

# Africa CDC Epidemic Intelligence Report

Date of Issue: 23 Mar 2026

Active Events

89

New Events reported  
in 2026

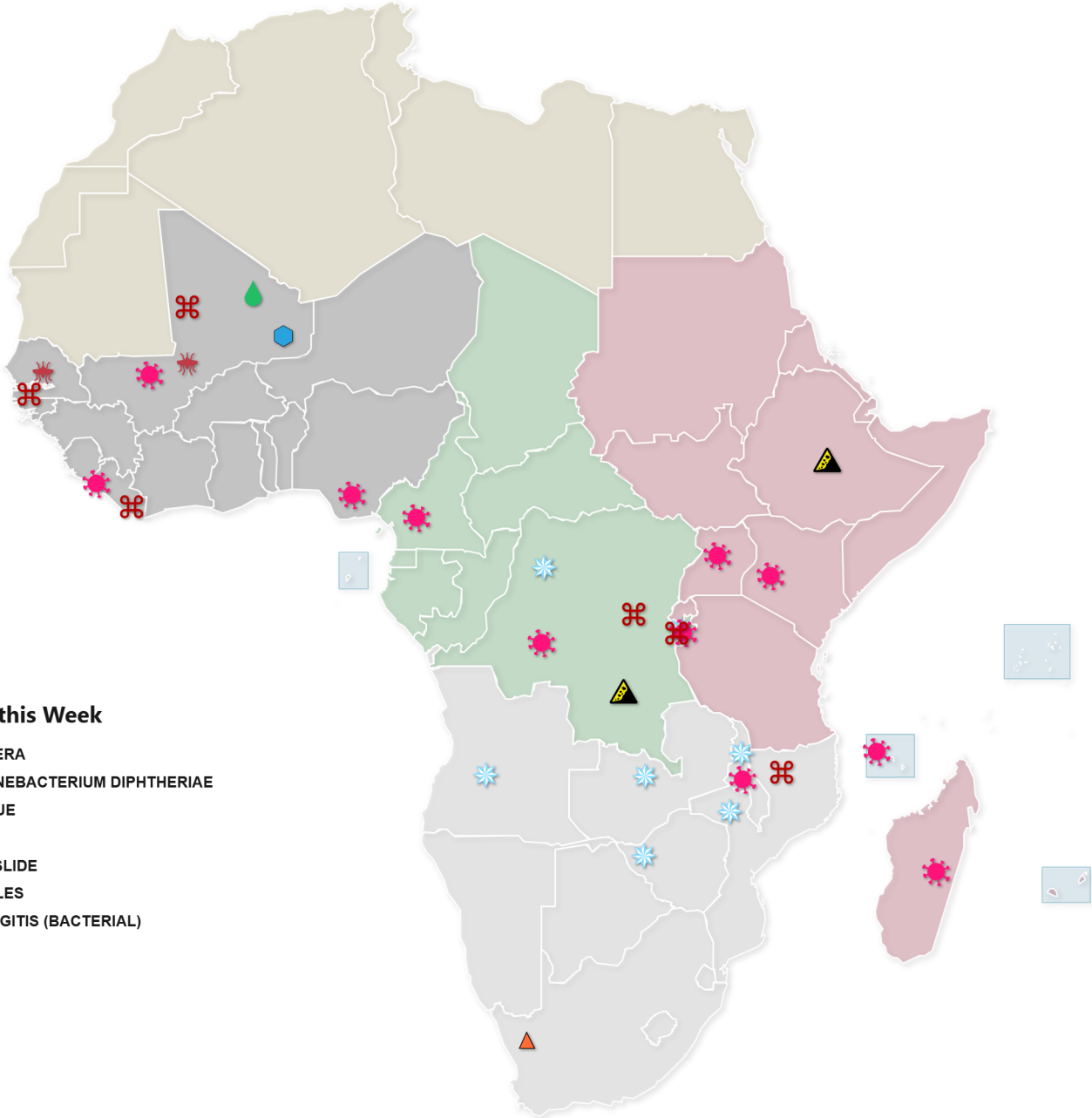
18

Events highlighted  
this week

31

New events since  
last issue

2



### Events this Week

- CHOLERA
- CORYNEBACTERIUM DIPHTHERIAE
- DENGUE
- H5N1
- LANDSLIDE
- MEASLES
- MENINGITIS (BACTERIAL)
- MPOX




\* 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	11	16
Animal	0	0	1
Environment	0	0	2 (2)






# Event Summary

## New events since last issue

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected	Probable	Confirmed	Deaths
 Landslide	Democratic Republic of the Congo	Moderate	N/A		0	0	0	500
	Ethiopia	Moderate	N/A		0	0	10,606	128

