



Malaria Vector Control

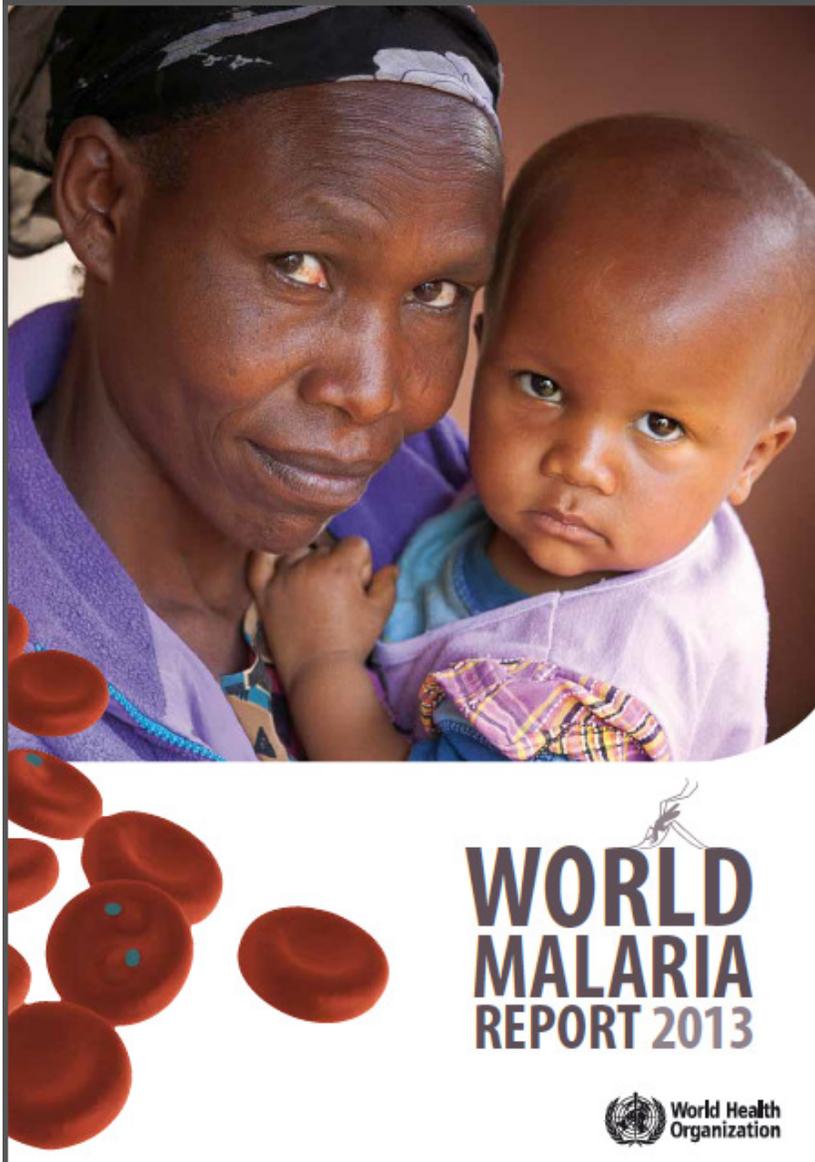
Priorities and Opportunities



2014



Malaria progress



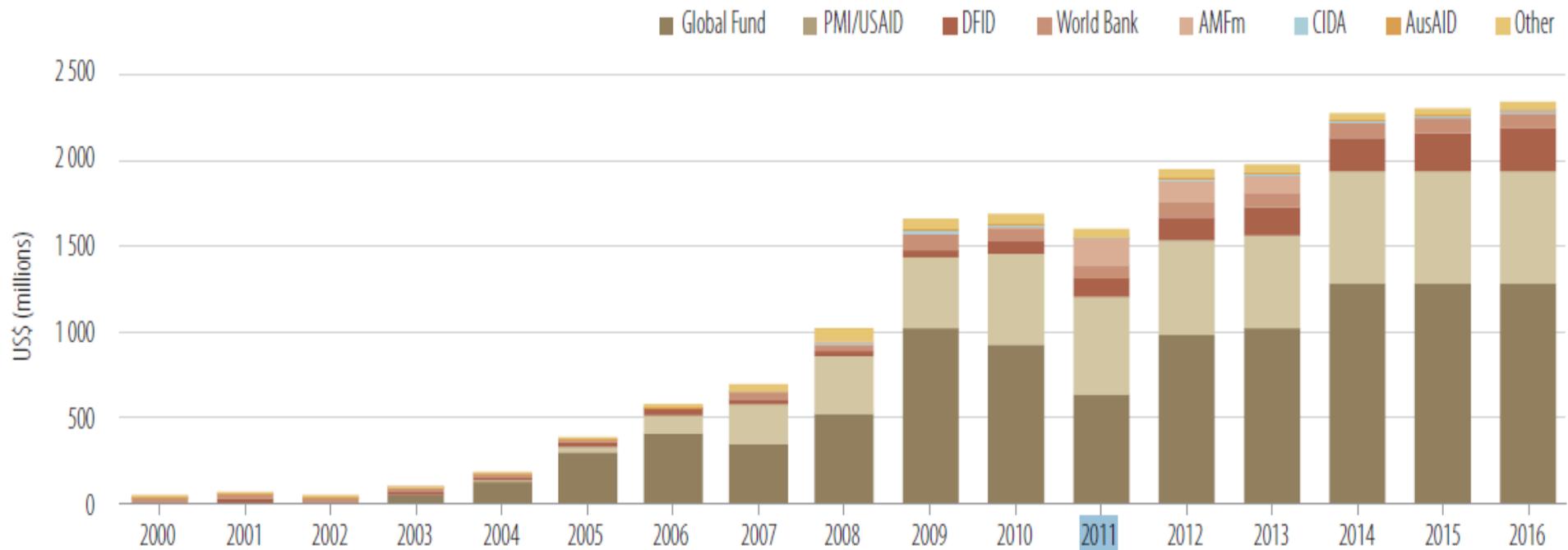
Worldwide, between 2000 and 2012, estimated malaria mortality rates fell by

