

# Assessing and detecting Arbovirus risk: Epidemiological surveillance



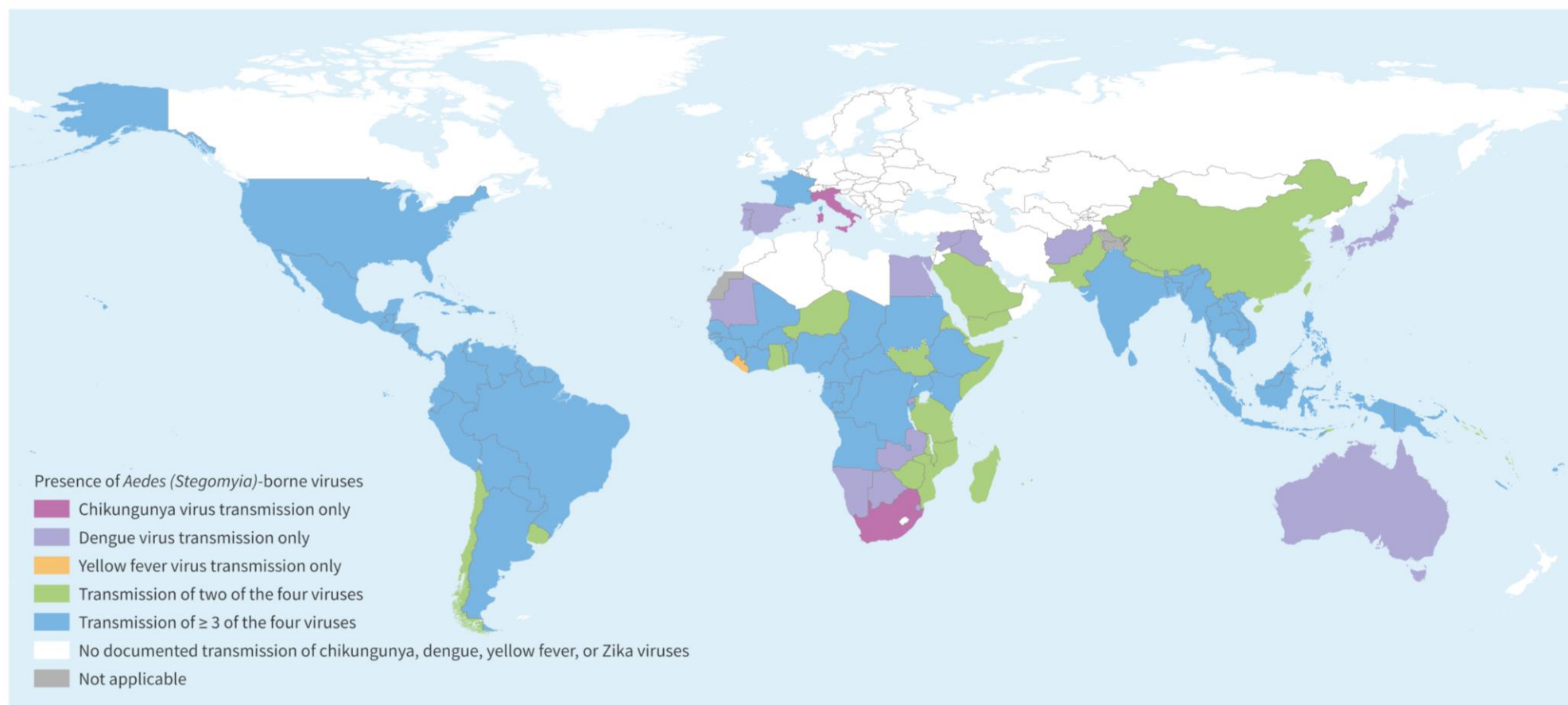
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Health Emergencies Program  
World Health Organization



# Almost 4 billion people

at risk for *Aedes*-  
borne infections

## Countries and territories with current or previous transmission of chikungunya, dengue, yellow fever, or Zika viruses (as of 25/10/2023)