## Events Highlighted this week

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected (New)	Probable (New)	Susceptible (New)	Confirmed (New)	Deaths (New)
 Cholera	Angola	High	N/A		388 (49)	0 (0)		0 (0)	9 (0)
	Burundi	Moderate	N/A		531 (19)	0 (0)		0 (0)	2 (0)
	Democratic Republic of the Congo	Moderate	N/A		15,100 (1,294)	0 (0)		0 (0)	395 (39)
	Malawi	High	N/A		0 (0)	0 (0)		90 (5)	2 (0)
	Mozambique	Moderate	N/A		0 (0)	0 (0)		5,659 (510)	57 (6)
	Zambia	Moderate	N/A		531 (75)	0 (0)		5 (0)	9 (0)
	Zimbabwe	Moderate	N/A		23 (1)	0 (0)		13 (0)	2 (0)
 Corynebacterium diphtheriae	Mali	Moderate	N/A		71 (8)	0 (0)		24 (12)	4 (0)
 Dengue	Mali	Moderate	N/A		457 (73)	0 (0)		132 (16)	1 (0)
	Senegal	High	N/A		0 (0)	0 (0)		35 (1)	0 (0)
 H5N1	South Africa	N/A	Moderate						
	South Africa	N/A	Moderate				102,875 (100,000)	154,538 (154,180)	71,423 (71,065)
 Measles	Burundi	Moderate	N/A		513 (174)	0 (0)		0 (0)	1 (0)
	Democratic Republic of the Congo	Moderate	N/A		31,850 (2,969)	0 (0)		0 (0)	322 (22)
	Liberia	High	N/A		2,179 (389)	0 (0)		138 (0)	8 (0)
	Mali	High	N/A		134 (24)	0 (0)		57 (3)	0 (0)
	Mozambique	Moderate	N/A		0 (0)	0 (0)		126 (17)	0 (0)
	Senegal	High	N/A		0 (0)	0 (0)		40 (7)	0 (0)
	Mali	Moderate	N/A		81 (9)	0 (0)		24 (2)	0 (0)
 mpox	Burundi	Moderate	N/A		136 (7)	0 (0)		57 (1)	0 (0)
	Cameroon	High	N/A		131 (6)	0 (0)		20 (2)	0 (0)
	Comoros	High	N/A		64 (5)	0 (0)		28 (1)	0 (0)
	Democratic Republic of the Congo	Moderate	N/A		9,213 (801)	0 (0)		626 (89)	1 (0)
	Kenya	Moderate	N/A		304 (27)	0 (0)		128 (16)	7 (1)
	Liberia	High	N/A		380 (12)	0 (0)		123 (3)	0 (0)

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected (New)	Probable (New)	Susceptible (New)	Confirmed (New)	Deaths (New)
	Madagascar	High	N/A		1,198 (137)	0 (0)		561 (82)	1 (0)
	Malawi	Moderate	N/A		21 (1)	0 (0)		8 (1)	0 (0)
	Mali	High	N/A		56 (9)	0 (0)		18 (3)	2 (0)
	Nigeria	High	N/A		164 (4)	0 (0)		13 (1)	0 (0)
	Uganda	Moderate	N/A		131 (2)	0 (0)		65 (2)	1 (0)

## Moderate Risk Events

Environmental Event AC95104

### Landslide in Africa

**10,606** displaced persons  
**628** human deaths

Agent/Pathogen	Landslide	First Occurred	6-Mar-2026	Country	Multiple Countries
Location	2 MS	Source	Other Government Agency	GeoScope	LOW
	Human Risk Assessment		Animal Risk Assessment		N/A

MODERATE

### Description:

Since the beginning of 2026, a total of 10,606 displaced persons and 628 deaths due to landslides have been reported from two African Union (AU) Member States (MS): DRC (0 displaced persons; 500 deaths) and Ethiopia (10,606; 128).

In epidemiological week 10, a total of 10,606 displaced persons and 628 deaths were reported from DRC and Kenya.

**DRC (initial report):** On 6 March 2026, a landslide occurred in the Rubaya mining area, near Rubaya town in Masisi territory, North Kivu province, north-eastern Democratic Republic of Congo. The landslide was triggered by very heavy rainfall that affected the area in the previous days. According to media reports as of 11 March, at least 300 unconfirmed fatalities have been reported among miners and nearby residents, with several houses destroyed in the affected communities. A similar landslide occurred on 3 March in the same area, causing approximately 200 deaths. Continued heavy rainfall forecast over the next five days may increase the risk of additional landslides and further humanitarian impacts in the region.

