



**EIGHTH  
EARN ANNUAL COORDINATION FOR  
IMPLEMENTATION SUPPORT  
MEETING**

**TAJ PAMODZI HOTEL, LUSAKA, ZAMBIA**

**31<sup>st</sup> July – 1<sup>st</sup> August 2008**



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## **Executive Summary**

The eighth Annual Coordination for implementation support Meeting for Eastern Africa Roll Back Malaria Regional Network was held back to back with the eleventh annual review and planning meeting for Eastern and Southern Africa (ESAMC). The meetings were attended by more than 110 participants representing national malaria control programmes, as well as global, regional and national partners.

The objectives of the EARN meeting were:

Broadly: To provide a forum for the programme implementation review, experience sharing and implementation for accelerating access to proven malaria control interventions towards universal access and achievement of Abuja 2010 targets.

Specifically:

- To conduct a mid-term review of the RBM Harmonised Work-plan,
- To compile the Country needs as perceived by countries
- For Countries/partners to share information on how to overcome specific challenges,
- For countries and partners to develop a joint plan to address challenges and achieve goals and targets
- And lastly, election of EARN steering Committee members.

The Expected outputs were that a Country/Partner joint implementation work-plan to meet country needs be drafted and an elected EARN steering Committee be put in place.

The meeting was officially opened by the Zambian Honourable Minister of Health and Social welfare who was accompanied by high ranking officials such as the Director General of the Ministry of Health, the WHO AFRO Representative, the WHO Country Representative for Zambia and the RBM representative from Geneva.

The key issues from the week long series of meetings included:

- Programme managers' meeting: Managers strongly recommended that more support for program implementation must be provided instead of focusing on resource mobilisation.
- WHO Planning meeting: Emphasis was put on strengthening malaria case management [including strengthening RDT use for malaria diagnosis] and program monitoring and evaluation in order to document impact. Countries were able to identify their Technical Assistance needs to guide the solicitation of support from WHO and RBM partners.
- EARN partners' meeting: Redefining the EARN Structure with clear roles and responsibilities to the identified key players such as the Steering Committee and the coordination unit/secretariat.
- Malaria Vaccine Initiative meeting: Participants were updated on the various existing initiatives for the development of a malaria vaccine. This is likely to come on the market well after 2010 which is the target year for SUFI.

## **EARN meeting Recommendations and Way Forward**

- Coordination committee meeting at quarterly basis
- Support implementation in the next year rather than focusing on resource mobilisation.
- Increase secretariat so that countries benefit from Global decisions due to participation in meetings.
- EARN to facilitate countries in moving money in order to quickly achieve targets
- EARN to be able to quickly come up with diagnosis so as to assist country to move on course.
- Good practice should be disseminated to other countries
- Technical Assistance follow up with countries for specific needs and timelines
- Needs Assessment and Business plan development programme
- Round 8 signing, Round 9 and 10 proposal preparations and any other funding sources.
- Engage IGAD and EAC in discussions for the hosting of EARN at the EAC secretariat.
- Development of EARN Constitution that includes the Coordination Committee TORs.
- Simplify the OGAC Form procedures for easy use of countries.
- The EARN Coordinator to visit EARN member countries at least 2 times per year and maintain at least a monthly telephone contact with programme managers.
- Development of costed EARN work plan 2008/2009

## **Acknowledgements**

The Eighth Annual Review and Planning Meeting for Roll Back Malaria in Eastern Africa was attended by more than 110 participants representing 10 national malaria control programmes, as well as global, regional and national partners. The success of a meeting of this kind depends on the dedication and commitment of many individuals and organisations, but EARN would like to thank the following in particular for their support:

- National Malaria Control Programme, Ministry of Health, Zambia
- The RBM Secretariat for financial support
- WHO Zambia office
- WHO-AFRO for key technical presentations
- A-to Z Simutomo, Avima-BASF for supporting the evening social functions and Particularly thank Sonafi Aventis for providing bags and EARN Poster
- The rapporteur Dr Kaggwa Mugagga, and Peter Mbabazi Kwehangana for preparing this report.
- Country representatives, members of EARN and the RBM partnership for their enthusiastic support

Lastly, we would like to thank all of the National Malaria Control Programmes and manufactures for their enthusiastic participation and engagement.

