

Sub-strategy on WASH interventions related to cholera prevention and response

This document is to be used in conjunction with the Mozambique WASH cluster strategy and standards (Response to Idai).

COORDINATION: In order to ensure an efficient cholera response, it is essential that there is effective coordination within the WASH sector and between the WASH and Health sectors. It is essential that cholera surveillance data with sufficient geographic detail is shared in a timely basis with the WASH sector to activate rapid response WASH activities.

SAFE WATER SUPPLY: Access to safe, chlorinated drinking water is essential to reduce the risk of cholera transmission. Chlorination of drinking water supplies is an effective means of treating drinking water and residual chlorine can protect water during transport and storage within the home. Drinking water can be treated at the source, at points of collection or at the household level. During cholera outbreaks the goal is that all household water has sufficient residual chlorine; it is recommended that a minimum free chlorine residual of 0.5mg/l be maintained at the household level and at water collection points.

Household water treatment can be an effective means of treating drinking water for those not collecting water from a network. The only household water treatment product approved for use in Mozambique is Certeza which is available from the UNICEF warehouse or by direct purchase from PSI. To be effective, Certeza must be used consistently and the correct amount added to the water storage vessel. Although many people in the affected area are familiar with Certeza, distributions of any water treatment product should be accompanied by adequate promotion and education efforts, as well as the monitoring of effective use and residual chlorine at household level. This is especially the case in areas with high turbidity which may require increasing the dose of Certeza (double dose) and overnight settling before Certeza application (decantation).

There may not be the adequate quantity of Certeza available to make a blanket distribution in all areas. Prioritization of areas for Certeza distribution must be risk-based. It is intended for households who do not have access to treated water from municipal piped supplies or water treatment units. Priority, high-risk areas for Certeza distributions may include areas with ongoing cholera transmission or areas near to cholera affected areas that are dependent on unsafe water supplies (shallow wells, surface water etc.).

The WASH sector should not only respond to areas with ongoing cholera transmission but should initiate activities in other high-risk communities before cases are detected (to stay ahead of the curve).

Key Water Action Points:

- All bulk water supplies should be chlorinated and maintain an adequate chlorine residual at points of collection. This includes municipal water networks as well as emergency water treatment units and small motorized systems (wells pumped to tanks and gravity fed to tapstands).
- Water provided by tanker trucks may need booster chlorination to ensure adequate free chlorine residual levels in tanks and bladders. Free chlorine residual should be monitored at the point of filling or point of discharge.
- Shock chlorination of wells is not sufficient on its own. Water from these wells should be chlorinated either at the point of collection or at household level.
- Regular monitoring of drinking water supplies should be implemented to ensure adequate residual chlorine levels are maintained. This includes monitoring chlorine residual levels in all bulk water supplies on a daily basis.
- Certeza distributions need to include a community education component to ensure proper use.
- Turbid water may require a higher dose of Certeza. This should be evaluated by implementing agencies prior to distributions. If increased dosing is required additional bottles of Certeza should be provided to each household.
- Post-distribution monitoring of households receiving Certeza should be implemented to determine whether Certeza is actually being used and dosed correctly.

HYGIENE PROMOTION AND COMMUNITY MOBILIZATION: Water, sanitation and hygiene efforts are much more effective when people are aware of the risks as well as what they can do to prevent illness. In addition, those in high-risk areas need to know what to do if they or their family members become ill with cholera. Hygiene promotion efforts should be coordinated with the Community engagement group lead the by Ministry of Health.

Key Hygiene Action Points:

- Focus on key messages that are easy to understand and remember.
- Identify the key means of communicating whether by mass media, influential persons in the community or door to door education campaigns.
- Community mobilizers and volunteers are trained on key cholera related messages and their dissemination (see key messages in annex and request to the WASH Cluster the full document: “Plano de comunicação da campanha de vacinação contra cólera 2019”, MISAU, UNICEF and WHO).
- Door to door sensitization by community mobilizers
- Mass communication through different media (radio spots and discussions, SMS, etc.).
- Sensitization through community-based activities (street theatre, market sensitization, community campaigns/PA) and advocacy with local structures.
- Special sensitization activities for high risk groups (food and water vendors, fishermen and fish handlers, people transporting cholera patients).
- Monitoring of rumors regarding water safety.
- Hygiene promotion and education activities (focused on key messages for cholera prevention) in schools and other community institutions as part of a broad, community-wide education effort.

SANITATION: Appropriate excreta disposal in areas with cholera reported cases and other high risk areas by focused interventions on key community points. Increasing access to sanitation can be a lengthy process and may have limited impact in the middle of a cholera outbreak. However, sanitation should be prioritized in camps, settlements and other concentrated areas as well as health facilities, schools and other institutions. Cleaning and disinfecting existing latrines may also be warranted.