**Ethiopia (initial report):** On 11 March 2026, a landslide occurred in the Gamo zone, South Ethiopia region, Southern Ethiopia. The landslide was triggered by torrential rainfall across the region over the past few days. A total of 128 deaths and 10,606 displaced persons have been reported across the region. The four most affected districts in the Gamo zone are Gacho Baba, Kamba, and Bonke districts. The landslides have posed a risk for an upsurge in malaria cases and possible outbreaks of cholera due to compromised water, sanitation, and hygiene services. Landslides occur frequently in Ethiopia during the rainy seasons. In 2024, a landslide in the Gofa zone led to 249 deaths, 15,100 displaced persons, and 38 injuries.

Landslides are a type of mass wasting, which denotes any downslope movement of soil and rocks under the direct influence of gravity, and are often associated with high numbers of fatalities, injuries, and destruction of property and basic infrastructure.

### Response by MS/partner/Africa CDC:

**DRC:** The Government of the Democratic Republic of the Congo, through provincial and local authorities in North Kivu, initiated emergency response actions following the landslides in the Rubaya mining area in Masisi territory. Local authorities, rescue teams, and community members conducted search and rescue operations to locate victims and assist affected families. Response activities, including damage and needs assessments, monitoring of weather conditions, and coordination with humanitarian partners, are ongoing in the affected areas. Authorities are also monitoring the situation closely due to the continued risk of additional landslides caused by ongoing heavy rainfall.

**Ethiopia:** The Government of Ethiopia, in partnership with the Federal Disaster Risk Management Commission, continues to actively monitor the situation. The emergency operation center and the incident command system have been established to coordinate response interventions. In addition, enhanced surveillance, especially for water-borne illnesses, mobilization of medical supplies, and establishment of temporary clinics are ongoing in the affected districts.

## Moderate Risk Events

Human Event
AC53748

### Mpox in Africa

**1,891** confirmed case(s) **12,534** Total case(s)  
**14** Total deaths (**CFR: 0.11%**)

Agent/Pathogen	<b>Mpox</b>	First Reported	<b>1-Jan-2026</b>	Previous Report Update	<b>13-Mar-2026</b>
First Occurred	<b>1-Jan-2026</b>	Country	<b>Multiple Countries</b>	Location	<b>22 MS</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>MODERATE</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

Since the beginning of 2026, a total of 12,534 mpox cases, of which 1,891 (15%) were laboratory-confirmed, have been reported from 22 African Union (AU) Member States (MS). In addition, a total of 93 deaths (CFR: 0.81%) among all cases and 14 deaths (CFR: 0.10%) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Burundi\* (57 confirmed cases; 0 deaths), Cameroon \*\* (20; 0), Central Africa Republic (CAR)\*\*\* (5; 0), Comoros (28; 0), Congo (19; 0), Democratic Republic of Congo (DRC) (626; 1), Ghana (26; 0), Guinea (119; 1), Kenya (128; 7), Liberia (123; 0), Malawi\*\*\*\* (8; 0), Mali (18; 2), Madagascar (561; 1), Mozambique (2; 0), Nigeria (13; 0), Rwanda (3; 0) Senegal (1; 0), South Africa (2; 0), South Sudan (10; 1), Tanzania (36; 0), Uganda\*\*\* (65; 0) and Zambia (21; 0).

In epidemiological week 10, a total of 201 laboratory-confirmed cases and two new deaths among confirmed cases of mpox were reported from 10 AU MS: Burundi, Cameroon, Comoros, Kenya, Liberia, Madagascar, Malawi, Mali, Nigeria and Uganda

**Burundi:** Since the last update (25 February 2026), the MoH reported seven new cases (one laboratory-confirmed) and no new deaths of mpox from three health districts. This year, 136 cases, of which 57 were laboratory confirmed, and no deaths of mpox were reported from 46 of 49 health districts in Burundi. This outbreak started in July 2024, cumulatively, 11,062 cases, of which 4,665 were laboratory confirmed, and one death (CFR: 0.01%) of mpox have been reported from 46 of 49 health districts in Burundi. Clade Ib was isolated from the sequenced samples.

**Cameroon:** Since the last update (25 February 2026), the MoH reported six new cases (two laboratory-confirmed) and no new deaths from two regions. This year, 131 cases (20 laboratory-confirmed), and no deaths of mpox have been reported from seven of the ten regions. Since the start of this outbreak (February 2024), a cumulative of 377 cases (41 laboratory-confirmed) and two deaths (CFR: 5.56%) among confirmed cases of mpox have been reported from nine of the ten regions in Cameroon. In comparison to epidemiological week 1 to 10 of 2025, a total of two cases of which none was laboratory confirmed and no deaths of mpox were reported in Cameroon. Clade Ia and II were isolated from sequenced samples.

