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

- Cholera in the WHO African Region
- Marburg in Equatorial Guinea
- Diptheria in Nigeria
- Mpox in Africa

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

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

**Major issues and challenges include:**

- The WHO African Region is experiencing a rise in cholera cases and geographical spread, amid a global surge. This is occurring in the context of other emergencies including the cyclones and heavy rains, competing priorities and stretched resources. To date, 11 countries have reported cholera cases or outbreaks in the region. While the outbreak is slowing down in some countries like Nigeria and Cameroon, Malawi is still reporting high numbers, albeit with a decline in cases and deaths in the past two weeks. Notably the outbreak in Mozambique is trending upwards. The burden of cholera could get worse unless member states and implementing partners boost efforts to control and prevent outbreaks.

- Health authorities in Equatorial Guinea officially declared its first ever confirmed outbreak of Marburg Virus Disease (MVD) on 13 February 2023. The declaration came following a confirmation of the disease by real-time amplification after reverse transcription (qRT-qPCR) testing of one blood sample at Pasteur Institute of Dakar in Senegal on 12 February 2023. Efforts are underway with the support from WHO and other government partners to put in place the required emergency response activities to help the country cope with this outbreak and quickly contain its public health impact.

- Thirteen newly confirmed mpox cases and death were reported in Africa in the past week. The cases were reported from the Central Africa Republic and Nigeria, which previously reported mpox cases before the outbreak in 2022. Sufficient human resources and infrastructure for genomic sequencing and bioinformatics are essential to eradicate the mpox outbreak in Africa.
**Ongoing events**

**WHO African Region**

**Cholera**

**EVENT DESCRIPTION**

In the past week, one new country, Tanzania notified WHO of a cholera outbreak in its Nyasa district in Ruvuma region, with a possible link to the Mozambique outbreak on 18 February.

The ongoing cholera outbreak in the Democratic Republic of the Congo’s (DRC) province of North Kivu has been exacerbated by the increased influx of internally displaced persons (IDPs) in camps close to Goma, where the lack of access to water and sanitation remains a challenge. Burundi recently declared a cholera outbreak in the city of Bujumbura along the shores of Lake Tanganyika and near the border with South Kivu.

As Malawi responds to its worst cholera outbreak in history, the situation continued to deteriorate in early 2023, with a slight decrease in cases and deaths in the past two weeks. The case fatality ratio (CFR) of 3.2% has been recorded since early 2022.

Notably, Mozambique which borders Malawi has registered a sharp increase in cases and alerts since mid-December 2022. The geographic spread continues, with Zambia reporting more cases of cholera since its recent notification to WHO of a cholera outbreak on January 26, 2023.

Cholera outbreaks linked to the ongoing outbreaks in the southern sub-region have been reported in South Africa, which has recorded three cases.

The current heavy rain/cyclone season, which is forecasted to be severe, has the potential to severely impact already affected countries and further spread the disease across southern Africa. This remains the largest threat to the progress towards control of cholera in the sub-region.

In Kenya, the cholera outbreak is compounded by and exacerbating the ongoing drought and food insecurity. The cholera outbreak has affected 15 counties with active transmission in eleven. Of the affected counties, three share long porous borders with Somalia, one with Tanzania, one with Uganda, and one with Ethiopia. To the North, Cholera outbreak has been reported in Somali and Oromia and regions of Ethiopia.

The outbreak in Ethiopia is happening in the context of humanitarian crisis affecting four regions of Tigray, Amhara, Afar and Benishangul Gumuz; drought response affecting five Regions of Oromia, Somali, SNNPR, Afar and Dire Dawa/Harar; as well as other outbreaks. The cholera outbreak in Somali region is reported to be fully controlled.

Since the beginning of the cholera outbreak in Cameroon in October 2021, the WHO African region has reported a total of 119,342 cases with 2,854 deaths (case fatality ratio 2.4%).

Malawi accounts for 38% of all cumulative cholera cases reported since October 2021, followed by Nigeria (20%), the Democratic Republic of Congo (DRC) (19%) and Cameroon (13%).

The same countries also account for the highest mortality, accounting for 52%, 21%, 11% and 11% of all deaths, respectively. The average cholera CFR reported regionally since 2021 is about 2.4%, which is above acceptable CFR, with Malawi, Nigeria, Cameroon, and Tanzania recording CFRs of 2% and above.
Weekly trend of cholera cases and deaths in Malawi, 28 February 2022 – 19 February 2023

Weekly trend of cholera cases in selected districts of Malawi, 28 February 2022 – 19 February 2023
Focus on Malawi
Cholera transmission rates spiked in the aftermath of the 2022 festive season in Malawi, where transmission had spread to new areas, particularly in the capital Lilongwe. Overall, Malawi has reported 46,219 cumulative cases with 1,476 deaths (CFR = 3.2%). On 20 February 2023, the country recorded 434 new cases and 8 deaths from 21 of 29 districts.

New cases declined by 15.8% and deaths by 36.4% last week compared to the preceding week. The weekly CFR also dropped from 3.2% in the preceding week to 2.4% in the week ending 19 February 2023. Twenty-five (25) out of the 29 districts have reported new cases during the week. On the overall, Lilongwe, Mangochi, and Blantyre districts have reported the highest number of cases.

Public Health Actions in Malawi
- The President launched a nationwide integrated community-based cholera response campaign on 13 February 2023
- All cadres of health workers expected to implement enhanced targeted household interventions
- The Area 25 CTC in Lilongwe was officially dedicated by the President on 13 Feb. It is now fully operational and functional
- A joint WHO-UNICEF proposal is being developed for GAVI’s COVID-19 Delivery Support (CDS) Needs-based Funding Window Programme. The proposal also considers the strengthening of community-based response activities to the cholera outbreak as an important component of the application package.
- National cholera data audit and harmonization exercise commenced in the past week
- The cholera mortality surveillance exercise started on 13 February

Situation in Mozambique
From 9 to 18 February 2023, significant rainfall occurred in in Mozambique. The heavy rainfall caused flooding, displacement, and interruption of water supplies in 11 provinces, with the most affected being Maputo. The cholera outbreak in Mozambique is occurring in the context of heavy rainfall and flooding.

As of 19 February 2023, 6 provinces (29 districts) had reported a total of 5,237 cholera cases and 37 deaths (CFR = 0.7%), with Niassa province accounting for 2,525 (48%) of all cases. Niassa was also the first province to report cholera outbreak on 14 September, 2022. In the past 2 weeks, the outbreak increased in geographical spread, with Manica province reporting 34 cases and two deaths.

Public Health Actions in Mozambique
- ICG request for 719,240 doses of OCV has been approved, targeting eight districts in Gaza, Niassa, Sofala and Zambezia.
- The national cholera taskforce was reactivated with the involvement of the different working groups and coordination with partners.
- Training in case management is ongoing
- Cross-border surveillance meetings have been held by neighboring provinces
- Strengthened surveillance, case investigation and contact tracing activities are ongoing

SITUATION INTERPRETATION
One new country, Tanzania recorded a cholera outbreak in the past week. The cholera outbreak in the WHO African region is increasing in terms of number of outbreaks, case load and geographical expansion. The number of confirmed cases reported continues to rise with four countries, Malawi, Nigeria, DRC and Cameroon contributing to 91% of the total cases, and 95% of all reported deaths. Nigeria, DRC, and Cameroon have recently reported fewer cholera cases. New cholera cases and deaths in Malawi declined for the second consecutive week following the peak. The overall decline comes in the wake of enhanced public health response activities across the country to the cholera outbreak. In the neighboring Mozambique, cases continue to rise, with reports from six provinces.

