 cases now stand at 26 and one case for 2022.									
Democratic Republic of the Congo	Suspected Anthrax	Ungraded	17-Feb-22	17-Feb-22	17-Feb-22	11		2	18,20%
Suspected cases of anthrax were notified in the Kalonge health zone, Kalehe territory not far from the Kahuzi Biega national park. On 30 January 2022, a family prepared guinea pig meat to serve a visitor. A total of 11 people from three different families ate this meat. All 11 people who ate the meat presented a clinical picture made diarrhoea, vomiting, abdominal pain, fatigue, and dehydration. Two people, one of 12 years old and another of 15 years old, died the same day (CFR 18.2%) presenting severe dehydration. Nine people among the 11 were admitted, recovered, and discharged from the hospital. The results of the laboratory analysis carried out are still awaited. Currently, a team from the regional ministry of health is in the affected health zone for in-depth investigation.									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-21	30-Jan-22	142 383	-	45	0,00%
In 2022, from epidemiological week 1 to 4 (ending 31 January 2022), 142 383 suspected cases of typhoid fever including 45 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%).									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-21	21-Apr-21	8-Mar-22	8	8	0	0,00%
On 18 July 2021, two yellow fever cases tested positive by plaque reduction neutralization test (PRNT) at Centre Pasteur in Cameroon (CPC). The first case is a 34-year-old male from the Abuzi health zone, North Ubangi province, Democratic Republic of the Congo whose date of symptom onset was 20 February 2021 with fever, vomiting, abdominal pain, back pain and physical asthenia. Jaundice appeared on 25 February. The second case is a 47-year-old female unvaccinated against yellow fever from Ango health zone, Bas Uele province. He first exhibited symptoms on 7 May 2021. As of 8 March 2022, a total of eight PRNT positive cases have been reported.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	3-Mar-22	15 889	15 889	183	1,20%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 3 March 2022, a total of 15 889 cases have been reported in the country with 183 deaths and 15 665 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	13-Mar-22	9 721	9 721	103	1,10%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 13 March 2022, a total of 9 721 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 616 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Mar-22	69 435	69 435	1 392	2,00%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 13 March 2022, a total of 69 435 cases have been reported in the country including 68 010 recoveries. A total of 1 392 associated deaths have been reported.									
Ethiopia	Drought/food insecurity	Grade 2	17-Feb-22	1-Jan-22	31-Jan-22	-	-	-	-
Ethiopia is experiencing a prolonged drought after three consecutive failed rainy seasons since late 2020 affecting 6.8 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).									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	24-Feb-22	-	-	-	-
The security situation in the country remains volatile, affecting civilians and limiting humanitarian aid deliverance. Adequate communication, electricity, and banking services remain intermittent. The conflict in the Tigray area has been spilling over into the Afar and Amhara regions for some time but heavy clashes were reported along the border in both regions recently. In the Afar region, fighting has caused 200K people to be displaced. Due to the ongoing conflict, many health facilities in the region are unfunctional, but nine health partners have been providing healthcare services through mobile health and nutrition teams. Humanitarian organizations have airlifted 97 metric tonnes of medical supplies to Mekelle, Tigray, since 24 January 2022. However, any partners have scaled-down operations due to the lack of supplies and resources.									
Ethiopia	Chikungunya	Ungraded	17-Feb-22	12-Jan-22	9-Feb-22	311	3	0	0,00%
On 17 January 2022, Chikungunya Outbreak was confirmed in Dolo ado district of Liben zone, Somali region. A total of 311 suspected cases are reported, of which three cases were confirmed by PCR at Ethiopian Public Health Institute (EPHI) laboratory. No deaths were reported.									
Ethiopia	Cholera	Grade 2	31-Aug-21	31-Aug-21	31-Jan-22	674	2	7	1,00%
The outbreak of cholera is ongoing in Oromia and Somali regions. The first case was reported on 31 August 2021. As of 31 January 2022, a total of 674 cases with 7 associated death (CFR 1.0%), are reported so far. Five sample were tested and two were positive for cholera. Response activities are ongoing including outbreak investigation, case management, cholera supplies delivery.									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Mar-22	469 184	469 184	7 486	1,60%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 469 184 cases of COVID-19 as of 13 March 2022, with 7 486 deaths and 421 472 recoveries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-22	9-Feb-22	1 590		13	0,80%
