

**Republic of The Sudan
Federal Ministry Of Health
Directorate General Of PHC
Expended Program on Immunization**



Sudan Experience On Oral Cholera Vaccine (OCV) Campaign in Blue Nile & Sennar States, 2019

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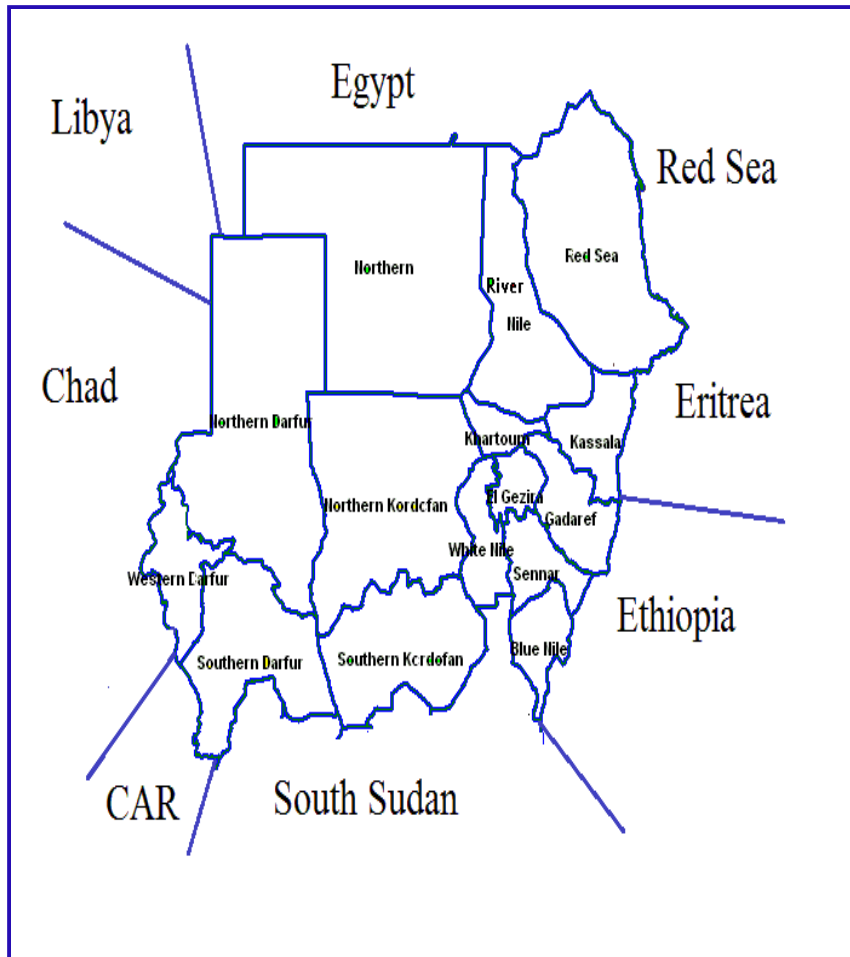
**ICG OCV Meeting,
02-05 December 2019, WHO HQ, Geneva, Switzerland**



Out lines

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Sudan Map and Profile, 2019

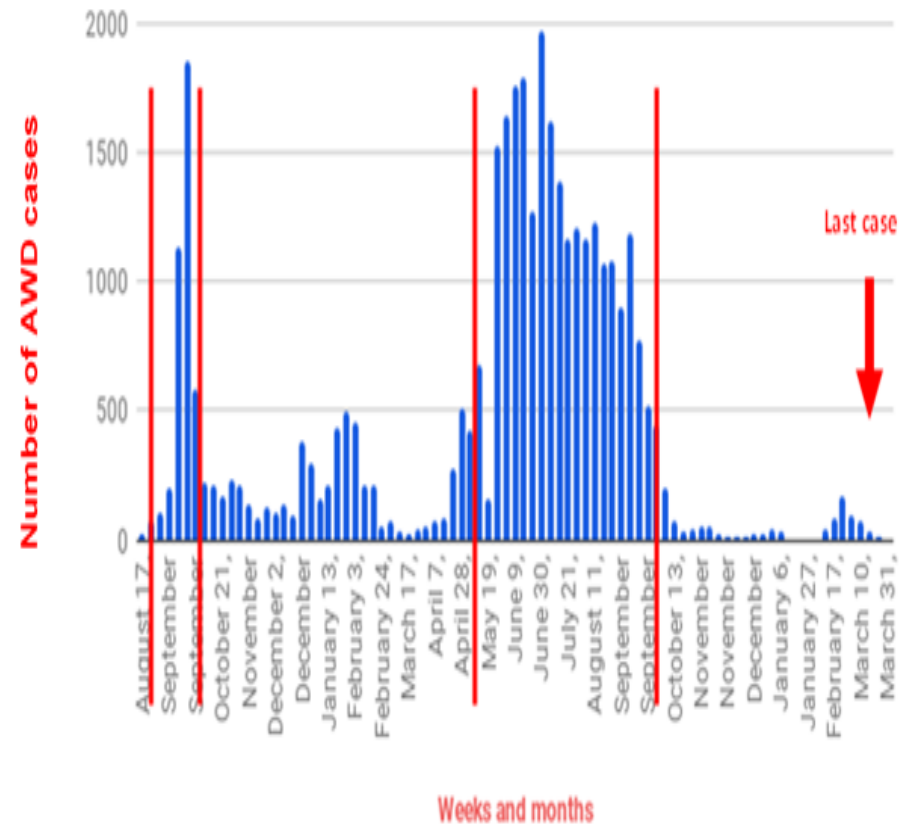


- **Total Pop. 2019: 47,938,040**
- **Children < 1 year : 1,685,788**
- **Children < 5 years: 7,570,897**
- **Children < 15 years: 20,052,300**
- **States : 18**
- **Localities: 189**
- **In accessible Localities: 3**

Background.....1

- Cholera is endemic in Sudan and the country has experienced repeated outbreaks of cholera / Acute Watery Diarrhea (AWD) during last five decades.
- Since 1966, 16 major cholera/AWD outbreaks have been documented, mostly with limited spread (1-3 states).
- Outbreaks in 2006 and 2016-18 were exceptions with spread to 15 States (2006) and nationwide in 2016.

