

Multisectoral Action Framework for Malaria

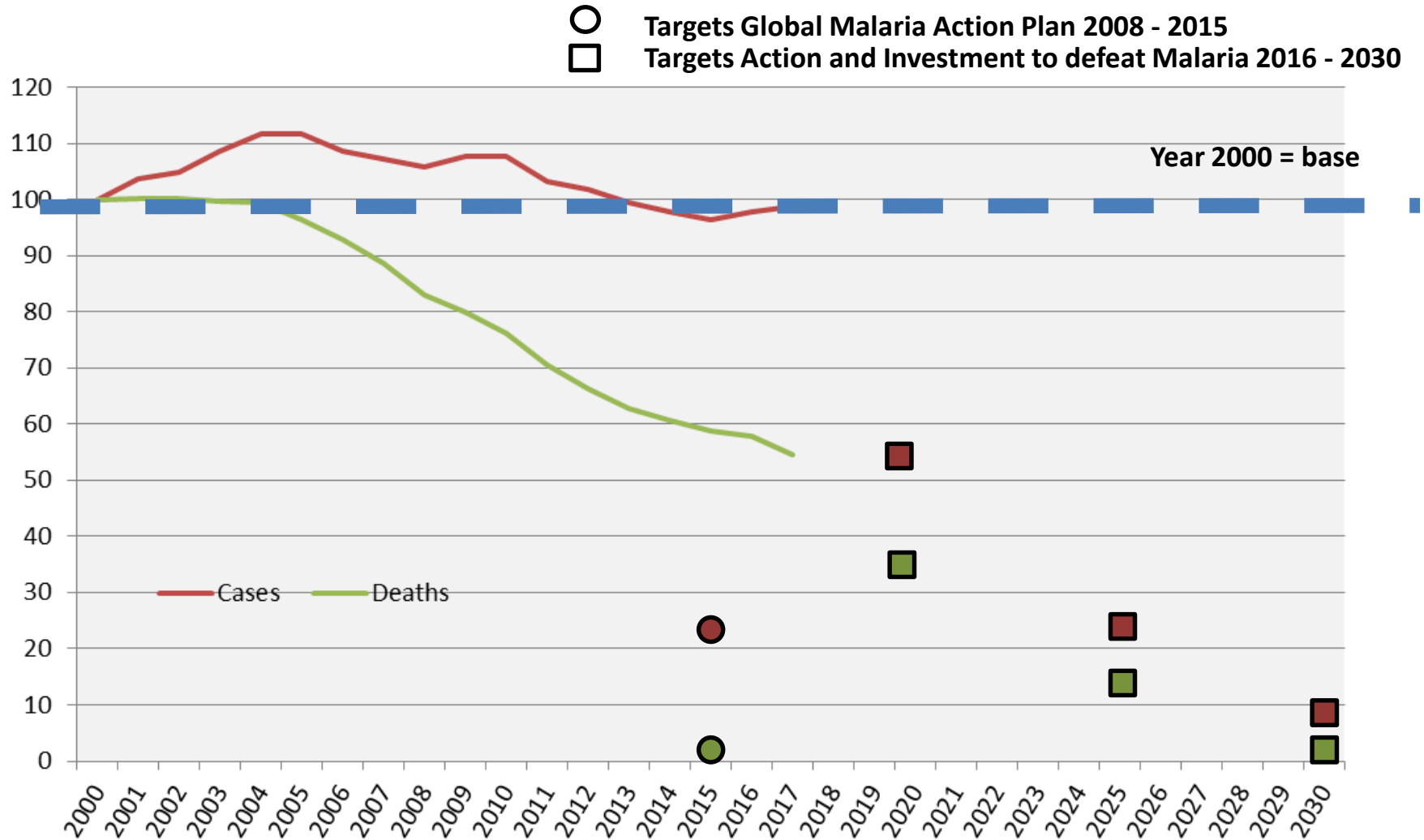
RBM & UNDP - 2019 