WHO acknowledges the efforts of all partners supporting cholera preparedness and response activities in different countries.
Trend of cholera cases by week in Mozambique as of 19 February, 2023

Distribution of confirmed cases of cholera in the WHO African Region, as of 19 February 2023
### Distribution of cases and deaths of cholera by country

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>CUMULATIVE CASES</th>
<th>CUMULATIVE DEATHS</th>
<th>CFR (%)</th>
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<th>REPORTING DATE</th>
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<td><strong>2854</strong></td>
<td><strong>2.4</strong></td>
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Marburg Virus Disease

EVENT DESCRIPTION

On 7 February 2023, the Ministry of Health and Social Protection was informed by the regional authorities of several deaths that occurred between 7 January and 7 February 2023, in two villages of Ngum Esatop (82 inhabitants in 2020) and Evú Nsoc Mokomo (36 inhabitants in 2020), in Nsock Nsomo district, Kie-Ntem province, continental region of the country. The distance between the two villages is 5 km.

On 9 February 2023, eight blood samples were taken from contacts and sent to the Interdisciplinary Center for Medical Research of Franceville (CIRMF) in Gabon. The results were negative for the Ebola and Marburg viruses.

On 12 February 2023, eight other blood samples were taken from seven other contacts and one suspected case and sent to the Institut Pasteur of Dakar in Senegal and one of them from the suspected case was confirmed positive for Marburg virus by real-time amplification after reverse transcription (qRT-qPCR). This positive sample was collected from the patient who died on 10 February 2023 and is currently considered as the last death reported so far.

As of 19 February 2023, a total of nine cases and deaths epidemiologically linked (case fatality ratio = CFR 100%) have been reported since the beginning of the outbreak including one confirmed death for MVD, four probable and four considered as suspected. The last death was reported on 10 February 2023 at Ebebiyin District Hospital in Kie-Ntem province. The deceased was a 54-year-old man who presented with fever, non-bloody vomiting, bloody diarrhoea, and convulsions. Investigation found that this patient was epidemiologically linked to four other deaths that occurred a week earlier in Ngum Esatop village, Nsock Nsomo district. A total of twenty-one (21) contacts have been listed and are under close observation at their homes.

PUBLIC HEALTH ACTIONS

- On 13 February, Equatorial Guinea authorities officially declared the Marburg Virus Disease outbreak in the country.
- An emergency response plan has been drafted.
- A multidisciplinary team of experts was sent to the affected villages for further investigation; all community members were tested for COVID-19 and the results were all negative.
- A total of 16 samples have been collected and shipped to the referral laboratories for testing.
- A multisectoral committee has been set up led by the Ministry of Health and Social Protection and made of the technical personnel for the Government, partners and WHO Country Office.
- Movement limitation from and to the affected districts has been instituted by the authorities as part of response measures.
- Surveillance in the affected areas as well as at the port of entries are being reinforced.
- Contacts of the deceased persons were listed and are under follow up.
- A request to all people who attended funeral ceremonies for the deceased in the affected villages to call the toll-free number has been made.
SITUATION INTERPRETATION

This is the first ever reported outbreak of MVD in Equatorial Guinea. The late detection of the disease means that it started to spread and could have already generated secondary or even tertiary cases. The source of the outbreak has not yet been identified. Based on the available information, it cannot be ruled out that exposure to the virus was more widespread given that almost all deaths (except one) occurred in the community with unknown burial conditions. In the African WHO region, the most recent outbreak of MVD was reported in Ghana in 2022 (three confirmed cases). Other MVD outbreaks have been previously reported in Guinea (2021), Uganda (2017, 2014, 2012, 2007), Angola (2004-2005), Democratic Republic of Congo (1998 and 2000), Kenya (1990, 1987, 1980) and South Africa (1975).
There is an ongoing diphtheria outbreak in Nigeria. The Nigeria Centers for Disease Control (NCDC) was notified of suspected diphtheria outbreaks in Kano and Lagos States on 1 December 2022. Since early January 2023, the number of confirmed cases has gradually increased, peaking at nearly 100 in week 3.

Between week 19 of 2022 and week 7 of 2023, 724 suspected cases of diphtheria were reported from 20 states in Nigeria, with the majority of cases reported from Kano (533, 74%), Yobe (86, 12%), Katsina (45, 6%), Sokoto (14, 2%), Enugu: (9, 1%), Osun: (7, 1%), Osun (7, 1%), Kaduna: (6, 1%), Lagos (5, 1%), and Zamfara (5, 1%) states. A total of 89 deaths were recorded among all suspected cases, representing a case fatality rate of 12.3%. Of suspected cases, 313 cases were confirmed, including 13 (4.2%) laboratory confirmed and 300 (95.8%) clinically compatible. Kano state accounts for 84.6% (11 cases) of the laboratory confirmed cases. Both sexes are affected and children aged 2-14 years account for the majority of confirmed cases (85.2%). Only 43.2% of confirmed cases were fully vaccinated with a vaccine containing diphtheria toxin.

The previous outbreak of diphtheria in Nigeria occurred in Borno State, in the northeast of the country, in 2011. A total of 98 cases and 21 deaths were reported (CFR 21.4%).

**PUBLIC HEALTH ACTIONS**

- Coordinating and monitoring diphtheria surveillance and response activities in the country through the weekly diphtheria Technical Working Group meetings
- Deployment of rapid response teams (RRTs) to Katsina, Osun and Yobe State and re-deployment of RRTs to Kano and Lagos States to support response activities
- Harmonization of surveillance and laboratory data across states and laboratories is ongoing
- Sensitization/training of clinical and surveillance officers on the presentation, prevention, and surveillance for diphtheria in States where RRTs were deployed
- Conducted cascaded training by some of the laboratory scientists/physician trained at National Reference Laboratory (NRL), Abuja in their respective States
- Procurement for reagents and sample collection and transportation materials/media processes initiated
- Released results of the first batch of drug sensitivity test (DST) conducted at NRL on isolates sent in from States
- Distribution of 100 vials of diphtheria antitoxin (DAT) to Kano State
- Protocol for prioritization of diphtheria cases for DAT use in situations where there is inadequate DAT compared to number of cases in need of DAT have been developed
- Pre-testing and finalization of diphtheria IEC materials
- Conduct of routine immunization intensification among children < 2 years in Kano State
- Ongoing development of the zero draft of a manuscript on “Confirmation of Diphtheria Outbreak in Nigeria”.

