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

- Diphtheria in Guinea
- Measles in Ethiopia
- Humanitarian Crisis in South Sudan

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 worsening diphtheria situation affecting nearly all regions in Guinea poses considerable challenges. The increasing number of cases, coupled with their spread across regions, is compounded by various factors, including low vaccination coverage, overcrowded living conditions, delayed healthcare seeking and diagnosis, deficiencies in case management, and limited public information dissemination.

- The humanitarian crisis in South Sudan is deeply concerning. Refugees, asylum-seekers, and returnees face harrowing challenges. Reports from Wedwil, Aweil, and the Panakuach border in the Unity/Ruweng Administrative Area indicate a grim situation marked by extortion, physical violence, sexual harassment, and looting, often accompanied by violence. In addition, the extreme weather, poor road networks, and funding constraints are hampering the vital transportation assistance required for relief efforts. New arrivals in Renk have significantly outnumbered departures facilitated by partners, adding to the urgency of the situation. The presence of several returnees across 36 counties only exacerbates the crisis. Partners are striving to provide three months’ worth of food assistance to these returnees in their final destinations.
**Guinea**

**Diphtheria**

**EVENT DESCRIPTION**

Guinea has been experiencing a diphtheria outbreak with a significant number of reported cases.

From weeks 1 to 5 of 2024 (ending 4 February), there were 1,184 suspected cases and five deaths, averaging 237 suspected cases per week during this period. Although there has been a slight decline in cases since week 3 of 2024, the epidemic curve shows a general trend of increasing number of reported cases with progressively higher peaks since the beginning of the outbreak.

Since the outbreak began on 4 July 2023, until 4 February 2024, Guinea has recorded 3,445 suspected cases of diphtheria, including 3,207 confirmed cases and 83 deaths, resulting in a case fatality rate (CFR) of 2.4% among suspected cases.

Of the confirmed cases, 39 (1.2%) were laboratory-confirmed, 107 (3.3%) were epidemiologically linked, and 3,061 (95.4%) were clinically compatible. Females accounted for 52% of cases and 65% were under 15 years of age.

Initially, the outbreak was localized in the Kankan region. As of week 3 of 2024, seven of Guinea’s eight regions have been affected, including the capital, Conakry. Kankan region accounts for most reported cases, with 96.7% (3,332 cases) attributed to this region. Boké region is the only one that has not reported any cases.

**PUBLIC HEALTH ACTIONS**

- The response to the outbreak is being coordinated by a national strategic committee and regional coordination teams that include several partners.
- Intensified surveillance efforts in active case finding along with a strategy for tracing outpatient cases are being implemented.
- Ongoing community engagement efforts continues, encompassing diphtheria and vaccination awareness sessions with various community stakeholders, including contacts, traditional leaders, and the general population.
- Clinical case management protocols are being implemented, combined with the provision of psychosocial support to households affected by diphtheria.

- A vaccination campaign is being organized with support from GAVI.

**SITUATION INTERPRETATION**

Since the outbreak began in July 2023, significant portion of all suspected diphtheria cases were reported in the first five weeks of 2024. Although surveillance has improved, the persistent gradual rise in cases suggests the presence of underlying factors exacerbating the situation. Close monitoring is essential, and further response measures are imperative to effectively control this outbreak.
Distribution of cases of Diphtheria in Guinea by region, Week 26, 2023 to week 5, 2024

Legend
- 1 - 25
- 26 - 59
- 60 - 3,332

Proportion of the total
- 0.03% - 0.73%
- 0.74% - 1.71%
- 1.72% - 96.72%

Boundaries
- Non-affected region
- Other countries

Situation from week 26, 2023 to week 5, 2024
Data source: WHO/Guinea
Health Information and Risk Assessment
Emergency Preparedness and Response
Regional Office for Africa
World Health Organization
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Measles

EVENT DESCRIPTION

Despite reaching the 77.0% of the National Measles Immunization Coverage Rate achieved in 2023, Ethiopia still faces critical challenges in containing ongoing measles outbreaks. A total of 556 new measles cases and five deaths were reported from January 1 to 29, 2024 in seven woredas, namely; Aboker, Berbere, Hoko, Janamora, Jinella, Saba Boru and Tembaro Woredas. However, measles outbreaks have been under control since January 29, 2024 in Abeshege, Bero, Bule Hora, Hamer, Lare and Surma Woredas. From February 2023 to January 2024, a total of 35,474 cases and 258 deaths were reported. As of 1 February 2024, there were 2,725 active measles cases in the regions of Oromia 54%, (n=1,155), 16.1% Sidama (n=343), South Ethiopia 15.4%, (n=329), Central Ethiopia 13.9% (n=297), Amhara 9.08% (n=194), 6.5% SWEPR (138), Somali 7.8% (n=166), Afar 2.7% (n=58), Dire Dawa 0.9% (n=19), Gambella 0.7% (n=14), Harari 0.6% (n=12), in these 11 woredas, 22 deaths were reported as of 1 February 2023, and the reports exclude the Tigray region and B/Gumuz where insecurity is high.

The spread of the cholera outbreak has been attributed to limited doses received before delivery with only 30% of women receiving TT2+ doses aggravated by the low number of women that received antenatal care services (35%). This Vaccination is important because 50% of the people that died from the outbreak in 2023 were babies and those below the age of five.

PUBLIC HEALTH ACTIONS

- Regular coordination meetings with stakeholders have been conducted.
- Training for frontline responders is ongoing.
- Routine immunization activities have been intensified. Trainings have been conducted in Central Ethiopia Region and a team has been deployed from the Ethiopian public health institute to Hadiya Zone of Central Ethiopia Region to support response and investigation.
- Surveillance through active case search including by health extension workers has been enhanced
- Case management including Vitamin A supplement and nutritional screening for cases is ongoing
- Outbreak investigation and root cause analysis is being conducted in affected woredas.
- Risk communication and community mobilization activities through locally tailored approach is ongoing. The measles reactive vaccination campaign is completed in all targeted regions and woredas with a national cumulative coverage reached at 105% except for B/Gumuz Region due to the ongoing insecurity.

SITUATION INTERPRETATION

The response to Ethiopia's measles outbreak since 2023 has been met with sub optimal vaccination for the required three dose especially among pregnant women, and operational cost shortage for reactive vaccination despite in some affected woredas or districts. The current security problem in Amhara Region is also impacting the optimal response activities and getting progress reports. Despite this, Ethiopia has made progress in responding to measles since the outbreak has been under control in some woredas since January 2024.
Distribution of cases and deaths of measles in Ethiopia by Region, as of week 5, 2024

Legend

- Measles cases
  - 0 - 12
  - 12 - 58
  - 59 - 194
  - 195 - 1,155

Proportion of the total
- 0.44% - 2.13%
- 2.14% - 7.12%
- 7.13% - 42.39%

Boundaries
- Data not available
- Non-affected regions
- Other countries

Area outside WHO AFRO

Situations as of week 5, 2024

Data source: WHO Ethiopia
Health Information and Risk Assessment
Emergency Preparedness and Response
Regional office for Africa
World Health Organization
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South Sudan

Humanitarian Crisis

EVENT DESCRIPTION
South Sudan, that has recently emerged from decades of conflict continues to face a dire humanitarian situation. Ongoing conflict among the government, opposing forces, and their allied militias, coupled with intercommunal violence in various parts of the country, led to the loss of lives, injuries, and displacement of thousands of civilians. The recent influx of individuals across borders between 6-19 January 2024 has further exacerbated the already critical humanitarian situation.

