### Cumulative Cholera Cases by District (2010 & 2011)

<table>
<thead>
<tr>
<th>District</th>
<th>2010 Cases</th>
<th>2010 Deaths</th>
<th>2011 Cases</th>
<th>2011 Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mutare</td>
<td>50</td>
<td>1</td>
<td>130</td>
<td>60</td>
</tr>
<tr>
<td>Hurungwe</td>
<td>66</td>
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<td></td>
</tr>
<tr>
<td>Kadoma</td>
<td>39</td>
<td>1</td>
<td>219</td>
<td>697</td>
</tr>
<tr>
<td>Chipinge</td>
<td>17</td>
<td>1</td>
<td></td>
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</tr>
<tr>
<td>Chipinga</td>
<td>32</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chegutu</td>
<td>17</td>
<td>1</td>
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</tr>
<tr>
<td>Buhera</td>
<td>13</td>
<td>1</td>
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<td>Bikita</td>
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<tr>
<td>Murewa</td>
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<td>Kadoma</td>
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<td>1</td>
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<td></td>
</tr>
<tr>
<td>Chegutu</td>
<td>3</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mutare</td>
<td>2</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*2010 Total Cases: 937  Deaths: 22

*2011 Total (EPI week 45, 13 Nov 2011) Cases: 1140  Deaths: 45

### Health Priorities - Snapshots (as of 23 February 2012)

#### 2012 Outbreaks
- **Typhoid**: 3,040 cumulative cases reported since beginning of the outbreak in Oct 2011.
- **Diarrhoea**: 7,705 cases reported in EPI week 4 alone (23-29 Jan 2012, WHO).
- **Malaria**: 23,799 cases reported since beginning of 2012.

#### Malnutrition
- Chronic Stunting: 34% (FNC 2011)
  - (WHO std: 34%, NCHS ref 27.1%)
  - Emergency threshold 40%

#### Health Facilities
- Primary Level: 1231
- Secondary Level: 179
- Tertiary Level: 7

#### Health Services Utility
- Antenatal Care (4+ visits): 71%
- Contraceptive Prev.: 60%
- Measles immunization: 1 yr: 76%
- SP TB treatment success: 74%

#### Per Capita Spending
- Required: US$ 34 (to achieve MDG)

#### HIV Prevalence (Per 1000 Population)
- 143 (WHO Health Profile 2009)

#### Tuberculosis (Per 100,000 Population)
- 431 (WHO Health Profile 2009)

#### Maternal Mortality Rate
- 770/100,000 (Unicef 2008)
- 725/100,000 (NHS 2009-13)

#### Life Expectancy
- 51.4 (UNDP HDR 2011)

#### Crude Death Rate
- 15,000 (Unicef 2009)

### Key Indicators

#### Response (Under CAP 2011)
- 2 million out of 7.5 million people reached with safe water and benefits from hygiene & sanitation promotion program.
- 1.99 million people reached with primary health care (Targeted: 4.98 million)

#### Priorities (Under CAP 2012)
- Maintain capacity to respond quickly to new disease outbreaks.
- Prevent new outbreaks of cholera and other waterborne diseases.
- Emergency Reproductive Health.

#### Government Priorities & Programs (MoHCW)
- HIV/AIDS, TB Program
- Health Promotion Program includes the school health program.
- Nutrition, Environmental health program.
- Maternal, Family Planning, Child health program.
- Malaria Control Program. Epidemic preparedness & Response control.

#### Key Issues
- 8 million people with limited access to health services.
- 13.7% HIV prevalence (MoHCW, NHS 2009-2013)
- High fatality rate for Cholera. 98% cholera cases are reported in the rural area.
- Lack of health workers. Health facilities infrastructure degradation and lack of basic and essential equipment.
- User fees as a major barrier to access basic health services e.g. access to essential & emergency maternal health care.
- Typhoid outbreak started on 10 Oct 2011 in Harare.

### Key Funding

#### CAP 2011 Funding
- $6.72m (Funded)
- $21.62m (Unmet)

#### Funding Request for Health (Under CAP 2012)
- 16.69 million US$ for 8.07 million People
- 144.2 million US$ (under ZUNDAF 2012)

#### Funded
- 8.07 million People
- 144.2 million US$ (under ZUNDAF 2012)

#### Note:
This product is work in progress. Please contact IMU/OCHA or Health cluster lead, as soon as possible with any corrections.