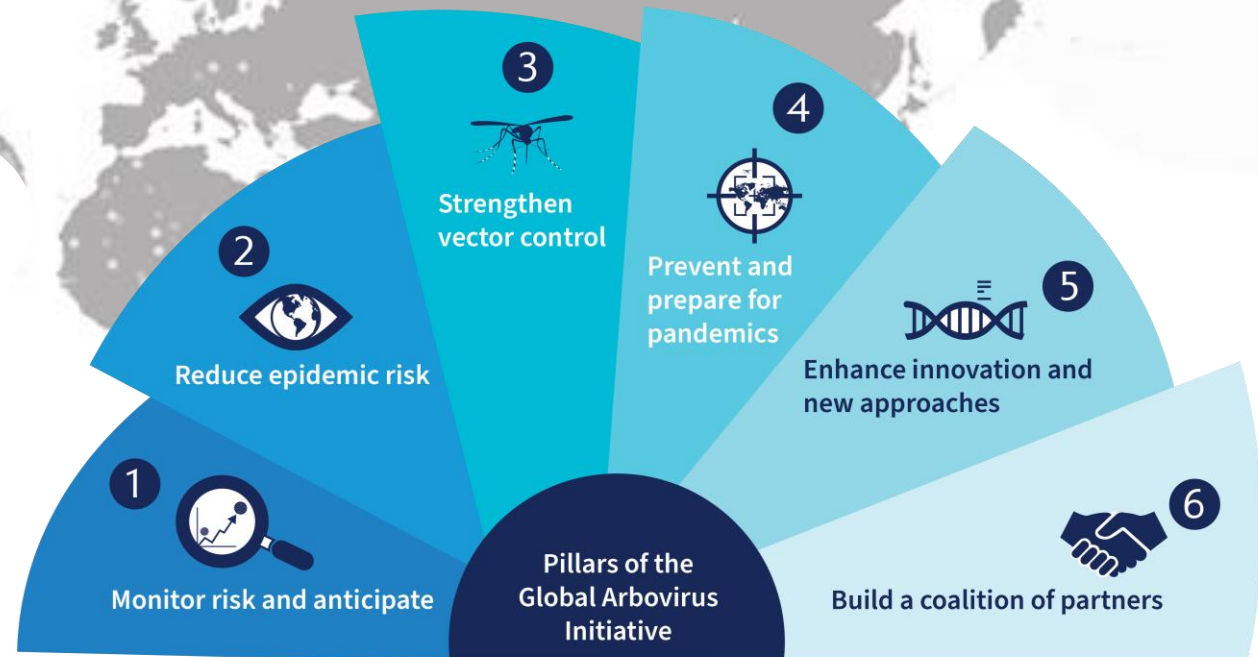


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Data Source: World Health Organization  
Map Production: WHO Health Emergencies Programme  
Request ID: RITM00065

0 1,500 3,000 Km

# GLOBAL ARBOVIRUS INITIATIVE



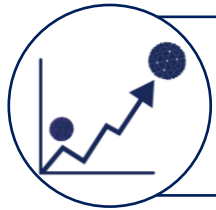
Tackling mosquito-borne viruses with epidemic and pandemic potential

