Oral Cholera Vaccination & WASH Integration in Zanzibar

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Outline of presentation

- Background
- History of OCV vaccination in Zanzibar
- Proposed WASH Interventions
- Challenges
- Way forward

Background

- Semi-autonomous region of Tanzania with total population of 1.6 million.
- Two major island (Unguja and Pemba) and several inhabited and barren islands
- Zanzibar has recorded 17 outbreaks of cholera since 1978.
- However, the history of cholera in Zanzibar goes back to 1886 where it affected the coastal regions of east Africa (James Christie)
- The recent outbreak was in 2019 where the transmission was mainly in Urban areas of Unguja and affected less than 100 people.
- In previous outbreak of 2016/17 a total of 236 Shehias out of the 334 (70.7%) were affected.

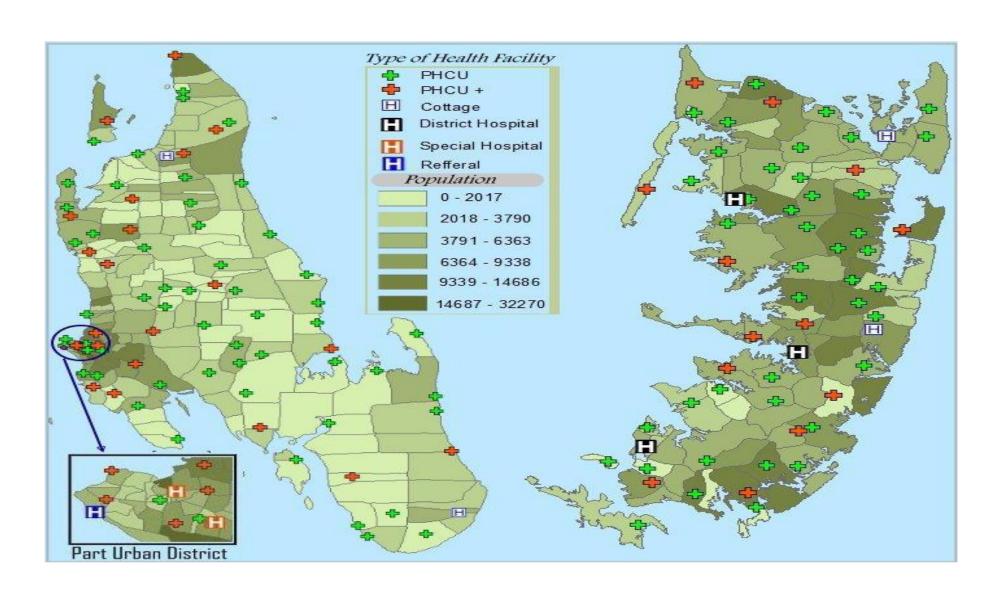
Background continued

- In cognizance of the repeated outbreak of cholera, the Government decided to eliminate cholera from Zanzibar by 2027
- Hence the Birth of ZACCEP with three major pillars of implementation:
 - Enabling Environment (Laws, regulations, capacity of sectors etc....)
 - Prevention (WASH, OCV, social and behavioral change communication)
 - Response (Case management, Logistics and supplies, Surveillance, Health Education and community engagement etc...)
- 33 hot spot shehias were identified with a total population of 327,853 targeted for intensive intervention including provision of OCV and WASH interventions
- Majority are in Urban West district with inclusion of high risk groups like fishermen and small island inhabitants
- The OCV campaign was planned to commence on 15th of February 2021.

ZACCEP 2018-2027



Physical Access to Health Services



History of OCV in Zanzibar

- Zanzibar has conducted the first OCV campaign in 2010 where 50,000 populations in six selected shehias were targeted and 26,000 (52%) vaccinated
- Dukoral was used during the campaign and was complicated requiring buffer among others.
- WASH was NOT integrated during the campaign
- How ever the vaccine seem to work in preventing the population (there was no outbreak between 2010 to mid-2015)
- From September 2016 to July 2017 there was an outbreak that infected 4,330 and killed 68 (CFR 1.6%)

Plan for Integration of OCV and WASH

- All School children in the target areas will be educated on hand washing, hygiene and sanitation
- Promotion of hand washing, hygiene and sanitation will be incorporated in the radio, TV, print and social media messages
- A bar of soap will be provided to all children under five and women of reproductive age who come to the vaccination site
- Construction and use of latrines will continue to be promoted for households and for communal toilets in compact areas like Kojani Island as pilot project

Anticipated Challenges

- Confusion between OCV and COVID19 vaccine which garnered many negative messages from top government officials.
- Demand by people in the untargeted Shehias: importance of OCV in the previous campaign.
- Lack of fund to cover WASH activities including provision of soaps.
- Competition of media by other priorities of the government visit by the new officials, tourist visits etc...
- Low turn over of people due to conflicting messages about vaccine.

Way forward

- Advocacy for integration of OCV and WASH at all levels
- Designing and implementing media messages targeting myths and misconceptions about vaccine
- Mobilizing resources for OCV and WASH interventions
- Engagement of multiple sectors, NGOs, civil society organizations, religious organizations etc...
- Engagement of school children, youth and community volunteers fro OCV and WASH activities
- Documentation of best practices and dissemination

Thank You!