

The RBM Partnership

A Global Framework for Coordinated Action against Malaria

WIN-5 meeting
Basel, 8-9 February 2010



Welcome !

Welcome remarks from the RBM Partnership

- **ACS in Brussels with our Good Will Ambassador Princess Astrid to sign a grant agreement over 25 m USD with the Health Authority of Abu Dhabi. For these reasons she delegated me to represent her at WIN-5**
- **Since 16th Board meeting with AU Health Ministers, significant issues were flagged as barriers to meeting malaria prevention related 2010 targets**
- **IRS-LLIN mix, insecticide resistance, continued use of DDT**
- **Expectations are that WIN-5 will**
 - Define its TOR to be submitted to 18th Board meeting for approval, in line with recommendations of the independent evaluation regarding need for partner alignment on strategic VC issues, required membership and information sharing strategy
 - Define its workplan with timebound measurable deliverables in support of implementing GMAP globally
 - Election of Co-Chairs
- **Start implementation of the COI policy**

Global Malaria Action Plan

Global Malaria Action Plan

2010-2011 RBM Partnership Workplan

What is the Global Malaria Action Plan (GMAP)?

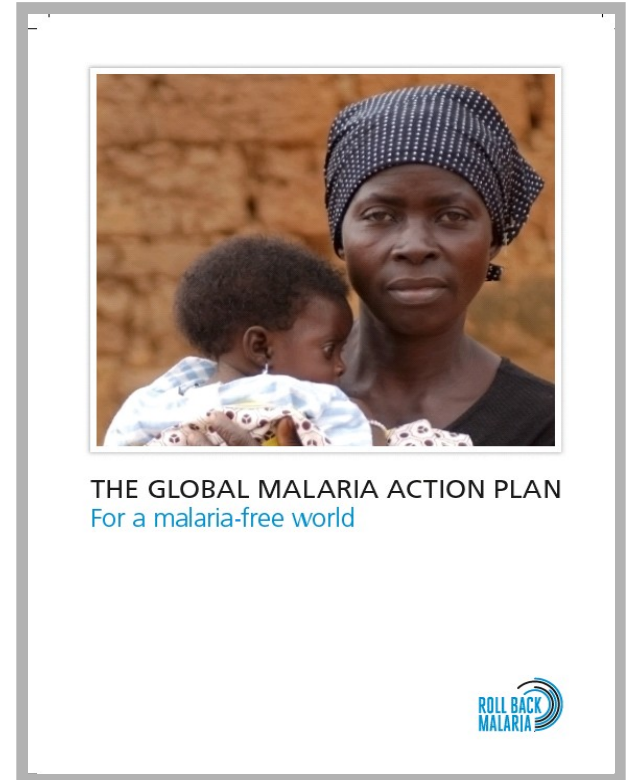
The GMAP is a **global framework for action** around which those working against malaria can coordinate their efforts ... *to reduce fragmentation and duplication*

The GMAP expands the focus of our activities to

- Medium and long-term activities as well as the near-term activities
- All 109 malarious countries around the world
- All human types of Malaria (*P. falciparum*, *P. vivax*, *P. malariae* and *P. ovale*)

This plan has been developed consensually over the past year by more than

- 30 endemic countries and regions around the world
- 65 international institutions
- 250 experts in fields as diverse as economics, public health and epidemiology



