

From our water correspondent

Our water correspondent, Sharon Murinda from Harare, reports on the cholera outbreak.

It was Monday morning after an adventurous weekend in the beautiful mountains of Nyanga. I had decided to visit my aunt who lives in Waterfalls, a low-density northern suburb of Harare. While waiting at the traffic lights, I looked across to where one of the biggest infectious diseases hospitals in Zimbabwe is situated. To my surprise there were beds outside the hospital building – not just empty beds but beds containing patients.

I turned into the hospital premises and met a nurse. She told me that a massive cholera outbreak had occurred in Budiro, one of the high-density areas of Zimbabwe. Serious cases had to be admitted to the hospital but the hospital was full to capacity because of the number of patients. She mentioned that all the local clinics were closed because the workers were being underpaid and they were on strike. This was the only hospital in the city functioning and many people were coming from all corners of the city to get treatment.

I asked for directions so that I could visit right away one of the areas hit by cholera in Budiro. As I approached, I was greeted

by the scene of burst sewer pipes and children playing in the sewage water. I went to one household and asked for some water to drink, but I could not drink it because it was very turbid and there were some black particles floating in it. They showed me the source of their water: it was just an open shallow well beside their toilet. I also looked for the storage containers in the house and saw that these were very dirty. There was clearly a need to talk about health and hygiene, but before I could ask for all the household members to gather six women from Budiro arrived to pick up the lady I had been talking to so that they could go to church together.

They were talking about two funerals which had occurred in the last two days in their neighbourhood – the two people had died of cholera. Their families didn't have money to take the patients to the hospital because it was too far away. So when the women came into the house, I greeted them and asked for more information on the deaths in the area that were due to cholera. They were very distressed and had no hope that cholera would leave their area because of the lack of running water in their taps. So it was a really good opportunity for me to tell them all about the need for good

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hygienic practices and the need for water treatment in order to prevent and reduce cholera cases in their homes and the community at large.

I asked for 30 minutes of their time. I began explaining to them what cholera really is and asked if they knew how it is spread. They seemed to have little knowledge about this. We discussed ways we can prevent cholera together. I encouraged them always to wash their utensils with soapy water, always to wash hands before handling food or after using the toilet, always to cover their water containers and food, and all the other hygienic practices which are needed in the household. They asked many questions which included whether it was okay to wash hands with water

only because it was too expensive to buy soap. I then suggested the use of ash since they all prepared their food over a fire so they would always have ash available.

About water treatment they seemed to be aware that their water was contaminated but they had no other option besides drinking it because they could not afford to buy firewood for boiling water for their big families. I explained briefly about the importance of treating water and that they could opt for solar water disinfection which is easy and very affordable. We chatted for more than an hour and then they proceeded to church and promised they would spread the message to their women friends as well as to their family members.



Water from a burst sewer flooded the road