



GLOBAL TASK FORCE ON  
**CHOLERA CONTROL**

# ADVOCACY & FUNDRAISING STRATEGY

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Global Health Visions  
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# ADVOCACY STRATEGY

Working backward from the changes we hope to achieve is the basis for any advocacy strategy

Our **vision** is already outlined clearly in the *Global Roadmap*:

What are our current asks of decision makers?

What resources do we need?

What policy changes do we need?

**What is our ideal future?**

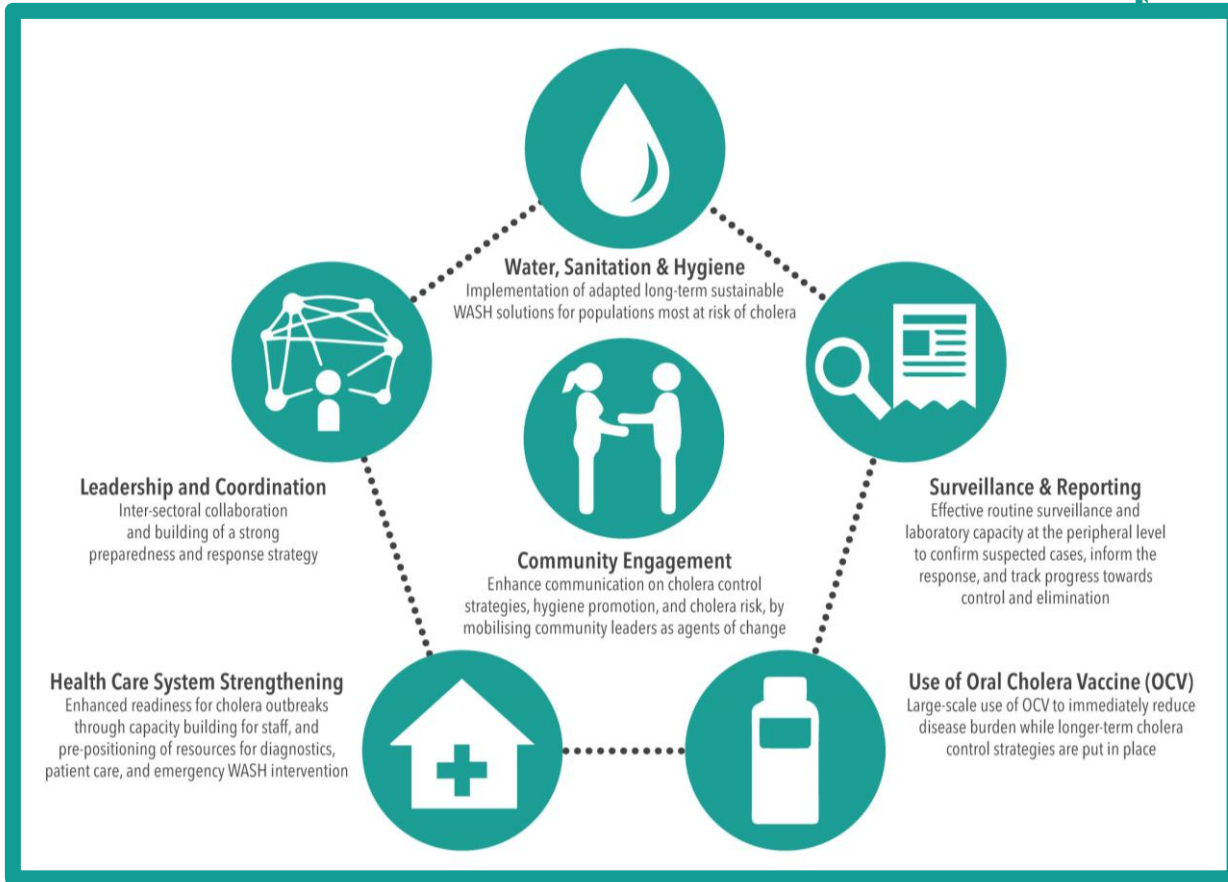
By 2030,

- 90% reduction in cholera deaths
