India-Nepal Program Director Level Bilateral Virtual Meeting for Cross-border Malaria Elimination- Meeting Report

23rd November 2021

TABLE OF CONTENTS

EXECUTIVE SUMMARY2
Opening Remarks3
Appointment of Chair3
BUSINESS SESSION
1. Current and ongoing Cross-border activities and areas for strengthening
presented by Directors from both sides3
Discussions6
Recommendations7
CLOSING SESSION7
Annexures
Annexure 1: Presentation by Nepal9
Annexure 2: Presentation by India12
Annexure 3: Agenda14
Annexure 4: List of participants15

EXECUTIVE SUMMARY

India-Nepal National Malaria Program Director level bilateral virtual meeting for Cross-border Malaria elimination organized by South East Asia Regional Coordination Mechanism Forum (SRCMF) was held on 23 November 2021, through zoom platform. The meeting was chaired by Dr. Tanu Jain, Director of NCVBDC & leader of the 7-member Indian delegation and CCM India Coordinator and co-chaired by Dr Krishna Prasad Paudel, Director, Epidemiology & Disease Control Division (EDCD), Ministry of Health and Population, Govt of Nepal and Team Leader of the 11 member Nepalese delegation.

Dr. Jigmi Singay, Executive secretary, SRCMF Secretariat welcomed the delegates and requested for self-introduction by the delegates. This was followed by opening remarks by Dr Tanu Jain, Delegation leader from India and Dr Krishna Prasad Paudel, the delegation leader from Nepal Both the delegation lead thanked SRCMF and its secretariat in bringing malaria program leads from India and Nepal together for continuing/extending bilateral collaboration & cooperation and contributing towards elimination of malaria from the region.

Both Nepal and India delegation presented, discussed and outlined the key challenges for Malaria elimination in both the countries and specially in the districts along the border. Both the delegates proposed to have a face-to-face meeting in the 1st week of January 2022 (date to be proposed by SRCMF after consulting both the countries) to comprehensively analyse the available information at field level, identify pilot districts, focal persons and activities for synchronizing the interventions contributing towards malaria elimination in the region and particularly in cross border areas/districts. SRCMF agreed to support and facilitate in organizing such a face-to-face meeting once both the country programs agree on a date no later than the first week of January 2022 and confirm the venue.

Opening Remarks

The opening session started with welcome address by Dr Jigmi Singay, Executive Secretary cum Coordinator, SRCMF Secretariat, followed by self-introduction by the delegates from both the countries. He extended warm welcome to the distinguished and eminent Delegates - from India lead by Dr Tanu Jain, Director, National Center for Vector Borne Diseases Control (NCVBDC), MOHFW, Govt. of India and Nepal delegation leader Dr Krishna Prasad Paudel, Epidemiology & Disease Control Division (EDCD), Ministry of Health and Population, Govt of Nepal and India CCM Coordinator and SRCMF Secretariat Staff and all other participants, who attended this Bilateral Meeting in spite of their busy schedule. He briefly highlighted the objectives and outcomes of the Indo-Nepal Program Director level bilateral meeting for cross-border malaria elimination to the audience.

Appointment of Chair

The Session started with Executive Secretary, SRCMF Secretariat proposing to the meeting Dr Tanu Jain, Director, NCVBDC, for the Chairperson and Dr Krishna Prasad Paudel Team Leader and Director EDCD, as Co-Chair for the Indo-Nepal Program Directors bilateral meeting. In the absence of any comment the proposal was seconded by Nepal team leader. Dr Tanu Jain was appointed as the Chair and Dr Krishna Prasad Paudel as Co-Chair. Dr Jigmi Singay formally invited and handed over the Chairmanship to Dr. Tanu Jain.

BUSINESS SESSION

As per the agenda the Chairperson started the business session by inviting comments on the draft agenda. In absence of any comments the draft agenda was adopted.

1. PRESENTAIONS BY BOTH THE DELEGATION ON THE CURRENT ONGOING ACTIVITIES IN THE CROSS-BORDER AREA

Introductory Comments

Dr Tanu Jain welcomed distinguished delegation from Nepal, all other participants of the meeting and invited Dr. Krishna Prasad Paudel to start the presentation. Dr Krishna Prasad Paudel thanked the Chair and congratulated her for the Chairmanship and promotion to Director NCVBDC.

