

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 9: 21 – 27 February 2022

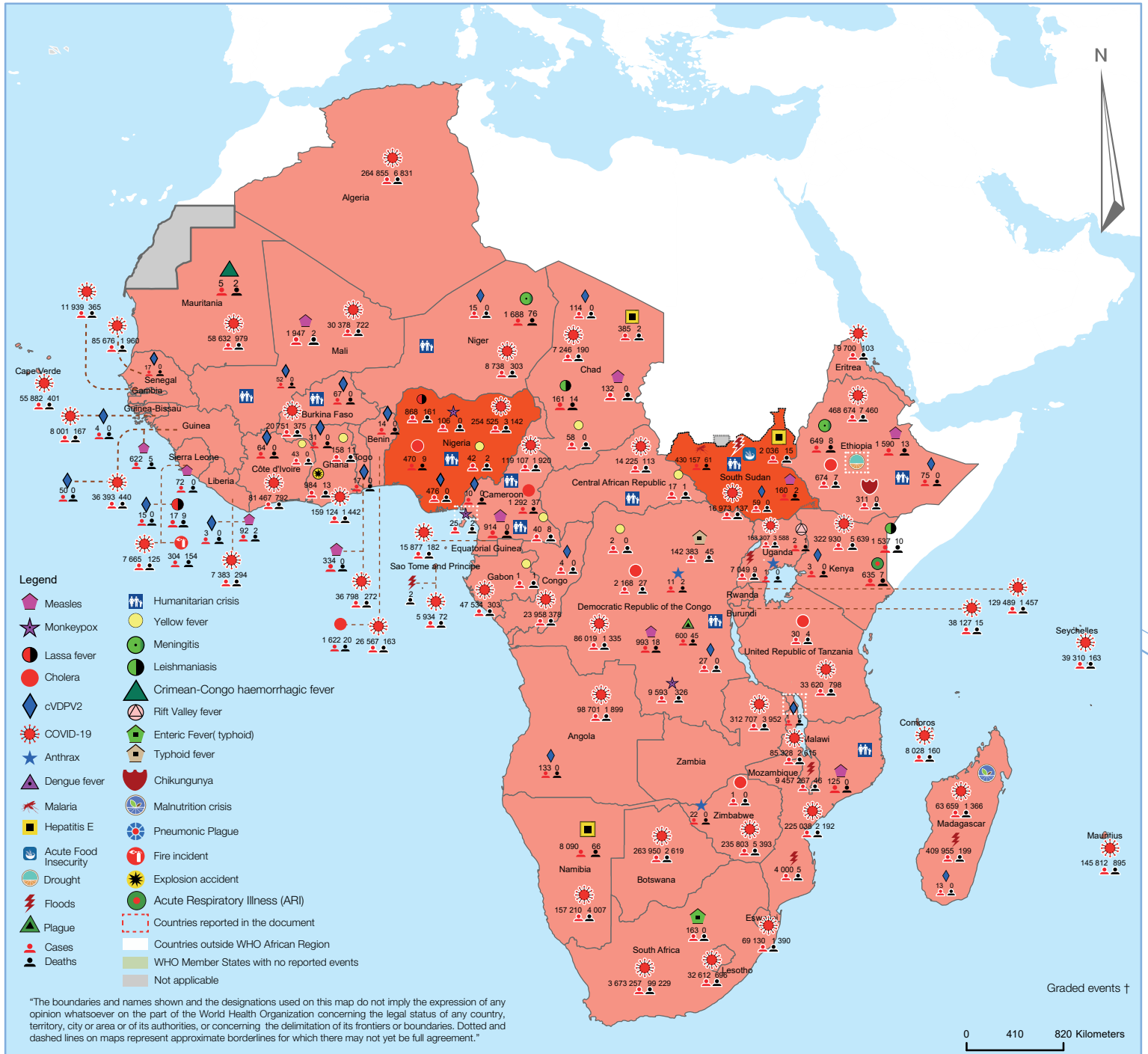
Data as reported by: 17:00; 27 February 2022

4
New events

138
Ongoing events

119
Outbreaks

23
Humanitarian crises



3 Grade 3 events	39 Grade 2 events	2 Grade 1 events	42 Ungraded events
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Overview

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This Weekly Bulletin focuses on public health emergencies occurring in the WHO African Region. The WHO Health Emergencies Programme is currently monitoring 142 events in the region. This week's articles cover:

- Wild Poliovirus type 1 in Malawi
- COVID-19 across the WHO African region
- MonkeyPox in Cameroon
- Drought in Ethiopia

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:

- After more than five years without a confirmed case of wild poliovirus in the African region, the disease has once again been detected in the city of Lilongwe, Malawi. A four-year old child was confirmed to have wild poliovirus type 1, which laboratory analysis has shown to be closely related to wild poliovirus strains previously detected in Pakistan. The patient, who has symptoms of paralysis, has been reported with no history of travel. Furthermore, the child is said to have been at least partially vaccinated against the disease. Based on available immunization records, both the overall population as well as residents of Lilongwe have relatively good vaccination coverage. Despite these preventative measures, wild poliovirus has once again been confirmed in Malawi, the third country in the world to be having wild poliovirus strains.
- It is exactly two-years since the WHO African region has been battling the COVID-19 pandemic. The COVID-19 pandemic continues with a lessening weekly reported cases for the ninth consecutive week. Despite making great strides in vaccine rollout during the past year, vaccination rates on the continent are the lowest in the world. To help speed up the roll out in Africa, WHO and partners announced support for mass vaccination campaigns in 10 countries, aiming to reach 100 million people by the end of April 2022. Vaccines are not the only weapon in the fight against the COVID-19 pandemic as regular testing and observing the tried-and-true public health measures can keep infections from rising within communities.
- Cameroon has been experiencing a monkeypox outbreak since December 2021 with cases reported from health districts of Ayos, Djoungoulo, Benakuma, and Kumba. Lack of resources for response activities, including insufficient supplies for case management, low technical capacities of health care providers in the affected areas, insufficient risk communication activities are among the operational gaps reported so far. The North-West and South-West regions that are reporting most cases have been afflicted by insecurity and humanitarian crisis, along with the ongoing COVID-19 pandemic in the country.
- The southern and south-eastern parts of Ethiopia are currently witnessing a dire and protracted drought crisis with more than 6.8 million people affected. These populations are in urgent need of food, water, healthcare, shelter, and livestock assistance. However, funding gaps are currently hampering the humanitarian response interventions in affected areas, as the country is currently facing multiple recurrent and protracted emergencies competing for financial, human and material resources. This mostly includes conflict in the northern part of the country and ongoing outbreaks of COVID-19, cholera, measles, meningitis, and circulating vaccine-derived poliovirus type 2 (cVDPV2). The health system is weak, with limited access to adequate health care services and insufficient disease surveillance as well as emergency preparedness and rapid response capacities.

