

***CENTRAL AFRICAN
REPUBLIC, CHAD,
NIGER: MENINGITIS
EPIDEMIC***

**appeal no: 09/2000
14 April 2000**

***THIS APPEAL SEEKS CHF 503,644
CASH AND KIND
TO VACCINATE AND PROVIDE TREATMENT FOR 615,000
BENEFICIARIES AGAINST MENINGITIS FOR 3 MONTHS***

Summary

Cases of meningitis which have been occurring since mid December have dramatically increased and the Central African Republic (CAR), Chad and Niger are now tackling a full epidemic. An evaluation mission carried out in March by a member of the Federation's Epidemics Surveillance Team for West Africa confirms the need for urgent action on the part of the National Societies and Federation in order to avoid further loss of life. The Red Cross volunteer network is already working in the affected communities, and will reinforce its action in order to ensure a wider dissemination of messages to prevent the further spread of meningitis. The Red Cross, as auxiliary to the government authorities, is also called upon to assist with the provision of vaccines which are desperately needed.

The Disaster

Since mid December 1999, cases of cerebro-spinal (meningococcal) meningitis have been reported in Cameroon, Chad, the CAR and Niger, and the number of victims are now increasing at an alarming rate. In Cameroon, meningitis is recurrent in the northern regions, and the current epidemic has particularly affected the north-west and south-west areas of the country. Initial cases were seen in a remote region near the border with Nigeria which explains the very high mortality rate of 22 deaths, out of a total of 87 cases. Since a mass vaccination campaign was undertaken by the Ministry of Health at the outset of the dry season, funding for Cameroon is not requested in this Appeal.

In the CAR, the north-west and central areas of the country are the most affected, but meningitis is also now present in numerous pockets throughout the country. In the capital, Bangui, located towards the south, many cases have been recorded, particularly among children. With the arrival of rain in the south, the epidemic may be halted in Bangui. Unfortunately, this will not be the case for the other areas of the

country which remain dry. In the CAR, as of 28th March there had been 1,111 cases of the illness, resulting in 205 deaths (a mortality rate of 18.4%). In Chad, the affected regions are in the south-west of the country, with West Logone and East Logone the first areas where cases were recorded. The epidemic then spread into Moyen Chari and Mayo-Kebi. As of April 4th, 4,365 cases had been recorded, resulting in 551 deaths (a mortality rate of 12.6%).

According to technicians from the Ministry of Health in Chad, the CAR, and Cameroon, the official statistics represent a small percentage of actual cases. In remote villages, the illness is detected at a much later stage. In fact, the villagers often do not recognise the disease as such.

In Niger, outbreaks of meningitis occur on an annual basis. In 1995, the illness resulted in 4,000 victims of a total of 42,000 officially-recorded cases. This year, as of 4 April, 2,815 cases of meningitis have been recorded in Niger, which have led to 250 deaths. The epidemic has been particularly virulent in the capital, Niamey, where, to date, 1,072 cases have occurred and 75 people have died (a mortality rate of 8.8%). The epidemic is also taking its toll in the regions of Birni N'Konni in the east near the border with Nigeria and in Téra in the West, which is close to the border with Burkina-Faso. Stocks of vaccines are diminishing rapidly since the government launched a vaccination campaign in Niamey and in the other towns which are affected by the epidemic.

The Response so far

Government Action w

In the CAR, the Ministry of Health has set up an epidemiological surveillance cell which includes representatives of the Red Cross and international governmental and non-governmental organisations. The mandate of the surveillance cell is to draw up an intervention plan, and to identify potential partners to assist in halting the spread of the epidemic. Vaccination has already begun in certain areas, but the health authorities are faced with shortages of vaccines. Data collection has also posed problems over the last two weeks. Two teams made up of health agents from the Ministry of Health and the NGO MSF, undertook an evaluation in the affected areas. As a result, the Red Cross has been requested to be responsible for working in two of the four most affected regions of the country (Ombella-Mpoko and Mambéré Kadeï). In Chad, the Ministry of Public Health has provided FCFA 19 million (CHF 47,400) in order to fight the epidemic. The Ministry is working in close co-operation with the WHO, MSF and the Red Cross. However, vaccination campaigns have not yet begun in certain areas since the official threshold which calls for emergency action of 15 cases for 100,000 inhabitants has not yet been reached. In Niger, the government has begun an emergency vaccination campaign.

