

## **RBM PARTNERSHIP TO END MALARIA**

**RBM Country Regional Support Partner Committee (RBM/CRSPC) Western Africa  
Malaria Programs and Partners annual review and planning meeting, Dakar, Senegal  
26-29 July 2022.**



**Meeting Participants Group photo**

## **MEETING REPORT**

## Introduction

Since UNOPS adopted the travel restriction policy due to COVID-19, RBM Partnership to End Malaria Country Regional Support Partnership Committee (RBM/CRSPC) has been conducting its annual meetings with National Malaria Control/Elimination Programmes and its partners virtually for the last two years.

RBM/CRSPC partners learned a lot during this process of organizing the meetings virtually. Due to a number of challenges, the virtual meeting methods were not convenient to deliver the expected results due to several challenges: This includes a. reducing a significantly condensed 4 - 5 days agenda to a 3 hour meeting b. fatigue from long hours of virtual meetings c. CRSPC was forced to focus on only a few of the high priority agenda items d. many countries struggled to connect to the virtual meetings due to poor internet bandwidths e. the virtual meeting format also reduced time for bottleneck solving, the opportunity to discuss one on one with countries, and informal peer to peer interactions.

With the relaxation of the COVID-19 related lockdown situations in most of the countries, and for the reasons indicated above, CRSPC started organizing this year's annual National Malaria Programmes and Partners meetings face-to-face while observing COVID-19 prevention protocols set by the UN and by countries.

The West Africa Malaria Programs and Partners annual review and planning meeting is the third of a set of four separate meetings that CRSPC organized in 2022. The modality of attendance in these meetings was hybrid (in-presence and virtual via the zoom platform) in order to limit the number of attendants at each meeting as part of mitigation measures to reduce the risk of COVID-19 transmission while in meeting. The remaining stakeholders would also be given an opportunity to join virtually for specific agenda items of their interest.

The four (04) day West Africa meeting was attended by delegates from 16 countries including: Benin, Burkina Faso, Cabo Verde, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo. In addition, representatives from the following partners/other RBM working groups also participated either in-presence or virtually in the meeting: WHO GMP/AFRO, UNICEF, USAID/PMI, BMGF, GFATM, ALMA, AMP, CHAI, PATH, MMV, PSI, IFRC, ACB, UNITAID, WAHO (Regional Economic community), SMERWG, SBCWG, VCWG, MSWG.

The meeting was held at the Hotel Novotel, Dakar, Senegal. 26-29 July 2022.

## Meeting Objectives

The main objective of the meeting was to continue to engage National Malaria Programmes and partners to review the status of implementation of national malaria programmes, the impact of the COVID-19, identify major implementation bottlenecks/challenges, lessons learnt, and the implementation support required in 2022/2023.

The specific objectives of the meeting were to:

1. Engage the National Malaria Programmes and partners to review the progress, identify malaria programme implementation bottlenecks, challenges, share best practices and propose solutions in the context of COVID-19;
2. Track progress and lessons learned in the process of the implementation of High Burden to High Impact approach, and continental wide campaigns such as Zero Malaria Starts With Me;
3. Track the impact of COVID-19 and the status of commodities availability and preparedness for 2022;
4. Update the country specific programmatic and financial gap analysis which will serve as tool for additional resource mobilization including portfolio optimisation;
5. Update on the latest developments in malaria;
6. Identify and prioritize the malaria programme implementation bottlenecks for technical support during 2022/2023;
7. Orientation on the next cycle of Global Fund application planning and support;
8. Orient National Malaria Programmes, partners, CCMs and CSOs on community rights and gender approach and the malaria matchbox tool.

## Outcomes of the Meeting

The meeting provided an opportunity to engage National Malaria Control Programmes and Partners to review the status of implementation of national malaria programmes, identify major implementation bottleneck/challenges including the impact of the COVID-19, lessons learned, and the implementation support required in 2022/2023. It also allowed for progress and lessons learned from the High Burden High Impact approach evaluation exercise to be shared more broadly as well as Zero Malaria Starts With Me, update on the latest developments in malaria and orientation on community rights and gender approach and the malaria matchbox tool.

As 2023 is the start of the new Global Fund funding (NFM4) cycle, national malaria programmes and partners were oriented on the highlights of the global fund application tools for the 2024-2026 funding cycle.

The meeting also provided an opportunity to identify some of the malaria programme implementation bottlenecks that compromise the efficient utilization of existing funds and that

countries require additional technical support from Global Partners such as RBM in addition to the efforts being made at country and sub-regional levels. Sharing of best practices was among the highlights of the meeting.