- 45% in all age groups and
- 51% in children under 5 years

Nevertheless, between 2011 and 2012, the pace of decrease in estimated malaria mortality rates slowed

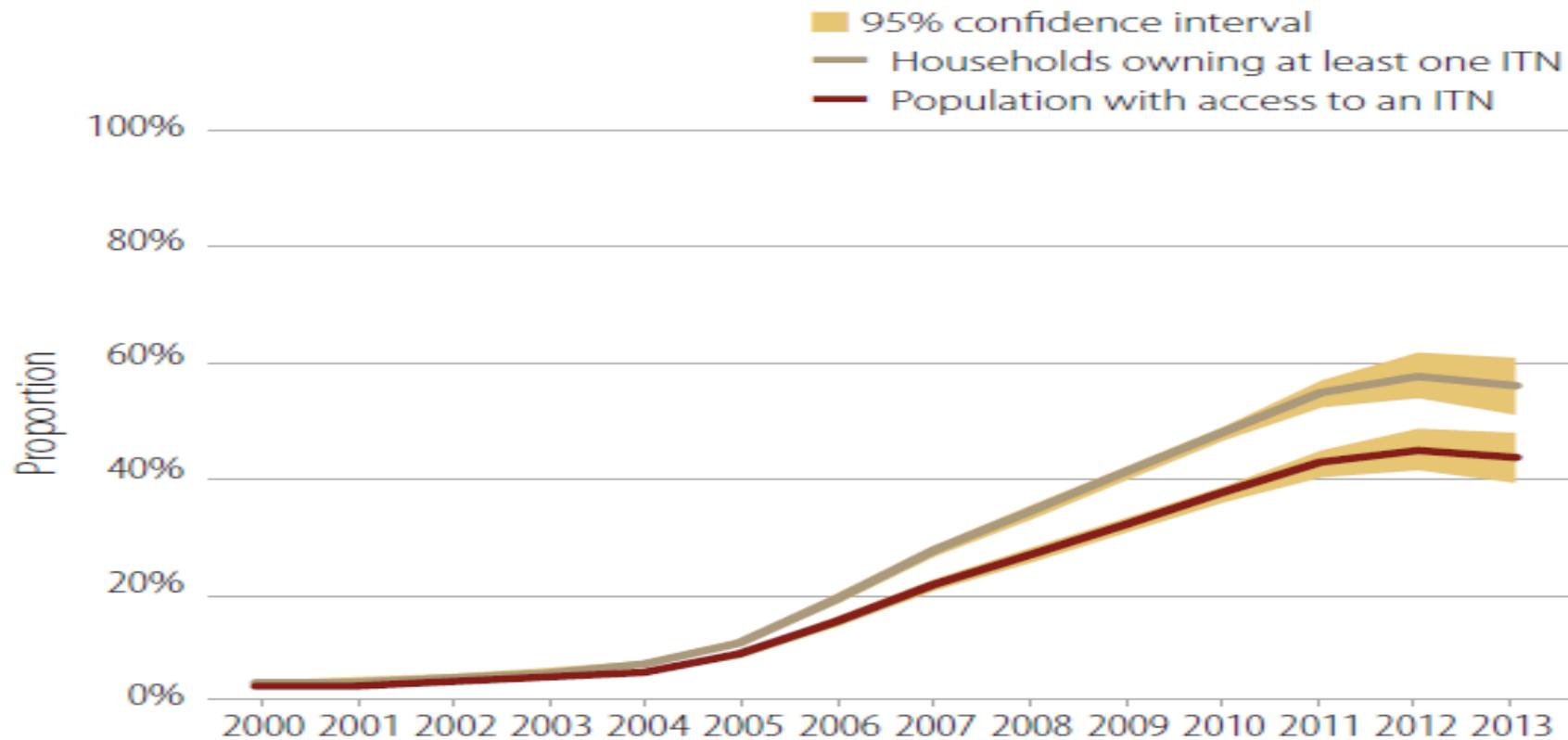
International Funding:

Figure 3.1 Past and projected international funding for malaria control, 2000-2016



Households owning at least one ITN

Figure 4.2 Estimated trend in proportion of households with at least one ITN and population with access to an ITN in sub-Saharan Africa, 2000–2013.

