

Lake Chad Region Situation Report October 2017

Summary

The Lake Chad region continues supplementary immunization activities and disease surveillance efforts to guard against the continued threat of poliovirus transmission.

Completed Supplementary Immunization Activities (SIAs) from 01/01/17 to 31/10/17:

COUNTRY	SIA: Bivalent Oral Polio Vaccine (bOPV)	SIA: Monovalent Oral Polio Vaccine 2 (mOPV2)	SIA: Inactivated Polio Vaccine (IPV) and mOPV2
CAMEROON	3	1	-
CENTRAL AFRICAN REPUBLIC (CAR)	3	-	-
CHAD	3	1	-
NIGER	3	1	-
NIGERIA	5	1	1



THE LAKE CHAD REGION

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Source: Middle Africa, Administrative map, DFS, United Nations 2014.

Key highlights

- The detection of wild poliovirus type 1 (WPV1) (Borno, Nigeria in 2016) and circulating vaccine-derived poliovirus type 2 (cVDPV2) (Borno and Sokoto provinces in Nigeria in 2016) continues to pose a risk to the neighbouring countries in the Lake Chad region.
- A coordinated vaccination campaign using bivalent oral polio vaccine (bOPV) took place across Cameroon, the Central African Republic, and Chad between 6 and 8 October, and in Niger between 13 and 16 October. Nigeria staggered vaccination campaigns throughout October.
- During October, preparations began for the second Outbreak Response Assessment (OBRA) of the region. This took place successfully between 29 October and 10 November in the Central African Republic and in Nigeria, and between 1 and 15 November in Chad, Cameroon, and Niger.

Immunization and surveillance response

Immunization

- During October, market place vaccinations continued. To take just one week as an example, from the 8 October to the 15 October, 5064 children were vaccinated in Chad. This figure includes a small proportion of children (2%) who had previously received no vaccine dose, but who are now protected by the diligent efforts of vaccinators.
- Planning continued during October to ensure that vaccination days in early November in all Lake Chad Basin countries went ahead as planned. Countries conducted meetings to incorporate lessons learned from previous campaigns into the November campaigns.

- The vaccination of children in internally displaced persons camps, at international borders, and the vaccination of nomadic children continues.

Surveillance

- During October, a number of acute flaccid paralysis (AFP) cases were still pending classification more than 90 days after notification. The regional office is working to reduce this total, and improve data input, over the coming weeks and months.
- A number of countries continue to investigate and address underlying causes for not meeting lab indicators. One area for improvement is the condition of stool specimens from the Central African Republic and Chad upon arrival at the lab. Cameroon, the Central African Republic, Chad and Niger are also working to improve sample transportation time.

Country	Notified AFP Cases	Pending Cases	Number of AFP Cases Pending by Days		
			Less Than 60 Days	60 to 89 Days	More than 90 Days
CAMEROON	652	67	10	55	2
CAR	133	29	1	28	0
CHAD	491	98	9	74	15
NIGERIA	14081	456	35	379	42
NIGER	381	143	22	87	34
Lake Chad Basin Block	15738	793	77	623	93

2017 AFP Cases by Pending Days (until October 8)

- In Chad, the AVADAR project is currently being introduced in the Hadjar Lamis region. This is a mobile-based surveillance application developed by eHealth Africa, the Bill & Melinda Gates Foundation, WHO, and Novel-T, which allows users to easily report cases of acute flaccid paralysis in health facilities and local communities. The programme is already in operation in other regions in Chad, as well as in Cameroon, Niger and Nigeria.
- An expansive geographical information system (GIS) project is underway in Cameroon, Chad and Niger, which is mapping the locations of all settlements and significant facilities (such as health facilities, mosques, schools and markets), as well as the home of each village head, across the regions studied. This will allow technical experts and country teams to map the spread of virus to a micro level, as well as plan vaccination campaigns with great accuracy, ensuring that no home, and no child, is missed.
- The regional team is currently building up knowledge of inaccessible populations across the Basin, allowing vaccination planning to form with these areas in mind.



An e-Health Africa technical officer (left) explains to an investigator why he should not install phone apps that conflict with the AVADAR app, used to report cases of Acute Flaccid Paralysis. Photo Credit: WHO Cameroon.

Communications for Development (C4D) and social mobilisation activities

- Working with local community leaders and government officials, efforts continue to increase access to areas which are currently closed to surveillance.
- Non-governmental organisations and United Nations representatives in the field continue to work with countries in the basin to maximise the reach of polio vaccine, and establish strong infrastructure.

- In Cameroon, preparation has taken place to train focal points in Logone and Chari on the use of smartphones to help collect monitoring data.

Coordination and surge support

- In Chad, a security assessment was recently conducted to support the implementation of immunization and surveillance activities on the Lake Chad islands.
- Teams within the Lake Chad region are working with different regional groups and national governments to access populations where possible, and overcome significant security challenges.