*Angus Spiers, Corine Karema, Alex Mwita, Jimma Daddi, Tewolde Ghebremeskel, Josephine Namboze, Gladys Tetteh, Clare Riches, Peter Omondi Mcodida, Agonafer Tekalegn, Barnabas Bwambok, James Banda and Peter Mbabazi Kwehangana  
(Cover photo EARN Co-ordination Committee 2008-2010)*

## Acronyms

ACT	Artemisinin-based Combination Therapy
ADDO	Accredited Drug Distribution Outlet
AFRO	Africa Regional Office (WHO)
ANC	Antenatal Care
AQ	Amodiaquine
ART	Artesunate
BCC	Behaviour Change Communication
CBO	Community Based Organisation
CCM	Country Co-ordinating Mechanism (GFATM)
CHA	Community Health Agent
CHW	Community Health Worker
CQ	Chloroquine
DHS	Demographic and Health Survey
EARN	Eastern Africa RBM Regional Network
ERPM	East and Southern Africa Regional Planning Meeting
GF	Global Fund (GFATM)
GFATM	Global Fund against HIV/AIDS, TB and Malaria
HBMF	Home Based Management of Fever
HFS	Health Facility Survey
IEC	Information, Education and Communication
IMCI	Integrated Management of Childhood Illness
IPT	Intermittent Preventive Treatment
IPTp	Intermittent Preventive Treatment for pregnant women
IRS	Indoor Residual Spraying
ITN	Insecticide Treated Net
LLIN	Long-Lasting Insecticidal Net
M&E	Monitoring and Evaluation
MICS	Multiple Indicator Cluster Survey
MIS	Malaria Indicator Survey
MSH	Management Sciences for Health
NGO	Non-Governmental Organization
NMCP	National Malaria Control Programme
OGAC	Office of the Global AIDS Coordinator
PMI	US President's Malaria Initiative
PSI	Population Services International
PSM	Procurement and Supply Management
RBM	Roll Back Malaria
RDT	Rapid Diagnostic Test
REAPING	Roll Back Malaria Essential Actions Products Investment Gaps
SP	Sulphadoxine-pyrimethamine
UNICEF	United Nations Children's Fund
WG	Working Group (RBM)
WHO	World Health Organization
WHOPES	World Health Organization Pesticide Evaluation Scheme

## **Introduction**

The 2008 Lusaka meeting was the Eighth Eastern Africa RBM Network Annual Coordination for Implementation Support Meeting, and builds on the successes of the previous meetings held in Dar-es-salaam-Tanzania in 2000, Nairobi-Kenya in 2001, Jinja-Uganda in 2003, Kigali-Rwanda in 2004, Mombasa-Kenya in 2005, Zanzibar-Tanzania 2006 and Arusha-Tanzania 2007

## **Purpose of Meeting**

To provide a forum for the programme implementation review, experience sharing and implementation for accelerating access to proven malaria control interventions towards universal access and achievement of Abuja 2010 targets

## **Objectives and Expected Outcomes of Meeting**

### *Objectives*

1. Mid term review of the RBM Harmonised workplan
2. Country needs as perceived by countries today
3. Countries/partners share information on how to overcome specific challenges and
4. Countries and partners develop joint plan to address challenges and achieve goals and targets
5. Election of EARN steering Committee members

### *Expected Outcomes*

1. Country/Partner joint implementation workplan to meet country needs
2. Elected EARN steering Committee

## **EARN Programme managers' meeting**

### **General Objective**

To provide a forum for the programme managers to review implementation, peculiar experience sharing in the face of achieving Abuja 2010 targets

### **Specific objectives**

The specific objectives of this meeting are:

1. Midterm review of the RBM Harmonised work plan
2. Introduce the new structure for EARN
3. Explore areas of common bottlenecks and joint programmes
4. Election of programme managers constituency members to the EARN steering committee.

### **Expected output**

Come up with a consensus on issues affecting programme managers

The meeting was attended by 6 programme managers out of the expected 13 programmes. Two other programmes sent representatives other than programme managers, representing a total of eight NMCPs for this meeting.

### **Issues raised**

- Need to support implementation in countries
- EARN advocates for resources
- Where countries need to address TA requests
- Role of NMCP in country RBM partnership coordination
- EARN should be a facilitator not a provider of TA
- Constant update of country situation for resource mobilisation
- Information systems need to be improved and need to find different communication channels
- A lot happening at global level and there is need for clarity on country requirements, for information targeting.
- IGAD to play the role in EARN the way SADC is in SARN

## **Recommendations**

- Steering committee with a chair meeting at quarterly basis
- Support implementation in the next year rather than focusing on resource mobilisation
- Increase secretariat so that countries benefit from Global decisions due to participation in meetings.
- EARN to facilitate countries in moving money in order to quickly achieve targets
- EARN to be able to quickly come up with diagnosis so as to assist country to move on course.
- Good practice should be disseminated to other countries

## **Way forward for EARN General meeting**

- There is need to improve the EARN structure with defined roles and responsibilities
- The TOR of EARN Coordinator should be well spelt highlighting interaction with the coordination committee.
- Countries should be informed of the availability and possible use of OGAC funds

## **EARN General meeting**

This was a two day meeting with the in line with the meeting's general and specific objectives and outputs

### **DAY 1**

Under the Chairmanship of the programme manager for Tanzania, Dr Alex Mwita, members deliberated on several issues, after a brief presentation on EARN overview and update by the Coordinator. The presentation highlighted the current underperformance of the Network and drew the attention of the participants to anew structure aimed at rejuvenating the network.

