



GLOBAL TASK FORCE ON  
**CHOLERA CONTROL**

**MALAWI: UPDATES, CHALLENGES AND  
SUPPORT REQUIRED FOR NATIONAL  
CHOLERA CONTROL PLANS (NCPS)**

WASH Working Group Meeting  
Emmanuel Mbawa  
Tuesday, 12<sup>th</sup> February 2019

# COUNTRY PROFILE

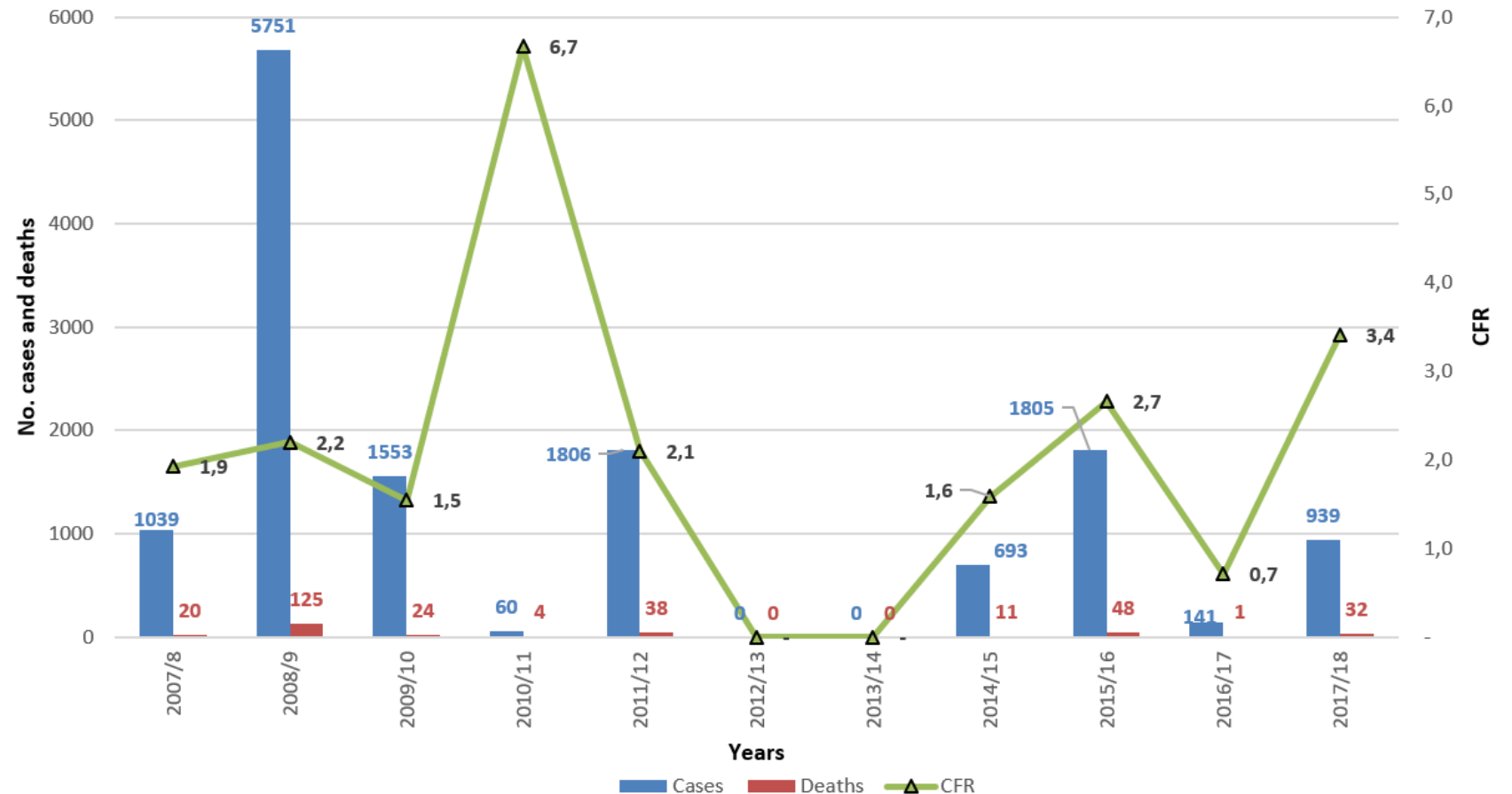
- Landlocked country in southeast Africa, bordered by Tanzania, Mozambique and Zambia (free movement of people )
- 28 districts
- Population: 17,6 millions
- 29% of households live under the international poverty line of \$2 per day.
- Poverty remains particularly prevalent in rural areas, where over 14 million people live – more than 80% of the population





