

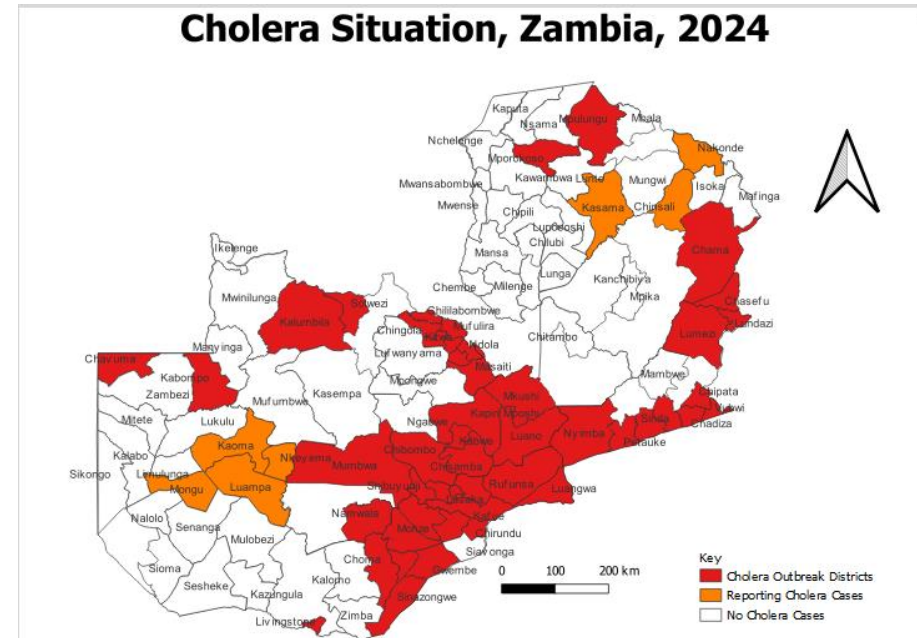


Zambia Cholera Situation Report



Sitrep No. 19

- Cases and Deaths as of: 19/01/2024
- No. of Provinces Reporting Cholera Cases: 9/10
- Total No. of Districts Reporting Cholera Cases: 60
- No. of Districts with Outbreaks: 52
 - Last 24 hours New Cases: 494
 - New Deaths: 16
 - In admission: 925
 - Discharged: 434
- Cumulative Cases: 11,947
- Cumulative Deaths: 464 (CFR: 3.9%)
- **A total of 748,102 (46%) of the target population have been vaccinated against cholera.**
 - *Outbreak Districts = Evidence of local transmission.
 - **Total No. of Districts Reporting Cholera Cases: All districts reporting cases with travel history and outbreak districts.



Epidemiology Overview

Background: The current cholera outbreak started with Lusaka Province confirming cases in the cholera-prone areas (peri-urban). Eastern Province followed and cases were linked to Malawi and Mozambique. Then Northern, Central, Southern, Copperbelt and N-Western Provinces.

From October 2023 to date, nine provinces have reported cases of cholera with seven provinces confirming cholera outbreaks. A total of 50 districts have confirmed local transmission of cholera.

Cumulative cases stand at 11,947 with 464 deaths (CFR: 3.9%).

Muchinga and Western Provinces cases are imported from Lusaka and have heightened surveillance.

In the last 24 hours 494 cases. A total of 16 deaths were recorded in Chawama, Chipata, Kanyama, Matero, Heroes CTC, Kabwe, and Ndola. 925 cases are in admission with 434 discharged across all CTCs.

Table 1. Summary of Cholera Cases by Province in Lusaka, Eastern, Central, Northern, Southern, Copperbelt, N-Western, Western and Muchinga Provinces.