Since 15 April 2023, a total of 516,658 individuals have crossed from Sudan into South Sudan, with the majority being South Sudanese (81%) and a substantial number being Sudanese (18%). This influx, particularly noted in the town of Renk, has put a strain on local resources and demanded a coordinated response from both local authorities and humanitarian partners.

The humanitarian context in South Sudan is described as grim, exacerbated by insecurity, sub-national violence, climatic shocks, and the additional pressures from the Sudan crisis influx. This situation has further deteriorated the food and nutrition security of many families. According to the Integrated Food Security Phase Classification results, South Sudan is projected to have 7.1 million people (56% of its population) facing acute food insecurity levels during the April-July 2024 lean season.

PUBLIC HEALTH ACTIONS
- Onward Transportation Assistance (OTA): Critical for relieving overcrowded transit centers in Renk and Malakal, OTA is needed to facilitate flights from Malakal to other destinations within the country.
- There is an urgent need for more shelter and latrines to meet minimum emergency standards, with over 23,000 people currently sheltering in transit centers. Construction of additional shelters and latrines is underway to address this need.
- Food assistance has been provided, including specialized nutritious food for children aged 6-59 months and pregnant and lactating women and girls, with 55,000 people receiving food assistance during the reporting period.
- Efforts to mitigate the spread of cholera are in place with the construction of more latrines. Water, sanitation, and hygiene services, along with medical services, are ongoing to address the health needs of the population.

SITUATION INTERPRETATION
The situation in South Sudan, in response to the Sudan crisis, presents a complex humanitarian challenge that requires sustained international support and coordination. The influx of refugees and returnees has put a significant strain on the already fragile infrastructure and resources. Addressing the critical needs for shelter, sanitation, and nutrition is paramount to prevent further deterioration of the humanitarian situation. Moreover, the increased cases of diarrhoea at transit centers underscore the urgent need for enhanced WASH facilities and health services. The coordinated efforts of local authorities, humanitarian partners, and international donors are crucial in responding effectively to this crisis.
Snapshot of Humanitarian Situation in South Sudan, as at week 5 of 2024

Source: IOM

Source: Foreign Policy Media
All events currently being monitored by WHO AFRO

<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>Comoros</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>2-Feb-24</td>
<td>2-Feb-24</td>
<td>4-Feb-24</td>
<td>28</td>
<td>10</td>
<td>2</td>
<td>7.10%</td>
</tr>
</tbody>
</table>

On 2 February 2024, the Ministry of Health of Comoros officially declared an outbreak of cholera. Six cases were initially confirmed between 2 and 3 February 2024 among 25 suspected cases (14 crew members and 11 passengers) who travelled from Tanzania to Comoros in the same boat. Between 2 and 4 February 2024, a total of 10 cases (8 men and 2 women) were confirmed positive for Vibrio cholerae by RDT, including 2 healthcare workers. Ten cases are currently admitted at the cholera treatment unit in Sambou hospital in Grande Comore. Drinking water samples collected from the boat for laboratory analyses returned negative for Vibrio cholerae. Investigations to determine the source of infection as well as five missing passengers are ongoing.

| Guinea      | Lassa fever                  | Ungraded | 3-Feb-24              | 25-Jan-24                | 3-Feb-24                | 1            | 1              | 0      |     |

On 03 February 2024, WHO was notified of a confirmed case of Lassa fever in a 40-year-old driver of N’Zérékoré prefecture, Guinée forestière region of southeastern Guinea. The case-patient is under care at the N’Zérékoré regional hospital. A total of 19 contacts were initially identified. Investigations are ongoing.

| At least 3 people died and nearly 300 people were injured in a fire incident following a gas explosion in Embakasi district in Nairobi, Kenya, in the night of 1 February 2024. Some 271 people were evacuated in different hospitals in Nairobi.

| Benin       | Dengue fever                 | Grade 3  | 1-Jan-23              | 1-Jan-23                 | 20-Dec-23               | 6            | 3              | 1      | 16.70% |

As of 20 December 2023, Benin reported six cases of dengue fever, including three confirmed cases and one death. Confirmed cases were reported from Littoral (n=2) and Cottou (n=1).

| Benin       | Poliomyelitis (cVDPV2)       | Grade 2  | 8-Aug-19              | 24-Aug-19                | 31-Jan-24               | 30           | 30             | -      | -    |

There have been three cases reported in 2023. There are 13 cases reported in 2022. Six cases were reported in 2021 and 2020, and eight in 2019.

| Burkina Faso | Humanitarian crisis (Sahel Region) | Grade 2  | 1-Jan-19              | 1-Jan-19                 | 27-Nov-23               | 5,500,000   | 5,500,000     | -      | -    |

Since 2015, the security situation in the Sahel and Eastern Burkina Faso has gradually deteriorated due to attacks by armed groups. Access to healthcare services remains a major challenge for the affected population. As of November 2023, 5.5 million People were in need of humanitarian assistance, 3.2 million of which are children and over 2.06 million IDPs registered. The situation remains fluid.

| Burkina Faso | Chikungunya                  | Ungraded | 6-Sep-23              | 19-Sep-23                | 7-Jan-24                | 311          | 311            | -      |     |

On 6 September 2023, the reference laboratory for viral hemorrhagic fevers confirmed a case of chikungunya in a patient from the Pouytenga health district whose sample was collected as part of sentinel surveillance for dengue and other arboviruses. As of 7 January 2024, 311 confirmed cases and no deaths were reported from six health districts: Pouytenga (274, 88%), Ouagadougou (23), Zorgho (8), Koudougou (4), and Bobo Dioulasso (2). No new confirmed cases were reported during week 1 of 2024.

| Burkina Faso | Dengue                        | Grade 3  | 11-Sep-23              | 1-Jan-23                 | 7-Jan-24                | 156,870     | 70,964         | 714    | 0.50% |

From the beginning of the outbreak in January 2023 to 07 January 2024, a total of 156 870 confirmed cases and 714 fatalities have been reported.

| Burundi     | Cholera                      | Grade 3  | 1-Jan-23              | 14-Dec-22                | 7-Jan-24                | 1,382       | 175            | 9      | 0.70% |

The ongoing cholera outbreak was officially declared on 1 January 2023. Cumulatively, a total of 1 382 cases with nine deaths have been reported as of 7 January 2024.

| Burundi     | Poliomyelitis (cVDPV2)       | Grade 2  | 17-Mar-23              | 1-Jan-22                 | 10-Jan-24               | 2           | 2              |       | 0.00% |

**No cVDPV2 case was reported this week. There is one case reported in 2023 and one in 2022.**

| Cameroon    | Humanitarian crisis (North-West & South-West) | Protracted | 1-Oct-16              | 27-Jun-18                | 15-Nov-23               | -           | -              | -      |     |

In the North-West and South-West regions, the unstable security situation and persistent violence are exacerbating humanitarian needs. Affected people continue to flee their homes to neighboring villages and communities. Between January and July 2023, humanitarian and security partners reported the displacement of more than 42 000 people in both regions.