An active measles outbreak is ongoing in Ethiopia since the beginning of January 2022. Three regions (Southern Nations, Nationalities, and Peoples' Region (SNNPR), Oromia and Somali) are most affected so far with a total of 1 590 cases and 13 deaths (case fatality ratio (CFR)= 0.8%) reported from these 3 regions. As of 9 February 2022, the SNNPR region has reported more cases with 1 005 cases (63.2%) followed by Somali region with 495 cases (31.1%) then Oromia, 90 cases (5.7%).									
Ethiopia	Poliomyelitis (cVDPV2)	Grade 2	24-Jun-19	20-May-19	6-Mar-22	75	75	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	12-Dec-21	20-Feb-22	1 082		123	11,40%
Between week 49 of 2021 ending 12 December and week 7 of 2022 ending 20 February, a cumulative number of 1 082 suspected cases of meningitis and 123 deaths (CFR 11.4 %) were reported from 77 districts (woredas) in Ethiopia with 41 districts crossing the epidemic threshold and 56 district crossing the alert threshold. Investigations are still ongoing including laboratory confirmation of meningitis.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	3-Mar-22	47 559	47 559	303	0,60%
On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 3 March 2022, a total of 47 559 cases including 303 deaths and 47 066 recoveries have been reported in the country.									
Gabon	Yellow fever	Ungraded	12-Feb-22	17-Sep-21	15-Jan-22	1	1	1	100,00%
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 2022 and died on 23 September 2021 in Port Gentil.									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	12-Mar-22	11 973	11 973	365	3,00%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 12 March 2022, a total of 11 973 confirmed COVID-19 cases including 365 deaths, and 11 591 recoveries have been reported in the country.									
Ghana	Explosion accident	Ungraded	20-Jan-22	20-Jan-22	27-Jan-22	388		13	3,40%
An explosion accident involving a vehicle transporting mining explosives occurred on 20 January 2022. The incident occurred in Apatikrom village near the mining town of Bogoso in the Prestea-Huni Valley district in the Western Region. The transport vehicle was involved in a road traffic accident with a motorcycle and subsequently caught fire resulting in the explosion which essentially destroyed the entire Apatikrom and resulted in several casualties. On 20 January 2022, based on data from the National Disaster Management Organization (NADMO) and the Western Regional Health Directorate showed over 900 persons affected with 13 persons confirmed dead. As of 27 January 2022, total of 388 persons were seen in the health facilities with about 319 treated as outpatients and 19 admitted.									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	9-Mar-22	160 716	160 716	1 445	0,90%
As of 9 March 2022, a total of 160 716 confirmed COVID-19 cases have been reported in Ghana. There have been 1 445 deaths and 159 112 recoveries reported.									
Ghana	Poliomyelitis (cVDPV2)	Grade 2	9-Jul-19	8-Jul-19	20-Feb-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	15-Feb-22	158	64	11	7,00%
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 15 February 2022, a total of 744 yellow fever suspected cases including 158 probable (IgM positive) and 64 confirmed cases were reported from 11 regions in Ghana.									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	27-Feb-22	36 397	36 397	440	1,20%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 27 February 2022, a total of 36 397 cases including 32 939 recovered cases and 440 deaths have been reported in the country.									
Guinea	Measles	Ungraded	9-May-18	1-Jan-22	23-Jan-22	2 100	38	1	0,00%
Since the beginning of 2022 up to week 3 (ending 23 January), a total of 2100 measles suspected cases with 38 confirmed and 1 death (CFR 0.05 %) have been reported in Guinea through IDSR.									
Guinea	Poliomyelitis (cVDPV2)	Grade 2	22-Jul-20	22-Jul-20	23-Feb-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	11-Mar-22	8 068	8 068	168	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 11 March 2022, the country has reported 8 068 confirmed cases of COVID-19 with 7 067 recoveries and 168 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	6-Mar-22	4	4	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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Kenya	Acute Respiratory Illness (ARI)	Ungraded	21-Feb-22	1-Dec-20	20-Feb-22	635	635	7	1,10%
On 10 February 2022, Nakuru county notified increased reports of acute respiratory infections among children to the national authorities. The highest number of cases were reported from Nakuru East sub-county accounting for 380 (61.0%) cases followed by Nakuru West which had 82 (13.0%). The median age of the confirmed cases was 15 months, with the youngest being 0.1 months and the oldest 60 months. Males were more affected by the disease (60.4%). Transmission has been sustained since the beginning of December 2021 and has thus far peaked around 10 February 2022. Field investigations and laboratory analysis are currently being conducted.									
Kenya	Chikungunya	Ungraded	3-Mar-22	13-Feb-22	23-Feb-22	44	2	0	0,00%
