



GLOBAL TASK FORCE ON  
**CHOLERA CONTROL**

**Use of cholera vaccine, Zambia, 2021**

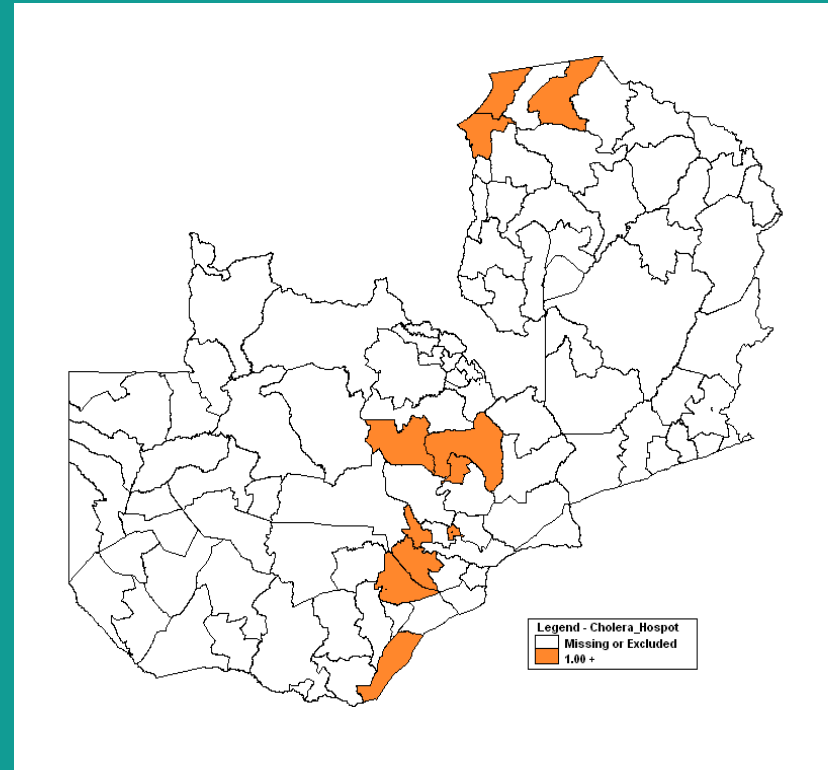
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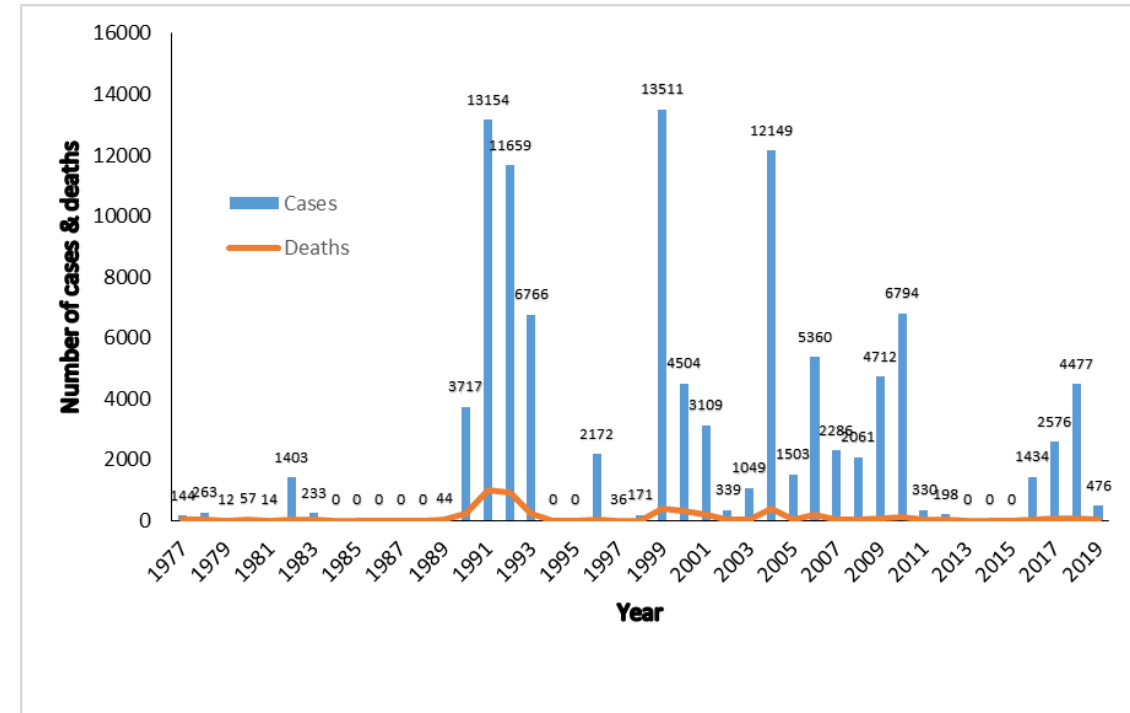
# HISTORY OF CHOLERA IN ZAMBIA