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**Health Emergency Information and Risk Assessment Health Emergency Information and Risk Assessment**

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES**

**WEEK 5: 29 JANUARY - 4 FEBRUARY 2024**

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**Go to map of the outbreaks**
### Health Emergency Information and Risk Assessment

#### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

**WEEK 5: 29 JANUARY - 4 FEBRUARY 2024**

<table>
<thead>
<tr>
<th>Country</th>
<th>Humanitarian crisis (Sahel Region)</th>
<th>Grade</th>
<th>31-Dec-13</th>
<th>27-Jun-17</th>
<th>13-Nov-23</th>
<th>-</th>
<th>-</th>
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<tbody>
<tr>
<td>Cameroon</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>31-Aug-21</td>
<td>25-Oct-21</td>
<td>3-Dec-23</td>
<td>21,222</td>
<td>2,084</td>
<td>508</td>
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<td>Cameroon</td>
<td>Measles</td>
<td>Ungraded</td>
<td>2-Apr-19</td>
<td>1-Jan-23</td>
<td>3-Dec-23</td>
<td>6,682</td>
<td>6,535</td>
<td>31</td>
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<td>Cameroon</td>
<td>Mpx</td>
<td>Protracted 2</td>
<td>24-Feb-22</td>
<td>1-Jan-22</td>
<td>30-Nov-23</td>
<td>45</td>
<td>45</td>
<td>3</td>
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<td>1-Jan-20</td>
<td>6-Dec-23</td>
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<td>13</td>
<td>-</td>
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<td>Yellow Fever</td>
<td>Ungraded</td>
<td>20-Nov-23</td>
<td>23-Jan-23</td>
<td>24-Dec-23</td>
<td>59</td>
<td>30</td>
<td>5</td>
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<tr>
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<td>11-Dec-13</td>
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<td>20-Nov-23</td>
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<td>13-Mar-22</td>
<td>1-Jan-23</td>
<td>26-Nov-23</td>
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<td>3-Mar-22</td>
<td>4-Mar-22</td>
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<td>35</td>
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<td>12-Jun-23</td>
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<td>Grade 2</td>
<td>11-Feb-22</td>
<td>1-Mar-16</td>
<td>12-Nov-23</td>
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<tr>
<td>Chad</td>
<td>Measles</td>
<td>Ungraded</td>
<td>24-May-18</td>
<td>1-Jan-23</td>
<td>10-Dec-23</td>
<td>10,552</td>
<td>820</td>
<td>8</td>
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The Far North region of Cameroon is still facing humanitarian crisis. The region situated at the border area with Nigeria and Chad, as well as the Lake Chad area, remain the most affected by the armed conflict. Between August and September this year, nearly 6,000 newly displaced people were registered in the Mokolo district following repeated attacks by non-state armed groups. More than 2,200 new asylum seekers/refugees were registered for the same period at the Gouregnuel transit site, in Mokolo district of Mayo-Tsanaga department.

The cholera outbreak in Cameroon is still ongoing and the outbreak is currently active in 10 districts across three regions (Center, Littoral and South-West). In week 48, three new cases were reported with zero death, this gives a cumulative number of 21,222 cases including 2,084 confirmed by culture (9.8%) and 508 deaths (CFR 2.4%). The median age is 28 years (0.1-103 years) and the M/F ratio of 1.3.

From week 1 through week 48 (ending 3 December 2023), 6,535 confirmed cases have been reported in Cameroon, including 476 IgM+ and 6,059 epidemiologically linked. At least 31 related deaths (CFR 0.5%) have been reported in 2023.

From 1 January to 30 November 2023, 113 suspected cases of Mpx, including 27 laboratory-confirmed and no deaths have been reported. In 2022, 18 confirmed cases and three deaths were reported in the country.

No cVDPV2 cases were reported this week. There were three cases reported in 2022, two others reported in 2021, and seven cases reported in 2020.

Between weeks 35 and 45 of 2023, Cameroon recorded eight PCR-positive cases of yellow fever. This is in addition to 51 cases that tested positive by plaque reduction neutralization test (PRNT) between weeks 4 and 45 of 2023. Of the 59 PCR- and PRNT-positive cases, 30 were classified as confirmed cases, including 19 reportedly unvaccinated against yellow fever. These cases were reported from 48 health districts in the Central, Littoral, South, West, East, North-West, South-West, North, Adamaua and Far-North regions. Only two cases benefited from in-depth investigation with entomological investigation.

On 6 November 2023, the Ministry of Health Surveillance Service reported two confirmed cases of Dengue through Polymerase Chain Reaction (PCR) testing and one borderline case in the city of Praia, Santiago Island, Cabo Verde. The same day three more suspected cases were reported from the Central Hospital Dr. Agostinho Neto giving a total of six cases including two confirmed with zero death. As of 19 December 2023, a total of 410 suspected cases, including 193 confirmed cases and no deaths, were reported.

The Central Republic has been facing humanitarian crisis for more than a decade following military-political conflicts. Of the country population of 6.1 million inhabitants, more than half (3.4 million), need humanitarian assistance in 2023. More than 500,000 people are currently internally displaced, 2.5 million are registered as returnees, and 0.75 million are refugees mainly from Chad and Sudan.

At the end of epi-week 47, 2023, the country recorded 3,027 suspected cases and 4 deaths. Since the start of 2023, 15 out of 35 health districts (43%) experienced measles outbreak.

From 4 March 2022 to 26 November 2023, 35 confirmed cases of Mpx and one death have been reported in the country. Since the start of 2023, the country has reported 18 laboratory-confirmed cases, including one death.

A total of 14 cases have been reported in the country in 2023. In addition, six cases were reported in 2022. Although no new cases were reported in 2021, four cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks. The number of confirmed cases reported in 2023 was revised to 14 so far.

There is an ongoing yellow fever outbreak in the Central African Republic. In 2023, from week 1 through week 47 (ending 26 November), five confirmed cases of yellow fever were recorded for the following districts: Sangha-Mbaéré (1), Berbérati (1), Bambari (2), and Bossembélé (1). The number of confirmed cases this year has been reviewed.

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With the ongoing Sudanese crisis, over 570,000 Sudanese and Chadian people fled Darfur to converge to the eastern entry points of Chad. Chad is the most affected country by the crisis in Sudan as it hosts 49.6% of Sudanese refugees, with thousands of new arrivals every week. These refugees live in numerous formal and informal camps located in 11 health districts across four provinces (Ennedi East, Ouaddai, Sila and Wadi Fira).

As of Week 49 of 2023 (ending 10 December), 10,552 suspected cases and eight measles-related deaths (CFR 0.1%) were reported in Chad. A total of 820 samples tested IgM positive for measles and 178 tested IgM+ for rubella.
As per the Global Polio Eradication Initiative (GPEI), one cVDPV2 case was reported this week in Haut Lomami. There have been 117 cases in 2023 and 372 in 2022.

An unusual disease outbreak began in the Comoros around late October 2023. 471 suspected cases hospitalized distributed between Ngazidja and Moili, in nine health districts. Symptoms included flu-like illness and gastroenteritis; 2% had meningencephalitis, epistaxis, and petechiae. 16 blood samples were taken from these cases for biological analyses and lab results ruled out dengue, Rift Valley fever, influenza, and COVID-19. Mohéli Island also reports cattle and goat deaths. As of January 5, 2024, four samples (3 cattle, 1 human) tested positive for past RVF infection but negative for IgM. Further investigation continues.

This crisis is attributed to a consistent increase in rainfall over the last two months of 2023, which caused the Congo River’s water level to rise by 30 cm. As of week 1 of 2023, an estimated 320 891 individuals were directly impacted by the floods. There have been 17 deaths reported across Likouala, Plateaux, Brazzaville, and Pointe-Noire, along with 6 people reported missing in Likouala and the Cuvelles regions. A total of 361 villages and 36 neighborhoods experienced either complete or partial flooding with 2 292 hectares of farmland inundated. Residential structures have been severely affected, leading to widespread destruction of homes and the flooding of administrative buildings. Additionally, the flooding has contaminated local drinking water sources.

