



GLOBAL TASK FORCE ON
CHOLERA CONTROL

GT FCC FRAMEWORK FOR THE IDENTIFICATION OF
PRIORITY AREAS FOR MULTISECTORAL INTERVENTIONS
FOR CHOLERA CONTROL

Elizabeth Lee
John Hopkins University
GT FCC sub-group lead
02 May 2023

IDENTIFICATION OF PRIORITY AREAS FOR MULTISECTORAL INTERVENTIONS (PAMIS, FORMERLY HOTSPOTS)

INTRODUCTION

ENDING CHOLERA

A GLOBAL ROADMAP TO 2030

AXIS 1

Early detection and quick response to contain outbreaks

AXIS 2

A targeted prevention strategy in cholera hotspots

AXIS 3

GTFCC support and coordination of human, technical and financial resources



Axis 2 - Targeted approach

*"The strategy calls on countries and partners to prevent cholera transmission **in areas to be prioritized for multisectoral interventions**"*

NATIONAL CHOLERA PLAN (NCP) CYCLE

1 INCEPTION

Preparatory Phases:

- Declare country commitment
- **Identify & prioritize PAMIs**
- Conduct situational analysis
- Define leadership & coordination mechanism
- Formulate goal

2 DEVELOPMENT

For Each of the Pillars:

- Formulate & prioritize activities
- Develop operational plans & associated budget
- Develop a monitoring & evaluation framework including definition of indicators & milestones

3 IMPLEMENTATION

For Each of the Pillars:

Implement according to

- Prioritized activities
- Established timelines
- Available budget

4 MONITORING & REPORTING

For Each of the Pillar:

- Conduct monitoring of indicators
- Provide an annual report of progress against targets and indicators
- Prioritize activities for next period

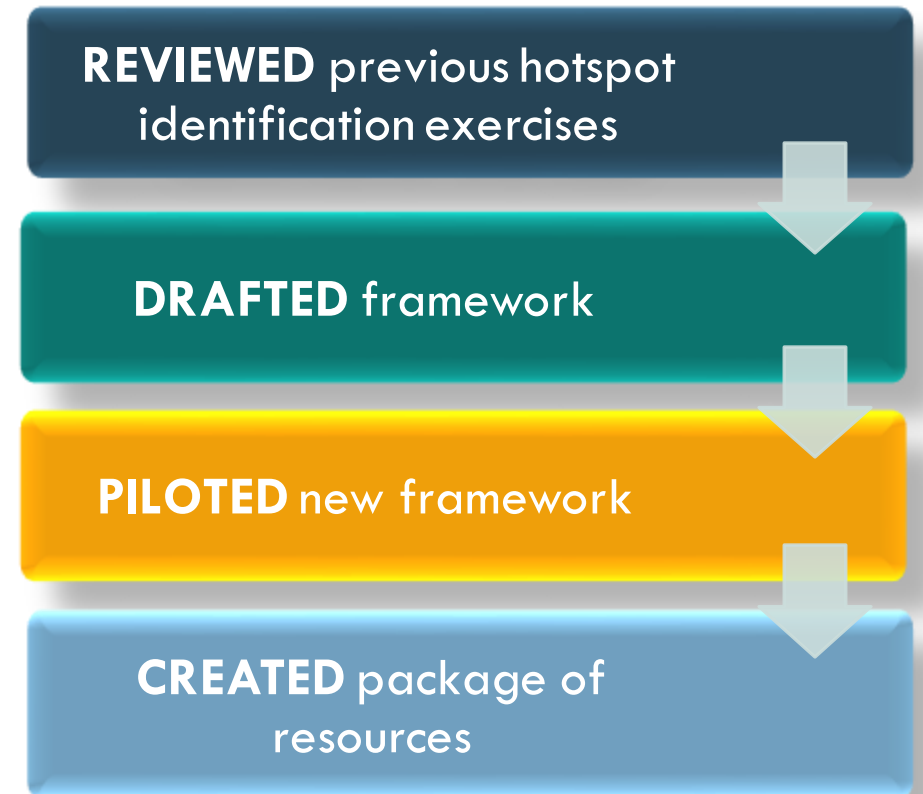
DEVELOPMENT OF A NEW FRAMEWORK

Process

RATIONALE FOR A NEW FRAMEWORK

Previous Method (2019)

