

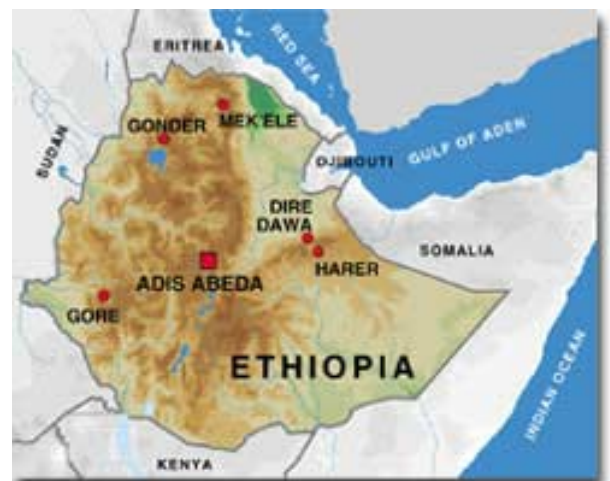
ETHIOPIA: MENINGITIS OUTBREAK

**Appeal no:12/01
7 March, 2001**

***THIS APPEAL SEEKS CHF 1,006,787
IN CASH, KIND AND SERVICES
TO ASSIST 1.5 MILLION BENEFICIARIES FOR 3 MONTHS***

Summary

Ethiopia is facing a major meningitis epidemic with a dramatic increase in the number of cases from 17 in October 2000 to 590 in January, 2001. The number of zones affected by the epidemic has also risen with all regions in the country now reporting cases. The Ministry of Health (MoH) has undertaken selective mass vaccinations in some of the most badly affected areas but is now in need of further stocks of vaccines. The Government has requested partners including the Red Cross to support its activities. The Red Cross will assist with the procurement of vaccines, public awareness, and mass vaccination campaigns for which CHF 200,000 has been allocated from the Federation's Disaster Relief Emergency Fund (DREF).



The Disaster

Ethiopia lies in the African Meningitis Belt and has suffered major epidemics in 1981 (50,000 cases and nearly one thousand deaths) and in 1989 (46,000 cases and 1,700 deaths). Major epidemics usually occur every 8 to 12 years in the belt and the last two in Ethiopia occurred two to three years after epidemics in Sudan. The same pattern seems to be developing this year with the last major epidemic in Sudan in 1999. Last year a major outbreak occurred in Addis Ababa between June and August with over 850 cases and 33 deaths. This was brought under control through a very successful mass vaccination campaign in which Red Cross played an important role. In October 2000, cases were reported in West Gojam zone in the Amhara region and by December four more zones (West Tigray, South Wollo, Shinile and Guraghe) were affected. By February, a total of eighteen zones had reported cases (additionally, North Gonder, South Gonder, South Tigray, North Wollo, North Shoa, Oromia, East Harerghe, Gambella, Illubabor, Bench Maji, North Omo, Gamo Gofa and Sidamo) demonstrating a

remorseless spread of the epidemic. From October to the end of February, over a thousand cases had been reported and 108 deaths had occurred. Tests in a number of zones using latex kits revealed that the type of meningitis was sero type 'A'. Approximately 85% of the cases occurred in people under the age of 30. The Ministry of Health has carried out selective vaccination campaigns in affected areas but is now overwhelmed by the scale of the epidemic and requires support from its partners including the Red Cross. The table below reflects the number of cases, deaths and case fatality rate (MoH figures).

	Oct. 2000	Nov. 2000	Dec. 2000	Jan. 2001	Feb. 2001	Total
Cases	17	46	110	590	585	1,348
Deaths	2	9	9	73	13	108
CFR (%)	11.8	19.6	8.2	12.4	4.5	14.1

The Response so far

Government Action w

The Ministry of Health has undertaken the following activities to control the epidemic:

- strengthened its capacity for surveillance and detection of cases through the training of regional personnel.
- revitalized co-ordinating committees in all the regions and held a national meeting in order to inform and co-ordinate a response.
- provided technical support to the regions and updated guidelines on meningitis control and threshold levels have been circulated. The media has received updates on a regular basis.
- carried out mass vaccination campaigns in some areas where levels have exceeded the WHO epidemic threshold level of a weekly attack rate of 15 cases per 100,000 population. This has happened in the Quarit woreda (administrative district) in West Gojam at the beginning of January where 45,000 people were vaccinated as well as Dessie town in South Wollo where 75,000 were vaccinated in mid January. 42,000 people were also vaccinated in several woredas in Guraghe.

