UNICEF’s role in cholera prevention and control

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Cholera and UNICEF - overview

- UNICEF has a long history of working on cholera
- Importance of cholera confirmed as part of the HEPI initiative

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<td>Arboviruses: Chikungunya, Dengue, Yellow Fever, Zika</td>
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<td>Avian influenza, Pandemic influenza</td>
<td>Leptospirosis</td>
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<td>Ebola, Marburg</td>
<td>Novel Coronavirususes (MERS-CoV and SARS-CoV)</td>
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<td>Cholera</td>
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<td>Malaria</td>
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<td>Measles</td>
<td>West Nile virus</td>
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<td>Meningococcal disease</td>
<td>Nipah and related henipaviruses</td>
<td>Shigellosis, Enterohemorrhagic E coli</td>
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<td>Polio</td>
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<td>Rubella</td>
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Across programmatic areas

- UNICEF works in a number of sectors:
  - Health
  - WASH
  - Communication and behaviour change
  - Supply division
  - Other sectors: education, social policy and child protection
Across the humanitarian development nexus:

• Sword and shield concept
• Health system strengthening
• Supply chain strengthening and market shaping
• Collaboration with platforms such as Sanitation and Water for All/ WASH Cluster

“UNICEF does not only target the consequences of an outbreak, but also prevents it by targeting the root causes.”
Emergency actions to **STOP OUTBREAK**

The **“sword strike” aspect** involves intervention **during an outbreak**, in affected areas enabling **rapid response to support live-saving activities.**

- Early and targeted **Emergency Response** in affected areas through:
  - case management to save-lives
  - surveillance to anticipate propagation
  - WASH response to stop the outbreak
  - Community mobilization for behavior change
  - Emphasis on multi-sectorial coordination
  - Organization Oral Cholera Vaccine campaigns

**Emergency Preparedness**

**Advantages**
- Strong and immediate impact
- Experienced staffs/partners
- Well known activities against cholera
- Good support from Emergency donors and actors

**Drawbacks**
- Keep doing the same activities year after year with no long-term impact
- Mutation of the vibrio adapting itself to repetitive activities.
- Possible fatigue from actors
The "shield" feature is characterized by sustainable and preventive WASH interventions in hotspot areas conducted outside of epidemic periods.

Advantages
- Long-term and sustainable impact
- Contribute to SDGs
- Cost efficiency through targeting hotspots and avoiding repetitive and costly emergency response
- Equity and resilience based approach

Drawbacks
- Limited support from development actors to work on cholera
- Limited number of impact studies of such approach
- Recent concept / lack of visibility and understanding

Long-term actions to ELIMINATE CHOLERA
- Roadmap toward elimination of cholera
  - Identification of cholera hotspots
  - Field investigation
  - Long term intervention in cholera hotspots
  - Community mobilization for behavior change
  - Sustainability and impact study
- Preventive actions during high risk season or/and in vulnerable areas
Platform roadmap towards elimination of cholera

**Ultimate Goal**

Contribution to the rolling out of the *Global Ending Cholera Roadmap 2030* in sub-Saharan African countries

**Way Forward**

1. Evidence based studies to inform the risk: sub-regional & country level epidemiological tabletop studies for identification of cholera hot spots at district level

2. Field investigation at community for WASH+ diagnosis and in depth epidemiological study (risk assessment)

3. Identification of programmatic response according to the context (tailor made)

4. Develop an Investment Case for WASH in cholera hot spots (cost benefit analysis)

5. Advocacy through presentation of evidence based studies to Humanitarian and Development Partners to target and leverage funding in cholera hot spots
Platform roadmap towards elimination of cholera

- Carry out sustainable WASH+ intervention in communities regularly affected
- Oral Cholera Vaccination can bridge the gap between identification of needs and time to complete implementation of sustainable WASH Intervention

Step 5

- Sustainability check in cholera hot spots
- Impact study

Regional cholera strategy: an evidence based approach
At the Global level

- Participation in global platforms: GTFCC, GAVI ICG, SWA
- Supply management (OCV and cholera kits);
- Coordination, Global WASH cluster and links to Global Health cluster
- Guidance development
- Capacity building
- Research and evaluation
At the Regional level

- Cholera platforms in Dakar and Nairobi covering Africa

4 pillars of activities:
- Information and knowledge management & dissemination
- Support emergency response
- Advocacy and studies for long-term prevention
- Cross border contexts per basin
At the Country level

- Preparedness and response to outbreak
- Implementation of long-term strategy (shield) in hotspots
- In collaboration with national sub-national governments and WHO
Regional/Country focus

• Niger, Benin, Guinea, Mali, Ghana
• Malawi, Mozambique, Zambia, Tanzania

• Africa funding proposal – collaboration with CDC
  • Epidemiological basins