Update for action

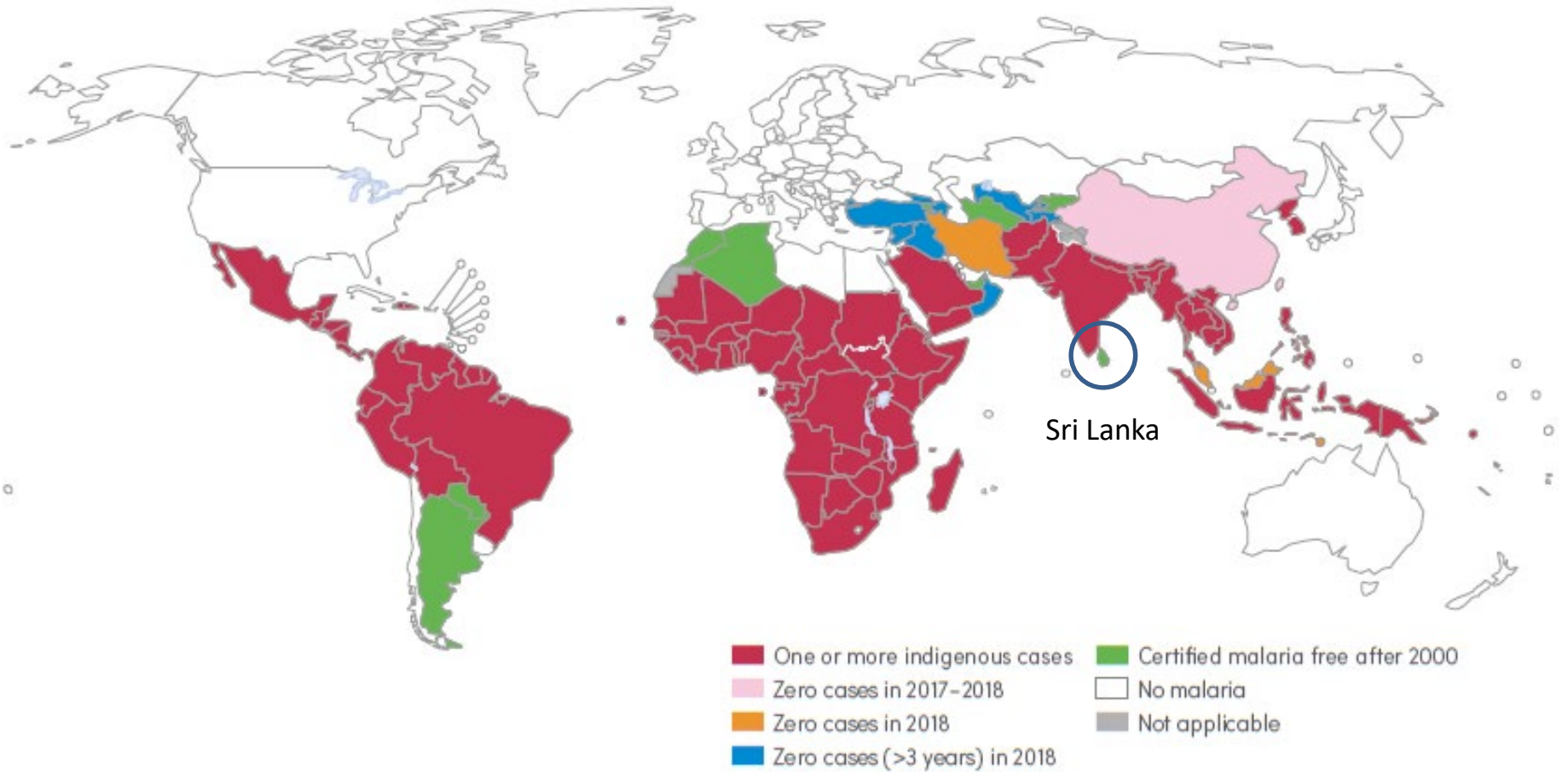
3rd Meeting of the Multi-Sectoral Working Group

