WEEKLY BULLETIN ON OUTBREAKS
AND OTHER EMERGENCIES

Week 9: 20 to 26 February 2023
Data as reported by: 17:00; 26 February 2023

5 New events
148 Ongoing events
131 Outbreaks
22 Humanitarian crises

Countries reported in the document
HO-100 (Novel) States with no reported events
Not applicable

Legend
Malaria
Meningitis
Leukaemia
Dysentery
Typhoid fever
COVID-19
Anchovis
Dengue fever
Malaysia
Hepatitis E
Drought
Rifts Cyclone
Yellow Fever
Malaria
Typhus
Countries outside WHO African Region
WHO Member States with no reported events

Graded events

Protracted 3 events
Protracted 2 events
Protracted 1 events
Ungraded events

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement.
This Weekly Bulletin focuses on public health emergencies occurring in the WHO African region. This week’s articles cover:

- **Marburg in Equatorial Guinea**
- **Measles in the United Republic of Tanzania**
- **COVID-19 in the WHO African region**

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

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

**Major issues and challenges include:**

- Since the Marburg Virus Disease (MVD) outbreak was officially declared on 13 February 2023 by the Equatorial Guinea authorities, there is no new confirmed case reported so far. Outbreak response efforts are being intensified by the Government with support from WHO and partners. National and International experts on haemorrhagic fever outbreaks management have been deployed to scale up response activities including investigation of the source of the outbreak, health workers capacity building, contact tracing, risk communication and community engagement and laboratory capacities building among others. Neighbouring countries are also on alert and have triggered readiness activities for this outbreak.

- Since July 2022, the United Republic of Tanzania is facing an increase of measles cases with peaking recently in January. Suspected cases have been reported from all regions of the country which is suffering from low rates of vaccination coverage. The inadequate coverage has resulted from vaccine shortages, limited access to healthcare, and vaccine hesitancy, however response efforts have focused on intensifying vaccination campaigns. The measles outbreak in Tanzania underscores the importance of maintaining high vaccination coverage and strengthening surveillance systems to detect and control outbreaks.
**Ongoing events**

### Equatorial Guinea

![Cases](chart) 9  
![Deaths](chart) 9  
![CFR](chart) 100%

**Marburg Virus Disease**

**EVENT DESCRIPTION**

The alert of the ongoing outbreak was reported to the Ministry of Health and Social Welfare by the regional authorities on 7 February 2023 regarding several deaths that occurred between 7 January and 7 February 2023, in two villages of Ngum Esatop and Evú Nsoc Mokomo, in Nsock Nsomo district, Kie-Ntem province, Continental region of the country.

On 13 February, the Equatorial Guinea authorities declared officially the Marburg Virus Disease (MVD) outbreak in the country, 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. This positive sample was collected from the patient who died on 10 February 2023 at Ebibeyin district hospital. On 16 February 2023, the sequencing report showed strains like those isolated from fruit bats in Sierra Leone.

As of 23 February 2023, while investigations and final case classification were still ongoing in the field, the available information shows the following affected areas so far: two districts (Ebebiyin and Nsok-Nzomo) from Kie-Ntem province. A total of nine cases including one confirmed, four probable and four suspected are reported so far, all of which have died. There are no cases among healthcare workers. A total of 34 contacts have been listed and are under follow up.

All deceased cases were epidemiologically linked for either being in contact with a relative having the same MVD symptoms or having participated to the funeral ceremonies of a relative. Symptoms were occurring approximately seven to twelve days after exposure and death within two to four days after the onset of the symptoms. The presenting symptoms were high fever, general body weakness, vomiting, bloody diarrhoea and two cases had undefined skin lesions and otorrhagia (bleeding from the ear).

**PUBLIC HEALTH ACTIONS**

- Response teams have been deployed to the affected districts for active case finding, contact tracing, and provision of medical care to suspected cases.
- In-depth epidemiological investigations are underway to determine the source of the outbreak.
- WHO is deploying experts in epidemiology, case management, infection prevention, laboratory, and risk communication to support national response efforts and ensure community engagement.
- WHO is also facilitating the shipment of tents, materials for sample collection and analysis, and a viral hemorrhagic fever kit including personal protective equipment for 500 health workers.
- The borders between Equatorial Guinea and Cameroon, and between Equatorial Guinea and Gabon, were closed on both sides on 9 February 2023.

**SITUATION INTERPRETATION**

Equatorial Guinea is facing an outbreak of MVD for the first time and the country’s capacity to manage the outbreak is insufficient, therefore support from its partners is highly needed to control this outbreak. MVD outbreak control requires sufficient resources and relies on using a range of interventions, namely case management, surveillance and including contact tracing, a good laboratory service, infection prevention and control including safe and dignified burials, and social mobilization. Community engagement is key to successful control of MVD outbreaks by raising awareness of risk factors for Marburg infection and protective measures that individuals can adhere to is an effective way to reduce human transmission.
Location of confirmed cases of Marburg virus disease in Equatorial Guinea, as of 26 February 2023
Measles

EVENT DESCRIPTION

The measles outbreak in The United Republic of Tanzania continues after its official declaration by the Ministry of Health on 15 August 2022.