The Overall Outcomes of the Meeting were:

- Engaged the National Malaria Programmes from almost all countries together with and partners and reviewed the progress, identified malaria programme implementation bottlenecks, challenges, shared best practices and proposed solutions in the context of COVID-19;
- Shared lessons learned in the process of the implementation of High Burden to High Impact approach, and continental wide campaigns such as Zero malaria starts with me;
- Updated the impact of COVID-19 and on the status of commodities availability and preparedness for 2022;
- Updated the country specific programmatic and financial gap analysis which will serve as tools for additional resource mobilization including portfolio optimisation;
- Updated on the latest developments in malaria such as the vaccine roll out;
- Identified and prioritized the malaria program implementation bottlenecks for technical support during 2022/2023;
- Provided orientation on the next cycle of Global Fund application planning and support.
- Provided orientation training to National Malaria Programmes, partners, CCMs and CSOs on community rights and gender approach in malaria programming and the malaria matchbox tool;
- Updated on the Global Malaria Dashboards and the procedure to apply for TA online.

In conclusion, the meeting was a success as it was attended by representatives of all invited countries from the western Africa sub-region and partners. Furthermore, the main objective of the workshop was achieved as shown in the Meeting evaluation.

## **Opening Session**

The meeting was officially opened by the Principal Technical Adviser to the Senegalese Minister of Health and Social Action Dr Malick Ndiaye, representing the Hon. Minister. He reminded the commitment taken by the Senegalese authorities at the highest level and supported by technical and financial partners to improve the quality of health service delivery in the country for a sustainable development. Dr Ndiaye reminded the audience that malaria remains a serious public health concern in Africa in general and in Senegal in particular. Referring to the increase of cases observed in Senegal, he mentioned that these are mainly due to the incorporation of new health facilities in the national information system and to the climate change that is observed in many other countries. Furthermore, Dr Ndiaye stressed that the elimination goal is still reachable by 2030 if all stakeholders continue to work together and in line with the orientations defined by the World Health Organization. He also called for The Global Fund to better take into consideration countries' concerns and allow more flexibility in terms of grant

implementation procedures and consideration of accelerated malaria elimination strategies that some countries may opt for. Finally, the Representative of Senegal Hon. The Minister of Health representative recognized the importance of the role played by partners and invited them to increase their support to countries in their malaria control and elimination efforts.

Dr Corine Karema, the Acting RBM CEO, said that she was pleased that this year's meeting was organized face to face after two years of challenging virtual meetings. She also reminded the audience of the importance of such forums which gives an opportunity to really discuss country implementation progress, challenges and and share valuable updates from partners, particularly at this point in time where the countries are preparing for the next Global fund application cycle. She also congratulated the programmes for the various interventions and services they were able to implement despite the threat of Covid-19 though some of them were still pending. In her speech, the RBM interim CEO reminded the meeting that this was an important period for replenishment of the Global Fund NFM4 as a result of this, countries need to update their NSP in readiness of submission of applications particularly for those countries that would submit in March 2023. She encouraged countries and partners to continue to engage for the success of programme implementation in order to accelerate and combine our efforts to eliminate malaria. She thanked the Senegalese authorities for accepting to host the meeting and having support for malaria Control at the highest political level. She also thanked countries, partners and organizers of the meeting.

Dr Spes Ntabangana, On behalf of Senegal WHO Country Office Representative, reiterated the importance of solid partnerships in the fight against malaria. She also congratulated the countries and the partners for all their efforts despite the difficult context imposed by the COVID19 Pandemic. Dr Ntabangana reiterated that WHO would continue to work with programmes and provide technical assistance and guidance in the deployment of interventions and services especially for malaria programs reviews, stratification, national strategic plans development and implementation.

Dr William Bosu, on behalf of the West Africa Health Organization (WAHO) Director General, thanked RBM for a continuing collaboration. Referring to the malaria situation in the ECOWAS region, he pointed out that the incidence and mortality rates have plateaued since 2017, which is not good news. He reiterated that WAHO will continue to engage with the countries for technical and financial support in their vector control and drive towards elimination. Furthermore, Dr Bosu indicated that a set of indicators for the regional malaria scorecard on which WAHO is working with RBM and ALMA and which will be integrated to a regional observatory were endorsed by the Sahel Malaria Elimination Ministers of Health. Finally, He called for an increased collaboration between WAHO, RBM and the broader community of partners supporting countries in malaria control.

