The Joint Cholera Initiative for Southern Africa (JCISA) is a multi-agency technical partnership bringing together WHO, UNICEF, UNOCHA and OXFAM supporting national governments with the primary goal being to “strengthen regional capacity and collaboration in order to ensure more timely, integrated and effective technical support to countries in the areas of cholera preparedness, response and resilience”.

The Southern Africa sub-region consists of ten countries, five of which have been identified by the Initiative as priority countries – Angola, Malawi, Mozambique, Zambia and Zimbabwe. For the purposes of this IM process Tanzania is being included given its proximity to three of the priority countries and the possibility of cross border transmission. For further information contact Ben Henson, bhenson@unicef.org or Georges Tabbal, gtabbal@unicef.org.

The Joint Cholera Initiative for Southern Africa (JCISA) Sub-regional up-date on Cholera; 2017 – Week 12

---

**Country name** | **2017 suspected cases** | **2017 Cumulative total** | **2016 total reported cases** | **Comments**
---|---|---|---|---
Angola | 28 | 30 | 42 | 30 | 21 | 24 | 25 | 11 | nr | nr | nr | nr | 211 | 7 | 3.3% | 78 | 4 | ***

Latest official report 26/02/17: total of 289 cases officially reported with 11 deaths since 13 Dec. 2016; North West Zaire prov. (Soyo city), Cabinda & Luanda city.

Botswana | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

All in Nangara district (extreme south), five cases associated with Mozambique.

Malawi | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

Mozambique | 3 | 3 | 6 | 10 | 64 | 73 | 177 | 121 | 206 | 559 | 369 | 31 | 1,622 | 3 | 0.2% | 1,167 | 6 | 0.5%

Cases in Maputo city and Maputo province (South) and two districts in Nampula province (North) - Monapo and Mecanci/Namialo and Tete city (Centre). Week 12 partial report.

Namibia | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

All in Nangara district (extreme south), five cases associated with Mozambique.

South Africa | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

All in Nangara district (extreme south), five cases associated with Mozambique.

Swaziland | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

All in Nangara district (extreme south), five cases associated with Mozambique.

Tanzania | 288 | 80 | 156 | 299 | 74 | 20 | 68 | 46 | 29 | 42 | 18 | 14 | 1,134 | 17 | 1.5% | 14,928 | 202 | 1.4%

Reduction in cases continues from week 5. Two daily bulletins in week 12 with 0 cases.

Zambia | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

All in Nangara district (extreme south), five cases associated with Mozambique.

Zimbabwe | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 14 | 14 | 0 | 1,792 | 46 | 2.6%

All in Nangara district (extreme south), five cases associated with Mozambique.

**Total w/Tanzania** | 319 | 113 | 204 | 339 | 159 | 117 | 337 | 178 | 235 | 604 | 402 | 45 | 3,052 | 29 | 1.0% | 19,354 | 291 | 1%

**Total sub region*** | 31 | 33 | 48 | 40 | 85 | 97 | 269 | 132 | 206 | 562 | 384 | 31 | 1,918 | 12 | 0.6% | 4,426 | 89 | 0.2%

* 10 Southern African countries

*** CFR no validity with so few cases.

Data source: Govt. reports/bulletins, UNICEF, WHO

---

**Highlights**

- Tanzania outbreak continues but with significant reduction in cases.
- A small outbreak in North Western Zambia bordering with DRC is reported to be under control and managed by MOH.
- Angola has seen a reduction in cases but the last official report available is that of week 8 - 26 February.
- Mozambique has seen a significant number of cases in Nampula in the North and Tete in the centre of the country. As well as steadily increasing numbers in Maputo province, with its total representing 84% of current outbreaks in the sub-region.
- Malawi and Zimbabwe have both reported cases in March – 14 and 4 respectively.

The JCISA bulletin will now be produced monthly, this edition once again highlighting the situation in the five priority countries and Tanzania. Risk remains high as heavy late rains and flooding has been experienced in many Southern African countries.

---

**JCISA REPORTED CHOLERA CASES 2016 AND 1ST TRIMESTER 2017**

<table>
<thead>
<tr>
<th>Country</th>
<th>2016 total reported cases</th>
<th>2017 1st trimester cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angola</td>
<td>78</td>
<td>211</td>
</tr>
<tr>
<td>Malawi</td>
<td>14</td>
<td>1,778</td>
</tr>
<tr>
<td>Mozambique</td>
<td>1,167</td>
<td>162</td>
</tr>
<tr>
<td>Zambia</td>
<td>67</td>
<td>1,379</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>10</td>
<td>4</td>
</tr>
</tbody>
</table>

---

* 10 Southern African countries

*** CFR no validity with so few cases.

Data source: Govt. reports/bulletins, UNICEF, WHO
Cholera outbreak status in the sub-region; Week 12, (ending 26 March), 2017.

The outbreak in ANGOLA has three areas with confirmed cholera cases: - Soyo district, Zaire province (North West), date of onset 13/12/2016, located in the border with DRC where there is an on-going epidemic; - Cabinda district (province of Cabinda) date of onset 10/01/2017 in the capital of the province; and Luanda province, date of onset 24/01/2017, with cases mostly linked with Soyo. As of 26 February a total of 289 cases with 11 deaths (CFR 3.8%) have been officially reported (from 13 December 2016).

MOZAMBIQUE: a total of 1,622 cases and 3 deaths (CFR 0.2%) have been reported between week 1 and week 10 in 2017. 75% of cases from Nampula and Tete provinces with 653 cases (40%) from Tete city during weeks 10 and 11. The remainder are from the capital Maputo and neighbouring districts in Maputo province such as Matola. The map shows outbreak areas (red), with high risk districts in yellow.

MALAWI has recorded 14 cholera cases between 11-19 March 2017. All in Nsanje District in the far south, surrounded by Mozambique and located in one health centre (Ndamera HC) a few kilometres from the border. Five of the cases are from Mozambique. No new cases since 19th March and no deaths. All cases have been discharged.

MOH ZAMBIA have reported a cumulative 67 cholera cases between 14 Feb. and 27 March 2017, located in Nchelenge and Chieni Districts, Luapula Province, bordering the DRC and lake Mweru. Contact tracing to the village found the affected patients came from an area whose water source was unprotected shallow wells that are prone to contamination from pit latrines. Unconfirmed reports have been received of possible cases in Mpulungu and Mbala areas, both located near the southern tip of Lake Tanganika – awaiting official confirmation.

TANZANIA has been experiencing a cholera outbreak since 22 August 2015. As of 26 March 2017, a total of 25,117 cases and 390 deaths (CFR 1.5%) have been reported. February and March have seen a significant decline in cases in 2017 from a height of 299 in week 4, to 14 cases reported in week 12. Between 24 and 29 March only 2 cases have been reported.

ZIMBABWE has reported four cases in March 2017, in Chiredzi and Chipinge districts in the South East, with two deaths reportedly due to delayed presentation at health facilities.