Cholera reporting to the regional and global levels

Interim recommendations

2025



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I. Introduction

• Objectives and process of regional and global cholera surveillance

Regional and global cholera surveillance is the continuous compilation of data from affected countries, analysis and interpretation at the regional and global levels, and prompt dissemination of findings for public health action.

While surveillance at the country level is critical to guide local interventions against cholera, regional and global surveillance serve as essential complements by:

- alerting other countries, particularly those with geographic areas at risk of cross-border spread;
- enhancing understanding of cholera transmission patterns across borders to support multicountry preparedness, readiness, and response strategies;
- informing operational decisions about acute and deteriorating outbreaks that may require external support for mitigation;
- advocating for the mobilization of resources to bolster cholera prevention and control efforts.

The regional and global cholera surveillance process is outlined in Figure 1.

Figure 1. Process of regional and global cholera surveillance Country level cholera surveillance at the country-level Reporting to the regional and global levels Countries report weekly aggregate cholera data (Admin-1 or Admin-2 level) to WHO regional and global levels Analysis and dissemination of outputs WHO analyzes and interprets the cholera situation at the regional and global levels WHO broadly disseminates outputs of regional and global cholera surveillance Orientation of cholera outbreak response strategies and of preparedness and readiness activities

• State of play

The analysis and dissemination of regional and global cholera surveillance outputs (Figure 1) have seen notable advancements since 2023, through:

- the publication of WHO monthly global cholera situation reports [here],
- the launch of a public WHO global cholera and Acute Watery Diarrhoea (AWD) dashboard [here],
- the preparation of WHO weekly updates on the global cholera situation and dissemination to operational partners involved in the cholera response, including those of the GTFCC network,
- the publication of monthly regional cholera bulletins for the African region [here],
- the launch of a public WHO cholera dashboards for Central America (Hispaniola) [here].

These improvements have strengthened regional and global surveillance efforts, enhancing operational coordination in response to the global cholera upsurge.

These achievements have been facilitated by an increase in human resources dedicated to global surveillance, after WHO classified the global resurgence of cholera as a grade 3 emergency in January 2023, the Organization's highest internal level for emergencies.

However, limited progress has been made in routine practices for cholera data reporting to the regional and global levels. Consequently, compilation of cholera data still largely relies on the extraction and compilation of information shared by countries in different formats, which often lack harmonization.

• GTFCC recommendations

The recent increase in resources driving enhancements in regional and global cholera surveillance may be unsustainable. Ensuring the sustainability of these improvements is heavily dependent on the development of more effective processes, particularly for reporting cholera data to the regional and global levels.

To that end, this document sets out updated GTFCC recommendations for cholera reporting to the regional and global levels. These recommendations supersede previous GTFCC recommendations on cholera reporting to the regional and global levels.

II. Harmonized datasets for cholera reporting to the regional and global levels

• Principles

Simplifying reporting requirements is critical to encourage routine reporting of cholera data to the regional and global levels. Accordingly, the 2025 GTFCC recommendations on cholera reporting to the regional and global levels represent a significant simplification of previous GTFCC recommendations, while still allowing for the monitoring of key indicators for regional and global surveillance.

Recognizing that countries vary in reporting capacity, two tiers of reporting are proposed:

- a **preferred dataset** that consists of a limited number of variables, enabling effective monitoring of key indicators for reasonably informative regional and global surveillance;
- a minimum dataset that consists of an even more streamlined set of variables, designed as an interim option for countries facing difficulties in reporting the preferred dataset, allowing for the monitoring of critical indicators for regional and global surveillance.

The minimum dataset is proposed as a **temporary solution**, with the goal of progressing towards reporting the preferred dataset. This flexible dual system aims to support incremental improvements in reporting to meet regional and global surveillance needs.

A <u>GTFCC Excel reporting template</u> is available to facilitate reporting the preferred or minimum dataset.

• Preferred dataset

The preferred dataset consists of **eight variables** (Table 1) recommended for **weekly** aggregate reporting at **administrative level 2** (e.g., districts).

These variables should be interpreted consistent with definitions set out in the <u>GTFCC guidance on Public</u> <u>health surveillance for cholera</u>. In addition, although aggregate reporting is recommended for reporting cholera to the regional and global levels, case-based recording (health facility-based surveillance) should be routinely implemented at country level, as recommended in the GTFCC guidance on Public health surveillance for cholera.

Reporting of the preferred dataset should be supplemented with the following information to facilitate the analysis and interpretation of reported data:

- Definition(s) of a suspected cholera case,
- Definition(s) of a confirmed cholera case,
- Population data at administrative level 2.

Table 1. Preferred dataset for cholera reporting to the regional and global levels

Variables for weekly aggregate reporting at administrative level 2

- Number of suspected cholera cases reported through health facility-based surveillance by age group (< 5 years old, ≥ 5 years old)</p>
- Number of health facility cholera deaths
- Number of community cholera deaths
- Number of suspected cholera cases tested by culture or Polymerase chain reaction) (PCR)
- Number of suspected cholera cases tested positive by culture or PCR
- Number of suspected cholera cases tested by Rapid Diagnostic Test (RDT)
- Number of suspected cholera cases tested positive by RDT

• Minimum dataset

The minimum dataset consists of **three variables** (Table 2) that are recommended for **weekly** aggregate reporting at **administrative level 1** (e.g., province, state, or region).