Presentation by Nepal

Dr Krishna mentioned that Nepal is embarking towards malaria elimination with a target of achieving elimination by 2025. He mentioned that 26 districts (~1800 km) of Nepal boarders with 5 states of

India (Sikkim, West Bengal, Bihar, Uttar Pradesh and Uttaranchal). Micro stratification of malaria risk in Nepal have clearly showed presence of imported malaria burden much higher than indigenous malaria cases, based on current classification. This is mainly due to mobile migrant workers in Nepal going to different states of India and vice versa, as we both share open borders to people of each other countries, as we share many similarities and cultural relations. He further added that Nepal-India signed MoU for Cross-Border collaboration for control of communicable diseases, however have not been effective due to non-identification on the role, responsibilities and channels of the organizations in both the countries for improving effectiveness. He appraised on institution of Screening for COVID-19 and malaria at 16 land crossings and Provision of the BCC/IEC materials at the POE's. He mentioned following challenges, requiring bilateral collaboration:

- a) Infrequent collaborative meetings at the country levels to discuss cross border issues.
- b) Limited data sharing among health authority at the local level across Cross border.
- c) Lack of clear guidance and mechanism for implementing cross border collaboration.

He proposed following next steps for cross-border collaboration:

- a) Universal access to health and prevention services in areas across the border.
- b) Effective and coordinated cross-border surveillance and response mechanism.
- c) Joint planning and implementation in areas across the border.
- d) Strengthen cross-border collaboration mechanism (formal and informal) that provides the enabling environment for sharing information required for malaria elimination.

The detailed presentation of Nepal is attached as Annex 1

Dr Krishna Prasad Paudel then requested chair to welcome questions if any and was willing to take question now or latter. Chair thanked Dr Krishna Prasad Paudel for a very elaborate and comprehensive presentation and highlighting the challenges that are currently faced in Cross-border area. While she appreciating the challenges mentioned, she emphasised equal or more important is to discuss and find solutions to these challenges and hoped that this will be discussed latter in the meeting. Chair then invited Dr Vinod Chaudhary for India's presentation.

Presentation by India

Dr Vinod Chaudhary, representing Indian delegation apprised that India has set targets for malariafree status by 2030 and divided risk areas into 3 categories, Category 1, Category 2 and Category 3, with elimination targets of 2020, 2022 and 2027. Out of the five states of India bordering with Nepal, Uttarakhand and Sikkim falls in category 1 and UP, Bihar and West Bengal in Category 2.

He mentioned that the Annual Parasite Index (API) data for 17 Indian districts in 5 states sharing Indo-Nepal border and appraised that Pilibhit district in Uttara Pradesh was identified as a critical area of concern with major outbreak in the past. Also UP, Bihar and West Bengal were underlined as big states with large mobile population/migrant movement that could lead to exposure to infection across border. Metro areas like Mumbai and Delhi report large migrant population movement through with increased risk for infection transmission and can complicate measures for malaria control. Lack of policy on migrant population was cited as one of the reasons for little focus on this population group. Considering the movement of people across border was recognised for fever screening at cross border entry point on both sides of the international border. He requested Nepal delegation to share information on treatment regimens for synchronised implementation on both the sides of the border. He pointed out that that there is a different treatment regimen for P. Falciparum for North East India (AL+PQ) compared to rest of the India (AS+SP+PQ; AL+PQ.) and for P. vivax regimen followed is CQ+P.

Following challenges were cited in achieving malaria elimination:

- a) Decreased priority for malaria in low burden states/UTs compared to other diseases
- b) Limited capacity of states/districts in documentation for malaria certification/validation of zero indigenous malaria cases
- c) Despite all initiatives, malaria surveillance decreased by 30-40% in 2019 due to Covid-19
- d) Limited entomological surveillance capacity in state /districts
- e) Limited involvement of private sectors reporting

The detailed presentation of India is attached in Annex 2

The Chair thanked Dr Vinod Chaudhury for the presentation. Chair highlighted the following points to be focussed for the Cross-border Malaria elimination:

- a) Importance of addressing Migrant issues and including accountability of stakeholders and officers from local govt area in the network of the National Malaria Program
- b) Strengthening malaria disease and vector surveillance for early detection of the trend and streamlining the data sharing across border for taking timely containment action for elimination of malaria from country and region

Chair than opened the floor for Q&A and discussions.

WHO Nepal NPO Dr Subash Lakhe highlighted the needs for sharing real time data for designing evidence-based interventions to reduce border malaria. He further added that limited data availability is a continuous challenge in planning and implementation joint interventions.

Mr Ram Kumar Mahato from EDCD/Nepal delegation raised that while present focus will be on Cross-border Malaria, Transnational malaria need to be addressed in region.

Dr Shampa Nag added that cross border malaria being a complex and multi-faceted issue Cross border situation analysis is critical to understand imported malaria cases, disaggregated by place of Travel to decide on designing interventions. Irrespective of nomenclature used, it would be important to conduct malaria analyses on imported cases with travel history and accordingly customise the interventions.