- In Zambia, Cholera is considered a major public Health problem with most outbreaks occurring during the rainy season( Week 40- week 23).
- In the year 2021, the country has not recorded any outbreaks. The last outbreak the country recorded was in 2018.
- Zambia has 11 hotspot Districts namely Sinazongwe, Monze, Mazabuka, Lusaka, Kapiri Mposhi, Kabwe, Ngabwe, Chiengi, Nchelenge and Nsama.



# HISTORY OF CHOLERA IN ZAMBIA

- Cholera is a significant national public health problem
- Zambia first recorded cholera outbreak in 1977; since then 31 outbreaks have occurred
- Last major outbreak was in 2017/2018
- Between 1999 and 2019, 66,110 cases and 1,907 fatalities (CFR  $\approx$  3%) have been reported
- Major hotspots are in Lusaka, Luapula, Copperbelt, Northern, Central and Southern provinces



**Fig 1: Cholera cases and deaths by year, 1977- 2019, Zambia**

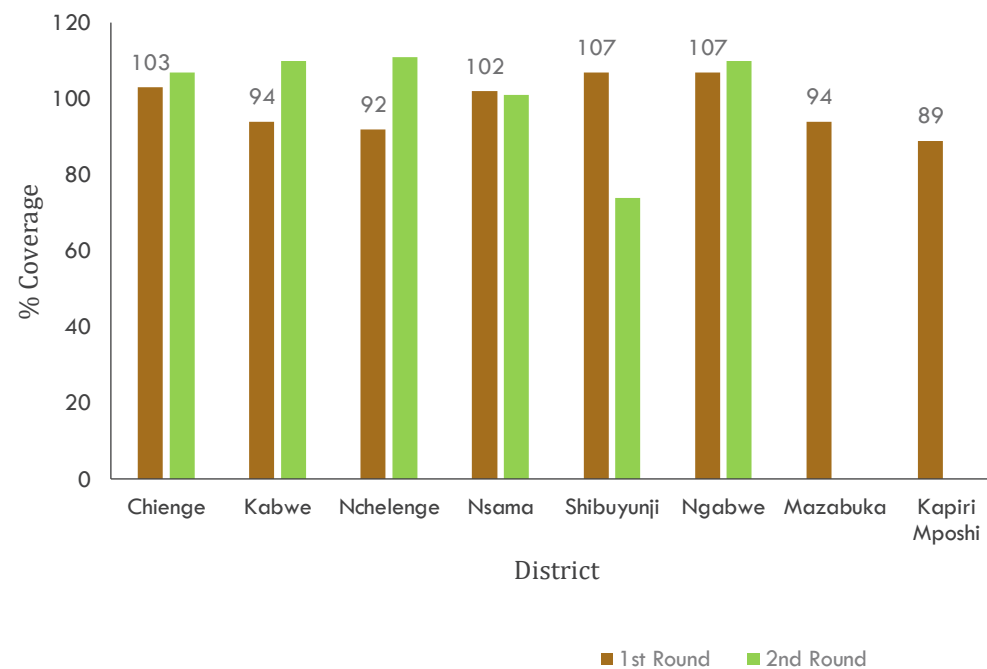
# OCV CAMPAIGNS IN ZAMBIA

- As a Country, We have been using Shancol Vaccine during the 2021 campaigns. Previously Euvichol was used during the 2018 Cholera outbreak.
- The country conducted pre-emptive campaigns in December 2020- December 2021 and No major AEFI have been recorded
- Coverage Survey was conducted in Sinazongwe and Nsama Districts.
- The vaccination campaigns have had great impact because the country has not reported cholera cases since 2018

# PRE-EMPTIVE OCV CAMPAIGN COVERAGES

**Table 1 showing hotspot districts and their coverages**

District	Target Pop.	Round 1		Round 2	
		Number	%	Number	%
Chiengi	148,608	153,066	103	155,018	107
Kabwe	239,134	244,786	94	262,906	110
Nchelenge	214,999	197,799	92	238,649	111
Nsama	70,402	71,810	102	71,106	101
Shibuyunji	70,889	75,751	107	52,037	74
Ngabwe	21,240	22,776	107	25,673	110
Mazabuka	244,910		94%		
Kapiri Mposhi	303,439	270,346	89%		

