

Bulletin: Cholera and AWD Outbreaks in Eastern and Southern Africa

Regional Update for 2018 - as of 4 November 2018



Highlights

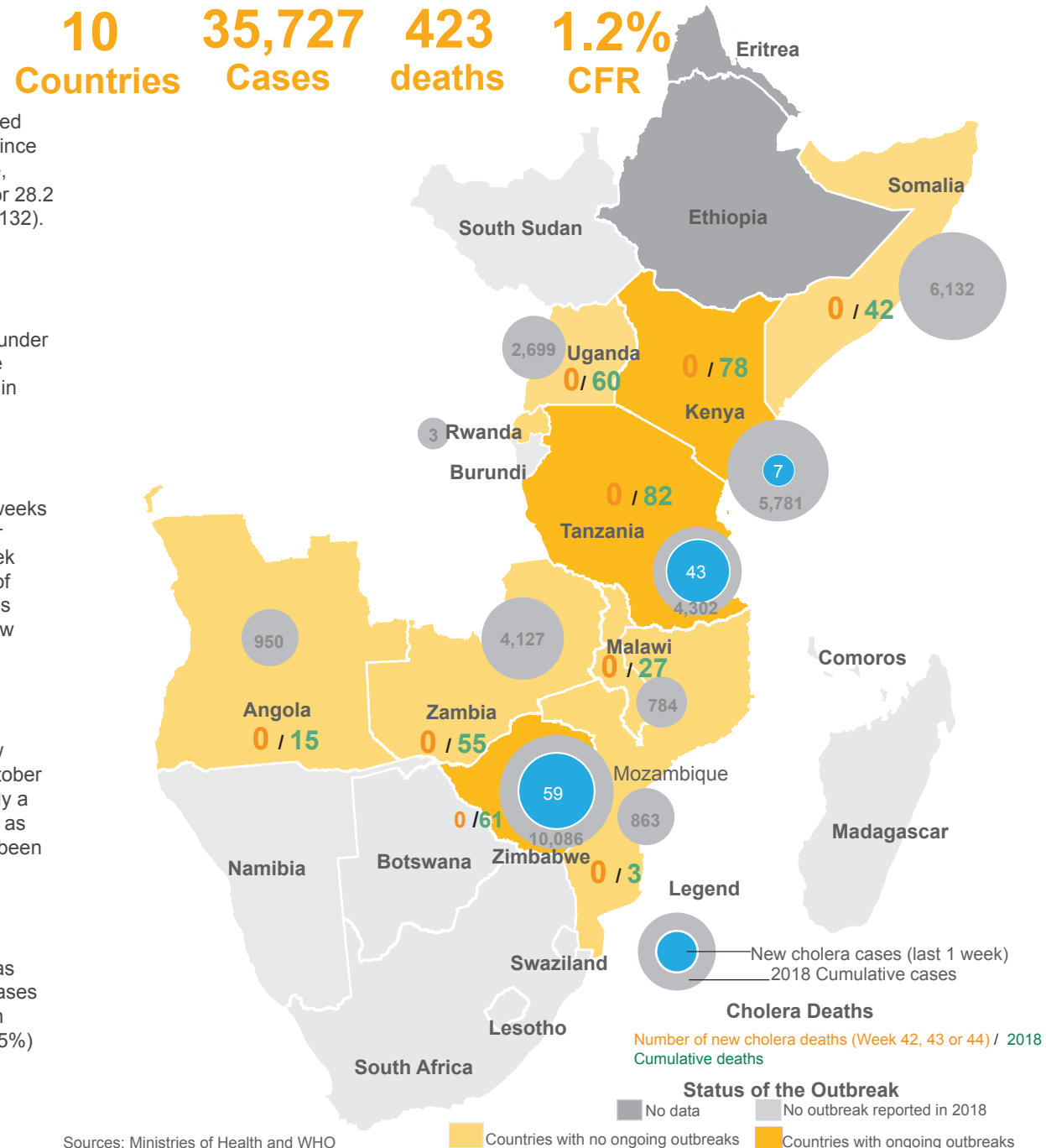
10 out of the 21 countries in Eastern and Southern Africa Region (ESAR) have reported more than 35,727 cholera / AWD cases and 423 deaths (Case Fatality Rate, 1.2%), since the beginning of 2018. These countries include; Angola, Kenya, Malawi, Mozambique, Rwanda, Somalia, Tanzania, Uganda, Zambia and Zimbabwe. Zimbabwe accounts for 28.2 % (10,086) of the total case load reported this year, followed by Somalia at 17.2% (6,132).