**Nigeria**

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<tr>
<th>Cases</th>
<th>Deaths</th>
<th>CFR</th>
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<tbody>
<tr>
<td>724</td>
<td>89</td>
<td>12.3%</td>
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</table>
SITUATION INTERPRETATION

The previous diphtheria outbreak in Nigeria in 2011 and its associated high CFR were due to a combination of low vaccination coverage, delayed clinical recognition and laboratory confirmation, and lack of antitoxin and antibiotics for treatment. The same reasons are at the root of the current outbreak. Improving routine immunization coverage (including 3-dose series of diphtheria toxoid-containing vaccines in the first year of life beginning at six weeks of age) would prevent most cases and complications resulting in death.
**EVENT DESCRIPTION**

Thirteen newly confirmed mpox cases were retrospectively reported in Africa from Nigeria (11) and the Central African Republic (CAR) (2) in the past week.

Of the 11 cases reported from Nigeria, seven were reported in week 5 (ending 5 February) and four cases in week 6 (ending 12 February). The newly confirmed cases in week 6 were reported from two states, Lagos and Akwa-Ibom.

In 2023 alone, 37 mpox cases have been reported from 31 (86.1%) states and the Federal Capital Territory (FCT), out of the 36 States in Nigeria. Nigeria has reported a cumulative total of 800 confirmed mpox cases from 34 states and the FCT, including eight deaths (CFR = 1.0%) since the beginning of the outbreak in 2022.

The CAR reported two newly confirmed cases, including one death in the past week. Since the beginning of 2023 to week 6, the country has recorded a total of eight confirmed cases, one probable case and one death.

The geospatial distribution of confirmed cases of monkeypox showed three health districts affected in 2023, namely; M’baïki, Bangassou and Bamingui-Bangoran. A total of 24 confirmed cases have been reported from six health districts (Sangha-Mbaéré, Mbaiki, Alindao, Bimbo, Ouango Gambo and Bangassou) since the beginning of the outbreak in 2022.

Between 1 January 2022 and 19 February 2023, 1404 laboratory-confirmed cases have been reported from 13 African countries, including Nigeria (800), the Democratic Republic of the Congo (DRC) (395), Ghana (121), CAR (24), Cameroon (18), Sudan (18), Liberia (7), Congo (5), South Africa (5), Benin Republic (3), Morocco (3), Egypt (1), and Mozambique (1).

The top three countries with the highest number of confirmed cases include Nigeria (56.9%; 800), DRC (28.1%), and Ghana (8.6%), all accounting for 93.7% (1316) of all confirmed cases.

Seven countries: Benin, Cameroon, Congo, Mozambique, South Africa, Sudan, and Morocco, have not reported any new cases in the past 12 weeks. Egypt and Ghana have not reported new cases for 8 and 7 weeks, respectively.

Eighteen (18) deaths have been reported in the African region since 2022 from Nigeria (8), Ghana (4), Cameroon (3), CAR (1), Mozambique (1), and Sudan (1).

**PUBLIC HEALTH ACTIONS**

- The WHO is supporting countries financially and technically to investigate modes of transmission and characterize mpox cases in the region.
- The process to integrate mpox into Africa Integrated Disease Surveillance and Response guidelines is ongoing.
- The terms of reference for the WHO technical support mission for mpox response in DRC are under finalization.
- Ongoing technical support for the countries to identify target groups for mpox vaccination.

**SITUATION INTERPRETATION**

Newly confirmed mpox cases were reported from Nigeria and the Central Africa Republic in the past week. An additional new mpox death was recorded in the past week from the Central Africa Republic.
Distribution of cases of Mpox in Africa, as of 19 February 2023

Map production:
Health Information and Risks Assessment Emergency Preparedness and Response Regional office for Africa
World Health Organization
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**Update on Reporting - Epidemiological Week 06: 06 – 12 February 2023**

**Point du rapportage hebdomadaire – Semaine 06: 06 – 12 Février 2023**

**2023**

**31 Countries out of 47, reported for week 06**

**66 % Completeness for weekly reporting**

**53 % Timeliness for weekly reporting**

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

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

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

afrooutbreak@who.int
afrogoeprhir@who.int

All the correspondences related to this document should be directed to:

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

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| Western Africa | | | | |
| Benin | | | | |
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| Côte d'Ivoire | | | | |
| Gambia | | | | |
| Ghana | | | | |
| Guinea | | | | |
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| Sierra Leone | | | | |
| Togo | | | | |

**Reminder:** Upcoming deadlines for weekly data submission

**Rappel** : Dates limites prochaines de soumission des données hebdomadaires

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**All events currently being monitored by WHO AFRO**

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<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
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<tbody>
<tr>
<td>Mozambique</td>
<td>Floods</td>
<td>Ungraded</td>
<td>13-Feb-23</td>
<td>11-Feb-23</td>
<td>14-Feb-23</td>
<td>39 225</td>
<td>-</td>
<td>9</td>
<td></td>
</tr>
</tbody>
</table>

Between 31 January and 11 February 2023, heavy rainfall has occurred in seven out to 11 Provinces of Mozambique including Maputo, Gaza, Inhambane, Tete, Nampula, Cabo Delgado and Niassa, with precipitation between 150 and 200mm. In particular, heavy rain in Maputo City and Maputo Province has resulted on flooding with the following consequences, as of 14 February 2023: 39 225 people affected (7 845 families) including 17 792 people displaced, nine deaths, two injured, and three missed. Around 7 612 houses, 15 health facilities and 15 schools have been overflooded, in addition to two bridges damaged and, water supply and power cuts in all affected areas. Ten accommodation centres are hosting the displaced populations. For the next days until 24 February 2023, moderate to locally heavy rains are forecasted for Maputo, Gaza, Manica and Sofala Provinces (between 200 to 300mm).

| South Africa | Floods           | Ungraded  | 14-Feb-23             | 13-Feb-23                 | 13-Feb-23               | -           | -              | -      |     |

The Government has declared on Monday 13 February 2023 a National State of Disaster to enable an intensive, coordinated response to the impact of floods that are affecting Mpumalanga, the Eastern Cape, Gauteng, KwaZulu-Natal, Limpopo, the Northern Cape, and Northwest provinces. Fatalities and missing people are reported. Material damages reported are ranging from flooded homes, vehicles swept away by floodwaters and overflowing dams and sewerage facilities, to the loss of basic infrastructure and damage to roads, bridges and a Limpopo hospital.

| Togo        | Meningitis       | Ungraded  | 15-Feb-23             | 15-Feb-23                 | 15-Feb-23               | 72          | 10             | 7      | 9.7%|

On 15 February 2023, an outbreak of meningitis was officially declared by the Ministry of Health of Togo, in Oti South district of Savana region in the northern part of the country. The epidemic threshold has been crossed in week 6 (ending 12 February), with a cumulative of 72 suspected cases and seven deaths (CFR 9.7%) reported between week 21, 2022 (ending 25 December) and week 6, 2023. The attack rate is of 55.2 per 100 000 population. Ten cases have been laboratory-confirmed to Streptococcus pneumoniae. More than 80% of cases are aged above 10 years.

| Algeria     | COVID-19         | Grade 3   | 25-Feb-20             | 25-Feb-20                 | 19-Feb-23               | 271 425     | 271 425        | 6 881  | 2.5%|

From 25 February 2020 to 19 February 2023, a total of 271 425 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 182 785 recovered.

