

## I. Key Highlights

- ◆ WHO proposed the scale up of the response activities to yellow fever in Angola. This will include ensuring a permanent presence in high risk provinces, Planning of scaling up is under way
- ◆ A progress review mission of the yellow fever response is being planned by WHO and partners, following Emergency Committee recommendations
- ◆ IOM and UNHCR were briefed by yellow fever partners in relation with the observation of possible refugee and immigrant movements among the borders of Lunda Norte province, mainly at Cafunfu (Cuango) and Chitato border districts. Both organizations will join the partners meeting weekly
- ◆ New cases with local transmission were documented in Humpata Cuango, Cacuso, and Malange districts .
- ◆ 1,035,792 doses of yellow fever vaccine were approved by ICG for vaccination in Lunda Norte and Malanje. The first 587,000 is expected on Tuesday 7th June and will be deployed to Lunda Norte immediately, the remaining 448,792 doses will arrive on Thursday the 9th of June
- ◆ The total number of notified cases increases from week 15 onwards, while the number of laboratory confirmed cases remains stable. This is partially attributed to intensification of surveillance activities in most provinces
- ◆ The IMS performed a planning exercise with the IM and WR to prioritize districts for intervention and vaccination

## II. Epidemiological Situation as of 3 June 2016

⇒ In week 21:

- **193** new cases were reported, samples were taken of which **20** were confirmed. **10** deaths were reported;
- **13** districts from **13** provinces reported cases. There is no new provinces with confirmed cases. The province of Cabinda has a new district with a confirmed case.
- **4** districts were documented as new local transmission namely; (Cahama, Cuanhama, Cazengo and Cacuso) as in (Table 4.1 & 4.2).

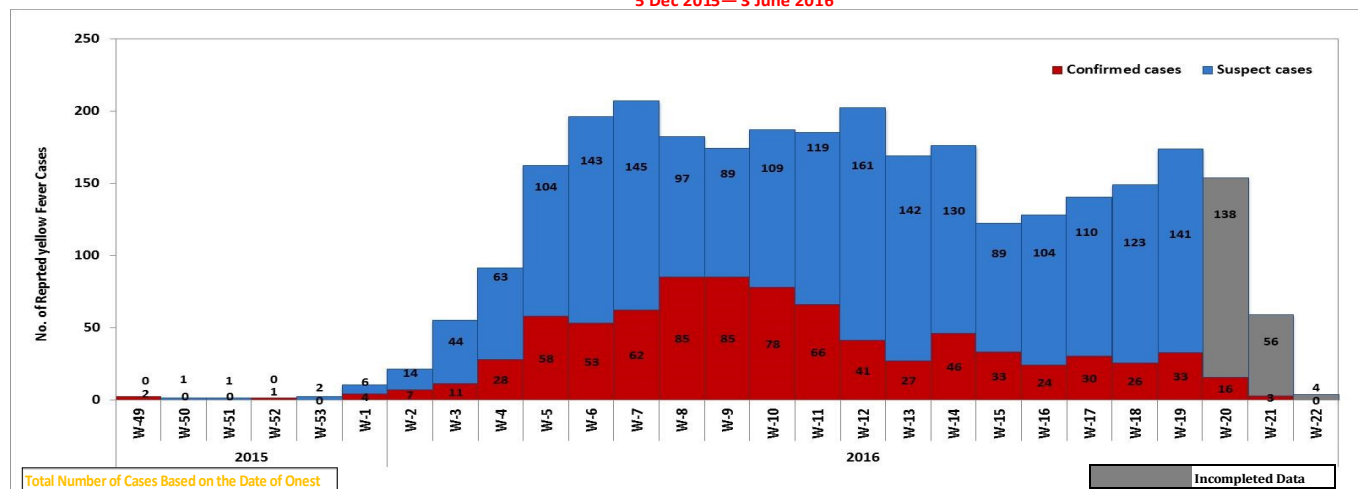
⇒ Cumulatively:

- A total of **2,945** suspected cases have been reported of which **819** were confirmed cases and **108** confirmed deaths out of **329** total deaths.
- Laboratory confirmation was reported for **16** provinces out of **18** included **77** districts out of **166** in the country (see table 2). However, Luanda province has the majority of the confirmed cases **85.8%** (**482**), (Table 2)
- Local transmission have been documented in **31** districts from **11** provinces. Further details in (Table 4.1 & 4.2).

Table 1: National Summary of Yellow Fever Outbreak

Indicator	Number
<b>Yellow Fever Outbreak Summary from 28 May — 3 June 2016, (W22)</b>	
Reported Cases	193
Samples tested	193
Confirmed cases	20
Total Deaths	10
Total provinces that reported cases	13
New provinces with confirmed cases	0
Total Districts with reported cases	13
New districts with confirmed cases	1
New districts with documented local transmission	4
<b>Yellow Fever Outbreak Summary from 5 Dec 2015 — 3 June 2016</b>	
Total cases reported to central level	2,954
Total Samples Tested	2,400
Total confirmed cases	819
Total deaths	328
Total deaths among confirmed cases	108
Total districts that have reported cases	116
Total districts with confirmed cases	77
Total provinces that have reported cases	18
Total provinces with confirmed cases	16
Total districts with documented local transmission	31
Total provinces with documented local transmission	11
Total number of districts in Angola	166
Total number of provinces in Angola	18

