

# Konbat Kolera (Cholera Risk Reduction)

Cholera is very prevalent in Haiti's Artibonite department. The Konbat Kolera project has helped equip Artibonite health centers to address cholera more systematically and efficiently.  
*Photo by Lane Hartill for CRS*

## CRS' Response, Recovery and Resilience (R3) program

Cyclones, tornados, drought, cholera and devastating crop disease are among the hazards facing communities that CRS has been helping in Guatemala, Nicaragua, Haiti, India, Bangladesh, Vietnam and Indonesia. In 2013, CRS launched the R3 program to reduce underserved vulnerable communities' risks to multiple natural disasters and build their resilience. A strong dimension of all of these projects was to better understand how people perceive their own resilience. Disaster management and resilience plans developed by communities, households and farmers detailed ways to mitigate and respond to disasters.

# Konbat Kolera

This project helped the government institute a cholera risk reduction system in Artibonite department. It provided technical support to senior health staff and community health workers in four cholera-referral health facilities to engage in pre-planned cholera prevention and treatment, and also focused on improvement of learning and operations research for cholera disaster risk reduction strategies.

## PROJECT OVERVIEW

To implement Konbat Kolera, CRS partnered with the Ministry of Public Health and Population in Artibonite and endeavored to bring all the key players in cholera prevention and treatment together for project implementation. The project focused on four cholera-referral health facilities—Hôpital Dumarsais Estimé (Verrettes), Centre de Santé Saint-Michel (Saint-Michel-de-l'Attalaye), Hôpital Alma Mater (Gros-Morne) and Hôpital la Providence (Gonaïves).

200,000

PEOPLE, SERVED BY FOUR HEALTH FACILITIES, WERE THE INDIRECT BENEFICIARIES OF THE PROJECT

There were 244 direct beneficiaries in the health facilities: 40 health facility staff, 4 community health worker supervisors, and 200 community health workers, or CHW. The approximate number of people served by these facilities (i.e. the indirect beneficiaries) was about 200,000.

The project sought to address the persistent rise in cholera cases in high-risk areas in Artibonite by better preparing the local health system to prevent and treat cases. The health ministry reported having 128,085 cholera cases in Artibonite from October 2010 to August 2013, the highest level in the country. Despite the volume of cases, the local health department and its facilities lacked the necessary guidance and systems to effectively treat cholera.

Through the project, CRS planned to promote a participatory and qualitative approach in the fight against cholera at the community level. It carried out an assessment of the CHW's cholera response within 48 hours of an outbreak, the amount of time needed to inhibit cholera flare-ups once an alert is signaled. CRS worked with the local health department and health facility staff to increase cholera preparedness, develop standardized guidance on prevention and treatment, and train staff and CHWs in guidelines and tools for prevention, treatment and management.



## AT A GLANCE

<b>Project</b>	Konbat Kolera (Haiti Cholera Risk Reduction)
<b>Location</b>	Artibonite department, Haiti. In communes most affected by cholera: Gros-Morne, Gonaïves, Saint-Michel-de-l'Attalaye and Verrettes
<b>Duration</b>	March 2014 – May 2016
<b>Partner</b>	Direction Sanitaire de l'Artibonite (DSA)
<b>Funder</b>	CRS private donors
<b>Budget</b>	\$518,672



Staff of Saint-Michel and Verrettes health facilities take part in a simulation exercise, allowing them to practice cholera prevention, treatment and management. *Photo by Virginia Chevalier/CRS*

## KEY COMPONENTS

- **Contingency plans** CRS worked with the government's health and administrative team to set up a cholera contingency plan at each of the four health facilities to increase their preparedness to face spikes in cholera cases in the community.
- **Government guidance on cholera risk reduction** A cholera risk reduction guidance document was developed with the local health department and health facility staff. It was reviewed by other health sector actors—such as the Red Cross (France), Pan American Health Organization, Partners in Health and the Office for the Coordination of

Humanitarian Affairs—to better guide hospitals and communities in organizing activities around cholera treatment and management; hygiene practices; and the coordination, workflow and orientation of caregivers.

- **Hospital simulation exercises** Health facility senior staff took part in a one-day on-site simulation training, allowing them to practice cholera prevention, treatment and management at the health facility and through their community health workers. These simulations were used to evaluate the health facilities' readiness for addressing cholera cases.



Communities are now aware of the key hazards and vulnerabilities that affect them and can monitor and disseminate information about these.  
*Photo by Lane Hartill for CRS*

## RESULTS

This project has allowed the health facilities and their CHWs to prepare for cholera flare-ups. The Artibonite health department is now equipped to address cholera more systematically and efficiently.

Communities are now aware of the key hazards and vulnerabilities that affect them and can monitor and disseminate information about these. To assess the level of preparedness in the community, 99 CHWs were interviewed with 95 percent reporting that they had communicated the alert with authorities at the district health

unit, or l'Unité d'Arrondissement Sanitaire. Some 94 percent of CHWs reported that a verification process was conducted on potential outbreak with local and health authorities. In addition, 91 percent reported having participated in a mission investigating the affected area and 94 percent had collected data on the impact of the situation.

The CHW supervisor at Hôpital Dumarsais Estimé strongly believed that the implementation of the contingency plan had resulted in a reduction of cholera cases in the community. The plan allows



A cholera risk reduction guidance document was developed with the local health department and health facility staff. Photo by Virginia Chevalier/CRS

for all CHWs to work closely in high-risk communes in the awareness and prevention of cholera. She noted a change in hygiene practices within many households; people had reported using latrines and understanding the importance of doing so.

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**The Artibonite health department is now equipped to address cholera more systematically and efficiently**

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The head nurse at Centre de Santé Saint-Michel said that the implementation of the contingency plan was beneficial to the health facility. The plan was put in place before the rainy season (when cholera is more prevalent), which allowed all personnel to prepare accordingly. It was a good opportunity to have all staff involved in the implementation of such an important document. In addition, it allowed the health staff to think critically about constructive ways to approach an outbreak.

### LEARNINGS

The community health worker supervisor at Hôpital Dumarsais Estimé reported a lack of support and supervision of CHWs' work in the field due to limited resources. The head nurse at Centre de Santé Saint-Michel reported that it would be important to address staffing concerns and ensure that proper budgetary adjustments were made for overtime work.

### SUSTAINABILITY

The project team has recommended that project interventions continue for an additional 2 years to ensure sustainability of the achievements. It may also be useful to replicate the project in other areas of the country affected by cholera. Further funding is being sought to continue project activities to further strengthen cholera response systems.

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## CATHOLIC RELIEF SERVICES

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