

4th SEA Regional Coordination Mechanism
Forum (SRCMF)
Virtual Meeting Report

28th July 2021

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1. EXECUTIVE SUMMARY

South East Asia Regional Coordination Mechanism Forum (SRCMF) organised its 4th Meeting on 28th July 2021, chaired by Global Fund (GF) Board Member from SEA GF Constituency Dasho Kunzang Wangdi, and was participated by representatives from country CCMs and delegates from Dept. of health/MOH of the nine Member States from SEA region, Independent experts from the region as Resource persons and Partner organisations including RBM, WHO, UNAIDS, APLMA/APMEN, The International Union against TB and other Lung Diseases (the Union), PATH and RTI.

Inaugural Session started with welcome address by Dasho Kunzang Wangdi, Global Fund (GF) Board Member from SEA GF Constituency. This was followed by addresses by Dr. Suriya Wongkongkathap, Chair, CCM Thailand and SRCMF Member, Dr. Sarthak Das, Chief Executive Officer, APLMA/APMEN, Dr. KS Sachdeva, Regional Director, The Union, South East Asia and Dr. Kamini Mendis, Resource Person, SRCMF. The Inaugural Session ended at 11.15 AM IST with vote of thanks by Executive Secretary, SRCMF, Dr. Jigmi Singay.

In the Business Session, Dr Jigmi Singay, Executive Secretary of the SRCMF, appraised the members on the Grant CFP-UNOPS-RBM-2020-002 awarded to SRCMF by UNOPS, starting 5th July to 2021 till 30th June 2022 for total amount of USD 299,987 against the earlier proposed and planned 3 years proposal with RBM partnership. The meeting proceeded with presentation on possible efforts in increasing advocacy, political commitment and coordination with securing 2nd and 3rd year funding and Resource mobilisation. This was followed by country presentations where information was made available about current status of Covid-19 pandemic and its impact on malaria elimination, and the ongoing activities on cross border malaria elimination intervention areas within the National Strategic Plan for malaria elimination, and partners engagements in this effort in South East Asia region.

The participants of the meeting welcomed the project appraisal information and support and thanked RBM/UNOPS for their generous assistance in providing seed funding to strengthening the National Malaria Elimination Programmes and RBM partnerships focusing on Cross-border areas. The meeting deliberated extensively on the cross border malaria elimination and communicable disease control and Primary Health Care and District Health System Strengthening, partnership building and advocacy and coordination role of SRCMF at state, district and the various local levels of health services, on the need to facilitate in supporting universal access, coverage and equity of malaria elimination interventions and essential health services through establishing information exchange mechanism

and cross-border solidarity between countries in the region and to institute robust monitoring and evaluation framework with transparency and accountability will be critical for accelerating the malaria elimination in Cross-border areas to reach the 2025 and 2030 targets for the SEA region.

The Meeting further highlighted the need for strengthening health system in under-served border districts for achieving and sustaining the malaria elimination targets and PHC, UHC and SDG3 health targets by 2030. It was emphasized that donor and partner mapping, coordination and aligning the activities are equally essential for synchronising the activities without duplication and to maximise the impact of malaria elimination program.

This 4th SRCMF virtual meeting held on 28th July 2021 is the first activity under the project CFP-UNOPS-RBM-2021-02

The meeting was formally declared closed at 4.30 PM by the Chair person.

2. INAUGURAL SESSION

The Inaugural of 4th SEA Regional Coordination Mechanism Forum (SRCMF) Virtual Meeting started with welcome address by Dasho Kunzang Wangdi, Board Member of SEA GF Constituency at 10.00 AM on 28th July 2021. He extended warm welcome to all the SRCMF Members, Alternate Members, CCM Chairs, Executive Secretaries, CCM Coordinators and Delegates from the National Malaria Programmes from the member countries of the SEA GF Constituency, independent expert Resource persons, partners and participants. He extended special welcome to Dr. Shobini Rajan CMO (SAG) NACO who has very recently taken up the post of India CCM Focal Point and the Alternate SRCMF Member to the 4th Meeting since the SEA GF Constituency unanimously decided to form the SRCMF to overcome the cross-border challenges in attainment of the SDG Goals by 2030 in the region. He thanked RBM Partnership and UNOPS in particular Dr Melanie Renshaw and her team for mobilizing the fund for SRCMF. Dr Melanie Renshaw who could not be present because of passing away of her mother was offered heartfelt condolences. He then highlighted the objectives and outcomes of the 4th SRCMF meeting to the audiences. While once again offering his warm welcome to all he wished the meeting all success in its deliberations. (For details kindly refer to Annexure -1)

Dr Suriya Wongkongkathep, Chair CCM Thailand congratulated the SRCMF for being granted, first of its kind in SEA, the project: Strengthening of the activities of National Malaria Elimination Programs in the cross-border areas of SEA countries to accelerate malaria elimination. On behalf of SEA countries, he expressed his gratitude to United Nations Office for Project Services (UNOPS) and Roll Back Malaria (RBM) for their remarkable support.

To date, malaria rebounds quickly when essential malaria elimination activities and services cannot be delivered due to COVID-19 pandemic, disruption of district health services particularly concentrated in low-income countries especially in hard-to-reach border areas. As a result, malaria diagnosis has dropped and services disrupted; malaria incidence has stagnated and thus malaria elimination targets are no longer on track. The, children under five in rural areas are the most vulnerable, accounting for 67% of malaria death in 2019.

