Overview

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

- Malaria in Ethiopia
- Measles in Uganda
- Floods in the Democratic Republic of the Congo

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:**

- Ethiopia has been grappling with malaria outbreak since 2022. Despite collaborative efforts from the Government and its partners to control it. Malaria prevention and control efforts are facing significant challenges stemming from various factors within the political, social, economic, and natural factors. For instance, the ongoing internal conflict in certain regions of the country has impacted the healthcare system, displacement of healthcare workers, damage to and non-functionality of health facilities. Additionally, road blockades have impeded the last-mile delivery of anti-malarial medications and other essential supplies. Natural hazards like droughts and floods exacerbate the situation, alongside other disease outbreaks including cholera, measles, dengue fever, and COVID-19.

- The humanitarian situation in the Eastern Democratic Republic of Congo has reached critical levels as the situation worsens due to intensified clashes and recent flooding that have resulted in widespread displacement and escalating risks the already vulnerable population. The response efforts underscore the importance of rapid, coordinated actions across various sectors to address the immediate needs of the population and to mitigate further health risks. Henceforth, it is crucial to enhance disaster preparedness and resilience among vulnerable communities, focusing on sustainable solutions to mitigate the impact of future natural disasters.
Ethiopia

**EVENT DESCRIPTION**

Ethiopia has been experiencing a malaria outbreak for several years, which is putting more tension on the already fragile health system.

In 2022, malaria outbreaks were reported across most regions, accompanied by a notable upward trend in cases, approximately 3.3 million malaria cases were confirmed. In 2023, over 4.1 million malaria cases including 527 deaths were reported.

In 2024, the trend for the reported cases is higher compared to previous years for the same period as shown in the figure below and during the latest epidemiological reporting period (week 6, ending 11 February 2024), where 94,576 malaria cases and 14 deaths were recorded. This marks a 7.6% decrease in malaria cases compared to the previous week 5. Approximately 1,393 woredas (districts) reported at least one case of malaria across the country during that epidemiological period.

Of the total cases reported during this week, 95.6% were confirmed through laboratory testing, with Plasmodium falciparum accounting for 63.4% of the cases.

Cumulatively in 2024, from 1 January to 11 February, a total of 525,790 malaria cases and 120 deaths were reported nationwide (CFR 0.02%). Most malaria cases, over 70.0%, were reported from four regions: Oromia (35.5%), Amhara (19.5%), Southwest Ethiopia (SWEPRS) (11.8%), and South Ethiopia (10.3%). However, regarding cases distribution per 100,000 population, the Gambella (4,324 cases/100,000 pop) region is leading, followed by SWEPRS (1,846 cases/100,000 pop), Afar (574 cases/100,000 pop) and Tigray (488 cases/100,000 pop).

Despite the support provided, the fatality remains high in the affected areas. The health system is facing challenges due to competing emergencies and events, leading to overburdening of resources.

The absence of timely treatment and disruption of fundamental vector control efforts in the conflict-affected regions, combined with population movements and the spread of the disease to susceptible areas and populations, are likely heightening the transmission dynamics and facilitating the spread of the disease to susceptible areas and populations.

In addition, climate anomalies induced by the El Nino effect are creating conducive conditions for mosquito breeding and parasite survival, thereby increasing the likelihood of disease spread to areas less prone to outbreaks.

**PUBLIC HEALTH ACTIONS**

- National malaria coordination forums are in place, facilitating collaboration and coordination among key stakeholders involved in malaria control activities.
- Response efforts are currently underway to address ongoing outbreaks and abnormal surges of malaria in various woredas, yet their impact remains inadequate in reducing morbidity and mortality.
- WHO has been providing significant support, both in terms of supplies and technical assistance, to the health authorities and partners.
- Active surveillance efforts are ongoing in areas where the health system is functioning effectively.
- The National Malaria Case Management protocol for the diagnosis and treatment of malaria cases is available. Healthcare workers are deployed at both community and facility levels, ensuring accessibility to healthcare services for individuals seeking malaria diagnosis and treatment.
- Sentinel sites were established for monitoring malaria vectors and assessing their susceptibilities to insecticides, providing valuable data for guiding vector control strategies, and mitigating the development of insecticide resistance.

**SITUATION INTERPRETATION**

Malaria is endemic in Ethiopia, and remains one of the major public health threats despite its reduction in the last two decades. The disease is highly seasonal and unstable with epidemic-prone transmission patterns in many parts of the country. Despite efforts deployed, the incidence remains high over the past few years. This is mostly attributed to insufficient preparedness and response actions, exacerbated by poor access in conflict-affected regions, logistical and financial constraints, and inadequate human resources. The presence of refugees, particularly in bordering regions with high malaria endemicity, further exacerbates the surge in malaria cases and raises concerns about the possibility of importation of parasite strains resistant to anti-malarial drugs.
Regions affected by the Malaria outbreak in Ethiopia, as of 4 February 2024

Legend
- Malaria cases
  - 34 - 536
  - 537 - 11,676
  - 11,677 - 28,030
  - 28,031 - 186,396

Proportion of the total
- 0.01% - 0.1%
- 0.11% - 2.23%
- 2.24% - 5.34%
- 5.35% - 35.53%

Boundaries
- Non-affected Regions
- Other countries
- Area outside WHO AFRO

Source: WHO
Measles

EVENT DESCRIPTION

Kyenjojo District in Kitega sub county in the Western region of Uganda reported a measles outbreak at the beginning of 2024, adding to the ongoing measles outbreak in Uganda which has affected two regions as of Epidemiological week 5 (week ending 4 February 2024), namely Kyenjojo and Kasese in the Western region and Arua and Obongi in the Northern regions.