From 22 August to 27 November 2023, 21 laboratory-confirmed cases of Mpox, 5 probable cases and 5 deaths were reported.

Severe floods in the Democratic Republic of Congo for many weeks have caused catastrophic impacts across multiple regions. Some of the most affected areas are Hurlu and Mongola provinces as well as the capital Kinshasa. As of 5 January 2024, the Minister of Social Affairs, Humanitarian Actions and National Solidarity announced that at least 300 people have died due to the floods and over 43 750 houses destroyed.

In the latest reporting week (week 49), the humanitarian situation in The Democratic Republic of the Congo (DRC) was marked by flooding in several localities of the Tshopo province with 97 516 people affected so far, including 71 388 internally displaced persons (IDPs). There was an arrival in week 48 of 2 135 new IDPs in the provinces of Tshopo (1 104) and South Kivu (1 031) fleeing violences in their respective localities.

A human case of anthrax was confirmed on 15 November 2023 in Lume health area, Mutwanga health district, Beni territory, North Kivu Province. At that time, 5 suspected cases including 2 deaths were reported. In December 2023, suspected anthrax cases were reported in another health district of Beni, Mangina. Investigations are ongoing.

As of 12 November 2023, the country had reported 62 803 cumulative cases, with 715 deaths (CFR 1.1%) across 12 affected provinces.

A total of 305 404 suspected measles cases and 5 688 deaths have been reported from week 1 through week 49 (ending 10 December), 2023. About 77% of these suspected cases are children under five years of age. Among the suspected cases reported, 7 214 were investigated through the case based surveillance system and 3 980 were IgM positive for measles, while 603 were IgM positive for rubella.

In The Democratic Republic of the Congo, this year, from January to 3 December 2023, a total of 714 confirmed cases are reported out of 13 357 suspected cases and 607 related deaths.

As per the Global Polio Eradication Initiative (GPEI), two cVDPV1 cases were reported this week in Tanganyika bringing the number of cases to 97 last year and 150 in 2022.

As per the Global Polio Eradication Initiative (GPEI), one cVDPV2 case was reported this week in Haut Lomami. There have been 117 cases in 2023 and 372 in 2022.

<table>
<thead>
<tr>
<th>Region</th>
<th>Disease</th>
<th>Grade</th>
<th>Date</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Congo</td>
<td>Measles</td>
<td>Ungraded</td>
<td>20-Dec-16</td>
<td>43,750</td>
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<tr>
<td>Congo</td>
<td>Measles</td>
<td>Ungraded</td>
<td>9-Jan-24</td>
<td>43,750</td>
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<tr>
<td>Democratic Republic of the Congo</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>12-Oct-21</td>
<td>620,830</td>
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<td>Democratic Republic of the Congo</td>
<td>Measles</td>
<td>Un graded</td>
<td>12-Nov-23</td>
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<td>Protracted 2</td>
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<td>Democratic Republic of the Congo</td>
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<td>Grade 2</td>
<td>27-Aug-22</td>
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<td>Democratic Republic of the Congo</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>26-Feb-21</td>
<td>489</td>
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## Health Emergency Information and Risk Assessment

### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

#### WEEK 5: 29 JANUARY - 4 FEBRUARY 2024

<table>
<thead>
<tr>
<th>Country</th>
<th>Disease</th>
<th>Grade</th>
<th>Incidence 1</th>
<th>Incidence 2</th>
<th>Incidence 3</th>
<th>Incidence 4</th>
<th>Incidence 5</th>
<th>Incidence 6</th>
<th>Incidence 7</th>
<th>Incidence 8</th>
<th>Incidence 9</th>
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<th>Incidence 11</th>
<th>Incidence 12</th>
<th>Incidence 13</th>
<th>Incidence 14</th>
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<tbody>
<tr>
<td>Eritrea</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>2-Jun-22</td>
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<td>15-Dec-23</td>
<td>2</td>
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</tr>
<tr>
<td>Ethiopia</td>
<td>Floods</td>
<td>Ungraded</td>
<td>8-Nov-23</td>
<td>2-Nov-23</td>
<td>13-Dec-23</td>
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<td>-</td>
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<tr>
<td>Ethiopia</td>
<td>Food insecurity (Horn of Africa crisis)</td>
<td>Grade 3</td>
<td>17-Feb-22</td>
<td>1-Jan-22</td>
<td>10-Jan-24</td>
<td>-</td>
<td>-</td>
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<td>Ethiopia</td>
<td>Humanitarian crisis (Northern Ethiopia)</td>
<td>Grade 3</td>
<td>4-Nov-20</td>
<td>4-Nov-20</td>
<td>25-Jan-24</td>
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<tr>
<td>Ethiopia</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>17-Sep-22</td>
<td>17-Sep-22</td>
<td>19-Jan-24</td>
<td>28,550</td>
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<tr>
<td>Ethiopia</td>
<td>Dengue</td>
<td>Grade 3</td>
<td>16-May-23</td>
<td>10-May-23</td>
<td>17-Jan-24</td>
<td>21,469</td>
<td>21,469</td>
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<td>Ethiopia</td>
<td>Malaria</td>
<td>Ungraded</td>
<td>31-Jan-23</td>
<td>1-Jan-23</td>
<td>7-Jan-24</td>
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<tr>
<td>Ethiopia</td>
<td>Measles</td>
<td>Ungraded</td>
<td>13-Apr-17</td>
<td>1-Jan-23</td>
<td>17-Jan-24</td>
<td>30,389</td>
<td>30,389</td>
<td>233</td>
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<td>Ethiopia</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>24-Jun-19</td>
<td>20-May-19</td>
<td>15-Dec-23</td>
<td>69</td>
<td>69</td>
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<tr>
<td>Gabon</td>
<td>Diphtheria</td>
<td>Grade 2</td>
<td>2-Jan-19</td>
<td>1-Dec-23</td>
<td>25-Jan-24</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100.00%</td>
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<tr>
<td>Ghana</td>
<td>Dengue fever</td>
<td>Grade 3</td>
<td>2-Nov-23</td>
<td>1-Jan-23</td>
<td>19-Dec-23</td>
<td>18</td>
<td>9</td>
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<td>Ghana</td>
<td>Mpxox</td>
<td>Protracted</td>
<td>8-Jun-22</td>
<td>24-May-22</td>
<td>19-Dec-23</td>
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<td>Ghana</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>23-Aug-19</td>
<td>23-Jul-19</td>
<td>19-Jan-24</td>
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<tr>
<td>Guinea</td>
<td>Diphtheria</td>
<td>Grade 2</td>
<td>21-Aug-23</td>
<td>4-Jul-23</td>
<td>31-Dec-23</td>
<td>2,240</td>
<td>2,081</td>
<td>85</td>
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<tr>
<td>Guinea</td>
<td>Fire in oil depot</td>
<td>Ungraded</td>
<td>17-Dec-23</td>
<td>17-Dec-23</td>
<td>27-Dec-23</td>
<td>196</td>
<td>18</td>
<td>9.20%</td>
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<tr>
<td>Kenya</td>
<td>Floods</td>
<td>Ungraded</td>
<td>9-Nov-23</td>
<td>8-Nov-23</td>
<td>28-Nov-23</td>
<td>-</td>
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</tbody>
</table>

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**Health Emergency Information and Risk Assessment**

No new case of cVDPV2 in 2023 as at week 50. One case was reported in 2022, and another one reported in 2021. The latter case was confirmed on 2 June 2022 by the Ethiopian National Polio Laboratory.