# Pillar 1: Monitor risk and anticipate

## Priority actions:



1. Develop a global risk monitoring framework for arboviruses using the one health approach



2. Forecast and model potential epidemic and pandemic scenarios for arboviruses

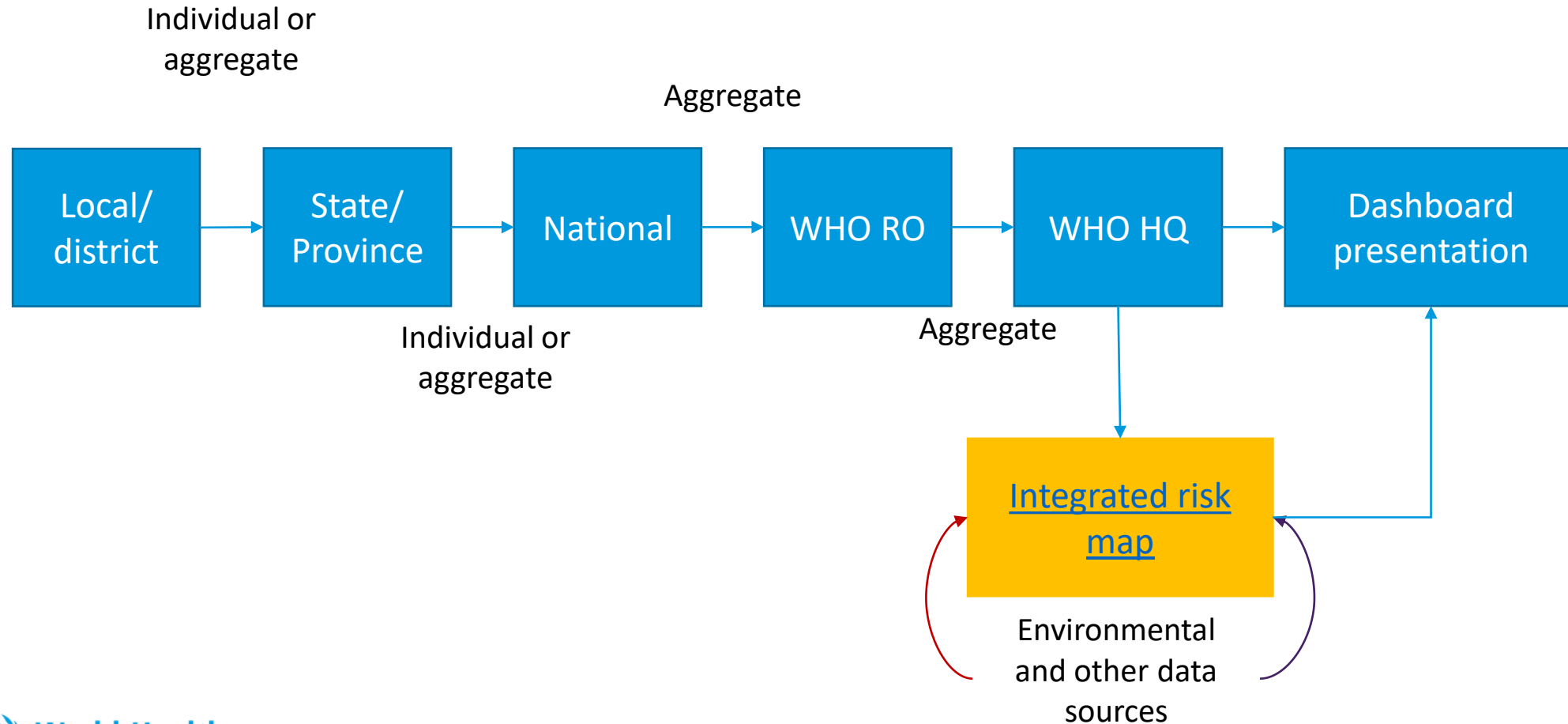


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# Data dashboard

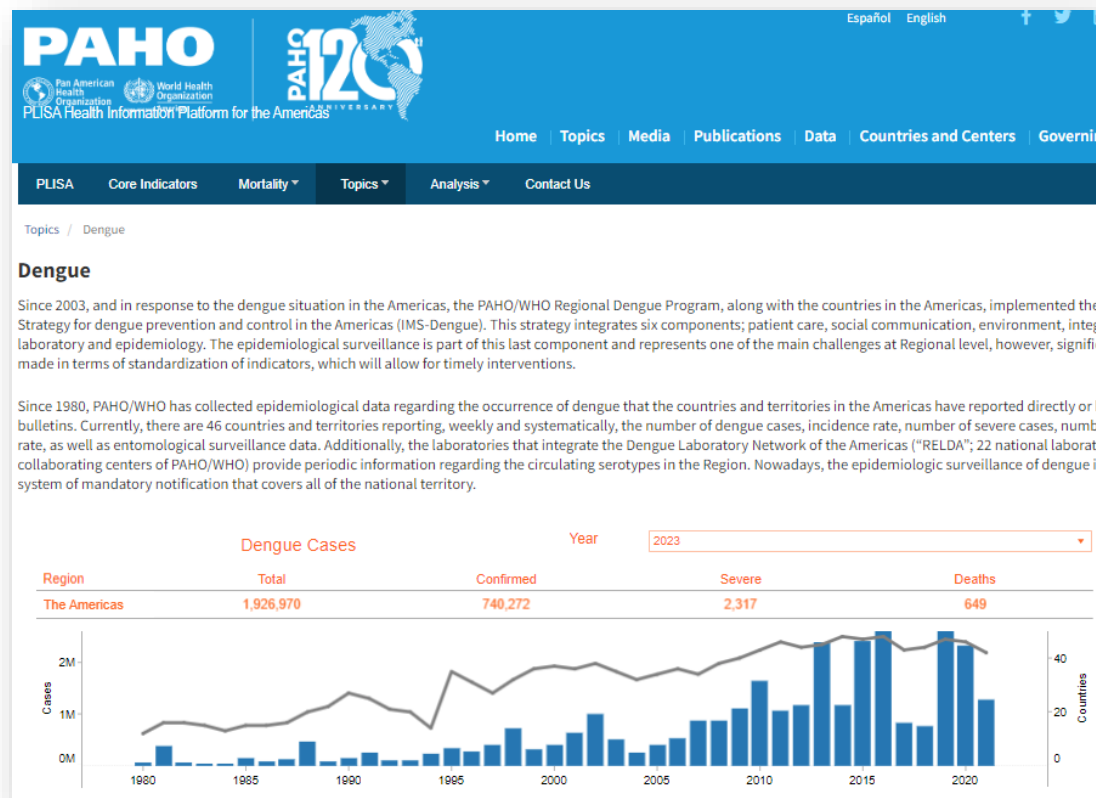
1. Inventory data sources and systems across WHO Regions
2. Develop an integrated global arbovirus reporting system to capture and transmit arbovirus-related data from national → regional → global level
3. Design and operationalize a global arbovirus dashboard to be hosted by HQ

