

Steering Committee Meeting
Regional Malaria CSO Platform, GMS
Tuesday evening, 9th July 2019
Beat hotel at W District, Bangkok, Thailand

Outline of meeting:

1. Secretariat updates on activity implementation
2. Country updates with malaria situation
3. Wrap Up

1. Secretariat Update on Activity Implementation (Jan-Jun 2019)

Mr. Shreehari Acharya, Project Manager, reported that the CSO Platform Secretariat implemented the following activities and their progresses during the period of Jan-June 2019 as followed.

- RAI2E Grant Optimization Workshop – This workshop was organized in Feb 2019 to exercise on Year1 funding utilization. This activity is **completed**.
- Focal Point Meeting – This meeting was organized in Cambodia prior to the 13th RSC meeting.
- Advocacy Plan and Strategy – The plan and strategy were published, disseminated, and **completed** in this year.
- Building Community Network – This activity has been implemented in Lao PDR. Next step is to further be implemented in the other 4 countries i.e. Cambodia, Myanmar, Thailand, and Vietnam. The objective of this activity is to create a platform for communities at community level, link them with the national CCM and Steering Committee structure at national level, and engage them in various dialogues to voice their needs and concerns especially towards RAI3 concept note and proposal development.
- Cross Learning Visit – The CSO Platform members conducted visits in Myanmar, Vietnam, and Thailand. With financial support from the ARC as a CSO platform host, *Alistair Shaw* (Thailand focal person), Senior Program Officer, Raks Thai Foundation took local journalist to visit provinces in the northeastern part of Thailand for media coverage. Few articles were published in Thailand, France, India, Philippines, and others.
- Website – The Platform has completed website restructuring work and it is under testing process. Its overall improvement shall be conducted on continuous basis.
- Platform participation at national and regional malaria events – (i) *Dr. Htin Kyaw Thu*, Alternate RAI RSC CSO representative for Regional Malaria CSO Platform, and *Alistair* engaged in Global Fund replenishment preparation discussion in India; (ii) the Platform participated in discussion on the bottlenecks occurred in the Global Fund implementation and provided suggestions. The meeting was organized by APCASO in Bangkok. The Platform also participated in 13th RSC meeting organized in Cambodia in March, and (iii) *Dr. Soulany Chansy*, Alternate RAI RSC CSO representative, spoke at the APLMA senior official's meeting in Bangkok during the Malaria Week 2019 organized in April.

In term of budget utilization, the Platform has spent 52% of total 6-month budget allocation, having USD 122,813 as saving. During July-December 2019, the Platform plans to implement the following activities. Note that many of these activities will lead towards the RAI3 Funding deliberations.

- Community Network Building – This activity shall be implemented in Thailand. Cambodia shall propose the timeframe after discussion with and receiving agreement from key stakeholders at the national consultation meeting. Myanmar has available budget and will discuss this opportunity at the national consultation meeting to seek agreement and identify available dates for the event. For Vietnam, the event will probably take place in Aug/Sep 2019. Exact dates to be confirmed by steering committee members from Vietnam.
- Video production – Video on advocacy will target on Global Fund, RSC and national programs as message recipients. The Platform will outsource to a media production company to produce a comprehensive advocacy content / video with support of country focal persons. The Secretariat is drafting a Terms of Reference (ToR) with all requirements.
- Production of handbooks – The Secretariat plans to produce a guidebook for community volunteers on how to work with 5 common diseases selected from our 5 countries. The Platform could refer to the Myanmar handbook UNOPS produced in previous years.
- Online Platform – The Secretariat requested all participants to provide feedback to the website on necessary improvement.
- Regional CSO Consultation – The next round of the Regional CSO Consultation was agreed to be held during 27 – 28 October 2019 in Yangon, Myanmar. RSC Working Group on Operational Research Oversight will be held on October 30th, 2019. The RAI RSC Meeting is planned to be held in Yangon, Myanmar on 31st October and 1st November 2019.
- External Project Evaluation - During the previous evaluation, RSC supported to hire an external consultant to conduct the review e.g. through desk review, key informant interview, and questionnaire for the implementation period of year 2018 – 2020. Regarding the response to online questionnaire, we were not successful in receiving response from all 70 expected participants. For this round, the Secretariat shall circulate to 100 participants with expectation to hear responses from more people.

Action:

- 5 country focal persons shall coordinate on drafting the Terms of Reference (ToR), listing stakeholders, providing interview questions, and others required for this exercise. This exercise shall be during Q4 2019 – Q1 2020. The draft ToR must be finalized before October 2019 and the evaluation questions must align with platform objectives.
- CSO Capacity Development and Mentorship Training Workshop – Recently 32 applications received. Deadline for application was on July 5th, 2019. The training workshop will be held on 30 July – 2 August 2019 in Bangkok, Thailand. Trainers have been identified. The session will include field visit on the last day with practical exercise for participants to apply their skills learned.
- Action:
 - For the selection process, participants must possess good English skills for communication during the workshop. *Dr. Sai Nay Min Shein*, Technical and Communication Coordinator for the Malaria CSO Platform, will share the selection criteria and the funding support for country reference.
 - The Secretariat requested all country focal persons to finalize their applicant selection (20 seats in total, 4 applicants per country) as soon as possible.

