



REPORT OF THE
**9TH MEETING OF THE GLOBAL TASK FORCE ON CHOLERA CONTROL
WORKING GROUP ON WASH**

17 - 18 JUNE 2024 | HYBRID EVENT / GENEVA, SWITZERLAND

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List of attendees

In person: Adam Drolet (PATH), Albert Reichert (USAID), Alexandra Machado (IFRC), Andrea Buletti (ICRC), Baptiste LECUYOT (SI), Bruce Gordon (WHO/WSH), Christine Marie George (JHU), Christophe Valingot (WHO), Christopher Brewer (IFRC), Daniele Lantagne (TUFTS U), Elisabetta Pegurri (WHO/EVAL UNIT (WHO), Emmett Kearney (IFRC), Flavio Finger (EPICENTRE), Jacqueline Knee (LSHTM), Jenny Lamb (UNICEF), John Oldfield (INDEPENDENT), Kate Alberti (WHO/GTFCC), Kyla Smith (WATERAID), Lauren D'Mello-Guyett (LSHTM), Laurent Sax (WHO), Madison Moon (WHO), Maggie Montgomery (WHO/WSH), Md Taufiqul Islam (Icddr,b), Michelle Farrington (OXFAM), Monica Ramos (GWC), Osama Ali Maher (WHO/EMRO), Philippe Barboza (WHO/GTFCC), Pierre Formenty (WHO Unit Head), Pierre-Yves Oger (UNICEF/GTFCC WWG Chair), Romain

Prado (WHO/GTFCC), Stuart Vallis (SDC), Thomas Handzel (CDC), Yasir Syed Ahmad (IMC), Tonia Thomas (GTFCC)

Online: Carola Bänziger (FHNW), Claudio Valsangiacomo (SUSPI), Damien Blanc (ECHO), Irene Owusu-Poku (WATERAID), Jean LAPEGUE (ACF), Madison Moon (WHO), Md Mahbubur Rahman (Icddr,b), Marion Martinez Valiente (GTFCC Secretariat), Megan Wilson-Jones (WaterAid Consultant), Milca Agbenou (WHO/EVAL UNIT), Mohammad Shakkour (WHO/AFRO), Nosheen Usman (WHO), Scott PENDERGAST (WHO/SPP director), Lacina Soro (WHO/IPC), Yael Velleman (UNLIMIT HEALTH), Lloyd Robin Piers (UNICEF), Guy Mbayo (WHO), Jan Heeger (Netherlands Red Cross), Sharla Bonneville (UNICEF), Nicolas Villeminot (ACF)

Acronyms and abbreviations

ACF Action Contre la Faim	LSHTM London School of Hygiene and Tropical Medicine
CATIs Case-area targeted interventions	MSF Médecins Sans Frontières
CFR case fatality rate	NCP national cholera plan
CSP Country Support Platform	OCV oral cholera vaccine
DRC Democratic Republic of Congo	PAMI Priority Area for Multi Sectoral Intervention
HCF Health Care Facilities	RDTs Rapid Diagnostic Test
Gavi Global Alliance for Vaccines and Immunization	RCT randomised controlled trial
GTFCC Global Task Force on Cholera Control	RRT rapid response team
icddr,b International Centre for Diarrhoeal Disease Research, Bangladesh	SOP standard operating procedure
IFRC International Federation of Red Cross and Red Crescent Societies	US CDC US Centers for Disease Control and Prevention
IPC infection prevention and control	USAID United States Agency for International Development
IRP Independent Review Panel	WASH water, sanitation and hygiene
JHU Johns Hopkins University	WWG WASH working group

SUMMARY REPORT

Agenda item and inputs	Process	Main output	Key decisions and action items
Welcome and presentation of the agenda	In the welcoming remarks, the alarming rise in cases since 2021 was highlighted, primarily attributed to conflicts and the impacts of climate change.	The case fatality rate was questioned. There are variations in data collection practices between countries, which can be influenced by factors such as the quality of surveillance systems and the level of transparency. Challenges in capturing community deaths are a significant factor contributing to observed differences in fatality rates across countries, depending on whether or not these deaths are included in the reported data. Despite these discrepancies, there is a consensus that cases are rising alarmingly and that immediate measures are essential.	
Session #2: Review of 2023 WWG activities	<p>Update on the three sub-working groups:</p> <ul style="list-style-type: none"> - WASH and Data: Emphasis is being placed on prioritising the need for locally acquired data. - WASH and NCPs: Lacks clear direction; the relevance of this group is currently uncertain. - WQM: Focused on refining an existing "WQM in Emergency Settings" toolkit, specifically for cholera. <p>Additionally, new tools for costing WASH elements are under development (IFRC, UNICEF/CDC).</p>	One participant suggested connecting the WWG on data with the WASH Road Map initiative on data led by Reach.	Feedback on the WQM toolkit for cholera is currently being collected. Participation is still open for those interested.
Session #3: Vision of the WWG, integrated within the GTFCC Roadmap	<p>Scott Pendergast (Director for Strategy, Programmes and Partnerships with the WHO Emergencies Programme) presented his work on financing and costing strategies.</p> <p>Laurent Sax gave a reminder of the GTFCC Roadmap's objectives and activities in which WASH could potentially be further integrated.</p>	Q&A: could research look into how climate change is affecting cholera?	<p>Develop a draft version of the water quality monitoring toolkit and consolidate comments from sub-working group members</p> <p>The next step regarding the scoping review is to:</p>