# Integrated global arbovirus reporting system





# Arbovirus dashboards



<https://www3.paho.org/data/index.php/en/>



## Dengue Situation Update 685

23 November 2023

### Update on the Dengue situation in the Western Pacific Region

This report describes the epidemiology of dengue in the World Health Organization Western Pacific Region. Data are compiled from open sources (national indicator-based surveillance systems) with the exception of Cambodia, Lao People's Democratic Republic, Viet Nam, and the Philippines, where data are provided by the WHO Country Offices. For the Pacific Island Countries, syndromic surveillance data are provided by the Division of Pacific Technical Support. Information is reported based on countries' standard dengue case definitions, summary of these definitions and countries' dengue surveillance systems - included as an annex to this report. Due to differences in surveillance methods and reporting practices, a comparison of trends between countries and areas is not possible, however, national trends can be observed over time.

#### Northern Hemisphere

##### Cambodia

As of epidemiological week 42 of 2023, the National Dengue Surveillance System reported a total of 26,912 cases with 39 deaths (Case Fatality Rate (CFR) 0.14%) since 1 January 2023 (Figure 1), an increase by 183.5% (n=9,492;) and 143.8% (n=16; Case Fatality Rate (CFR) : 0.16%) in cases and deaths respectively, as compared to cases and deaths reported in 2022 over the same period.

[Dengue \(who.int\)](https://dengue.who.int/)