Fig.1: National Trend of Yellow Fever Suspected and Confirmed Cases in Angola 5 Dec 2015 — 3 June 2016



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Fig.3: Epi Weekly Trend of Yellow Fever Suspected and Confirmed Cases in Luanda  
5 Dec 2015— 3 June 2016

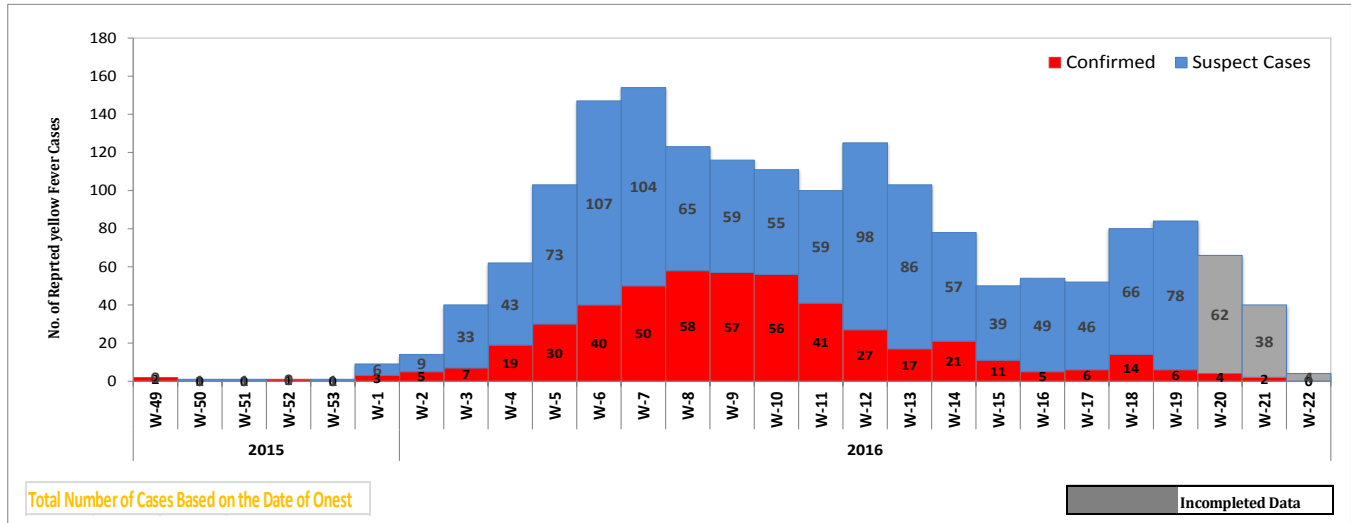


Table 2: Provinces with Yellow Fever Laboratory Confirmation at 3 June 2016

Province	Cumulative (5 Dec 2015— 3 June 2016)					Discarded, Lab with Vacc. History
	Notified Cases	Tested		Confirmed		
		No	%	No	%	
Bengo	21	21	100.0	5	23.8	0
Benguela	236	225	95.3	96	40.7	11
Bie	25	22	88.0	16	64.0	0
Cabinda	28	18	64.3	1	3.6	0
Cuando Cubango	4	3	75.0	1	25.0	0
Cuanza Norte	32	21	65.6	4	12.5	0
Cuanza Sul	89	85	95.5	16	18.0	0
Cunene	44	44	100.0	14	31.8	0
Huambo	497	439	88.3	124	24.9	15
Huila	135	80	59.3	33	24.4	0
Luanda	1721	1331	77.3	482	28.0	66
Lunda Norte	18	17	94.4	8	44.4	0
Lunda Sul	6	5	83.3	0	0.0	0
Malange	19	19	100.0	5	26.3	0
Moxico	4	4	100.0	0	0.0	0
Namibe	10	10	100.0	2	20.0	0
Uige	53	46	86.8	9	17.0	0
Zaire	12	10	83.3	3	25.0	0
<b>TOTAL</b>	<b>2954</b>	<b>2400</b>	<b>81.2</b>	<b>819</b>	<b>27.7</b>	<b>92</b>

Fig.2: Age-Groups Distribution of Yellow Fever Cases in Angola  
5 Dec 2015— 3 June 2016