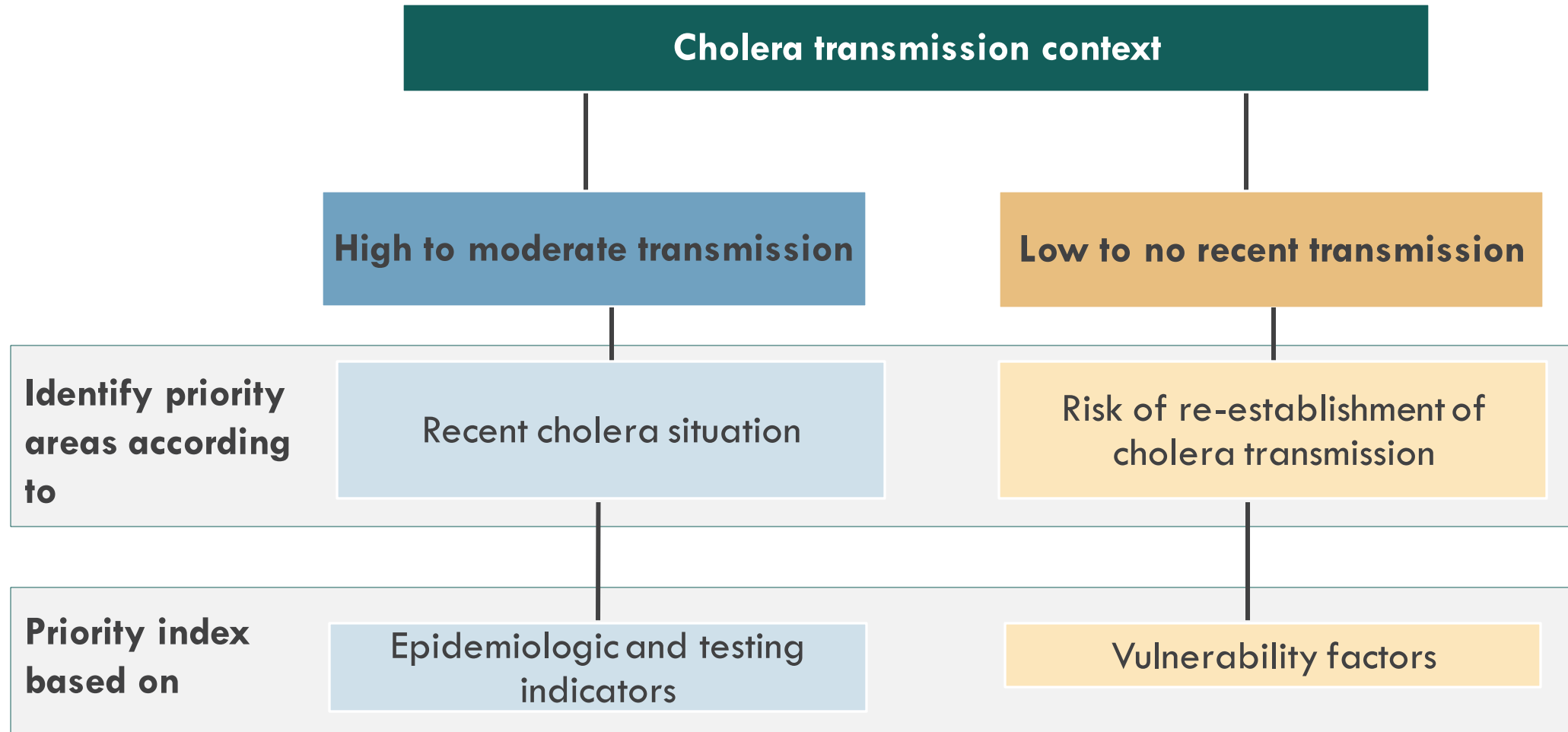
- Relied on incidence & persistence
- Lack of guidance
 - to set thresholds
 - on how to take into account additional factors
- Not applicable in countries reaching cholera elimination



Principles for PAMI guidance

- Simplicity
- Generalizability
- Flexibility
- Facilitation of targeted & long-term planning

