

# STATUS OF ZACCEP IMPLEMENTATION

GTFCC WASH TWG Meeting, 24 March 2021

**Dr. Fadhil Abdalla**

**Director Preventive Services & HP**

**Ministry of Health, Zanzibar**



# Outline of presentation

- Background
- ZACCEP goal
- Enabling environment pillar
- Prevention pillar
- Response pillar
- Challenges
- Way forward

# Background

- Ending Cholera: A Global Roadmap to 2030 launched by the Global Task Force partners targeting at 90% reduction in cholera deaths by 2030 and the elimination in 20 out of 47 countries.
- In 2019, Zanzibar launched the Zanzibar Comprehensive Cholera Elimination Plan (ZACCEP) with a slogan, “Zanzibar without cholera is possible – “Zanzibar bila kipindupindu inawezekana”.
- The plan provides a roadmap for and calls for the multi-sectoral control to end cholera in the Island.
- The Plan outlines the strategy to improve WASH along other interventions including Oral Cholera Vaccine.
- The ZACCEP is implemented and coordinated through Vice Presidents Office (SVPO)
- It calls for key Ministries and Partners to join efforts to end cholera in Zanzibar.

# ZACCEP GOAL

- The ZACCEP's goal is to eliminate cholera local transmission within 10 years (2018/2019-2027/2028).
- The plan has three (3) pillars with thirteen (13) objectives.

## **The pillars include:**

- ✓ Enabling environment
- ✓ Multi-sectoral coordination, regulations, surveillance, capacity, M&E and risk assessment, resource mobilization
- ✓ Prevention:
  - ✓ water supply, sanitation infrastructure (liquid and solid waste), SBCC, Vaccine and
- ✓ Response:
  - ✓ case mgt, surveillance during outbreak and logistics

# Enabling environment

- Coordination:
  - Multi-sectoral coordination of government agencies and partners and mapping of stakeholders is done
  - Task force meets quarterly to receive and discuss ZACCEP quarterly implementation plan
  - Advocacy and communication strategy is done to eliminate cholera
- Regulations:
  - Assessment of Acts, Laws, Regulations to respond to cholera elimination is done at all levels
  - At the Shehia level, regulations and bylaws are enforced by local leaders
- M&E
  - Mentorship and supportive supervision is done regularly by team of experts

# Cont....

- **Surveillance system:**
  - Most of the implementation under surveillance is done through IDSR
  - IDSR guideline is reviewed and disseminated
  - IDSR training curriculum for TOT supervision is developed
  - There is continued on job training for health workers, lab staff and port health staff on IDSR
  - Diagnostic lab supply are given priority and regularly supported
  - \community based surveillance system is established and a guide is developed
  - Community leaders are oriented on surveillance guideline for timely reporting of cholera cases

# Prevention pillar

- It has **four objectives**:
  - Safe and adequate water supply
  - Management of sanitation infrastructures
  - Social and Behavioral Change Communication and
  - Cholera Vaccine.
- This pillar is mainly implemented by the Zanzibar Water Authority  
Hence will be covered by ZAWA presentation:

# Cont...

## **OCV:**

- ✓ Priority areas are identified already (327,000 people, 33 Shehias)
- ✓ Awareness raising and mass vaccination campaign logistics are ready
- ✓ Training of field teams and supervisors is underway
- ✓ Policy brief and post vaccine survey logistics are completed

## **SBC/IEC**

- ✓ Assessment of behavioral and cultural risks were done in 2020
- ✓ SBC strategy for prevention is going on through different communication channels (social and traditional media outlets)
- ✓ Community engagement is done through media, influential and key leaders and mobile vans plus hygiene promotion in schools



# RESPONSE PLAN

- This pillar becomes active during outbreak
- It has three main objectives namely
  - case management
  - surveillance during outbreak response and
  - logistics and supplies.

# Cont..

- **Case mgt:**
  - There is functional multi-disciplinary RRT at all districts
  - RRTs are trained on response and prevention
  - Advocacy and sensitization done targeting LGAs
  - Functional CTCs established as per guideline and efforts underway at all districts
  - Through National CHV plan, CHVs are empowered and supervise homemade ORS
- **Surveillance**
  - Onsite mentorship and supervision
  - Revised IDSR to improve surveillance during outbreaks
  - Oriented IDSR focal persons
- **Logistics**
  - Provide and facilitate supplies during response

# Challenges of implementing ZACCEP

- The notion of multi-sectoral implementation of the ZACCEP is not well grasped by all Stakeholders
- Coordination of partners is still a challenge, especially that there is no responsible person or unit that is leading the cholera elimination campaign.
- There is limited resource allocation from MDAs to implement ZACCEP at the beginning. There is a hope that MDAs will increase with time. In last quarter of 2020, total of USD 176,206 have been allocated for ZACCEP in different areas.
- Inadequate push on annual budgeting to cost cholera activities among ministries.

# WAY FORWARD

- The inter-Ministry cholera elimination coordination need to be strengthened
- The plan is to have dedicated unit in each Ministry that will regularly coordinate ZACCEP activities
- There should be Regular Coordination Meetings involving Heads of each Ministry

**Thank You!**