	<p>Daniele Lantagne shared key research findings from the past 18 months the importance of integrated approaches, the impact of conflict, the effectiveness of WASH+OCV interventions and the effectiveness of CATIs interventions.</p> <p>Tonia Thomas presented the progress made on the scoping review. The team is halfway through reviewing the 582 studies included in the review.</p>		<ul style="list-style-type: none"> - comment the draft version in September - contribute to the 1st annual GTFCC research meeting on 1-2 October - contribute to the development of the GTFCC research agenda 2025-2030.
Session #4: Open dialogue to discuss Vision and objectives of WASH PREVENTION	Group work to discuss objectives, vision / strategy of axe 2 PREVENTION	<p>Key trends identified during the group work sessions include Knowledge Management & Evidence-Based Advocacy, WASH in health and nutrition Integration and improved communication, Climate linkage, Innovation (e.g. AI), define “Medium WASH” and align WASH efforts with broader development goals (e.g. National plans & Budgets to integrate elements of NCPs or at least prioritised access to basic WASH in PAMIs), refine WASH Indicators.</p> <p>These key trends were globally in line with the strategy presented in the pre-reading material, but participants noted that they needed refinement to be more measurable.</p>	Further refine the objectives/the strategy following the presentation at the 2024 GTFCC meeting.
Session #5: Focus on Axis 2 PREVENTION activities	Group work to discuss activities of axe 2 PREVENTION	<p>The following key activities were defined as priorities:</p> <ul style="list-style-type: none"> - disseminate existing resources, toolkits, evidence - finish WQM toolkit - define that medium-term WASH and its operationalisation - map WASH in PAMIs investments and interventions - define the needs for a dedicated sub-working group on preventive behaviours and community engagement? 	Finalise the prioritisation of activities and the distribution of roles and responsibilities at the next WWG meeting.
Session #6: Focus on Axis 2 PREVENTION	In plenary, participants shared their insights on what key	It was agreed that the following messages would be shared:	The messages will be shared at the GTFCC 2024

Messages	messages should be conveyed at the GTFCC 2024 meeting.	<ul style="list-style-type: none"> - there should be better recognition from GTFCC of the central role of WASH in fighting cholera - the WWG should reach out to the Surveillance WG to jointly work on recommendations and methodologies to select high ranking PAMIs - connect with the OCV WG group to jointly review how WASH and OCV integrated approaches were implemented <p>Requests to the GTFCC Secretariat & Steering Committee: request the setup of RCCE Working Group; to ensure the involvement of the WASH WG in GTFCC advocacy efforts; and to support the work of the WG through fundraising efforts.</p>	meeting and the WWG chairs will share feedback at the next WWG meeting.
Session #7: WASH & IPC response Package for Cholera IMST	Christophe Valingot (WHO) introduced the ongoing development of the WASH & IPC response Package for WHO Cholera IMST, a toolkit for emergencies.	In the Q&A session, participants highlighted the issues of knowledge management, of coordination for WASH & Health, of government involvement, of communication around the existing coordination mechanisms and of surge capacity. They also noted the need to connect with the WASH Hub initiative of the WASH Roadmap and the existing Joint Operational Framework (JOF) developed by the WASH and Health Clusters and, finally, the necessity to find the right balance so that the toolkit is not too prescriptive.	
Session #8: Focus on Axis I CONTROL activities	Group work to discuss activities of axe I CONTROL	<p>The following key activities were defined as priorities:</p> <ul style="list-style-type: none"> - finish WQM toolkit - develop a guidance note on “WASH packages and service delivery mechanisms” for the WASH sector response during cholera outbreaks - update the WASH+OCV technical note - update WASH & IPCs for CTCs and CTUs technical note - define emergency WASH indicators during outbreaks at country level and dashboards at country and global levels - disseminate research and define research needs 	Finalise the prioritisation of activities and the distribution of roles and responsibilities at the next WWG meeting.

Session #9: Focus on Axis 1 CONTROL Messages	A very brief plenary session.	During the plenary session, participants reaffirmed messages that aligned with those discussed previously regarding prevention strategies.	
Session #10: presentation of the GTFCC Secretariat	Romain Prado from the GTFCC Secretariat gave an overview of the various working group priorities. He invited the WWG to develop its TOR and a budget. He noted that the recent 14 country reports all emphasised the need for funding and operational support. The Secretariat announced it would soon address several cross-cutting topics: humanitarian principles, risk management, gender inclusion, community engagement, and climate change. The revival of the advocacy task force will be discussed at the Annual meeting.	Concerns were raised about the Secretariat's strategy for integrating these cross-cutting issues and participants requested to be involved in this process.	<p>The WWG chair will develop the group's Terms of Reference (TOR) and a budget, which will be submitted for discussion among WWG members, before submitting it to the secretariat.</p> <p>Secretariat to involve the WWG members in the development of the strategy regarding cross-cutting issues and the next advocacy task force activities.</p>
Session #11: Focus on Axis 3: COORDI- NATION Activities	Group work to discuss activities of axe 1 COORDINATION	<p>The following key activities were defined as priorities:</p> <ul style="list-style-type: none"> - finalise a short strategic document presenting the WWG - build on non-cholera events/initiatives to disseminate WWG knowledge - review priorities of other Working Groups, analyse convergence, ensure contribution of WWWG members - develop WWG ToR and budget - refine WWG internal meetings frequency & modalities - disseminate existing resources, toolkits, evidence - agree on a process to get GTFCC stamp on core guidance - ensure the involvement of the WWG in GTFCC's advocacy 	<p>Finalise the prioritisation of activities and the distribution of roles and responsibilities at the next WWG meeting.</p> <p>Identify and assign specific WWG members to contribute to other working groups. Their roles should include attending meetings and reviewing deliverables with a WASH perspective.</p>