Regarding the issue of under-performance of EARN:

- Members were informed that EARN is the pioneer of all SRNs and is therefore learning by doing.
- The current functions and demands on the network are much broader than perceived at the time of inception of the SRN. These however, were not matched with the funding as well as human resource capacity.
- The existing committee members have been over stretched by their respective offices to attend to EARN ever demanding attention.

There was a general consensus that EARN despite the challenges is still necessary

Regarding the proposed structure for EARN

It was deferred until the next day when a decision was taken.

On the new roles of EARN the following issues were raised

- It was considered that EARN should engage in Cross border issues
- Human capacity at national and regional level
- Data bank for all countries in terms of all information on the EARN country
- EARN to organise Training/Long and Short courses
- Synchronise interventions eg. IRS(Tz, Ug, & Rd) who are currently doing it at different times, including synchronise distribution of nets in the region
- EARN should join the regional bodies like IGAD, EAC, Kagera Basin
- EARN to be proactive and advocate to the heads of Government and ministers
- At every meeting of the regional bodies EARN should be represented.
- The Programme Managers agreed to participate on coordination committee.
- EARN should have access to health ministers and Research and academia in the region.
- EARN/RBM agenda must be promoted above the individual implementing partners interests
- There is need to involve the private sector in all EARN activities
- It was a general consensus that EARN is necessary and should change its functions in the changing environment mostly advocacy.
- The size of the steering committee should be manageable

## **Day 2**

The meeting adopted a proposal that EARN RBM NETWORK should have the following character:

