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Abstract title

Acceptability, perception, and adaptive mechanisms of the Luanda population affected by the cholera epidemic exposed to the CATI-CORT (Community-based Targeted Intervention / Community Outbreak Response Team) emergency response protocol.

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Background

Since December 2024, Angola has been facing the most severe cholera epidemic in its recent history. As of January 2026, nearly 36,500 cases and 898 deaths have been recorded, with an overall Case Fatality Rate (CFR) of 2.5%. The INGO Doctors with Africa CUAMM, in collaboration with the Angolan MoH and UNICEF, is responsible for the emergency response in Luanda Province, which reported 7,075 cases and 228 deaths, with a CFR of 3.2%.

Objectives/Purpose

Evaluating the RCCE (Risk Communication and Community Engagement) / SBC components for risk factor reduction about acceptability and compliance to promoted preventive behaviors.

Methods

Affected patient's post-intervention household-to-household based feedback mechanism collected via Solstice digital platforms, and focus groups discussions with leaders, head of households, young men

Results

The system collected 790 responses regarding the lived quality of the rapid response teams and about environmental determinants of cholera.

74% of the population appreciates the intervention, but stigmatization related to premises disinfection. Mothers groups highlights deficiencies in the water network that limit the adoption of hygiene practices. Among young men— 35% of cases—significant knowledge gaps on transmission methods were reported.

Conclusion

CATI-CORT protocol as a pivotal tool for SBC strategies aimed at reducing the impact of environmental determinants on infectious diseases, and for generating scientific evidence for the planning and strengthening of health systems, if duly promoted.