Prof Dr Prakash Ghimire, a known malariologist highlighted that while focusing on Cross border collaboration there is need for a holistic and comprehensive approaches to malaria elimination, including establishing a regional platform for sharing real time malaria disease and vector surveillance data, real time information of the interventions, identification and networking between district malaria focal persons across the bordering districts between the countries, organizing monthly/quarterly coordination meetings (face to face cum virtual or hybrid) between the bordering district malaria focal person plus national malaria program focal persons, to be facilitated/lead by SRCMF and establishing a parliamentarian forum for ultimately increasing national/regional ownership and resource mobilization for malaria disease detection, treatment, control, elimination activities. The above proposed surveillance and response mechanisms has worked for Polio, which is not eliminated from the region with effective collaboration and interventions.

During the discussion the following points emerged and were highlighted:

- a) Lack of Effective coordination mechanism at the local level for implementing the strategies for cross-border malaria elimination;
- b) Need for strengthening information and data sharing through formal and informal mechanism for joint and timely intervention;
- c) Effective malaria surveillance system to enable identification of the areas or population groups most affected for Malaria Elimination in cross border area

d) Threat to malaria elimination from human migration leading to malaria transmission or potential for transmission that takes place across or along borders between countries sharing land border

Recommendations for:

SRCMF Secretariat

- a) Plan a face-to-face meeting between the national malaria program officials from NCVBDC and EDCD/NMCP, in the first week of January 2022(date to be finalised) in India or Nepal, where both the countries NMCP will bring high burden bordering districts focal person for materializing:
 - Identification of district focal persons for district-to-district coordination and sharing disease, vector and intervention activities, for synchronization of same across the borders.
 - Develop a platform for informally sharing malaria disease, vector and intervention information between the two programs and district level focal persons.
 - Facilitate the assessment/operational research of the malaria situations across
 the identified bordering districts having issues of mobile migrant population and
 imported malaria with a concentration for malaria elimination

National Programs

- b) India and Nepal's NMCP to finalise date for organising face to face coordination meeting between NCVBDC and NMCP/EDCD with district focal persons, in first week of January 2022 for identification of districts for collaboration and for undertaking implementation of all joint activities for cross border malaria elimination
- c) share list of focal points for malaria elimination program at all the local, district, state and National level.

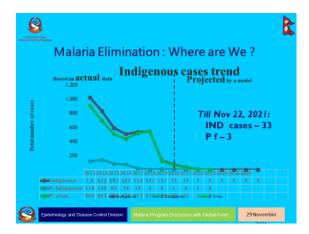
Closing Session:

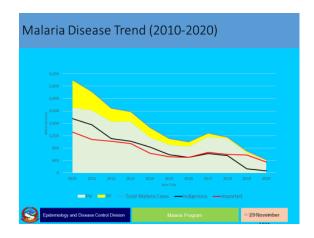
In the closing session the Executive Secretary thanked all the participants for their active participation and valuable contributions. He also thanked Chair and co-chair for conducting the meeting efficiently and bringing it to a successful conclusion. He thanked all the participants for their participation, valuable guidance and suggestions.

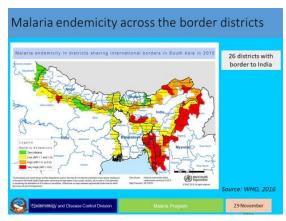
The Chair thanked the delegates for their active participation, very productive deliberations and making a very productive meeting and thanked SRCMF team for their efforts to improve Coordination between two neighbouring country national programs to work together for malaria elimination.

The Chair formally closed the meeting at 11.45 AM IST.

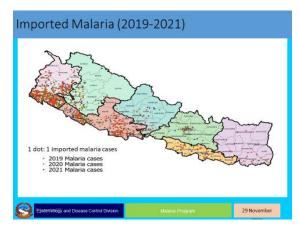




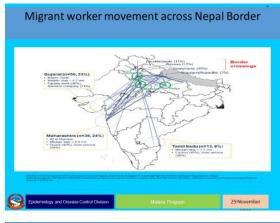












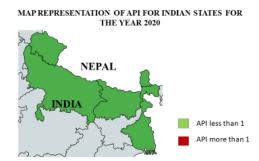






API of Indian States for the year 2020 attached with Indo-Nepal Border

STATES	API 2020
UTTAR PRADESH	0.12
UTTARAKHAND	0.00
BIHAR	0.00
SIKKIM	0.02
WEST BENGAL	0.14



API of Indian District for the year 2020 attached with Indo-Nepal Border

State	Districts	API 2020		
Uttar Pradesh	Pilibhit	0.02		
Uttar Pradesh	Lakimpur Kheri	0.02		
Uttar Pradesh	Bahraich	0.00		
Uttar Pradesh	Sravasti	0.00		
Uttar Pradesh	Balrampur	0.00		
Uttar Pradesh	Sidhhathnagar	0.02		
Uttar Pradesh	Maharajganj	0.00		
Bihar	East champaran	0.00		
Bihar	Sitamarhi	0.00		
Bihar	madhubani	0.00		
Bihar	Supaul	0.00		
Bihar	Araria	0.00		
Bihar	Kishanganj	0.00		
Uttarakhand	Champavat	0.00		
Sikkim	North Sikkim	0.00		
Sikkim	South Sikkim	0.00		
West Bengal	Darjeeling	0.00		

