

DREF operation



International Federation
of Red Cross and Red Crescent Societies

Zimbabwe: Cholera

DREF operation n° MDRZW004
GLIDE n° EP-2008-000218-ZWE
Update n° 1
3 December, 2008

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

Period covered by this update:
11 November to 2 December, 2008

Summary: CHF 203,302 (USD 177,556 or EUR 139,248) was allocated from the International Federation of Red Cross and Red Crescent Societies (IFRC)'s Disaster Relief Emergency Fund (DREF) to support Zimbabwe Red Cross Society (ZRCS) in delivering immediate assistance to some 100,000 beneficiaries. Unearmarked funds to repay DREF are encouraged.

Over the last two weeks, cholera cases have increased from 1,224 cases and 42 deaths to 11,536 cases and 471 deaths giving a four percent case fatality rate as of 2 December 2008. The fatality rate is higher, beyond the international threshold of one percent thus highlighting the severity of the outbreak. The worst affected provinces are Harare with 6,144 cases and 186 deaths, Mashonaland South Province with 3,057 cases and 82 deaths, and Mashonaland East Province with 1,380 cases and 91 deaths. The situation is still unfolding as cholera spread to other parts of the country and neighbouring countries.

Zimbabwe Red Cross Society (ZRCS) promptly started a response operation and has so far reached over 11,000 people with health education, hygiene promotion and distribution of relief materials in seven provinces. This operation is being implemented over a period of two months ending January 2009.

[<click here to view contact details>](#)



A Red Cross volunteer visiting a cholera patient at a cholera treatment centre

The situation

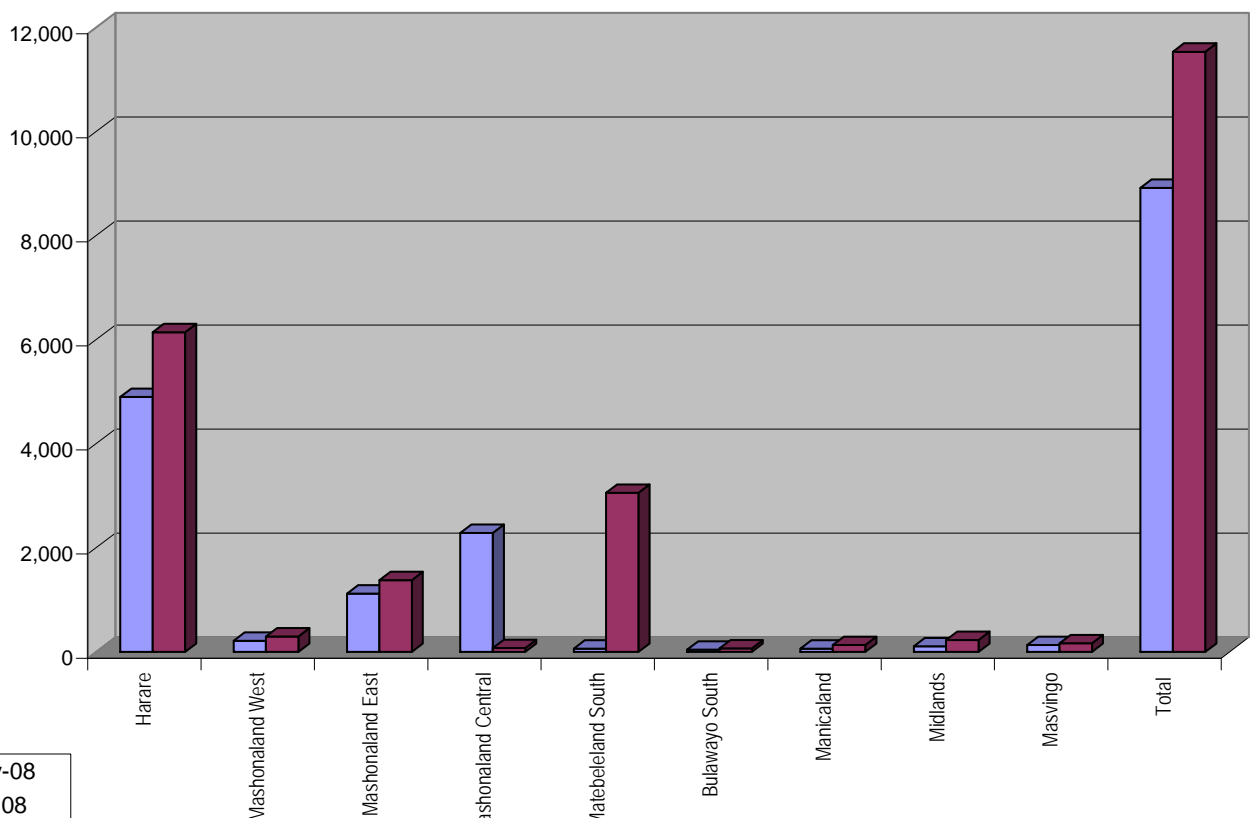
According to the United Nations (UN) and government health officials, the cholera outbreak has expanded in the last two weeks with cases spreading to ten provinces with a total of 11,536 cases and 471 deaths. The case fatality rate is four percent as of 2 December 2008. The most affected provinces are Harare, Mashonaland South, Mashonaland East, Mashonaland West, Masvingo, Manicaland and Midlands Provinces as indicated on **Table 1** below. According to the UN's Office for the Coordination of Humanitarian Affairs, cholera cases are being reported in South Africa, Botswana and Mozambique in some of the towns bordering Zimbabwe.

