



# **The Government of Malawi Ministry of Health**

**GTFCC WG 2019**

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# Outline

- Introduction.
- History of cholera in Malawi
- Oral Cholera Vaccine campaigns conducted
- Expected support from GTFCC on OCV in Malawi
- Interventions taken
- Interventions taken per Hotspot
- Challenges
- Way forward



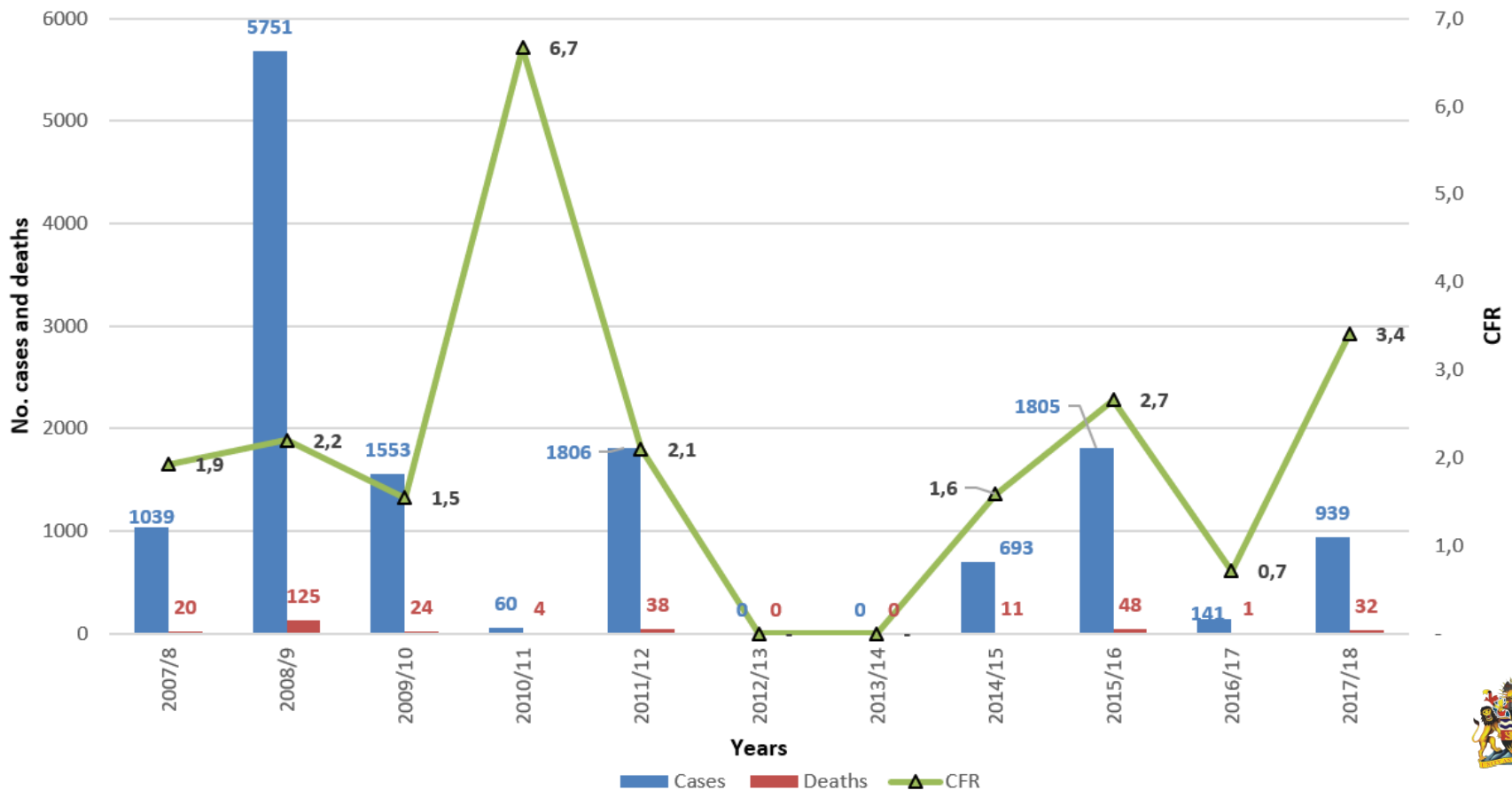
# Introduction

- Landlocked country in southeast Africa
- Bordered by Tanzania, Mozambique and Zambia (free movement of people )
- 28 districts
- 18.6 million people – 80% rural → economy predominately **agricultural**
- 20% of the country area is covered by water → **fishing** is a major activity
- Access to improved source of drinking water: 87% of households (98% in urban, 85% in rural) [*WHO/unicef JMP 2017 & DHS 2015-16*]
- Access to improved toilet facilities: 83% of households [*WHO/unicef JMP 2017 & DHS 2015-16*]



# History of cholera 2007-2018

- Cholera in Malawi since 1973 (7<sup>th</sup> pandemic)
- Cholera season in Malawi: **1<sup>st</sup> Nov. - 30<sup>th</sup> Oct.**