| Algeria     | Poliomyelitis (cVDPV2) | Grade 2 | 14-Jul-22             | 11-Apr-22                 | 1-Feb-23               | 2           | 2             | -      |     |

According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains two.

| Angola      | COVID-19         | Grade 3   | 21-Mar-20             | 9-Feb-23                 | 271 990     | 271 990     | 163     | 0.6%|

The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 9 February 2023, a total of 105 184 confirmed COVID-19 cases have been reported in the country with 1 931 deaths.

| Benin       | COVID-19         | Grade 3   | 17-Mar-20             | 16-Mar-20                 | 18-Feb-23               | 27 990      | 27 990      | 163    | 0.6%|

The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 18 February 2023, a total of 27 990 cases have been reported in the country, with 163 deaths and 27 825 recoveries.

| Benin       | Mpox            | Grade 3   | 14-Jun-22             | 14-Jun-22                 | 1-Feb-23               | 3           | 3             | 0      | 0.0%|

Three suspected cases of Monkeypox were notified to WHO by the Benin Ministry of Health on 3 June 2022. Two of the three suspected cases were from Nigeria, and one person was from the North of the country. Laboratory samples were taken and sent to the Institute Pasteur laboratory in Dakar, which confirmed the three samples positive on 14 June 2022.

| Benin       | Poliomyelitis (cVDPV2) | Grade 2 | 8-Aug-19              | 24-Aug-19                 | 10-Feb-23              | 24          | 24           | 0      | 0.0%|

No cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week. There are 10 cases reported in 2022. Six cases were reported in 2021 and 2020, and 8 in 2019. No new cases were reported in 2023.

| Botswana    | COVID-19         | Grade 3   | 30-Mar-20             | 11-Feb-23                 | 329 662     | 329 662     | 2 794   | 0.9%|

On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 11 February 2023, a total of 329 662 confirmed COVID-19 cases were reported in the country including 2 794 deaths.

| Burkina Faso | Humanitarian crisis (Sahel Region) | Grade 2 | 1-Jan-19              | 31-Jan-23              | 1 882 391   | -           | -       | -     |

Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated due to attacks by armed groups. A total of 1 882 391 displaced persons are registered in Burkina Faso as of 31 December 2022. We observed a 4% increase in the total IDPs in December compared to November 2022. It is estimated that a total of 4.7 million people will need humanitarian aid in 2023. Access to health services remains a challenge for the population in affected areas.

| Burkina Faso | COVID-19         | Grade 3   | 10-Mar-20             | 9-Mar-20                 | 18-Feb-23              | 22 056      | 22 056      | 396    | 1.8%|

Between 9 March 2020 and 18 February 2023, a total of 22 056 confirmed cases of COVID-19 with 396 deaths and 21 596 recoveries have been reported from Burkina Faso.
Health Emergency Information and Risk Assessment

Humanitarian Information and Risk Assessment

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 8: 13 TO 19 FEBRUARY 2023

Cape Verde: A significant increase in malnutrition, particularly among under-five children and pregnant women, is being reported as compared to last year's projections. The number of deaths and recoveries varies by district, with the highest reported in the Central region.

Cameroon: The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 18 February 2023, a total of 63,239 confirmed COVID-19 cases including 413 deaths and 62,767 recoveries were reported in the country.

As a result of the ongoing crisis in Far-North Cameroon and neighboring countries, there has been a massive influx of internally displaced populations and refugees in Adamawa, North, and East regions. For 2022, there is an estimated 481,463 refugees and asylum seekers in Cameroon, including more than 325,000 refugees coming from Central African Republic.

The humanitarian situation in the NWSW regions remained dire, marked by continued violent attacks on schools and children, as well as on healthcare. Continued fighting between non-State armed groups (NSAGs) and State security forces (SSF) led to the killing and displacement of civilians. Humanitarian activity continues to be hampered by roadblocks, theft of humanitarian supplies, bureaucratic impediments, and risk of IEDs in public spaces and roads used by humanitarians.

The security situation in the Far-North region of Cameroon remains volatile. The Mayo-Sava department concentrates the greatest number of incidents in November. In addition, more than 33,600 houses and 151 schools have been flooded; 48,000 hectares of land have been destroyed and 10,566 animals have been lost in Mayo-Danay, Logone & Chari, and Mayo-Tsanaga departments.

The humanitarian crisis in the Central African Republic (CAR) continues to deteriorate. In 2023, 3.4 million people will need humanitarian assistance and protection, an increase of 10% compared to 2022. A recent analysis for the period October 2022-August 2023 showed an expected 16% and 20% increase in the burden of acute malnutrition, respectively among under-five children and pregnant women as compared to last year's projections.
In 2022, from week 1 through week 52, a total of 1,485 suspected cases of measles and three deaths (CFR 0.2%) were reported through Integrated Diseases Surveillance and Response system. Among cases reported, 148 are confirmed including 99 laboratory-confirmed and 49 by epidemiological link. A total of 10 districts confirmed measles outbreaks: Bangui 1 confirmed at week 23; Batangofo-Kobo at week 20, Ouango Gambo at week 2, Bimbo at week 21 and Ouango-Gambo at week 14.

On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 25 December 2022, 2,311 suspected cases, 30 confirmed and 7 deaths (CFR 0.3%) were reported. On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 25 December 2022, 2,491 suspected cases, 23 confirmed and 12 deaths (CFR 0.4%) were reported.

The Lac Chad province is experiencing a double security and environmental crisis. Since 2015, the region is impacted by attacks of non-state armed groups (NSAG) which have forced local communities to flee their homes. The province experienced heavy rainfall which has affected some 229,000 people between October and December 2022, and has destroyed large surfaces of cropland, washed away more than 6,000 of cattle, and caused extensive damage to homes and schools. The floods added a new challenge to an already critical situation.

The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 12 February 2023, a total of 7,661 confirmed COVID-19 cases were reported in the country including 194 deaths.

In 2023, five districts are in outbreak including two from the capital city of Ndjamena. A total of 459 suspected measles cases and 38 confirmed were reported. In 2022, a total of 3,134 suspected cases, 223 confirmed and 12 deaths (0.4%) were reported.

The Ministry of Health and population announced the confirmation of the first COVID-19 case in Central African Republic on 14 March 2020. As of 22 January 2023, a total of 15,367 confirmed cases, 113 deaths and 15,200 recovered were reported.

From 1 January 2022 to 24 January 2023, Central African Republic has reported 20 laboratory-confirmed cases of monkeypox with no deaths. Sixteen confirmed and three probable cases were reported in 2022 while four confirmed cases have already been reported since the beginning of 2023. The last confirmed case was notified on 10 January in Bangassou district. Cumulatively, six districts have so far been affected: Sangha-Mbaé, Bangui I, Alindao, Bimbo, Ouango-Gambo and Bangassou.

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. No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week 3, 2023 (ending 22 January). A total of 27 cVDPV2 cases were reported in 2022. In addition, there were 106 cVDPV2 cases reported in 2020 from three different outbreaks, while nine other cases were reported in 2019.

No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week 3, 2023 (ending 22 January). A total of 27 cVDPV2 cases were reported in 2022. In addition, there were 106 cVDPV2 cases reported in 2020 from three different outbreaks, while nine other cases were reported in 2019.