Chikungunya outbreak has been reported in Wajir County, Tarbaj sub county in Kutulo village. A total of forty four (44) cases have been reported with two (2) 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	13-Mar-22	323 183	323 183	5 645	1,70%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 13 March 2022, 323 183 confirmed COVID-19 cases including 5 645 deaths and 317 491 recoveries have been reported in the country.									
Kenya	Dengue	Ungraded	3-Mar-22	1-Jan-21	23-Feb-22	2 359	1 966	2	0,10%
The outbreak has been reported in two Counties, Mombasa and Mandera. The cases are spread from 2021 in both Counties. In Mandera, the reported cases are from Mandera east sub county while in Mombasa, six sub-counties (Nyali, Mvita, Kisauni, Nyali, Liikoni and Jomvu) have been affected. As of 23 February 2022, a total of 2 359 cases with two deaths have been reported.									
Kenya	Leishmaniasis	Ungraded	31-Mar-19	3-Jan-20	6-Feb-22	1 537	1 356	10	0,70%
Since January 2020, a total of 1 537 visceral leishmaniasis suspected and confirmed cases with 10 deaths (CFR 0.7%), have been reported in eight counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir, and Tharaka Nithi. The outbreak is active in four counties, Kitui, West Pokot, Wajir and Tharaka Nithi. Fourteen (14) new cases were reported in week 48.									
Kenya	Poliomyelitis (cVDPV2)	Grade 2	5-Feb-21	10-Feb-21	6-Mar-22	3	3	0	0,00%
No cVDPV2 positive environmental sample was reported this week. There was one cVDPV2 positive environmental sample reported in 2020 and one in 2021. The virus is linked to the Banadir outbreak in Somalia.									
Kenya	Yellow fever	Grade 2	3-Mar-22	12-Jan-22	7-Mar-22	15	2	4	26,70%
On 4 March 2022, Kenya declared an outbreak of yellow fever in Isiolo County. As of 10 March 2022, there are a total of 15 suspect cases of Yellow fever including four deaths reported from 12 January to 23 February 2022 in eight villages within three sub county of Isiolo county. Of the suspected cases, two were confirmed by PCR at the Kenya Medical Research Institute (KEMRI). Epidemiological and additional laboratory investigations are ongoing.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	4-Mar-22	32 716	32 716	697	2,10%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 4 March 2022, a total of 32 716 cases of COVID-19 have been reported, including 23 461 recoveries and 697 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	28-Feb-22	7 386	7 396	294	4,00%
From 16 March 2020 to 10 March 2022, Liberia has recorded a total of 7 396 cases including 294 deaths and 7 092 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	28-Feb-22	33	17	5	15,20%
Since the beginning of this year 2022 up to 28 February 2022, a total of 33 suspected cases of Lassa Fever including 17 confirmed and 5 deaths (CFR 15.2%) have been reported in Liberia. The confirmed cases have been reported from: Bong County (5 cases and 0 death) ; Grand Bassa County (5 cases and 1 death) and Nimba County (7 cases and 4 deaths). A total of 36 contacts are under follow up.									
Liberia	Measles	Ungraded	3-Feb-22	1-Jan-22	3-Feb-22	92	20	2	2,20%
There is currently an ongoing measles outbreak in 2 counties: Montserrado County in Commonwealth district and Bong County in Zota district. Cumulatively, 92 suspected cases including 2 deaths (CFR 2.2%) have been recorded in the country. Of these, 20 laboratory-confirmed, 20 clinically compatible, 1 Epi-link, and 24 non-measles (negative), and 27 pending testing. Current interventions include active case search, isolation and management of cases, and mini vaccination campaign in Montserrado county.									
Liberia	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	17-Dec-20	6-Mar-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.									
Madagascar	Floods	Grade 2	19-Jan-22	16-Jan-22	26-Feb-22	438 666		204	0,00%
Heavy rains in Madagascar from multiple weather systems (Tropical Storm Ana, Cyclone Batsirai, Tropical Storm Dumako, and Cyclone Emnati) have flooded parts of the country. The Tropical Storm Ana weather system affected the country during week 3 of 2022, while Cyclone Batsirai occurred in week 5, Tropical Storm Dumako occurred in week 7, and Cyclone Emnati occurred in week 8. As of 19 Feb 2022, there have been 131 549 victims affected including 55 deaths by the Tropical Storm Ana weather system in 12 regions. Damages from Cyclone Batsirai have been reported as of 16 Feb 2022 where 143 718 people have been affected causing 121 deaths mostly in the district of Ikongo of Fitovinany Region. As of 26 Feb 2022, 61 489 people have been displaced by the effects of Cyclone Batsirai. Damages by Tropical Storm Dumako have affected approximately 9 959 people including 14 deaths. A total of 4 323 people have been displaced. Cyclone Emnati has also affected the country causing 153 440 victims and 14 deaths as of 26 Feb 2022. There are currently 43 602 people who have been displaced in 12 regions.									
