



**GLOBAL MALARIA
PROGRAMME**



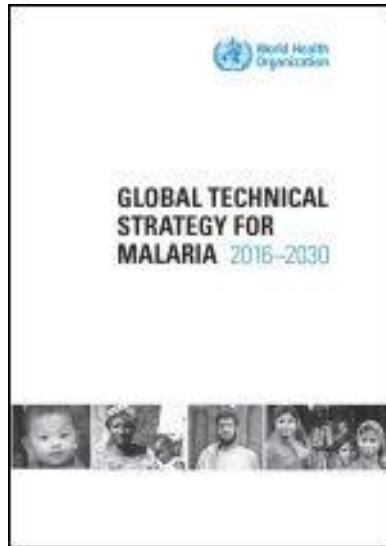
**World Health
Organization**

Report from the Global Malaria Programme

**Malaria Policy Advisory Committee
Geneva, Switzerland
16-18 September 2015**

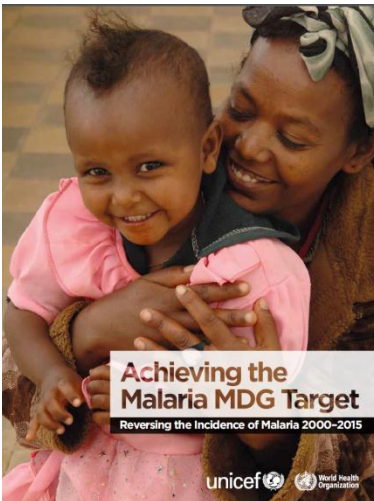
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On behalf of the global malaria team

Global Technical Strategy for Malaria 2016-2030



- Endorsed by WHA in May 2015, joint GTS/AIM launch at 3rd Intl Conference on Financing for Development - Addis Ababa, July 2015
- Regional Plans in development
 - GMS strategy – May 2015 launch
 - AFRO – Sep 2015 consultation
 - SEARO – Oct 2015 draft
 - PAHO – Oct 2015 consultation
 - EMRO – Oct 2015 regional committee
 - WPRO – Dec 2015 consultation
 - EURO – Sep 2016

Millennium Development Goal Reporting



- UN secretary General report released July 6th with section on malaria
- Malaria MDG report written with UNICEF to be launched September 17th
 - Including new disease burden estimates
- Paper in Nature by MAP to be released the same day. The effect of malaria control on *Plasmodium falciparum* in Africa between 2000 and 2015.
 - With evidence base for change in parasite prevalence case incidence and that interventions are responsible for a substantial proportion of the change.

MDG Report Highlights

Table 1. MDG 6 and associated malaria target and indicators

Goal	6. Combat HIV/AIDS, malaria and other diseases
Target	6C. Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases
Indicators	6.6 Incidence and death rates associated with malaria 6.7 Proportion of children under 5 sleeping under insecticide-treated mosquito nets 6.8 Proportion of children under 5 with fever who are treated with appropriate antimalarial drugs

Table 2. Malaria MDG indicators then and now

Indicators	2000	2015	% change
6.6 Incidence rate associated with malaria (per 1000 at risk) and Death rate associated with malaria (per 100 000 at risk)	146 47	91 19	–37% –60%
6.7 Proportion of children under 5 sleeping under insecticide-treated mosquito nets	2%	68%	>100%
6.8 Proportion of children under 5 with fever who are treated with appropriate antimalarial drugs*	0%	13%	>100%

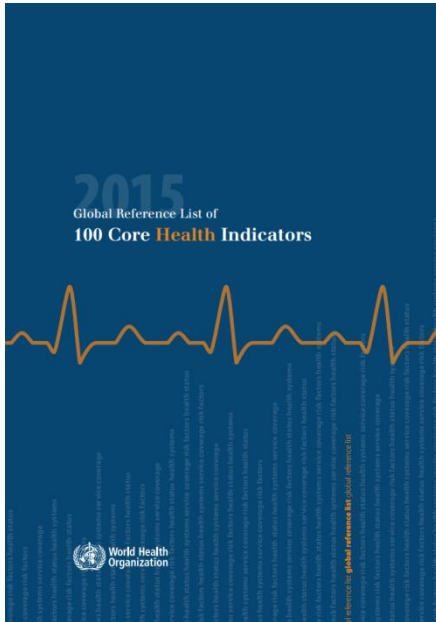
* Refers to artemisinin-based combination therapies

MDG Report – Other Statistics

	2000	2015
Estimated no. cases (millions)	262	214
Estimated no. deaths	839,000	438,000

Decline in malaria deaths rates in children <5 2000 - 2015	65%
Cases averted 2001 - 2015	1.2 billion
Deaths averted 2001 - 2015 (compared to if incidence and mortality rates 'of 2000 persisted 22001 to 2015)	6.2 million
Countries reporting zero cases in 2014	13
Countries reporting <10 cases in 2014	6

