Convening with Purpose: An Impact Analysis of Malaria Related Advocacy in the Asia-Pacific

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This Doctoral Thesis, Convening with Purpose: An Impact Analysis of Malaria Related Advocacy in the Asia-Pacific, presented by Isha Nirola and Submitted to the Faculty of The Harvard T.H. Chan School of Public Health in Partial Fulfillment of the Requirements for the Degree of Doctor of Public Health, has been read and approved by:

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CONVENCING WITH PURPOSE: AN IMPACT ANALYSIS OF MALARIA RELATED

ADVOCACY IN THE ASIA-PACIFIC

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A Doctoral Thesis Submitted to the Faculty of

The Harvard T.H. Chan School of Public Health

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Abstract

The Asia-Pacific Leaders Malaria Alliance (APLMA) hosts their annual convening, Malaria Week, and the Senior Officials Meeting (SOM), annually. It was originated to be a space where leaders pledge to agreements presented throughout the week, hold one another accountable for regional progress, and identify bottlenecks in malaria elimination. Over the last five years, Malaria Week and the SOM have focused on several regional elimination goals. However, the APLMA leadership team has not assessed the impact the Malaria Week and SOM sessions have had on national malaria elimination efforts. Using a mixed-methods, cross-sectional study survey I assessed the primary outcomes of interest, how participants felt the recommendations presented at Malaria Week and the Senior Officials Meeting influenced programmatic or policy actions taken at the national level. Our target population was high-level government officials and senior members of the NGO, academic, and private sectors. Roughly half of the study participants suggested that there was a perceived influence, but the majority could not clarify why, when asked specifically. In the qualitative responses, some participants suggested a need for stronger accountability and follow-up, country-level technical support, and help with resource mobilization.
# Table of Contents

Abstract .................................................................................................................................................. ii

List of Figures with Captions ................................................................................................................. iv

List of Tables with Captions .................................................................................................................... v

Acknowledgements .................................................................................................................................... vi

Introduction ............................................................................................................................................... 01

  COVID-19 and Malaria .......................................................................................................................... 02

  Burden of Malaria in the Asia-Pacific ................................................................................................. 03

  Host Organization ............................................................................................................................... 04

  Malaria Week and Senior Officials Meeting ..................................................................................... 06

  Doctoral Project .................................................................................................................................... 07

Background and Literature Review ......................................................................................................... 08

  Measuring Impact of Convening Events ............................................................................................ 08

  Purpose of Survey and Thematic Areas ............................................................................................. 13

  Framework ........................................................................................................................................... 20

Methods .................................................................................................................................................... 30

Results ...................................................................................................................................................... 35

Limitations .............................................................................................................................................. 61

Recommendations ................................................................................................................................. 63

Conclusion ............................................................................................................................................... 67

References .............................................................................................................................................. 69

Appendices .............................................................................................................................................. 72
List of Figures with Captions

Figure 1 – Evaluating convening preconditions.........................................................12
Figure 2 – Meeting legacy key areas..........................................................................21
Figure 3 – Key components to meeting legacy measurement....................................22
Figure 4 – Measurement milestones...........................................................................23
Figure 5 – Legacy measurement process for each legacy goal....................................29
Figure 6 – Continuous cycle of measurement..............................................................31
Figure 7 – Likert scale responses on integration sessions.........................................37
Figure 8 – Integration sessions: Specificity of influence ............................................38
Figure 9 – Likert scale responses on cross-border sessions.......................................41
Figure 10 – Cross-border sessions: Specificity of influence........................................42
Figure 11 – Likert scale responses on data sessions.....................................................45
Figure 12 – Data sessions: specificity of influence.......................................................46
Figure 13 – Likert scale responses on access sessions...............................................49
Figure 14 – Access sessions: Specificity of influence..................................................50
Figure 15 – Likert scale responses on financing sessions...........................................52
Figure 16 – Financing sessions: Specificity of influence.............................................53
Figure 17 – Likert scale responses on whole government sessions.............................55
Figure 18 – Whole government sessions: Specificity of influence.............................56
Figure 19 – Recommendations summary...................................................................66
List of Tables with Captions

Table 1 – Summary of findings per thematic area..........................................................58
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**Introduction**

In 2019, a *Lancet* commission report titled, “Malaria eradication within a generation: ambitious, achievable, and necessary” was released. The report, based on models developed by the Malaria Atlas Project that analyzed global trends and the impact of enhanced intervention techniques, provided compelling projections showing that it was possible to achieve the goal of almost no *Plasmodium falciparum* (*P. falciparum*) malaria within the Asia-Pacific region by 2030 (Feachem et al., 2019).

Despite an estimated 228 million malaria cases and over 400,000 deaths globally in 2018, the report made clear that the Asia-Pacific, in particular, had made remarkable progress over the last two decades. Between 2000 and 2015, malaria-related mortality in the Region fell by an estimated 75%, averting over 100,000 malaria-related deaths, and since 2012 the Region has achieved a 31% reduction in malaria cases (World Health Organization, 2020a). Increased financial, technical and operational support to malaria-endemic countries with their implementation of malaria control interventions, such as heightened surveillance, wide-spread deployment of Rapid-Diagnostic Tests (RDTs), insecticide-treated bed nets, indoor residual spray, and improved access to treatment and prophylaxis and heightened surveillance, contributed to this success. The Roll Back Malaria Partnership to End Malaria (RBM) and The Global Fund to Fight AIDS, Tuberculosis, and Malaria (The Global Fund) are chief among those globally who have supported these efforts.
RBM is a global malaria organization that started in 1998 and has coordinated action and contributed heavily to the progress made in malaria-endemic countries. RBM is comprised of over five hundred partners - from community health worker groups and researchers developing new tools to malaria-affected countries, businesses, and international organizations (RBM Partnership, 2021). The Global Fund has made huge, life-saving contributions toward necessary financing that has contributed to progression in malaria elimination over the last twenty years. The Global Fund provides 56% of all international financing for malaria. As of August 2020, the Global Fund has invested more than USD 13.5 billion in malaria control programs worldwide (The Global Fund, 2021a).

