**Risk communication and community engagement key message bank for cholera outbreaks**

23 February 2023

*These messages should be adapted to the local context and audience based on needs, epidemiological and social/behavioural data. Messaging should always be provided in the local language, with respect to literacy levels and through trusted information channels.* *Notes have been added in the text below where special care should be taken to adapting messages for the setting.*

**Current situation overview**

* More countries than usual around the world are currently facing cholera outbreaks at the same time.
* This is due to climate change, conflict, population displacement and poverty, which are limiting people’s access to safe water and sanitation.
* In some countries, the number of people dying from cholera is particularly high.
* Cholera can be prevented by ensuring communities have access to sustainable, safe water, sanitation systems and that they apply good hygiene practices.

**Top line RCCE messages for communities:**

1. **Cholera is an infectious disease that causes diarrhoea and vomiting.**
* You can catch cholera by eating or drinking contaminated food or water, having contact with contaminated poo or vomit or having unprotected contact with the body of someone who has died of cholera.
1. **If someone has cholera:**
* Stay calm. With fast care, most people recover fully.
* Firstly, keep them hydrated with oral rehydration solution (sachets or a mix of 1 litre safe water, 6 teaspoons sugar and half a teaspoon of salt). *Note: measurements should be adjusted to local reference points. Adjust for national recommendations for making oral rehydration solution at home.*
* Secondly, seek medical care. *Note: local information should be included on how and where to seek care.*

1. **If cholera is circulating in your community, protect yourself and your loved ones by:**
* Washing your hands regularly using soap and water, especially after touching poo (faeces) or before eating.
* Using safe water (disinfected, boiled or bottled) for drinking, washing fruit and vegetables and cooking.
* Cooking food thoroughly, keeping it covered, and eating immediately after cooking it, while it is still hot.
* Continuing to breast feed infants and young children.
* Getting vaccinated with the oral cholera vaccine, if it is available to you.

**About cholera**

**Cholera signs and symptoms:**

* Cholera is a bacterial infection that can cause severe diarrhoea and vomiting.
* The symptoms of cholera are:
	+ Large amounts of diarrhoea (which sometimes looks like rice water)
	+ Vomiting (which sometimes looks like rice water)
	+ Leg cramps
	+ Feeling weak
* Severe diarrhoea can cause dehydration, which can lead to weakness and even death if not treated rapidly.
* Symptoms and signs of dehydration are thirst, weakness or fatigue, sunken eyes and decreased skin elasticity.
* Infants, young children, older people and people who are already sick are most at risk of getting severely ill if they get cholera.
* The most important things to reduce cholera deaths is for anyone with symptoms to drink oral rehydration solution as soon as they become ill, and to get to a health centre fast.
* Not everyone who is infected with the bacteria gets ill. Approximately 20% of people who are infected with the bacteria get symptoms. Symptoms usually start between 12 hours and five days after being exposed.
* Of people with symptoms, usually 20-30% develop severe disease.

**How cholera spreads:**

* You can catch cholera by:
	+ Drinking contaminated water
	+ Eating contaminated food (e.g., food that is raw, poorly cooked, or that becomes contaminated with poo (faeces) during preparation or storage)
	+ Having contact with the poo (faeces), vomit, or things that have been contaminated with the poo or vomit of someone who has cholera
	+ Having unprotected contact with the body of someone who has died from cholera

**The risk of cholera:**

* Cholera is a threat wherever safe water supplies, sanitation, food safety and hygiene are inadequate.
* Water, sanitation and hygiene facilities are often inadequate in overpopulated settings where there is overcrowding (like refugee/IDP camps or prisons).
* Working hand-in-hand with communities to identify risks and improve water and sanitation systems can have significant benefits.
* People living in high-risk areas can reduce their risk by practicing good hygiene and safe food preparation.

**Recovering from cholera:**

* Cholera treatment is simple: using oral rehydration solution. This can be bought/obtained from health workers or even made at home by mixing 1 litre safe water, 6 teaspoons sugar and half a teaspoon of salt. *Note: measurements should be adjusted to local reference points. Adjust for national recommendations for making oral rehydration solution at home.*
* People with more severe symptoms may need additional treatment, including intravenous rehydration and antibiotics.
* If someone has cholera, they should be given oral rehydration solution and then taken to a health facility, cholera treatment centre or oral rehydration point.
* Most people recover from cholera fast with the right care. Most people are discharged from healthcare facilities within three days.