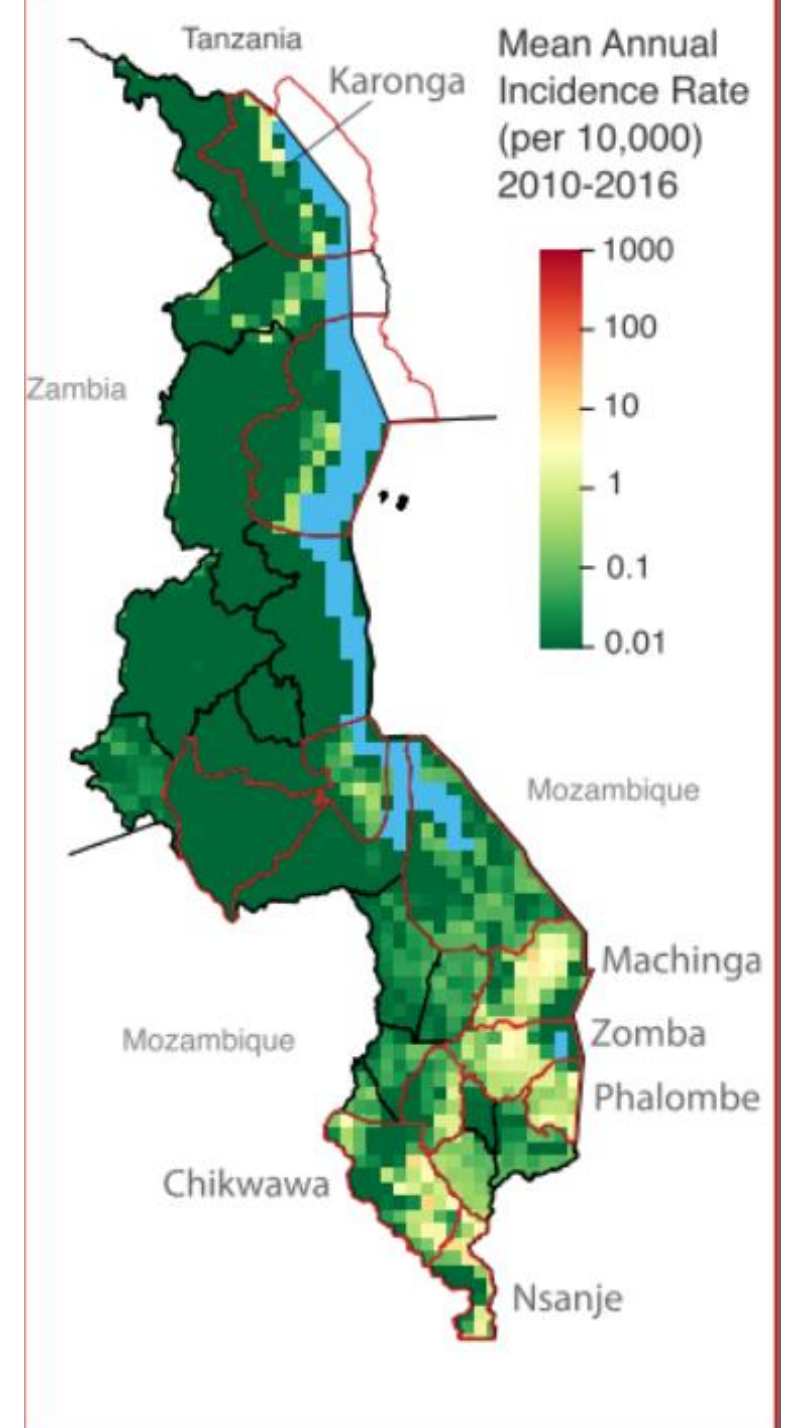
# CHOLERA IN MALAWI

- Cholera was first introduced to Malawi in 1973
- Since 1998, outbreaks nearly every year, mostly during rainy season
- Largest outbreaks recorded in 1998/99, 2001/02 and 2008/09



# CHOLERA HOTSPOTS

- Main cholera hotspots: **Lake Chilwa basin, Shire Valley, Lake Malawi Shore districts and major cities**
  - **High Risk Districts** – Machinga, Zomba, Phalombe, Nsanje, Chickwawa
  - **Moderate Risk Districts** – Karonga, Lilongwe, Salima, Blantyre, Mangochi, Nkhata Bay, Dowa
  - **Low Risk Districts** – all other districts



