

## **SUMMARY REPORT OF THE 6<sup>TH</sup> PARTNERS MEETING OF THE RBM WEST AFRICAN REGIONAL NETWORK (WARN)**

*February 25, 2006*

The 6<sup>th</sup> RBM West African Regional Network (WARN) meeting was held from February 22 to 24, 2006 at the N'gor Diarama Hotel in Dakar, Senegal. A total of 32 participants from several organizations such as the following participated in this meeting: RBM Partnership secretariat, WHO (HQ and ICP, WHO/Senegal, WAHO, CDC, USAID/WARP and AWARE-RH, JICA, Plan International, JHPIEGO, HCP, RBM MPWG, NETMARK, PSI, Principal hospital of Dakar, PNLP-Senegal, University of Dakar, RAOPAG, RAOTAP I, and several manufactures of bednets/ITNs and insecticides (Bayer, Vestergaard Frandsen, SiamDutch, Intection, Sumitomo and Syngenta).

Objectives of the meeting:

- To conduct a review of past WARN activities
- To plan and budget for WARN related activities in 2006

The meeting was opened with a brief introduction by Dr Boi Betty UDOM of the RBM Partnership secretariat, who introduced Dr. Claude Emile RWAGOCONDO as the new focal point of WARN. Dr. Pape Moussa THIOR, coordinator of the national malaria control program of Senegal, welcomed all participants to Senegal while stressing the importance of global partnerships in the fight against malaria. Following these opening remarks, participants introduced themselves and Dr. RWAGACONDO presented the agenda for the 3 day meeting which had to be amended due to the fact that certain invited participants and presenters could not attend. A presidium constituting the following three members were subsequently elected:

- Chair: Dr. Kwame ASAMOA (CDC) and Dr. Johanna AUSTIN-BENJAMIN (WAHO).
- French/English Reporters: Alban P. QUENUM (RAOPAG)/ Annett HOPPE (CDC).

The first day of the 6<sup>th</sup> WARN meeting continued with a presentation by Dr. Betty UDOM who provided a very detailed update on the RBM secretariat, its successes, challenges and future directions. She stressed the importance of scaling-up interventions to reduce the burden of malaria, in other words, scaling up for impact. Until now, countries have faced numerous challenges in the fight against malaria including, but not limited to, reaching consensus regarding national policies, implementation of interventions and scaling up for impact, harmonization of partner support and resource mobilization. In particular, Betty presented the outcome of the RBM board meeting in Yaounde which reviewed the roles and responsibilities of the RBM Partnership and its Secretariat. She emphasized that the RBM secretariat is not expected to provide technical assistance but rather focus on activities related to global advocacy and communication strategies, collecting and sharing of all relevant information relating to partnership progress, coordination and harmonization of partner support, providing support for sub-regional activities, providing country level support, collecting and sharing of information relating to supply chain management, and serving the RBM partnership board. In conclusion, Betty presented the new organizational chart of the RBM Partnership and RBM related activities scheduled to take place in March of 2006. Questions from participants included the concern of the private sector in regard to free distribution of bednets/insecticide treated nets (ITNs) and whether this strategy to achieve Abuja targets may essentially suffocate and hurt the private sector. The representatives of the private sector were then reassured that there is no opposition/criticism from the public sector but rather that activities should compliment each other in order to achieve the maximum benefit for all (private sector, public sector and general population).

Following this update of the RBM secretariat, bednet/ITN and insecticide manufactures and distributors including Bayer, Vestergaard Frandsen, SiamDutch, Intection, Syngenta, Sumitomo Netmark, and PSI summarized their recent activities and presented a brief progress report. Based on their presentations/updates it is evident that bednets are becoming more and more available to the target and general populations.

Dr. Stéphane TOHON, from the WHO inter-country program office (WHO/ICP) for West Africa, presented malaria related activities in the West African region. WHO/ICP works in

several different domains such as policy change, development of treatment guidelines, case management, intermittent preventive treatment in pregnancy (IPTp), community based interventions, promoting the use of insecticide treated nets, surveillance of insecticide resistance, prevention of malaria epidemics, performance evaluations of national malaria control programs and development of new strategic plans. WHO/ICP office for West Africa faces many challenges including a very low re-treatment rate of bednets, availability of bednets and effective antimalarials due in part to inadequate global fund supplies, slow distribution of Global Fund monies and inadequate planning and implementation capacity at the provincial and district levels.