From July 2022 to February 2023, the country has reported a total of 3,811 suspected cases and 11 deaths (CFR 0.3%) due to measles. Of the suspected cases, 710 (18.6%) have been laboratory confirmed for measles and 313 (8.2%) were confirmed as rubella cases. Monitoring of surveillance data show the progressive increases in number of laboratory confirmed measles and rubella cases at end of June 2022 with a peak in October and November 2022 and a recent surge in January 2023.

All regions in the country have reported at least one confirmed case of measles, however as of week 7 (ending 19 Feb 2023), there were active outbreaks in only 12 councils including Muleba, Tabora, Bagamoyo, Sumbawanga, Nzega, Chakechake, Sumbawanga, Chunya, Mtwara, Uvinza, Mpimbwe and Malinyi. The epicentre of the outbreak remains in Dar-es-salaam and regions situated along the Indian coast line. Dar-es-salaam accounted for 9.2% of all cases, Mtwara for 7.4%, and Dodoma 5.9%.

Of the total laboratory-confirmed cases, the majority (90.1%) were aged 15 years or younger, while 58% of them were under 5 years, and 12% were under 9 months of age. Additionally, among the laboratory-confirmed cases, 59% were found to be unvaccinated, 21% were partially vaccinated, and 20% had been fully vaccinated.

Low vaccination coverage has been attributed to several factors, including inadequate vaccine supply, limited access to healthcare services, and vaccine hesitancy. In Tanzania, there have been reports of vaccine shortages, particularly in rural areas, where access to healthcare services is limited.

PUBLIC HEALTH ACTIONS

- An outbreak of measles was declared on 15 August 2022 by the Ministry of Health.
- The Ministry of Health, along with the Office of the President of the Regional Administration and Local Government (PO-RALG) and partners are responding and implementing key outbreak control activities in affected and high risk councils.
- The routine vaccination strategy has been intensified in the following districts: Nkasi, Kaliua, Mpimbwe, Da-es-salaam, Kilwa, and regions of Mtwara.
- Financial resources are being procured to increase vaccination campaign efforts through the GAVI Vaccine Alliance.

SITUATION INTERPRETATION

An outbreak of measles has been ongoing in the United Republic of Tanzania since July 2022. The outbreak in Tanzania has been attributed to several factors, including low vaccination coverage, inadequate surveillance systems, and limited access to healthcare services. Children have been the most affected with the majority of cases reported to be under the age of 15 years.
Distribution of confirmed cases of measles in affected districts in Tanzania, as of 19 February 2023
COVID-19 has been confirmed in 8,959,441 people in the WHO African region from the beginning of the pandemic until February 24, 2022. At the same time, 174,191 COVID-19 related deaths have been reported in the region, accounting for an overall case fatality ratio of 1.9%. Ninety-two percent (8,261,468) of the confirmed cases have been reported to have recovered from the disease.

Five countries account for the highest number of cumulative cases: South Africa 4,060,385 (45.3%), Ethiopia 499,903 (5.6%), Kenya 342,912 (3.8%), Zambia 342,707 (3.8%), and Botswana 329,727 (3.7%). The five countries that have reported the highest number of cumulative deaths are South Africa 102,595 (59.0%), Ethiopia 7,572 (4.4%), Algeria 6,881 (4.0%), Kenya 5,688 (3.3%), and Zimbabwe 5,663 (3.3%).

In the last two epidemiological weeks – epi weeks 7 (ending 19 February 2023) and 6 (ending on 12 February 2023), there was a 29% decrease in the number of confirmed COVID-19 cases observed with a total of 2,881 cases reported during epi week 7 (daily average of 412 cases), compared to 4,039 cases reported in epi week 6 (daily average of 577 cases).

South Africa 1,470 (51%), Zambia 390 (14%), Zimbabwe 279 (10%), Ethiopia 100 (3%), and Botswana 52 (2%) accounted for 80% of the 2,881 new cases reported in the last 7 days. The number of new COVID-19-related deaths in the region has remained low with five fatalities reported in epi week 7 from three countries including Zambia (3), Angola and Zimbabwe (one each). Comparing epi weeks 7 to 6 with nine deaths reported, there was a 46% decline in the number of deaths reported in the region.

In the past week, Zimbabwe did not meet the resurgence status following a reduction in the number of new COVID-19 weekly cases and improvement in the testing and positivity rates.

Following a steady increase in the number of new COVID-19 cases over the course of at least two consecutive weeks, Côte d’Ivoire and Mali were put in ALERT status and are being actively monitored. New hospitalizations, Intensive Care Unit (ICU) admissions and severe presentation of the disease have all remained low in the region.

