

MINISTERIAL STATEMENT
ON THE
END OF THE 2017/2018 CHOLERA OUTBREAK
BY THE HON. MINISTER OF HEALTH, DR CHILUFYA

Mr Speaker, I wish to thank you for granting me this opportunity to deliver a ministerial statement on the end of the 2017/2018 cholera outbreak in Zambia. The brief background is that on 4th October, 2017, two suspected cases were reported to Chipata Clinic with acute watery diarrhoea. Following laboratory confirmation of samples from the two suspected cases, a cholera outbreak was declared in Lusaka District on 6th October, 2017. Since then, a total of 5,935 cases were recorded from seven of the ten provinces in Zambia, excluding of course Luapula, Northern and Muchinga Provinces.

Mr Speaker, several of the cases recorded in other provinces were linked to cases reported in Lusaka. Lusaka Province alone recorded 5,718 cases from seven districts broken down as follows:

<i>District</i>	<i>Number of cases</i>
Lusaka	5,444
Kafue	87
Chongwe	66
Chilanga	62
Shibuyunji	53
Rufunsa	05
Chirundu	01
<i>Total</i>	5,718

Mr Speaker, the Central Province recorded 123 cases from eight districts, namely:

<i>District</i>	<i>Number of cases</i>
Kabwe	43
Mumbwa	34
Chibombo	16
Serenje	15
Chisamba	6
Mkushi	4
Kapiri Mposhi	4
Itezhi-tezhi	1
<i>Total</i>	123

Mr Speaker, the Southern Province recorded 39 cases from seven districts as follows:

<i>District</i>	<i>Number of cases</i>
Chikankata	22
Mazabuka	7
Kalomo	4
Siavonga	2
Sinazongwe	2
Livingstone	1
Pemba	1
<i>Total</i>	39

Mr Speaker, the Eastern Province recorded 36 cases from five districts, which were:

<i>District</i>	<i>Number of cases</i>
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Lundazi	20
Petauke	10
Katete	3
Sinda	2
Chipata	1
<i>Total</i>	36

Mr Speaker, the Copperbelt Province had thirteen cases from Ndola seven and Kitwe six, while the Western Province recorded four cases from Mongu three and Kaoma one. The North-Western Province had the least number of cases with only two cases reported from Mwinilunga one case and Solwezi one case.

Mr Speaker, with sadness, I report to the House that the outbreak claimed 114 lives across the country, ninety-eight of which were recorded in Lusaka alone, five from Shibuyunji, two from Chilanga, two from Kafue, two from Mumbwa and one each from Chongwe, Kapiri Mposhi, Kabwe, Lundazi and Ndola.

Mr Speaker, it is standard practice to declare a cholera outbreak over when you have had no laboratory cases reported over a two-week period. I am happy to report to the House that the last recorded case from outside Lusaka Province was from Kabwe, on 27th April, 2018 while the last case in Lusaka was recorded on 31st May, 2018, from Mtendere. On this premise, the outbreak was declared over on 15th June, 2018.

Mr Speaker, allow me to recognise the various players whose swift action and unwavering dedication and support over the last nine months ensured that the outbreak was contained in the shortest period of time.

Mr Speaker, allow me to thank and commend His, Excellency the President of the Republic of Zambia, Mr Edgar Chagwa Lungu for ensuring unprecedented political will and leadership

during the outbreak. His Excellency appointed a cross-sectoral task force committee of Cabinet hon. Ministers to mobilise and oversee resources for the outbreak responses which included, K159 million released by the Government Treasury. This committee also provided guidance and coordination of the multi-sectoral approach, which proved to be a major contributor to the containment of the outbreak.

Mr Speaker, my ministry has placed on record that there is a register of all contributions received towards the response efforts which is open to anyone seeking to audit the records. The total amount received for the cholera emergency fund was K162,497,500. As stated earlier, the Government contributed K159 million, and donations in cash were K3,497,500.

Mr Speaker, allow me to recognise the efforts of Her Honour the Vice-President of the Republic of Zambia for coordinating the various stakeholders who participated and supported the response efforts. My fellow Cabinet hon. Ministers particularly colleagues from the Office of the Vice-President, Local Government, Water Development, Sanitation and Environmental Protection, General Education, Higher Education and Lusaka Province, among others and fellow hon. Members of Parliament.

Mr Speaker, allow me to thank the Zambia defence and security wings whose gallant and exceptionally efficient execution of tasks ensured restoration of order and sanity to the city of Lusaka and other towns across the country.

Mr Speaker, allow me to thank the multi-lateral and bi-lateral cooperating partners for providing technical support and various resources to the outbreak response. Our in-country and international partners, corporate entities, grass root organisations, communities particularly and individual citizens whose cooperation and support for the Government's efforts even in the light of some radical and inconveniencing measures ensured that control measures were implemented for the benefit of the wider public. The technical team led by the Zambia National Public Health Institute is appreciated for their outstanding expertise and management of the various aspects of the response.

Mr Speaker, I wish to caution that although the most recent battle against cholera has been won, the war is far from over. Zambia remains at risk of cholera outbreaks as long as issues such as limited access to clean and safe water, poor sanitation and inadequate solid waste management unresolved. In view of the high economic costs, both direct and indirect, a permanent end to the looming threat of a cholera outbreak is of utmost importance. My ministry has already begun a post-outbreak evaluation and is supporting the working on medium to long term projects for the improvement of water and sanitation.

Mr Speaker, the Government of the Republic of Zambia sponsored the resolution at the World Health Assembly to end cholera globally by 2030. This is in line with the global cholera control strategy launched by the global taskforce on cholera control which implores affected countries, technical partners and donors to reduce cholera deaths by 90 per cent and eliminate cholera transmission in as many as twenty countries by the year 2030. Further, Zambia took a bold step and announced to the world its resolution to end cholera in the country by the year 2025. To actualise this elimination goal, and in line with the three axes of the global roadmap for cholera control, our strategy will include the following:

- (a) increased access to appropriate health care;
- (b) early case management;
- (c) strengthened surveillance information sharing, strengthened laboratory capacity;
- (d) a multi-sectoral approach and effective coordination of technical support;
- (e) access to clean and safe water and sanitation;
- (f) increased health literacy and moved hygiene behaviours (WASH); and
- (g) community involvement including action on the social determinants t health.

Mr Speaker, allow me to conclude by reiterating the clarion call to action and that with collective effort, we shall surely be the beacon that shows the rest of the world that cholera can be eliminated. Therefore, I implore hon. Members of Parliament and the wider community to participate in the Keep Zambia Clean, Green and Healthy Campaign and ensure that we all work together to have universal access to clean and safe water.

I thank you, Sir.