

Summary feedback on MSWG for the VCWG Friday 1 Feb 2019

MSWG aims to design and promote new intervention mechanisms and malaria-sensitive projects and programmes that span across different sectors, the plans and activities of which affect the environmental and social determinants of malaria and other vector-borne diseases.

Objectives of the inception meeting – mainly to agree on scope and focus – and specifically

- Identify gaps in the design and delivery of integrated multi-sectoral approaches;
- Prioritizing the most important actors in other relevant sectors and encourage their engagement;
- Promote successful models and design new approaches to multisectoral approaches;
- Identify additional resources to support activities, both within existing programmes and in establishing new partnerships; and
- Establish some priority regions/countries with high political will and conducive existing initiatives

Scope and boundaries

It was agreed that malaria remains the focus of the MSWG, but that the scope would cover all vector-borne diseases.

With malaria the most high-profile VBD, the malaria/mosquito vector “model” should stay at the forefront as a “marketing tool” to promote intersectoral action.

Environmental management interventions and social engineering efforts by other sectors all aim at transmission interruption. An important aspect is how malaria affects other sectors, for example farmers’ productivity in agricultural production areas. Practical interventions and investments may address and benefit a range of public health challenges. The economic advantages of such an integrated multi-disease approach will be clear, especially to people outside of the health sector.

One possible starting point recommended by the group was mapping the current status and trends of intersectoral committees and projects at a national level. Focusing on the comparative advantages of prospective partners will help to bridge identified gaps and to frame issues of potential interest to them. The political leverage of decision-makers in the different sectors should be considered when reaching out to possible collaborators.

A singular top-down approach is not sufficient: at the community level, where sectoral boundaries hardly exist, it will be essential to ensure good practice in agriculture, mining and other economic activities, and that good design and maintenance of infrastructure comes from the community itself, as a bottom-up approach.

The MSWG interfaces with the VCWG, and it can pick up seamlessly on related issues, for instance when reaching out to mayors, communities and stakeholders.

The MSWG can provide solutions in situations where the achievements of conventional approaches are coming under pressure because of drug and insecticide resistance, and social and behavioural resistance. Intersectoral approaches will add resilience and sustainability; they are in line with the SDG 2030 agenda and aim to preserve our drug and insecticide resources for future generations.

The joint parliamentary strategy of RBM and the GFTMH is of immediate relevance to the MSWG. It aims to build inclusive and multisectoral coalitions of parliamentarians with a focus on public health, and those with other foci with constituencies in high disease regions. Parliaments should consider malaria when debating a range of development issues.

Five public sectors on which the MSWG will focus are 1. Settlement planning & urban infrastructure, 2. Food, agriculture & forestry, 3. Tourism, 4. Extractive industries, and 5. Health.

The need was recognized for a document or tool that can be provided to governments for sectors other than the health sector on how to interact with MSWG.

In concluding this discussion on scope and focus, it was highlighted that malaria is a man-made problem in a man-made environment, and decision-maker awareness of this will help to stop creating the problem. Community and behavioural changes are another issue to be looked at from a multi-sectoral angle.

This implies that new development projects require an HIA to identify health risks and health opportunities at the early planning stage, as a basis for design and operational measures addressing the environmental and social determinants of malaria and other VBD to reduce or eliminate risks and promote benefits. In existing settings, knowledge about the eco-epidemiological characteristics including vector bionomics should be linked to the environmental and social determinants of malaria and VBD transmission, as a basis for the design and implementation of environmental management measures as a component of Integrated Vector Management.

The efforts to promote intersectoral action for environmental management for vector control in the 1980s and 1990s (WHO/FAO/UNEP/UNCHS PEEM) were briefly presented. The outputs had been a range of normative documents (PEEM Guidelines), research and development (particularly with CGIAR institutions in agricultural production systems), technical assistance and capacity development (health impact assessment of development projects, coordinated IPM and IVM operations, promotion of environmental management by agricultural extension workers/farmer field schools).

The MSWG split up **into three groups** for detailed discussions on **1. tool development, 2. demographics, communities & humanitarian, and 3. project design & finance.**

Group 1 saw as the key issue in tool development the generation and management of knowledge, and imparting this knowledge in various ways. Case studies from individual countries are a principal source to create an information base. It made the following recommendations:

1. One-page recommendation guidance with summaries of issues the MSWG wants non-health sectors to think about.
2. Formulation of a plan for outreach, figuring out who to contact. Suggestions were: existing key players in municipalities and cities, China's aid in Africa, regional development banks (ADB, AfDB, IADB, EBDR, EIB).
3. Identification of relevant WHO's manuals and necessary updates (for example WHO Offset Publication 66 (1984): Environmental Management for Mosquito Control, with special reference to malaria).

