



Accelerating Malaria Elimination by Improving Program Efficiency and Effectiveness

UCSF Institute for Global Health Sciences

How do we accelerate elimination?

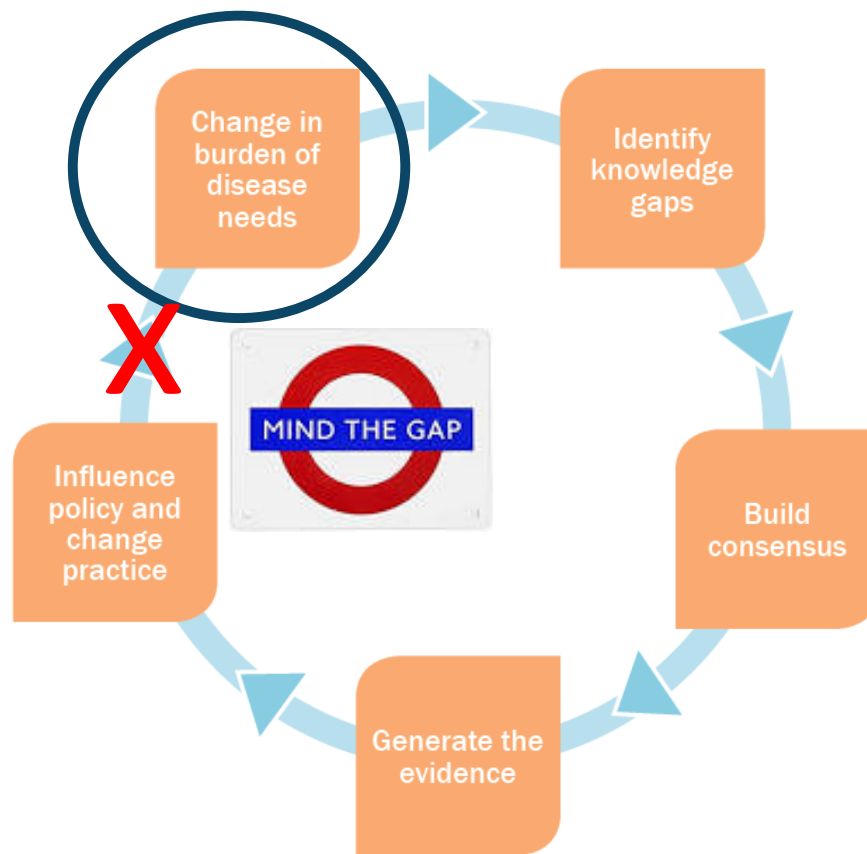
Implementation

Passive

Program Efficiency

Policy

Evidence



Active

Malaria control and elimination

Stages of malaria control-elimination continuum	Key Objectives of the program
Control	Reduce mortality & morbidity to a defined level
Pre-elimination	Reduce mortality & morbidity to a defined level Reduce transmission to a defined level
Elimination	Interrupt transmission and achieve zero local transmission
Post-elimination	Prevent re-introduction of local transmission



Shifting emphasis of key interventions

Key interventions	Control	Pre-elimination	Elimination	Post-elimination
Effective case management	Integrated	Integrated	Integrated & vertical (eg. active case detection)	Integrated & vertical (eg. border malaria screening)
Case investigation		??	Integrated & vertical	Integrated & vertical
Reactive case detection			Integrated & vertical	Integrated & vertical
Foci investigation			Vertical/decentralized	
Outbreak investigation/response	Vertical/decentralized	Vertical/decentralized	Vertical/decentralized	Vertical & centralized
Vector control	Universal ITN and/or? IRS; vector surveillance	Universal ITN and/or IRS; vector surveillance	Targeted IRS; larval source reduction; VS	Targeted IRS; ? Larval source reduction
Chemoprevention	Pregnant women & children	Pregnant women & children	Travelers to endemic areas	Travelers to endemic areas
Behavior change communication	Routine health promotion	Routine health promotion	Focused on malaria elimination	Maintaining malaria awareness
Surveillance	Monthly reports	Monthly reports	Real-time reporting	Real-time reporting
MDA or MSAT		??	?? In hotspots	
Targeted MDA or TSAT			?? In residual foci	??