Table 1: Cumulative Number of cholera cases and deaths as of 2 December 2008

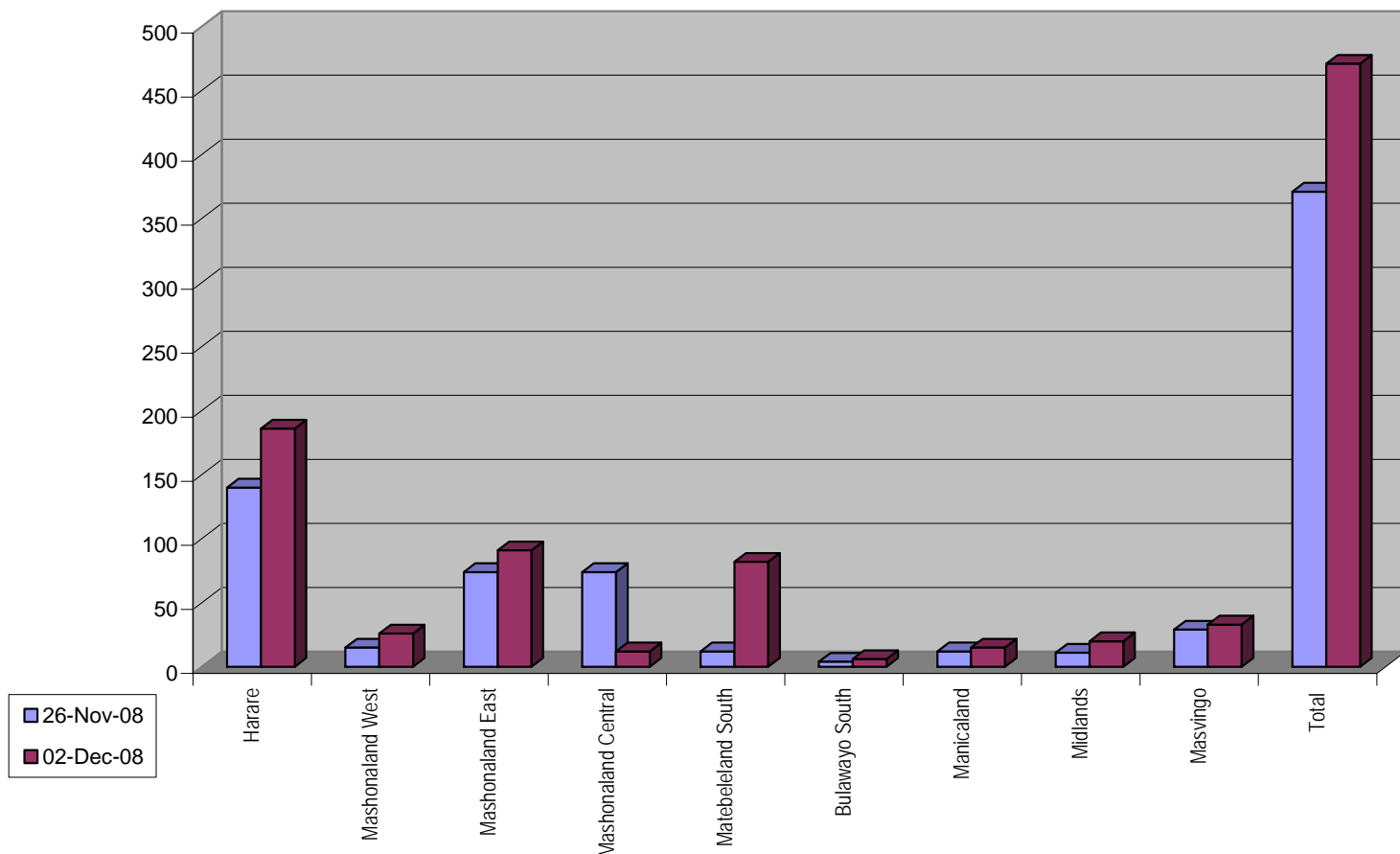
Provinces	Suspected Cholera Cases	Deaths
Harare (including Chitungwiza)	6,144	186
Mashonaland West	294	26
Mashonaland East	1,380	91
Mashonaland Central	72	12
Matebeleland South	3,057	82
Bulawayo South	67	6
Manicaland	129	15
Midlands	227	20
Masvingo	166	33
Total	11,536	471

