

PAMIs for cholera elimination

Module 4



GLOBAL TASK FORCE ON
CHOLERA CONTROL

PAMIs for cholera elimination

Stakeholder
validation



What will you learn?

- **Objectives** of the stakeholder validation
- How to **prepare** a PAMI validation workshop
- How to **run** a PAMI validation workshop
- How to **foster consensus** on the list of PAMIs

Stakeholder validation

► Objectives


- Endorse the vulnerability factors & measurable indicators
- Complement missing data
- Select a **vulnerability index threshold**

► Expected outcome

- **Final list of PAMIs**
- Buy-in from all parties

► Preferred format

- **On-site workshop** (e.g., 3 days)
- Fosters participative discussions
- Encourages collaboration across sectors / stakeholders

A photograph showing three men in an office setting. One man stands on the left, leaning over a desk. Two other men are seated at the desk, looking at a laptop screen. The man on the right is holding a smartphone. The man in the foreground is also looking at a smartphone. The laptop screen displays a web application with a blue header and various data fields. The background is a plain wall with some electrical outlets.

Preparation of stakeholder validation

Preparation steps

Preparation and anticipation are key success factors



- Identify relevant **stakeholders** to be invited
- Prepare the **agenda**
- Send out the **invitations**
- Arrange the **logistics**
- Prepare the **supporting material/visuals**
- Confirm and brief **speakers** and **facilitators**
- Appoint and brief a **chair**
- Identify and brief **note-takers**

Participants

The stakeholder validation is **multisectoral**

► Multiple sectors

- Public health
- Water, Hygiene, and Sanitation (WaSH)
- Finance
- Etc



► Various levels

- National
- Sub-national

► Organizations and partners playing a key role in cholera elimination

Day 1. Set the scene

- **Welcome and introduction / icebreaker**
- **Opening remarks**
- **Update on cholera in the country**
 - Epidemiological situation
 - Strategies to control/eliminate cholera - Progress & challenges
 - Pillar-specific updates
- **GTFCC method to identify PAMIs for cholera elimination**
- **Outcomes of the data driven PAMI identification phase**
 - Vulnerability factors selected and associated measurable indicators and data sources
 - Key findings and limitations

Day 2. Discuss the list of PAMIs in a participative manner

- **Calculations of vulnerability index**
 - Complement missing data as needed based on a qualitative assessment
 - Determine whether weights should be given to vulnerability factors
- **Vulnerability index threshold**
 - Plenary session to introduce scenarios for the vulnerability index threshold
 - **Group sessions** to assess the scenarios
 - Plenary reporting from each group

Day 3. Reach consensus on the list of PAMIs & organize next steps

- **Wrap up of Day 2**
 - Address any pending questions
 - Decide on the **vulnerability index threshold**
- **Plan immediate next steps**
 - Role, responsibilities, timelines for the **PAMI identification report**
 - Timelines and responsible stakeholder for requesting a **GTFFC PAMI review**
- **Set the way forward**
 - Way forward and timelines for **NCP development**
- **Closing remarks**

