

# DREF operation final report



International Federation  
of Red Cross and Red Crescent Societies

## Zambia: Cholera

DREF operation n° MDRZM005  
GLIDE n° EP-2009-00020-ZMD  
12 May 2010

The International Federation of Red Cross and Red Crescent (IFRC) 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 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.

**Summary: CHF 60,959.70 or (USD 54,560 or EUR 41,295) was allocated from the International Federation of Red Cross and Red Crescent Societies' (IFRC's) Disaster Relief Emergency Fund (DREF) to support the National Society in delivering immediate assistance to some 30,000 families.**

Zambia experienced heavy rains beginning of October 2008 that continued in the first quarter of 2009. The excess precipitation led to water logging and caused damage to sanitation infrastructure in most parts of Lusaka. In November 2008, the government of Zambia announced a cholera outbreak, with most recorded cases occurring in the overcrowded compounds of Lusaka as a result of contamination of water and sanitation facilities. The cholera outbreak affected a total of 7,587 people and 162 deaths by June 2009.

Stakeholders, including Zambian Red Cross Society (ZRCS) were mobilized and cholera treatment centres (CTCs) set up to manage the outbreak. Through the coordinated efforts of ZRCS, MSF, Ministry of Health (MoH), and the Defence Force's medical teams the epidemic was contained. ZRCS concentrated on prevention activities that included community sensitization, distribution of hygiene supplies, disinfection of affected premises, and tracing of cases from the CTCs. ZRCS volunteers also provided labour for unskilled tasks at the CTCs, especially the cleaning of the premises.

The Netherlands Red Cross (*Italian Government, etc. as appropriate*) contributed to the DREF in replenishment of the allocation made for this operation. The major donors to the DREF are the Irish, Italian, Netherlands and Norwegian governments, and ECHO. Details of all donors can be found on <http://www.ifrc.org/what/disasters/responding/drs/tools/dref/donors.asp>

[<click here for the final financial report, or here to view contact details>](#)



ZRCS staff and volunteers outside a cholera centre in Chawama collecting cleaning materials before embarking on the day's work.

## The situation

The heavy rains experienced from the last quarter of 2008 resulted in water logging and pollution of water sources and sanitation facilities. Without the proper reticulation and waste disposal system, the situation led to the spread of cholera in and around Lusaka beginning of November 2008. The first cholera case was reported at the fishing camps in Mpulungu district of Northern Province. The outbreak later spread to the fishing camps in Mazabuka in Southern Province. In mid-January 2009, the cumulative number of confirmed cholera cases was 597 (538 in Lusaka, 40 in Mazabuka, and 19 in Livingstone). The cholera also spread to the high density unplanned settlements in the cities of Lusaka and Kitwe.

The outbreak led to the closure of over 25 schools between January and March 2009. Cholera was also out-scaling the capacity of the health authorities in Zimbabwe where the cumulative total of was over 100,000 and 5,000 death. Therefore the government of Zambia deployed health personnel to screen visitor into Zambia at the border post with Zimbabwe. According to the official government figures as at 1 June 2009, the cumulative total of confirmed cholera cases was 7,587 and 162 deaths, with a case fatality rate (CFR) of 1.19 percent.

In its auxiliary role to the government, ZRCS responded to the cholera outbreak, initially by seeking funding support from the IFRC emergency fund. With the support of DREF, the National Society provided relief assistance working in collaboration with the National Epidemic Preparedness Prevention Control and Management Committee, which is the coordination forum for government and stakeholders. ZRCS staff members and volunteers deployed for the cholera operation were coordinating their activities with the MSF and Defence Force's medical personnel at the cholera treatment centres (CTCs) in receiving patients, maintaining a clean environment and monitoring admissions. ZRCS attend weekly coordination meetings coordinated by the Ministry of Health and attended by the health sector stakeholders. The forum was used to review the activities of all stakeholders and monitoring the trend of the outbreak.

## Red Cross and Red Crescent action

Supported by the IFRC DREF, ZRCS response operation focused on social mobilisation on the control and prevention of cholera. The NS therefore donated cholera kits for the CTC and community-based health centres.

## Achievements against outcomes

### Water, sanitation, and hygiene promotion

**Objective: To contribute to the reduction of the prevailing high infection rates and risk among 30,000 households in and around Lusaka over the next three months through:**

- Improved hygiene awareness reaching 30,000 households;
- Improved response capacity of the National Society at branch and community level to current and future cholera outbreaks, particularly in the area of community-based response, rehydration management, active case finding and referrals;
- Improved curative facilities offered at CTCs;
- Enhanced volunteers' capacity to carry out sensitisation activities.

### Activities planned

- Train volunteers on sensitization care and prevention of diarrhoeal diseases at community level.
- Conduct hygiene promotion and sensitization on hygienic practices.
- Produce and distribute information, education and communication (IEC) material.
- Conduct contact tracing and disinfection of cholera affected households.
- ZRCS volunteers participate in supporting MoH at CTCs.
- Provide First Aid services, administering oral rehydration salts (ORS) and referring critical cases to health facilities.
- Water purification and disinfection of sanitation facilities.
- Pre-position cholera emergency relief items.
- Monitor and evaluate the relief activities and provide reports on relief distributions.