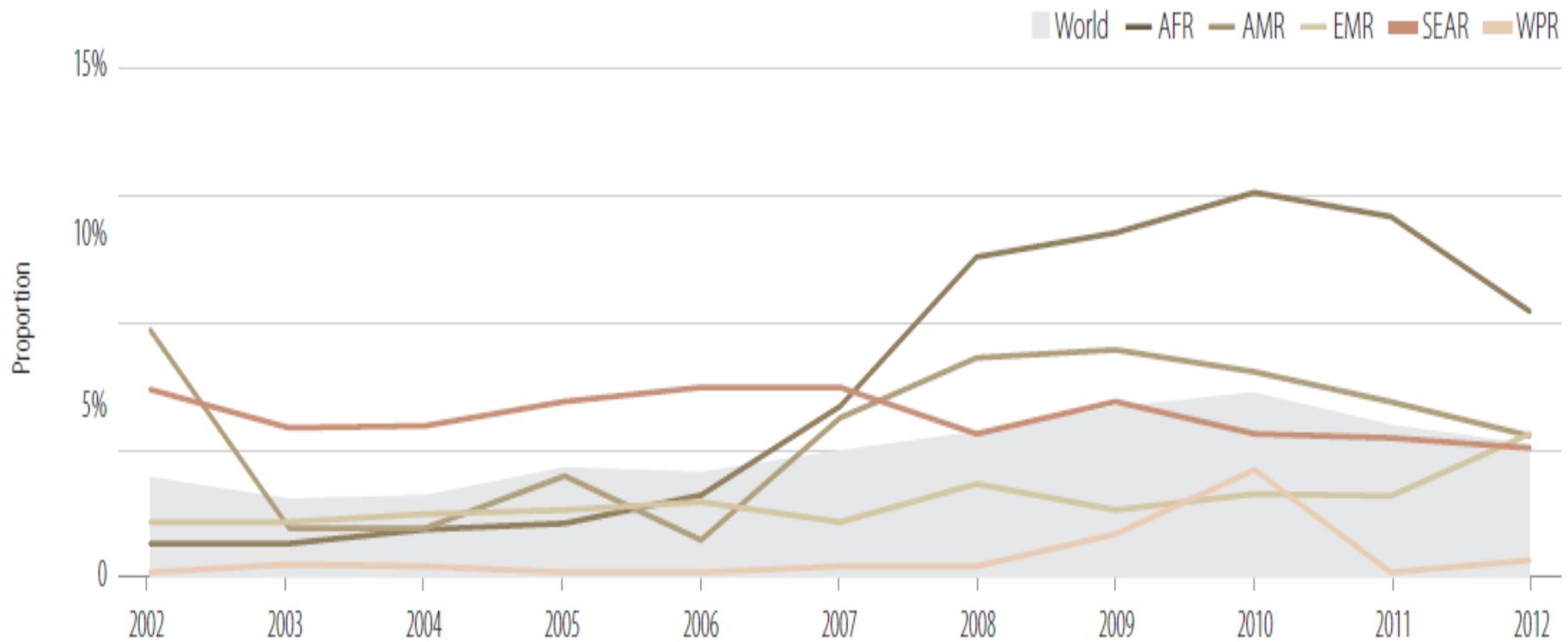


ITN, insecticide-treated net

Source: ITN coverage model from the Institute for Health Metrics and Evaluation, which takes into account ITNs supplied by manufacturers, ITNs delivered by National Malaria Control Programmes and household survey results (1). Includes Djibouti, Somalia, South Sudan and Sudan which are in

Indoor Residual Spraying

Figure 4.6 Proportion of population at malaria risk protected by IRS, by WHO Region, 2002–2012

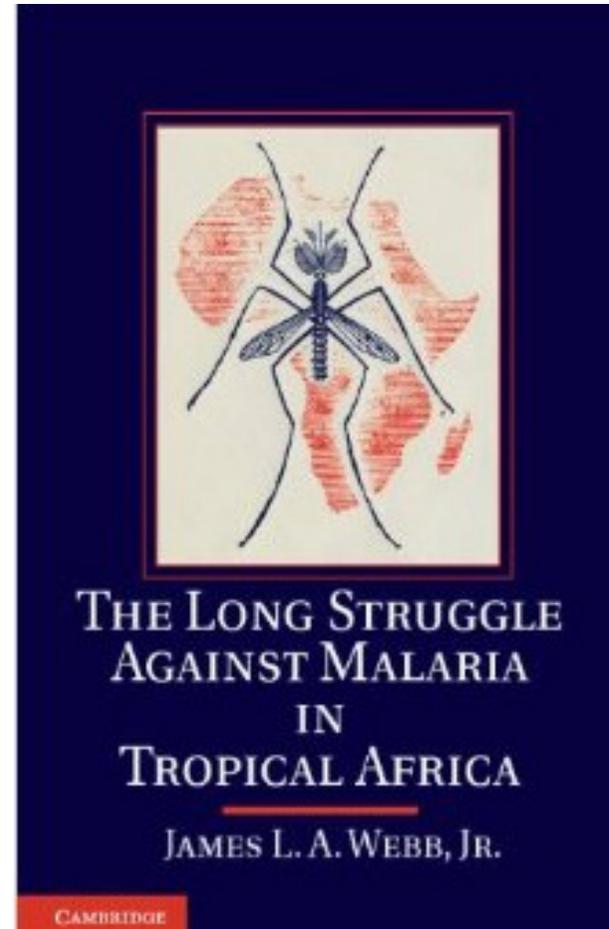


After success, and immunity wanes, an obligation to maintain gains



The First Large-Scale Use of Synthetic Insecticide for Malaria Control in Tropical Africa: Lessons from Liberia, 1945–1962