While this response has been effective in controlling the outbreak in those areas where populations have been vaccinated, it has not prevented the spread of the epidemic. In a letter from the Vice Minister of Health to the Red Cross and other partners, the Ministry has requested assistance in the form of 6.7 million doses of vaccines as well as needles and syringes, latex kits, chloramphenicol and support to carry out vaccination campaigns in the regions affected. The letter accompanied an action plan with targeted populations which it aims to vaccinate. The Ministry of Health's present stock of vaccines and chloramphenicol are dangerously low.

Red Cross/Red Crescent Action w

CHF 200,000 has been allocated from the Federation's Disaster Relief Emergency Fund (DREF) to start the operation. The Ethiopian Red Cross Society (ERCS) played a significant role during the outbreak of meningitis in Addis Ababa last year with over 300 volunteers deployed to carry out health education activities and mobilize the population to undertake vaccination. All 31 branches have been informed early this year about the present outbreak and advised to liaise closely with the Ministry of Health, providing assistance where they can. The ERCS branches have been invited to participate in the regional co-ordinating committees. The Ministry of Health relies on the Red Cross network in the country of 31 branches and 42 sub-branches and tens of thousands of volunteers who can be used in support of mass vaccination campaigns.

Other Agencies' Action w

UNICEF has procured 500,000 doses of vaccines and handed them over to the Ministry for use in the affected areas. WHO has provided technical and management support to the Ministry of Health throughout this period. MSF has been working with the Ministry in the areas where they are present, and MSF (Belgium) has sent an epidemiologist to assess the situation and formulate their response.

Co-ordination w

A co-ordinating group chaired by WHO has met regularly since the start of the present outbreak. The group consists of the Ministry of Health, WHO, UNICEF, the ERCS and the Federation, and MSF - Belgium, Holland, France, and Switzerland. This group shares information and is a valuable mechanism for co-ordinating assistance to the Ministry of Health. The meeting on 27 February agreed the role of the different partners. Red Cross has agreed to support the vaccination campaign in North Shoa, Oromia and West Gojam zones, while MSF France will assist in North Wollo and MSF Belgium in Gambella and Bench Maji. This in-country group has direct links with the International Coordination Group (ICG) that meets regularly in Geneva and includes representatives from WHO, UNICEF, the International Federation and MSF. The ICG has been kept informed of the present epidemic and has an emergency stockpile of 7.4 million doses of the Meningococcal vaccine and 27,000 vials of chloramphenicol which can be accessed by partners at a low price.

The Intended Operation

Assessment of Needs •

The needs assessment was carried out by the Ministry of Health personnel in the affected areas. Other information concerning the number of cases, spread of the epidemic and the response needs have been provided by partners including Red Cross and MSF.

Immediate Needs •

The immediate needs are for vaccines to halt the spread of the epidemic and stocks of oily chloramphenicol to treat those who have contracted meningitis. Logistical and mobilization support is required to carry out the campaigns. The Ministry of Health has indicated that 8.4 million people are at risk in 10 zones in 4 regions and based on 80% coverage has asked for 6.7 million doses of vaccines along with 68,000 boxes of syringes, 20 packs of latex tests and 50,000 vials of chloramphenicol. The Red Cross will focus its attention on the three zones of North Shoa, Oromia and West Gojam where there is a total population of 4.4 million and the Ministry of Health has estimated that 70%, or approximately 3 million people, are at risk. Information and education materials are urgently required for use in the mobilization and education campaign.

Red Cross Objectives •

- To procure 1.5 million doses of vaccine and 1.5 million needles and syringes for use in the North Shoa, West Gojam and Oromia zones in Amhara region as well as 5 packs of latex tests and 8,000 vials of oily chloramphenicol for use nationally.
- To assist the Ministry of Health in the vaccination campaign in North Shoa, West Gojam and Oromia zones through the deployment of Red Cross volunteers for the purpose of mobilizing communities so that awareness levels are raised and at risk groups are vaccinated.

National Society/Federation Plan of Action

Objective 1: To procure 1.5 million doses of vaccine and 15,000 boxes of syringes for use in the North Shoa, West Gojam and Oromia zones in Amhara region as well as 5 packs of latex tests and 8,000 vials of oily chloramphenicol for use nationally.

