

OPERATIONS UPDATE



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

ETHIOPIA: MENINGITIS EPIDEMIC

11 April 2002

This Ops Update is intended for reporting on emergency appeals.

Appeal No. 06/2002

Launched on 21 February 2002 for CHF 1,460,000 for three (3) months

Disaster Relief Emergency Fund (DREF) allocated: CHF 200,000

Beneficiaries: 1,800,000

Operations Update No. 1; Period covered: 21 February to 31 March 2002; Next Ops Update (no. 2 expected May 2002)

“At a Glance”

Appeal coverage: 21.9%

Related Appeals: 2002 Ethiopia Annual Appeal no. 01.10/2002

Outstanding needs: CHF 1,140,909

Summary/Update: The appeal has received only CHF 319,091 (21.9%), but sufficient funds are available to cover the planned revised activities outlined below. A reduced budget is being considered, but this will be done only when it is absolutely sure that the epidemic is under control. Within a month the Federation hopes to communicate a clearer picture on the ongoing needs, and any corresponding changes in the budget will be made at that point.

Operational Developments:

The first case of meningitis was reported in September 2001. As of 30 March 2002, the cumulative figure of reported cases was 4,010, with 189 deaths in 14 zones, but because of significant delays in reporting (up to 30%) the actual figure is expected to be higher. The Southern Nations Nationalities Peoples Region (SNNPR), where the population density is the highest in the country (470 inhabitants per square kilometre), had the highest number of cases, with a total of 2,842, with 166 deaths. A strategy of selective vaccination was opted for in the SNNPR due to the shortage of vaccines in the Ministry of Health (MoH) strategic stocks. Though there has been low vaccination coverage in these areas, the onset of the short rains may have helped to contain the spread of the disease. There is still concern about a resurgence of cases in these areas and surveillance activities are being conducted by the MoH where resources are available. Sidama, a zone in Oromiya, continues to pose a big challenge in containing the epidemic. Médecins Sans Frontières is active in this area. The Keffa and Dawro zones are the latest zones from the south to report cases of meningitis.

In the North, Tigray, Benshangul and North Gonder are all affected, with high mortality rates reported especially in the last zone.

The original plan was developed to respond to a wide spread epidemic, but it is hard to tell at this stage how the epidemic will further develop. There are indications that the pattern of the disease may be changing.

Red Cross and Red Crescent action w

The Federation issued appeal no. 06/2002 on 21 February 2002, seeking CHF 1.4 million to cover the costs of vaccines and operational needs for 1.8 million beneficiaries. CHF 200,000 was released from the Disaster Response Emergency Fund (DREF), and used to purchase 200,000 bundled vaccines and 2,000 doses of oily chloramphenicol. The vaccines were put in the MoH strategic stock from which operating partners obtain vaccines after the approval of a plan of action.

The International Federation also contributed 500,000 bundled vaccines to the MoH strategic stock in October 2001. These vaccines were bought with funds remaining after the meningitis vaccination operation in 2001.

The Ethiopia Red Cross Society (ERCS) originally planned to intervene in the Damot Woyde, Ubadebretshay and Arbaminch woredas in the SNNPR, but due to poor co-ordination by the task force, logistical constraints, and poor information flow from the field, the ERCS was late to intervene in these areas. By the end of February the zonal MoH had already begun selective vaccinations in the affected zones, and with the short rains the outbreak was contained. Since March no significant number of cases has been reported from these areas. Surveillance has been increased by the MoH in these affected areas.

The ERCS changed its strategy and prepared a new plan of action. In early March, the Dawro zone, in the SNNPR region comprising five (5) woredas (districts) reported the first case. The ERCS immediately responded by mobilizing volunteer teams to assist the MoH. The headquarters in Addis provided logistical support and one experienced staff from last year’s meningitis operation headed a team that was deployed to the affected zone.

Health w

Objective 1 To procure 1.8 million doses of meningitis vaccine and related supplies for mass vaccinations and 2,000 vials of oily chloramphenicol for treatment of meningitis cases in the SNNPR .

With the DREF allocation, the first consignment of 200,000 doses of bundled vaccines and 2,000 vials of oily chloroamphenicol were bought and put in the MoH’s strategic stock in mid-March. The vaccines are being used by the ERCS jointly with the zonal MoH in the Dawro zone. The total requirement for the Dawro zone, targeting 70% of the population, is estimated at about 218,000 vaccine doses. The following table reflects the total number of vaccines released by the MoH to date.

Table 1: Total Number of vaccines dispatched by FMOH

Region	Zone	Number of vaccines despatched
SNNPR	Sidamo	904,000
	Dawro (1)	70,000
	Keffa	75,000
Tigray	Wakiro	175,000
Oromia	Jimma	105,000
Amhara	North Gonder West Gojam South Gonder	150,000
Total		1,479,000

(1) Zone where the ERCS is operating

Objective 2 To assist the regional health bureau and zonal health departments in mass vaccination activities in the SNNPR through the deployment of Red Cross volunteers for the purpose of mobilizing the communities to increase public awareness and vaccination of population groups at risk.

In addition to the support from the ERCS headquarters, two supervisors (the branch secretary and sub branch secretary from Arbaminch and Wolayta zones) are overseeing the campaign. One out of the five woredas (districts) in this zone has surpassed the epidemic threshold level for three consecutive weeks. The zonal MoH has established seven temporary treatment shelters where a total of 251 patients from the Loma Bosa and Mareka woredas have been treated to date. A total of 21 people died (ten patients and eleven people at home).

