

Alliance for Malaria Prevention

“Expanding the ownership and use of mosquito nets”



George Greer AMP
RBM – Scalable Malaria Vector Control (WIN)
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AMP an overview

- A work stream within the HWG
- A continual planning process
- Weekly conference call
- Annual partners meeting
- Eight working groups
- Three trainings planned in 2010 (M&E, Implementation, Communications)
- Supporting country-driven requests for technical assistance.

2010

The Alliance for Malaria Prevention

A WORKSTREAM WITHIN THE ROLL BACK MALARIA PARTNERSHIP

Expanding the ownership and use of mosquito nets

Malaria is a leading cause of death for children under five in Africa, and kills approximately 1 million people a year. Sleeping under a mosquito net treated with insecticide provides protection from malaria-carrying mosquitoes. The nets are non-toxic to humans.

Since 2002, mosquito net campaigns in Africa have delivered tens of millions of long lasting insecticide treated nets (LLINs) under the leadership of African Ministries of Health and National Malaria Control Programs. Many other campaigns are being planned by Ministries of Health across Africa to help end malaria deaths, and to meet the challenge by U.N. Secretary General Ban Ki-moon to cover every man, woman, and child at risk for malaria with a mosquito net by December 31, 2010.

The challenge is espoused by the Alliance for Malaria Prevention (AMP)—a workstream within the Roll Back Malaria Partnership. AMP represents more than 40 partners, including government, business, faith-based and humanitarian organizations. Its goal is to expand ownership and use of LLINs, which have been shown to reduce malaria incidence by 50 percent and reduce all-cause child mortality by 20 percent. LLINs, along with timely diagnosis and treatment, indoor residual spraying of homes, and intermittent preventive treatment of pregnant women, are an essential component of the malaria control tool box.

Local and international partners are coming together under the AMP umbrella to deliver LLINs to vulnerable groups via mass delivery platforms focused on child survival. These mass campaigns may include vaccination against measles or polio, Vitamin A supplementation, treatment for intestinal worms, and other maternal and child health interventions.

Recognizing that simultaneous multiple approaches are needed to boost and maintain long-term coverage of LLINs, campaigns will complement routine systems, such as delivery of LLINs to pregnant women during antenatal visits, and to children during vaccination sessions.

The origins of this approach have a long history. For many years, public health and development partners have packaged and integrated health services to provide children under five years old with a measles vaccination, Vitamin A, and treatment for intestinal worms to strengthen immune systems.

In 2002, a measles campaign in Ghana included the distribution of mosquito nets in its health intervention package. Results from this pilot activity showed the cost-effectiveness of piggybacking net distribution on the measles vaccination platform. This study helped shift the major international donor agencies and key implementing partners to support the integration of delivery of mosquito nets into these child health campaigns, and the partnership that led to AMP was born.

It is now broadly acknowledged that the campaign package of high-impact interventions with mosquito nets will help save lives and give children a better chance to develop and thrive. In countries where two out of five children do not reach their fifth birthday, integrated child health campaigns make a significant contribution to child survival. □

The Alliance for Malaria Prevention partners include:

Academy for Educational Development (AED)	Exxon Mobil Corporation	Medical Care Development International (MCDI)	United Nations Children's Fund (UNICEF)
Against Malaria	The Global Fund to Fight AIDS, Tuberculosis, and Malaria	Malaria Consortium	United Nations Foundation
Africa's Health in 2010	Global Health Advocates	Malaria No More	U.S. Centers for Disease Control and Prevention
American Red Cross	International Federation of Red Cross and Red Crescent Societies (IFRC)	The MENTOR Initiative	The United Methodist Church
BASF	International Y's Mens Club	Nets for Life	United States Agency for International Development (USAID)
Bayer	Immunization Basics	Nothing but Nets	Vestergaard Frandsen
Buy-A-Net Malaria Prevention Group	Izumi Foundation	Population Services International (PSI)	The World Bank
Canadian Red Cross	Johns Hopkins University	The President's Malaria Initiative (PMI)	The World Health Organization
Canadian International Development Agency (CIDA)	Center for Communication Programs	Rotarians Against Malaria	World Vision
Center for Interfaith Action (CIFA)	HIS Nets	Sumitomo Chemical	Additional LLIN manufacturers
Clarke Mosquito Control	Lutheran World Relief	Syngenta	
Deliver	MACEPA	Tana Netting	

Last updated by: Bailey, Lorenzo, February 2010

Weekly conference call

Wednesday at 10:00 (EST) / 15:00 (GMT)

Agenda:

- Focus on tracking and supporting implementation
- Updating priority / focus countries
- Providing country updates by SRN (decisions / planning TA)
- Working group updates

AMP working groups (1/3)

Technical assistance: (Marcy Erskine -IFRC: marcy.erskine@gmail.com)

- NMCPs define TA; RBM SRN focal points validate this request.
- Four categories of TA: Implementation, logistics, M&E, communications
- Recent/ongoing TA to Burkina Faso, Uganda, Nigeria

Monitoring and evaluation: (David Gittelman CDC / PMI: dmg1@cdc.gov)

- Validate / standardize M&E approaches for LLIN scale-up activities (MERG, WHO/AFRO, Global Fund)
- English and French M&E training planned April / May 2010 (dependant on funding)

Operational research: (George Greer USAID / PMI: ggreer@usaid.gov)

- Determine operational research priorities and link to agencies with funding available / agencies already conducting – planning OR activities.

AMP working groups (2/3)

BCC: (Hannah Koenker – JHU CCP: hkoenker@jhsph.edu)

- Standardize BCC survey questions; agree on a basic package of key questions, plus additional standardized optional modules.

Communications: (Antonia Wolff - AED: awolff@aed.org)

- Support country press releases, communication advocacy issues
- Strengthened link to MAWG (Sierra Leone, Mali, Burkina Faso)

Training & Toolkit: (Marcy Erskine -IFRC: marcy.erskine@gmail.com)

- ITN campaign Toolkit revision to be completed 2nd quarter of 2010
- Will seek input from technical various partners

AMP working groups (3/3)

Net mapping: (John Milliner USAID / PMI – jmilliner@usaid.gov)

- Built on LLIN manufacturers deliveries to countries / active tenders
- Tracks nets being delivered to countries by quarter and donor.

Tracking progress to 2010: (Stefan Hoyer – WHO - hoyers@who.int)

- Tracks distribution at country level – bottom up approach
- Early identification of any potential bottlenecks/delays to achieving 2010 targets
- To date a limited number of responses approx. 10 of 43 country tracking sheets returned

Opportunities for expanded collaboration WIN and AMP

- Coordinate annual meetings to ensure more integrated programs and continue back to back as in 2010
- Strengthen the links based on AMP's operational approach and WIN's technical leadership
 - Closer coordination on OR issues
 - WIN to synthesize best practice, encourage innovation, identify emerging programmatic and implementation research questions.
 - AMP to operationalize WIN's recommendations.

AMP weekly call

Every Wed at 10 ET / 15 GMT

- USA + 1-888-363-4735 (Skype toll free)
- International + 1-215-446-3657
- Access code: 9305495