**Vanuatu Malaria Elimination Advisory Group**

Meeting Notes

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| **Date** | - | Thursday, 17 December 2020 |
| **Time** | - | 09:00 am |
| **Venue** | - | WHO Country Office, Ministry of Health, Iatika Complex, Port Vila, Vanuatu |
| **In-person attendance**  **Remote attendance**  **Apologies** | -  -  -  -  -  -    -  -  -  -  - | MOH: Len Tarivonda (Director Public Health)  MOH: Wesley Donald (Coordinator, Malaria and Other VBD Control Program)  RAM: Jenny Kerrison (National Manager)  WHO: Tessa Knox (Technical Officer, Malaria and Other VBDs)  JCU: Tanya Russell (Senior Research Fellow)  MOH: Posikai Samuel Tapo (Director Corporate Services, Policy and Planning)  CCM: Siula Bulu (Chair Vanuatu-CCM)  VHP: Geoff Clark (Team Lead)  UNDP: Gayane Tovmasyan (Regional Programme Manager)  UNDP: Ranadi Levula (Monitoring and Evaluation Officer) |
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| **Agenda** | (1)  (2)  (3)  (4)  (5) | Update on progress against malaria [Wesley]  Planning for 2021 [Wesley]  Status of Global Rotary Grant for 2021 [Jenny]  WHO technical assistance for 2021 [Tessa]  AOB |