Ongoing events

Wild Poliovirus

Malawi

1
cases

0
Deaths

20.0%
CFR

EVENT DESCRIPTION

A four-year old child in Lilongwe, Malawi was confirmed to have wild poliovirus type 1 (WPV1) after presenting to a health clinic on 19 November 2021 with symptoms of acute flaccid paralysis (AFP). Samples were collected the following week and sent to the National Institute of Communicable Disease (NICD) in South Africa and to the Centers for Disease Control and Prevention (CDC) in the United States for testing and sequencing where the patient was found to have WPV1. Sequencing of the sample isolates show a close connection to WPV1 isolates that are currently circulating in Pakistan. The child has had no history of travel. Furthermore, the child has had the first dose of bivalent oral poliovirus vaccine (bOPV) given at birth.

The last clinical case of wild poliovirus in Malawi was confirmed 30 years ago in 1992 and no other cases (including vaccine-derived polio) have been reported since. Through global initiatives, there was a push to adopt bOPV vaccine schemes replacing trivalent oral poliovirus vaccination (tOPV) schemes in 2016, which Malawi completed on 25 April 2016. The bOPV is supposed to produce a better immune response against poliovirus types 1 and 3 than tOPV but does not protect against poliovirus serotype 2. The bOPV vaccine is also used for responses to poliovirus outbreaks for types 1 and 3. In order to provide protection for the population from poliovirus type 2 while tOPV is phased out, supplemental immunization activities for type 2 are conducted, which Malawi's last completed in 2013. Overall, the current immunization rates in the country, and even in Lilongwe itself, are estimated to be sufficient surpassing targets, which are >80% at the district level and >90% at the national level. In Lilongwe the coverage was estimated at 96% in 2020 and 111% in 2021.

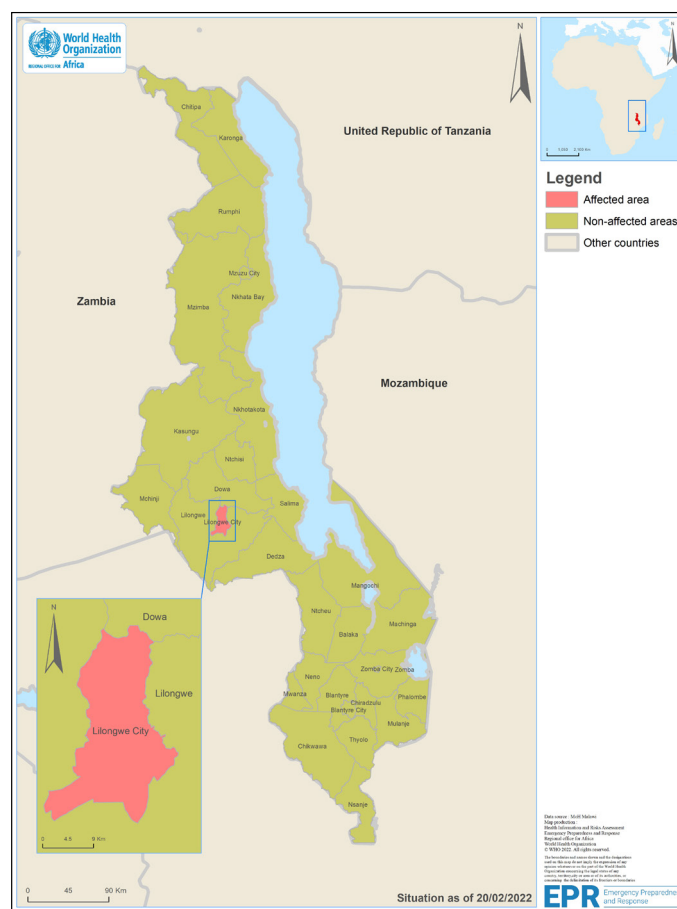
PUBLIC HEALTH ACTIONS

- Global and regional rapid response teams have been assembled to provide support to the country's response efforts
- A preliminary field investigation was conducted to clinically assess the case, perform contact tracing, survey the case's household to gauge immunization coverage, and assess water, sanitation, and hygiene systems.
- Active case search was conducted in health facility by reviewing records of patients who have had previous acute flaccid paralysis and by reviewing reporting tools.

SITUATION INTERPRETATION

Despite the achievements to eradicate Polio in the Africa region, the first case of wild poliovirus has been confirmed in over 5 years. Though continuous efforts have been made to eliminate the disease, the threat of resurgence remains. Since sequencing has shown that the case is closely linked to strains circulating in

Location of the Wild Poliovirus case Lilongwe city, Malawi, as of 20 February 2022.



other continents, we must understand that the entire world is still susceptible to the disease as long as strains exist in any part of the world.

PROPOSED ACTIONS

- A call to all countries to strengthen AFP surveillance to quickly detect polio cases and stop potential importation of other cases.
- Maintain high levels of vaccination rates among the entire population around the globe so that polio eradication can be achieved.

EVENT DESCRIPTION

The number of new COVID-19 cases in the WHO African Region decreased by 24.0% during the week of 21 to 27 February 2022 as compared to the previous week. The number of new deaths decreased by 62.0% in the reporting week. Across the region, over 23 624 new COVID-19 infections and 715 new deaths were reported from 38 and 27 countries, respectively.

In the past seven days, a total of 31 countries (70.2%) reported a decrease of 20% or more in the number of new cases (Table 1), while only Congo, Guinea, Rwanda, Sao Tome and Principe and Zimbabwe saw a 20% or more increase in weekly cases compared to the past week. Burkina Faso, Cameroon, Central African Republic, Chad, Ghana, Liberia, and the United Republic of Tanzania did not report any new cases in the past seven days.