**COVID-19 and Malaria**

The COVID-19 pandemic has created global restrictions that have disrupted status-quo operations toward malaria elimination. National partners are being crushed under the pressure of keeping the healthcare system afloat to meet the pandemic's needs while also struggling to ensure their national malaria programs don't collapse, as COVID-19 continues to ravage the Asia-Pacific region. This requires adapting activities to fit the needs of the current climate better so that progress toward malaria elimination can continue.

COVID-19 has led to significant challenges to malaria responses globally. More than one year into the pandemic, significant disruptions to malaria prevention, diagnosis, and treatment services persist, leading to higher malaria morbidity and mortality rates than
expected. According to a recent WHO survey, during the first quarter of 2021, roughly one-third of countries reported disruptions in malaria services (World Health Organization, 2021b).

In the Asia-Pacific, COVID-19 has led to disruptions in essential malaria services and control efforts, setting back the region's progress. Data shows that between April and September 2020, compared to the same six-month period in 2019, malaria diagnoses fell 56%. In the same period, malaria treatment services plummeted by 59% in Bangladesh, Cambodia, India, Indonesia, Lao, Pakistan, and the Philippines, with those most vulnerable, in rural, resource-denied communities being hardest hit (The Global Fund, 2021b). In Papua New Guinea (PNG), COVID-19 cases have increased, and malaria prevention and treatment efforts are at risk of being compromised, which is of particular concern since it has one of the highest burdens of disease in the Region (Das and Morauta, 2021). Given the existing challenges, this may have a compounding effect on the progression of malaria elimination efforts.

**Burden of Malaria in the Asia-Pacific**

Despite the progress made in the Asia-Pacific region, more needs to be done to achieve the call to eliminate malaria by 2030 (Feachem et al., 2019). Currently, India, Papua New Guinea, Indonesia, and Pakistan bear the highest burden of malaria in the Region, accounting for 81% of the total burden across the Asia-Pacific (World Health Organization, 2020a). Malaria morbidity and mortality remain high in these countries, with recent progress reversing in some areas. Since these countries are also,
regionally, the hardest hit by COVID-19, they may struggle to meet the 2030 elimination deadline unless malaria elimination progresses more expeditiously (Feachem et al., 2019).

Several areas within the Asia-Pacific are moving into the near elimination phase, including the Greater Mekong Subregion (GMS)\(^1\) exemplified by the 90% reduction in malaria cases over the last twenty years. Finally, countries like China and Malaysia reported no malaria cases in 2019 and were expected to maintain this until 2020, while Sri Lanka was certified malaria-free in 2016. Nonetheless, some challenges remain across the Region. As the burden of P. falciparum malaria progressively declines in parts of the Asia-Pacific, the comparative burden of Plasmodium Vivax (P. Vivax) malaria will rise and remain the last hurdle to elimination. P. Vivax is the second most virulent malaria species after P. Falciparum. P. Vivax is considered a significant public health threat because of its ability to cause life-threatening disease complications, recurrent infections, miscarriage, and chronic infections. Due to its relapsing nature, P. Vivax is harder to detect and treat and is considered a threat to malaria control across the Asia-Pacific Region.

**Host Organization**

The Asia-Pacific Leaders Malaria Alliance (APLMA) and its Secretariat were created in 2013 to address growing concerns around the risk of malaria resurgence across the

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\(^1\) Greater Mekong Subregion includes Cambodia, the People's Republic of China (specifically Yunnan Province and Guangxi Zhuang Autonomous Region), the Lao People's Democratic Republic, Myanmar, Thailand, and Viet Nam.
Asia-Pacific region. Against the backdrop of concerns related to emerging drug resistance to Artemisinin Combination Therapies (ACT) in the Greater Mekong Subregion, there was a need for the Region to come together to share a regional, time-bound elimination goal. The APLMA Secretariat formally commenced operations in January 2014 in Singapore, where it is currently based. During the 9th East Asia Summit (EAS) in 2014, leaders agreed to "a malaria-free Asia-Pacific by 2030." They tasked APLMA to help protect the hard-won national gains and, ultimately, eliminate malaria in the Region (APLMA, n.d.).

The mission and vision of APLMA are “to support and facilitate the elimination of malaria across the Asia-Pacific by 2030, driving implementation of the APLMA Leaders Malaria Elimination Roadmap by benchmarking progress against priorities; coordinating regional action and brokering policy, technical and financing solutions to regional and national challenges; and, bolstering effective country leadership to expedite the elimination of malaria throughout the region by 2030” (APLMA, n.d.).

Asia-Pacific Malaria Elimination Network (APMEN) is a Joint Secretariat with APLMA and serves as the technical lead. APMEN was established before APLMA in 2009 to support and highlight the malaria elimination work underway in the Asia-Pacific region. It was launched at the UN General Assembly by Australian Prime Minister Kevin Rudd and was funded separately. APMEN serves as a platform that enables collaboration and exchange between regional malaria control programs and various international elimination partners from the academic, non-governmental, multilateral, and private
sectors. There are three working groups within APMEN - P. Vivax, Vector Control, and Surveillance – co-chaired by National Malaria Program Managers and members from leading organizations. In 2017, they united to combine and streamline APLMA’s convening work with APMEN technical work. While APMEN operates at a joint-secretariat level, it does not have its own board. The integration of APLMA and APMEN was less robust until 2019 but now work together to strengthen the integration of the regional elimination efforts and provide support to countries and communities across the Region as they work toward malaria elimination.

A core component of APLMA/APMEN’s strategy has been to convene key stakeholders and advocate for malaria eradication work during the annual Malaria Week and the Senior Officials Meetings. The organization’s purpose is to strengthen information sharing and collaboration across the Region, with the ultimate goal of achieving regional and country-level goals toward malaria elimination.

**Malaria Week and Senior Officials Meeting**

The Senior Officials Meeting, and the surrounding convening events, have been held by APLMA/APMEN annually during Malaria Week since 2015. The Senior Officials Meeting (SOM) is the culminating event of Malaria Week. It provides a space for leaders to pledge to agreements presented throughout the week, hold one another accountable for regional progress, and identify bottlenecks in malaria elimination. Over the last five years, Malaria Week and the SOM have focused on several regional elimination goals. APLMA measures progress against these goals annually through the APLMA
Dashboard (see Appendix A). Beyond the dashboard, the APLMA and APMEN Secretariat measure the impact of specific themes discussed at greater length during Malaria Week and the SOM.