Global Reference List of 100 Core Health Indicators



- Aimed to be consistent with GTS core 14 indicators. Included:
 - Malaria mortality rate
 - Malaria parasite prevalence among children 6–59 months
 - Malaria incidence rate
 - IPTp for malaria during pregnancy
 - Use of insecticide treated nets (ITNs)
 - Treatment of confirmed malaria cases
 - Indoor residual spraying (IRS) coverage
 - Completeness of reporting by facilities
- Included in "additional indicators"
 - % of suspected malaria cases that had a diagnostic test
- Not included
 - Proportion of malaria cases detected by surveillance systems
 - % of cases investigated (programmes in elimination)
 - % of foci investigated (programmes in elimination)
 - Number of countries newly eliminated malaria since 2015
 - Number of countries that were malaria-free in 2015 in which malaria was re-established

Update on Roll Back Malaria Partnership

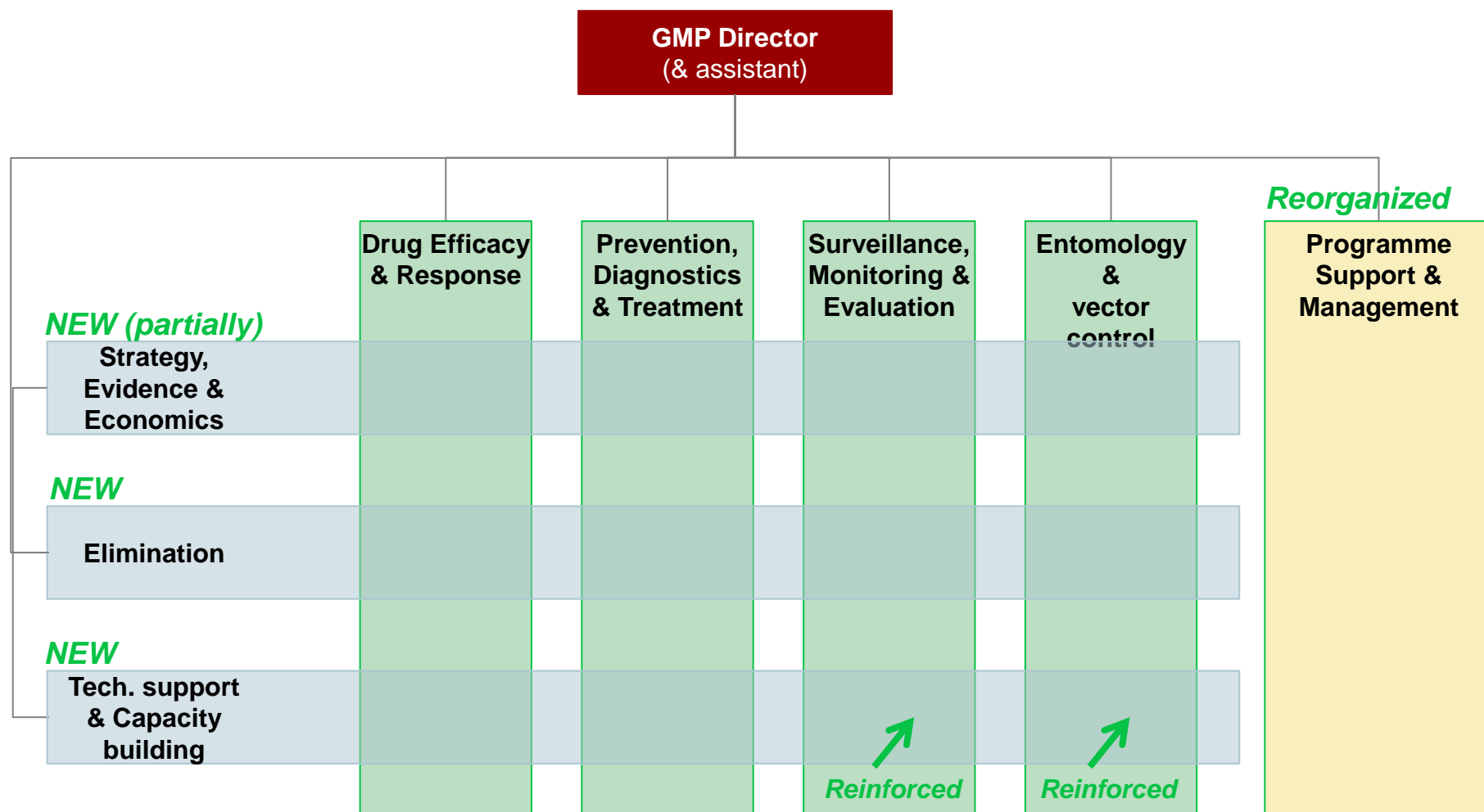
- A new partnership structure was approved by the RBM Board in May
- On 25 August, the chair of the RBM Board sent a letter to the DG on the Board decision to disestablish the RBM Secretariat based on a recommendation from the Finance and Performance Committee
- An Interim work plan for Sept – Dec 2015 and Secretariat Closure Timetable was prepared and approved by the FPC and the Executive Committee and sent to the Board on 9 Sept
- A Transition Oversight Committee, chaired by Zimbabwean Minister Parirenyatwa and Admiral Tim Ziemer has been formed to establish the new structure and develop plans for the transition
- WHO/GMP will work with the HWG and other partners to ensure that there is no gap in the technical support provided to countries