Session #12: Brainstorming session	<p>A rapid brainstorming session was organised around four questions:</p> <ul style="list-style-type: none"> - How can we be better informed about WASH/cholera trained people and resources? - How to bring additional resources for the WWG? - How do we roll out of the WWG guidance? - How can the WWG bring in more key stakeholders to significantly impact the sector? 	<p>A diverse array of ideas was discussed, but the primary focus remains on enhancing collaboration with a broader range of partners and coordination platforms, particularly at the national level.</p>	
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Decision Log Table

Decision	Rationale	Action Items
A list of objectives, activities, and priorities for the 3 axes emerged during the meeting. It should be shared at the 2024 GTFCC annual meeting, then further refined by the WWG chairs and discussed with the WWG members.	There is a need for the WWG to define clear and achievable priority deliverables for the next two years, in cooperation with the GTFCC Secretariat, the CSP team and other Working Groups.	Pierre-Yves Oger will present the vision and activities at the GTFCC Annual Meeting, collect inputs from other GTFCC members, refine them and present them at the next WWG meeting for discussion/validation.
WWG members started defining priority levels for the newly defined activities in the three axes but could not complete the exercise due to time constraints.	This is a key exercise that needs to be completed and should not be rushed.	Finalise prioritisation of activities, distribution of role and responsibilities and timeline. Dedicated modalities will be defined and discussed with the WWG members.
Define what will be done with the items put in the parking lot: advocacy, climate Change, RCCE.	These are topics considered important by the group that have come up multiple times and should not be forgotten.	Parking lot items will be added in the next WWG meeting agenda and discussed.

ANALYTICAL REPORT

Welcome

Speaker: Philippe Barboza, **Head of GTFCC Secretariat**

In his welcome speech, Philippe Barboza highlighted the alarming escalation of cholera outbreaks since 2021 (see figure 1) compared to a reduction of almost 90% of reported deaths from 2017 to 2020. Climate change and conflict are two important factors exacerbating the situation. The overall capacity to respond to the multiple and simultaneous outbreaks continues to be strained due to the global lack of resources. He urged participants to view this meeting as an opportunity to identify critical leverage points for Water, Sanitation, and Hygiene (WASH). He stressed the importance of bridging the gap between short-term and long-term solutions and called for increased accountability from donors, policymakers, and other key stakeholders who can make a significant impact.

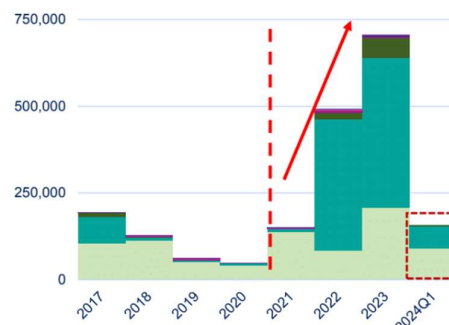


Figure 1: Cholera cases reported to WHO 2017-2022 (WER) and preliminary data 2023-2024

“Cholera is not just a disease but the marker that everything else is dysfunctional: no basic healthcare, no basic WASH. We know that WASH is the solution, yet it remains the forgotten part of the massive investments in terms of cholera control” - Philippe Barboza

Session # 1: Presentation of the Annual Meeting structure

Speaker: **Laurent Sax**, WWG GTFCC Secretariat

Laurent Sax presented the main **Objectives and expected outcomes** of the two-day meeting:

- List the objectives, activities, and priorities for the 3 axes (prevention, control, and coordination)
- Highlight activities that will be handled by the WWG alone, and activities that will be cross-pillar and/or need support of external partners/stakeholders.
- Bring a focused message to the GTFCC Annual meeting

A more in-depth update on the global cholera situation re-emphasized the alarming rise in the frequency, duration and expanding geographic spread of cholera outbreaks since 2021. Last year, Africa emerged as the hardest-hit continent. The Eastern Mediterranean region also faced several severe outbreaks. South Africa showed a decrease in reported cases; however, data must be considered carefully as some countries are experiencing worsening conditions and may lack the capacity to accurately report cases (e.g. Haiti).

Between 2018 and 2024, **National Cholera Plans** were developed in ten countries, 12 countries made progress in NCPs and seven countries are considering developing one (See figure 2).