Out of the 10 countries with reported cholera/ AWD outbreaks this year in ESAR, 3 (Zimbabwe, Tanzania and Kenya) have ongoing cholera outbreaks. During the week under review, Zimbabwe reported the highest number of new cases (59 cases). Of the three countries with active transmission, Tanzania has recorded the highest CFR (at 1.9%) in 2018.

Zimbabwe: The weekly case incidence has been on a downward trend in the past 6 weeks (From week 39 to week 44). For instance, during week 44 (week ending 4 November 2018), 59 new cases were reported compared to 199 cases reported in week 43 (week ending 28 October 2018). All new cases emerged from Harare. Cumulatively, a total of 10,086 cases including 61 deaths have been reported in 2018. Majority of these cases (98%, 9,909) and deaths (90%, 55) have been reported since the beginning of the new wave of the outbreak on 5 September 2018.

Tanzania: An increase in the epidemic trend has been noted. During week 43, 43 new cases were reported compared to 28 cases reported in week 42 (week ending 21 October 2018). All new cases emerged from Ngorongoro district in Arusha region. Cumulatively a total of 32,933 cases including 548 deaths have been reported in Tanzania mainland, as from August 2015. Of these, a total of 4,302 (13%) cases and 82 (15%) deaths have been reported since the beginning of 2018.

Kenya: During week 42, 7 new cases were reported from Isiolo County. Last case was reported in Turkana County on 18 September 2018, while Embu County reported 3 cases during week 40. Cumulatively a total of 26,591 cases including 421 deaths have been reported, as from October 2016. Of these, a total of 5,781 (21.7%) cases and 78 (18.5%) deaths have been reported since the beginning of 2018.



Country Priorities and Response Interventions

Country Priorities

Response Interventions

Zimbabwe

- Targeted hygiene kit distribution in all cholera affected areas
- Supporting and strengthening case follow up and case investigation teams in the epicenter
- Water point repairs/ rehabilitation and equipping with inline chlorinators in Harare
- Provision of supply consumables within the Government Analyst Laboratory for water quality testing

- An additional 2,392 families received hygiene kits in the past week, giving a cumulative of 13,075 families. The kit comprised of soap for handwashing, point-of-use water treatments and IEC materials.
- 193,225 people reached with safe water through water trucking (private companies), distribution of household water treatment chemicals by partners and repair of 15 boreholes in the affected areas.
- Water quality monitoring is ongoing with 100 samples collected to date from 62 boreholes, 23 wells and 15 municipal taps were collected and tested. Of these, 54 results have been received from government laboratory. Municipal water continues to be safe for household use. Some boreholes and wells show e-coli contamination. Partners and volunteers are promoting household water treatment regardless of source.

Tanzania

- For Ngorongoro district, the following are priority interventions; community based contact tracing, decontamination and regular provision of water supplies in cholera hot spot villages through water trucking
- Follow up closely with communities on construction of toilets in the affected areas and ensure adherence to by-laws
- Capacity building of medical personnel on proper handling of cholera cases
- Increase the number of various cadres of health personnel (from the community level to higher levels of the health system) in affected areas

- The District health team in collaboration with Ngorongoro Conservation Authority (NCA) has continued to provide health education on Cholera prevention and control as well as delivery of water through water trucking during the reporting week
- The District health team in Ngorongoro in collaboration with local community leaders are working to actively find the cases and conducting decontamination of households with cholera cases, using chlorine mixture
- National emergency taskforce meeting was conducted during the week and suggested the following recommendations; 1) more efforts are needed especially for Ngorongoro district to ensure cholera is brought to an end - Ministry of Water and Ministry of Health was tasked to develop and present a WASH action plan, and 2) plan to use OCV as an interim measure while all other activities are intensified and strengthened including; interpersonal communication, WASH facilities installation and capacity building of health personnel

Somalia

- Improve access to safe water, sanitation and health care for IDP's and refugees in the Banadir region (including Mogadishu) and Kismayo