Heavy rains, flash, and river floods have caused food emergency affecting more than 56 woredas in five regions affecting over 1 431 347 people and displaced over 682 197 people and resulted in the deaths of 44 people, mostly from Somali region.

About 4 million people in drought affected Afar, Amhara, Tigray, Oromia, South Ethiopia, & Southwest need urgent food assistance, according to the Government and Food Cluster. Overlap of food insecurity, high malnutrition rates with malaria, measles, and cholera outbreaks and livestock emergencies is worsening the situation in drought-affected areas.

In northern Ethiopia, humanitarian crisis continues affecting the three regions (Tigray, Amhara and Afar). Amhara is currently with ongoing conflict. Drought conditions continue to worsen in the three regions. An integrated multi-sectoral humanitarian response is urgently needed in drought-affected regions to avert a deterioration.

Since the index case in August 2022, there have been 28550 cholera cases as at week 50 of 2023. Within this same period, there have been 428 deaths (CFR 1.46%).

Since 4 April 2023, two districts (Logia and Mille) in the Afar region of northeastern Ethiopia have been experiencing an outbreak of dengue fever. As of 24 December 2023, a total of 21 469 cases and 17 deaths associated deaths (CFR 0.08%) have been reported.

A total of 110 710 malaria cases and 23 deaths were reported in Epi-week 1, 2024, a 10% increase from previous week. Nearly 60% of the new cases reported from Oromia and Amhara regions. Disruption of malaria elimination activities mainly due to conflict, climate change contributed to massive outbreak.

Since August 12, 2023, a total of 237 Woredas across all regions in Ethiopia have been affected by measles outbreak. Currently outbreak remains active in 67 Woredas across the country: As at 24 December 2023, a total of 39 89 cases with 233 deaths have been reported, a Case Fatality Rate (CFR) of 0.8%.

As of week 50, 2023, there have been a total of 69 reported cases of circulating vaccine-derived poliovirus type 2 (cVDPV2). There was one case reported in 2022, one case in 2021, 10 cases in 2020, and 43 cases in 2019. It's important to highlight that no cases have been reported in 2023.

On 23 January 2024, Cameroon reported a confirmed case of Diphtheria. The affected individual is a 9-year-old male from Bitam Health District in Gabon. The onset of symptoms occurred on 1 December 2023, and he sought medical consultation on 3 December 2023 in the Enongal health area, Ebolowa health district in Cameroon. The person died on 7 December 2023. The sample tested positive for Diphtheria on 23 January 2024.

As of week 48, there have been 133 confirmed and 5 deaths(CFR 3.8%) reported from 261 Districts.

Ethiopia first reported a cVDPV2 outbreak in 2019. The country has a cumulative of 34 cVDPV2 AFP cases. 19 cVDPV2 cases were documented in 2019, 12 in 2020, 3 in 2022 and no cases in 2023. No new case was documented as of week 3 of 2024.

An outbreak of diphtheria has been reported in the Kankan region of Guinea since 4 July 2023. As of 31 December 2023, 2 240 suspected cases had been reported from the Kankan, Faranah, Labe, Mamou, Conakry and N’Zérékoré regions, including 2 081 confirmed cases and 85 deaths. Of the confirmed cases, 42 were laboratory-confirmed, 1 945 were clinically compatible and 94 were epidemiologically linked. The Sigui health district in the Kankan region is the epicenter of the outbreak, with 97% of suspected cases reported.

A strong explosion with a detonation followed by a fire occurred around midnight on the night of December 17 to 18, 2023, in the Kaloum area, specifically at the central fuel depot located in Coronthie. This powerful explosion is reported to have caused collapses of buildings (doors, windows, blown away), cracked structures, and torn ceilings and resulted in the death of persons living in the affected area. As of 18 December 2023, 18 deaths and 178 wounded persons were reported.

The impact of the El Niño phenomenon continues to be experienced in the Horn of Africa sub-region. In Kenya, since the beginning of November, heavy rain have resulted in flooding and overflow of rivers, displacing people, causing deaths and properties destruction including roads and households. As of 28 November, it is estimated that 33 counties have experienced above rainfall with a total of 93 645 households affected by the floods and 307 161 people displaced from 15 counties, with 120 fatalities reported.
**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES**

**WEEK 5: 29 JANUARY - 4 FEBRUARY 2024**

**Kenya**

**Anthrax**
- Grade 2
- 16-Apr-23
- 17-Jan-24
- 20
- 3
- 15.00%

As of 31 August 2023, cumulative 20 cases and 3 deaths were reported. Seventeen of these cases and three deaths were reported in April-May 2023. In August 2023, three new cases emerged in Kendara sub-county, all cases were linked to the handling of an infected animal. No new cases have been reported after August.

**Cholera**
- Grade 3
- 19-Oct-22
- 5-Oct-22
- 17-Jan-24
- 12,432
- 577
- 206
- 1.70%

A cholera outbreak has been ongoing in Kenya since 26 October 2022. As of 17 January 2023, a total of 12,432 cases, with 577 confirmed by culture, and 206 deaths (CFR 1.7%) have been reported in 27 affected Counties.

**Leishmaniasis (visceral)**
- Ungraded
- 31-Mar-19
- 3-Jan-20
- 18-Dec-23
- 2,395
- 2,205
- 10
- 0.40%

Since January 2020, a total of 2395 visceral leishmaniasis confirmed and suspected cases with 10 deaths (CFR 0.5%), have been reported in nine counties namely: Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir, Tharaka Nithi and Isiolo. The outbreak is active in West Pokot County. No new cases were reported as of 17 December 2023.

**Malnutrition (Horn of Africa crisis)**
- Grade 3
- 17-Feb-22
- 1-Jan-22
- 27-Jan-24
- -
- -
- -

The Acute Food Insecurity Situation projection period (October 2023 to January 2024) suggests that, despite some seasonal improvements, Turkana, Marsabit, and Mandera will likely remain in Crisis, IPC Phase 3, while other counties are expected to transition to Stressed, IPC Phase 2. Approximately 1.5 million people are likely to be classified in IPC Phase 3 or above, out of which 1.3 million are in IPC Phase 3, Crisis and 266,000 are in IPC Phase 4, Emergency.

**Polioymelitis (cVDPV2)**
- Grade 2
- 6-Jul-23
- 26-May-23
- 10-Jan-24
- 13
- 13
- 0.00%

According to Global Polio Eradication Initiative, no cVDPV2 cases were reported this week. There have been eight cases reported in 2023.

**Rift Valley fever (RVF)**
- Ungraded
- 24-Jan-24
- 25-Jan-24
- 25-Jan-24
- 13
- 1
- 0
- 0.00%

Between 9 and 19 January, 2024, Marsabit County Referral Hospital reported 13 suspected cases of Rift Valley Fever (RVF). CDC lab tests in Nairobi confirmed one positive case on 18 January from a 38-year-old woman in Marsabit County. This coincides with reports of animal deaths in Marsabit and Wajir Counties, suggesting a possible outbreak in these areas prior to the confirmed human case.

**Fuel Tanker Explosion**
- Ungraded
- 29-Dec-23
- 2-Jan-24
- 2-Jan-24
- 94
- 94
- 51
- 54.30%

In the late afternoon of 26 December 2023, a fuel tanker veered of the road and crashed on the Monrovia-Gbarnga highway. The accident occurred in Totota. After the accident, several persons went to the accident site and others started to scoop fuel from the capsized tanker. As of 29 December, 94 cases have been recorded with an estimated 51 deaths. Response is still ongoing according to WCO.

