

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

DEMOCRATIC REPUBLIC OF CONGO: CHOLERA OUTBREAK IN MBUJI MAYI

11 March 2003

This Ops Update is intended for reporting on emergency appeals.

Appeal No. 35/02

Launched on 26 November 2002 for CHF 160,000 (USD 111,901 or EUR 108,862) to assist 250,000 beneficiaries for 3 months

DREF Allocated: 10,000 CHF

Beneficiaries: 250,000

Operations Update No. 02; Period covered: February 1 to March 3, 2003; last Ops Update no. 1) issued 30 January 2003; next Ops Update (no. 3) expected 31 March 2003

"At a Glance"

Appeal coverage: 64%

Related Appeals: 2003 Annual Appeal for the DRC (no. 01.43/2003)

Outstanding needs: CHF 57,638

Summary/Update: According to various sources, since September 2001 there have been 19,000 cholera patients, with more than 1,200 deaths. During the last months of 2002, the epidemic spread from Katanga Province to Kasai Oriental Province, where MSF teams have treated more than 3,800 patients, of which 209 died. MSF reported that almost 100 cholera patients are seen each week in Lubumbashi town, and some 300 in Katanga. East Kasai Province has an average of 250 new cholera patients per week. The report added that, in Mbuji-Mayi town, the figures seem to have decreased slightly, but on the periphery, especially around the mines, there has been a new increase for the past two weeks, which means cholera is spreading from village to village. Red Cross teams working closely with MSF and the Stop Cholera committee must be supported to contain cholera epidemic. The Red Cross volunteers need more sanitation materials, bicycles, pairs of boots, chlorine, soap, sprays, brushes, rakes, mufflers, wheelbarrows and motorbikes to support the operation. More support is needed to scale up information, sensitisation, education and social mobilisation campaigns and disaster preparedness activities to stem the epidemic. The DRC Red Cross has a strong volunteer network and well trained Red Cross volunteers in Kasai Oriental, renowned for their capacity and voluntary services. With more support, these volunteers can and will help contain this killer cholera disease which has so far claimed the lives of more than 230 men, women and children.

The situation

As a result of the cholera epidemic in Mbuji Mayi, reports indicated that between 19 September 2002 to 22 January, 2003, 3,139 people had been hospitalised while 202 people have died (a death rate of 15.5%). The highest number of cases were reported in the health zones of Dibindi, Miabi, Kansele, Tshilengué and Bipemba.

Mbuji Mayi, the provincial capital city of the mining province of Kasai Oreintale in the DRC, has an estimated population of 4.2 million inhabitants. The city hosts hundreds of thousands of internally displaced Congolese who continue to flee war and conflict in the eastern part of the DRC, and continues to suffer the effects of internal population movements.

Over-population coupled with deteriorating health systems and infrastructure in Mbuji Mayi, has aggravated the cholera epidemic. Mbuji and its satellite villages of Bakamba, Kamaleka, Kambanga and Tshilunde have been the hardest hit by the Cholera. Other prevailing pathologies including diarrhoeal diseases, dirty hands diseases associated with malnutrition and vitamin deficiencies are all factors that increase the risk of the cholera epidemic expanding.

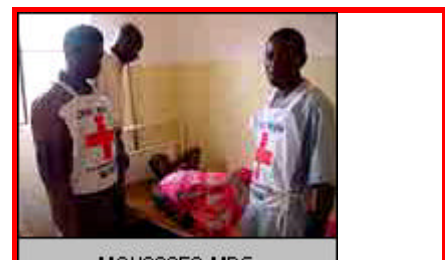
From 30 January to 3 March 3, 2003, official sources have reported 991 additional patients (some admitted in the CTCs) with an additional 29 people dying of cholera within a 5-week period (see table below).

Week n°	Number of new cases	Number of new deaths
Between 19 September 2002 and 30 January 2003	3,139	202
Week n° 4	252	12
Week n° 5	231	2
Week n° 6	185	8
Week n° 7	164	5
Week n° 8	159	2
TOTAL	991	29

Source: "Stop cholera" Committee assessment figures as at 28 February 2003

The total number of people affected within a period of five and half months has been estimated at 4,200. Over 230 have lost their lives. This shows an average of 200 cases and six deaths per week. Since September 2002, the Cholera Treatment Centres have recorded 58 deaths in Dibindi, 43 in Miabi, 32 in Bipemba, 28 in Kansele, 38 in Tshilenge, 13 in Kasansa, 17 in Ngandajika, 5 in Bonzola, 7 in Mweneditu and 1 in Bibanga.

The most vulnerable include children and women as well as men working in the mine fields. The actual total number of cases and deaths may be unknown due to problems of accessibility, communications and cultural norms. The epidemic may therefore be affecting a greater number of people than recorded.



Red Cross volunteers visiting a patient

Cultural taboos, lack of transport for team leaders and coordinators, lack of leaflets, posters, megaphone, boots, raincoats, papers and fatigue continue to hamper the successful implementation of planned activities.

