

## UN Approach to Screening, Prophylaxis and Vaccination of Personnel to Prevent Introduction of Cholera Through Peacekeeping Deployments

## Overview:

In October 2010, the UN deployed peacekeepers from Nepal to Haiti as a part of a regular six-month rotation. The peacekeepers were not tested or treated for cholera, and were stationed on a base that discharged untreated human waste into a tributary to Haiti's largest waterway. This resulted in an unprecedented outbreak of cholera in Haiti, that has since become the worst single-country cholera epidemic in the world. 9,000 people have died since 2010, and over 750,000 have sought hospital care. The epidemic continues to ravage Haiti.

Experts and advocates have called on the UN to revise its pre-deployment medical protocol and institute policies that will help prevent future transmission of cholera into vulnerable host countries, including screening, vaccinations and prophylactic treatment of peacekeepers. The UN has adopted some policy changes to this effect, but rejected others in a process void of transparency and showing little interest in advancing evidence-based solutions. A new study from Yale University now finds those interventions would have been cheap and effective at preventing the cholera outbreak in Haiti.

## **Timeline:**

**1995** – 1<sup>st</sup> ed. Medical Support Manual for United Nations Peacekeeping Operations. The Medical Support Manual establishes minimum medical requirements that troop-contributing countries (TCC) must follow before they deploy peacekeepers.

**1999** – 2<sup>nd</sup> ed. Medical Support Manual for United Nations Peacekeeping Operations

- Cholera is only mentioned once, and only as part of an annex relating to post-deployment illness.
- Risks of disease introduction by peacekeepers not addressed.
- TCCs following the Manual would test for cholera only if peacekeepers are showing symptoms at the time of a generalized medical exam, ignoring high rate of asymptomatic carriage.

2004 - UN establishes MINUSTAH, the UN Stabilization Force for Haiti.

Jan 2010 – 7.0 magnitude earthquake devastates Haiti, increasing Haiti's vulnerability to waterborne disease.

Oct 2010 - Cholera breaks out in Haiti

Jan 2011 - UN appoints an Independent Panel of four global experts to study the origins of cholera in Haiti

**May 2011** –Independent Panel issues report demonstrating that cholera outbreak was due to MINUSTAH's introduction of a Nepalese strain of cholera into a tributary flowing outside a MINUSTAH base. Report issues seven recommendations to prevent future introduction of cholera by UN peacekeepers. Recommendations include:

- 1) The Haiti cholera outbreak highlights the risk of transmitting cholera during mobilization of population for emergency response. To prevent introduction of cholera into non-endemic countries, United Nations personnel and emergency responders traveling from cholera endemic areas should either receive a prophylactic dose of appropriate antibiotics before departure or be screened with a sensitive method to confirm absence of asymptomatic carriage of Vibrio cholerae, or both.
- 2) United Nations missions commonly operate in emergencies with concurrent cholera epidemics. All United Nations personnel and emergency responders traveling to emergencies should receive

<sup>&</sup>lt;sup>1</sup> https://www.un.org/News/dh/infocus/haiti/UN-cholera-report-final.pdf

prophylactic antibiotics, be immunized against cholera with currently available oral vaccines, or both, in order to protect their own health and to protect the health of others.

**May 2011** – UN convenes "a senior-level integrated Task Force" to examine recommendations and ensure "prompt and appropriate follow-up". No information is publicly made available as to the task force's membership, terms of reference, or procedures.

May 2011-2014 – No information is made publicly available as to the Task Force's progress or findings.

**May 2013 –** Physicians4Haiti, an organization of health professionals working in Haiti, issues report card that finds that the UN has not implemented the most effective, no-cost recommendations from their own report on the outbreak.<sup>3</sup>

**2014 –** UN quietly posts a "Fact Sheet" on its follow-up on the recommendations issued by the UN Independent Panel.<sup>4</sup> Document announces the rejection of recommendations regarding prophylaxis and screening based on evaluations of the Task Force.

- Cites Dec 2011 closed-door PAHO/WHO Expert Consultation on Pharmacological Measures for Prevention of Cholera Introduction in Non endemic Areas as support for rejecting prophylaxis and screening" as basis for rejecting prophylaxis recommendation. Notes lack of evidence and divergent expert views on efficacy.
- Experts who participated in the consultation were never publically identified, and no follow-up activities were proposed to remedy evidence gap through further study.
- Final Report (PAHO/HSD/IR/A/00112) never publically released.

**Nov 2015** – 3<sup>rd</sup> Medical Support Manual for United Nations Peacekeeping Operations (now "United Nations Field Missions") is released.

- New edition explicitly acknowledges the public health risks peacekeepers may pose to vulnerable populations, stating that the UN should be "mindful of the danger inherent in the introduction of diseases into the host country's environment, particularly where such diseases are assumed to be non-existent prior to peacekeeping. This is especially important for communicable diseases such as cholera"
- The updated manual makes cholera vaccination mandatory for all peacekeepers being deployed. It contains a training proposal for personnel on cholera prevention and hygiene awareness. It also explicitly identifies cholera as a medical condition precluding participation in peacekeeping operations.
- However, it does not include recommendations around cholera prophylaxis or screening that would render "precluding participation" of cholera carriers feasible.

**Jan 2016** – Modeling Study by Yale University shows that screening and prophylaxis would have been highly effective in preventing cholera

<sup>3</sup> http://www.iidh.org/wp-content/uploads/2013/05/P4H-UN-report-card.pdf

<sup>&</sup>lt;sup>2</sup> http://www.un.org/press/en/2011/sgsm13543.doc.htm

<sup>4</sup> http://www.un.org/News/dh/infocus/haiti/Follow-up-to-Recommendations-of-IPE.pdf