Province	No. of Districts Reporting	Population	Date of Reporting	Last 24 hours				Cumulatively				
				New Cases	New Deaths	Discharges	In Adm	Cholera Cases	Cum. Discharges	Deaths	CFR (%)	AR /100,000
Lusaka	6	3175740	14/10/2023	402	12	370	739	10,883	9,664	430	4.0	342.7
Eastern	13	2532849	10/12/2023	10	0	5	21	102	80	1	1.0	4.0
Northern	3	1671608	11/12/2023	0	0	0	0	23	23	0	0.0	1.4
Central	8	2359786	16/12/2023	37	2	36	74	599	506	19	3.2	25.4
Southern	11	2464332	26/12/2023	10	0	8	28	143	109	6	4.2	5.8
Copperbelt	8	2874705	27/12/2023	22	2	2	39	86	47	2	2.3	3.0
N-Western	4	1335306	27/12/2023	12	0	11	20	81	56	5	6.2	6.1
Western	4	1,412,905	04/01/2024	0	0	2	2	25	22	1	4.0	1.8
Muchinga	3	951,291	05/01/2024	1	0	0	2	5	3	0	0.0	0.5
GRAND TOTAL	60	20309547		494	16	434	925	11947	10510	464	3.9	58.8

Laboratory Results

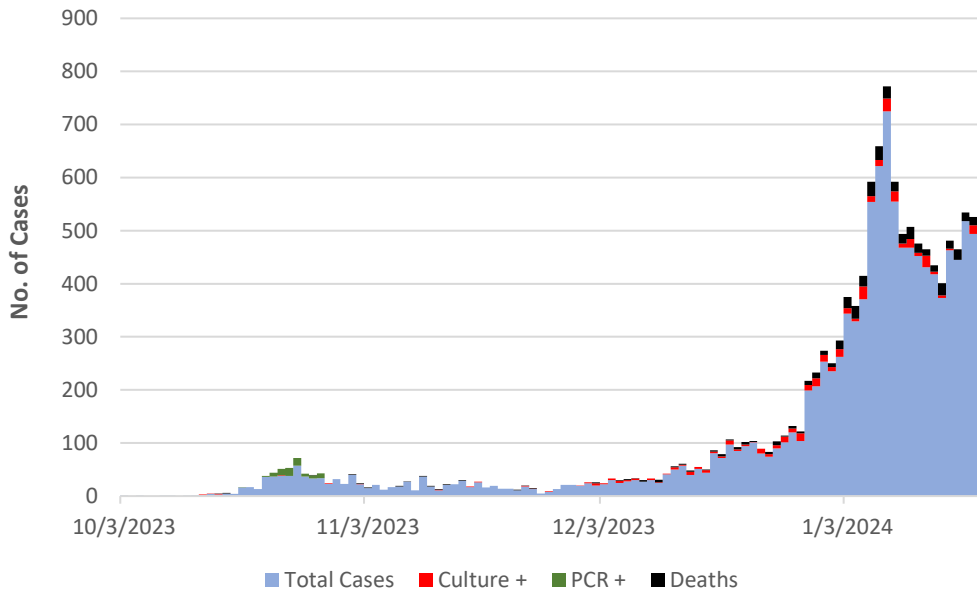
Laboratory Results		
Province	Culture-Positive	PCR-Positive
Lusaka	261	153
Eastern	27	0
Central	16	0
Northern	3	0
Southern	37	0
Copperbelt	22	0
N-Western	21	0
Western	4	0
Muchinga	3	0
Total	394	153

Distribution of Cases by Age Band – National Picture as at 9th Jan, 2024.

Indicator	Number of Cases (%)
Under 1 year	553 (7.6%)
1-4 years	1769 (24%)
5-10 years	818 (11.1%)
11-15 years	383 (5.2%)
Above 15 years	3819 (51.8%)
National Picture	7343

