



## **MALI: MENINGITIS**

No. MDRML001

28 October 2006

### **INTERIM FINAL REPORT**

*The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.*

#### **In Brief**

Period covered by this Interim Final Report<sup>1</sup>: 7 April to 6 June, 2006.

**History of this Disaster Relief Emergency Fund (DREF)-funded operation:**

- CHF 27,000 was allocated from the Federation's DREF on 7 April 2006 to respond to the needs of this operation. Refer to <http://www.ifrc.org/docs/appeals/06/MDRML001.pdf> for the DREF Bulletin.
- This operation was implemented in 2 months, and was completed by 6 June 2006.

*<Click here to go directly to the attached interim financial report and here to go directly to contact details>*

This operation was aligned with the International Federation's 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.

#### **Background and Summary**

Mali is located in the Sudano-Sahelian region of Africa. The country's relief varies according to its geographical layout (between latitude 11° and 25° north) and climatically, it is dry – with one dry season and one rainy season, the latter lasting only for an average of five months in the southern part and one month in the northern part. Such a geographical situation puts Mali in the West Africa meningitis belt that spreads from Mali to Nigeria, through Burkina Faso and Niger.

Meningitis outbreaks in Mali have a cyclic occurrence of almost every eight to ten years, but they tend to occur earlier than usual now. On April 2006, the Ministry of Health (MoH) declared a meningitis outbreak in the Sikasso Region. 578 cases and 56 deaths were reported, which translates to a case fatality rate (CFR) of 9.68%. This situation spread to eight other regions of the country. Some socio-economic realities in the affected regions that compounded the disease included poor living conditions in the population, concentrations in traditional gold washing areas, lack of awareness on preventive measures, lack of vaccination for communities as well as lack of an epidemiological surveillance system for the purposes of detecting outbreaks. Prior to the early 2006 outbreak, the last meningitis outbreak in the country was in 1997, when health services recorded 1,160 cases, including 126 deaths.

<sup>1</sup> This Interim Final Report is being issued with an interim financial report. A Final Report, comprising of the final financial report and this narrative report, will be issued in due course.

## **Mali: Meningitis; DREF Bulletin no. MDRML001; Interim Final Report**

In support of government efforts to contain outbreak, the Mali Red Cross (MRC) conducted social mobilization campaigns against meningitis in nine localities of the Sikasso Region (Niéna, Finkolo Ganadougou, Miniko, Zaniéna, Kolondiéba, Sélingué, Kadiolo, Zégoua and Sikasso) as from 6 May to 17 June 2006. The intervention helped to improve community-based epidemiological surveillance system by setting up an early warning system and a broad dissemination of the prevention measures at the community level. In early June, the health services located in the project intervention zone reported just one case of meningitis, which is proof of the significant impact of the actions conducted.

### **Coordination**

From the beginning of the outbreak, MRC was involved in the management of the disease from the central level. The national society (NS) participated in the consultation framework at the National Health Directorate (DNS)<sup>2</sup>, and designed a response plan of action in close coordination with the Mali government. The NS was also involved in establishing contacts with other partners as well as in information sharing on the epidemic developments. This enhanced a good visibility of the national society in the project intervention areas.

### **Analysis of the operation – objectives, achievements and impact**

The intervention focused on the Sikasso Region, with a population of 2,295,499 people living in seven administrative districts. Activities were conducted in nine localities across the region (Niéna, Finkolo Ganadougou, Miniko, Zaniéna, Kolondiéba, Sélingué, Kadiolo, Zégoua and Sikasso).

**Objective: To vaccinate 800 children from 5 to 15 years in the affected areas, in collaboration with the Ministry of Health (MoH).**

### **Achievements**

1,000 volunteers, 20 supervisors and 65 team leaders were trained on mobilization against meningitis for a period of 15 days. The trained volunteers, supervisors and team leaders were dispatched to 256 villages, covering a target population of 1,029,373, where they conducted 2,890 sensitization sessions reaching 25,350 men, 29,055 women and 23,167 children. In addition, 30 focus group discussions (FGDs) were conducted by the Red Cross volunteers; 570 men, 799 women and 398 children participated in these discussions.

### **Impact**

- Volunteers have a more in-depth knowledge of the Red Cross/Red Crescent as a result of the intensive training they received from the national society as well as their participation in Red Cross activities.
- A community-based epidemiological surveillance contributed to early warning and enhanced preventive measures.

### **Constraints**

- It was difficult to access some localities due to poor roads.
- Many volunteers did not know how to write and thus they were unable to sign the various documents provided to them by the national society.
- The rainy season sees communities rather busy with their farming activities and thus some of them were not able to participate in the sensitization sessions.
- Lack of motivation amongst the volunteers during the implementation of activities.
- Lack of Red Cross presence in some localities.

### **Lessons learned**

- The success of the operation was the result of the involvement of the political, administrative and customary authorities of the targeted localities through courtesy visits.
- The participation of senior medics in the training and sensitization activities helped to enhance collaboration between health services and the Red Cross as an auxiliary of the public authorities.
- The recruitment of community-based focal points (links) amongst the volunteers gained high community appreciation, as this helped avoid frustrations that could have hindered implementation of activities.

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<sup>2</sup> In French: Direction Nationale de la Santé (DNS)

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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.

For longer-term programmes in this or other countries or regions, please refer to the Federation's Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please also access the Federation's website at <http://www.ifrc.org>

[Interim financial report below; click here to return to the title page.](#)

**International Federation of Red Cross and Red Crescent Societies**

MDRML001 - MALI: MENINGITIS

Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MDRML001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**I. Consolidated Response to Appeal**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget		0				0
B. Opening Balance		0				0
Income						
Reallocations (within appeal or from/to another appeal)						
DREF		27'000				27'000
C3. Reallocations (within appeal)		27'000				27'000
C. Total Income = SUM(C1..C6)		27'000				27'000
D. Total Funding = B + C		27'000				27'000

**II. Balance of Funds**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance		0				0
C. Income		27'000				27'000
E. Expenditure		-26'415				-26'415
F. Closing Balance = (B + C + E)		585				585

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Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MDRML001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**III. Budget Analysis / Breakdown of Expenditure**

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
<b>BUDGET (C)</b>		0					0	
Land, vehicles & equipment								
Others Machinery & Equipment			718				718	-718
<b>Total Land, vehicles &amp; equipment</b>			718				718	-718
Transport & Storage								
Transport & Vehicle Costs			1'430				1'430	-1'430
<b>Total Transport &amp; Storage</b>			1'430				1'430	-1'430
Personnel Expenditures								
Delegate Benefits			48				48	-48
National Staff			1'271				1'271	-1'271
National Society Staff			2'113				2'113	-2'113
<b>Total Personnel Expenditures</b>			3'433				3'433	-3'433
Workshops & Training								
Workshops & Training			11'326				11'326	-11'326
<b>Total Workshops &amp; Training</b>			11'326				11'326	-11'326
General Expenditure								
Travel			35				35	-35
Information & Public Relation			4'373				4'373	-4'373
Office Costs			1'182				1'182	-1'182
Communications			98				98	-98
Financial Charges			27				27	-27
Other General Expenses			2'039				2'039	-2'039
<b>Total General Expenditure</b>			7'754				7'754	-7'754
Program Support								
Program Support			1'755				1'755	-1'755
<b>Total Program Support</b>			1'755				1'755	-1'755
<b>TOTAL EXPENDITURE (D)</b>			26'415				26'415	-26'415
<b>VARIANCE (C - D)</b>			-26'415				-26'415	