



GLOBAL TASK FORCE ON
CHOLERA CONTROL

UPDATE FROM THE HOTSPOT SUB-GROUP
SURVEILLANCE WG WEBINAR

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PRESENTATION OUTLINE

- **Workplan and progress**
- **Review of previous hotspot identification exercises**
- **Draft revised framework for hotspot and pillar assessment**
 - ✓ **General approach**
 - ✓ **Step 1. Epidemiological assessment**
 - ✓ **Step 2. Assessment for each NCP pillar**
- **Next steps**

WORKPLAN, HOTSPOT SUB-GROUP

❖ Main objectives

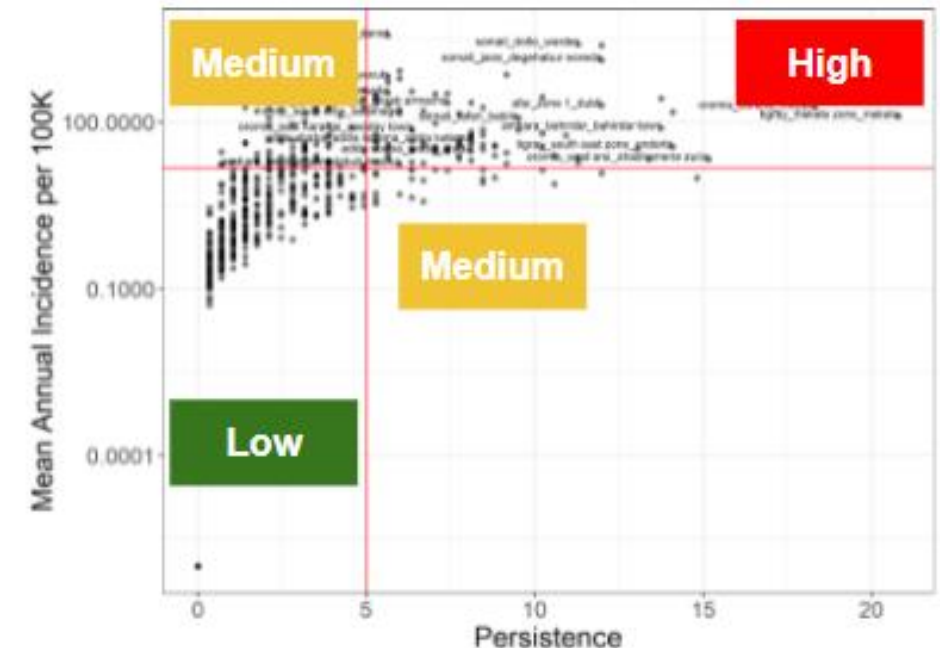
- **Revise GTFCC hotspot methodology**

- Refine hotspot identification methodology
- Develop guidance for assessing pillars

- Develop principles / criteria for the **strategic use of the OCV stockpile** for preventive vaccination (support to the OCV WG)
- Contribute to the development of minimum standards for **cholera surveillance in hotspots** (support to surveillance & monitoring and outbreak sub-groups)

CURRENT GTFCC HOTSPOT METHODOLOGY (FROM 2019)

- Two indicators
 - Mean annual incidence (MAI)
 - Persistence (% of weeks with suspected cases)
- Recommended 5-year period of analysis
- Countries decide on their own thresholds for each indicator
- Districts are placed into 3 priority groups



PROGRESS OF THE HOTSPOT SUB-GROUP

- **Review** of historical hotspot identification exercises
- Agreement on **guiding principles** of a revised methodology
- Agreement on **general framework** of draft revised methodology
- Ongoing: Identification of **indicators to assess pillars** under the revised methodology

REVIEW OF HISTORICAL HOTSPOT IDENTIFICATION EXERCISES

Goal and methods
Findings

REVIEW OF HOTSPOT IDENTIFICATION EXERCISES

Goal and method

- **Goal:** Identify gaps and challenges that had occurred with previous hotspot identification exercises at country level to inform develop of the revised methodology
- Developed a standardized questionnaire to assess how the hotspot identification was conducted
- Members of the subgroup took charge of completing the questionnaire
 - 22 analysis reviews were conducted
 - requested information from individuals / MOH contacts involved with the exercise
- Synthesized information collected across all 22 reviews

REVIEW OF HOTSPOT IDENTIFICATION EXERCISES

Findings (1/2)

Data Challenges

- Data collection takes 1-6 months
- Missing geographic completeness and historical surveillance data
- No documentation on changing case definitions

REVIEW OF HOTSPOT IDENTIFICATION EXERCISES

Findings (2/2)

Methodology challenges

- Lack of guidance on setting thresholds for indicators
- Need for better integration with non-epi (e.g., risk factor) indicators
- Need to clarify terminology (e.g., which districts are “hotspots”?)
- Uncertainty on how to extend hotspot analysis to target interventions (e.g., should all high priority locations be targeted for all interventions?)