Having witnessed dramatic decline of estimated malaria burden in SEA, sharing 3% of malaria burden globally as 6.3 million in 2019 that likely reduced 74% from 24.6m in 2000. When most countries in the region have been hardest hit by the devastating COVID-19 pandemic situation, it may revert our gain of investment in malaria, reduce the effectiveness of intervention and increase drug and insecticide resistance and adversely affect the key vulnerable populations and communities that might prolong effort to eliminate malaria. Unarguably, cross-border communities with travellers and migrant population are at high-risk foci of malaria transmission due to ultra-poverty, residing in remote, forest, Hill River valleys and hard to reach areas where health care is inaccessible.

Myanmar-Thailand cross-border malaria elimination in SEA is a successful example where, the activities are currently under financial support of GF Regional Artemisinin resistance Initiative-3 Elimination, a collaborative project since 2015 to eliminate malaria in 5 Mekong countries, namely Cambodia, Lao PDR, Myanmar, Thailand and Vietnam. During second 3-year period of RAI2E project, Thailand has succeeded reduction of malaria to 3940 cases countrywide by 37.6% in 2020 and only 3 deaths found as well as 21.3% reduction in active and residual foci. Most of these foci are prevailing

along 2,401 Km. Myanmar-Thailand border areas. Thailand national malaria elimination strategy mainly emphasized on stratified foci, intervention packages and community engagement. One of key elimination measure is the '1-3-7 strategy' with 24-hour for confirmation of a case, 3 days for case investigation and 7 days for foci investigation and management, mobilizing community-based active case finding and integrated vector control. The positive outcome of 1-3-7 intervention is substantial, thanks to surveillance system strengthening and timely reporting via national malaria information system ('MIS') supported by district malaria workers working house by house to test, treat and track of people and vector breeding sites.

Concerning the vast and diverse nature of SEA countries cross-border areas, SRCMF's project on cross border malaria elimination needs to be considered in more focused areas at sub-national level, particularly with limited resource. Galvanizing political will, mobilizing more resources, strengthening stakeholder partnership and community engagement should be the core strength of SRCMF

Lastly, he added that it is convincing that the commencement of project is a good start for us to bring more concerns, both national and international, and to deliver more productive outcome for malaria elimination in different cross-border areas undertaken by our collective effort and dedication.

Dr Sarthak Das, Chief Executive Officer APLMA/APMEN addressed the inaugural session by highlighting the importance of cross border collaboration in achieving the regional goal of malaria elimination by 2030. Dr Das highlighted the successful cross-border efforts between French Guiana and Brazil, focusing on harmonising and sharing data on cross-border malaria epidemiology through an online monitoring platform. The development of the joint cross-border surveillance system, to make comparable and qualified data available to all the parties involved in malaria control between French Guiana and Brazil, has shown potential to help in informing new scientific evidence on cross-border malaria dynamics and implementing cross-border cooperation for malaria control and elimination.

Dr Das highlighted three important learnings from the French Guiana and Brazil cross-border setting which can be applied to the cross-border context in Asia pacific:

1. Sharing data through innovative platform e.g.: building cross-border malaria information system (CBMIS) is needed
2. Centrality of multidisciplinary partnership including data science, information systems, epidemiology, parasitology, geography, and geomatics, to ensure adoption and translation of cross-border solutions into practice and ensure targeted and coordinated public health responses from both countries in order to achieve malaria elimination.
3. Health Diplomacy and Political Will: Setting up Joint Commission for Cross-Border Cooperation

Lastly, Dr Das reiterated APLMA-APMEN secretariat's commitment to continue working with partners in the region to ensure continued political commitment and fiscal support for cross border malaria elimination efforts.

Dr KS Sachdeva, Regional Director, the Union, South East Asia highlighted that with increasing mobility of people worldwide, communicable diseases can easily cross international borders, moving seamlessly from one population to another. The nature of such diseases and the need for a collective approach has clearly been demonstrated by COVID-19. He stressed that activities and proposal on

communicable diseases should therefore extend beyond borders. He highlighted that malaria is a good area to start work on but we also need to go beyond malaria and also discuss about other diseases and address them through SRCMF platform. On behalf of the Union, he assured full participation and support for collaboration with SRCMF and he requested CCMs to take note for potential cross border country collaboration.

Dr Kamini Mendis, Resource person of SRCMF, acknowledged the significant progress made by SEA Region countries toward malaria elimination before the Covid-19 Pandemic began. She added that Bhutan could not achieve the national goal of malaria elimination by 2020 mostly because of problem of cross border malaria. She highlighted SRCMF and key stakeholders' role in malaria elimination in cross-border areas.

She further added that instead of working in silos partners should work through a common platform and in which SRCMF can play a major role by bringing different partners together in cross border work. She further added that donor and partner mapping and coordination would be equally essential for synchronising the activities and maximise the impact.

She also highlighted the need for advocacy and SRCMF can join hands with APLMA to advocate to high level government officials and policy makers on border malaria elimination. She also stressed the importance of agreed monitoring and evaluation framework with partners on border malaria elimination efforts for accelerating the malaria elimination in Cross-border areas to reach the 2030 targets.