# Meeting Modality and Participation

## Meeting Modality

Presentations were made in plenary which were followed by discussions on technical updates, countries implementation achievements, best practices, challenges and technical assistance requirements as well as partners presentation. Side meetings were held with individual program managers, partners, private sector and countries.

## Participation

The hybrid (face to face and virtual) meeting was attended by delegates from 16 national malaria control/elimination program managers/directors along with malaria M&E Officers, country Global Fund focal persons and other relevant persons from West Africa countries, international, regional and local partners from the sub-region. There were 116 face-to-face participants and 65 who attended virtually making a total of 181 participants who joined the meeting (Annex II).

# Country Presentations

## Best Practices Shared

Some of the best practices shared include the following.

**Benin:** Launching of Zero Malaria Business Leadership initiative by companies to support national malaria control efforts; community based IPT in low coverage settings; Advocacy with parliamentarians for an increased allocation of domestic resources for malaria.

**Burkina Faso :** Direct observed treatment for three SMC cycles in some districts; Digitalization of campaigns SMC ( pilote)- ITN mass distribution and IRS ; Systematic confirmation of cases before treatment - Weekly analysis of surveillance data for decision making ; Quantification and surveillance system for commodities availability in the last mile.

**Cabo Verde:** Set up of a national consultative committee for malaria elimination ; passive and active surveillance based on cases; multisectoral coordination for community based activities; free hospitalization of confirmed cases for 3 days

**Côte d'Ivoire:** Recruitment of technical advisers for malaria at regional level; engagement with Kings and traditional leaders for malaria control activities implementation

**Gambia:** Electronic data collection for cross border Mass LLIN, campaigns using DHIS2 tracker  
Ghana:

**Guinea:** Set of a concertation framework with technical and financial partners at operational level; instauration of a pooled management system for malaria commodities; 38 districts benefit of the dedicated technical assistants for Aids, TB and Malaria; Integration of malaria care in the training curriculum of universities and health schools;

**Guinea Bissau:**

**Liberia:** Introduction of rectal artesunate under the Integrated Community Case Management; Digital Health use to improve service delivery at the Community Level ; Mobile Money to ease payment of salaries and Daily Subsistence Allowances; evidence based decision making ; ICCM in distance challenged settings contributed towards drastic reduction of malaria mortality

**Mali:** Introduction of uncomplicated malaria treatment in the package of community health workers; screening of suspected cases and treatment of confirmed cases during SMC campaigns; MoH oral weekly communication to the Government on epidemics including malaria situation; digitalization of SMC data in 10 districts.

**Mauritania:** Adoption of SMC as an intervention in 2022; Mobilization of a long term technical assistance from the Expertise France and the Global Fund to help with the very limited HR capacities within the program; of a workshop to discuss the acceleration of global fund grant.

**Niger:** Pilot of community based distribution of LLINets; development of an integrated vector management policy as well as a vector resistance management plan; screening of malnutrition and verifications of vaccination status during SMC campaigns; yearly monitoring of vector insecticide resistance in 15 sentinel sites

#### **Nigeria:**

**Senegal:** Continuous discussions on cross border collaboration for malaria interventions planning and implementation with Gambia, Guinea Bissau and Mauritania.

**Sierra Leone:** Strong collaboration with key stakeholders (NACOVERC, ONS, Police, Military, Civil Society, MoHS, Local and City councils, Parliamentarians etc) for LLINets mass distribution campaign; Implementation of Community Action Against Malaria (CAAM) with specific responsibilities to foster surveillance, disease tracking and incidence reporting.

**Togo:** Decentralization of ALMA scorecard to track indicators; Organization of community dialogue to improve malaria interventions coverage; improvement of IPTp coverage through advanced strategies organization.

### **Impact of COVID 19 pandemic**

The COVID19 pandemic impacted the implementation of activities in almost all the countries. The following consequences of the pandemic were flagged by all the countries that presented.

- Redeployment of health personnel to COVID-19 response activities
- Restriction of movement, making supervision difficult
- The reluctance of population to visit attend health facilities due to the fear of getting contaminated
- Significant increase in implementation costs
- Perturbation of Procurement and supply management of malaria commodities which created delivery delays, lead time etc.