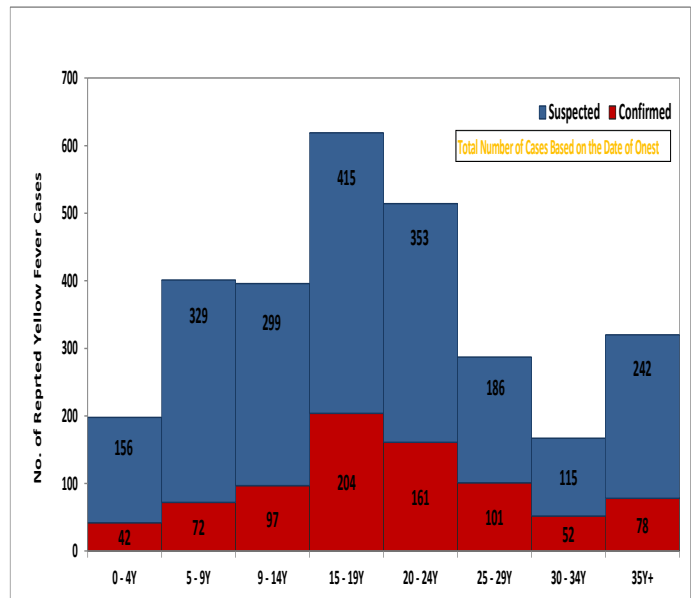
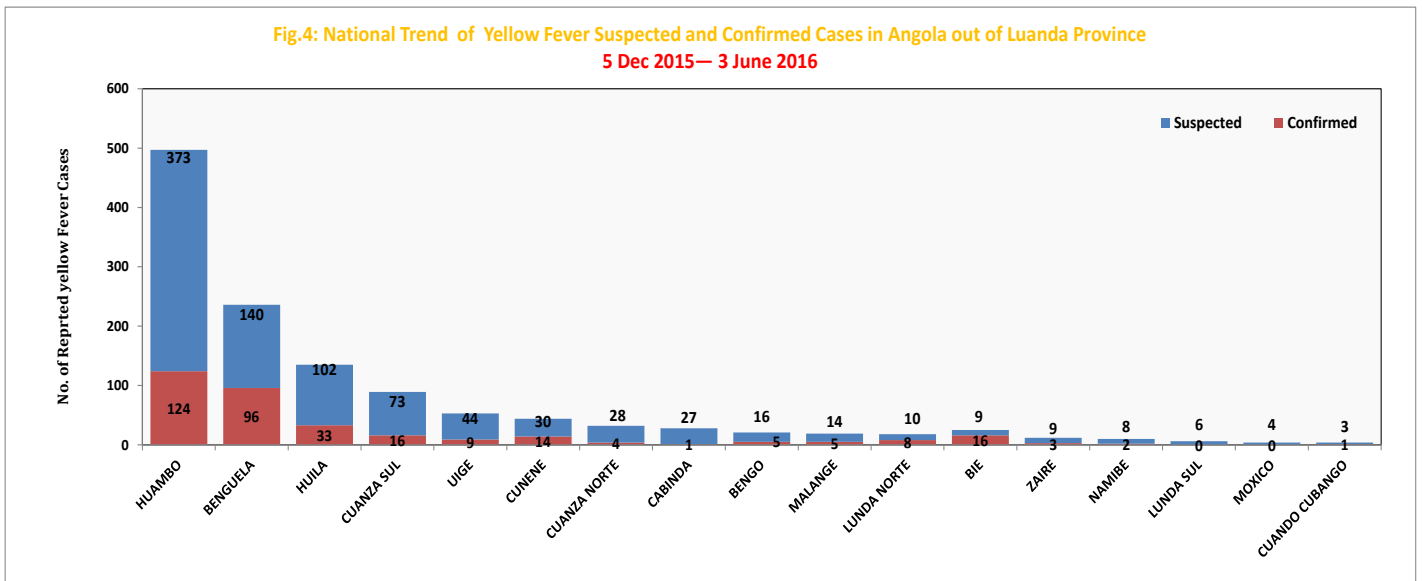


Fig.4: National Trend of Yellow Fever Suspected and Confirmed Cases in Angola out of Luanda Province  
5 Dec 2015— 3 June 2016

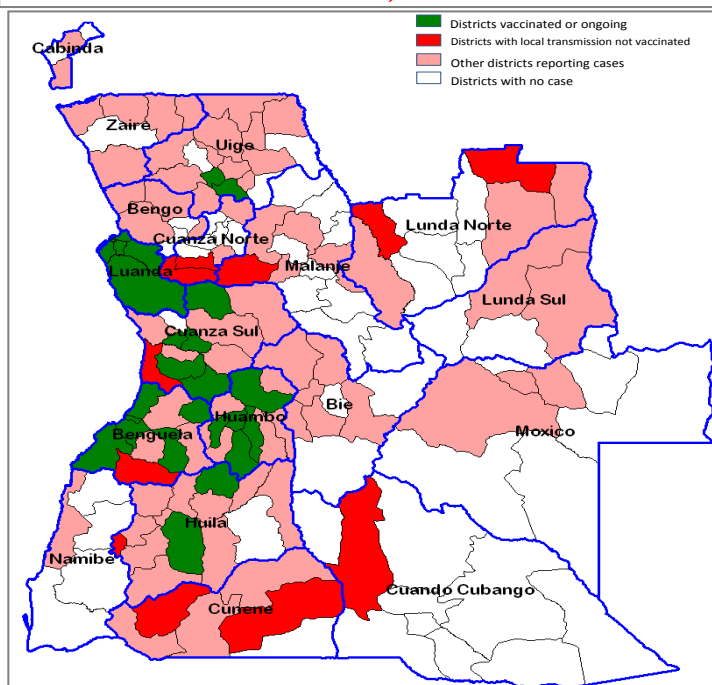


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Table 3: Distribution of Vaccination Coverage and YF Local Transmission Cases in Angola, as of 3 June 2016