- Elimination in 20 countries

**#EndCholera**



# ADVOCACY STRATEGY

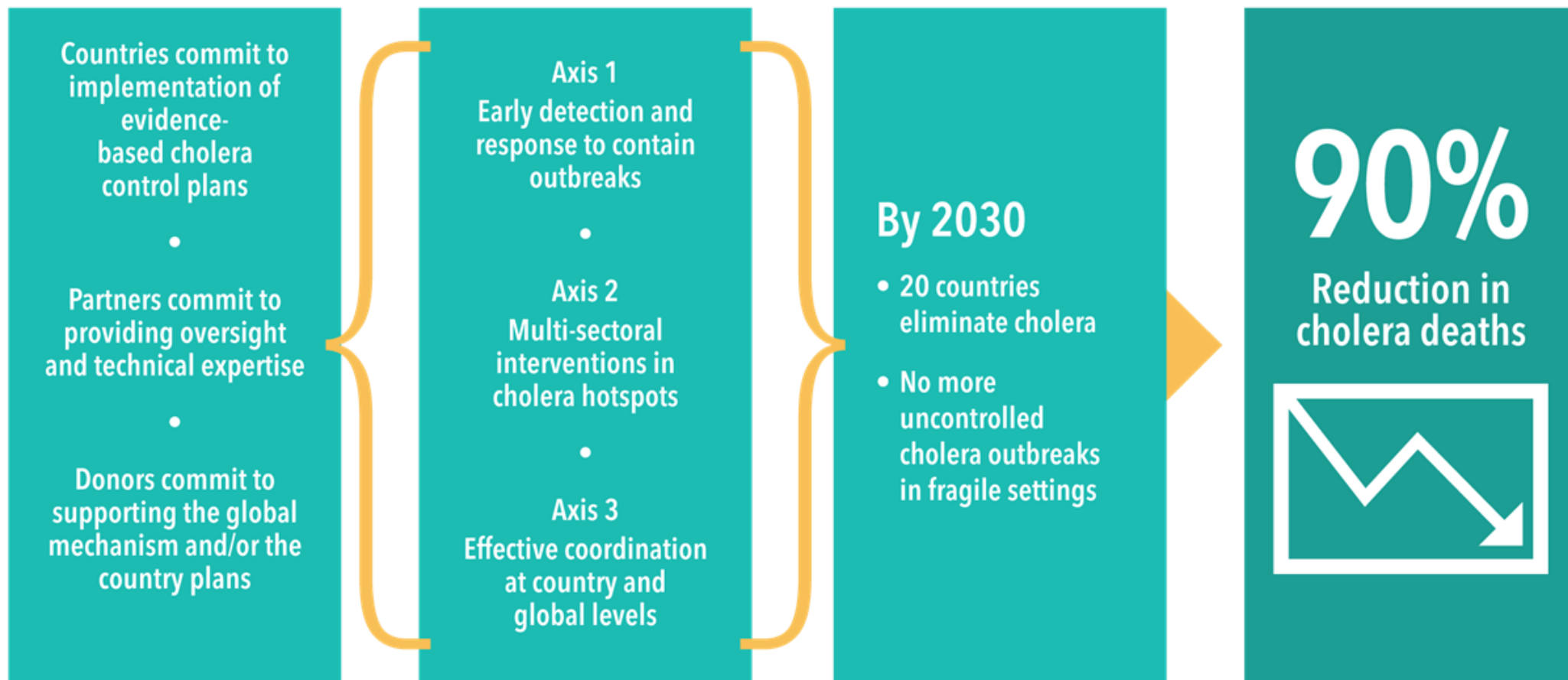


Likewise, the policy changes we seek are clearly outlined in the *Global Roadmap* and captured in its theory of change

**What policy changes do we need?**

**What is our ideal future?**

# THEORY OF CHANGE



# ADVOCACY STRATEGY

Over the past 12-18 months, several efforts to cost the implementation of the *Global Roadmap* have been undertaken, and we now have sufficient data to move ahead with concrete asks of decision makers

What are our  
current asks of  
decision  
makers?

