



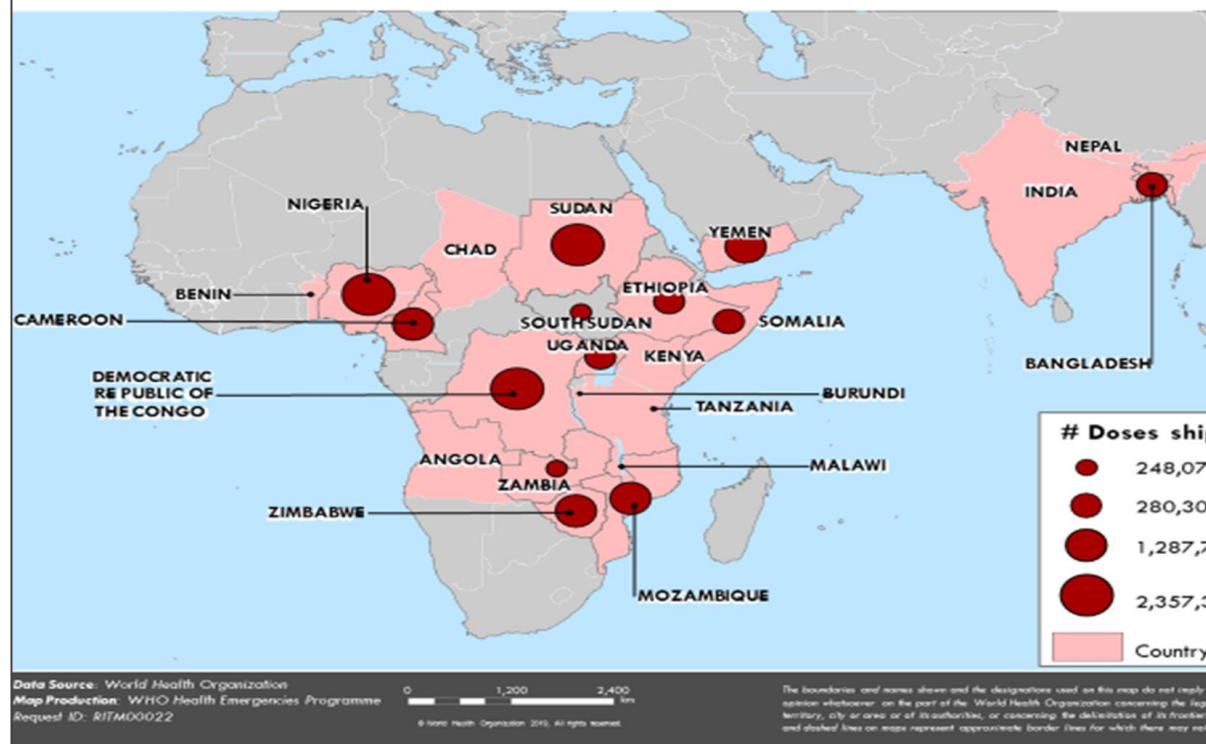
GLOBAL TASK FORCE ON  
**CHOLERA CONTROL**

**OCV WORKING GROUP UPDATE**  
**GTFCC ANNUAL MEETING — 20 OCTOBER 2020**

Kashmira DATE

## Countries reporting cholera cases in 2019

/vaccine used



Achieving consensus on the conditions and procedures for accessing the OCV stockpile

Reviewing success stories of OCV implementation and using them to help support further campaigns

Continuing work on the integration of OCV with provision of safe water, sanitation and hygiene (WASH)

Strengthening cholera surveillance in countries and globally, and monitoring and evaluation of OCV campaigns

