

INFORMATION BULLETIN



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

ZIMBABWE: CHOLERA OUTBREAK

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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 180 countries. For more information: www.ifrc.org

In Brief

This document is being issued for information only. The Federation is not seeking any funding or other assistance from donors for this operation at this time.

The Situation

The first cholera case was reported in October in Zimbabwe's northern district of Kariba: a man died of cholera on 16 October 2003 in Mola of Kariba district, Mashonaland West province, 45 kilometres from the Chunga satellite clinic in Binga district, Matebeleland North province. The relatives who escorted the deceased from Mola to Chunga for burial were affected and also died consequently.

According to the provincial health authorities, the cholera outbreak has so far resulted in 24 deaths: 16 in Binga district (14 in Chunga ward and two in Manyoro ward) and eight in Mola of Kariba district. There are 65 admissions in Mola. The provincial medical officials revealed that the cholera outbreak still remains a concern as the rainy season approaches. Cholera is not common in Binga and the community of 125,000 people has poor knowledge of the disease. Safe water supply and sanitation facilities are minimal. Thirty-two new cases have been reported in other wards of Bulawayo Kraal, Manjoro, Nebusenga, Nagangala wards and Magobolo village.



Some 30 to 50 diarrhoeal cases a day are being attended by the satellite clinic in Mola which has only the capacity to accommodate eight patients. Some patients are lying outside the clinic, unisolated.

The government has been providing curative measures at the satellite clinic and household levels along with health education in the affected areas. This was, however, to a limited extent, as the need is growing and extension of services to new areas of need is not forthcoming. There are no treatment centres in the affected communities. The satellite clinic in Mola with the capacity of accommodating eight patients only is now attending 30-50 diarrhoeal cases every day. Due to limited resources, the suspected cholera cases have not been isolated to avoid further spread. There is a substantial need for medical supplies and health education in the communities.

No direct intervention by other agencies has been noted. Save the Children (UK) is providing food as part of their normal core activity in Binga.

Red Cross and Red Crescent action

In view of the lack of information on the situation, the **Zimbabwe Red Cross Society** deployed a team of three RDRT (Regional Disaster Response Team) trained provincial staff members on 11 November to the affected areas. The team held consultation meetings with the ministry of health and provincial medical officials in Chunga and visited affected communities. The mission concluded on 14 November with recommendations made to address the situation.

In response to request from the Binga district hospital, the national society pre-positioned one cholera kit in Binga along with the assessment mission. The kit contains volunteer units and health education materials to be used for health education by the Red Cross volunteers and community health workers, as well as ORS (oral rehydration solutions) and other medical units like the intra-venous fluid to be used by medical professionals. One cholera kit can serve up to 5,000 people.

Following the recommendations of the assessment, the Zimbabwe Red Cross dispatched on 15 November from the Federation disaster management stock the following items to Mola:

- 6 4x4 tents
- 1 roll of plastic sheeting
- 1 cholera kit
- 1 box of soap

These items were transported to the affected area with the assistance of Save the Children (UK). The national society has also been identifying 10 volunteers from the villages in Mola for health promotion.

In the coming week, the national society will also implement a plan of action which includes:

- Training of the ten volunteers on health promotion;
- Identification and training of local community members to conduct health promotion activities;
- Provision of chlorine bibs, t/shirts, food and blankets for isolated cases in Binga and Mola; and
- Construction of temporary latrines in Mola.

The Federation has been providing technical support as necessary and will continue to monitor the situation in collaboration with the national society and the ministry of health.

For a full description/profile of the national society: <http://www.ifrc.org/where/country/check.asp?countryid=13>

For further details please contact:

- *Emma Kundishora (Mrs), Secretary General, Zimbabwe Red Cross Society, Harare; Email zrcs@ecoweb.co.zw; Phone 263 4 775 416/8; Fax 263 4 751 739*
- *Ben Mountfield, Federation Head of Zimbabwe Delegation, Harare; Email ifrcsa08@ifrc.org; Phone 263 4 781 516; fax: 263 4 751 739;*
- *Richard Hunlédé, Federation Regional Officer, Geneva; Email richard.hunlede@ifrc.org; Phone 41 22 730 43 14; Fax 41 22 733 03 95*

All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.

For support to or for further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>

For longer-term programmes, please refer to the Federation's **Zimbabwe Annual Appeal number 01.23/2003**.