Source OCHA cholera situation report of 2 December 2008

Number Suspected Cholera Cases reported on 26 November and 2 December 2008



Number of Deaths Resulting from Cholera Reported on 26 November and 2 December 2008



The high case fatality rate is reported to be attributed to the prevailing acute shortage of drugs, medical equipment and material as well as health personnel in state hospitals and clinics. The limited access to clean water, sanitation facilities and information continue to be some of the main causes of the rapid spread of cholera in Zimbabwe.

Water is currently being supplied by trucks to the most affected areas such as Beitbridge, Budiriro, Glen View, and Chinhoyi. However, the three litres per person per day allocation being provided is far below the SPHERE minimum standard¹ of 15 litres per person per day. The total amount of water required in the above mentioned areas was not available at the time of writing this update. Furthermore, poor awareness on hygienic practices among the general population, and inadequate capacity on disaster preparedness at district and community levels are some of the gaps identified so far. ZRCS is working on scaling-up the cholera response operation in order to address the identified gaps particularly on clean water supply, sanitation facilities, hygiene promotion and community level surveillance system.

¹ SPHERE

- 15 litres per person per day
- Flow = 0.125 litres per second
- 1 water point per 250 people
- Nearest water point < 500 m

Coordination and partnerships

ZRCS represented by the IFRC Country Representation office is coordinating with the UN water, sanitation and health (WASH) and health clusters. UNICEF is leading a WASH cluster, which comprised of Oxfam, World Vision, IOM and IFRC as well as supporting the provision of clean water, sanitation facilities, hygiene promotion, soap, buckets and other non-food items. UNICEF is also coordinating a cholera taskforce weekly meeting, which is attended by a representative from the IFRC Country Representation office among other stakeholders. At provincial level, ZRCS is part of coordination task force coordinated by the Ministry of Health and Social Welfare.

Humanitarian organisations working in collaboration with the government and UN agencies are striving to respond to the cholera outbreak due to the malfunctioning health delivery system in the country. A health cluster led by the WHO, is working on addressing some of the identified gaps in case detection, management, surveillance and information management. WHO is in the process of procuring a month's supplies for 15 cholera treatment centres, and will be deploying a full investigation and response team. In addition, the WHO will be supporting the establishment of data management systems.