The top five countries recorded the highest number of new cases (20 773, 88.0%) with South Africa recording the highest number (14 710 new cases, 12% decrease, 24.3.0 new cases per 100 000 population), followed by Zimbabwe (2 451 new cases, 24.4% increase, 16.0 new cases per 100 000), Zambia (1 513 new cases, 11.0% decrease, 8.0 new cases per 100 000), Botswana (1 298 new cases, 40.0% decrease, 53.4 new cases per 100 000), and Algeria (801 new cases, 65.0% decrease, 2.0 new cases per 100 000).

For the period (21 to 27 February 2022), an increase in weekly COVID-19 deaths was observed in the African region as 715 deaths were reported compared to 1 868 recorded in the previous week. The highest numbers of new deaths were reported from South Africa (562 new deaths; 66.4% decrease; 1.0 new deaths per 100 000 population), Algeria (34 new deaths;

50.0% decrease; 0.1 new deaths per 100 000), Ethiopia (22 new deaths; 57.0% decrease; 0.0 new deaths per 100 000), Madagascar (16 new deaths; 6.7% increase; 0.1 new deaths per 100 000), and Seychelles (12 new deaths; 1000% increase; 12.1 new deaths per 100 000).

Three countries met the criteria for resurgence (a 20% increase in new COVID-19 cases for a period of at least two consecutive weeks) that cases in the past week have reached 30% or more of the country's highest weekly number of cases.): Botswana, Madagascar, and Mauritius.

During the past week, the WHO African Region marked 2-years of responding to the COVID-19 pandemic on 26 February 2022. As of 27 February 2022, nearly 8.0 million confirmed COVID-19 cases and 168 934 deaths have been reported in the WHO African Region, resulting in a CFR of 2.1%. More than 7.4 million recoveries have been recorded, giving a recovery rate of 94.0%.

Overall South Africa has recorded the highest number of COVID-19 cases in the region, with 3 673 257 cases (46.0% of all reported cases), followed by Ethiopia (468 674, 5.9%), Kenya (322 930, 4.0%), Zambia (312 707, 3.9%), and Algeria (264 855, 3.3%), accounting for 63.0% (5 042 423) of all cases.

Similarly, most reported deaths occurred in South Africa, which accounts for 59.0% (99 229) of all deaths recorded in the region.

Ethiopia has the second-highest number of deaths (7 460 deaths, 4.4%) followed by Algeria (6 831, 4.0%), Kenya (5 639, 3.2 %) and Zimbabwe (5 393, 3.2%), all accounting for 74.0% (124 552) of all deaths reported in the region.

A total of eight new health worker infections were reported from Cameroon (5), Kenya (2), and Congo (1) in the past week. Thus far, a cumulative total of 153 226 COVID-19 infections (2.0% of all cases) among health workers in the region, with South Africa accounting for 46.4% (71 113) of the total infections. Kenya (12 720, 8.3%), Algeria (11 936, 8.0%), Zimbabwe (6 015, 4.0%) and Namibia (5 316, 3.5%) 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%), Algeria (5.0%), Chad (4.0%), 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 11.4 million infections. In addition, more than 247 644 deaths (CFR 2.2%) and more than 10.4 million people have recovered. The African continent accounts for 2.9% of global cases and 4.2% of global deaths.

Approximately 170 million people are fully vaccinated, or 13% of the African population. Eritrea has not yet begun a vaccination programme.

WHO, UNICEF, Gavi, the Vaccine Alliance, and partners are supporting mass vaccination campaigns in 10 priority countries to reach 100 million people by the end of April 2022. The 10 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.

The global 70% target provides countries with a benchmark to achieve broad-based vaccination and to vaccinate high-priority populations with primary and booster doses.

Two countries have reached the mid-2022 70% target: Mauritius and Seychelles. Additional 10 countries could reach this target by mid-2022 if supported to scale-up operations. These 10 countries are Comoros, Egypt, Eswatini, Lesotho, Liberia, Mauritania, Mozambique, Sao Tome and Principe, South Africa, and Zimbabwe.

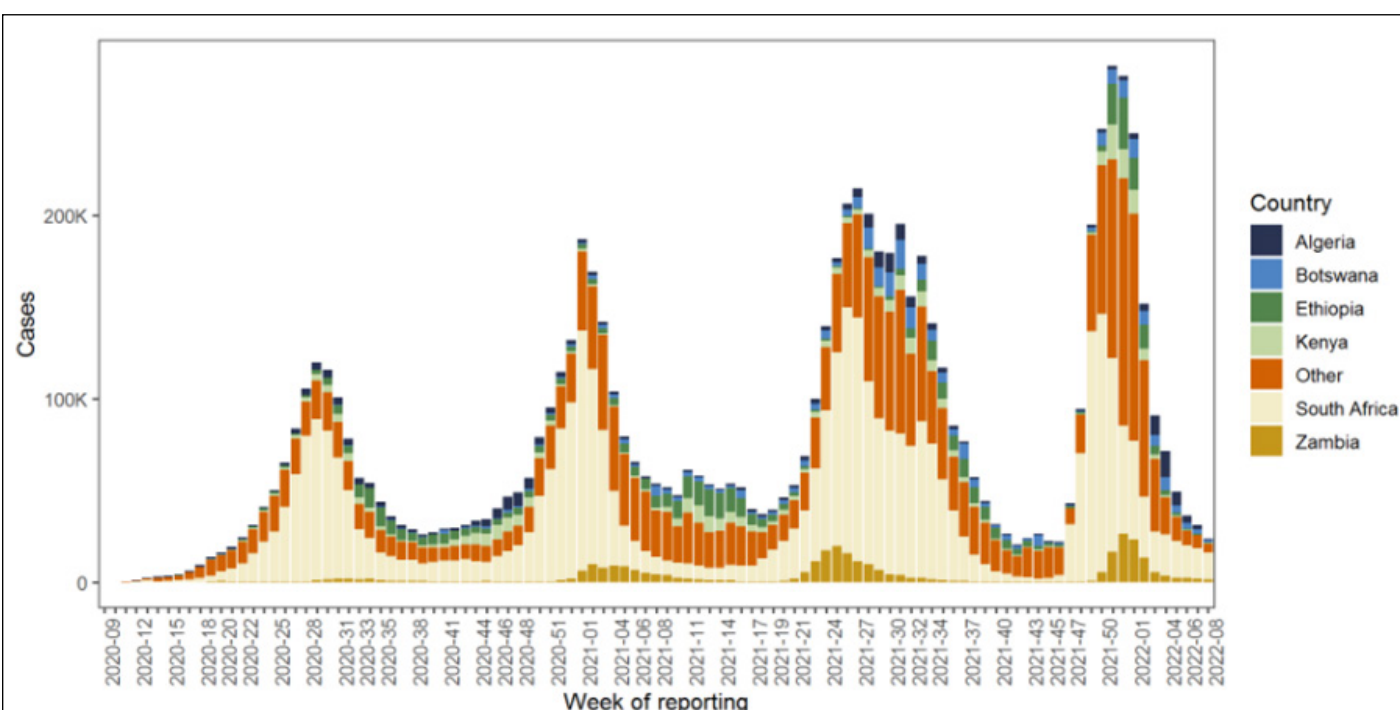
Nine countries have fully vaccinated 5% to 10% of their populations: Burkina Faso, Djibouti, Gabon, Guinea, Republic of Congo, Senegal, Sierra Leone, Somalia, and Uganda. Eleven have fully vaccinated 2% to 4.9%: Cameroon, Ethiopia, Madagascar, Malawi, Mali, Niger, Nigeria, South Sudan, Sudan, Tanzania, and Zambia. Three have fully vaccinated less than 2%: Burundi, Chad, and Democratic Republic of Congo.