- Chlorination of water sources has been conducted in the affected areas of Hanti-Wadaag, Bullo-Sheikh, Farjano, Allenley and Fanoole
- 1,500 hygiene kits have been distributed in Kismayo
- Hygiene promotion is on-going in Kismayo districts; Farjano, Allanley, Gulwade and Shaqalaha
- WHO conducted on-job training for health workers in Banadir and Kismayo

Mozambique : Current preparedness and prevention interventions include;

- To prevent cross-border transmission of the cholera outbreak from neighbouring countries, the following actions have been implemented: (a) national multi-sector preparedness and response team has been reactivated to assess the risk of the outbreak and review the response plan. (b) Social and behavior change communication activities are being implemented in Manica province which borders Zimbabwe
- Partners (WHO, UNICEF and MSF) have supported Ministry of health in the development of contingency plan for cholera preparedness and response
- UNICEF in collaboration with MoH is planning the distribution of water purification solution (CERTEZA ®), targeting cholera hotspots in all provinces
- UNICEF and WHO are supporting replenishment and prepositioning of AWD kits and water purification solutions
- UNICEF developed radio spots on cholera prevention

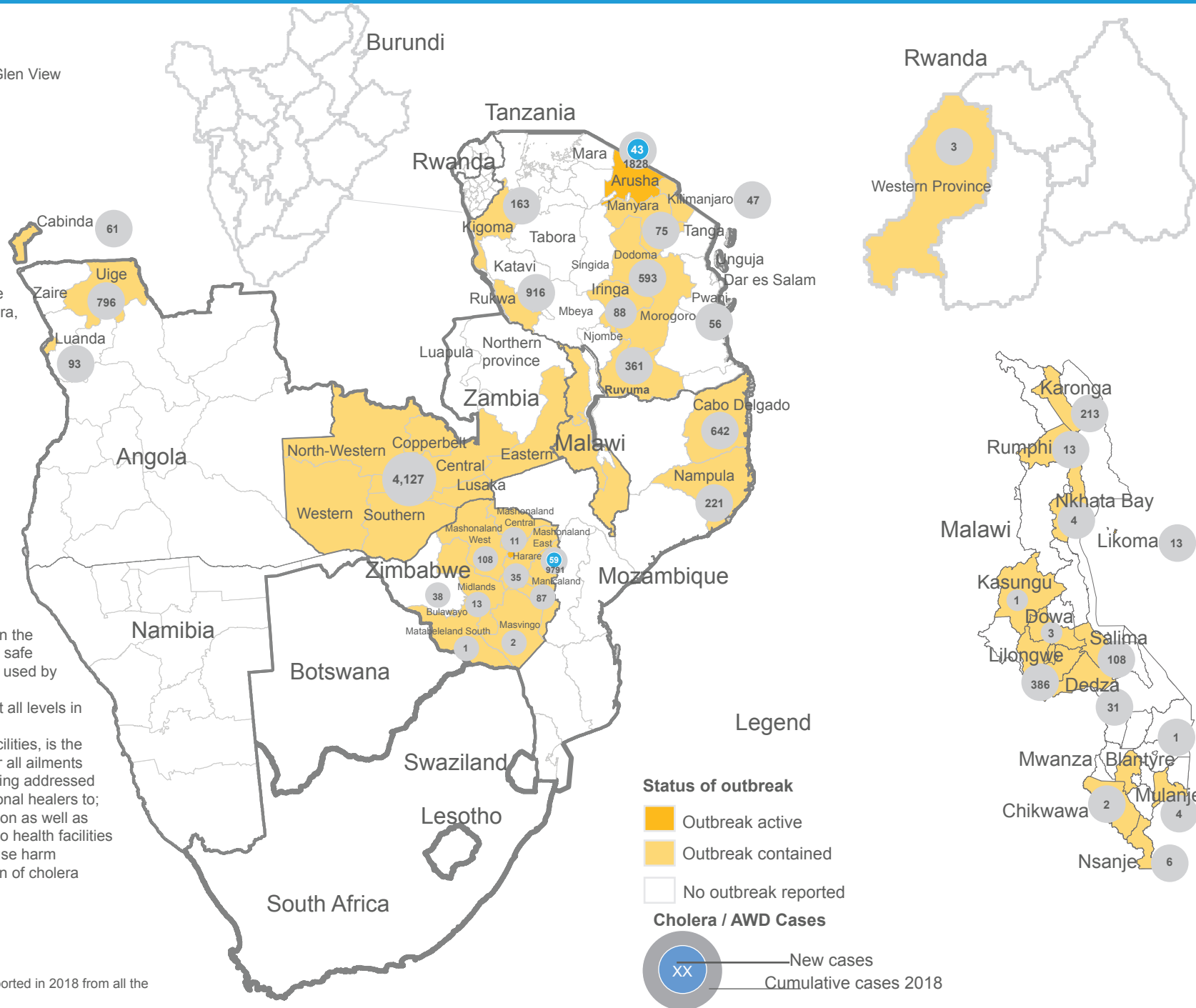
Annex 1: Distribution of Cholera / AWD outbreaks in Southern Africa and Challenges in Response - as from 1 of January 2018

