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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 #8, Fiscal Year (FY) 2009

February 10, 2009

Note: The last fact sheet was dated February 2, 2009.

KEY DEVELOPMENTS

- Since the cholera outbreak began in August 2008, the disease has spread to all of Zimbabwe's 10 provinces and 56 of Zimbabwe's 62 districts. As of February 9, cholera had caused more than 3,400 deaths, with more than 70,600 cases reported and a case fatality rate (CFR) of 4.9 percent, according to the U.N. World Health Organization (WHO). As of January 29, WHO projected a worst-case scenario ranging from 81,000 to 115,000 cases.
- From January 25 to 31, WHO reported a fourth consecutive weekly increase in new cholera cases. However, WHO also reported a decrease in the weekly CFR and a stabilized rate of weekly cholera deaths. The weekly institutional CFR, measuring cholera deaths in health facilities, cholera treatment centers (CTCs), and cholera treatment units (CTUs), increased to 1.4 percent, only slightly higher than the previous week's figure of 1.3 percent. WHO noted that the stabilized institutional CFR likely resulted from improved case management and more rapid treatment of cholera patients than in the earlier stages of the outbreak.
- On February 6, the U.N. Office for the Coordination of Humanitarian Affairs (OCHA) reported the potential for a breakdown of the water supply in the city of Bulawayo, resulting from recent pipeline ruptures and a strike by municipal staff. To date, Bulawayo has experienced lower cholera rates than other urban areas, in part due to the continued operation of water treatment plants and ongoing water, sanitation, and hygiene (WASH) programs funded by USAID/OFDA and humanitarian partners since 2007.

NUMBERS AT A GLANCE		SOURCE
Total Reported Cholera Cases in Zimbabwe	70,643	WHO – February 9, 2009
Total Reported Cholera Deaths in Zimbabwe	3,467	WHO – February 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 February 6, OCHA reported that the outbreak in Zimbabwe remained uncontrolled. While reported new case rates in urban areas except Harare appeared to have stabilized for the week of January 25 to 31, rates in rural areas continued to increase. According to WHO, cases in Masvingo, Mashonaland Central, and Mashonaland West provinces composed nearly 70 percent of new weekly cases from January 25 to 31.
- WHO noted that 65 percent of cholera deaths between January 25 and 31 occurred outside health facilities, CTCs, and CTUs, a decrease from the previous week's figure of 71 percent. WHO attributed the decline to improved community mobilization and hygiene promotion activities.
- As of February 9, OCHA reported suspected or confirmed cholera cases in Angola, Botswana, Malawi, Mozambique, Namibia, South Africa, Swaziland, and Zambia. While OCHA noted that most ministries of health continued to respond adequately to the increased caseload, in cooperation with WHO and OCHA, the organization reported concerns regarding increasing case numbers, accurate case figure reporting, and emergency relief supply distribution in Malawi. USAID/OFDA regional staff will continue to monitor the situation in Malawi in cooperation with humanitarian partners.

Humanitarian Coordination and Information Management

- On February 5, the USAID Disaster Assistance Response Team (USAID/DART) reported that 34 humanitarian organizations within the U.N. WASH cluster had provided data regarding WASH interventions for the first week of standardized reporting. The U.N. WASH cluster has designated fourteen of the organizations as district-level focal points. In the coming days, the U.N. Children's Fund (UNICEF) plans to map the reported WASH interventions against district-level epidemiological data to better determine needs and gaps in the current response.

- To date in FY 2009, USAID/OFDA has contributed \$750,000 to WHO for humanitarian coordination and information management through the cholera command-and-control center staffed by WHO. USAID/OFDA continues to support improved data collection and analysis and information dissemination, enabling humanitarian organizations to direct expertise and resources where needed most.