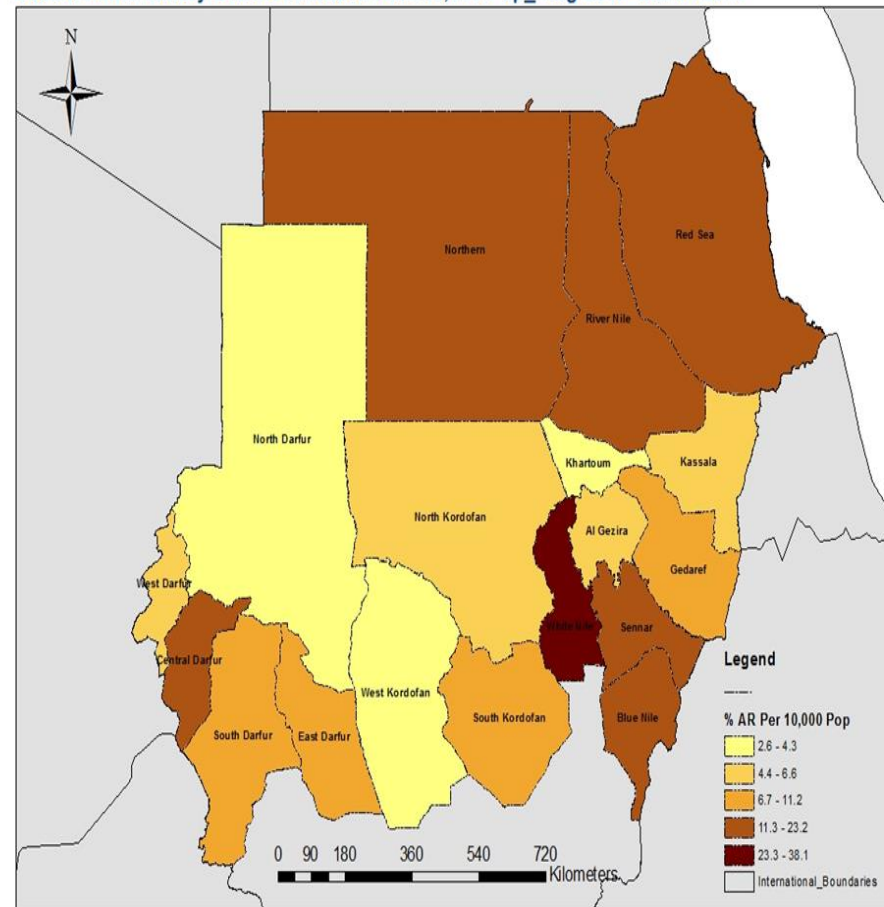
AWD cases in Sudan from August 2016 to March 2018



Background.....2

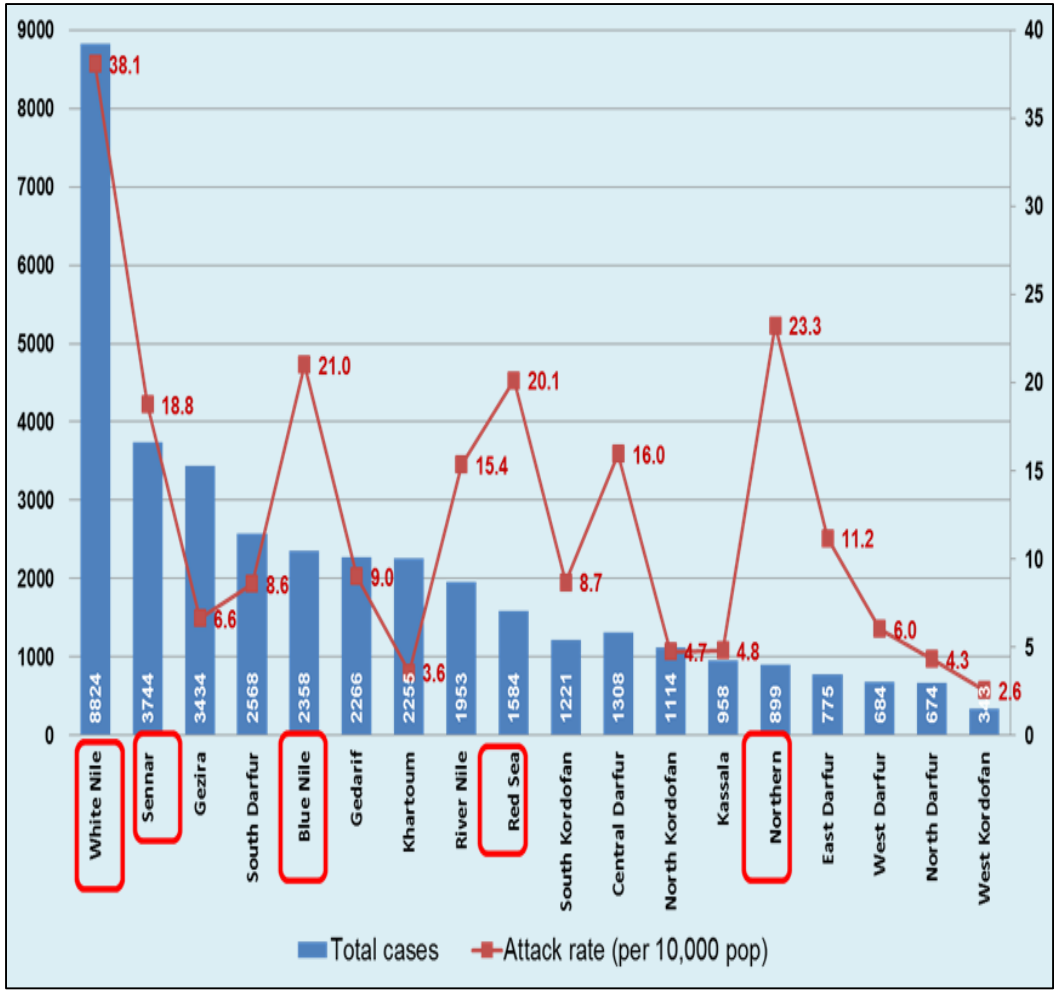
- Historically, cholera outbreaks start along major rivers in the dry season, while in other areas the outbreaks have occurred during the rainy season.
- The last confirmed outbreak of AWD occurred was in 2016-2018 that started in Kassala and Blue Nile States in August 2016 (week 33), spreading to all 18 States of Sudan within 12 months.