# CURRENT STATUS OF MALAWI NCP (1/3)

- Feb 2017: Development of the **National Cholera Prevention and Control Plan (NCP)**
- Nov 2018: Update of the NCP and development of the **National Cholera Epidemic Preparedness and Response Plan**
  - **Comprehensive, integrated and inter-sectoral** plan for cholera prevention and control
  - **One-year** plan (oct. 2018 – Sept. 2019)
  - Population covered: mainly cholera hotspots
  - Sectors covered:
    - Coordination
    - Surveillance including laboratory
    - Case management
    - OCV
    - **WASH**
    - Social mobilization and communication
  - Funding requirement: USD 5,272,976 (USD 4,442,071 committed, Gap: USD 830,905)

# CURRENT STATUS OF MALAWI NCP (2/3)

- NCP endorsed by MOH
- Key stakeholders involved: government (MOH), international and local partners (WHO, unicef, MSF...)
- Overall coordination provided by the National Health Cluster (multi-sectoral) with operational oversight provided by Public Health Institute of Malawi (PHIM, MOH)
- WASH sector
  - **WASH cluster**
  - **Sanitation**
    - Open Defecation Free (ODF) initiative
      - Community led total sanitation (CLTS)
      - School led total sanitation (SLTS)
    - Sanitation marketing for improved sanitation
    - De-sludging latrines
    - Participatory Hygiene and Sanitation Transformation (PHAST) for community sanitation and hygiene promotion

# CURRENT STATUS OF MALAWI NCP (3/3)

- WASH sector (cont'd)
  - **Access to safe water**
    - Drilling and maintenance of boreholes
    - Connecting the households to the piped water
    - Pot-to-pot routine chlorination in cholera hotspots
    - Water testing
      - At the water source (boreholes, shallow wells, communal taps, ...)
      - Microbiological testing, chlorine testing (in cholera hotspots)
  - **Hygiene**
    - Routine soap distribution to health facilities (HF) and schools
    - Regular community sensitization interventions
    - Regular food inspection in markets, restaurants, HF

# CHALLENGES FACED

## ▪ Sanitation

- **Inadequate sanitary infrastructures** in schools and public places (markets) (latrines, hand washing facilities) due to inadequate resources
- Numerous **basic latrines** prone to collapse during rainy season
- **Low ODF coverage** and ODF status difficult to **sustain**

## ▪ Hygiene

- **Sustainability of soap distribution** due to inadequate resources

## ▪ Access to safe water

- Some areas still don't have access to **safe** water
  - No **improved source of water** available
  - Water **contaminated**
  - **Salty** water



# IN COUNTRY SUPPORT REQUIREMENTS (1/2)

Challenge	What is being done?	What is needed?
<b>Inadequate sanitary infrastructures in schools and public places</b>	<ul style="list-style-type: none"> <li>- Sanitary facilities constructed in schools by Government, DC, partners</li> <li>- Hand washing buckets distribution with partners support in some districts</li> </ul>	Resources for construction of sanitary facilities in public places
<b>Quality of latrines</b>	Promoting constructions of improved latrines through sanitation marketing towards communities	Resources to engage more local entrepreneurs
<ul style="list-style-type: none"> <li>- <b>Low ODF coverage</b></li> <li>- <b>ODF sustainability</b></li> </ul>	<p>CLTS &amp; SLTS approaches initiated in all the districts by DC</p> <p>Continuous community sensitization through HSAs</p>	More resources to cover all the districts and the whole district with that approach
<b>Sustainability of soap distribution</b>	<ul style="list-style-type: none"> <li>- Soap supply to health facilities through routine commodities budget by DHO</li> <li>- Soap distribution to schools by partners</li> </ul>	Resources to maintain soap distribution to schools

# IN COUNTRY SUPPORT REQUIREMENTS (2/2)

Challenge	What is being done?	What is needed?
<p><b>Universal access to safe water</b></p> <ul style="list-style-type: none"> <li>- No improved source of water available in some areas</li> <li>- Water contaminated</li> <li>- Salty water</li> </ul>	<ul style="list-style-type: none"> <li>- Drilling or maintaining boreholes by Government and partners</li> <li>- Routine pot-to-pot chlorination at household level in cholera hotspots by districts and partners</li> <li>- Regular water quality monitoring in cholera hotspots by district with partners support</li> <li>- Advocating for use of water filters in households by partners</li> </ul>	<ul style="list-style-type: none"> <li>- More resources to increase the coverage</li> <li>- Resources to increase the water chlorination to every household across the country at required intervals</li> <li>- Additional water quality testing kits to be used across the country</li> <li>- Free Residue Chlorine testing kits</li> <li>- Resources to distribute the water filters to each households in concerned areas</li> </ul>

# Thank you

Together we can  
**#endcholera**



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