Since Last MPAC Meeting

- Guidelines for the treatment of malaria. 3rd edition (April 2015)
- Global Technical Strategy for Malaria 2016-2030 (June 2015)
- Indoor residual spraying: An operational manual for IRS for malaria transmission, control and elimination. Second edition (June 2015)
- Control and elimination of *Plasmodium vivax* malaria – A technical brief (July 2015)
- Eliminating malaria: Case study 10. Successful elimination and prevention of re-establishment of malaria in Tunisia (July 2015)
- Malaria Policy Advisory Committee to the WHO: conclusions and recommendations of March 2015 meeting - published August 2015



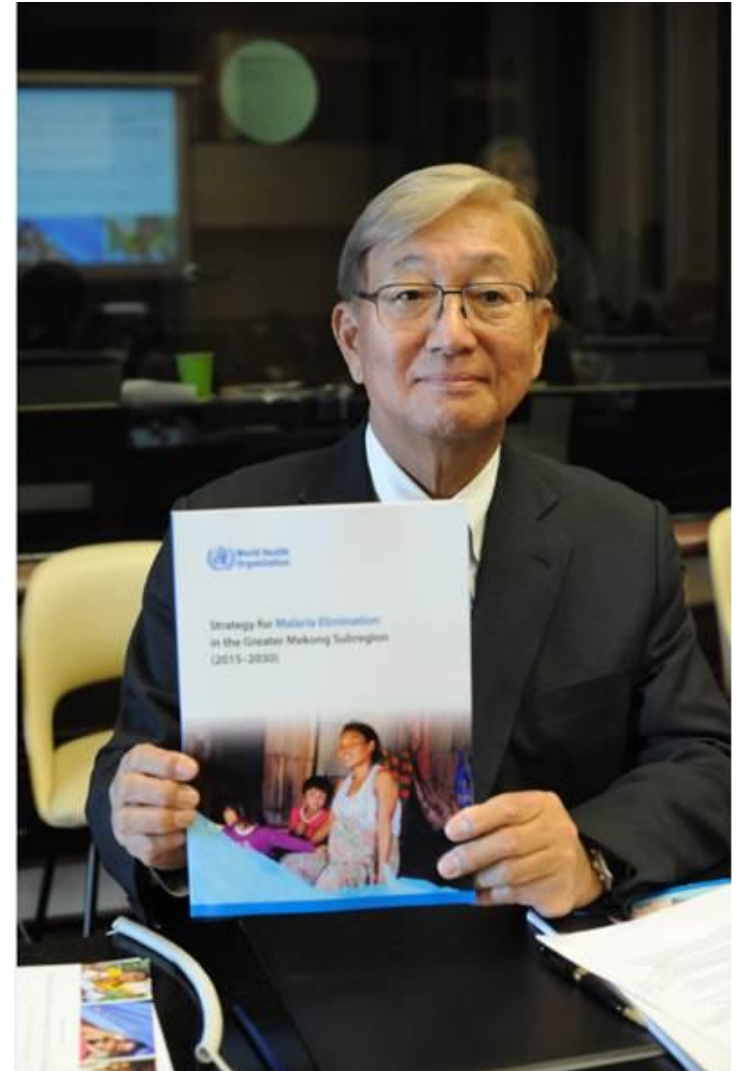
New WHO-GMP Matrix Structure



- Reinforcement of SM&E and Vector control teams
- Creation of 3 cross-unit teams to cover critical areas & enhance collaboration
- Strengthened support to department via Programme Support & Management

Drug Efficacy & Response (DER)

- Strategy for Malaria Elimination in the Greater Mekong Subregion (2015-2030) launched May 2015
- Status report on artemisinin and ACT resistance – September 2015
 - Resulting in policy changes
 - Cambodia – DHA-PPQ to AS-MQ
 - Thailand – AS-MQ to DHA-PPQ
 - North-east India – AS-SP to AL
 - Sudan and Somalia – AS-SP to ?
(deciding meetings to be held shortly)
- More details tomorrow in Session 6



Entomology & Vector Control (EVC)

- Strengthening the EVC team at HQ
- Published the revised version of the IRS manual – which now includes a checklist for environmental compliance
- Vector control technical support provided especially to countries which are about to eliminate malaria
- Work on the insecticide resistance global database proceeding well – with provision for online tools to generate maps
- Convening an ERG to define areas and conditions in which to deploy PBO nets following MPAC's advice to GMP

Entomology & Vector Control (EVC)

Innovation to Impact (I2I)

- EVC/GMP has contributed as a stakeholder to this important initiative
- Part of I2I, is a WHO reform in the following areas:
 - Stimulate development of more innovative products
 - Accelerate availability of vector control products
 - Improve quality of vector control products
 - Increased appropriate use of innovative vector control interventions
- Like medicines and diagnostics, evaluation of vector control products will be handled by PQ, while GMP and NTD will retain the normative piece
- Jointly with NTD, a grant proposal is being reviewed by BMGF and our two departments will be providing an update later during this meeting

Prevention, Diagnosis & Treatment (PDT)

- Malaria Treatment Guidelines (3rd Ed – March 2015)
- Collaboration with IVB for JTEG on RTS,S malaria vaccine
- ERG on MDA, MSAT and FSAT
- ERG on ISTp and safety of artemisinin derivatives in pregnancy
- WHO Drafting Committee on Malaria Terminology
- QA/QC for malaria diagnostics
 - Microscopy QA manual update
 - Malaria RDTs: R5 Product Evaluation and launch of R6
 - Preparation of international EQA scheme for NAA-based techniques
- Monitoring phasing out oral artemisinin-based monotherapies and procurement of QA ACTs and RDTs
- Preparations for PPC meeting on ivermectin for malaria
- RAcE 2015 implementation and policy development at country level