**SITUATION INTERPRETATION**

For the fourth consecutive week, weekly COVID-19 incidence has continued to decrease across the African region, indicating that the pandemic situation is stabilizing in many African countries. Côte d’Ivoire and Mali are on ALERT due to an uptick of new cases in recent weeks. Hospitalization and ICU admission rates, have remained very low throughout the region, since no country has reported a critical situation. WHO has developed a transition framework with key specific recommendations to accompany the Member States in developing and implementing response plans adapted to the current dynamic of the pandemic.
Epidemiological curve of COVID-19 laboratory-confirmed cases in the AFRO region, as of 24 February 2023

Distribution of cases of COVID-19 in the WHO African Region, as of 24 February 2023

Go to overview Go to map of the outbreaks
## Update on Reporting - Epidemiological Week 07: 13 – 19 February 2023

**Point du rapportage hebdomadaire – Semaine 07: 13 – 19 Février 2023**

### 2023

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

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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:

**Legend:**
- Received consistently
- Received but not consistently
- Not received
- Never received

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

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

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

afrooutbreak@who.int
afrogeoprhir@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
## All events currently being monitored by WHO AFRO

### New Events

<table>
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<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>Ghana</td>
<td>Lassa Fever</td>
<td>Ungraded</td>
<td>24-Feb-23</td>
<td>4-Feb-23</td>
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On Friday, 24 February 2023, the Greater Accra Regional Health Directorate was notified of two confirmed cases of Lassa fever at the Korle Bu Teaching Hospital in Accra. The first case was a 40-year-old trader who initially reported to the Weija Gaawe Municipal Hospital with general bodily pains and sore throat on 4 February 2023. He died in Korle Bu Teaching Hospital on 17 February within five hours of arrival. Samples (Blood post-mortem for viral hemorrhagic fever testing and skin lesion swabs for Mpx) were collected on 17 February 2023. The second case came into contact with the index case on 17 February 2023 during the resuscitation process of the index case. She developed sore throat on 20 February 2023 and reported to Efan Vistory Clinic in Tema West District for care. Blood samples were taken for VHF testing on 24 February 2023 and tested positive for Lassa fever. The results were communicated to the regional health directorate on 24 February 2023.

Niger reported on 23 February 2023 a confirmed case of Rift Valley fever (RVF) following laboratory confirmation in a 38-year-old male resident of the village of Zangon Natsira in the Zinder region. He presented with symptoms including fever, vomiting, and convulsions. On 30 April 2023, a sample was taken for suspected RVF and the patient died on the same day. After receiving the sample on 2 February 2023, the Center for Medical and Health Research in Naimey confirmed RVF.

The Cholera outbreak is ongoing in Tanzania. Two regions, namely Ruvuma and Katavi regions are affected. From 22 January to 23 February 2023, Ruvuma, Nyasa District council reported a cumulative of 12 suspected cases (25%). Both deaths occurred in the community. In Katavi, Tanganyika District Council, since the start of the outbreak on 19 February to 23 February 2023, a total of 17 cases have been recorded without death. In Ruvuma today marks 12 days since the last confirmed case was reported on 11th February 2023, whereas in Katavi last two cases were detected and reported on 19th and 23rd February 2023 respectively.

### Ongoing Events

**Algeria** COVID-19 Grade 3 25-Feb-20 25-Feb-20 26-Feb-20 271 271 6 881 2.50%

From 25 February 2020 to 26 February 2023, a total of 271 440 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 182 791 recovered.

**Algeria** Poliomyelitis (cVDPV2) Grade 2 14-Jul-22 11-Apr-22 22-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 21-Mar-20 21-Feb-20 105 271 105 271 1 933 1.80%

The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 21 February 2023, a total of 105 271 confirmed COVID-19 cases have been reported in the country with 1 933 deaths.

**Benin** COVID-19 Grade 3 17-Mar-20 16-Mar-20 18-Feb-23 27 990 27 990 163 - 0.60%

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** Mpx Grade 3 14-Jun-22 14-Jun-22 1-Feb-23 3 3 - 0 0.00%

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 0.00%

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

**Botswana** COVID-19 Grade 3 30-Mar-20 30-Mar-20 18-Feb-23 329 734 329 734 2 795 0.90%

On 30 March 2020, the Ministry of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 18 February 2023, a total of 329 734 confirmed COVID-19 cases were reported in the country including 2 795 deaths.
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 25 February 2023, a total of 63,241 confirmed COVID-19 cases including 413 deaths and 62,770 recoveries were reported in the country.
Central African Republic

**Humanitarian crisis**

Protracted 2

11-Dec-13 11-Dec-13 2-Feb-23 3,400,000 - - -

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 projections.

Central African Republic

**COVID-19**

Grade 3

14-Mar-20 14-Mar-20 22-Jan-23 15,367 15,367 113 0.70%

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.

Central African Republic

**Mpox**

Grade 3

3-Mar-22 4-Mar-22 24-Jan-23 774 20 0 0.00%

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-Mbaéré, Bangui I, Alindao, Bimbo, Ouango-Gambo and Bangassou.

Central African Republic

**Poliomyelitis (cVDPV2)**

Grade 2

24-May-19 24-May-19 25-Jan-23 31 31 0 0.00%

No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported this week 3, 2023 (ending 22 January). There are six cases reported in 2022. Although no new cases were reported in 2021, 4 cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.

Central African Republic

**Yellow Fever**

Ungraded

17-Aug-21 1-Apr-21 8-Jan-23 767 23 4 0.50%

On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization. As of 8 January 2023, 767 suspected cases of YF have been reported including 6 probable and 23 lab-confirmed cases (14 cases in 2022). Two new suspected cases were reported in week 1 (ending 8 January). In total, five regions have so far been affected including RS1, RS2, RS3, RS4 and RS6; RS3 has reported 70% of confirmed cases.