The ERCS has planned to carry out a mass vaccination to contain the epidemic and prevent it from spreading to neighbouring zones. The aim is to vaccinate at least 80% of the risk group, people between age 2 and 30. The vaccination campaign is planned to last for ten days in the first woreda (bearing in mind that some of the areas are inaccessible by car and require a minimum of 5 to 7 hours of walking).

Twenty volunteers formed into ten teams plus one health professional were trained jointly by the ERCS and MoH. Prior to the commencement of the campaign, health education and dissemination on the meningitis epidemic were conducted in two markets, two schools, and 5 social gathering points. A total of 5,000 leaflets had been distributed in the Loma Bosa and Mareka woredas. During the vaccination campaign, the volunteers helped to register and mobilize the population. While the vaccination campaign was on going, the senior ERCS medical officer and the Federation liaison officer monitored the activities. Inputs from both officers further strengthened the co-operation between the MoH and the Red Cross.

Table 2: Population figures and the target population for mass vaccination in Dawro Zone

Woreda	Kebeles	Population *	Target (70%)
Loma Bosa	21	121,610	85,127
Mareka	21	115,649	80,954
Gena Bosa	16	33,756	23,629
Tocha	7	20,819	14,573
Isera	10	20,178	14,124
Total	75	312,012	218,407

* Dawro is a newly formed zone. The compilation of the population figure is not complete.

Table 3: Number of meningitis cases reported in the Dawro zone.

Woreda		No. of cases (C) & Death (D) by calender week				Remarks
		Wk 10	Wk 11	Wk 12	Wk 13	
Loma Bosa	C	13	82	86	56	
	D	2	1	0	0	
	AR	10.7	67.4	70.7	46.8	
Mareka	C	8	42	35	61	
	D	0	1	1	4	
	AR	6.9	36.3	30	52.7	
Gena Bosa	C	-	-	-	6	
	D	-	-	-	3	
	AR	-	-	-	9.28	
Tocha	C	-	-	-	2	
	D	-	-	-	0	
	AR	-	-	-	2.5	

Isera		no cases reported yet, but surveillance by MoH is active
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AR = attack rate**National Society Capacity Building w**

The branch, in particular its volunteers, is gaining valuable experience through this operation which will be useful in future immunisation campaigns.

Federation Delegation w

The regional health delegate from Nairobi and the Federation's epidemiologist provided technical support and assisted the ERCS with the elaboration of the emergency appeal. In addition the Federation recruited a liaison delegate who assisted the ERCS with the change in plans (vaccinations in Dawro rather than North Omo).

Coordination

The in-country meningitis task force was reactivated in early January 2002. Its members, the Federal Ministry of Health, UNICEF, the World Health Organisation (WHO), ECHO, the MSF Group and the ERCS/Federation, meet on a weekly basis. The MoH chairs the meeting with technical input from WHO. Factors that have constrained the operation include: delays in operational decisions and guidance, and a slow flow of information (from the field to Addis). Providing that sufficient vaccines are available, the MoH intends to complete the vaccination in those areas where the coverage was low.

Outstanding needs

While the appeal has received only CHF 319,091 (21.9% coverage), sufficient funds are available to cover the planned revised activities. A reduced budget is being considered, but this will be done only when it is absolutely sure that the epidemic is under control. Within a month the Federation hopes to communicate a clearer picture on the ongoing needs, and any corresponding changes in the budget will be made at that point.

For further details please contact: Josse Gillijns, Phone: 41 22 730 42 24; Fax: 41 22 733 03 95; email: gillijns@ifrc.org

Donors providing in-kind relief in response to large-scale emergencies are urged to contact Mikhail Chitashvili at 41 22 730 43 05 ,in the Federation's Logistics and Resource Mobilisation Department to avoid any unnecessary delays in the clearance and delivery of emergency relief assistance.

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.

This operation seeks to administer to the immediate requirements of the victims of this disaster. Subsequent operations to promote sustainable development or longer-term capacity building will require additional support, and these programmes are outlined on the Federation's website.

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

John Horekens
Head
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Bekele Geleta
Head
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Ethiopia: meningitis						ANNEX 1
APPEAL No. 06/2002		PLEDGES RECEIVED				10.04.2002
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
CASH						
REQUESTED IN APPEAL CHF ----->				1'460'000		TOTAL COVERAGE 21.9%
AUSTRALIAN - C		3'058	AUD	2'697	28.02.2002	SUPPORT TO NATIONAL STAFF
BRITISH - RC		24'510	GBP	59'559	06.03.2002	
FINNISH - RC		25'000	EUR	37'055	06.03.2002	
GERMAN - RC		112'360	EUR	164'461	18.03.2002	VACCINATION & TRANSPORT
JAPANESE - RC				48'000	06.03.2002	
MONACO - RC		5'000	EUR	7'319	02.04.02	
SUB/TOTAL RECEIVED IN CASH				319'091	CHF	21.9%
KIND AND SERVICES (INCLUDING PERSONNEL)						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED IN KIND/SERVICES				0	CHF	0.0%
ADDITIONAL TO APPEAL BUDGET						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	