Group 2 proposed as a key idea the creation of a rapid assessment tool where the tool of the *Zeromalaria Campaign* by RBM and the African Union can be associated with databases documenting the status of determinants malaria endemicity and outbreaks, for instance on housing and urban development, road construction or agriculture. On the short term: identifying databases,

on long term: modelling of the assessment tool. Similarly, the malaria & economics research data tool on the RBM website can be emulated made relevant for multi-sectoral application. Members of the MSWG can add to the research collection according to their expertise and sectoral affiliation.

It was suggested that national environmental and health impact assessments policy and practice could provide a handle on promoting an intersectoral malaria agenda. It was also recognized that misconceptions about EHIA may create negative connotations and undermine its potential to catalyse policy/practice change.

Group 3 key saw project design and finance start with engagement with new collaborators, especially the private sector, and embed VBD prevention and control measures very early on in the project cycle. Also, to focus on corporate responsibilities and opportunities which bring out clearly advantages to private enterprises. The group proposed to tap into existing big projects that we could guide within our agenda. In this scenario, we would need to find out what projects come in the next years. Contacts with private sector foundations, project organisers and development banks may help identify projects in the pipeline that provide a context conducive to test the incorporation of VBD measures addressing risks and opportunities.

Further group discussions elaborated the issues identified, and **led to the following conclusions:**

Preparation of sector specific advocacy briefs highlighting the following: The impact of VBD on the specific sector; what the sector can do against it; why this benefits this sector in particular.

It is therefore most important to point out how each sector specifically can profit with the decision to contribute to our agenda.

An outreach strategy was discussed to private sector entities, charity foundations, and international organizations and NGOs operating in non-health sectors.

An example was presented on multi-sectoral cooperation in disease control: the project on Dams & Health which collected data on planned and existing dams, using Google Earth remote sensing to detect additional water bodies through which they found dams and water bodies not previously referenced in geographical databases. Among the health issues (the One-Health Concept) influenced by water bodies featured improved food security, better livelihood, water supply, bathing & hygiene, reduced water quality, breeding of vectors (mosquitoes, snails) and other infectious diseases.

Finally, **three groups worked on the design of multi-sectoral prototype proposals in three areas:**

1. Agriculture, 2. Urban management, 3. Private sector, in the process addressing the following questions:

- How do we define outcomes that are of interest for the other sectors that are also in the interest of reducing malaria?
- How can we make the prototype proposal an example to further elaborate the idea in later specific proposals?

The “Agriculture” group developed three case study ideas: a OneHealth & Livestock project could explore livestock management interventions that also contribute to improving human health. There are links to the use of insecticides, antibiotics and vaccines, as well as opportunities for zoonophylaxis. Testing drainage regimes in two highly malaria endemic districts in Africa (Banfora, Burkina Faso and Tororo, Uganda) could elucidate the links between crop varieties, irrigation practice and transmission risks. A third concept was to generate evidence on reducing VBDs in plantation agriculture in collaboration with FairTrade, e.g. in banana or cacao plantations. For this

option a broader disease prevention and control approach would include a range of collaborations covering case management, LLINS/IRS, housing improvements and environmental management, and involving the Ministry of Trade and donors. All three project proposals require similar tools: GIS modelling, an M & E framework, and expert inputs from an agronomist, agricultural economist and an irrigation engineer.

The “Urban Management” group focused on Accra, the capital of Ghana. Accra is a member of the 100RC (100 Resilient Cities supported by the Rockefeller Foundation) malaria is an important public health problem. The 100 Resilient Cities receive financial and logistical guidance for establishing a Chief Resilience Officer to support a city’s proactive and integrated resilience efforts. There is an apparent political will with the local government, as shown by the Clean Accra Project and the BreatheLife campaign. The tools needed for this would be a mapping of the stakeholders involved in these projects and which sectors are most important to target, as well as a forecasting tool to predict different outcomes and risk stratification. The outcome for this case study could be an evidence-based tool to bring vector control into city planning-

The “private sector” group focused the issue of man-made malaria in extractive industries. The IFC Performance Standards set a normative framework for the extraction industry. The International Commission on Minerals and Mining would be an important partner. This would not be a short term activity – it would require the development of a long term relationship with single key players to produce an impact on minimising man-made malaria. Another partner could be the NGO Goodbye Malaria which raises money from the private sector (from the aluminium, oil and gas industries) that is then matched by the Global Fund and used for malaria interventions. Potential activities include: awareness training, interacting with industry specialists on the intertwined issues on health, social and environment issues; the private sector most likely will catch on to environmental and social issues and we therefore must think about the bigger picture.

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