DIFFERENT APPROACHES FOR DIFFERENT TRANSMISSION CONTEXTS



PRIORITY AREAS FOR MULTISECTORAL INTERVENTIONS FOR CHOLERA CONTROL

PRIORITY AREAS FOR MULTISECTORAL INTERVENTIONS FOR CHOLERA ELIMINATION

IDENTIFICATION OF PAMIS FOR CHOLERA CONTROL



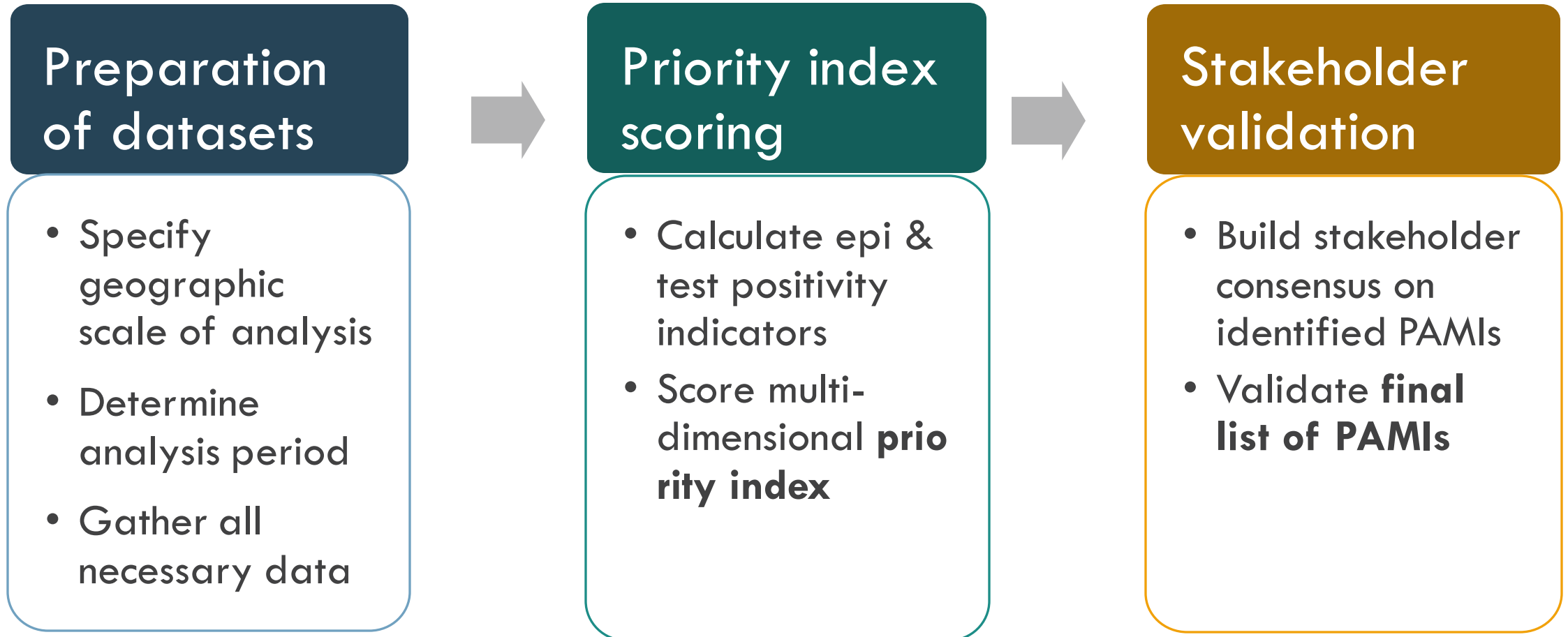
WHEN TO USE THIS METHOD

Towards the beginning of NCP inception

Indicative rule: Use in countries where cholera outbreaks were reported in more than **5%** of the geographic units over the **past 5 years**

IDENTIFICATION OF PAMIS FOR CHOLERA CONTROL

Three-step process



PREPARATION OF DATASETS



Define the administrative level of NCP operational unit



Define the analysis period (5 to 15 years)



- Compile cholera surveillance and testing data for calculation of the priority index
- Collect supporting data for the assessment of vulnerability factors (optional)



Data quality check

DATA REQUIRED FOR PRIORITY INDEX CALCULATION

Category	Data by NCP operational geographic unit
Administrative	List of NCP operational geographic units
	Geographic units in geospatial vector data (GIS format)
Demography	Population
Surveillance	Number of reported cholera cases (suspected and tested positive)
	Number of reported cholera deaths (suspected and tested positive)
Testing for cholera	Number of reported suspected cholera cases tested for cholera (regardless of the testing method)
	Number of reported suspected cholera cases tested positive for cholera