Supporting material

Prepare **visuals** to streamline discussions and decisions on PAMIs

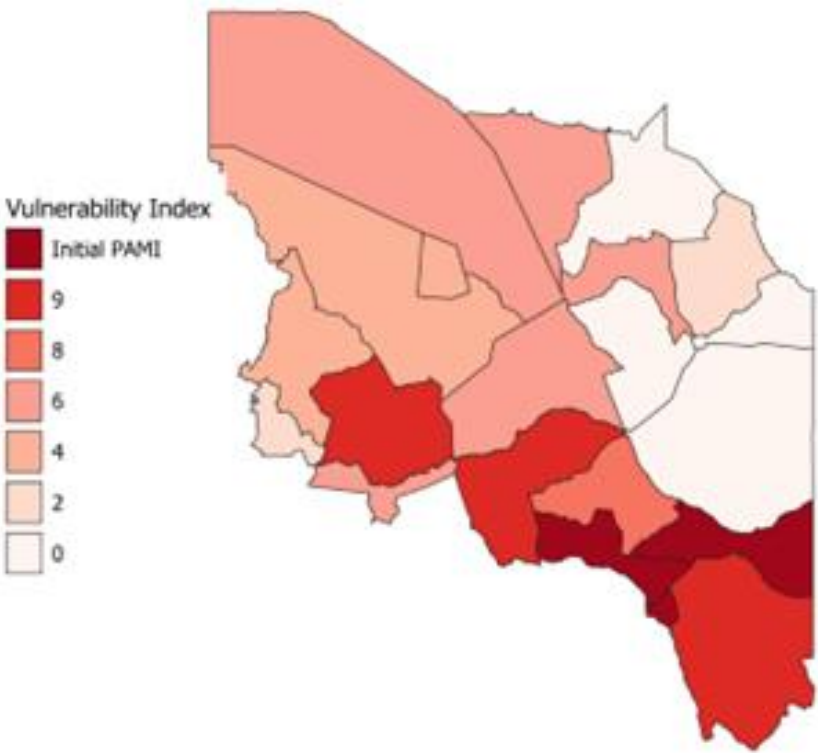
➡ **Sheet R.3 of the PAMI Excel tool**

- Missing data overview
- To ensure all **missing data** get filled

Vulnerability factors	Num. of observations				Relative percentage			
	Missing values	"No"	"Yes"	Total	Missing values	"No"	"Yes"	Total
Confirmed cholera outbreak(s) over the analysis period	1	79	20	100	1.0%	79.0%	20.0%	100.0%
Confirmed cholera imported case(s) in the MCP operational geographic unit considered	0	68	32	100	0.0%	68.0%	32.0%	100.0%
Cross-border areas adjacent to frequently cholera-affected areas or identified PAMIs in neighbouring country(ies)	7	73	20	100	7.0%	73.0%	20.0%	100.0%
Location along major travel routes with transportation hubs	0	80	20	100	0.0%	80.0%	20.0%	100.0%
Major population gatherings	2	66	32	100	2.0%	66.0%	32.0%	100.0%
High population density locations or overcrowded settings	0	84	16	100	0.0%	84.0%	16.0%	100.0%
High-risk populations	2	66	32	100	2.0%	66.0%	32.0%	100.0%
Hard-to-access populations	1	93	6	100	1.0%	93.0%	6.0%	100.0%
Population that received oral cholera vaccine (OCV) more than three years ago	2	75	23	100	2.0%	75.0%	23.0%	100.0%
High-risk for extreme climate and weather conditions	4	83	13	100	4.0%	83.0%	13.0%	100.0%
Complex humanitarian emergency	0	73	27	100	0.0%	73.0%	27.0%	100.0%
Unimproved water	0	75	25	100	0.0%	75.0%	25.0%	100.0%
Unimproved sanitation	3	79	18	100	3.0%	79.0%	18.0%	100.0%
Limited access to hygiene	2	70	28	100	2.0%	70.0%	28.0%	100.0%
Additional country-specific cholera vulnerability factor (1)	0	0	0	0	-	-	-	-
Additional country-specific cholera vulnerability factor (2)	0	0	0	0	-	-	-	-
Additional country-specific cholera vulnerability factor (3)	0	0	0	0	-	-	-	-
Additional country-specific cholera vulnerability factor (4)	0	0	0	0	-	-	-	-

➡ **Shapefile**

- Include vulnerability index in a shapefile
- To **map** PAMIs



➡ **Sheet R.2 of the PAMI Excel tool**

- Vulnerability Index Summary
- To guide discussions on the **index threshold**

Vulnerability index values	Number of geographic units	Cum. number of geographic units	Rel. % of the num. of geographic units	Cum. % of the num. of geographic units	Total population	Rel. % of total population	Cum. % of total population
Initial PAMI	20	20	20.0%	20.0%	5,439,221	22.7%	22.7%
8	3	23	3.0%	23.0%	933,355	3.9%	26.6%
7	1	24	1.0%	24.0%	194,610	0.8%	27.4%
6	3	27	3.0%	27.0%	619,740	2.6%	30.0%
5	5	32	5.0%	32.0%	1,016,472	4.2%	34.2%
4	7	39	7.0%	39.0%	1,708,930	7.1%	41.3%
3	14	53	14.0%	53.0%	3,421,821	14.3%	55.6%
2	12	65	12.0%	65.0%	2,949,457	12.3%	67.9%
1	13	78	13.0%	78.0%	3,046,057	12.7%	80.6%
0	22	100	22.0%	100.0%	4,662,895	19.4%	100.0%
Grand Total	100		100.0%		23,992,558	100.00%	

Geo units by vulnerability index value
Fictive country

Tips to run a stakeholder validation



Objective decision making

The **chair & facilitators** play a key role in fostering decision-making based on data and oriented towards operational implications