Red Cross and Red Crescent action

With contributions from the Swedish and the Finnish Red Cross totaling CHF 62,000 (representing about a third of the required amount), the local Red Cross branch continues to work in close collaboration with the local authorities and the coordination committee. Red Cross volunteers continue sensitisation activities to improve sanitary conditions in targeted settlements in Mbuji-mayi, Mbuji-Mayi, Mueneditu, Lukalaba, Luamuella, Kalelu, Ngandajika, Bakuamulumba and Kalambasi

The Canadian Embassy in Kinshasa has contributed CAD\$ 30,000 to the Federation and national society operations to finance the construction of 30 family latrines and three public latrines and improve water access by the populations in Mbuji Mayi. The project is being finalised.

Cholera kits supplied by the Federation’s regional office in Yaoundé are meeting the needs of the population. A second-hand vehicle has been purchased for the local Red Cross and it is facilitating movement for Red Cross volunteers involved in sensitisation and sanitation activities. A telecom technician, a former Federation staff is currently assisting the Federation delegation and the DRC Red Cross to install radios in the Mbuji Mayi Red Cross office to facilitate communication. The Federation has posted a new health Delegate who has already started supporting the operations. The Health Coordinator of the Congolese (RoC) who is also a regional resource person is currently in Mbuji-mayi . Both are supporting the provincial Red cross teams of 210 volunteers involved in activities in Mbuji-mayi, Ngandajika, Bakuamulumba, Kalambayi and Lukalaba. Since the onset, these volunteers have been tirelessly participating in various activities to control the spread of the cholera epidemic. The Swedish Red Cross contributed CHF 32,000, while the Finnish Red Cross supported the Federation appeal with 20,000 Euro.

The local Red Cross branch continues to work in close collaboration with The “STOP Cholera” Committee. The volunteers disinfect contaminated houses, bury the dead, transport sick persons to Cholera Treatment centres (CTCs) and sensitise the population on the dangers of the epidemic. This combined effort is progressively bringing the epidemic to a phase that can be controlled.

The Kasai Oriental province Red Cross has a total of 12,000 volunteers, most of whom are well trained in Community Based First Aid and very active in door to door sensitisation activities. For best results, they primarily concentrate their effort on sensitising people in their own communities. Besides these sensitisation campaigns and social mobilisation activities, volunteers are also much involved in disinfecting contaminated houses and public places with chlorine (1,755) and in burying the dead (155). Improved transport and logistics is enabling the mobile team of 12 volunteers to transport patients to the nearest CTCs, using chlorine provided by the Federation and/or the ICRC to protect themselves from the epidemic.

The following table gives the results of the recent sensitisation campaigns organised by the local Red Cross volunteers (this was a considerable success despite the poor logistics available).

Date	Activity	Place	No. volunteers involved	No. sensitised households	No. sensitised persons	No. household dsvisited
15/01/ - 19/02/03	Sensitisation	Mbuji-Mayi	75	1,191	18,876	277
15/01/ - 19/02/03	Sensitisation	Mueneditu	75	-	511,547	4,630
15/01/ - 19/02/03	Sensitisation	Lukalaba	15	2,869	13,513	N/A
15/01/ - 19/02/03	Sensitisation	Luamuela	10	-	2,593	611
15/01/ - 19/02/03	Sensitisation	Kalelu	13	791	5,098	N/A
15/01/ - 19/02/03	Sensitisation	Ngandajika	36	3,569	12,269	N/A
15/01/ - 19/02/03	Sensitisation	Bakuamulumba	18	896	9,018	N/A
15/01/ - 19/02/03	Sensitisation	Kalambasi	N/A	N/A	N/A	N/A
TOTAL			242	9,316	112,913	5,518

Source: Red Cross provincial Committee as at February 28 2003

Objectives and Activities Undertaken

Objective 1: Scale up activities to reduce the rate of the cholera epidemic.

- A 3-day refresher course to 150 volunteers was held on community sensitisation, social mobilisation and preventive health.
- The existing 120 volunteers and the newly recruited 150 volunteers in Mbuji-mayi as well as 50 from other districts are supported with the necessary materials and tools such as mobile phones, bikes, chlorine and Oral

Rehydration Salt. to help volunteers in identifying and supporting people who are unable to reach the nearest CTCs.

- Red Cross teams are supported in conducting daily and weekly proximity community sensitisation in schools, churches, houses and public places. Radio and TV stations as well as local newspapers are used to encourage affected people to report to the nearest CTCs and to reach 250,000 of the Mbuji-mayi population and beyond.
- Red Cross volunteers with community based first aid (CBFA) backgrounds have been trained in Mbuji-mayi (150), Ngandajika (15), Bakuamulumba (15), Kalambayi (15) and Lukalaba (15).
- The Federation has also posted a new health Delegate who has already started supporting the operations.
- In collaboration with the Yaounde Regional Office the capacity of the Federation and the national Society has been reinforced with one regional resource person, a health specialist and coordinator from the RoC national society for one month.
- The DRC Red cross provincial committee activities in social mobilisation, body disposal, disinfecting and preventive health are supported.

