

Africa CDC Epidemic Intelligence Report

Date of Issue: 17 Jan 2026

Active Events

40

New Events reported
in 2026

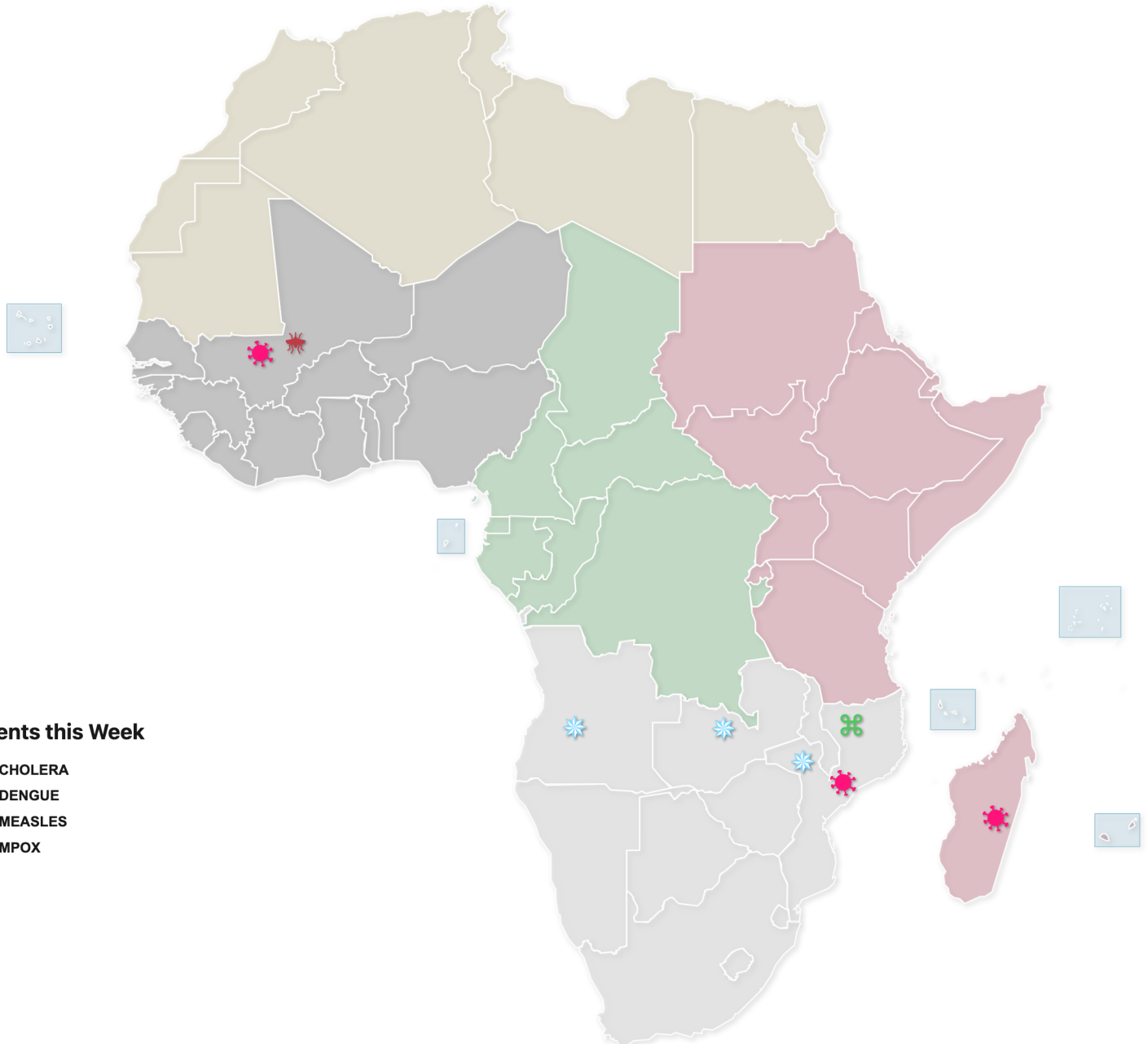
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Events highlighted
this week