**What  
resources do  
we need?**

What policy  
changes do  
we need?

What is our  
ideal future?

# GTFCC ADVOCACY OBJECTIVES/ASKS OF DECISION MAKERS

## DIRECT ASKS

**OF DONORS:** *Fully resource the GTFCC mechanism (with prioritization of country support)*

**OF CHOLERA-AFFECTED COUNTRIES:** *Create, resource, and implement multisectoral National Cholera Plans*

## INDIRECT ASKS

### OF DONORS, MULTILATERALS & IMPLEMENTING PARTNERS

1. Resources for countries' National Cholera Plans

2. Increase funding for sustainable WASH in line with SDG 6

3. Ensure that existing investments—particularly in WASH—prioritize cholera hotspots

4. Support Gavi replenishment

# MESSAGES

*The data generated on the cost of implementation of the Global Roadmap have been incorporated to support the GTFCC core narrative*

# 1. THE GLOBAL ROADMAP GOALS ARE FEASIBLE: ENDING CHOLERA IS POSSIBLE AND WE HAVE THE TOOLS TO DO IT

- 90% of cholera cases in Africa are concentrated in hotspots inhabited by less than 5% of the total<sup>1</sup>
- By 2030, at least 20 countries will have eliminated cholera as a public health issue of concern as result of the Roadmap implementation, and an additional 22 countries will be on their way to elimination.<sup>2</sup>
- Over 34 million cholera cases and 1.1 million cholera deaths can be prevented over the 2019-2030 *Roadmap* period<sup>3</sup>

<sup>1</sup> Lessler, J. et al. (2018) Mapping the burden of cholera in sub-Saharan Africa and implications for control: an analysis of data across geographical scales. *Lancet* 391, 1908-1915, doi:10.1016/S0140-6736(17)33050-7

<sup>2</sup> Expert input compiled by MMGH Consulting (2019)

<sup>3</sup> Hutton, G. (2019) Manuscript in preparation.



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## 2. CHOLERA EFFORTS BENEFIT A WIDE RANGE OF WASH-RELATED DISEASES AND DEVELOPMENT CHALLENGES

- Implementing the *Global Roadmap* could prevent **1.7 billion cases of diarrhoea** and **0.9 million diarrhoea deaths**<sup>1</sup>
- Conversely, sustainable WASH improvements in cholera hotspots can help us make major strides toward our collective development goals, including:
  - **SDG 6**, *Clean water and sanitation*
  - **SDG 2**, *Zero hunger*, and **SDG 4**, *Quality education*, by reducing transmission of diarrhoeal diseases that contribute to malnutrition, stunting, and cognitive losses;
  - **SDG 10**, *Reduced inequalities*, by targeting the world's most marginalized populations



<sup>1</sup> Hutton, G. (2019) Manuscript in preparation.

### 3. CHOLERA CONTROL HAS A HIGH RETURN ON INVESTMENT

- Currently, cholera is estimated to cost an average of \$57 per person or \$26 billion globally each year<sup>1</sup>
- The benefit-cost ratio more than doubles, from \$4.30<sup>2</sup> to a return of \$10<sup>3</sup> for every dollar invested in WASH in cholera hotspots.



# 10:1

**Benefit-cost ratio**

Investing in **cholera hotspots** more than doubles the return on WASH investments



<sup>1</sup> Hutton, G. (2019) Manuscript in preparation.

<sup>2</sup> Hutton, Guy. *Global costs and benefits of drinking-water supply and sanitation interventions to reach the MDG target and universal coverage*, 2012 WHO/HSE/WSH/12.01

<sup>3</sup> Hutton, G. (2019) Manuscript in preparation.