The outbreak in Kyenjojo, confirmed on 19 January 2024, has so far recorded the highest number of cases and deaths, including the index case, five more suspected cases tested positive with a positivity rate of 100% within seven days of detection.

As of 4 February 2024, a cumulative 139 (47.9%) suspected cases had been reported with two suspected deaths (CFR 2.5%), which was linked to the ongoing outbreak. Arua city follows closely with almost the same number of cases as Kyenjojo, 138 (47.6%) and one death since its detection on the 23 December 2023.

Outbreaks in Kasese and Obongi, recently confirmed on 19 January and 31 January 2024 respectively, have recorded less than 10 cases each with no deaths.

The epidemiological summary reveals a concerning situation in Kyenjojo district, emphasizing the urgent need for effective public health interventions and community engagement to control the spread of measles.

A very Low vaccination coverage, for the second dose of measles vaccines throughout the district, with most catchment areas recording zero coverages, could also be a risk for outbreak spread. Insufficient funds for community-based active case search and training gap of health workers have also been a concern.

PUBLIC HEALTH ACTIONS

- The Uganda Public Health Emergency Operations Center has been activated to coordinate the response activities towards the measles outbreak with National Task force meetings convened routinely. Collaboration with partners like Baylor-Uganda, AFENET, WHO, and MOH for technical and logistical support.

- Multi-disciplinary rapid response teams have been deployed to the affected areas to support the response activities.

- Six samples were collected on 18 January for testing at the Uganda Virus Research Institute, with results indicating all samples positive for measles.

- Epidemiological investigation and active case finding is ongoing, with 67 cases line-listed through active search.

- Risk Communication activities are ongoing with intensification of health education talks and community sensitization regarding measles.

- Distribution of vaccines and initiation of targeted measles-rubella vaccination in Kitega Subcounty is underway.

SITUATION INTERPRETATION

The measles outbreak in Kyenjojo District emphasizes the critical importance of sustained public health efforts, particularly in the areas of vaccination and surveillance. Even though the epidemic curve shows decrease of cases from the peak period, there has been a recent increase in cases from the 24 January 2024. The timely identification of cases after the initial late detection of earlier cases and the subsequent initiation of response measures demonstrate progress in managing the outbreak. Strengthening immunization services and enhancing surveillance capabilities remain crucial for effective outbreak control.
Epi-curve for suspected and confirmed Measles outbreak in Kyenjojo District, as of 26 January 2024

WEEKLY BULLETIN ON OUTBREAKS AND OTHER
WEEK 7: 12 - 18 FEBRUARY 2024

Distribution of cases and deaths of measles in Uganda by District, as of 4 February, 2024
Floods

**EVENT DESCRIPTION**

The Democratic Republic of Congo (DRC) has been experiencing its worst floods in over 60 years since the end of the last quarter of 2023, significantly impacting 18 out of 26 provinces across the country. This natural disaster has been devastating due to heavy rainfall in the interior regions, leading to an exceptional rise in the Congo River’s water levels.

The severity of these floods surpasses previous incidents, with a notable impact on both the Republic of Congo and the DRC, threatening to worsen conditions in coastal areas along the river and the plains surrounding Kinshasa.

Authorities and international organisations like UNOCHA have reported that more than 2 million individuals have been affected by the disaster, resulting in over 300 fatalities. The infrastructural damage is extensive, with nearly 100,000 homes destroyed, alongside 267 health facilities and 1,325 schools, highlighting the magnitude of the crisis and its broad implications for the affected populations.

**PUBLIC HEALTH ACTIONS**

- Multisectoral evaluations have been conducted in severely affected areas like South Kivu’s Ruzizi health zone and Tanganyika’s Kabalo health zone to assess needs and prepare for interventions. These assessments highlighted the significant impact of flooding on communities, the risk of cholera outbreaks, and the immediate need for food, shelter, and medical assistance.

- Efforts have been enhanced to strengthen existing child protection services, including case management, family tracing, reunification, psychosocial support, and referrals to multisectoral services.

- UNICEF is working with the Ministry of Health and Provincial Health Divisions to identify and support heavily impacted health facilities. This includes providing emergency medical supplies and equipment to assist affected individuals and strengthen cholera prevention efforts through the distribution of cholera medical kits.

- Over 717,000 individuals in seven affected provinces received SMS alerts with critical information on best practices before, during, and after flooding. This initiative aims to promote awareness and preparedness among the affected communities.

