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**BUREAU FOR DEMOCRACY, CONFLICT, AND HUMANITARIAN ASSISTANCE (DCHA)
OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)**

Zimbabwe – Cholera Outbreak

Fact Sheet #4, Fiscal Year (FY) 2009

January 9, 2009

Note: The last fact sheet was dated December 31, 2008.

KEY DEVELOPMENTS

- Since the outbreak began in August 2008, cholera has spread to all of Zimbabwe’s 10 provinces and 55 of Zimbabwe’s 62 districts. As of January 9, cholera had caused more than 1,910 deaths, with more than 37,500 cases reported, according to the U.N. World Health Organization (WHO). Currently, the U.N. health cluster continues to plan relief activities based on a worst-case scenario of 60,000 cases nationwide. However, USAID Disaster Assistance Response Team (USAID/DART) staff note that the cluster may revise estimates to account for potential increased cholera exposure resulting from significant travel during the recent holiday period.
- WHO’s updated daily figures for January 9 included 107 new deaths and 914 new cases. WHO reported an overall cholera case fatality rate (CFR) of 5.1 percent as of January 9, representing a decrease from the overall CFR of 5.4 percent reported on December 18, 2008. On January 3, WHO reported that the CFR decrease in recent weeks is likely attributable to improved case management. However, WHO notes that the CFR remains higher than expected at the outbreak’s current stage.
- On January 8, the USAID/DART reported that the Government of Zimbabwe (GOZ) Ministry of Health and Child Welfare had approved the deployment of an assessment team from the International Center for Diarrheal Disease Research, Bangladesh (ICDDRDB). USAID/DART staff note the potential for the ICDDRDB team’s technical expertise to significantly improve case management at provincial and district levels and decrease the overall CFR.

NUMBERS AT A GLANCE	SOURCE	
Total Reported Cholera Cases in Zimbabwe	37,556	WHO – January 9, 2009
Total Reported Cholera Deaths in Zimbabwe	1,915	WHO – January 9, 2009
Reported Cholera CFR in Zimbabwe	5.1 percent	WHO – January 9, 2009

FY 2009 HUMANITARIAN FUNDING PLEDGED TO ZIMBABWE FOR THE CHOLERA OUTBREAK

USAID/OFDA Assistance to Zimbabwe\$6,800,000
Total USAID Humanitarian Assistance to Zimbabwe for the Cholera Outbreak\$6,800,000

CURRENT SITUATION

- On January 9, WHO reported that more than 54 percent of cumulative deaths had occurred outside health facilities, cholera treatment centers (CTCs), and cholera treatment units (CTUs). The figures reflect significant challenges in providing sufficient treatment access to cholera-affected populations, including staff and material shortages at health facilities, CTCs, and CTUs, and a lack of community-level awareness about cholera.
- According to the U.N. Office for the Coordination of Humanitarian Affairs (OCHA), the outbreak has affected border areas of neighboring countries, with confirmed cholera cases reported in Botswana, Mozambique, Zambia, and South Africa. As of December 31, South Africa health authorities and WHO reported 1,419 cholera cases in South Africa, including 1,334 in Limpopo Province alone, with 13 deaths. On December 24, OCHA noted the start of indigenous transmission in South Africa, although Zimbabwe nationals continued to account for most cases.
- As of January 5, WHO reported cholera cases in eight of Mozambique’s 11 provinces, with nearly 2,000 cases and 40 deaths reported since early September. According to WHO, Mozambique’s cholera caseload appears to result from a combination of rainy season outbreaks and increased case numbers in districts bordering Zimbabwe. As of December 23, WHO reported more than 1,380 cholera cases and 38 deaths in Zambia’s Lusaka District since November 2008. In addition, WHO reported eight suspected cholera cases and three confirmed cases in Botswana as of December 17.

Humanitarian Coordination and Information Management

- On January 6, the USAID/DART health specialist and program officer attended a U.N. health cluster meeting and reported that WHO epidemiologists’ technical support has significantly improved the WHO cholera command-and-control center’s epidemiologic analysis and alert system. As a result, center staff now emphasize provincial-level

coordination and organization of rapid response teams. USAID/DART staff noted the need for further investments in cholera case management and CTC needs assessments.

- USAID/DART staff report that technical assistance includes a senior international epidemiologist recruited by WHO responsible for daily operations in the cholera command-and-control center and coordination with the U.N. clusters, and a WHO staff member responsible for resolving policy issues. In addition, a U.N. Children's Fund (UNICEF) specialist based in the center provides water, sanitation, and hygiene (WASH) technical support.
- In addition, USAID/DART staff note that on January 8, the center moved from WHO offices on Harare's outskirts to Parirenyatwa Hospital, near a number of humanitarian and government offices in Harare, improving accessibility.
- USAID/OFDA continues to support information coordination through the U.N. clusters in order to improve data collection, analysis, and dissemination, enabling humanitarian organizations to direct expertise and resources where most needed.