# ADVOCACY OBJECTIVES

*There are two primary (direct) and four secondary (indirect) asks of decision makers that are necessary for implementation of the Global Roadmap*

# OBJECTIVE 1: FULLY FUND THE GTFCC MECHANISM

The GTFCC Country Support Platform (CSP) will serve a critical function across three recognized gaps:



Coordination and  
Country Support



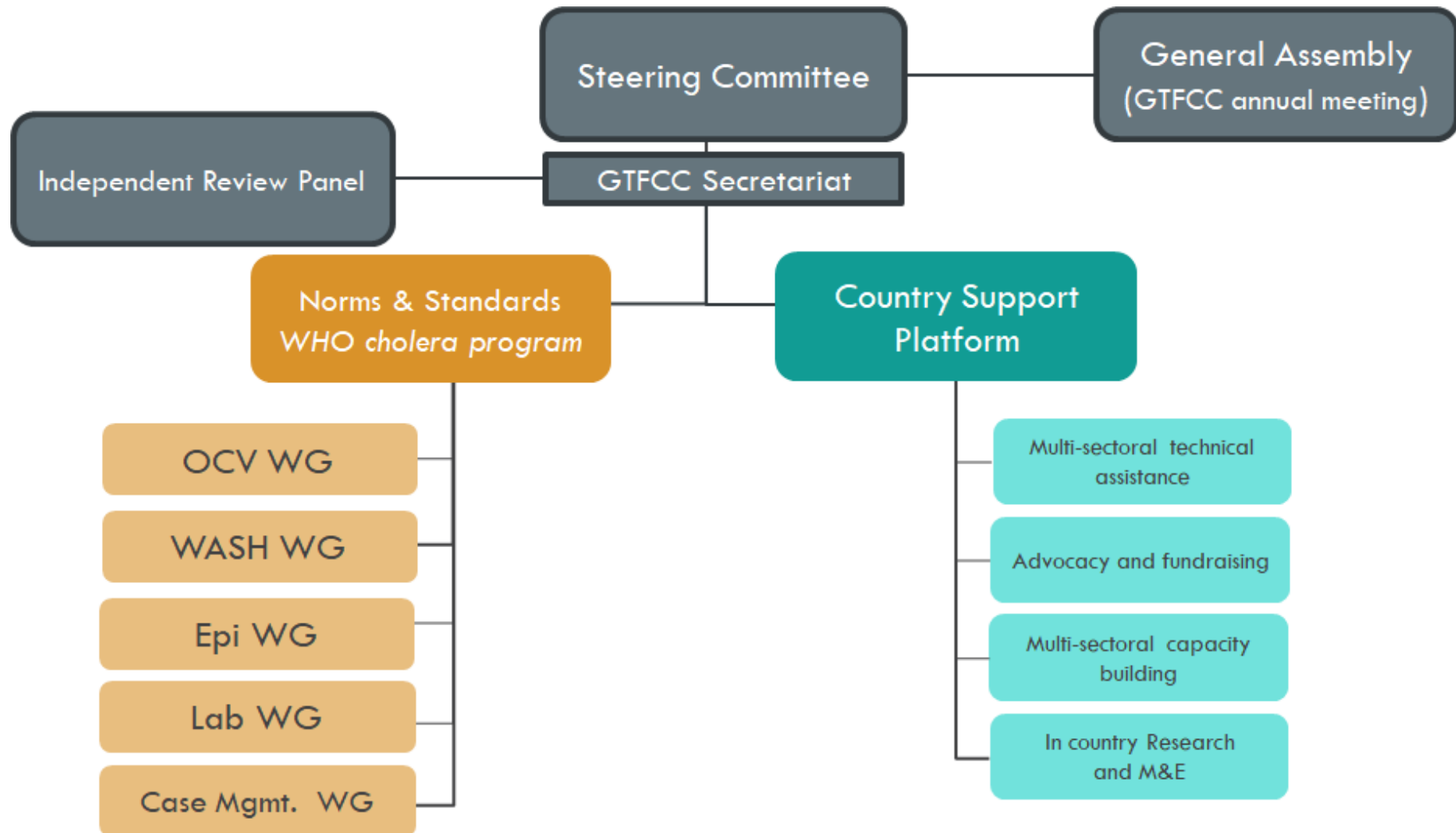
Surveillance and  
M&E



OCV for non-  
Gavi-eligible  
countries



# GTFCC OPERATIONAL MODEL





# PROSPECTIVE DONORS

## ACTIVE OUTREACH

Elma Foundation

Helmsley Charitable Trust

Vitol Foundation

Paul G. Allen Philanthropies

Open Philanthropy Project

Margaret A. Cargill Philanthropies

Wagner Foundation

Conrad Hilton Foundation

Unilever

P&G

Voss Foundation

## FOUNDATION PROSPECTS

Dalio Philanthropies

Skoll Foundation

Barr Foundation

Bohemian Foundation

Horace W. Goldsmith Foundation

Howard G. Buffett Foundation

Izumi Foundation

Pershing Square Foundation

T&J Meyer Foundation

UBS Optimus

Luke and Lori Morrow Foundation

## CORPORATE PROSPECTS

Coca Cola

Caterpillar