SITUATION INTERPRETATION

New weekly cases on the African continent dropped for another week. Only five countries reported a significant increase in new cases when compared to the prior week. Although deaths increased overall, some countries reported decreases. With the low vaccination rates observed across the region, WHO is working closely with African countries to determine their vaccine needs during the next six months, which will help with a coordinated rollout.

New push to drive up Africa's COVID-19 vaccination

The weekly distribution of confirmed cases of COVID-19 in the WHO African Region by week of reporting, 25 February 2020 – 27 February 2022 (n = 7 993 089)



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[Go to map of the outbreaks](#)

New cases reported in the past seven days and cumulative totals by country: Data as of 27 February 2022 (7 993 089)

Country	Total cases	New cases	Percent change in new cases	Total Deaths	New Deaths	Percent change in new deaths	Health Worker infections
South Africa	3 673 257	14710	-12.1	99 229	562	-66.4	71 113
Ethiopia	468 674	329	-61.2	7 460	22	0.0	3 354
Kenya	322 930	234	4.9	5 639	4	0.0	12 720
Zambia	312 707	1513	-10.6	3 952	9	50.0	1 121
Algeria	264 855	801	-65.2	6 831	34	-50.0	11 936
Botswana	263 950	1298	-39.9	2 619	5	-54.5	2 082
Nigeria	254 525	232	-16.2	3 142	0	-100	3 175
Zimbabwe	235 803	2451	24.4	5 393	7	-41.7	6 015
Mozambique	225 038	135	-32.5	2 192	3	0.0	4 779
Uganda	163 307	169	-37.2	3 588	3	-40.0	3 025
Ghana	159 124	0	-100.0	1 442	0	-100	4 763
Namibia	157 133	99	-55.8	4 007	5	-28.6	5 316
Rwanda	129 489	117	58.1	1 457	1	-83.3	682
Cameroon	119 107	0	-100.0	1 920	0	-100	4 413
Angola	98 701	63	-49.2	1 899	0	-100	939
Democratic Republic of the Congo	86 018	19	-88.1	1 335	0	0.0	728
Senegal	85 676	112	-26.3	1 960	2	100	419
Malawi	85 328	109	-43.8	2 615	9	-10.0	3 026
Côte d'Ivoire	81 467	100	-59.8	792	1	-50.0	1 913
Mauritius	70 862	0	0.0	786		0.0	30
Eswatini	69 130	152	-16.9	1 390	2	-60.0	1 193
Madagascar	63 659	226	-61.6	1 366	16	6.7	70
Mauritania	58 632	21	-50.0	979	3	-25.0	24
Cabo Verde	55 882	19	-9.5	401	1	0.0	140
Gabon	47 534	28	-73.8	303	0	-100	345
Seychelles	39 310	182	-57.0	163	12	1100	945
Burundi	38 127	109	14.7	15	0	0.0	38
Togo	36 798	60	-23.1	272	1	0.0	891
Guinea	36 393	39	56.0	440	2	0.0	682
United Republic of Tanzania	33 620	0	-100.0	798	0	-100	3 351
Lesotho	32 612	11	-93.4	696	0	0.0	473
Mali	30 379	38	-49.3	722	2	-50.0	87
Benin	26 567	0	0.0	163	0	0.0	139
Congo	24 020	95	86.3	378	1	-50	303
Burkina Faso	20 751	0	-100.0	375	0	0.0	288
South Sudan	16 973	37	-5.1	137	0	0.0	294
Equatorial Guinea	15 877	3	-85.7	182	0	0.0	607
Central African Republic	14 225	0	-100.0	113	0	0.0	51
Gambia	11 939	15	0.0	365	0	0.0	142
Eritrea	9 700	13	-31.6	103	0	0.0	0
Niger	8 751	13	-51.9	307	4	0.0	355
Comoros	8 028	7	-56.3	160	0	0.0	155
Guinea-Bissau	8 001	56	-41.7	167	1	-50.0	23
Sierra Leone	7 664	1	-90.9	125	0	0.0	269
Liberia	7 384	0	-100.0	294	2	0.0	418
Chad	7 248	0	-100.0	190	0	0.0	292
Sao Tome and Principe	5 934	8	33.3	72	1	0.0	102
Cumulative Cases (N= 47)	7 993 089	1 619	-23.7	168 934	47	-61.7	153 226

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

EVENT DESCRIPTION

A monkeypox outbreak was reported in Cameroon on 15 December 2021 following confirmation of one case from Aynos health district, in the Centre region. As of 17 February 2022, a total of 25 suspected cases with three confirmed and two deaths (CFR =8.0%) have been reported. Cases were reported from four health districts, namely Aynos, Benakuma, Djoungolo, and Kumba across three regions of Centre, North-West and South-West. The monkeypox virus was detected in three (25.0%) of the 12 laboratory samples that have been collected and analysed.

Among the four affected health districts, two (Aynos and Djoungolo) are from the Centre region, with two suspected and one confirmed case coming from Aynos health district and four suspected cases and zero confirmed case from Djoungolo health district. The last case was reported on 15 February 2022 in the Centre region from Djoungolo health district. No death has been reported so far in this Centre region.