Red Cross and Red Crescent action

At the request of the ZRCS, the IFRC released CHF 203,302 from its Disaster Relief Emergency Fund (DREF) to assist with replenishment and distribution of relief items. In addition, relief material donated by ECHO in the previous relief operation, (some of which is already pre-positioned in the provinces) has been used during the initial relief activities of this cholera response operation. The material consists of 500,000 water purifiers, 6,950 blankets, 380 sanitary platforms 5,090 bars of soap, 2,000 jerry cans, First Aid kits and a variety of volunteer protective and visibility items.

Progress towards objectives

Relief (non-food items, water and sanitation, health and hygiene promotion)

The main objective of the ZRCS DREF operation is to reduce cholera related morbidity and mortality of 100,000 people in Harare, over the next two months through:

- Improved access to safe water reaching 20,000 households within the next six months;
- Improved hygiene awareness reaching 100,000 people;
- Improved response capacity of NS at branch and community level to rapidly respond to current and future cholera outbreaks particularly in the area of community based response – dehydration management, active case finding and referrals.

During the reporting period, ZRCS reached over 11,000 people with health and hygiene awareness in seven provinces. Through its provincial resources, the National Society is collaboratively working with the Ministry of Health and other humanitarian and non-governmental organisations at the cholera treatment centres (CTC) established in the affected areas.

- In Mashonaland central covering Budiriro, Chitungwiza and Shamva districts, ZRCS distributed two cholera kits (each one is for 300 patients), 60,000 water purifiers to treat a total of 1.2 million litres, 500 bars of soap, 500 jerry cans (20 litres each) and 500 bottles of household bleach.
- In Midlands covering Gweru, Mberengwa, Zvishanavane, Shurugwi districts, ZRCS seconded volunteers to the CTC that are being managed by the Ministry of Health and provided 500 latex gloves, 200 disposable masks, 500 water purifiers equivalent to (10,000 litres), ten jerry cans of 20 litres each, 20 buckets and 680 various information, education and communication (IEC) materials.
- In Matebeleland South covering Beitbridge and Gwanda district, ZRCS is conducting health hygiene promotion, home disinfection particularly where cholera related deaths are

reported, distributing IEC materials and has supplied 1,000 latex gloves and 12 bottles of bleach to the CTCs.

- In Masvingo, Manicaland and Mashonaland West Provinces, ZRCS is conducting health and hygiene promotion using house-to-house approach as well as addressing community and funeral gatherings. The volunteers are also distributing information, education and information (IEC) material on hygiene promotion.

The on-going developmental water and sanitation programme and the food security operations will complement ZRCS cholera response efforts. An example is the African, Caribbean and Pacific (ACP) EU WatSan project, serving approximately 100,000 people in Mt Darwin district, where drilling of 70 new boreholes equipped with hand pumps has just been completed in addition to 130 rehabilitated hand pumps and 400 latrines. ZRCS has a network of trained health and hygiene volunteers who are engaged in social mobilisation activities in Mt Darwin district, who are now assisting with the same initiative in this cholera response operation. The rehabilitation of 200 water points in eight provinces has been incorporated in the water and sanitation component of the current food security operation ([MDRZW003](#)) being implemented across the country.

Acknowledging the dire humanitarian needs, the significant operational gaps and recognising the need to support and improve the capacity of its structures particularly at provincial level, ZRCS with support from the IFRC will be embarking on a situational assessment and an operational review. The results of the assessment will be the basis for the development of a detailed cholera response and resource mobilisation plan of action during the first week of December 2008.

How we work

All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) (Sphere) in delivering assistance to the most vulnerable.