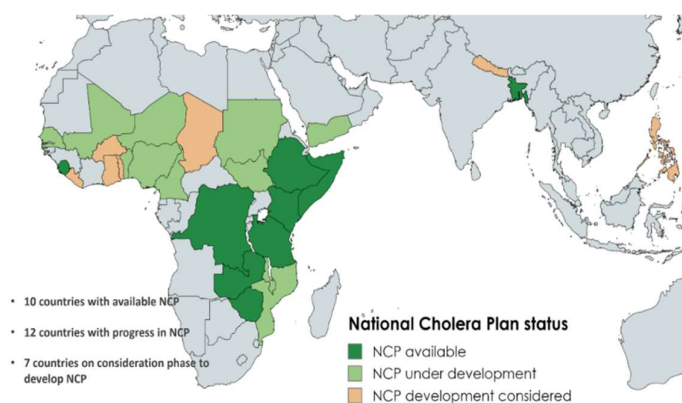


Figure 2: National Cholera Plan Status

As of June 2024, 19 countries performed PAMI/Hotspot identification based on the GTFCC recommended method and 2 following a different methodology. Six countries are currently updating their PAMI/hotspot and six countries are planning to start the exercise. A PAMI tracker is being developed and the GTFCC WASH and Surveillance WGs need to work together to ensure that WASH WG members have access to the existing data.

Q&A:

- Are there any more details regarding the increased case fatality rate (CFR)?
Access to treatment and rapid identification remain significant issues, contributing to many deaths occurring early in the course of the disease. CFR is also the indicator for every other gap in the response. But case fatality rate can be misleading with for example situations where we have lots of community deaths, but we don't know the number of cases that are not coming to the facility. For Philippe Barboza, what is clear is that the number of deaths versus the number of reported deaths is increasing.
- Are there gaps for obvious countries who should conduct PAMIs?
All GTFCC countries should do it. It's a decision that countries must take. The question of transparency is also key, with countries really reporting their cholera cases. An emphasis could be put on countries where nothing has been done.

Session # 2: Review of 2023 WWG activities - Update on the 3 sub-working groups

Speakers: **Pierre-Yves Oger**, UNICEF/GTFCC WWG Chair, **Emmett Kearney**, IFRC, **Thomas Handzel**, US CDC

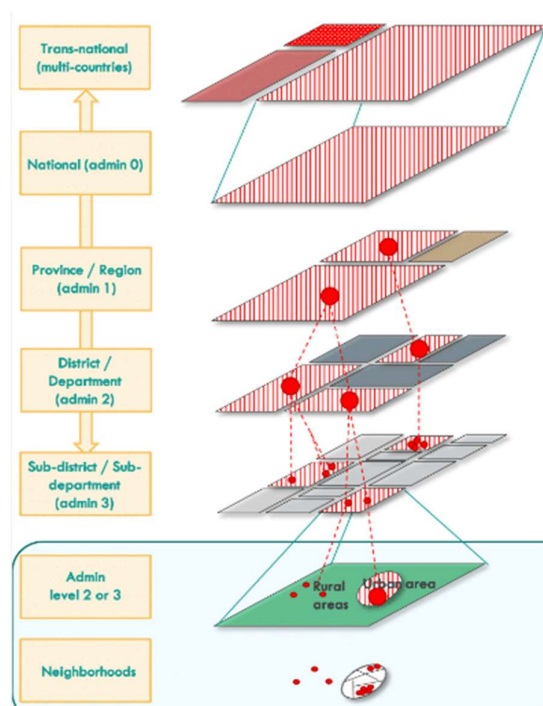


Figure 3: Different spatial layers with different data for different usage

WASH and Data sub-working group

In 2023, the group convened twice and prioritised utilising WASH data to enhance cholera programming at the sub-national level (see different spatial layers in figure 3). **The needs for locally acquired data clearly emerged as a priority.** The question being how to support local data collection and what tools, indicators, methodology should be used? WASH service providers, WASH partners and communities were identified as potential sources. Next steps include a short review of existing methodologies and tools for WASH data collection (GWC & CDC), the development of a dedicated approach to data collection in cholera PAMIs, and as a final step how to link the result with costing methodologies.

WASH in NCPs sub-working group

Emmett Kearney (IFRC) started with a brief presentation on a new costing tool currently under development with Guy Hutton. It is an excel tool to be used by people developing NCPs to cost the WASH

elements. There are different options/targets to choose from to get an estimation. There will be a pilot in Nepal over the summer/fall and maybe another one in DRC (at sub-national level). Considering that WASH is typically between 60 and 80% of an NCP, hopefully the graph produced will spark discussion and realisation of the need for WASH. Regarding the WASH in NCP working group, few meetings were held. There was a rough brainstorming to develop a work plan. **The relevance of the WG was questioned** as discussions from in-country colleagues were rarely technical but rather about advocacy or improving political engagement.

Water Quality Monitoring sub-working group

Three meetings were held to address two primary objectives: first, to work on a water quality monitoring toolkit, and second, to develop technical notes for environmental surveillance. The goal is **to refine the existing 'WQM in Emergency Settings' toolkit, focusing exclusively on cholera, to make it a highly operational** resource for implementers. Various aspects of the toolkit were presented to the sub-working group, and feedback is currently being collected. Participation is still open for those interested. Comments will be consolidated into a draft version. An instructional designer will then develop the PDF version, followed by the creation of an online version by a contractor.

Q&A:

- How do we connect our WWG work on data with the WASH roadmap initiative on data led by Reach? People here who are involved in both initiatives could create that link.