Objective 2: Support the provincial health authorities with medical supplies at CTCs.

- A cholera kit from the Federation's regional stock was provided to the Ministry of Health authorities for use at the CTCs.
- Funds from DREF, the Swedish and Finnish Red Cross, have allowed the purchase of 50 aprons, 50 blankets, chlorine, 70 pairs of gloves, 50 kg of salt, 100 one litre of plastic cups, 30 boxes of soap of 38 pieces, 4 bikes, 3 cooking pans, 2 mobile phones, pens, reams of papers, note books, 30 body bags and 10 torches (lamps).

Objective 3: Support water and sanitation activities to reduce the cholera epidemic including diarrhoeal diseases in the community.

- Activities will soon be implemented following the contribution of CAD\$ 30,000 from the Canadian Embassy in Kinshasa.

Objective 4: Reinforce local disaster preparedness capacity of the DRC Red Cross of the Mbuji-Mayi provincial committee for a rapid response to the epidemic.

- Activities have not been carried out due to lack of funding.

Federation delegation

To reinforce the DRC Red Cross capacity for disaster preparedness and response particularly related to health and epidemics, a Swiss Red Cross health delegate has arrived in Mbuji-Mayi on February 25, 2003 to work with the current team. In addition, to reinforce the capacity of the local branch of the Red Cross to combat the cholera epidemic, the delegate's role includes working closely with the DRC Red Cross branch, with the Crisis Committee (STOP CHOLERA) and with the communities in addressing community health, sanitation programmes and rehabilitation of basic health structures.

The Health Coordinator of the Congolese RoC Red Cross, an ERDAC trained regional resource person, is currently in Mbuji-mayi supporting the Cholera operations. The Republic of Congo Red Cross has seconded the national society telecom technician (a former Federation staff) to the Federation Delegation in Kinshasa to install radios in the Mbuji Mayi Red Cross branch to facilitate communications in the cholera operations.

Co-ordination

The cholera operation in Mbuji-mayi and the surrounding communities continues to be co-ordinated by the crisis committee, "STOP CHOLERA". This mechanism is composed of humanitarian agencies and Non Governmental Organisation such as UNICEF, IFRC, ICRC, CARITAS, PATS, HEALTH-NET, MSF-B, WHO, OXFAM-Q and MIBA, each of which plays a specific role in line with the Sphere Project Standards.. They have been monitoring the trends of the epidemic and providing medicine as material for the operation. Since the epidemic broke out in September 2002, the DRC Red Cross provincial committee in Mbuji-Mayi has been an active partner in coordinating and participating in the Crisis Committee's meetings as well as in managing the volunteers involved in the epidemic response and resources mobilisation.

Outstanding Needs

Outstanding needs remain considerable and affect the implementation of the planned activities related to logistics, basic drugs and communications, water collection activities and the refurbishment of the Red Cross office and two local branches of Kasai Oriental.

To ensure that the planned objectives and activities outlined in the appeal can be met, CHF 57,919 is urgently required to meet the following specific needs or activities:

- The DRC Red Cross provincial committee needs more sanitation materials, IEC tools, bicycles, pairs of boots, chlorine, soap, sprays, brushes, rakes, mufflers, wheelbarrows and motorbikes to support the operation.
- Water supplies need to be restored at the DRC Red Cross offices while solar panels should be installed to reinforce the existing capacity of the Red Cross.
- Refurbish the Red Cross and two local branches of Kasai-Oriental to provide adequate working space.
- More support is needed to scale up information, sensitisation, education and social mobilisation campaigns and disaster preparedness activities to control the epidemic. This includes a TV set, video cassettes, megaphones, batteries, radio cassette, leaflets, posters, image boxes, T-shirts and a camera.
- Address risk mapping and disaster planning activities of the provincial government.
- The CTCs and STOP CHOLERA committee need to be provided with more medical material.
- Need to provide more blankets, basins, plastic buckets, pairs of gloves, plastic cups, sugar, body bags, scrapers.
- Conduct refresher courses for 30 members of the Kasai-Oriental provincial emergency response team on the ARCHI 2010 approach, epidemic surveillance and reporting.
- Allow for a basic emergency stock of basic disaster response materials.
- More sanitation materials are needed.

For further details please contact: Terry Carney, Phone: 41 22 730 4298; Fax: 41 22 733 03 95; email: carney@ifrc.org

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>.

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DR Congo - Cholera in Kassai						ANNEX 1
APPEAL No. 35/2002		PLEDGES RECEIVED			12.03.2003	
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
CASH						
REQUESTED IN APPEAL CHF ----->				160'000		TOTAL COVERAGE 64.0%
CANADIAN - GOVT/CIDA		45'000	CAD	40'972	12.03.03	CONSTRUCTION OF LATRINES
FINNISH - RC		20'000	EUR	29'110	30.01.2003	CHOLERA OUTBREAK IN MBUJI-MAYI
SWEDEN - GOVT		200'000	SEK	32'280	19.12.2002	
SUB/TOTAL RECEIVED IN CASH				102'362	CHF	64.0%
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	