### **Technical Assistance Provided in 2022 and the needs for 2022/2023**

The TAs planned for 2022 were being provided to the programs as planned. These technical assistance needs include support to address bottlenecks in planning for long lasting insecticidal net (LLIN) campaigns, conducting malaria programme reviews and developing national malaria

strategic plans, and development of a behavior change communication (SBCC) strategies, resource mobilization, roll out of the High Burden High Impact approach, malaria gap analysis, launch of Zero Malaria Starts With Me Campaign, CRG- Malaria matchbox implementation and regional strategic plan development among others.

For 2022 countries indicated their TA needs. Emphasis was made on the need to include the TA needs for Global fund application for the submissions to be made in early 2023. These TA needs will be compiled and shared with partners to ensure the triage mechanism of TA requests.

## **Policy Updates and Partners Presentations**

The meeting also served as an opportunity for partners to hold different discussions in order to give updates to countries on the key priority areas and ongoing activities. The key updates include:

- Technical and policy updates from WHO
- Updates on new tools and approaches in malaria prevention and control
- Updates from the different RBM working groups and CRSPC workstreams.
- Update on the Global Fund application process and tools
- Updates on the implementation of the Zero Malaria Starts with Me! Campaign
- Implementation of High burden and High impact approach evaluation findings
- Updates from the regional economic communities on cross border collaboration
- Updates on Sub-Regional perspectives of malaria control and best practices in Cross-border coordination and collaboration by WHO
- Updates from ACB: Presentation, roles and responsibilities

## **Individual Regional and Country Consultations**

- RBM Interim CEO, Dr Corine Karema organized side individual side meetings with all NMCP managers /representatives the following issues were discussed
  - The collaboration between RBM Partnership and the countries.
  - What RBM can do more from country perspective to support the fight against malaria
  - Countries critical needs in terms of Technical assistance support
  - The specific issues that countries are facing and that they would like to be taken at the Global level.
- RBM, Interim CEO, Dr Corine Karema had a meeting with the Director General of Health representing the Hon Minister of Senegal . The following issues were discussed
  - The excellent collaboration with the RBM Partnership to End Malaria, USAID/PMI, the Islamique Development Bank and the entire community of partners
  - The relations with the Global Fund and the low absorption of Global fund resources for malaria control, which calls for more flexibility in the disbursement procedures



- o RBM support for the development of an elimination plan merged with the global strategic
- o Advocate for the country become eligible for malaria vaccine and to produce affordable malaria vaccine at national level
- o The hotspots of Malaria endemicity in the southern part of the country and the efforts that are being mobilized to address the situation
- BMGF, meeting to engage with program managers and respond to clarification questions that they may have on what BMGF does, its areas of focus and the mechanisms that can be used to provide direct support to programs
- Conference dinner with country delegates organized by MMV and Fosun to present on post-discharge malaria chemoprevention, part of the newly released WHO chemoprevention guidelines.

In addition to the above mentioned consultations, many partners seized the opportunity of CRSPC meeting to engage bilaterally with countries and amongst themselves.

## Other Decisions

- The countries in the West Africa sub-region elected Cote d'Ivoire NMCP represented by the Manager, Dr Méa Antoine Tanoh, to represent them on the RBM CRSPC Steering Committee with effect from August 2022. They also elected Nigeria NMCP to serve as alternate.