Central African Republic

**Measles**

Grade 2

11-Feb-22 1-Mar-16 15-Jan-23 6,100,000 - - -

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.

Chad

**Humanitarian crisis (Sahel region)**

Grade 2

11-Feb-22 1-Mar-16 15-Jan-23 6,100,000 - - -

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

Chad

**COVID-19**

Grade 3

19-Mar-20 19-Mar-22 19-Feb-23 7,675 7,675 194 2.50%

The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 19 February 2023, a total of 7,675 confirmed COVID-19 cases were reported in the country including 194 deaths.

Chad

**Measles**

Ungraded

24-May-18 1-Jan-23 30-Jan-23 459 38 0 0.00%

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.

Chad

**Poliomyelitis (cVDPV2)**

Grade 2

18-Oct-19 9-Sep-19 25-Jan-23 142 142 0 0.00%

No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week 3, 2023 (ending 25 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.

Chad

**Yellow Fever**

Ungraded

13-Nov-21 1-Nov-21 25-Dec-22 2,311 30 7 0.30%

On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 25 December 2022, 2,491 suspected cases of yellow fever have been reported. Of these, 1,910 cases have been investigated, including 25 probable and 31 lab-confirmed cases. A total of 74 deaths have been reported (CFR 3.0%) including one among probable and six among confirmed cases. A total of 27,126 districts in 10/3 provinces have been affected since the beginning of the outbreak.

Comoros

**COVID-19**

Grade 3

30-Apr-20 30-Apr-20 23-Feb-23 9,001 9,001 160 1.80%

The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 23 February 2023, a total of 9,001 confirmed COVID-19 cases, including 160 deaths were reported in the country.

Congo

**COVID-19**

Grade 3

14-Mar-20 14-Mar-20 12-Feb-23 25,077 25,077 388 1.60%

The Government of Congo announced the confirmation of the first COVID-19 in Congo on 14 March 2020. As of 12 February 2023, a total of 25,077 cases including 388 deaths and 24,006 recovered cases have been reported in the country.

Congo

**Mpox**

Grade 3

23-May-22 1-Jan-22 18-Jan-23 68 5 3 4.0%

From 1 January 2022 to 18 January 2023, the Republic of Congo has reported 68 suspected cases of monkeypox including five probable and five laboratory-confirmed cases, with three deaths among the probable (CFR 4.4%). The suspected cases have been reported from four Departments and nine Districts. Impfondo is the epicentre of the outbreak, with five probable and two confirmed cases. The other confirmed cases have been detected in Ouesso (2) and Ngoyo (1) Districts. Sixty percent of the probable and confirmed cases are females, and 40% are aged less than 10 years.

Côted’Ivoire

**COVID-19**

Grade 3

11-Mar-20 11-Mar-20 25-Feb-23 88,182 88,182 834 0.90%

Since 11 March 2020, a total of 88,182 confirmed cases of COVID-19 have been reported from Côted’Ivoire including 834 deaths, and a total of 87,299 recoveries.
Since the beginning of 2022, more than 1.56 million people have been in a situation of internal displacement (IDPs) in the DRC. In North Kivu, clashes between the armed forces of the DRC and the March 23 movement (M23) in Masasi Territory forced nearly 42K people to move to the locality of Mweso and the town of Goma in Jan 2023. The fighting hampers a humanitarian access in several localities in the territories of Masisi, Walikale and Lubero with activities suspended in Kitshanga and Mweso. From Mar 2022 - Jan 2023, at least 602K people are displaced in the territories of Rutshuru, Nyiragongo, Masasis, Walikale, Lubero and the city of Goma. These displaced persons, settled in sites and with host families, continue to present needs shelter, health care, water, hygiene and sanitation, food and essential household items.

An outbreak of cholera was officially declared in North Kivu province of DRC on 14 December 2022, following a massive influx of IDPs in Nyiragongo and Karisimbi health zones (H2S). Between outbreak inception on week 47, 2022 (21-27 November) and 27 January 2023, a cumulative of 4 104 suspected cases of cholera including 16 deaths (CFR 0.4%) have been reported, including 3 798 cases and 16 deaths (CFR 0.4%) in Nyiragongo HZ, and 306 cases and zero death (CFR 0.0%) in Karisimbi HZ. An OCV campaign has been officially launched on 25 January 2023 and is scheduled from 26-30 January 2023.

From epidemiological week 1 to 6, 2023 (ending on 19 Feb 2023), 3 677 suspected cases of choler, including 18 deaths (CFR 0.5%), have been recorded in 47 Health Zones of 6 provinces. There are ongoing cholera outbreaks in the provinces of the East (North and South Kivu) and Southeast (Tanganyika and Haut-Lomami) of the country. The incidence (per 100,000 inhabitants) is 10 for the whole of the DRC. In epidemiological week 4, a total of 476 new suspected cases of choler and five deaths (lethality 1.1%) were notified from 34 health zones of 5 provinces, Public health response activities, including Oral Cholera Vaccination, are ongoing in affected health zones.

