Update on the global Cholera situation, within the 7th pandemic
19 October 2023
More outbreaks, with 1 billion people at risk
Larger and deadlier outbreaks

Nr of countries with > 10 000 autochthonous cholera cases per year (2000-2023)

Roadmap Objective: reduce death by 90%
2017-2020: reduction in deaths: -90%
2020-2023: increase in deaths: +50%

Cholera deaths reported to WHO 2010-2022 (WER) & preliminary data 2023*

GTFCC Roadmap Period

Other Countries  Haiti  Nigeria  Yemen
Overall current cholera operational context

2023

More cases and deaths reported in 2023 vs. 2022; and high CFR remains

Large outbreaks in Southern Africa and Horn of Africa, compounded by conflicts, cyclones and droughts/flooding, respectively

Second part of 2023: beginning of El Niño – with no neutral phase

Peak transmission seasons: in different part of the world

One-dose OCV strategy still prevails after one year, with stock still insufficient for outbreak response and no OCV available for preventive

Issues with production scale of cholera supplies, namely cholera kits

Lack of financial resources for cholera outbreak response

Broader impact of climate change

- 2021-2023 → 3 consecutive La Niña
- Mid-2023 → El Niño
- No neutral Phase

Cholera cases per 100,000 population reported in South East Africa and Horn of Africa in 2023 (as of 16/10/2023*)
Country response example: Cholera in Malawi

**Cases reported, 14 – 20 Feb 2023**

**Challenges**
- Weak multi-sectoral coordination at all levels
- Limited emergency response capacity in country and amongst partners supporting country
  → Delayed collective response

**Key actions**
- Advocacy for multi-sectoral response led to mobilization of partners, and access to supplies, vaccines and funds, to form a collective response in support of MoH
- Collective responsibility – across sectors, partners, cross-border etc. – to respond to cholera outbreak.

**Outcomes**
- Outbreak trends reversed, CFR decreased and transmission interrupted
- Improved reporting of cases and information sharing for action across sectors and cross-border
- As of 7 Oct 2023: 59 019 cases, 1 768 deaths (CFR: 3.0%), with no death reported since 30 July 2023.
Key challenges and constraints

- **General lack of engagement** around cholera and **lack of perceived risk** to global population.

- **Lack of available financial resources** to support scale of response needed for cholera outbreaks, with understanding that resources utilized for acute response are resources not available for long-term cholera prevention activities.
  - Sustainability and financial return issues of acute response to cholera versus prevention.
  - Out of the $160 million requested as per the global SPRP, US$ 12 million have been mobilized at country level (i.e. 8%) and US$1.99 million internally. WHO also disbursed US$ 10.5 million from its WHO’s Contingency Fund for Emergencies (CFE).

- **Acute global shortage in oral cholera vaccines**, with inability to meet increased demand in the short term.

- **Supply shortage and/or delays in manufacturing** of certain supplies, namely certain WHO pre-qualified pharmaceuticals and kit production.

- **Surveillance and access to data** remains problematic, with data flow and quality from countries lacking uniformity.

- **Overstretched international and national response capacity** due to number of cholera outbreaks and increasing geographic scope including within countries, combined with parallel large-scale, high-risk outbreaks and other emergencies.
Cholera can be controlled

Effective multi-sectoral control strategy and partners (e.g. GTFCC, GOARN, SBPs) exist - the issue is resources for implementation.

Reducing CFR is the highest priority. Cholera deaths can be prevented - treatment is easy and inexpensive. The issue is timely access.

WASH critical to respond and to prevent outbreaks.

Surveillance critical to be able to target interventions in priority areas and to promote engagement of communities for greater effectiveness and sustainability.
Oral Cholera Vaccine and other cholera commodities, 2023

Oral Cholera Vaccine (OCV)
- 1 year after ICG decision, the “one dose strategy” still prevails
- Preventive vaccination campaigns temporarily halted due to vaccine shortage
- OCV insufficient to respond adequately to outbreaks
- 64 M doses requested to date (24 requests by 13 countries)
- Many submissions pre-reduced due to OCV shortage

Other cholera commodities
- Global shortage and/or constraints (Cholera Kits, IV Fluids, ORS, Laboratory items, etc.)
- Bulk procurement → operational challenges

Availability of doses for 2023: 37 M
Doses shipped (mid-Oct 2023): 29 M
Rough estimate doses gap (for outbreaks, as of mid Oct 2023): ~70 M
Doses for preventive vaccination, still pending (2021/22): 17 M
Cholera supplies shipped in 2023: 6.5 M USD
Countries supported with cholera supplies: 40
Patients covered with supplies provided (kit and ORS/RL): >253,000
Global Cholera SPRRP Pillars and link with WHO’s HEPR

Global Cholera Strategic preparedness, readiness and response plan (SPRRP) launched in May 2023, in coordination with launch of UNICEF Call for Action.

<table>
<thead>
<tr>
<th>Core Components of effective Health Emergency Preparedness, Response and Resilience (HEPR)</th>
<th>Pillars of the Global Cholera Strategic Preparedness, Readiness and Response Plan</th>
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<tbody>
<tr>
<td>Emergency coordination</td>
<td>Pillar 1 Leadership, coordination, planning and monitoring</td>
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</tbody>
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| Collaborative surveillance | Pillar 3 Surveillance and health information  
Pillar 5 Laboratory diagnostics and testing |
| Community protection | Pillar 2 Risk communication and community engagement  
Pillar 4 Water, sanitation and hygiene  
Pillar 10 Vaccination |
| Safe and scalable care | Pillar 6 Infection prevention and control  
Pillar 7 Case management  
Pillar 9 Continuity of essential health and social services |
| Access to countermeasures | Pillar 8 Operational support and logistics |

Total Global Cholera SPRRP 2023-2024 Budget: US$ 160 408 800