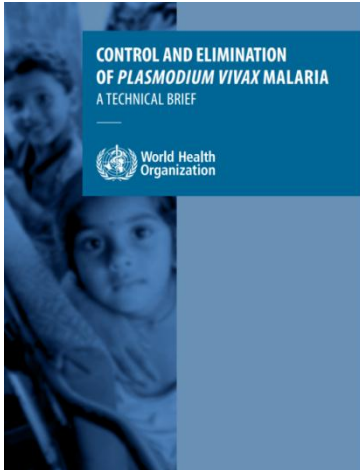
Surveillance, Monitoring & Evaluation (SUR)

- Team Leader position under recruitment
- Data workshops (with support from Global Fund and jointly planned with SEE) for National Malaria Programmes in Africa to strengthen capacity of surveillance, monitoring and evaluation and conduct rapid impact studies
 - Helps disseminate surveillance guidance to countries and impart data analysis skills that will help contribute to the quality of data collected for the World Malaria Report
 - Critical need to invest in training and dissemination of guidance given that Surveillance is third pillar in GTS – we hope that data workshops will be an annual event in each region/IST

Elimination (ELI)

- Team Leader position under recruitment
- Elimination ERG
- Technical support to E8, GMS
- Second certification missions planned for: Argentina and Kyrgyzstan

Strategy, Evidence & Economics (SEE)



- Launch of *Plasmodium vivax* control and elimination: a technical brief, July 29th 2015 in New Delhi
 - With generous support from MMV and SEARO
- Confronting *Plasmodium vivax* malaria - an advocacy piece
- Editorial in Lancet infectious disease: *Plasmodium vivax*: a roadblock on the quest to eliminate malaria
- Workshop of 17 countries to present guidance and to include the *P. vivax* strategy in national malaria strategic plans



Technical Support & Capacity Building (SCB)

- Facilitated (3 workshops) the update of the Malaria Programme Review and Planning documents (Annual Planning Guide; Malaria Strategic Planning development manual; and the Malaria Programme Review Guide) for endemic countries. Next step is a validation workshop with all NMCP managers from the AFRO region to validate the tools (Proposed for November 2015)
- Mock TRP review of GF concept notes submission (7 countries). All successfully submitted their malaria concept note.
- Gap analysis workshop to update the resource gaps from 2016 – 2020. Forty two malaria endemic countries from AFRO /EMRO were in attendance
- Support mission to update national treatment guidelines based on the just published 3rd edition of the WHO guidelines (6 countries – AFRO/SEARO supported)
- National Malaria Strategic Plan review and update mission to Sierra Leone (post Ebola)
- Malaria Programme Review in Thailand

Technical Support & Capacity Building (SCB)

Continued to participation to support Global Fund activities

- Briefing and support to the Technical Review Committee (3 waves in the reporting period)
- Member of the GF Grant Approval Committee (3 meetings in the reporting period)
- GMP continues to chair the HTM cluster Joint Working Group on the GF

In addition:

- Uganda – joint mission with IST/AFRO to assist in the epidemic response
- Sierra Leone – assisted with post Ebola National Strategic Plan update
- Djibouti – leading mission to plan for rainy season epidemic prevention
- Madagascar – leading a joint mission with AFRO to investigate upsurge in malaria cases and support GF concept note development