## Next steps & Follow-up

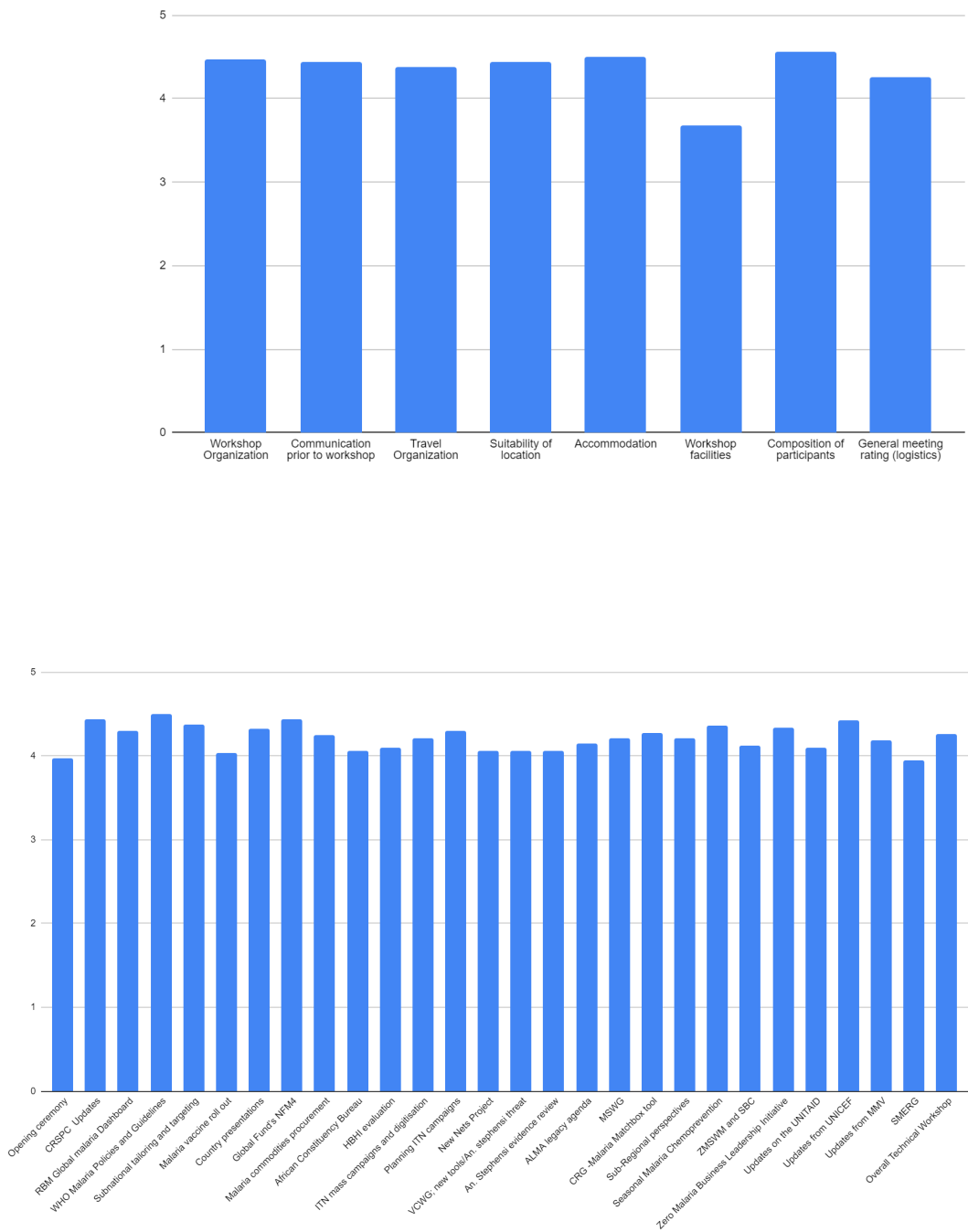
- Finalize the implementation support needed by the countries for 2022/2023;
- Follow up the implementation of the TAs in 2022 and 2023 especially those TA related to CRG Malaria Matchbox which was recommended by the Global fund to some countries in preparation of the NFM4 applications DRC- CAR- Benin-Senegal-Burkina Faso ;
- Follow up on some of the suggestions and recommendations forwarded by countries;
- Follow up with countries to as much as implement TAs that needs to be completed before the commencement of the work on the GF NMF4 in 2023 in order to minimise the burden of activities in 2023.
- Prepare countries for the orientation meeting on GF application process planned for December especially the gap analysis; and ensure bottlenecks are addressed to ensure the current GF grants are fully expended by the end of the grant.

## Meeting Evaluation:

At the end of the meeting, the participants (N=35) provided feedback on the logistics as well as the technical aspects of the meeting.

In general, the participants rated the meetings high in the scale of 1 lowest to 5 highest both logistical arrangements and technical aspects as indicated in the charts below.

In relation to the agenda, a majority of participants indicated that the four meeting days were not enough. They suggested that a 5 days meeting would be more convenient to discuss all agenda items.