Province	Target population	Launching date	Population vaccinated	Administrative coverage (%)
Cazenga	867,659	29-Feb-16	817,537	94%
Viana	1,535,102	2-Feb-16	2,123,623	138%
Cacuaco	887,829	29-Feb-16	769,274	87%
K. Kiayi	640,006	10-Mar-16	213,263	33%
Belas	1,071,662	19-Feb-16	1,287,998	120%
Sambizanga	433,970	20-Mar-16	136,087	31%
Maianga	660,884	14-Mar-16	481,904	73%
Rangel	136,031	28-Mar-16	43,366	32%
Ingombota	89,556	24-Mar-16	61,342	68%
Samba	160,174	24-Mar-16	55,358	35%
Icolo e Bengo	75,103	28-Mar-16	38,091	51%
Kissama	25,240	28-Mar-16	13,774	55%
<b>Luanda</b>	<b>6,583,216</b>		<b>6,041,617</b>	<b>92%</b>
Baia Farta	103,623	16-May-16	105,116	101%
Balombo	99,932	16-May-16	101,700	102%
Benguela	531,744	12-Apr-16	489,449	92%
Catumbela	173,601	13-Apr-16	188,421	109%
Cubal	289,703	16-May-16	297,264	103%
Lobito	335,601	13-Apr-16	356,144	106%
Chorongoi	81,977			
<b>Benguela</b>	<b>1,534,204</b>		<b>1,538,094</b>	<b>100%</b>
Bailundo	283,887	16-May-16	267,597	94%
Caala	268,734	13-Apr-16	222,811	83%
Ekunha	79,334	16-May-16	74,777	94%
Huambo	689,301	13-Apr-16	558,150	81%
Ukuma	42,950	16-May-16	47,348	110%
<b>Huambo</b>	<b>1,364,206</b>		<b>1,170,683</b>	<b>86%</b>
Ambaca	61,209			
Cazengo	166,860			
<b>Kuanza Norte</b>	<b>228,069</b>		<b>0</b>	<b>0%</b>
Amboim	236,339	16-May-16	190,018	80%
Cassongue	145,579	16-May-16	72,373	50%
Ebo	159,024	16-May-16	138,044	87%
Libolo	85,630	16-May-16	53,742	63%
Seles	176,058	16-May-16	154,895	88%
Sumbe	269,341			
<b>Kuanza Sul</b>	<b>1,071,971</b>		<b>609,072</b>	<b>57%</b>
Cuango	174,429	27-May-16	41,055	24%
Chitato	196,869			
<b>Lunda Norte</b>	<b>196,869</b>		<b>41,055</b>	<b>21%</b>
Malanje	489,867			
<b>Malanje</b>	<b>489,867</b>		<b>0</b>	<b>0%</b>
Menongue	308,509			
<b>Cuango Cubango</b>	<b>308,509</b>		<b>0</b>	<b>0%</b>
Caconda	160,892	16-May-16	167,102	104%
Lubango	736,077	16-May-16	14,938	2%
Quipungo	147,818	16-May-16	168,781	114%
Humpata	83,267			
<b>Huíla</b>	<b>1,128,054</b>		<b>350,821</b>	<b>31%</b>
Negage	136,323	16-May-16	129,732	95%
Uíge	496,567	16-May-16	624,138	126%
<b>Uíge</b>	<b>632,890</b>		<b>753,870</b>	<b>119%</b>
<b>GRAND TOTAL</b>	<b>13,309,786</b>		<b>10,505,212</b>	<b>79%</b>

Map of Yellow Fever Cases with Local Transmission and Vaccination Provinces & Districts in Angola, 5 Dec 2015 – 3 June 2016



Source: MOH, Angola

Table 4.1: Yellow Fever Reported and Confirmed Cases per Angola Provinces and Districts, 2016  
5 Dec 2015— 3 June 2016