2. Country Updates with Malaria Situation (Jan-Jun 2019)

Thailand

- Thailand has a new Steering Committee Member, Mr. Rawsidee Rertariyasakul from Young Muslim Association of Thailand (YMAT) located in the deep South of Thailand.
- Malaria cases: 10% decreased in Malaria cases comparing to the same time last year. Slight increase in Malaria cases in migrant comparing to Thai going from 25% non-Thai last year to 29% this year. No significant decrease seen as expected in Thailand so far. Therefore, it is necessary for Thailand to work more closely with the government on how to meet the malaria elimination target by 2024.
- Thailand still works on three areas: (i) community resilience, (ii) capacity development for communities and volunteers including health education and net distribution (iii) networking with partners.
- Raks Thai has conducted a geographical mapping to identify communities' locations, needs, demographic data, who travels to high-risk area like forest, number of bed nets required, persons who understand Malaria symptoms and other relevant information. This is to facilitate relevant data analysis for the malaria elimination work.
- Community Network Building in Thailand – During the trip to Ranong, a consultation meeting was organized to identify communities and migrant network look like in that area. We learned that their networks can be classified into provincial level, sub-regional level, and community and volunteer network level for knowledge sharing. Community network prefer not to link with like-minded people in country but also those volunteers in Cambodia (on the other side of the border) in order to better understand the behaviors and movement patterns of Cambodia migrants and those living long-term in Thailand.
- Malaria Week in Thailand – Raks Thai organized media visit at Malaria Day for further sharing with stakeholders and donors. Altogether 20 stories shared through media and newspapers including those in France and the Global Fund Replenishment Conference.
- Consultation Meeting in the Northeastern provinces of Thailand – This is an upcoming meeting to discuss cross-border issues and identify better solutions for managing these cross-border cases. Dates to be confirmed. Government officials, CSO representatives, and other key stakeholders from Thailand, Myanmar and Lao PDR will also be invited to participate.

Myanmar

- Malaria cases: Among 10 high burden townships, the National Malaria Control Programme (NMCP) found 75,159 cases, only 50% of all malaria cases reported positive, and 19 persons died. Chin and Kayin state appeared to have high and increasing malaria prevalence. To successfully eliminate malaria, NMCP aims to promote the malaria elimination activities township approach.
- Key deliverables: For Annual Blood Examination Rate (ABER), significant number of townships have achieved less than 8%. For Annual Parasitic Incidence (API), the country has reached the States/Regions reaching API less than 1 (8 states/Regions). As a result, NMCP aims its malaria elimination / intervention in these townships. Only 74 townships have API more than 1 in 2018.
- In case management, the malaria volunteers have now been renamed to “Integrated Community Malaria Volunteers” or ICMV and approved by the Minister.
- The percentage of LLIN utilization in 2018 was 72.9%, comparing to the population slept under an ITN of 57.7%. This delivery rate was not at satisfactory level.
- Comments:
 - The government facilities cannot reach these targeted areas, and they require CSO intervention. At this moment, the government has put more contribution in the

reimbursement plan aiming to increasingly support the testing and case management in a more effective manner.

- Prioritization of implementation activities and corresponding budget allocation is crucial in the next three years in order to achieve the malaria elimination. Questions: Where should we put our investment in? What do we want to do as priorities during the next 3 years? What the process for us as a platform to prioritize? What could we learn and apply from cross learning to create better impact and decision making?