Sudan: Acute Watery Diarrhoea Attack Rate/10,000 Pop_ Aug 2016- March 2018



- A total of 36,962 AWD cases including 823 deaths (CFR: 2.2%) were reported by the FMoH in 2018.
- Localities in Central Darfur state continued reporting intermittent cases till the end of March 2018.
- On 6th May 2018, the Federal Ministry of Health of Sudan officially declared the interruption of AWD transmission in Sudan.
- Additional cases were reported through the WCO following the declaration

Total cases: 36,962 (823 deaths)
CFR: 2.23%



Background, *Outbreak of cholera in 2019.....1*

- On **2nd September** 2019, Blue Nile State Ministry of Health (SMOH) reported 5 suspected cases of cholera from El Roseries hospital
- The index case was reported from Ganees Shareg area of El Rosaires locality with date of symptom onset on **28th August (WK35)**
- **Six stool** specimens were collected from patients and sent to the National Public Health Laboratory (NPHL), for testing of which, **4 came positive** for *Vibrio Cholerae* O1 Ogawa
- Rapid spread took place to other areas; by **3rd week of September**, **five** out of **seven** localities in Blue Nile (BN) state reported **94** cases of cholera with 6 deaths

Background, *Outbreak of cholera in 2019...2*

Public declaration of cholera outbreak

- On 8 September 2019:
 - **Sudan's Federal Minister of Health** (FMoH) notified WHO of the occurrence of a cholera outbreak in Blue Nile State;
 - on the same day, he also made a public announcement and **officially declared an outbreak of cholera in Sudan.**

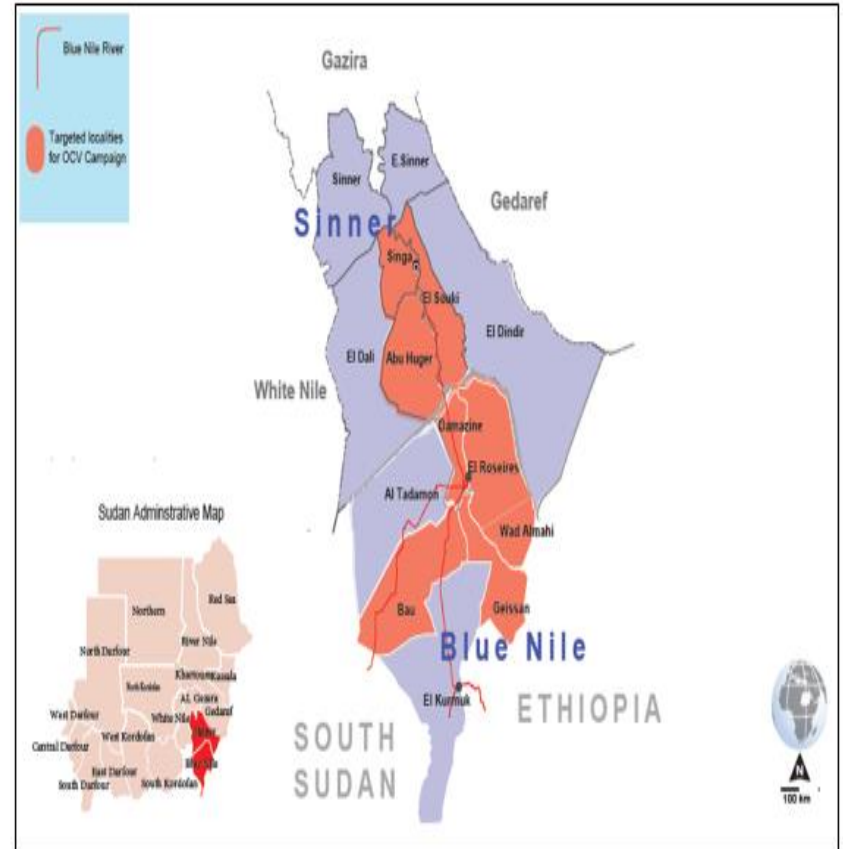
Cholera cases from Sinner state

- By **second week of September**, the outbreak spread to the neighboring state Sinner.
- first case reported on **12th September** from Abu Hugar locality (date of onset on 9th September 2019).
- By **17th September** , outbreak spread to two more new localities from Sinner.
- 25 suspected cases of cholera from its three localities were reported.