WASH

- Between January 30 and February 3, USAID/DART staff conducted assessments of USAID/OFDA-funded WASH interventions and community mobilization programs in Harare, Mashonaland East, and Mashonaland West provinces.
- In Mudzi District, Mashonaland East Province, the USAID/DART attended a coordination meeting between implementing partners and local health authorities at the district hospital and visited rehabilitated boreholes in rural areas. USAID/DART staff noted that implementing partners and local authorities were attempting to curb the spread of cholera by distributing hygiene supplies to households near communities with recent cholera cases. Partner staff reported good knowledge retention and declining cholera cases in areas receiving health and hygiene education.
- In Kadoma District, Mashonaland West Province, the USAID/DART met with local health authorities, visited the local CTC, and attended a refresher training for 40 community health volunteers. In addition, USAID/DART staff monitored the distribution of soap and water purification tablets to 4,000 households in Remoka, a populous suburb and source of many of the district's nearly 4,000 cholera cases to date.
- To date in FY 2009, USAID/OFDA has committed more than \$5.4 million for WASH programs, including \$400,000 to assist displaced Zimbabweans in cholera-affected areas of Limpopo Province, South Africa, on the border with Zimbabwe. USAID/OFDA-funded WASH activities include hygiene promotion, cholera risk and transmission awareness programs, and home-based water treatment. Programs target locations with high reported cholera rates as well as areas prone to the spread of the disease, particularly high-density, peri-urban districts.

Health

- According to USAID/DART staff, WHO epidemiologists are now analyzing patient registers from CTCs for specific data on gender and age trends. Data analysis has indicated that between early October and mid-December in Mudzi District, more than 75 percent of the approximately 1,500 cholera cases occurred in people 16 years of age or older. However, the highest CFR was registered in children five years of age or younger, indicating a higher cholera mortality rate for young children.
- WHO reported that the decline in the weekly number of cholera deaths outside health facilities, CTCs, and CTUs from January 25 to 31 could potentially be attributed to improved home care and an increase in the number of patients seeking institutional care.
- USAID/OFDA support of the cholera command-and-control center has assisted WHO in compiling epidemiological reports, conducting case management training, establishing early warning mechanisms, and responding rapidly to new alerts.

USAID HUMANITARIAN ASSISTANCE FOR ZIMBABWE'S CHOLERA OUTBREAK

- On December 16, 2008, 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, education, logistics, nutrition, and WASH cluster meetings.
- To date, USAID/OFDA has pledged \$6.8 million in emergency assistance for Zimbabwe's cholera outbreak. USAID/OFDA assistance will continue to target provision of emergency relief supplies for affected populations, humanitarian coordination and information management, health activities, and WASH interventions.
- USAID/OFDA support for the current response supplements the more than \$4 million that USAID/OFDA provided for emergency WASH programs in Zimbabwe in FY 2008. The U.S. Government has provided nearly \$262 million in humanitarian assistance for Zimbabwe's ongoing complex emergency 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	\$235,826
Multiple	Water, Sanitation, and Hygiene	Beitbridge, Bulawayo, Chegutu, Chirumanzu, Gweru, Harare, Hwange, Kadoma, Masvingo, Mutoko, Mudzi, and Mutare districts, Zimbabwe, and Limpopo Province, South Africa	\$5,400,126
UNICEF	Emergency Relief Supplies	Affected Areas	\$299,180
WHO	Health; Humanitarian Coordination and Information Management	Affected Areas	\$750,000
	Transport of Emergency Relief Supplies	Affected Areas	\$65,632
	Administrative Support and Travel	Countrywide	\$49,236
TOTAL USAID/OFDA			\$6,800,000
TOTAL USAID HUMANITARIAN ASSISTANCE TO ZIMBABWE FOR THE CHOLERA OUTBREAK IN FY 2009			\$6,800,000

¹ USAID/OFDA funding represents anticipated or actual obligated amounts as of February 10, 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, and warehouse space); 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:
 - o USAID: www.usaid.gov – Keyword: Donations
 - o The Center for International Disaster Information: www.cidi.org or (703) 276-1914
 - o Information on relief activities of the humanitarian community can be found at www.reliefweb.int