YEMEN: cholera outbreak Situation Report #5

12 June2017

This is a joint report developed by Health Cluster and WASH Cluster
Source of data is Ministry of Public Health and Population and Ministry of Water and Environment

Situation Overview

- From 27 April to 12 June 2017, a total of 124,002 suspected cholera cases were reported from 20 governorates. Out of the total reported cases, 923 deaths were reported (0.7% case fatality rate).
- The number of deaths reported over the last four weeks is almost five times higher than deaths reported from October 2016 to March 2017.
- More than half of the suspected cholera cases have been reported from Sana'a City (21,538), Hudaydah (14,107), Hajjah (13,279) and Amran (13,148).
- Amanat Al Asimah has still been reporting the highest number of suspected cholera cases (21,538 cases) followed by Alhudeide governorate (14,107 cases) and Hajjah (13,279 cases). However, Al-Mahweet governorate accounted for the highest attack rate (93.7 per 10 000), followed by Sana'a governorate (87.6 per 10 000), Amran (85.9 per 10 000) and Amanat Al Asimah (65.1 per 10 000).

124,002 Suspected Cases

923 Deaths

0.7 Case Fatality Rate

20 Affected Governorates

276 Affected Districts

Figure1: Number of suspected cholera cases and case fatality ratio, Yemen, 2016 - 17

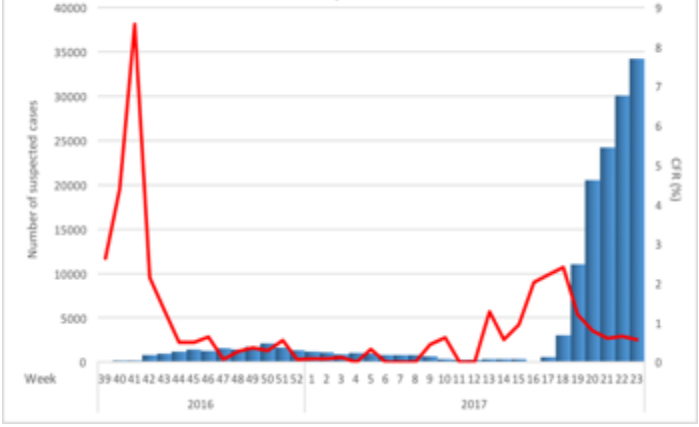

Figure 2: Number of suspected cholera cases & CFR (%), Yemen, 27 April - 11 June 2017

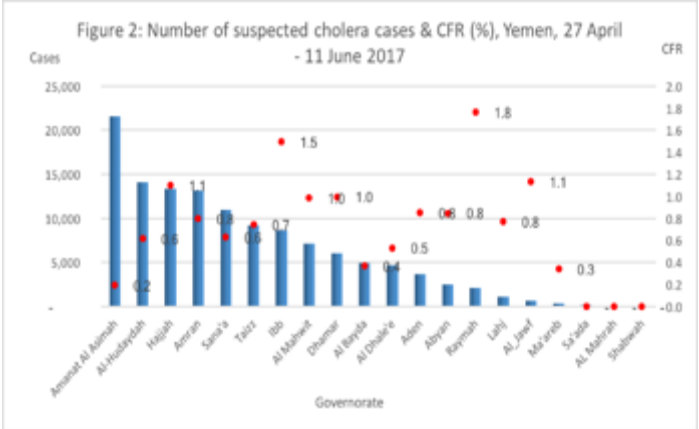

Table 1: Governorate level data on cases, CFR and ARs

Governorate	Number of cases	CFR (%)	Attack rate (10,000)
Sana'a City	21,538	0.2	65.1
Al-Hudaydah	14,107	0.6	42.2
Hajjah	13,279	1	59.8
Amran	13,148	0.8	85.9
Sana'a	10,963	0.6	87.6
Taizz	9,172	0.7	30.2
Ibb	8,623	1.5	28.1
Al-Mahweet	7,126	1	93.7
Dhamar	6,031	1	28.4
Al Bayda	4,933	0.3	64.1
Al Dhale'e	4,700	0.5	62.4
Aden	3,648	0.8	38.1
Abyan	2,480	0.8	40.6
Raymah	2,099	1.7	33.1
Lahj	1,042	0.7	9.9
Al_Jawf	618	1.1	9.5
Ma'areb	295	0.3	8.2
Sa'ada	136	-	1.5
AL Mahrah	46	-	2.8
Shabwah	18	-	0.3
Moklla	-	-	0.0
Say'on	-	-	0.0
Socatra	-	-	0.0
Total	**124,002**	**0.7**	**41.8**

Forecasting the Cholera Caseload:

Efforts have been on going to forecast the number of cholera patients in different scenarios to inform response for the ongoing cholera outbreak, Yemen 2017. Health cluster recommends adoption of the most likely scenario and therefore, estimates that an additional 127,393 cases will be reported in the coming 7 months starting June 2017. It should be noted that this estimation has its own shortcomings and challenges. The aim of this prediction is to assist the humanitarian partners to plan the required material, staff, and financial resource.

