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Disaster relief emergency fund (DREF) Chad: Cholera Outbreak

 International Federation
of Red Cross and Red Crescent Societies

DREF operation n° MDRTD008
GLIDE n° [EP-2011-000098-TCD](#)
25 August 2011

The International Federation of Red Cross and Red Crescent (IFRC) 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 emergency response. 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.

CHF 234,953 has been allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the Red Cross of Chad (RCC) in delivering immediate assistance to some 200,000 beneficiaries. Unearmarked funds to repay DREF are encouraged.

Summary: Since early August 2011, the town of Mongo, an area located 510 kilometres from the capital N'Djamena with 480,769 inhabitants experienced heavy rains. As a result, the vulnerable population in the town, having poor access to potable water and sanitation facilities, experienced an outbreak of diarrhoea cases. The cause was first suspected to be gastroenteritis, however on 12 August, the regional branch of the Epidemiological Surveillance Service sent a sample to the national laboratory in the capital which confirmed it as a cholera epidemic. From 09 to 17 August, a total of 152 cases were admitted to the regional hospital of Mongo out of which 7 deaths were recorded. Moreover, outside the hospital, RCC volunteers in the affected area registered 19 deaths, including 9 persons from the same family.



A volunteer disinfecting a house in response to the epidemic /Photo IFRC/RCC

This operation is aiming to scale up the work of volunteers in the affected areas in order to reduce the spread of the epidemic. Training of volunteers will be quickly launched to enable them to carry out mass sensitization campaigns in the affected communities. Targeted vulnerable families will be supported to build adequate latrines. Furthermore, trained volunteers will support the disinfection of existing wells, latrines and refer suspected cases to the hospital. An emergency appeal is being considered to extend the operation to other regions in Chad.

This operation is expected to be implemented over 03 months, and will therefore be completed by end November, 2011; a Final Report will be made available three months after the end of the operation (by end February, 2012).

[<click here for the DREF budget; here for contact details; here to view a map of the affected area>](#)

The situation

Mongo, a town located in the centre of Chad usually experiences cholera outbreak due to poor access to potable water and lack of adequate sanitation facilities. This year, the rainy season started late but came with heavy downpour in the beginning of August. The majority of the population in the town of Mongo drinks

water from unprotected wells (even unfenced). The town is surrounded by a chain of mountains and people usually go up to the mountain to urinate or defecate. When it starts raining, water and wind flow the remaining faecal waste directly into the unprotected wells. As a consequence, water-borne diseases are able to spread rapidly.

The cause was first suspected to be gastroenteritis, however on 12 August, the regional branch of the Epidemiological Surveillance Service sent a sample to the national laboratory in the capital which confirmed it as a cholera epidemic. Cholera is an acute diarrheal infection caused by ingestion of food or water contaminated with the bacterium *Vibrio cholerae*. The short incubation period of two hours to five days, enhances the potentially explosive pattern of outbreaks. Cholera is an extremely virulent disease. It affects both children and adults and can kill within hours. Indeed, from 09 to 17 August, a total of 152 cases were admitted to the regional hospital of Mongo out of which 7 deaths were recorded. Moreover, outside the hospital, RCC volunteers in the affected area registered 19 deaths, including 9 persons from the same family.

The Red Cross of Chad, supported by the IFRC Representation in Chad will contribute to reducing the spread of the epidemic and mitigating its effects in the affected areas. In addition to mass sensitization campaigns, vulnerable families will be supported to build their own latrines and supported through distribution of soap and jerry cans. Disinfection of wells and latrines will be carried out by volunteers from the regional committee. To support the operation, these last require urgent additional training; especially on health modules to enable them carry out the planned activities.

Coordination and partnerships

As an auxiliary to public authorities, the regional committee of the Red Cross of Chad is working closely with local health authorities. A crisis committee composed of NGOs based in the area as well as administrative and health authorities has been set to coordinate the response. At national level, the National Society regularly attends meetings organized by the Ministry of Health (MoH), in particular, the Chadian Technical Committee for the fight against epidemics (Comité Technique de lutte contre les épidémies), as well as UN led meetings. OCHA coordinates all humanitarian preparedness and response at the national level. WHO organizes the health cluster with all NGOs active in the sector. These forums serve the essential function to provide and receive information on the evolution of the epidemic and coordinate the activities of different actors.

To effectively implement this operation, RCC will work closely with UNICEF and OXFAM in the field to provide quality humanitarian response, avoiding overlap and duplication.