**Impact:**

ZRCS mobilized 60 volunteers, who were supported by trained staff in the maintenance of the CTCs, distribution of information, education and communication (IEC) materials, disinfection of infected households and sanitation facilities, and public sensitization campaigns at market places, schools, and other public places. ZRCS volunteers also traced cholera cases from CTCs and disinfected the homes from which cases originated; created public awareness on the spread of cholera and its prevention; provided water treatment supplies to households with no access to treated piped water; and provided hygiene supplies to poor households.

ZRCS donated the following supplies to the Lusaka District Health Management Team (DHMT) and MoH: 3,000 sachets of oral rehydration solutions (ORS), 700 water storage containers used to administer ORS at CTC, 2,200 bars laundry soap, 500 tablets disinfectant soap, 500 bottles of disinfectant, 250 pairs surgical gloves, 500 face masks, 240x1litre ringers lactate intravenous fluid (IV fluids), 20 boxes cannulars, 20 boxes of giving sets, 800 tarpaulins used to construct shelters and makeshift beds at a newly opened CTC, 500 blankets and mosquito nets.

At household level, the National Society distributed 6,600 bottles of chlorine, 3x45kg granular chlorine and 10x5 litre disinfectants. The beneficiary households received chlorine enough for three months and educated on cholera prevention methods.

ZRCS reached a total of 5,189 households, which is the equivalent of approximately 31,100 people, in and around Lusaka who received IEC materials, hygiene supplies, and detergents. A wider population was reached through public address systems and drama performances at public places including schools, markets and recreational centres.

**Conclusion**

With the support from DREF, ZRCS gave meaningful contribution towards containing the cholera outbreak. In the process, the capacity of ZRCS volunteers and field staff was enhanced particularly in the areas of hygiene promotion, case tracing and management. This ensured preparedness in case of future outbreaks in the country.

## How we work

All IFRC 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 the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

## Contact information

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# International Federation of Red Cross and Red Crescent Societies

MDRZM005 - Zambia - Cholera

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/1-2010/3
Budget Timeframe	2008/1-2010/3
Appeal	MDRZM005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	<b>60,939</b>					<b>60,939</b>
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>
<b>Income</b>						
<u>Other Income</u>						
<i>Voluntary Income</i>	<i>60,960</i>					<i>60,960</i>
<b>C6. Other Income</b>	<b>60,960</b>					<b>60,960</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>60,960</b>					<b>60,960</b>
<b>D. Total Funding = B + C</b>	<b>60,960</b>					<b>60,960</b>
<b>Appeal Coverage</b>	<b>100%</b>					<b>100%</b>

## II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>
<b>C. Income</b>	<b>60,960</b>					<b>60,960</b>
<b>E. Expenditure</b>	<b>-58,597</b>					<b>-58,597</b>
<b>F. Closing Balance = (B + C + E)</b>	<b>2,363</b>					<b>2,363</b>

Selected Parameters	
Reporting Timeframe	2008/1-2010/3
Budget Timeframe	2008/1-2010/3
Appeal	MDRZM005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**III. Budget Analysis / Breakdown of Expenditure**

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
<b>BUDGET (C)</b>	<b>60,939</b>						<b>60,939</b>	
<b>Supplies</b>								
Clothing & textiles	5,140							5,140
Medical & First Aid		29,086					29,086	-29,086
Teaching Materials		7,730					7,730	-7,730
Other Supplies & Services	20,295	4,200					4,200	16,095
<b>Total Supplies</b>	<b>25,434</b>	<b>41,016</b>					<b>41,016</b>	<b>-15,582</b>
<b>Transport &amp; Storage</b>								
Storage		243					243	-243
Transport & Vehicle Costs	9,294	5,233					5,233	4,061
<b>Total Transport &amp; Storage</b>	<b>9,294</b>	<b>5,475</b>					<b>5,475</b>	<b>3,819</b>
<b>Personnel</b>								
National Society Staff	11,392	2,988					2,988	8,404
<b>Total Personnel</b>	<b>11,392</b>	<b>2,988</b>					<b>2,988</b>	<b>8,404</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	3,271	1,711					1,711	1,560
<b>Total Workshops &amp; Training</b>	<b>3,271</b>	<b>1,711</b>					<b>1,711</b>	<b>1,560</b>
<b>General Expenditure</b>								
Information & Public Relation	5,650							5,650
Office Costs	227	74					74	154
Communications	1,710	108					108	1,602
Financial Charges		2,951					2,951	-2,951
Other General Expenses		466					466	-466
<b>Total General Expenditure</b>	<b>7,587</b>	<b>3,599</b>					<b>3,599</b>	<b>3,989</b>
<b>Programme Support</b>								
Program Support	3,961	3,809					3,809	152
<b>Total Programme Support</b>	<b>3,961</b>	<b>3,809</b>					<b>3,809</b>	<b>152</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>60,939</b>	<b>58,597</b>					<b>58,597</b>	<b>2,342</b>
<b>VARIANCE (C - D)</b>		<b>2,342</b>					<b>2,342</b>	