PRIORITY INDEX SCORING



Assess, and determine how to address, missing data



Score epidemiologic and test positivity indicators



Calculate priority index

EPIDEMIOLOGIC INDICATORS

Incidence

Incidence rate per population

Mortality

Mortality rate per population

Persistence

Percentage of weeks with at least one reported suspected cholera case

SCORING OF EPIDEMIOLOGIC INDICATORS

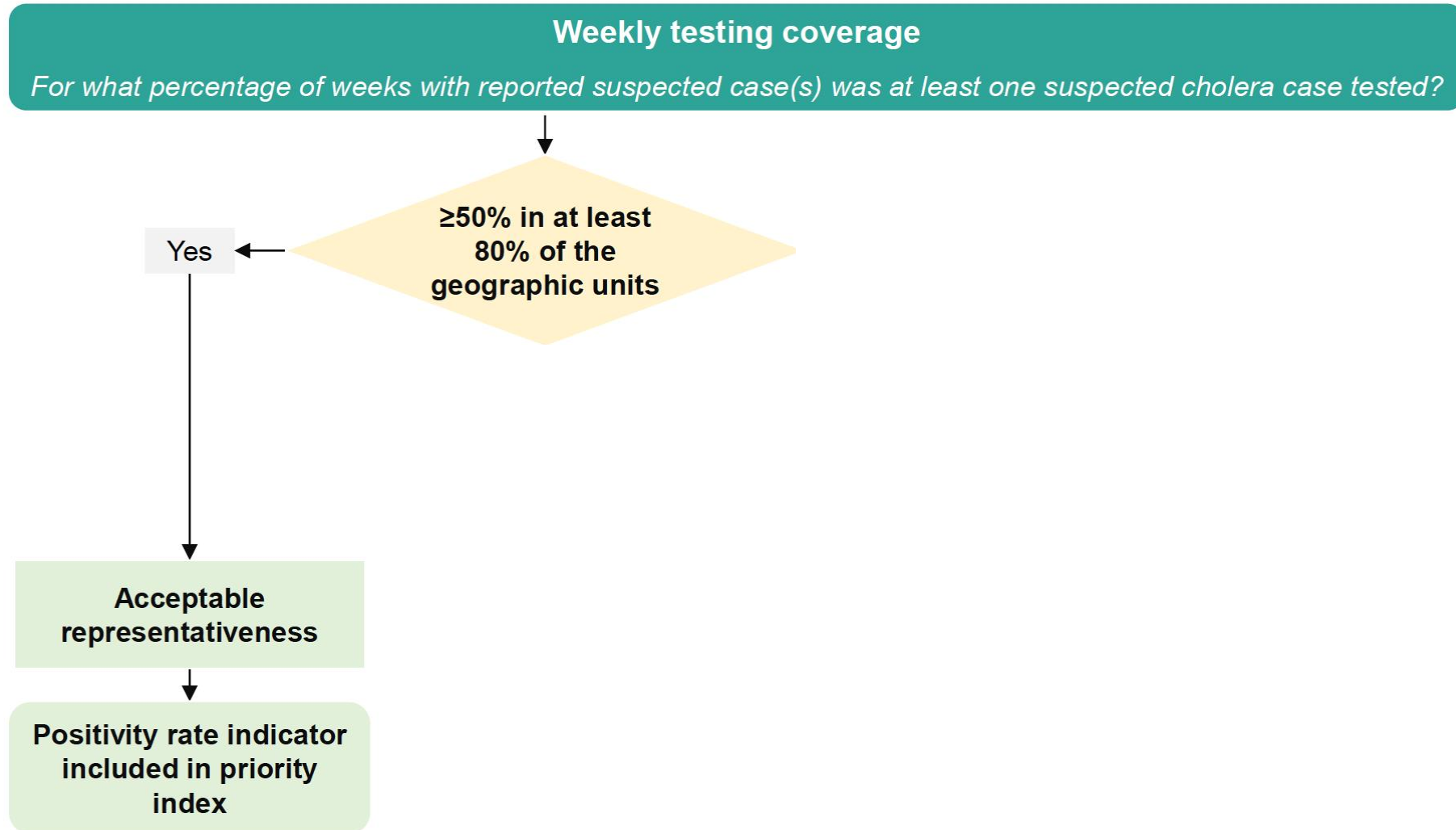
Indicator Score	0 point	1 point	2 points	3 points
Incidence	No case	>0 and <median	≥median and <80th percentile	≥80th percentile
Mortality	No death	>0 and <median	≥median and <80th percentile	≥80th percentile
Persistence	No case	>0 and <median	≥median and <80th percentile	≥80th percentile

Median and 80th percentile are calculated among NCP operational geographic units **with at least one cholera case.**

