



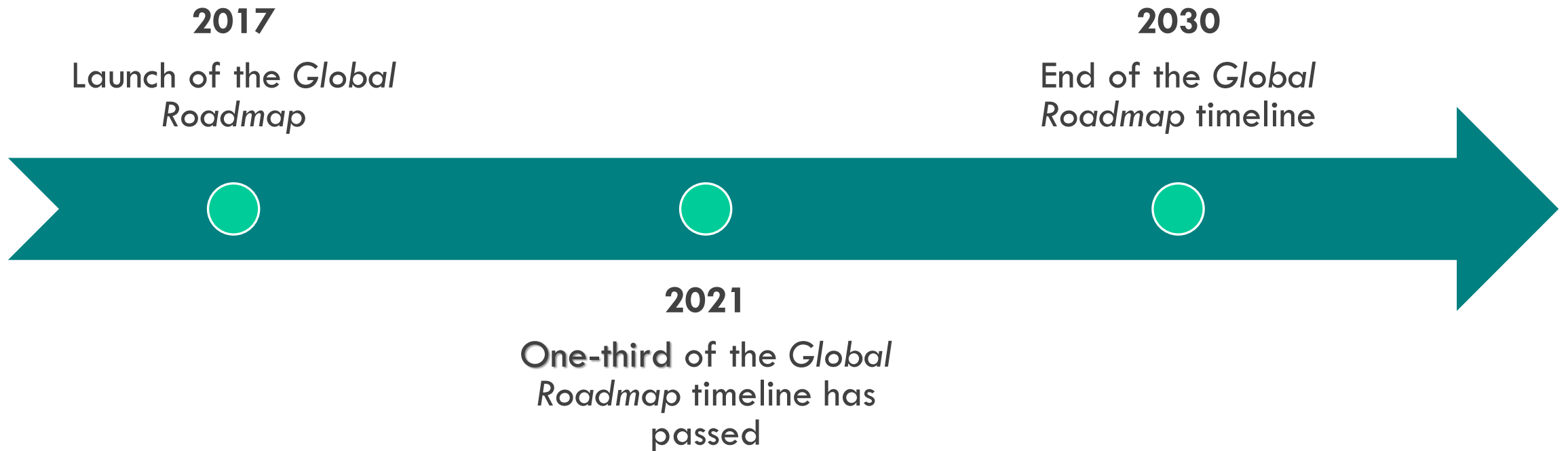
GLOBAL TASK FORCE ON
CHOLERA CONTROL

ASSESSING PROGRESS

GTGCC ANNUAL MEETING — 8-10 JUNE 2021

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GTGCC Secretariat

ASSESSING PROGRESS



OBJECTIVES OF THE SESSION

- Recap the Monitoring and Evaluation provisions, as described in the *Global Roadmap*
- Assess the *Global Roadmap* implementation to date
- Recommend “next steps” to operationalize the Monitoring Framework



1. ROADMAP — MONITORING & EVALUATION

- The *Global Roadmap* was launched and endorsed by countries in 2017
- Overall objective: a **90% reduction in cholera-related mortality by 2030**
- Two key questions: (i) implementation, (ii) assessing progress
- Monitoring Framework articulated around the three axes of the *Roadmap*
 - For each axis, a series of indicators has been identified



2. MONITORING FRAMEWORK



2. MONITORING FRAMEWORK

PRINCIPLES	ENABLING FACTORS	BASELINE (2017)	TARGETS			INDICATORS	OBJECTIVES	GOALS	IMPACT
GOALS	AXIS 1 Countries detect outbreaks early and respond immediately to contain them		AXIS 2 Countries prevent disease occurrence by targeting multi-sectoral interventions in cholera hotspots			AXIS 3 Technical support, resource mobilization, and partnership are coordinated at local and global levels			

2. MONITORING FRAMEWORK

PRINCIPLES		ENABLING FACTORS	BASELINE (2017)	TARGETS		INDICATORS	OBJECTIVES	GOALS	IMPACT
				2020	2025	2030			
OBJECTIVES	Cholera-affected Countries:			Cholera-affected Countries:			The GTFCC:		
	1a. Implement an early warning surveillance system in all hotspots 1b. Ensure and maintain workforce capacities to detect, confirm, and respond to outbreaks 1c. Stock and pre-position essential supplies; plan for contingencies 1d. Establish WASH and Health Rapid Response Teams 1e. In the event of a cholera alert, immediately implement emergency WASH, health, and community-based interventions to prevent disease spread, including large scale OCV campaigns.			2a. Identify and prioritize cholera hotspots 2b. Implement adapted long-term sustainable WASH interventions 2c. Utilize OCV effectively at scale in conjunction with other long-term strategies 2d. Implement hygiene promotion, risk communication and social mobilization strategies for strong community engagement 2e. Collaborate across borders to implement a strong sub-regional control strategy			3a. Establishes and maintains an effective coordination mechanism (including a steering committee, operative platforms and funding mechanism) that: 3b. Galvanizes political commitment to cholera control and raises the profile of cholera as a public health threat 3c. Coordinates technical support and guidance to countries 3d. Harmonizes a research agenda 3e. Supports the financing of Roadmap implementation in countries		