Table 2: Forecasted number of cholera patients in different scenarios for the cholera outbreak, Yemen 2017

	Best case scenario	Likely case scenario	Worst case Scenario
Attack Rate	0.50%	0.75%	1.00%
Population at risk	29,652,423	29,652,423	29,652,423
Total Expected Number of Cases (2016-2017)	148,262	222,393	296,524
Current Case load as of 31 May 2017	95,000	95,000	95,000
Total cases remaining in the next seven months (June- December 2017)	53,262	127,393	201,524

1906 CTC beds 206 ORPs 20 Governorates 121 Districts

Health Cluster response

- Health cluster partners continue their efforts to scale up the response to cholera outbreak. Health partners are honing in on areas reporting the highest number of cases to stop the disease from spreading further.
- Out of 3,507 CTC beds needed according to the forecasting, health cluster partners set 1906 beds in 121 districts in 20 Governorates to save lifes of cholera patients.

Health cluster partners continue their efforts to scale up the response to cholera outbreak

- In addition, health partners established 206 Oral Rehydration Points (ORPs) out of 877 forecasted.
- UNICEF and WHO are both providing support and medical supplies to Oral Rehydration Centres and cholera treatment centres across the country where patients are being screened and provided immediate medical support. All this is done along with disseminating hygiene awareness to the affected populations.
- Till now, both agencies has distributed 410 cholera beds, 97 cholera and diarreahal disease kits (various modules), 221,000 intravenous fluid bottles (500ml), 7 million oral rehydration solution sachets, thousands of antibiotic treatment doses and 3,500 diagnostic tests for cholera since April 2017.
- In addition, WHO and UNICEF stock include 39 cholera and diarrheal disease kits (various modules), 7000 IV fluids infusion bottles and more than 20,000 diagnostic tests available.
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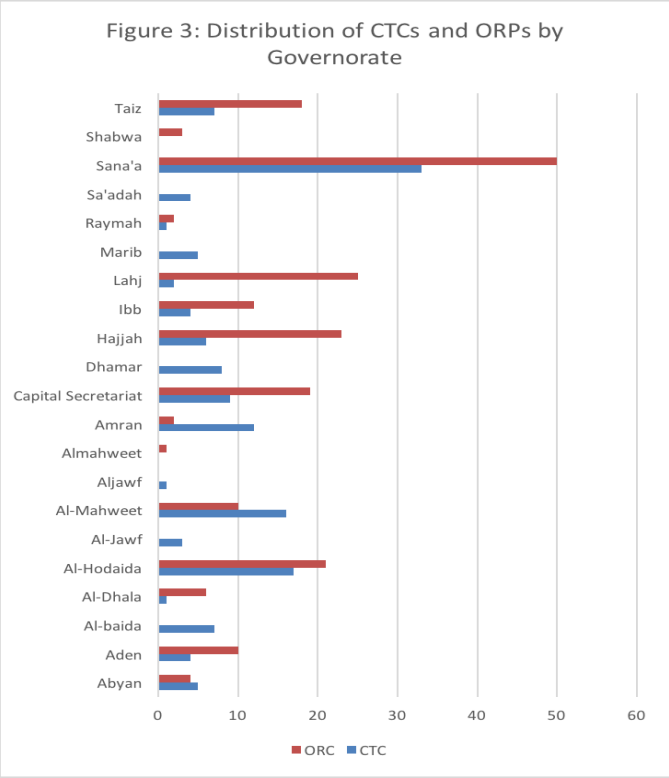
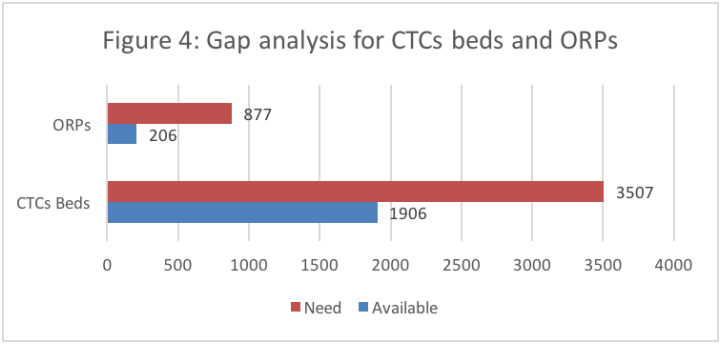
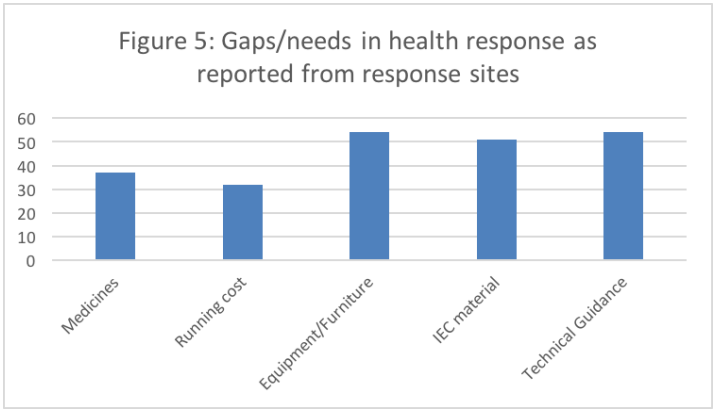
- From among the health cluster partners, 20 organizations reported timely to the cluster on their activities including ADRA, AGF., ACF, CSSW, FMF, Human Appeal, INTERSOS, IOM, IRC, IYCI, MdM, Millennium Foundation, NFDHR, PU-AMI, Relief International, Sajaia Foundation, YFCA, UNICEF, WHO and YWU.







