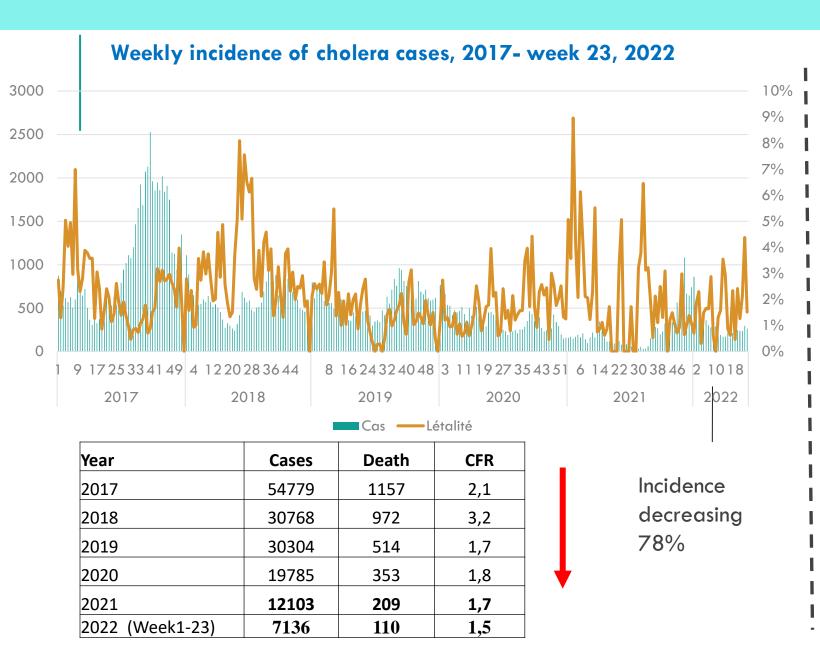


CHOLERA EPIDEMIC IN DRC 2021, CHALLENGE AND PRIORITIES FOR NEXT YEAR

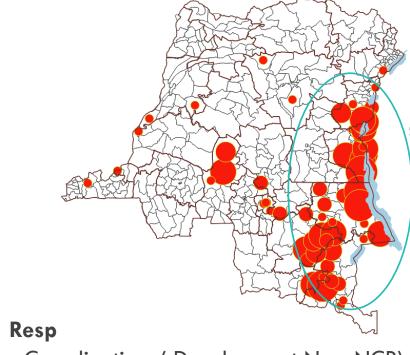
Doctor Placide WELO - Director of PNECHOL-MD

9<sup>th</sup> GTFCC Annual Meeting 27-28-29 June 2022

#### **DESCRIPTION OF CHOLERA IN 2021 AND RESPONSE**



#### Cholera mapping Week1-WeeK52, 2021



- Coordination (Development New NCP)
- Medical case management
- Communication and Awareness
- Preventive vaccination (**3,1 Million** people received 2 Doses of OCV)
- Community activities (e.g emergency WASH, CATI, geographical proximity targeted response)

#### **OCV CAMPAIGN ORGANIZED IN 2021**

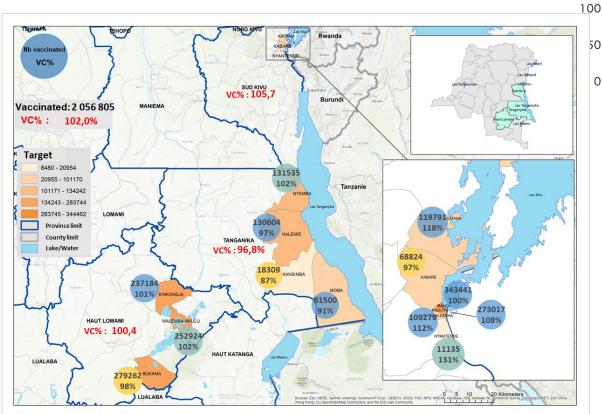
#### Province du Haut-Katanga

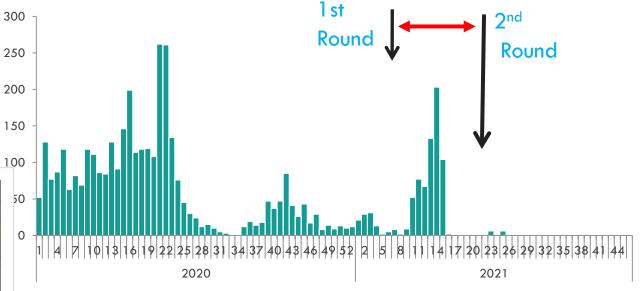
➤ **Dates:** 1<sup>er</sup> Round du 29<sup>th</sup> March au 3th April (Week14)

2<sup>e</sup> Round 8th -13<sup>th</sup> july (Week 28)

 $\triangleright$  overage : 93% ( 1 er Round) and 105, 4% (2e)

Round) Overage Two doses: 1. 228. 552 people





Campaign 3 Region : Sud Kivu 11ZS, Tanganyika

4HZ et Haut Lomami 3ZS.

1<sup>er</sup> Round 27<sup>th</sup> 2021 au 3th january 2<sup>e</sup> Round 28<sup>th</sup> march au 2th april 1 909 933 people received Two doses (CV 94,7%).

### OCV campaign in Haut Katanga





# 2. KEY ACHIEVEMENTS AND MAIN CHALLENGES

	ACHIEVEMENTS AND GOOD PRACTICES	CHALLENGES AND SOLUTIONS	
Establishment of Multisectoriel coordination for the development of NCP with the support of CSP		Finalize the NCP under development and draw up a resource mobilization plan	
Implementing of OCV campaigns combined with WASH activities in 4 regions (+3,1 million people received two doses)		low access to drinking water for the population living in hotspots. Define a WASH package to be implemented in the hotspots after WASH assessment.	
Setting up an online database with individual data (Line list) in 3 Provinces (North Kivu, South Kivu and Tanganyika)		Scale up with online database in all hotspots	
Development and implementation of contingency activities at Nyiragongo volcanic Eruption in Goma, May 2021		Limited numbers of confirmatory lab tests. Only 3 lab (Kinshasa, Haut Katanga and Goma). Increase 2 confirmation laboratories in 2 provinces (Tanganyika and Haut Lomami, both very landlocked provinces)	
Reduction of incidence by using combination of strategies and intervention such as: Quadriallage (geographical proximity targeted response), CATI, emergency WASH, OCV campaigns, early detection, rapid response, prepositioning of cholera kits etc		Maintain a rapid response mechanism to outbreaks and epidemics. Support all high impact interventions, e.g Multisectorial projects, Anticipatory action project, CATI/quadriallage, OCV campaign, WASH package	

## 3. PRIORITIES FOR 2022-23

N°	Priority Actions/Activities	Timeframe	Potential needs/ Gaps identified
1	Finalize the NCP, prepare a resource mobilization plan	September or October	Funding and strong advocacy
2	Organize a rapid WASH assessment in the hotspots	November	Funding and technical assistance
3	Increase by 2 the confirmation laboratories in 2 provinces (Tanganyika and Haut Lomami; both very landlocked provinces)	1st year of NCP	Funding and logistical support
4	Support all high impact interventions. e.g Multisectoriel project, Anticipatory actions project, CATI/quadriallage	1st year of NCP	Funding
5	Develop the OCV Plan for the next 3 years and identify WASH projects in hotspot after the assessment	1st year of NCP	Funding and logistical support