Province	Cases notified during the period (28 May — 3 June 2016)			Cumulative Cases (5 Dec 2015— 3 June 2016)			Documented Local Transmission *	Date of onset first case*	Date of onset of last case*	Date of last report at central level	Reporting Delay	Days since last report to central level
	Reported	Confirmed	Deaths	Reported	Confirmed	Deaths						
Belas	16	1	0	181	52	24	Y	10/01/16	26/05/16	01/06/16	6	4
Cacuaco	2	0	0	214	78	22	Y	28/01/16	28/05/16	01/06/16	4	4
Cazenga	24	0	0	370	106	33	Y	18/01/16	31/05/16	03/06/16	3	2
Icolo e Bengo	1	0	0	5	1	0	Y	18/01/16	24/05/16	30/05/16	6	6
Ingombota	1	0	0	16	4	0	Y	01/02/16	24/05/16	03/06/16	10	2
Kilamba xiayi	24	3	2	212	68	18	Y	06/12/15	26/05/16	03/06/16	8	2
Maianga	5	0	0	110	26	9	Y	12/01/16	27/05/16	03/06/16	7	2
Quissama	0	0	0	1	1	0	N	24/04/16	24/04/16	27/04/16	3	39
Rangel	3	0	0	42	15	2	Y	10/01/16	23/05/16	01/06/16	9	4
Samba	0	0	0	23	5	2	Y	09/01/16	18/05/16	27/05/16	9	9
Sambizanga	5	1	2	82	30	13	Y	23/01/16	26/05/16	01/06/16	6	4
Viana	18	0	1	465	96	85	Y	05/12/15	31/05/16	03/06/16	3	2
<b>LUANDA</b>	<b>99</b>	<b>5</b>	<b>5</b>	<b>1721</b>	<b>482</b>	<b>208</b>						
Andulo	0	0	0	9	6	1	N	14/02/16	15/05/16	20/05/16	5	16
Camacupa	0	0	0	1	1	0	N	19/03/16	19/03/16	31/03/16	12	66
Chinguar	1	1	0	6	3	0	N	30/01/16	22/05/16	23/05/16	6	8
Cuito	0	0	0	5	4	1	N	30/01/16	18/04/16	09/05/16	21	27
Cunhinga	0	0	0	3	1	0	N	28/02/16	09/04/16	16/04/16	7	50
Nharea	0	0	0	1	1	0	N	22/02/16	22/02/16	04/03/16	11	93
<b>BIE</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>25</b>	<b>16</b>	<b>2</b>						
Cahama	0	0	0	14	5	0	Y	28/02/16	13/05/16	25/05/16	12	11
Cuanhama	0	0	0	15	4	1	Y	03/02/16	18/05/16	25/05/16	7	11
Curoca	0	0	0	3	0	0	N	06/03/16	01/05/16	25/05/16	24	11
Cuvelai	0	0	0	2	0	0	N	02/04/16	04/05/16	25/05/16	21	11
Ombadja	0	0	0	10	5	1	N	01/02/16	17/04/16	06/05/16	19	30
<b>CUNENE</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>44</b>	<b>14</b>	<b>2</b>						
Baia Farta	0	0	0	11	9	2	Y	07/04/16	12/05/16	21/05/16	9	15
Balombo	0	0	0	20	6	2	Y	14/04/16	19/05/16	26/05/16	7	10
Benguela	8	3	0	98	52	8	Y	15/02/16	21/05/16	28/05/16	7	8
Bocoio	0	0	0	5	1	0	N	08/04/16	04/05/16	21/05/16	17	15
Caimbambo	0	0	0	5	1	0	N	26/02/16	01/05/16	09/05/16	8	27
Catumbela	0	0	0	29	4	0	Y	21/02/16	20/05/16	27/05/16	7	9
Chongoroi	0	0	0	5	4	0	Y	26/02/16	07/04/16	23/04/16	16	43
Cubal	0	0	0	6	3	1	Y	16/01/16	08/04/16	19/04/16	11	47
Ganda	0	0	0	5	3	0	N	10/02/16	05/03/16	17/03/16	12	80
Lobito	1	0	0	52	13	3	Y	22/01/16	21/05/16	28/05/16	7	8
<b>BENGUELA</b>	<b>9</b>	<b>3</b>	<b>0</b>	<b>236</b>	<b>96</b>	<b>16</b>						
Bailundo	4	0	0	82	11	4	Y	01/02/16	19/05/16	31/05/16	12	5
Caala	3	1	0	85	25	7	Y	21/01/16	21/05/16	28/05/16	7	8
Catchiungo	5	0	0	29	2	0	N	07/03/16	23/05/16	28/05/16	5	8
Ecunha	7	2	0	71	20	4	Y	17/01/16	28/05/16	01/06/16	4	4
Huambo	17	0	0	137	39	12	Y	20/01/16	29/05/16	01/06/16	3	4
Londumbale	2	0	0	27	7	7	N	20/01/16	26/05/16	01/06/16	6	4
Longonjo	2	0	1	24	10	4	N	09/02/16	23/05/16	31/05/16	8	5
Mungo	0	0	0	14	2	2	N	31/01/16	18/05/16	21/05/16	3	15
Tchikala tchologanga	2	0	0	10	3	0	N	15/03/16	29/05/16	01/06/16	3	4
Tchinjenje	0	0	0	3	1	0	N	24/03/16	11/05/16	19/05/16	8	17
Ukuma	0	0	0	15	4	4	Y	22/02/16	24/04/16	07/05/16	13	29
<b>HUAMBO</b>	<b>42</b>	<b>3</b>	<b>1</b>	<b>497</b>	<b>124</b>	<b>44</b>						
Ambaca	2	0	0	11	1	0	N	03/02/16	19/05/16	28/05/16	9	8
Cambambe	0	0	0	2	0	0	N	12/02/16	12/02/16	12/02/16	0	114
Cazengo	2	1	0	18	3	6	N	28/01/16	18/05/16	28/05/16	10	8
Lucala	0	0	0	1	0	0	N	09/02/16	09/02/16	09/02/16	0	117
<b>KUANZA NORTE</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>32</b>	<b>4</b>	<b>6</b>						
Amboim	1	0	0	5	2	1	Y	23/01/16	11/05/16	28/05/16	17	8
Cassongue	0	0	0	2	2	0	Y	02/02/16	02/02/16	08/03/16	35	89
Cela	0	0	0	7	1	0	N	04/02/16	14/04/16	26/04/16	12	40
Conda	0	0	0	1	0	0	N	24/04/16	24/04/16	20/05/16	26	16
Ebo	3	0	0	30	4	1	Y	17/01/16	19/05/16	28/05/16	9	8
Libolo	0	0	0	4	1	1	Y	05/02/16	06/05/16	20/05/16	14	16
Mussende	0	0	0	2	0	0	N	26/02/16	10/04/16	28/04/16	18	38
Porto amboim	0	0	0	5	0	2	N	03/02/16	22/05/16	27/05/16	5	9
Quibala	0	0	0	1	0	0	N	27/03/16	27/03/16	19/04/16	23	47
Quilenda	0	0	0	2	0	0	N	23/04/16	29/04/16	08/05/16	9	28
Seles	0	0	0	21	5	2	Y	05/02/16	18/05/16	27/05/16	9	9
Sumbe	0	0	0	9	1	2	Y	07/02/16	15/05/16	20/05/16	5	16
<b>KUANZA SUL</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>89</b>	<b>16</b>	<b>9</b>						
Bucu Zau	0	0	0	1	0	0	N	20/01/16	20/01/16	27/01/16	7	130
Cabinda	2	0	0	27	1	1	N	01/01/16	18/05/16	28/05/16	10	8
<b>CABINDA</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>28</b>	<b>1</b>	<b>1</b>						
Menongue	0	0	0	4	1	1	Y	15/02/16	06/05/16	14/05/16	8	22
<b>CUANDO CUBANGO</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>1</b>	<b>1</b>						

