AFRICA CDC RESPONSE TO
RIFT VALLEY FEVER IN KENYA

The Republic of Kenya has been facing recurrent episodes of Rift Valley Fever (RVF) since the virus was first discovered in the Rift Valley area of Kenya in the early 1900s. Between June 2018 and April 2019, Kenya declared two outbreaks of RVF and requested African Union support. As an institution of the African Union, Africa CDC provided support through its Eastern Africa Regional Collaborating Centre.

**CURRENT SITUATION**

The outbreak was declared over in April 2019.

**TOTAL NUMBER OF CASES: 220**

- **199** CONFIRMED ANIMAL CASES
- **21** CONFIRMED HUMAN CASES
- **11** HUMAN DEATHS

**CURRENT NEEDS**

- Finalize the laboratory training curriculum so it can be adopted and used for expanded training in Kenya and other countries, including those at risk of RVF or other viral haemorrhagic fevers.
- Hold additional training programmes to strengthen RVF laboratory services, preparedness and surveillance in the East African Region.
- Support institutionalization of the ‘One Health’ approach to disease surveillance in the region.
- Support stockpiling of laboratory supplies to strengthen preparedness and ensure promptness of responses to future outbreaks.
Key Challenges

▶ Given the huge economic impact RVF has on livestock, some communities are reluctant to cooperate with health administrators during outbreaks because of the fear of a slaughter ban.

▶ RVF is a seasonal disease and biomedical companies only produce laboratory reagents on demand. This can cause significant delays in the delivery of supplies to laboratories and health facilities.

Training

▶ A total of 123 national, county and sub-county disease surveillance officers (from 14 sub-counties) and 52 laboratory managers and officers (from 26 counties) were trained in event-based surveillance (EBS) structure and processes, EBS best practices, the One Health approach to early detection, use of electronic tools in EBS, and EBS signals and reporting forms.

Laboratory Services

▶ 52 laboratory managers trained in the fundamentals of arboviruses and viral haemorrhagic fevers with emphasis on RVF, biosafety and biosecurity practices, consistent and effective use of personal protective equipment, diagnostic principles of RVF, testing algorithm, reporting and information management, and use of data collection and management tools.

▶ Supported the development of a draft laboratory training curriculum.

▶ Procured and supplied laboratory reagents and kits, specifically: human anti-RVF virus IgG ELISA quantitative kits; human dengue virus IgM ELISA kits; chikungunya virus IgM human ELISA kits; and zika virus IgM human ELISA kits.

Contact Tracing and Surveillance

Supported training of 19 national surveillance officers and 104 county and sub-county disease surveillance officers on EBS.

Risk Communication

▶ Supported the development, printing and distribution of RVF risk communication and awareness materials:
  » RVF fact sheet in Kiswahili (20,000 copies);
  » RVF fact sheet in English (15,000 copies);
  » RVF posters (15,000 copies).

MAJOR RISK

Kenya shares porous borders with Somalia, Sudan and Uganda all of which have had Rift Valley Fever outbreaks. Given the high transboundary cattle movement within these borders, there is the likelihood of a re-occurrence and spread across countries.