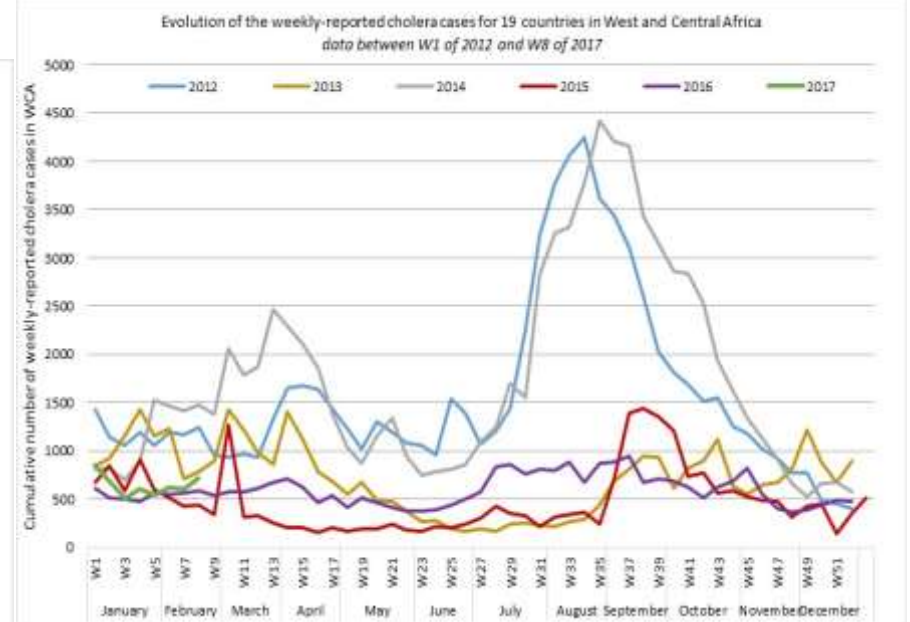
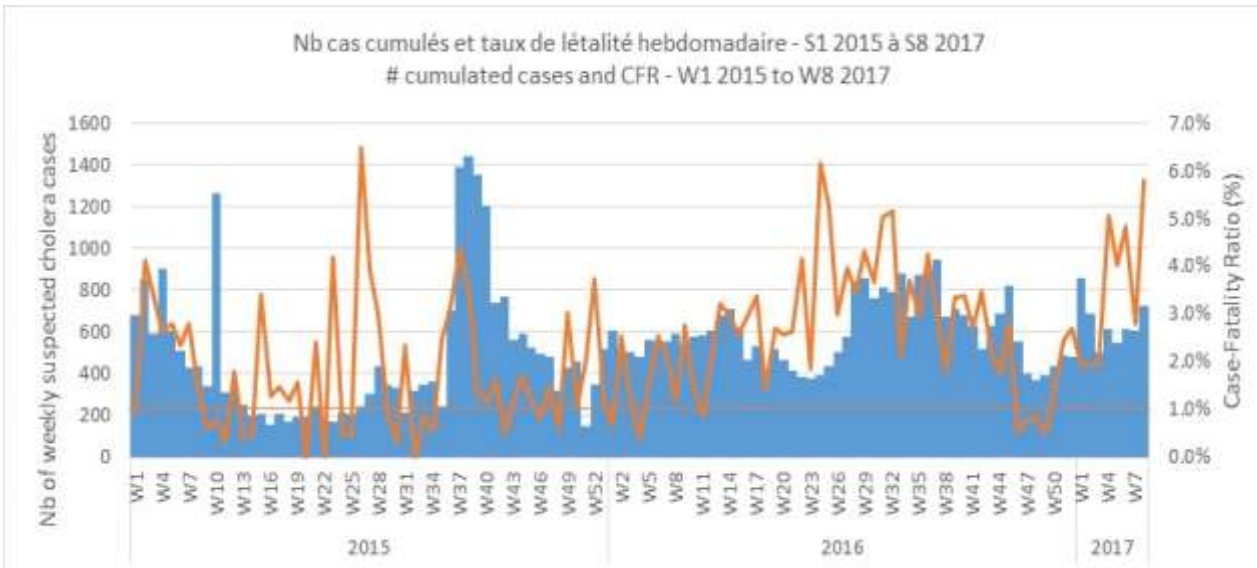