8

New events since
last issue

0















*  represent AU Member States that are islands

Note: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the African Union

Event Type	Risk Level		
	Very High (New)	High (New)	Moderate (New)
Human	0	3	5
Animal	0	0	0
Environment	0	0	0

Event Summary

Events Highlighted this week

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
 Cholera	Angola	High	N/A		116 (29)	0 (0)	0 (0)	2 (1)
	Mozambique	Moderate	N/A		0 (0)	0 (0)	299 (153)	3 (3)
	Zambia	Moderate	N/A		0 (0)	0 (0)	5 (5)	0 (0)
 Dengue	Mali	Moderate	N/A		61 (40)	0 (0)	18 (9)	0 (0)
 Measles	Mozambique	Moderate	N/A		0 (0)	0 (0)	15 (9)	0 (0)
 Mpox	Madagascar	High	N/A		165 (111)	0 (0)	15 (3)	0 (0)
	Mali	High	N/A		5 (5)	0 (0)	1 (1)	0 (0)
	Mozambique	Moderate	N/A		33 (33)	0 (0)	2 (2)	0 (0)

Moderate Risk Events

Human Event
AC53748

Mpox in Africa

95 confirmed case(s) **1,319** Total case(s)
15 Total deaths (**CFR: 1.14%**)

Agent/Pathogen	Mpox	First Reported	1-Jan-2026	Previous Report Update	15-Jan-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	5 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 1,319 cases of mpox, of which 95 (7.2%) were laboratory-confirmed, have been reported from five African Union (AU) Member States (MS). In addition, a total of 15 deaths [case fatality rate (CFR: 1.14%)] among all cases and one death (CFR: 1.05%) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Democratic Republic of Congo (DRC) (59 confirmed cases; 0 deaths), Ghana (1; 0), Kenya (13; 1), Liberia (4; 0), Mali (2; 0), Madagascar* (15; 0) and Mozambique (2; 0).

In epidemiological week 2, a total of six cases and no deaths were reported from three AU MS: Mali, Madagascar and Mozambique.

Mali: Since the last update (28 December 2025), the Ministry of Health (MoH) reported five new cases, of which one was laboratory confirmed case and no deaths of mpox from Bamako region. Since the beginning of this outbreak (November 2025), a total of 36 cases, of which 12 were laboratory confirmed cases and no deaths have been reported from six of twelve regions in Mali. A total of 36 samples were tested resulting in a 100% testing rate and 33.3% positivity rate. Clade IIb was isolated from the confirmed cases.

Madagascar: Since the last update (15 January 2026), the MoH reported three new laboratory-confirmed cases and no deaths of mpox from Boeny region. This is a 75% decrease in the number of new cases compared to the last update. This year, 15 laboratory-confirmed cases and no deaths of mpox have been reported from Boeny region. This outbreak started in December 2025. Cumulatively, 28 laboratory-confirmed cases and no deaths of mpox have been reported from one of twenty-four regions in Madagascar. A total of 250 samples have been tested, resulting in a 11.2% positivity rate.

Mozambique: Since the last update (21 December 2025), the MoH reported 35 new cases, of which two were laboratory-confirmed, and no deaths among suspected cases, of mpox from five provinces. This outbreak started on 10 July 2025. Cumulatively, 1,985 cases, of which 93 were laboratory confirmed and no deaths of mpox have been reported from five of eleven provinces. A total of 1,892 samples were tested, resulting in a 95% testing rate and a 79% positivity rate. Clade IIb was isolated from the confirmed cases.

***Between epidemiological week 51 of 2025 - epidemiological week 1 of 2026, a backlog of 11 laboratory-confirmed cases of mpox were reported from Madagascar.**