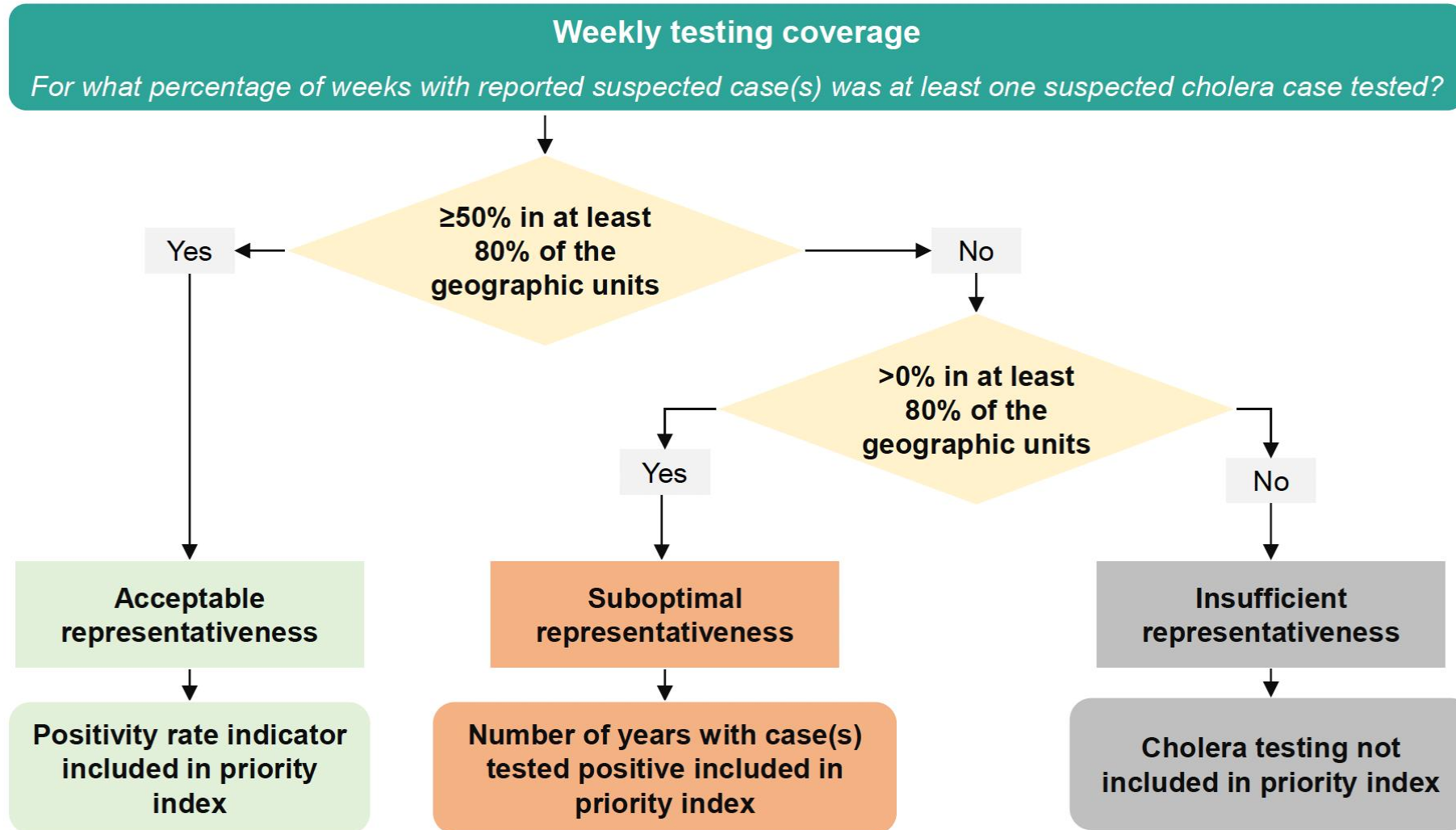
CHALLENGES IN DEFINING A TEST POSITIVITY INDICATOR

- Systematic testing for cholera is not yet common surveillance practice
- Missingness in testing could introduce biases in any indicator related to test positivity
- Assess representativeness of cholera testing to determine how test positivity should be scored

ASSESS REPRESENTATIVENESS OF TESTING INDICATOR



ASSESS REPRESENTATIVENESS OF TESTING INDICATOR



TEST POSITIVITY INDICATORS

Acceptable Representativeness

Positivity rate

Percentage of reported suspected cholera cases tested positive for cholera

Suboptimal Representativeness

Number of years with case(s) tested positive

Number of years with at least one case tested positive

SCORING OF TEST POSITIVITY INDICATOR

Weekly testing coverage	Cholera test positivity indicator	Score			
		0 point	1 point	2 points	3 points
Acceptable	Positivity rate	0%	≤ 10%	> 10% and ≤ 30%	> 30%
Suboptimal	Number of years with case(s) tested positive	0	1	> 1	NA
Insufficient	Not applicable	NA	NA	NA	NA

PRIORITY INDEX

$$\begin{aligned} \text{Priority index} = & \\ & \text{incidence score} + \text{mortality score} + \text{persistence score} \\ & + \\ & \text{test positivity score (if applicable)} \end{aligned}$$

