

Bulletin: Cholera and AWD Outbreaks in Eastern and Southern Africa

Regional Update for 2019 - as of 1 April 2019



Highlights

Approximately 3,385 cholera / AWD cases including 19 deaths have been reported in 10 out of the 21 countries in Eastern and Southern Africa Region (ESAR); with an average Case Fatality Rate of 0.6%, since the beginning of 2019. These countries include; Angola, Burundi, Kenya, Malawi, Mozambique, Tanzania, Somalia, Uganda, Zambia and Zimbabwe. Kenya accounts for 35.4 % (1,198) of the total case load reported this year, followed by Mozambique at 31% (1,048).

Of the 10 countries with reported cholera / AWD outbreaks in ESAR since week 1 of 2019, 6 (Mozambique, Tanzania, Somalia, Kenya, Zambia and Burundi) have ongoing cholera outbreaks. During the week under review, Mozambique reported the highest number of new cases (1048 cases). Tanzania and Burundi have recorded the highest Case Fatality Rates (CFR) in 2019 at 1.3% and 1% respectively, of the countries with active outbreaks.

Mozambique: Cholera cases in cyclone-hit Mozambique and it's associated flooding have risen to 1,048 cases including 1 death (CFR, 0.09%). The Ministry of Health declared an outbreak of cholera on 27 March 2019 with cases reported in Beira and Nhamatanda districts. Recent assessments have shown that health facilities have been destroyed by the cyclone, complicating response efforts. The disease is a major concern for the hundreds of thousands of cyclone survivors in the southern African nation now living in squalid conditions in camps, schools or damaged homes. Some drink from contaminated wells or filthy, stagnant water. The first round of an oral cholera vaccination (OCV) campaign is starting today (on 3 April 2019), with the second round of vaccination planned in three months. The OCV campaign will target Beira, Buzi, Dondo and Nhamatanda.