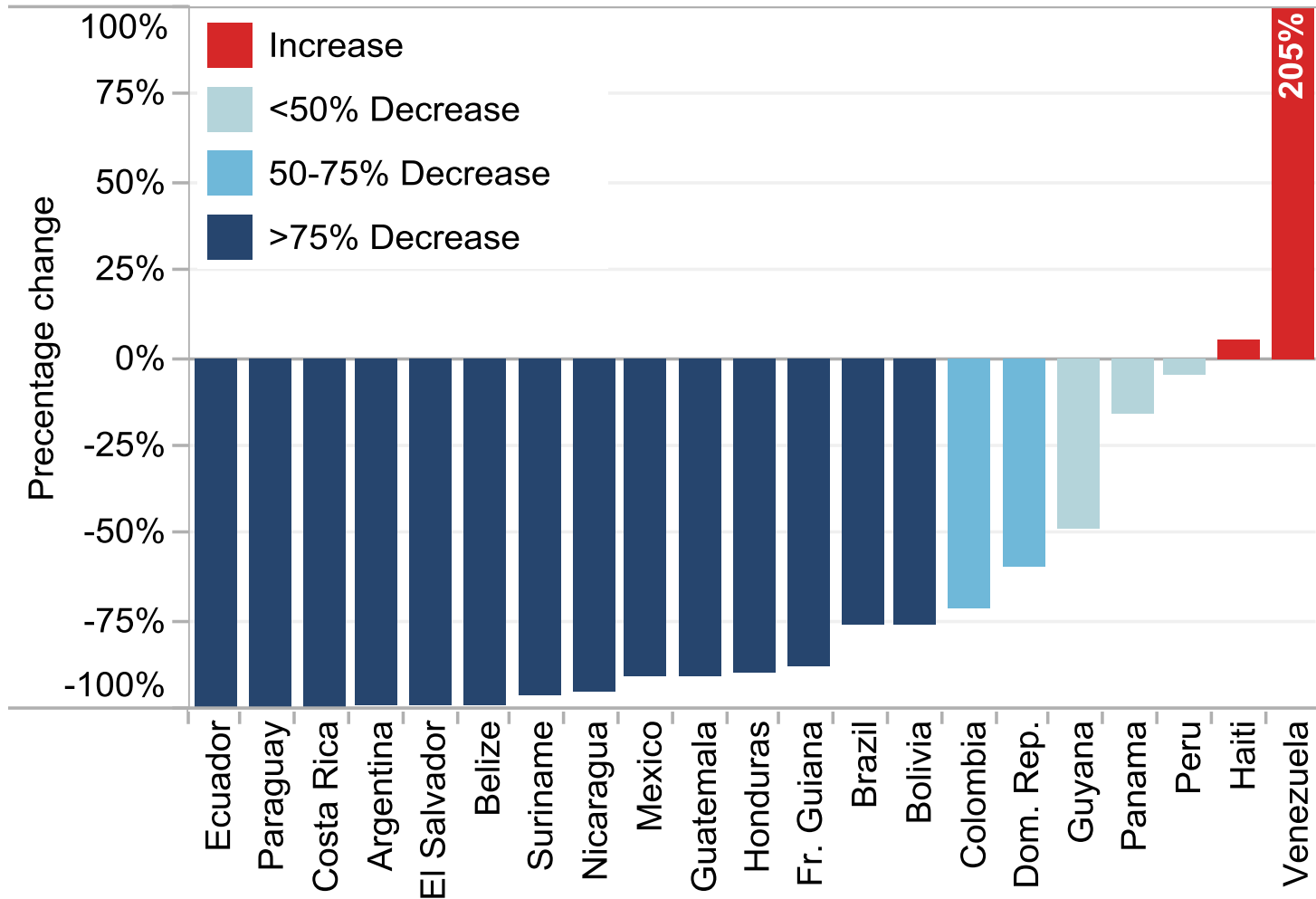
Anticipated WHO Guidance 2015/2016

- Guidance and policy briefings on malaria vaccine
- review of cardiotoxicity of antimalarials
- review efficacy and safety of pyronaridine+ artesunate
- review of QC methods for malaria RDTs for use at point of care
- review of *P. knowlesi* prevention and control
- preferred product characteristics of ivermectin use for malaria prevention
- Operational manual on diagnostics in low transmission
- Operational manual on mass drug administration
- Response plan to identified medicines safety concerns
- Entomological surveillance manual
- Vector control country mapping tool
- Framework for insecticide resistance monitoring and management
- LLIN durability to guide procurement decisions
- Elimination field manual
- Update on WHO terminology for malaria
- Framework for SME of GTS & AIM 2016-2030 (WHO and partners)
- Up to date field-level guidance handbook on SM&E implementation