Background, *Decision of OCV campaign 2019*

- The FMoH of Sudan, with support from WHO, UNICEF, MSF and other health partners, submitted a proposal to ICG on 19th Sep 2019.
- Within three days feedback from ICG received, revised, then proposal had been approved, within two weeks Sudan received the vaccine and the budget.
- On 11 of October the campaign officially launched by H/E minister of health and higher governmental officials and partners
- First round was conducted during the period: 12 – 16 October and second round during the period: 17- 21 Nov 2019

Map Showing Targeted Localities for OCV Campaign, 2019



OCV Campaign Objectives

General Objective

To support in control of cholera outbreak in Blue Nile and Sennar states through vaccination campaign using Oral Cholera Vaccine (OCV)

Specific Objectives

- To vaccinate **1,648,659** targeted persons aged one year and above including the pregnant women with 2 doses of OCV in the targeted localities
- To use the campaign opportunity to strengthen the community awareness regarding cholera (symptoms, transmission, personal hygiene, prevention, importance of care seeking and treatment in addition to home treatment of dehydration)

OCV Target Population

Name of geographical location/districts/refugee camp	Total population	Target population	Number of vaccine doses (population in target age group x 2 doses)
Elrosieris (Blue Nile)	235,349	228,053	456106
Damazin (Blue Nile)	322,503	312,505	625011
Wad Elmahi (Blue Nile)	150,071	145,419	290838
Geissan (Blue Nile)	125,572	121,679	243359
Bau (Blue Nile)	90,635	87,825	175651
Abu Hugar (Sinner)	177,511	172,008	344016
Elsoki (Sinner)	377,580	365,875	731750
Singa (Sinner)	222,183	215,295	430591
Total	1,701,404	1,648,659	3,297,322

Campaign Strategies

- **Service delivery through fixed, outreach and mobile for the hard to reach communities.**
- Special plans for the in-accessible areas
- **Ensure immunization safety and waste management**
- Advocacy, Social mobilization and communication for the campaign
- **Adequate Vaccine supply and vaccine management**
- Strong supportive supervision and monitoring of the campaign activities
- **Ensure data quality and data accuracy**
- Monitoring AEFI
- **Partnership and inter-sectoral coordination**

OCV Service Delivery Strategies



251 Fix Sites



258 Temporary Sites



239 Mobile teams

Main Pre campaign Activities

- Development and submission of OCV campaign proposal to ICG
- Developed and sent micro planning guidelines to the states
- Revision and approval of the states micro plans
- cascade trainings were conducted
- Printing and distribution of campaign materials (register forms, supervision check list , vaccination cards and messages)
- Awareness campaign was started
- Receiving of vaccine and distribution of campaign supplies
- Training of national supervisors
- Formulation of operation rooms at national and states
- **Launching of campaign at state levels:**
 - B.Nile in Rosaries locality (Ganeisse village)
 - Sennar in Abu Hujar city

Intra campaign activities

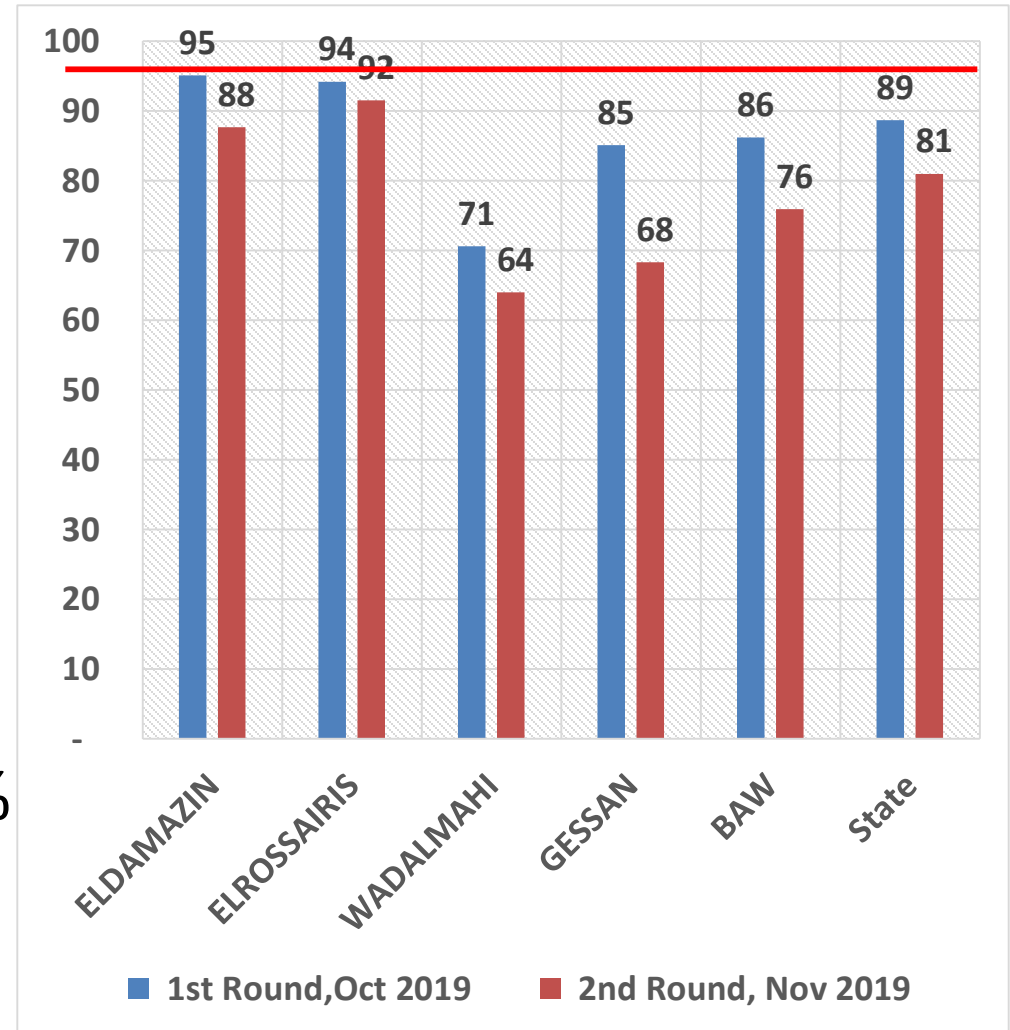
- Implementation of campaign
- Monitor of the campaign by operation rooms at federal and states levels
- Monitoring of the campaign by Supervisors at all levels
- Community
- Proper Waste Management
- Monitoring of AEFI