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The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 30 October 2022, a total of 10,189 confirmed COVID-19 cases with 103 deaths were reported in Eritrea.

The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 18 February 2023, a total of 17,222 cases have been reported in the Democratic Republic of the Congo (DRC). In 2023, from week 1 through week 4 (ending 30 January), a total of 19,437 suspected cases with 174 related deaths (CFR 0.9%), 151 IgM+ for measles and 36 IgM+ for rubella from 264 investigated cases have been reported; 15 health zones are in outbreak. In 2022, there were 146,438 suspected measles cases, 2,853 IgM+ and 1,846 measles-related deaths (CFR 1.3%).

Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 95,645 confirmed cases and two probable case, including 1,464 deaths have been reported. A total of 84,282 people have recovered.

In 2023, from week 1 through week 4 (ending 30 January), a total of 19,437 suspected cases with 174 related deaths (CFR 0.9%), 151 IgM+ for measles and 36 IgM+ for rubella from 264 investigated cases have been reported; 15 health zones are in outbreak. In 2022, there were 146,438 suspected measles cases, 2,853 IgM+ and 1,846 measles-related deaths (CFR 1.3%).

From 1 January 2022 through 15 February 2023, the Democratic Republic of the Congo (DRC) reported 395 confirmed with no death among the confirmed cases. All measles-related deaths (CFR 1.3%).

According to the Global Polio Eradication Initiative (GPEI), no case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was reported this week. There are 92 cases confirmed cases belong to Clade I.

According to the Global Polio Eradication Initiative (GPEI), six cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported; four in Haut Lomami and one in Haut-Katanga. Outbreak response to both cVDPV1 and cVDPV2 is being intensified.

The suspected meningitis outbreak is still ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 23 January 2023, a total of 251 suspected cases with 49 deaths (CFR 19.5%) have been reported. Three health areas are the hotspots: Mangi, Bongonza and Panga.

The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 18 February 2023, a total of 17,222 cases have been reported in the country with 183 deaths and 16,907 recoveries.

The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 30 October 2022, a total of 10,189 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 10,085 patients have recovered from the disease.
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in week 3, 2023 (ending 25 January). There has so far been one case reported in 2022.

The first case of COVID-19 was confirmed in the kingdom of Eswatini on 16 March 2020. As of 19 February 2023, a total of 74 199 cases have been reported with 1 423 associated deaths.

Poor rainfall during the October-to-December dry rainy season marks the fifth consecutive below-average rainy season in the Horn of Africa, contributing to continued emergency-levels of humanitarian need for vulnerable populations across the region. At present, nearly 12 million people are estimated to be food insecure, and 8.6 million people are being targeted for water, sanitation and hygiene assistance across the drought-affected areas.

Humanitarian partners have assisted more than 3.7 million people as of 4 January 2023, representing 68.5% of the total planned caseload of 5.4 million people in Tigray under the current round (Round 2) of food distribution. Hundreds of thousands of people continue to be uprooted from their homestead, with a consequential increase in humanitarian needs.

A cholera outbreak has been ongoing in Ethiopia since 27 August 2022. The index case was reported from Bekay Kebele, Oromia Region and the outbreak was confirmed on 9 September. As of 2 February 2023, a total of 1 068 suspected cases of cholera with 28 deaths (CFR 2.6%) have been reported, including 869 cases and 13 deaths (CFR 1.5%) from Oromia region and 199 cases and 15 deaths (CFR 7.5%) from Somali region. A total of 66 kebeles (villages) have so far been affected, distributed in ten woredas. Cholera outbreak in Somali region is controlled.

Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 499 865 cases of COVID-19 as of 19 February 2023, with 7 572 deaths and 487 103 recoveries.

A total of 907 suspected measles cases reported as of week 6, 2023 compared to 878 cases the same period last year. A total of 466 are confirmed cases (100 or 21% lab-confirmed, 364 (79%) epi-linked cases and 2 (0%) clinically compatible). In 2022, a total of 13 934 suspected measles cases were reported in Ethiopia including 8 554 confirmed and 71 deaths (CFR 0.5%).

No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are three cases in 2022. No cases were reported in 2021. In addition, 12 cases were reported in 2020, and 19 were reported in 2019.
<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
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<tbody>
<tr>
<td>Guinea</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>13-Mar-20</td>
<td>13-Mar-20</td>
<td>18-Feb-23</td>
<td>38 267</td>
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<td>10-Dec-22</td>
<td>8-Dec-22</td>
<td>4-Jan-23</td>
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<td>Measles</td>
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<td>1-Jan-22</td>
<td>31-Dec-22</td>
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<td>17-Feb-22</td>
<td>1-Jan-22</td>
<td>12-Jan-23</td>
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<tr>
<td>Kenya</td>
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<td>Grade 3</td>
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<td>16-Oct-22</td>
<td>12-Feb-23</td>
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<td>3-Jan-20</td>
<td>12-Feb-23</td>
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<td>13-May-20</td>
<td>12-Sep-22</td>
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<td>34 490</td>
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<td>Grade 3</td>
<td>16-Mar-20</td>
<td>16-Mar-20</td>
<td>2-Feb-23</td>
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<td>8 065</td>
<td>294</td>
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<tr>
<td>Liberia</td>
<td>Lassa Fever</td>
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<td>6-Jan-22</td>
<td>1-Feb-23</td>
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<td>84</td>
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<td>Measles</td>
<td>Ungraded</td>
<td>3-Feb-22</td>
<td>13-Dec-21</td>
<td>3-Feb-23</td>
<td>8 732</td>
<td>8 732</td>
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<tr>
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<td>Mpox</td>
<td>Grade 3</td>
<td>21-Jul-22</td>
<td>23-Jul-22</td>
<td>18-Jan-23</td>
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</table>

From 15 October 2021, suspected cases of yellow fever were reported mostly among nomadic settlers in the Savannah region, northwest Ghana (bordering Côte d’Ivoire). As of 29 November 2022, a total of 75 probable and 62 confirmed cases of yellow fever were reported from 13 regions in Guinea. Of the reported cases, nine deaths were recorded among probable cases and 12 deaths among confirmed cases.

The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 18 February 2023, a total of 38 267 cases, including 37 312 recovered cases and 467 deaths, have been reported in the country.

One confirmed case of Lassa Fever was notified on 8 December 2022 in the Health District of Guéckédou. It is a female patient greater than 60 years old. A total of 27 contacts were identified and are being followed. Since the notification of the first case on 8 December, no new case of confirmed Lassa fever was reported in the country, and the confirmed case was released from the hospital on 29 December 2022. The countdown to declare the end of this outbreak has started.

Since the beginning of 2022 up to week 52 (ending 31 December), a total of 23 259 suspected measles cases with 432 confirmed and 33 death (CFR 0.1%) have been reported in Guinea through the Integrated disease surveillance and response.

The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 12 February 2023, 342 874 confirmed COVID-19 cases including 37 312 recovered cases and 467 deaths, have been reported in the country.