At present, APLMA/APMEN, like many international and regional entities, does not have enforcement capacity, limiting their ability to implement certain best practices toward malaria elimination. However, they are positioned to bring countries in the Region to carry out inter-country work and provide technical support at the country level to assist with national malaria elimination efforts. Historically, APLMA has poured a significant amount of financial and human resources into making these events happen; however, the organization has not fully assessed the impact it has had on malaria elimination efforts at the national and regional level.

**Doctoral Project**

My doctoral thesis focuses on the impact of APLMA/APMEN convening events, specifically Malaria Week and the Senior Officials Meeting, on malaria elimination efforts across the Asia-Pacific region. Historically APLMA/APMEN has primarily served as a convening body sustained within a regional platform. However, it is not clear that the convening efforts, without linkage to country needs and priorities, have accelerated country-level progress, and by extension, regional-level progress toward malaria elimination. A goal of this thesis is that the findings can be used to inform organizational strategic planning for the next year and beyond so that organizational efforts are making purposeful and impactful contributions toward malaria elimination across the Asia-
Pacific Region. Additionally, the findings of my evaluation can also further inform successes and best practices when planning and implementing convening events and understand areas where the events can be modified or improved.

**Background and Literature Review**

*Measuring Impact of Convening Events*

Convening can be a powerful mechanism to foster collaboration, increase awareness and create collective change (TCC Group, 2020). The Rockefeller Center describes the term *convening* as “a gathering that brings together a diverse group of participants for a clear purpose and generates insights or action beyond what any single participant could achieve on his/her own” (The Rockefeller Foundation, 2013). Although people may feel inspired and informed after attending convenings, this does not always justify the expense or clarify the impact of convening in the first place. Effective convenings should accomplish a clear purpose and generally have intended outcomes. However, there is limited literature on measuring the impact of convening, particularly on population health outcomes. There is some literature around designing convenings and even on the successful implementation of convenings. The effectiveness, however, of convenings on social impact has not been discussed in-depth, and there are no known validated tools that exemplify rigorous scientific evaluation of the impact, or perceived impact, that convening has on social change. Understanding the impact is particularly important given the financial, time, and human resources allocated toward planning and carrying out convening events, particularly large conferences. APLMA, like many
international and regional organizations, lacks formal enforcement capacity, so it remains challenging to mandate health policy adoption and program best practices. However, like other organizations, their reputation, particularly their backing of highly influential donors like the Gates Foundation and DFAT, the Australian donor arm, enables APLMA to leverage their informal authority and influence within the Region.

APLMA can look at the WHO-backed World Health Assembly (WHA) as a potential example for convening. The World Health Assembly is the decision-making body of WHO. At their annual convening in Geneva, Switzerland, delegates from the WHO Member States decide major policy questions and approve the WHO work program and budget. Additionally, this is a forum where representatives commit to carrying forward policies and plans discussed during the WHA convening sessions (World Health Organization, 2021a). However, a critical difference between the WHA and Malaria Week and SOM, aside from the narrower regional and health focus, the WHO has a technical program presence in the countries where member states are from. In contrast, APLMA has traditionally served solely as a convening organization and hasn't provided technical support to countries at the national level. As such, there is a lack of clarity around how impactful APLMA/APMEN's Malaria Week and SOM events have been in progressing malaria elimination.

In the case of APLMA/APMEN, the purpose for Malaria Week and the Senior Officials Meeting (SOM) is to provide a space for stakeholders in the malaria eradication space to share ideas and best practices, the latest in innovation, advocate for
recommendations, and create connections that can increase collaboration beyond the scope of the meeting. Furthermore, the culminating event of Malaria Week, the Senior Official's meeting (SOM), is where senior leaders, primarily Ministers from the national governments, discuss and commit to carrying forward the session's recommendations. APLMA/APMEN design and implement these convening and advocacy events to contribute to malaria elimination efforts across the Region.

Only a few organizations have looked into how to measure or quantify the impact of convening events. BestCities Global Alliance has been looking for a way to "quantify the long-lasting legacy of events" to demonstrate their value (Lee, 2020). The Alliance carried out a study that included interviews and surveys conducted with different associations from a wide range of sectors and disciplines. Their study report highlights another 2018-2019 study by MeetDenmark that discusses the value of meeting legacies (BestCities, 2020). The MeetDenmark study heavily influenced the development of the BestCities Alliance meeting legacy toolkit, which is designed to strengthen the impact of events, primarily focused on prospectively plan events to understand the "legacy" this event should have in the future (BestCities, 2020). In APLMA/APMEN events, the intended legacy would ideally be correlated to malaria elimination in the Region. To understand how to build that legacy, APLMA/APMEN should apply toolkits like this to plan their sessions more purposively, including assessing the impact of legacies past and how to create a legacy that will endure future events. The survey evaluation will attempt to do some of this. I will also use this framework later in this paper to break this down further.
The TCC Group Solutions for Social Impact suggests two primary preconditions when effectively executing a convening – reasons to convene and having convening power (see Figure 1 below). They suggest that prospective conveners should assess four dimensions when determining if they have a clear and compelling reason to convene: first clear convening objectives, second, the readiness of stakeholders, third is the salience of the issue, and finally, the unique strategic value of the convening event (TCC Group, 2020). I believe ALPMA/APMEN can improve their efforts in mapping out a clear and compelling reason for convening. At present, the organizers for the Malaria Week and Senior Official Meeting events have not set clear objectives for the event, nor does it seem that there is a mechanism for them to assess the unique strategic value. I will review this in greater detail under the framework section of this paper.
"Convening Power" is defined as "exercising expert, referent, or reward authority to create space on a particular topic of between a set of distinct stakeholder groups with the intent to influence the future collective and individual solution-oriented action of those convened (TCC Group, 2020)." There are four dimensions of convening power that the TCC group suggests are imperative for impactful convening. Unlike the previous precondition of reasons to convene, APLMA/APMEN appears to have strong "Convening Power." The four dimensions noted are credibility, cachet, diverse experience, and financial and physical resources (TCC Group, 2020). As we aim to assess the impact of APLMA/APMEN convening events, we must understand how the

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organization has leveraged each of these two preconditions in their event planning and the long-lasting legacy of APLMA/APMEN events, specifically Malaria Week and SOM.