Regional Updates

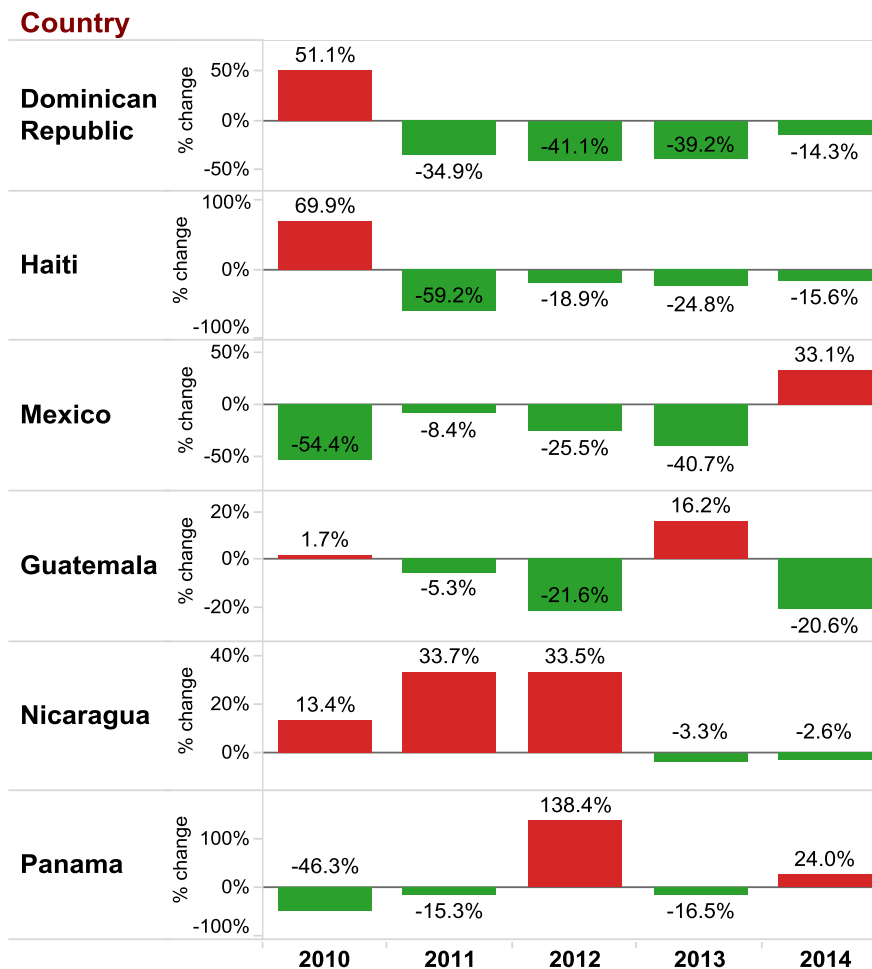
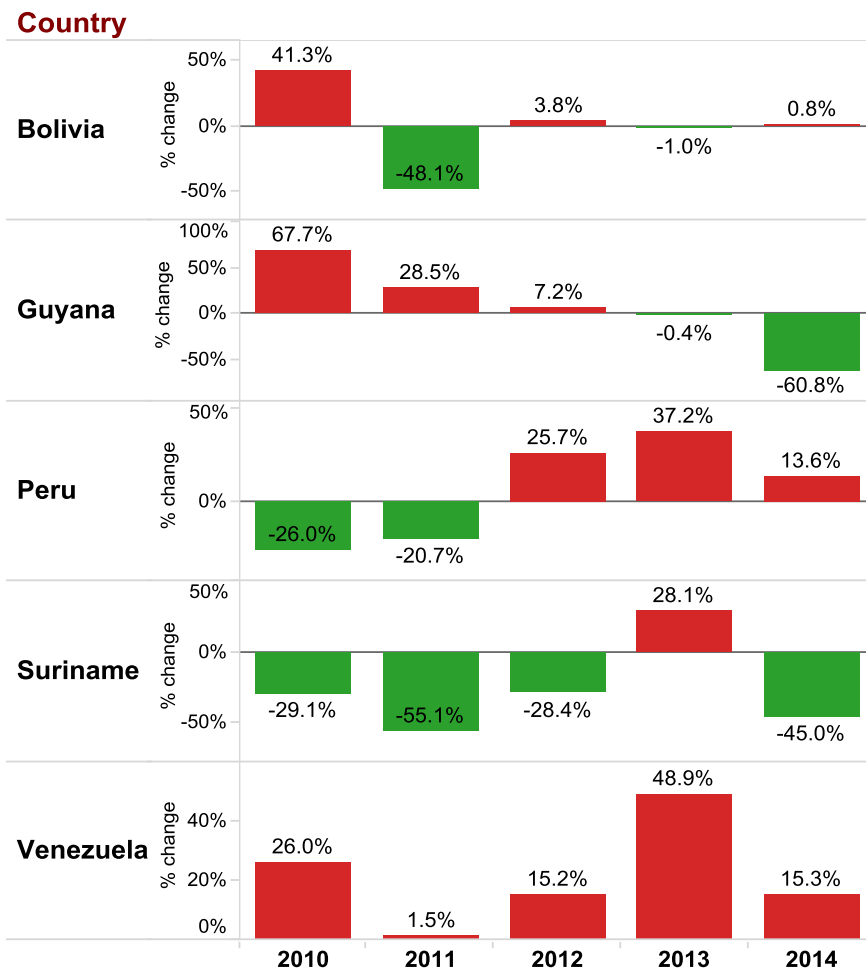


Decrease in Malaria Morbidity by Countries of the Americas, 2000–2014



* Fr. Guiana - French Guiana, ** Dom. Rep. - Dominican Republic

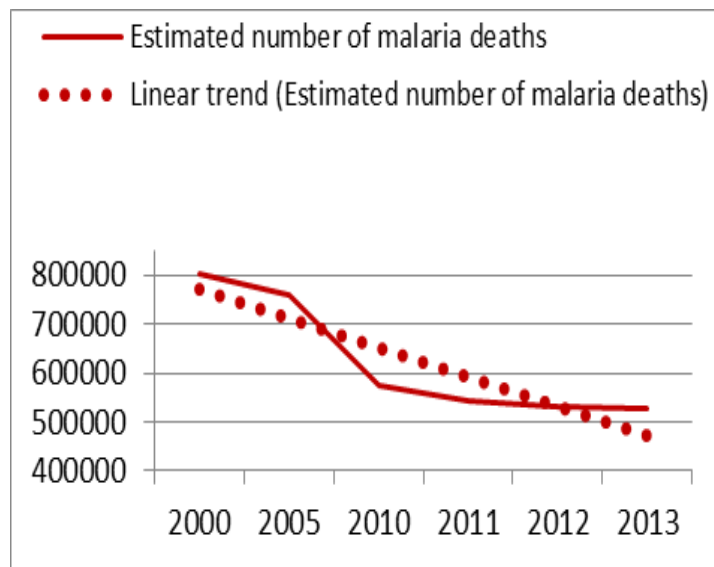
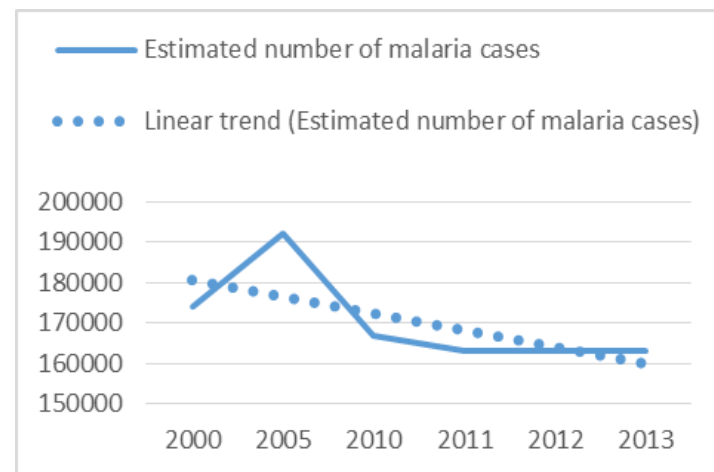
Percentage Change in Malaria Morbidity from the Previous Year, 2010-2014