In the North-West region, only Benakuma health district is affected, with the highest number of cases, 10 (40%) out of the 25 total cases reported. One death has been recorded in this region (CFR=10%) and the last case was reported on 3 February 2022.

The South-West region is the second in number of cases reported to-date, with nine cases out of the 25 (36.0%) and one death recorded (CFR= 11.1%). Of the nine suspected cases, two were confirmed. All cases reported in this region are from Kumba health district, with the last case reported on 29 December 2021.

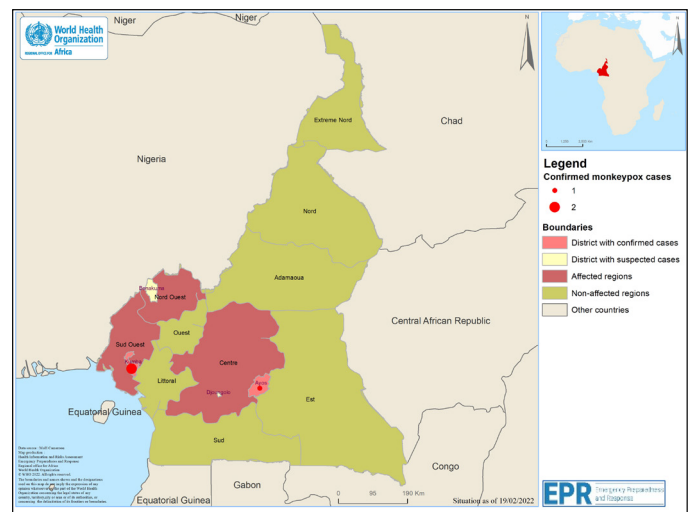
PUBLIC HEALTH ACTIONS

- The Ministry of health has conducted advocacy for resource mobilization for response and prevention activities
- Rapid case investigations have been conducted in the affected areas with sample collection for laboratory confirmation and case management of the reported cases
- In-depth case investigation protocol has been drafted
- Intensification of event-based surveillance for early case detection in the areas with security challenges is ongoing.

SITUATION INTERPRETATION

Monkeypox is a rare zoonosis which occurs sporadically in forested areas of Central and West Africa. Monkeypox cases have been regularly reported in Cameroon since the 1970s. Between 2020 and 2022, more than half of the regions in the country reported at least one case of monkeypox. The majority of cases recorded for the ongoing outbreak have been reported in the North-West and South-West regions that are currently characterized by insecurity and humanitarian crisis.

Distribution of Monkeypox cases in Cameroon, as of 19 February 2022



PROPOSED ACTIONS

- Identified gaps so far should be covered in order to optimize response to this outbreak especially in the areas with difficult access due to security challenges.
- Risk communication activities and community mobilization to reduce risk of animal-to-human and human-to-human transmissions should be intensified
- Active case finding, contact tracing and case management should be also intensified.

EVENT DESCRIPTION

After three consecutive failed rainy seasons since late 2020, Ethiopia is currently experiencing a huge and prolonged drought crisis which is affecting more than 6.8 million people, of whom 4 million are being affected on their livestock assets. The crisis lies in several areas located in southern and south-eastern Ethiopia, with four regions being mostly affected: Somali (10 zones), Oromia (8 zones), Southern Nations, Nationalities, and Peoples – SNNP (7 zones) and Southwest (1 zone).

Following the terrible aftermath of the latest severe drought that occurred in 2017, populations living in these areas are still fragile enough to witness the current harsh conditions, the first signs of which started showing-up by the end of 2020. It is estimated that 95% of water sources in the Dawa Zone (Somali region) and 82% of water sources in the Borena Zone (Oromia region) have dried-up, with about 774 000 people facing critical water shortage across the two most drought-affected zones. Worryingly, projections indicate that the next rainy season in March/April 2022 might also be largely below expectations, making it the fourth consecutive failed rainy season, hence exacerbating an already dire humanitarian situation.

The current crisis is compromising fragile livelihoods that largely depend on livestock. Besides, it is worsening food insecurity and nutritional needs while eroding coping strategies for the most vulnerable. The number of livestock deaths is continuously increasing in the drought-affected regions, due to lack of food and water, which is an important indicator of the dreadful ongoing situation. Although 68 000 livestock deaths occurred last November, 172 000 were reported in December 2021 and more than 260 000 deaths were projected for January 2022 across the Somali, Oromia, and SNNP regions. Another 2.0 million livestock are at an increased risk of death in the near future. Additionally, livestock market value has also been significantly reduced as animals are not marketable, hence jeopardizing families' source of income. In such circumstances, pastoralists are forced to migrate, walking and traveling hundreds of kilometers into unknown areas in search of water and pasture, leaving behind members of their families who are often weak, vulnerable, or not fully able to provide for the rest of the family.

Food insecurity and malnutrition are taking alarming proportions in the drought-affected areas. The surviving animals are very weak and emaciated; they consequentially produce little or no milk, which direly hampers the availability of the main source of nutrition for children. In December 2021 for instance, a nutritional survey conducted in the Somali region revealed a global acute malnutrition rate of 18%. In addition, UNICEF estimates revealed that around 225 000 malnourished children and nearly 100 000 pregnant and breastfeeding women in Somali and Oromia currently need nutrition support.

Furthermore, the drought-affected regions have also been experiencing other shocks which increase local populations' vulnerabilities. This includes flooding, conflict with internally displaced populations residing in the regions and competing for shelter, food and water, and ongoing epidemics of COVID-19, cholera, measles, suspected meningitis, and cVDPV2. These threats increase the health needs of affected populations, in a context of weak health system, low vaccination coverage, limited

access to health care services and insufficient capacity for early outbreak detection, verification, investigation, and quick and efficient response.

PUBLIC HEALTH ACTIONS

- Government, humanitarian actors and community resource mobilization has been ongoing at national, regional, and local levels. Approximately \$4.6 million have already been invested in water trucking, food distribution, emergency shelter items, animal feeds and other aspects of the drought response.
- A drought-response plan for the Oromia region is under development, with support from humanitarian partners.
- An advocacy is under way to scale-up mobile health and nutrition services for the drought-affected districts, in order to increase the essential health services for pastoral communities and internally displaced populations.
- Emergency essential drugs and medical supplies are being provided to those facilities that have a severe shortage of supplies.
- An early warning health system is being strengthened through active disease surveillance, early detection of new events with proper reporting, emergency preparedness, and rapid response.
- An advocacy is also made for more health partners to participate in the mitigation of the drought's negative impact on the health and nutrition of the drought-affected areas.
- Moderate acute malnutrition services are reinforced to reduce severe acute malnutrition admissions in health care facilities and specialized centres.