On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 12 February 2023, 342 874 confirmed COVID-19 cases and works in Ebokayville Une, La Côte D’Ivoire but sought treatment at the Pleabo Health centre in Maryland County, Liberia where he was detected and isolated with 4 contacts being line-listed. As of 18 January 2023, six confirmed cases of monkeypox and 0 deaths were reported.

Since January 2020, a total of 2 187 visceral leishmaniasis confirmed and suspected cases with ten deaths (CFR 0.5%), have been reported in nine counties namely: Marsabit, Garissa, Kajiado, Kitui, Makueni, Meru, Narok, Nyeri, Tharaka Nithi, Taita Taveta, Tana River, Kwale and Kilifi are in Alert drought phase. Drought is affecting about 4.5 million people, compared to 2.1 million in September 2021. Of these, approximately 2.14 million are children.

Since the measles outbreak started on 13 December 2021, as of 3 February 2023, a total of 9 200 suspected cases, including 8 732 confirmed and 92 deaths (CFR: 1%) have been recorded among probable cases and 12 deaths among confirmed cases.

From 16 March 2020 to 2 February 2023, Liberia has recorded a total of 8 065 cases including 294 deaths and 7 768 recoveries have been reported.

Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 12 September 2023, a total of 34 490 cases of COVID-19 have been reported, and 706 deaths.

Since the beginning of 2022 up to 1 February 2023, a total of 84 confirmed cases of Lassa fever with 26 deaths (CFR 31%) have been reported in Liberia. Eleven confirmed cases with two deaths have been reported between week 1 and week 4 of 2023.

Since the measles outbreak started on 13 December 2021 as of 3 February 2023, a total of 9 200 suspected cases, including 8 732 confirmed and 92 deaths (CFR: 1%) were reported from all the 15 counties in Liberia. Among the confirmed cases, 5.4% (471) were laboratory confirmed, 6.5% (564) clinically confirmed and 88.1% (7 697) epidemiologically linked.

Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public health Reference Laboratory in the country. The case is a 43-year-old male who resides and works in Ebokayville Une, La Côte D’Ivoire but sought treatment at the Pleabo Health centre in Maryland County, Liberia where he was detected and isolated with 4 contacts being line-listed. As of 18 January 2023, six confirmed cases of monkeypox and 0 deaths were reported.
### Health Emergency Information and Risk Assessment

#### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 8: 13 TO 19 FEBRUARY 2023

#### Health Emergency Information

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
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<tr>
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<td>Cholera</td>
<td>Grade 3</td>
<td>14-Sep-22</td>
<td>16-Nov-22</td>
<td>19-Feb-23</td>
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<tr>
<td>Mozambique</td>
<td>Humanitarian crisis in Cabo Delgado</td>
<td>Protracted</td>
<td>1-Jan-20</td>
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<td>6-Feb-23</td>
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<td>Poliomyelitis (WPV1)</td>
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<td>Grade 2</td>
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<td>19-Feb-23</td>
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<td>67 849</td>
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<td>45 784</td>
<td>45 784</td>
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<td>Grade 3</td>
<td>2-Apr-20</td>
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<td>COVID-19</td>
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<td>25-Mar-20</td>
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<td>1-Jan-20</td>
<td>1-Jan-20</td>
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<td>Ungraded</td>
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<td>Madagascar</td>
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<td>20-Mar-20</td>
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<td>67 849</td>
<td>67 849</td>
<td>1 421</td>
<td>2.2%</td>
</tr>
</tbody>
</table>

On 19 January 2023 at 10:45 am, the cyclonic system CHENESO landed in Madagascar north of Antalaha district, SAVA region, with an average wind speed of 90 km/h and gusts up to 120 km. Last reports provided by the National Bureau for the Management of risks and catastrophes released on 31 January 2023 indicated that 33 people have died and 20 people were still missing. A total of 90 870 people (8 456 households) have so far been affected including 34 114 displaced people currently settled in 115 shelter sites. Nearly 26 403 houses have been overflooded while 1 073 others have been totally destroyed. Administrative buildings have also been partially or totally destroyed, roads and bridges have been cut or damaged due to high levels of waters in 18 regions and 53 districts.

On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 19 February 2023, the country has a total of 88 584 confirmed cases including 1 421 deaths have been reported in the country.

The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 12 February 2023, a total of 295 440 confirmed COVID-19 cases and deaths reported since the onset of the outbreak is 45 784 and 1 468 respectively, with Case Fatality Rate at 3.3%.

A total of 29 districts have reported Cholera cases since the confirmation of the first case in March 2022 in Machinga district. As of 19 February 2023, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 45 784 and 1 468 respectively, with Case Fatality Rate at 3.3%.

On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 19 February 2023, a total of 32 914 confirmed COVID-19 cases have been reported in the country including 743 deaths and 32 008 recoveries.

On 439 recovered have been reported in the country.

As of 11 December 2022, a total of 1 256 samples from suspected cases of measles were tested in Mali. Of these, 751 cases have been confirmed with one death.

The largest number of IDPs was in the Mopti region.

The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 12 February 2023, a total of 63 438 cases including 997 deaths and 62 439 recovered have been reported in the country.

A new confirmed case of Rift Valley fever (RVF) was reported by the Mauritanian Ministry of Health on 29 August 2022. The index case is a 25-year-old male breeder from the Moughata (district) of Tintane in Hodh El Gharbi region. He presented to a health facility with high fever and headache. On 26 August, he developed a haemorrhagic fever Grade 1 31-Aug-22 26-Aug-22 25-Dec-22 53 53 24 45.3%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 12 February 2023, a total of 233,098 confirmed COVID-19 cases were reported in the country including 2,242 deaths.

The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 5 February 2023, a total of 171,059 confirmed cases with 4,090 deaths have been reported.

No wild poliovirus type 1 (WPV1) case was reported this week. There are eight cases reported in 2022. Intensified surveillance efforts continue across the country.

The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 17 February 2023, a total of 266,598 confirmed cases with 259,917 recovered and 3,155 deaths have been reported.

The first case of meningitis was reported on 31 October 2022 and confirmed on 23 November 2022 with Neisseria meningitidis identified as the causative agent. As of 15 January 2023, Zinder has reported 490 cases of meningitis including 111 laboratory confirmed cases and 16 deaths (CFR 3.3%). These cases were reported from six health districts (HD): Dungass (331 cases, 6 deaths), Gouré (1 case, 0 deaths), Magaria (28 cases, 4 deaths), Matamèye (83 cases, 3 deaths), Mirriah (46 cases, 2 deaths), and Zinder ville (2 cases, 1 death). A reactive vaccination campaign is underway in the region.

From 19 March 2020 to 18 February 2023, a total of 9,512 cases with 315 deaths have been reported across the country. A total of 9,082 recoveries have been reported from the country.

From week 1 to week 52 (ending on 31 December ) of 2022, 14,127 cases and 32 deaths (CFR: 0.2%) have been reported. 94% (68/72) of the districts of Niger notified at least one suspected case of measles. In week 1 of 2023, 26 cases and zero deaths were notified in five regions, namely Dosso (7 suspected cases), Zinder (7 suspected cases, 6 suspected cases), Tahoua (7 suspected cases) and Maradi (2 suspected cases).

