World Health Organization

Eastern Mediterranean Region

WHO Regional Office for the Eastern Mediterranean

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21 March–3 April 2024

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Contents

Public health events and emergencies dashboard

21 March–3 April 2024

5	0	0	84
Signals followed-up*	New events**	Closed events	Ongoing events

5	3	0	5	3	0
Grade 3	Grade 2	Grade 1	Protracted 3	Protracted 2	Protracted 1

16
Total graded emergencies ***

*Signals followed-up: Signals are data and/or information detected that represent a potential acute risk to human health. Signals followed-up are signals for which confirmation is requested and/or for which official government websites and reports are continuously monitored for further information.

**Events: An event is defined by article 1 of the International Health Regulations (2005) as "a manifestation of disease or an occurrence that creates a potential for disease". This can include events that are infectious, zoonotic, food safety-related, chemical, radiological or nuclear in origin and which are transmitted by people, vectors, animals, goods/food or the environment.

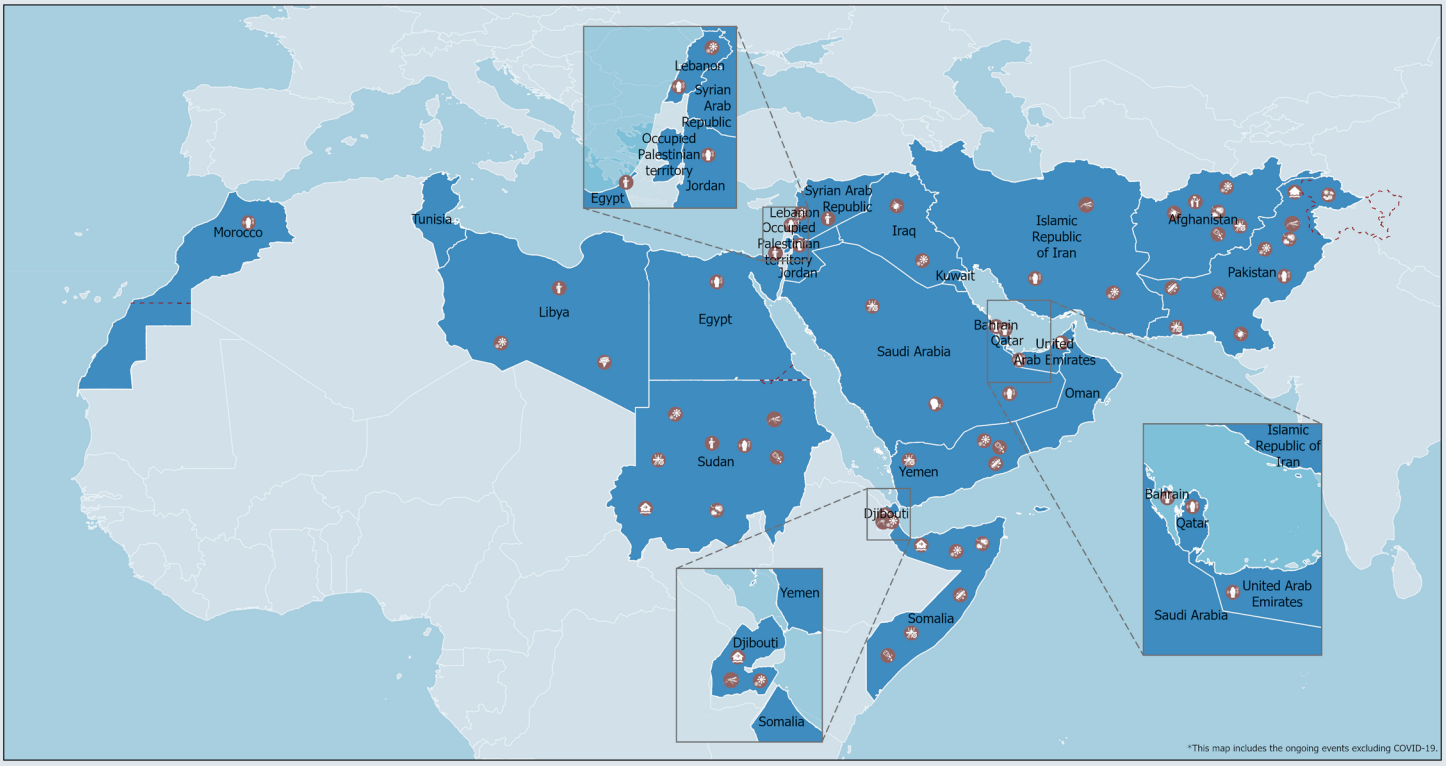
***Grading: Grading is an internal WHO process that triggers WHO emergency procedures and activities for the management of the response.
More information on WHO grading, according to the Emergency Response Framework

Multiple occurrences of the same graded emergency across different countries and territories are considered a single emergency. For instance, COVID-19 is a graded emergency in all 22 countries and territories of the WHO Eastern Mediterranean Region, but it counts as just one emergency when calculating the total number of graded emergencies in the Region.