Ultimately, the GMAP will help achieve a world free of malaria

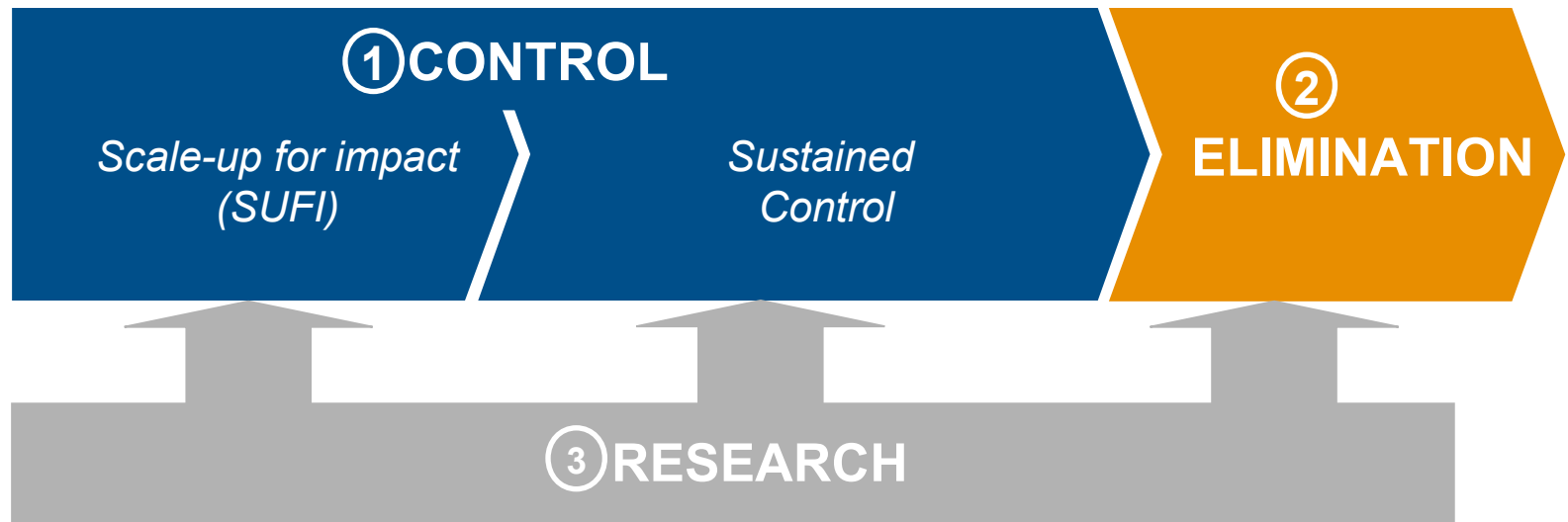
Global Malaria Action Plan targets

The GMAP targets are to:

- **Achieve** universal coverage by 2010 and **sustain** universal coverage indefinitely;
- **Reduce** global malaria cases from 2000 levels by 50% in 2010 & by 75% in 2015;
- **Reduce** global malaria deaths from 2000 levels by 50% in 2010 & to near zero in 2015;
- **Eliminate** malaria in 8-10 countries by 2015 and afterwards in all countries in the pre-elimination stage today; and
- In the long term, **eradicate** malaria world-wide through progressive elimination in countries

By meeting these targets, the malaria MDG will be achieved and there will be progress towards the other MDGs

