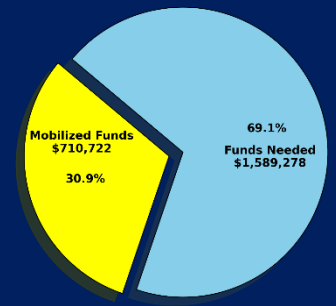




# CHOLERA FLASH UPDATE 5

**REPORTING PERIOD:**  
**17 FEBRUARY 2025**  
**2 MARCH 2025**

**Estimated Funding Needs:**  
**2.3 million USD**

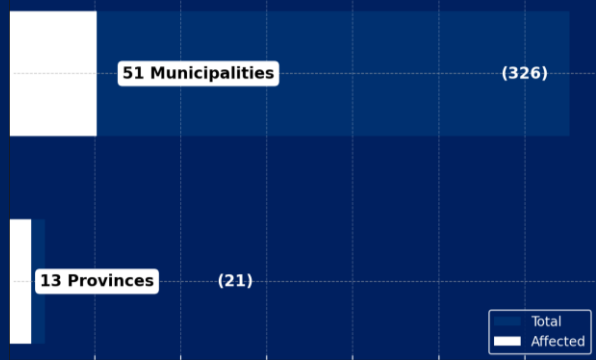


## EPIDEMIOLOGICAL OVERVIEW (AS OF 2 MARCH)

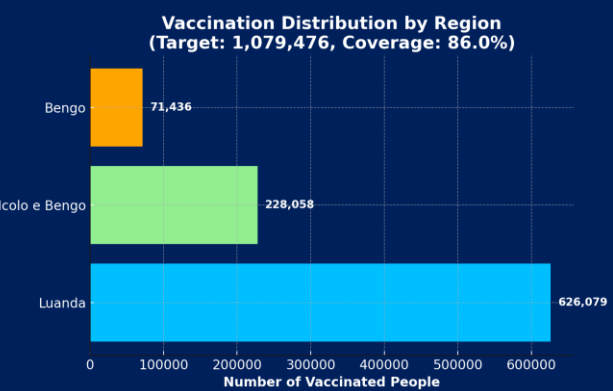
Ministry of Health declared Cholera outbreak on 7 January

**TOTAL OF 5,749 CASES AND 204 DEATHS.** Luanda province is the most affected with 2,963 cases.

### Areas affected in Angola



**86% of target population vaccinated in first Cholera vaccination campaign.** Target population was adjusted



## WHO's contributions during the reporting period

- Leadership & Coordination**
  - 700,495 OCV doses approved by ICG to vaccinate 11 districts in Luanda and Bengo.
  - Macroplanning for the 2<sup>nd</sup> round of OCV Campaign
  - Participated in the interministerial commission meeting.
  - Facilitated Africa CDC's inclusion in the cholera response coordination.
  - Advocacy for Cholera response support during partner's meeting at the British Embassy
- Risk Communication & Community Engagement (RCCE)**
  - Supported a MoH major mission to Luanda for RCCE interventions at community level in new districts reporting cases
- Health Information & Epidemiology**
  - Assisted MoH in producing daily epidemiological bulletins.
- Safe Water & WASH**
  - Trained stakeholders on digital water source mapping.
  - Supported MoH with water sample collection and analysis.
- Resource Mobilization & Partnerships**
  - Facilitated donation of goods by private sector to Ministry of Health.

## EPIDEMIC CURVE

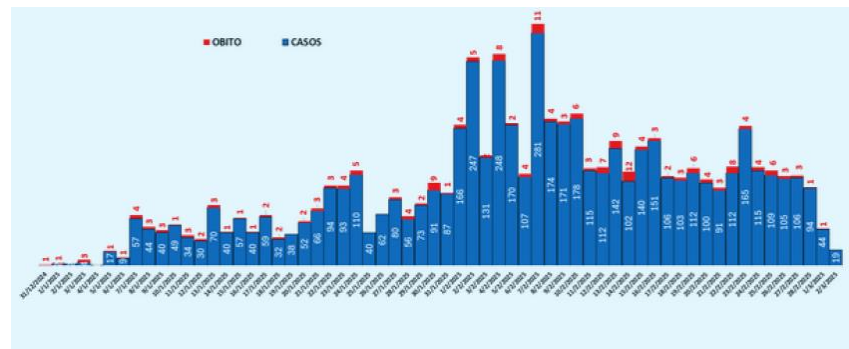


Gráfico 2: Casos e óbitos diários por data do início dos sintomas (31 de Dezembro de 2024 até 2 de Março de 2025)

# PLANNED INTERVENTIONS FROM THE WORLD HEALTH ORGANIZATION THAT REQUIRE SUPPORT

## HEALTH

### 1. Community-Based Integrated Response Interventions

- **Active case finding at the community level:** including detection, notification, and referral of cases.
- **Community Case Management:** Focused on managing cases in the Province of Oral rehydration solution (ORS), including patient referrals to oral rehydration points and Cholera Treatment Centers (CTCs).
- **Community Infection Prevention and Control (IPC):** Emphasis on hand washing and the safe handling of food and water to prevent disease transmission.
- **Safe water:** Identify communal water points for routine testing, provide chlorine tablets to households.

### 2. Support at the Central Level

- **Laboratory Strengthening:** Enhancing laboratory capacity for testing, sample collection, and transportation, alongside improving data systems for collection, analysis, and sharing to inform response actions.
- **Capacity Building for Rapid Response Teams:** Training teams to respond swiftly and effectively to outbreaks and conducting operational research to guide evidence-based decision-making.
- **Water Quality and Environmental Monitoring:** Testing and monitoring water quality to ensure safe drinking water and collaborating with meteorological agencies for accurate disease outbreak forecasting.
- **Evaluation and Continuous Improvement:** Conducting intra-action and after-action reviews to refine response strategies and address emerging needs effectively.
- **Support for Campaigns and Preparedness:** Assisting provinces with readiness and preparedness activities and supporting the cholera vaccination campaign.

## RISK COMMUNICATION AND COMMUNITY ENGAGEMENT

1. **Community-Based Rapid Risk Assessment:** Conduct rapid risk assessments to identify vulnerabilities, engage communities in co-designing cholera prevention solutions, and enhance local preparedness.
2. **Development of Cholera Protocols and Knowledge Management:** Collaborate with universities to develop evidence-based cholera prevention protocols. Focus on risks, nexus, and healthier cities to inform strategies and share lessons learned across stakeholders.
3. **Healthier Cities Initiative:** Support Luanda's "Healthier City" initiative by advocating for improved sanitation, safe water access, and waste management to reduce cholera risks.
4. **Risk Communication and Community Engagement:** Deliver culturally tailored messages to promote behavior change and counter misinformation. Strengthen community networks for sustainable hygiene practices and integrate real-time feedback for adaptive interventions.

## VACCINATION:

1. **Support for Vaccination Campaign:** Preparations of the microplans for 11 districts

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