The conflict in northeastern, northwestern, and north central Nigeria affects 9.3 million people, including 5.7 million children. Of these, more than 2.9 million people are internally displaced, while one million live in inaccessible areas. Humanitarian crises caused by protracted armed conflict, armed violence, and community clashes between farmers and herders have resulted in alarming food insecurity and malnutrition, compounded by epidemics and childhood illnesses in the context of deteriorating water, sanitation, and hygiene conditions.

The first case of COVID-19 was detected in Niger on 14 March 2020. As of 5 February 2023, a total of 171,059 confirmed cases with 4,090 deaths have been reported.
### Health Emergency Information and Risk Assessment

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 8: 13 TO 19 FEBRUARY 2023**

#### Nigeria

- **Date notified to WCO**: 1-Oct-22
- **Start of reporting period**: 1-Oct-22
- **End of reporting period**: 31-Jan-23
- **Total cases**: 315
- **Cases Confirmed**: 54
- **Deaths**: 50
- **CFR**: 15.9%

From 1 October 2022 to 31 January 2023, 44 wards in 38 Local Government Areas in 18 states reported 315 suspected meningitis cases, including 54 positive cases and 50 deaths (CFR: 15.9%). In Jigawa state, effective 1 October 2022 to 31 January 2023, 242 suspected cases (51 lab-confirmed) and 47 deaths (CFR: 19.4%) were reported in 12 LGAs within 43 wards. Of the confirmed cases, 50 cases were positive for Neisseria meningitidis serogroup C, and one was positive for Streptococcus pneumoniae. The positivity rate is 82%.

#### Nigeria

- **Event**: Mpox
- **Grade**: Grade 3
- **Date notified to WCO**: 31-Jan-22
- **Start of reporting period**: 1-Jan-22
- **End of reporting period**: 31-Dec-22
- **Total cases**: 763
- **Deaths**: 7
- **CFR**: 0.9%

From 1 January to 31 December 2022, Nigeria has reported 763 monkeypox confirmed cases with seven deaths.

#### Nigeria

- **Event**: Poliomyelitis (cVDPV2)
- **Grade**: Grade 2
- **Date notified to WCO**: 1-Jun-18
- **Start of reporting period**: 1-Jan-18
- **End of reporting period**: 11-Jan-23
- **Total cases**: 513
- **Confirmed**: 513
- **Deaths**: -
- **CFR**: -

According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are 43 cVDPV2 cases reported in 2022. There were 410 cVDPV2 cases reported in 2021 and 513 cases since 1 January 2018.

#### Rwanda

- **Event**: COVID-19
- **Grade**: Grade 3
- **Date notified to WCO**: 14-Mar-20
- **Start of reporting period**: 14-Mar-20
- **End of reporting period**: 19-Feb-23
- **Total cases**: 133 162
- **Deaths**: 1 468
- **CFR**: 1.1%

The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 19 February 2023, a total of 133 647 cases with 1 468 deaths and 131 601 recovered cases have been reported in the country.

#### South Africa

- **Event**: Measles
- **Grade**: Ungraded
- **Date notified to WCO**: 1-Mar-22
- **Start of reporting period**: 1-Mar-22
- **End of reporting period**: 31-Dec-22
- **Total cases**: 1 971
- **Deaths**: 8
- **CFR**: 0.7%

From 2 March 2020 to 19 February 2023, a total of 88 916 confirmed cases of COVID-19 including 1 971 deaths and 86 942 recoveries have been reported in South Africa.

#### Senegal

- **Event**: Dengue
- **Grade**: Grade 2
- **Date notified to WCO**: 11-Apr-22
- **Start of reporting period**: 15-Apr-22
- **End of reporting period**: 22-Jan-23
- **Total cases**: 1 180
- **Deaths**: 8
- **CFR**: 0.7%

Four dengue confirmed cases including two males and two females have been reported in Thilogne district from week 1 to week 3 of 2023. In 2022, 238 cases were recorded including 203 confirmed by PCR (85.3%) and 35 by IgM testing (14.7%). They were mostly concentrated in the first and last quarters of 2022. Eleven regions were affected. The Matam region had reported the highest number of cases (134 cases, 56.3%), followed by Dakar (41 cases, 17.2%), Kaffrine (17 cases, 7.1%) and Thies (17 cases, 7.1%).

#### Nigeria

- **Event**: Meningitis
- **Grade**: Ungraded
- **Date notified to WCO**: 1-Oct-22
- **Start of reporting period**: 1-Oct-22
- **End of reporting period**: 31-Jan-23
- **Total cases**: 315
- **Confirmed**: 54
- **Deaths**: 50
- **CFR**: 15.9%

#### Africa

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- **Deaths**: 8
- **CFR**: 0.7%

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- **CFR**: 0.7%

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- **CFR**: 0.7%

#### Africa

- **Event**: Dengue
- **Grade**: Grade 2
- **Date notified to WCO**: 11-Apr-22
- **Start of reporting period**: 15-Apr-22
- **End of reporting period**: 22-Jan-23
- **Total cases**: 1 180
- **Deaths**: 8
- **CFR**: 0.7%
People across South Sudan have experienced critical needs in December 2022. Pibor Administrative Area (GPAA) in December 2022 - March 2023. Over 1.4 million children below the age of five are estimated to be acutely malnourished with 345,893 experiencing severe acute malnutrition (SAM) and another 1.1 million experiencing moderate acute malnutrition (MAM).

Since July 2022, an estimated 1 million people were affected by severe flooding in 36 counties across South Sudan and in the southern part of the Abyei Administrative Area. Floodwater levels remained high in Bentiu and Rubkona towns in Unity, impeding livelihood activities, exposing people to waterborne diseases and disrupting the provision of basic services. An assessment team found 17,000 newly displaced people sheltering in three locations in Pibor town, following armed clashes that broke out in Gumuruk area in Pibor County.

The long-standing and complex humanitarian crisis in South Sudan continues. Over the past three years, seasonal floods have caused thousands of people to be displaced as well as caused problems for water, sanitation, and hygiene conditions in formalized camps and informal settlements. Recent clashes in mid-November 2022, had already caused the displacement of civilians in Fashoda County, Upper Nile State.

A total of 4,635 suspected measles cases and 47 measles-related deaths were reported in South Sudan from epi week 1, 2022, to week 6, 2023 (ending 12 February 2023). A total of 2,881 cases are epi-linked, 414 lab-confirmed and 805 clinically compatible. A total of 26 counties have confirmed Measles outbreaks (23 counties in 2022 and 3 in 2023). A new measles outbreak was confirmed in Pariang (Unity state).

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 10 February 2023, a total of 42,775 confirmed cases have been reported in Tanzania Mainland including 846 deaths.

No case was reported this week. There were 2 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported in 2022. No cases were reported in 2021. There were nine cases in 2020, while the total number of cVDPV2 cases reported in 2019 remains at eight.

According to the Famine Early Warning Systems Network report covering projections from October 2022 to May 2023, below-average crop production and high food and non-food inflation are to drive acute food insecurity in Uganda. In Karamoja, significantly below-average crop production (estimated to be only around half of normal levels) caused the displacement of civilians in Fashoda County, Upper Nile State.