**SITUATION INTERPRETATION**

The catastrophic flooding in the DRC poses a complex humanitarian challenge, exacerbated by the existing vulnerabilities of the affected communities and the potential for disease outbreaks such as cholera. Strengthening infrastructure, improving early warning systems, and fostering community-based disaster risk reduction strategies will be key to preventing such widespread devastation in the future.
Snapshot of Floods Situation in DRC, as at 19 January 2024

Source: The Guardian
### 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>
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</thead>
<tbody>
<tr>
<td><strong>New Events</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Burundi</td>
<td>Measles</td>
<td>Ungraded</td>
<td>15-Feb-24</td>
<td>01-Jan-23</td>
<td>12-Feb-24</td>
<td>1670</td>
<td>1 670</td>
<td>22</td>
<td>1.30%</td>
</tr>
</tbody>
</table>

On 14 February 2024, Burundi’s Ministry of Health reported a measles outbreak, with 20 of the country’s 49 health districts experiencing active outbreaks. These districts were identified as having unvaccinated children in the 2022 National Vaccination Coverage Survey. The epidemic curve indicates a steady increase in cases since May 2023. In 2023, there were 1670 confirmed cases resulting in 22 deaths, representing a case fatality rate of 1.3%. Among the confirmed cases, 55% were aged 6-59 months, and 82% were under 15 years old. From 1 January to 12 February 2024, 34 deaths were reported in five health districts.

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</thead>
<tbody>
<tr>
<td><strong>Uganda</strong></td>
<td>Crimean-Congo hemorrhagic fever</td>
<td>Ungraded</td>
<td>12-Feb-24</td>
<td>28-Jan-24</td>
<td>04-Feb-24</td>
<td>13</td>
<td>5</td>
<td>4</td>
<td>30.80%</td>
</tr>
</tbody>
</table>

According to the Week 4 epidemiological bulletin from Uganda, there is an ongoing outbreak of Crimean-Congo hemorrhagic fever in Kampala and Lyantonde. The outbreak was identified through routine surveillance of viral hemorrhagic fever. As of 5 February 2024, a total of 13 cases have been reported, including five confirmed cases and four deaths, resulting in a case fatality rate of 30.8%.

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>14-Jul-22</td>
<td>11-Apr-22</td>
<td>10-Jan-24</td>
<td>3</td>
<td>3</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>Dengue fever</td>
<td>Grade 3</td>
<td>01-Jan-23</td>
<td>20-Dec-23</td>
<td>6</td>
<td>3</td>
<td>1</td>
<td>16.70%</td>
<td></td>
</tr>
</tbody>
</table>

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 Couffo (n=1).

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<tbody>
<tr>
<td>Burkina Faso</td>
<td>Humanitarian crisis (Sahel Region)</td>
<td>Grade 2</td>
<td>01-Jan-19</td>
<td>01-Jan-19</td>
<td>13-Feb-24</td>
<td>5,500,000</td>
<td>5,500,000</td>
<td>-</td>
<td>-</td>
</tr>
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</table>

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 February 2024, 5.5 million People needed humanitarian assistance, 3.2 million of which are children and over 2.06 million IDPs registered and 5478 schools closed. The situation remains fluid.

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<tbody>
<tr>
<td>Burkina Faso</td>
<td>Chikungunya</td>
<td>Ungraded</td>
<td>06-Sep-23</td>
<td>19-Sep-23</td>
<td>07-Jan-24</td>
<td>311</td>
<td>311</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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.

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<tbody>
<tr>
<td>Burkina Faso</td>
<td>Dengue</td>
<td>Grade 3</td>
<td>11-Sep-23</td>
<td>01-Jan-23</td>
<td>07-Jan-24</td>
<td>156,870</td>
<td>70,964</td>
<td>714</td>
<td>0.50%</td>
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</tbody>
</table>

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.

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<tbody>
<tr>
<td>Burkina Faso</td>
<td>Measles</td>
<td>Ungraded</td>
<td>06-Feb-24</td>
<td>14-Jan-24</td>
<td>02-Feb-24</td>
<td>642</td>
<td>148</td>
<td>3</td>
<td>0.50%</td>
</tr>
</tbody>
</table>

Burkina Faso is experiencing an increase in measles cases. Between week 1 and week 04 of 2024, a total of 642 suspected measles cases, resulting in 2 deaths, have been recorded. This rise indicates a growing trend in 2024 compared to previous years during the same period.

<table>
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<tbody>
<tr>
<td>Burundi</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>01-Jan-23</td>
<td>14-Dec-22</td>
<td>07-Jan-24</td>
<td>1,382</td>
<td>175</td>
<td>9</td>
<td>0.70%</td>
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</table>

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.