Hotel Mövenpick, Geneva Switzerland 6 -7 February, 2020

Erik Blas

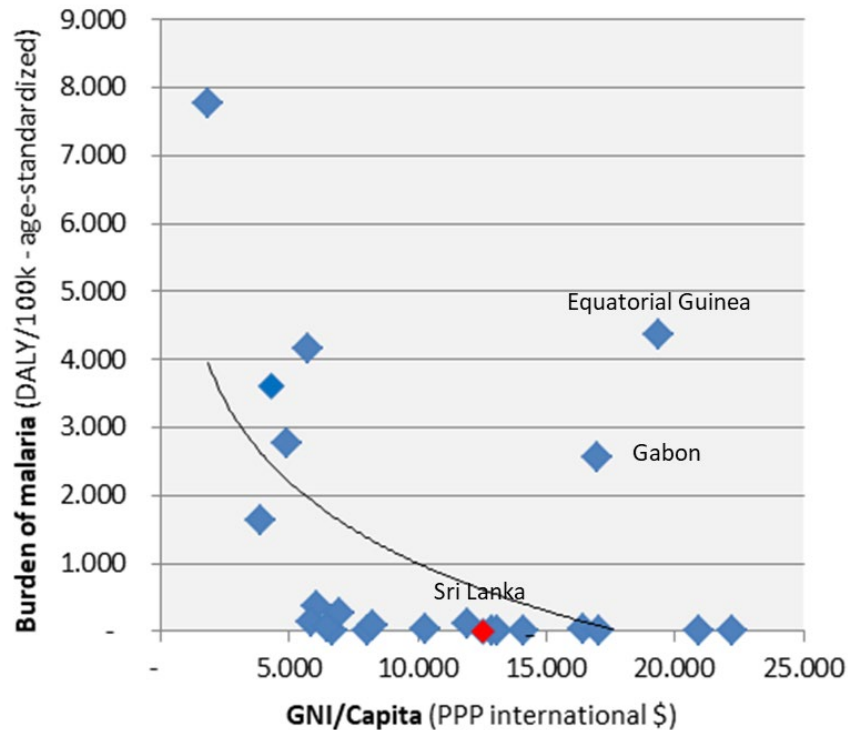
Global malaria cases and deaths



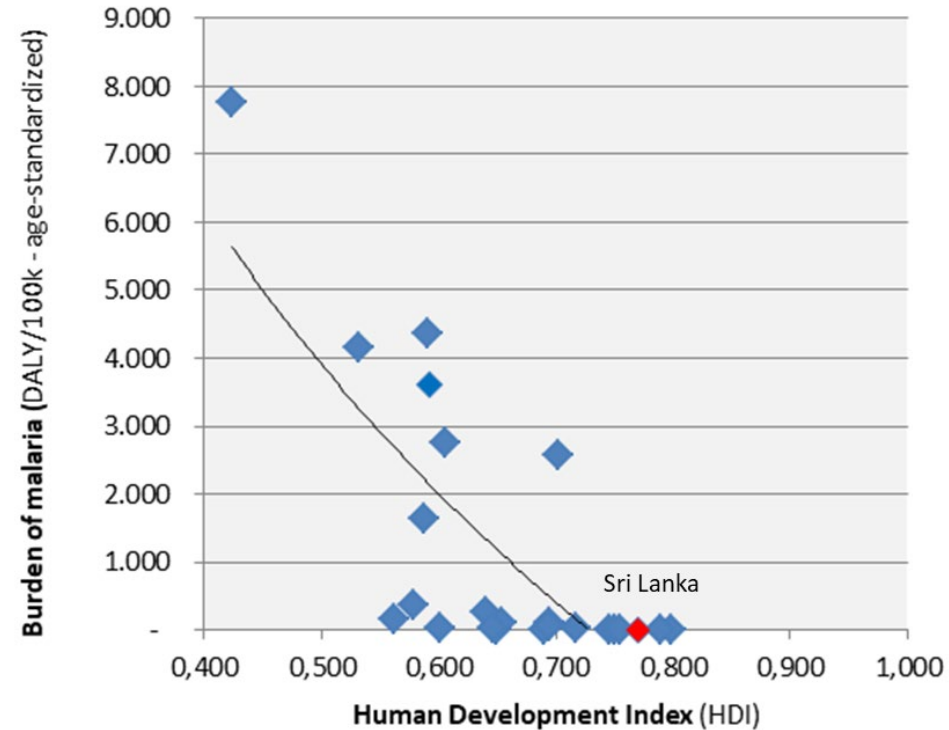


24 countries in the 'malaria-belt'