### **VISION**

#### ***A MALARIA FREE EARN***

### **MISSION**

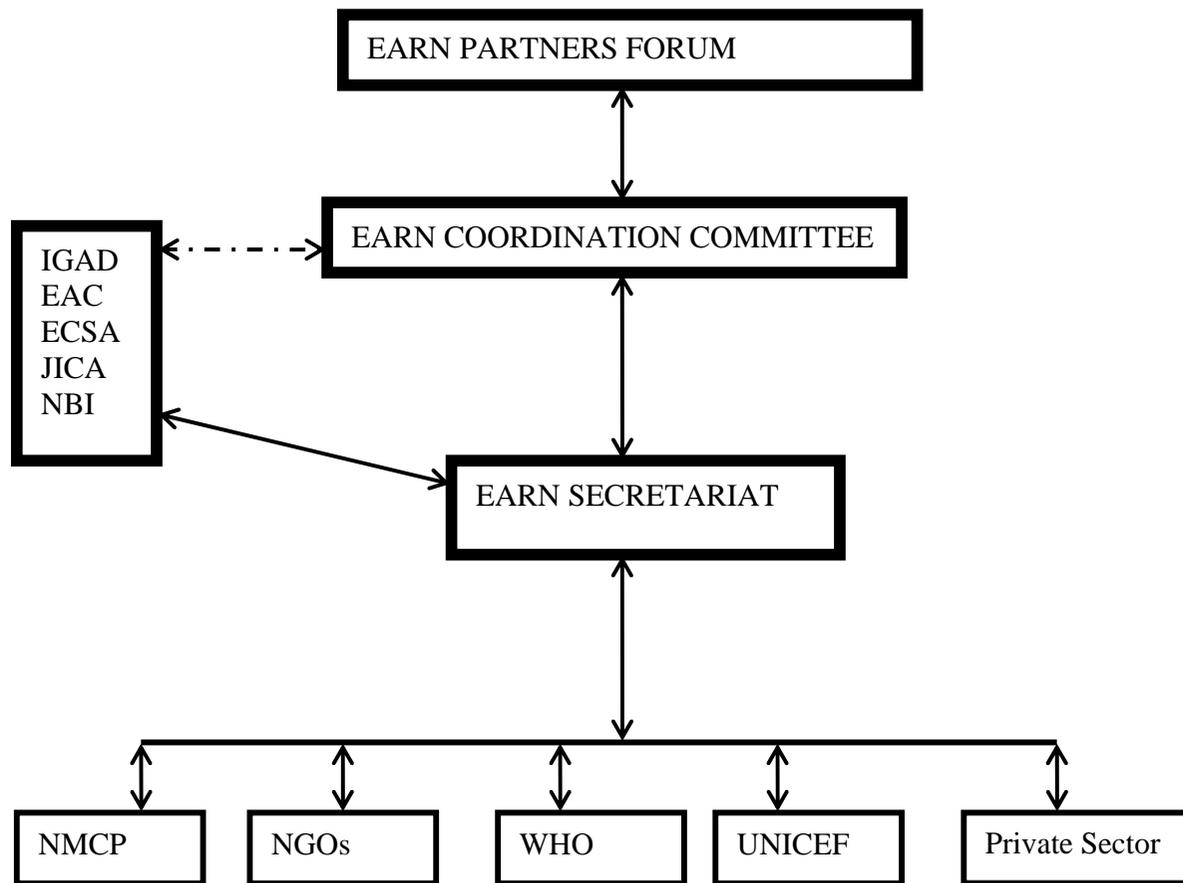
TO SUPPORT COUNTRIES SCALE UP MALARIA INTERVENTIONS BY COORDINATING

- TECHNICAL SUPPORT/ASSISTANCE
- BROKERAGE AND LINKAGES(Peer exchange)
- RESOURCE MOBILIZATION
- ADVOCACY

### **GUIDING PRINCIPLE:**

COOPERATION AND COORDINATION AND PARTNERSHIP

### **EARN STRUCTURE**



## EARN COORDINATING COMMITTEE



## MEMBERS

### 1) Programme managers-4

It was decided that the programme managers should come from EMRO (2) and AFRO (2) the 10 Programme managers present elected the following:

- **Ethiopia** –Dr. Jima Daddi
- **Eritrea** –Dr. Tewolde
- **Rwanda**- Dr Corine Karema(**Vice Chairperson**)
- **Tanzania**- Dr Alex Mwita

### 2) Non Governmental Organisation-4

The forum decided that the NGOs should be represented by the local NGOs(2) and international NGOs(2), the NGO constituency represented by PATH, KENAAM, Malaria Consortium, PSI, The Carter center, Pilgrim, CAME and AED(opted out) elected the following:

- **Malaria Consortium**-Ms Clare Riches
- **KENAAM** (Kenya NGO Alliance Against Malaria)-Mr. Peter Omondi Mcodida

- **CAME** (Coalition Against Malaria in Ethiopia)-Dr. Agonafer Tekalegne
- **MSH** (Medicine Sciences for Health)-Dr. Gladys Tetteh

### 3) Private Sector-1

The private sector represented by; Sumitomo, Sonafi Anvits, Vestergaard Franden, Holey pharm, elected the following:

- **Vestergaard Frandsen**- Dr Barnabas Bwambok
  - (alternate Holleypharm)

### 4) United Nations Bodies -2

It was agreed that the 2 founder UN bodies should maintain they sits without going to vote;

- WHO**-Dr Josephine Namboze
- UNICEF**-Dr Angus Spiers (**Chair Person**)

### 5) RBM Secretariat-1

**RBM** -Dr James Banda

### 6) EARN Secretariat-1

**Earn Coordinator**-Peter Mbabazi Kwehangana (**Secretary**)

- ToRs (Refer to the attached EARN Constitution)
- Meeting Schedule(refer to the attached EARN Constitution)

## PARTNERS FORUM

- Members, Chair(refer to the attached Coordination committee TOR)

It was decided that the chair of the Coordination Committee will also serve as the chair of the forum

- ToRs (refer to the attached EARN Constitution)
- Meeting Schedule (refer to the attached EARN Constitution)

## FINANCING

- For Coordinating Meetings and TA to countries (refer to the attached EARN Constitution)
- For Coordinator remuneration and operational expenses  
This will be determined and provided by the RBM secretariat
- For Partner Forum Meetings

## **Hosting Arrangements**

The forum discussed at length the pro and cons of the hosting arrangement for the EARN secretariat, with suggestions for WHO, UNICEF, EAC, it was decided that the Goal of the Forum is to have EARN secretariat hosted in EAC.

However currently WHO is temporally hosting the EARN Coordinator and it was decided that the secretariat be hosted by UNICEF before the eventual transfer to EAC.

## **EARN Constitution**

The Coordination committee in its first assignment designed the TOR as attached. It was later presented to the plenary forum meeting and that culminated in the draft EARN Constitution draft will be circulated to countries for input. It was decided that the final signed copy by the RBM Executive Director will be circulated to the countries for reference.

## **MALARIA INDICATOR SURVEY TRAINING**

Countries were reminded of the forthcoming training for MIS, and that it will specifically target the countries that have planed and confirmed funded MIS in the coming year.

There was a call to countries to request for TA on the MIS from OGAC funds and should make concrete indicative dates for the MIS

Countries that are intending to conduct the Malaria Indicator Surveys (MIS) in 2008 and 2009 are encouraged to participate in the trainings, even though they have planed, they need peer review. This is to avoid MIS reports that may not be published due to inconsistencies. This training will also be targeted.

For countries that are going to have a combined HIV survey with MIS, they will be given the Pros and cons of the combined study.

## **OGAC Funds**

A presentation on the OGAC funds was made that elaborated the eligibility of activities to access the funds and country led procedure to be signed by the CCM chair, PR or the SR. member raised concern on the English version of the forms and they were assured on the availability of the French version.