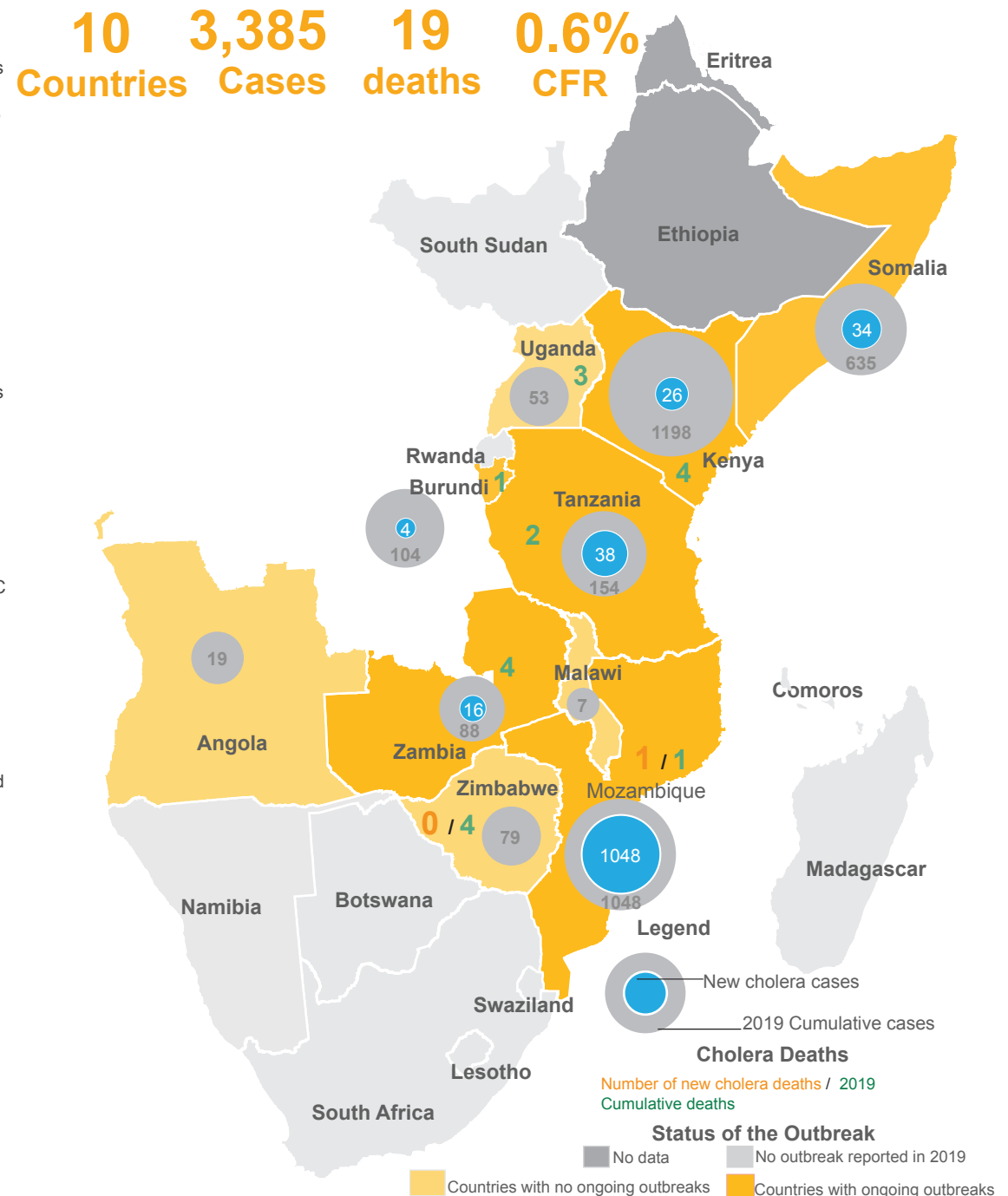
Tanzania: An increase in the epidemic trend has been noted in the last two weeks. During week 12 (week ending 24 March 2019), 38 new cases were reported compared to 23 cases reported in week 11 (week ending 17 March 2019). This raises the total number of cholera cases reported since the beginning of 2019 to 154, including 2 deaths (CFR, 1.3 %). All new cases emerged from Tanga region in the following areas; Korogwe DC (24), Korogwe TC (11) and Handeni DC (3). Cumulatively a total of 33,475 cases including 552 deaths have been reported since the beginning of the outbreak in August 2015.

Somalia: A slight increase in the epidemic trend has been noted in the last two weeks. During week 11, 34 new cases were reported from Banadir Region compared to 32 cases reported in week 10 (week ending 10 March 2019). Cumulatively a total of 635 cases with no deaths have been reported since the beginning of 2019. Children under five years bear the brunt of the cholera outbreak, representing 50% of the total case load reported in week 10 and 44% in epidemiological week 11. During the last two weeks, the most affected district in Banadir was Madina accounting for 27.5% (12/32) of the total number of cases reported during week 10; and 26.5% (9/34) of total cases reported in week 11. Overall (from epidemiological week 8 to 11) the Banadir districts with the highest case numbers are Madina (36; AR 0.05), followed by Daynile (24; AR 0.04).

Kenya: Since January 2019, cholera outbreaks have been reported in Narok, Kajiado, Nairobi, Garissa and Machakos Counties. As of 1 April 2019, a cumulative total of 1198 cases including 4 deaths (CFR, 0.3%) have been reported in these counties since the beginning of 2019. Nairobi and Machakos are the latest counties to report confirmed cases of cholera. During the week under review (epidemiological week 13), 26 new cases were reported from; Nairobi (16), Garissa (6) and Machakos (4) counties.

Zambia: The latest cholera outbreak notified on 22 March 2019 hit Nsama district in Northern Province. The index case, a 9-year-old child from Chaushi village, developed signs and symptoms on 16 March 2019. As of 31 March 2019, a cumulative total of 88 suspected cases and 4 deaths (CFR, 4.5%) have been reported since the onset of the new outbreak.

