

Weekly Epidemiological **Monitor**

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Current major event

Strategic framework for ending cholera in the Region

The strategic framework for ending cholera as a public health threat in the WHO Eastern Mediterranean Region has been developed to establish effective and efficient cholera prevention and outbreak preparedness and response capacities in Member States. This strategy prepares and guides countries in the Region to implement comprehensive and effective prevention and control measures against cholera.

Editorial note

Cholera remains a significant public health problem in the Eastern Mediterranean Region. Over the past 10 years, at least 9 out of 22 countries have reported cholera cases, often in explosive epidemic proportions. Afghanistan, Iraq, Islamic Republic of Iran, Pakistan, Somalia, Sudan, Syrian Arab Republic and Yemen are considered to be endemic for cholera. There have been 35 cholera outbreaks in the Region during the tenyear period between 2009 and 2019 in Afghanistan, Iraq, Pakistan, Somalia, Sudan and Yemen. The highest number of cholera outbreaks were reported in 2017, and the disease continued to contribute to the largest proportion of outbreak disease cases in 2019 at 85.3% of reported cases.

Cholera is therefore a major public health problem that requires collective effort among countries and stakeholders. The implementation of this framework will standardize key prevention and control measures and it is expected to result in Member States being better prepared to prevent, detect and respond to the threat of cholera, protecting people in the Region from the health, social and economic impacts of the disease.

The framework has been developed through a wide consultative process and is aligned to the global strategy "Ending Cholera - A Global Roadmap to 2030" developed by the Global Task Force on Cholera Control. It provides guidance to political and technical leaders as well as other regional stakeholders to coordinate, plan, implement and evaluate actions to end cholera by 2030 (see table 2). It aims to support national planning on cholera prevention and control in the Region;

Table 1: The framework recommends the following strategic actions:

- Define national cholera programme goals, specifically:
 Priority outcomes: control or elimination.

 - Priority targets: cholera hotspots
 - Priority interventions: short-term and long-term prevention and control actions.
- 2. Prepare for early outbreak detection through:

 - Functional surveillance, laboratory and reporting systems. Dissemination of evidence-based guidelines on epidemic alert.
 - Adequate and functional system inputs: data systems, trained human resources, and supplies.
- 3. Prepare for prompt and effective response through:

 - Adequate and functional system inputs: infrastructure, data systems, human resources, supplies, and so on.
- 4. Prevent new outbreaks and limiting spread of ongoing ones through:
 - Short term: infection prevention control (IPC) interventions and oral cholera vaccine (OCV) campaigns.
 Long term: investments in water, sanitation and hygiene (WASH).
- 5. Ensure a coordinated, effective and multi-sectoral approach to prevent cholera in hotspots.
- 6. Ensure effective multi-stakeholder engagement in cholera prevention and control actions.
- 7. Monitor, evaluate and continuously learn to improve ongoing and planned cholera prevention and control

Table 2: The Global Roadmap focuses on three strategic axes:

- 1. Early detection and quick response to contain
- 2. A targeted multi-sectoral approach to prevent cholera recurrence.
- 3. An effective mechanism of coordination for technical support, advocacy, resource mobilisation, and partnership at the local and global levels.

facilitate coherence, coordination, efficiency and accountability for multistakeholder investments; and suggest a robust mechanism for inter-country collaboration and shared learning towards reaching its goal.

The framework serves as a resource through which each country may summarize priority activities under specific thematic areas given the varied contexts within each country. It will help standardize planning and the reporting of collaboration and shared experiences. The framework recommends strategic actions to be steered by an effective leadership and coordination mechanism (see table 1).

The WHO Regional Office for the Eastern Mediterranean has developed this strategic framework on cholera prevention, preparedness, control and response to outbreaks as a priority for the Region. Cholera preparedness and response encompasses all actions taken to reduce the risk of cholera morbidity and mortality, and to decrease the extent and severity of a cholera epidemic. Member States and partners will use the regional framework for preparedness and response to cholera as a key reference document to guide them in the development of country -level preparedness and response action plans.

Update on outbreaks

in the Eastern Mediterranean Region

COVID-19 in 22 EMR countries

Current public health events of concern

[cumulative N° of cases (deaths), CFR %]

Coronavirus disease 2019 (COVID-19):

Afghanistan	[57 242 (2529), 4.4%]
Bahrain	[155 402 (554), 0.4%]
Djibouti	[9722 (93), 1%]
Egypt	[209 677 (12 405), 5.9%]
Iran (Islamic Republic of)	[2 049 078 (64 232), 3.1%]
Iraq	[918 155 (14 678), 1.8%]
Jordan	[662 395 (7708), 1.2%]
Kuwait	[245 704 (1403), 0.6%]
Lebanon	[494 633 (6630), 1.3%]
Libya	[167 825 (2823), 1.7%]
Morocco	[501 688 (8891), 1.8%]
occupied Palestinian territory (oPt)	[294 639 (3102), 1.1%]
Oman	[168 005 (1747), 1%]
Pakistan	[721 018 (15 443), 2.1%]
Qatar	[189 064 (331), 0.2%]
Saudi Arabia	[397 636 (6747), 1.7%]
Somalia	[12 271 (605), 4.9%]
Sudan	[32 857 (2185), 6.7%]
Syrian Arab Republic	[20 118 (1368), 6.8%]
Tunisia	[271 861 (9293), 3.4%]
United Arab Emirates	[481 937 (1529), 0.3%]
Yemen	[5280 (1032), 19.5%]