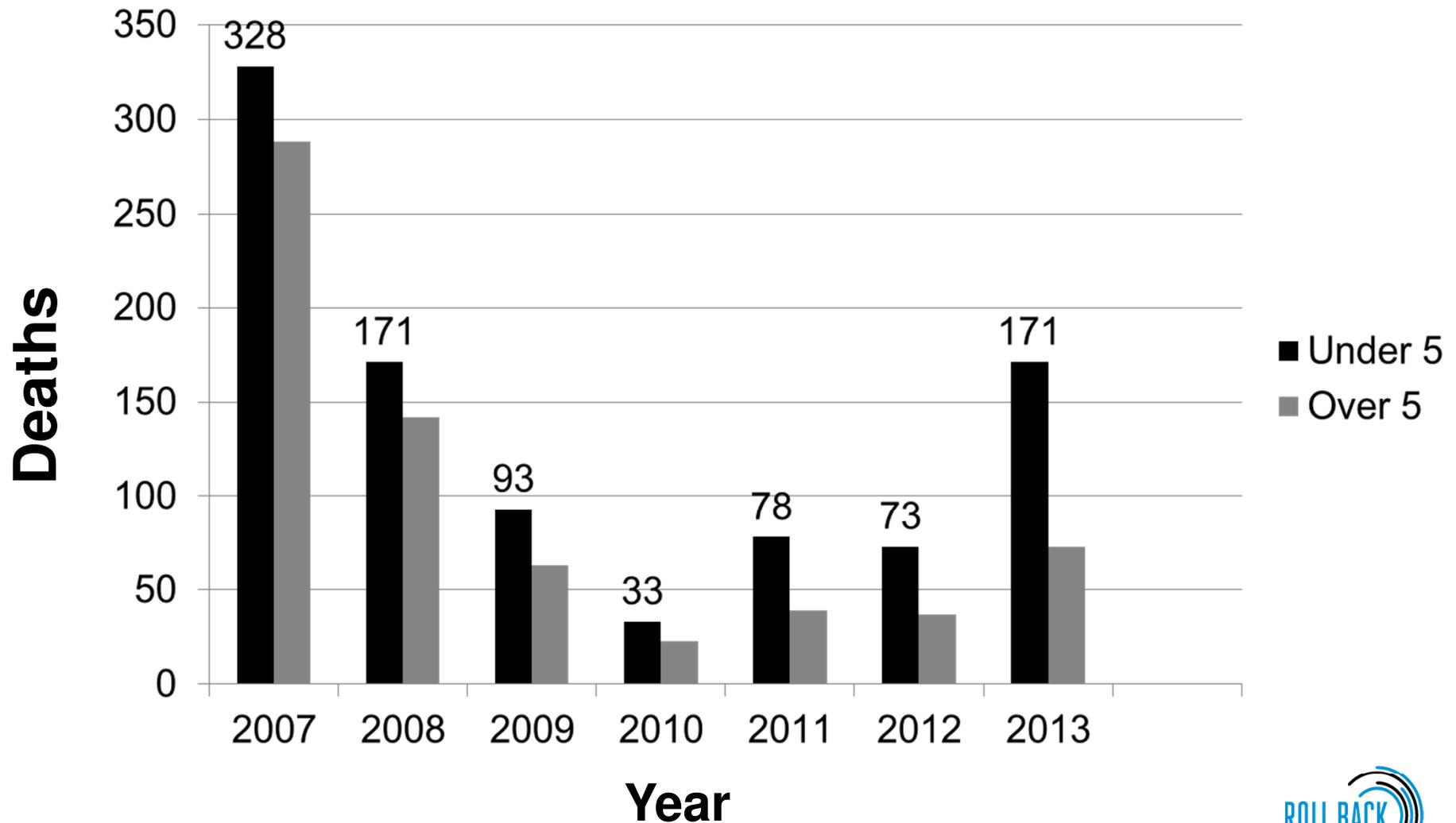
J. HISTORY OF MEDICINE AND ALLIED SCIENCES 2010



James L.A. Webb Jr.
Department of History,
Colby College, USA



Malaria Deaths, XXX District



Priorities and opportunities

1. Pyrethroid resistance
2. Sustaining Universal LLIN Coverage
3. New Paradigms for vector control and outdoor/residual transmission
4. Multisectoral Responses
5. Larviciding
6. Entomological monitoring and stratification.

Caveat...

***For every complex problem,
there is an answer that is
clear, simple and wrong***

H.L. Mencken

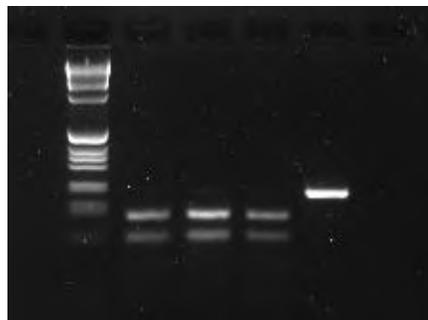
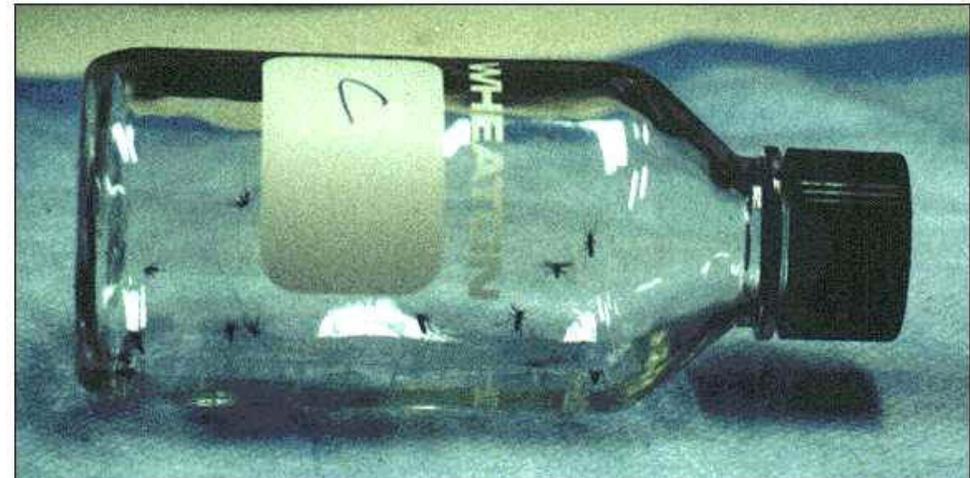


Strength of VCWG is its diversity

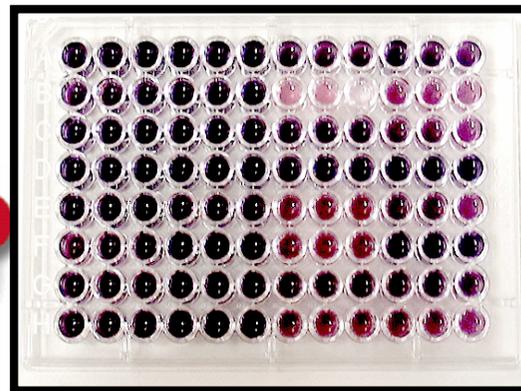
***Building capacity to analyze local challenges and
adapt norms to find local, optimum solutions***