SITUATION INTERPRETATION

Since late 2020, the southern and south-eastern regions of Ethiopia are experiencing a prolonged drought crisis, which is estimated to go beyond the expected March/April 2022 rainy season. It is therefore anticipated that the situation will get worse in the different drought-affected areas, with much more than the current 6.8 million people that will be affected. The number of livestock deaths is also expected to increase sharply as the situation deteriorates severely, aggravating already compromised people's livelihoods. Food insecurity and malnutrition will be on the rise, with majority of IPC3 areas moving to IPC4/IPC5. Additionally, more critical water shortages are to be witnessed, with consequential expansion of current (or occurrence of future) outbreaks as people are migrating over longer distances in search of water and pasture.

PROPOSED ACTIONS

- ▶ Urgent, flexible, and timely funding is needed to deliver assistance to the drought-affected population to prevent another major humanitarian crisis in Ethiopia. Therefore, there is crucial need for resource mobilization and deeper involvement of most humanitarian partners.
- ▶ The multi-sectoral response needs are to be urgently scaled-up, including increasing water trucking interventions, rehabilitation of livestock watering points, and provision of food and non-food items.
- ▶ Populations' livelihoods need to be supported in order to maintain production capacity and provide nutrition supplies for children and pregnant and breastfeeding women.
- ▶ Informed gender-integrated responses are required to strengthen access of the most vulnerable people to humanitarian services, according to the specific needs of age, gender, and disabilities.
- ▶ The supply-chain management ought to be reinforced and a robust pipeline should be put in place to sustain the response, which takes into account facilitating importation of medical supplies by partners.
- ▶ The early warning and alert system should be strengthened for quick detection, prevention, control, and efficient response to disease outbreaks.



Chlorination test of water collected from Plastic drums

All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
New Events									
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.									
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.									
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	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%)									
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-20	27-Feb-22	264 855	264 855	6 831	2,60%
From 25 February 2020 to 27 February 2022, a total of 264 855 confirmed cases of COVID-19 with 6 831 deaths (CFR 2.6%) have been reported from Algeria. A total of 177 437 cases have recovered.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	24-Feb-22	98 701	98 701	1 899	1,90%
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 24 February 2022, a total of 98 701 confirmed COVID-19 cases have been reported in the country with 1 899 deaths and 96 622 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	13-Feb-22	26 567	26 567	163	0,60%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 13 February 2022, a total of 26 567 cases have been reported in the country with 163 deaths and 26 353 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	21-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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Burkina Faso	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	27-Feb-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	27-Feb-22	38 127	38 127	15	0,00%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 27 February 2022, the total number of confirmed COVID-19 cases is 38 127, including 15 deaths and 38 031 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 Kousseri, 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.									
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	16-Feb-22	119 107	119 107	1 920	1,60%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 16 February 2022, a total of 119 107 cases have been reported, including 1 920 deaths and 116 957 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	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	26-Feb-22	55 882	55 882	401	0,70%
The first COVID-19 confirmed case was reported in Cabo Verde on 19 March 2020. As of 26 February 2022, a total of 55 882 confirmed COVID-19 cases including 401 deaths and 55 409 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-13	17-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 670K people that are internally displaced as of 30 Nov 2021 and 744K 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	19-Feb-22	14 225	14 225	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 8 February 2022, a total of 14 225 confirmed cases, 113 deaths and 12 018 recovered were reported.									
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	21-Feb-22	7 246	7 246	190	2,60%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 21 February 2022, a total of 7 246 confirmed COVID-19 cases were reported in the country including 190 deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
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	30-Nov-21	161	15	14	8,70%
Since 1 January 2018, a total of 161 cases have been reported by 4 provinces (N'Djamena, Borkou, Tibesti and Ouaddai) and 14 deaths (CFR 8.7%). 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%).									
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, Dourballi, 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.									
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	24-Feb-22	8 028	8 028	160	2,00%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 24 February 2022, a total of 8 028 confirmed COVID-19 cases, including 160 deaths and 7 847 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	24-Feb-22	23 958	23 958	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 24 February 2022, a total of 23 958 cases including 378 deaths and 22 248 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	26-Feb-22	81 467	81 467	792	1,00%
Since 11 March 2020, a total of 81 467 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 792 deaths, and a total of 79 816 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	1-Feb-22	-	-	-	-
As of 31 Jan 2022, there are an estimated 5.5 million people internally displaced, 517 140 new refugees and asylum seekers, 1.2 million returnees, and 27 million people need emergency food assistance in the entire country. Additionally, 8.9 million need health assistance. In the Bambu health zone, more than 24K people left in three phases from 9-30 Jan 2022 in several localities. On 29 Jan 2022, Zengo health area experienced an incursion by militiamen looting homes and health centres (looting of equipment, furniture, supplies, mattresses, medicines and others). Significant needs such as food and health care remain to be satisfied.									
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	21-Feb-22	86 019	86 017	1 335	1,60%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 86 017 confirmed cases and two probable case, including 1 335 deaths have been reported. A total of 64 656 people have recovered. The number of recoveries cases has been adjusted									