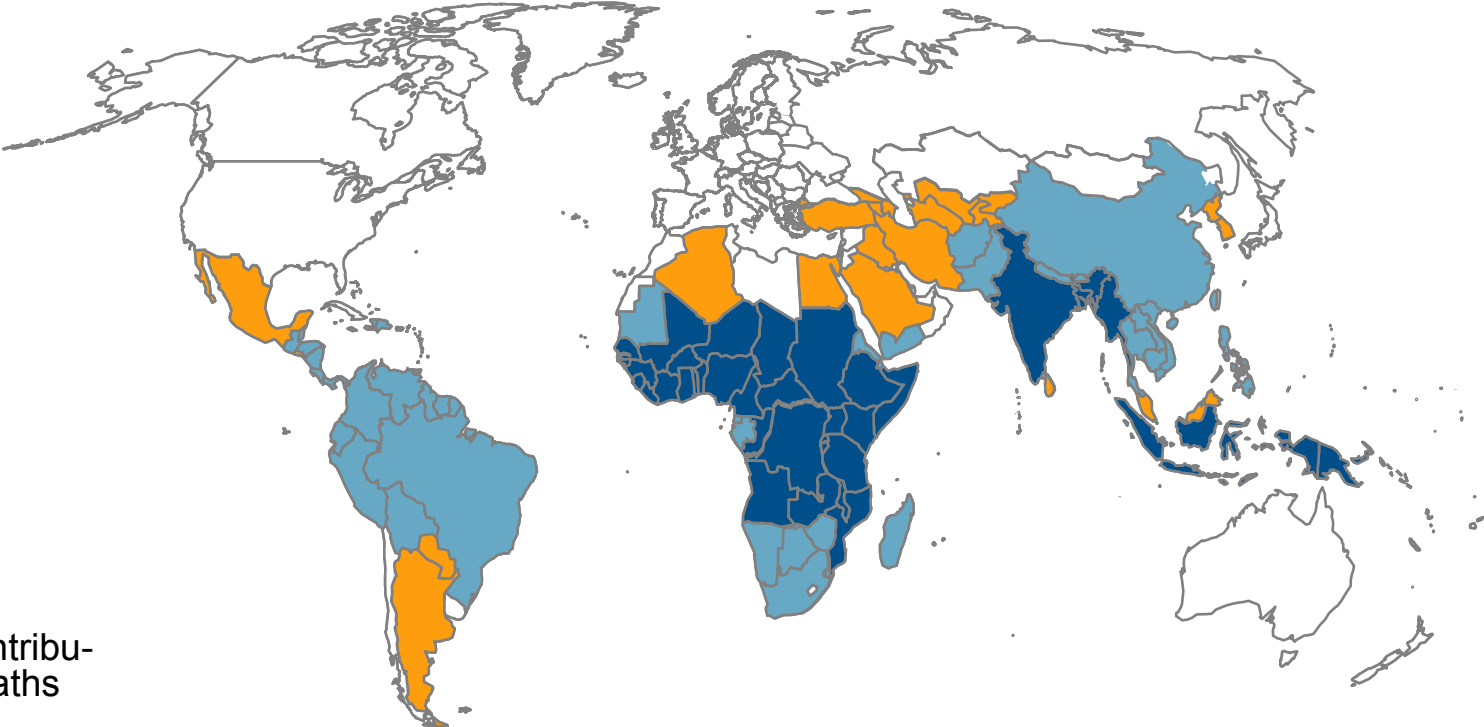
GMAP proposes 3-part global strategy to achieve targets



Target efforts for big impact

- Countries with **high** contribution to global death in control stage
 - 35 countries account for majority of deaths
 - Many exposed to high transmission of *P. falciparum*
 - Many located in Africa South of the Sahara
 - Some other countries with large populations at risk
- Countries with **low** contribution to global deaths
 - 74 countries
 - 47 countries in **control** phase
 - Low to moderate transmission
 - *P. Falciparum*, mixed or *P. Vivax* only infections
 - Americas, Africa, Asia-Pacific
 - Haiti, Dominican Republic, Timor Leste in high transmission but small populations at risk lead to small contribution to global deaths
 - 27 countries at various stages in **elimination phase**
 - Very low disease burden
 - Middle East, North Africa, Americas, Western Pacific

Target efforts for big impact



Control: high contribution to global deaths

Control: low contribution to global deaths

Malaria-free (Prevention and Elimination)

Malaria-free (Prevention and malaria-free)

WIN & GMAP: Different settings different approaches

- **High transmission *P. falciparum* areas**
 - Africa South of the Sahara to cover population at risk by either LLINs or IRS
- **Low to moderate transmission *P. falciparum* areas (seasonal or localised)**
 - Targetted IRS and vector population reducing methods
 - LLINs can also be used
- ***P. vivax* or mixed infection areas**
 - Asia-Pacific, Middle East, Americas
 - Does not mention specific VC strategies