Burundi: As of 1 April 2019, 206 cases including 2 deaths (CFR: 0.97%) were recorded since the onset of the Cholera epidemic on 18 December 2018. Of these, a total of 104 cases including 1 death (CFR, 0.96%) have been reported since the beginning of 2019. Cases recorded since the beginning of 2019 emerged from three provinces; Bujumbura (56), Rumonge (45) and Cibitoke (3).



Country Priorities and Response Interventions

Country Priorities

Response Interventions

Mozambique

- Set up new cholera treatment centers, rehydration corners and supply AWD kits in affected areas
- Intensify Social mobilization activities
- Increase coverage of WASH services

- 1 cholera treatment center and 7 cholera treatment units were set up with a total bed capacity of 260 beds. The current list of operating treatment centers are: Macurungo (80 beds), Chingussura (10 beds), Munhava (50 beds), Pontagea (19 beds), Mafambisse (20 beds), Mutua (20 beds), Buzi (10 beds) and Nhamtanda (50 beds)
- UNICEF supported the setting up of the 80-bed capacity cholera treatment center in Beira (Macurungu) by providing tents, cholera beds and Protection materials. UNICEF also supported MSF with tents to set up treatment centers outside Beira
- Ministry of Health and WHO strengthened case management by deploying health staff to cholera treatment centers, printing and dissemination of cholera treatment algorithms
- UNICEF supported case management through the supply of 10 AWD kits sufficient for 6,000 cholera cases
- Water supply was re-established in Beira city
- 50,000 water purification bottles were distributed to affected families
- Ongoing intensification of Behavior change communication through; training of activist for social mobilization, organized mobile multimedia for behaviour change with participation of UNICEF and institute of social communication. UNICEF is reprinting IEC materials and supplying megaphones to activists

Kenya

- Deploy a national rapid response team to Machakos county
- Sustain risk communication in affected communities and counties
- Heighten surveillance activities in Machakos, Kajiado and Nairobi counties; contact tracing and prophylaxis of the contacts, active case search and water quality surveillance
- Continue with house hold water treatment in all affected Counties this year

- The national team supplied Aqua tabs, Intravenous fluids, Oral Rehydration Salts and Rapid Diagnostic Test kits to Machakos County
- A national team visited Machakos County for rapid assessment of the situation and provided technical advice on strengthening surveillance, case management and infection prevention and control
- A joint visit to Narok County involving the national Multisectoral team including WHO donated cholera management essential drugs, cholera beds, water quality testing kits and water treatment chemicals to the County Health team
- Community health talks are being carried out in schools and public barazas in the affected counties
- Public health Laws enforcement in the affected counties

Burundi

- Strengthening the surveillance and routine system, including the control of water quality
- Media communication for awareness raising among the population

- MoH and partners have continued to strengthen the surveillance system, especially in the 3 affected provinces (Burumbura, Cibitoke and Rumonge)
- Home disinfection and water treatment in areas with new cases is being conducted systematically

Zimbabwe

- Strengthen Continue with regular coordination meetings through the Emergency Strategic Advisory Group (ESAG)
- Intensify surveillance and reporting activities on a weekly basis by WASH Provincial Focal Agencies (PFAs)
- Pre-position hygiene kits for rapid response in all Provinces
- Intensify health and hygiene education throughout the country
- Provide safe water through promotion of point of use water treatment methods

- The second round of OCV vaccination is being implemented in 2 phases. Phase 1 took place from 11 to 19 March 2019 and was targeting people aged 1 year and above living in Chitungwiza, Epworth as well as the different prisons of Harare. 37 teams of 11 members vaccinated approximately 380,000 people. Phase 2 started on 25 March and will continue until 02 April 2019, targeting 1.1 million people living in 13 suburbs of Harare.
- A series of interactive training sessions on cholera and typhoid fever case management (case definitions, signs and symptoms, related clinical algorithms) have been conducted for different batches of participants drawn from a diverse swath of disciplines in the health sector including: medical doctors, microbiologist and nurses.
- A laboratory training workshop was conducted in Kadoma aimed at improving diagnosis skills of laboratory technicians from the health facilities and briefing them about the importance of lab data for surveillance works during outbreak response operations – giving emphasis on the cases of cholera and typhoid.