**Purpose of Survey Assessment and Thematic Areas**

APLMA/APMEN invests significant time and resources annually during Malaria Week, its side events, and the APLMA Senior Officials Meeting (SOM). It is imperative to evaluate the effectiveness of these convenings and the impact on malaria elimination efforts in the Region, which is the larger purpose of this survey evaluation. To carry out this assessment, we surveyed SOM participants from the past two years to understand which recommendations from the Malaria Week and SOM convenings contributed to policy or programmatic action to help set the strategic vision and budget going forward.

The main question we aimed to answer through this assessment was:

*How have the convening and advocacy work through SOM and Malaria Week influenced malaria elimination programmatic and policy efforts across the Asia-Pacific?*

For this survey, we explored six thematic areas in greater depth during the two most recent Malaria Week and SOM events in 2019 and 2020. These themes were: Integration, Cross-Border Collaboration, Timely Data, Access, Sustainable Financing, and Whole Government Approach.

The rationale for focusing on these six thematic areas was two-fold. First, these thematic areas have been strategic goals covered over the last two years and issues highlighted in both major global malaria reports—the World Malaria Report of 2020 and *The Lancet* Commission on malaria report that came out in 2019. Second, with national
malaria programs facing increasing pressure to reallocate time and resources toward tackling COVID-19, sometimes at the expense of malaria control, the topics of integration and whole government response are of particular importance today.

Our target audiences for this survey assessment were high-level government officials and senior members of the NGO, academic, and private sectors. In respect of their time, we limited the number of questions on the survey to incentivize participation given competing priorities. Below we outline the specific recommendations put forth at the Malaria Week and SOM sessions that I will use to evaluate the degree of influence they had on participant's post-convening malaria elimination work.

Integration

COVID-19 has impacted government revenues and health budgets in unanticipated ways. This year, an analysis carried out by WHO and partners suggests that malaria cases will increase significantly, and death rates could double if COVID-19 challenges disrupt essential malaria interventions. Also, this global pandemic has highlighted the need for countries to bolster disease surveillance mechanisms to diagnose fever illnesses. The WHO called on Ministries of Health and National Malaria Control Programs to ensure malaria prevention and treatment activities continue while also addressing the needs of the COVID-19 pandemic (World Health Organization, 2020b). With financial resources for malaria redirected toward COVID-19 relief efforts, the risk of resurgence linked to decreased financing has increased. A key recommendation that surfaced at the virtual Malaria Week 2020 was to integrate malaria activities within the
general health system to sustain financing during this period of fiscal constraints. This recommendation mirrors what global experts have recommended, specifically that national governments leverage existing systems for integrating COVID-19 and malaria control (Rahi & Sharma, 2020). This is an example of why APLMA leadership must assess if their convening events support these efforts or determine if other activities, aside from convenings, will strengthen the continuity of malaria activities.

**Cross-Border Collaboration**

The movement of malaria across international borders continues to pose significant obstacles to achieving malaria elimination. Malaria prevalence is higher in some border areas than in other areas due to higher forestation, lower access to health services, less treatment-seeking behavior, difficulties in deploying prevention programs to hard-to-reach communities in rugged terrain, and the constant movement of people across porous national boundaries (Wangdi et al., n.d.). COVID-19 has further underscored the importance of cross-border collaboration for disease surveillance and response. Similarly, malaria elimination in border areas is conditional on structured and systematic partnership and exchange of information across borders. High-burden geographies such as PNG, Indonesia, India, and Pakistan, also have an associated impact on the elimination ambitions of their neighboring countries. For example, Bhutan and Nepal are at risk because they border India, and Timor-Leste may be at risk because of the shared border with Indonesia and PNG. Imported cases from high-burden regions where malaria is endemic pose a threat to progress made in neighboring countries. As such, cross-border efforts to support elimination are imperative. In addition to the
challenges related to varying transmission dynamics across both sides of the border, political and diplomatic complexities can thwart the success of cross-border efforts.

A key recommendation from the APLMA SOM to address this problem was strengthening cross-border collaboration and ensuring surveillance and information sharing across the border. For that, engaging stakeholders beyond the health sector, like ministries of finance, foreign affairs, and defense, is crucial.

**Timely Data**

Durable and expansive surveillance systems are vital for effective malaria elimination. This should include timely and complete case reporting, integration of corresponding data, such as census or health survey information, a centralized data storage and management system, systematized quality data analysis, and tailored outputs to inform timely and targeted intervention responses (Ohrt et al., 2015). Inadequate surveillance data will inhibit countries from monitoring progress towards elimination and targeting interventions for an efficient malaria response (Lourenço et al., 2019). As discussed above, there are various forms of malaria. While countries have made significant progress toward malaria elimination, it has also increased heterogeneity of the malaria burden and vector behavior. As such, a one-size-fits-all approach for data will not work. Transmission patterns can differ based on the geographical areas and require appropriately targeted responses. For example, suppose national and regional data do not reflect localized transmission dynamics. In that case, targeting appropriate interventions will be difficult (i.e., areas, where outdoor biting is more prevalent requires
treated bed nets, whereas indoor biting may require indoor residual sprays). Data and surveillance systems need to have increased specificity so that the scattered yet highly endemic pockets at the subregional level are correctly captured for appropriate, precise, and timely response at the local levels. The WHO’s Malaria Policy Advisory Committee recommends a data-driven approach that prioritizes interventions at a sub-national level based on local evidence and driven by local context (World Health Organization, 2019).

**Access**

Achieving malaria elimination will require finding and treating every case by improving the use of existing malaria tools, ensuring access to tools by the most underserved populations, and introducing new tools to manage *P. vivax* better where necessary (mmv, 2020). During Malaria Week, new diagnostic tools and treatments to address *P. vivax* malaria, such as point-of-care G6PD diagnostics\(^3\) Single-dose treatment options were proposed as part of the solution. The sessions also highlighted the importance of each country’s ability to leverage and adapt existing tools.