<table>
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</thead>
<tbody>
<tr>
<td>Burundi</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>17-Mar-23</td>
<td>01-Jan-22</td>
<td>10-Jan-24</td>
<td>2</td>
<td>2</td>
<td>-</td>
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</table>

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

<table>
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<tbody>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (North-West &amp; South-West)</td>
<td>Protracted</td>
<td>01-Oct-16</td>
<td>27-Jun-18</td>
<td>13-Feb-24</td>
<td>4,700,000</td>
<td>4,700,000</td>
<td>-</td>
<td>-</td>
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</table>

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 neighbouring villages and communities. By February 2024, the following observations were made: 4.7M people in need, 2.7M people targetted, 1M IDPs, 658k Returnees and 485K Refugees and Asylum Seekers.

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<tbody>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (Sahel Region)</td>
<td>Grade 2</td>
<td>31-Dec-13</td>
<td>27-Jun-17</td>
<td>13-Feb-24</td>
<td>-</td>
<td>-</td>
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</table>
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 Gourengeul 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 measles cases have been reported in Cameroon, including 476 IgM+ and 6 059 epidemiologically linked. At least 51 related deaths (CFR 0.5%) have been reported in 2023.

No cVDPV2 cases were reported this week. There were three cases reported in 2022, three 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, Adamawa 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 African Republic has been facing a humanitarian crisis for more than a decade following military-political conflicts. In 2023, an estimated 2 million people were assisted and in 2024, 1.9 million people have been targeted. Of the country’s population of 6.1 million inhabitants, more than half (3.4 million), need humanitarian assistance in 2024. More than 512 000 people are currently internally displaced, 2.5 million suffer from food insecurity, and 751 000 are CAR refugees.

From 4 March 2022 to 26 November 2023, 35 confirmed cases of Mpox 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 the confirmed cases this year has been reviewed.
Health Emergency Information and Risk Assessment

**WEEKLY BULLETIN ON OUTBREAKS AND OTHER EVENTS**

**WEEK 7: 12 - 18 FEBRUARY 2024**

**Comoros**

- ** Mpox**: Unknown disease/Rift Valley Fever suspected
  - Ungraded
  - 12-Jan-24
  - 12-Jan-24
  - 12-Jan-24
  - 471
  - 9
  - 1.90%

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 meningoencephalitis, 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.

**Congo**

- ** FLOODS**: Ungraded
  - Ungraded
  - 1-Jan-24
  - 4-Jan-24
  - 7-Jan-24
  - 320,891
  - 320,891
  - 17
  - 0.00%

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 20 cm. As of week 1 of 2023, an estimated 320,000 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 Covette regions. A total of 361 villages and 36 neighborhoods experienced either complete or partial flooding with 2,926 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.

- **MPOX**: Protracted 2
  - 23-May-22
  - 22-Aug-23
  - 27-Nov-23
  - 26
  - 21
  - 5
  - 19.20%

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

**Democratic Republic of the Congo**

- **FLOODS**: Ungraded
  - Ungraded
  - 9-Jan-24
  - 9-Jan-24
  - 9-Jan-24
  - 43,750
  - 43,750
  - 300

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 Ituri and Mongala provinces as well as the capital Kinshasa. As of 5 January 2024, the Ministry of Social Affairs, Humanitarian Actions and National Solidarity announced that at least 300 people have died due to the floods and over 235,000 homes destroyed.

- **POLIOMYELITIS (cVDPV1)**: Grade 2
  - 21-Mar-23
  - 1-Mar-23
  - 13-Dec-23
  - 1
  - 1
  - -
  - -

No Circulating vaccine-derived poliovirus type 1 (cVDPV1) cases were reported this week. As of 6 December 2023, only one case reported this year.

**Côte d'Ivoire**

- **DENGUE**: Grade 3
  - 10-Jul-23
  - 19-Jun-23
  - 31-Dec-23
  - 3,912
  - 323
  - 3
  - 0.10%

An outbreak of Dengue fever is ongoing in Ivory Coast. A total of 3,912 cases have been reported from 1 January 2023 to 31 December 2024, with 323 confirmed cases and 3 deaths (CFR: 0.4%).

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 meningoencephalitis, 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.

**Democratic Republic of the Congo**

- **FLOODS**: Ungraded
  - Ungraded
  - 9-Jan-24
  - 9-Jan-24
  - 9-Jan-24
  - 43,750
  - 43,750
  - 300

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 Ituri and Mongala provinces as well as the capital Kinshasa. As of 5 January 2024, the Ministry of Social Affairs, Humanitarian Actions and National Solidarity announced that at least 300 people have died due to the floods and over 235,000 homes destroyed.

- **HUMANITARIAN CRISIS**: Grade 3
  - 20-Dec-16
  - 17-Apr-17
  - 9-Dec-23
  - -
  - -
  - -
  - -

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 71,386 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.

**Democratic Republic of the Congo**

- **ANTHRAX**: Grade 2
  - 17-Jan-24
  - 15-Nov-23
  - 15-Nov-23
  - 5
  - 1
  - 2
  - 40.00%

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.