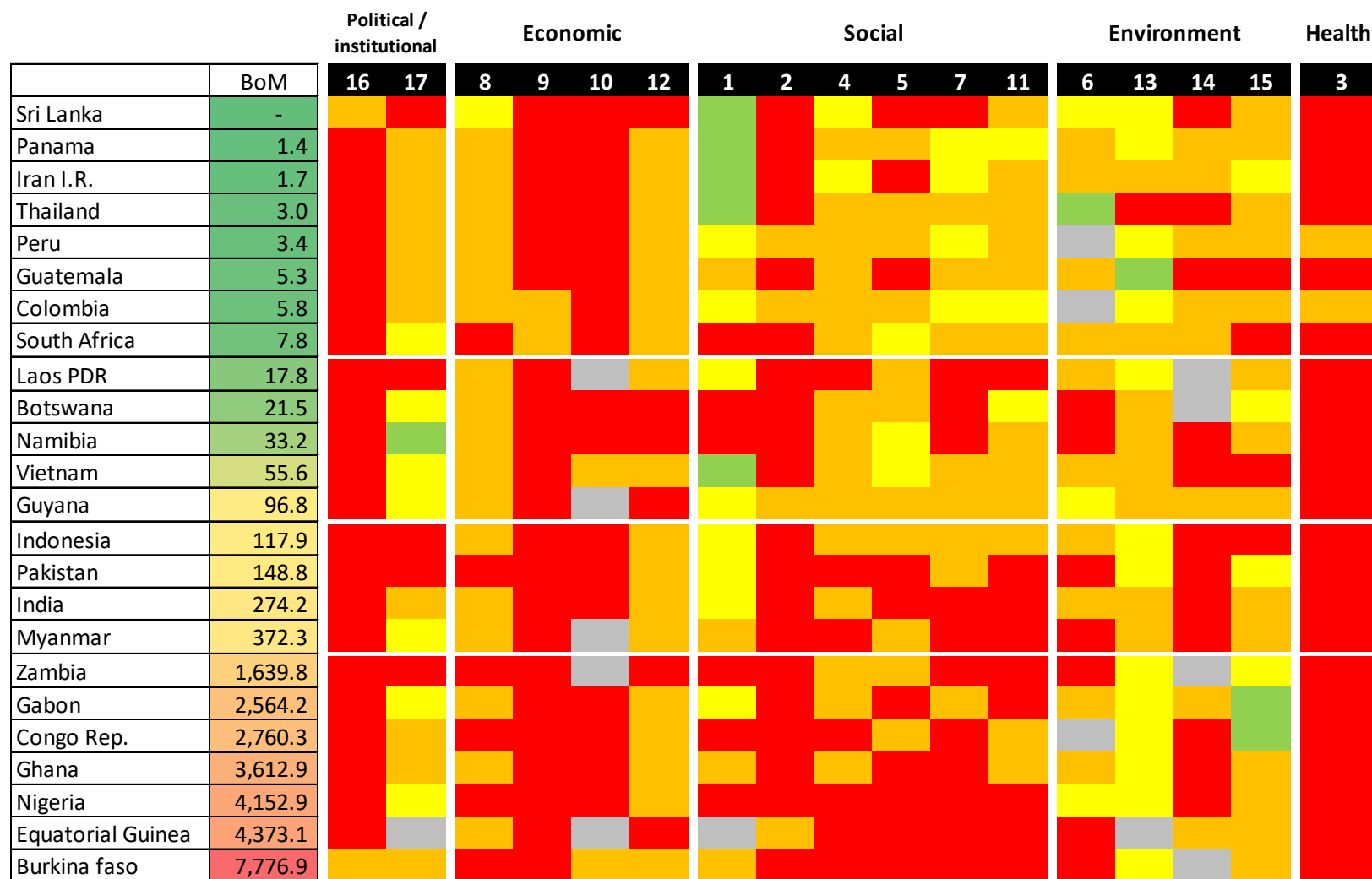
GNI and Malaria



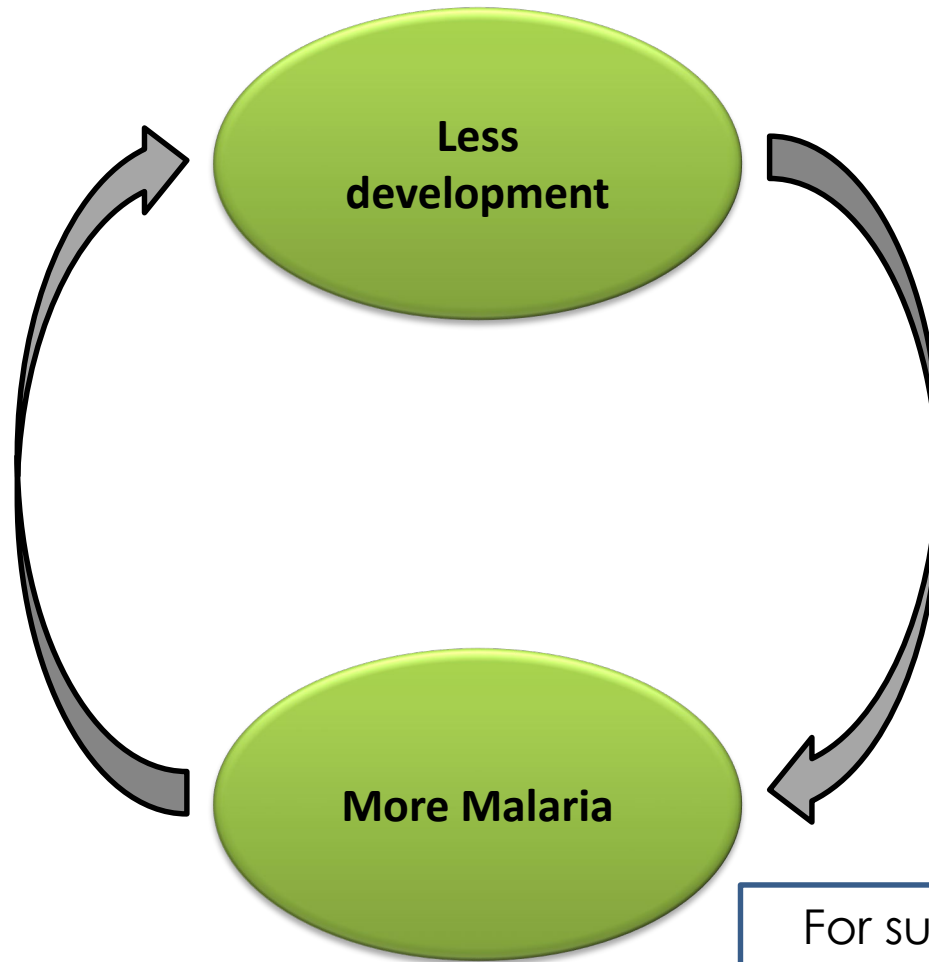
HDI and Malaria



Malaria and the SDGs



The vicious cycle



For sustainable impact
the trick is to invert the
direction

Equity of interventions – Inequity of results

Malaria is a disease of poverty and disadvantage

Seven-step ladder for successful outcome from health services

1. Availability
2. Accessibility
3. Acceptability
4. Contact coverage
5. Diagnostic accuracy
6. Provider compliance
7. Consumer adherence

