



School children display Yellow Fever vaccination card after vaccine uptake in Upper West Region

Reporting date: 19 October 2026

Highlights

- The Ministry of Health, through the Ghana Health Service and in collaboration with the World Health Organization (WHO), **officially declared** a yellow fever outbreak in affected districts of the Upper West Region on 9 October 2026.
- As of 12 October 2026, the Upper West Region had reported **121** suspected cases of yellow fever across 7 of its 11 districts. **19 of the suspected cases were positive for yellow fever with 3 confirmed.** All 3 confirmed cases died.
- Three districts (Wa West, Sissala West and Sissala East) account for **86** cases (71 per cent of all suspected cases). The affected districts are located within a **border corridor characterized by high population mobility, including refugee and livestock-raising communities**, which may increase the risk of cross-border transmission and complicate surveillance and response efforts.
- Nearly **50 per cent of suspected cases** (60 cases) are in **children under 15 years** including 16 children under 5 years and 44 children aged 5-14 years.
- The Government started a **reactive vaccination campaign** on 14 October 2026 in 3 out of the 7 affected districts (Wa West, Sissala East and Sissala West), **targeting 244,870 eligible persons** aged 9 months to 60 years.
- UNICEF is supporting yellow fever prevention through **risk communication and community engagement (RCCE)** activities, including outreach to underserved populations, community meetings, engagement with faith and traditional leaders and radio programmes. Life-saving information is being shared in Dagaare, Mossi, Waali and Sissala languages to strengthen preventive practices, vaccine acceptance, trust and demand in affected communities alongside vaccination efforts.
- The response requires an estimated **US\$115,000**. UNICEF has raised US\$37,000, leaving a **US\$78,000 funding gap**.
- Urgent funding is needed for vaccination support, active case search, training of frontline workers in yellow fever active case finding and management, community engagement, protective equipment, field operations and cross-border collaboration.
- Additional support will help reach communities who move with their livestock, refugee and host populations with timely information, vaccination and referral services.

Ghana

YELLOW FEVER OUTBREAK

Flash Update No.1

Epidemiological situation



3 confirmed cases



121 Suspected cases (as of 12 October 2026)



60 Suspected cases in children (as of 12 October 2026)



3 confirmed deaths

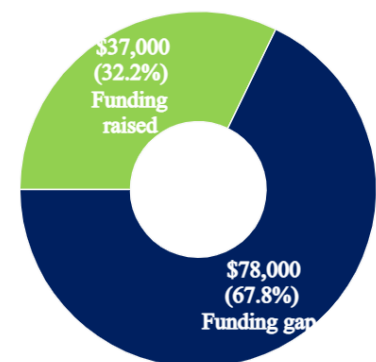


19 IgM positive cases



7 out of 11 districts affected

FUNDING STATUS IN USD



UNICEF APPEAL
USD 115,000

Situation Overview

On 31 August 2026, the Upper West Regional Health Directorate was notified of three patients with symptoms of acute haemorrhagic fever. National, regional and district response teams, with support from WHO, conducted active case searches, health-facility record reviews, risk assessments and entomological investigations. Samples were sent to Ghana's National Public Health and Reference Laboratory, with selected samples referred to a regional laboratory in Dakar, Senegal, for confirmatory testing.

As of 12 October 2026, the Upper West Region had reported 121 suspected yellow fever cases across 7 of the region's 11 districts. Wa West, Sissala West and Sissala East remain the most affected districts, accounting for 86 of the 121 suspected cases. Children under 15 account for nearly half of suspected cases. Nineteen cases tested positive for yellow fever (IgM-positive). Three cases were further confirmed through advanced laboratory testing in Dakar; all three persons died.

Recorded deaths among investigated cases include 8 institutional deaths and 5 community deaths; not all have been established as yellow fever deaths. Sustained surveillance, timely referral, safe burials and community engagement remain critical.

Following approval from the International Coordinating Group (ICG), the **Government undertook a reactive vaccination** in Wa West, Sissala East and Sissala West, targeting 244,870 eligible people aged 9 months to 60 years, with a mop-up beginning on 19 October 2026.

UNICEF deployed staff members to monitor the reactive campaign in the three districts. UNICEF also **facilitated the procurement of approximately 190,000 vaccine doses** to support the reactive vaccination campaign. This campaign is expected to be the primary intervention to interrupt transmission and prevent further spread.

Additionally, **UNICEF has been supporting RCCE activities** across all seven affected districts. To date, **432 frontline workers and community volunteers** have been **trained** in surveillance, referral, immunization and RCCE; **81 community volunteers, religious and traditional leaders, teachers and media representatives** are supporting **community engagement** activities; **7 radio stations** are disseminating lifesaving information; and **250,000 people** have been **reached** through **RCCE** interventions.

The outbreak is affecting a **border region with communities that move with their livestock, as well as refugee and host populations that may face barriers to timely information, vaccination and health services**. Misinformation, delayed reporting and resource constraints may further hinder the response. Reactive vaccination, early detection and referral, strengthened surveillance, mosquito-bite prevention and sustained community engagement remain critical to controlling the outbreak.

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