WIN & GMAP

Cost (US\$ millions)	2009	2010	2015	2020	2025
Prevention cost	3'728	3'982	3'724	3'864	2'576
Case management cost	968	1'359	550	226	87
Program cost	638	839	764	787	714
<i>Global control and elimination costs</i>	<i>5'335</i>	<i>6'180</i>	<i>5'037</i>	<i>4'877</i>	<i>3'378</i>
Research & Development cost	759	759	800	681	460
Total cost	6'094	6'939	5'837	5'559	3'838

Note: Detailed cost estimates are included in *Part II - Chapter 5: Costs and Benefits of Investing in Malaria Control, Elimination and Research, Appendix 4 and Appendix 5*

Source: GMAP costing model

Research strategy: conduct rigorous research in 3 areas

Research & development for new tools



New and better tools

- New vaccines
- Better drugs
- More vector control options
- Effective diagnostics
- In case of resistance

Research to inform policy



International & national policies

- For different regional contexts
- On new vaccines, drugs, insecticides and diagnostics

Operational and implementation research



Published studies on

- Effective use interventions
- Best delivery of drugs, vaccines, vector control, etc
- Highest quality interventions

Research Agenda to Inform Policy

- Unclear evidence and recommendations regarding the settings in which IRS and LLINs are most useful are issues
 - Some experts feel IRS is better suited for urban settings where it may be more operationally feasible, while others feel IRS may have more impact in rural settings.
 - Some believe LLINs can be used more broadly than previously thought.
- Additionally, there are questions regarding the impact of combining LLINs and IRS, and the settings in which their combined use could increase effectiveness.
- Tendering policies for VC beyond WHOPES specifications based on OR

16th RBM Board meeting with AU Health Ministers mentioned these issues repeatedly

Operational Research Agenda (WIN)

- Overcoming barriers to effective universal coverage and use of LLINs
- Optimal LLIN replacement strategies and thresholds
- Marginal costs and benefits of combining IRS with LLINs
- Marginal costs and benefits of two versus one annual round of IRS in perennial transmission settings?
- Low LLIN use among pregnant women
- Useful life of LLINs under real life conditions
- Strengthen national regulatory systems
- Entomological and epidemiological impact of scaled-up LLINs and/or IRS
- Impact on transmission of full coverage of LLINs and IRS in highly endemic areas of sub-Saharan Africa

Malaria Eradication Research Agenda



malERA
Malaria Eradication Research Agenda

Areas of partnership coordination

Topic	Partnership Coordinator
Advocacy	Malaria Advocacy Working Group (MAWG)
Resource Mobilization	<i>Proposed: Resource Mobilization Task Force</i>
Policy and Regulatory	Various WHO bodies
Planning	Harmonization Working Group (HWG)
Financing	Resources Working Group (RWG)
Procurement and Supply Management	Procurement & Supply Management Working Group (PSM)
Communication and Behavior Change Methodologies	<i>Proposed: Communication Working Group</i>
Monitoring and Evaluation	Monitoring and Evaluation Reference Group (MERG)
Humanitarian Crises	<i>Proposed: Formal liaison</i>

The 2010-2011 RBM Partnership Workplan

16th RBM Board Meeting: 3 objectives articulate the 2010-2011 Partnership Work Plan in support of full implementation of GMAP

Objective 1: "Achieve Universal Coverage by 2010"

- **80%** of the people at risk from malaria are using locally appropriate vector control methods such as **LLINs, IRS** and, in some settings, other environmental and biological measures where appropriate based on scientific evidence
- **80%** of malaria patients are **diagnosed and treated** with effective anti-malarial treatments
- In areas of high transmission, **100% of pregnant women** receive IPT
- **The global malaria burden is reduced by 50% of the 2000 levels:** ~175m-250m cases annually and less than 500,000 annual deaths from malaria

Objective 2: "Sustain Universal Coverage through 2015"

- **Universal coverage continues with effective interventions**
- **Near zero global & national mortality for preventable deaths**
- **The global malaria burden is reduced by 75% of the 2000 levels:** ~85m-125m cases annually
- **Achieve malaria-related MDGs (halting & reversing the incidence of malaria)**