**Comoros:** Since the last update (13 March 2026), the MoH reported one new laboratory-confirmed case and no deaths from Ngazidja region. This is a 35% average decrease in the number of new cases over the last four weeks. Cumulatively, 28 laboratory-confirmed mpox cases and no deaths have been reported from two of three regions in Comoros. A total of 64 samples were tested, resulting in a 100% testing rate and 44% positivity rate. Clade Ib was isolated from sequenced samples.

**DRC:** Since the last update (13 March 2026), the MoH reported 801 new cases (89 laboratory-confirmed) and no new deaths among confirmed cases of mpox from eight provinces. This year, 9,213 cases, of which 629 were laboratory confirmed, and one death among confirmed confirmed cases (CFR: 0.16%) of mpox were reported from eight provinces in DRC. Since the beginning of this outbreak (January 2024), 159,347 cases, of which 37,054 were laboratory-confirmed, and 2,267 deaths (CFR: 1.42%) among all cases and 127 deaths (CFR: 0.34%) among confirmed mpox cases, were reported from all 26 provinces in DRC. The clade Ia and Ib mpox strains were isolated from the confirmed cases.

**Kenya:** Since the last update (13 March 2025), the MoH reported 16 new laboratory-confirmed mpox cases and one new death (CFR: 6.25%) across multiple counties. This is a 67% average increase in confirmed cases in the last four weeks. This year, 128 laboratory-confirmed cases and seven deaths (CFR: 5.46%) of mpox have been reported from seven of forty-seven counties in Kenya. Since the beginning of this outbreak (July 2024), a total of 1,074 laboratory-confirmed mpox cases and 19 deaths (CFR: 1.76%) have been reported from 38 of 47 counties in Kenya. Since July 2024, a total of 2,734 samples were tested, resulting in a 39% positivity rate. Clade Ib was isolated from 94 sequenced samples.

**Liberia:** Since the last update (13 March 2026), the Liberia Public Health Institute reported 12 cases (3 laboratory-confirmed) and no deaths of mpox from five counties. This is a 109% average decrease in new confirmed cases over the last four weeks. This year, a total of 380 cases (123 laboratory confirmed) and no deaths of mpox were reported from Liberia. Since the start of the outbreak (March 2024), a cumulative of 3,210 cases (1,637 laboratory-confirmed), and eight deaths (CFR: 0.49%) of mpox have been reported from all 15 counties in Liberia. A total of 3,006 samples were tested, resulting in a 94% testing rate and a 51% positivity rate. Clade IIb was isolated from sequenced samples.

**Madagascar:** Since the last update (13 March 2026), the MoH reported 82 new laboratory-confirmed mpox cases and no new deaths from multiple regions. This is a 27% average increase in new cases over the last four weeks. This year, 561 laboratory-confirmed mpox cases and one death (CFR: 0.17%) have been reported from multiple regions. Since the start of this outbreak (December 2025), a total of 574 laboratory-confirmed mpox cases and one death (CFR: 0.17%) have been reported from 27/114 health districts in Madagascar. A total of 1,246 samples have been tested, resulting in a 46% positivity rate. Clade Ib was isolated from the sequenced samples.

**Malawi:** In epidemiological week 10, the MoH reported one new laboratory-confirmed case and no deaths from Lilongwe district. This is a 0.25% average increase in the number of new cases over the last four weeks. This year, a total of eight laboratory-confirmed mpox cases and no deaths have been reported from two of twenty-eight districts in Malawi. Clade Ib was isolated from sequenced samples.

**Mali:** Since the last update (13 March 2025), the MoH reported nine new cases, (three laboratory confirmed) and no deaths of mpox from Bamako region. This is a 67% average decrease in new cases over the last four weeks. This year, a total of 56 cases (18 confirmed) cases and two deaths (CFR: 11.1%) of mpox were reported from Mali. Since the beginning of this outbreak (November 2025), a total of 87 cases, of which 29 were laboratory-confirmed cases and two deaths (CFR: 6.9%) have been reported from six of twelve regions Mali. A total of 87 samples were tested resulting in a 100% testing rate and 33% positivity rate. Clade IIb was isolated from the confirmed cases.

**Nigeria:** Since the last update (5 March 2025), the Nigeria CDC reported four new cases (one laboratory-confirmed) and no deaths of mpox from five states. This year, a total of 164 cases (13 laboratory confirmed) and no deaths of mpox were reported in Nigeria. Nigeria is endemic for mpox, since 2017, a cumulative of 7,704 cases of which 1,723 were laboratory confirmed and 23 deaths (CFR: 1.3%) of mpox were reported in Nigeria.