Dr. Juliana Yartey, chair of the Malaria in Pregnancy Working Group (MPWG) of the RBM Partnership followed with an update of the working group's activities. Malaria in pregnancy (MIP) continues to be advocated as a three prong approach including, IPTp, ITNs, and prompt, effective case management. The MPWG has assumed the following roles and activities: advocacy, flagging key issues, mobilizing partners to address bottlenecks, and ensuring information flow and exchange with other RBM working groups and partners. In her presentation, Juliana outlined several key issues and priority actions for scaling-up of MIP related activities including the availability of antimalarial medicines and commodities (IPTp/SP, ITNs), research to address implementation bottlenecks, monitoring and evaluation of programs and interventions, collaboration between national malaria control programs and reproductive health programs and the availability of relevant documents such as guidelines and frameworks to support implementation and scale up.

The final presentation of the day was made by Dr. Alban P. QUENUM, Deputy Coordinator of RAOPAG, which is the West African network for the prevention and control of malaria during pregnancy. He presented a brief overview of the network's goal and objectives concluding with recommendations and suggestions of RAOPAG's 2<sup>nd</sup> annual meeting which was held in October of 2005. Currently, the RAOPAG secretariat is located in Benin and has 9 member countries: Benin, Burkina Faso, Ivory Coast, Guinea, Mali, Niger, Nigeria, Senegal, and Togo. The network's main objective is to accelerate the implementation process of all interventions relating to the prevention and control of malaria during pregnancy in the West African Region. The

network is facing several challenges such as inadequate funding and support and the absence of a full time technical focal point. Following discussions, RAOPAG was advised to reinforce and improve its coordination between the secretariat and the member countries and to reinforce and support information flow and inter-country exchange of lessons learned and best practices.

The second day of the 6<sup>th</sup> WARN partners meeting included the following five activities:

1. Review of the report of the first day. It was requested that key points from all discussions following the presentations should be included in the report accordingly.
2. Dr. Bakary SAMBOU, from the WHO country office in Senegal, presented their current activities under the RBM initiative with great emphasis on the RBM partnership in Senegal. The partnership is the direct result of a situation analysis completed in the year 2000. The main objective of this partnership include achieving consensus around the RBM initiative by encouraging partners to participate in the development, implementation and funding of the strategic plans. Furthermore the RBM partnership expects that all partners support the objectives and principles set forth by the initiative. The RBM partnership has been established in Senegal and its successes and challenges have been identified. Following this presentation, the participants wanted to know the attributes of the 4 technical committees (pilot groups), the exact structure of a decentralized RBM partnership, what are the distribution mechanisms for ITNs and how Senegal despite its apparently strong RBM partnership managed to loose global fund resources?
3. Evaluation of the 2005 action plan for WARN. A review of all previously planned activities was completed and because the network did not have a focal point person, most activities were not realized.
4. The reorganization of WARN. The organization and characteristics of the RBM Partnership secretariat were elaborated once again but this time with main emphasis on the roles and responsibilities of the WARN focal point person. The focal point person coordinates activities, collects and shares all relevant information, and engages directly with all member countries. Following this discussion the RBM secretariat was asked to

update the terms of reference of the position of the focal point person. Furthermore it was decided that the network will meet annually which should overlap with the annual national malaria control programs meeting (West Africa Bloc) scheduled to take place in November. In addition a core group of the network was elected which includes the following members/partners: WAHO, WHO/ICP, UNICEF/WCARO, AWARE-RH/USAID, CDC Atlanta, Plan International, Netmark, PSI, and the focal point of WARN. The focal point was also asked to draft and develop the terms of reference for this core group which is scheduled to meet three times per year and the focal point has the liberty to invite other members and partners to these meetings.

5. Development of a 2006 action plan for WARN. At the end of the discussion it was agreed upon that this plan should be developed by incorporating ideas and needs identified in all country action plans, common and overlapping areas of interventions and all pertinent activities which were not realized in 2005. This activity continued the following day.

According to available information, the 6<sup>th</sup> round of GFATM will take place sometime in June. If that is indeed the case, there is a possibility for support by USAID/WARP for countries and for the networks to draft and develop their proposals. However, the need for such support has to originate from the countries and the networks themselves. Furthermore, it is necessary and beneficial to create a website for the network which may be linked to the current RBM website. This type of request should be directly communicated to the networks and countries.

The 3<sup>rd</sup> day of the 6<sup>th</sup> WARN meeting focused mainly on discussions about the 2006 action plan for the network. The scheduled presentation on 'Marginal Budgeting for Bottlenecks' was postponed until the next WARN meeting. Before the meeting was adjourned, participants were informed again about all upcoming activities and events relating to the global fight against malaria and they were encouraged to participate.

As indicated earlier, the next meeting of the network will be held back to back with that of the annual Planning and review meeting of the Countries in the Malaria West African

Epidemiological Bloc which is scheduled to take place in Guinea Bissau during the first week of November 2006. Bayer and Sumitomo have proposed to finance the meeting.

The meeting ended at 1.00 pm on Friday 24<sup>th</sup> February 2006 with closing remarks by Dr. Rwagacondo.