Countries were advised to put all their TA needs on the OGAC forms and it will be sorted by the secretariat to basing on the eligibility on the OGOC funds and see what suits. This will include Round 8 signing (PSM, M&E plans) Business plan and

## **Round 9**

Countries to communicate to the EARN coordinator their intention to apply for round 9 within 1 week

## **Business Plan**

The business plan tool will soon be finalised and countries should prepare to use it.

## **Travels**

Members to fill in the GSM personal details form, in case of travels a minimum of 10 days notice is required before travel. Except for Rwanda that needs 3 days to the travel date to receive a clearance. There is need for clear information on travel booking, as WHO is still updating the system to update the suppliers; AFRO will be updated on the GSM in November 2008.

## **EARN Work plan**

Countries submitted the work plan for the year 2008/2009 as follows. Please refer to the attached work plan for details

## **Recommendations and Way Forward**

- Coordination committee meeting at quarterly basis
- Support implementation in the next year rather than focusing on resource mobilisation.
- Increase secretariat so that countries benefit from Global decisions due to participation in meetings.
- EARN to facilitate countries in moving money in order to quickly achieve targets
- EARN to be able to quickly come up with diagnosis so as to assist country to move on course.
- Good practice should be disseminated to other countries
- Technical Assistance follow up with countries for specific needs and timelines
- Needs Assessment and Business plan development programme
- Round 8 signing, Round 9 and 10 proposal preparations and any other funding sources.
- Engage IGAD and EAC in discussions for the hosting of EARN at the EAC secretariat.
- Development of EARN Constitution that includes the Coordination Committee TORs
- Simplify the OGAC Form procedures for easy use of countries
- The EARN Coordinator to visit EARN member countries at least 2 times per year and maintain at least a monthly telephone contact with programme managers.
- Development of costed EARN work plan 2008/2009

## Appendix 1: Programme Managers meeting Agenda



**EARN**  
EASTERN AFRICA RBM NETWORK



**EARN Annual Programme Managers Meeting  
2008 Programme  
27<sup>th</sup> July 2008  
Lusaka, Zambia**

### General Objective

To provide a forum for the programme managers to review implementation, peculiar experience sharing in the face of achieving Abuja 2010 targets.

### Specific Objectives

The objectives of this meeting are:

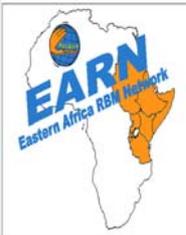
- 1) Mid term review of the RBM Harmonised Work plan
- 2) Introduce the new structure for EARN
- 3) Explore areas of common bottlenecks and joint programmes.
- 4) Election of Programme managers constituency members to the EARN steering committee.

### Expected Outputs

- 1) Come up with a consensus on issues affecting programme managers.

Time	Session Topic	Presenter	Chairperson
<b>Saturday 27<sup>th</sup> July Programme Managers meeting</b>			
9:00-11:10	Experience sharing and assessing the EARN progress	<b>Programme Managers</b>	<b>EARN RC</b>
11:10-11:30	Coffee/Tea,		
11:30-12:00	New EARN structure	<b>EARN RC</b>	<b>Programme Managers</b>
12:00-13:00	Election of Programme managers constituency representatives	<b>Programme Managers</b>	<b>Dr James Banda</b>
13:00-14:00	Lunch Break		
14:00-15:45	Country RBM partnership and Programme Support structure	<b>EARN RC</b>	<b>Programme Managers</b>
15:45-16:15	Coffee/Tea Break		
6:15-17:15	EARN annual meeting agenda and roles	<b>EARN RC</b>	<b>Programme Managers</b>

## Appendix 2: EARN Meeting Programme

	<b>EARN</b> <b>EASTERN AFRICA RBM NETWORK</b>	
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**EARN Annual Coordination for Implementation Support Meeting  
2008 Programme**

**31<sup>st</sup> July -1<sup>st</sup> August 2008**

**Lusaka, Zambia**

**General Objective**  
To provide a forum for the programme implementation review, experience sharing and implementation for accelerating access to proven malaria control interventions towards universal access and achievement of Abuja 2010 targets.

**Specific Objectives**  
The objectives of this meeting are:

- 5) Mid term review of the RBM Harmonised Work plan
- 6) Country needs as perceived by countries today
- 7) Countries/partners share information on how to overcome specific challenges; and
- 8) Countries and partners develop joint plan to address challenges and achieve goals/targets.
- 9) Election of EARN Steering Committee members

**Expected Outputs**

- 2) Country/partner joint implementation work plan to meet country needs.
- 3) Elected EARN Steering Committee

