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Prof JM Dangou

Dear Readers,

We are thrilled to introduce this week's edition where we provide updates on the ongoing cholera response. As we embark on this journey together, we aim to not only inform and educate but also inspire action towards long-term public health interventions to combat this devastating disease.

Zimbabwe is expecting delivery of oral cholera vaccines this week. The introduction of vaccines marks a significant milestone in our fight against this disease. This vaccine has proven to be highly effective in preventing cholera infection and reducing the severity of symptoms. By stimulating our immune system to produce a protective response, it empowers individuals and communities to resist the disease's onslaught.

While the oral cholera vaccine is undoubtedly a game-changer, we must remember that it is just one piece of the puzzle. To truly make a lasting impact, we need to embrace a comprehensive approach that combines vaccination with other public health interventions.

- Clean Water and Sanitation

Access to clean water and proper sanitation facilities is a fundamental human right. By investing in infrastructure that ensures safe water sources and adequate sanitation, we can significantly reduce the risk of cholera transmission. Let us advocate for policies that prioritize these essentials, especially in vulnerable communities.

- Strengthening Healthcare Systems

Robust healthcare systems are the backbone of effective cholera response. By investing in healthcare infrastructure, training healthcare workers, and ensuring the availability of essential medical supplies, we can improve the diagnosis, treatment, and management of cholera cases.

Effective cholera response demands seamless partner coordination, including dispatching experts closer to affected communities and securing increased funding are key to curbing the outbreak and saving lives.

Happy Reading

Prof Jean-Marie Dangou

# AT A GLANCE

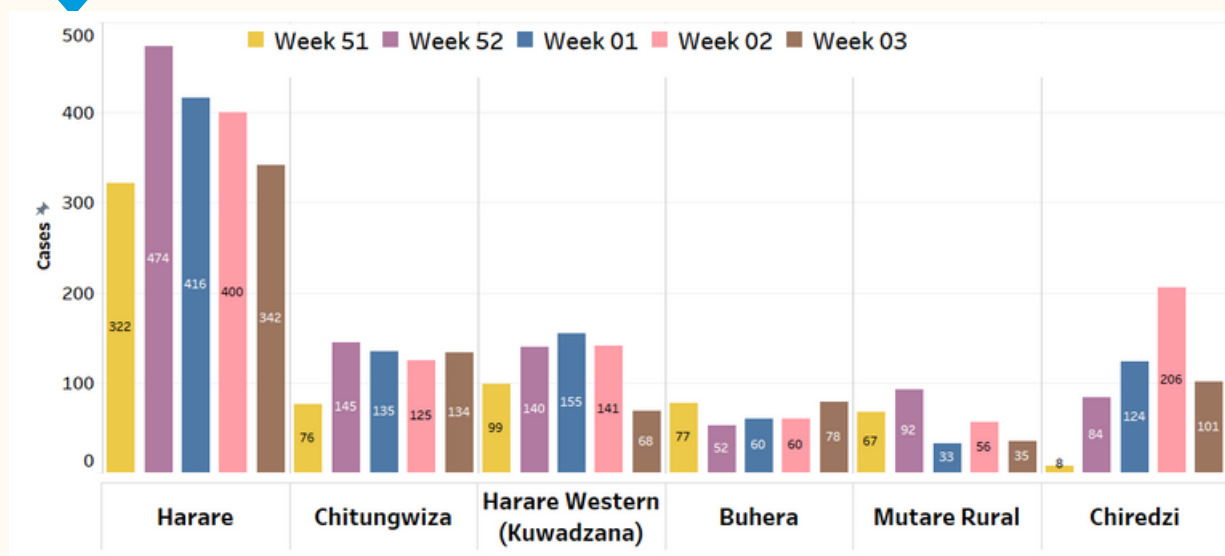


Figure 1: Weekly Distribution of Cases in selected District

In the week ending 21 January 2024, a total of 1,499 new suspected cholera cases were reported from all ten provinces. This was a 20% decrease from 1,875 cases reported during Week-02. Though all 10 provinces have reported cholera cases, three provinces (Harare, Manicaland, and Masvingo) account for approximately 85.4% of all reported cases.