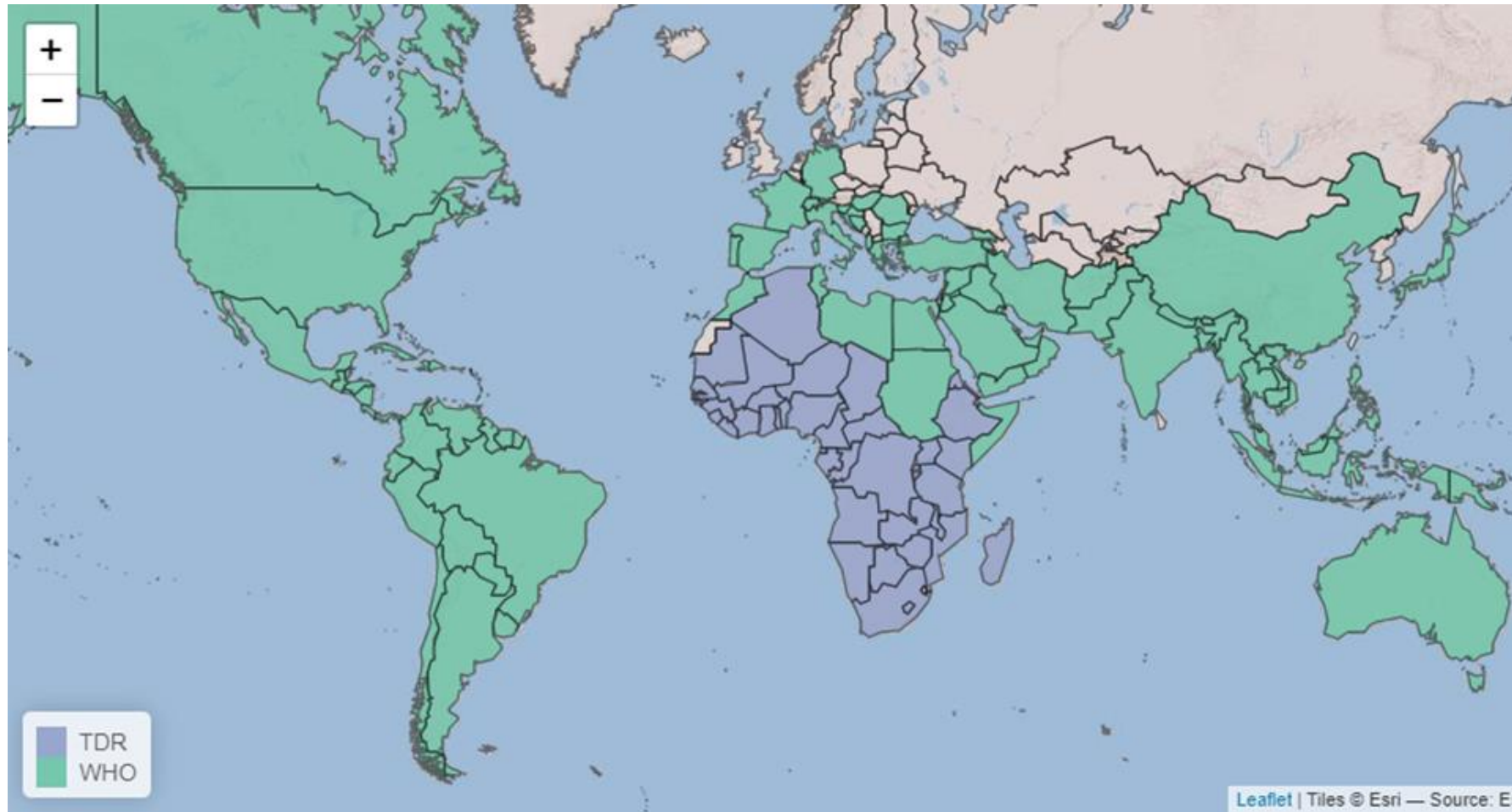
This epidemiological bulletin aims to provide the situation of key infectious diseases in the WHO South-East Asia region to inform risk assessments and responses. The bulletin uses information from publicly available sources and will be published every two weeks. For feedback or suggestions, please write to [seoutbreak@who.int](mailto:seoutbreak@who.int).

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<https://www.who.int/southeastasia/outbreaks-and-emergencies/health-emergency-information-risk-assessment/sear-epi-bulletins>

# Global capacities survey for surveillance, prevention and control of arboviral diseases





## Main gaps national/local level

- *Large inequities within and between countries*
- Paper-based surveillance in some countries
- Data entry is not done in real time (yearly/semester/quarterly/monthly)
- The data analysis: basic to EWARS
- Epidemiological surveillance isolated from other relevant surveillance systems: Laboratory surveillance, entomological surveillance, environmental surveillance
- No/little action is taken when an alert is detected

Africa	25/47 (53%)
Americas	52 (100%)
Eastern Mediterranean	11 (55%)
Europe	17 (85%)
Southeast Asia	4 (50%)
Western Pacific	13 (87%)

Table 1. Percent countries conducting arbovirus surveillance

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## Gaps/Opportunities regional level

- No regional agreements on arbovirus surveillance (case definitions, basic variables to be shared, confirmatory tests)
- Information sharing
- Countries are worried about reporting affecting tourism
- Regions are critical to liaise with the countries
- Having people dedicated to drive arbovirus surveillance processes in the regions