Country Name	2016											2017								Trends on CFR 2017			Onset 2017		Total suspected 2017			Cases in 2016	
	W42	W43	W44	W45	W46	W47	W48	W49	W50	W51	W52	W1	W2	W3	W4	W5	W6	W7	W8	W6	W7	W8	Week	Culture	Cases	Deaths	CFR	W1-8	Total
Benin	4	2	7	6	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	34	874
Burkina Faso	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	-
Cameroon*	2	0	32	27	0	0	0	0	0	0	0	0	0	0	0	0	0	0	14	-	-	0,0%			14	0	-	-	78
Central African Republic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	265
Chad	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	-
Congo	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	18
Congo (RD)	485	501	525	656	398	331	342	350	439	492	482	852	659	506	605	538	617	603	724	4,9%	2,8%	5,8%	continuity of 2016		5 104	119	2,3%	4 111	28 170
Cote d'Ivoire*	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	3	NA	NA	NA	-	-	-			4	0	-	-	16
Ghana	3	121	120	129	133	88	26	46	35	16	3	2	4	0	0	0	NA	NA	NA	-	-	-	W40 in 2016		6	0	-	-	740
Guinea	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	-
Guinea Bissau	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	-
Liberia *	2	0	0	0	3	2	0	2	1	0	0	1	0	0	4	1	6	3	0,0%	33,3%	0,0%	Lab culture -		15	2	13,3%	101	155	
Mali	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	NA	-	-	-			0	0	-	-	-
Mauritanie	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	-
Niger	18	12	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	38
Nigeria	1	0	2	0	1	7	2	44	0	0	0	0	24	0	7	5	0	1	0	-	0,0%	-	Week 2	+	37	4	10,8%	115	768
Sénégal	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	-
Sierra Leone	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	NA	NA	NA	NA	-	-	-	RDT -		1	0	-	-	-
Togo	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-			0	0	-	-	2
Lake Chad River Basin	21	12	42	27	1	7	2	44	-	-	-	-	24	-	7	5	-	1	14						51	4	7,8%	115	884
Congo River Basin	485	501	525	656	398	331	342	350	439	492	482	852	659	506	605	538	617	603	724						5 104	119	2,3%	4 111	28 453
Guinea Gulf Basin	9	124	127	135	137	90	26	48	36	16	3	3	4	1	1	7	1	6	3						26	2	7,7%	135	1 787
WCAR	515	637	694	818	536	428	370	442	475	508	485	855	687	507	613	550	618	610	741						5 181	125	2,4%	4 361	31 124

NA : Not Available—In Liberia, suspected cases are reported from Grand Bassa, Grand Gedeh and Sinoe. 2 deaths of W7 occurred in Gd Bassa. Further info to come. In Cote d'Ivoire, as of W1, 1 case from Bouake, and 2 cases from Port Vridi, Koumassi. Samples taken for laboratory confirmation.