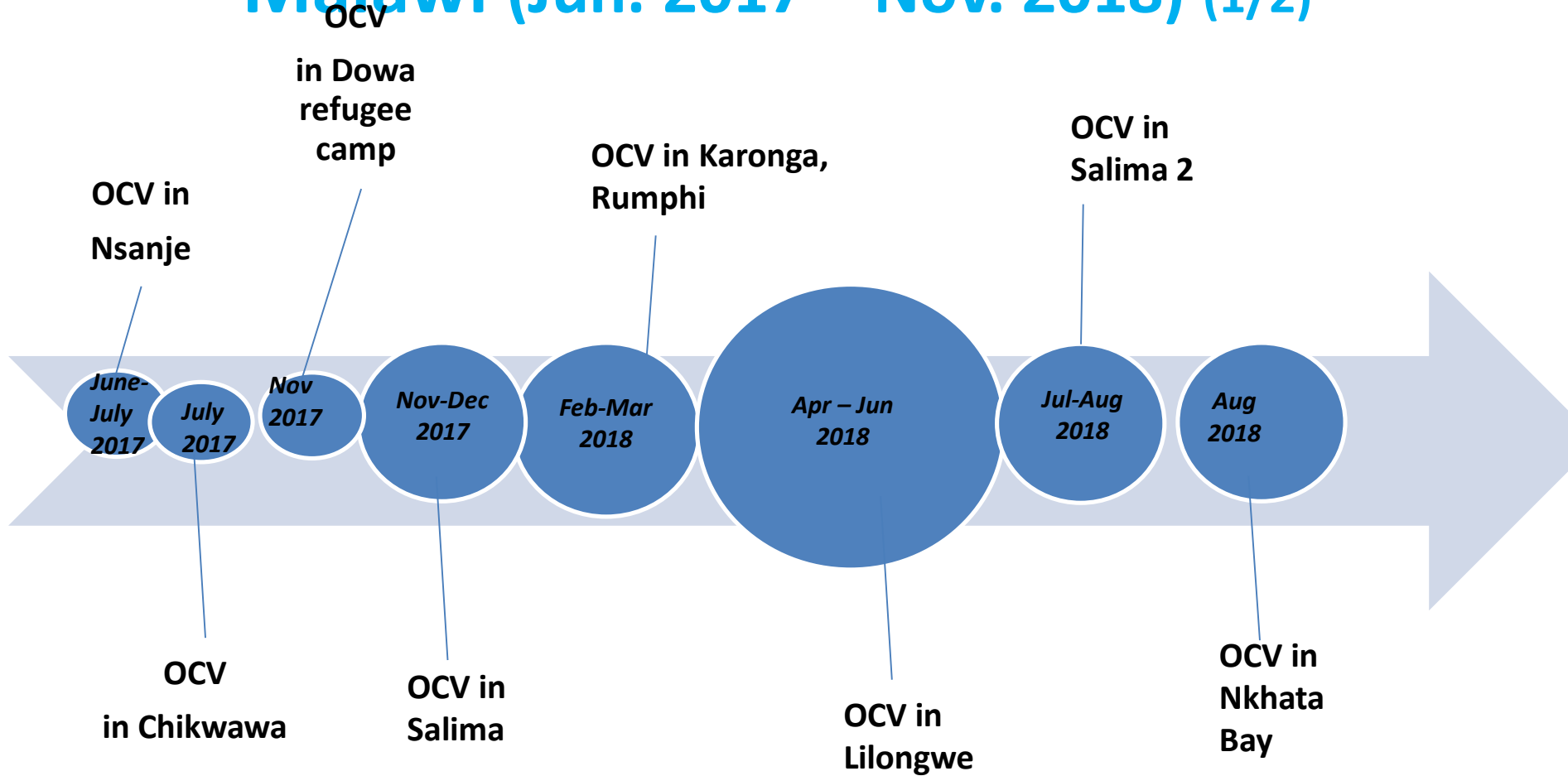
# OCV Campaigns conducted

Since 2015, OCV campaigns were sequentially conducted as follows:

- Nsanje and Chikwawa (2015)
- Zomba, Phalombe and Machinga (2016)
- Chikwawa and Ndamera in Nsanje (June-July 2017),
- Dowa refugee camp (November 2017),
- Salima (November-December 2017),
- Karonga (February-March 2018)
- Lilongwe (April –May 2018) .
- Nkhatabay (August 2018)
- Mangochi (January 2019)



# OCV campaigns conducted so far in Malawi (Jun. 2017 – Nov. 2018) (1/2)



# Expected Support from the GTFCC on OCV

**The OCV doses balance of 660,000 from the already approved doses of 3,232,198 will be used as follows:**

- Nsanje 520,000 doses in June 2019
- Phalombe 140,000 doses in August 2019

**The requested additional OCV doses of 1,328,000 from the approved doses to be used as follows:**

- Zomba 340,000 doses in August 2019
- Machinga 328,000 doses in October 2019

The request on the above support was already submitted and we are just waiting for the arrival of the OCV.



# Interventions taken

- Pot to pot chlorination
- Provision of safe water points
- Hand washing campaigns
- Scaling up of ODF (Open defecation free campaign) in areas where OCV campaigns have been carried out.
  - Community Led Total Sanitation (CLTS)
- Water quality testing
- Strengthening of surveillance





# Interventions done in each hotspot



# Lake Chilwa

- There are nine Traditional Authorities
- Four Traditional Authorities has been declared ODF
- SIX traditional authorities has been triggered to Construct basic pit latrines
- Rehabilitation of water points
- Pot to pot water chlorination
- Water quality testing



# Salima

- 11 Traditional Authorities
- Three already declared ODF