Annex 1: Distribution of Cholera / AWD outbreaks in Southern Africa and Challenges in Response - as from 1 of January 2019

Challenges: Mozambique

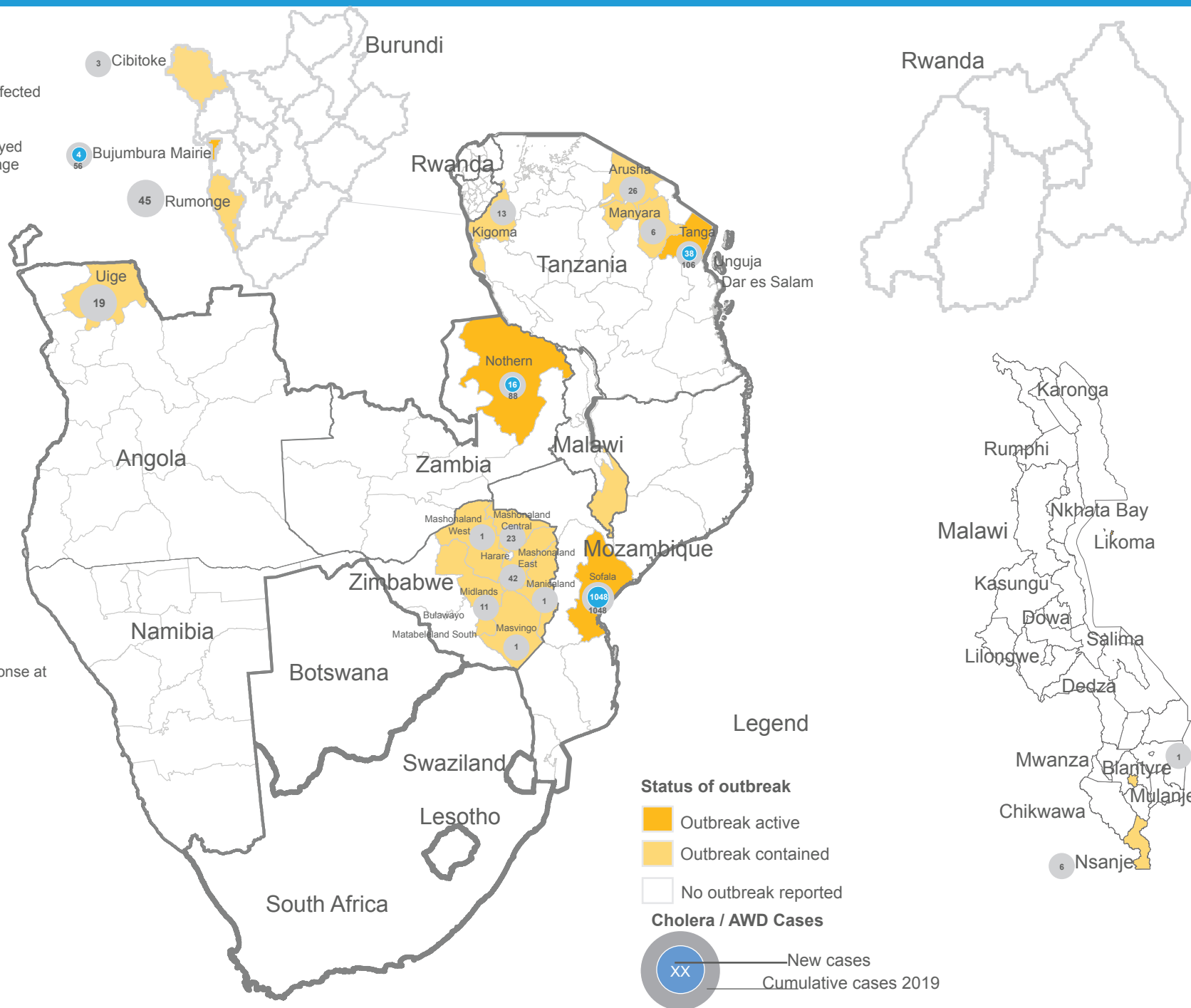
- Inadequate water supply, treatment and sanitation in affected areas
- Due to the cyclone most of health facilities were destroyed and currently being rehabilitated to meet minimal package of services

Challenges: Malawi

- Ongoing heavy rains and flooding is a risk factor to occurrence of cholera outbreaks.