Stakeholders Involved

- 1. Director NVBDCP India
- 2. NVBDCP Officers
- 3. National Consultants
- 4. State Programme officers
- 5. State consultants
- 6. Malaria technical Supervisors
- 7. District consultants
- 8. ITBP
- 9. SSB

Status of Malaria Elimination in India in 2020

- 93% decline in cases and 90% decline in deaths by 2020 as compared to 2010.
- 45% decline in cases in the year 2020 as compared to 2019. Decline continued in 2021 as 20% decline in cases and 23.7% decline in deaths in the year 2021(Oct) compared to 2020 (Oct)
- The Malaria success of India has been applauded in World Malaria Report (WMR) 2018,
 2019 & 2020. Among 11 high burden countries across world, India is the only high endemic country which has reported a decline in malaria.

Challenges for Malaria Elimination in India

- Decreased priority for Malaria in low burden states/UTs.
- Limited capacity of states/districts in documentation for Malaria certification and validation of zero indigenous malaria cases.
- Despite all initiatives, malaria surveillance decreased by 35-40 % in 2019 & 2020 due to COVID-19.
- Limited entomological surveillance capacity in state/districts.
- Limited involvement of private sectors.

Action Plan for Malaria Elimination In India

Major Strategies				
High Endemic Areas Case detection, treatment, follow-up, effective vector control				
Moderate endemic areas	Intensified Malaria reporting & surveillance - early detect, contain & prevent outbreak.			
Low endemic area Case based surveillance & follow up				
Activities will be implemented in different regions at the same time.				

Formation of National Strategic Plan for next five years in 2022

AGENDA

India-Nepal Program Director Level Bilateral Virtual Meeting for Cross-border Malaria Elimination, Tuesday, 23 November 2021

Time	Responsible person(s)
9.45-10.00 Virtual Registration	SRCMF Secretariat
 Welcome, Background, Objective & expected outcome of Meeting Nomination of Chair 	Dr. Jigmi Singay
 Introduction of delegates 10.10-11.20 Current and ongoing Cross-border activities and areas for strengthening to be presented by Directors from both sides India Nepal To confirm the corresponding Cross-border district, areas and points of entry & exit adjoining the international border for Malaria elimination Office order on Cross-border collaboration issued on both sides of international border to state, district & local level Baseline information in the selected districts, 5 kms on Cross border area & districts for DHSS & CCS Identification and finalization of activities for synchronized implementation. Sharing Information Critical information for driving local interventions WhatsApp Website maintained by SRCMF Sharing names of the Focal point Focal points- National, State, District and local level Coordinators-1 National & 1 District level Implementation and M&E 	Chair: -Dr. Tanu Jain -Dr. Krishna Prasad Paudel
7. Date, Time and Frequency of the next onsite bilateral meeting	
11.20-11.25 AOB	Dr. Jigmi Singay
11.25-11.30 Concluding Remarks Clasing Remarks	-Dr. Tanu Jain -Dr. Krishna Prasad Paudel -Dr. Jigmi Singay Chair:
	osing Remarks

^{*}DHSS-District Health System Strengthening, CSS-Community System Strengthening

List of participants

India-Nepal Program Director Level Bilateral Virtual Meeting for Cross-border Malaria Elimination, Tuesday, 23 November 2021

SN	Name	Designation	Organization	Country	Email Address
		De	legation from India	1	
1	Dr. Tanu Jain	Leader of delegation, Director	National Center for Vector Borne Diseases Control (NCVBDC), MOH&FW, Govt. of India	India	nvbdcptj@gmail.com
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4	Mr. Devis Saha	National Consultant, Procurement & Supply Chain Management	NCVBDC		psm.gfatm.nvbdcp@gmail.co m
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		Del	egation from Nepal		
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9	Dr. Krishna Prasad Paudel	Team Lead	Epidemiology & Disease Control Division (EDCD), Ministry of Health and Population, Govt of Nepal	Nepal	kpkalyan@gmail.com
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SRCMF Secretariat

	SRCMF Secretariat				
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		Member Delegate	Public Health MoH		