Post campaign activities

- Evaluation by Independent monitors
- Analysis of reported coverage
- Analysis of geographical coverage
- Prepare the technical and financial report
- Evaluation by coverage survey

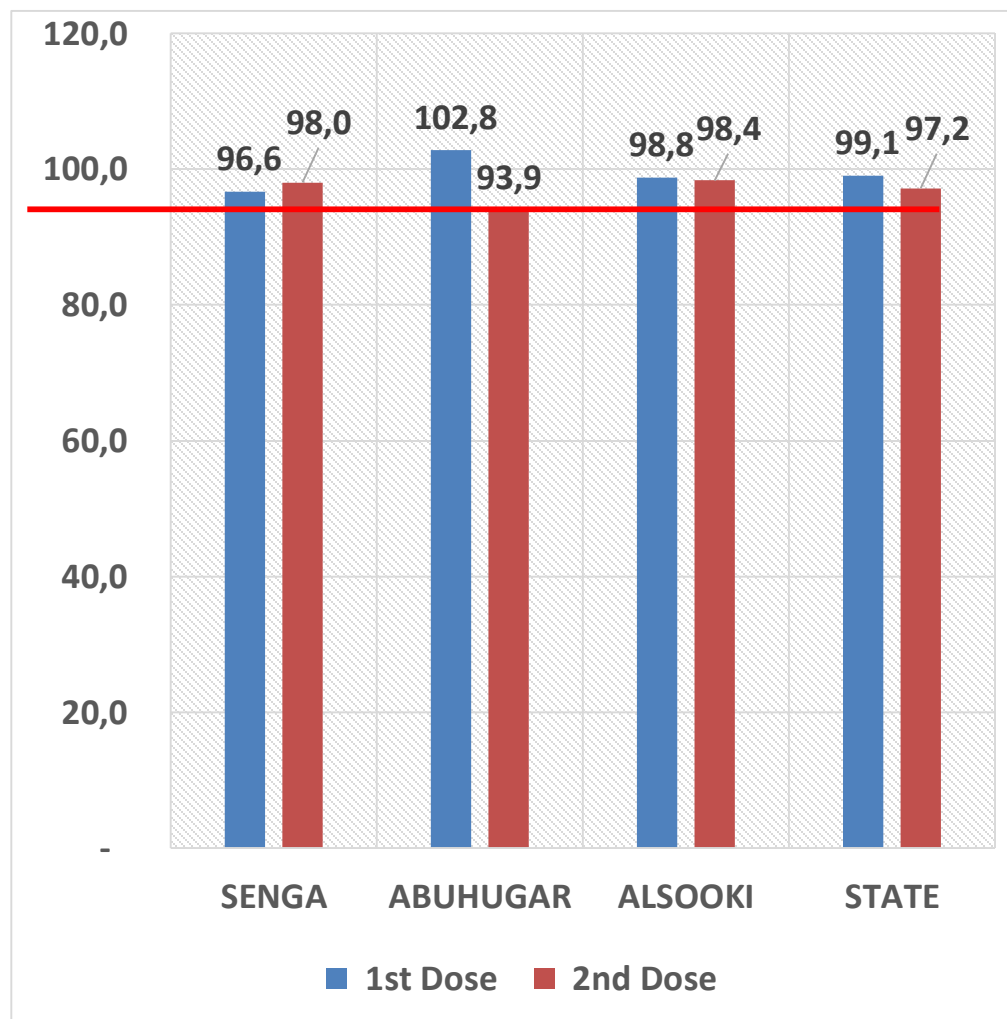
Blue Nile State, Reported OCV Coverage of First and Second Round by locality, 2019

- Only Damazine achieved 95% during the 1st round due to several constraints; accessibility due to the heavy rain was the major one
- In the 2nd round, only Rosairis achieved >90% due to refusals mainly among women

