WHO EPI-WIN Series
Community Protection in Cholera: Risk Communication and Community Engagement
The Role of Community data in the 2024 Zambia Cholera response and application

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Context: Zambia's Cholera outbreaks over the past years

- Cholera has been endemic in Zambia since 1977

- 2024 saw one of the worst Cholera outbreak with over 23,000 cases.

- In 2024, nearly half of Zambia's districts(54 out of 116 districts) were mapped as Priority Areas for Multi-Sectoral Cholera Interventions(PAMIs)

- 5 million people at risk of cholera in PAMI districts

- Since then, the country has had 4 outbreaks(Muchinga, Copperbelt, Central and currently Northern provinces of Zambia.

- Community data through RCCE activities such as RQAs and CFMs continue to play a critical role in Cholera emergency response.
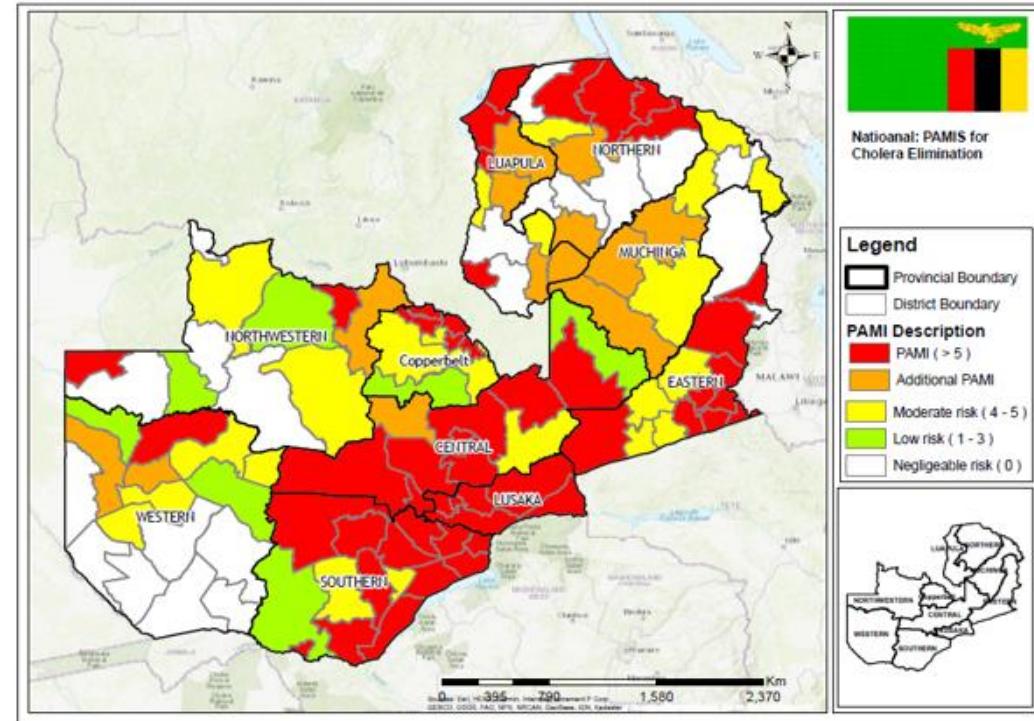

Figure 11: Districts with Priority Areas for Multi-Sectoral Interventions

Community data collected during 2023/2024 Zambia Cholera outbreak

Rapid Qualitative Assessments:

- **4 rounds of Cholera RQAs** were conducted across 3 provinces of Zambia(Lusaka-epicenter, Southern, Central and Copperbelt provinces), with over <u>200 community members engaged</u>.

- RQAs led by multi-sectoral team comprising MOH, ZNPHI, UNICEF, Collective Service, UKHealth Security and the University of Zambia-School of Public Health.