Objective 3: "Prepare for Elimination"

- **Provide support to elimination efforts in 8-10 countries to achieve zero transmission of locally transmitted disease by 2015**
- **MalERA to complete the elimination R&D agenda and promote its implementation**

RBM Workplan 2010-2011 priority areas

To meet the Partnership's objectives, the RBM mechanisms to develop targets across 4 priority areas (as appropriate)

- A. Keep malaria high on the global agenda
- B. Ensure future funding for countries
- C. Make the funding work (effective implementation)
- D. Ensure quality reporting on country progress

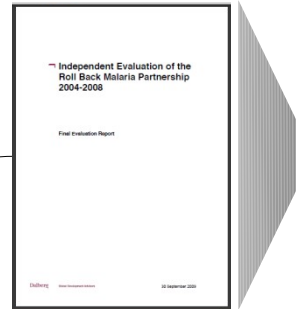
Each target should be **specific, measurable and timebound.**

Key contributions to the 2010-2011 Partnership Work Plan



SRNs have returned their WP based on country roadmaps

The External Evaluation has highlighted issues and guided the identification of partnership's deliverables



- Main recommendations:
- Operational plan for GMAP implementation
 - RBM Partnership's role in sharing knowledge and experiences should be more effective
 - RBM Partnership's structure should clearly define its relationship to both SRNs and country level partnerships (NMCP)
 - Accountability around GMAP implementation should be strengthened

Region/Country	Target	Actual	Notes
Sub-Saharan Africa	95%	85%	Need for more resources
East Africa	90%	80%	Challenges in data collection
West Africa	85%	75%	Need for improved surveillance

WGs have returned their WP based on a consultative process within each WG and between WGs



The GMAP is the essential ground document where all 3 objectives are fully expressed and the role of the RBM Partnership clearly defined



The May Board recommendations have guided the framework of the PWP



The MDGs 1, 2, 3, 4, 5 & 8 define key work streams for the Partnership



RBM Mechanisms have defined SMART targets

TARGETS

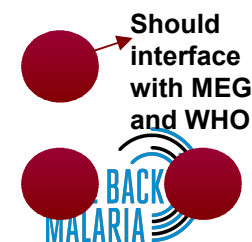
- A** 100% of all country roadmaps are tracked
- B** Appropriate response to 80% of country TA requests via Sub-regional Networks delivered
- C** RBM Community and Heads of State informed on the achievements of 2010 Universal Coverage and the preparation for the 2015 targets
- D** Resources mobilized to fill the gap to reach the 6 b\$ annual target for GMAP implementation
- E** 45 countries/territories to align their strategic/operational plans with GMAP
- F** Implement global and regional strategies for drug and insecticide resistance management
- G** Prepare for elimination (8 countries supported to align their strategic/operational plans with GMAP)
- H** Effective management support for RBM Mechanisms consistent with Board decisions

- The 8 targets spread over the 5 priorities and the 3 objectives are agreed upon by Working Groups, SRNs, and Secretariat
- The 8 targets are measurable so that each target can be assessed regularly and at the end of each year
- The 8 targets are relevant as they are based on GMAP recommendations and MDGs