**Democratic Republic of the Congo**

- **CHOLERA**: Grade 3
  - 16-Jan-15
  - 1-Jan-23
  - 12-Nov-23
  - 62,803
  - 1,866
  - 715
  - 1.10%

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

- **MEASLES**: Ungraded
  - Ungraded
  - 12-Oct-21
  - 1-Jan-23
  - 10-Dec-23
  - 305,404
  - 7,214
  - 5,684
  - 1.90%

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.

**Democratic Republic of the Congo**

- **MPX**: Protracted 2
  - 30-Mar-19
  - 1-Jan-23
  - 3-Dec-23
  - 13,357
  - 714
  - 607
  - -

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.

**Democratic Republic of the Congo**

- **POLIOMYELITIS (cVDPV1)**: Grade 2
  - 27-Aug-22
  - 27-Aug-22
  - 3-Jan-24
  - 247
  - 247
  - -
  - -

0.00%
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.

<table>
<thead>
<tr>
<th>Democratic Republic of the Congo</th>
<th>Poliomyelitis (cVDPV2)</th>
<th>Grade 2</th>
<th>26-Feb-21</th>
<th>1-Jan-22</th>
<th>3-Jan-24</th>
<th>489</th>
<th>489</th>
<th>0.00%</th>
</tr>
</thead>
</table>

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>Eritrea</th>
<th>Poliomyelitis (cVDPV2)</th>
<th>Grade 2</th>
<th>2-Jun-22</th>
<th>7-Jun-22</th>
<th>15-Dec-23</th>
<th>2</th>
<th>2</th>
<th>0.00%</th>
</tr>
</thead>
</table>

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.

| Ethiopia | Food insecurity (Horn of Africa crisis) | Grade 3 | 17-Feb-22 | 1-Jan-22 | 31-Jan-24 | - | - | - |

According to the January 2024 Famine Early Warning Systems Network (FEWS NET) food security outcomes projection. Households in northern Ethiopia increasingly face extreme hardships accessing food and income which are driving ongoing Emergency (IPC Phase 4) and Crisis (IPC Phase 3) outcomes. Households have limited food stocks resulting from the failure of the 2023 meher harvest, and income-earning activities have yet to recover from recent conflict.

| Ethiopia | Humanitarian crisis (Northern Ethiopia) | Grade 3 | 4-Nov-20 | 4-Nov-20 | 25-Jan-24 | - | - | - |

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.

| Ethiopia | Cholera | Grade 3 | 17-Sep-22 | 1-Aug-22 | 13-Feb-24 | 32,548 | 32,548 | 488 | 1.50% |

Since the index case in August 2022, there have been 32 548 cholera cases as at week 5 of 2024. Within this same period, there have been 488 deaths (CFR 1.46%).

| Ethiopia | Dengue | Grade 3 | 16-May-23 | 10-May-23 | 17-Jan-24 | 21,469 | 21,469 | 17 | 0.00% |

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.

| Ethiopia | Malaria | Ungraded | 31-Jan-23 | 1-Jan-23 | 7-Jan-24 | - | - | - |

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. Disrupture of malaria elimination activities mainly due to conflict, climate change contributed to massive outbreak.

| Ethiopia | Measles | Ungraded | 13-Apr-17 | 1-Jan-23 | 17-Jan-24 | 30,389 | 30,389 | 233 | 0.80% |

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 3089 cases with 253 deaths have been reported, a Case Fatality Rate (CFR) of 0.8%.

| Ethiopia | Poliomyelitis (cVDPV2) | Grade 2 | 24-Jun-19 | 20-May-19 | 13-Feb-24 | 69 | 69 | 0.00% |

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.

| Gabon | Diphtheria | Grade 2 | 23-Jan-24 | 1-Dec-23 | 25-Jan-24 | 1 | 1 | 100.00% |

On 23 January 2024, Cameroon reported a confirmed case of Diphtheria. The affected individual is a 9-year-old male from Batam 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.

| Ghana | Dengue fever | Grade 3 | 2-Nov-23 | 1-Jan-23 | 19-Dec-23 | 18 | 9 | 0.00% |

A total of 18 cases of dengue fever including 9 confirmed cases and zero deaths, have been reported in Ghana in 2023.

| Ghana | Mpox | Protracted 2 | 8-Jun-22 | 24-May-22 | 13-Feb-24 | 138 | 138 | 5 | 3.60% |

As of week 5 of 2024, there have been 138 confirmed cases and 5 deaths(CFR 3.6%) reported from the 261 Districts.

| Ghana | Poliomyelitis (cVDPV2) | Grade 2 | 23-Aug-19 | 23-Jul-19 | 13-Feb-24 | 34 | 34 | 0.00% |

Ghana 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 6 of 2024.

| Guinea | Diphtheria | Grade 2 | 21-Aug-23 | 4-Jul-23 | 14-Jan-24 | 2,240 | 2,081 | 85 | 3.80% |

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, Labé, 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 Siguiri health district in the Kankan region is the epicenter of the outbreak, with 97% of suspected cases reported.

| Guinea | Lassa fever | Ungraded | 3-Feb-24 | 25-Jan-24 | 3-Feb-24 | 1 | 1 | 0 | 0.00% |

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.

| Kenya | Fire incident | Ungraded | 2-Feb-24 | 1-Feb-24 | 2-Feb-24 | - | - | - |

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.
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.