**YELLOW FEVER OUTBREAK WEEKLY SITUATION REPORT, INCIDENT MANAGEMENT TEAM ANGOLA**

**Table 4.2: Yellow Fever Reported and Confirmed Cases per Angola Provinces and Districts, 2016  
5 Dec 2015— 3 June 2016**

Province	Cases notified during the period (28 May — 3 June 2016)			Cumulative Cases (5 Dec 2015— 3 June 2016)			Documented Local Transmission *	Date of onset first case*	Date of onset of last case*	Date of last report at central level	Reporting Delay	Days since last report to central level
	Reported	Confirmed	Deaths	Reported	Confirmed	Deaths						
Caconda	1	0	1	28	10	4	Y	05/01/16	13/05/16	28/05/16	15	8
Cacula	2	1	0	8	4	1	N	15/02/16	17/05/16	28/05/16	11	8
Caluquembe	0	0	0	10	2	6	N	13/01/16	21/03/16	30/03/16	9	67
Chibia	0	0	0	2	1	0	N	04/02/16	08/02/16	19/02/16	11	107
Chicomba	2	0	0	11	1	0	N	02/02/16	21/05/16	01/06/16	11	4
Chipindo	0	0	0	1	0	0	N	09/04/16	09/04/16	26/04/16	17	40
Cuvango	0	0	0	2	0	0	N	09/04/16	09/04/16	18/04/16	9	48
Gambos	0	0	0	5	1	1	N	10/02/16	24/02/16	11/03/16	16	86
Humpata	0	0	0	11	3	0	Y	09/02/16	30/04/16	11/05/16	11	25
Lubango	0	0	0	14	4	4	N	25/01/16	22/04/16	28/04/16	6	38
Matala	0	0	0	2	0	1	N	26/01/16	07/03/16	21/03/16	14	76
Quilengues	0	0	0	10	4	2	N	13/02/16	10/03/16	19/03/16	9	78
Quipungo	1	0	0	31	3	3	Y	28/01/16	20/05/16	03/06/16	14	2
<b>HUILA</b>	<b>6</b>	<b>1</b>	<b>1</b>	<b>135</b>	<b>33</b>	<b>22</b>						
Cambulo	0	0	0	1	0	0	N	08/03/16	08/03/16	13/04/16	36	53
Chitato	0	0	0	6	1	1	N	31/03/16	15/05/16	23/05/16	8	13
Cuango	5	3	2	9	7	5	Y	02/05/16	21/05/16	31/05/16	10	5
Lucapa	0	0	0	1	0	0	N	11/04/16	11/04/16	23/05/16	42	13
Xa Muteba	0	0	0	1	0	0	N	10/02/16	10/02/16	13/04/16	63	53
<b>LUNDA NORTE</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>18</b>	<b>8</b>	<b>6</b>						
Muconda	0	0	0	1	0	0	N	22/05/16	22/05/16	27/05/16	5	9
Saurimo	0	0	0	5	0	0	N	07/03/16	01/05/16	04/05/16	3	32
<b>LUNDA SUL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>						
Ambriz	0	0	0	3	1	0	N	04/04/16	03/05/16	17/05/16	14	19
Bula Atumba	0	0	0	1	0	0	N	07/03/16	07/03/16	14/03/16	7	83
Dande	1	0	0	11	4	0	N	05/02/16	19/05/16	31/05/16	12	5
Nambuangongo	5	0	0	6	0	0	N	23/03/16	22/05/16	31/05/16	9	5
<b>BENGO</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>21</b>	<b>5</b>	<b>0</b>						
Cacuso	0	0	0	2	1	0	Y	10/03/16	21/04/16	06/05/16	15	30
Cahombo	0	0	0	1	1	1	N	20/03/16	20/03/16	31/03/16	11	66
Calandula	1	0	0	3	0	1	N	03/03/16	21/05/16	30/05/16	9	6
Cambundi Catembo	1	0	1	1	0	1		15/05/16	15/05/16	28/05/16	13	8
Malange	4	1	0	11	3	0	Y	09/02/16	23/05/16	30/05/16	7	6
Quela	0	0	0	1	0	0	N	07/05/16	07/05/16	18/05/16	11	18
<b>MALANGE</b>	<b>6</b>	<b>1</b>	<b>1</b>	<b>19</b>	<b>5</b>	<b>3</b>						
Cameia	0	0	0	1	0	0	N	08/04/16	08/04/16	18/04/16	10	48
Leua	0	0	0	1	0	0	N	26/04/16	26/04/16	07/05/16	11	29
Moxico	0	0	0	2	0	0	N	02/04/16	09/05/16	19/05/16	10	17
<b>MOXICO</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>						
Namibe	3	1	0	10	2	1	N	07/03/16	22/05/16	29/05/16	7	7
<b>NAMIBE</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>10</b>	<b>2</b>	<b>1</b>						
Cuimba	0	0	0	2	1	2	N	24/03/16	27/03/16	19/04/16	23	47
Mbanza congo	0	0	0	4	0	0	N	06/02/16	24/03/16	29/03/16	5	68
Noqui	0	0	0	2	0	0	N	19/02/16	26/02/16	14/03/16	17	83
Nzeto	0	0	0	2	1	0	N	05/02/16	08/02/16	02/03/16	23	95
Soyo	0	0	0	2	1	0	N	10/02/16	11/04/16	15/04/16	4	51
<b>ZAIRE</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>12</b>	<b>3</b>	<b>2</b>						
Ambuila	2	0	0	4	0	0	N	02/05/16	27/05/16	03/06/16	7	2
Bembe	0	0	0	2	0	0	N	15/05/16	16/05/16	24/05/16	8	12
Buengas	0	0	0	1	0	0	N	30/04/16	30/04/16	14/05/16	14	22
Bungo	0	0	0	1	0	0	N	21/02/16	21/02/16	20/03/16	28	77
Damba	0	0	0	2	0	0	N	30/03/16	07/04/16	19/04/16	12	47
Maquela zombo	0	0	0	1	0	1	N	16/02/16	16/02/16	22/02/16	6	104
Mucaba	0	0	0	1	0	0	N	12/05/16	12/05/16	21/05/16	9	15
Negage	5	1	0	12	3	0	Y	03/02/16	28/05/16	03/06/16	6	2
Puri	0	0	0	1	1	0	N	10/05/16	10/05/16	21/05/16	11	15
Quimbele	0	0	0	3	0	0	N	02/03/16	07/05/16	24/05/16	17	12
Quitexe	0	0	0	1	0	0	N	19/04/16	19/04/16	09/05/16	20	27
Sanza pombo	0	0	0	1	0	0	N	03/05/16	03/05/16	14/05/16	11	22
Songo	1	0	0	1	0	0	N	27/05/16	27/05/16	03/06/16	7	2
Uige	0	0	0	22	5	4	Y	15/01/16	08/05/16	24/05/16	16	12
<b>UIGE</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>53</b>	<b>9</b>	<b>5</b>						
<b>Grand Total</b>	<b>193</b>	<b>20</b>	<b>10</b>	<b>2954</b>	<b>819</b>	<b>328</b>						
* 1. For cases with date of onset												
* 2. Y = Yes confirmed Local Transmission, N= Not Confirmed Local Transmission												
	Newly confirmed districts in W22						New local transmission in W22					