Another critical part of access is procurement. To ensure malaria elimination by 2030, countries need accelerated policy and procurement processes to introduce new malaria case management tools – spanning from vector control supplies like bed nets and sprays, diagnostic tools like Rapid-Diagnostic Tests (RTDs) and microscopy, to malaria treatments like antimalarial drugs. Building on lessons learned during COVID-19,

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\(^3\) A G6PD test measures the levels of glucose-6-phosphate dehydrogenase (G6PD), an enzyme in your blood. When a person has *P. Vivax* malaria, there is a deficiency of G6PD, and this diagnostic test can assess if there is this deficiency.
diversification of manufacturers is vital to mitigate risk in the event of an industry downturn and allows for continued innovation that can enhance the quality and availability of supplies of essential commodities. Additionally, governments should set up regulatory environments in a way that is conducive to fully functioning supply-chain systems.

**Sustainable Financing**

The 2019 *Lancet* report estimated that if governments spend a median amount of 0.07% of their GDP toward malaria, it will result in billions of additional dollars toward malaria eradication efforts. Additionally, the Global Fund and the President's Malaria Initiative (PMI) account for one-third of the financing toward malaria eradication globally. In 2013 the Global Fund launched the Regional Artemisinin-resistance Initiative (RAI) to help combat the rise of drug-resistant malaria in the Greater Mekong region. RAI has several countries in the GMS including, Thailand, Vietnam, Cambodia, Laos, and Myanmar, that procure and disseminate supplies such as insecticide-treated nets, rapid diagnostic tests that don't require a laboratory or medical expertise, and quality assured drugs, which together have resulted in a 91% reduction in malaria deaths from 2012 to 2017 (The Global Fund, 2019). However, financial support to the Region must respond to the changing dynamics, now that countries like India, Papua New Guinea, Indonesia, and Pakistan carry the most considerable burden of disease. While there has been some in-country coordination, strengthened efficiencies and additional strategic planning and policy alignment between donor agencies can deepen sustainable financing goals (Feachem, 2019).
During both the 2019 and 2020 Malaria Weeks, participants also reviewed the importance of sustaining malaria program funding to ensure progress toward elimination. Government representatives must be committed to providing sustainable financing so that national programs can continue through 2030 and beyond. Again, this is an opportunity where APLMA/APMEN may consider moving convening events on Sustainable Financing, from presentation and overview of the situation to actual working groups that can move the needle on increasing financing.

**Whole Government Approach**

Malaria elimination across the Asia-Pacific region requires an inter-ministerial and whole government approach. Awareness and commitment by all government stakeholders are essential to expedite malaria elimination. Government leaders must empower agencies and officials to see such commitments through. For example, Ministries of Health are responsible for designing and implementing specific elimination activities. Ministries of Finance are also crucial for ensuring sustained funding, including deploying new types of financing as the burden of malaria declines. As mentioned earlier, Ministries of Foreign Affairs also have a crucial role in ensuring cross-border coordination. Likewise, Ministries of Agriculture, Trade, Immigration, and Industry must ensure that regulations are harmonized and enforced. In the past, strong coordination within the government led to successful elimination efforts (Jones et al., 2020).
Framework

I used the BestCities Framework for Meeting Legacy Measurement to better understand how APLMA currently plans the Malaria Week and SOM events and identify the gaps to improve the process and ensure a more significant impact for future events. This framework suggests that, if planned with the event legacy in mind, an event can have a more significant impact in achieving both the goals for the event and the longer-term legacy goals associated with APLMA – in this case, malaria elimination efforts (BestCities, 2020).

This framework is suitable for this project because APLMA/APMEN is at an organizational crossroad. They need to determine whether or not they should continue as a convening organization or redirect their programmatic focus elsewhere. BestCities Global Alliance has been looking for a way to "quantify the long-lasting legacy of events" to demonstrate their value (Lee, 2020). The Alliance developed a toolkit intended to strengthen the impact of events, primarily focused on prospectively plan events to understand the "legacy" this event should have in the future. For APLMA/APMEN events, the intended legacy would ideally be correlated to malaria elimination in the Region.

The BestCities Global Alliance provides a framework to do this. First, they describe "The Fundamentals of Meeting Legacy Measurement," which emphasize that desirable meeting legacies will:

1) Enhance the legacies of meetings by ensuring a more strategic and purpose-driven approach to meeting planning and implementation
2) Provide ‘real-world’ evidence on the actual value of meetings and their contributions and benefits to wider society

They discuss the importance of meeting legacy goals, which they have broken down into five key areas: Environmental Legacies, Political Legacies, Economic Legacies, and Sectoral Legacies and Social Legacies (see Figure 2 below).

**FIGURE 2 – MEETING LEGACY KEY AREAS**

![Meeting Legacy Key Areas Diagram](image)

In the case of APLMA/APMEN, the Malaria Week and Senior Officials Meeting events would fall under Social Legacies – with the goal being to eliminate malaria across the Asia-Pacific by 2030. However, while the broader goal is understood, the BestCities framework also describes the importance of establishing meeting outcomes that event organizers can assess at the end of the meeting or convening event and over time. The survey assessment and findings in this doctoral thesis intend to do that, partly because the organization does not systematically carry out this type of evaluation after the events. According to the BestCities legacy framework, organizers should implement this type of evaluation after each convening session to ensure purposeful convening.

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BestCities cite three key components needed to ensure proper evaluation of a convening event's legacy – a meeting legacy pathway, a validation process, and a continuous cycle of measurement objectives (see Figure 3 below).

**FIGURE 3 – KEY COMPONENTS TO MEETING LEGACY MEASUREMENT**

![Figure 3 - Key Components to Meeting Legacy Measurement](image)

I will use this framework to assess the planning process for Malaria Week and Senior Officials Meetings and to identify gaps for their consideration.

**Meeting Legacy Strategic Pathway**

The BestCities Legacy framework offers the Meeting Legacy Strategic Pathway, which MeetDenmark initially established (BestCities, 2020). The Meeting Legacy Strategic Pathway outlines eight key steps to create a structured planning and evaluation process. The pathway includes planning milestones, which are focused on identifying the goals that an organization or association has established, and meeting measurements used to inform planning meeting activities. It also includes measurement

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milestones focused on validating broader meeting outcomes and ensuring ongoing monitoring of the event’s legacy (see Figure 4 below).