Cambodia

- Cambodia is conducting a mid-term review for malaria strategic plan which is scheduled for the next 3 weeks. Last week, all key stakeholders including partner organizations, technical experts and others were invited to participate in this mid-term review. This week is planned for their field visit to the high burden areas for malaria elimination provinces, and next week will be for sharing of feedback.
- Malaria cases: Number of malaria cases decreases comparing the first quarter this year and the last year same period.
- Key deliverables (2017):
 - Bed net ownership:
 - ✓ 97.9% of households own a bed net. High ownership of bed nets was seen across and in villages targeted for LLIN distribution.
 - ✓ 58.9% of households in villages targeted for LLIN distribution owned a LLIN. Ownership of LLINs was low with 49.8% of all households owning at least one LLIN. LLIN ownership was highest in transitional ODs and villages targeted for LLIN distribution.
 - Bed net use:
 - ✓ 86.8% of the population slept under a bed net: Over 85% of the population, they were located slept under a bed net the night before. Less than half of the total population slept under a LLIN the previous night.
 - ✓ 40.3% of the population slept under a LLIN the previous night. Lower proportions were sleeping under a LLIN in villages targeted for LLIN distribution
 - Forest goers:
 - ✓ 42.0% of forest goers in targeted villages slept under an ITN the last time they went to the forest. Net use among forest goers was low, regardless of net type. Use of ITNs the last time a forest goer went to the forest was lowest at only 33.8%.
 - ✓ 34.1% of forest goers slept under a hammock net the last time they went to the forest.
 - Malaria knowledge:
 - ✓ 57.5% of population could explain that malaria is prevented through the use of an ITN. 97.7% of the population reported that malaria was transmitted through mosquito bites.
 - ✓ Less than 50% of the population could name at least 3 malaria symptoms.
 - Health seeking behaviour:
 - ✓ 4.2% of the population prefer to visit a VMW as their first option for advice and treatment for a fever. Visits to VMWs for malaria diagnosis and treatment were very low. Treatment was most frequently sought at a referral hospital.
 - ✓ Over 90% of those reporting fever in two weeks before the survey sought treatment, but less than half reported seeking treatment within 24 hours.
- Comments:

- It is crucial to think: How to increase bed net ownership in the next phase? How to achieve an increasing target? How to efficiently reach value of money? Should we invest on surveillance and other activities as well? How much will be the return on our investment?
- RSC discussion will be held to seek agreement on program investment in the next phase. This requires a serious data collection, analysis, forecasting and planning exercise.

Lao PDR

- Key deliverables (national): ABER 90% achieved, net distribution 51%, testing A1 rating, and testing in communities B2 rating. At national level, 16% was tested at communities and 28% was malaria positive. The possibility rate is quite high. Stock out cases also happened in the villages due to distance between locations.
- Testing in communities did not achieve the target. LAO PHA volunteers got trained end June and started working in July 2018. HPA and PDA started working in September 2018 due to delay in MoU signing and, as a consequence, a delay in fund disbursement from Global Fund. Therefore, LAO PHA, HPA, and PEDDA's contribution to community testing appeared at 30%, 40%, and 15% respectively in Year 2018.
- In regard to the 30% tested and delay in implementation, the total number of people tested was 2,537 people, in which 160 malaria cases were detected. The training for VMWs started in rainy season especially HPA and PDA started in September which made it hard to reach the target by December 2018. Recruitment took long time before training started. However, we achieved 90% delivery rate in the first quarter of 2019 on VHV total tested and VHV Total Positive.
- Note that Lao CSOs work under the government's official structure. CSOs in Lao PDR have been in charge of specific coverage identified as targets (150 villages) by the government under the national programme with no duplication in term of geographic area. The other remaining areas will be responsible by the government itself. Training runs by the World Health Organization and the program. Coaching, incentive payment, and recording/reporting are under CSOs' responsibilities. Data from CSOs are integrated at Health Centers. We are using VMWs belong the government structure to provide services, while the management of individual organization lies with each CSO.
- Planning for the next quarter, hotspot areas will be targeted for reprogramming in 11 districts, 22 health facilities, and 238 villages without budget support. How we divide the role of partners in each area?

CSO Platform can provide financial support to surveillance training organized at national level in country. This is demand-driven. Those who are interested can write to the Secretariat for further information. It is recommended that the CSO Platform also be in touch with CHAI and PSI as they have been working on surveillance (i.e. policy, training, and other aspects). Cambodia, Lao PDR, and Thailand preferred advocacy policy discussion/training with CHAI and PSI engagement, with some linkage to surveillance system improvement in countries, WHO guidelines and data utilization. Budget is available and must be spent by December 2019.

It is suggested that each country gets back to *Mr. Shreehari Acharya* on what are available and what needed in country in order to support curriculum development and advocate donor(s).

Suggestions for the next Regional CSO Consultation Meeting in Yangon, Myanmar during 27-28 October 2019:

- Thailand: one separate agenda item collation of data available, collection template, prioritization for data collection, and its utilization

- Cambodia: cross learning on national consultation meeting, advocacy plan and strategy, as well as standardized template for country update

3. Wrap Up

- *Dr. Htin* and the Secretariat team shall work on refining the 5 Regional Statements and share with all member countries for feedback and expected to finalize in September. A final version will be provided to Louise to present at next RAI RSC meeting.
- The process of disease integration must be in place in writing in order to officially guide community volunteers and be included in the National Strategic Plan.

At the Regional CSO Consultation Meeting (27-28th October), CSO platform members shall mainly focus only on ways forward, the development of RAI3 proposal in which we will need a consensus on (i) the areas of program focus e.g. surveillance or data collection and utilization at country level, (ii) final version of 5 regional statements, (iii) the diseases for integration and service package. In term of regional priorities, we will discuss and negotiate in the meeting. At the RSC retreat (Oct 31st), Louise and Frank will present these needs from CSOs to RSC members.

END.