- Harare is experiencing a gradual decrease of cases in previous weeks (Figure 1), a 14.5% decrease in cases was observed between Week 02 and Week 03 of 2024.
- Chitungwiza City is experiencing a sustained outbreak, with an average of 130 weekly cases over the last four weeks.
- Buhera is also experiencing a sustained outbreak. There is an average of 63 weekly cases over the past four weeks.
- Mutare Rural district has experienced a gradual decline in cases, in the last week, 35 cases were reported, a 37.5% decrease compared to week 02, when 56 cases were reported.
- In Masvingo Province, cases have been reported mainly from Chiredzi, Gutu and Chivi. In the past week, Chiredzi reported 101 cases whilst Chivi reported 32 and Bikita 29 cases.

IN  
ACTION

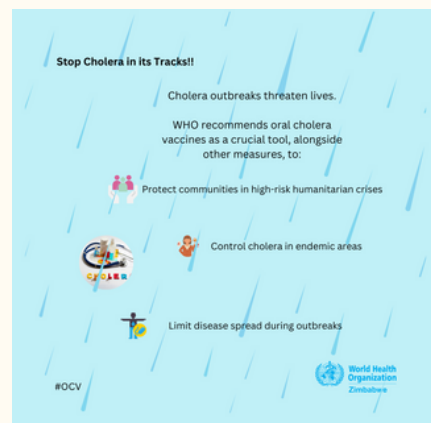
As part of public health strategies to respond to the ongoing cholera outbreak in the country, Zimbabwe is set to receive Oral Cholera Vaccine (OCV). to conduct the cholera outbreak reactive campaign. this campaign is expected to be rolled out in the coming weeks.

While the initial request was for 2,414,306 doses of OCV, the International Coordinating Group (ICG) approved 2,303,248 doses. The approved doses will arrive in three batches, with the first 892,286 doses expected to arrive this week. The remaining doses will arrive subsequently, ensuring a steady supply for the campaign.

The campaign will focus on 26 districts that are at high risk of infection, and with active cholera transmission.

The cholera vaccines offer protection against the disease, by boosting individual immunity, thereby reducing morbidity and mortality. However, it is important to know that OCV does not provide long-term protection and is not a stand-alone solution to controlling the spread of cholera.

Whereas it provides valuable protection, OCV should be combined with other public health measures like improved access to clean water and sanitation, hygiene promotion, increasing people's awareness, conducting surveillance activities for early detection of cases, and managing the affected people in time. Addressing underlying infrastructure challenges remain crucial for long-term cholera prevention.



With new challenges emerging, MoHCC continue to prioritize districts in Manicaland where cases are increasing. This reporting week saw 221 suspected cases, up from 182 the previous week, and a concerning increase in suspected deaths from 2 to 4. Chipinge district remains the epicenter, reporting 78 cases, followed by Buhera (75) and Mutare (48). WHO has stepped up its support in Mutare and Chipinge, during coordination meetings at the district level and providing supportive supervision at CTCs and communities alongside MoHCC provincial and district teams.

## Key Findings

- In Chipinge: The outbreak has spread to new villages along the Save River, while cases in previously affected areas of Checheche have declined. However, community engagement remains a concern.
- In Buhera, most of the cases were traced to neighboring districts, particularly Chiredzi in Masvingo.
- Apostolic communities continue to contribute a significant number of cases. At an apostolic community with a healthcare center in Zvipiripiri, WHO found several patients, including pregnant women, receiving care. This presented an opportunity for training and sensitization on case management and Cholera Infection Prevention and Control (IPC) measures.

To combat these challenges and control the outbreak, MoHCC is strengthening awareness raising about hygiene practices, safe water use, and cholera prevention measures.

In addition, provision of aqua tabs, water filters, and other water treatment solutions to affected communities is ongoing. WHO is also strengthening its support to bolster case management, IPC, surveillance, and RCCE activities.



**WHAT  
THEY  
SAID**

Everyone is at risk of cholera so we all need to observe the preventive measures. let's wash our hands and treat our water using aqua tablets, chlorine or even boiling the water. With schools in session, we encourage parents to teach their children on preventive measures



**Cresina Nyathi**  
Health Promotion Officer for Chitungwiza



**Micheal Gwarisa**  
Editor of The Health Times

There is a need for unity and collaboration in order to end the prevailing Cholera outbreak. It is not about finding fault or to blame one another but to find a lasting solution to this recurring public health crises. It's #AllHandsOnDeck

We are working with MoHCC and WHO and appreciate the collaboration with communities as the response to this outbreak is a collective efforts



**Robson Kwaramba**  
Carpenter in Budiriro