Session # 3: Vision of the WWG, integrated within the GTFCC Roadmap

Speakers: **Laurent Sax**, WWG GTFCC Secretariat, **Scott Pendergast**, WHO, **Daniele Lantagne**, Tufts University, **Tania Thomas**, GTFCC Secretariat/IFRC

Financing Strategies for Wash Interventions

The session started with a few words from Scott Pendergast regarding his **work on financing and costing strategies**, notably how to bring more sustainable financing into preparedness, as well as having more and faster response financing for acute responses. Work is being done with the World bank to think through what would be **different financing models that are somewhere in between those two models**. Cholera interventions could exemplify this hybrid approach, as they necessitate both rapid outbreak response activities and longer-term prevention efforts. Climate related financing is another option, as well as partnerships with some of the other IFI, such as the global fund and Gavi.

Q&A:

- We need to clearly define the 'mysterious medium term' approach, as it may represent the future direction of the sector. We have yet to identify the optimal balance between long-term sustainable solutions and the short-term acute responses.
- Electricity and waste management might serve as effective entry points for collaboration with the Global Fund and Gavi.
- Integration with long-term water development policies, plans, and budgets is crucial. This ensures that when donors fund these sector development initiatives, cholera prevention and control are inherently included.

Review of the Roadmap

Laurent Sax gave a refresher on the Global Roadmap and its objectives to have 20 countries eliminating cholera by 2030, a 90% reduction in cholera and no more uncontrolled outbreak. The roadmap was developed around 3 axes: detection, prevention, coordination. A suggested action was to **investigate throughout the 2 days how to better integrate WASH in the three axis' activities and better connect with the other working groups**.

Update on ongoing cholera Research

Daniele Lantagne presented the progress regarding the 2021 GTFCC research agenda which identifies 20 high-priority needs across five pillars. She summarised the key research findings from the past 18 months on cholera control, emphasising: the **importance of integrated approaches** (e.g. WASH in HCF research in Mozambique and Uganda), **the impact of conflict** (e.g. research shows that conflicts in Syria and Yemen increase the risk of cholera), **the impact of seasonal changes** in increasing cholera risks (e.g. research in Bangladesh), **the effectiveness of WASH+OCV interventions** (e.g. research in India and Bangladesh) and **the effectiveness of CATIs interventions** to prevent and control cholera transmission (research in DRC and Nigeria). She also shared a major success in the fact that more global south authors were involved in research.

“Yes, we do need more research but please don’t say we have no research” – Daniele Lantagne

Tonia Thomas reminded that the Wellcome Trust started supporting the GTFCC research uptake programme in 2023 for at least three years. Regarding the scoping review, as of 2024, 12203 studies were screened, and 582 studies were included in the review. The team is halfway through reviewing that data set. The next step for the WWG group is to review the draft scoping review in September/October 2024. There is also the possibility to contribute online to the 1st annual GTFCC research meeting in Mombasa on 1st and 2nd October. The WWG will also be invited to contribute to the development of the GTFCC research agenda 2025-2030.

Finally, [GTFCC research tracker](#) (the searchable database of completed and ongoing research projects to inform cholera prevention and control efforts) will be updated in 2024.

Q&A:

- Christine-Marie mentioned the randomised trial in DRC that was not presented.
- Could research look into how climate change is affecting cholera? The secretariat is advocating research donors to include CC.

Session # 4: Open dialogue to discuss Vision and objectives of WASH prevention for the next 5 years

Moderators: **Alexandra Machado**, IFRC and **Baptiste Lecuyot**, SI

Participants were divided into small groups to discuss the **vision and objectives** for Axis 2 on WASH prevention. During the debrief, a variety of activities and objectives emerged across the three axes (see full list of topics raised in Annex 1). The key trends revolved around Knowledge Management & Evidence-Based Advocacy, WASH in health Integration and communication, Climate Linkage, Innovation (e.g. AI), define “Medium WASH” and align WASH efforts with broader development goals, refine WASH Indicators.

Following the restitution, Laurent Sax and Pierre-Yves Oger presented the objectives and vision they had proposed in the pre-reading materials. Participants generally agreed with them but noted that they needed refinement to be more measurable. The moderators reported that the objective should also include the following missing points which emerged repeatedly during the group discussions:

- National plans and budgets of GTFCC countries should integrate either: Elements of NCPs, or Prioritized access to basic WASH in PAMIs.

- Establish a common understanding of “medium-term WASH”.
- Enhance coordination and integration across different levels (national, sub-national) and with other sectors (health, nutrition).
- Define measurable monitoring indicators

Session # 5 Focus on Axis 2: Prevention - Activities, priorities

Moderators: **Albert Reichert**, USAID and **Michelle Farrington**, OXFAM

Consolidating on the morning group-work, participants reconvened in their groups to discuss **activities** related to Axis 2 on **WASH PREVENTION**. The moderators summarised the most frequently mentioned activities in the list below and some items were kept in a “parking lot” to be better defined later. At the end of the second day, they prioritised these activities and deliberated on the requirements for their implementation. Although the exercise was not fully completed, it was agreed that it would be discussed further in the next WGG meeting.

Activities	Priority	What is needed to make it happen
Is the sub-working group on WASH in NCPs still a relevant activity?	Discontinued	To be discontinued. The aspects on costing methodologies and tools will be embedded in the WASH and Data activity
WASH and Data: methodology / tools for collection of data in hotspots.	Top	The sub-working group will continue and include the work on costing.
Water Quality Monitoring Operational Toolkit (prevention part).	On going	To be added to the WQM guidance under “control”
Dissemination of the Community Engagement document.	Top	
Dissemination of existing resources, toolkits, research, case studies/success stories (other axis/transversal) e.g. Make NCPs and PAMIs available for all.	Medium	
Define that Medium term WASH and how it is operationalised/funded.	Medium	
Mapping WASH in PAMIs investments / interventions.	Top	
Define a strategy to increase representation of development and national actors.	Medium	
Synthesise and disseminate research on prevention, especially at the field level.	Top	

Q&A:

It was noted that climate was not mentioned, that there was a need for increased capacity in preparedness, and that Health and WASH should be involved in the prevention phase.

