

# Identification of priority areas for multi-sectoral interventions (PAMIs) for cholera control: Cameroon's experience leading the process independently



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# Plan

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- Background
- Methodology and levers of success
- Results
- Conclusion

# Background

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- **Cholera is endemic in Cameroon**, and over the past 5 years 23 641 cholera cases were reported in 42% of health districts
- **March 2022:** Identification of hotspots targeted for cholera elimination using the 2022 GTFCC guidelines
- **November 2023:** Identification of priority areas for multisectoral interventions (PAMI) following the GTFCC's new guidelines

# Methodology (1/5)

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- **Step 1: August 2023**
- Set up of a **multisectorial technical team** under the **leadership of the Ministry of health** and the support of national technical partners (WHO, IFCR, CDC, UNICEF)
- **Ownership** of different GTFCC resources or guidelines



Identification des zones  
d'interventions multisectorielles  
prioritaires (PAMI)  
pour le contrôle du choléra

Lignes directrices  
2023



# Methodology (2/5)

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- **Step 2: October 2023**
- **Briefing of stakeholders of national and infra national** on GTFCC guidelines, especially decision makers and data managers



# Methodology (3/5)

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- **Step 3: November 2023**
- **Preparation of datasets**
  - Data period: 8 years (January 2016-September 2023)
  - KoboCollect tool.
  - Automated analysis through GTFCC tool.
  - QGIS software was used to map PAMIs.
- **Multiple data sources**
  - Health Information Unit
  - Centre Pasteur of Cameroon
  - National Public Health Laboratory
  - DHIS-2
  - national cholera line list
  - country reports

# Methodology (4/5)

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- **Step 4: December 2023**
- **Multi-sectoral workshop for stakeholders validation** of PAMIs following a consultative and consensus approach taking into account both the impact and the feasibility of the future NCP



# Methodology (5/5)

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- **First level of prioritization based on the priority index** generated in the GTFCC tool , and considering four main indicators (**Cholera incidence, mortality rate, persistence, positivity rate**)
- **Second level of prioritization based on vulnerability factors** (geographical accessibility, hygiene and sanitation, migrations, access to drinking water, security,...)
- **Step 5: January 2024 Submission to GTFCC**



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- District\_sante\_2022**
- Non PAMIS
  - PAMIS Additionnels (8 DS)
  - PAMIS Supplémentaires (13 DS)
  - PAMIS Initiaux (35 DS)
- ZOOM SUR YAOUNDE**
- ZOOM SUR DOUALA**
- 0 75 150 km
- Guinée Eq Gabon Congo Brazza

# Results (2/3)

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## Step 6: Mars 2024

- **GTFCC, PAMIs review report** highlighted
  - Consistency and alignment with the 2023 GTFCC method to prioritize initials PAMIs (35).
  - However, 8 additional PAMIs was selected based on stakeholders consultation using criteria outside of the priority index and vulnerability assessment.
- **Cameroon has been encouraged to give priority to initial PAMIs**

	Number of units	% of units of the country	Population	% of population of the country	Cholera cases over the analysis period	% of cholera cases over the analysis period in the country	Cholera deaths over the analysis period	% of cholera deaths over the analysis period in the country
<b>Initial PAMIs</b> (index of priority >8)	35	18%	8 816 104	33%	22 668	91%	578	85%
<b>Additional PAMIs</b> (vulnerability factors)	13	7%	2 235 728	8%	576	2%	23	3%
<b>Additional PAMIs</b> (workshop participants)	8	4%	1 340 508	5%	227	1%	15	2%
<b>All PAMIs</b>	56	28%	12 392 340	46%	23 471	95%	616	91%

# Conclusion

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- Identification of PAMI's successfully conducted in Cameroon using a multisectoral approach
- Good comprehension and appropriation of the GTFCC guidelines at the by stakeholders are critical
- Data availability facilitated this exercise
- Availability of prioritization tools for WASH investments is critical for cholera elimination
- Exploitation of GTFCC review report helped to adjust PAMI identification





Thank you for your kind attention