- ➡ Display the **supporting material/visuals** prepared prior to the workshop
- ➡ Encourage participants to back up personal opinions with **facts**
- ➡ Discuss the **practical and operational implications**

Group sessions

► Benefits

- Increases opportunities for all participants to actively engage in the discussions
- Channel convergent expertise and knowledge for time-effective discussions

► Groups' composition

- **By region**
 - Useful to complement missing data based on local knowledge for specific geo units
 - Facilitates discussions on local context and specific challenges
- **By cholera prevention & control pillar**
 - Facilitates technical discussions on feasibility and practical considerations

► Tips for effective group sessions

- Explain objectives and provide guiding questions to each group
- Assign roles (facilitator, note-taker, rapporteur)

Documentation

Discussions and decisions along with supporting justifications are documented throughout the workshop for **traceability of the decision-making process**

► **Key role of note takers**

- Record the discussions
- Flag decisions made without sufficient justification
- Keep track of any unresolved discussions to ensure they get addressed

► **Tips for note takers**

- Use a copy of sheet R4 of the PAMI Excel tool to record discussions on specific geo units
- Columns may be added as needed

Consensus building at the stakeholder validation



Consensus

Consensus means that all participants are overall onboard with the decision

► Participants should reach a consensus on:

Vulnerability factors, measurable indicators, data sources

Whether **weights** should be given to vulnerability factors

Presence/absence of vulnerability factors in geo units with **missing data**

Vulnerability index threshold

► Reaching consensus is facilitated by **objective decision-making**

- Ground discussions on data and operational implications to limit divergent opinions that may rely on personal impressions or unrealistic aspirations

Consensus on vulnerability factors & indicators

The **vulnerability factors** and measurable **vulnerability indicators** and associated **data sources** are endorsed by consensus

► **List of vulnerability factors**

- Justifications for any generic factor from the GTFCC indicative list not included
- Relevance in the country-specific context of any additional vulnerability factor

► **Definitions of measurable vulnerability indicators & data sources**

- Reviewed and adapted if needed

Consensus on weights of vulnerability factors

The **justifications** for giving more weight to any vulnerability factor(s) in the vulnerability index (if applicable) are validated by consensus

- By default, all vulnerability factors have an equal weight
- If it is proposed to give more weight to any vulnerability factor(s), this should be justified by **tangible arguments**
- The corresponding justifications should be endorsed by consensus

Consensus on how to fill missing data

If there are a few remaining missing data, they are filled by consensus building on **local knowledge and multisectoral expertise**

► Filling missing data at the stakeholder validation is only considered if missing data is for **a few geo units**

- If there are significant missing data, this should be addressed prior to the stakeholder validation

► Consensus on the presence/absence of vulnerability factors should be reached for all geo units with missing data

- There should be **no remaining missing data in the dataset**



For a refresher on how to address significant missing data go to Module 2

Consensus on vulnerability index threshold

Different scenarios for setting the threshold are discussed

Depending on the threshold considered what are:

- # & % of **geo units** that are PAMIs?
- # & % of the **population** in PAMIs?

What is the lowest threshold still allowing feasibility of multisectoral interventions in PAMIs?

Wrap up

- ➡ **Consensus** on the list of PAMIs is driven by the data and by operational considerations
- ➡ Justifications for all decisions are documented for **traceability of the decision-making process**
- ➡ The stakeholder validation is a key opportunity to maximize **buy-in and multisectoral engagement** in the NCP



Question 1



- **What is an expected benefit of having consensus from all parties on the final list of PAMIs?**
- a) It ensures that all personal opinions are duly considered
 - b) It maximizes stakeholder engagement in the future NCP
 - c) It reduces the need for follow up training sessions

Question 1 – Answer



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Question 2



► **Why group sessions might be useful at a stakeholder validation workshop?**

- a) To extend the duration of the workshop
- b) To channel convergent expertise/knowledge for more effective discussions
- c) To limit the number of participants
- d) To create closer bounds between participants

Question 2 – Answer



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Question 3



- **When setting the vulnerability index threshold, which key factor should guide the decision-making?**
- a) Statistical modelling of the risk of (re)mergence of cholera outbreaks
 - b) Practical and operational implications regarding the feasibility of implementing multisectoral interventions in PAMIs
 - c) The historical significance of the geographic units considering cholera history in the country over past decades

Question 3 – Answer



► **When setting the vulnerability index threshold, which key factor should guide the decision-making?**

- a) Statistical modelling of the risk of (re)mergence of cholera outbreaks
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Together we can
#Endcholera



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