She shared the example of Greater Mekong Sub region that had lot of malaria drug resistant hotspot and how WHO launched drive on malaria which did extremely well in reducing malaria to negligible level because of strong monitoring and evaluation system and data sharing. She added that SRCMF should play a similar role for the border area in the SEA region.

The inaugural session ended at 11.15 AM IST

3. BUSINESS SESSION

The business session commenced at 11.30 AM. The first agenda item in the business was appointment of Office Bearers - Chair, Co-Chair and Rapporteur.

3.1 Appointment of Office Bearers- Chair, Co-Chair and Rapporteur

The Business Session started under the Chairmanship of Dr Jigmi Singay, Executive Secretary cum Coordinator, SRCMF Secretariat who invited nomination for the Chairperson for the 4th SRCMF Meeting, followed by Co-Chair and then the Rapporteur. After due nomination and secondment by the Member States – Dasho Kunzang Wangdi, Board Member of the Global Fund from the SEA GF Constituency was elected as the Chairperson, Dr. Rita Kusriastuti, and Alternate SRCMF Member from Indonesia as the Co-Chair and Prof Dr Prakash Ghimire from Nepal as the Rapporteur of the 4th SRCMF Meeting.

All the elected Office Bearers were requested to take their respective seats and Dr Jigmi Singay formally handed over the Chairmanship to Dasho Kunzang Wangdi.

3.2 Adoption of Agenda

The Chairperson of the meeting thanked the participants for nominating him as the Chair of the 4th SRCMF Meeting and then invited comments on the draft agenda. In absence of any comment, he requested the meeting for adoption of the draft agenda. The provisional agenda was adopted without any changes as the final agenda.

The plenary meeting started after adoption of the Draft Agenda.

3.3 Session on UNOPS-RBM Project Appraisal

The session on Appraisal of UNOPS-RBM-2021-02 was presented by Executive Secretary of the SRCMF Secretariat highlighting the following points:

- The request for the project and the discussion was initiated in 2019 by the SRCMF Secretariat with RBM;
- 1st information was formally received during the 2nd SRCMF Meeting on 5th June 2020 that RBM Partnership will make available an amount of little less than USD 1M (\$ 900,000) for a period of 3 years (\$ 300,000/- per annum) for Strengthening RBM partnerships and National Malaria Elimination activities at the Cross Border areas of SEA Region;
- Secretariat started developing the 3yr Proposal in consultation with RBM;
- Consultant Dr Shampa Nag was recruited to prepare the Proposal.
- 3yr proposal was ready for submission;
- But when CFP was announced it was only for 1 year.
- Accordingly, 1yr project proposal was prepared for a total amount of \$ 299,987 and submitted on 9 April 2021 against the last date of submission being on 14 April 2021;
- SRCMF received the information of being the successful grantee of the Project UNOPS-RBM-2021-02 on 28 June '21;

- Agreement was signed between RBM/UNOPS and SRCMF on 2nd July 2021;
- Project implementation has started from 5th July 2021 for a period of 1yr from 5th July 2021 to 30th June 2022. This 4th SRCMF meeting is the first activity of this project and
- The Budget summary of cross-border Malaria Elimination for 4 quarters with the Cost Input components for 1 year in line with the signed agreement was presented to the meeting.

The meeting noted the appraisal report of the signed agreement of Project UNOPs-RBM-2021-02 and acknowledged the work done by the SRCMF Secretariat is a good start. The meeting suggested SRCMF secretariat to rapidly increase its visibility, advocacy and political mobilization, and expand RBM partnerships for cross- border malaria elimination. The meeting also further suggested that SRCMF secretariat consider preparing a paper on relevance and priority for a TB, COVID-ARI and health system strengthening cross-border and approach Stop TB partnership and WHO for support.

3.4 Session on Proposal for securing the resources for 2nd and 3rd Year

The session on Proposal for securing the resources for the 2nd and 3rd Year, Executive Secretary of the SRCMF Secretariat presentation highlighted the following points

- To continue to bid for the RBM/UNOPS CFP; and continue support for Y2 and Y3 as proposed
- To accelerate the implementation of the planned and approved cross border malaria elimination partnership activities to get lead time for applying for the 2nd and 3rd year bidding without compromising the quality;
- To apply for the SAARC Development Fund (SDF) using the Collateral Funding mechanism:
 - Request RBM/UNOPS approved grant to be reflected as the collateral fund for mobilizing equivalent amount from SDF; and
 - SAARC Member Countries – Bangladesh, Bhutan, Nepal and India who are yet to eliminate Malaria to take the lead in processing for the fund mobilization along with the SRCMF Secretariat;

The meeting approved all three proposals submitted by the Secretariat. The meeting also noted the positive impact SDF will have, while mobilization resources for Malaria Elimination from the other donors from outside the SEA region.

3.5 Session on Resource Mobilisation

The SRCMF Executive Secretary presented the donors/organizations to be explored for the additional resources:

- SDF under Collateral Funding Mechanism:
 - To request RBM/UNOPS to allow SRCMF to reflect their grant for additional resource mobilization;
- To prepare for Global Fund application for regional and or other grants as admissible as a regional/sub-regional body;
- Rotary International/Foundation with or without Collateral. In case of Collateral again to request RBM/UNOPS.
- Explore other malaria elimination, communicable disease control, PHC, UHC, and health system funding sources.