These variables should be interpreted consistent with definitions set out in the <u>GTFCC guidance on Public</u> <u>health surveillance for cholera</u>. In addition, although aggregate reporting is recommended for reporting cholera to the regional and global levels, case-based recording (health facility-based surveillance) should be routinely implemented at country level, as recommended in the GTFCC guidance on Public health surveillance for cholera.

Reporting of the minimum dataset should be supplemented with the following information in support of the analysis and interpretation of the data reported:

• Definition(s) of a suspected cholera case.

Table 2. Minimum dataset for cholera reporting to the regional and global levels

Variables for weekly aggregate reporting at administrative level 1

- Number of cholera cases reported through health facility-based surveillance (suspected & confirmed combined)
- Number of health facility cholera deaths
- Number of **community cholera deaths**

• Use at the regional and global levels

The following indicators will be computable from the minimum and preferred datasets for routine monitoring at the regional and global levels:

- weekly incidence: the number of cases per week per geographic unit to detect new outbreaks and monitor the trends of active outbreaks over time;
- **cumulative incidence:** the number of cases per geographic unit since the beginning of an outbreak (or the calendar year) to monitor the impact of the outbreak;
- **incidence rate:** the number of new cases per 100,000 population per geographic unit per week to monitor the speed of cholera transmission and compare it across geographic units and countries;
- **case fatality ratio (CFR):** the proportion of health facility deaths to detect challenges in access to health care and/or quality of care;
- **number of community deaths:** the number of deaths that occur before reaching a health facility to detect challenges in access to health care and/or in care seeking behavior.

Moreover, the preferred dataset will enable monitoring of these indicators at a finer spatial resolution as well as tracking test positivity rates and the proportion of suspected cholera cases in children under 5 years old. This enhanced data granularity will improve the ability to distinguish cholera outbreak dynamics from those of other diarrheal diseases.

The reported data (minimum and preferred datasets) will also be used to generate tables, epidemiological curves, maps, and other visualizations.

III. Way forward

The 2025 GTFCC recommendations on cholera reporting to the regional and global levels aim to:

- harmonize reporting the 2025 GTFCC recommendations offer harmonized recommendations for cholera reporting to the regional and global levels, providing clear specifications on required data for consistent surveillance;
- **simplify reporting** the 2025 GTFCC recommendations propose a streamlined approach, reducing reporting requirements to 3 to 8 variables, facilitating realistic routine implementation;
- accommodate gradual improvement the 2025 GTFCC recommendations allow for a gradual progression, enabling countries to begin with the minimum dataset and transition to the preferred dataset as reporting capacity increases. This flexible structure ensures that all countries, regardless of current data collection capabilities, can contribute valuable information towards global and regional cholera surveillance.

The GTFCC:

- encourages countries to report aggregate cholera data weekly to the regional and global levels in accordance with these recommendations using the <u>GTFCC Excel reporting template</u>;
- stands available to assist countries, through its network of partners, in improving cholera data collection and information systems to facilitate the transition from the minimum to the preferred dataset;
- strongly encourages WHO to continue the regular dissemination of regional and global cholera surveillance outputs;
- urges donors to support the maintenance and further development of regional and global cholera surveillance, recognizing it as a critical activity for coordinated efforts against cholera outbreaks (Axis 1 of the Global Roadmap to End Cholera by 2030).

IV. Supplementary resources

- Cholera surveillance at the country-level
- GTFCC guidance on public health surveillance for cholera [here] to be used by countries for implementing routine cholera surveillance at the country level as well as to interpret variables for reporting to the regional and global levels.
- GTFCC method for the assessment of cholera surveillance [here] to be used by countries to selfassess their cholera surveillance system and strategies including for cholera reporting to the regional and global levels.
- Reporting of cholera data to the regional and global levels
- **GTFCC Excel reporting template** [here] to be used by countries for the weekly reporting of the preferred or the minimum dataset.
- **GTFCC** Secretariat [<u>GTFCCsecretariat@who.int</u>] to be contacted for questions on the recommendations on cholera reporting to the regional and global levels or for requests for technical assistance for using the GTFCC Excel reporting template.
- WHO [cholera@who.int] to be contacted to report cholera data at the global level and for guidance on reporting procedures.
- Outputs of regional and global surveillance
- WHO monthly multi-country cholera situation reports [here] provide a periodic overview of the cholera situation at the global level.
- WHO global cholera and Acute Watery Diarrhoea (AWD) dashboard [here] provides up-to-date information on cholera and AWD outbreaks.
- Monthly regional cholera bulletins for the African region [here] provide a periodic overview of the cholera situation in African countries.
- **Public WHO cholera dashboards for Central America (Hispaniola)** [here] provides up-to-date information on cholera in the Hispaniola.