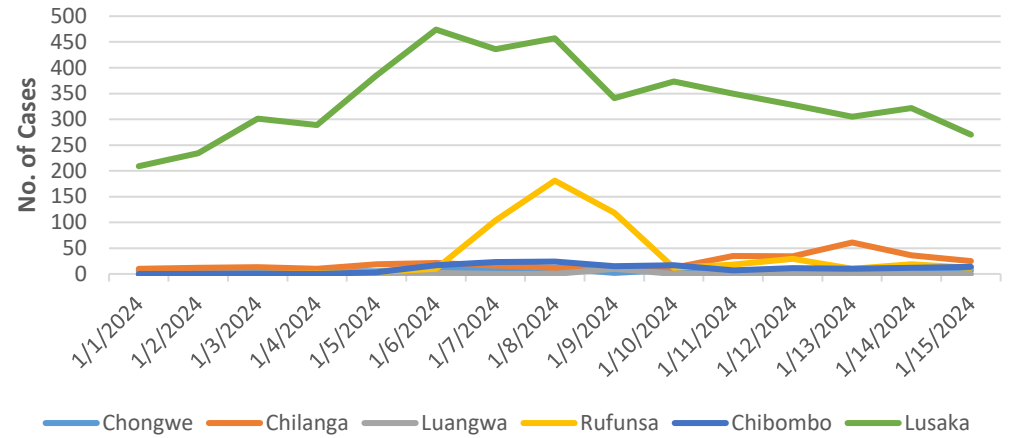
1Disclaimer - the reported cases by age band presented herein reflect the current trends and data available at the time of reporting. Its important to recognize that these trends are subject to change and can fluctuate daily based on number of new cases

Cases of Cholera by Date Seen, Zambia, 03-Oct-2023 - Jan-2024



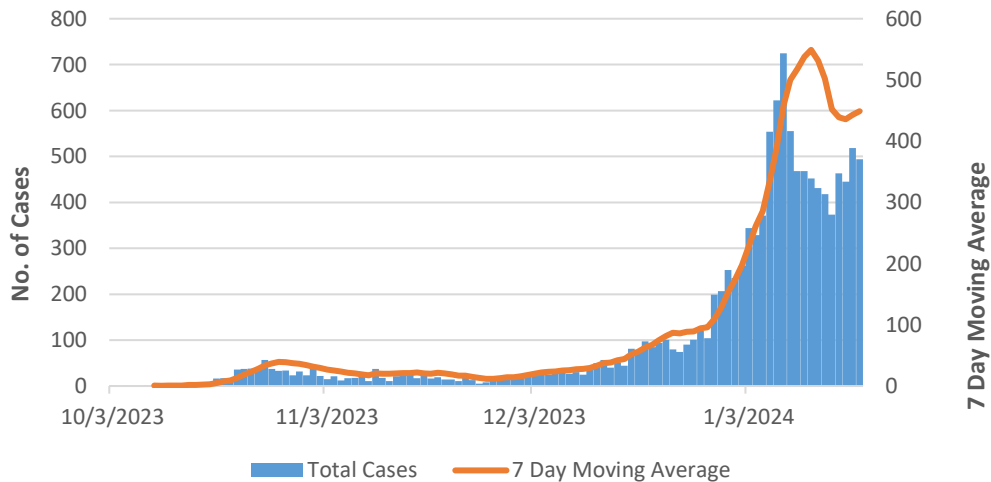
Lusaka District has observed a gradual decline in cases. Rufunsa had a spike of cases and has since declined but still recording high attack rate.

No. of Cases in the Selected Districts, from 1 Jan 2024



The seven-day moving average is still high.

Seven Day Moving Average of Cases, Zambia, Oct 2023 - 2024



Matero Sub-district has recorded a significant decline in case.