High Burden Countries & Great Progress

- 18 countries in Africa account for 90% of infections in sub-Saharan Africa
- 2 countries account for 40% (Nigeria 29% and DR Congo 11%)
- Therefore, achievement of 40% reduction needs impact in high burden countries

Malaria incidence decreased by 34% and mortality declined by 54% in the African Region between 2000 and 2013



Source: WHO World Malaria Report 2014

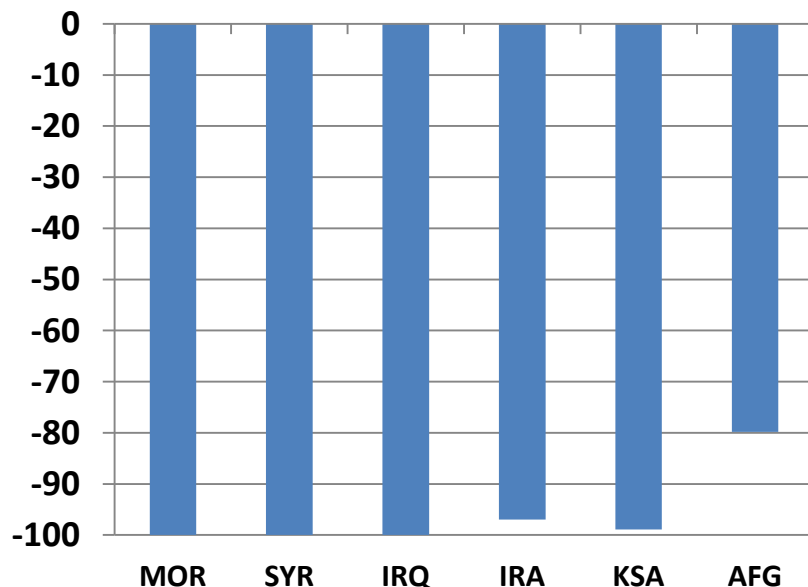
Challenges

- Gaps in interventions coverage and utilization
 - Only 29% of HHs had enough ITNs for all HH members in 2013
 - A third of HHs did not own even a single ITN in 2013
- Lack of robust, predictable and sustained international and domestic funding
- Inadequate HR capacity in AFRO (countries, IST, RO) to support implementation of the Global Technical Strategy for Malaria and the Africa Malaria Strategy
- Inadequate performance of malaria programmes & health systems
- Rising insecticide and antimalarial resistance & absence of novel tools/technologies

Achievements, Challenges in EMR

Achievement of MDG related to malaria in EMR countries

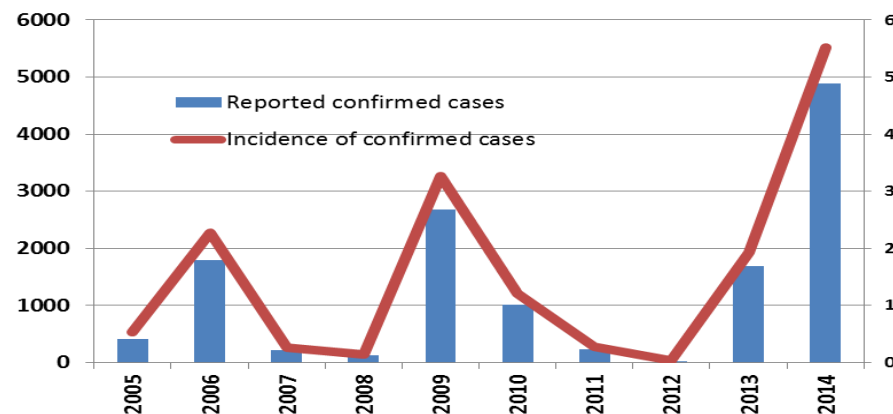
% reduction of reported confirmed malaria cases 2000-2014