Sources : Ministères de la Santé , OMS - Situation de l'épidémie de Choléra en Afrique de l'Ouest, Bulletins et Sitreps des bureaux pays UNICEF, Plate forme Cholera pour l'Afrique Centrale et de l'Ouest. Les données sont rétrospective-ment mis à jour lorsque de nouvelles informations sont fournies

Cholera Platform

Central and Western Africa

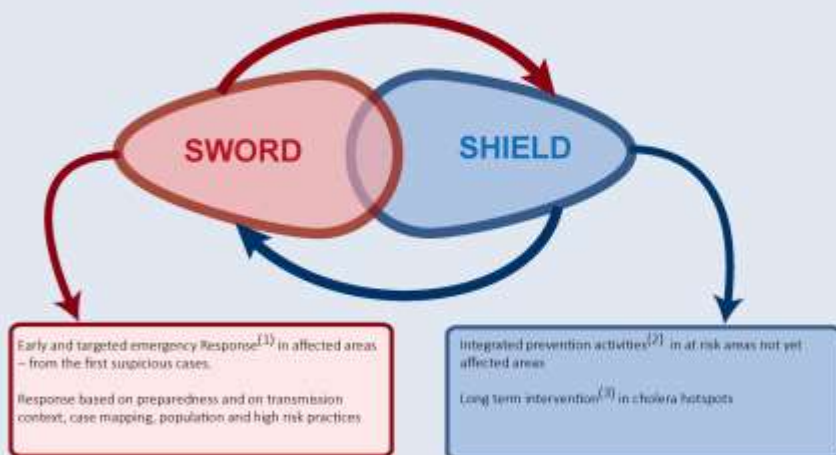
The West and Central Africa Cholera Platform has been established following the absence of cross-border collaboration and the delayed response to the cholera outbreak in Sierra Leone and Guinea in 2012. The platform is gathering the main WASH and Health actors involved in the fight against cholera in the region including but not restricted to ACF, ACTED, ALIMA, ECHO, IFRC, MSF, OCHA, UNICEF, and WHO.

The platform is supported through regional projects piloted by UNICEF and IFRC and funded by ECHO and DFID since 2013. Its objective is to improve cholera control and prevention in the region through the promotion of an integrated and targeted approach known as the Shield and Sword strategy.

Shield and Sword Strategy vs Cholera

The Shield and Sword strategy was developed by UNICEF West Africa Regional Office following the pilot projects implemented in the DRC (2006) and Guinea (2009). It defined as follows :

“The Sword strategy is an intervention in the epidemic phase, as of the confirmation of the first cases, based on advanced preparation that shortens delay in response time and an improved reactivity for an early action in affected zones. The shield strategy is characterized by sustainable preventive Water, Sanitation and Hygiene interventions outside of epidemic periods in the priority areas defined as being specifically at risk for cholera”



⁽¹⁾ WASH intervention, case management, surveillance, social mobilisation and possibly oral vaccine

⁽²⁾ Oral cholera vaccine can help provide protection for a population during the period when sustainable WASH interventions are implemented in cholera hot spots

⁽³⁾ WASH and Health intervention and Communication for behavior change

Keys actions



Improving exchange of information and experience sharing between countries including dissemination of epidemiological bulletin and realtime alerts

HOW

Cholera Bulletins , Factsheets
Mapping of actors
Geographic Analysis, Website



Supporting countries for a timely, evidence-based and targeted interventions ahead and during cholera outbreaks through field training, availability of expertise and continuous analyses and lessons learnt from previous epidemics

HOW

Quarterly Regional coordination meeting
Capacity building training
Planning and preparedness workshops



Advocating toward donors and the WASH and Health specialists for better preparedness, response capacities and long term community-based solutions in cholera hotspots

HOW

Research on Cholera Hotspots
Studies on epidemic dynamics
Scientific publications

Examples products



WCA website
www.platformecholera.info



Cholera factheet



Maps and geo analysis



Operational researches and studies

Who and Where



Key members / partners

The Cholera platform is open and consists of :
 One (1) representative of the Regional Health Working Group,
 One (1) representative of the Regional WASH Working Group,
 One (1) representative of WHO,
 One (1) representative of UNICEF,
 Three (3) (INGOs or MSF or Red Cross) Medical actors,
 Three (3) (INGOs or MSF or Red Cross) WASH actors,
 One (1) representative of donors.

This is a core group and any organization involved in preparation and response to regional cholera epidemics may join.