- Member Countries to allocate a fixed amount to the SRCMF secretariat for the cross-border malaria activities from GF allocations.

Discussion Points

The meeting discussed extensively on the presentation of resource mobilization and the following points emerged:

- Application for SDF - already approved;
- On the GF application to prepare and to submit when the opportunity/window opens up in the coming months or years;
- In case of Rotary International/Foundation, Secretariat to continue the exploration and if collateral is required then the donor of the secured funding may be approached for allowing to be reflected as the collateral fund.
- As for the exploration of other sources of funding: BMGF, ADB, WB, EU, USAID, and others could be explored.
- Regarding member countries allocating fixed amount from the Global Fund allocations to SRCMF Secretariat to put up a proper detailed proposal in the next meeting after consulting with the appropriate stakeholders, CCMs, MoH and National Programs.

Recommendations

The meeting while concluding the discussion following recommendations emerged:

- A. The Secretariat to prepare a 2-page policy paper on Cross-Border Malaria Elimination articulating the critical importance of cross-border transmission on national malaria elimination, and the need for political commitment, inter-sectoral coordination and health system strengthening to ensure access to health services and district health system strengthening at various level of health services.
- B. Initiate steps, in consultation with all concerned member countries and partners, to prepare a Regional Global Fund proposal on cross border malaria elimination for funding in the forthcoming round.
- C. Identify, in consultation with traditional and non-traditional partners, innovative ways of resource mobilization such as exploring possibilities of member countries earmarking certain amount of Global Fund resources for Cross-border activities initiated by SRCMF Secretariat, joint funding for malaria elimination by multiple partners etc.

3.6 COUNTRY PRESENTATIONS

The following three country presentation sessions were Chaired by Co-Chair Dr. Rita Kusriastut, Alternate Member, SRCMF from Indonesia.

1. Status of COVID-19 Pandemic, its impact and mitigation on malaria program in cross border area by Member States- Indonesia and Thailand

Indonesia and Thailand made country presentation on status of COVID-19 Pandemic, its impact on malaria program in cross border area and mitigation measures instituted. Thailand is facing the 4th wave of COVID-19 pandemic with all provinces reporting the increasing number of new infected cases and deaths. National Malaria Elimination Strategy 2017-2026 Goal is to free Thailand from malaria by 2024 however disruptions were observed in malaria diagnosis, treatment and surveillance services due to shifting of vector-borne disease staff to work on COVID-19 response, including surveillance, contact tracing and more recently COVID-19 vaccination campaigns. In 2020, several malaria-free provinces in plain areas reported resurgence of indigenous cases. Thailand also shared recommendations for mitigating negative impact of COVID-19. (For details kindly refer to annexure-3)

2. Prevention of reintroduction/resurgence of Malaria and its Mitigation by Member States- Maldives and Sri Lanka

Maldives was declared Malaria free by WHO in 2015 and Sri Lanka in 2016. Both the countries shared lessons learnt, best practices and challenges from their ongoing malaria prevention activities and updates in strategic planning. (For details kindly refer to annexure-3)

3. Presentation on Cross border issues on malaria elimination was Chaired by Co-Chair by Dr. Rita Kusriastut, Alternate Member, SRCMF from Indonesia and moderated by Dr. Kamini Mendis, Resource person, SRCMF.

Presentations was made by Member states India, Bangladesh, Bhutan, Nepal and Timor-Leste (For details kindly refer to annexure-3)

Discussion Points

The meeting highlighted the following points/issues during the discussions

1. Focus on ownership and support by country MOH (Minister/Secretary and National Program) to have focus/emphasis on cross border district malaria elimination. Funding would depend on result in cross border collaboration ownership.
2. Amend/relook into SRCMF manual and include members from MoH from countries in the region to get ownership of the forum and get commitment from national government of member countries easily and ownership of Government for this SEA RCMF
3. Real time dashboard/mechanism/platform for malaria data sharing process from districts and starts from both side of the international border

4. Use of Modern technology like dashboard, WhatsApp groups, websites etc. can help information and data sharing, capacity building and telemarketing at cross-border areas
5. Mapping of partners/key players, and their activities in malaria elimination on Cross border issues
6. Cross border malaria elimination efforts need advocacy, political mobilization, coordination mechanism to bring everyone together and define roles and responsibilities. One could start with Bhutan and India border in Assam. SRCMF can play Catalyst Role in high level agreement on data sharing. Also Integration of cross border indicators need to be captured into M&E system at district level for real time data sharing and monitoring the progress.
7. Coherent approach applicable in both sides of the international border would be essential for prevention and treatment services/Regimens and follow-up
8. Political commitment at high level and National level coordination followed by local/ground level coordination, monitoring and stewardship at district level is critical at cross border malaria elimination and its success. For this National, state and district level to become accountable.
9. All the partners and donors, APLMA, GF, Rotary, WHO and SRCMF looking for same goals and target however all agencies are working in silos, as 80-90% residual malaria elimination problems are in underserved border areas they need to meet regularly and join hands of cooperation and solidarity towards achieving malaria elimination goals by addressing Cross border malaria elimination and health system strengthening issues
10. As a part of advocacy, mainstreaming cross-border into national program plans and activities, monitoring, evaluation and accountability. For example, monitoring missions can look at cross-border problem as well. This is important because monitoring missions are often used as a forum for advocacy for high level advocacy