Red Cross/Red Crescent Action w

The Federation issued an Information Bulletin on 20 March to alert donors and the international community of the severity of the situation, the Red Cross and Red Crescent action taken, and the planned strategy. In the affected countries, Red Cross volunteers are at the forefront of initiatives to halt the epidemic. Moreover, in the CAR and in Chad, Red Cross volunteers were responsible for drawing the authorities' attention to the outbreak of an epidemic. The CAR Red Cross Society has been entrusted by the Ministry of Health with the translation into local languages of messages addressed to the target population. First aid trainers have also been requested to organise refresher courses on meningitis. Red Cross branches relay information gathered in the field by radio or other means on a regular basis. In Chad, the Red Cross is committed to working in awareness-raising and in mobilising the population to participate in the vaccination campaign. In Niger, the Red Cross is working actively alongside the health authorities in order to ensure that those suffering from meningitis are offered appropriate treatment and to implement a vaccination campaign in the affected areas.

This meningitis programme and the African Red Cross Red Crescent Health Initiative (ARCHI 2010) are mutually complementary. ARCHI is a programme which reflects a strong commitment to improving the impact on health by better focusing activities on real priorities as defined by Ministries of Health and beneficiaries, using approaches that build on the Red Cross/Red Crescent strengths while supporting policies and best practices that have been identified by major health actors.

Other Agencies' Action w

In Chad, MSF has donated 500,000 doses of vaccine and is working in West Logone to treat those with meningitis. MSF is also working in the centre of the country as well as the CAR, undertaking vaccination sessions in those villages where cases have been detected. In Chad, the Central African Republic and in Niger, the WHO is working in close collaboration with the Ministry of Health.

Co-ordination w

The IFRC is a member of the International Coordinating Group (ICG) who are responsible for assuring that responses to meningitis epidemics avoids duplication of effort and ensures that an adequate and appropriate intervention is implemented. The planning of this appeal and the amount of vaccines specified was carried out by the Federation's Health Department, in close collaboration with other members of the ICG.

The Intended Operation

Assessment of Needs w

The Federation has carried out a needs assessment by the Regional Epidemics Surveillance Team for West Africa, with visits undertaken to both the CAR and Chad during the month of March in order to collect information relating to the epidemic and to ensure co-ordination with the Ministry of Health, with WHO, MSF and other organisations working in the area of health. National Societies were also assisted to draw up an appropriate plan of action and budget and to assess training needs for its volunteers. In order to carry out these preliminary needs assessments, CHF 21,000 was allocated from the Federation's Disaster Relief Emergency Fund (DREF). The assessment reports underline the need for rapid intervention on the part of the Red Cross Societies and the Federation. In Niger, the Red Cross Society has worked in close collaboration with the government in the assessment of needs.

Immediate Needs w

The immediate need is for appropriate vaccines to halt the spread of the epidemic through vaccination of the population in affected areas, and for oily chloramphenicol in order to treat those who have contracted meningitis. The governments of the CAR, Chad and Niger have appealed for a total of 2,235,035, 1,500,000 and 4,700,000 doses of vaccine respectively. The Federation, through the ICG, is providing 200,000 doses per country in addition to a total of 15,000 vials of oily chloramphenicol. Furthermore, Swiss Co-operation has pledged an additional provision of 250,000 doses of vaccine for the campaign in Niger. Information and awareness-building materials are also urgently required in order for the Red Cross volunteers to mobilise the population and spread messages relating to prevention and recognition of initial signs of meningitis. In Niger, materials are required in order to carry out a hygiene initiative at the hospital to which meningitis cases are referred in Niamey. In addition, the Society intends to put up an additional temporary shelter in order to accommodate greater numbers of patients.

Anticipated Later Needs w

Later needs relate to the necessity of establishing a disaster preparedness plan for epidemics in the Central African region. For this purpose, an evaluation meeting will be held to draw on lessons learned throughout this operation and in order to take the first steps towards putting a preparedness plan in place.

Red Cross Objectives w

- To work with respective Ministries of Health to treat those who are suffering from meningitis in the target areas.
- To collaborate with the respective Ministries of Health in order to ensure vaccination coverage in affected communities in the CAR, Chad and Niger.
- To build awareness in the communities of meningitis prevention methods, and how to recognise the first signs of the illness.
- Given the recurrent nature of epidemics in the three countries, to draw lessons from the operations following the outbreak of meningitis in order to work towards setting up a preparedness strategy.

- To reinforce the capacity of the National Societies so that they may play a more pro-active role in halting the future spread of epidemics.