WASH

- On January 6, the USAID staff conducted a monitoring visit of USAID/OFDA-funded WASH activities in several high-density suburbs of Harare. USAID staff observed two community water tanks, met with staff at a CTC stocked with cholera prevention educational materials, and attended a distribution of soap and water purification tablets to 1,000 beneficiaries.
- On January 6, the USAID/DART health specialist attended the first joint health and WASH social mobilization task force meeting, hosted by UNICEF. The cholera command-and-control center social mobilization technical advisor presented the social mobilization strategy for the cholera response, including the provision of emergency relief supplies and educational materials. The technical advisor noted the importance of prioritizing behavior change.
- To date, USAID/OFDA has committed nearly \$4 million for WASH programs, including hygiene promotion and home-based water treatment. USAID/OFDA-funded WASH activities target areas with high reported cholera rates and areas highly prone to the spread of the disease, particularly high-density, peri-urban districts.

Health

- On January 3, WHO reported that the overall CFR had decreased for the third consecutive week. The CFR for new cases reported during the week of December 28 to January 3 decreased from 6.2 to 2.1 percent from the previous week's rate. Although WHO reported a marked decrease in new cases and new deaths for the week ending on January 3, the organization noted that the decrease was likely the result of underreporting due to staff shortages during the recent holiday period. Since January 3, the rate of reported new cases has subsequently increased.
- On January 3, WHO reported that cases had continued to increase in Mashonaland Central, Matabeleland South, and Manicaland provinces. However, for the week ending on January 3, reported new cases, deaths, and the CFR had decreased markedly in Mashonaland West Province. In Harare, new deaths and the CFR had decreased by more than 90 percent. WHO reported no new deaths in Bulawayo, and new cases had decreased by more than 90 percent.
- WHO remarked that although weekly CFRs appear to be decreasing, the overall CFR remains high due to elevated CFRs during the outbreak's early stages. USAID/DART staff note that the high mortality rates reported during the outbreak's early phase underscore the need for an early warning and rapid response system.
- USAID/OFDA plans to continue to support efforts by humanitarian partners and the U.N. cluster system to establish early warning mechanisms and respond quickly to new alerts.

Emergency Relief Supplies

- On January 6, OCHA reported that the U.N. World Food Program continued to coordinate logistics for emergency relief supply distribution to populations affected by cholera and potentially at risk of contracting the disease.
- In response to the current cholera outbreak, USAID/OFDA has committed more than \$360,000 for procurement and transport of soap for use in hygiene promotion programs in Zimbabwe. USAID/DART staff report that the first shipment, consigned to UNICEF, is scheduled to arrive in mid-January.

USAID HUMANITARIAN ASSISTANCE FOR ZIMBABWE'S CHOLERA OUTBREAK

- On December 16, U.S. Chargé d'Affaires a.i. Katherine S. Dhanani declared a disaster due to the effects of the cholera outbreak. As part of ongoing response efforts, USAID/OFDA activated a five-person USAID/DART to identify humanitarian needs, evaluate response effectiveness, conduct field assessments, and participate in U.N. health, logistics, and WASH cluster meetings.
- To date, USAID/OFDA has pledged \$6.8 million in emergency assistance for Zimbabwe's cholera outbreak. USAID/OFDA's assistance will continue to target provision of emergency relief supplies for affected populations, humanitarian coordination and information management, and WASH interventions.
- USAID/OFDA's support is in addition to the more than \$4 million that USAID/OFDA has provided for emergency WASH programs in Zimbabwe since October 2007. The U.S. Government has provided more than \$264 million in humanitarian assistance for Zimbabwe's ongoing health and food crisis since October 2007.

USAID HUMANITARIAN ASSISTANCE TO ZIMBABWE FOR THE CHOLERA OUTBREAK IN FY 2009

<i>Implementing Partner</i>	<i>Activity</i>	<i>Location</i>	<i>Amount</i>
USAID/OFDA ASSISTANCE¹			
Multiple	Emergency Relief Supplies; Humanitarian Coordination and Information Management; Water, Sanitation, and Hygiene	Affected Areas	\$2,461,160
Multiple	Water, Sanitation, and Hygiene	Bulawayo, Chirumanzu, Gweru, Harare, Kadoma, and Mutare Districts	\$3,943,149
UNICEF	Emergency Relief Supplies	Affected Areas	\$299,180
	Transport of Emergency Relief Supplies	Affected Areas	\$65,632
	Administrative Support and Travel	Countrywide	\$30,879
TOTAL USAID/OFDA			\$6,800,000
TOTAL USAID HUMANITARIAN ASSISTANCE TO ZIMBABWE FOR THE CHOLERA OUTBREAK IN FY 2009			\$6,800,000

¹USAID/OFDA funding represents anticipated or actual obligated amounts as of January 9, 2009.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for cholera response efforts in Zimbabwe can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, warehouse space, etc); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID: www.usaid.gov – Keyword: Donations
 - The Center for International Disaster Information: www.cidi.org or (703) 276-1914
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int