Vimbai Chasi. Tracing the progression of measles outbreak risk: an exploratory and descriptive study of the City of Cape Town, South Africa. (Mphil in Disaster Risk Science, 2012).

Contemporary studies on measles outbreaks routinely acknowledge the sweeping accomplishments of global, national and district immunisation initiatives. However, they simultaneously report on failures. These failures result in global resurgences of measles outbreaks. This 'global challenge' towards its elimination demonstrates that measles outbreaks are not a problem of any one country/region/continent alone.

This problem, normally examined as a public health concern was reframed in this study and was examined through a disaster risk lens. As current risk reduction approaches were transdiciplinary, and allowed for investigation of multiple risk factors, the study reported efforts to test whether a more inclusive and non-sectorally biased approach would bring insights in to the progression of measles outbreak risk within the City of Cape Town (CoCT), South Africa. Therefore, the study's reconceptualisation necessitated the use of concepts such as risk governance deficits and disaster risk reduction (drr) to respectively describe the progression of measles outbreak risk and to explain how outbreak risk can be better managed.

The study employed a mixed methods approach to enquiry. Consequently, to differentiate measles outbreaks from sporadic and non-epidemic occurrences and characterise measles outbreaks, quantitative data on measles cases from 2000-2011 was collected from the NICD and the City of Cape Town's (CoCT) City Health department. Furthermore to identify and differentiate key health sectoral shortcomings and risk governance deficit areas associated with the progression of measles risk and outbreak management, qualitative methods were employed, these consisted of in-depth interviewing of key informants, participation in a national Measles symposium and intense document review.

The study revealed that the nature of measles outbreaks is evolving. This is because outbreaks were recognised as becoming increasingly protracted, extending beyond more sub-district boundaries and increasing in their intensity of attack, subsequently needing more resources to be controlled and threatening more lives.