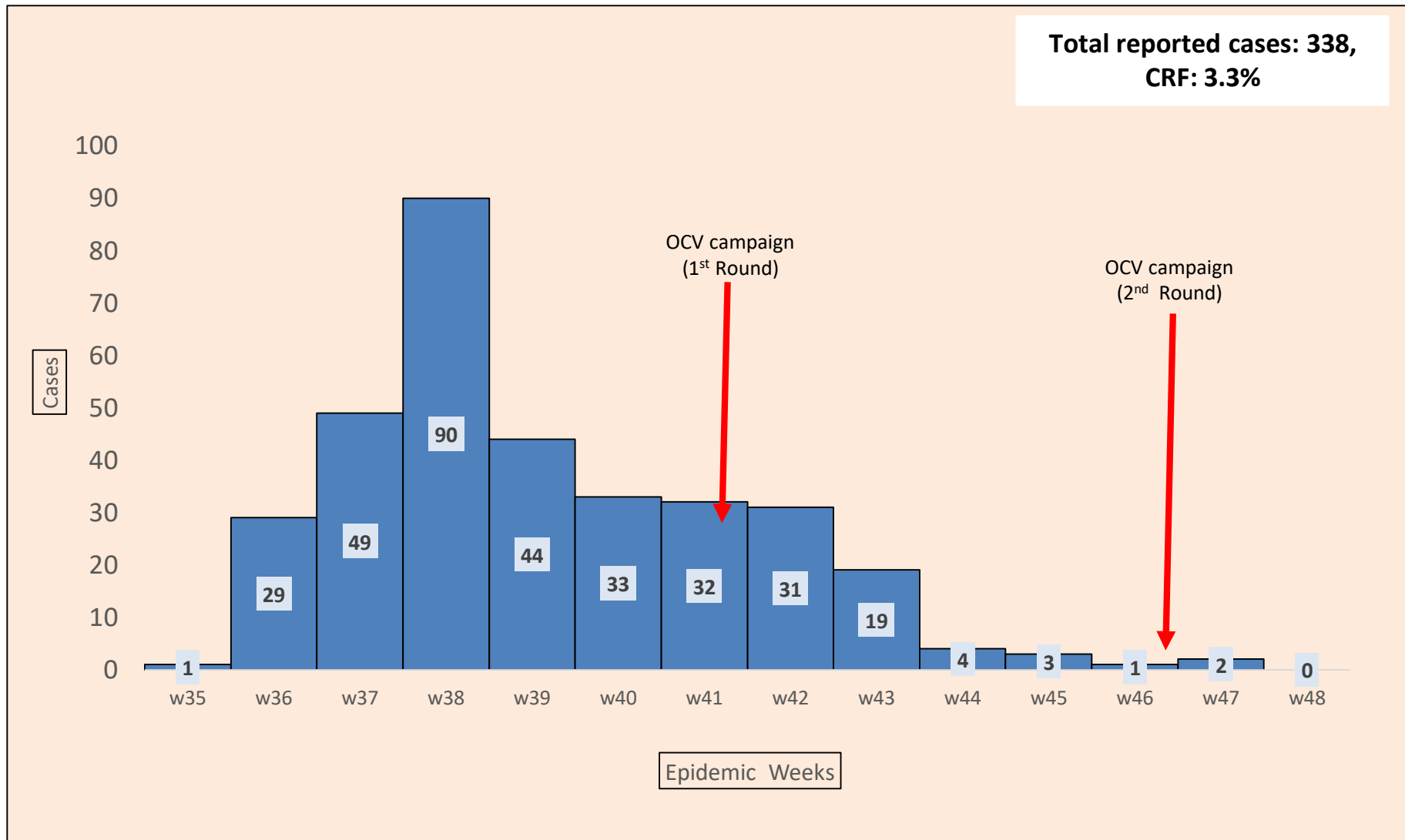


Sennar State, Reported OCV Coverage of First and Second Round, 2019

- The state achieved >95% during the 1st and second rounds.
- In the 2nd round, only Abu Hujar achieved < 95% due to refusals mainly among women; most of them have been retrieved during the campaign

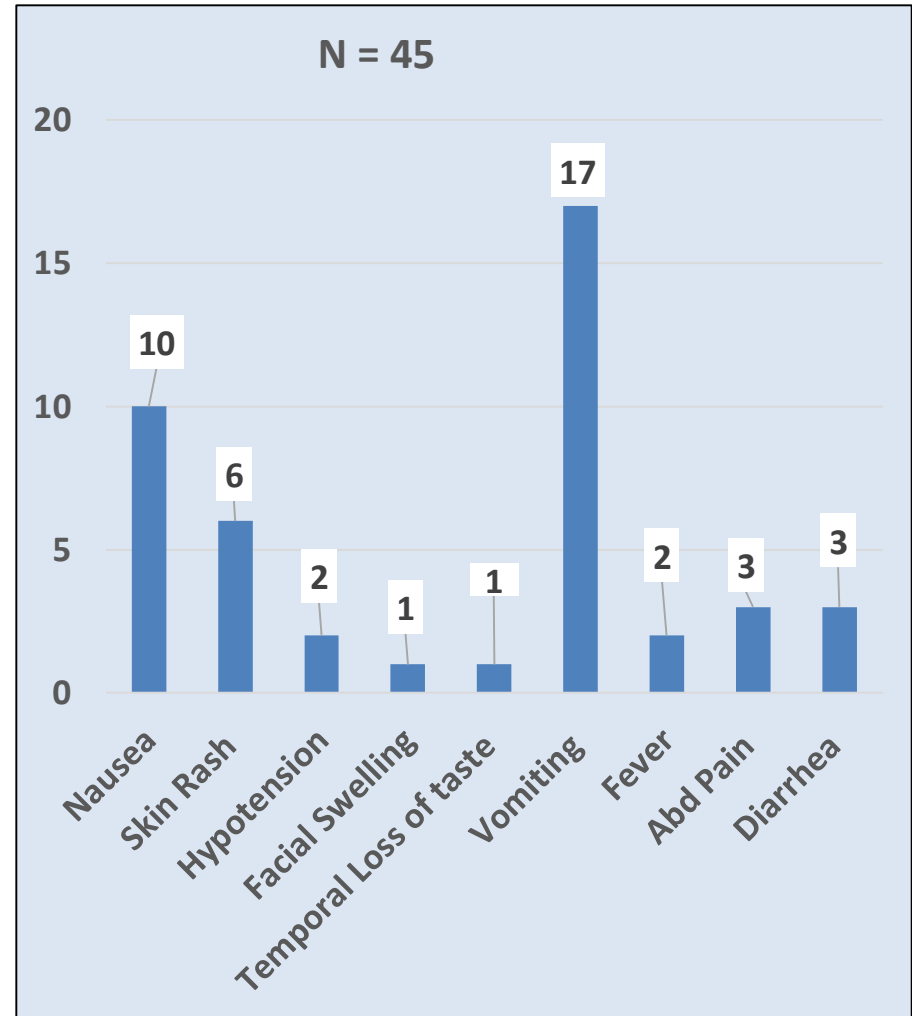


Sudan, Reported Cholera cases by Epidemic Weeks (W35-W48, 2019)



Distribution of Reported AEFI by type of reaction OCV campaign BNI& SEN States October 2019

- AEFIs were timely reported and properly managed during both rounds in the tow states
- A total of (35) AEFI cases have been report during the two rounds of the campaign in both states; 19 in BN and 16 in Sennar and the types of reaction reported were 45.
- The main adverse events were mild and mostly due to gastrointestinal symptoms (i.e. vomiting , nausea, diarrhea, etc.)
- Those who reported having experienced an AEFI, were led to seek further medical consultation.



