FACTORS AFFECTING THE CHOLERA EPIDEMIC IN LUSAKA

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OUTLINE

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• Zambia’s demographics and culture
• Cholera background in Zambia
• Cholera epidemic in Lusaka
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Introduction

- An overview of the cholera epidemic in Lusaka, Zambia.

- Highlights the contributing factors and responses taken.
ZAMBIA
LUSAKA – The Capital City
Demographics - Zambia

- Area covering 752 618 sq. metres
- Population of over 13 000 000 people.
- Zambia comprises of 72 ethnic groups
- Highly urbanised with 42% of population living in cities.
- Majority practice subsistence farming
Language and Culture

• Blend of different cultures from the 72 ethnic groups.
• Yearly held traditional ceremonies:
  • Kuomboka,
  • Nc’wala,
  • Mutomboko,
  • Lwiindi,
  • Lunda Lubanza,
  • Likumbi Lyamize,
  • Chibwela Kumushi,
  • Ukusefya Pa Ng’wena.
LUSAKA – The Capital City

- The Capital City of Zambia
- Population: above 2 million people.
- A fast growing metropolitan city.
- Divided into low density, medium density and high density areas.
- 70% of the population live in peri-urban areas which are high density.
- Cholera is mainly recorded in peri-urban areas.
Low Density Area of Lusaka
Medium Density Area in Lusaka
High Density Area in Lusaka
Background of Cholera

- Cholera is an acute bacterial infection of the intestine caused by ingestion of food or water contaminated by Vibrio cholerae.
- Symptoms include acute watery diarrhoea and vomiting which can result in severe dehydration and can lead to death within hours if not treated.
- Cholera has continued to cause serious morbidity and mortality globally.
Cholera in Zambia

- The first outbreak of cholera was reported in Zambia in 1977/1978.

- The first major outbreak was recorded in 1990. Since then, Zambia has been recording cholera cases almost every year especially in fishing camps of rural areas and in peri-urban areas of Lusaka and Copperbelt provinces.

- The cases and the fatality rates have continued to reduce over the years.
Lusaka Cholera Trends - 2003 to 2010
Factors affecting Cholera in Lusaka

• Since 1990 when the major Cholera epidemic occurred in Zambia, Lusaka has experienced the epidemic every rain season apart from the 1994/1995 season and the period between 2010 to 2015.

• Cholera cases and deaths occur mostly in peri-urban areas of the city where there is limited access to safe drinking water and good sanitation.
Factors affecting Cholera in Lusaka

- The epidemic mostly occurs during the rain season contributing to:
  - Contamination of food sold on the streets.
  - Contamination of water from boreholes and wells.
  - Poor hygiene practices
Factors affecting Cholera in Lusaka

Shallow wells used in peri-urban areas are most times very close to the unimproved pit-latrines
Factors affecting Cholera in Lusaka

4 cases of cholera from this block housing 22 households using one pit latrine were recorded during the 2016 Cholera epidemic which was declared over on 15/06/2016
Factors affecting Cholera in Lusaka

Broken sewer pipe discharging effluent into the nearby stream

Popular well 10 meters away from the contaminated stream
Factors affecting Cholera in Lusaka

- Solid waste management is a challenge in Lusaka.
- Promotes breeding of flies.
- Some people dump feecal matter at refuse heaps contributing to ground water contamination.
Responses to Cholera in Lusaka

- Cholera is a notifiable disease
- The Ministry of Health leads the response using existing coordination structures.
- Setting up of cholera treatment centre.
- Mapping and chlorination of shallow wells, increased chlorination dosages in water mains and distribution of household chlorine.
- Distribution of soap for hand washing.
Responses to Cholera in Lusaka

- Contact tracing of all cases.
- Intensified public premises inspection.
- Ban of selling of food on streets.
- Training of Neighbourhood Health Committees (NHCs) to conduct door to door health promotion.
- Use of mass media to disseminate cholera prevention and control messages.
Long term response

- Lusaka City Council working together with Habitat for Humanity have embarked on renewal of peri-urban areas.
- The American Government has funded projects to improve sanitation in peri-urban areas.
- The world Bank, African Development Bank and other cooperating bodies have funded a water and sanitation project for Lusaka City.
- Public Health Act enforcement support by UNICEF
Cholera is a deadly disease which if not well responded to can affect a huge population within a city.

All stakeholders are important to ensure effective response to cholera.

Environmental Health staff are key with regards to coordination of response activities.
ATTRACTIONS

- Bungee jumping
- White water rafting
- Elephant safari
- Lion encounter
Low Density Area of Lusaka
• THANK YOU FOR YOUR ATTENTION

• ZIKOMO