

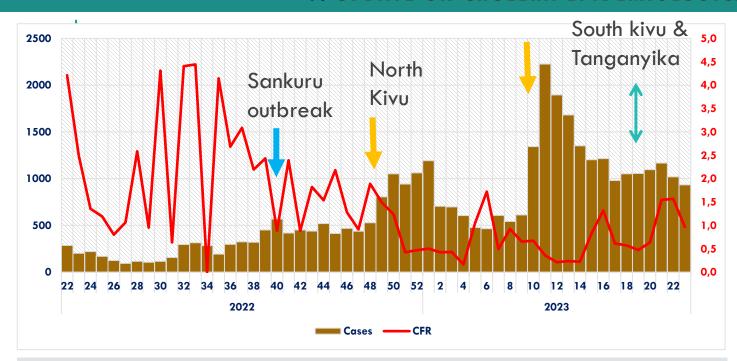
EPIDEMIOLOGICAL SITUATION AND MANAGEMENT OF CHOLERA IN THE DRC: JUNE 2022-JUNE 2023

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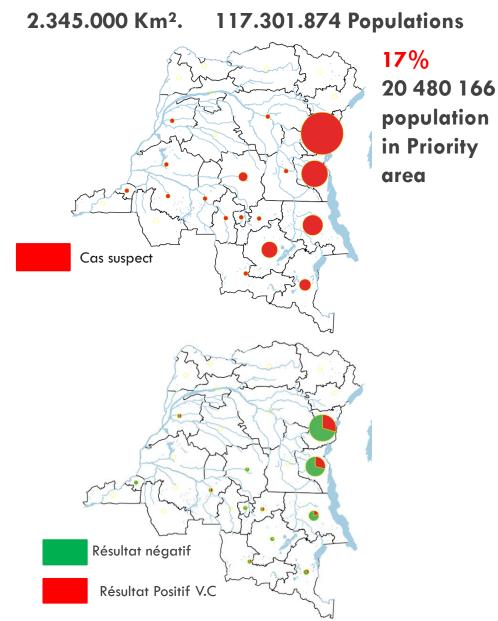
10th GTFCC Annual Meeting 26-28 June 2023

#### 1. UPDATE ON CHOLERA EPIDEMIOLOGICAL SITUATION IN DRC



#### June 2022-June 2023:

- 36 290 cases only North Kivu: 22247 cas (51%) et 44 décès
- **362** deaths
- 0,9% Case fatality rate
- **19 (73%)** provinces affected/26
- **118 (23%)** HZ affected/519
- **9888 (27%)** samples
- **3900** (**39,4**%) culture vibrio positive



# 2. NATIONAL STRATEGY FOR CHOLERA CONTROL AND PREVENTION: HIGHLIGHTING PROGRESS FOR BETTER CONTROL OF CHOLERA

### Early detection:

#### Strenghtning of clinical and Biological surveuillance:

- Establishment of online databases (cholera-endemic provinces): to monitor case notification in real time at all levels,
   and response to confirmed and suspect cases
- Study to evaluate the sensitivity and specificity of peptone-enriched RDTs (PNECHOL-MD)
- Reinforcement of biological surveillance (introduction of routine surveillance RDT, Culture, PCR project underway)
- Capacity building of two provincial laboratories (INRB Goma and AMILABO in Lubumbashi)
- $\circ$  Anticipatory project: training of actors in anticipation of outbreaks, and pre-positioning/provisioning of materials

### Multi-sectoral preparation and coordination activities:

- Permanent Working Group meetings with the following members: Ministry of Planning, Environment, Hydraulics and Energy, Public Health, Hygiene and Prevention, Interior, Transport and Communication
- Weekly meeting with all actors involved in the fight against cholera in the DRC, by videoconference with the provinces experiencing outbreaks
- Finalisation and technical validation of the multisectoral strategic cholera elimination plan (NCP/PMSEC), November 2022

### 3. KEY ACHIEVEMENTS AND SUCCESS FACTORS

KEY ACHIEVEMENTS	Success Factors
Finalisation and technical validation of NCP/PMSEC 2023-2027	<ul> <li>Involvement of all sectors and partners</li> <li>Established the NCP M&amp;E framwork including other health related indicators</li> <li>Mobilisation of partners through the country support plan (CSP)</li> </ul>
Development of NCP communication and advocacy strategy	- Establihed/ongoing risks communication within provinces
Development of response plan by province	Regional Capacity building on Cholera preparation/Response
Elaboration of the OCV preventative ( 2024-2026)	Reactive OCV campaign, IDP sites in Nyiragongo in January 2023: 355,074 people vaccinated (VC 97.5%). OCV Preventative Plan in final stage to be submitted to GAVI
Research- Action to guide/orient response (analysis of cholera persistence factors in Tanganyika (CAI), RDT studies, CATI effectiveness study, CATI-OCV study, WASH assessment in cholera hotspots, etc.).	<ul> <li>Integration of RDTs into routine surveillance</li> <li>Implementation of a multi-sectoral cholera control project in Moba, based on the results of the CAI study on cholera persistence factors.</li> </ul>
In-depth investigation of suspected cases; cross-analysis of socio-economic and health indicators by the Integrated Analytics Cell of the Ministry of Health's Directorate General for Disease Control (CAI-DGLM).	<ul> <li>Holistic support for community problems and families who have experienced cholera.</li> <li>Empowering the community and helping them to take responsibility for solving their own problems.</li> </ul>