23 deliverables are planned for the 2010-2011 PWP to reach the targets

Involvement of Partnership's Mechanisms by target

RBM Targets for 2010-2011	RBM Mechanisms										
	HWG	MAWG	MERG	CMWG	MIP	WIN	PSM	RWG	SRN	SEC	Board
A 100% of all country roadmaps are tracked	Support			Support	Support	Support	Support	Support	Lead	Support	
B Appropriate response to 80% of country TA requests via Sub-regional Networks delivered	Support		Consulted	Consulted	Consulted	Consulted	Consulted		Lead	Support	
C RBM Community and Heads of State informed on the achievements of 2010 Universal Coverage and preparation for 2015 targets	Support	Support	Lead	Consulted	Consulted	Consulted	Consulted		Support	Support	Lead
D Resources mobilized to fill the gap to reach the 6 b\$ annual target for GMAP implementation	Support						Support	Support	Support	Support	Lead
E 45 countries/territories to align their strategic/operational plans with GMAP	Lead	Support		Support	Support	Support	Support	Support	Lead	Support	
F Implement global and regional strategies for drug and insecticide resistance management	Support	Support		Lead	Lead	Lead	Support	Support	Support	Support	
G Prepare for elimination	Support		Support	Support	Support	Support	Support	Support	Support		
H Effective management support for RBM Mechanisms consistent with Board decisions											Should interface with MEG and WHO



Partnership deliverables – matrix (example)

Legend:

 Target
 Letter
 Objective N°
 Priority N°

A
100% of all country roadmaps are tracked

1 "Achieve Universal Coverage"	3 "Make the money work"	2010	2011
Monthly roadmap monitoring scheme in place and functioning- bottlenecks threatening milestone achievement are detected and anticipated			
Country Focal Point for SRN functioning is identified			

B
Appropriate response to 80% of country TA requests via Sub-regional Networks delivered

1 "Achieve Universal Coverage"	3 "Make the money work"	2010	2011
Anticipate and resolve possible implementation bottlenecks			
Draw attention of the Board to bottlenecks not resolvable at operational/technical level			
Review the template of GF grant performance frameworks (jointly with MERG and GF Secretariat)			
Timely and appropriate response to long- and short-term TA requests			
Roster of experts for country TA needs is created and maintained			

2 "Sustain Universal Coverage"	3 "Make the money work"	2010	2011
Strengthen Quality Assurance of malaria control commodities			

C
RBM Community and Heads of State informed on the achievements of 2010 Universal Coverage and preparation for 2015 targets

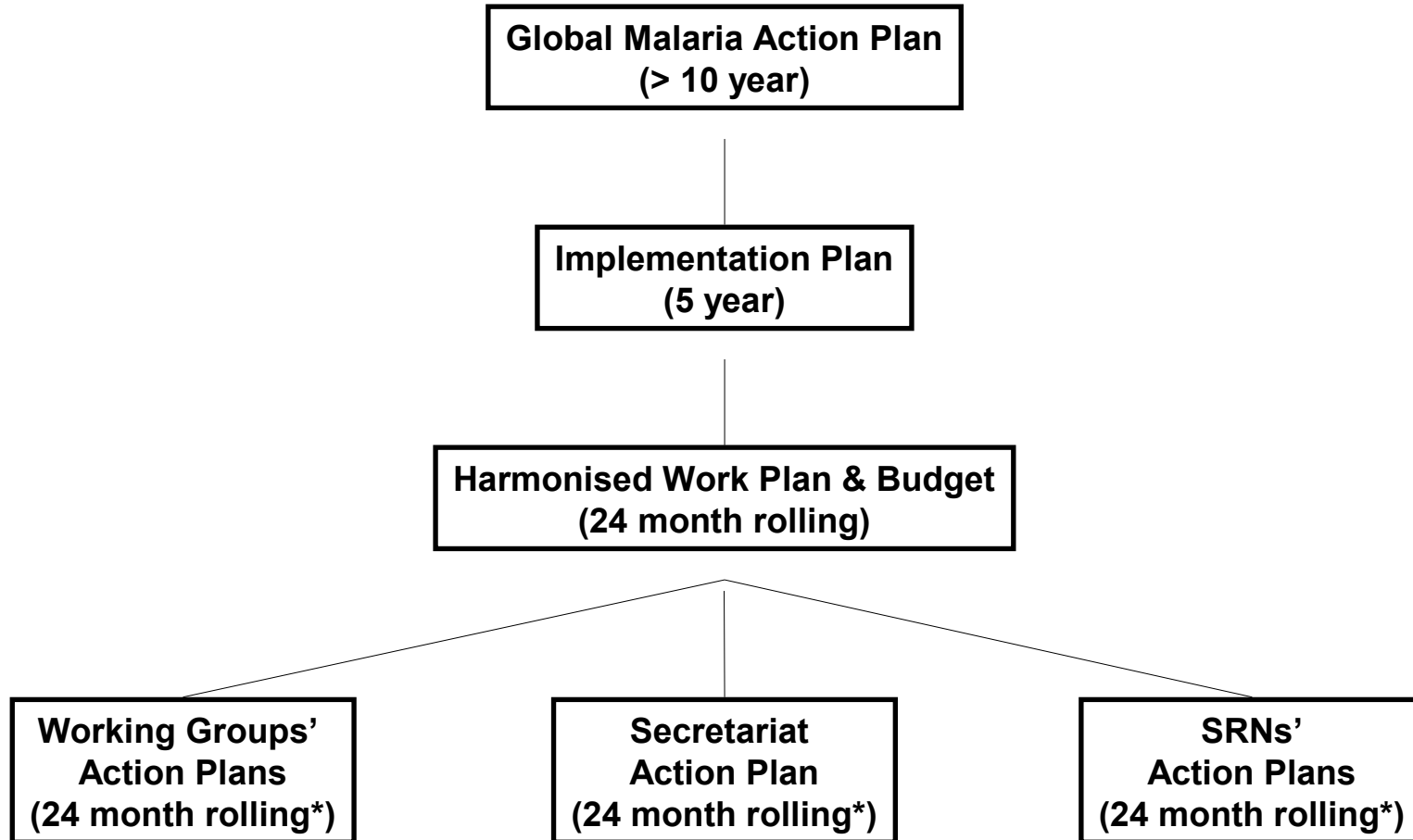
1 "Achieve Universal Coverage"	4 "Ensure quality reporting for countries"	2010	2011
Planned reports generated in line with 2010 reporting framework including measuring in-country progress			



