



# Scaling up Treatment

**TREATMENT**



## Facilitators

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ROLL BACK MALARIA PARTNERSHIP  
FORUM V  
Cameroon, Yaounde, 16-19 November 2005

## Summary of Actions for Scaling up Treatment

- Development of national plans for scale-up
  - Financing; logistics; forecasting; procurement; distribution including HMM; IEC;
- National partnerships and country coordination for consensus
  - Link to regional and global networks
- Enhanced regulatory and monitoring systems
  - pharmacovigilance
- Financing - Subsidised / free to end-user
- Research to support scale-up – operational research – M and E, post-regulatory effectiveness and new formulations
- Capacity strengthening
  - User-friendly treatment services

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- 1: Affordable treatment for pregnant women and children (Burkina Faso: free for under fives and pregnant women)
- 2: Priority treatment to pregnant women and children (research, free treatment, specific medicines)
- 3: Train traditional practitioners on signs of severe malaria to facilitate referral (NGO in Cameroon)
- 4: Countries should be strengthened with respect to forecasting, storage, distribution (Novartis logistical challenges, Zambia stockouts and overstocking)
- 5: Quality assured diagnostics (rational drug use)

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- 6: Detailed implementation plans for rollout of policies to ensure equitable access for those at greater risk. Coverage as measure of impact. Include diagnostics.
- 7: Home management of malaria (access to ACTs, research, supply and monitoring) eg: Tanzania, Uganda, IRC in refugee camps
- 8: partnerships to facilitate subsidised ACTs to the private sector (eg: monotherapy use in Zambia and Rwanda)
- 9: Need for solid research (implementation, operational, monitoring and evaluation in support of policy implementation)

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- 10: Detailed implementation plans for rollout of policies to ensure equitable access for those at greater risk. Coverage as measure of impact. Include diagnostics.
- 11: Strong political commitment, ministry of finance (Ghana, Uganda, Zambia)
- 12: Effective regulatory system backed by legislation (Ghana, Liberia, Indonesia)
- 13: Planning with all stakeholders and consensus building
- 14: Coordination of supply and demand to bring about cost reduction (country needs differ from global forecasts)

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- 15: regional networks (EANMAT)
- 16: global stakeholders to agree on prices in transparent manner
- 17: post-regulatory studies on drug effectiveness (Zambia)
- 18: clarity on funding and procurement
- 19: national plans

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- 20: formulations for community and home level management (eg: pediatric)
- 21: capacity building
- 22: procurement and supply chain
- 23: research to support scale up
- 24: M and E pharmacovigilance to support scale up
- 25: user-friendly public health facilities (as for faith-based)

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- 26: IEC eg: Cameroon
- 27: at time of policy change a concrete plan for deployment throughout the system including funding and incentive systems
- 28: Severe malaria treatment free at health facilities (Mali)
- 29: Capacity strengthening (Zambia)

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