Refer to VCWG Terms of Reference

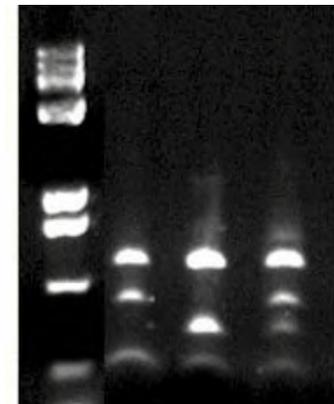
1. Insecticide Resistance



Ace-1 resistance PCR-RFLP. Lane 1, 1kb ladder, lanes 2-4 *An. gambiae* homozygous for ace-1 resistance mutation, lane 5 homozygous *An. arabiensis* negative for the ace-1 mutation



oxidase enzyme bioassay with elevated enzyme levels indicated by the darker colors



East African PCR. Lane 1, 1 kb marker, 2, resistant, 3, susceptible, and 4, 9

ROLL BACK MALWARE

GPIRM strategy and the VCWG

Short-term (~3 years)

Preserve susceptibility and slow the spread of resistance on the basis of current knowledge, and reinforce monitoring capability and activities

Medium-term (3–10 years)

Improve understanding of IR and tools to manage it, and adapt strategy for sustainable vector control accordingly

Long-term (≥10 years)

Use innovative approaches for sustainable vector control at global scale

Five pillars of strategy

I

Plan and implement insecticide resistance management strategies in malaria-endemic countries.

II

Ensure proper, timely entomological and resistance monitoring and effective data management.

III

Develop new, innovative vector control tools.

IV

Fill gaps in knowledge on mechanisms of insecticide resistance and the impact of current insecticide resistance management approaches.

V

Ensure that enabling mechanisms (advocacy, human and financial resources) are in place.

GPIRM elements and the VCWG

(i) planning and implementing insecticide resistance management strategies:

Establish intersectoral committees (e.g IVM).
2013 EMRO and AFRO workshops to roll out.

(ii) ensuring proper, timely entomological and resistance monitoring;

WHO Guide now includes complementary CDC
Bottle Bioassay. Access to test materials? Prototype
monitoring plan developed by GF and GMP

GPIRM Elements continued

(iii) developing new and innovative vector control tools;

IVCC, VCAG et al.

(iv) filling in knowledge gaps on mechanisms of insecticide resistance and the impact of current insecticide resistance management approaches;

Africa Network for Vector Resistance

GPIRM elements cont.

- (v) **ensuring that key enabling mechanisms (advocacy as well as human and financial resources) are in place.**
- **Training workshops, e.g. CDC/PMI/WHO Myanmar**



Photo: Bill Brogdon, CDC

2. Sustaining universal LLIN Coverage



**GLOBAL MALARIA
PROGRAMME**

**WHO Recommendations for Achieving Universal Coverage
with Long-Lasting Insecticidal Nets in Malaria Control**

September 2013

**WHO Guidance Note for Estimating the Longevity
of Long-Lasting Insecticidal Nets in Malaria Control**

September 2013



2. Sustaining Universal LLIN Coverage (cont.)

**WHO Guidance document on
'prioritizing LLIN deployment'
2014?**

Translating WHO guidance into reality:

- Continuous distribution work stream
- LLIN durability work stream
- Alliance for Malaria Prevention

3. New Paradigms and Outdoor Transmission



‘We don’t know what we don’t know’

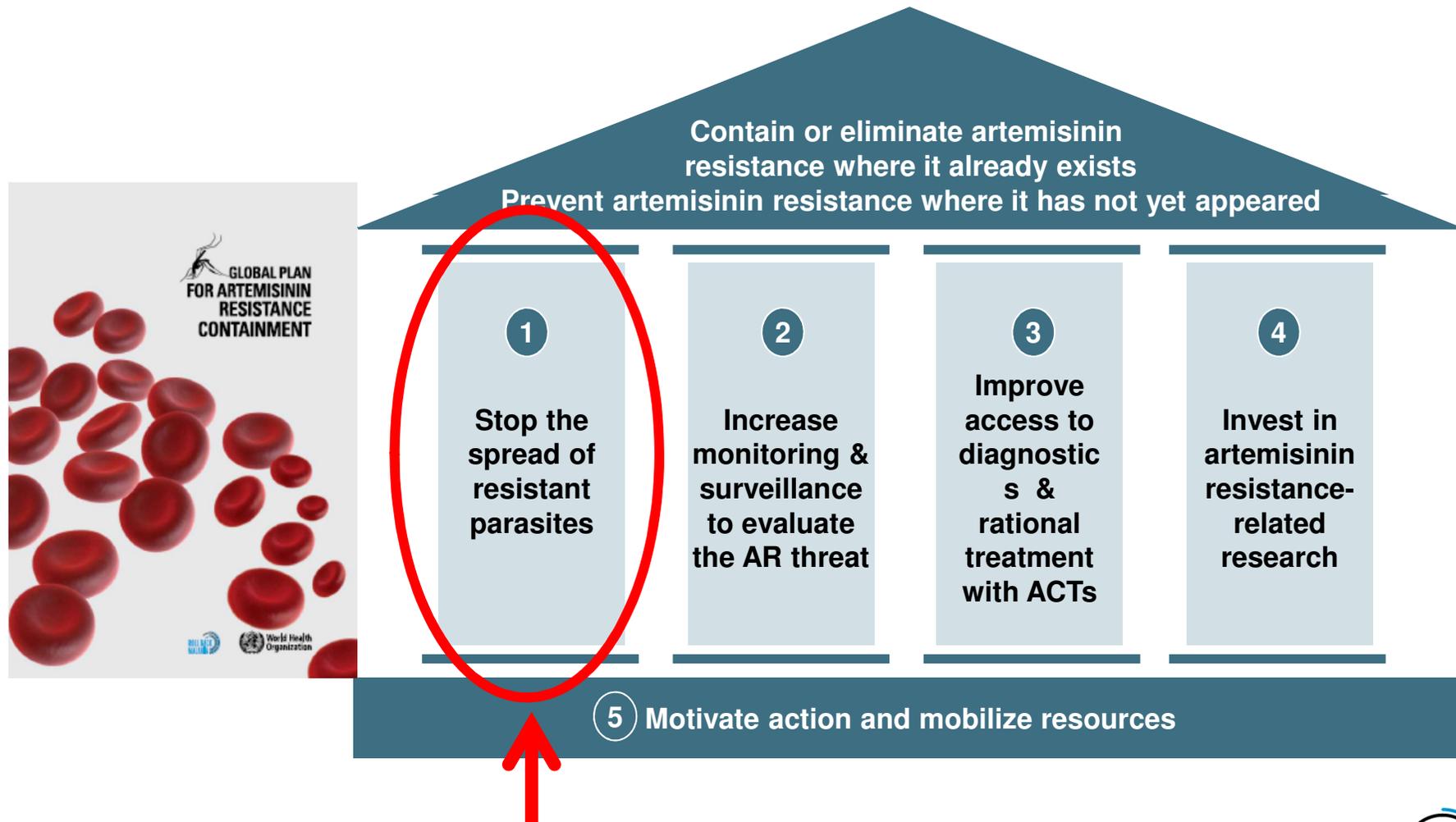
***Breaking silos and
making connections for innovation***