Targets in 2010-2011 Partnership Workplan with WIN deliverables

- **Target B:** Appropriate response to 80% of country TA requests via Sub-regional Networks delivered
- **Target E:** 45 countries/territories to align their strategic/operational plans with GMAP
- **Target F:** Implement global and regional strategies for drug and insecticide resistance management
- **Target G:** Prepare for elimination (8 countries supported to align their strategic/operational plans with GMAP)

Establishing Accountability – Planning Process



* 24 month rolling plans – 12 months fixed & 12 months projected

Expenditure Budget 2010-2011

TABLE B

Activity costs (with identified income)

	TARGET A	TARGET B	TARGET C	TARGET D	TARGET E	TARGET F	TARGET G	TARGET H	TOTAL
HWG		5 226 000		265 486	265 487				5 756 973
<i>Through WHO/RBM account</i>				265 486	265 487				530 973
<i>Outside WHO/RBM account</i>		5 226 000							5 226 000
MERG			175 500						175 500
<i>Through WHO/RBM account</i>			175 500						175 500
<i>Outside WHO/RBM account</i>									0
PSM	9 112	293 918		41 925	5 080	38 707	29 201	27 103	445 047
<i>Through WHO/RBM account</i>	9 112	93 918		41 925	5 080	26 707	29 201	27 103	233 047
<i>Outside WHO/RBM account</i>		200 000				12 000			212 000
CMWG	21 396		20 541		85 552	13 673		175 345	316 508
<i>Through WHO/RBM account</i>	21 396		20 541		85 552	13 673		175 345	316 508
<i>Outside WHO/RBM account</i>									0
WIN									0
<i>Through WHO/RBM account</i>									0
<i>Outside WHO/RBM account</i>									0
SRNs	501 207	1 346 952	1 107 725	309 435	1 691 491	791 789	601 318	150 817	6 500 733
<i>Through WHO/RBM account</i>	501 207	1 346 952	1 107 725	309 435	1 691 491	791 789	601 318	150 817	6 500 733
<i>Outside WHO/RBM account</i>									0
SEC	473 450	1 785 050	529 900	3 275 050	1 623 000	245 650	316 800	5 846 600	14 095 500
<i>Through WHO/RBM account</i>	473 450	1 785 050	529 900	3 275 050	1 623 000	245 650	316 800	5 846 600	14 095 500
Staff costs	391 450	943 050	362 400	1 940 900	1 345 350	235 650	291 800	4 813 400	10 324 000
Activity costs	82 000	842 000	167 500	1 334 150	277 650	10 000	25 000	1 033 200	3 771 500
<i>Outside WHO/RBM account</i>									0
TOTAL	1 005 165	8 651 920	1 833 666	3 891 896	3 670 610	1 089 820	947 319	6 199 866	27 290 261
<i>Through WHO/RBM account</i>	1 005 165	3 225 920	1 833 666	3 891 896	3 670 610	1 077 820	947 319	6 199 866	21 852 261
<i>Outside WHO/RBM account</i>	0	5 426 000	0	0	0	12 000	0	0	5 438 000