Public health events and emergencies map

Geographical distribution of ongoing public health events and emergencies in the Eastern Mediterranean Region

As at 3 April 2024



- Armed conflict
- Acute watery diarrhoea/cholera
- Civil unrest
- Crimean-Congo haemorrhagic fever
- Circulating vaccine-derived poliovirus/wild poliovirus
- Dengue
- Diphtheria
- Drought
- Floods
- HIV
- Malaria
- Measles
- Middle East respiratory syndrome
- Mpox
- Storm
- Disputed boundaries
- WHO Eastern Mediterranean Region
- Other countries and territories

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Pakistan: measles

BACKGROUND

Measles is a highly contagious viral disease. It spreads easily when an infected person breathes, coughs or sneezes. It can cause severe disease, complications and even death. Measles can affect anyone, but it is most common in children. It infects the respiratory tract and then spreads throughout the body. Symptoms include a high fever, cough, runny nose and an all-over rash. Measles vaccination is safe and being vaccinated is the best way to prevent getting sick with measles or spreading it to other people.

Vaccination is the best way to prevent the spread of measles.
Photo credit: WHO/A. Caballero Reynolds

SITUATION UPDATE

Since the start of 2021, measles outbreaks have begun to appear in various low vaccination coverage areas in Pakistan. The administrative vaccination coverage for measles-containing vaccine first dose and measles-containing vaccine second dose in 2021 is estimated at 87% and 78% respectively. By 26 September 2022, 62 measles outbreaks had been reported in Pakistan, with 38 associated deaths.

In 2023, Pakistan reported 17 541 measles cases, with an incidence rate of 74.27 cases per 1 000 000 population. So far, there is no indication that any new strain of measles has been imported into Pakistan.

From 1 January to 23 March 2024 (epidemiological week 12), 12 560 suspected measles cases were reported, of which 5208 were confirmed. This gives an incidence rate of 21.22 cases per 1 000 000 population.

From week 1 to week 12 of 2024, 78 districts across four provinces of Pakistan reported measles outbreaks. Most (73%) of the suspected measles cases had never received a single dose of measles–rubella vaccine; 84% of the total cases were children aged under 5 years.

Most of the total suspected measles cases in the country were reported from Khyber Pakhtunkhwa (33% of cases), followed by Sindh (31%) and Punjab (27%). The incidence rates for the three provinces were 40.34, 18.22 and 4.3 per 1 000 000 population respectively.

RESPONSE ACTIVITIES

WHO is supporting the Government of Pakistan in its response to the measles outbreak through the following activities.

- Monitoring of the measles outbreak situation. Efforts will help to assess the status of the measles outbreak, identify high-risk areas and implement the appropriate response activities, including vaccination campaigns, to control the outbreak.
- Completion of a risk assessment for the measles outbreak to better identify vulnerable populations and areas, so as to prioritize interventions to prevent the spread of this highly contagious disease.
- WHO applied to the Measles & Rubella Partnership for support from its Outbreak Response Fund and received approval. This funding will help contribute to the outbreak response and support immunization campaigns.
- WHO will conduct an outbreak response immunization campaign from 20 to 25 May 2024. The response targets 23 districts in Balochistan, Khyber Pakhtunkhwa, Punjab, and Sindh provinces, two districts in Gilgit-Baltistan and the Federal Administrative Tribal Area.
- Ensuring optimal laboratory support to confirm measles cases, so the facilities are better equipped to detect and report measles cases.

Yemen: maximizing impact through geospatial analysis to improve microplanning

BACKGROUND

The ongoing humanitarian crisis in Yemen has severely disrupted health systems, making it difficult to implement and sustain comprehensive vaccination campaigns.

In addition, the emergencies in Yemen have complicated vaccination efforts – a situation that has contributed to multiple outbreaks of vaccine-preventable diseases.

Microplanning is crucial to both effectively respond to the complex situation in Yemen and implement the Reaching Every District strategy. Geospatial accessibility mapping, as the initial step in microplanning, plays a vital role in response activities. It helps identify areas with limited health care access to inform the prioritization of resource allocation and to plan interventions. To conduct geospatial accessibility mapping, WHO uses its own open-source tool, AccessMod 5.

By understanding the geographical context, health authorities can develop targeted strategies such as deploying mobile teams and establishing temporary vaccination sites. Geospatial accessibility mapping enhances the efficiency and impact of vaccination campaigns, by ensuring that resources reach the areas most in need. This, in turn, contributes to the goal of reaching every district with immunization services.

Fig. 1. Geospatial accessibility model, which is used to estimate travel time to health facilities

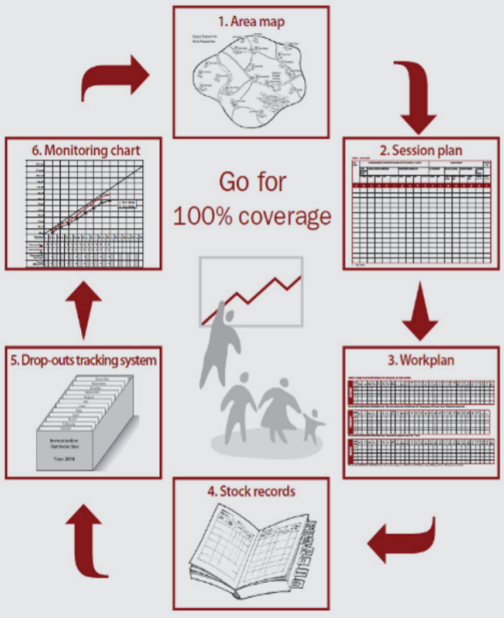
RESPONSE ACTIVITIES

A team from the WHO Regional Office for the Eastern Mediterranean is collaborating with the Health Resources and Services Availability Monitoring System (HeRAMS) and the University of Geneva to implement the Geospatial Analysis for Microplanning Quality Improvement project in Aden, Yemen.