Kenya

Food insecurity (Horn of Africa crisis)

Grade 3

17-Feb-22

1-Jan-22

27-Jan-24

- - - -

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.

Kenya

Anthrax

Grade 2

10-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 Kandara sub-county, all cases were linked to the handling of an infected animal. No new cases have been reported after August.

Kenya

Cholera

Grade 3

19-Oct-22

5-Oct-22

5-Feb-24

12,501 577 206 1.60%

A cholera outbreak has been ongoing in Kenya since 26 October 2022. As of 5 February 2024, a total of 12 501 cases, with 577 confirmed by culture, and 206 deaths (CFR 1.7%) have been reported in 28 affected Counties.

Kenya

Leishmaniasis (visceral)

Ungraded

31-Mar-19

3-Jan-20

18-Dec-23

2,395 2,205 10 0.40%

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

Kenya

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.

Kenya

Suspected brew poisoning

Ungraded

9-Feb-24

9-Feb-24

8-Feb-24

21 9 42.90%

On 9 February 2024, a brew poisoning incident was reported from Kirinyaga County involving 21 people who developed blurred vision, abdominal pain, body weakness and vomiting between 6 and 8 February 2024 after consuming a brew on 5 February 2024 at a local bar in a village in Kirinyaga Central sub county. Nine fatalities were recorded.

Liberia

Lassa Fever

Ungraded

3-Mar-22

6-Jan-22

13-Feb-24

376 110 32 8.50%

From January 6, 2022, to week 6 of 2024, a cumulative total of 376 cases of Lassa Fever have been reported with 110 confirmed and 32 deaths (CFR 29%).

Liberia

Measles

Ungraded

3-Feb-22

13-Dec-21

13-Feb-22

13,124 12,475 95 0.70%

Since the measles outbreak started on 13 December 2021, there have been 13 124 suspected cases, 12 475 confirmed cases, and 95 deaths with CFR 0.7%, as of week 5 of 2024. Only Maryland County remains in outbreak with 433 ongoing cases.

Liberia

Mpox

Protracted 2

21-Jul-22

23-Jul-22

13-Feb-24

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. No new cases have been reported in 2024.

Malawi

Humanitarian crisis (Sahel region)

Grade 2

11-Sep-17

11-Sep-17

19-Dec-23

7,500,000 7,500,000 0.00%

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.

Malawi

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.

Malawi

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 29%) have been reported in 28 affected Counties.

Kenya

Malaria

Ungraded

29-Jun-22

1-Jan-23

4-Feb-24

1,992 403 27 1.40%

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.

Liberia

Measles

Ungraded

1-Jan-21

1-Jan-23

1-Jan-23

7,500,000 7,500,000 0.00%

In Grand Kru and Nimba counties. No new cases have been reported in 2024.

Madagascar

Malnutrition crisis

Protracted 2

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.

Malawi

Poliomyelitis (WPV1)

Graded

31-Jan-22

1-Feb-22

7-Feb-24

1 1 0.00%

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 in 9 districts of Malawi. No other cases have been reported. Malawi continues participating in the multi-country, subregional outbreak response to control the WPV1 outbreak.
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.

On 9 September 2023, the Malian Ministry of Health reported a case of dengue in a 44-year-old female resident of Bacoji in commune V, Bamako district. The case had onset of symptoms on 31 August 2023. On 9 September 2023, the sample collected from the case was confirmed positive for dengue virus 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 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 measles outbreak in 2023.

On 6 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) of Point G. 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).

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

Tropical Cyclone Belal hit Mauritius on 15 January, causing two deaths, affecting 100,000 people, and leading to significant infrastructure damage and 100s of vehicle losses. In Port-Louis, floods made roads impassable, prompting the evacuation of over 1,000 people and power outages in 40,000 households.

Mauritania reported a case of human polio 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).

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Mauritius 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.

Most poor and very poor households in Mozambique face Minimal (IPC Phase 1) outcomes as the ongoing harvest improves food access and availability. In Cabo Delgado, ongoing humanitarian assistance drives Stressed (IPC Phase 2) outcomes, with Crisis (IPC Phase 3) outcomes persisting in conflict-affected areas. There has been a reduced number of attacks.

The current cholera outbreak in the country started in Niassa province on 14 September 2022. As of 07 December 2023, 38,793 cholera cases have been recorded with 153 deaths (CRF 0.4%) in 11 affected provinces.

One cVDVP1 case was reported in Zambezia bringing the number of 2023 cases to four.

According to the Global Polio Eradication Initiative report for 10 January 2024, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) has been reported in 2024. One case was reported in 2023. The number of cases in 2022 remains four. There were two cases reported in 2021.