Session #6 Focus on Axis 2: Prevention - Key messages for the GTFCC and partners

Speakers: **Laurent Sax**, WWG GTFCC Secretariat and **Pierre-Yves Oger**, UNICEF / GTFCC WWG Chair

The final session of the day focused on agreeing on key messages to be conveyed at the GTFCC annual meeting later that week. Participants agreed that the following points should be shared at the GTFCC annual meeting : **there should be better recognition from GTFCC of the central role of WASH in fighting cholera**: “get more specific statements from other sector partners on how WASH is transformative”, “WASH represents a major proportion of the NCP budget” and “put WASH at the forefront of the fight against cholera” “Other responses like OCV could take a step back”, “find a health advocate to make that argument for WASH and the cholera roadmap”. Pierre-Yves Oger suggested reaching out to the Surveillance working group to jointly work on recommendations and methodologies to select high ranking PAMIs and to identify micro hotspots in PAMIs for medium-term WASH implementation. He also proposed to connect with the OCV working group to jointly review how WASH and OCV integrated approach was implemented in recent years and refine the joint strategy.

As for requests to the GTFCC Secretariat and/or the Steering Committee, it was agreed to request the **set up a RCCE Working Group**; to ensure the involvement of the WASH WG in GTFCC **advocacy efforts**; and to **support the work of the WG through fundraising efforts**.

Welcome Day 2

Speaker: **Pierre-Yves Oger**, UNICEF / GTFCC WWG Chair

Pierre-Yves Oger started with a clarification on the questions of the missing WASH indicators in the definition of the PAMIs. There are two distinct GTFCC methods to identify:

- PAMIs to develop and NPC to CONTROL cholera
- PAMIs to develop and NCP to ELIMINATE Cholera

In the case of CONTROL, meaning that there were cholera cases over the past five years, Epidemiologic data (mortality, persistence, incidence, etc) are mostly, if not only, used. In the case of ELIMINATION, meaning that there was limited or no cholera transmission in recent years, the vulnerability index is used; and that is where there is a list of 13 vulnerability criteria, three of them being related to WASH access.

Some participants agreed with the rationale that it is acceptable to omit WASH indicators for the identification of PAMIs through the CONTROL methodology, arguing that WASH issues are inherently present where cholera exists. When PAMIs are identified and mapped, the level of WASH access within these PAMIs should also be assessed to help prioritise interventions effectively. However, they emphasised that WASH indicators could be given more weight in the ELIMINATE methodology.

Session # 7: Focus on Axis 1: Control - Introduction

Speaker: **Christophe Valingot**, WHO

Christophe Valingot introduced the ongoing development of the **WASH & IPC response Package for Cholera IMST, a toolkit for emergencies** by WHO and UNICEF but to be opened for participation for the WWG. It is based on observed bottlenecks (lack of coordination, epi-analysis, WASH & IPC in CTCs and HC) and successes to propose a more systemic response

During the Q&A session, participants highlighted several key issues: A primary concern was the lack of knowledge management and coordination between WASH and Health sectors. Government involvement was identified as insufficient. Communication gaps regarding existing coordination mechanisms and resources were noted; for instance, an operational online dashboard tracks responses in Nigeria and Syria. To prevent duplication, it was recommended to engage with the [WASH Hub](#) initiative of the WASH Roadmap and the [Joint Operational Framework \(JOF\) Improving Coordinated and Integrated Multi-Sector Cholera Preparedness and Response within Humanitarian Crises](#) developed

jointly by WASH and Health Clusters. Finding a balance in toolkit prescriptiveness was emphasised, along with challenges related to human resources and surge capacity funding.

Session # 8: Focus on Axis 1: Control - Activities

Moderators: **Albert Reichert**, USAID and **Michelle Farrington**, OXFAM

Consolidating on Day 1 group-work, participants reconvened in their groups to discuss activities related to Axis 2 on WASH CONTROL. The moderators summarised the most frequently mentioned activities which can be found in the table below as well as: Surge capacity strengthening (coordination, HR, Funds, Risk RCCE), improve uptake at the field level, contextualise responses to integrate communities, investigate how CASH should be integrated to the cholera response, map the different forms of CATIs within different organisations.

At the end of the second day, they prioritised these activities and deliberated on the requirements for their implementation. Although the exercise was not fully completed, it was agreed that it would be discussed further in the next WWG meeting.

Activities	Level of priority	What is needed to make it happen
Finish WQM toolkit	top	Continuation of the sub-working group with CDC support
WASH packages and service delivery mechanisms (guidance)	top	
WASH+OCV technical note (update)	top	Get commitment from OCV group
WASH & IPCs for CTCs and CTUs (technical note update)	medium	
Develop Emergency WASH indicators / dashboard	low	
Research dissemination + new research needs? Evidence generation	medium	

Session # 9: Focus on Axis 1: Control - Key messages for the GTFCC and partners

Speaker: **Pierre-Yves Oger**, UNICEF / GTFCC WWG Chair

During the plenary session, participants reaffirmed messages that aligned with those discussed previously regarding prevention strategies. The need to recognise the central role of WASH in fighting cholera (control, prevention and elimination) was underlined, as well as the need for funding and capacity around RCCE.