Madagascar	Malnutrition crisis	Grade 2	1-Jul-21	1-Jan-21	24-Jan-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 14K 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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	11-Mar-22	63 870	63 870	1 377	2,20%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 11 March 2022, a total of 63 870 cases have been reported in the country, out of which 59 156 have recovered and 1 377 deaths reported.									
Madagascar	Poliomyelitis (cVDPV1)	Grade 2	28-Apr-21	28-Apr-21	23-Feb-22	13	13	0	0,00%
Two cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported; one each in Diana and Sofia, one being the first of 2022 and the other is from 2021. The number of 2021 cases now stand at 12 and for 2022 is 1 case. Six cVDPV1 positive environmental samples were reported; three in Analamanga, one in Diana and two in Sofia.									
Malawi	Floods	Grade 2	26-Jan-22	26-Jan-22	9-Feb-22	9 457 267		46	0,00%
On 26 January 2022 the State President declared a State of National Disaster following the Tropical Storm ANA, which caused heavy flooding in several districts in the country, especially in the Southern Region due to heavy rainfall and strong winds. 19 districts and 2 cities have been impacted with tropical storm Ana which hit Malawi from 23 January 2022. Reports indicate 945 7267 people (221 127 households) affected by the floods of which 152 786 (32 935 households) are displaced, 46 deaths, 18 missing and 206 injuries recorded according to the Government									
Malawi	Cholera	Ungraded	3-Mar-22	3-Mar-22	3-Mar-22	1	1	0	0,00%
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 business man, resident of Balaka district. He had onset of symptoms on 25 February 2022 and sought medical care at Muchinga District Hospital on 28 February 2022 where he was identified and a stool specimen was collected from him. Laboratory results by culture confirmed him positive for Cholera on 3 March 2022.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-20	6-Mar-22	85 429	85 429	2 619	-
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 6 March 2022, the country has a total of 85 429 confirmed cases with 2 619 deaths and 76 199 recoveries.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-22	20-Feb-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.									
Mali	Humanitarian crisis	Protracted 1	n/a	n/a	31-Jan-22	-	-	-	-
The situation in northern and central regions of the country remains unstable, marked by an increase in direct or indirect attacks against national and international armed forces and the civilian population. Issues such as inter and intra-community conflicts, activism of non-state armed groups, consequences of counter-insurgency operations, crime and banditry continue to weaken the Malian context. According to UNHCR there were 350 110 IDPs in the country and 52 833 refugees as of 31 Jan 2022. However, 84 307 returnees have come back to the country.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	6-Mar-22	30 398	30 398	725	2,40%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 6 March 2022, a total of 30 398 confirmed COVID-19 cases have been reported in the country including 725 deaths and 29 546 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-21	2-Jan-22	1 947	828	2	0,10%
From January 2021 up to Epi week 51 (ending the 2 January 2022), Mali has reported a total of 1 947 suspected cases including two deaths, 1 516 samples tested of which 828 were positive, 644 negative and 44 undetermined. There is an increase of 93.1 % of confirmed cases compared to the same week last year.									
Mali	Poliomyelitis (cVDPV2)	Grade 2	18-Aug-20	18-Aug-20	23-Feb-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.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	13-Mar-22	58 658	58 658	981	-
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 13 March 2022, a total of 58 658 cases including 981 deaths and 57 654 recovered cases have been reported in the country.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	8-Feb-22	8-Feb-22	14-Feb-22	6	6	2	33,30%
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 14 March 2022, a total of six confirmed cases including two deaths were reported.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	21-Feb-22	145 812	145 812	895	0,60%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 21 February 2022, a total of 145 812 confirmed COVID-19 cases including 895 deaths and 126 710 recovered cases have been reported in the country.									
Mozambique	Floods	Ungraded	24-Jan-22	26-Jan-22	26-Jan-22	4 000		5	0,10%
The tropical storm Ana made landfall in Angoche district, Nampula province on 24 January. The storm subsequently headed westwards, significantly affecting Zambezia and Tete provinces. Five fatalities, 66 injured people, 660 damaged houses and 4 000 affected people across Nampula, Zambezia, Tete and Cabo Delgado Provinces are reported. A total of 546 private houses were also partially destroyed while 115 were totally destroyed. Moreover, one health center and 16 classrooms were affected. Mozambique, which is already struggling with multiple crises, is a low-income country and third in Africa for exposures to extreme climatic events, with a yearly tropical storm cycle that does not give affected people time to recover.									