**Country** | **Event** | **Grade** | **Date notified to WCO** | **Start of reporting period** | **End of reporting period** | **Total cases** | **Cases Confirmed** | **Deaths** | **CFR**
---|---|---|---|---|---|---|---|---|---
South Sudan | Drought/food insecurity | Grade 3 | 18-Dec-20 | 5-Apr-21 | 12-Jan-23 | 6,310,000 | - | - | -
South Sudan | Floods | Ungraded | 7-Oct-22 | 15-Jan-23 | 1,000,000 | - | - | - | -
South Sudan | Anthrax | Ungraded | 25-Apr-22 | 13-Mar-22 | 25-Dec-22 | 148 | 8 | 5 | 3.4%
South Sudan | COVID-19 | Grade 3 | 5-Apr-20 | 5-Apr-20 | 18-Feb-23 | 18,393 | 18,393 | 138 | 0.8%
South Sudan | Hepatitis E | Ungraded | 3-Jan-18 | 1-Jan-19 | 22-Jan-23 | 3,873 | 104 | 27 | 0.7%
South Sudan | Measles | Ungraded | 23-Feb-22 | 1-Jan-22 | 12-Feb-23 | 4,635 | 4,100 | 47 | 1.0%
Tanzania, United Republic of | COVID-19 | Grade 3 | 16-Mar-20 | 16-Mar-20 | 10-Feb-23 | 42,775 | 42,775 | 846 | 2.0%
Togo | COVID-19 | Grade 3 | 6-Mar-20 | 1-Mar-20 | 17-Feb-23 | 39,366 | 39,366 | 290 | 0.7%
Togo | Poliomyelitis (cVDPV2) | Grade 2 | 18-Oct-19 | 13-Sep-19 | 15-Feb-23 | 19 | 19 | 0 | 0.0%
Uganda | Drought/food insecurity | Grade 3 | 17-Feb-22 | 1-Jan-22 | 6-Dec-22 | - | - | - | -
Uganda | COVID-19 | Grade 3 | 21-Mar-20 | 21-Mar-20 | 11-Feb-23 | 170,383 | 170,383 | 3,630 | 2.1%
Uganda | Crimean-Congo haemorrhagic fever (CCHF) | Ungraded | 23-Oct-22 | 12-Jul-22 | 17-Jan-23 | 8 | 8 | 3 | 37.5%
Uganda | Measles | Ungraded | 8-Dec-22 | 2-Feb-23 | 1-Feb-23 | 144 | 12 | 0 | 0.0%

A measles outbreak has been ongoing in Bunyoro Region of Uganda since 7 December 2022. As of 1 February 2023, a cumulative total of 144 suspect cases, 12 confirmed cases and no deaths have been reported since the onset of the outbreak.
### Weekly Bulletin on Outbreaks and Other Emergencies - Week 8: 13 to 19 February 2023

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<tr>
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<th>Deaths</th>
<th>CFR</th>
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<td>2-Jan-22</td>
<td>25-Jan-23</td>
<td>984</td>
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<td>0</td>
<td>0.0%</td>
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In 2022 and as of 13 January 2023, a total of 984 samples have been collected and tested for yellow fever (YF), of which 28 tested IgM+ for YF. Two cases were classified as laboratory-confirmed, including one in Masaka district and another one in Wakiso district. There are currently six cases under investigation, from five districts including Kasensi (2), Buvikwe (1), Buvuma (1), Masaka (1), and Wakiso (1).

| Zambia  | Cholera | Grade 3 | 24-Jan-23 | 20-Jan-23 | 13-Feb-23 | 122 | 19 | 2 | 1.6% |

On 21 January 2023, a male aged 22 from Kamtsekelo presented to Chikoma Health Centre (HC) with Acute Watery Diarrhea (AWD) and dehydration. On the same day, a 30-year-old female, presented to Chikoma Zonal Rural Health Centre with similar signs and symptoms to the index case. Cumulatively, 122 cases and two deaths have been reported.

| Zambia  | COVID-19 | Grade 3 | 18-Mar-20 | 18-Mar-20 | 12-Feb-23 | 342 317 | 342 317 | 0 | 1.2% |

The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 12 February 2023, a total of 342 317 confirmed COVID-19 cases were reported in the country including 4 051 deaths.

| Zambia  | Measles | Ungraded | 13-Jun-22 | 13-Jun-22 | 5-Feb-23 | 2 137 | 557 | 31 | 1.5% |

A measles outbreak continues to evolve in Lusaka, North-western and Southern provinces affecting several districts. Cumulatively, the provinces have recorded 2 137 measles cases and 31 deaths as of 5 February 2023. WHO is supporting the Ministry of Health investigating other cases with similar symptoms.

| Zimbabwe | Anthrax | Ungraded | 20-Jan-20 | 1-Jan-22 | 24-Jan-23 | 426 | 0 | 0 | 0.0% |

The anthrax outbreak is ongoing in Zimbabwe. In January 2023, 32 new cases have been reported from Midland province (30) and Masvingo province (2). As of 24 January 2023, the cumulative figures for anthrax are 426 cases and 0 deaths.

| Zimbabwe | COVID-19 | Grade 3 | 20-Mar-20 | 20-Mar-20 | 12-Feb-23 | 263 642 | 263 642 | 5 662 | 2.1% |

The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 12 February 2023, a total of 263 642 confirmed COVID-19 cases were reported in the country including 5 662 deaths.

| Zimbabwe | Measles | Ungraded | 29-Apr-22 | 19-May-22 | 31-Dec-22 | 7 743 | 355 | 707 | 9.7% |

A measles outbreak has been ongoing in Zimbabwe since 10 April 2022. As of 31 December 2022, A cumulative total of 7 743 suspect cases, 355 confirmed cases and 707 have been reported since the onset of the outbreak.

| Zimbabwe | Typhoid fever | Ungraded | 17-Oct-22 | 17-Oct-22 | 27-Jan-23 | 186 | 17 | 0 | 0.0% |

The Harare capital city of Zimbabwe is experiencing a typhoid fever outbreak since October 2022. As of 27 January 2022, a total of 186 cases with 17 confirmed have been reported. The age group of 1 – 4 years accounts for 16% of the total cases. Males account for 47% of all typhoid cases and females contribute 45% and 8% of the cases have no stated gender.

### Closed Events

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Congo</td>
<td>Measles</td>
<td>Ungraded</td>
<td>14-Mar-22</td>
<td>1-Jan-22</td>
<td>31-Dec-22</td>
<td>6 912</td>
<td>6 717</td>
<td>132</td>
<td>1.9%</td>
</tr>
</tbody>
</table>

From week 1 through week 52, 2022 (ending 1 January 2023), a total of 6 912 suspected measles cases were reported in Congo including 6 717 confirmed (6 385 through epi-link and 332 laboratory), about 132 deaths registered (CFR. 1.9%). Three districts (Alima, Madingou, Makélékélé) experienced measles outbreak 28 days after the reactive campaign organized from 4 to 14 August 2022 but controlled. As of 16 February 2023, no more update shared and the event was closed on 16 February 2023.

†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/](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.
Data sources
Data and information is provided by Member States through WHO Country Offices via regular situation reports, teleconferences and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.