The project will optimize the microplanning processes in health facilities by using information systems, including HeRAMS. The project will provide for the following improvements.

- **Enhanced facility engagement:** The project will help health facility staff and middle managers to actively engage in the microplanning process. This would support more efficient service delivery and greater ownership of, and commitment to implement, strategies and interventions.
- **Problem identification at populated and catchment areas:** Using geospatial analysis, the project will identify problems and challenges specific to populated and catchment areas, enabling targeted interventions.

Fig. 2. An excerpt from the *Microplanning for immunization service delivery using the Reaching Every District (RED) strategy handbook* used during the training



Yemen: maximizing impact through geospatial analysis to improve microplanning

- **Travel time determination:** Geospatial analysis will be employed to determine travel times to health facilities, facilitating better resource allocation and accessibility.
- **Population coverage assessment:** Through geospatial analysis, the project will assess population coverage, identifying areas with limited access to health services.
- **Stakeholder engagement:** Stakeholders' active engagement, including in decision-making processes, will be prioritized to foster collaboration and ensure comprehensive planning.
- **Coordination of activities:** The project will improve the coordination of activities, ensuring effective communication and cooperation among health care stakeholders, including mobile teams.
- **Enhanced vaccination campaigns:** Geospatial accessibility modelling allows for the identification of underserved or hard-to-reach areas where vaccination coverage may be low. By mapping the geographical distribution of populations, infrastructure and transportation networks, health authorities can identify locations that face barriers to access, such as remote areas or conflict-affected settings.

The implementation process for the Geospatial Analysis for Microplanning Quality Improvement project has four steps.

1. **Training of trainers:** A team from the Ministry of Public Health and Population in Aden received comprehensive training in March 2024, equipping the personnel with the knowledge and skills to implement the project successfully.
2. **Cascade training:** The trained team will share this new knowledge and expertise with other health workers, both in Merkhah As Sufla district, Shabwa governorate, and in Yafa'a district, Lahj governorate.
3. **Implementation in pilot districts:** The project will initially be implemented in pilot districts. Efforts will aim to understand the performance of health facilities and catchment areas; identify spatial patterns and trends; and work towards improving integrated health services to minimize missed opportunities. For example, children missing out on vaccination, despite being in contact with the health system, results in a failure to achieve optimal immunization coverage.
4. **Scale-up:** Provided the pilot is successful, the project will be scaled up to other districts. This will enable the widespread adoption of geospatially enabled microplanning and the development of more effective strategies.

This project's successful implementation and scaling would improve health outcomes and access to health services for communities across the targeted areas.

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade[a]	Cases/injuries	Deaths	Date of start[b]
Afghanistan	Biological	Acute watery diarrhoea (AWD)	Afghanistan Complex Emergencies, Protracted 3	26 597	13	22-Sep-21
In week 14 of 2024, 2044 cases of AWD with dehydration were reported from 133 districts, with no associated deaths. This represents an 11.3% week-on-week increase in cases. Since the start of 2024, a total of 26 597 cases of AWD with dehydration have been reported, with 13 associated deaths, giving a case fatality ratio of 0.1%. Of this total, 14 533 cases (54.6%) were children aged under 5 years; 13 268 cases (49.9%) were females.						
Afghanistan	Biological	COVID-19	COVID-19, Protracted 3	229 590	7965	24-Feb-20
As at 3 April 2024, 229 590 cases and 7965 deaths had been reported. A total of 1 340 648 polymerase chain reaction (PCR) tests had been conducted by the same date.						
Afghanistan	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	5-Jun-20
No new cases of cVDPV2 were reported from 1 January 2022 to 3 April 2024. WHO and the Global Polio Eradication Initiative are focusing on reaching every last child in Afghanistan with vaccines and on strengthening surveillance and technical support at all levels.						
Afghanistan	Societal	Civil unrest	Afghanistan Complex Emergencies, Protracted 3	NA	NA	30-Aug-21
Since 2023, no significant casualties or displacements have been recorded. Civil unrest incidents escalated in the country in 2023, however.						
Afghanistan	Biological	Crimean-Congo haemorrhagic fever	Afghanistan Complex Emergencies, Protracted 3	1255	114	5-Mar-23
In week 11 of 2024, 21 suspected cases of Crimean-Congo haemorrhagic fever were reported from five provinces, with no associated deaths. Of the total cases, seven (33.3%) were females; all cases were aged over 5 years Most cases (85.7%) were reported from three provinces; Kabul (10 cases; 47.6%), Kapisa (five cases; 23.8%) and Balkh (three cases; 14.3%). In total, from 1 January 2023 to 11 March 2024, 1255 suspected cases were reported from 26 provinces, with 114 associated deaths reported from 15 provinces.						
Afghanistan	Biological	Dengue	Afghanistan Complex Emergencies, Protracted 3	1801	1	14-Aug-22
The number of suspected dengue cases so far in 2024 is higher than the average of the years 2021 and 2022, and has surpassed the total suspected cases for the same period in 2023. During week 9 of 2024, Nangarhar province reported 57 suspected dengue cases, a significant increase on the 36 suspected cases reported the previous week. Since the start of 2024, 456 dengue cases have been reported, with no deaths. Of these cases, 60.7% were females and 0.7% were children aged under 5 years. In total, from 1 January 2023 to 11 March 2023, 1810 dengue cases were reported.						
Afghanistan	Biological	Malaria	Afghanistan Complex Emergencies, Protracted 3	4871	18	19-Apr-21
During week 6 of 2024, 1141 suspected measles cases, with six associated deaths, were reported. Since January 2024, 4871 suspected measles cases and 18 deaths have been reported, giving a case fatality ratio of 0.4%. Of this total, 3936 cases (80.8%) were children aged under 5 years; 2238 cases (45.9%) were females.						
Afghanistan	Biological	Measles	Afghanistan Complex Emergencies, Protracted 3	4871	18	19-Apr-21
Since January 2024, 4871 suspected measles cases and 18 deaths have been reported, giving a case fatality ratio of 0.4%. Of these cases, 3936 (80.8%) were children aged under 5 years and 2238 (45.9%) were females.						
Afghanistan	Biological	Wild poliovirus type 1	Afghanistan Complex Emergencies, Protracted 3	6	0	16-Mar-23
Wild poliovirus is endemic in Afghanistan. From 1 January 2023 to 11 March 2024, six cases were reported. WHO and the Global Polio Eradication Initiative are focusing on reaching all children in Afghanistan with vaccines and on strengthening surveillance and technical support at all levels.						
Bahrain	Biological	COVID-19	COVID-19, Protracted 3	696 614	1536	24-Feb-20
As at 3 April 2024, 696 614 COVID-19 cases and 1536 deaths had been reported. A total of 10 578 766 PCR tests had been conducted by the same date.						