- Four Traditional authorities have been triggered to Construct basic pitlatrines
- Most water point has been rehabilitated



# Nkhata bay

- 13 Traditional Authorities (TA)
- 1 is ODF
- 5 Traditional Authorities were triggered
- Sanitation Marketing in one traditional authority



# Karonga

- 6 Traditional authorities
- None ODF
- All TAs are triggered
- Most bore are being rehabilitated



# Lower Shire (Chikwawa and Nsanje)

## Nsanje

- 9 TAs for Nsanje
- 2 ODF
- One TA triggered

## Chikwawa

- 11 TAs
- 6 TAs declared ODF
- 5 TAs already triggered
- 4 ODF TAs lost due floods.



# Challenges

- Inadequate resources (human, materials, financial) by WASH partners
- Partners and Government are not coming up with the lasting solution for floating homes population on Lake Chilwa due to lack of financial resources.
- Mobile population (fishermen and fish vendors) in areas of Lake Chilwa and along Lake Malawi.
- Flooding leading to collapse of pitlatrines in districts of Nsanje and Chikwawa, Lake Chilwa districts and Lake Malawi districts.



## Cont,

- Negative beliefs (cholera is due to witchcraft).
- Resistance to behavior change (continued use of water from unprotected sources more especially Lake Chilwa fishermen)
- Some hot spot districts has no/ serious WASH partners (Karonga and Nsanje)





# Way Forward

- Intensify IEC on hygiene and sanitation
- Strengthen collaboration and coordination
- Resource mobilization for WASH.
- ODF to cover each village/TA/Districts which are cholera hot spots
- Provision of safe water points in all cholera hot spots
- Capacity building of community water point committees for sustainability
- Capacity building of extension workers who facilitate WASH activities on the community
- Strengthen Surveillance (IDSR)



Thank you

Zikomo

Merci

Asante