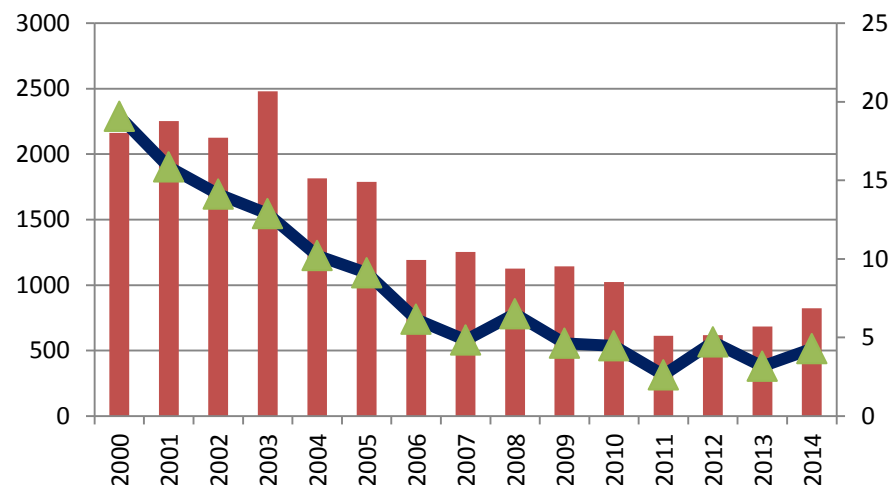
2014 : Local cases in Iran 370

Local cases in KSA 51

Epidemic in Djibouti



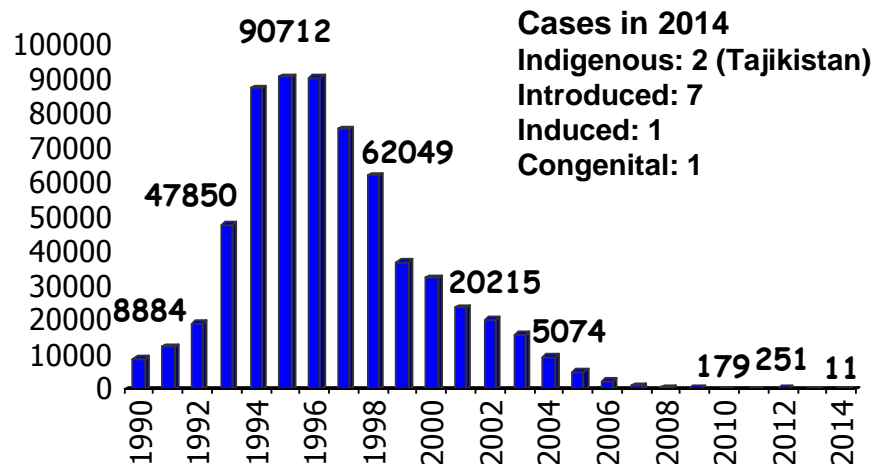
Mortality in Sudan



Elimination of Malaria in Europe

Cases in 2015

- Tajikistan: 1 case, registered in January, relapse
- Georgia: 1 induced case
- Greece: 1 case, Trikala, Farkadona municipality, Thessaly region, introduced



Prevention of reintroduction:

- Azerbaijan; Georgia; Uzbekistan
- Certified: Turkmenistan (2010); Armenia (2011); Kazakhstan (2012); Kyrgyzstan (2015)?

Elimination:

- Tajikistan; Turkey

Risk of reintroduction

- -Tajikistan: Border with Afghanistan
- -Turkey: Influx of refugees

Update on Malaria Control and Elimination in SEARO

Country	Target year for elimination and remarks
1. Bangladesh	2020; not feasible; NSP will be revised
2. Bhutan	2018; feasible; cross-border collaboration with India being strengthened; 11 indigenous case in 2014
3. DPRK	2020; 11,000+ cases reported in 2014; intensive operations needed to reach elimination goal by 2020
4. India	over 90% of districts with API less than 1/1,000; pre-elimination phase in the whole country by 2017; elimination by 2030; elimination plan to be launched in Feb 2016
5. Indonesia	2030; subnational elimination on track; 230 districts already declared malaria free
6. Myanmar	2030; significant progress; NSP being updated
7. Nepal	2026; feasible; it could be achieved earlier than 2026
8. Sri Lanka	zero indigenous case since Oct 2012; certification being planned in 2016
9. Timor Leste	significant progress; elimination goal agreed but target year not yet decided; feasibility assessment to be done before end of 2015
10. Thailand	2024; feasible; MPR done recently; NSP being updated

Update from the Western Pacific Region

- Over 700 mio people are at risk for malaria in 10 countries. Deaths were reduced by 93% since 2000; all countries are projected to decrease case incidence by >75% between 2000 and 2015. Cases due to *P. knowlesi* are increasing, esp. in Malaysia.
- All endemic countries have malaria elimination goals in their updated National Strategic Plans. By 2020, 3 countries are expected to achieve elimination: Republic of Korea, Malaysia, China (50 indigenous cases).
- Malaria has resurged in Lao PDR since 2011. Due to most countries having moved to middle income category, external funding has been severely cut esp in the high transmission countries in the Pacific such as PNG, with high risk of losing the huge gains made.
- Recent increase in Cambodia, deteriorating multi-drug resistance in the Mekong Region
- Major challenges are: Covering all populations at risk for malaria, esp mobile/migrant populations; appropriately dealing with vivax malaria; adequate human resources and funds to accelerate malaria elimination.

Thank you to MPAC Members

- Salim Abdulla
- Elfatih Malik
- Patricia Graves
- Allan Schapira

Welcome to new MPAC Members - 2016

- Ahmed Adeel
- Tom Burkot
- Gabriel Carrasquilla
- Azra Ghani
- Gao Qi