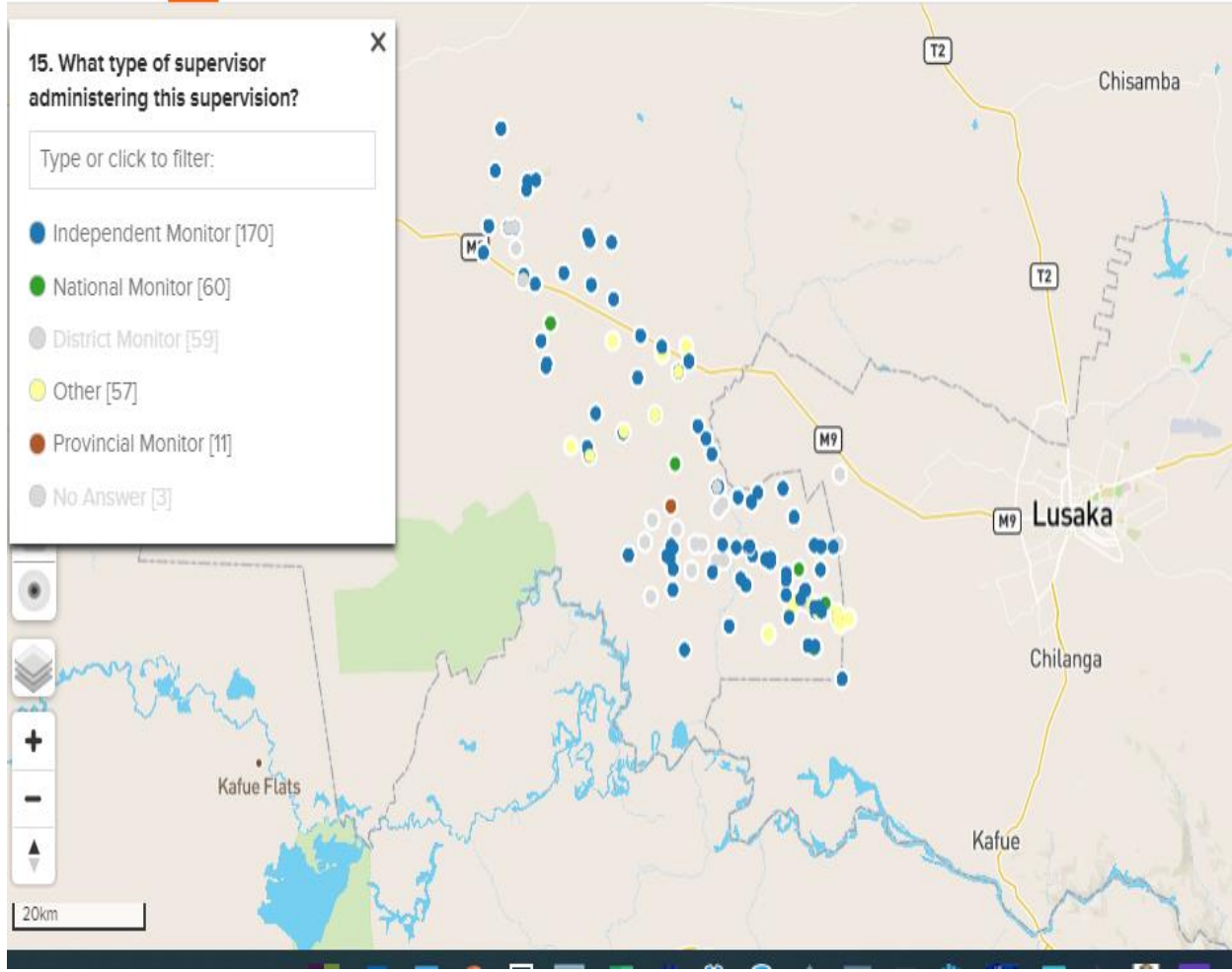