Positive Points..... (1)

- High political commitments of Federal and State Governments
- Strong support from in country partners in outbreak response in general and campaign planning and monitoring at national and state levels
- Acceptance of the proposal by the ICG within very short time
- Swift response of the international UN organization and national and international NGOs in supporting the campaign technically and financially.
- Support of Ministry of Defense in **availing Helicopters** to the inaccessible areas due to the heavy rain
- Effective Daily operation room meetings at all levels (Federal, states and localities)
- Effective monitoring by supervisors (Federal, WHO, UNICEF, MSF and States)

Positive Points..... (2)

- Strong participation of resistance committees in the implementation of the campaign as vaccinators, monitors and community mobilizers.
- High community acceptance to the OCV
- Good access to most of the targeted areas despite the rainy season
- Proper follow up of AEFI and no severe cases reported
- Proper waste management
- Independent monitoring by WHO at locality and administrative Unit levels which was very effective in awareness raising, geographical coverage and campaign quality

Challenges/Constraints

- Movement of some populations of 3 localities of B. Nile state namely: Wad AlMahi, Bau and Geisan for harvest in Eltadan locality during the campaign days.
- Community culture in some areas where the women are not allowed to go out of their homes to the vaccination sites (Rosairis and Damazine localities)
- Retention of the vaccination cards during the second round

Lessons learnt

- Transparency and high commitment of the Minister of Health led to immediate technical and financial support of the international community
- The team spirit of all stake holders (government and partners) **enabled the country to prepare properly for campaign implementation in a very short time**
- The support of military forces facilitate reaching the difficult and hard to reach areas

Conclusion

- The transparency and high commitment of the Minister of health was the corner stone of the campaign success.
- The technical and financial support of **partners and** international community were behind the high coverage achieved.
- The campaign implementation as outbreak response was done in optimal time .
- Participation of all related sectors in the ministry of health and close and intensive Monitoring and supervision (**government and partners**) played an important role in minimizing the problems during the campaign and facilitated proper and smooth implementation of both rounds.
- The overall campaign quality indicators were above or near the bench mark in both states during both rounds.

Recommendations

- Advocating for more supplies (OCV) for prevention of outbreaks rather than outbreak containment response
- Enhance surveillance to improve detection and surveillance at country level (hotspot level) to guide all cholera interventions including OCV campaign

Some Photos of Campaign Activities



Federal Minister of Health of Sudan Dr Akram Al Toum inaugurates the opening of the 1st round of OCV campaign in Abu Huhjar Locality of Sennar State_11 Oct 2019



WHO Representative, Sudan CO, Dr Na'eima AlGasseer Gave OCV to a Child during the launching of the OCV campaign in Abu Huhjar Locality of Sennar State_11 Oct 2019



The National EPI Manger inaugurates the opening of the 1st round of OCV campaign in Elrosiaris Locality of BNI State_11 Oct 2019



Blue Nile Wali inaugurates the opening of the 1st round of OCV campaign in Elrosiaris Locality of BNI State_11 Oct 2019



ICG Rep representative Dr Malika inaugurates the opening of the 1st round of OCV campaign in Elrosiaris Locality of BNI State_11 Oct 2019



UNICEF Head of Health Section (CO) Dr Sajja Abdellah inaugurates the opening of the 1st round of OCV campaign in Sinja Locality of Sinnar State_11 Oct 2019



Dr Sawsan Eltahir MCH Director, DR Seham Abd Jaber Federal HP Manger and DR Awad Omer the Federal EPI manager Participating in BNI state campaign operation room



The Federal supervisor checking mobile team covering nomadic population in Abu shainaina /Geisan locality /BNI state