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

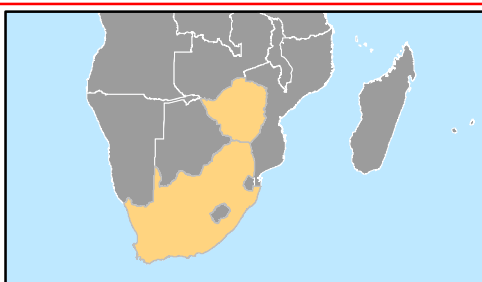
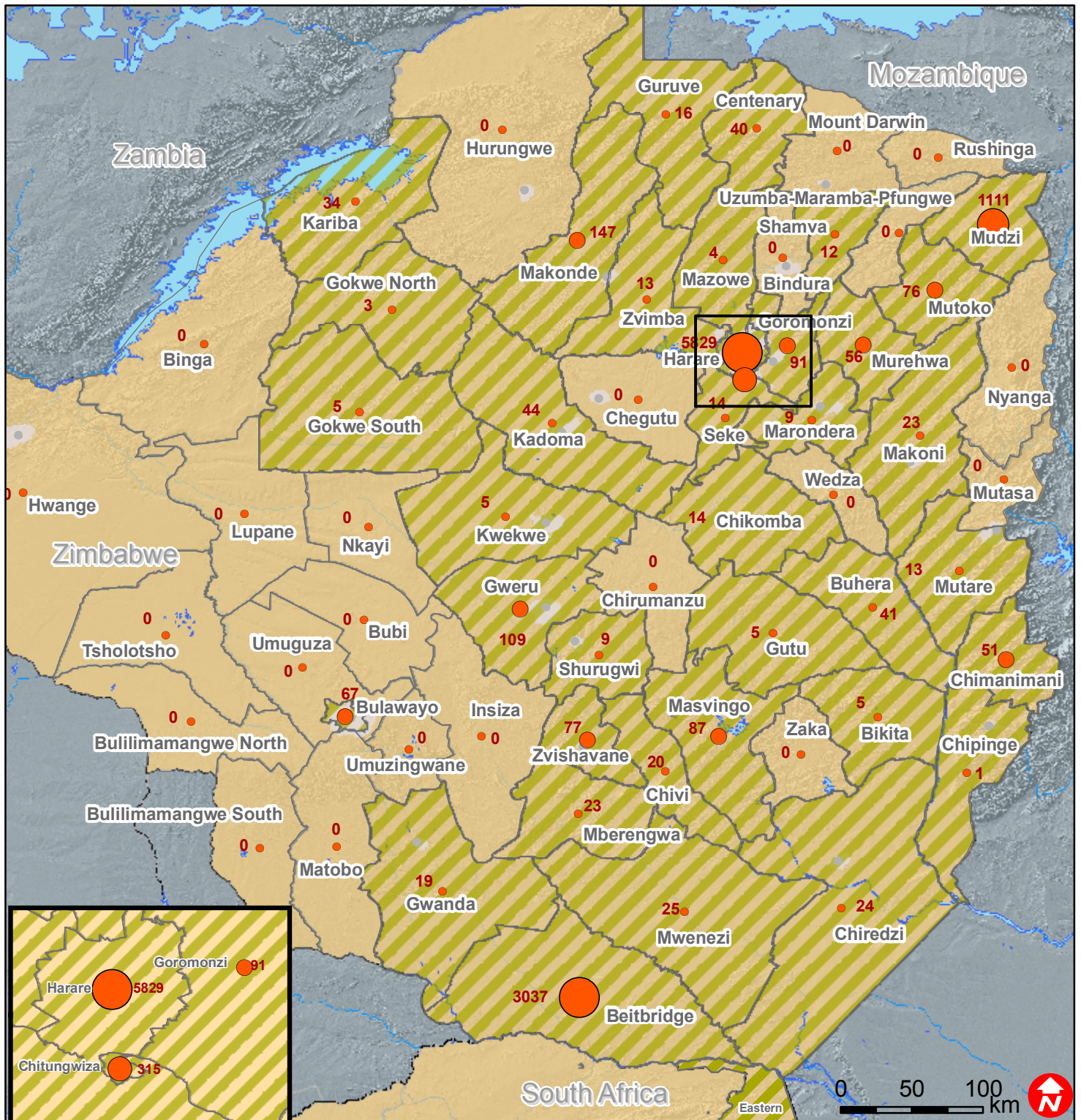
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[<Map below; click here to return to the title page>](#)



Zimbabwe: Cholera



Suspected Cases of Cholera

- 0 - 50
- 51 - 200
- 201 - 500
- 501 - 3000
- 3001 - 5829

- Affected areas
- Urban zone

The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.
 Map data sources: ESRI, DEVINFO, OCHA, International Federation - Zimbabwe-Cholera.mxd