Challenges: Zimbabwe

- Municipal water supply remains erratic in Budiriro and Glen View
- Refuse dumps beginning to pile up in affected areas
- Illegal vending of foodstuffs at the shopping centres has resurfaced
- There are still gaps in the supply of water treatment chemicals, repairs of pump sets at treatment works and repair of water leakages to address non-revenue water for Harare City and other local authorities
- Members of some religious groups in Buhera district are not seeking medical treatment when suspected of cholera, thus increasing the risk of spread for the disease

Challenges: Tanzania

- In Ngorongoro, settlements are sparsely located within the conservancy making it difficult to provide services like safe drinking water hence populations use the same water used by their animals/wild animals
- Inadequate number of staff to support the response at all levels in WASH and Health
- A major barrier to prompt care seeking from health facilities, is the community's over-reliance on traditional medicines for all ailments as the 1st line of treatment. This barrier is currently being addressed through interpersonal communication targeting traditional healers to; raise their awareness about cholera, causes, prevention as well as emphasizing the need for referral of cholera patients to health facilities and advising against herbal treatments that might cause harm
- Cultural practices/rituals that promote the transmission of cholera

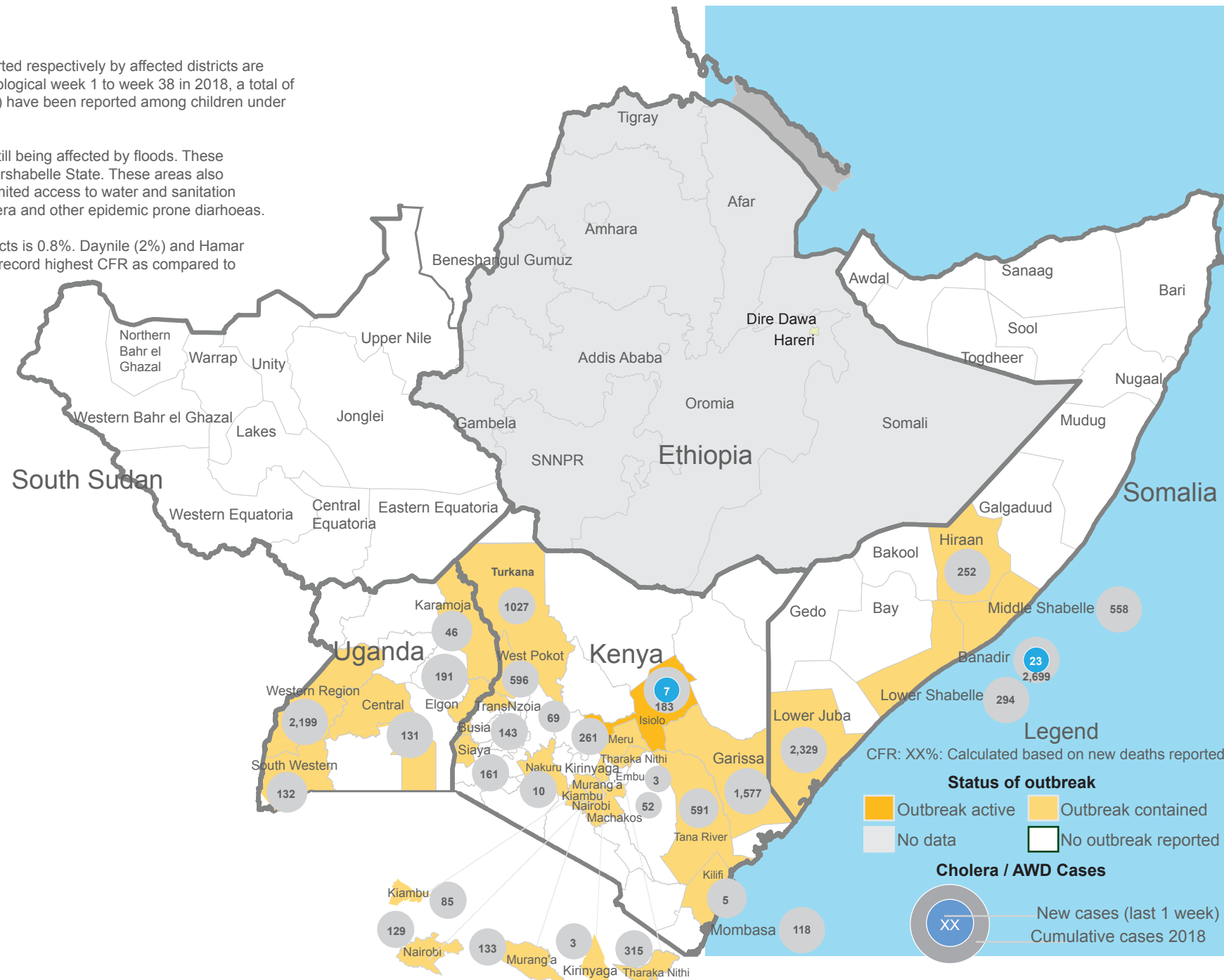


*Cases presented for Zambia refers to cumulative cases reported in 2018 from all the affected districts

Annex 2: Distribution of Cholera and AWD Outbreaks in the Horn of Africa and Challenges in Response - as from 1 of January 2018

Somalia: Challenges

- 54.7 % and 43.9% of cases and deaths reported respectively by affected districts are children under the age of five. From Epidemiological week 1 to week 38 in 2018, a total of 3,326 cases including 18 deaths (CFR, 0.5%) have been reported among children under the age of five (Source, WHO).