### III. Response Interventions

#### Coordination

- ◆ WHO and partners are updating a Yellow Fever Global Strategy toward controlling yellow fever outbreaks events in high risk countries as Angola
- ◆ WHO decided to scale up response activities to yellow fever in Angola. This will include ensuring a permanent presence in high risk provinces. Planning of scaling up is under way
- ◆ IOM and UNHCR were briefed by yellow fever partners in relation with the observation of possible refugee and immigrant movements among the borders of Lunda Norte province, mainly at Cafunfu (Cuango) and Chitato districts. Both organizations will join the partners meeting weekly
- ◆ A plan for vaccination in border and high risk areas is under development
- ◆ The whole Incident Management System leadership team participated in a planning exercise with the IM and the WR to identify priority districts for scale up and vaccination. A model of the outbreak was developed based on data on population, urban distribution, entomological situation, evolution of the outbreak, recent number of cases, local transmission, proximity to most affected areas, presence of international borders and presence of markets, main roads or centers of economic activity.

#### Surveillance, Laboratory and Data management

- ◆ The IMS coordinated and supported the deployment of 15 people from MoH, WHO and Cuban Cooperation to **Cunene, Cabinda, Lunda Norte, Zaire, Malanje**, to perform rapid assessment of the surveillance system, assess the status of border cooperation, perform case investigations and entomological assessments.
- ◆ Similar visits this week will deploy 12 additional epidemiologists and entomologists to **Lunda Sul, Namibe, Cuando Cubango, Moxico**
- ◆ A team is in **Lunda Norte** supporting case investigations, training, social mobilization, vector control and rapid reaction vaccination. The team includes epidemiologists, vaccination logistics and coordination and social mobilization and support. WHO and UNICEF are supporting a permanent presence in the province
- ◆ An Epidemiologist position was created in Luanda to perform rapid investigations country wide. In the first week, the 'flying epi' was rapidly deployed to perform case investigations in **Malange and Kwanza Sul**
- ◆ The epi team in Luanda performed case investigations of all PCR+ cases reported in the province with the objective to understand the profile of cases and factors affecting persistent transmission of YF, as well as to identify potential cases of adverse effects and/or inefficient vaccination
- ◆ More than 20 WHO surveillance focal points in **all 18 provinces** continued providing information and support Province authorities in the control of yellow fever
- ◆ New surveillance evaluation tools were implemented in the 5 provinces assessed. Reports from the assessment at the provinces are being compiled and translated for distribution
- ◆ Data cleaning, consistency checks and re-analysis of line lists is ongoing
- ◆ The need for additional support in management of sample transport and custody and provision of feedback was identified. TORs for this position were developed and local recruitment started