Note: In 2025, a total of 141,805 cases of mpox, of which 41,705 (29%) laboratory-confirmed have been reported from 29 AU MS. In addition, a total of 825 deaths (CFR: 0.58%) among all cases and 251 deaths (CFR: 0.60%) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Angola (8 confirmed cases; 0 deaths), Burundi (1,662; 0), Cameroon (12; 0), Central African Republic (CAR) (65; 5), Congo (78; 1), Côte d'Ivoire (79; 1), Democratic Republic of Congo (DRC) (20,532; 99), Ethiopia (48; 1), Gambia (1; 0), Ghana (949; 7), Guinea (1,892; 6), Kenya (915; 11), Liberia (1,451; 6), Madagascar (13; 0), Malawi (144; 1), Mali (11; 0), Morocco (2; 0), Mozambique (91; 0), Namibia (2; 0), Nigeria (435; 6), Rwanda (47; 0), Senegal (9; 0), Sierra Leone (5,442; 60), South Africa (14; 0), South Sudan (37; 0), Tanzania (258; 0), Togo (90; 0), Uganda (7,055; 44), and Zambia (361; 3).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to intensify surveillance, risk communication, mpox vaccination campaigns and community engagement activities in the affected communities.

Cholera in Africa

318 confirmed human case(s), **203** suspected human case(s)
5 human deaths (**CFR: 0.96%**)

Agent/Pathogen	Cholera	First Reported	1-Jan-2026	Previous Report Update	15-Jan-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	6 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 521 cases (318 confirmed; 203 suspected) and five deaths (CFR: 0.96%) of cholera have been reported from six AU MS: Angola (116 cases; 2 deaths), Malawi (1; 0), Mozambique (299; 3), Namibia (18; 0), Somalia (82; 0) and Zambia (5; 0).

In epidemiological week 2, a total of 187 new cases and four deaths were reported from three AU MS: Angola, Mozambique and Zambia

Angola: Since the last update (15 January 2026), the MoH reported 29 new suspected cases and one new death (CFR: 3.45%) of cholera from five provinces. This is a 43% average decrease in the number of new cases in the last four weeks. This outbreak started in January 2025. Cumulatively, 36,409 cases (937 confirmed; 35,472 suspected) and 897 deaths (CFR: 2.46%) of cholera have been reported from 18 of 21 provinces in Angola. Males accounted for 54% of all cases and 63% of all deaths. Children <15 years accounted for 37% of all cases and 32% of all deaths. Additionally, 55% of all deaths occurred at the health facilities. In comparison to the same period in 2025 (epidemiological week 2), 224 cases and 18 deaths, which is a 48% decrease for cases and 89% decrease for deaths of cholera were reported in Angola.

Mozambique: Since the last update (15 January 2026), the MoH reported 153 new confirmed cases and three new deaths (CFR: 1.96%) of cholera from three provinces. This is a 7% average decrease in the number of new cases in the past four weeks. This year, a total of 299 cases and three deaths (CFR: 1.00%) of cholera were reported from three provinces. This outbreak started in September 2025. Cumulatively, 1,862 confirmed cases and 28 deaths (CFR: 1.50%) of cholera have been reported from three of ten provinces in Mozambique. Additionally, 61% of all deaths occurred in communities. In comparison to the same period in 2025 (epidemiological week 2), no confirmed cases and deaths of cholera were reported in Mozambique.

Zambia: Since the last update (8 January 2026), the MoH reported five new confirmed cases and no new deaths of cholera from Lusaka province. This outbreak started in August 2025. Cumulatively, 625 cases (205 confirmed; 420 suspected) and nine deaths (CFR: 1.44%) of cholera have been reported from seven of ten provinces in Zambia. In comparison to the same period in 2025 (epidemiological week 1 to 2), a total of five suspected cases and no deaths of cholera were reported in Zambia.

In 2025, a total of 323,395 cases (12,297 confirmed; 47 probable; 311,051 suspected) and 7,352 deaths (CFR: 2.28%) of cholera have been reported from 24 AU MS: Angola (36,293; 895 deaths), Burundi (3,353; 14), Cameroon (11; 0), Chad (3,091; 167), Comoros (40; 0), Congo (815; 67), Côte d'Ivoire (556; 24), DRC (71,646; 2,028), Ethiopia (8,503; 84), Ghana (2,870; 14), Kenya (686; 26), Malawi (102; 3), Mozambique (5,787; 68), Namibia (75; 1), Nigeria (22,196; 505), Rwanda (325; 0), Somalia (8,915; 9), South Sudan (79,633; 1,277), Sudan (72,057; 2,077), Tanzania (4,063; 45), Togo (165; 4), Uganda (136; 3), Zambia (1,103; 18), and Zimbabwe (601; 23).