Supplemental Activity Framework 2010-2011

TABLE C

Supplemental activity costs (for which additional funding is required)

	TARGET A	TARGET B	TARGET C	TARGET D	TARGET E	TARGET F	TARGET G	TARGET H	TOTAL
HWG		5 504 000		3 274 514	3 934 513				12 713 027
MERG			1 800 000						1 800 000
PSM	60 188	620 225	0	276 875	33 586	176 293	192 799	178 897	1 538 863
CMWG	3 604	0	3 459	0	14 448	2 327	0	29 655	53 492
WIN	0	35 000	0	0	111 000	80 000	27 000	0	253 000
SRNs	396 507	1 065 322	875 831	244 993	1 337 119	625 813	475 266	119 479	5 140 331
SEC	126 950	492 950	306 900	1 659 650	507 800	71 450	144 700	2 719 100	6 029 500
Staff costs	44 950	310 950	139 400	515 500	230 150	61 450	69 700	1 595 900	2 968 000
Activity costs	82 000	182 000	167 500	1 144 150	277 650	10 000	75 000	1 123 200	3 061 500
TOTAL	587 249	7 717 498	2 986 190	5 456 032	5 938 466	955 882	839 765	3 047 130	27 528 213

Merci Viumau !

謝謝

WIN & GMAP: Malaria Research Agenda

- **R&D** (continued)
 - **Elimination:**
 - Opportunities to improve vector control
 - Increased emphasis on Integrated Vector Management (IVM)
 - Larval source and environmental management
 - Proposed Recommendations
 - Additional research into applications of larviciding and environmental management in various transmission settings.

WIN & GMAP: Malaria Research Agenda

- R&D

- **Control Stage:**

- Opportunities to improve vector control
 - Costs and challenges of Indoor Residual Spraying
 - Distribution and practicality of long-lasting insecticidal nets (LLINs)
 - Delaying resistance to pesticides
 - New chemistries and targets for killing vectors
 - Larvicides for use in multiple settings and inexpensive biologics
 - Novel mechanisms for killing vectors
 - Control methods and personal protection measures for outdoor biting vectors
 - Proposed Recommendations
 - New chemistries and targets for killing vectors (including development of new active ingredient classes to stave resistance)
 - Research into safe, longer-lasting, insecticides for IRS and LLINs;
 - Development of less expensive but still highly effective pesticides and biologics;
 - Interventions targeting outdoor-biting vectors; and
 - New mechanisms for application and use, such as new tools for spraying or fogging, consumer products with evidence-based efficacy, and other impregnated materials (curtains, wall-paper, mosquito-proofing)

- **Elimination:** Opportunities to improve vector control
 - Increased emphasis on Integrated Vector Management (IVM)
 - Larval source and environmental management