3. Outdoor transmission and new paradigms



Photo credit:
Mar Mar Win

Global Plan for Artemisinin Resistance Containment (GPARC): January 2011



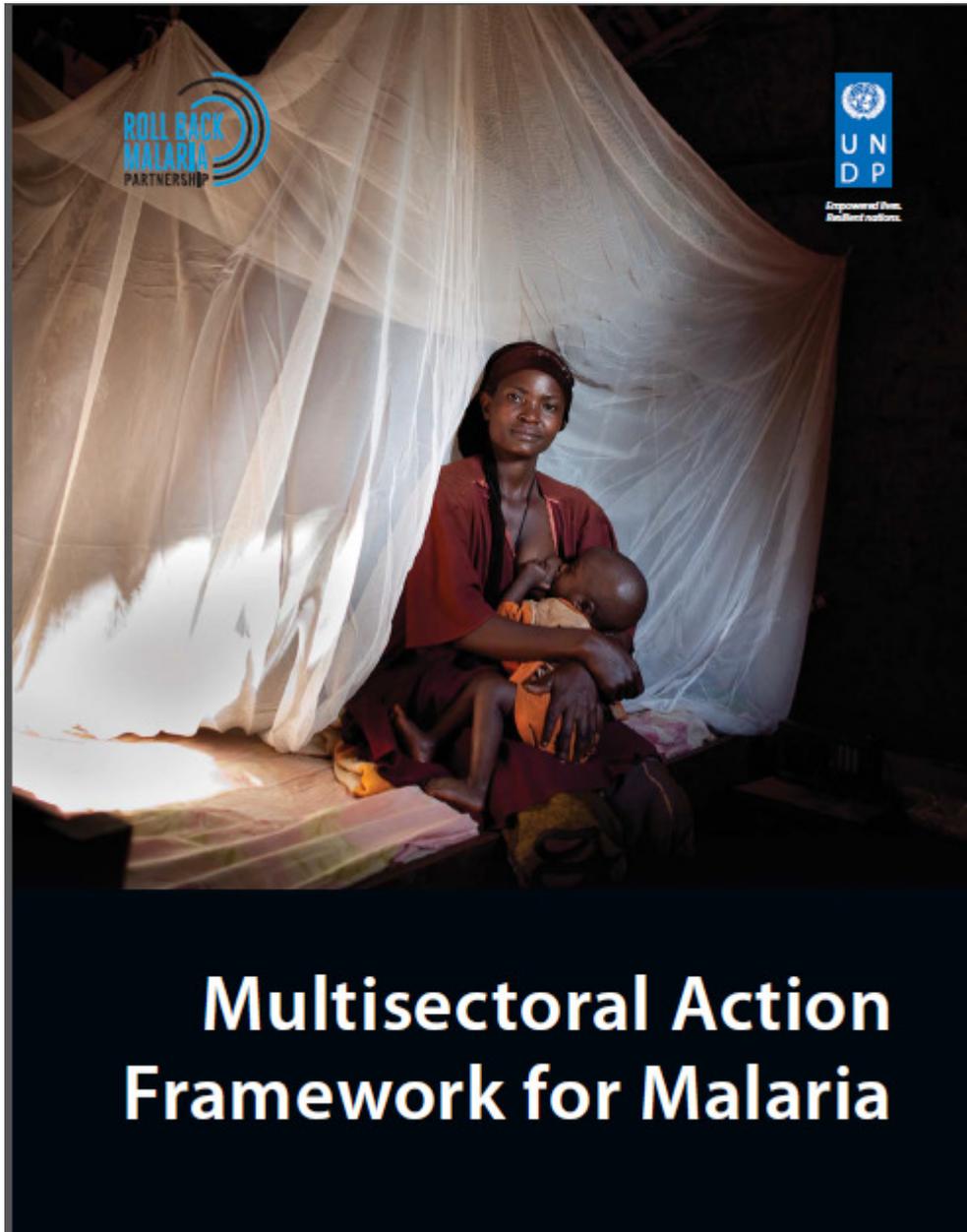
Supplement LLINs: Outdoor Transmission



Informal consultation on operational research to support accelerating malaria elimination in the context of artemisinin resistant falciparum malaria in the Greater Mekong Sub-Region

9th to 10th December, 2013

- Personal protection and use of ivermectin
- Vector mapping: moving from at-risk *populations* to at-risk *locations*
- Implementation research on current tools



RBM / UNDP

Launch September

2013

Multisectoral Action is Integrated Vector Management:

*A rational decision-making process for optimal use
of resources for vector control*

Global Strategic Framework
for
Integrated Vector Management



World Health Organization

- Advocacy, social mobilization and legislation
- **Cross sector collaboration**
- Integrated approach
- Evidence-based decision-making
- Capacity-building