Recommendations

The Session on Cross-border issues on malaria elimination by Member States put forward following recommendations:

1. The SRCMF should conduct situation analysis, including risk mapping of border malaria in the South-East Asia Region.
2. The SRCMF should map partner landscape especially their roles, responsibilities and ongoing activities towards harmonizing efforts and ensuring efficient and effective resource utilization.
3. The SRCMF should support member countries regarding advocacy to high-level government officials, policy makers on border malaria elimination.
4. The SRCMF should play a key role in partner advocacy, mobilization and coordination with the WHO, APLMA-APMEN, and relevant others.
5. Based on agreed framework with partners, the SRCMF should take a lead role in coordination for monitoring and evaluation of border malaria elimination efforts.
6. The SRCMF should play a catalytic role in prioritising coordination between South-East Asia member countries, for malaria information sharing on monthly/weekly basis in order to plan and trigger appropriate interventions especially at local (district) level.
7. The SRCMF should coordinate development of regional/multi-country proposals for TB, HIV and health systems strengthening in border areas of the member countries and relevant partner agencies for resource mobilisation through the Global Fund.
8. The member countries should decide the type of malaria data to be shared. Information sharing mechanism may be initiated with India-Bhutan at first and then progressively expanded to facilitate such mechanism between other countries drawing from lessons learned.
9. The member countries designate focal points at national, state and district levels for joint planning and actions on the cross-border program activities.
10. The member countries should address border malaria with domestic resources as well as external support by the Global Fund and technical support to strengthen and maximize malaria service delivery along international border areas.

4. CLOSING SESSION

All the comments and recommendation were duly noted and addressed in the draft report by the secretariat, upon receiving the edits from participants. The meeting expressed deepest condolences and remembered Dr Gagan Singh Sonal for his contribution to malaria control program in India.

The Executive Secretary briefly addressed the closing session. He thanked all the participants for their active participation with valuable contributions. He also thanked Chair for his leadership in conducting the meeting and bringing to a successful conclusion. Executive Secretary assured the meeting that report would be circulated first in the draft form where all the participants will be requested to comments then followed by final draft report. The Executive Secretary thanked the resource persons and partners and the inaugural session speakers for their kind participation, valuable guidance and suggestions.

The Chair addressed the closing session by thanking each one for their active participation, very productive deliberations and making a very successful meeting. The Chair formally closed the meeting at 4.30PM IST.

Welcome Address

by Dasho Kunzang Wangdi, SEA GF Board Member
at the virtual Inaugural Session of the 4th SRCMF Meeting

1. A very good Morning, afternoon and good evening to all.
2. SRCMF is an initiative of the SEA Constituency established to contribute to GF Mandate and meeting SDG Goals to eliminate HTM by 2030 through addressing the cross-border issues and challenges. I am happy to see that so far as of today we are able to meet for the fourth time since the region had unanimously agreed to establish it.
3. I am thus excited to welcome all the SRCMF Members, Alternate Members, CCM Chairs, Executive Secretaries, CCM Coordinators and Delegate Members from the National Malaria elimination Programmes from the member countries of the SEA GF Constituency to this virtual Inaugural Session of the 4th SRCMF Meeting.
4. It is a great honour for me to extend my cordial Welcome to our eminent Speakers who have so kindly consented to address the Inaugural Session in spite of their very busy schedule. And I thank them profusely for their kind acceptance.
5. We have today: Dr Neeraj Dhingra, Director, NVBDCP and SRCM Member from India, Dr Suriya Wongkongkathep, Chair CCM Thailand SRCMF Member, Dr Sarthak Das, Chief Executive Officer, APLMA, Dr K.S. Sachdeva, Regional Director, The Union, South East Asia, Co-Chair, Country and Regional Support Partnership Committee and Chief Technical Advisor, RBM Partnership to End malaria, and Dr Kamini Mendis, Resource person, SRCMF to share their invaluable knowledge.
6. I am especially happy to extend our warm welcome to Dr. Shobini Rajan CMO (SAG) NACO and DDG from the MOHFW the new India CCM Focal Point as the Alternate SRCMF Member to the 4th SRCMF Meeting.
7. I am happy to acknowledge the presence of Dr K. S. Sachdeva who worked until recently, as the India CCM Focal Point and also the Alternate Board Member of the Global Fund from SEA Constituency. As I offer our congratulations to him for taking up the post of Regional Director of the Union and we welcome him as the new partner of SRCMF.
8. Today I seize this moment, to request India CCM, to resolve the issue of the substitute ABM soon as India is due to take over the Board Membership of SEA Constituency on the Global Fund Board by early 2022.

9. I would also extend our warm Welcome to our representatives from Donors, Partners, Collaborators and Delegates from the Ministries and Depts. of Health.

Ladies and gentlemen,

10. The Fourth SRCMF Meeting is being convened today with four objectives:

- i. To appraise on 1 year funding available to SRCMF against 3 year planned. Need to secure 2nd and 3rd year funding;
- ii. To familiarize about National malaria elimination activities in the cross-border areas and the status of ongoing M&E framework for cross border activities;
- iii. To know the impact of Covid-19 pandemic on malaria elimination program and ongoing mitigation program to respond to challenges; and
- iv. To know about partners who are operating in the malaria elimination activities in cross border areas.