**Uganda:** In epidemiological week 10, the MoH reported two new confirmed cases of mpox from two districts. This is a 25% average decrease in confirmed cases in the last four weeks. This year, 65 laboratory-confirmed cases and one death (CFR: 1.53%) of mpox were reported in Uganda. This outbreak started in July 2024. Cumulatively, 8,466 laboratory-confirmed cases and 52 deaths (CFR: 0.61%) of mpox have been reported from 121 of 146 districts in Uganda. A total of 17,886 cases were tested, resulting in a 100% testing rate and 47% test positivity rate. Clade Ib was isolated from all sequenced samples.

**\*In epidemiological week 9, a backlog of 11 new cases (10 laboratory-confirmed) and no new deaths of mpox from Burundi.**

**\*\* In epidemiological week 7-9, a backlog of 12 cases (3 laboratory-confirmed) and no deaths of mpox from Cameroon.**

**\*\*\*In epidemiological week 7-9, a backlog of two laboratory-confirmed) and no deaths of mpox from CAR.**

\*\*\*\*Between epidemiological weeks 6-9, a backlog of four confirmed cases were reported from Malawi.

\*\*\*\*Between epidemiological weeks 3-8, a backlog of six laboratory-confirmed cases were reported from South Sudan.

\*\*\*\*\*Between epidemiological weeks 1-9, a backlog of 17 confirmed cases were reported from Uganda.

**Note:** In 2025, a total of 141,999 cases of mpox, of which 43,041 were laboratory-confirmed, were reported from 29 AU MS. In addition, a total of 825 deaths (CFR: 0.58%) among all cases and 254 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) (72; 6), Congo (104; 1), Côte d'Ivoire (79; 1), Democratic Republic of Congo (DRC) (21,629; 99), Ethiopia (48; 1), Gambia (1; 0), Ghana (973; 7), Guinea (2,038; 6), Kenya (915; 11), Liberia (1,451; 8), Madagascar (13; 0), Malawi (147; 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 (38; 0), Tanzania (265; 0), Togo (90; 0), Uganda (7,073; 44), and Zambia (370; 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

**6,002** confirmed human case(s), **17,950** suspected human case(s)  
**484** human deaths (CFR: **2.02%**)

Agent/Pathogen	Cholera	First Reported	1-Jan-2026	Previous Report Update	13-Mar-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	14 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 23,952 cases (6,002 confirmed; 17,950 suspected) and 487 deaths (CFR: 2.01%) of cholera have been reported from 14 AU MS: Angola (390 cases; 9 deaths), Burundi (531; 2), DRC\* (15,100; 395), Ethiopia (15; 0), Malawi (90; 2), Mozambique (5,659; 57), Namibia (49; 0), Nigeria (251; 3), Rwanda \*\* (18; 0), Somalia \*\*\* (709; 0), South Sudan (455; 6), Tanzania (113; 2), Zambia (536; 9), and Zimbabwe (36; 2).

In epidemiological week 10, a total of 1,954 new cases and 45 new deaths of cholera were reported from seven AU MS: Angola, Burundi, DRC, Malawi, Mozambique, Zambia, and Zimbabwe.

**Angola:** Since the last update (13 March 2026), the MoH reported 51 new suspected cases and no new deaths of cholera from five provinces. This is a 73% average increase in the number of new cases in the last four weeks. This year, a total of 390 suspected cases and nine deaths (CFR: 2.31%) were reported from Angola. Since the beginning of this outbreak (January 2025), a total of 36,683 cases (937 confirmed; 35,746 suspected) and 904 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. Compared with the same period in 2025 (epidemiological week 1 to 10), 6,564 cases and 238 deaths (CFR: 3.63%) were reported from Angola, representing a 94% decrease in cases and a 96% decrease in deaths due to cholera.

**Burundi:** Since the last update (13 March 2026), the MoH reported 19 new confirmed cases and no new deaths of cholera from multiple provinces. This is a 22% average decrease in the number of new cases in the past four weeks. This year, a total of 531 confirmed cases and two deaths (CR: 0.38%) of cholera were reported from four of the eighteen provinces in Burundi. Females accounted for 50.8%, and children <5 years accounted for 17.4% of all cases. Compared with the same period in 2025 (epidemiological week 1 to 10), a total of 83 confirmed cholera cases and no deaths were reported in Burundi, representing a 5-fold increase in cases and a 2-fold increase in deaths.

**DRC:** Since the last update (13 March 2026), the MoH reported 1,294 new suspected cases and 39 new deaths (CER: 3.01%) of cholera from 13 provinces. This is a 2% average decrease in the number of cases in the past four weeks. This year, a total of 15,100 suspected cases and 395 deaths (CR: 2.62%) of cholera have been reported from 13 of 26 provinces in DRC. Compared with epidemiological week 1 to 10 of 2025, a total of 11,394 cholera cases and 237 deaths (CR: 2.08%) were reported in DRC, representing a 33% increase in cases and a 67% increase in deaths in the same period.