Calculate priority index for each NCP operational geographic unit

Index range [0-12] if four indicators used

STAKEHOLDER VALIDATION



Participative workshop with multisectoral stakeholders



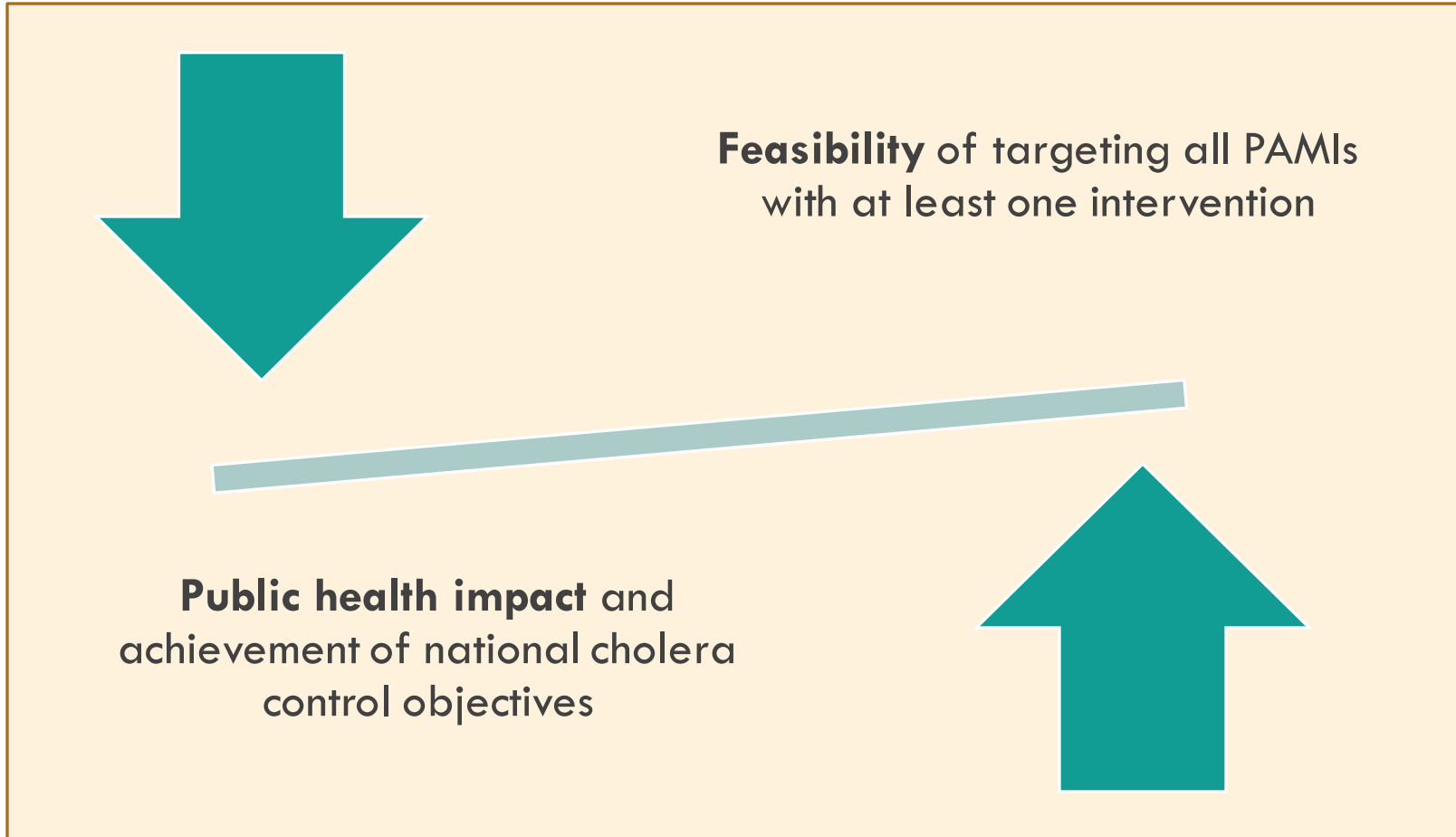
- Validate the data
- Agree on a priority index threshold value
- Assess vulnerability factors (optional)
- Develop consensus on the final list of PAMIs



Write report on PAMIs identification



Launch of next steps of NCP development



SELECTING A PRIORITY INDEX THRESHOLD VALUE

SETTING THE PRIORITY INDEX THRESHOLD VALUE

Example where threshold = 10

Priority Index values	Cumulative number of geographic units	Cumulative % of population	Cumulative % of cases	Cumulative % of deaths
12	2	2	16	10
11	7	8	40	26
10	20	25	81	47
9	35	37	93	81
8	37	39	94	84
7	47	50	98	93
6	58	60	100	98
5	63	64	100	99
4	67	69	100	100
3	72	73	100	100
2	78	79	100	100
0	100	100	100	100