11. I hope at the end of the meeting we would have:

- a. Sensitized all the SRCMF members and alternate members with the approved 1-year funding project and proposals for securing 2nd and 3rd year funding; and
- b. Informed all on current status of ongoing activities on cross border areas within the National Strategic Plan for malaria elimination, impact of COVID-19 Pandemic and partners engaged.

12. I must tell you that we could not have been possible for us to reach this far, had it not been for the unstinted support and motivation of one person - Dr Melanie Renshaw of RBM Partnership and UNOPS. Most of us here know very well that she has been of great support to the SRCMF for mobilizing fund for the Office establishment and for operationalizing the SRCMF over the last 3 years.

13. We are sad to learn that as much as we have wished for her presence and to share her first-person views, she could not be here today. She had lost her beloved mother a day before and she is in mourning. Let us pray for the soul of the dear departed to rest in peace and offer Dr. Melanie our sincere condolences.

14. I would therefore on behalf of SEA Constituency, SRCMF and on my own give a big “thank you” to Dr. Melanie and her Organization for the unwavering support since inception of this organization and we look forward to your continued commitments and partnerships.

15. Finally, as I once again welcome each and every one, I look forward to wish for a fulfilling meeting, that will help SRCMF become an organization of pride for SEA Constituency, and Global Fund capable to rise to the occasion in addressing cross-border issues of HTM in the GF SEA Constituency.

Kadrinche, danyabad and thank you

ANNEXURE- 2

Agenda

SEA Regional Coordination Mechanism Forum (SRCMF)
Virtual Meeting, July 28, 2021

Time	Issues	Responsible person(s)
9.45-10.00	Virtual Registration	SRCMF Secretariat
<u>Inaugural Session</u>		
10.00-10.10	<ul style="list-style-type: none"> Welcome address, Objective and Expected Outcome of Meeting by Global Fund Board Member 	Dasho Kunzang Wangdi
10.10-10.20	<ul style="list-style-type: none"> Address by Director, NVBDCP and SRCMF Member, India 	Dr. Neeraj Dhingra
10.20-10.30	<ul style="list-style-type: none"> Address by Chair, CCM Thailand and SRCMF Member 	Dr. Suriya Wongkongkathep
10.30-10.40	<ul style="list-style-type: none"> Address by Chief Executive Officer, APLMA 	Dr. Sarthak Das
10.40-10.50	<ul style="list-style-type: none"> Address by Regional Director, The Union, South East Asia 	Dr. K S Sachdeva
10.50-11.00	<ul style="list-style-type: none"> Address by Resource Person, SRCMF 	Dr. Kamini Mendis
11.00-11.15	<ul style="list-style-type: none"> Vote of Thanks by Executive Secretary cum Coordinator, SRCMF, Secretariat 	Dr. Jigmi Singay
<u>Business Session</u>		
11.30 – 11.35	<ul style="list-style-type: none"> Appointment of Office Bearers- Chair, Co-Chair and Rapporteur 	Dr. Jigmi Singay
11.35 - 11.50	<ul style="list-style-type: none"> Adoption of Agenda UNOPS-RBM Project Appraisal <ul style="list-style-type: none"> 3 Year Plan 1 Year Plan CFP Comments and Discussions 	Chair: Dasho Kunzang Wangdi, Board Member, GF SEA Constituency Dr. Jigmi Singay
11.50 -12.00	<ul style="list-style-type: none"> Proposal for Securing 2nd and 3rd Year Funding <ul style="list-style-type: none"> Collateral SDF Project Proposal Acceleration Plan for 1st year activities implementation Comments and Discussion 	Chair: Dasho Kunzang Wangdi, Board Member, GF SEA Constituency Dr. Jigmi Singay
12.00– 12.10	<ul style="list-style-type: none"> Resource Mobilization <ul style="list-style-type: none"> SDF 	Chair: Dasho Kunzang Wangdi, Board

	<ul style="list-style-type: none"> ○ GF ● Comments and Discussions 	<p>Member, GF SEA Constituency</p> <p>Dr. Jigmi Singay</p>
12.10– 12.50	<ul style="list-style-type: none"> ● Country Presentation: <ul style="list-style-type: none"> ○ Status of COVID-19 Pandemic, its impact and mitigation on malaria program in cross border area by Member States- Indonesia and Thailand ○ Prevention of reintroduction/resurgence of Malaria and its Mitigation by Member States- Maldives and Sri Lanka ● Comments and Discussions 	<p>Chair: Dr. Rita Kusriastut, Alternate Member, SRCMF Indonesia Member States</p>
12.50 – 2.00	<u>LUNCH</u>	
2.00 – 2.50	<ul style="list-style-type: none"> ● Country Presentation: <ul style="list-style-type: none"> ○ Cross border issues on malaria elimination address adequately/inadequately/ does not address by the National Strategic Plan (NSP) by Member States Bangladesh, Bhutan, India, Nepal and Timor-Leste ○ Comments and Discussions 	<p>Chair: Dr. RitaKusriastut, Alternate Member, SRCMF Indonesia</p> <p>Moderator: Dr. Kamini Mendis, Resource person SRCMF</p>
2.50 – 2.55	<ul style="list-style-type: none"> ● AOB 	
2.55– 3.30	<ul style="list-style-type: none"> ● Preparation of Report by Rapporteur 	Rapporteur
3.30 – 4.00	<p><u>Closing Session</u></p> <ul style="list-style-type: none"> ● Presentation of Report by Rapporteur ● Discussion & Adoption of the Report ● Comments of the Participants ● Closing Remarks by Executive Secretary, SRCMF ● Formal Closing of the Meeting by Chair 	<p>Chair: Dasho Kunzang Wangdi, Board Member, GF SEA Constituency</p>