#### Vaccination

- ◆ **10.5 million** people out of **13.3 million** targeted population have been vaccinated
- ◆ A high level delegation from the MoH and WHO visited the province of Kwanza Sul to discuss with the Provincial authorities about their low levels of vaccination coverage in the campaign (Table 3) and find solutions to improve it.
- ◆ Rapid response vaccination was conducted in Lunda Norte province (Chitato and Cubango); **41,000** people have been vaccinated up to date; the vaccination campaign still ongoing
- ◆ 1,035,792 doses of yellow fever vaccine were approved by ICG for vaccination in Lunda Norte and Malanje. The first 587,000 is expected on Tuesday 7th June and will be deployed to Lunda Norte immediately after arrival.
- ◆ A focused mop-up campaign in Luanda is being planned by MoH and WHO, based on the results of Independent Monitoring exercise implemented by Grupo Core and CDC. Main results of the independent monitoring exercise suggest that coverage is more homogenous across the province than anticipated (based on administrative coverage figures). It also suggests that the population in Luanda Province is likely to be bigger than what is recorded in census data.

#### Logistics

- ◆ The balance of Yellow Fever vaccine in the country is **274,310 doses**, distributed in 7 provinces with ongoing vaccination. **15,170** doses are placed at national store in Luanda.
- ◆ Additional 3 million cards are needed and requesting and printing process has started
- ◆ A preliminary assessment of the quality of cold chain in border provinces identified problems in Cuando Cubango. These problems

### **Border Health**

- ◆ UNCHR and IOM will participate in partners coordination meetings, to provide guidance on displaced and immigrant populations and border issues
- ◆ Plans to scale up surveillance and response activities at border provinces are under way

### **Social Mobilization and Risk Communication**

- ◆ UNICEF is supporting Social Mobilization in the provinces of Luanda, Huila, Cunene, Cuanza Sul, Lunda Norte, Lunda Sul and Benguela
- ◆ Dissemination of IEC messages through local radios continued (Radio Huambo and Rádio Mais)
- ◆ Partners reviewed new materials TV messages with MoH
- ◆ The need to strengthen Social Mobilization at the municipal level was identified by several visits to the provinces during vaccination campaigns. This could include additional microplanning with local partners and strengthened supervision and support

### **Case Management**

- ◆ MSF and MdM activities to support case management in hospital and health centers in Luanda, Huambo, Huila, Benguela and Kwanza Norte continued.
- ◆ WHO selected two persons to support case management, to be deployed to Luanda shortly

### **Vector Control**

- ◆ WHO vector control team lead arrived in Luanda and started an assessment of the strategy and way forward to scale up vector control activities
- ◆ Cuban Cooperation continue to support vector control activities in districts across the country. Routine entomological assessment and vector control is ongoing in affected provinces
- ◆ Vector control experts joined each of the vaccination teams and teams assessing surveillance systems across the country, to perform case investigations and assessment of local transmission

### **Special Studies and Assessments**

- ◆ Independent monitoring of coverage of vaccination was implemented in Huambo by Grupo Core and MoH
- ◆ The reports of the independent monitoring of coverage of vaccination from Benguela and Luanda are being used for planning of mop-up campaigns
- ◆ CDC and MoH implemented evaluation of yellow fever and malaria co-infection; a report was distributed this week
- ◆ A proposal for Differential Diagnosis of cases negative to YF or co-infected was prepared by CDC. Reagents for tests are being sourced for start of activity later in June
- ◆ CDC and MoH implemented a preliminary assessment of cases with positive PCR and history of vaccination. Serum samples of some of these cases were sent to the Institute Pasteur Dakar and CDC Fort Collins for genotyping (i.e. differentiate between vaccine type virus and wild type virus)

## **V. Key challenges**

- ◆ The province of Luanda has vaccinated more than 6 million people. However, new cases continue to be reported indicating some pockets of unvaccinated people
- ◆ Emphasize using of the independent monitoring as a guided for mop-up vaccination and understanding the low coverage vaccination areas
- ◆ Need to accelerate and re-assess the strategy for vector control to focus on gathering places and adult vector
- ◆ Under-reporting from all facilities in Luanda, Benguela and Huambo, has been confirmed. Impact in the epidemic curve interpretation and remedial actions are being discussed. Line lists in use in some provinces does not match the number of cases for those provinces in the central database (and therefore are not included in this SitRep). This issue is being addressed with the NDSP
- ◆ Continuous strengthening of case investigations and surveillance in all provinces
- ◆ Need for coordination of clinical case management activities
- ◆ Need to strengthen all response activities at the provincial level will require administrative and structural changes in the organization of the Incident Management System

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