DRAFT REVISED FRAMEWORK FOR HOTSPOT AND PILLAR ASSESSMENT

Guiding principles

General approach

Step 1. Epidemiological assessment

Step 2. Assessment for each NCP pillar

GUIDING PRINCIPLES FOR REVISED FRAMEWORK

Based on hotspot review

- **Simplicity** of approach
- **Generalizability** to different countries / cholera settings
- **Flexibility** to accommodate different indicators and country priorities
- Facilitation of targeted, **long-term planning** (not emergency response)
- **Supports decision makers** for further NCP development

DRAFT REVISED FRAMEWORK

General approach

STEP 1 Epidemiological assessment

Identify areas with high, medium,
and low cholera burden

Step 1 - Illustrative outcome

District	Cholera Burden
1	Medium
2	High
3	High
4	Low
5	Low
6	Medium
7	Medium

DRAFT REVISED FRAMEWORK

General approach

STEP 1

Epidemiological assessment

Identify areas with high, medium,
and low cholera burden



STEP 2

Assessment for each NCP pillar

For each NCP pillar, assess the need
for future interventions or additional
data collection

DRAFT REVISED FRAMEWORK

General approach

Step 2 pillar assessment - Illustrative outcome

District	Surveillance	WASH	OCV	Case Management	Community Engagement
1	Yellow	Dark Red	Yellow	Yellow	Dark Red
2	White	Dark Red	Dark Red	Yellow	White
3	White	Yellow	Dark Red	Dark Red	Dark Red
4	Dark Red	Yellow	White	Dark Red	Dark Red
5	Dark Red	White	White	White	White
6	Yellow	Dark Red	Yellow	White	Yellow
7	White	White	Yellow	White	White

Dark Red	Ranked as a district with acute need for interventions to strengthen this pillar
Yellow	Requires more data collection for further assessment of this pillar

HOW DOES THIS FIT IN WITH NCP DEVELOPMENT?

Inception

1. Declaration of country commitment
- 2. Assessment of hotspots and pillars (focus on needs)**
3. Situational analysis
4. Defining leadership and coordination mechanisms
5. Formulation of a NCP goal

Development

Development of operational cholera control plans covering all pillars

STEP 1. EPIDEMIOLOGICAL ASSESSMENT

Motivation and Goals

- Identify areas with high, medium, and low cholera burden based on epidemiological data
- Ensure a minimum, standard set of requirements for data and analysis
- Maintain continuity with existing “GTFCC hotspot methodology”
- Incentivize improved surveillance data collection and flexibility to accommodate confirmed case data

STEP 1. EPIDEMIOLOGICAL ASSESSMENT

Data & Indicators

Details have not been decided. Testing will take place over the summer

Two primary indicators: **mean annual incidence & persistence**

Level	Data Description
Improved	Minimum-Level data + Systematically collected weekly confirmed cases and total number of tests performed, reported by district
Basic	Minimum-Level data + Presence / absence of at least one confirmed cholera case, reported by district
Minimum	Weekly suspected cases reported by each district for the past 3-7 years (or as available)

STEP 1. EPIDEMIOLOGICAL ASSESSMENT

Outcome

Details have not been decided. Testing will take place over the summer

- All districts in the country will be categorized into high, medium, and low burden groups (“EA groups”)
- This product will feed into Step 2, the assessments for each pillar

STEP 2. ASSESSMENT FOR EACH NCP PILLAR

Motivation and Goals

- Develop evidence-based guidance to assess district needs for each pillar, which will be used to inform NCP development
- Combine the epidemiological assessment of burden (from Step 1) and pillar indicators to assess district needs
- Recognize that districts may have different needs, even if they have similar cholera burden
 - Not all “high burden” districts may need the same combination of multi-sectoral interventions