**FIGURE 4 – MEASUREMENT MILESTONES**

Let’s walk APLMA/APMEN through this process. We can see where the organization has successfully established each of these components and opportunities to build out this process further.

Milestone #1 – Identify Association Legacy Goals

As mentioned, the mission and vision of APLMA are "to support and facilitate the elimination of malaria across the Asia-Pacific by 2030, driving implementation of the APLMA Leaders Malaria Elimination Roadmap by benchmarking progress against priorities; coordinating regional action and brokering policy, technical and financing solutions to regional and national challenges; and, bolstering effective country leadership to expedite the elimination of malaria throughout the region by 2030" (APLMA, n.d.). APLMA has this first planning milestone covered, which is foundational for any convening events they plan.

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Milestone #2 – Determine How Goals Are Measured

As per this framework, APLMA has an organizational mechanism to track progress and achievements in malaria control and elimination across Asia and the Pacific called the APLMA Leaders Dashboard. This dashboard helps countries track progress towards the 2030 goal. It highlights bottlenecks, encourages prompt action, serves as a critical advocacy tool to demonstrate progress in the Region, and leverages Governments’ and partners continued support for financing malaria elimination. While APLMA’s Leaders Dashboard provides an important tracking mechanism, it may need to be enhanced as more countries progress towards elimination. However, in the context of this framework, specifically this planning milestone, the dashboard provides some foundation for how organizational goals are measured.

Milestone #3 – Identify Meeting Legacy Goals

Based on planning milestones one and two, it does seem that APLMA has been relatively successful in achieving planning milestone three – identifying a legacy goal. The legacy goals are tied to the organizational goal of malaria elimination in the Region. The convening organizers within APLMA have leveraged the indicators set out in the organizational dashboard, linked to malaria elimination in the Region, to guide the topics for the different event sessions when organizing Malaria Week and the Senior Officials Meeting in the past. Outlining specific meeting legacy goals will ensure that participants can stay focused on the goals they aim to achieve and for which the meeting can be leveraged.
Milestone #4 – Determining the Meeting Legacy Measurement

While APLMA has set foundational elements for impactful convening sessions, as outlined above in the first three planning milestones, this planning milestone – determining the meeting legacy measurement – is where they begin to fall short. APLMA covers some elements of this milestone via a feedback survey for each session. However, the survey is not designed with a pre-planned measure for success. So while there is a form of evaluation, they have not set a clear set of indicators that measure the meeting legacy they want to achieve. Further, APLMA has not pre-emptively established a specific meeting legacy before the event. The survey carried out as part of this doctoral thesis attempts to assess the impact or perceived impact the event sessions have had. However, because the measures for the meeting legacy were not predetermined, my survey tool could not assess a predetermined meeting goal. While the survey I used for my doctoral thesis is similar to what is needed under this milestone, it wasn’t developed before Malaria Week, so it doesn’t meet the description requirements. That said, there is an opportunity to use the findings from my study to help the organization meet the requirements of this planning milestone in the future by setting indicators to assess the meeting legacy in advance.

Milestone #5 - Identify Meeting Outcomes

Once APLMA sets the specific measurement for meeting legacy goals, the next step is to identify meeting outcomes that will help drive meeting legacy goals. Event planners should develop outcome measures for each session activity at Malaria Week and the Senior Officials Meeting. For example, one meeting outcome could be that countries
create coordination plans during Malaria Week to strengthen cross-border collaboration. This type of predetermined outcome will allow planners to develop specific activities to help them achieve this goal.

Milestone #6 – Planning Meeting Activities

Once the meeting outcomes are defined, the organizers can plan meeting activities to help secure their desired meeting outcomes. Using the cross-border collaboration example above, APLMA has known that Timor-Leste and Indonesia rely on cross-border collaboration for surveillance activities and screening migrant populations at the point of entry for each country. Afghanistan and Pakistan have similar needs for strong cross-border collaboration. When planning a future session on cross-border collaboration, the organizers may consider designing an inter-county working group activity, where country representatives are in pairs or groups based on their specific inter-country needs instead of a general presentation of cross-border collaboration best practices. Designing an activity with this level of specificity may result in achieving the particular meeting outcome set in this planning milestone.

Milestone #7 – Validating Meeting Outcomes

Once convening or meeting events are complete, it will be necessary for the organizers to have the ability to quantify meeting outcomes progress. While the previous feedback surveys for the Malaria Week and Senior Officials meetings provided some information, since specific meeting outcomes weren’t predetermined, they could not be tied back to the organizational goals and the meeting legacy in a concrete way. The survey
evaluation findings may help inform how to set meeting outcomes as noted in planning milestone five and can be used as a template to validate meeting outcomes, as stated under measurement milestone seven.

Milestone #8 – Monitor Legacy

Ultimately it will be essential to assess and monitor the achievements made toward meeting legacy goals and APLMA’s organizational legacy goals over time. Again, the survey evaluation for this doctoral thesis does this to some degree, but it is incomplete because the previous milestones were not pre-established. Practices such as quarterly meeting updates and check-ins could be an example of how one might monitor and create accountability for promises made during the sessions and actions required. Event organizers need to distinguish between the outcomes and the legacy goals. The legacy goal is specific to the long-term legacy of the event, whereas the session outcomes and overall meeting outcomes are specific to the convening event themselves. Validation of an event’s legacy accomplishments necessitates continued monitoring of the indicators associated with the legacy goal for years following a convening events conclusion.

The Legacy Validation Process

Of the eight key milestones set out above, four are specific to monitoring and evaluating a meeting legacy goal – milestone three and four, which planners should complete in the pre-event stage, and milestone seven and eight, which they should meet post-event. As outlined in the figure below, this is a logic model that APLMA can use when planning
the Malaria Week and Senior Official Meeting events. This logic model visualizes how each of the eight milestones flows together and is linked to different parts (see Figure 5 below).