No. of Cases in the Sub-Districts, Lusaka District, From 1 Jan 2024

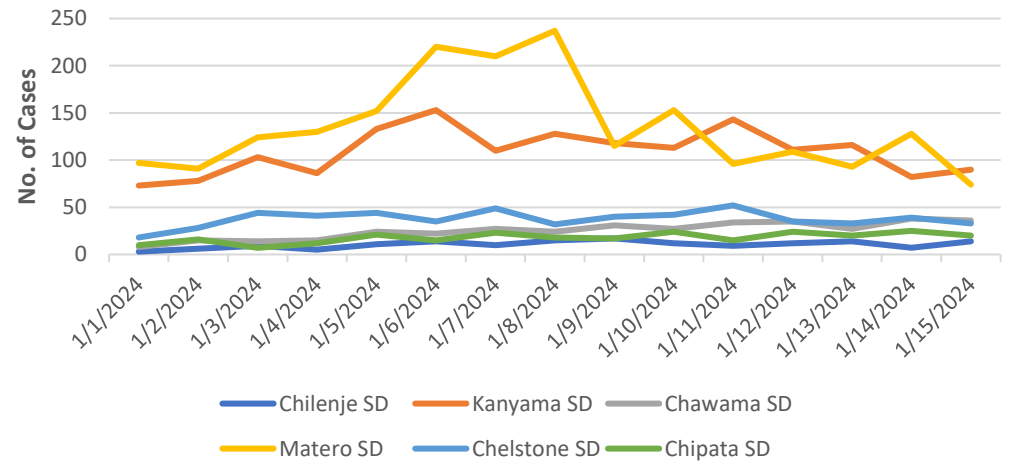
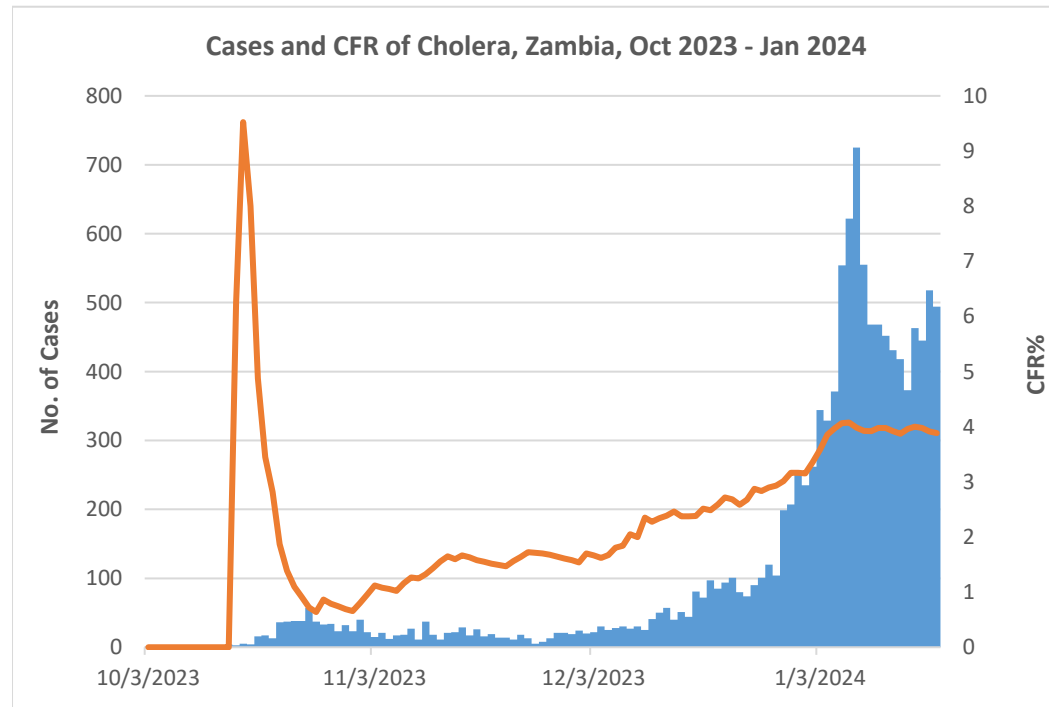