Session # 10: Presentation of the GTFCC Secretariat

Speaker: **Romain Prado**, GTFCC Secretariat

Romain Prado delivered a presentation on the history and structure of the GTFCC Secretariat. The overview of the various working group priorities highlighted numerous opportunities for the WWG to collaborate and integrate WASH. **The secretariat invited the WWG to develop its TOR and a budget.** Romain also informed WWG participants that he had consolidated the **14 country reports** ahead of the annual meeting, and **all emphasised the need for funding and operational support, particularly in community training** - an area where the WWG could also invest.

Additionally, the Secretariat announced it would soon **address several cross-cutting topics**: humanitarian principles, risk management, gender inclusion, community engagement, and climate change. Concerns were raised about the Secretariat's strategy for integrating these cross-cutting issues across various working groups and how other issues, such as inclusion and disabilities, will be addressed. **Participants requested to be involved in this process.** Finally, the **advocacy task force, which met once in May 2023** and was supposed to meet again this year, but it was cancelled. This will be discussed at the Annual meeting.

Side-Session on the mid-term independent evaluation of the GTFCC (Managed by WHO Evaluation Office) - Speaker: **Lauren D 'Mello Guyett**, CEPA

CEPA is the consultancy firm selected to conduct the Mid-term evaluation of the GTFCC. A rapid 30-minute Q&A was organised with the WWG annual meeting participants. Below is a summary of this Q&A:

1. What has worked well in the following three (3) areas:

- (i) WASH partners engagement with the GTFCC: sustained engagement of WWG members. Insights from countries have been useful.
- (ii) the implementation of WASH interventions (preparedness, response, prevention): interesting research and case studies (CATIs)
- (iii) the work of the WASH working group: cholera package, WASH is now a WG of the GTFCC, pushed WASH to open to other sectors

2. What has worked less well in each of these areas?

- Missing actors: what is the strategy to bring new actors (ministry, development actors)
- What is the process to join / participate in the WG => Maybe develop a welcome package?
- Turnover in chairs has led to loss of dynamic and institutional memory
- Missing topics: Medium term intervention

3. What suggestions do you have to improve each of these areas?

- Take advantage of global / regional events (where actors we want to target are) to disseminate, engage, advocate for WASH in Cholera, ...
- Advocacy
- Communication/dissemination
- Build a map of WWG members who can do what
- Small budget to do small activities/consultancies

Session #11: Focus on Axis 3: Partnership Coordination

Moderators: **Kyla Smith**, WaterAid and **Sayed Yasir Ahmad**, International Medical Corps

Consolidating on Day 1 group-work, participants reconvened in their groups to discuss **activities** related to Axis 2 on **WASH COORDINATION**.

Activities	Priority	What is needed to make it happen
Finalise a short strategic document presenting the Working Group.	Medium	
Building on non-cholera events (side events at UNC, WWW, etc) and initiatives (WASH Road Map, GWC CC	Top	Sayed Yasir Ahmad volunteered to link with the Global WASH Cluster working group on Climate Change.

working group) to engage with Ministries of Water representatives and further disseminate WWG knowledge.		
Review the priorities of the other Working Groups, analyse convergence points, ensure participation and contribution of WWWG members in their meetings and activities.	Medium	Possible volunteers could include those already contributing to other working groups, e.g. OCV (Thomas Handzel), Surveillance (Christine Marie George, Thomas Handzel).
Review/develop ToR (considering historical perspective) and prepare budget exercise, including agreeing on a simple process to get GTFCC stamp on core guidance.	Medium	
Refine regular WASH WG internal meetings frequency and modalities.		
Dissemination of existing resources, toolkits, research, case studies/success stories (other axis/transversal) e.g. Make NCPs and PAMIs available for all.		
Ensure the involvement of the WASH WG in GTFCC advocacy efforts.		Jean Lapegue and John Oldfield volunteered to join the advocacy Task Force.

Q&A:

- The necessity of regular WG chairs meetings was questioned, specifically whether these should be informal or formally organized by the secretariat.
- It was suggested that knowledge management and dissemination activities might be outsourced, as WWG members are not experts in that area.

Session # 12: Brainstorming session

Moderators: **Kyla Smith**, WaterAid and **Sayed Yasir Ahmad**, International Medical Corps

Kyla and Sayed led a rapid brainstorming session around four questions. The summary below captures the participants' responses:

How can we be better informed about WASH trained (for Cholera) people and resources?

- Implement pre-signed agreements.
- Include staff trained in cholera within the Global WASH Cluster Field Support Team (FST).
- Establish an emergency pool within NGOs for rapid deployment of trained personnel.
- Ensure national governments maintain updated lists of cholera-trained respondents.
- NGOs could deploy national-level staff through the national level Cholera Technical Working Group or WASH Cluster.

How do we bring additional resources for the WASH WG?

- Map potential donors interested in WASH.
- Consider introducing membership fees for partners.
- Explore accessing funds from the WASH RoadMap seed fund.

How do we roll out of the WWG guidance (the ones stamped by GTFCC)?

