



USAID
FROM THE AMERICAN PEOPLE



President's Malaria Initiative

SUSTAINABILITY AND
TRANSITION



KEY MESSAGES

APPROACHES THAT WORKED

Project conducted through a systems building approach

MoH and districts are central to project planning, leading all implementation

Project supported technical, pedagogical and management capacity building at all levels

MoH links with districts strengthened

KEY MESSAGES

CENTRAL LEVEL MALARIA OVERSIGHT AND COORDINATION

With MAPD support MOH has

- developed key malaria documentation
- Supported National Malaria Framework reviews and creation
- developed policy and guidelines
- created tools and job aids
- developed and implemented malaria surveys
- supported grant writing
- supported malaria research

Coordinated and conducted TWGs (SME-OR, MIP, private sector, iCCM, IVM, SBCC) and other coordination platforms

Advanced private sector integration and coordination

KEY MESSAGES

CENTRAL LEVEL MALARIA OVERSIGHT AND COORDINATION

Advanced private sector integration and coordination

- Private sector strategies, policies and guidelines
- Support to the private sector platforms, e.g. TWG
- Built capacity of professional associations

Provided MoH with technical and managerial oversight to project, as well as district annual reviews and planning

MAPD supported MOH personnel to attend trainings, workshops and international events

COMMITMENTS

- Promote key approaches and lessons through coordination (existing and new actors)
- MoH support to malaria program through Global Fund
- Stock improvements, e.g., LLINs, iCCM commodities into national procurement supply chain system
- Continue to support districts to implement and ensure high-quality malaria control
- Increase and promote use of data for decision-making
- Promote MAPD lessons to existing and new projects

RECOMMENDATIONS

- Subnational stratification to be implemented
- Risk mitigation plans should be developed for existing and merging threats
- Build economic case for malaria elimination in Uganda

KEY APPROACHES

DISTRICT LEVEL

53 district transition plans
identifying prioritized approaches
and continuation plans

District technical, managerial and
leadership capacity built for sustainable
high-quality malaria control

Links strengthened between
MoH-District-HF-community

DISTRICT LEADERSHIP AND GOVERNANCE WITH MAPD DISTRICTS

- Developed district malaria plans, budgets and resource identification
 - Underwent a district capacity assessment
 - Built capacity of 265 district technical resource people who lead the HF capacity building initiatives
 - Improved data use for targeting action (HF in charges, HWs, Biostats, DHOS)
 - Improved stock management
 - timing and accuracy of quantifications
 - redistribution
 - Created mechanisms for private sector oversight
 - Professional associations
 - District mentorship
 - Review meetings
- Computers for data use and a malaria toolkit of updated malaria documents/tools
 - Improved information sharing — stakeholder review meetings
 - Increased self-funding for malaria, examples:
 - district funding for malaria microscopy trainings
 - district funding for iCCM review meetings
 - Developed 53 transition and sustainability action plans
 - Conducted multi-sectoral meetings for continuation of prioritized approaches

BUILDING HEALTH FACILITY CAPACITY

Through MAPD HFs have

- improved HW capacity
- mentored 14,000 HWs in malaria prevention and control
- increased use of it and innovation for mentorship during COVID-19 pandemic
- built capacity of 670 private HWs through the use of professional associations
- improved HF capacity
- provided clinical and IPTp DOT equipment
- provided computers to enhance data analysis, use and reporting
- refurbished health facility

Institutionalized collaborative quality improvement in HFs

- institutionalized a system of EQA for malaria microscopy at health facilities
- improved supply chain management (SPARS, mentorship, quantifications)
- improved data quality and data quality control mechanisms
- improved availability and use of data management tools
- strengthened weekly malaria surveillance
- improved reporting in 1,620 HFs

BUILDING COMMUNITY RESILIENCE

Transformative action-
focused behavior change

Increased linkages between
community-HF-districts

KEY DISTRICT COMMITMENTS

Implementation of district sustainability plan for continuity of malaria program

Establish and functionalize multi-sectoral district malaria taskforces to coordinate malaria services

Adopt and implement MAAM concept to accelerate malaria fight in districts

Border districts to strengthen cross-border collaboration for effective malaria control

Embrace subnational stratification

Maintain review meetings and leverage malaria activities and integration

KEY HEALTH FACILITY COMMITMENTS

Weekly surveillance through HMIS 033b to monitor malaria trends and plan action

Maintain routine malaria DQA using PHC

Monitor stocks of malaria commodities to boost community management

Maintain QI and clinical/mortality audits