Red Cross and Red Crescent action

The Red Cross of Chad's volunteers were the first in the field to sensitize population. A total of 16 volunteers were deployed to register and refer suspected cases to the hospital. In addition, 12 other first aid volunteers joined the hospital to support the medical staff. The RCC's national disaster management officer carried out a rapid two days evaluation mission and distributed soap to some vulnerable people. Volunteers in the regional committee were provided with protection materials.

The needs

- Training of volunteers;
- Procurement and distribution of water purification materials and sanitation equipment;
- Mass sensitization camp to reach an estimate of 200,000 persons in the affected areas;
- Protection of wells.

The proposed operation

To address the above mentioned needs, a total of 120 hundreds volunteers will be trained and involved in the sensitization campaigns and referral of suspected cases, disinfection of houses, latrines and wells. Soap and jerry cans will also be procured and distributed. The 120 trained volunteers will support reducing the spread of the epidemic among 200,000 estimated to be at risk. In order to further prevent water sources infection, wells will be protected with solid material.

A regional disaster response team (RDRT) health specialist was recently deployed during a previous cholera outbreak in the area of Bongor which killed dozens. The added technical capacity demonstrated its utility in that situation. Therefore, a similar approach will be taken for Mongo, where another RDRT health specialist

will be deployed to provide technical support, ensuring that the activities of volunteers are carried out in accordance with best practice and assisting coordination among various actors.

Water, sanitation, and hygiene promotion/Emergency health

Outcome: Reduce the effect of the cholera outbreak in the area of Mongo through sensitization campaigns, emergency rehabilitation of sanitation facilities and improve access to clean water.

Outputs (expected results)	Activities planned:
Promotion of Water sanitation and hygiene at household level. Cholera cases are detected early and referred to hospitals and health centres.	<ul style="list-style-type: none">• Train 120 volunteers in the affected areas using the <i>Epidemic Control for Volunteers Manual and Toolkit (ECV)</i>.• Conduct door to door sensitization campaigns and promote individual and collective hygiene as means of curbing the cholera spread.• Build protection around 200 wells in the affected areas.• Procure chlorine to disinfect contaminated water sources.• Distribute soap to an estimated 10,000 families and jerry cans to 8,000 families in the affected areas.• Detect cholera cases and refer patients for early treatment.• Deployment of an RDRT health Specialist to support the operation for three months• Carry out an emergency health assessment with the support of the IFRC

Contact information

For further information specifically related to this operation please contact:

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How we work

All IFRC 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 the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
 2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
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DREF OPERATION