[a] Grading is an internal WHO process that triggers WHO emergency procedures and activities for the management of the response.
More information on WHO grading, according to the Emergency Response Framework
Global graded emergencies: COVID-19 and mpox
Regional graded emergencies: circulating vaccine-derived poliovirus
Multiregional graded emergencies: dengue, cholera and the Greater Horn of Africa drought and food insecurity

[b] Date of start: The date the health event is created in the Event Management System (EMS).

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Bahrain	Biological	Mpox	Mpox, Protracted 2	2	0	18-Sep-22
As at 3 April 2024, two mpox cases had been reported, with no deaths.						
Djibouti	Biological	COVID-19	COVID-19, Protracted 3	15 690	189	18-Mar-20
As at 3 April 2024, 15 690 COVID-19 cases and 189 deaths had been reported. A total of 319 153 PCR tests had been conducted by the same date.						
Djibouti	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	NA	NA	21-May-23
It is estimated that 11% of the population of Djibouti is acutely food insecure.						
Djibouti	Biological	Malaria	Ungraded	35 795	NA	13-Feb-19
From January 2019 to September 2023, 254 776 confirmed malaria cases were reported. The highest peaks in confirmed cases were reported for the years 2020 (73 535 cases) and 2021 (59 176), with a marked decrease in confirmed cases in 2022 (40 542). In total, 32 121 confirmed cases were reported from January to September 2023. Malaria reporting in Djibouti is under revision to consolidate various sources of data.						
Djibouti	Biological	Measles	Ungraded	12	NA	26-Jun-22
As at 15 February 2023, 12 suspected measles cases had been reported, two of which were confirmed. All positive cases originated from the Djibouti region, while most of the suspected cases were reported from Dikhil.						
Egypt	Biological	COVID-19	COVID-19, Protracted 3	516 023	24 830	16-Feb-20
As at 3 April 2024, 516 023 COVID-19 cases had been reported, with 24 830 deaths. A total of 12 645 544 PCR tests had been conducted by the same date.						
Egypt	Biological	Mpox	Mpox, Protracted 2	3	0	27-Sep-22
As at 3 April 2024, three mpox cases had been reported, with no deaths. The most recent case was reported on 12 December 2022.						
Iran (Islamic Republic of)	Biological	COVID-19	COVID-19, Protracted 3	7 629 667	146 892	19-Feb-20
As at 3 April 2024, 7 629 667 COVID-19 cases had been reported, with 146 892 deaths.						
Iran (Islamic Republic of)	Biological	Malaria	Ungraded	4425	NA	12-Nov-22
As of 2022, malaria cases have shown an increasing trend, with 4425 reported cases, of which 1013 were locally transmitted. The reported cases were primarily concentrated around the border area in the Sistan and Baluchestan province of the Islamic Republic of Iran and the Balochistan province of Pakistan, an area currently facing a malaria outbreak. The surge in cases may be attributed to increased cross-border movement.						
Iran (Islamic Republic of)	Biological	Measles	Ungraded	32	3	6-Aug-21
In 2022, a measles outbreak was reported in the Islamic Republic of Iran, despite the disease's elimination in the country in 2019. Since the outbreak began, 32 cases and three associated deaths have been reported. The outbreak, especially in the Sistan and Baluchestan province of the Islamic Republic of Iran, is linked to the ongoing measles outbreak in neighbouring Pakistan.						
Iran (Islamic Republic of)	Biological	Mpox	Mpox, Protracted 2	1	0	18-Aug-22
As at 3 April 2024, only one mpox case had been reported, with no deaths. The most recent case was reported on 18 August 2023.						
Iraq	Biological	COVID-19	COVID-19, Protracted 3	2 465 545	25 375	24-Feb-20
As at 3 April 2024, 2 465 545 COVID-19 cases had been reported, with 25 375 deaths. A total of 19 550 473 PCR tests had been conducted by the same date.						
Iraq	Biological	Crimean-Congo haemorrhagic fever	Iraq Crimean-Congo Haemorrhagic Fever, Grade 2	112	5	21-Apr-22
By week 14 of 2024, 112 suspected and symptomatic Crimean-Congo haemorrhagic fever cases had been reported, with five deaths, giving a case fatality ratio of 9%. Among the suspected cases, 11 have been confirmed, with one death. This is a slight decrease on the same period in 2023, when 13 confirmed cases were reported.						