- Develop and include in the WWG Induction package.
- WWG members are individually responsible for sharing it with partners.
- Add it on the GTFCC website and app, the Global WASH Cluster website and the upcoming WASH hub
- Explore the feasibility of establishing a dedicated help desk (or consider aligning with the potential help desk of the upcoming WASH hub).

- Use search engine optimization to improve WWG resources visibility.

How can the WWG bring in more key stakeholders (ministries staff partners from the country) to significantly impact the sector?

- Who? Engage donors such as the World Bank and private utilities.
- How? Participate in events, secure funding to involve national actors in GTFCC meetings, and revitalise the advocacy task force.

Session # 13: Endorsement of the Vision, Objectives and work plan of the WWG - Reporting to the GTFCC AM.

Speaker: **Pierre-Yves Oger**, UNICEF / GTFCC WWG Chair

To conclude, organisers and participants reached consensus on the key objectives, activities, and key messages that were discussed throughout the two-day meetings. While the summary of activities has been previously shared in this report across the three sessions focusing on activities (session #4, 5, 6, 8, 9, 11), below is a list of the overall WWG objectives or strategies reformulated by Pierre-Yves Oger:

- Many countries are falling short of achieving the SDG targets for universal access to safely managed water supply and sanitation by 2030. Achieving universal access to basic WASH services is more realistic (World Bank, 2024).
- Achieving universal access to basic WASH services in cholera hotspots is a priority. As explicitly mentioned in the 2030 roadmap, “the basic WASH package [...] is the minimum required to reduce water related disease risks like cholera” (GTFCC 2017).
- The PAMI methodology developed by the GTFCC is a useful basis to implement targeted multi sectoral interventions, including for medium-term / sustainable WASH solutions. However, a more discriminatory approach will be discussed with Surveillance WG to prioritise high-ranking PAMIs.
- Estimating WASH coverage and costing WASH gaps at hotspot level are prerequisites for implementing sustainable WASH services in PAMIs. However, specific methodologies and tools need to be developed to equip governments and partners with the right foundations to do so.
- Governments, with the support of their national and international partners, need to ensure that WASH interventions in cholera hotspots are prioritised in national multi-sectoral and WASH/IPC development plans, from lower administrative levels up to the national level.

Q&A

In the list of vision/objectives presented above, it sounds like the GTFCC is only focusing on PAMIs. It was agreed to clarify that if WASH prevention activities must focus on PAMIs, WASH response interventions must be implemented wherever outbreaks happen.

Annex I - List of all points raised during the first group work session on Day I, as recorded by participants on the flipcharts.

- Increase communication to showcase what we do / can do and all the tools we have (e.g. ensure NCPs and PAMIs are really known at the grassroots level, especially before developing new ones).
- Making sure that WASH is a requirement in both preventative and reactive vaccination campaign applications.
- Define what a medium-term intervention looks like for WASH to help with funding, distribution of role and responsibilities and capacity building.
- Link with the climate work, beyond funding opportunities.
- Dig deeper into prevention-related “neglected topics” (e.g. sanitation systems, safe irrigation for food safety).
- Better coordination, notably in the NCP space, including working with other “less obvious actors” such as the nutrition cluster.
- Increase advocacy across 3 axes.
- Investigate how AI could for example facilitate the work with data and the response at field level.
- Work on acceptance and endorsement of the guidelines by countries.
- Improve trust and flow of information between the WASH and health sectors (e.g. showcase the effectiveness and reliability of the WASH interventions).
- Encourage the government to use the exact terminology and declare cholera outbreak instead of preferring to use the more generic term Acute Watery Diarrhoea (AWD). Not to name is a way of avoiding intervention.
- Link with long-term actors/SDG6-type of donors and work together on WASH beyond cholera.
- Use the angles of resilience and vulnerability to reach out to development actors.
- Streamline the NCP and PAMIs in the WASH programming, planification, and budget at country level.
- Promote evidence demonstrating the effectiveness of CATIs.
- Put WASH at the centre and everywhere: in communities, in healthcare facilities, in educational facilities.
- Resolve the issues with the WASH indicators in the PAMIs. Call it the “WAMI” to put water at the forefront.
- Ensure coordination with other plans (e.g. Humanitarian Response Plans).
- Advocate for the Roadmap to focus more on morbidity rather than on mortality, as it is more relevant for WASH.
- Coordination between WASH and health during long-term prevention activities.
- Focus and measure on the provision of safe water in all hotspots.
- Increase learning from non CSP countries.
- Increase collaboration between WASH teams and surveillance to better target where the needs are.
- Improve the links between the Ministry of Health and the WASH Cluster.
- Have a Case Fatality Ratio for WASH and link with the wash severity index, real time indicators of WASH status.
- Develop a guidance on sanitation options for cholera treatment facilities.
- Engage further with the private sectors and services providers in preventative work.
- Invest in dialogue and advocacy with the national level legislative branch and sub-national representatives.
- Be bolder and have more critical/groundbreaking demands. If WASH is a big percentage of the cholera response, shouldn't the fund for cholera be redirected to WASH?
- Define clear indicators to measure success (e.g. How many countries are investing in the PAMIs regions? How many OCV campaigns include WASH components?)
- Strengthen capacity at operational level.
- Gain more clarity between organizations and agencies on the percentage of funding and interventions allocated to WASH in PAMIs and for prevention
- Consider Anticipatory Action (AA) because this is what brings funding from donors like the Netherlands and the German.