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	31-Jan-22	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. As of 31 Jan 2022, the nationwide estimate of people in need of humanitarian assistance is 1.3 million and more than 820K people are displaced by conflict.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	13-Mar-22	225 179	225 179	2 198	1,00%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 13 March 2022, a total of 225 179 confirmed COVID-19 cases were reported in the country including 2 198 deaths and 221 955 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	24-Feb-22	2 621	903	0	0,00%
Since 2021 up to 24 February 2022, the total cases of measles classified as positive are 903 including compatible and EPI link. The total number of suspected measles cases is 2 621 with 2 576 cases (896 confirmed) in 2021 and 45 cases (7 confirmed) in 2022. The outbreak is ongoing in Niassa province, Mandimba district.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	13-Mar-22	157 438	157 438	4 014	0,00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 13 March 2022, a total of 157 438 confirmed cases with 153 069 recovered and 4 014 deaths have been reported.									
Namibia	Typhoid fever	Ungraded	2-Mar-22	3-Mar-22	3-Mar-22	5	5	0	0,00%
The Ministry of Health confirmed a case of typhoid fever on 27th January 2022 in Windhoek. The index case is a 28-year-old female Namibian citizen and a resident of Windhoek in Samora Michael constituency, Goreagab section. The case reported on 27th of January 2022 at Intermediate Katutura hospital via causality department with a history of acute right abdominal pains, vomiting and high fever. As of 3 March 2022, 5 cases of typhoid fever have been confirmed in Windhoek. All contacts are asymptomatic.									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	31-Jan-22	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2022. As of 31 Jan 2021, 264 257 people are internally displaced, 280 583 are refugees, and 2.3 million are food insecure (phase 3+ and above). Recent sanctions imposed by the Economic Community of West African States have severely impacted migration.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	13-Mar-22	8 781	8 781	308	3,50%
From 19 March 2020 to 6 March 2022, a total of 8 781 cases with 308 deaths have been reported across the country. A total of 8 461 recoveries have been reported from the country.									
Niger	Meningitis	Ungraded		1-Jan-21	16-Jan-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%). The reports shared by the country shows that 2 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. An International Coordinating Group (ICG) for vaccine provision request is underway for a vaccine campaign response.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	23-Feb-22	15	15	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of 2021 cases remains at 15.									
Nigeria	Humanitarian crisis	Protracted 3	10-Oct-16	n/a	31-Jan-22	-	-	-	-
Attacks in Nigeria have continued in Local Government Agencies of Borno, Adama, and Yobe (BAY) states making the North-Eastern part of the country volatile. As of 31 Jan 2021, there were 77 885 refugees from other countries within Nigeria with almost 73 000 (or 95%) coming from Cameroon. More than 2.2 million IDPs (72.5% of all IDPs in the country) are in the North-East, while the rest (27.5%) are in the North-West/North-Central part of the country.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	27-Feb-22	701		19	2,70%
From epidemiological week 1 to week 8, 2022 (27 February), a total of 701 suspected cases including 19 deaths (CFR 2.7%) have been reported from 12 states and FCT. Of the suspected cases, the less than 5 years age group is the most affected, while 47% are males and 53 % are females. Three states-Taraba (242 cases), CrossRiver (111), Borno (91 cases), Bayelsa (76) and Adamawa (56 cases) account for 82% of all cumulative cases.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	13-Mar-22	254 953	254 953	3 142	1,20%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 13 March 2022, a total of 254 953 confirmed cases with 249 340 recovered and 3 142 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	1-Jan-21	1-Jan-21	13-Feb-22	868	868	161	18,50%
Lassa fever is an endemic disease in Nigeria which is reportable through IHR. In week 6 of 2022, the number of new confirmed cases was 77. These were reported from Ondo, Edo, Bauchi, Ebonyi, Taraba, Enugu, Benue, Kogi, Nasarawa, and Niger States and the FCT. Cumulatively from week 1-6 of 2022, a total of 358 confirmed cases including 59 deaths among confirmed cases have been reported with a case fatality rate of 16.5% across 19 states. In total, 1 631 cases are suspected in 2022. This is higher than the same period reported in 2021. Of all confirmed cases, 73% are from Edo (32%), Ondo (23%) and Bauchi (18%) States.									
Nigeria	Monkeypox	Ungraded	9-Sep-21	1-Jan-21	31-Jan-22	106	37	0	0,00%
According to the Nigeria Centre for Disease Control (NCDC), in Jan 2022, seven cases of suspected monkeypox were reported from four states: Adamawa (4), FCT (1), Imo (1), and Edo (1). Three of these cases were confirmed and no deaths have been reported. In 2021, a total of 98 suspected cases were reported throughout the year. Of the suspected cases, 34 were confirmed from nine states Delta (9), Lagos (6), Bayelsa (6), Rivers (6), Edo (3), Federal Capital Territory (1), Niger (1), Ogun (1), Cross River (1) and no deaths recorded.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	6-Mar-22	476	409	0	0,00%
No cases were reported this week. In 2022, 3 cVDPV2 case and 8 environmental samples have been reported. There were 415 cVDPV2 cases and 18 environmental samples 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	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	30-Dec-21	2 053	42	2	0,10%