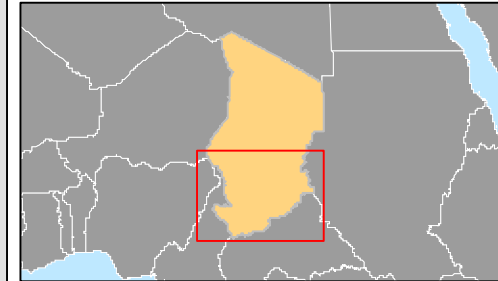
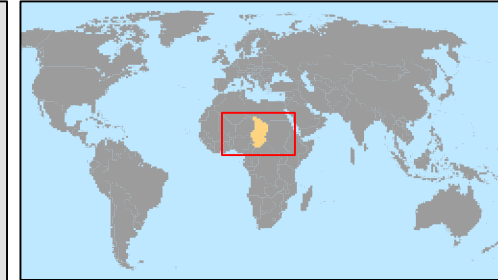
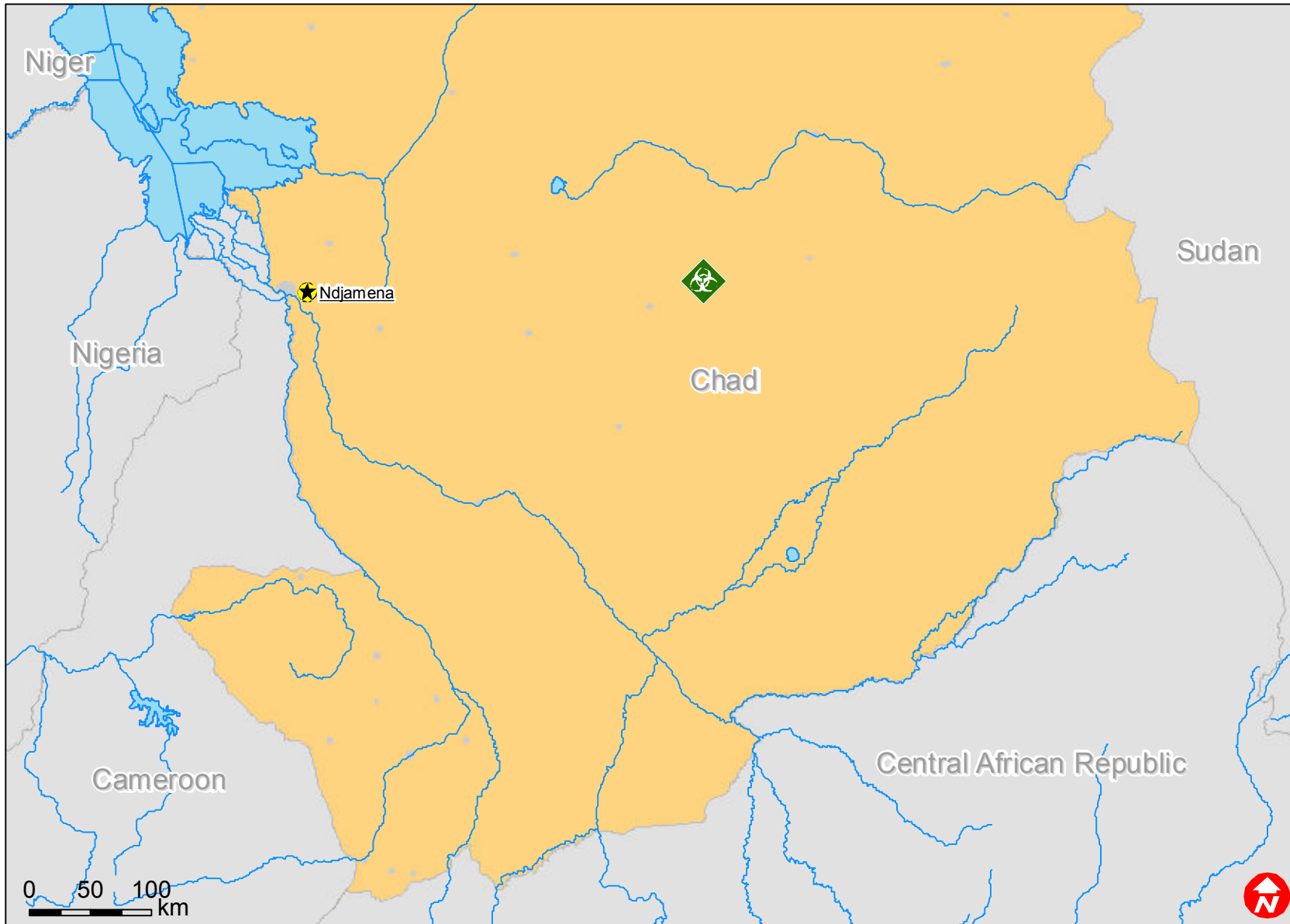
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MDRTD008 CHAD CHOLERA OUTBREAK 2011

Budget Group	DREF Grant Budget CHF
Shelter - Relief	
Shelter - Transitional	
Construction - Housing	
Construction - Facilities	
Construction - Materials	
Clothing & Textiles	
Food	
Seeds & Plants	
Water, Sanitation & Hygiene	33,562
Medical & First Aid	
Teaching Materials	4,349
Ustensils & Tools	60,320
Other Supplies & Services	56,604
Emergency Response Units	
Cash Disbursements	
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	154,835
Land & Buildings	
Vehicles Purchase	
Computer & Telecom Equipment	
Office/Household Furniture & Equipment	
Medical Equipment	
Other Machinery & Equipment	
Total LAND, VEHICLES AND EQUIPMENT	0
Storage, Warehousing	
Distribution & Monitoring	
Transport & Vehicle Costs	5,132
Logistics Services	
Total LOGISTICS, TRANSPORT AND STORAGE	5,132
International Staff	21,000
National Staff	2,770
National Society Staff	16,755
Volunteers	
Total PERSONNEL	40,525
Consultants	
Professional Fees	
Total CONSULTANTS & PROFESSIONAL FEES	0
Workshops & Training	2,038
Total WORKSHOP & TRAINING	2,038
Travel	904
Information & Public Relations	2,265
Office Costs	5,462
Communications	8,208
Financial Charges	1,245
Other General Expenses	
Shared Support Services	
Total GENERAL EXPENDITURES	18,084
Programme and Supplementary Services Recovery	14,340
Total INDIRECT COSTS	14,340
TOTAL BUDGET	234,953



Chad: Epidemic



 Cholera outbreak in Mongo