**FIGURE 5 – LEGACY MEASUREMENT PROCESS FOR EACH LEGACY GOAL**

The Continuous Cycle of Measurement Objectives

The final component to ensure a robust measuring of a convening event's legacy is a continuous cycle of measurement objectives. Building on the Legacy Validation Process, event planners should prioritize meeting activities designed to have the most impact and increase support of event stakeholders early on. Malaria Week and SOM organizers can use the findings of the survey evaluation carried out in this thesis to determine which activities have had the most significant impact in the past and what revised activities can have a more substantial impact in the future. The second objective in the measurement cycle is to plan for legacy measurement. This cycle includes guidance for developing a metrics and data collection system and effectively monitoring meeting outcomes and legacy potential. In preliminary conversations with the Director of Policy, who oversees the APLMA dashboard, we discussed the possibility of creating a separate section within the APLMA Dashboard where specific meeting outcome indicators can be housed and tracked at a pre-set interval throughout the year and across years. Next is evaluating outcomes, which includes setting meeting outcomes that will affect how the meeting contributes to the overall legacy goal. Malaria Week and SOM organizers need to set appropriate outcome indicators and then use the dashboard and a broader reporting platform to evaluate and present the outcomes to participants and other stakeholders. The final objective is monitoring the legacy. Once the lifecycle of the meeting has ended, the legacy of the meeting can continue long after its completion. As part of this cycle, the validation learnings will then feedback into future Malaria Week and SOM events (see Figure 6 below).
Methods

Study design:

I assessed the association between recommendations offered during the SOM and Malaria week using a mixed-methods, cross-sectional study survey. The primary outcomes of interest were to understand the link between how participants felt they could apply recommendations presented at Malaria Week and the Senior Officials Meeting into any programmatic or policy actions taken at the national level. While there

are multiple focus areas during Malaria Week and the Senior Officials Meeting, I looked at six of the most critical thematic areas: Integration, Cross-Border Collaboration, Timely Data, Access, Sustainable Financing, and Whole Government Approach.

The reasons we focused on these six thematic areas were two-fold. First, given that national malaria programs face increasing pressure to reallocate time and resources toward tackling COVID-19 in their countries which may come at the expense of progress made toward malaria, issues of integration and the whole government approach are incredibly timely. Second, the other thematic areas have been priorities covered over the last two years and have been issues highlighted in both major global malaria reports - the World Malaria Report of 2020 and the Lancet Commission on Malaria report that came out in 2019. Our target audiences were high-level government officials and senior members of the NGO, academic, and private sectors.

I surveyed a sample of participants who attended the Malaria Week and Senior Officials Meetings events in 2019 and 2020. The survey tool contained both quantitative and qualitative questions (see Appendix B).

**Survey Development:**

I used an iterative survey design approach to develop the survey questions. There were three rounds of survey development. In the first round, as an impartial and independent consultant, I worked with the APLMA/APMEN Director of Access and Policy and the APLMA CEO to determine questions and finalize the list of participants. The next round
of iterations was conducted between January 4, 2021, and January 15, 2021, and based on the broader APLMA/APMEN leadership team's feedback on the survey questionnaire. Once this was complete, I launched a pilot among twenty National Malaria Program leaders across the Region. I created unique links for each individual on the Qualtrics platform to track survey participation and follow up with participants who had not completed the survey individually. The target was to have at least ten people out of the twenty participants complete the survey. With fourteen people responding after one round of follow-up, we achieved a 70% response rate, informing our expectations going into the full official launch. The pilot period was between January 19, 2021, and January 27, 2021.

Participants and sampling:

Of the estimated 185 participants at the 2020 Senior Officials Meeting who attended one hour or more of the SOM session, I surveyed a sample of 111 survey participants. I did not survey all 185 participants because the leadership team felt it would be too large of a sample size, and some of the participants would not provide us with the information we were looking to gather. I used a purposive sampling method, prioritizing approximately 40% of the sample representing the government sector, 15% representation from bilateral or multilateral organizations, 15% representation from the NGO sector, 15% from academia, and 5% from the private sector. I purposively sampled survey participants to ensure that senior officials from each sector and country were included. I also prioritized individuals who participated in both the 2019 and 2020
Senior Officials Meeting. The survey was voluntary and provided no financial incentives to survey participants.

**Sample calculations:**

To determine the sample size of survey participants out of the 185 total event participants, we used properties of finite samples in constructing confidence intervals as described below. We set our desired confidence level at 90%, 5% margin of error, and the null probability that a given survey participant takes action based on recommendations equal to .5. These quantities are encoded by the variables z, epsilon, and p, respectively, in the equations below.

Unlimited population: $$n = \frac{z^2 \times p(1-p)}{\varepsilon^2}$$

Finite population: $$n' = \frac{1 + \frac{z^2 \times p(1-p)}{\varepsilon^2 \times N}}{n}$$

Where z is the z-score corresponding to a 90% confidence level, epsilon is the margin of error, N is the population size, and p is the null probability of taking action based on a recommendation. This resulted in the 111 sample size.

As shown above, it is important to note that the equation needs to be adjusted when considering a finite population. The denominator in the finite population equation is the finite population correction factor and is necessary because it cannot be assumed that all individuals in a sample are independent. For example, if the study population involves ten people in a room with ages ranging from 1 to 100, and one of those chosen
has an age of 100, the next person selected is more likely to have a lower age. The finite population correction factor accounts for factors such as these.

**Ethics approval:**

This study does not require IRB approval because the survey serves primarily as an evaluation of AMPLA and APMEN malaria week events. As such, the findings from these surveys are not generalizable. While we may share these findings as part of assessing the perceived value of convenings, the study does not associate all malaria-related convenings with their impact on malaria elimination.

**Data collection:**

We created the survey questionnaire using three types of questions – nominal, Likert scale, and free text. I populated the questions into a Qualtrics online survey and asked a sample of the SOM and Malaria Week participants, via the survey, if the SOM and Malaria Week recommendations influenced their actions to create program and policy change, to what degree they did, and what the outcomes were if the recommendations did influence their actions. As an independent consultant, I administered the survey for APLMA/APMEN without other staff involvement to ensure participants felt they could share information more freely and minimize bias.