- RQA action tracker developed to track actions done by IMS pillars

U-report

- Two cholera-specific online **U-Report polls** were run by UNICEF

- **Regular online social listening and media monitoring**

Types of Community data collected during 2023/2024 Zambia Cholera outbreak

Community feedback

- Gathered through RCCE partners(MOH CBVs and frontline health care, Zambia Red Cross, CBOs, FBOs)

- Gathered through call centres(e.g Childline Zambia, ZNPHI, DMMU)

- Gathered through <u>live radio program discussions</u>

- Interagency Interactive community feedback mechanism dashboard developed

- Total **<u>29,408 feedback collected</u>**(17,051 via RCCE partners and 12,357 via call centres)

*Capacity building of partners and MOH on CFM done across Cholera hotspots and PAMIs

Application of Community Data in the Cholera Response
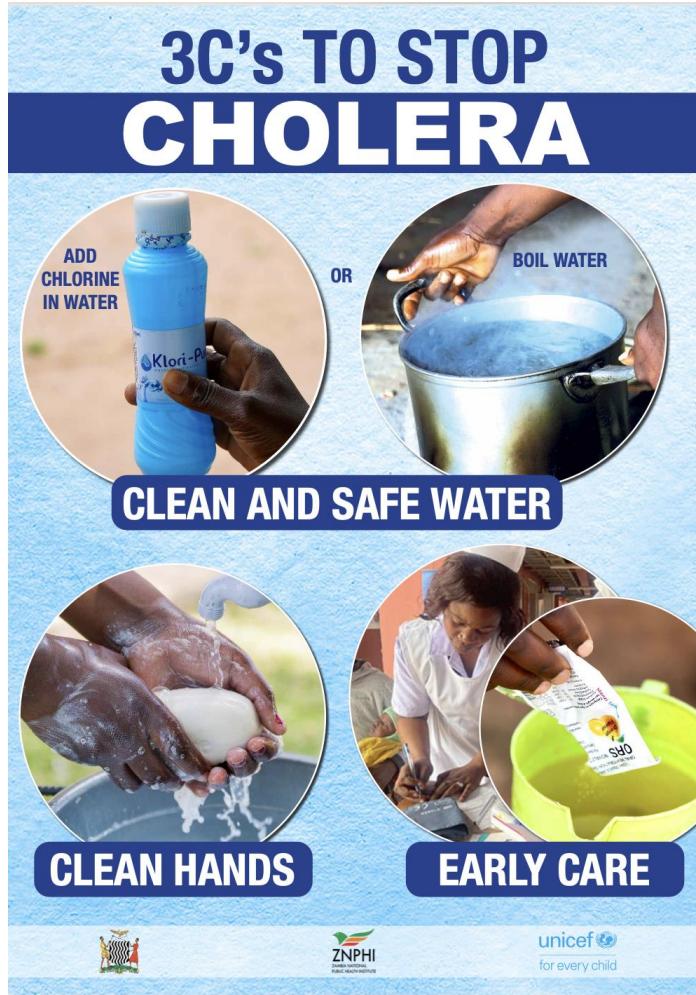
1. Informed tailored risk communication messaging

- 3 Cs messages developed to refocus on top 3 messages to stop cholera.

- Updated IEC materials e.g FQAs, CBV job aids on cholera information

- Developed new materials e.g ORP CBV Job aids, OCV CBV job aids

2. Targeted Engagements for at risk populations

- Conducted targeted sensitizations for men, older people, refugees, people living with disabilities etc.

- Partnered with religious groups and community leaders to tailor and disseminate messages