ASSESSMENT OF VULNERABILITY FACTORS

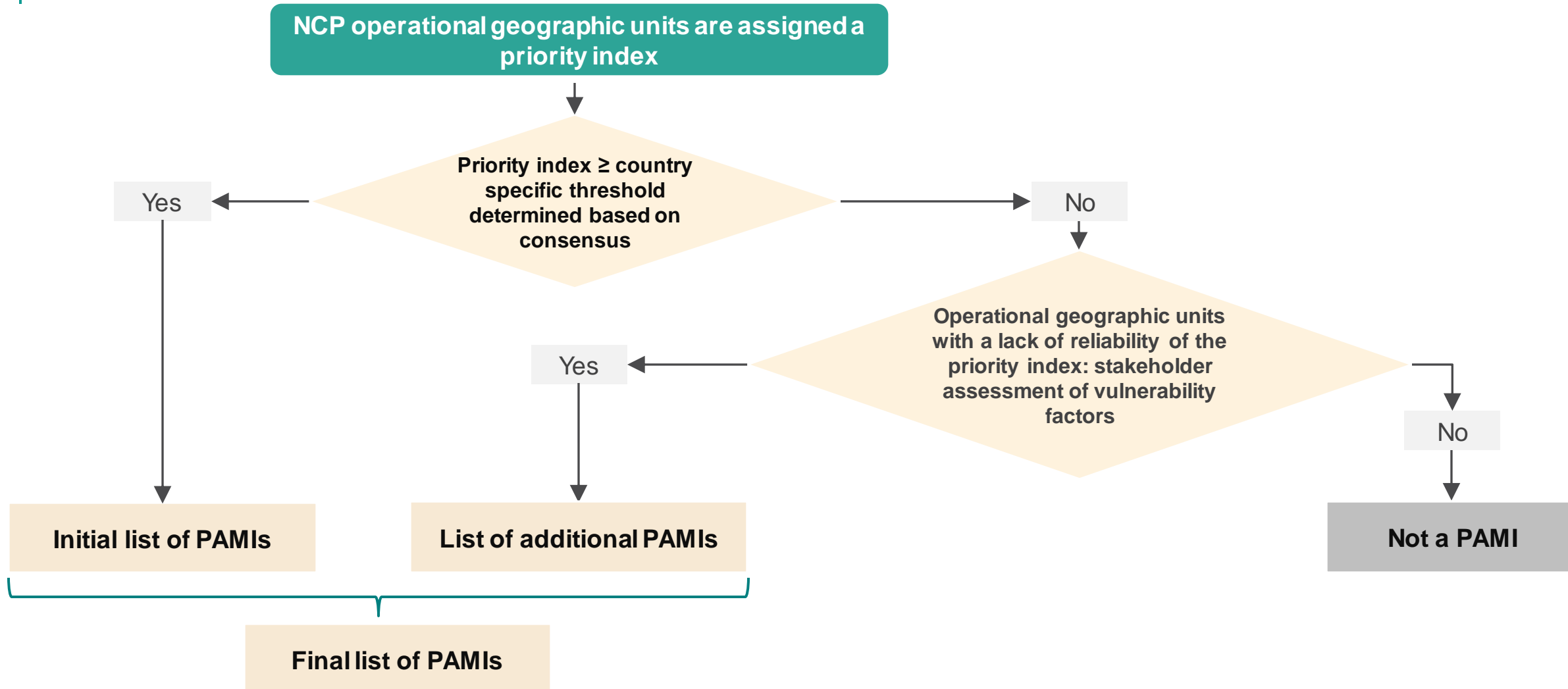
Optional

- Use only for geographic unit(s) with:
 - ✓ **Significant missing data or known surveillance gaps**
 - ✓ **Recent OCV campaign(s)** (temporarily lowers the cholera priority index)
- Additional PAMIS (if any) shall remain **limited and well-documented**

INDICATIVE LIST OF VULNERABILITY FACTORS

- Location adjacent to **cross-border cholera-affected areas** or identified PAMIs
- Location along **major travel routes with transportation hubs**
- Major **population gatherings**
- Areas with **high population density** or **overcrowded** settings
- Areas with **high-risk** populations
- **Hard-to-access** populations
- **Population received OCV more than three years ago** (two-doses with a coverage >70%)
- Areas at **high-risk for extreme climate and weather conditions**
- Areas affected by **complex humanitarian emergencies**
- Areas with more than 30% of the population using **unimproved water facility** type
- Areas with more than 50% of the population using **unimproved sanitation facility** type
- Areas with more than 50% of the population with **no handwashing facility on premises**