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Iraq	Biological	Measles	Iraq Complex Emergencies, Protracted 2	3655	2	19-Apr-23
From 1 January to 6 February 2024, 3655 measles cases were reported, with an incidence rate of 84 cases per 1 000 000 population, and two deaths. Iraq's health ministry will conduct a measles, mumps and rubella vaccination campaign for children aged under 5 years in schools in high-risk areas and populations. It will also enhance measles surveillance and conduct awareness and community engagement campaigns on measles.						
Jordan	Biological	COVID-19	COVID-19, Protracted 3	1 746 997	14 122	3-Feb-20
As at 3 April 2024, 1 746 997 COVID-19 cases had been reported, with 14 122 deaths. A total of 17 201 885 PCR tests had been conducted by the same date.						
Jordan	Biological	Mpox	Mpox, Protracted 2	1	0	9-Nov-22
As at 3 April 2024, only one mpox case had been reported, with no deaths. The most recent case was reported on 8 September 2022.						
Kuwait	Biological	COVID-19	COVID-19, Protracted 3	667 177	2570	24-Feb-20
As at 3 April 2024, 667 177 COVID-19 cases had been reported, with 2570 deaths. A total of 8 455 743 PCR tests had been conducted by the same date.						
Lebanon	Biological	COVID-19	COVID-19, Protracted 3	1 239 904	10 947	22-Feb-20
As at 3 April 2024, 1 239 904 COVID-19 cases had been reported, with 10 947 deaths. A total of 10 696 009 PCR tests had been conducted by the same date.						
Lebanon	Biological	Measles	Ungraded	14	0	4-Jul-23
From 4 January to 12 March 2024, 14 suspected measles cases, with two confirmed cases, were reported. From 17 February to 4 March 2024, seven new suspected cases were identified across various regions: two in Mount Lebanon, two in Nabatieh, and one each in Akkar, Bekaa, and North Lebanon. These cases spanned different age groups, and five of the individuals were unvaccinated.						
Lebanon	Biological	Mpox	Mpox, Protracted 2	27	0	20-Jun-22
As at 3 April 2024, 27 mpox cases had been reported, with no deaths. The most recent case was reported on 9 March 2023.						
Libya	Societal	Armed conflict	Libya Complex Emergencies, Protracted 2	NA	NA	9-Feb-18
A state of emergency was announced by the government on 2 September 2018 and there have been on-and-off conflicts since then, and into 2024. Since August 2023, however, no major armed conflicts have been reported.						
Libya	Biological	COVID-19	COVID-19, Protracted 3	507 269	6437	25-Mar-20
As at 3 April 2024, 507 269 confirmed COVID-19 cases had been reported, with 6437 deaths (case fatality ratio: 1.3%).						
Libya	Meteorological	Cataclysmic storm	Libya Tropical Storm, Grade 2	NA	5898	9-Dec-23
On 11 September 2023, heavy rains and flooding hit Libya, which caused extensive damage, especially in Derna city, displacing more than 44 800 residents and leading to 5898 fatalities. Emergency response teams used 182 sentinel sites for daily data sharing from the flood-hit areas, which reported 11 226 suspected cases of infectious diseases/medical conditions, including two associated deaths. More than 96% of the cases were either respiratory infections or diarrhoea. On 1 February 2024, the Libyan government declared a state of emergency in the city of Zliten, following a rise in groundwater levels, which, if not addressed, would worsen the damage caused by Tropical Storm Daniel.						
Libya	Biological	Measles	Libya Complex Emergencies, Protracted 2	1962	1	16-Mar-23
A measles outbreak has been spreading in Libya since early 2023, affecting six districts. Sabha has been the most affected district. As at week 49 of 2023, 1962 suspected measles and rubella cases had been reported, among which 251 measles cases and 196 rubella cases were confirmed, with one associated death. Since then and as at March 2024, reporting of data has been intermittent.						
Morocco	Biological	COVID-19	COVID-19, Protracted 3	1 277 956	16 298	3-Mar-20
As at 3 April 2024, 1 277 956 COVID-19 cases and 16 298 deaths had been reported. A total of 13 068 242 PCR tests had been conducted by the same date.						
Morocco	Biological	Mpox	Mpox, Protracted 2	3	0	6-Feb-22
As at 3 April 2024, three mpox cases had been reported, with no deaths. The most recent case was reported on 20 August 2022.						