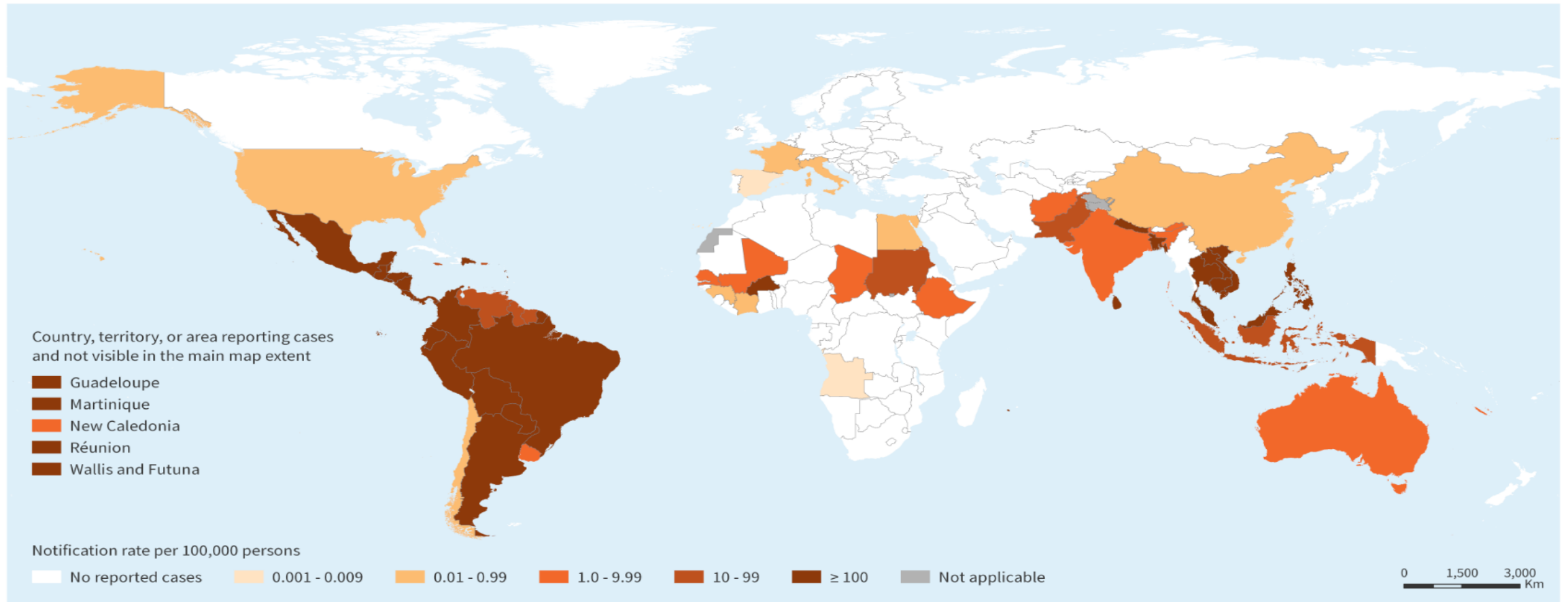
# How can we do better surveillance globally?

- Fill the gaps and inequities in technology across the globe to guarantee real time surveillance
- Transfer the analytical tools to the local levels to improve response: EWARS, modelling, genomic surveillance
- Leverage on the lessons learned and gains from COVID-19 pandemic
- Integrated approach: One health
- Multisectoral approach all levels
- Keep bringing awareness to arboviral diseases: Climate sensitive diseases
- Trust, trust, trust.....
- Continuous financial support: partnerships
- Preparedness is now!



# Upsurge of cases and deaths in 2023

Dengue virus cases reported in the last 12 months (November 2022 - October 2023)



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Data Source: World Health Organization, European Centre for Disease Prevention and Control  
Map Production: WHO Health Emergencies Programme  
Map Date: 1 December 2023

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## Summary

1. Inequities on transmission, surveillance, laboratory and response capacities
2. Opportunities leverage on the capacities built to respond to the COVID-19 pandemic
3. Information to act: early detection, response, plan intervention....
4. Multisectoral approach: multisectoral surveillance
5. Strengthen global surveillance mechanisms for rapid response
6. Political commitment in all levels to guarantee continuous financial support
7. Building partnerships





# Partners



All of you, TAG arbovirus members, regional offices and member states

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Thanks for your attention



GLOBAL ARBOVIRUS INITIATIVE



World Health  
Organization