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%).

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 reported in 2022. 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 through 15 February 2023, a total of 419 suspected cases with 76 deaths (CFR 18.1%) have been reported.

The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 23 February 2023, a total of 17 229 cases have been reported in the country with 183 deaths and 16 907 recoveries.

On 8 February 2023 Health Authorities of the Republic of Equatorial Guinea issued a press release document stating that in recent weeks an unusual epidemiological situation has been registered in Nsok Nsomo district, province of Kie-Ntem, involving nine deaths in two neighboring communities, in a short period of time, with the following symptoms: fever, weakness, bloody vomiting and diarrhoea. On 12 February 2023, one blood sample tested positive for Marburg virus by real-time amplification after reverse transcription (qRT-qPCR) at the Institut Pasteur of Dakar in Senegal. This positive sample was collected from the patient who died on 10 February 2023. On 13 February 2022, the country’s authorities declared officially the Marburg virus disease (MVD) outbreak. On 16 February 2023, the sequencing report showed strains like those isolated from fruit bats in Sierra Leone. As of 21 February 2023, a total of nine deaths epidemiologically linked have been reported since the beginning of the event including one confirmed dead for MVD.
EMERGENCIES - WEEK 9: 20 TO 26 FEBRUARY 2023

Health Emergency Information and Risk Assessment

**Ethiopia**

**COVID-19**
Grade 3
Date notified to WCO: 21-Mar-20
Start of reporting period: 21-Mar-20
End of reporting period: 30-Oct-22
Total cases: 10 189
Confirmed cases: 10 189
Deaths: 103
CFR: 1.00%

The first COVID-19 confirmed case was reported in Ethiopia 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.

**Polioomyelitis (cVDPV2)**
Grade 2
Date notified to WCO: 2-Jun-22
Start of reporting period: 7-Jun-22
End of reporting period: 25-Jan-23
Total cases: 2
Deaths: 0
CFR: 0.00%

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 and another one reported in 2021. This latter one was however confirmed on 2 June 2022 by the Ethiopian National Polio laboratory.

**Eswatini**

**COVID-19**
Grade 3
Date notified to WCO: 13-Mar-20
Start of reporting period: 13-Mar-20
End of reporting period: 23-Feb-23
Total cases: 74 199
Confirmed cases: 74 199
Deaths: 1 423
CFR: 1.90%

The first case of COVID-19 was confirmed in the kingdom of Eswatini on 16 March 2020. As of 23 February 2023, a total of 74 199 cases have been reported with 1 423 associated deaths.

**Gambia**

**Acute kidney injury**
Grade 2
Date notified to WCO: 17-Mar-20
Start of reporting period: 17-Mar-20
End of reporting period: 30-Nov-22
Total cases: 12 189
Confirmed cases: 12 189
Deaths: 0
CFR: 0.00%

The first COVID-19 confirmed case was reported in The Gambia on 17 March 2020. As of 4 November 2022, a total of 12 189 confirmed COVID-19 cases including 373 deaths, and 12 189 recoveries have been reported in the country.

**Measles**
Grade 3
Date notified to WCO: 8-Jun-22
Start of reporting period: 8-Jun-22
End of reporting period: 24-May-22
Total cases: 121
Confirmed cases: 121
Deaths: 4
CFR: 3.30%

On 8 June 2022, the Director General of the Ghana Health Service confirmed that five cases of monkeypox have been detected in the country. From 24 May-25 January 2023, there have been 121 confirmed and four deaths reported from 13 over 16 administrative regions, with the Greater Accra region reporting the most cases. Of the confirmed cases, 64 (62%) are males. The age of confirmed cases ranges from 13 days to 67 Years (min-max).

**Health Emergency Information and Risk Assessment**

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 9: 20 TO 26 FEBRUARY 2023**
According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are three cases in 2022. No cases were reported in 2021. In addition, 12 cases were reported in 2020, and 19 were reported in 2019.

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

On 20 November 2022, a suspected case of yellow fever was reported from Dabola health district, Faranah health region, in Guinea. This is a 9-years-old child who died and whose yellow fever vaccination status is unknown. A confirmation test was conducted at the Dakar Institute Pasteur laboratory on 4 January 2023 and the results for ELISA 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 outbreak has affected seven counties: Marsabit, Wajir, Garissa, Nairobi, Turkana, Mandera and Kitui Counties. A total of 418 cases with 105 confirmed and three deaths (CFR 0.7%) have been reported. No new cases were reported in the last epi week with two deaths were reported.

The outbreak has affected 16 counties: Nairobi, Kiambu, Nakuru, UasinGishu, Kajiado, Muranga, Machakos, Garissa, Meru, Nyeri, Wajir, Tana River, Kitui, Homa Bay, Mandera and West Pokot counties. West Pokot is the new county reporting new cases. A total of 4 845 cases with 167 confirmed and 85 deaths (CFR 1.8 %) have been reported. In the last epi week 192 cases with two deaths were reported.

