

**Global Task Force on Cholera Control (GTFCC)**  
**DECLARATION OF INTENT TO USE ORAL CHOLERA VACCINE FOR NON-EMERGENCY SETTINGS**  
 Email the completed form to [cholera@who.int](mailto:cholera@who.int)  
 (or fax to the number + 41 22 791 41 98)

*The Global Task Force on Cholera Control (GTFCC) supports increased implementation of evidence-based strategies to control cholera. In this scheme, oral cholera vaccines (OCV) may be used in cholera highly endemic settings (hotspots) with the goal of providing equitable access for the populations most exposed to the risk of cholera. This is done with the understanding that the vaccines provided through this request will be used in campaigns that are part of a broader cholera control program and that such an undertaking has been endorsed by the Ministry of Health of the requesting country. By requesting OCV, the Ministry declares its intent to use the vaccine for non-emergency settings. This form is considered to be an initial step in the process. More detailed information on cholera control activities and the planned vaccination will be requested at a later date.*

**1. General information**

Date of the request: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Requesting Country: \_\_\_\_  
    DD    MM    YY

<b>Contact name at the Ministry of Health</b>	
<b>Address</b>	
<b>Email</b>	
<b>Phone</b>	
<b>Fax</b>	

**2. Cholera situation**

- a. Anticipated location of the vaccination campaign: \_\_\_\_
- b. Total population of the location: \_\_\_\_
- c. Total number of doses required to vaccinate target area: \_\_\_\_
- d. Average number of suspected cholera cases per year in the location, over the last 5 years: \_\_\_\_
- e. Average number of suspected cholera deaths per year in the location, over the last 5 years: \_\_\_\_
- f. Annual average case fatality ratio (CFR): a) at the health facility level: \_\_\_\_%      b) at the community level: \_\_\_\_%
- g. Indicate whether laboratory capacity to confirm cases by culture or PCR is available at the location targeted for vaccination
  - Yes; **Check all that apply:**  Provincial level  District level  Health facility level  Other: \_\_\_\_\_
  - No, available at national level only
  - No, not available in the country
- h. Please describe local history of cholera, including recent outbreaks and transmission patterns, and how the burden of cholera compares with those of other regions/districts/sub-districts in the country to justify the need for OCV in the location specified.

**3. Local context**

Please describe contextual factors (e.g., unusual weather pattern, environmental factors, location that is distinct from other parts of the country, population density, mobility, and other special considerations) that increase the risk and/or severity of cholera and justify vaccination in the location and population specified.

**4. Capacity to improve WaSH conditions**

- a. Current proportion of the population of the location with access to improved drinking water sources: \_\_\_\_\_%
- b. Current proportion of the population of the location with access to improved sanitation facilities: \_\_\_\_\_%
- c. Please include a description of any medium and long-term plans to implement sustainable WaSH interventions in the location.

**5. Capacity to implement the campaign**

a. Please indicate which of the following is/are in place to enable the campaign: (Refer to the WHO guidance for planning OCV campaigns – Annex 1, for further details)

- Oral Cholera Vaccine registration in the country
- Logistics (cold chain, transport, waste management, etc.)
- Social Mobilization (community network, capacity to mobilize, etc.)
- Human resources
- Financial resources
- Implementation plan
- Capacity to perform monitoring and evaluation (epidemiological surveillance, laboratory diagnostic capacity, coverage survey, impact evaluation, economic assessment, etc.)
- EPI involvement
- Official approval from relevant Ministries
- Other:

b. Please summarize the expected impact of the OCV campaign resulting from this request, as well as its overall significance to the country’s long-term cholera prevention and control strategies.

**6. Partners and Donors**

Please list the organization(s) that have been supporting and/or will support the cholera control activities including the proposed OCV campaign.

Organizations	Activities Supported	Amount of Funding Received / Expected

**7. Expert Review**

Every request is subject to an expert review that is to be planned with the GTFCC Secretariat, to ensure that key factors such as the risk of cholera, severity of the disease, WaSH and healthcare conditions, capacity to improve these conditions, and commitment to implement the campaign, are considered.

Was such a review conducted prior to this expression of intent?  Yes  No

If yes, please attach the report. Any other documents including any epidemiological or contextual analysis, relevant project plans and other support documents should also be attached. If no previous review has been done, the GTFCC Secretariat will be in touch to provide support for this review.