A wild poliovirus type 1 (WPV1) was detected in Mozambique from samples collected in late March 2022 from Changara district in Tete province. This new WPV1 is an orphan virus and is linked to the virus detected in Malawi (for which outbreak response vaccinations are ongoing in Malawi and neighbouring countries). The patient, a 12-year-old female, had onset of paralysis on 25 March 2022. Her stool samples were collected on 1 April and 2 April 2022, and sent to the laboratory on 4 April 2022. According to the Global Polio Eradication Initiative, there were eight cases reported on 10 August 2022. As of 17 December 2023, there were no new cases reported for wild polio in Mozambique.

The number of internally displaced people in Niger has reached a record high, with an increase from 1.9 million in 2017 to 4.3 million individuals (15% population) in 2024, indicating a significant rise in the need for humanitarian assistance. On 28 July, Niger experienced a military coup and this marks the third Sahel country in less than three years.

Acute food insecurity affects 3.3 million people, while a staggering 7.3 million are at risk of their situation deteriorating due to the ongoing crisis.

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

An outbreak of diphtheria has been confirmed in Matamaye health district, Zinder region. The first case was reported on 17 July 2023. As of 24 December 2023, 2,721 suspected cases, including 141 deaths (CFR 5.5%) were reported. Public health response activities are ongoing in affected districts.

Mauritania reported a case of human polio 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).

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.
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, 2,681 suspected cases of meningitis, including 736 laboratory-confirmed cases and 129 deaths (CFR 5.7%) were reported.

Niger: Poliomyelitis (cVDPV2), Grade 2, 1-Jan-20, 1-Jan-21, 25-Oct-23, 34, 34, 0.00%.

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.

Nigeria: Humanitarian crisis (Sahel region), Grade 2, 10-Oct-16, 10-Oct-16, 15-Nov-23, 8,300,000, 8,300,000, 0.00%.

People face emergency levels of food insecurity, with very high rates of severe acute malnutrition that could lead to death in Borno, Adamawa and Yobe states. As of week 50, 2023, over 6 million people are targeted for humanitarian aid, 8.3 million people are in need of humanitarian assistance, 2.2 million IDPs, and 4.3 million people in need of food security aid.

Nigeria: Cholera, Grade 3, 1-Jan-24, 28-Jan-24, 169, 9, 2, 2.00%.

From 1 to 28 January 2024, 169 suspected cholera cases were reported in two states, with nine confirmed cases and two deaths (CFR 1.2%). Children under 5 are most affected, followed by those aged 5-14, with males comprising 52%. Bayelsa State reported 144 cases (48%)), with Southern Ijaw LGA recording 81 cases (48% of the national total). Cross River State reported 25 cases (15%). Compared to 2023, suspected cases decreased by 71%, with cumulative deaths down by 10% in 2024.

Nigeria: Dengue fever, Grade 3, 1-Nov-23, 1-Jan-23, 19-Dec-23, 72, 14, 0.00%.

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 (43%).

Nigeria: Diphtheria, Grade 2, 1-Dec-22, 1-Dec-22, 24-Dec-23, 22,293, 13,387, 598, 2.70%.

Between week 19, 2022 and week 51, 2023, 22,293 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 22,293 suspected cases reported, 13,387 (60.1%) were confirmed, including 346 laboratory-confirmed, 510 epidemiologically linked, and 1,231 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.

Nigeria: Lassa Fever, Ungraded, 8-Jan-23, 1-Jan-24, 21-Jan-24, 892, 211, 43, 4.80%.

As of week 3 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 HWCs, 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, eight deaths), Bauchi (48 cases, 15 deaths), and Benue (17 cases, three deaths). states.

Nigeria: Meningitis, Ungraded, 29-Jan-24, 8-Oct-23, 28-Jan-24, 261, 26, 40, 14.20%.

An increase in meningitis cases has been reported in Nigeria since October 2023. From W40, 2023 (ending 8 Oct 2023) to W4, 2024 (ending 28 Jan 2024), a total of 281 cases including 40 deaths (CFR 14%) were reported from 47 LGAs in 19 states. Cumulatively, twenty-six cases were laboratory confirmed, of which over 80% tested positive for Neisseria meningitidis C. Children aged less than 15 years old are the most affected. The IgG request for meningococcal vaccines is under finalization.

Nigeria: Mpolx, Protracted 2, 31-Jan-22, 31-Dec-23, 3,771, 1,086, 17, 5.0%.

Overall, since the re-emergence of Mpolx in September 2017, 3,771 suspected cases have been reported from 36 States and FCTs in the country. Of these 3,771 suspected cases, 1,086 (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.

Nigeria: Poliomyelitis (cVDPV2), Grade 2, 1-Jun-18, 1-Jan-22, 31-Jan-24, 74, 67, -.

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

Senegal: Chikungunya, Ungraded, 8-Jun-23, 8-Jun-23, 31-Dec-23, 344, 344, 0.00%.

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

Senegal: Dengue, Grade 3, 14-Nov-22, 31-Jan-23, 31-Dec-23, 310, 310, 1, 0.30%.

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 (155 cases, 43.5%) has the highest number of dengue cases, followed by Thiologie (38 cases, 12.3%), and Youndeblé (31 cases, 10%).