Application of Community Data in the Cholera Response

3. Informed multisectoral response activities across various pillars

- Expansion of CTCs and ORPs to increase access to health services

- Distribution of chlorine and WASH kits in affected communities

- OCV adjustment on times and venues based on real-time community feedback

- Improved WASH infrastructure e.g emptying pit latrines, burying shallow wells

4. Addressed socio-economic barriers to care

- Provision of transport for cholera patients to and from CTCs

- Informed emergency cash transfers to offset costs preventing access to care

- Distributed ORS kits and discharge kits
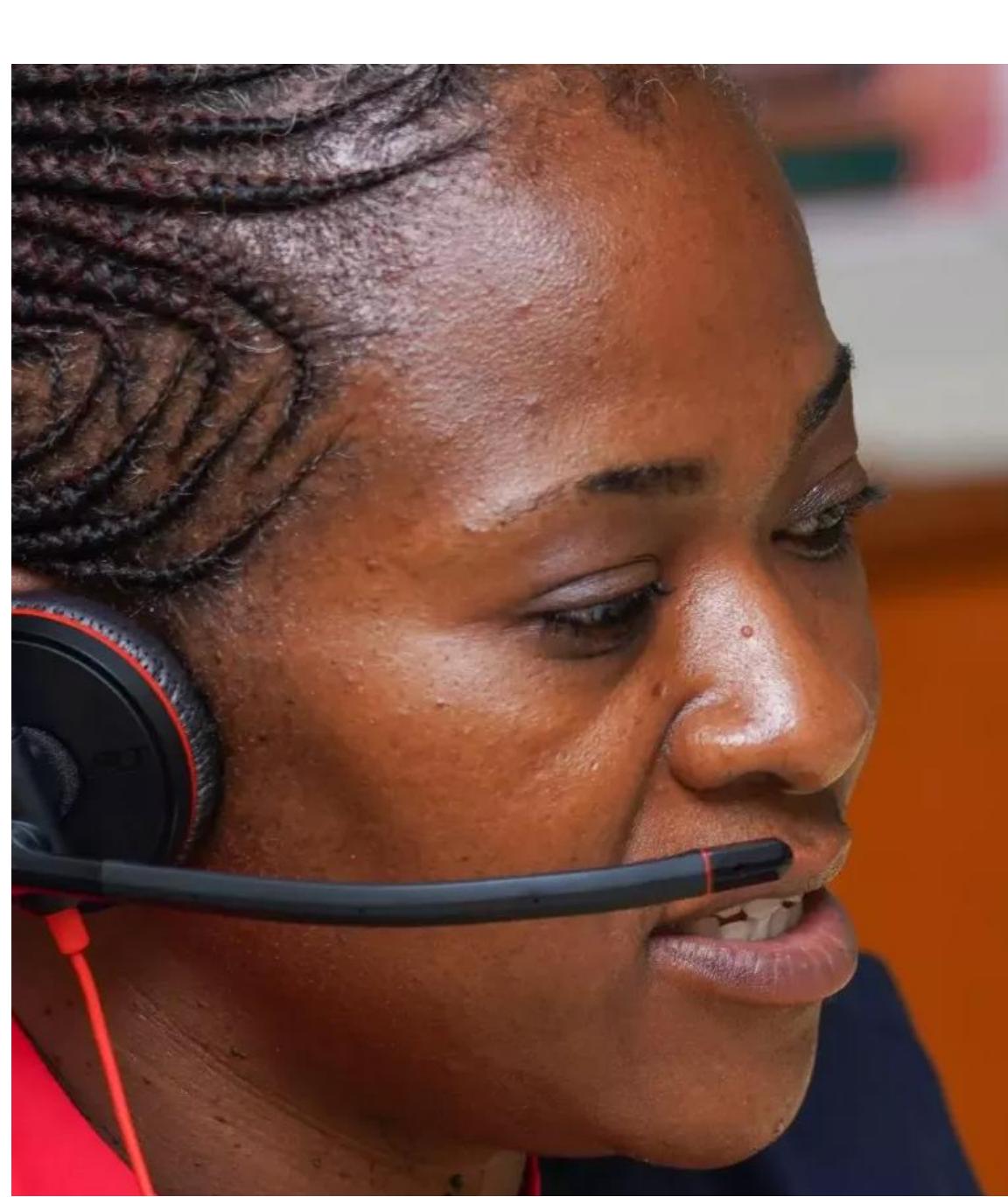
Application of Community Data in the Cholera Response

5. Improved mental health and psychosocial support

- Introduced daily updates to families, patient registers and a feedback mechanism at CTCs

- Trained call centre agents on cholera –related mental health support

- Integrated MHPSS into cholera response, enabling community-based follow ups by CBVs.

6. Informed policy

- Revised burial guidelines to allow limited family participation and identification of the deceased.

- Issued policy directives mandating safe sanitation practices in hotspots(e.g latrines, emptying, wells)

- Revised Public Health Act which included church sensitizations and provision of soaps and WASH facilities in congregant settings.