## ANNEX I- MEETING AGENDA

### Day 1 (Tuesday 26 July 2022)

Time	Details of activities	Facilitator/Presenter	Moderator
08:00	Registration	Organisers	Rayana
08:30	Welcome Remarks	RBM Partnership to End Malaria	Melanie/Peter
08:40	Welcome Remarks	WHO Representative	
08:50	Welcome Remarks	REC Representative (ECOWAS/WAHO)	
09:00	Opening Remarks	Ministry of Health	
09:10	Agenda, Items, Objectives and meeting outcomes	CRSPC	
09:25	Groupe photo with Guest of Honour	Organisers	
09:40	Coffee Break	Organisers	
10:00	Updates of implementation support by CRSPC and priority areas for 2022 /2023. Discussions	CRSPC	
10:30	Updates on RBM Malaria Dashboard , Discussion	Data Initiative	
11:00	Updates on WHO Malaria Policies and Guidelines, Discussion	WHO	
13:00	Lunch Break		
14:00	<b>Country Presentations - Programme Implementation</b>		
14:00	Benin	Malaria Program Managers	WHO MACT
14:20	Burkina Faso		
14:40	Cabo Verde		
15:00	Discussions		
15:30	Coffee Break		
16:00	Côte D'Ivoire		
16:20	Guinea		
16:40	Guinea Bissau		
17:00	Discussions		
17.30	END of Day 1		

### Days 2 (Wednesday 27 July 2022)

Heure	Details of Activities	Facilitators /Presenters	Moderator
08:00	Gambia		Dr William BOSU
08.20	Ghana		

08:40	Liberia		
09:00	Nigeria		
09:20	Discussion		
10:00	Coffee Break		
10:30	Mali		CRSPC
10:50	Mauritanie		
11:10	Niger		
11:30	Senegal		
11:50	Discussion		
12:30	Lunch Break		
13:30	Sierra Leone		
13:50	Togo		
14:10	Discussion		
14:30	Updates on subnational tailoring and targeted malaria intervention Discussions	Dr Noor/WHO	
15:30	Updates on the Strategy to Respond to Antimalarial Resistance in Africa	Dr Rasmussen	
16:00	Coffee Break		
16:30	Malaria Vaccine Roll out Plan	WHO, IVB	
16:50	HBHI approach evaluation and the lessons learned	Hilaire Zon	
17:10	Updates from Bill and Melinda Gates Foundation	BMGF	
17:30	END of Day 2		

### Day 3 (Thursday 28 July 2022)

Heure	Détails des Activités	Facilitateur / Presentateur	Modérateur
08:00	Orientation on Global Fund's next application cycle - NFM4	Global Fund	CRSPC
09:00	Malaria commodities procurement lead times, commodities in pipeline and the wayforward	Global Fund	
09:30	ITN mass distribution campaign and the role of digitalization	AMP	
10:00	Coffee Break		

10:15	Planning and implementation of ITN mass distribution campaigns (including experience in continuous distribution)	AMP , CDWG	
10:45	Updates on the new nets projects	PSI	
11:00	Updates from the Vector Control Working Group; new tools and the <i>An. stephensi</i> threat.	VCWG,	
11:15	Evidence Examination exercise on <i>An.Stephensi</i> en cours	MESA	
11:30	Updates from MMV	MMV	
12:00	Orientation on the ALMA legacy agenda including scorecard tools, youth agenda and End Malaria Councils	ALMA	
12:40	The role of multisectoral actors in the sustainable fight against malaria	MSWG	
13:00	Lunch Break		
14:00	Orientation training on the Community Rights and Gender (Malaria Matchbox tool) modules (NMCP, Consultants, Partners, CSO, CCM)	Denise Meya, Olivia Ngou, CReMA, FM/CRG	
16:00	Coffee Break		
16:15	Orientation training continued		
17:45	End of Day 3		

#### Day 4 ( Friday 29 July 2022)

Heure	Détails des Activités	Facilitateur/Presentateur	Moderateur
08:00	Sub-Regional perspectives of malaria control and best practices in Cross-border coordination and collaboration	WAHO	CRSPC
09:50	Updates on Seasonal Malaria Chemoprevention	SMC Alliance	
10:10	Operational Surveillance tracker initiative	SMERG	
10:30	Coffee Break		
11:00	ZMSWM and SBC efforts in country	SBC WG	
11:20	Zero Malaria Business Leadership Initiative, Milestones, impact and next steps	Speak Up Africa	
11:35	Updates on the UNITAID's malaria activities	UNITAID (Alexandra)	Virtual
11:55	Updates from UNICEF	UNICEF	

12:15	Updates from MMV	MMV	
12:35	MSWG	MSWG	
13:00	Nomination of Country representatives at CRSPC Steering Committee	CRSPC	
13:30	Closing the meeting - Summary of the key points, recommendations, the way forward and meeting evaluation.	CRSPC	
13:45	Lunch Break		
14:45	Bilateral discussions with Programme Managers and partners		
16:00	END of Meeting		

## ANNEX II - PARTICIPANTS LIST

### Country delegates

COUNTRIES/ ORGANIZATION	NAMES	TITLES	E-MAILS
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