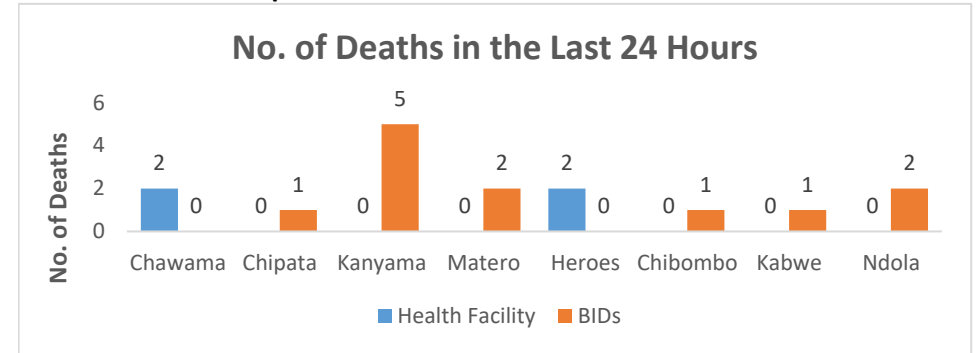
Table 3. Summary of Cholera Deaths by Facility Deaths and BIDs

Province	Deaths in the Last 24 Hours			Cumulative Deaths		
	Facility Deaths	BID	Total	Facility Deaths	BID	Total
Lusaka	4	8	12	194	236	430
Southern	0	0	0	2	4	6
N-Western	0	0	0	1	4	5
Western	0	0	0	0	1	1
Eastern	0	0	0	0	1	1
Copperbelt	0	2	2	0	2	2
Central	0	2	2	7	12	19
Total	4	12	16	204	260	464

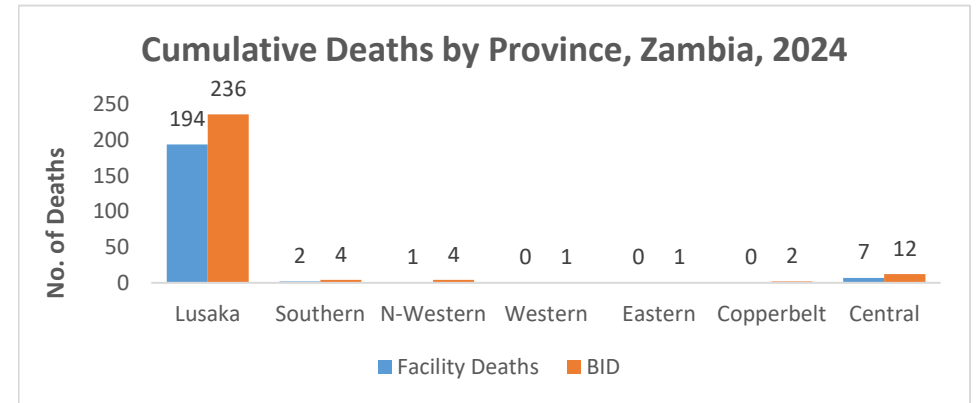
The case fatality rate is still high.



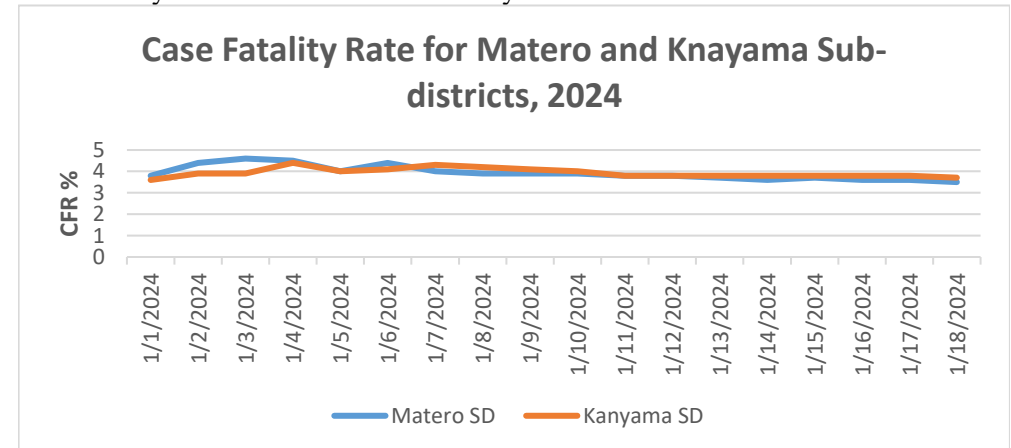
Number of deaths reported last 24 hours.