**Preventing cholera outbreaks**

* Cholera outbreaks can be prevented by making sure that communities have access to safe water and good sanitation.
* Open defecation (not using toilets/latrines) is a major driver of cholera outbreaks. Providing communities with access to toilets/latrine can provide significant health benefits.
* Latrines should be a safe distance (20 – 30 metres) from water sources.
* People can reduce their risk by avoiding defecating in or near water. Dirty diapers should be placed in plastic bags before they are thrown away.

**Protecting yourself and others from cholera during outbreaks**

**If you have symptoms that could be cholera:**

* Stay calm
* Keep hydrated using oral rehydration solution (available from health workers, shops or can be made at home mixing 1 litre water with 6 teaspoons sugar and half a teaspoon of salt) or other fluids (soup, juice, soda, coconut milk etc.). You need to drink enough to replace the fluids you are losing. *Note: measurements should be adjusted to local reference points. Adjust for national recommendations for making oral rehydration solution at home.*
* Seek medical care. Go to the nearest oral rehydration point, cholera treatment centre or health care facility as fast as possible.

**If there is an outbreak of cholera where you live, reduce the risk of you or your loved ones becoming ill by:**

* Drinking safe water (well- monitored piped water, disinfected with household water treatment chemicals, boiled, or bottled)
* Using safe water for washing and preparing food and for cooking
* Cleaning your hands regularly using soap and safe water (or an alcohol-based hand rub if there is no visible dirt), especially before eating, cooking, after using the toilet/latrine or changing your child’s diaper.
* Cooking food thoroughly, keep it covered, and eat immediately after cooking it.
* Not going to the toilet or washing yourself, hands or clothes near where you get your drinking water.

**Ways to ensure water is safe to drink at home:**

* Filtering:
	+ If your water looks dirty or cloudy, physically remove pathogens by filtering your water using a water filter, clean cloth, paper towel or coffee filter. After filtering, you should still boil or disinfect your water (see below).
* Boiling:
	+ After filtering, boil your water for **at least** one minute before drinking. After boiling, store drinking water safely in a clean, tightly sealed container to avoid recontamination.
* Disinfecting:
	+ After filtering, use household water treatment chemicals following the manufacturer’s instructions
	+ If household water chemicals are not available, add 3 to 5 drops of chlorine (such as 5 – 9 % unscented household bleach) to one litre of water. Wait at least 30 minutes before using.

**Vaccination against cholera:**

* Vaccination is a critical tool to stopping cholera, but access to safe water and sanitation is the most important thing to protect communities.
* There is a vaccine available against cholera. It is called the ‘oral cholera vaccine’ or OCV.
* Being vaccinated with OCV reduces your chances of getting infected with cholera.
* Who can be vaccinated against cholera:
	+ The oral cholera vaccine can be given to children over one year and adults.
	+ It is safe for you to receive the oral cholera vaccine if you are pregnant.
* How the oral cholera vaccine is administered:
	+ The cholera vaccine is an oral vaccine, meaning it needs to be swallowed.
	+ In a two-dose schedule, the doses should be taken at least two weeks apart (and not more than six months apart). This provides you with protection for at least three years.
	+ In some settings, a one-dose schedule is being offered. This provides strong protection for a shorter period of time. In these settings, one dose instead of two is being offered because there is a global shortage of the vaccine.
* Safety of OCV:
	+ OCV is safe and effective.
	+ Rare side effects include nausea, vomiting, mild gastrointestinal discomfort.

**Caring for someone with cholera**

**If you suspect someone has cholera:**

* Stay calm. Cholera is easily treatable if you act fast.
* Take care of yourself while caring for someone with cholera by washing your hands well after each time you have contact with them.
* Prevent the person who is unwell from getting dehydrated. Give them oral rehydration solution (available from health workers, shops or can be made at home mixing 1 litre water with 6 teaspoons sugar and half a teaspoon of salt) or other fluids (soup, juice, soda, coconut milk etc.). You need to help them replace the fluid they are losing; encourage them to keep drinking even if they can’t keep it down. *Note: measurements should be adjusted to local reference points. Adjust for national recommendations for making oral rehydration solution at home.*
* Seek medical care. Take them to the nearest cholera treatment centre or health care facility as fast as possible.
* You should seek help immediately if the person is unable to take enough fluids due to vomiting, or if the diarrhoea is severe. Other reasons for emergency care are: confusion or drowsiness; muscle cramps; weakness (unable to sit up by themselves); dizziness.