**Lassa Fever**
- Ungraded
- 3-Mar-22
- 6-Jan-22
- 30-Oct-23
- 353
- 96
- 27
- 7.60%

From January 6, 2022, to week 42 of 2023, a cumulative total of 353 cases have been reported with 96 confirmed and 27 deaths (CFR 7.9%).

**Measles**
- Ungraded
- 3-Feb-22
- 13-Dec-21
- 30-Oct-23
- 12,967
- 12,298
- 95
- 0.70%

Since the measles outbreak started on 13 December 2021, there have been 12,967 suspected cases, 12,298 confirmed cases, and 95 deaths with CFR 0.7% in 15 affected Counties as of 4 week of 2023. Montserrat County has recorded the highest number of deaths (69).

**Mpx**
- Protracted
- 21-Jul-22
- 23-Jul-22
- 18-Dec-23
- 119
- 7
- -
- 0.00%

Liberia confirmed its first case of Mpox on 23 July 2022, with a cumulative total of 119 suspected cases reported and 7 confirmed. The most recent case was in week 42 of 2023 in Grand Kru and Nimba counties.

**Malnutrition crisis**
- Protracted
- 1-Jul-21
- 1-Jan-21
- 17-Jan-24
- 3,900,000
- 3,900,000
- -
- -

In the Grand Sud, malnutrition has stabilized due to increased humanitarian aid and good rainfall from January to June 2023. Drought conditions improved in June 2023 compared to the previous two months owing to increased rainfall. However, the situation remains fragile: 3.9 million people are in need, with four of 11 districts in Crisis phase (IPC 3) until September, affecting 575,470 severely food-insecure individuals. A worsening of food security is anticipated from January 2024, mainly due to El Niño effect.

**Anthrax**
- Grade 2
- 27-Nov-23
- 28-Nov-23
- 28-Nov-23
- 1
- 1
- -
- 0.00%

On 27 November 2023, a case of human cutaneous anthrax was confirmed from Mzimba district, northern Malawi in a 6-year-old female, no death reported so far.

**Cholera**
- Grade 3
- 3-Mar-22
- 3-Mar-22
- 7-Jan-24
- 59,125
- 59,125
- 1,771
- 3.00%

Twenty-nine districts have reported Cholera cases since March 2022 in the Machinga district. As of 17 January 2024, a cumulative total of 59,125 cases and 1,771 deaths (CFR 3.0%) have been reported since the onset of the outbreak.

**Humanitarian crisis (Sahel region)**
- Grade 2
- 11-Sep-17
- 11-Sep-17
- 19-Dec-23
- 7,500,000
- 7,500,000
- -
- 0.00%

The Acute Food Insecurity Situation projection period (October 2023 to January 2024) suggests that, despite some seasonal improvements, Turkana, Marsabit, and Mandera will likely remain in Crisis, IPC Phase 3, while other counties are expected to transition to Stressed, IPC Phase 2. Approximately 1.5 million people are likely to be classified in IPC Phase 3 or above, out of which 1.3 million are in IPC Phase 3, Crisis and 266,000 are in IPC Phase 4, Emergency.

One positive case of wild WPV1 was detected in Lilongwe from a child with the date of onset of paralysis on 19 November 2021. As of December 18 2023, there were 12 cases within the same geographical area 36. As of 6 November, 32 suspected cases including 11 confirmed are reported. Two suspected measles related deaths were also reported.

**Liberia**

**Explosion**
- Ungraded
- 29-Dec-23
- 2-Jan-24
- 2-Jan-24
- 94
- 94
- 51
- 54.30%

In the late afternoon of 26 December 2023, a fuel tanker veered of the road and crashed on the Monrovia-Gbarnga highway. The accident occurred in Totota. After the accident, several persons went to the accident site and others started to scoop fuel from the capsized tanker. As of 29 December, 94 cases have been recorded with an estimated 51 deaths. Response is still ongoing according to WCO.

Since January 6, 2022, to week 42 of 2023, a cumulative total of 353 cases have been reported with 96 confirmed and 27 deaths (CFR 7.9%).

**Mox**
- Ungraded
- 3-Mar-22
- 6-Nov-23
- 6-Nov-23
- 32
- 11
- 2
- 6.30%

On 6 November 2023, the Ministry of Health released a press statement on confirmed measles outbreak in Lilongwe district following the notification of 11 laboratory confirmed cases within the same geographical area 36. As of 6 November, 32 suspected cases including 11 confirmed are reported. Two suspected measles related deaths were also reported.

**Mali**

**Humanitarian crisis (Sahel region)**
- Grade 2
- 11-Sep-17
- 11-Sep-17
- 19-Dec-23
- 7,500,000
- 7,500,000
- -
- 0.00%

According to Global Polio Eradication Initiative, no cVDPV2 cases were reported this week. There have been eight cases reported in 2023.
Mali is facing prolonged conflict, poverty, climate shocks, and growing insecurity. However, the current Humanitarian Response Plan for Mali is severely underfunded, with only 11% of the required funding secured. There has been a significant increase in IDPs in the regions of Kidal (32.8%) and Ménaka (20%). As of week 50, over 7.5 million people are in need of humanitarian assistance.

### Health Emergency Information and Risk Assessment

**WEEK 5: 29 JANUARY - 4 FEBRUARY 2024**

<table>
<thead>
<tr>
<th>Country</th>
<th>Disease</th>
<th>Grade</th>
<th>Onset Date</th>
<th>Report Date</th>
<th>Cases</th>
<th>Deaths</th>
<th>Case Fatality Rate</th>
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<td>Niger</td>
<td>Dengue</td>
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<td>31-Dec-23</td>
<td>780</td>
<td>354</td>
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<tr>
<td>Mozambique</td>
<td>Humanitarian crisis in Cabo Delgado</td>
<td>Protracted</td>
<td>1-Jan-20</td>
<td>20-Feb-18</td>
<td>1-Dec-23</td>
<td>8</td>
<td>0.00%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>Measles</td>
<td>Ungraded</td>
<td>7-Mar-23</td>
<td>8-Oct-23</td>
<td>31-Dec-23</td>
<td>988</td>
<td>289</td>
</tr>
<tr>
<td>Mauritania</td>
<td>Rift Valley fever (RVF)</td>
<td>Ungraded</td>
<td>27-Nov-23</td>
<td>1-Dec-23</td>
<td>1-Dec-23</td>
<td>1</td>
<td>0.00%</td>
</tr>
<tr>
<td>Mauritius</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>14-Sep-22</td>
<td>12-Oct-23</td>
<td>19-Dec-23</td>
<td>38,793</td>
<td>38,793</td>
</tr>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (cVDPV1)</td>
<td>Grade 2</td>
<td>17-Jan-24</td>
<td>4 4</td>
<td>0.00%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>7-Dec-18</td>
<td>1-Jan-21</td>
<td>18-Jan-24</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>17-May-22</td>
<td>18-May-22</td>
<td>10-Jan-24</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Niger</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>1-Feb-15</td>
<td>1-Feb-15</td>
<td>15-Nov-23</td>
<td>4,300,000</td>
<td>4,300,000</td>
</tr>
</tbody>
</table>

From week 1 to week 52 of 2023, 780 suspected measles cases were laboratory tested in Mali, of which 354 were positive and 426 were negative. A total of 32 of the 75 health districts (42.7%) recorded at least one confirmed outbreak in 2023.