# Discussion and action points:

**Meeting start:** 09:00 am

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| Agenda item | Discussion points | Action points |
| Open | Coordinator of Malaria and Other Vector Borne Diseases Control Program (VBDCP) opened the meeting and welcomed attendees.   * Apologies were given, especially by UNDP colleagues in Suva who could not attend due to the imminent threat of Tropical Cyclone Yasa. | Meeting notes to be circulated to all members – MOH/WHO |
| #1 | MOH Coordinator of Malaria and Other Vector Borne Diseases Control Program (MOVBDCP) issued a presentation on malaria progress and achievements in 2020, as summarized below:   * *Vector control:* LLIN distributions proceeded as planned. Additional distributions conducted in TC Harold-affected health zones. Target of 92,775 LLINs has been exceeded, with 130,155 LLINs distributed in 2020. Final activities in Shefa province to be completed next week. * *Entomological surveillance:* Human landing catch and insecticide resistance testing conducted in Sanma (Malau and Tolomako) and Shefa (Lamen Bay). No insecticide resistance detected. * *Diagnosis and treatment:* Case management training conducted in Torba for all health workers and in Malampa and Sanma with targeted one-on-one training. Training in other provinces constrained by availability of funds. * *Surveillance, monitoring and evaluation*: case investigations and active foci investigations conducted in Shefa, Samna and Malampa for at least 90% cases/foci. Challenges include competing priorities of provincial surveillance officers, limited access to recurrent budget, and continuous delays with case investigations. Data currently in DHIS-2 indicate 496 confirmed cases (API 1.6) although further data entries for Q4 and data verification and validation are pending; some double-entries and potential relapses have been noted. * *Communication and advocacy*: activities have included stakeholder meetings (including Provincial Health Manager, Area Secretary and Administrator), community awareness by health workers, and malaria elimination information provided to the community. RAM was acknowledged for their essential financial support to these activities. * *Procurement and supply chain management*: undertook commodity procurement for LLINs, ACTs, RDTs, primaquine and G6PD, stock monitoring including through supervisory visits, and asset procurement for vehicles. Support of UNDP, CMS and RAM was gratefully acknowledged. Also procured IRS equipment and supplies through funding to TC Harold response. Support of WHO and Australian Government acknowledged. * *Program management*: Activities focused on: human resource mobilization and recruitments; provincial activity planning and budgeting; reporting on performance against annual indicators and targets; planning for implementation of the new NSPME; new activities such as for re-initiation of IRS; strengthening partnerships for malaria elimination.   Coordinator of VBDCP indicated that the major challenges in 2020 had included:   * Re-prioritisation of activities due to COVID-19 preparedness and TC Harold response * Lack of provincial leadership due to vacancy of Provincial Malaria Supervisor positions in 4 of 6 provinces and general understaffing * Continuous lengthy recruitment processes * Constraints in access to recurrent funds due to monthly overdraft (eg. for case management training, case investigation operations) * Limited availability of logistics support to conduct timely response to cases * Lack of alignment of public health priorities in provincial programs * Weather conditions that interrupted LLIN distributions and supervisory visits   WHO Technical Officer noted the number of malaria cases recorded thus far for 2020 (n=498) considering: a) the 2020 MOH strategic target of <300 cases and API <1.0; b) the remaining reports to receive, especially for Q4/2020; and c) the need to validate and verify all data (especially for double-entries and relapses). It was also noted that increases were observed in a number of countries for 2019 as per the recent World Malaria Report, and that further increases are anticipated for 2020 due to interruption of malaria services as a result of the COVID-19 pandemic. It was recommended that the data, once fully compiled and cleaned, be examined in more detail to determine the extent and nature of ongoing malaria burden in Vanuatu.  RAM Country Coordinator congratulated MOH on the achievement of a continued decrease in API despite the challenges presented in 2020 by COVID-19 and TC Harold, and acknowledged that this represented a true team effort. The impressive work conducted in the course of 2020 demonstrated good governance and an impressive team with strong partner collaboration.  JCU Senior Research Fellow also commended the work of the MOH and progress made throughout 2020, and reiterated that IRS will be a useful tool to address the remaining strongholds of malaria in Vanuatu. | Malaria case data to be examined, including to identify reasons for possible increases – MOH/WHO |
| # 2 | MOH Coordinator of Malaria and Other Vector Borne Diseases Control Program (VBDCP) outlined the priorities for 2021 as to be aligned with the new NSPME. Challenges (as outlined above) are to be addressed with priority actions as follows:   * Ongoing engagement to ensure recruitment of Provincial Malaria Supervisors * Continued support from GF and WHO for key program positions for 2021 onwards * Further investigation of opportunities for external surge staffing support, such as through Australian Volunteers, Peace Corps, WHO STOP-malaria initiative * Seeking additional support from development partners for unfunded key programmatic activities * Strengthening information management systems, with more mentoring and supervision * Procurement of additional vehicles for provincial use in key malaria elimination activities ie. case and foci investigations * Annual review and planning meeting to be held in Q1/2021 (noting that availability of funding is a key constraint at present and options are currently being explored).   Director of Public Health further reiterated that:   * Priority will be given to fill the vacant Provincial Malaria Supervisor positions (only 2 of 4 currently filled) through recruitment or temporary placement of staff from other provinces. * MOH public health staff who has been prioritized to support COVID-19 work including for repatriations will return to regular duties to ensure continued provision of essential public health services |  |
| # 3 | RAM National Manager provided a brief update on support to the MOH, as follows:   * Rotary Global Grant application titled “Malaria Elimination in Vanuatu” was recently approved, to the value of US$411,000. This will support re-initiation of IRS in Vanuatu. The first meeting of the team was held on 04 December 2020. Procurement of items is the priority. Under the TC Harold response, MOH were able to secure IRS spray equipment, PPE and insecticides which will ensure that trainings can commence following baseline work in 2021 as items are awaited through support of this grant. An international Lead Trainer has been identified who will provide support remotely with two local Master trainers to coordinate the refresher training work in Vanuatu. * Director of Public Health indicated that the National COVID-19 Advisory Committee has commenced work to allow access to international experts with skills not available in Vanuatu; this may enable travel of an IRS Master trainer in the future though timelines are not yet known. * RAM Australia and New Zealand will continue fundraising for Vanuatu throughout 2021. This will enable a relatively modest pool of funds that offers some flexibility and may be accessed within a short timeframe if clearly justified. Therefore, if there are any arising priorities then MOH should send a clear costed request to RAM. * RAM also have a network that may be utilized to seek volunteer support if needed. | Additional IRS equipment and supplies order should proceed ASAP – MOH/WHO |
| # 4 | WHO Technical Officer provided a brief update on technical support to the MOH, as follows:   * Contracts for six personnel on Special Service Agreements (SSAs) have recently been renewed for a period of 6 months (January – June 2021). It is anticipated that WHO support for these positions will cease as support is expected through GF and MOH funding. * Vanuatu has been invited to join the WHO Elimination 2025 Initiative based on their impressive success against malaria and in acknowledgement of the potential for national elimination and certification; a response and nomination are awaited from the Minster of Health. * Unfortunately, WHO have not been able to commit to the provision of a STOP-malaria volunteer for Vanuatu.   MOH Coordinator of VBDCP provided an additional update on opportunities explored for surge technical assistance:   * An application to Peace Corps for support of two province-based volunteers was submitted earlier this year; feedback is awaited. * An application to Australia Volunteers for support of four provincial-based volunteers was submitted earlier this year; feedback is awaited though AV are not sending any additional personnel from Australia so this must be identified locally. | Follow up on response of Minister to WHO invitation to E-2025 – MOH  Follow up on status of requests for volunteers – MOH/WHO |
| # 5 | Two other orders of business were raised:  1. *PacMOSSI:* JCU Senior Research Fellow introduced the DFAT-supported consortium project and reiterated that this may provide a good opportunity for capacity building on vector surveillance and data use to address the remaining malaria transmission in Vanuatu (and also assist with dengue control). Comprehensive online training modules are under development, and should become available in 2021. This may offer opportunities for South-South collaboration given the advanced capacity of Vanuatu particularly in *Aedes* surveillance.  2. *Vector surveillance:* JCU Senior Research Fellow requested further information on plans and ongoing work particularly that targeting hotspot areas to determine the causes of residual transmission. | Circulate the vector surveillance + vector control M&E plan - MOH |
| Close | MOH Director of Public Health again thanked all MEAG members and partners for all the support provided throughout the course of 2020 despite other priorities. He indicated it has been a wonderful and collective effort forged through strong partnerships with a shared vision and drive, and that the same level of commitment, partnership and friendship would also be appreciated going into 2021. The meeting was closed, with well wishes to all for a restful break. |  |

**Meeting ended:** 10:35 am