

## OVERVIEW



# CONTINENTAL CHOLERA EMERGENCY PREPAREDNESS AND RESPONSE PLAN FOR AFRICA 1.0

SEPTEMBER 2025- FEBRUARY 2026

### **Incident Management Support Team**

The Incident Management Support Team (IMST) is Africa's continental effort co-led by Africa CDC and WHO, that collaborates with ministries of Health, regional partners, and global stakeholders to expand vaccination efforts, enhance diagnostic access, and strengthen health system resilience.

## Background

Cholera remains a major public health threat in Africa, with 213,586 suspected cases and 4,462 deaths (CFR 2.1%) reported in 23 AU Member States during the first seven months of 2025. Despite being preventable and treatable, cholera persists due to fragile health systems, poor WASH infrastructure, conflict, displacement, climate change, and rapid urbanization.

## Call to Action

In June 2025, African Heads of State elevated cholera to a continental priority through a high-level Call to Action to eliminate cholera in Africa by 2030, in line with global targets. To operationalize this commitment, they mandated the establishment of:

- **An African Continental Taskforce on Cholera Control**, aligned with the Global Taskforce on Cholera Control (GTFCC), to provide oversight, foster multisectoral collaboration, and drive elimination strategies.
- **A Continental Cholera Incident Management Support Team (IMST)**, co-led by Africa CDC and WHO, to coordinate and strengthen rapid outbreak response.

Heads of State are urged to champion this agenda by mobilizing resources, endorsing whole-of-government approaches, and ensuring accountability for progress.

## Continental Roadmap

The Continental Roadmap, aligned with the Global Strategy and AU Agenda 2063, envisions eliminating cholera epidemics in Africa by 2030. Its goals are to cut deaths by 90%, eliminate cholera in 20+ countries, and maintain CFR below 1%. A dual approach balances rapid outbreak response through the IMST with long-term multisectoral strategies via the Taskforce.

## Goal and Objectives

The plan sets a clear goal with measurable objectives to guide countries and partners towards elimination.

**Goal:** Achieve cholera elimination in Africa by 2030.

**Objectives:**

- Reduce cholera deaths by 90%.
- Eliminate cholera in more than 20 countries.
- Maintain case fatality below 1%.
- Strengthen preparedness and surveillance systems.
- And foster cross-border and regional collaboration.

## African continental taskforce on cholera control

- Bring together Member States, and key stakeholders to ensure multisectoral coordination.
- Align continental efforts with the Global Cholera Elimination 2030 targets.
- Support the establishment of National Presidential Taskforces on Cholera.
- Mobilize resources, including vaccines, to accelerate elimination efforts by 2030.

## A Continental Cholera Incident Management Support Team (IMST)

The IMST, integrated with existing Mpox IMST led by Africa CDC and WHO, will deliver rapid, coordinated response to acute crises while leveraging technical expertise and logistics support.

## Key Strategies and Actions

To reach these objectives, the plan promotes a package of integrated strategies and priority actions.

- Coordination: Enhance multisectoral and cross-border collaboration with stakeholders.
- Surveillance and Early Detection: Strengthen integrated surveillance and risk mapping.
- Laboratory Capacity: Ensure timely diagnostics and real-time data sharing.
- Case Management: Scale up adequate rehydration, IV fluids, antibiotics, and infection prevention.
- WASH Interventions: Expand safe water, sanitation, and hygiene access in hotspots.
- Oral Cholera Vaccination: Scale up preventive and reactive OCV campaigns.
- Community Engagement: Intensify behavior change communication, civil society engagement, and community surveillance.

## Resource Needs

Achieving elimination will require mobilizing essential supplies, medical tools, and operational support.

- Laboratory diagnosis: sustained availability in Point of care, rapid tests, culture media, mobile laboratories, and strengthened regional reference laboratories.
- Medical Supplies: Oral rehydration salts, IV fluids and antibiotics.
- WASH Kits: Water testing and treatment products, safe storage containers, and hygiene kits.
- IPC commodities: Protection for frontline health workers.
- Vaccines: Expanded OCV supply, equitable allocation, and local production capacity.
- Operational Support: Logistics, transport, and rapid response teams.
- Workforce: Community healthcare workers, Epidemiologist to enhance efficient response.

## Budget

The continental response plan requires **USD 231.7 million** for supplies, outbreak response, preparedness, and support to high-risk Member States. While vaccines are expected through donations, bridging financing gaps will demand **sustained domestic and international funding** for full implementation. Beyond the emergency envelope, an additional **\$100 million must be mobilised** to accelerate **African OCV production**.

## Key Partners

The plan leverages the comparative advantage of diverse stakeholders to accelerate cholera elimination.

- Continental Leadership: Africa CDC, WHO.
- Global Agencies: ECHO, EU, Gavi, GTFCC, IFRC, MSF, Pasteur Network, UNICEF, Wellcome.
- Regional & National Actors: Ministries of Health, Ministries of Finance, Ministries of Planification, Ministries in charge of Water and Sanitation, NPHIs, civil society, community-based organizations.
- Donors and Financing Mechanisms: Gavi, the World Bank, bilateral and multilateral partners.
- Research and Academia: Institutions driving innovation, operational research, monitoring, and evaluation.



African Leaders  
Champion the  
Call to Fight  
Cholera



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