National Society/Federation Plan of Action

Emergency Phase: 15th April - 30th April 2000 w

- Target regions will be provided with vaccines, medicines, syringes and equipment necessary to carry out a 10-day intensive vaccination campaign in the affected communities.
- Red Cross volunteers will assist personnel designated by the Ministry of Health to ensure appropriate vaccination coverage.
- During the 10-day intensive campaign and until the end of the month, awareness work will be carried out by Red Cross volunteers in the community. To this effect, volunteers will be trained or offered refresher courses in information, education and communication techniques. In all three countries, volunteers will also be trained in data collection and record-keeping. In addition, refresher training is to take place to ensure that volunteers are aware of the symptoms of meningitis, and are able to immediately refer cases to appropriate health structures.
- Health messages for the target community will be drawn up for wide dissemination.
- Volunteers will ensure communication regarding the status of the epidemic between the Red Cross branches and Headquarters.
- The Red Cross Society of Niger will organise a one-day intensive cleaning operation at the Lazaret hospital in Niamey, set up to respond to the crisis, in order to improve hygiene standards.

Phase Two: 1st May - 15th May 2000 w

- The Red Cross Society of Niger will continue its work with the Lazaret Hospital where temporary structures will be established to accommodate patients suffering from meningitis. The Red Cross volunteers will work with the hospital staff in the treatment and care of meningitis patients.

Capacity of the National Societies w

The Red Cross of Chad has 3,771 active trained first aiders, 930 youth volunteers and 219 trainers. In Bongor and Moundou, two of the regions in which the Red Cross will concentrate its activities, the Branches have 50 and 150 active first aiders respectively. The Central African Red Cross Society has a total of 3,000 volunteers and youth members. Volunteers have worked successfully on several occasions such as the National Vaccination Day, during the operations in response to floods, and an epidemic of cholera. The Red Cross Society of Niger has 4,800 volunteers, of whom 130 received intensive relief training from the ICRC in 1997. Each of the National Societies has a health co-ordinator, responsible for the National Societies health programme and activities.

Present Capacity of the Federation in Yaoundé and Abidjan Regional Delegations w

Both the Regional Delegation in Yaoundé and in Abidjan include Regional Health Delegates.

Evaluation w

It is planned to conduct a review of the operation in response to the meningitis epidemic with the participation of representatives from each of the National Societies involved. The Health Delegates from the Regional Delegations and the Regional Disaster Preparedness Delegate for West Africa will facilitate the workshop. This evaluation will provide an opportunity to work towards setting up early warning systems and plans for response in the event of future epidemics. The budget also provides for a visit to Niger by a representative of the Health Department in Abidjan and visits to the CAR and Chad by the Regional Health Delegate in Yaoundé in order to provide assistance to the National Societies as they work in the affected communities.

Budget summary

See Annex 1 for details.

Conclusion

During the dry season, cases of meningitis occur each year in the CAR, Chad and Niger. Trends show that the disease reaches epidemic proportions every seven to eight years. Urgent action on the part of the Red Cross Societies and the Federation is required to save lives, and the Red Cross is in a position to play a key role in the affected communities through its effective volunteer network through the dissemination of vital messages to the populations at risk. For the future, it is essential that the National Societies, as auxiliaries to the government, put into place an early warning system in order to track progress of diseases and to monitor potential epidemics. The evaluation to take place at the close of the vaccination and awareness campaign will examine how such a system may be effectively set up, and will take advantage of disaster preparedness expertise in the region.

Jean Ayoub
Acting Under Secretary General,
Disaster Response & Operations Coordination

Didier J. Cherpitel
Secretary General

		ANNEX 1
<u>BUDGET SUMMARY</u>	APPEAL No. 09/2000	
Meningitis Appeal - CAR, Chad, Niger		
TYPE	VALUE	
RELIEF NEEDS	IN CHF	
<u>Vaccines</u>	139,800	
Oil chloramphenicols	30,750	
Syringes	97,632	
Soap & Cotton	200	
Safety boxes	9,573	
Other medical supplies	462	
TOTAL RELIEF NEEDS		278,417
<u>PROGRAMME SUPPORT</u>		
Programme management	33,961	
Technical support	10,166	
Professional services	11,274	
<u>TRANSPORT STORAGE & VEHICLE COSTS</u>		
Emergency Airlift	55,000	
Fuel/Maintenance/Spareparts	4,995	
<u>PERSONNEL</u>		
Expatriate staff	10,000	
National staff	8,832	
Training	26,000	
<u>ADMINISTRATIVE & GENERAL SERVICES</u>		
Travel & related expenses	7,500	
Information expenses	2,500	
Assessment mission/Evaluation/Monitoring	48,000	
Administrative & general expenses	7,000	
TOTAL OPERATIONAL NEEDS		225,228
TOTAL APPEAL CASH, KIND, SERVICES		503,644
LESS AVAILABLE RESOURCES (-)		
NET REQUEST		503,644