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Occupied Palestinian territory	Societal	Armed conflict	Israel/oPt Hostilities, Grade 3	75 577	32 975	7-Oct-23
Ongoing hostilities in the occupied Palestinian territory since 7 October 2023 have compounded an existing health care crisis. As at 3 April 2024, WHO had reported 435 attacks on health care in the Gaza Strip. These attacks killed 722 people and injured 902 people. Further, they affected 104 ambulances and 100 health facilities. The Palestinian Ministry of Health reported that over 32 975 people had been killed and more than 75 577 injured by 3 April 2024. The Gaza Strip bears the highest casualties, including children, women and elderly people.						
Occupied Palestinian territory	Biological	COVID-19	COVID-19, Protracted 3	703 228	5708	3-Dec-20
As at 3 April 2024, 703 228 COVID-19 cases, with 5708 deaths, had been reported. A total of 3 477 872 PCR tests had been conducted by the same date.						
Oman	Biological	COVID-19	COVID-19, Protracted 3	399 449	4628	24-Feb-20
As at 3 April 2024, 399 449 COVID-19 cases and 4628 deaths had been reported. A total of 3 737 036 PCR tests had been conducted by the same date.						
Pakistan	Biological	COVID-19	COVID-19, Protracted 3	1 580 631	30 656	27-Feb-20
As at 3 April 2024, 1 580 631 COVID-19 cases and 30 656 deaths had been reported. A total of 31 656 354 PCR tests had been conducted by the same date.						
Pakistan	Biological	Cholera	Multi-region Cholera, Grade 3	118 490	0	17-Apr-22
According to the weekly Integrated Disease Surveillance and Response bulletin of the National Institute of Health of Pakistan, the country reported 118 490 suspected cholera cases, including nine confirmed cases (all from Sindh), with no deaths, from 1 January to 17 March 2024.						
Pakistan	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	11-Dec-19
As at 3 April 2024, zero cVDPV2 cases or environmental samples had been reported in Pakistan since 2022.						
Pakistan	Biological	Crimean-Congo haemorrhagic fever	Ungraded	19	4	11-Dec-23
As at 3 April 2024, 19 confirmed cases of Crimean-Congo haemorrhagic fever had been reported – of which 18 cases were health workers – including four deaths.						
Pakistan	Biological	Dengue	Multi-region Dengue, Grade 3	382	0	9-Apr-23
From 1 January to 16 March 2024, 382 confirmed dengue cases were reported. Most of the cases were reported from Sindh province.						
Pakistan	Biological	Diphtheria	Ungraded	85	0	11-Feb-23
From 1 January to 2 March 2024, 85 suspected diphtheria cases were reported, with no deaths. This marks a continued decline in cases since week 46 of 2023. In response, more than 1.9 million people across Balochistan, Khyber Pakhtunkhwa, Punjab and Sindh provinces received a diphtheria-containing vaccine.						
Pakistan	Hydrological	Flood	Ungraded	NA	43	3-Jun-24
From 25 February to 4 March 2024, relentless rainfall and snowfall affected the western regions of Pakistan, especially Balochistan, Gilgit-Baltistan and Khyber Pakhtunkhwa. The severe weather resulted in significant displacements and damages: in Balochistan, 9000 people were displaced and 43 fatalities recorded. Additionally, 1675 houses were destroyed across these three affected regions.						
Pakistan	Biological	HIV infection-AIDS	Ungraded	5234	590	5-Jul-19
Since the begining of this outbreak in 2019 to 31 December 2023, 5234 cases of HIV/AIDS were registered in three hospitals, with 590 deaths (case fatality ratio: 11%). In 2023 alone, 1255 cases were registered. The WHO Regional Office for the Eastern Mediterranean is analysing 2023 data, and the WHO Country Office in Pakistan is closely following the HIV/AIDS situation.						
Pakistan	Biological	Malaria	Ungraded	158 616	NA	23-Sep-22
In January and February 2024, 158 616 confirmed cases of malaria were reported, with no associated deaths. This is a decrease on the 1 836 605 cases reported in the same period of 2023. The number of cases began to rise sharply in May 2023, and reached its highest level in August, and then steadily declined for the remainder of the year.						
Pakistan	Biological	Measles	Ungraded	12 560	NA	26-Jan-21
From 1 January to 24 March 2024, 12 560 cases of measles were reported, of which 5208 cases were confirmed, giving an incidence rate of 21.22 cases per 1 000 000 population. The highest proportions of suspected cases were reported in Khyber Pakhtunkhwa (33%), Sindh (31%) and Punjab (27%) provinces, with respective incidence rates of 40.34, 18.22 and 4.3 per 1 000 000 population.						
Pakistan	Biological	Mpox	Mpox, Protracted 2	7	0	21-Apr-23
As at 3 April 2024, seven mpox cases had been reported, with no deaths. The most recent case was reported on 21 September 2023.						