**Malawi:** Since the last update (13 March 2026), the MoH reported five new confirmed cases and no new deaths of cholera from two districts. This is an 11% average decrease in the number of cases in the past four weeks. This year, 90 confirmed cases and two deaths (CFR: 2.22%) of cholera have been reported from 14 of 29 districts in Malawi. Since the beginning of this outbreak (December 2025), a cumulative of 111 confirmed cases and two deaths (CFR: 1.80%) of cholera have been reported from 14 of 29 districts in Malawi. Compared with epidemiological week 1 to 10 of 2025, a total of 91 confirmed cholera cases and 3 deaths (CFR: 3.30%) were reported in Malawi, representing a 1% decrease in cases and a 33% decrease in deaths.

**Mozambique:** Since the last update (13 March 2026), the MoH reported 510 new confirmed cases and six new deaths (CFR: 1.18%) of cholera from eight provinces. This is a 13% average decrease in new cases over the last four weeks. This year, a total of 5,659 cases and 57 deaths (CFR: 1.01%) of cholera were reported from eight provinces. Since the beginning of this outbreak (September 2025), a total of 7,222 confirmed cases and 82 deaths (CFR: 1.14%) of cholera have been reported from eight of the ten provinces in Mozambique. Additionally, 74% of all deaths occurred in communities. Compared with the same period in 2025 (epidemiological week 1 to 10), a total of 817 confirmed cholera cases and 8 deaths (CFR: 0.98%) were reported in Mozambique, representing a 6-fold increase in cases and no change in deaths.

**Zambia:** Since the last update (13 March 2026), the MoH reported 75 new suspected cases and no new deaths of cholera from multiple provinces. This year, 536 cases (5 confirmed; 531 suspected) and nine deaths (CFR: 1.68%) of cholera have been reported from nine of the ten provinces in Zambia. This outbreak started in August 2025. Cumulatively, 1,161 cases (205 confirmed; 956 suspected) and 19 deaths (CFR: 1.64%) of cholera have been reported from nine of the ten provinces in Zambia. Compared with the same period in 2025 (epidemiological week 1 to 10), a total of 325 cholera cases and 9 deaths (CFR: 2.77%) were reported in Zambia, representing a 65% increase in cases and no change in deaths.

**Zimbabwe:** Since the last update (13 March 2026), the MoH reported one new confirmed case and no new deaths of cholera from Manicaland province. This outbreak started in January 2026. Cumulatively, 36 cases (13 confirmed; 23 suspected) and two deaths (CFR: 5.56%) of cholera have been reported from two of ten provinces in Zimbabwe. Compared with the same period in 2025 (epidemiological week 1 to 10), a total of 344 cholera cases and 11 deaths (CFR: 3.20%) were reported in Zimbabwe, representing a 90% decrease in cases and an 82% decrease in deaths. \*Between epidemiological week 1- 8, a backlog of five cases and one death of cholera were reported from Zimbabwe.

**\*After harmonization in epidemiological week 9, a backlog of 104 cases and three deaths were reported from DRC**

**\*\*Between epidemiological weeks 6-8, a backlog of two cases were reported from Rwanda**

**\*\*\*In epidemiological week 9, a backlog of 68 cases were reported from Somalia.**

**\*\*\*\*Between epidemiological week 1- 8, a backlog of six cases and one death of cholera were reported from Zimbabwe.**

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.

## Measles in Africa

**1,178** confirmed human case(s), **44,510** suspected human case(s)  
**347** human deaths (CFR: **0.76%**)

Agent/Pathogen	Measles	First Reported	1-Jan-2026	Previous Report Update	13-Mar-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	16 AU 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 45,688 cases (1,178 confirmed; 44,510 suspected) and 347 deaths (CFR: 0.76%) of measles have been reported from 16 AU MS: Burundi (513 cases; 1 death), Burkina Faso \*(2,562; 4), Cameroon (105; 1), Chad (1,887; 0), Congo (558; 6), DRC\*\* (31,850; 322), Gabon (10; 0), Guinea (71; 0), Kenya\*\*\* (350; 4), Liberia\*\*\*\* (2,317; 8), Malawi (656; 0), Mali (191; 0), Mozambique (126; 0), Senegal (33; 1), Somalia\*\*\*\*\* (3,796; 0), South Africa (420; 0), and Togo\*\*\*\*\* (243; 0).