Response by MS/partner/Africa CDC:

The ministries of health of the affected MS activated the emergency operation centers and deployed one health rapid response teams to conduct enhanced surveillance, risk communication, and environmental sanitation in the affected communities.

Dengue in Africa

71 confirmed human case(s), **21** suspected human case(s)
0 human deaths (**CFR: 0%**)

Agent/Pathogen	Dengue	First Reported	1-Jan-2026	Previous Report Update	8-Jan-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	2 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 92 cases (71 confirmed; 21 suspected) and no deaths of dengue fever have been reported from two AU MS: Mali (79 cases; 0 deaths), and Mauritania (13; 0).

In epidemiological week 2 of 2026, a total of 49 new confirmed cases and no new deaths of dengue have been reported from Mali.

Mali: Since the last update (15 January 2026), the MoH reported 49 new cases (9 confirmed; 40 suspected) and no new deaths of dengue fever from Bamako region. This is a 63% percentage increase in the number of new cases compared to last update. This year, a total of 79 cases (18 confirmed; 61 suspected) and no deaths of dengue fever were reported in Mali. Since the beginning of this outbreak (September 2023), a cumulative of 19,516 cases (2,613 confirmed; 16,903 suspected) and 74 deaths (CFR: 0.44%) of dengue fever have been reported from all 11 regions in Mali.

Note: In 2025, a total of 62,315 cases (12,909 confirmed; 156 probable; 49,250 suspected) and 139 deaths (CFR: 0.22%) of dengue fever have been reported from 11 AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,320; 1), Guinea (2; 0), Kenya (1; 0), Mali* (4,344; 0), Mauritania (4,547; 1), Mauritius (59; 0), Nigeria (178; 11), Senegal (6,668; 0), and Sudan (43,995; 126).

Response by MS/partner/Africa CDC:

The ministries of health in affected AU MS continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

Measles in Mozambique

15 confirmed human case(s)
0 human deaths (**CFR: 0%**)

Agent/Pathogen	Measles	First Reported	4-Jan-2026	Previous Report Update	15-Jan-2026
First Occurred	29-Jul-2025	Country	Mozambique	Location	Mozambique
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the last update (15 January 2026), the MoH reported nine new confirmed cases and no new deaths of measles from six provinces. This is a 9% average increase in the number of confirmed cases in the last four weeks. This outbreak started in July 2025. Cumulatively, 586 confirmed cases and one death (CFR: 0.17%) of measles have been reported from six of ten provinces in Mozambique: Niassa (104; 0), Nampula (164; 1), Manica (37; 0), Maputo (7; 0), Zambezia (96; 0) and Sofala (178; 0). In 2024, the national measles vaccination coverage (MCV1) was 44%.

Response by MS/partner/Africa CDC:

The MoH continues to strengthen measles surveillance and supplemental immunization activities in the affected communities.

- Epidemiological week 2 covers a period from 5 - 11 January 2026.

*DRC reported a backlog of three cases of circulating vaccine-derived polio type 2 for 2025.

-The cases in this report include confirmed, probable, and suspected cases.

- Deaths among mpox suspected cases are all reported from DRC.

-CFR are calculated using confirmed cases and deaths among confirmed cases only, except for bacterial meningitis, cholera, measles, mpox, dengue, and yellow fever, where CFR is calculated using all cases and deaths.

- The GeoScope level is determined by where the event is currently occurring on the continent. Low: the event is limited to sub-national areas within one MS; Moderate: The event is affecting multiple countries within an AU region or has been imported from/exported to 1-2 countries from another global region; High: The event is affecting several multinational AU regions, or have been imported from/exported to >2 countries from another global region; Very High: Event is considered a pandemic, affecting multiple continents or worldwide. The risk level is determined by evaluating the following criteria: morbidity and mortality of the disease, probability of spread within and to the other MSs, and availability of effective treatments, vaccines, or other control measures. An event risk level can be classified as low, moderate, high or very high depending on how they score on the above criteria.

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