2. MONITORING FRAMEWORK

PRINCIPLES	ENABLING FACTORS	BASELINE (2017)	TARGETS 2020	2025	2030	INDICATORS	OBJECTIVES	GOALS	IMPACT
Reduction in cholera deaths in large uncontrolled outbreaks			Number of currently endemic countries that have eliminated cholera; Countries achieving at least 80% WASH coverage in all hot spots			Number of countries implementing a fully funded multi-sectoral cholera control plan aligned to the Global Roadmap			

2. MONITORING FRAMEWORK

PRINCIPLES	ENABLING FACTORS	BASELINE (2017)	TARGETS			INDICATORS	OBJECTIVES	GOALS	IMPACT
		2020	2025	2030					
2030	90% reduction in outbreak deaths ⁷	20 countries have eliminated cholera; 41 countries have achieved 80% WASH coverage in cholera hotspots ⁸			All 47 countries with cholera hotspots are implementing fully-funded multi-sectoral cholera control plans ⁹				
2025	50% reduction in outbreak deaths	4 countries have eliminated cholera, 25 countries have achieved 80% WASH coverage in hotspots			37 countries are implementing fully funded plans				
2020	20% reduction in outbreak deaths	1 country has eliminated cholera			12 countries are implementing fully funded plans				
BASELINE (2017)	Uncontrolled cholera outbreaks in Yemen (estimated 2,000 deaths) and the Horn of Africa (estimated 800 deaths)	47 countries remain affected by cholera			Not applicable				

	PRINCIPLES	ENABLING FACTORS	TARGETS				INDICATORS	OBJECTIVES	GOALS	IMPACT
			BASELINE (2017)	2020	2025	2030				
ENABLING FACTORS			Strong ongoing commitment from countries, partners, and donors New and existing health and WASH resources are aligned to the Global Roadmap Sufficient global supply of Oral Cholera Vaccines							
PRINCIPLES	<div><div>Country-driven</div><div>Multi-sectoral & Coordinated</div><div>Bridging Emergency & Development</div><div>Targeted to Most-affected Population</div><div>Community Engagement</div></div>									

3. OPERATIONALIZE THE M&E MECHANISM

Annual Country Reports

- ✓ Proportion of the NCP funded
- ✓ Incidence rate of suspected cholera
- ✓ Number of deaths from cholera
- ✓ OCV administrative coverage in hotspots areas vaccinated
- ✓ Proportion of people with access to safe water in hotspots
- ✓ Proportion of the population in hotspots with correct knowledge on cholera prevention

**Note: this is a non-exhaustive list; for more, see the NCP Guiding Document*

Global Annual Report on the Implementation of the Roadmap

Published on the GTFCC's website

Presented at the Annual Meeting



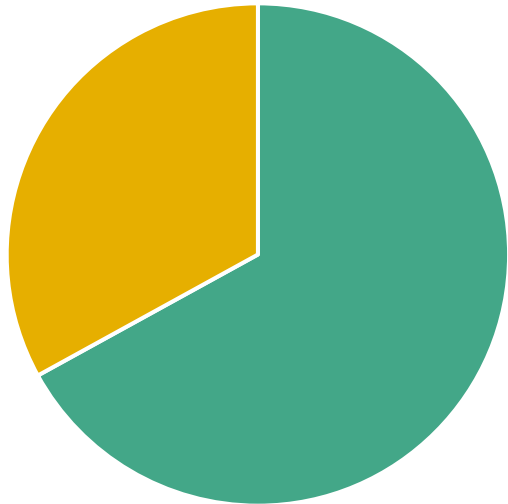
Each country designs its own national plan in the global fight against cholera

Governments, national institutions and affected communities detail the implementation of the Global Roadmap at the country level, with the support of GTFCC. National Cholera Plans (NCPs) are developed by each country according to its specific context and set appropriate targets for cholera control and elimination. A NCP may be built on or integrated into existing initiatives or programs and should not impede what has already been developed.