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	Measles	Ungraded	12-Oct-21	1-Jan-22	26-Jan-22	993	51	18	1,80%
Since early January 2022, 993 measles suspected cases and 18 deaths (CFR 1.8%) have been reported; 51 of 83 suspected cases investigated became positive for measles IgM. In 2021, up to epi week 48 (ending 15 December) 55 940 suspected measles cases and 825 deaths (CFR 1.5%) were reported.									
Democratic Republic of the Congo	Monkeypox	Ungraded	n/a	1-Jan-20	30-Jan-22	9 593	39	326	3,40%
Between epidemiological weeks 1-4 of 2022, 286 cases have been reported with 21 deaths (CFR 7.3%). Compared to weeks 1-4 in 2021, 272 cases were reported with 6 deaths (CFR 2.2%). 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	30-Jan-22	600	-	45	7,50%
Between epidemiological weeks 1-4 of 2022, 1 case of plague has been reported with no deaths. Compared to weeks 1-4 in 2021, 61 cases were reported with 1 death. 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.									
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	21-Nov-21	2	2	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 21 November 2021, confirmatory results are pending for six additional presumptive positive cases.									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	22-Feb-22	15 877	15 877	182	1,10%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 16 February 2022, a total of 15 877 cases have been reported in the country with 182 deaths and 15 653 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	27-Feb-22	9 700	9 700	103	1,10%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 27 February 2022, a total of 9 700 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 9 593 patients have recovered from the disease.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	27-Feb-22	69 130	69 130	1 390	2,00%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 13 March 2020. As of 27 February 2022, a total of 69 130 cases have been reported in the country including 67 643 recoveries. A total of 1 390 associated deaths have been reported.									
Ethiopia	Drought/food insecurity	Ungraded	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).									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
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	27-Feb-22	468 674	468 674	7 460	1,60%
Since the confirmation of the first case on 13 March 2020, Ethiopia has confirmed a total of 468 674 cases of COVID-19 as of 27 February 2022, with 7 460 deaths and 416 704 recoveries.									
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 ration (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	27-Feb-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	23-Jan-22	649		8	1,20%
Between week 49 of 2021 ending 12 December and week 3 of 2022 ending 23 January, a cumulative number of 649 suspected cases of meningitis and eight deaths (CFR 1.2 %) were reported from 77 districts (woredas) in Ethiopia. Between 3 to 30 January 2022, 332 meningitis suspected cases and one death (CFR 0.3%) were reported, with 28 districts crossing the alert threshold and one district (Jenela district in Harari region) crossing the epidemic threshold. Investigations are still ongoing including laboratory confirmation of meningitis.									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	24-Feb-22	47 534	47 534	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 24 February 2022, a total of 47 534 cases including 303 deaths and 46 155 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	22-Feb-22	11 939	11 939	365	3,10%
The first COVID-19 confirmed case was reported in the Gambia on 17 March 2020. As of 22 February 2022, a total of 11 939 confirmed COVID-19 cases including 365 deaths, and 11 559 recoveries have been reported in the country.									
Ghana	Explosion accident	Ungraded	20-Jan-22	20-Jan-22	22-Jan-22	984		13	1,30%
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. As of 22 January 2021, 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. A total of 75 persons were on admission with various degrees of injuries (mainly burns) including 6 critically injured									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	16-Feb-22	159 124	159 124	1 442	0,90%
As of 16 February 2022, a total of 159 124 confirmed COVID-19 cases have been reported in Ghana. There have been 1 442 deaths and 157 133 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	21-Feb-22	36 393	36 393	440	1,20%
The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 16 February 2022, a total of 36 354 cases including 32 939 recovered cases and 440 deaths have been reported in the country.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Guinea	Measles	Ungraded	9-May-18	1-Jan-21	1-Dec-21	622	321	5	0,80%
In 2021, as of Epi week 49, 622 suspected cases have been reported, 601 samples taken, 601 samples tested of which 321 tested positive; 5 deaths have been reported. Out of the 321 positive persons, 64 (12%) were vaccinated. In 2020 at the same epi week, 6070 suspected cases, 870 cases sampled, 767 samples tested of which 524 positive, 269 negative and 48 undetermined; 15 deaths have been reported. Since 2020, a total of 6 623 suspected cases, 1 120 tests analysed, 1 141 confirmed cases, 19 deaths have been reported.									
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	25-Feb-22	8 001	8 001	167	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 25 February 2022, the country has reported 8 001 confirmed cases of COVID-19 with 6 978 recoveries and 167 deaths.									
Guinea-Bissau	Poliomyelitis (cVDPV2)	Grade 2	9-Nov-21	9-Nov-21	27-Feb-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.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	27-Feb-22	322 930	322 930	5 639	1,70%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 27 February 2022, 322 930 confirmed COVID-19 cases including 5 639 deaths and 303 248 recoveries have been reported in the country.									
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	27-Feb-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.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-20	22-Feb-22	32 612	32 612	696	2,10%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 22 February 2022, a total of 32 612 cases of COVID-19 have been reported, including 23 343 recoveries and 696 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	22-Feb-22	7 383	7 383	294	4,00%
From 16 March 2020 to 22 February 2022, Liberia has recorded a total of 7 383 cases including 294 deaths and 7 063 recoveries have been reported.									
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	27-Feb-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	409 955	-	199	0,00%
Heavy rains in Madagascar from multiple weather systems (Tropical Storm Ana, Cyclone Batsirai, and Tropical Storm Dumako) 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 February 2022, there have been 131 555 victims affected including 55 deaths by the Tropical Storm Ana weather system in 12 regions. Accommodation sites for people affected by Tropical Storm Ana have now closed. Damages from Cyclone Batsirai have been reported as of 16 February 2022 where 146 671 people have been affected causing 121 deaths mostly in the district of Ikongo of Fitovinany Region. As of 16 February 2022, 20 185 people have been displaced by the effects of Cyclone Batsirai and currently reside in 51 accommodation sites. Damages by Tropical Storm Dumako have only been counted provisionally and approximately 9 959 people have been affected including 14 deaths. A total of 4 323 people have been displaced to 12 accommodation sites. Cyclone Emnati has also affected the country causing 121 770 victims and 9 deaths as of 26 February 2022. There are currently 86 995 people who have been displaced and are housed in 123 accommodation sites 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.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	25-Feb-22	63 659	63 659	1 366	2,10%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 25 February 2022, a total of 63 659 cases have been reported in the country, out of which 58 677 have recovered and 1 366 deaths reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
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	COVID-19	Grade 3	2-Apr-20	2-Apr-20	27-Feb-22	85 328	85 328	2 615	-
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 27 February 2022, the country has a total of 85 328 confirmed cases with 2 615 deaths and 75 578 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	27-Feb-22	30 378	30 378	722	2,40%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 27 February 2022, a total of 30 378 confirmed COVID-19 cases have been reported in the country including 722 deaths and 29 470 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	CCHF	Ungraded	8-Feb-22	8-Feb-22	19-Feb-22	5	5	2	40,00%