Challenges: Tanzania

- There are limited number of staff to support in the response at all levels (case management at CTCs and prevention)
- The community's 1st line of treatment for all ailments is traditional medicine hence majority of cases arrive at the health facility very late
- Cultural practices/rituals that promote the transmission of cholera



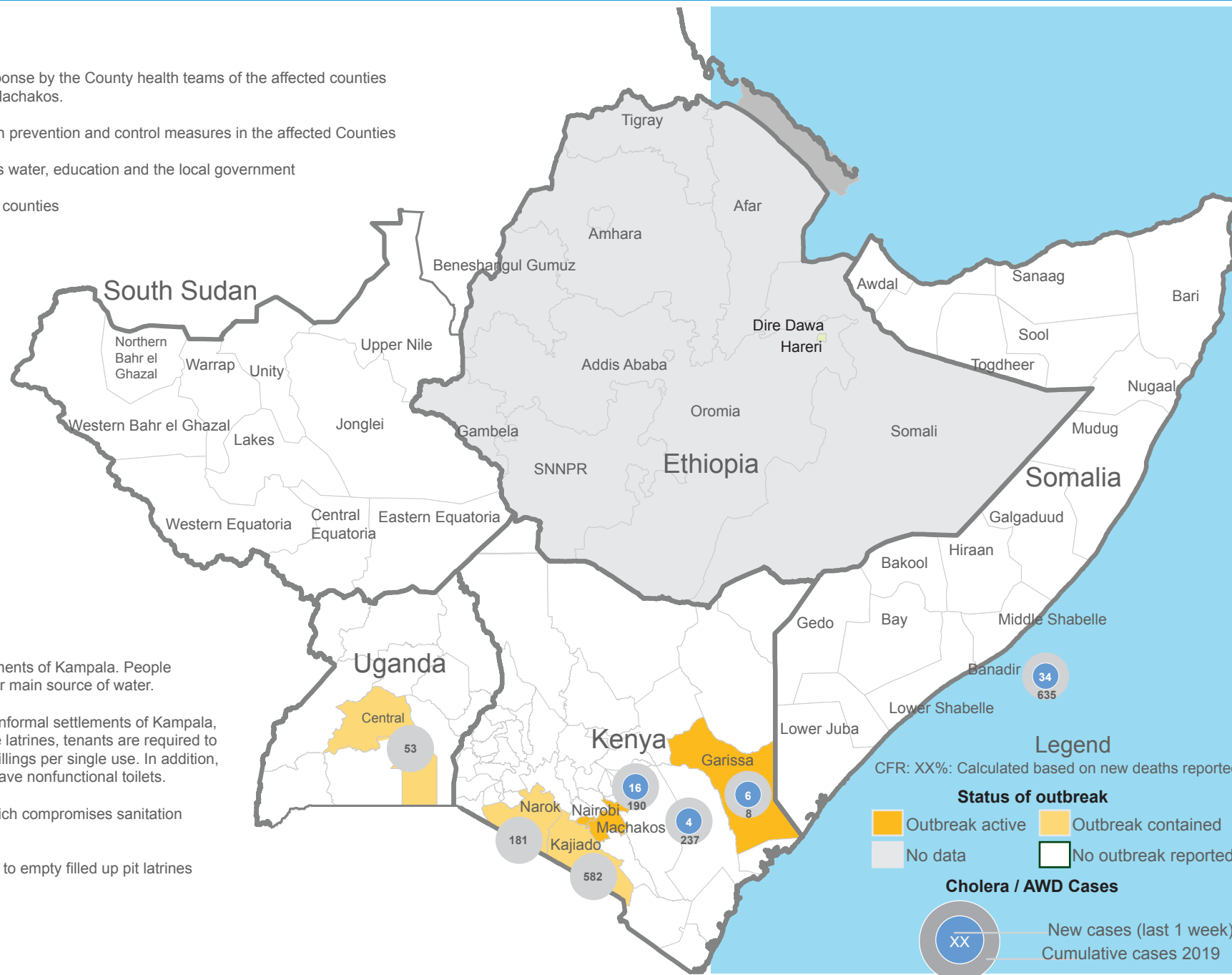
Annex 2: Distribution of Cholera and AWD Outbreaks in the Horn of Africa and Challenges in Response - as from 1 of January 2019