ANNEXURE-3

List of participants
4th Regional Coordinating Mechanism Forum (SRCMF) Virtual meeting

SL	Name	Designation	Organization	Country	Email Address
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ANNEXURE- 4

SUMMARY OF THE COUNTRY PRESENTATIONS

COUNTRY PRESENTATION: STATUS OF COVID-19 PANDEMIC, ITS IMPACT AND MITIGATION ON MALARIA PROGRAM IN CROSS BORDER AREA BY MEMBER STATES- INDONESIA AND THAILAND**Indonesia**

Challenges in 2021:

1. Responding to Covid-19 Pandemic “second wave”
2. Maintaining ATM targets
3. Coordinating both efforts above to achieve synergy

CCM Response to the three challenges above:

1. Proposed separate Grant for Covid-19 Response Mechanism (C19RM)
For challenge 1 (a) focusing on PPEs and Oxygen Therapy; “Fast Track Funding” proposal; USD 15,3 millions, already approved
For Challenge 2 and 3 (b) focusing on “catch-up”/ “recovery” plan to maintain ATM targets AND “coordination between Covid and ATM Grants by combining “resources” (Staff, Lab Equipments) and “field activities” (TB Contact Investigation, Malaria Rapid Response, and Covid-19 Tracing). “Full Funding” proposal; USD 28 million, being finalized
2. Gradually adjust to “virtual” mode of operation

Thailand

Thailand is now facing the 4th wave of COVID-19 pandemic in which all provinces are reporting the increasing number of new infected cases and deaths. Total cumulative reported cases, as of 27th July 2021 were 526,828 with 4,264 deaths. The situation in 2021 is much worse than that in 2020. The heavily affected areas are urban areas, especially Bangkok Metropolitan the suburban areas. Also, malaria affected areas in some border provinces, especially Thailand-Myanmar, Thailand-Cambodia, and Thailand-Malaysia borders are affected by COVID-19 epidemic from cross-border migration.

Under the National Malaria Elimination Strategy 2017-2026 Goal is to free Thailand from malaria by 2024. However, Thailand observed disruption of malaria services due to shifting of vector-borne disease staff who work at all levels (VBUD-district, VBDC-province, ODPC-region and the central office – DVBD) to work on COVID-19 response, including surveillance, contact tracing and more recently COVID-19 vaccination campaigns.

- In addition, the situation was further complicated by the impact of the political unrest in Myanmar (February 2021 till now). The number of displaced persons residing in 9 refugee camps along the Thai-Myanmar border under the responsibility of IRC is not increased. Some illegal mobile migrant population from Myanmar seem to increase despite tight border closure.
- There is no substantial increase in malaria incidence, but surveillance is heavily affected, especially active case detection and post treatment follow-up. Distribution of LLINs in 2021 is delayed due to inadequate VBDC staff. In 2020, several malaria-free provinces in plain areas reported resurgence of indigenous cases due to relaxation of surveillance due to shifting of local staff to work on COVID-19 response, ecology change and movement of migrant workers to rubber plantations.

General idea for mitigating negative impact of COVID-19:

- To mobilize malaria post workers to shoulder the work of VBUD staff. In areas where there is no NGO for malaria, to use NGOs from HIV/TB programme to assist in net distribution in areas where no NGO malaria.

- To ask USAID/PMI to expedite procurement and shipment of nets, diagnostic and treatment commodities to allow adequate lead time.
- To improve implementation of 1-3-7 strategy which is response to malaria case and foci, VBDC staff from other areas to provide the necessary support.
- To improve/restore surveillance in malaria-free provinces to prevent reintroduction of transmission.

COUNTRY PRESENTATION: PREVENTION OF REINTRODUCTION/RESURGENCE OF MALARIA AND ITS MITIGATION BY MEMBER STATES-

Maldives

Malaria was Malaria free by WHO in 2015

- No indigenous cases since 1984
- Anopheles vectors reported: An. tesselatus and An. subpictus (Vectors is reported to be eliminate since 1991)
- Imported Malaria Cases
 - 2020: No cases reported yet
 - 2019: 1 Case-Pf-PAN- Indian
 - 2018: 1 Case- Pv- Indian

Best Practices

- Diseases surveillance is continued, Malaria is integrated into general communicable disease surveillance.
- Initial vector control needs assessment (VCNA) completed
- Vector control efforts by CHWs and public health officers despite challenges with overwhelming COVID response efforts
- City Councils active on Mosquito control measures
- Nationwide vector control campaign has been initiated in collaboration with the President Office
- Digitized awareness nationally through different media platforms
- NGO, Volunteer participation