Multisector Control of Malaria in the Lake Victoria Basin



RBM and UNHabitat



- Infrastructure
- Housing
- Agriculture
- Education
- Business





LVWATSAN

Lake Victoria Basin covers an area of 250,000 km² with the lake taking [font size](#) [Print](#) [Email](#)



68,000 km². The basin has a population of 35 - 40 million people, with rapidly growing secondary towns, which has resulted in:

Unplanned, spontaneous and unsustainable growth

Run-down and non-existent basic infrastructure and services

Significant negative impacts on environment, and importantly, the fragile ecosystem of the lake

The lake is major-transboundary resource for EAC countries with a high potential to accelerate the growth of the

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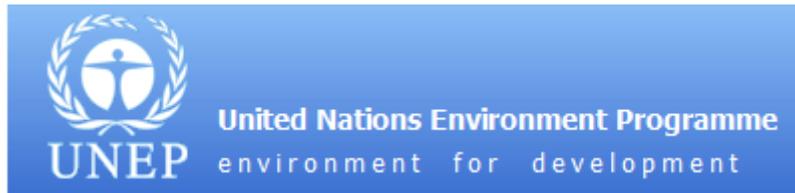
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LVBC NEWSLETTER



4. Multisector engagement (cont.)



Stockholm Convention and the UNEP Global Alliance

6. *Funding should be made available to support countries to transition away from the reliance on DDT for disease vector control, with the highest priority to assure that adequate systems and institutional capacity are in place to **train and support skilled staff for entomological monitoring**, operational research, evidence-based decision-making and to monitor programme performance.*

7. *Funding should be made available to increase the national policy and **management capacity** for translating international best practices on disease vector control and implementing quality assurance systems to assess programme performance and impact. .*

4. Multisector engagement (cont.)

GBCHealth About GBCHealth / Our Coalition / Our Work / Even

1 2 3 4

GBCHealth to Focus on Several Key Areas
GBCHealth Announces Changes & Future Direction for 2014

GBCHealth Mission: To leverage the resources of the business community for positive impact on global health challenges.

Company Management Guide
 Implementing an Integrated Malaria Control Program

Ensuring Sustainability in:

- Vector Control
- Awareness and Public Education
- Diagnosis and Treatment
- Procurement, Management and Distribution
- Monitoring and Evaluation

In Partnership with

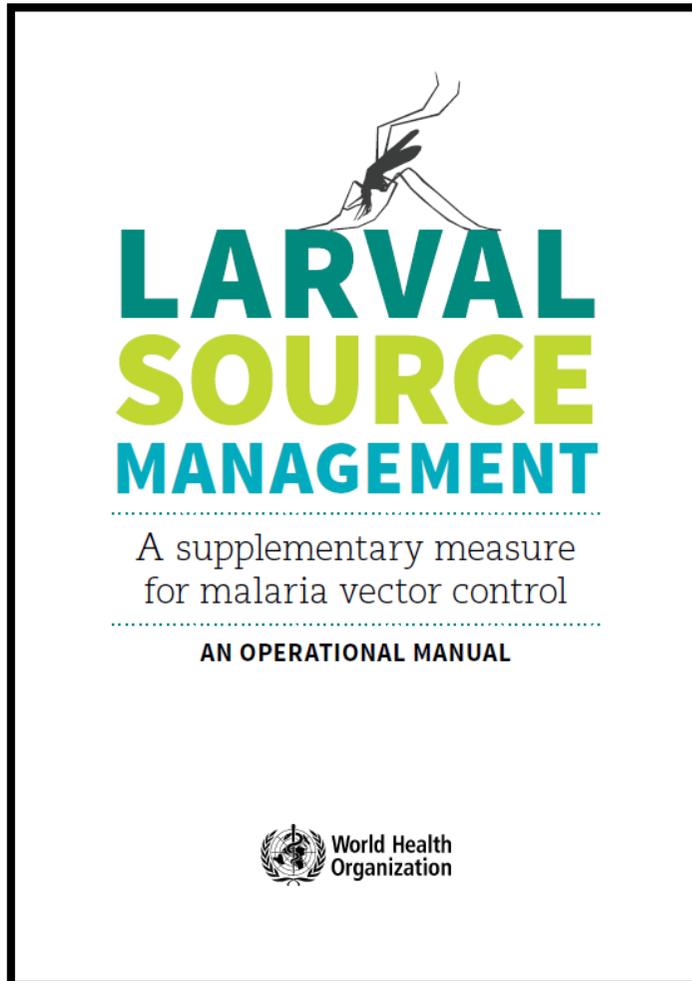
GLOBAL BUSINESS COALITION ON MALARIA, TUBERCULOSIS AND HIV/AIDS

Corporate Alliance .. malaria .. Africa

COMPANY MANAGEMENT GUIDE • CORPORATE ALLIANCE ON MALARIA IN AFRICA



5. Investments in Larviciding



Interim Position Statement

The role of larviciding for malaria control in sub-Saharan Africa



World Health Organization

Global Malaria Programme

Geneva, Switzerland

April 2012



Workshops for product quality control and rational targeting, monitoring and evaluation