STEP 2. ASSESSMENT FOR EACH NCP PILLAR

General approach

Details have not been decided. Testing will take place over the summer

Identification in progress with Working Group representatives

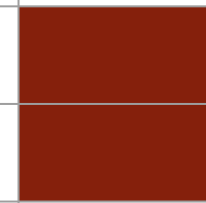
Epi Assessment Groups

District	Cholera Burden
1	Medium
2	High
3	High
4	Low
5	Low
6	Medium
7	Medium

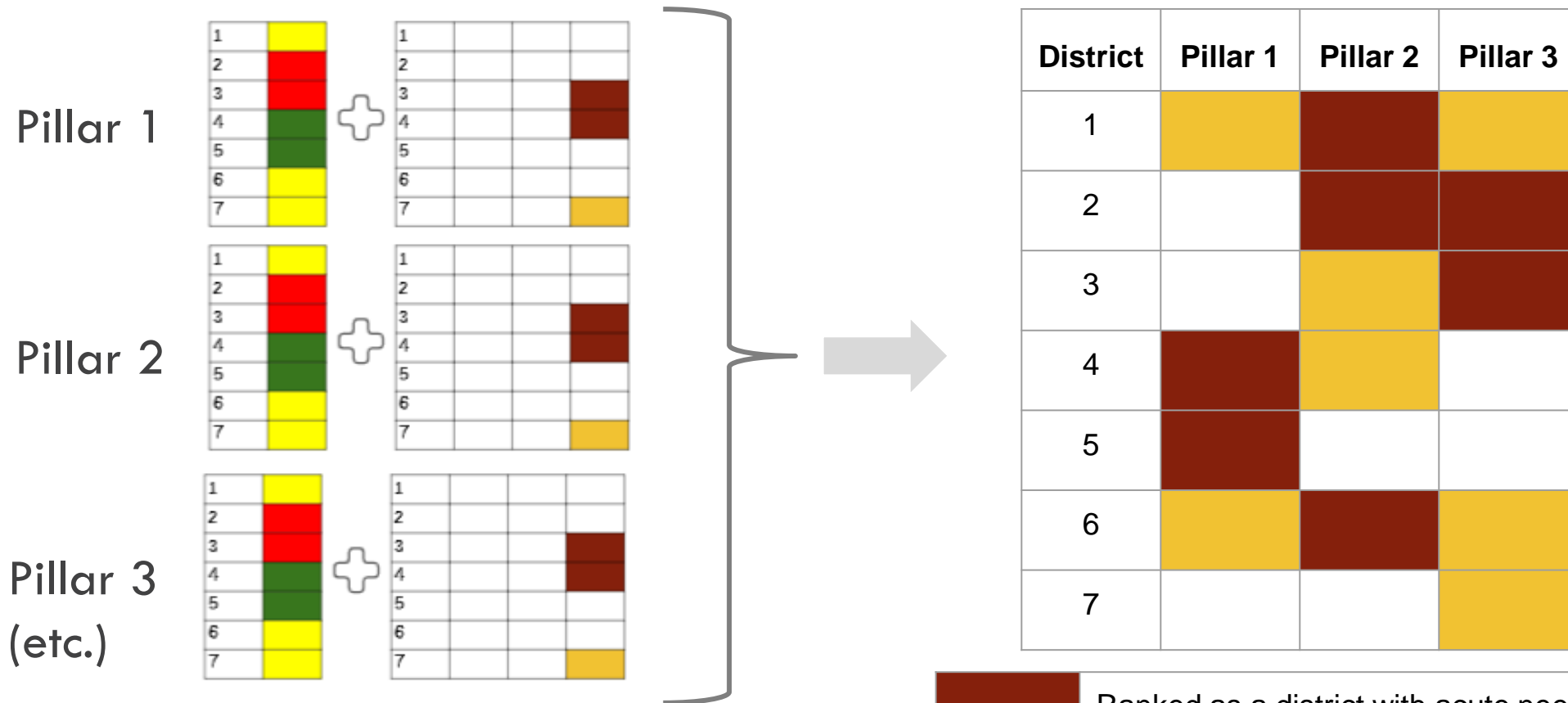


Pillar indicators

District	Indicator 1	Indicator 2	Index
1			
2			
3			
4			
5			
6			
7			



STEP 2. ASSESSMENT FOR EACH NCP PILLAR



Relative importance of EA & indicators could differ by pillar

Testing to take place over the summer

	Ranked as a district with acute need for interventions to strengthen this pillar
	Requires more data collection for further assessment of this pillar

STEP 2. ASSESSMENT FOR EACH NCP PILLAR

Outcome

- A ranked list of districts to be prioritized under each NCP pillar
- **Multiple pillars may be prioritized in a single district**, and this will be encouraged
- Not all districts need to be ranked
- This will inform detailed intervention planning during NCP development phase

DRAFT REVISED FRAMEWORK

Summary

STEP 1

Epidemiological assessment

Identify areas with high, medium, and low cholera burden

- **New** Incorporate confirmed cases for higher quality indicators (when available)
- **New** Guidance for setting thresholds

STEP 2

Assessment for each NCP pillar

New For each NCP pillar, assess the need for future interventions or additional data collection

- **New** Identify a few key indicators for each pillar
- **New** Guidance for combining the indicators

NEXT STEPS |

NEXT STEPS

- **April-May**
 - WG representatives to develop proposal of **indicators for each pillar** (in progress)
 - Discussion of key pillar indicators with hotspot subgroup and WG representatives
- **June-July**
 - Proposal of multiple **scoring methods** for step 1 and step 2
 - Compare methods with **data-driven exercises** to find consensus on scoring methods
- **August**
 - First draft for sharing and discussion with other subgroups and WGs
 - Discuss the **format of a revised “tool”**



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THANK YOU |