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Pakistan	Biological	Wild poliovirus type 1 (WPV1)	Ungraded	8	0	16-Mar-23
Wild poliovirus is endemic in Pakistan, and instances are reported retrospectively. From 1 January 2023 to 17 March 2024, eight confirmed WPV1 cases were reported. WHO and the Global Polio Eradication Initiative are focusing on reaching every last child in Pakistan with vaccines, and strengthening surveillance and technical support at all levels.						
Qatar	Biological	COVID-19	COVID-19, Protracted 3	514 524	690	3-Jan-20
As at 3 April 2024, there had been 514 524 confirmed COVID-19 cases, with 690 deaths, giving a case fatality ratio of 0.1%.						
Qatar	Biological	Mpox	Mpox, Protracted 2	5	0	25-Jul-22
As at 3 April 2024, five mpox cases had been reported, with no deaths. The most recent case was reported on 20 September 2022.						
Saudi Arabia	Biological	COVID-19	COVID-19, Protracted 3	841 469	9646	3-Mar-20
As at 3 April 2024, 841 469 COVID-19 cases, with 9646 deaths, had been reported. A total of 45 484 848 PCR tests had been conducted by the same date.						
Saudi Arabia	Biological	Dengue	Multi-region, Dengue Grade 3	14 055	0	2-May-23
As at 20 December 2023, 14 055 confirmed dengue cases had been reported, with no deaths.						
Saudi Arabia	Biological	Middle East respiratory syndrome (MERS)	Ungraded	2200	858	11-May-12
Since the first report of MERS in Saudi Arabia in 2012, the country has reported 2200 MERS cases in total, including 858 deaths. These figures are correct as at 3 April 2024.						
Saudi Arabia	Biological	Mpox	Mpox, Protracted 2	8	0	17-Jul-22
As at 3 April 2024, eight mpox cases had been reported, with no deaths. The most recent case was reported on 30 August 2022.						
Somalia	Biological	COVID-19	COVID-19, Protracted 3	27 334	1361	16-Mar-20
As at 3 April 2024, 27 334 confirmed COVID-19 cases had been reported, with 1361 deaths, giving a case fatality ratio of 5%.						
Somalia	Biological	Cholera	Multi-region Cholera, Grade 3	4956	60	2-Aug-18
As at 17 March 2024, 4956 cholera cases had been reported, of which 59% were children aged under 5 years. By the same date, there had been 60 associated deaths in 2024. The cholera outbreak has affected various regions, with a notable number of cases reported from Banaadir in weeks 1 to 11 of 2024.						
Somalia	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	28	0	18-Aug-20
From 5 February to 10 March 2024, one new cVDPV2 case was reported. In total, 28 cases had been reported by 10 March 2024 since the start of the outbreak in August 2020. The most recent case was reported from Bardere district, Gedo province, with the date of onset given as 20 January 2024.						
Somalia	Biological	Dengue	Multi-region Dengue, Grade 3	1863	NA	5-Oct-23
As at 30 November 2023, 1863 suspected dengue cases had been reported, of which 668 cases were confirmed. The WHO Country Office in Somalia drafted a detailed work plan for dengue and other arbovirus infections. The activities will be implemented in an integrated approach since Somalia has adopted integrated disease surveillance and response.						
Somalia	Biological	Diphtheria	Somalia Complex Emergencies, Protracted 3	385	62	29-Jan-24
A diphtheria outbreak in Somalia started in Hirshabelle state in July 2023 and then spread, in September 2023, to Puntland. From July 2023 to 30 March 2024, a total of 385 suspected cases and 62 deaths were reported. Recently, suspected cases have also been reported from Banaadir and Jubaland states. WHO planned to provide 1000 antitoxin doses in early May.						
Somalia	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	NA	118	6-Feb-22
The drought situation in Somalia is extremely serious. The country marked its fifth consecutive failed rainy season at the start of 2023. This has led to an acutely food-insecure population and the worsening of food security and nutrition outcomes, affecting more than 7.8 million people. Later in 2023, in October, Somalia finally experienced rain; however, this took the form of El Niño floods that hit the country. The flooding caused serious damage instead of improving the drought impacts. According to the Somali Disaster Management Agency, as at 10 December 2023, 2.48 million people had been affected by the drought, with 899 000 people displaced and 118 fatalities across the country.						

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Somalia	Biological	Measles	Somalia Complex Emergencies, Protracted 3	3795	NA	3-Sep-22
The Integrated Disease Surveillance and Response report indicates 372 suspected measles cases, with two associated deaths, in week 10 of 2024. As at 10 March 2024, a total of 3795 suspected cases of measles had been reported through the surveillance system in drought-affected districts.						
Sudan	Societal	Armed conflict	Sudan Conflict and Complex Emergency, Grade 3	33 000	15 550	22-Jan-21
Since the outbreak of the current conflict in Sudan on 15 April 2023, at least 15 550 people have been killed and 33 000 injured; establishing the exact numbers of civilian casualties and injuries has been challenging.						
Sudan	Biological	COVID-19	COVID-19, Protracted 3	63 993	5046	15-Mar-20
As at 3 April 2024, 63 993 COVID-19 cases and 5046 deaths had been reported. A total of 479 278 PCR tests had been conducted by the same date.						
Sudan	Biological	Cholera	Multi-region Cholera, Grade 3	10 802	291	5-Oct-23
From 28 June 2023 to 3 April 2024, 10 802 cholera cases, including 291 deaths (case fatality ratio: 2.7%), were reported across nine states and 48 localities. Suspected cholera cases have shown a decreasing trend since the start of December 2023 and continuing into 2024.						
Sudan	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	8-Oct-20
No new cVDPV isolates were reported in week 14 of 2024. As at 3 April 2024, zero cVDPV2 cases had been reported in Sudan in 2024.						
Sudan	Biological	Dengue	Multi-region Dengue, Grade 3	5525	55	20-Oct-21
Since week 44 of 2023, 5525 dengue cases have been reported, with 55 deaths (case fatality ratio: 0.99%; attack rate: 3.9 cases per 10 000 population). Forty-four localities in 10 states have reported dengue cases. Gedaref state reported the highest share of cases (58%), followed by North Darfur (17%), North Kordofan (13%) and Kassala (7%).						
Sudan	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	NA	NA	21-May-23
Prolonged dry spells and crop failures across 14 states in Sudan are affecting more than 5.6 million people. Over 22 million people – half of the Sudanese population – live in the 115 affected areas, and 3.1 million people need short- to long-term assistance. The ongoing war has triggered population displacement, which, combined with a major deterioration of the economy, has led to acute food insecurity at levels higher than usual. As at 21 March 2024, high rates of acute food insecurity are observed in North Darfur (25%), West Darfur (22%), North Kordofan (20%), South Kordofan (20%), Gedaref (19%) and central, eastern and southern states.						
Sudan	Biological	Malaria	Sudan Conflict and Complex Emergency, Grade 3	1 467 006	215	10-Sep-22
As at 10 November 2023, 1 467 006 malaria cases had been reported, with 215 deaths.						
Sudan	Biological	Measles	Sudan Conflict and Complex Emergency, Grade 3	4039	107	8-Jan-21
Measles cases continue to be reported from 12 states in Sudan, reaching 4039 cases and 107 deaths by 31 January 2024, with a case fatality ratio of 2.65%.						
Sudan	Biological	Mpox	Mpox, Protracted 2	19	1	31-Jul-22
As at 3 April 2024, 19 mpox cases and one death had been reported. The most recent case was reported on 5 April 2023.						
Syrian Arab Republic	Societal	Armed conflict	Syrian Arab Republic Complex Emergencies, Protracted 3	NA	NA	27-Jun-18
The security situation within the Syrian Arab Republic remains unstable.						
Syrian Arab Republic	Biological	COVID-19	COVID-19, Protracted 3	57 423	3163	23-Mar-20
As at 3 April 2024, 57 423 COVID-19 cases and 3163 deaths had been reported. A total of 202 513 PCR tests had been conducted by the same date.						