The outbreak has affected 16 counties: Nairobi, Kiambu, Nakuru, UasinGishu, Kajiado, Muranga, Machakos, Garissa, Meru, Nyeri, Wajir, Tana River, Kitui, Homa Bay, Mandera and West Pokot counties. West Pokot is the new county reporting new cases. A total of 4 845 cases with 167 confirmed and 85 deaths (CFR 1.8 %) have been reported. In the last epi week 192 cases with two deaths were reported.

The outbreak has affected seven counties: Marsabit, Wajir, Garissa, Nairobi, Turkana, Man dera and Kitui Counties. A total of 418 cases with 105 confirmed and three deaths (CFR 0.7%) have been reported. No new cases were reported in the last epi week.

Since January 2020, a total of 2 187 visceral leishmaniasis confirmed cases and suspected cases with ten deaths (CFR 0.5%), have been reported in nine counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandra, Turakana, Laikipia and Marsabit are in Alarm drought phase. Thirteen (13) counties including Embu, Garissa, Kajiado, Kitui, Makuenei, 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.

The outbreak has affected seven counties: Marsabit, Wajir, Garissa, Nairobi, Turkana, Man dera and Kitui Counties. A total of 418 cases with 105 confirmed and three deaths (CFR 0.7%) have been reported. No new cases were reported in the last epi week.

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. If 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

- **Country:** Liberia
- **Event:** Mpolo
- **Grade:** Grade 3
- **Date notified to WCO:** 21-Jul-22
- **Start of reporting period:** 23-Jul-22
- **End of reporting period:** 18-Jan-23
- **Total cases:** 6
- **Cases Confirmed:** 6
- **Deaths:** 0
- **CFR:** 0.00%

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 Ebokayeنية Une, La Côte D’Ivoire but sought treatment at the Pleaho 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.

Madagascar

- **Country:** Madagascar
- **Event:** Cylcocic system CHENESO
- **Grade:** Grade 2
- **Date notified to WCO:** 25-Jan-23
- **Start of reporting period:** 19-Jan-23
- **End of reporting period:** 31-Jan-23
- **Total cases:** 90 810
- **Cases Confirmed:** 33

On 19 January 2023 at 10:45 am, the cyclic system CHENESO landed in Madagascar north of Antalaha district, SAHA 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 flooded 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.

Malaysia

- **Country:** Malaysia
- **Event:** Malnutrition crisis
- **Grade:** Protracted 2
- **Date notified to WCO:** 1-Jul-21
- **Start of reporting period:** 1-Jan-21
- **End of reporting period:** 19-Feb-23
- **Total cases:** 2 200 000
- **Cases Confirmed:** -
- **Deaths:** -
- **CFR:** -

The humanitarian situation in the Grand Sud will remain precarious in 2023 and urgent action is required to save lives and alleviate suffering. At least 1.35 million people are expected to face high acute food insecurity (IPC Phase 3 or worse) during the peak of the lean season from January to April 2023—including 157,314 in Emergency (IPC Phase 4)—and in four districts, more than half of the population is in Crisis or worse (Bekily - 65 per cent; Ampam-pan - 55 per cent; Ambombe and Ambosara - 50 per cent). At least 356,000 children are expected to require treatment for acute malnutrition in the lean season, according to the IPC analysis, and 53 per cent of national severe acute malnutrition (SAM) admissions in 2022 (31,164 children from January to October) were in the Grand Sud.

Malaysia

- **Country:** Malaysia
- **Event:** Malnutrition crisis
- **Grade:** Protracted 2
- **Date notified to WCO:** 1-Jul-21
- **Start of reporting period:** 1-Jan-21
- **End of reporting period:** 19-Feb-23
- **Total cases:** 2 200 000
- **Cases Confirmed:** -
- **Deaths:** -
- **CFR:** -

The humanitarian situation in the Grand Sud will remain precarious in 2023 and urgent action is required to save lives and alleviate suffering. At least 1.35 million people are expected to face high acute food insecurity (IPC Phase 3 or worse) during the peak of the lean season from January to April 2023—including 157,314 in Emergency (IPC Phase 4)—and in four districts, more than half of the population is in Crisis or worse (Bekily - 65 per cent; Ampam-pan - 55 per cent; Ambombe and Ambosara - 50 per cent). At least 356,000 children are expected to require treatment for acute malnutrition in the lean season, according to the IPC analysis, and 53 per cent of national severe acute malnutrition (SAM) admissions in 2022 (31,164 children from January to October) were in the Grand Sud.
### Weekly Bulletin on Outbreaks and Other Emergencies - Week 9: 20 to 26 February 2023

#### Mozambique

**Poliomyelitis (cVDPV2)**

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<tr>
<td>Grade 2</td>
<td>7-Dec-18</td>
<td>1-Jan-21</td>
<td>22-Feb-23</td>
<td>6</td>
<td>6</td>
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According to the Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains four. There were two cases reported in 2021.

**Poliomyelitis (WPV1)**

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<td>Grade 2</td>
<td>17-May-22</td>
<td>18-May-22</td>
<td>22-Feb-23</td>
<td>10</td>
<td>10</td>
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According to the Global Polio Eradication Initiative, two cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported in Zambezia this week. There were 21 cases in 2022. Intensified surveillance efforts continue across the country.