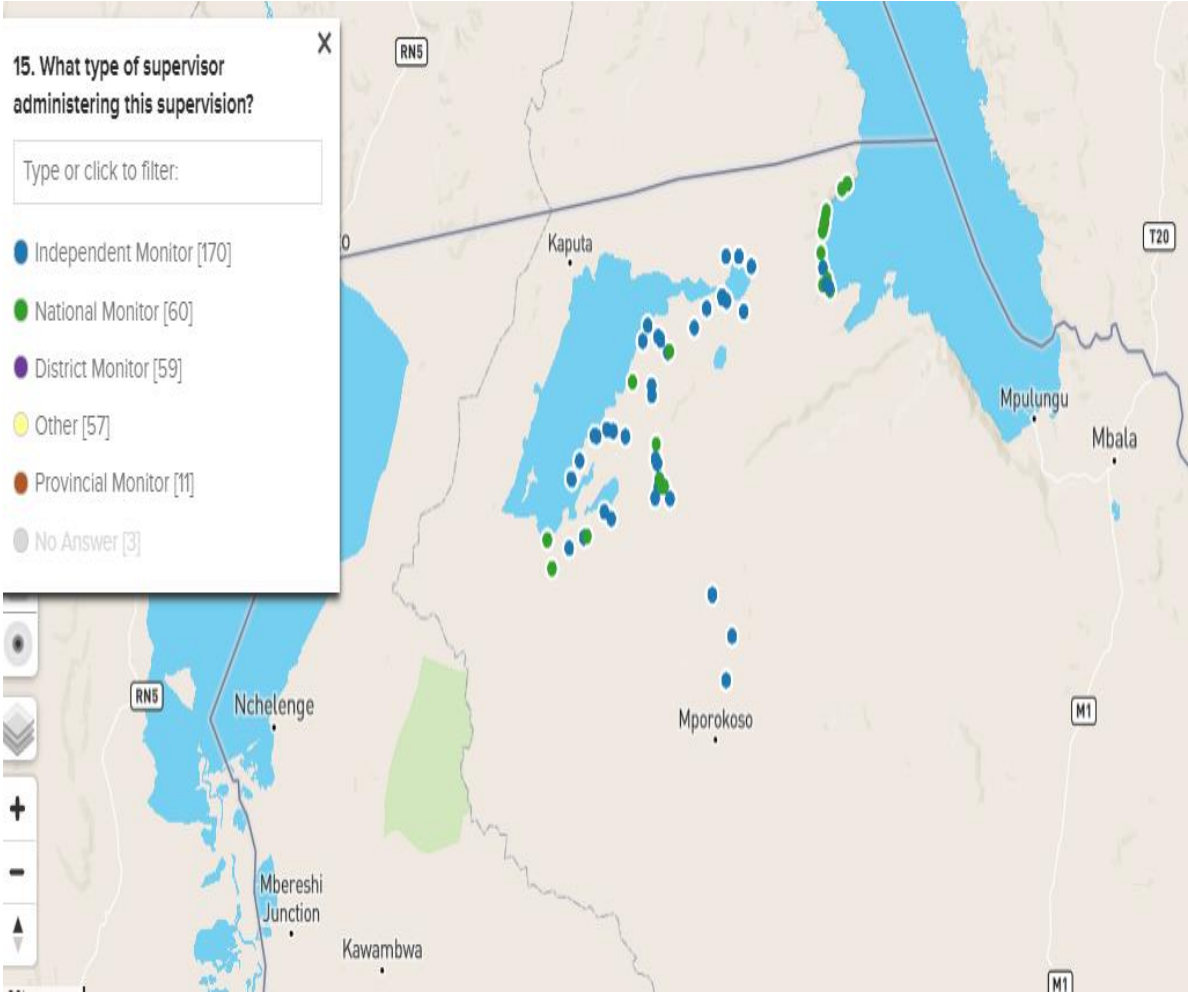