From 1 January 2021 to 31 December 2021, a total of 2 053 yellow fever (YF) suspected cases were reported from 37 states including in 497 Local Government Areas (LGA) in Nigeria. Of suspected cases, 42 tested positive for YF by plaque reduction neutralization test at Institut Pasteur in Dakar. Some PRNT-positive cases had a history of YF vaccination.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	13-Mar-22	129 601	129 601	1 459	1,10%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 13 March 2022, a total of 129 601 cases with 1 459 deaths and 128 077 recovered cases have been reported in the country.									
Sahel region	Humanitarian crisis	Grade 2	11-Feb-22	-	11-Feb-22	-	-	-	
The humanitarian situation has further deteriorated in six countries of the Sahel: Burkina Faso, Cameroon, Chad, Mali, Niger, and Nigeria. 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	Floods	Ungraded	30-Dec-21	30-Dec-21	20-Jan-22	-	-	2	
On 28 and 29 December 2021, after heavy rainfall on the island of São Tomé, the rivers flooded and caused floods and landslides, affecting mainly the districts of Água Grande (capital city with 40% of the country's population) and Lembá (8% of the population). Broken bridges and landslides have left inaccessible districts of Lembá, Cantagalo and Mezochi. Dwellings have been destroyed and washed away by floods. Such heavy rainfall has not been recorded for 30 years. Several communities are without access to drinking water due to the destruction of water pipes. So far, 2 deaths are reported and several missing persons. Current responses in the country are focused on the capital city and the areas most in need are found in the Lembá and Me-Zochi districts, with about 9 000 people affected out of 15 000 according to the population data.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-20	13-Mar-22	5 935	5 935	72	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 13 March 2022, a total of 5 935 confirmed cases of COVID-19 have been reported, including 72 deaths. A total of 5 862 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	13-Mar-22	85 797	85 797	1 964	2,30%
From 2 March 2020 to 13 March 2022, a total of 85 797 confirmed cases of COVID-19 including 1 964 deaths and 83 781 recoveries have been reported in Senegal.									
Senegal	Poliomyelitis (cVDPV2)	Grade 2		4-Apr-21	23-Feb-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	11-Mar-22	39 653	39 653	163	0,40%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 11 March 2022 a total of 39 653 cases have been confirmed, including 39 253 recoveries and 163 deaths have been reported.									
Sierra Leone	Mass fire incident	Ungraded	5-Nov-21	6-Nov-21	18-Jan-22	304	304	154	50,70%
On 5 November 2021, there was a mass fire accident involving a fuel tank that ruptured its tanks after a collision with another vehicle. The fuel ignited and caused a mass burn affecting a number of persons with various degrees of burns including instant deaths. As of 18 January 2022, a total of 304 victims have been reported with 154 deaths and 3 are currently in admission. So far 87 patients have been discharged and are being treated as outpatients for burns.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	13-Mar-22	7 667	7 667	125	1,60%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 13 March 2022, a total 7 667 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 816 recovered cases.									
Sierra Leone	Lassa fever	Ungraded	12-Feb-21	1-Jan-21	9-Jan-22	17	15	9	52,90%
As of 9 January 2022, 17 cases of Lassa fever have been reported from Kenema (14) and Kailahun (3) districts since the beginning of 2021. Of these 9 of the cases have died yielding CFR of 52.9%. 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). During 2021, females (69%) and the 1-4 years (38%) age group were predominantly affected.									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	17-Feb-22	72		0	0,00%
In 2022, another measles outbreak was declared on 8 February 2022 in the Kambia district. The current outbreak started on 20 January 2022 with 7 new cases. The outbreak attained its highest peak on 4 February 2022 with 10 cases while more cases occurred in January as well. The transmission is still in progress. A cumulative number of 72 cases have been recorded. All these cases have been investigated, line listed, and treatment given for accordingly.									
Sierra Leone	Poliomyelitis (cVDPV2)	Grade 2	10-Dec-20	10-Dec-20	6-Mar-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	13-Mar-22	3 694 504	3 694 504	99 725	3,40%
Since the start of the COVID-19 pandemic in South Africa through 6 March 2022, a cumulative total of 3 694 504 confirmed cases and 99 725 deaths have been reported with 3 576 438 recoveries.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Africa	Enteric Fever (typhoid)	Ungraded	22-Feb-22	16-Feb-22	16-Feb-22	163		0	0,00%
South African health authorities have reported that clusters (localized outbreaks) of enteric fever of typhoid have been identified in the country. As of 16 February, it is reported 64 cases in the Western Cape, in three separate outbreaks, 18 in Northwest, 45 in Gauteng, 12 in Mpumalanga, nine in KwaZulu-Natal, seven in the Eastern Cape, four in the Free State and four in Limpopo. No death reported so far. South Africa is endemic for enteric fever caused by Salmonella Typhi, although the prevalence of disease is much lower than most other countries in sub-Saharan Africa. The most recent large outbreak occurred in Delmas in 2005, with over 2 900 cases. After the Delmas outbreak in 2005, the number of enteric fever cases in South Africa has remained stable with less than 150 cases per year (an average of 97 cases per year).									
South Sudan	Acute Food Insecurity	Grade 2	18-Dec-20	5-Apr-21	30-Nov-21	-	-	-	-