In epidemiological week 10, a total of 3,607 new cases and 25 new deaths of measles have been reported from seven AU MS: Burundi, DRC, Liberia, Malawi, Mali, Mozambique and Senegal

**Burundi:** Since the last update (13 March 2026), the MoH reported 174 new suspected cases and no new deaths of measles, from multiple provinces. Cumulatively, 513 suspected cases and one death (CFR: 0.19%) of measles have been reported from four provinces in Burundi this year. In 2023, the national measles vaccination coverage among children <2 years in Burundi was 81%

**DRC:** Since the last update (13 March 2026), the MoH reported 2,969 new suspected cases and 22 new deaths (CR: 0.74%) of measles from 26 provinces. Since the beginning of this year, 31,850 new suspected cases and 322 deaths (CFR: 1.01%) of measles have been reported from all 26 provinces in DRC. This is a protracted outbreak that started in January 2022. Compared with epidemiological weeks 1 to 10 of 2025, a total of 11,474 measles cases and 152 deaths (CFR: 1.32%) were reported in DRC, representing a 178% increase in cases and a 112% increase in deaths in the same period. In 2018, the national measles vaccination coverage among children <5 years in DRC was 57%.

**Liberia:** In epidemiological week 10, the National Public Health Institute of Liberia reported 389 new suspected cases and two new deaths (CFR: 0.51%) of measles from 13 Counties. This year, a total of 2,317 cases (138 confirmed; 2,179 suspected) and eight deaths (CFR: 0.35%) of measles were reported from Liberia. Since the start of the outbreak (December 2021), a total of 18187 confirmed cases and 106 deaths have been reported from all 16 counties in Liberia.

**Malawi:** Since the last update (13 March 2026), the MoH reported 28 new suspected cases and no deaths of measles from 17 of 28 districts. This year, 543 (109 confirmed; 434 suspected) and no deaths of measles have been reported from 17 of 28 districts. In 2024, the national measles vaccination coverage among children <1 year in Malawi was 69%. \*After harmonization between epidemiological week 1-9, retraction of four confirmed and 81 suspected cases reported from Malawi.

**Mali:** Since the last update (13 March 2026), the MoH reported 27 cases (3 confirmed; 24 suspected) and no new deaths of measles from four regions. This is a 14% average increase in the number of new cases in the last four weeks. This year, 191 cases (57 confirmed; 134 suspected) and no deaths of measles were reported from all 11 regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,609 cases (662 confirmed; 974 suspected) and no deaths of measles have been reported from all 11 regions in Mali. In 2023, the national measles vaccination coverage among children <1 year in Mali was 98%.

**Mozambique:** Since the last update (13 March 2026), the MoH reported 17 new confirmed cases and no new deaths of measles from three provinces. This is a 101% average increase in the number of confirmed cases in the last four weeks. This year, a total of 126 confirmed cases and no deaths of measles were reported from six provinces. Since the beginning of this outbreak (July 2025), a total of 697 confirmed cases and one death (CFR: 0.14%) of measles have been reported from six of the ten provinces in Mozambique. In 2024, the national measles vaccination coverage (MCV1) was 44%.

**Senegal:** In epidemiological week 10, the MoH reported three confirmed cases and one deaths (CFR: 33%) of measles from Kedougou region. This year a total of 33 confirmed cases and one deaths (CFR: 3%) of measles from four regions in Senegal: Dakar (1 case; 0 deaths), Kaolack (1; 0), Kedougou (18; 1), and Tambacounda (10; 1). Of the confirmed cases, females accounted 55% for and the age group 15 - 20 year accounted for 45%. Seventy six percent were unvaccinated against measles.

**\*Between epidemiological week 1 – 8, a backlog of 2,562 cases and four deaths of measles were reported from Burkina Faso.**

**\*\*After harmonization in epidemiological week 9, a backlog of 218 cases and two deaths were reported from DRC.**

**\*\*\*In epidemiological week 9, a backlog of 79 cases and no deaths of measles were reported from Kenya.**

**\*\*\*\*In epidemiological week 9, a backlog of 423 cases and no deaths of measles were reported from Liberia.**

**In epidemiological week 9, a backlog of seven confirmed cases and no new deaths of measles were reported from Senegal.**

**\*\*\*\*\*In epidemiological week 9, a backlog of 463 cases and no deaths of measles were reported from Somalia.**

**\*\*\*\*\*In epidemiological week 9, a backlog of 20 suspected cases and no deaths of measles were reported from Togo**

**\*\*\*\*\*After harmonization between epidemiological week 1- 9, retraction of four confirmed and 81 suspected cases reported from Malawi.**