IDENTIFYING THE FINAL LIST OF PAMIS



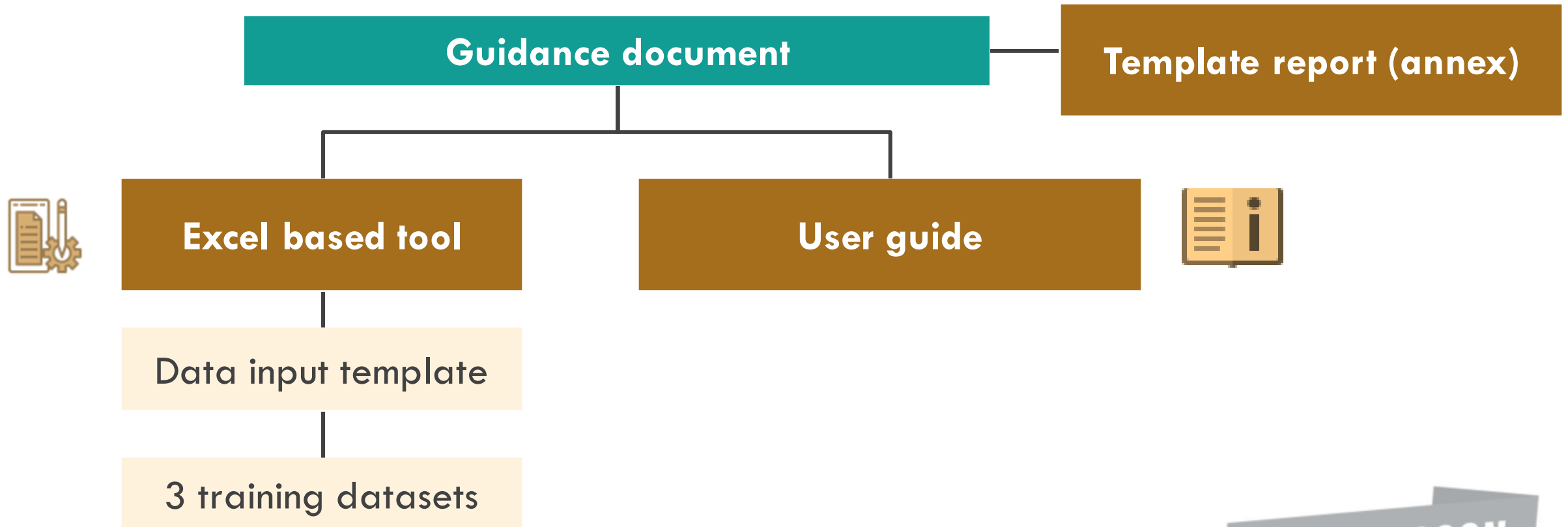
RESOURCES



PAMIS FOR CHOLERA CONTROL: GTFCC RESOURCES



<https://tinyurl.com/gtfcc-pamis>



French versions

COMING SOON

EXCEL-BASED TOOL AND USER GUIDE

*Today at 12:00
Hands-on workshop*

- **Discover and manipulate** the 2023 GTFCC Excel-based tool for the identification of PAMIs for cholera control



SUMMARY



The new recommended method ...

- ✓ Considers **additional indicators** (mortality, test positivity)
- ✓ Provides harmonized **scoring rules**
- ✓ Guides selection of **country-specific threshold**
- ✓ Emphasizes consensus building among **multisectoral stakeholders**
- ✓ Allows selection of **additional PAMIs** based on vulnerability factors
- ✓ Includes **package of resources and tools**

PAMI IDENTIFICATION RELIES ON ROBUST SURVEILLANCE AND TESTING

Wednesday morning session

Cholera surveillance at country level

Thursday morning session

Testing and confirmation of cholera

Thanks!

Subgroup members

Balami Kumshida
Bouhenia Malika
Breakwell Lucy
Camacho Anton
Dominguez Morgane
Finger Flavio
Gabastou Jean Marc
Hampton Lee
Heitzinger Kristen
Iliya Cheshi
Kamadjeu Raoul
Kanungo Suman
Knowles Becky
Lee Elizabeth

Matar Ghassan
Nomhwange Terna
Okon Anthony
Omer Mohamed Diaaeldin
Quilici Marie Laure
Russell Allyson
Sauvageot Delphine
Sax Laurent
Sinha Antara
Sodjinou Vincent
Sudre Bertrand
Tayyab Muhammad
Valingot Christophe
Wang Xin
Wauquier Nadia
Wendland Annika

Pilot countries

DRC (Dr Placide Okitayemba Welo)
Mali (Dr Parciekle Jose Pomme)

Thank you

Together we can
#endcholera



GLOBAL TASK FORCE ON
CHOLERA CONTROL

1

NCP INCEPTION

Identify PAMs

- Step 1. Calculate numeric **priority index** to rank all NCP operational geographic units
- Step 2. **Stakeholder validation**
 - Priority index threshold
 - Additional factors

Conduct situational analysis

Define multisectoral leadership and coordination mechanism

Formulate the overarching goal for the NCP

2

NCP DEVELOPMENT

Formulate and prioritize activities for each pillar* in priority areas

- Define and prioritize activities for **each pillar***
- Develop **operational plans** for each pillar* with budgeted activities targeted at PAMs as identified at the inception phase