Allocation of responsibilities and tasks within health system

Level of health system	Responsibilities and activities
Community-based	Education and engagement, assist in active case detection, case investigation and reactive case detection
Primary health centers and hospitals	Case management, assist in case investigation & reactive case detection, real-time surveillance, coordination of all community-level elimination activities; ?Chemoprevention for travelers
District health Team	Real-time surveillance, coordination of case investigation & reactive case detection, outbreak response, coordination of vector control (targeted IRS/ITN), foci investigation, vector surveillance, liaising with private sector; ? Chemoprevention for travelers
Provincial health team	Resource, logistical and technical support to districts, Quality Assurance of elimination activities, M&E
NMCP	Development of elimination strategy, guidelines, operational procedures, technical support
Above NMCP	Ensuring political and financial support, developing multi-country initiatives

Changing emphasis on procedures and practices

Control phase

Macro planning

Fixed resource allocation

Specific job description

Public sector focus



Elimination phase

Micro planning

Flexible resource allocation

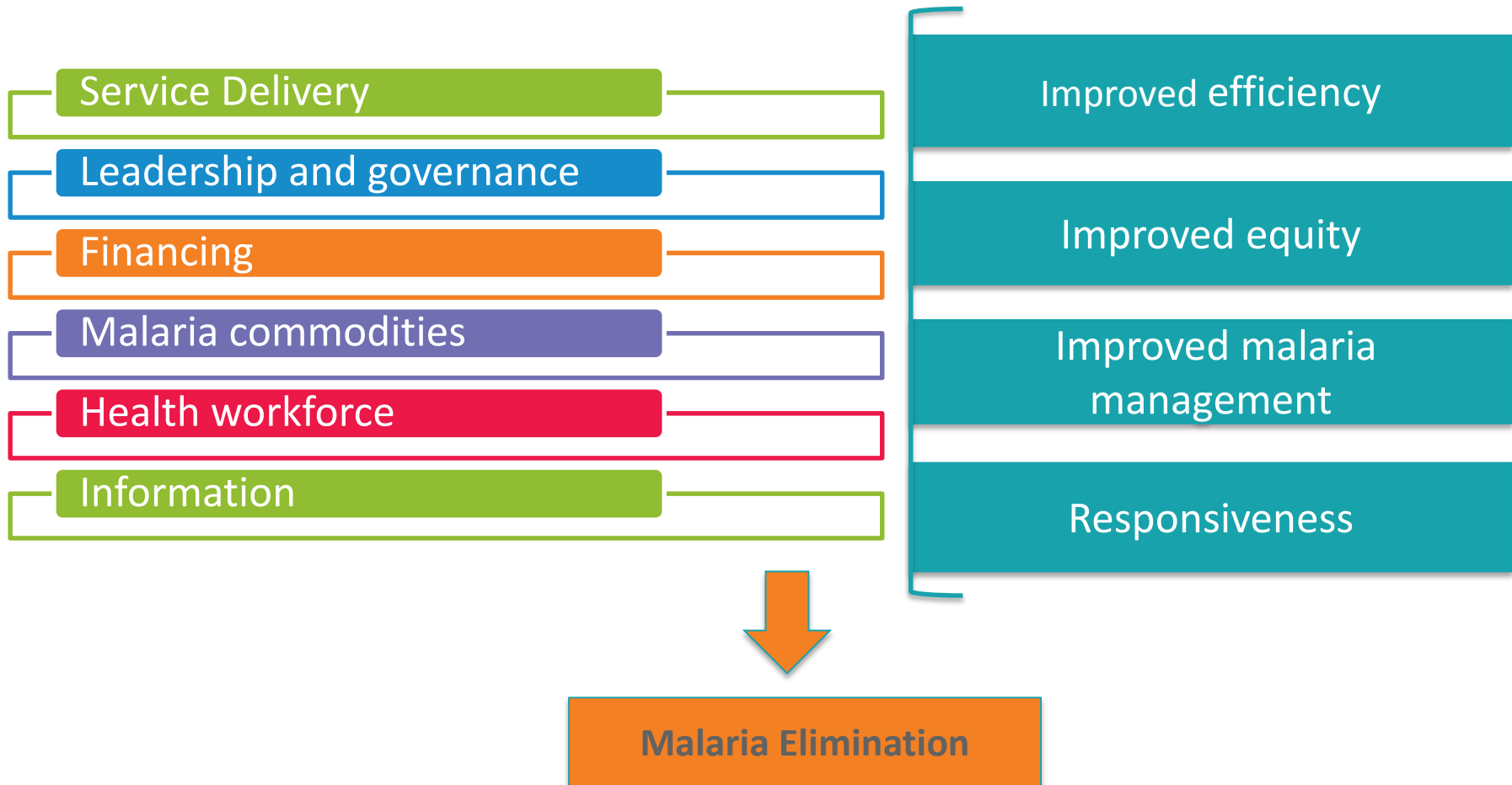
Multi-tasking & task shifting

Engaging private sector

Malaria elimination: programmatic challenges

- Scaling down/stopping IRS and other vector control
- Sustaining real-time surveillance and response teams over long periods
- Identifying vulnerable populations for targeting
- Maintaining skilled personnel
- Managing stocks of RDTs and antimalarials
- Managing expectations and lack of visibility of outputs
- Data management and reporting
- Financial management and budgeting for elimination
- Monitoring progress and evaluation – indicators and validity of data

Health system building blocks





The UCSF Global Health Group's Malaria Elimination Initiative (MEI) accelerates progress towards malaria elimination in countries and regions that are paving the way for global malaria eradication.

www.shrinkingthemalariamap.org