### Draft Programme

Time	Session Topic	Presenter	Chairperson
<b>Thursday 31<sup>st</sup> July</b>			
<b>EARN –SARN JOINT MEETING</b>			
<b>Session 1</b>	<b>Introduction</b>		<b>Steering Committee Chair</b>
08:30-09:00	Administrative announcements, Self Introductions		
09:00–09:15	Objectives and expected outcomes		
<b>Session 2</b>	<b>Multilateral Funders to SARN/EARN Countries Overview</b>		
09:15-09:45	GFATM	<b>GFATM</b>	
<b>09:00-10:00</b>	<b>Discussion</b>		
<b>10:00-10:15</b>	<b>Coffee/Tea</b>		
10:15-10:35	PMI	<b>PMI</b>	
10:35-10:55	World Bank	<b>WB</b>	
<b>10:55-11:10</b>	<b>Discussion</b>		
11:10-11:30	Malaria No More	<b>MNM</b>	
11:30-11:50	Bill and Melinda Gates Foundation	<b>BMGF</b>	
11:50-12:10	Clinton Foundation	<b>CF</b>	
<b>12:10-12:30</b>	<b>Discussion</b>		
12:30-12:50	UNICEF	<b>UNICEF</b>	
12:50-13:10	JICA	<b>JICA</b>	
<b>13:10-13:30</b>	<b>Discussion</b>		
<b>13:30-14:30</b>	<b>LUNCH</b>		
<b>EARN MEETING</b>			
<b>Session 3</b>	<b>EARN Focus</b>		
14:30-14:45	Registration and administrative issues	<b>Secretariat</b>	<b>EARN RC</b>
14:45 – 15:00	Review of meeting objectives, expected outputs, programme, self introductions, expectations from participants	<b>EARN Regional Coordinator</b>	<b>Cord Team Member</b>
15:00–15:15	RBM partnership, over view and Update	<b>Dr. James Banda</b>	<b>Cord Team Member</b>
15:15-15:30	EARN Overview and Update	<b>Dr. Namboze Josephine</b>	<b>Cord Team Member</b>
<b>Session 4</b>	<b>Election of EARN constituency members</b>		
15:30-16:00	Election of EARN Steering Committee Members	<b>EARN RC</b>	<b>Dr. James Banda</b>
16:00-16:15	Coffee/Tea Break		
<b>Session 4</b>	<b>Mid Term Review of RBM Harmonised Work plan</b>		

<b>Time</b>	<b>Session Topic</b>	<b>Presenter</b>	<b>Chairperson</b>
16:15-16:45	<p><b><i>Priority One: Strengthen capacity and enhance performance for SUFI</i></b></p> <p>HWG presentation on the tool to support countries to prepare detailed SUFI roadmaps.</p> <p>Country Partnership coordinators, NPOs (M&amp;E, PSM and Financial management)</p>	<p><b>HWG Co-chair</b></p> <p><b>Programme managers</b></p>	<p><b>Steering Committee chair</b></p> <p><b>Steering Committee chair</b></p>
16:45-17:30	<p><b><i>Priority two: Keep malaria high on the development agenda and access to additional resources.</i></b></p> <p>GF Round 8 grant signing, (and residual grants).</p> <p>GF Round 9 &amp; 10, PMI, World Bank, preparation.</p>	<p><b>Programme managers</b></p>	<p><b>Steering Committee chair</b></p>
16:30-16:45	Coffee/Tea Break		
16:45-17:15	<p><b><i>Priority three: Enhance performance in countries and secure continued resources(through diagnostic and corrective response)</i></b></p> <p>Bottle necks resolution.</p> <p>Use of OGAC funds</p>	<p><b>Programme managers</b></p> <p><b>Angus Spiers</b></p>	<p><b>Steering Committee chair</b></p>
<b>Friday 1<sup>st</sup> August</b>			
9:00 - 9:15	Opening, review of day 1, and review of day 2 agenda	<b>Rapporteur</b>	<b>Steering Committee chair</b>
9:15 – 10:15	<p><b><i>Priority four: Track country progress</i></b></p> <p>Update on MIS, Country Profiles</p>	<b>Programme Managers</b>	<b>Steering Committee chair</b>
10:15-11:25	<p><b><i>Priority five: Strengthen access to commodities for malaria control</i></b></p> <p>Affordable Medicines for Malaria (AMFm)</p> <p>Integrated ITN/immunisation mass campaign</p> <p>Affordable Private sector ACTs</p> <p>IRS scale up</p>	<b>Programme Managers</b>	<b>Steering Committee chair</b>
11:25-11:50	Coffee/Tea Break		
Session 5	<b>EARN Work plan &amp; Way forward</b>		