Senegal: Measles, Ungraded, 4-Jul-22, 1-Jan-23, 31-Dec-23, 1,699, 539, -.

From epidemic week 1 to 52 of 2023 (ending 31 December 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 (Malam Hoodor, Podor, Kaffrine) and two for the second time in 2023 (Velingara, Kaolack).

Senegal: West Nile fever, Protracted 2, 7-Feb-24, 23-Jan-24, 7-Feb-24, 1, 1, 0, 0.00%.

On 7 February 2024, the Ministry of Health of Senegal was informed by Institut Pasteur of Dakar of a confirmed West Nile virus case in Matam region. The case is a 23-year-old male residing in Thioulne commune, Matam department, who had onset of symptoms of fever, headache and myalgia on 23 January 2024. On 26 January 2024, he presented at a health facility where he tested negative for malaria. A symptomatic treatment was initiated. A blood sample was sent to Institut Pasteur of Dakar on 02 February 2024 for further testing. The sample tested IgM positive for West Nile virus on 07 February 2024. No additional case was reported. Further investigations are ongoing.

Senegal: Zika, Ungraded, 11-Dec-23, 14-Nov-24, 18-Dec-23, 2, 2, -.

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 Polymerease 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.
Cholera outbreak has been ongoing in South Africa since December 4, 2023. It started with imported cases linked to ongoing outbreaks in Southern Africa and two locally transmitted cases from Limpopo in January. As of February 13, 2024, 117 cumulative suspected and six confirmed cases have been reported with no deaths.

<table>
<thead>
<tr>
<th>Country</th>
<th>Disease</th>
<th>Grade</th>
<th>Date of Onset</th>
<th>Last Recorded Date</th>
<th>Cases</th>
<th>Deaths</th>
<th>CFR</th>
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<tbody>
<tr>
<td>South Africa</td>
<td>Measles</td>
<td>Ungraded</td>
<td>17-Oct-22</td>
<td>13-Oct-22</td>
<td>26-Dec-23</td>
<td>7,054</td>
<td>1,338</td>
</tr>
</tbody>
</table>

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).

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 (46.8% 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.

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 recorded crossing the border from Sudan to South Sudan since 15 April 2023, with 81% of these arrivals being South Sudanese and 18% being Sudanese.

The current outbreak in Bentiu POC continues. As of 18 September 2023, a cumulative total of 63 cases with symptoms and signs consistent with HEV disease and 12 deaths (CFR 19%) were reported from Fangak. Most cases (36.5%) are from the village of Old Fangak. The median age group affected is 33 years (Interquartile range: 2-59). Males are the most affected accounting for 58.7% of all reported cases.

Measles outbreak is still active in South Sudan with new counties confirming outbreaks that include Magwi, Tonj East, Maridi, and Mundri East. As of week 50, 2023, 7 862 suspected measles cases were reported, with 586 (7.6%) lab-confirmed, 173 deaths with a case fatality ratio of 2.2%.

In South Sudan, the official yellow fever outbreak was declared on 6 January 2024 by the health authorities, after confirmation of one yellow fever case on 24 December 2023. The sample collected tested positive for yellow fever by polymerase chain reaction (PCR) on 24 December 2023 at the National Public Health Laboratory and later the quality control check at the Regional Reference Laboratory of Uganda Virus Research Institute (UVRI) confirmed the result on 4 January 2024. As of 28 January 2024, 38 yellow fever cases including 37 suspected cases and one confirmed case were reported from counties in Western Equatoria State.

The Togo Ministry of Health officially notified cases of dengue fever to WHO on 14 November 2023. As of 16 November, 8 cases have been detected, including two confirmed by polymerase chain reaction (PCR) testing at the national reference laboratory. Among the eight cases, one has died.

For the ongoing cholesteral 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.

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There are several health events and risks reported in various countries. A measles outbreak in Zambia has affected several provinces, with a total of 285 cases reported. In Zimbabwe, a measles outbreak has continued to evolve, with 285 cases reported as of 14 November 2023.

A yellow fever outbreak in Senegal has resulted in 182 confirmed cases. In Guinea, a fire in an oil depot has caused at least 93 deaths. In Liberia, the impact of the El Niño phenomenon continues to affect the Horn of Africa sub-region, resulting in flooding and displacement of people.

In Uganda, an active Rift Valley Fever outbreak is ongoing, with 182 confirmed cases. The United Republic of Tanzania has reported a measles outbreak, with 22 632 cases and 499 deaths as of 4 February 2024. In Kenya, a fire in an oil depot has resulted in 93 deaths. In Liberia, a fuel tanker explosion has caused fatalities and injuries. In Mauritania, a diphtheria outbreak has affected 51 cases.

Health events related to floods, measles, yellow fever, anthrax, and Rift Valley Fever are being monitored and responded to by the WHO and its partners. The Emergency Response Framework is used to grade health emergencies, with grades ranging from 1 to 4, where 1 is the highest level of concern and 4 is the lowest. The grading system helps in prioritizing response efforts and allocating resources effectively.
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.