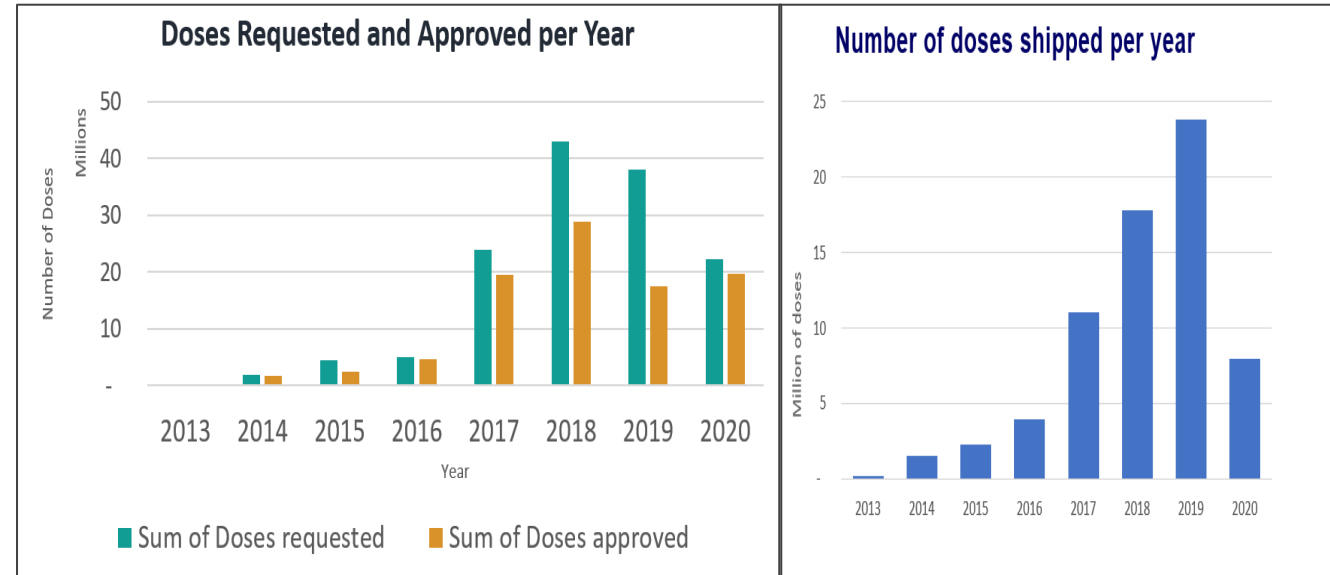
Further development of the OCV research agenda in partnership with the Wellcome Trust, and identification of further opportunities to implement research

**OCV WORKPLAN —  
RECOMMENDATIONS FROM  
THE 2019 ANNUAL MEETING**



# KEY ACHIEVEMENTS (1)

- 2020: around 8 million doses (3.5 for outbreak response)
- Response to outbreaks: Reactive campaigns (DRC, Uganda, Mozambique, Cameroon)
- Request for preventive campaigns (**19.7 million doses approved**): Yemen, Malawi, DRC, Zanzibar, Zambia
- Probable preventive requests: Ethiopia, Sudan and Kenya
- Campaigns (Oct-Dec 2020): Malawi, Zambia, DRC, Zanzibar



## KEY ACHIEVEMENTS (2)

- OCV coverage surveys – inclusion of WaSH assessments (WaSH WG meeting)
- Gavi requests for proposals for assessing OCV impact – proposal(s) under finalization
- OCV plans included in National Cholera Control plans – Zambia, Tanzania
- Research agenda development with the GTFCC and Wellcome Trust

### REQUEST FOR PROPOSAL

“ASSESSMENT OF IMPACT OF ORAL CHOLERA VACCINE WHEN USED PRE-EMPTIVELY IN CHOLERA HOTSPOTS OR REACTIVELY FOR OUTBREAK RESPONSE”

NOVEMBER 2019

RFP-“GAVI-RFP-2019-062”