**Fig2: Hotspot Districts Vaccinated so far and their coverages**

# OCV CAMPAIGNS COVERAGE

District	Target Pop.	Round 1		Round 2	
		Number	%	Number	%
<b>Chiengi</b>	1 48,608	1 53,066	103	1 55,018	107
<b>Kabwe</b>	239,134	244,786	94	262,906	110
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<b>Mazabuka</b>	244910	230215	94%		
<b>Kapiri Mposhi</b>	303,439	270,346	89%		

# SUPERVISION FOR OCV/CTC, ZAMBIA



## WASH COMPONENTS-BEFORE, DURING AND AFTER CAMPAIGNS

- Community engagement for WASH interventions. i.e Health promotion activities.



# FIELD VISIT BY GTFCC TO INSPECT WASH ACTIVITIES IN THE BIGGEST HOTSPOT



## FIELD VISIT BY GTFCC TO INSPECT WASH ACTIVITIES IN THE BIGGEST HOTSPOT



# NEW TOILETS BUILT WITH COMMUNITY SUPPORT



# NEW WATER TANKS BUILT IN LUSAKA(BIGGEST HOTSPOT)

- Community engagement for WASH interventions. i.e Health promotion activities.



# CHALLENGES AND WAY FORWARD

1. Timing- conducting campaigns during the rainy season

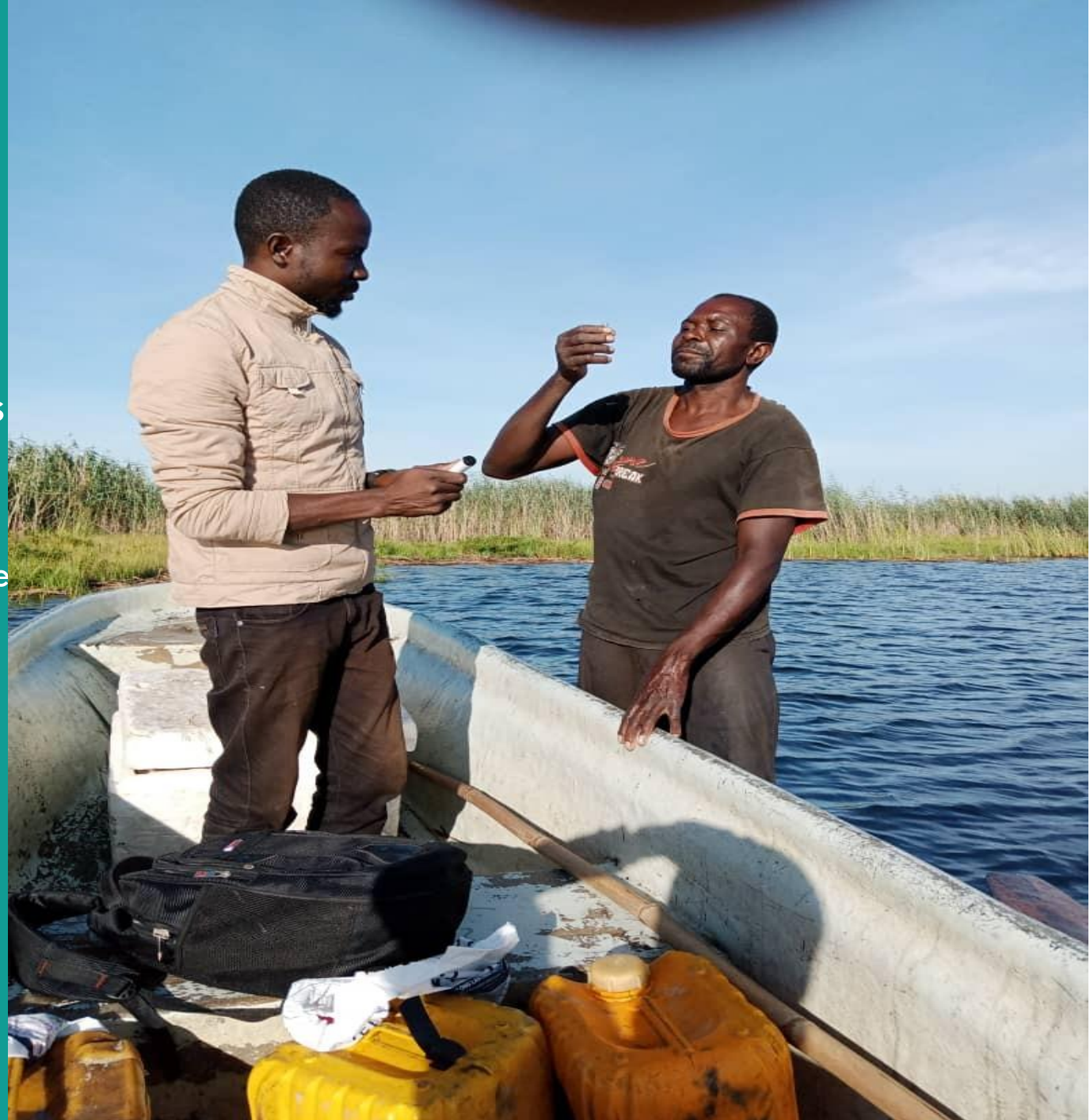
2. Acceptability-some pockets of refusals especially when the COVID-19 Vaccination was introduced.

3. Populations:

The official population figures are usually lower than the actual numbers on the ground. The growing population has increased the target population hence the need to have more vaccines than we have been supplied for the hotspot Districts

4. The sharp appreciation of the Zambian kwacha has directly affected the budget which is usually in US dollars.

5. Lack of resources to implement WASH activities. Eg Construction of toilets , purchasing of chlorine



## HIGH LEVEL ENGAGEMENT BY THE GTFCC TEAM WITH GOVERNMENT



# Thank you

Together we can  
**#endcholera**



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