**In 2025**, a total of 195,211 cases (33,036 confirmed; 162,175 suspected) and 1,512 deaths (CFR: 0.77%) of measles have been reported from 21 AU MS: Cameroon (2,883 cases; 4 deaths), Chad (926; 1), DRC (85,210; 1,188), Ethiopia (4,429; 22), Guinea (6,640; 9), Kenya (61; 0), Liberia (1,559; 0), Malawi (167; 0), Mali (666; 0), Mauritania (102; 0), Morocco (44,372; 95), Mozambique (571; 1), Namibia (850; 2), Nigeria (26,866; 153), Rwanda (218; 0), Senegal (123; 0), Somalia (12,378; 14), South Africa (2,448; 0), Sudan (3,275; 22), Uganda (77; 1) and Zambia (1,082; 0).

#### **Response by MS/partner/Africa CDC:**

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

## Dengue in Africa

**201** confirmed human case(s), **457** suspected human case(s)  
**1** human deaths (**CFR: 0.15%**)

Agent/Pathogen	Dengue	First Reported	1-Jan-2026	Previous Report Update	13-Mar-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	4 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 658 cases (201 confirmed; 457 suspected) and one death (CFR: 0.15%) of dengue fever have been reported from three AU MS: CAR (1 case; 1 death), Mali (589; 1), Mauritania (33; 0), and Senegal (35; 0).

In epidemiological week 10, a total of 90 new cases and no deaths of dengue fever have been reported from Mali and Senegal

**Mali:** Since the last update (13 March 2026), the MoH reported 89 new cases (16 confirmed; 73 suspected) and no new deaths of dengue fever from four regions. This is a 122% average increase in the number of new cases in the last four weeks. This year, a total of 589 cases (132 confirmed; 457 suspected) and one deaths (CFR: 0.16%) of dengue were reported in Mali. Since the beginning of this outbreak (September 2023), a cumulative of 20,026 cases (2,727 confirmed; 17,299 suspected) and 75 deaths (CFR: 0.37%) of dengue fever have been reported from all 11 regions in Mali.

**Senegal:** In epidemiological week 10, the MoH reported one new confirmed case and no deaths of dengue fever from Fatick region, This year, a total of 35 confirmed cases and no deaths of dengue fever were reported from seven of 15 regions in Senegal. Of the confirmed cases, females accounted for 63% and age group 15 - 20 years accounted for 31%. Since the start of this outbreak (January 2025), a total of 6,703 confirmed cases and no deaths of dengue fever were reported from Senegal.

**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 the affected MS continues to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

## Moderate Risk Events

Non-Human Event AC38125

### H5N1 in South Africa

**0** human deaths  
**154,538** animal case(s)  
**102,875** susceptible case(s)  
**71,423** animal deaths (**CFR: 46.22%**)

Agent/Pathogen	H5N1	First Reported	4-Jan-2026	First Occurred	21-Jun-2025
Country	South Africa	Location	South Africa	Source	WOAH
GeoScope	MODERATE	Human Risk Assessment	N/A	Animal Risk Assessment	MODERATE

#### Update to Event:

In epidemiological week 10, the World Organization for Animal Health reported 154,180 new cases and 71,065 new deaths (CFR: 46.10%) of H5N1 in North West and Mpumalanga provinces, as well as in wild seabirds such as Hartlaub's gulls in the coastal region, and on the sub-Antarctic Marion Island. This year, South Africa reported new outbreaks of highly pathogenic avian influenza (HPAI) H5N1 in domestic and wild birds with recurrence of an eradicated strain. A cumulative of 154,538 cases and 71,423 deaths (CFR: 46.22%) of poultry have been reported from North West and Mpumalanga provinces. Previous outbreaks in 2023 occurred in the Western Cape and KwaZulu-Natal provinces.

#### Response by MS/partner/Africa CDC:

**South Africa:** The provincial veterinary authorities are culling and disposing off sick birds in affected firms.

- Epidemiological week 10 covers the period from 2 to 8 March 2026.

-In epidemiological week 9, a backlog of three suspected cases and no new deaths of Lassa fever were reported from Liberia.

-In epidemiological week 9, a backlog of 457 cases (65 confirmed; 392 suspected) and 10 new deaths of Lassa fever were reported from Nigeria

-In epidemiological week 52 of 2025, a backlog one confirmed case of CVDPV3 was reported from Nigeria.

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

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

-CFRs are calculated using confirmed cases and deaths among confirmed cases only, except for bacterial meningitis, cholera, measles, mpox, dengue, and yellow fever, where CFRs are 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: disease morbidity and mortality, the probability of spread within and to other MSs, and the availability of effective treatments, vaccines, or other control measures. An event risk level can be classified as low, moderate, high, or very high based on its score on the above criteria.

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