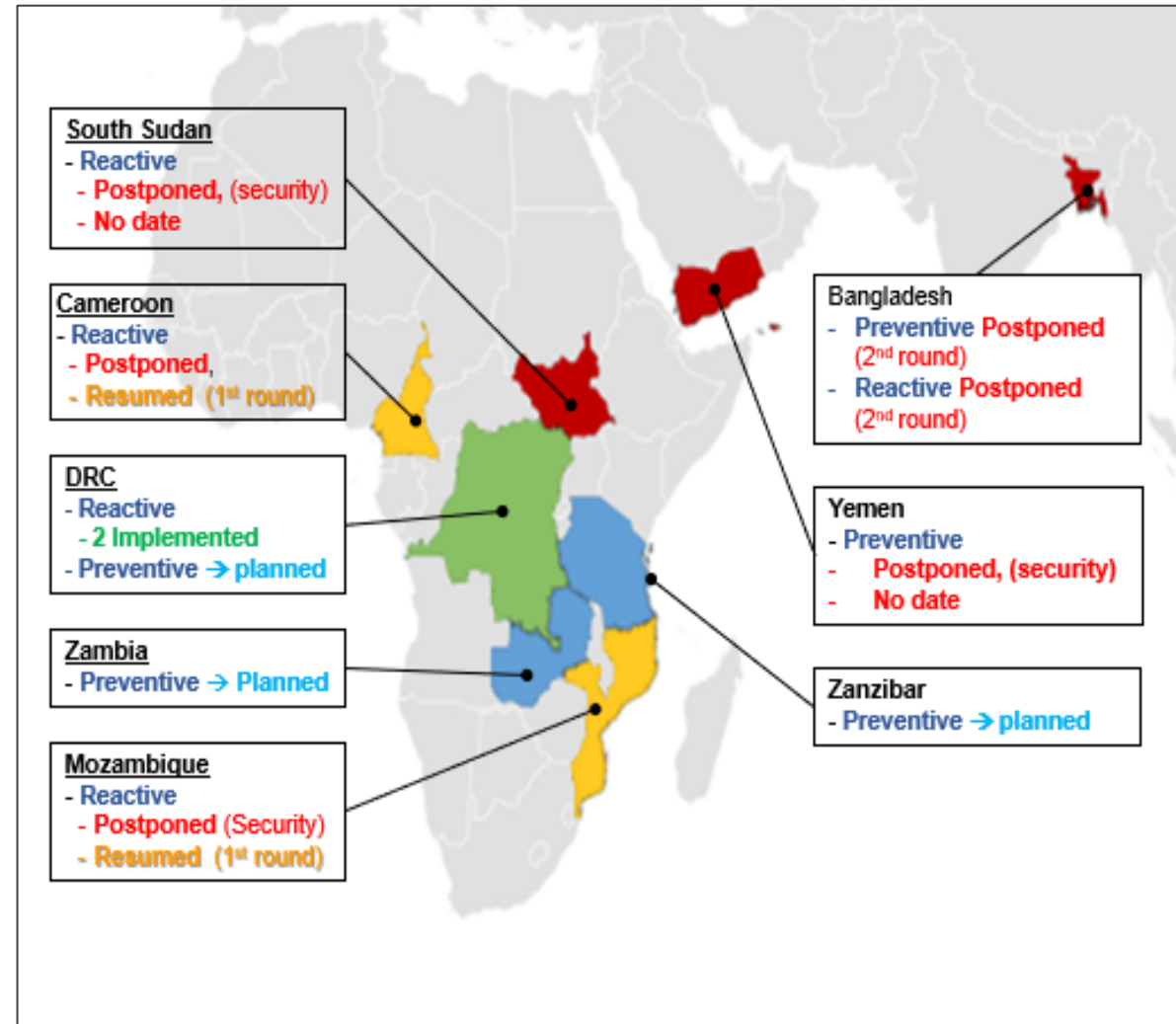
# CHALLENGES

## Covid-19

- Postponed campaigns: Bangladesh, South Sudan, Yemen
- Delayed campaigns: Mozambique, Malawi
- Reduction in production: (euvichol:10.6 millions), Shanchol (5.3 million)
  - Actual stock: 8.1 million doses
- Implementation time for outbreak response: DRC, Mozambique, Cameroon
- Insecurity: Mozambique, DRC, South Sudan

## Others

- Guidance for hotspot prioritization for OCV use still in process
- Studies/campaign evaluations delayed
- No implementation of preventive campaigns although requested: Yemen, South Sudan



## 2020–2021 PRIORITIES

- ✓ Criteria for OCV prioritization – aligning with hotspots mapping
- ✓ Integration of OCV use in NCPs
- ✓ Implementation of more preventive campaigns
- ✓ Continue close engagement with Gavi
- ✓ Collaboration with CSP: requests, implementation, and M & E for campaigns
- ✓ Continue collaboration with other GTFCC working groups
  - Surveillance WG: targeting for hotspots, impact assessments
  - WASH WG: OCV-WASH integration/linkages
- ✓ Build adequate monitoring, evaluation and ongoing research plans (research agenda priorities)

# WORKING GROUP MEMBERSHIP (OCV)

**Bill & Melinda Gates  
Foundation  
Centers for Disease Control  
and Prevention  
Epicentre  
Fogarty International Center,  
NIH  
Gavi, the Vaccine Alliance  
GHESKIO Centers  
Icddr,b  
ICMR -National Institute of  
Cholera and Enteric Disease**

**International Federation of  
Red Cross and Red Crescent  
International Medical Corps  
International Rescue  
Committee  
International Vaccine  
Institute  
Johns Hopkins University  
Medair  
Médecins Sans Frontières  
Fondation Merieux**

**Nigeria Centre for Disease  
Control  
PATH  
Save the Children  
Task Force for Global Health  
Translational Health Science  
and Technology Institute  
UNHCR  
UNICEF  
UNICEF Supply Division  
WaterAid  
WHO**

# Thank you

Together we can  
**#endcholera**



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