Example of RCCE impact and outcomes

Temporal Analysis of RCCE Activities and Cholera Outcomes in Zambia (October 2023-September 2024)
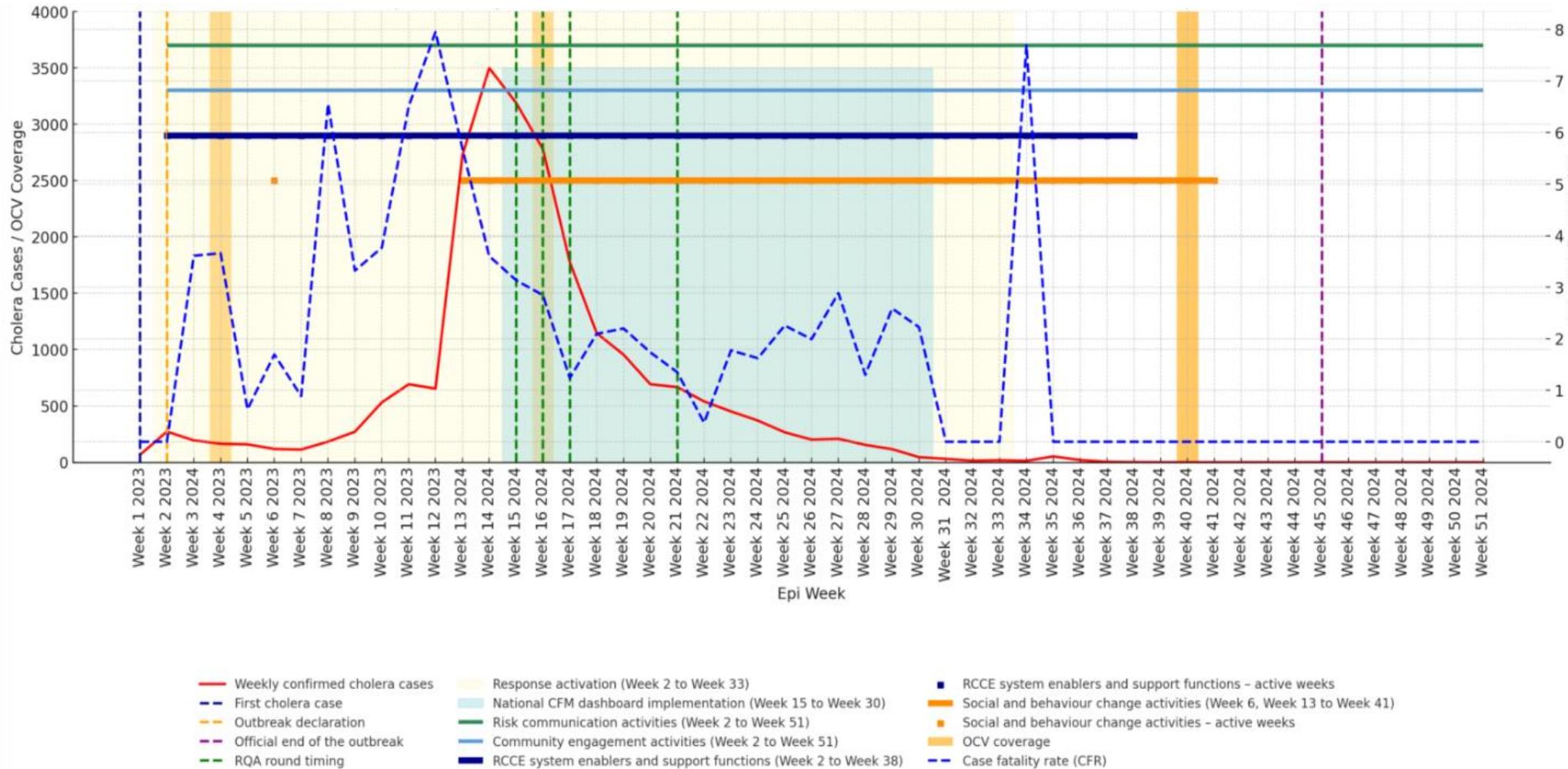
Lessons Learnt and Recommendations

- RQAs provide real time community insights to inform response activities
- Integration of community feedback across various sectors/pillars e.g. nutrition, WASH, Protection
- Development of CFM SOP cardinal as CFM activities are rolled out.
- Integrate of CFM indicators in National Information Management Systems e.g., CHIP
- Strengthen CFM activities in other sectors/clusters e.g., education
- Leveraging other trainings opportunities to conduct CFM trainings
- Having a CFM/RQA tracker useful to monitor actions taken
- Leveraging Live Radio Programs to document community feedback.
- Triangulating Community feedback from media monitoring reports, Call centres, dialogue meetings and RQAs to inform tailored response activities.

Thank You