Key Sanitation Action Points:

- Disinfection/ maintenance of community latrines.
- If need be in high risk locations for cholera, communal temporary latrines with handwashing stations (i.e. markets and transport stations) and institutions (i.e. schools) can be considered, with adequate maintenance and appropriate final disposal of faeces.
- Sanitary latrines must have handwashing stations.

WASH in CTC/CTUs: Cholera infection control in health facilities (CTCs and CTUs) through better appropriate chlorinated water, sanitation and hygiene.

Key WASH in CTC/CTU Action Points:

- Training of health staff at CTC/CTU level on WASH infection control and hygiene practices.
- Construction of WASH facilities at CTC/CTUs depending on specific needs and WASH capacity of cholera treatment implementing agencies.
- In areas with a high water table elevated latrines may be required. These latrines will require desludging and safe disposal of the waste.
- The risk of family members of cholera patients is likely higher than the general population. Provision of hygiene items as Certeza and soap can be ensured at CTC or at household level.

WASH in ORPs:

Key points:

- ORP needs to ensure that they have adequate treated water to prepare ORS.
- Have the means to manage all the excreta and vomits produced in the ORP.

O que é a Cólera?



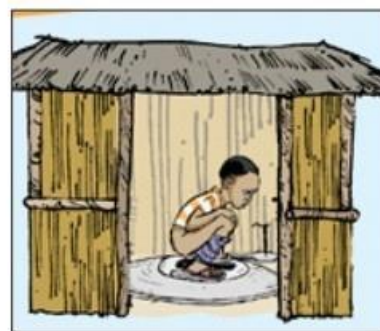
- ✓ Diarreia com muita água (semelhante a água de arroz), às vezes com vômitos;
- ✓ Se não for tratada rapidamente pode levar à morte dentro de 24 horas, numa pessoa que era até há pouco tempo saudável;
- ✓ Afecta todas as pessoas, mesmo as crianças;
- ✓ Às fezes, os vômitos do doente de Cólera podem contaminar muitas pessoas.

Como é que se apanha a Cólera?

- ✓ Através de uma fraca higiene ou falta de saneamento;
- ✓ Por não lavar as mãos com água e sabão ou cinza depois de usar a latrina ou mudar a fralda ao bebé e antes de comer ou preparar os alimentos;
- ✓ Por não lavar com água tratada com Certeza as frutas e vegetais, principalmente, os consumidos crus;
- ✓ Através do aperto de mão com uma pessoa que não lavou bem as suas mãos;
- ✓ Bebendo água não tratada com Certeza ou fervida.



Como prevenir a Cólera?



- ☑ Bebendo água tratada com Certeza ou fervida;
- ☑ Tampando bem os alimentos depois de cozinhar;
- ☑ Comendo alimentos limpos, principalmente, os consumidos crus tais como frutas ou verduras e cozendo bem os alimentos, sobretudo, os mariscos (peixes);
- ☑ Lavando as mãos com água e sabão ou cinza depois de usar a latrina, de mudar a fralda ao bebé e antes de preparar os alimentos ou comer;
- ☑ Usando correctamente a latrina ou sanitário (mantendo a latrina tampada) para evitar que as moscas pousem nas fezes e depois na água e/ou alimentos;
- ☑ Não defecando nos rios, lagos, lagoas ou praias a fim evitar a contaminação das águas;
- ☑ Vacinando contra a Cólera.

O que é a vacina contra a Cólera?

- ☑ Chama-se Shanchol;
- ☑ É uma vacina oral (dá-se na boca);
- ☑ 1 Frasco é para 1 pessoa;
- ☑ A pessoa deve tomar todo o frasco;
- ☑ O frasco contém uma quantidade pequena de líquido.



A vacina é segura?

- ✓ SIM a vacina contra a Cólera é segura
- ✓ Serve para EVITAR a contaminação e não para tratar a Cólera;
- ✓ A vacina reduz o risco de a pessoa apanhar a Cólera mas se ela não lavar bem as mãos com água e sabão ou cinza depois de usar a latrina ou sanitário; depois de mudar a fralda ao bebé e antes de comer e de preparar os alimentos (principalmente os consumidos crus tais como frutas e verduras) pode apanhar a Cólera;
- ✓ Mesmo após a vacinação, algumas pessoas podem ter vômitos, dores de barriga ou diarreia. Isso é normal. Se alguém tiver estes problemas deve ir à Unidade Sanitária mais próxima para o tratamento.

Quem pode apanhar a vacina?

- ✓ Todas as pessoas maiores de 1 (um) ano de vida (menos os doentes, incluindo pessoas com vômitos ou diarreia);
- ✓ Mulheres grávidas;
- ✓ A vacina tem um sabor amargo. Isso é normal, não há problemas

ATENÇÃO: vamos todos participar na Campanha de Vacinação contra a Cólera



Para mais informações ligue grátis para o "Alô Vida": 800149/82149/84146 ou para o PENSA: *660#