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 19 February 2022, a total of five confirmed cases including two deaths were reported.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	27-Feb-22	58 632	58 632	979	-
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 27 February 2022, a total of 58 632 cases including 979 deaths and 57 602 recovered cases have been reported in the country.									
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.									
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	27-Feb-22	225 038	225 038	2 192	1,00%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 27 February 2022, a total of 225 038 confirmed COVID-19 cases were reported in the country including 2 192 deaths and 219 321 recoveries.									
Mozambique	Measles	Ungraded	25-Jun-20	1-Jan-21	10-Oct-21	125	2	0	0,00%
Since the beginning of 2021, measles outbreak is active in 11 provinces. As of 10 October 2021 (week 40), there were 125 cases reported including 2 confirmed cases and no death. During the same period in 2020, there were 185 confirmed cases and no death.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	26-Feb-22	157 210	157 210	4 007	0,00%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 26 February 2022, a total of 157 210 confirmed cases with 152 694 recovered and 4 007 deaths have been reported.									
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%).									
Niger	Humanitarian crisis	Protracted 1	1-Feb-15	1-Feb-15	24-Jan-22	-	-	-	-
According to OCHA statistics, 3.8 million people need humanitarian assistance in 2022. As of 31 Dec 2021, 264 257 people are internally displaced, 249 945 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. Currently, 1 070 Malian migrants are stranded in Niger, unable to return home, awaiting authorization from Niger's Ministry of Foreign Affairs and Cooperation.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	20-Feb-22	8 738	8 738	303	3,50%
From 19 March 2020 to 20 February 2022, a total of 8 738 cases with 303 deaths have been reported across the country. A total of 8 406 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	20-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 December 2021, there were 77 143 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. On 20 January 2022, Non-State Armed Groups killed two civilians in the south of Borno state and abducted four women during the raid. This caused the displacement of hundreds residents. The groups also set houses and churches on fire and looted food supplies from homes and shops.									
Nigeria	Cholera	Grade 2	12-Jan-21	12-Jan-21	30-Jan-22	470		9	1,90%
From epidemiological week 1 to week 4, 2022, a total of 470 suspected cases including 9 deaths (CFR 1.9%) have been reported from 10 states and FCT. Of the suspected cases, the less than 5 years age group is the most affected, while males and females are equally affected.									
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-20	27-Feb-22	254 525	254 525	3 142	1,20%
The first case of COVID-19 was first detected in Nigeria on the 27 February 2020. As of 27 February 2022, a total of 254 525 confirmed cases with 249 013 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	27-Feb-22	476	409	0	0,00%
Three 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.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	30-Dec-21	42	42	2	4,80%
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	27-Feb-22	129 489	129 489	1 457	1,10%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 27 February 2022, a total of 129 489 cases with 1 457 deaths and 127 847 recovered cases 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
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	27-Feb-22	5 934	5 934	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 27 February 2022, a total of 5 934 confirmed cases of COVID-19 have been reported, including 72 deaths. A total of 5 852 cases have been reported as recoveries.									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	27-Feb-22	85 676	85 676	1 960	2,30%
From 2 March 2020 to 27 February 2022, a total of 85 676 confirmed cases of COVID-19 including 1 960 deaths and 83 622 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	25-Feb-22	39 310	39 310	163	0,40%
Since the first COVID-19 confirmed cases were reported in Seychelles 14 March 2020, as of 25 February 2022 a total of 39 310 cases have been confirmed, including 38 705 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	27-Feb-22	7 665	7 665	125	1,60%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 27 February 2022, a total 7 665 confirmed COVID-19 cases were reported in the country including 125 deaths and 4 804 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	20-Feb-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	27-Feb-22	3 673 257	3 673 257	99 229	3,40%
Since the start of the COVID-19 pandemic in South Africa through 27 February 2022, a cumulative total of 3 673 257 confirmed cases and 99 229 deaths have been reported with 3 541 730 recoveries.									
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.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
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	27-Feb-22	16 973	16 973	137	0,80%
On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 27 February 2022, a total of 16 973 confirmed COVID-19 cases were reported in the country including 137 deaths and 13 271 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 71 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	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	18-Feb-22	33 620	33 620	798	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 33 620 cases have been reported in Tanzania Mainland including 798 deaths.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	26-Feb-22	36 798	36 798	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 26 February 2022, a total of 36 798 cases including 272 deaths and 36 410 recovered cases have been reported in the country.									
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	25-Feb-22	163 307	163 307	3 588	2,20%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 25 February 2022, a total of 163 307 confirmed COVID-19 cases, 99 979 recoveries with 3 588 deaths.									
Uganda	Rift Valley fever	Ungraded	14-Jan-22	12-Jan-22	7-Feb-22	2	2	1	50,00%
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 7 February 2022, a total of two confirmed cases of RVF have been recorded.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	27-Feb-22	312 707	312 707	3 952	1,30%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 27 February 2022, a total of 312 707 confirmed COVID-19 cases were reported in the country including 3 952 deaths and 306 846 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	26-Feb-22	235 803	235 803	5 393	2,30%
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 26 February 2022, a total of 235 803 confirmed COVID-19 cases were reported in the country including 5 393 deaths and 225 873 cases that recovered.									
Closed Events									
Central African Republic	Measles	Grade 2	15-Mar-19	1-Jan-21	15-Dec-21	2 328	283	9	0,40%
From 1 January to 15 December 2021 : 2 328 suspected cases have been reported, 283 confirmed cases (75 IgM+ cases, 196 by epidemiological link and 12 compatible cases) and 9 deaths (CFR:0.4%). Ten health districts out of 35 have reached the epidemic threshold (Bossebelé, Berbérati, Sangha-Mbaéré; Nanga-Boguila, Batangafo, Mbaiki, Nana Gebrizi and Vakaga); 49% of children are less than 5 years of age; 42% were not vaccinated. From the beginning of outbreak in 2019 to 19 August 2021, a total of 35 468 suspected cases have been notified and 197 deaths (CFR:0.6%) within affected districts.									
Congo	Floods	Ungraded	10-Jan-22	29-Nov-21	7-Jan-22	108 173	-	0	0,00%
Following the heavy rains since September 2021, the northern part of the country is affected with floods. Authorities declared a state of humanitarian disaster on 29 November 2021. Four departments are affected: Likouala; Cuvette; Sangha and Plateaux. As of 7 January 2022, 108 173 people affected (22 770 households), no information on deaths. Authorities are seeking supports from partners in term of food, non-food items, essentials medicines etc									

†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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