***Need for
technical collaboration***

Photo: Nancy Lowenthal,
USAID Nigeria

6. Entomological Monitoring and Stratification



**GLOBAL MALARIA
PROGRAMME**

WHO Guidance Note on Capacity Building in Malaria Entomology and Vector Control

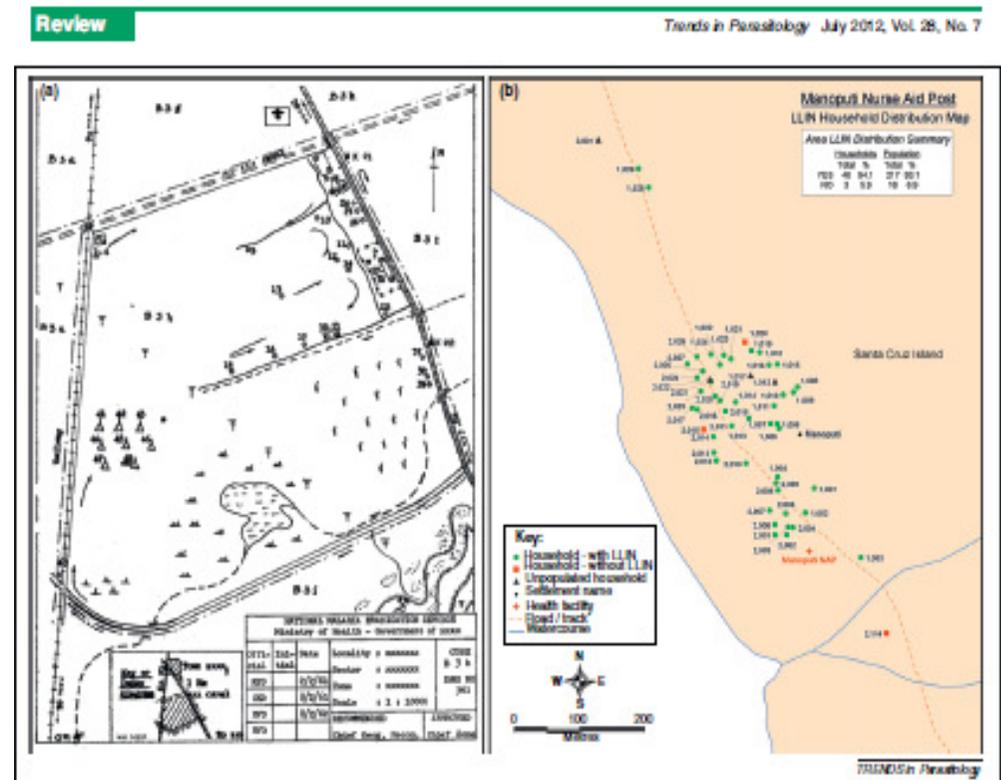
September 2013

Malaria control is at a critical juncture. The goal of malaria elimination in many settings might not be achieved, nor even current gains sustained without adapting to the changing threats and opportunities to controlling transmission. |

6. Entomological Monitoring and Stratification

Expand “Public Health” entomologist skills in epidemiology, information management, and mapping

Stratification and identification of transmission foci for more efficient use of resources



spatial decision support systems

Gerard C. Kelly, Marcel Tanner, Andrew Vallely and Archie Clements



Recommendations to Countries

Establish intersectoral coordination mechanism;

Training needs assessment and curricula review;

Establish posts and career development opportunities;

Recommendations to Countries (continued)

Intersectoral coordination mechanism establish agreements between National VBDC programs and universities, training and research institutions;

MoH to ensure sufficient resources for capacity building in bi-lateral and multi-lateral projects and funding requests based on national strategic plans.

Recommendations to Partners

- Include clear component of capacity-building and **national “ownership”** in all technical and management activities;
- Support MoH to define and implement strategies for adequate human resources and systems **after partner engagement ends**;
- Provide financial and technical support for global and regional efforts to revise curricula and make available **training and mentoring opportunities for national staff.**

Recommendations to WHO

- Develop **advocacy strategy** for public health entomology and vector control professionals, in collaboration with global, regional and national partners.
- **Mobilize resources** to implement capacity building activities;
- Facilitate needs assessment and curricula review

Recommendations to WHO (continued)

- Develop prototype strategic plans for capacity-building; facilitate the development and dissemination of training materials;
- Support regional and global collaboration networks for training, technical support and continued mentoring;

International networks



The world's scientific and social network for malaria professionals

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The Malaria Consortium has published 'Moving towards malaria elimination: developing innovative tools for malaria surveillance in Cambodia' as part of their 'Learning Paper' series.

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Regional Networks in Asia and Africa:

National Entomology and Vector Control Networks



MALARIA

Summary 1

- **Pyrethroid resistance**
- **Sustaining universal LLIN Coverage**
- **New Paradigms for vector control and outdoor transmission**
- **Multisectoral Responses, incl IRS PPP**
- **Larviciding**
- **Entomological monitoring and stratification.**

RBM Market Place, May RBM Board Meeting

Summary 2:

Success over past decade, but we in the vector control community need to...

- Respond to resistance
- Enable programs to optimize resources and cost efficiencies
- Engage partners from other sectors.
- Build next generation of
public health entomologists and
vector control professionals

Co-chair - Election Process - ToRs

- Two Co-Chairs or one Chair and one Co-Chair are elected by the VCWG members prior to the mid-year meeting of the RBM Board from different constituencies. (Co-) Chairs are elected for a two year term with potential renewal.**
- The election procedure shall be transparent and secret and open to all core members (institutions) of the VCWG with one vote per core member.**
- The Secretariat shall send out notifications one month prior to the election, soliciting nominations.**
- Each core member has the right to nominate one person or self-nominate.**

Elections, cont.

- ❑ Two weeks prior to the election the Secretariat shall obtain a confirmation from the nominees that they are interested and willing to run for election.**
- ❑ Prior to the (Co-) Chair's endorsement by the Board, the Secretariat shall obtain an explicit assurance from their employer agreeing to the additional travel and workload related to assuming the role as Chair of a RBM Working Group.**
- ❑ The election should be carried out through a secret ballot and can either take place during one of the VCWG meetings or through the use of electronic vote. A simple majority decides.**
- ❑ The (Co-) Chairs are endorsed by the RBM Board at the mid-year Board Meeting.**

Co-chair - Election Process - Timelines

March 3rd

The Secretariat shall send out the notifications, soliciting nominations



March 17th

The Secretariat shall obtain a confirmation from the nominees that they are interested and willing to run for election



March 31st

Election date