According to the World Food Programme an estimated 7.2 million people (60% of country's total population) faced crisis levels of food insecurity phase (IPC) 3 or worse from April to July 2021 - a figure that increased by 25% compared to the previous three months. Of the total number, 108 000 are in IPC 5, 2.4 are in IPC 4, and 4.6 million are in IPC 3. The total number includes 1.9 million acutely malnourished women and children suffering and 1.71 million internally displaced people. The six most affected counties are Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East. In 2021, the World Food Programme has reached some 498 887 flood-affected people with food and nutrition assistance.									
South Sudan	Floods	Grade 2	15-Jul-21	1-May-21	25-Jan-22	-	-	-	-
The escalating flooding began in May 2021 and has affected over 835K people in 33 counties as of 31 December 2021. Flooding has affected over 30 counties across 8 states. A rapidly worsening situation was noted in October 2021. In Unity State, there are over 200 000 people affected by floods. Water levels are now stabilizing, no rains for the past few weeks and partners are providing humanitarian services. Dykes are being repaired and reinforced to prevent further damage and displacement. About 70 health facilities were either cut-off, submerged, or damaged by the severe flooding. In Unity State, 27 health facilities have been relocated to higher grounds due to rising water levels.									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	n/a	27-Feb-22	-	-	-	-
The long-standing and complex humanitarian crisis in South Sudan continues. In 2022, there is a total of 8.3 million people in need of humanitarian assistance, 2 million people internally displaced and 189 000 people living in protection of civilian sites across the country. Flooding, violence and COVID-19 are the major drivers of humanitarian needs. In Unity State, fighting has escalated with issues arising in Mirmir Payam between the Sudan People's Liberation Army in Opposition and armed youths spreading to several villages in Koch, Mayiandit and Leer. Since February, civilians have been killed, raped, injured and forced to flee their homes. In Eastern Equatoria State there have been sporadic clashes between farming communities and herders in Magwi causing some 3K people to flee their homes and farms in Chomboro village.									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-20	13-Mar-22	17 064	17 064	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 13 March 2022, a total of 17 064 confirmed COVID-19 cases were reported in the country including 138 deaths and 13 507 recovered cases.									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	20-Feb-22	2 036	104	15	0,70%
The current outbreak in the Bentiu IDP camp is ongoing. As of 20 February 2022, a total of 2 036 cases of hepatitis E including 15 deaths (CFR: 0.7%) have been reported since January 2019. Hepatitis E cases have been above the epidemic threshold since week 19 of 2021. There were 57 new Hepatitis E cases in week 7, 2022.									
South Sudan	Malaria	Ungraded	28-Dec-21	1-Jan-22	20-Feb-22	430 157	430 157	61	0,00%
Between weeks 1-7 of 2022 (ending 20 February), 430 157 malaria cases including 61 deaths have been reported in South Sudan. Cases in Warrap, Western Bahr el Ghazal, and Northern Bahr el Ghazal States in 2022 are high when compared to the corresponding period of 2021. 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	23-Feb-22	160		2	1,30%
On 23 February 2022, health authorities for South Sudan declared measles outbreak in two counties of Torit and Maban. Nearly 160 cases with at least 2 deaths (CFR=1.3%) have been reported countrywide since the beginning of this year 2022. The Torit county has reported at least 33 cases and 2 deaths (CFR= 6.1%), the Maban county at least 112 cases and zero death (CFR=0.0%)									
South Sudan	Poliomyelitis (cVDPV2)	Grade 2	22-Oct-20	22-Oct-20	6-Feb-22	59	59	0	0,00%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There are 59 cVDPV2 cases in the country; 9 in 2021 and 50 in 2020.									
Tanzania, United Republic of	Cholera	Ungraded	13-Dec-21	13-Dec-21	19-Jan-22	30	-	4	13,30%
As of 31 January 2022, at least 30 cases of cholera have been reported in Tanzania's southern highlands regions of Rukwa and Kigoma. The first three cases of cholera were reported at Korongwe ward dispensary in early December 2021.									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	4-Mar-22	33 726	33 726	800	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 18 February 2022, a total of 33 726 cases have been reported in Tanzania Mainland including 800 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	13-Mar-22	36 860	36 860	272	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 March 2022, a total of 36 860 cases including 272 deaths and 36 542 recovered cases have been reported in the country.									
Togo	Lassa Fever	Ungraded	28-Feb-22	26-Feb-22	28-Feb-22	1	1	1	100,00%
A 35-year-old female died of Lassa fever complications in the Oti district of the Savanes region of Togo bordering Ghana. Onset of illness was 11 Feb 2022, she presented at three health facilities before her death on 26 Feb 2022. Retrospective investigation identified 26 contacts including 10 health care workers who had exposure to the case. As of 27 February 2022, 14 contacts provided samples for diagnostic testing for which all were reported negative for Lassa fever.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Togo	Measles	Ungraded	2-Feb-22	25-Nov-21	11-Feb-22	334	73	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 11 February 2022, six districts are experiencing the measles outbreak including Zio, Agoe, Golfe, Kpélé, Tchaoudjo and Bassar with a cumulative number of 334 suspected cases, 73 confirmed and 0 death (CFR 0.0%). Zio district has reported more cases 213 out of 334 (63.7%) with 25 confirmed. The outbreak stated in November 2021 in the Zio district. Among the 73 confirmed cases reported, 29 (39.7%) are unvaccinated, 35 cases (47.9%) have unknown vaccination status, 8 cases are vaccinated with only 5 cases that received 2 doses of measles vaccine.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	23-Feb-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	Floods	Ungraded	24-Jan-22	31-Jan-22	31-Jan-22	7 049	-	9	0,10%