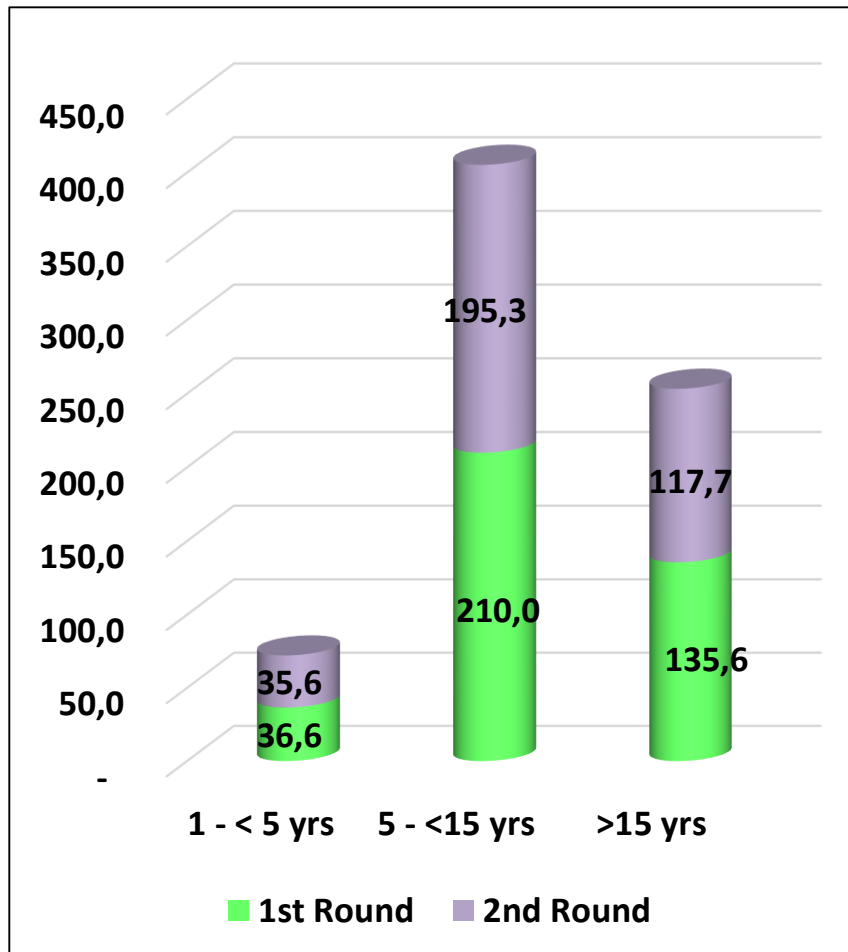
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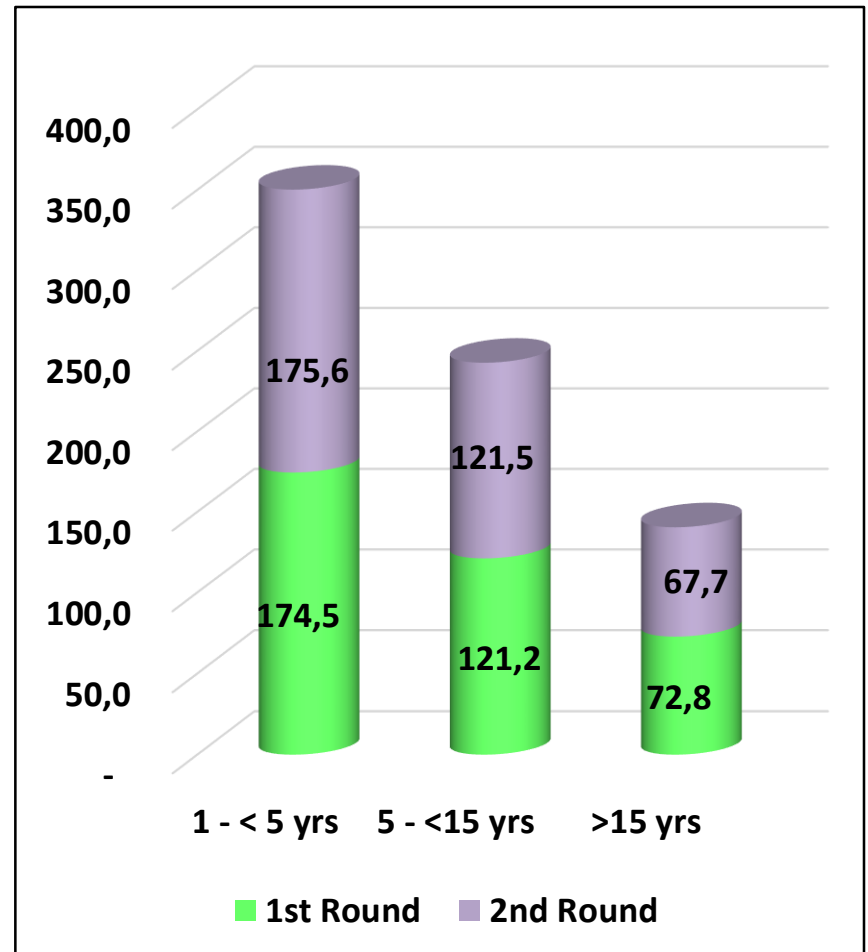
BACK UP SLIDES

Blue Nile and Sennar States, Reported Coverage by Age Groups, 2019

Blue Nile State

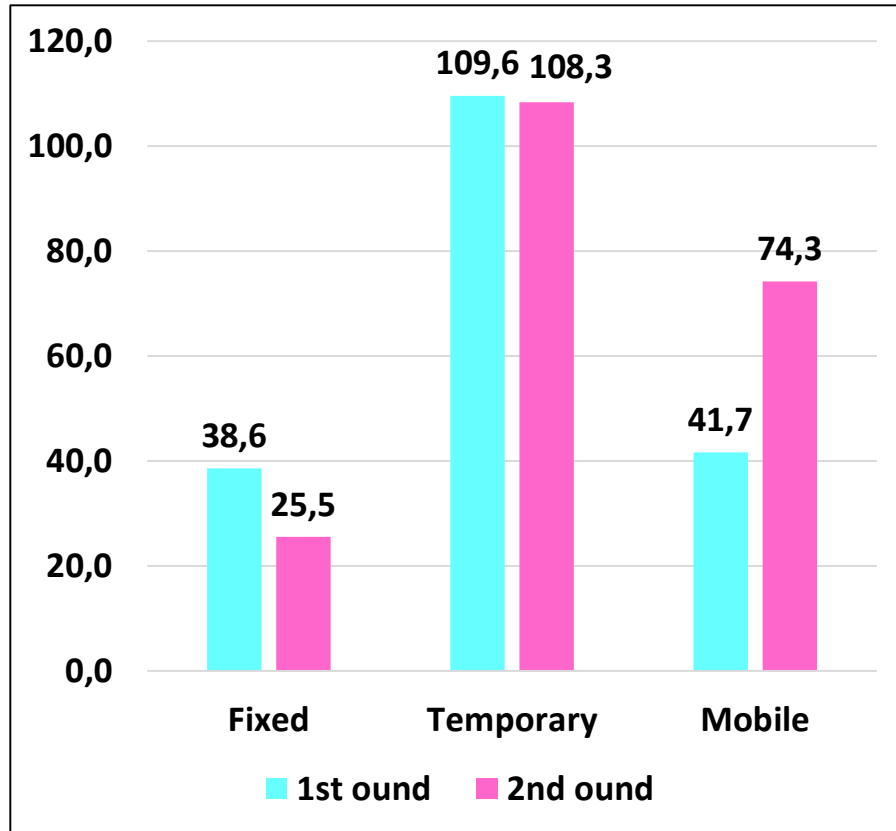


Sennar State



B. Nile and Sennar, Campaign Coverage of the 1st & 2nd Rounds by Strategies, Oct – Nov 2019

Blue Nile



Sennar