SUEZ

GE Foundation

Rotary International

HSBC

Ikea Foundation

# GTFCC ADVOCACY OBJECTIVES/ASKS OF DECISION MAKERS

We will build advocacy workstreams around political will building in specific cholera-affected countries and the four indirect asks. If you are interested in contributing, please reach out to the secretariat.

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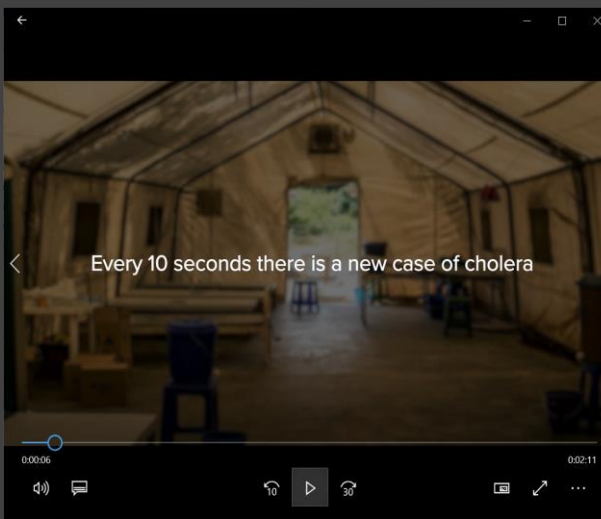
# RESOURCES



**CHOLERA  
ELIMINATION  
IS POSSIBLE**



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Every 10 seconds there is a new case of cholera

0:00:06 0:02:11

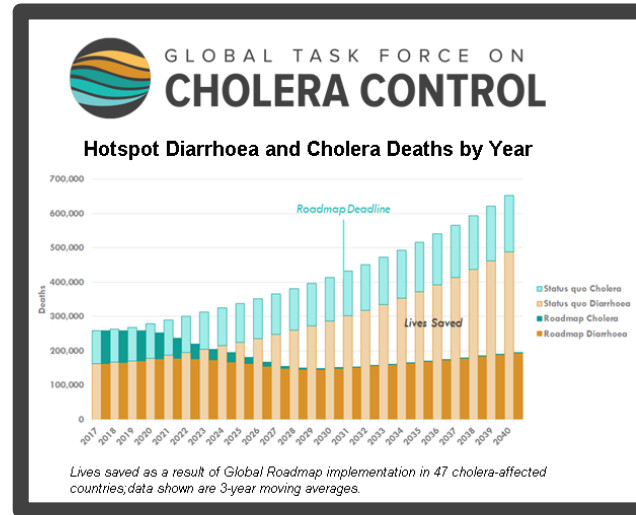
Just **5%** of the population in Africa lives in a **cholera hotspot**



We can reach them **all**



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**CHOLERA CONTROL**

**#EndCholera**

A range of advocacy and communications materials and resources are available on Dropbox. Please email [kristen.cox.mehling@ghvisions.com](mailto:kristen.cox.mehling@ghvisions.com) to be added.





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THANK YOU |