WASH Cluster response

- 15 WASH cluster partners are reporting cholera response activities in 67 districts in 13 governorates in the last week. Partners reporting are ACTED, ACF, ADRA, All Girls, CARE, DRC, IRY, Khadija Foundation, OXFAM, Sajaia, SCI, UNICEF, VHI, WHO, and YFCA. Partners are working closely with GARWSP EU, NWRA, LWCs and HEC.


Partners support to operate public water networks in the cities of Sana'a, Hodeidah, and Mahweet

- Support to the National Water Resources Authority (NWRA) for water quality monitoring continues. Partners also continue to support the wastewater treatment plant in Amanat Al Asimah, and support to operate public water networks in the cities of Sana'a, Hodeidah, and Mahweet.
- In the last week, 92,000 people benefitted from chlorination of water supplies in 8 districts in 5 governorates. In addition, more than 300,000 people are regularly benefitting from chlorination of water tankers at filling stations in Amran and all districts of Amanat Al Asimah. Urban water networks in Amanat Al Asimah, Aden and Taiz have received supplies to chlorinate the public water networks, reaching more than 228,000 people each day.

- Testing of Free Residual Chlorine (FRC) to ensure adequate chlorination of the water is ongoing in 28 districts in Al Dhale, Al Hudaydah, Amanat Al Asimah, Ibb, and Aden.
- During the reporting period, an additional 108,000 people have received a 1-month supply chlorine tablets for household water treatment in 24 districts in 11 governorates. This brings the total to over 588,000 people reached since the start of May.
- Since the start of May, household water storage cleaning campaigns have reached 617,000 people in 19 districts in 9 governorates, with 87,000 reached in the first week of June.
- Training of 84 community hygiene promotors on key cholera awareness and prevention messages took place in 2 districts in 2 governorates. More than 70,000 people were reached by WASH partners with hygiene awareness messages, through household visits, public events and school visits in 18 districts in 10 governorates. WASH partners reached 83,000 people with consumable hygiene kits in 7 districts in 3 governorates. Cleaning campaigns are ongoing in Aden benefitting 24,500 people.
- Mass media activities continue through radio and TV flashes, and text messages through 4 telecommunication companies.
- WASH partners and local authorities in the Sana'a, Aden and Hodeidah hubs are being trained on proper chlorination procedures. Over the next week approximate 110 people will be trained in the 3 hubs.
- WFP is planning to include Clorox bleach included in the regular distributions to affected populations. WASH Cluster will support on the appropriate messaging and associated IEC materials.

Challenges:

- Despite the establishment of 144 CTCs and 206 ORPs, the gap to establishing the required number of DTCs and ORPs remains significant to meet the needs of the cases of cholera in different governorates.
- In addition, health response sites to the cholera outbreak indicated that there are gaps in medicines (37 treatment sites), Operational cost (32 sites), equipment and furniture (54 sites), IEC materials (51 sites) and technical guidance (54 sites) in different locations.
- Weakened health system due to lack of operational and other costs for health facilities over the past 12 months.
- Other priorities such as famine prevention and IDP response continue to require WASH interventions. WASH partners are spread thin and the quality of programs is at risk if additional funding and human resources are not immediately made available in country to enable partners to scale up the WASH response.
- While WASH partners are responding to control the cholera outbreak, it is equally important that longer term interventions start immediately to prevent a future outbreak from happening. This requires scale up of WASH partners in the priority locations.
- WASH partners could benefit from additional capacity building to enhance the quality of the response. INGOs and UN should bring in international technical experts and partner with national NGOs to support them and build their capacity.
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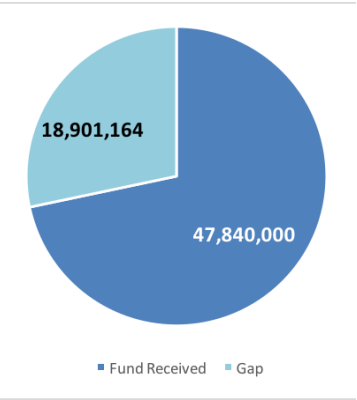
Funding

- Health and WASH clusters have issued a new appeal during the second wave of cholera outbreak requesting for US$ 66,741,164 million to implement the integrated cholera response plan to contain the spread of cholera in Yemen.
- With generous contribution of YHF, Norway, OFDA, WB, USAID, KSC, DFID and CERF, Health and WASH partners (WHO, UNICEF, CSSW, PU-AMI, Millennium Foundation and a number of YHF partners) have received or will be receiving US$ 47,842,000 million in the next days as fresh funds and re-programing for the cholera response.



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