There are more Brought in Dead (BIDs) than facility deaths. There is 1.8% CFR for cases who die in health facilities.



Case fatality rate for Matero SD and Kanyama SD are above 3%.



Key Priority Activities Coordination Pillar

1. The National Coordinator of the Disaster Management and Mitigation Unit hosts a weekly meeting of the National Disaster Management Technical Committee Meeting to coordinate water, sanitation and resources being channeled to the response. Senior members of staff representing the different stakeholders including the line ministries, co-operating partners, Lusaka Water and Sewerage Company (LWSC), Lusaka City Council (LCC), Disaster Management and Mitigation Unit (DMMU), Defense Forces, as well as WASH and health promotion teams attend.
2. The Honorable Minister of Health, Ms. Sylvia T. Masebo MP, hosts a daily media briefing to update the public on the statistics and the current status of the cholera response activity
3. The Government of Zambia continues to draw resources from its treasury to support the response, including the provision of clean and safe water, waste management, health promotion and clinical management.
4. Heroes CTC opened and currently has a bed capacity of 1000 patients plus 200 beds at LMUTH
5. His Excellency the Republican President Mr. Hakainde Hichilema visited the cholera treatment centre at Hero's Stadium on 10th January 2023
6. The Honorable Minister of Health, through the provisions of the laws of Zambia, invoked the Public Health Act, (Laws, Volume 17, Cap. 295), the Public Health (Infected Areas) (Cholera) Regulations, 2017 and issued Statutory Instrument No. 5 of 2024 to facilitate the implementation of an enhanced approach to mitigate the current cholera outbreak

WASH

1. Enhanced water, sanitation, and hygiene interventions including chlorine distribution, and water quality monitoring, disinfection, and inspections.
2. As at 14/01/2024, 175/300 water tanks have been installed and supplied with water in Lusaka.
3. 305/20000 pit latrines have been emptied across the city. Challenges include that some places are inaccessible by the vacuum tanks
4. Integrated solid waste company has done 52 loads out of 2000 for the removal of historical solid waste
5. Identification and super chlorination of shallow wells- 360.

RCCE

1. Training of the 2500 CBVs in Lusaka District, 800 in Chilanga, 800 in Chongwe, 800 in Luangwa and 800 in Kafue Districts, total of 5700 CBVs is scheduled from 8th to 9th January 2024
2. Enhanced Risk communication and community engagement activities (door-to-door sensitization, radio shows, TV updates and interviews etc.)

Surveillance

1. Heightened Surveillance in all provinces to enhance early detection and response to cases.

Operational Response Gaps

1. Rapid escalation of cases is a strain on the health care provision for other essential services
2. Poor health-seeking behaviours of men in the communities with low risk perception hence continued recording of community deaths
3. Transmission of cases outside of Lusaka causing exacerbation of the outbreak
4. Poor sanitation coverage in the affected areas, worsened by inaccessible roads and flooding in at-risk areas which has hampered patient transfer to the ORPs and also emptying of pit latrines by LSWC
5. Steady increase in COVID-19 cases

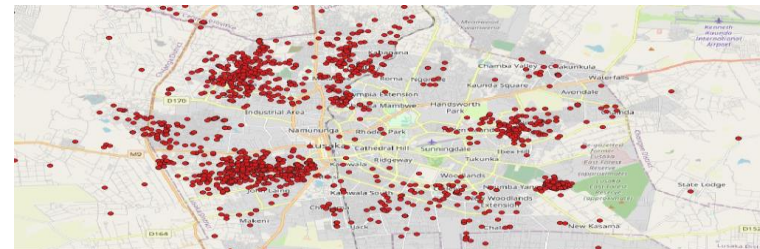
Recommendations

1. Need for additional human resources and commodities at Hero's Stadium and other CTCs in the subdistricts to ensure that essential health services are not disrupted
2. Scale up the provision of safe "chlorinated" water in the affected communities, with ongoing water quality monitoring for free residual chlorine
3. Prepositioning of commodities to other provinces with prior risk assessments being done to ensure outbreaks in those areas can be mitigated using a CATI approach
4. Enhance community engagement to increase awareness of the outbreak and protective factors for cholera tailored to the affected communities

