Mozambique: Cholera Outbreak

DREF operation n° MDRMZ005
GLIDE n° EP2008-000219-MOZ
Update n° 1
16 January 2009

The International Federation’s Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent response to emergencies. The DREF is a vital part of the International Federation’s disaster response system and increases the ability of national societies to respond to disasters.

Period covered by this update:
20 November 2008 to 15 January 2009

Summary: CHF 82,218 (USD 67,855 or EUR 52,708) has been allocated from the International Federation of Red Cross and Red Crescent (IFRC)’s Disaster Relief Emergency Fund (DREF) to support Mozambique Red Cross (CVM)¹ in delivering immediate assistance to 500,000 beneficiaries.

A cholera outbreak which started in the first week of November 2008 has now reached ten out of 11 provinces and the situation is expected to worsen with the onset of the rain season. According to the Ministry of Health, by the 9th of January 2009, the cumulative totals are 10,066 cases and 113 deaths since the outbreak in October 2007. For the current outbreak the case fatality rate is 1.06 percent.

The Ministry of Health with the support from OXFAM, UNICEF and CVM continue with the National Sanitation Campaign at national level, and are conducting hygiene promotion and distributing information, education and communication (IEC) materials on cholera prevention in the affected provinces.

¹: Portuguese Cruz Vermelha de Moçambique
The situation
Mozambique’s ten provinces have reported cholera cases and the situation is expected to worsen during the first quarter of 2009 due to rains. Poor sanitation, inadequate sewage systems and garbage disposal have been cited as being the main causes of the outbreak in urban areas, whilst in rural areas it is a result of lack of clean water.

According to the state daily newspaper Noticias, at least 38 people died from cholera in the northern Mozambican province of Nampula. This is a high case fatality rate, since, according to the statistics of the Provincial Health Directorate, only 210 cases have so far been diagnosed in Nampula. A cholera treatment centre has been opened in the provincial capital, Nampula city. Other parts of the province reporting cholera cases are Monapo, Malema and Mecuburi districts. Poor hygiene conditions, the proliferation of piles of garbage, and pools of water left by recent rains have been cited as the main causes of the disease. It is feared that water contaminated by cholera is seeping into the wells, which much of the Nampula city population relies on for domestic use and drinking.

In Manica Province, where the outbreak began in October 2008 in the remote parts of Guro district, cholera has spread to the provincial capital Chimoio, to Sussundenga and Mossurize, and most recently to Manica and Machaze districts. According to the Noticias, 699 confirmed cases with 68 deaths have been reported in the last three months, mostly in Guro, Mossurize and Manica districts which borders with Zimbabwe, where cholera has claimed over 2,000 lives with over 41,000 cases recorded across the ten provinces of the country. In Maputo City, 50 people were under care at the cholera treatment centre (CTC) at the state Hospital Mavalane. The recent heavy rains have damaged the already precarious sanitary system in some of the poorer Maputo residential suburbs.

In response to the cholera outbreak, the Government of Mozambique issued an alert, prompting swift intervention by the Ministry of Health, with the help of various international health sector agencies. Through the response intervention, various cholera treatment centres (CTCs) have been set up and prevention campaigns are being rolled-out to all affected provinces. The Ministry of Health deployed multi-sectoral health teams along the border with Zimbabwe so as to strengthen the capacity of the local health authorities.

Coordination and partnerships
At the request of the CVM, the IFRC released CHF 82,218 from its Disaster Relief Emergency Fund (DREF) to assist the National Society in reaching the affected families. CVM is targeting 500,000 people with hygiene promotion, distribution of ORS and will train its volunteers, provide materials for the CTC and sentinel sites.

CVM is complementing the Ministry of Health in treatment and control of the disease. In coordination with the other humanitarian organizations and local government authorities, CVM is providing assistance in terms of bedding, medicine, oral rehydration solutions (ORS) and cleaning materials. MSF is supporting the CTCs, whilst UNICEF is supporting the Provincial Health Departments with plastic buckets, protection materials, cholera beds and tents.

CVM is part of the Provincial Cholera Emergency Coordination body and has participated in coordination meetings at all levels in order to plan, implement and share information with other stakeholders. CVM also participates at all coordination meetings held by the Ministry of Health at all levels.

Red Cross and Red Crescent action
Progress towards objectives
CVM mobilized its volunteers who started by conducting assessments on the situation. The volunteers are now assisting with the distribution of ORS and some non-food relief items, as well as conducting health education and hygiene promotion activities at community level. Since the cholera outbreak, CVM initially mobilized and trained 230 volunteers in the affected provinces. With the spread of cholera cases to other provinces, 255 more volunteers have been mobilized, thus 485 volunteers are active in this DREF cholera operation. Of these, 190 volunteers are integrated in the teams deployed at the CTCs, whilst others are focusing on community mobilization. The volunteers are also carrying out door-to-door campaigns to identify cholera cases and promoting hygiene practices in the most affected communities.
Mozambique Red Cross volunteers on a door-to-door campaign to identify and monitor cholera cases, as well as distributing ORS and IEC materials.

The following items have been distributed:
- 10 boxes of 1,000 sachets of chlorine for the most critical districts;
- 11 boxes of 144 sachets of ORS for the most critical districts;
- 110 jerry cans;
- 200 metres of plastic sheets for latrine construction.

CVM volunteers have also improved 2,500 family latrines with the participation of the community, as a measure to control and prevent the spread of diarrhoeal diseases. In terms of water chlorination, 549.6 Mt$^3$ of water were treated for 547,765 beneficiaries.

The CVM headquarters is providing technical support to its local branches and so far 30 field visits have been conducted on monitoring prevention and hygiene education activities carried out the volunteers. The National Society has set-up eight First Aid posts where sentinel sites are functioning in Manica, Tete, Zambézia and Niassa Provinces. CVM volunteers have distributed ORS to 1,865 cholera patients through their mobile teams at the sentinel sites. Approximately 6,770 suspected cases have been monitored and some referred to the CTCs.

<table>
<thead>
<tr>
<th>Provinces</th>
<th>No of volunteers</th>
<th>Health and hygiene, sanitation activities</th>
<th>Household visits</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Number of sessions</td>
<td>Beneficiaries</td>
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<tr>
<td>Maputo City, Gaza, Manica, Tete, Zambézia, Nampula, Cabo Delgado and Niassa</td>
<td>485</td>
<td>2,756</td>
<td>68,604</td>
</tr>
<tr>
<td>Total</td>
<td>485</td>
<td>2,756</td>
<td>68,604</td>
</tr>
</tbody>
</table>
## How we work

All International Federation assistance seeks to adhere to the *Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO’s) in Disaster Relief* and is committed to the *Humanitarian Charter and Minimum Standards in Disaster Response* (Sphere) in delivering assistance to the most vulnerable.

The International Federation’s activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation’s mission to “improve the lives of vulnerable people by mobilizing the power of humanity”.

### Global Agenda Goals:
- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

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