On 24 January 2022, following heavy rains that triggered mudslides that affected Nyarusiza and Muramba sub-counties in Kisoro district, Uganda. 9 deaths were reported. Crops, livestock, shelter, water sources, shops, roads and schools are damaged. Two primary schools were affected and learning of at least 900 pupils have been interrupted. One health center with a catchment population of about 30 000 was affected and interrupted services. More than 4 000 children and other vulnerable groups were affected. No adequate shelter and wash facilities for the affected community posing a risk disease outbreaks.									
Uganda	Anthrax	Ungraded	14-Feb-22	12-Feb-22	19-Feb-22	1	1	0	0,00%
A 46-year-old male cattle rancher presented with skin lesions on his left thumb for two days after contact with a dead bull in his kraal on 28 January 2021. Previously, there had been three cattle deaths in the same kraal within a week. Samples taken tested positive for anthrax by polymerase chain reaction (PCR).									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	10-Mar-22	163 541	163 541	3 592	2,20%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 10 March 2022, a total of 163 541 confirmed COVID-19 cases, 100 108 recoveries with 3 592 deaths.									
Uganda	Rift Valley fever	Ungraded	14-Jan-22	12-Jan-22	4-Mar-22	5	5	1	20,00%
On 12 January 2022, the Ugandan Ministry of Health was notified of a confirmed case of Rift Valley fever (RVF). The patient was a 35-year-old male, resident of Kiruhura village, Mabare subcounty, Kagadi district. The date of onset was 2 January 2022 and he presented with fever, general body weakness and unexplained bleeding in vomitus, stool and cough. He was admitted successively in 2 hospitals and died on 10 January 2022. As of 4 March 2022, a total of five confirmed cases of RVF have been recorded.									
Uganda	Unknown disease	Ungraded	3-Mar-22	14-Feb-22	21-Feb-22	56	56	-	-
Following a rumor that there was a strange disease in Namutumba District, Uganda, that killed about 70 children who presented with fever, hematuria, and anemia and then died, the surveillance team verified the rumor. Of the 56 samples collected, all tested positive for malaria by the rapid diagnostic test and 32 by microscopy (57%). Based on the preliminary results of the blood samples examined and the clinical assessment of the cases, the probable cause of this illness is malaria. However, further testing is underway to rule out other causes.									
Uganda	Yellow fever	Grade 2	3-Mar-21	1-Mar-22	3-Mar-22	4	4	0	0,00%
On 6 March 2022, the Uganda Ministry of Health reported four cases of yellow fever confirmed by plaque reduction neutralization test (PRNT) at the Uganda Virus Research Institute (UVRI), with specimens collected between 3 January 2022 and 18 February 2022. Three cases are from Wakiso district (Katabi, Masulita, and Kitende sub-counties) and one case is from Masaka district (Bukakata sub-county).									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	13-Mar-22	315 202	315 202	3 960	1,30%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 13 March 2022, a total of 315 202 confirmed COVID-19 cases were reported in the country including 3 960 deaths and 309 765 recovered cases.									
Zimbabwe	Anthrax	Ungraded	6-May-19	1-Jan-22	22-Jan-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	Cholera	Ungraded	27-Jan-22	27-Jan-22	27-Jan-22	1	1	0	0,00%
A case of cholera was detected on 19 January 2022 in Chiredzi District in Masvingo Province. The case is a 51-year-old male patient who began to show signs and symptoms of cholera on 19 January 2022. Rapid laboratory test of stool done on 20 January was positive for cholera. A subsequent stool sample collected for culture done on the same day was positive for cholera. An additional sample analysed at the National Microbiology Reference Laboratory (NMRL) in Harare confirmed cholera. Zimbabwe has gone without reporting any cholera case for almost 3 years as the last case reported was in March 2019. Chiredzi district is known to be one of the cholera hotspots for Zimbabwe.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	6-Mar-22	239 209	239 209	5 399	2,30%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 6 March 2022, a total of 239 209 confirmed COVID-19 cases were reported in the country including 5 399 deaths and 228 744 cases that recovered.									
Closed Events									
Namibia	Hepatitis E	Protracted 1	18-Dec-17	8-Sep-17	15-Aug-21	8 090	8 090	66	0,80%
The current outbreak in Namibia started in December 2017. As of 15 August 2021, a cumulative total of 8 090 cases (2 117 laboratory-confirmed, 4 738 epidemiologically linked, and 1 235 suspected cases) including 66 deaths (CFR=0.8%) have been reported countrywide. Khomas Region remains the most affected region, accounting for 5 004 (62.0%) of reported cases, followed by Erongo 1 717 (21.2%).									

†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/ert/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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Correspondence on this publication may be directed to:

Dr Mary Stephen

Programme Area Manager, Health Information & Risk Assessment. ai

WHO Emergency Preparedness and Response

WHO Regional Office for Africa

P O Box. 06 Cité du Djoué, Brazzaville, Congo

Email: afrooutbreak@who.int

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Contributors

Dan MOGAKA (Kenya)
Nollascus GANDA (Kenya)
Nicole FOU DA MBARGA (Cameroon)
Emmanuel Christian DOUBA EPEE
(Cameroon)

A. Moussongo

Editorial Team

M. Stephen
C. Okot
V. Mize
G. Williams
J. Kimenyi
O. Ogundiran
T. Lee
F. Kambale
R. Mangosa Zaza
J. Nguna

Production Team

T. Mlanda
R. Ngom
F. Moussana

Editorial Advisory Group

Dr. Salam Gueye, *Regional Emergency
Director*
M. Stephen

Data sources

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