WASH Challenges



Distribution of Cases in Lusaka District

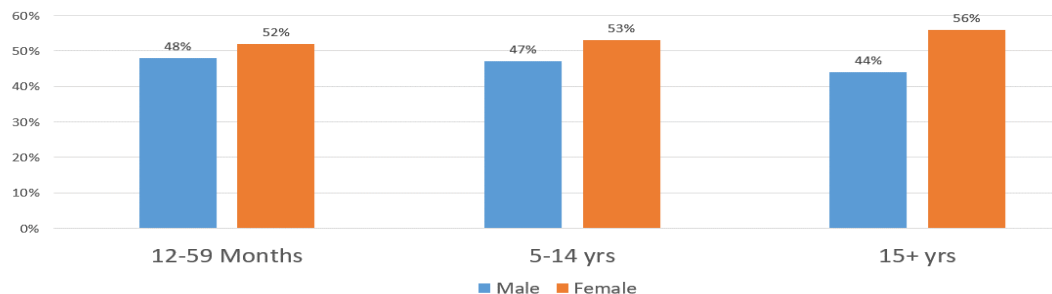


Oral Cholera Vaccination Report

A total of 748,102 (46%) of the target have been vaccinated, 2,673 healthcare workers and slightly more females than males are getting vaccinated. Overall, (346,421) 47% male and (401,981) 53% female.

District/Sub	Eligible Population	Target in Hot spots	Number Vaccinated					Coverage (%)
			Day 1 16.1.24	Day 2 17.1.24	Day 3 18.1.24	Day 4 19.1.24	Total Vaxed	
Chawama	440,881	440,881	0	58,799	57,464	49,520	165,783	38%
Chipata	458,467	458,467	102	53,366	71,724	70,223	195,415	43%
Kanyama	510,125	376,329	0	55,871	77,483	73,912	207,266	55%
Matero	494,881	313,467	13510	50,680	58,705	44,381	167,276	53%
Rufunsa	81,600	40,000	0	914	3397	8051	12,362	31%
Total	1,985,954	1,629,144	13,612	219,630	268,773	246,087	748,102	46%

Vaccinated by Age and Sex Disaggregation



Health Care Worker Vaccinations

S/n	CTC	Vaccinated last 24hrs	Total Vaccinated
1	Heroes Stadium	70	1824
2	Levy Hospital	10	154
3	Lusaka DHO CTCs	58	695
Total		138	2673

Community Case Management

Oral Rehydration Points Performance in Lusaka District

A total of 92,246 have visited the ORPs and 82,682 have been given ORS.

Sub-District	No Of ORP Sites	People Visited ORPs	People Given ORPs	Referred To HF	People Visited ORPs	People Given ORS	Referred To HF
Chawama	16	262	123	1	6389	1849	19
Chilenje	27	1762	1762	9	14276	11,969	612
Kanyama	12	3,094	3,094	7	27,091	27,091	152
Chawama	29	2110	1935	7	19673	17059	215
Chilenje	10	320	272	4	5596	5493	4
Kanyama	27	1,321	1,321	5	19,221	19,221	119
District	121	8869	8507	33	92246	82682	1121

School Assessments by Province

Province	Target	Cummulative	Last 24 Insp	Complying
Western	1166	654 (56%)	74	55 (74%)
Northern			99	79 (79%)
Eastern	1610	1051(65%)	828	79%
Luapula			43	36 (84%)
Muchinga	729	400 (55%)	165	113 (67%)
Lusaka	2161	436 (20%)		
Central	1272	764		667(87%)
Southern				
Copperbelt			47	40 (85%)
N/Western				

Water Quality Monitoring

Type of Source	Water Samples Collected	Water Samples >1mg/l (%)
Communal Tap	6	0 (0%)
HH water	6	1 (17%)
Water Tank	1	1 (100%)