On 9 December 2023, the Ministry of Health of Mali reported 12 cases and zero deaths of Zika virus disease confirmed by real time polymerase chain reaction (RT-PCR) at the Molecular and Genomic Biology Laboratory of the University Center for Clinical Research (UCRC) laboratory. Three cases were confirmed on 1 December 2023 and nine cases on 4 December 2023. As of 24 December 2023, a total of 22 confirmed cases and zero deaths were reported from 10 health districts in Koulikoro region (9), Sikasso region (1), and Bamako district (12).

On 26 October 2023, the Malaysian Ministry of Health reported 12 cases and zero deaths of dengue virus disease confirmed by real time polymerase chain reaction (RT-PCR) at the University Clinical Research Center (UCRC) laboratory. As of 7 January 2024, 5,532 suspected cases, including 846 confirmed cases and 34 deaths, have been reported.

From week 5, 2023 (ending 9 January 2024) to week 2, 2024 (ending 14 January 2024), the country has recorded an upsurge in dengue cases (40 confirmed cases reported). In week 2, 2024 (ending 14 January 2024), 16 laboratory confirmed cases were reported. With the recent rains that have fallen on Mauritius, this situation is expected to worsen.

A case of Rift Valley fever confirmed on 23 November 2023 from the locality of Ejare in Radhi municipality was reported in a a 32-year-old male shepherd in Ejare, Radhi. He developed symptoms including fever and epistaxis, consulted at Tintan Health Center where RVF was suspected.

Mauritania has been experiencing a measles outbreak since early 2023. As of 31 December 2023, the country has reported 988 suspected cases of measles, including 161 laboratory-confirmed cases and six deaths.

A total of 148 cases of dengue fever, including zero deaths, have been reported in Niger in 2023.

### Other Emergencies

- **Cholera**
  - Mauritius: 100,000 to 2,000,000 cases, 22 confirmed cases, 22 deaths
  - Mozambique: 7,300,000 to 4,300,000 cases, 7 deaths

- **Cyclone**
  - Mauritius: 100,000 people affected, 144,000 vehicles lost, 20 deaths

- **Dengue**
  - Mozambique: 148 cases, 0 deaths
  - Nepal: 148 cases, 0 deaths

- **Diphtheria**
  - Mauritania: 4 cases, 0 deaths

- **Humanitarian crisis in Cabo Delgado**
  - Mozambique: 2,000,000 to 4,300,000 cases, 32 confirmed cases, 7 deaths

- **Measles**
  - Mauritania: 161 cases, 153 deaths
  - Mozambique: 354 cases, 426 deaths

- **Rift Valley fever (RVF)**
  - Mauritania: 1 case, 1 death

- **Zika**
  - Mozambique: 0 cases, 0 deaths

### Additional Information

- **Mali**: Humanitarian crisis, 7.5 million people in need of assistance
- **Mozambique**: Polio eradication initiative, 846 confirmed cases, 34 deaths
- **Niger**: Humanitarian crisis, 7.5 million people in need of assistance

### Key Quotes

- "Mauritania has been experiencing a measles outbreak since early 2023." (Mauritania)
- "Mali is facing prolonged conflict, poverty, climate shocks, and growing insecurity." (Mali)
- "The current cholera outbreak in the country started in Niassa province on 14 September 2022." (Mozambique)

### Data Summary

- **Mali**: 1,146 cases, 0 deaths
- **Mozambique**: 780 cases, 354 deaths
- **Niger**: 148 cases, 0 deaths

The weekly bulletin on outbreaks and other emergencies highlights the ongoing health emergencies and other crises affecting the region.
An outbreak of diphtheria has been confirmed in Matameye health district, Zinder region. The first case was reported on 17 July 2023. As of 24 December 2023, 2721 suspected cases, including 141 deaths (CFR 5.5%) were reported. Public health response activities are ongoing in affected districts.

As of epidemiological week 41, 2023 (ending 16 October), 1,802 suspected measles cases were reported, of which 995 were investigated across 66 districts in the eight regions. Of these cases, 57% (n=578) were laboratory-confirmed. Additionally, 91% (n=66) of the districts reported at least one suspected case, and 36 (49%) health districts have reached the epidemic threshold since the beginning of the year.

A meningitis outbreak was declared in the Dungass health district in Zinder region. The first case was reported on 31 October 2022 and confirmed on 23 November 2022, with Neisseria meningitidis identified as the causative agent. As of 16 October 2023, 2,261 suspected cases of meningitis, including 736 laboratory-confirmed cases and 129 deaths (CFR 5.7%) were reported.

No new case of cVDPV2 was reported during this week. The total number of cases reported in 2022 is 16. There were 18 cases reported in 2021.

Currently, there is an ongoing outbreak of Dengue fever in Sokoto state, Nigeria, with 72 cases, including 14 laboratory-confirmed cases and zero deaths. Males represent 53% of all cases and the age group between 31 to 40 years old is more affected (45%).

Between week 19, 2022 and week 51, 2023, 22,923 suspected cases of diphtheria were reported from 36 states in Nigeria. Kano (14,126), Yobe (2,238), Katsina (1,734), Bauchi (1,376), Borno (1,148), Kaduna (573) and Jigawa (256) accounted for 96.2% of reported suspected cases. Of the 22,923 suspected cases reported, 13,387 (60.1%) were confirmed, including 3,464 laboratory-confirmed, 510 epidemiologically linked, and 12,331 clinically compatible cases. The majority (9,048; 67.6%) of the confirmed cases were in children aged 1-14 years. Only 3,376 (25.2%) of the 13,387 confirmed cases were fully vaccinated with a diphtheria toxoid-containing vaccine. A total of 598 deaths (CFR: 4.5%) were recorded among the confirmed cases.

As of week 5 of 2024, 892 suspected cases, including 211 laboratory-confirmed cases, were reported, with 43 reported deaths among confirmed cases, resulting in a CFR of 20.4%. Confirmed cases, including four HCWs, were reported from 17 states and 54 LGAs, with the highest number of cases (91.5%) reported from Ondo (53 cases, five deaths), Edo (52 cases, 8 deaths), Bauchi (48 cases, 15 deaths), and Benue (17 cases, three deaths) states.

Overall, since the re-emergence of Mpx in September 2017, 3771 suspected cases have been reported from 36 States and FCTs in the country. Of these 3771 suspected cases, 1086 (28.7%) were confirmed (with males predominantly affected) from 34 States and FCT. Seventeen (17) deaths have been recorded since the re-emergence in 2017.

No cVDPV2 case was reported this week. There have been 26 cVDPV2 cases reported this year and 48 cases in 2022.

The first case of Chikungunya in Senegal in 2022 was reported on 20 January 2023 from the district of Kebemer. As of 31 December 2023, the cumulative number of confirmed cases is 344.

In 2023, the first confirmed case of dengue was recorded in week 1. As of week 52 (ending 31 December), 310 confirmed cases of dengue were reported, of which 55% were male. Of the reported cases, 270 (87%) were confirmed by PCR and 28 cases (9%) were only IgM positive for dengue. Of the PCR-confirmed cases, 12 cases were also IgM positive. There were six cases of severe dengue and one associated death. Pikine district (135 cases, 43.5%) has the highest number of dengue cases, followed by Thilogne (38 cases, 12.3%), and Yeumbeul (31 cases, 10%).

From epidemiological week 1 to 52 of 2023, 1,699 suspected cases of measles were reported in Senegal, including 539 confirmed cases and no deaths. In week 52, 2023, five districts crossed the epidemic threshold, including three for the first time (Malem Hoddar, Podor, Kaffrine) and two for the second time in 2023 (Velingara, Kaolack).