- Cholera endemic areas have been and are still being affected by floods. These areas include; South West, Jubbaland and Hirshabelle State. These areas also have a high concentration of refugees with limited access to water and sanitation making them vulnerable to outbreaks of cholera and other epidemic prone diarrhoeas.
- Overall, case fatality rate for all Banadir districts is 0.8%. Daynile (2%) and Hamar Jaba (0.6%) districts of Banadir continues to record highest CFR as compared to other districts



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

Country	Week 40		Week 41		Week 42		Week 43		Week 44		2018 Cumulative			Cumulative since the beginning of the outbreak			Beginning of Outbreaks	Status of the outbreak
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)		
Zimbabwe	1000	6	386	0	444	1	199	0	59	0	10,086	61	0.6	9,909	55	0.6	Sep-18	Active
Somalia	23	1	0	0	0	0	0	0			6,132	42	0.7	6,537	43	0.7	Dec-17	Controlled
Kenya	3	0	7	0	7	0					5,781	78	1.3	26,591	421	1.6	Dec-14	Active
Tanzania	98	3	35	1	28	0	43	0			4,302	82	1.9	32,933	548	1.7	Aug-15	Active
Zambia	0	0	0	0	0	0	0	0			4,127	55	1.3	5,935	114	1.9	Oct-17	Controlled
Uganda	0	0	4	0	0	0	0	0			2,699	60	2.2	4	0	0.0	Oct-18	Controlled
Angola	0	0	0	0	0	0	0	0			950	15	1.6	1046	21	2	Dec-17	Controlled
Mozambique	0	0	0	0	0	0	0	0			863	3	0.3	2,435	3	0.1	Aug-17	Controlled
Malawi	0	0	0	0	0	0	0	0			784	27	3.4	939	32	3.4	Nov-17	Controlled
Rwanda	0	0	0	0	0	0	0	0			3	0	0.0	3	0	0.0	Jan-18	Controlled
Namibia																		
Burundi																		
South Sudan																		
Madagascar																		
Comoros																		
Swaziland																		
Botswana																		
Eritrea																		
Lesotho																		
South Africa																		
TOTAL											35,727	423	1.2	86,332	1,237	1.4		

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