<b>Time</b>	<b>Session Topic</b>	<b>Presenter Programme Managers</b>	<b>Chairperson Steering Committee chair</b>
11:50-12:20	Countries' major milestones for the 8 remaining quarters to December 2010	<b>Programme Managers</b>	<b>Steering Committee chair</b>
12:20-12:40	Country Needs/Partner matching and planning.	<b>Facilitator</b>	<b>Steering Committee chair</b>
12:40-13:00	Way forward & Meeting evaluation	<b>Facilitator</b>	<b>Steering Committee chair</b>
13:00-14:00	Lunch Break		
Session 6	Plenary of EARN/SARN and WHO for joint plan		
14:00-16:30	WHO ESAMC/RBM EARN-SARN Joint Work plan	<b>all</b>	WHO/RBM
16:30-17:00	Coffee/Tea Break		
19:00-20:00	EARN Steering Committee meeting	<b>Steering Committee</b>	<b>Chairman SC</b>

### Appendix 3: Country Technical Assistance Needs

#### BURUNDI

Technical Assistance Needs	Period	Partners
Feasibility study of HBMM	June 2009	
Strengthen HR ( training, management tools, etc) [Adaptation of training module, Training in anti malarials management and quantification]	December 2008	
Set up data base and Training on data base management	ASAP	

#### COMOROS

Technical Assistance Needs	Period	Partners
Former le personnel de santé sur la PEC		OMS/UNICEF/GFATM
Acheter/distribuer les MILD		GFATM/autres
Former les agents sur les PID		OMS/ICT GFATM
Organiser les tests de sensibilité des vecteurs aux insecticides		OMS/ICT GFATM
Recycler les techniciens entomologistes		OMS/ICT
Former les responsables du Programme en gestion de programme		OMS/ICT GFATM
Valider le Plan de suivi et évaluation		OMS/ICT
Former une équipe nationale sur le suivi et évaluation		OMS/ICT
Former les cadres nationaux sur la base de données de WHO – GMP		OMS/ICT
Elaborer le Plan national de préparation et riposte aux épidémies de paludisme		OMS/ICT
Prépositionner des kits contre les épidémies de paludisme		OMS/ICT GFATM
Organiser une enquête MIS		OMS/ICT GFATM
Elaborer un Plan de travail pour la mise en œuvre des procédures d'acquisition des fonds GFATM Round 8		OMS/UNICEF/RBM
Elaborer le plan de communication		GFATM/autres
Elaborer / diffuser les supports de communication		GFATM/autres
former les responsables des médias		GFATM/autres

#### ETHIOPIA

Technical Assistance Needs	Period	Partners
Finalization of the already drafted LLINs strategic plan for 2008 – 2012	September 2008	MCST technical advisory

		committee members
Training on Spray pump maintenance and storage	January 2009	PMI, WHO
Establishing and linking malaria database and the existing databases	October 2008	UNICEF, CSA, WHO
Revise the existing five years M&E strategic plan	January 2009	MCST members
Establish areas and population at risk of malaria in Ethiopia	March 2009	WB, PMI, MC, WHO
Facilitation in specific topics during a two-month training course on malariology to be organized by MOH	September 2008	WHO
Adoption and operationalization of malaria communication strategy	October 2008	MC

### Eritrea

Technical Assistance Needs	Period	Partners
Development of separate malaria M&E plan of action.	RBM	Quarter 4
GIS & Data Management Training	WHO/Afro	Quarter 3
Strengthen the Early Warning and Forecasting System for malaria epidemics.	WHO/Afro	Quarter 3
Support the mid-term evaluation of 2 <sup>nd</sup> RBMCSP, (Planning, Survey and analysis)	WHO-Afro/EARN	Quarter 3
Study the effectiveness of health promotion materials	WHO	Quarter 4
Insectary expert to assist in the strengthening of entomology laboratories in the country.	?	Quarter 4

### Kenya

Technical Assistance Needs	Period	Partners
Development of IVM guidelines	August 2008	WHO
Finalization of lab diagnostic policy and implementation of the same	September 2008	WHO
Set up LMIS system for consumption tracking	Ongoing	MSH
Review the National Malaria Strategy	September 2008	WHO

### Rwanda

Technical Assistance Needs	Period	Partners
Training in field entomology and update curricula of basic entomology		
Capacity building in quantification and forecasting method at decentralized level	Ongoing	MSH/SPS
Strengthen MEWs system, Establishment of new threshold, New guidelines on Epidemic threshold and Capacity building in data analysis at decentralized level	November 2008	WHO

Development of appropriate standardized sentinel surveillance tools	September – October 2008	WHO
Training of District Medical Officer in malariology	August 2008	WHO
Research BCS/TRAC and Malaria IEC coordination	ongoing	PSI

### TANZANIA

Technical Assistance Needs	Period	Partners
Introduction of RDTs		
Re-visit the malaria control database and guidance on M & E issues comprehensively		
Review and finalize the M & E plan based on the WHO template		

### ZANZIBAR

Technical Assistance Needs	Period	Partners
QA/QC (RDT, microscopy, guideline development, etc)	November 2008	WHO
Development of M&E plan	3 <sup>rd</sup> Week September 2008	WHO
Training on RDT Quantification for HF utilization	January 2009	WHO