- Despite progress in intervention coverage
- Despite systematically prioritizing the poorest
- Malaria is consistently concentrated in the poorest

Framing for Sectoral Action

Sectors ask:


















- Where can I contribute?
- What can I do?
- How can I show that I am making a difference?
- Why should I engage?

Is malaria primarily a medical problem for health programmes?

- No! It's a development challenge
- Do no harm!
- Do good!
- Malaria is in all SDGs!

Double Africa's rice production by 2030

"We want to shift the mind-set of small-holder framers from producing-to-eat to producing-to-sell" said the chairman of the Nippon Foundation

	Bearings for malaria	
SDG Group	Potential 'harm'	Potential 'good'
<p align="center">Political / Institutional</p>  	Side-line local government and ignore potential harm.	Bring multiple sectoral stakeholder together, e.g., at district level
<p align="center">Economic</p>    	Increase inequity due to buy-out of the most vulnerable farmers.	Create local job opportunities for young people
<p align="center">Social</p>      	Increase malnutrition due to shift from diversified <i>to-eat-crops</i> to a single <i>to-sell-crop</i>	Increase income for small-scale farmers allowing them to improve schooling, housing, etc.
<p align="center">Environment</p>    	New breeding sites for mosquitoes and increase exposure to bites	More efficient and safer water management – control breeding sites
<p align="center">Health</p> 	General increase in water- and vector-borne diseases	More resources in households reduce delays in care seeking.

Coordination and management

Driving Themes

- **Overriding theme:** *'leave no one behind and sustainability'*
- **Action theme:** *'a malaria-free world'*
- **Collaborative theme:** *'co-benefits'*

Principles & Processes

- Joint appraisal and consensus building
- Joint evaluation and learning
- Monitoring // mutual & public accountability
- Capacity building and cross-training
- Champions
- Cross-sectoral assessment

Five steps to becoming a malaria smart

- Workplace, school, office, institution
- Organization, company
- Donor, "Sector"
- District, nation

Sustainable elimination

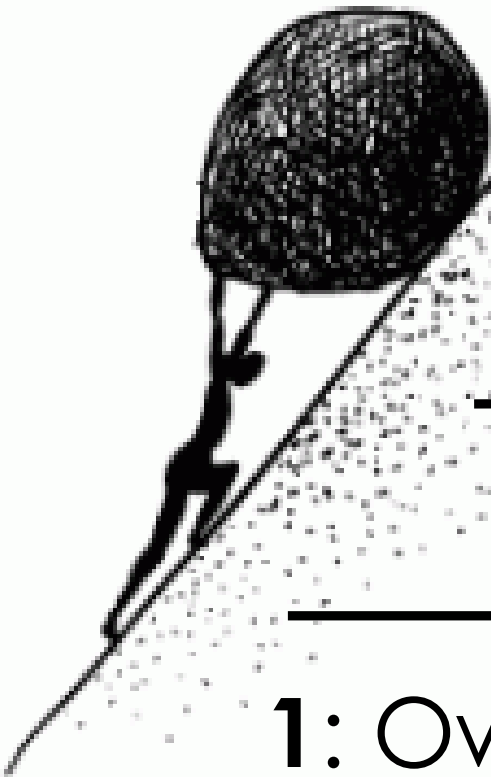
5: Socio-economic development for malaria & synergies with other sectors

4: Malaria reducing potentials
[do good]

3: Malaria producing activities
[do no harm]

2: Clients and their families

1: Own staff and their families



And now over to

QINGXIA