

Addressing the Health Impacts of Flooding in the Republic of Congo

African emergency responders are on the frontlines of the global climate crisis.
Africa CDC and WHO are making sure they have what they need.

THE SITUATION

Congo Hit Hard By Flooding As Climate-related Disasters Rise Across The Continent.

The Africa region records about 2-3 health emergencies every single week of which more than 50% are related to climate change. Floods are fueling outbreaks of cholera and other water-borne diseases, droughts are causing food insecurity associated with poor health and rising temperatures are creating conditions for disease-carrying mosquitoes to thrive.¹ Between 2030 and 2050, it is estimated that climate change will take the lives of an additional 250,000 people per year – of which the majority will be in low-income countries, including Africa. Despite contributing only 4% to the world's carbon emissions, 7 out of the 10 countries most vulnerable to the impacts of climate change globally are located in Africa.²

In January 2024, the Republic of Congo felt the impact of the growing worldwide climate emergency. The country experienced unprecedented rainfall that directly impacted over 320,000 individuals. The disaster disrupted lives and livelihoods, damaged vital infrastructure and increased the risk of water-borne diseases.



¹WHO Regional Office for Africa. Africa faces rising climate-linked health emergencies. <https://www.afro.who.int/news/africa-faces-rising-climate-linked-health-emergencies>

²Kaseya J, Dereje N, Tajudeen R, et al. Climate change and malaria, dengue and cholera outbreaks in Africa: a call for concerted actions. *BMJ Glob Health* 2024;9:e015370. doi:10.1136/bmgh-2024-015370

³African Volunteer Health Corps – Strengthening & Utilizing Response Groups for Emergencies

THE RESPONSE

A Pre-established, Multi-disciplinary Team Of Emergency Experts Led The Response.

In January 2023, as part of supporting Member States in emergency preparedness and response, WHO and Africa CDC had worked with the Republic of Congo Ministry of Health to identify and train a national multisectoral and multi-disciplinary team of 59 experts that could be activated and deployed in the event of any health emergency – including floods. This included epidemiologists, surveillance officers, data managers, clinicians, laboratory technicians, vaccinators, operations support and logistics specialists, biologists, hygienists, risk communication and community engagement specialists, and security officers, among others. The effort was conducted under the umbrella of the joint WHO-Africa CDC AVoHC-SURGE Initiative. Following the onboarding training, the AVoHC-SURGE Members was deployed to investigate a bacterial gastroenteritis outbreak in Dolisie, Congo, and suspected mpox cases in Likouala province.

Consecutively, in January 2024, the AVoHC-SURGE team was called into action for the third time, with the technical support of WHO and partners. Within 48 hours, the team activated to lead a swift response, developing a multi-sectoral plan and conducting strategic activities to evaluate and mitigate the flood's health impacts.



Actions and key achievements of the flooding response included:

- Evaluated access to healthcare and essential medicines across **114 facilities**, identifying 26 health centers affected by the flooding.
- Mapped the geographic location of 57,024 vulnerable** individuals to better assist them, representing 29% of the total displaced population. This group included 7,407 pregnant women, 36,855 children under 5 years old and 12,762 elderly people.
- Enhanced the disease control surveillance system, training more than **250 surveillance officers and community health workers**, who actively intensified case finding. Case finding revealed a predominance of malaria and acute watery diarrhea cases, as well as suspected cases of mpox and salmonellosis.
- Contracted Médecins d'Afrique (MDA) and Terre Sans Frontières (TSF) to deploy **nine mobile clinics** across five regions, providing comprehensive, and essential, life-saving health services to more than 2,000 people including pregnant women and children.
- Mobilized and distributed **5,700 kg** of commodities, including health emergency kits and essential medicines, providing immediate humanitarian assistance to save lives.
- Mobilized and distributed more than **USD \$1 million** from the WHO Contingency Fund for Emergencies (WHO CFE) and Central Emergency Response Fund (CERF).
- Distributed critical health information, holding awareness sessions that reached **621 community members**, publishing 5 situation reports, and briefing more than **20 journalists**.
- Ensured coordination of the response at **national and sub-national levels** with all stakeholders and sectors, under the leadership of the host
- Sensitized **all frontline responders** to preventing vulnerable populations from sexual exploitation and assault.

THE IMPACT

More Than 2,000 Patients In Flood-affected Communities Received Essential Health Care And Services, Congo Saw Zero Flood-related Disease Outbreaks.

The strategic deployment of nine mobile clinics staffed by expert professionals was pivotal in delivering critical, life-saving healthcare services. Cumulatively, the clinics reached 2,000 people in flood-affected communities across five regions (Likouala, Sangha, Pool, Cuvette, and Plateaux).

Further, as a result of the rapid and comprehensive response including enhanced surveillance, no water-borne or vector-borne diseases exceeded alert levels. As of March 2024, no flood-related disease outbreaks were identified. While there continue to be humanitarian needs, the high risk levels as of January for outbreaks of cholera, malaria and others, have been reduced to either moderate or low risks. The aversion of these high risks represents considerable savings in terms of human life and economic costs.

WHAT WE CAN LEARN

Invest In Preparedness, Invest In People.

Congo's response shows the value of having standby, well-trained, multi-disciplinary and multisectoral national teams in place, ready to activate and deploy in the face of any emergency. It demonstrates that a relatively small emergency health workforce can have a big impact when organized by government leadership and supported by collaborative partners. It shows preparedness can work.

So far, Africa CDC and WHO have rolled out AVoHC-SURGE in 16 Member States. The agencies have onboarded and trained 1,348 African health emergency responders, leveraged a joint database and protocols, and supported governments to activate teams within their own borders and deploy experts to neighboring countries. The ambition of the program is to enroll a total of 3,000 responders and equip them with comprehensive training and resources.

Continuing to invest in Africa's frontline responders will be essential to addressing public health emergencies across the continent. As climate change increases the frequency and severity of extreme weather events, the time is now to prepare. People, including responders and the communities they serve, must be at the center of preparedness.