#### Namibia

**COVID-19**

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<tr>
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<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>19-Feb-23</td>
<td>171 156</td>
<td>171 156</td>
<td>4 090</td>
<td>2,40%</td>
</tr>
</tbody>
</table>

The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 19 February 2023, a total of 171 156 confirmed COVID-19 cases have been reported.

#### Nigeria

**Humanitarian crisis (Sahel region)**

<table>
<thead>
<tr>
<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>Grade 2</td>
<td>1-Feb-15</td>
<td>1-Feb-15</td>
<td>16-Dec-22</td>
<td>580 838</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Humanitarian access in Nigeria has deteriorated because of growing insecurity in Diffa, Maradi, Tahoua, and Tillabéri regions. Niger hosts 580 838 people whose situation is of concern, of which 48% are internally displaced persons (IDPs), 43% refugees, 6% returnees, 2% asylum seekers and other people whose situation is worrying (mainly Burkinabés).

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.

**Measles**

<table>
<thead>
<tr>
<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>Ungraded</td>
<td>5-Apr-22</td>
<td>1-Jan-22</td>
<td>14-Jan-23</td>
<td>14 153</td>
<td>722</td>
<td>32</td>
<td>0,20%</td>
</tr>
</tbody>
</table>

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

**Meningitis**

<table>
<thead>
<tr>
<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>Ungraded</td>
<td>7-Dec-22</td>
<td>31-Oct-22</td>
<td>15-Jan-23</td>
<td>490</td>
<td>111</td>
<td>16</td>
<td>3,30%</td>
</tr>
</tbody>
</table>

The first case of meningitis was reported on 31 October 2022 and confirmed on 23 November 2022 in Katsina 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), Miriria (46 cases, 2 deaths), and Zinder ville (2 cases, 1 death). A reactive vaccination campaign is underway in the region.

**Poliomyelitis (cVDPV2)**

<table>
<thead>
<tr>
<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>Grade 2</td>
<td>1-Jan-20</td>
<td>1-Jan-21</td>
<td>15-Feb-23</td>
<td>31</td>
<td>31</td>
<td>0</td>
<td>0,00%</td>
</tr>
</tbody>
</table>

No new cases were reported during this week. There are 13 cases reported in 2022. There were 18 cases reported in 2021.

#### Nigeria

**Humanitarian crisis (Sahel region)**

<table>
<thead>
<tr>
<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>Grade 2</td>
<td>10-Oct-16</td>
<td>10-Oct-16</td>
<td>13-Jan-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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.

**Cholera**

<table>
<thead>
<tr>
<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>Grade 3</td>
<td>1-Jan-23</td>
<td>1-Jan-23</td>
<td>29-Jan-23</td>
<td>429</td>
<td>17</td>
<td>-</td>
<td>4,00%</td>
</tr>
</tbody>
</table>

From 01 January to 29 January 2023 (EW 4), a cumulative 429 suspected cholera cases and 17 deaths (CFR: 4%) have been reported from 24 Local Governmental Areas (LGAs) in 11 states, namely Cross River (242), Ebonyi (86), Niger (38), Abia (35), Ondo (10), Katsina (5), Sokoto (3), Zamfara (3), Osun (1) and Kano (1). Of the suspected cases since the beginning of the year, the age group 0 - 5 years is the most affected age group for males and females. Male represent 51% and female represents 49% of all cholera suspected cases.
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.

From 1 October 2022 to 31 January 2023, 44 wards, 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 31st 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%.

Since the beginning of 2023 to 22 January 2023, a total of 244 confirmed cases of Lassa fever, including 37 deaths with a case fatality rate of 15.2%, have been reported in 16 states and the Federal Capital Territory (FCT). The highest number of cases was reported in Ondo (90) and Edo (89) states, followed by Bauchi (13), Taraba (10), and Benue (9). Of the reported cases, five cases and one death were among health workers. The Nigeria Centre for Disease Control and Prevention has activated the National Multisectoral Emergency Operations Center for Lassa Fever at Level 2 to coordinate and strengthen the ongoing response activities in the country.

From 1 January to 31 December 2022, Nigeria has reported 763 monkeypox confirmed cases with seven deaths. From 1 January to 31 December 2022, Nigeria reported more than 3 measles cases. Surveillance and immunisation activities have been intensified in all districts.

Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 31 December 2022, a total of 50,665 cases have been confirmed, including 50,440 recoveries and 172 deaths have been reported.

Four dengue confirmed cases including two males and two females have been reported in Thilongne 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%).

Four dengue confirmed cases including two males and two females have been reported from regions in Senegal namely Dioribel (10 cases), Kédougou (4 cases), Louga (1 case), and Matam (2 cases). Almost all reported cases (16, 94.1%) were unvaccinated against measles.

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 133,162 cases with 1,468 deaths and 131,647 recovered cases have been reported in the country.

In 2020, the Ministry of Health of Sao Tome and Principe reported the country’s first case of COVID-19. As of 19 February 2023, a total of 6,281 confirmed cases of COVID-19 have been reported, including 77 deaths. A total of 6,203 cases have been reported as recoveries.

