

Alert

Democratic Republic of Congo

Cholera outbreak in Kisangani

Geneva, 25 March 2011

1. Brief description of the emergency

A Cholera outbreak has been reported in areas of Kisangani in Orientale Province in the Democratic Republic of Congo (DRC). The Kisangani city mayor issued a first alert on the 13 March 2011. This was confirmed by analysis of samples stools at the Kinshasa National Biomedical Research Institute (INRB) which revealed the presence of Cholera bacilli.

Following this situation government authorities and members of the WASH (Water, Sanitation and Hygiene) and health cluster are having daily emergency meetings to try to find a way to fight the epidemic. It appears, however, that the means that are available are not sufficient compared to the increasing dimension of the outbreak.

2. Impact

To date, the epidemic has reached the six communes in Kisangani as well as the villages on the Kisangani-Ubundu and Kisangani-Yakusu road axes, in a 120 Km radius. Alerts on the cholera spread in new areas continue to be received. To date, 33 deaths have been recorded and 537 cases have been referred to different health centers in the city. The death rate is at 6.14% . This information is collated by the health zones and districts and transmitted to the health provincial Inspection unit for dissemination.

3. National and international response

A crisis commission has been set up under the leadership of the Provincial Minister for Humanitarian Affairs and Health. This commission is composed of four sub-commissions: water/hygiene/sanitation, social mobilization, logistics and technical affairs. The city health structures have been mobilized to receive the sick persons. The provincial broadcasting radio and television stations have also created spaces for spreading awareness messages towards the populations. The provincial government has contributed USD 10,000 as a support to the crisis commission for first aid interventions. UNICEF has provided chloride, chloride tablets, bladders, serums and canvass materials for making emergency beds. MSF-Belgium has set up an emergency treatment centre in the two hospitals of the city

equipped with cholera kits for one hundred (100) patients. WHO has provided drips for the patients and fuel for the ambulances.

While medical treatment is being provided to the sick people by MSF-Belgium and local medical facilities with support from WHO, LWF is dealing with the preventive side including water chlorination with support from UNICEF plus the sensitization of communities in Hygiene and sanitation practices. Despite this intervention, it has been noticed that the number of new cases is on the increase. This shows that the preventive work being done is not sufficient and needs to be reinforced to stop further spread.

4. ACT Alliance response

In the Orientale province there are two ACT members: ECC and LWF. These two ACT members are involved in awareness raising and training of agents (LWF staff, ECC members, Congolese Red Cross agents and members of the community) on water chlorination and good usage of sensitization tools. This is a crisis situation that needs a coordinated, rapid and intense intervention to stop the progress of the epidemic.

Following the increasing number of new cases, LWF has carried out a rapid assessment that has shown that only 28 water chlorination points have been put in place when the minimum number required is 60 at the present scale of the outbreak, and that the sensitization activities need to be intensified within the communities stricken by the epidemic and surrounding locations.

5. Planned activities

The following activities are foreseen:

- Sensitization on hygiene good practices in schools and within public areas.
- Water chlorination: additional water chlorination points to be put in place near water collection points. The chlorination points will operate from 6.00 a.m. to 7.00 p.m.
- Capacity strengthening of community mobilizers through training in community sensitization in good hygiene and sanitation practices.

The target communities are those living in the zones most affected by cholera.

The two ACT Alliance members in the Orientale province plan to send a RRF request to the ACT secretariat.

Any funding indication or pledge should be communicated to Jean-Daniel Birmele, ACT Chief Finance Officer (Jean.Daniel.Birmele@actalliance.org).

Thank you for your attention.

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