**Using oral rehydration solution (ORS):**

* Oral rehydration salts can successfully treat 80% of patients.
* If someone is dehydrated, drinking water alone is not enough to help them recover. This is why using oral rehydration salts is important.
* ORS is solution prepared by mixing 1 sachet of oral rehydration salts in 1 litre of safe water.
* If you don’t have oral rehydration salt sachets, you can make the same solution by mixing:
	+ Half a teaspoon of salt
	+ Six teaspoons of sugar
	+ One litre of safe drinking-water or lightly salted rice water
* If you don’t have access to sachets or sugar and salt for the home-made solution, the most important thing is to keep the patient drinking anything and to seek care fast.

*Note: countries should take care to adapt messaging on oral rehydration solutions to the local settings. Not all countries promote home-made solutions. Adapt the instructions above to local measurement units (e.g., size of bottles and spoons).*

**If someone in your household gets sick, protecting yourself and others in your household:**

* The risk of you catching cholera when caring for a sick person is low if you take some basic measures to protect yourself:
	+ Wash your hands thoroughly with soap and safe water after taking care, touching the clothes, or bedding of the sick person.
	+ Wash the sick person’s bedding or clothing away from drinking-water sources.
	+ Avoid direct contact with stools and vomit of the sick person. Place all waste in a toilet and ensure the latrine is properly disinfected.
* Take care to avoid getting infected via the clothing and bedding of a sick person:
	+ Clean clothing and bedding by:
		- Machine washing between 60 – 90 degrees with household laundry detergent following by a complete drying cycle or drying in direct sunlight
		- If machine washing is not available, immerse in a large container of water, stir for ten minutes and scrub to remove dirt (taking care to avoid splashes)
	+ Disinfect clothing and bedding by:
		- Immersing in boiling water for five minutes OR
		- Immersing in water with a 0.2% solution of chlorine for at least ten minutes then rinsing
			* To make 0.2% solution of chlorine: If you are starting with 4% liquid bleach, mix bleach to water with a ratio of 1 : 19. *Note: instructions should be adjusted to local reference points such as the types and strengths of bleach available locally1.*
	+ Dry clothing and bedding by:
		- Using a full cycle of a dryer machine
		- Hanging to dry in direct sunlight
* If the sick person is using the household or community toilet, make sure it is cleaned and disinfected thoroughly after each use.
* Don’t let the sick person prepare food.
* Mothers  should  continue  to  breastfeed  infants  and  young  children  even  if  they  have  been diagnosed with cholera.

**Treatment – what to expect at a health facility/cholera treatment centre:**

* When a patient arrives at a health facility, they will be assessed by a health worker to see whether they have cholera. In some cases, this may include a test, usually of the stool (poo).
* A health worker will then collect a small sample of stool (poo) either from a bucket/container or directly using a swab. Collection using a swab may be uncomfortable if it is from your body directly, but will not be painful.
* The sample is then either sent to the laboratory for testing or tested there in the facility using a rapid test. Getting the test results can take less than an hour to a few days, depending on the type of test.
* In cholera treatment centres, health workers will help to make sure the patient is staying hydrated using oral rehydration salts.
* If the patient is severely ill, he/she may be given antibiotics. Children may receive zinc tablets.

**Safe and dignified funerals and dead body management**

* While most people will recover fully from cholera, in some cases it can lead to death.
* In recent outbreaks, we have seen more people die from cholera than we would normally expect. This makes it more important than ever to ensure that people get care fast so that they have the best chance of getting better.
* Losing a loved one to any disease is incredibly hard. You will want to mourn together and celebrate their life through your traditional funeral practices.
* There is a very high risk of catching cholera from a dead body. This means it is important to take steps to reduce the risks to you and your loved ones.
* Take steps to reduce the risk of cholera spreading to yourself or others before and during the funeral:
	+ Hold the funeral and burial as quickly as possible (preferably within 24 hours after death)
	+ Find alternatives to rituals where people touch or kiss the body.
	+ Trained health personnel should help you with the respectful and safe preparation of the body and burial process to prevent further spread of cholera. Handle the body as little as possible yourself.
	+ If working with a trained health personnel to prepare the body is not possible, protect yourself by:
		- Touching the body as little as possible
		- Washing your hands thoroughly with soap and safe water after touching their body, clothes, or bedding.
		- Removing and washing/disinfecting/drying any bedding, towels or clothing that may have had contact with diarrhoea or with the body.
		- Washing bedding or clothing away from drinking-water sources.