- Procurement and transportation will be undertaken through the ICG in Geneva and their emergency stock in Amsterdam. Priority needs are for the coverage of the most at risk population of 300,000 in North Shoa, 400,000 in Oromia and 250,000 in West Gojam. The total initial requirement is 950,000 doses of vaccines, 950,000 needles and syringes, 2,000 vials of oily chloramphenicol and 1 pack of latex tests. 200,000 doses of vaccines, needles and syringes have been ordered and will arrive the week of 9-14 March.
- Stocks will be stored initially at the Ministry of Health cold store in Addis Ababa which has adequate capacity and then a cold chain will be organized to the affected woredas. The ERCS and the Federation vehicles will be used to assist in the logistics.

Objective 2: To assist the Ministry of Health in the vaccination campaign in North Shoa, West Gojam and Oromia zones through the deployment of Red Cross volunteers for the purpose of mobilizing communities so that at risk groups are vaccinated and awareness levels are raised.

- The ERCS branches in Debre Birhan (North Shoa), Dessie and sub branch in Kalu (Oromia), Bahir Dar and the sub branch in Fenote Selam (West Gojam) will be informed of the action plan and will mobilize their volunteers and agree action plans with the Ministry of Health (March 2 to March 15).
- The deployment of 2 ERCS HQ staff to North Shoa and West Gojam and 1 Dessie branch staff to Oromia will be arranged to co-ordinate the response locally.
- A Federation epidemiologist will be assigned to assess local needs, advise and assist in the co-ordination.
- One day training of volunteers in the three zones in the basics of meningitis and their role in the campaign will be carried out.
- 50,000 copies of the meningitis leaflet will be printed in the local language and distributed to the branches.
- Vaccination campaigns will be implemented in the priority woredas (March 15 to April 15), and in the secondary priority woredas from April 15 to May 15. Additional activities will focus on a further extension of the campaign to be carried out according to needs based on requests from the MoH.

Capacity of the National Society •

The ERCS has a long tradition of responding effectively to emergencies. It has the capacity and systems in place to provide effective and efficient disaster response services. The Programme Department will co-ordinate the programme. Two staff, both nurses with management experience, will be deployed to the field. Other staff may be called upon to provide support depending upon developments. A meningitis task force with flexible membership will be established to make decisions at a policy and operational level.

The ERCS has the following field level capacity:

- *North Shoa:* the branch in Debre Birhan is managed by an active board with a doctor as chairperson, and has a full time branch secretary, youth co-ordinator and supporting staff, 48 adult active volunteers (most of them trained in Community Based First Aid), 12 youth leaders, 76 school Red Cross clubs with nearly 10,000 volunteers. The branch has one car and an ambulance.
- *Oromia:* The sub-branch at Kalu in South Wollo has a branch secretary. Support will be provided by the South Wollo Dessie branch which has 35 full time staff and considerable experience in running emergency programmes including the ongoing food security programme in South Wollo.
- *West Gojam:* The branch at Bahir Dar has a branch secretary and a programme co-ordinator. 8 health trained personnel can be called upon to assist as needed. The branch has one vehicle and an ambulance. There is a sub branch at Finote Selam with a sub branch secretary and an ambulance. Three or four other vehicles can be made available by the ERCS and the Federation. Additional vehicles will be rented locally.

Present Capacity of the Federation in Ethiopia •

The Federation has two delegates in Addis Ababa. The Head of Delegation is a member of the local ICG and will provide assistance to the ERCS in terms of co-ordination and management advice. The Federation will provide short term delegate(s) (epidemiologist) who will assist the ERCS on the technical side and liaise with the Ministry of Health.

Budget summary

See Annex 1 for details.

Jean Ayoub
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		ANNEX 1
<u>BUDGET SUMMARY</u>		PPEAL No. 12 /2001
ETHIOPIA - MENINGITIS EPIDEMIC		
TYPE		VALUE
RELIEF NEEDS		IN CHF
<u>Medical & first aid</u>		
Vaccines		360,000
Drugs		230,500
Teaching materials		10,000
Other relief supplies		
TOTAL RELIEF NEEDS		600,500
<u>PROGRAMME SUPPORT</u>		
Programme management		67,888
Technical support		20,322
Professional services		22,537
<u>TRANSPORT STORAGE & VEHICLE COSTS</u>		149,500
<u>PERSONNEL</u>		
Expatriate staff		34,950
National staff		85,740
Seminar/Workshop		2,500
<u>ADMINISTRATIVE & GENERAL SERVICES</u>		
Travel & related expenses		1,800
Information expenses		500
Administrative & general expenses		5,550
Consultant fees		15,000
TOTAL OPERATIONAL NEEDS		406,287
TOTAL APPEAL CASH, KIND, SERVICES		1,006,787
LESS AVAILABLE RESOURCES (-)		
NET REQUEST		1,006,787