04 October 2018 – The Ministry of Health of Somalia has announced 30 new cases of cholera and no deaths for week 38 (17 to 23 September) of 2018. Since week 28, there has been a decreasing trend in the number of cholera cases reported. The cumulative total of cases is 6394, including 42 associated deaths (case-fatality rate 0.7%) since the beginning of the current outbreak in December 2017. Of 276 stool samples collected since the beginning of this year and tested in the National Public Health Laboratory in Mogadishu, 80 tested positive for *Vibrio cholerae*, serotype O1 Ogawa.

The cholera outbreak started in December 2017 in Beletweyne along river Shabelle and has spread to Jowhar, Kismayo, Afgoye Merka and Banadir. Over the past five weeks, there has been a decrease in the number of cases reported in Banadir and Lower Jubba, while during week 38 active transmission was reported in Kismayo district of Lower Jubba, and 7 districts of Banadir region (Darkenly, Daynile, Hodan, Madina, Waberi, Hamarjabjab, and Heliwa districts).

During week 38, Banadir accounted for 90% (27) of the newly reported cases. Banadir also has the highest concentration of IDPs living with limited safe water and sanitation. Among the new cases, 44% are children below 5 years old. The oral cholera vaccination campaign that was implemented in 11 high risk districts in 2017 and 2018 across Somalia has greatly contributed to the reduction in the number of new cholera cases compared to the same period in 2017. All cases reported for week 38 had not received vaccination before.

WHO provides leadership and support for activities with the Ministry of Health (MoH) to respond to this outbreak. Coordination meetings were held in the flood-affected districts with MoHs at Federal and State levels including Health Cluster partners for effective collaboration on the outbreak response.

WHO has continued to support clinical care delivery, including building capacity for health care workers. On-the-job trainings on case management were conducted at cholera treatment centers (CTCs) in Kismayo, Farjano, Banadir and Marka. Disease surveillance data was collected through the early warning alert and response network (EWARN) with support from WHO, contributing to early detection of new cases and a prompt response to outbreaks.

WHO worked with WASH cluster partners on chlorination of water sources in cholera-affected areas, including Hnati-wadaaq, Bulo-sheikh, Allenley and Fanole, to ensure safe water in the communities. 1500 hygiene kits were distributed in villages in Kismayo, and hygiene promotion for cholera prevention and control is on-going in Farjano, Allanley, Gulwada, Shaqalaha and Kismayo district.

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