Ongoing public health events and emergencies

As at 3 April 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Tunisia	Biological	COVID-19	COVID-19, Protracted 3	1 153 361	29 423	3-Feb-20
As at 3 April 2024, 1 153 361 COVID-19 cases and 29 423 deaths had been reported. A total of 5 013 383 PCR tests had been conducted by the same date.						
United Arab Emirates	Biological	COVID-19	COVID-19, Protracted 3	1 067 030	2349	29-Jan-20
As at 3 April 2024, 1 067 030 COVID-19 cases and 2349 deaths had been reported. A total of 200 761 593 PCR tests had been conducted by the same date.						
United Arab Emirates	Biological	Middle East respiratory syndrome (MERS)	Ungraded	1	0	7-Oct-23
On 10 July 2023, a 28-year-old male MERS-CoV case was reported in the United Arab Emirates. Investigation revealed no camel or sick person contact. Immediate actions included contact tracing, incident reporting, and notifying relevant authorities.						
United Arab Emirates	Biological	Mpox	Mpox, Protracted 2	16	0	25-May-22
As at 3 April 2024, 16 mpox cases had been reported, with no deaths. The most recent case was reported on 24 July 2022.						
Yemen	Biological	COVID-19	COVID-19, Protracted 3	11 945	2159	4-Oct-20
As at 3 April 2024, 11 945 COVID-19 cases and 2159 deaths had been reported. A total of 329 592 PCR tests had been conducted by the same date.						
Yemen	Biological	Circulating vaccine-derived poliovirus type 1 (cVDPV1)	Polio (cVDPV), Grade 2	0	0	29-May-20
As at 3 April 2024, there was no evidence of cVDPV1 in the country. The Global Polio Eradication Initiative and partners are supporting the local public health authorities in field investigation and field monitoring.						
Yemen	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	1	0	30-Nov-21
As at 3 April 2024, one cVDPV2 case had been reported in Yemen in 2024.						
Yemen	Biological	Dengue	Multi-Region Dengue, Grade 3	3131	2	25-Jan-24
From week 1 to week 8 of 2024, 3131 dengue cases and two deaths (case fatality ratio: 0.06%) were reported. The most affected areas were Al Hudaydah (43.6% of total cases), Taiz (14.1%), Abyan (9.7%), Shabwa (9.4%) and Hajjah (6.9%). Most cases were males (62%), with the most affected age group young people aged 15 to 29 years (30.6%). Of the 3080 rapid diagnostic tests performed, 433 were positive (14% positivity rate). The outbreak in Sa'ada governorate has been resolved.						
Yemen	Biological	Diphtheria	Yemen Complex Emergencies, Protracted 3	318	9	25-Jan-24
By week 8 of 2024, 318 suspected diphtheria cases, including nine deaths, had been reported from the northern and southern governorates. This marks a significant increase on the 265 cases reported in the same period of 2023. Most of these cases (70%) were reported from northern Yemen: particularly Abyan, Al Hudaydah, Dhamar, Hajjah and Taiz, with Al Hudaydah alone accounting for 16.4% of all cases. About 75% of the total cases have been clinically diagnosed, yet a concerning 77.6% of affected individuals have not been vaccinated.						
Yemen	Biological	Measles	Yemen Complex Emergencies, Protracted 3	7514	7	29-Mar-21
By week 8 of 2024, 7514 suspected measles cases and seven deaths had been reported. This shows a slight year-on-year decrease from the 7905 cases reported in the same period of 2023. The case fatality ratio stands at 0.09%, with an attack rate of 24.4 cases per 100 000 population. Northern Yemen remains the most affected region, accounting for 69.2% of the reported cases, with the highest incidences in Al Hudaydah, Amran, Lahj, Sa'ada and Taiz.						

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