In 2020, Sao Tome and Principe is experiencing its first ever documented dengue outbreak. From 15 April to 22 January 2023, a total of 1,180 cases and 8 deaths (CFR 0.7%) have been confirmed via RDT from: Água Grande (799, 67.3%), Mézôchi (180, 15.5%), Lobata (97, 8.3%), Cantagalo (47, 4.1%), Caué (23, 2.0%), Lemba (20, 1.6%), and RAP (10 cases), Kédougou (4 cases), Louga (1 case), and Matam (2 cases). Almost all reported cases (16; 94.1%) were unvaccinated against measles.

From 2 March 2020 to 21 February 2023, a total of 88,917 confirmed cases of COVID-19 including 1,971 deaths and 86,943 recoveries have been reported in Senegal.

Four dengue confirmed cases including two males and two females have been reported from regions in Senegal namely Dioribel (10 cases), Kédougou (4 cases), Louga (1 case), and Matam (2 cases). Almost all reported cases (16, 94.1%) were unvaccinated against measles.

From epidemic week 1 to 3 of 2023 (ending 22 January 2023), 17 confirmed cases of measles with no deaths were reported from four regions in Senegal namely Dioribel (10 cases), Kédougou (4 cases), Louga (1 case), and Matam (2 cases). Almost all reported cases (16, 94.1%) were unvaccinated against measles.

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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 Mpuamala, 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.
On 3 February 2023, the NCID of South Africa notified WHO of two imported cases of cholera. As of 23 February 2023, there have been five confirmed cases by PCR and one death.

Since the start of the COVID-19 pandemic in South Africa through 23 February 2023, a cumulative total of 4,060,385 confirmed cases and 102,595 deaths have been reported.

From 8 October 2022 to 23 February, 2023, a total of 586 laboratory-confirmed cases were reported from five provinces with declared measles outbreaks in Limpopo (209 cases), North West (182 cases), Mpumalanga (96 cases), Gauteng (75 cases), and Free State (24 cases).

From 22 June 2022 to 19 February 2023, there have been five unlinked laboratory-confirmed monkeypox cases in South Africa. The cases were reported from Gauteng (n = 1), Western Cape (n = 2), Limpopo (n = 1) and Johannesburg (n = 1) provinces. No new cases have been reported since October 2022.

On 4 June 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 Rubkonba towns in Unity, and multiple locations in Jonglei and Upper Nile states. Inaccessibility, and public health emergencies. Floodwater levels remained high in Bentiu and Rubkonba towns in Unity, and multiple locations in Jonglei and Upper Nile 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 Piibor town, following armed clashes that broke out in Gumuruk area in Piibor County.

An estimated 9.4 million people including 2.2 million women, 4.9 million children, and 337K refugees, are projected to need humanitarian assistance and protection services in 2023. Communities faced critical needs in January 2023 owing to the impact of multiple emergencies such as recurring subnational violence, food insecurity, flooding, inaccessibility, and public health emergencies. Floodwater levels remained high in Bentiu and Rubkonba towns in Unity, and multiple locations in Jonglei and Upper Nile impeding livelihood activities, exposing people to waterborne diseases, and disrupting the provision of basic services. Further, hostilities erupted in several parts of the country in Dec 2022 and Jan 2023. The violence between communities in Greater Piibor Administrative Area displaced 17K people to Piibor while the clashes between cattle keepers and host communities displaced 5K in Mangala in Juba and 2 500 people in Kajo Keji County where 19 people were killed.

On 20 April 2020, the Ministry of Health of South Sudan reported the country’s first case of COVID-19. As of 20 Feb 2023, a total of 18,444 confirmed COVID-19 cases were reported in the country including 138 deaths and 18,298 recovered cases.

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### Weekly Bulletin on Outbreaks and Other Emergencies - Week 9: 20 to 26 February 2023

#### Central African Republic

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</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>Central African Republic</td>
<td>Measles</td>
<td>Ungraded</td>
<td>13-Mar-22</td>
<td>1-Jan-22</td>
<td>1 598</td>
<td>159</td>
<td>3</td>
<td>0.20%</td>
</tr>
</tbody>
</table>

From 1 January 2022 to 5 February 2023, a total of 1 598 suspected cases of measles (1 485 in 2022 and 113 in 2023) have been reported in the country. Among these, 159 confirmed (110 laboratory confirmed and 49 epidemiological linked), three deaths (CFR 2%). A total of 10 districts confirmed measles outbreaks: Bangui 1 confirmed at week 33; Batangafo-Kabo at week 30; Ouango-Gambo at week 30; Bimbo at week 10; Koundou-Grimari at week 11, Alindou at week 14; Haute-Kotto at week 20; Kemba-Satema at week 41; Bocaranga-Kou at week 43 and Mobaye-Zangba at week 46. In 2023, a total of 113 suspected cases reported and 7 laboratory confirmed. No death reported so far and no district in outbreak since the beginning of the year and the event was closed on 24 February 2023.


Data are taken from the most recently available situation reports sent to WHO AFRO. Numbers are subject to change as the situations are dynamic.
Health Emergency Information and Risk Assessment

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.

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