### UGANDA

Technical Assistance Needs	Period	Partners
Develop Integrated Malaria Vector Control policy guidelines	Jan 2009	
Proposal for round 9 GF	November 2008	AMFm), GFATM, , World Bank, MMV,PSI WHO
Strengthening National Medical Stores	Jan 2009	PMI, MSH, WHO
Consolidate Country Data base and operationalize the M&E Plan that were introduced.	December 2008	WHO
Programme Review		WHO, RBM

### Djibouti

Technical Assistance Needs	Period	Partners

## NORTH SUDAN

Technical Assistance Needs	Period	Partners
1. Support countries to plan and organize LLINs mass campaigns and mobilize all the partners to be part of it.		
2. Support countries to scale up diagnostics use and their QA: Training microscopist, introduction of RDTs, QA & QC.		
3. Availability of drugs issues (e.g. AS+SP)		
4. Support to enhance Inter-Country Communication		
5. Support for advocacy for strengthening the integration of the interventions and enhance collaboration with other health programmes such as Reproduction Health and raise awareness of IPT.		
6. Share best practices from the countries that have high coverage of IPT1 and IPT2		
7. Bring new partners and reactivate the existing in-country partnership		
8. Support country to plan and conduct surveys in order to report on the target achievement by 2010.		
9. Support countries to improve their M&E system, data collection timeliness and completeness, harmonization of the existing data collection systems (HMIS, WHO DB.etc)		
10. Resource mobilization for interventions and enhance HR capacity within the NMCP.		
11. Linkage between political commitment and financing commitment to increase the government contribution		
12. Support operational research		

## SOUTH SUDAN

Key issues	Identified needs/gaps	Way forward
<b><i>Vector control</i></b>		
Human resources	Recruitment of field staff Training for field staff Linkages to research institutions & laboratories	Recruit & train required staff Establish linkages with research institutions & laboratories
Utilization of ITNs	Strengthening BCC Communication strategy for ITN Replacements of ITNs	Develop communication strategy Advocate for proper use of ITNs
Use of IVM	Current focus on ITNs only Larviciding & environmental campaigns	Build capacity for implementation of other IVM components
Pesticides	No IRS yet Policies & guidelines not in place for pesticide safe handling and disposal	Develop necessary policies & guidelines Training of personnel & sensitization of communities
<b><i>Case management, diagnosis, malaria in pregnancy</i></b>		
Access to ACTs	Low access through private sector No ACT subsidy Community level ACT delivery coverage still low Poor treatment seeking behaviours	Employ innovative community based delivery approaches e.g. home management of malaria and mass LLIN campaigns BCC at community level Apply proven strategies to increase access through private sector
Pharmacy policy/law	Pharmacy & Poisons Bill still in draft Monotherapies still on market Poor regulation, especially in rural areas	Make provision for community level use of ACTs Pharmaceutical Management TWG to address phasing out of monotherapies Increase government commitment to NMCP Finalize Pharmacy & Poisons Bill
Quantification & forecasting	Frequent & prolonged stock outs of ACTs Expiries of RDTs Lack of data for consumption & morbidity to support quantification	Strengthen data collection & reporting on use of medicines & other commodities Pharmaceutical Management TWG to coordinate quantification & procurement

<b>Key issues</b>	<b>Identified needs/gaps</b>	<b>Way forward</b>
	Parallel & uncoordinated procurement planning by partners	planning
Management of severe malaria	Pre-referral drugs (Artesunate suppositories) poorly accepted Weak referral systems Many health workers particularly in lower levels not trained in severe malaria case management	Pre-referral training health workers and BCC targeting communities for pre-referral treatment
<b><i>Surveillance, monitoring &amp; evaluation</i></b>		
Routine malaria data	Problems with collection, transmission, timeliness & completeness MOH M/E unit (&HMIS) still being established	Strengthen HMIS Strengthen capacity to collect, report and use data (recruit and train staff at all levels) Integrate malaria data management into national HMIS
Calculation of malaria thresholds		Surveillance of clinical cases Establish TWG to coordinate with other services (agriculture, meteorology)
<b><i>Program management, IEC, etc</i></b>		
Human resources	Inadequate human resources Poor motivation to work in malaria	
Financing	No separate budget line for malaria programs	
Status of program	Control	
Systematic approach	Skills mix Efficiency & effectiveness Retention of skills	
IEC/Advocacy	Involvement of community as partners in malaria control No M&E for IEC Lobbying for malaria control strategies	

## Appendix 4: Participants for the EARN meeting

### EASTERN AFRICA ROLL BACK MALARIA NETWORK (EARN) ANNUAL IMPLEMENTATION COORDINATION MEETING

31<sup>st</sup> JULY TO 2<sup>nd</sup> AUGUST 2008, AT TAJ PAMODZI HOTEL, LUSAKA, ZAMBIA

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