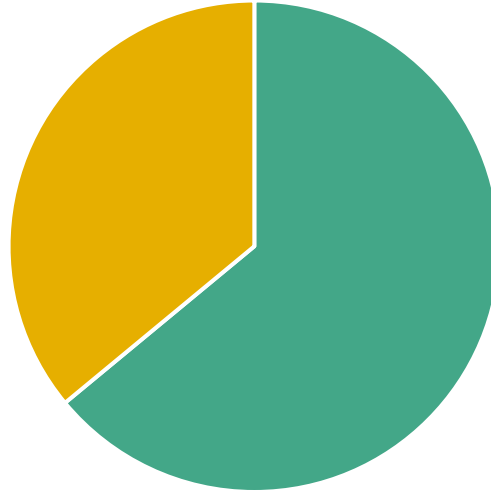
3. PRE-MEETING SURVEY - COUNTRIES' M&E

Do you currently have a monitoring and evaluation system to assess progress made in the implementation of your cholera control and prevention strategy?



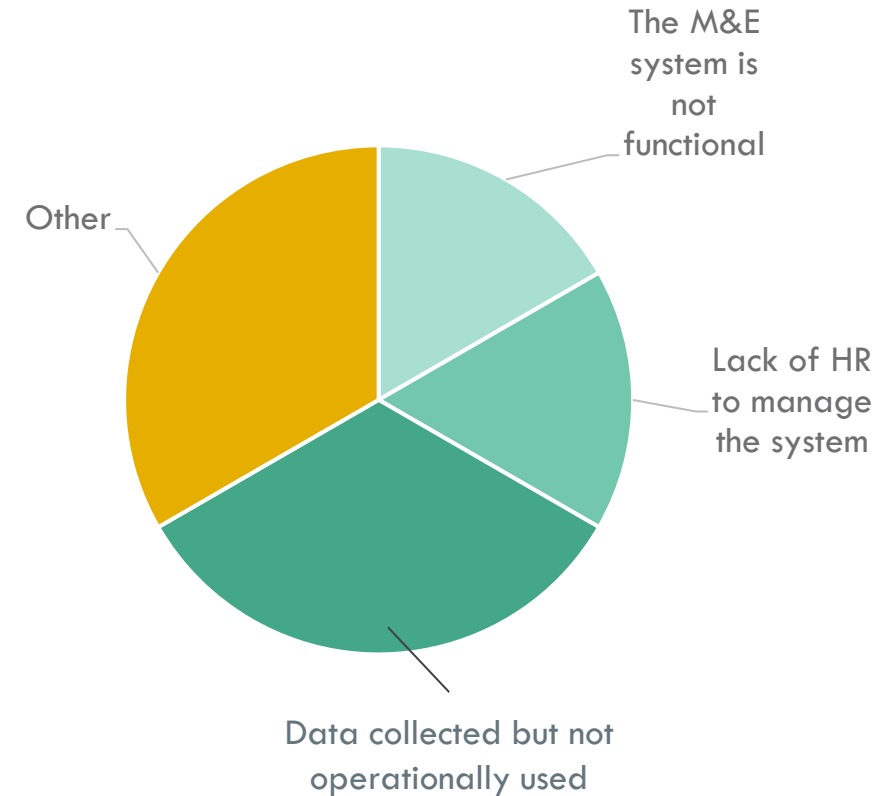
■ Yes ■ No

Is it used to inform operation decisions?



■ Yes ■ No

If not, why not?



3. PRE-MEETING SURVEY - PARTNERS' M&E

How do you monitor and/or support countries in monitoring the implementation of their cholera control and prevention strategy?



- We have our own M&E mechanism
- We use the country's M&E mechanism
- Global Roadmap outcomes are integrated in our own M&E mechanism
- Global Roadmap outcomes are integrated in the country's M&E mechanism

4. SOME IDENTIFIED CHALLENGES

- Absence of M&E mechanisms
- Coordination of the existing M&E mechanisms
 - Use of the existing monitoring frameworks (including national M&E frameworks, WHO regional frameworks, partners mechanisms etc.)
 - Harmonize M&E across programmes and departments (use data already collected and centralize data to facilitate transversal use)
- Collection, analysis and use of data (the information collected is not always used for operational purposes)
- Lack of human resources to manage the monitoring system
- Funding to support M&E

5. RECOMMENDED NEXT STEPS

- Reengage with countries to launch and implement the *Global Roadmap* monitoring framework
- Conduct initial assessments of the existing Cholera M&E mechanisms in countries and at the partner-level
→ Cooperation
- Present the first results at the 2022 Annual Meeting



5. RECOMMENDED NEXT STEPS

... Forum on Day 3



Thank you

Together we can
#endcholera



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