### 5. HOLISTIC DASHBOARD OWNED BY THE MINISTRY OF HEALTH

- Cleaning of cholera line lists at health zone and provincial level, facilitating automated update for local health actors.
- Integration of line list with information from in-depth investigation of cholera households, providing holistic understanding of interaction of cholera with different indicators (malnutrition, GBV, measles etc.)
- Development of integrated dashboard presenting multiple indicators and data sources – updated weekly, managed, and shared by the MoH.
- Request to expand household investigation to include non-case and case households (South Kivu and North Kivu), to compare indicators and cholera risk factors.
- Dashboard analyses shared with local MoH, and partners for codevelopment of evidence-based recommendations.



### 4. CHALLENGES AND WAY FORWARD

CHALLENGES	Solutions	REMAINING OBSTACLES
Follow up of NCP( PMSEC) implementation, especially by other sectors ( Ministries)	Setting up indicators to monitor NCP/PMSEC implementation in other sectors	<ul> <li>Monitoring and evaluation of these indicators across the sectors</li> <li>Political validation of the NCP/PMSEC</li> </ul>
Mobilisation of government resources	Inclusion of an executive from the Ministry of Budget in the development of the NCP/PMSEC 2023-2027 to integrate into the DRC's budget for 2023.	
Coordination of all technical and financial partners involved in cholera response activities in the DRC.	Meeting with all partners every Wednesday by videoconference	
NCP/PMSEC political validation		

## 6. PRIORITIES JUNE 2023-24

PRIORITY ACTIONS	TIMEFRAME	POTENTIAL BOTTLENECKS IDENTIFIED	POTENTIAL NEEDS/GAPS IDENTIFIED
Dissemination of the NCP/ PMSEC 2023-2027 (National, Provincial, HZ, HA) levels	After political endorsment	Political validation	
Advocacy for mobilisation of government and non-government resources for NCP implementation	Permanent		
OCV preventative vaccination	May 2024		
Apply to GAVI for TDR	July 2023		
Setting up laboratories in Tanganyika and Haut Lomami for testing samples	August 2023 - January 2024		
Monitoring water quality in endemic provinces	August 2023 — January 2024		



### ANNEXE: ASSESSING PROGRESS AGAINST ROADMAP'S TARGETS

• Please include here reporting against the 16 indicators of the <u>Monitoring and Reporting section</u> from the NCP guiding document (pp.37 - 43) – if some of those indicators are not relevant to your Country situation, please feel free to indicate it. Reporting period is June 2022 – June 2023 (if different, please indicate).

Indicator (please refer to the NCP guiding document, Monitoring and Reporting section)	Status (please indicate when information/data is not available)	Comment  (please share any additional element that may help understand the information provided or the lack of data available)
Indicator 1 – Proportion of the NCP which is funded through domestic and external funding	NA	New NCP ongoing less 6 month
Indicator 2 – Number of multisectoral meetings held annually by the NCP coordination body	2 (50%)	4 meetings per year/ targed
Indicator 3 – Incidence rate of suspected cholera	NA	
Indicator 4 – Proportion of cholera signals verified within 48 hours of detection	NA	We plane a workshop to update tool to be able to collect new variable
Indicator 5 — Proportion of peripheral health facilities (PHF) located in cholera hotposts with access to funcitonal lab.	NA	
Indicator 6 – Number of deaths from Cholera	362 deaths	June 2022 – June 2023
Indicator 7 – Case Fatality ratio in treatment centres	<b>0,9</b> % CFR	June 2022 – June 2023

Indicator (please refer to the NCP guiding document, Monitoring and Reporting section)	Status (please indicate when information/data is not available)	Comment  (please share any additional element that may help understand the information provided or the lack of data available)
Indicator 8 – Proportion of the population living in hotposts who have access to ORS within a 30-min. walk from their home	NA	We plane a workshop to update tool to be able to collect new variable
Indicator 9 – OCV administrative coverage in hotpost areas vaccinated (over the preceding 12 months)	0	MYP submitted to GAVI
Indicator 10 – Proportion of hotspots targeted by the vaccination plan (in the reporting year) that have been vaccinated	0	
Indicator 11 — Proportion of emergency versus total OCV doses administered (over the preceding 12 months)	Reactive OCV campaign, IDP sites in Nyiragongo in January 2023: 355,074 people vaccinated (VC 97.5%). OCV	
Indicator 12 – Proportion of people with access to safe water in hotspots	NA	Ongoing study to Kalemie and other area
Indicator 13 – Proportion of people with access to sanitation in hotspots	NA	Ongoing study to Kalemie and other area
Indicator 14 – Proportion of people with access to hygiene in hotspots	NA	Ongoing study to Kalemie and other area
Indicator 15 – Proportion of trained focal points to support community engagement and cholera prevention and treatmen per inhabitants in hotspots	NA	
Indicator 16 – Proportion of the population in hotspots who have correct knowledge on cholera prevention in communities	NA	Needs to be collected by a operational study