World Health Organization

COUNTRIES AND TERRITORIES WITH CURRENT OR PREVIOUS ZIKA VIRUS TRANSMISSION

DATA AS OF FEBRUARY 2022

Countries and territories with current or previous Zika virus transmission,[1] by WHO regional office

WHO Regional Office	Country / territory	Total
AFRO	Angola; Burkina Faso; Burundi; Cabo Verde; Cameroon; Central African Republic; Côte d'Ivoire; Ethiopia; Gabon; Guinea-Bissau; Kenya; Nigeria; Senegal; Uganda	14
AMRO/PAHO	Anguilla; Antigua and Barbuda; Argentina; Aruba; Bahamas; Barbados; Belize; Bolivia (Plurinational State of); Bonaire, Sint Eustatius and Saba; Brazil; British Virgin Islands; Cayman Islands; Colombia; Costa Rica; Cuba; Curaçao; Dominica; Dominican Republic; Ecuador; El Salvador; French Guiana; Grenada; Guadeloupe; Guatemala; Guyana; Haiti; Honduras; Easter Island– Chile; Jamaica; Martinique; Mexico; Montserrat; Nicaragua; Panama; Paraguay; Peru; Puerto Rico; Saint Barthélemy; Saint Kitts and Nevis; Saint Lucia; Saint Martin; Saint Vincent and the Grenadines; Saint Maarten; Suriname; Trinidad and Tobago; Turks and Caicos; United States of America; United States Virgin Islands; Venezuela (Bolivarian Republic of)	49
SEARO	Bangladesh; India; Indonesia; Maldives; Myanmar; Thailand	6
WPRO	American Samoa; Cambodia; Cook Islands; Fiji; French Polynesia; Lao People's Democratic Republic; Marshall Islands; Malaysia; Micronesia (Federated States of); New Caledonia; Palau; Papua New Guinea; Philippines; Samoa; Singapore; Solomon Islands; Tonga; Vanuatu; Viet Nam	19
EURO	France (Var department)	1
Total		89

Countries and territories with established *Aedes aegypti* mosquito vectors, but no known cases of Zika virus transmission, by WHO regional office

WHO Regional Office	Country / territory	Total
AFRO	Benin; Botswana; Chad; Comoros; Congo; Democratic Republic of the Congo; Equatorial Guinea; Eritrea; Gambia; Ghana; Guinea; Liberia; Madagascar; Malawi; Mali; Mauritius; Mayotte; Mozambique; Namibia; Niger; Réunion; Rwanda; Sao Tome and Principe; Seychelles; Sierra Leone; South Africa; South Sudan; Togo; United Republic of Tanzania; Zambia; Zimbabwe	31
AMRO/PAHO	Uruguay	1
EMRO	Afghanistan; Djibouti; Egypt; Oman; Pakistan; Saudi Arabia; Somalia; Sudan; Yemen	9
EURO	Georgia; Região Autónoma da Madeira – Portugal; Russian Federation; Turkey	4
SEARO	Bhutan; Nepal; Sri Lanka; Timor-Leste	4
WPRO	Australia; Brunei Darussalam; China; Christmas Island; Guam; Kiribati; Nauru; Niue; Northern Mariana Islands (Commonwealth of the); Tokelau; Tuvalu; Wallis and Futuna	12
		61

[1] *A laboratory-confirmed autochthonous, vector-borne case of ZIKV infection in a country or territory, whether it is detected and reported by the country/territory where infection occurred, or by another country by diagnosis of a returning traveller. Autochthonous infection is considered an infection acquired in-country, i.e. among patients with no history of travel during the incubation period or who have travelled exclusively to non-affected areas during the incubation period. Evidence of autochthonous, mosquito-borne transmission includes those countries with known historical laboratory evidence of ZIKV circulation based on published, peer-reviewed literature as well as all ZIKV surveillance data whether detected and reported by the country where infection occurred or by another country reporting a confirmed case in a returning traveller. Laboratory criteria to ascertain the presence of ZIKV in past studies are:*

a. *Detection of the virus in humans, mosquitoes or animals.*
b. *Serologic confirmation of ZIKV infection with tests conducted after 1980 and considered as confirmed infection on expert review based on testing for all appropriate cross-reactive flaviviruses and utilization of comprehensive testing methodologies. Because of testing and interpretation limitations with serological data antedating 1980, they were not included as evidence of transmission.*