On 27 December 2023, the Institut Pasteur de Dakar (IPD) reported two cases of yellow fever positive by PCR from a research project. Both cases are male, one from Saraya district and the other from the Kédougou district in Kédougou region. The Saraya case is 9 years old, unvaccinated against yellow fever, with onset of symptoms on 30 November 2023 with fever and headache. The Kédougou case is 25 years old with unknown vaccination status. His symptoms included fever, headache, and chills. The sample was collected on 7 December 2023, one day after the onset of symptoms. He also tested IgM positive for Chikungunya. Neither case had jaundice. Investigations are ongoing.

In week 49, Senegal health authorities have reported the confirmation of two cases of Zika virus disease in the districts of Sédhiou and Sokone through Polymerase Chain Reaction (PCR) testing. Details regarding the age of the women in Sokone remain unspecified, and their pregnancy status has not been disclosed. There is a potential risk for adverse outcomes including microcephaly, other congenital malformations in infants, and possibilities of premature birth or miscarriage. Investigation reports are forthcoming.
A cholera outbreak was reported in South Africa on 15 January 2024, with two imported cases of toxigenic Vibrio cholerae O1 Ogawa confirmed by PCR. The first case involved a 43-year-old Zimbabwean male who recovered after hospital treatment. The second case was a 27-year-old Zimbabwean male who had traveled to Zimbabwe in December 2023 and returned to South Africa in January 2024, testing positive for cholera with symptoms of diarrhea, cramps, and vomiting starting from 11 January 2024.

From 8 October 2022 to 21 December 2023, a total of 1,338 laboratory-confirmed cases were reported from eight provinces. Limpopo had reported the most number of cases (533), followed by Gauteng (265), North West (226) and Western Cape (56).

<table>
<thead>
<tr>
<th>South Africa</th>
<th>Measles</th>
<th>Ungraded</th>
<th>17-Oct-22</th>
<th>13-Oct-22</th>
<th>26-Dec-23</th>
<th>7,054</th>
<th>1,338</th>
<th>0.00%</th>
</tr>
</thead>
</table>

In the projection period of December 2023 to March 2024 (harvest/post-harvest season), the situation is projected to improve marginally as a result of seasonal availability of harvests. An estimated 5.79 million people (45.8% of the country population) are projected to face IPC Phase 3 or above (Crisis or worse), including 25,000 people likely to be in IPC Phase 5 ( Catastrophe) and 1.71 million people likely to be in Phase 4

<table>
<thead>
<tr>
<th>South Sudan</th>
<th>Food insecurity (Horn of Africa crisis)</th>
<th>Grade 3</th>
<th>18-Dec-20</th>
<th>5-Apr-21</th>
<th>27-Jan-24</th>
<th>-</th>
<th>-</th>
<th>-</th>
</tr>
</thead>
</table>

The humanitarian situation in South Sudan remains grim, with insecurity, sub-national violence and climatic shocks adversely affecting the food and nutrition security situation of many families, compounded by the Sudan crisis influx. The most recent Integrated Food Security Phase Classification results show that South Sudan remains one of the countries with the highest proportion of food-insecure people globally. Regarding the impact of the ongoing Sudan conflict crisis, as of 21 January 2024, 516,658 people were living in flood-prone areas and other at-risk locations to relocate to safer areas to mitigate or reduce the impact of disasters.

The official yellow fever outbreak was declared on 6 January 2024 by the health authorities. Cumulatively, as of 10 January 2024, a total of 20 yellow fever related cases are reported including 19 suspected cases and one confirmed case. Among the suspected cases, five deaths have been reported. All cases were reported from Western Equatorial State with Yambio county (n=10), reporting the majority, Nzara County (n=5) and Tambura County (n=5).

The death toll due to flooding and mudslides has risen to at least 88 people, with at least 80,133 injured and 5,600 people affected, according to the Tanzania government officials on 11 December. Rains and mudslides have contaminated most of the water sources in the affected areas, risking an outbreak of communicable diseases like Cholera and others. The Government and its partners continue to provide and mobilise food and non-food items for the response. The President of Tanzania has urged communities living in flood-prone areas and other at-risk locations to relocate to safer areas to mitigate or reduce the impact of disasters.

For the ongoing cholera outbreak, as of 12 December 2023, a total of 660 cholera cases and 19 deaths (CFR: 2.9%) are reported. Of the reported cases, female (54.1%, 358) accounted for the majority of cases. The index case was reported in Mara region on 6 September 2023.

No cVDPV2 cases were reported this week. There have been two cases reported in the country this year.

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### Uganda

<table>
<thead>
<tr>
<th>Disease</th>
<th>Grade</th>
<th>Onset</th>
<th>Peak</th>
<th>Last Update</th>
<th>Cases</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholera</td>
<td>Grade 3</td>
<td>22-Jan-24</td>
<td>21-Jan-24</td>
<td>31-Jan-24</td>
<td>14</td>
<td>4</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

On January 21, 2024, 14 suspected cholera cases from Madani, Sudan, were reported by Elegu PoE to Adjumani DHT, Uganda. Suspected to have consumed contaminated fruits, 13 showed symptoms and were admitted to Nyumanzi HC III. As of January 31, 2024, there were 4 confirmed and 10 suspected cases in the isolation unit.

The Uganda Public Health Operation Centre (PHOC) is currently activated for malaria outbreak in three districts: Serere, Amolatar and Kibuku. During the last reporting period (week 52,2023), a total of 127 districts are in watch mode and 17 in alert mode.

On 1 December, WHO received a report from the MoH reporting a measles outbreak in another district (Kyegegwa) with 68 cases including 64 probable, four confirmed cases and zero death. Cumulatively, a total of 147 measles cases including 18 confirmed and zero death are reported so far from two districts of Kyrandongo and Kyegegwa. As of 7 December, only Kyrandongo has an active outbreak.

### Zambia

<table>
<thead>
<tr>
<th>Disease</th>
<th>Grade</th>
<th>Onset</th>
<th>Peak</th>
<th>Last Update</th>
<th>Cases</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthrax</td>
<td>Grade 2</td>
<td>1-Nov-23</td>
<td>12-Oct-22</td>
<td>1-Jan-23</td>
<td>895</td>
<td>40</td>
<td>0.40%</td>
</tr>
</tbody>
</table>

On 1 December 2023, WHO was notified of a human anthrax outbreak in Zambia. The first cases were recorded in the Sinazongwe district of Southern province in October 2022. Between 12 October 2022 and 1 December 2023, a total of 895 cases and 4 deaths (CFR 0.45%) were reported from nine provinces.

### Zimbabwe

<table>
<thead>
<tr>
<th>Disease</th>
<th>Grade</th>
<th>Onset</th>
<th>Peak</th>
<th>Last Update</th>
<th>Cases</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholera</td>
<td>Grade 3</td>
<td>12-Feb-23</td>
<td>12-Feb-23</td>
<td>1-Oct-23</td>
<td>4,472</td>
<td>930</td>
<td>2.10%</td>
</tr>
</tbody>
</table>

The first cholera outbreak in the country in 2023 started on the 12 February 2023. Cumulatively there were 4 472 cholera cases with 125 deaths (CFR 2.8%) as of 2 October 2023. All of the ten provinces are affected with majority of the cases reported from Manicaland, Harare, Mash West and Mash Cent provinces.

### Notes

†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.
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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.