**RBM MIP Working Group meeting, June 3, 2019**

**Meeting Minutes**

Participants:

1. Kristen Vibbert, Jhpiego/IMPACT
2. Elaine Roman, Jhpiego/IMPACT
3. Matt Chico, LSHTM
4. Lisa Nichols, ABT Associates
5. Susan Youll, PMI
6. Maurice Bucagu, WHO
7. Maud Majeres Lugand, MMV
8. André-Marie Tchouatieu, MMV
9. Céline Audibert, MMV
10. Julie Gutman, CDC
11. Debora Freitas Lopez, URC, SBCC WG co-Chair
12. Gabrielle Hunter, JHU CCP, SBCC WG
13. Wani Lahai, NMCP Sierra Leone
14. Wajilovia Chilambo, NMCP Zambia
15. Emmanuel Otolorin, TIPTOP/Jhpiego
16. Prudence Hamade, Malaria Consortium
17. Katerina Galluzzo, Unitaid
18. Kate Wright, MSH
19. Patricia Gomez, Jhpiego
20. Catherine Dentinger, PMI/USAID Madagascar
21. Jenny Hill, LSTM

**Agenda Items:**

1. **Update on Work Plan:**

* Activities recently added:
  + MMV: Identify new SP drug alternative for preventing malaria in pregnancy
  + Develop brief to reinforce existing recommendations on the treatment of vivax malaria in pregnant women (implementer and timing to be determined)
* Suggestion: Involve Rose McCready who knows a lot about vivax malaria
  + We’ll get a small team to lead the discussion on this and then produce a WG product
* Is WHO revising/updating the guidelines around vivax in MiP?
  + There are no plans for new recommendations. This brief is just to reinforce what already exists.

***ACTION ITEM: Please let Kristen know if you would like to be part of the small team working on this brief***.

* Call to Action
  + Five year anniversary of the Call to Action
  + How do we want to promote WG guidance/advocacy documents in advance of World Malaria Day 2020?
    - A concept note has been developed
      * Review progress and where we have come with the recommendations in the call to action
      * What products do we want to develop going forward?
  + Next call is a week from Thursday. We welcome participation from others recognizing we want a small group to maximize productivity
    - Maud is leaving for maternity leave soon and her colleague, André will be stepping in to continue participating on this team and with the WG in Maud’s absence.

***ACTION ITEM: Please let Kristen know if you would like to join the Call to Action committee.***

1. **Presentation: SP Forecasting,** *Maud Majeres Lugand & Céline Audibert, MMV*

* There is a need to better understand the landscape of SP.
* Primary objective is to generate a forecast for SP volume in IPTp.
  + This forecast will help MMV determine the size of the market as well as the quantity of product needed, and provide guidance to Universal and SWIPHA regarding manufacturing needs.
* The more countries that are included, the more expensive the study will be so MMV is looking for partners to help with this.

**Discussion:**

* Support from WG: What is needed?
  + If there are activities that partners have planned that are contributing to advancing MiP, please let MMV know if they can add them to the work plan.
  + Once there is a draft model, MMV can share it with the WG and make sure they are not missing any key components.
  + The WG can be important in helping to prioritize countries and update the country groups
* Will you take into account the demand for SP with SMC, IPTPi and other interventions increasing the SP demand?
  + MMV is trying to identify as many factors that will increase SP demand for the baseline.
  + MMV is developing packaging for SP for IPTp with the idea that the SP is really used for pregnant women, not for treatment.
  + MMV is looking at SP volume as well as at the number of pregnant women to make sure they get as precise a number as possible for vendors manufacturing the SP.
* The large number of people who go to private sector makes it difficult for accurate forecasting.
  + MMV is working with the private sector as well so that they can get as accurate a number as possible.
* Are the countries listed set in stone?
  + It would be very helpful if the WG can revisit the country list and create a different order of prioritization to suggest to MMV.

***ACTION ITEM: Please review the presentation and particularly the countries listed, and send feedback to*** [***Céline***](mailto:%20audibertc@mmv.org)***, copying*** [***Maud***](mailto:%20lugandm@mmv.org) ***and*** [***André***](mailto:%20tchouatieua@mmv.org)***.***

* There is a lot of variability to how the new ANC guidelines are adapted in countries and this will impact SP forecasting. This is why it’s important to have a better understanding of what is occurring in countries regarding the adoption of the ANC guidelines.
  + For countries that have been selected, Maurice should be able to provide information on what is going on regarding implementation of the ANC guidelines.
  + Recognizing what we learned from countries during the annual meeting, the adoption is an on-going process so the information we have today will look differently in two months. This needs to be part of our constructive thinking/analysis as we are planning procurement with countries.
* The forecasting is so essential, especially recognizing promotion of frequent dosing, but in addition, we should be thinking about advocacy with countries and supporting partners with the procurement of the QA SP when it’s available.
  + The Call to Action is an opportunity for us to communicate the need for quality medicine.

1. **Partner Updates**

* Sierra Leone:
  + Formed an MiP TWG and have held first meeting. Wani presented on the key takeaways of the MiP WG annual meeting. The Malaria Program Manager and Assistant Director of NMCP are serving as the co-Chairs.
  + Next meeting will focus on the creation of an action plan.
  + **Discussion:**
    - It would be great if you could please share the Terms of Reference for the WG once they are finalized.
* Activitiy 2.1: Use of ACTs in 1st trimester:
  + LSTM has inputs from all WG stakeholders working on the brief and the brief has gone back to WHO for review.
  + The disclaimer wording was agreed on at the end of March. Are there any updates on the status of the guidelines?
    - Maurice: The last call with Peter Olumese on this had nothing new on the timing of the release of updated guidelines.
  + **Discussion:**
    - What will be the process to move the brief forward to finalization as a WG product?
      * All of the technical inputs have been received.
      * As soon as there is an official launch date for the new guidelines, the brief will go back to Elaine and Maurice for final review and collection of logos.
* Eswatini:
  + Has launched a local fund to cover the gap for their strategic plan to eliminate malaria by 2022.
    - Within 4 hours of launch ceremony they got the needed funding.
    - They have had approximately 100 cases of malaria per year for the past couple years (aside from an outbreak last year producing 1,000 cases).
    - They are expecting to be eliminating malaria in the next 4 years.