Team members overcome difficult terrain in Yobe, Nigeria to deliver vital polio vaccinations. Photo Credit: UNICEF Nigeria.

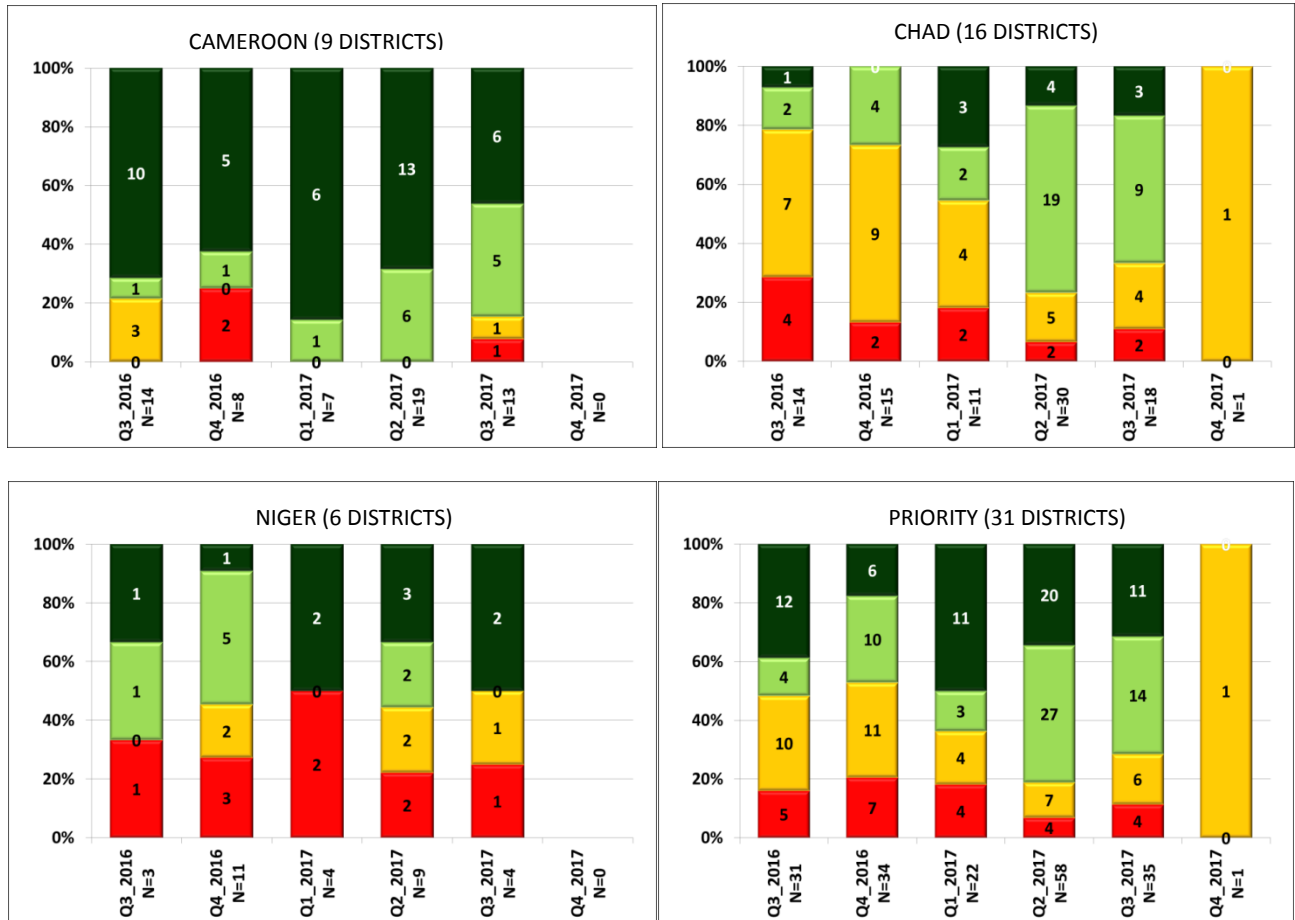


The October Supplementary Immunization Campaign begins in > Bossangoa, Central African Republic. Photo Credit: UNICEF CAR.

< Campaigns in Chad are led by field teams, local volunteers and community mobilisers, with support from UNICEF and WHO. Here, the UNICEF Representative for Chad helps to support immunization efforts. Photo Credit: UNICEF Chad.



31 Priority Districts: OPV status of children aged 6-59 months suffering Accute Flaccid Paralysis, 2016 – 2017



■ 0 Dose ■ 1-3 Doses ■ 4-6 Doses ■ 7+ Doses

* All "UNKNOWN" doses Assumed as Zero

Relevant Links

- [Global Polio Eradication Initiative \(GPEI\) website](#), updated weekly.