Challenges

- Vector Control and NTD Staff engaged in Covid19 response
- Limited human resource and capacity
- Priority work-shift: delays in implementation of planned activities
- Inspection and elimination of mosquito breeding sites with COVID restrictions
- Improper use of chemicals- Unavailability of skilled vector control staffs
- Difficulty/delays from central supply to atoll/islands due to lack of transportation
- Migrant workers in crowded living arrangements

Guidance and Support

- Pooled assistance in procurement of antimalarial and RDTs
- Monitoring and evaluation tools to stay Malaria free and maintain public health elimination status
- Addressing gaps and implementation based on VCNA
- HR and Capacity building on public health entomology

Sri Lanka

Malaria eliminated in 2012 and certified by WHO in 2016

Year 2021 up to now, imported cases 10 and zero deaths

Lessons learn and best practices in 2020

- Freely available online platform such as social media, google meet etc. were used for strengthening, teaching, training, reviews, advocacy and surveillance of malaria control activities to link the technical teams of headquarters and region
- Adopted to new normal conditions to carry out routine malaria control services in PoR phase during the covid 19 pandemic
- The synergies between covid19 and malaria were explored and quarantine centres were used as an opportunity for screening for malaria among the returnees from malaria endemic countries
- Strengthened the coordination between authorities and staff who work on malaria and Covid-19 (Emigration Department, Armed Forces etc)

Recent revisions/updates in strategic planning/targets/milestones/national guidelines

- A guideline for vector control methods in PoR phase was developed
- A malaria outbreak simulation exercise was conducted
- Online procurement system (WAMBO) initiated using government funds
- Mid Term Review (MTR) of national strategic plan (NSP) 2018-2022 supported by WHO is in progress
- Revised the antimalarial drugs distribution plan to ensure accessibility with cost reduction
- Analysed 3 years of data on case detection to assess effectiveness of different methods, as evidence for policy and strategy updates

The Global Fund (GF) provided technical as well as financial assistance to Sri Lanka during the pre-elimination and elimination phase. The GF to play an indispensable role in preventing re-introduction (PoR) and re-establishment of Malaria as well.

COUNTRY PRESENTATION: CROSS BORDER ISSUES ON MALARIA ELIMINATION ADDRESS ADEQUATELY/INADEQUATELY/ DOES NOT ADDRESS BY THE NATIONAL STRATEGIC PLAN (NSP) BY MEMBER STATES

Bangladesh

Recommendations:

- Leverage on the Ministerial declaration to develop cross border collaboration action plans for implementation
- Surveillance and harmonized activities/action plan in bordering areas
- Map cross border crossing points – develop SOPs for integrated border health posts at PoE to provide malaria services
- Establish information sharing platforms and mechanism for cross notification and information sharing on malaria from both sides
- Promote establishment of district level cross border collaboration – designate focal point for cross border coordination at the local level
- Strengthen coordination with Army, Border Guard, other security agencies
- Engage community bodies to improve reach and coverage of malaria services across the international border
- Advocacy and consultative meetings with key stakeholders
- Advocate for the establishment of Regional Coordination Mechanism

Bhutan

Recommendations:

- SRCMF should strengthen coordination/collaboration at the local and cross border district level and develop the capacities and involve local administration on cross border malaria elimination through regular meetings
- Joint strategic risk assessment to inform scope of cross border collaboration and develop joint operational action Plan
- Convergence and synchronization of sustainable Joint collaborative activities at the local and district level
- Identification of National and State/district Focal point for cross border & periodic information sharing and exchange programme

India

Recommendations:

- Initiate cross-border collaboration
- Consolidated efforts to achieve elimination in border area
- Quality surveillance, monitoring, supervision and evaluation
- Early diagnosis and timely treatment
- Integrated vector management: IRS, LLIN
- Supportive interventions: IEC, BCC
- Hr: Recruitment, retention, capacity building
- Involvement of district sub- district officials
- Ownership of states with international borders

Nepal

Recommendations:

Activities to initiate joint and collaborative malaria elimination approach between Nepal and India

- Synchronize activities between the border areas e.g. IRS, data sharing, treatment regimen, drug resistance, insecticides resistance
- Provide free malaria services for nationals of both the country - ITNs distribution and test/treat
- Test, Treat and Track malaria using innovative approach, smart surveillance, and joint cross-border collaboration
- To accelerate community sensitization and increase the awareness among seasonal migrants and residents of border municipalities to sleep under the ITNs and improve health care seeking behaviour
- Research to characterize social determinants of migrant workers

Timor- Leste

Recommendations:

- To establish coordination mechanism and service pathway for cross border malaria elimination;
- To monitor and evaluate the existing joint activities for cross border malaria elimination;
- To revise the existing 2019-2020 Joint Action Plan for 2021-2022
- To establish a mechanism for regular exchange of information between Timor-Leste and Nusa Tenggara Timor (Indonesia).
- Screening of malaria travellers in Point of Entry in Timor-Leste
- To establish task force for Timor-Leste and Indonesia (West Timor) (if can) in order ensure the implementation of the action plan.
- Strengthening coordination between foreign affair of Indonesia and Timor-Leste for intervention in the dispute area.
- Funds for cross border activities for both countries Extension of the MoU 2021-2022