Kenya: Challenges

- Limited resources for surveillance and rapid response by the County health teams of the affected counties this year; Narok, Kajiado, Nairobi, Garissa and Machakos.
- Poor case management and inadequate infection prevention and control measures in the affected Counties
- Inadequate engagement of other sectors such as water, education and the local government
- No reporting of surveillance information from the counties
- Weak enforcement of public health laws

Uganda: Challenges

- Low access to clean water in the informal settlements of Kampala. People continue to use contaminated water wells as their main source of water.
- Lack of proper excreta disposal mechanisms in informal settlements of Kampala, most of the rented one-roomed house don't have latrines, tenants are required to pay for toilet facilities at a rate of 200 Uganda shillings per single use. In addition, some communities either lack toilet facilities or have nonfunctional toilets.
- Poor drainage system in informal settlement, which compromises sanitation conditions
- Expensive private cesspool empties and gulpers to empty filled up pit latrines



Annex 3: Weekly Reported Cholera / AWD Cases and Deaths in 2019, for Countries in Eastern and Southern Africa Region

Country	Week 11		Week 12		Week 13		2019 Cumulative			2018 Cumulative			2017 Cumulative			Cumulative since the beginning of the outbreak			Beginning of Outbreaks	Status of the outbreak
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)		
Kenya	2	0			26	0	1198	4	0.3	5,782	78	1.3	4129	76	1.8	1,198	4	0.3	Jan-19	Active
Mozambique	0	0	0	0	1048	1	1048	1	0	863	3	0.3	3,274	5	0.2	1,048	3	0.3	Mar-19	Active
Somalia	34	0					635	0	0	6,447	45	0.7	78,596	1118	1.4	635	0	0.0	Jan-19	Active
Tanzania	23	0	38	0			154	2	1.3	4,688	84	1.8	4,276	76	1.8	33,475	552	1.6	Aug-15	Active
Burundi	3	0	4	0			104	1	1.0	102	1	1.0	330	0	0.0	206	2	0.97	Dec-18	Active
Zambia	11	4	60	0	16	0	88	4	0	4,127	55	1.3	747	18	2.4	88	4	4.5	Mar-19	Active
Zimbabwe	0	0	0	0			79	4	5.1	10,807	71	0.7	6	3	50.0	10,730	69	0.6	Sep-18	Controlled
Uganda	0	0	0	0			53	3	5.7	2,699	60	2.2	253	2	2.0	53	3	5.7	Dec-18	Controlled
Angola	0	0	0	0			19	0	0	1262	18	1.4	389	19	4.9	331	3	0.9	Sep-18	Controlled
Malawi	0	0	0	0			7	0	0	785	28	3.6	155	5	0.7	7	0	0.0	Feb-19	Controlled
Rwanda	0	0	0	0			0	0	0	3	0	0.0	5	0	0.0					
South Sudan	0	0	0	0			0	0	0	0	0	0.0	17,285	387	2.2					
Namibia																				
Madagascar																				
Comoros																				
Swaziland																				
Botswana																				
Eritrea																				
Lesotho																				
South Africa																				
TOTAL							3,385	19	0.6	37,565	443	1.2	109,445	1709	1.6	47,774	640	1.3		

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