I launched our survey to the 111-person sample on February 1, 2021 and administered it through March 18, 2021. Fifty-nine survey participants completed the survey during this period. I did two rounds of follow-up during this period after the initial launch, which resulted in an estimated 53% response rate for the survey. Data was entered by the
survey participants and stored into the Qualtrics electronic data capture tools hosted at the Harvard T. H. Chan School of Public Health data portal. The data was secured and reviewed privately by the independent consultant. To minimize bias, no APLMA/APMEN staff had access to the raw data sources, and no information about individual participants was disclosed to APLMA/APMEN staff.

**Results**

Out of the 59 survey participants, we included participants who completed 50% or more of the survey for the analysis. Forty-eight out of fifty-nine participants completed 50% or more of the survey, the final sample size for the study. Quantitative questions used a Likert scale to assess the perceived link between the recommendations and policy or programmatic actions toward malaria elimination for each of the six thematic areas, as outlined below.

**Integration**

The survey summarized the recommendations from SOM 2020 on integration. It stated the following:

> COVID-19 has impacted government revenues and health budgets in unanticipated ways. With financial resources for malaria redirected toward COVID-19 relief, the risk of resurgence, linked to decreased financing in the past, is a concern. A key recommendation that surfaced at the virtual Malaria Week 2020 was to integrate activities for malaria within the general health system to sustain financing during this period of fiscal constraint. For example, combining activities
and interventions for vector-borne diseases can maximize budgets and ensure continued web-based surveillance.

**FIGURE 7 – LIKERT SCALE RESPONSES ON INTEGRATION SESSIONS**

![Likert Scale Responses](image)

More than half (52%) of the survey participants reported that the recommendations on integration somewhat or very much influenced their actions toward integrated activities (N = 25). In contrast, slightly less than half didn’t respond, felt indifferent to the recommendations, or stated that they did not or mostly did not influence their actions.

Following this question was a free-text question that asked those who felt the recommendations on integration somewhat or very much influenced their actions toward
integrated activities to clarify the specific action taken. I wanted to learn the specific actions taken among those who reported that the events had affected their actions. As visualized in the pie chart below, slightly more than half did not specify an action taken forth.

**FIGURE 8 – INTEGRATION SESSIONS: SPECIFICITY OF INFLUENCE**

Percentage of respondants who said that the recommendations somewhat or very much influenced their actions who either did or did not specify an action. 
N = 25

<table>
<thead>
<tr>
<th>Specified</th>
<th>Did not specify</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>12</td>
</tr>
<tr>
<td>52%</td>
<td>48%</td>
</tr>
</tbody>
</table>

Below are examples of the free-text answers shared by those who said the recommendations somewhat or very much influenced their actions:

"Health workers continued to provide malaria services in the community. Community labs were kept open as the labs in the public health facilities were mostly occupied with C19 diagnoses. Mass distribution of LLIN was completed before the peak season."
“Cross Border collaboration. Strengthening of Pakistan-Iran and Afghanistan Malaria Networking. (PIAM-Network).”

“Due to prolonged border closures, all cross-border collaboration and coordination related activities remain suspended or switched to virtual meetings. Information/data sharing will continue to take place virtually to address border issues.”

“As per WHO recommendation during elimination phase, program is aware of the need to be guided by the surveillance for targeted interventions. But however, this depends on the quality of surveillance and the capacity to use the data meaningfully which perhaps impedes implementation of this recommendation for VDCP Bhutan.”

These quotations elucidate that some of the recommendations from the Senior Officials Meeting were already incorporated into their strategic health based on WHO recommendations or possibly because of commitments they already made at the World Health Assembly.

This question seeks to understand how they worked to implement an integrated response in the wake of COVID. The issue of border closures raised in one of the responses may suggest that data sharing and information have been compromised or weakened because of the limitations created by the COVID outbreak. These responses
may also indicate that there have been challenges not addressed through the Senior Officials Meetings, which could create an opportunity for a revised approach. For example, someone reported that the Pakistan-Afghanistan collaboration needed to be strengthened. This information could help shape revisions to the meeting and convening structures so that targeted inter-country sessions could be held in place of general best-practice sessions that currently make up some of the Malaria Week sessions.

**Cross-Border Collaboration**

The survey summarized the recommendations from SOM 2020 on cross-border collaboration. It stated the following:

The movement of malaria across international borders poses a significant obstacle to achieving malaria elimination. In some border areas, malaria prevalence is often higher than in other areas due to higher forestation, lower access to health services, treatment-seeking behavior, difficulties in deploying prevention programs to hard-to-reach communities in difficult terrain, and the constant movement of people across porous national boundaries. Malaria elimination in border areas will be challenging. A key recommendation from the APLMA Senior Officials Meeting was to strengthen cross-border collaboration, including surveillance and information sharing across borders. For that, engaging stakeholders beyond health is crucial, from Ministries of Foreign Affairs and Defense.
Half of the survey participants reported that the recommendations on cross-border collaboration somewhat or very much influenced their actions toward integrated activities (N = 24). In contrast, the other half either didn’t respond, felt indifferent to the recommendations, or stated they did not or mostly did not influence their actions.

A free-text question followed, asking those who felt the recommendations on cross-border collaboration somewhat or very much influenced their actions toward integrated activities to clarify the specific action taken. As visualized in the pie chart below, 63% did not specify an action taken forth.
Below are examples of the free-text answers shared by those who said the recommendations somewhat or very much influenced their actions:

“Was the basis for better-coordinated and enhanced cross-border RAI3 funding proposals.”

"Engagement with Ministry of Foreign Affairs and Ministry of Defense is critical for cross border collaboration. However, given the recent political changes in Myanmar, this seems to be a big challenge in the coming years."
“Due to the COVID 19, Timor-Leste and Indonesia were not continued the coordination and follow up the action plan were made and agreed in 2019. Timor-Leste maintaining the intensive surveillance activities along the borders, screening of the migrant population at point of entry with collaboration of border police and local leaders. LLINs distribution for the risk group populations and mass campaign and Indoor Residual Spraying was implemented according to the plan. Surveillance Responses was also carried out when a case is reported and vector control intervention such environment management of the breading place in one of the border area where the number of malaria cases increased in 2020.”

These responses suggest that the SOM can be leveraged to serve as a forum for inter-country collaboration between representatives from bordering nations. For example, one survey participant noted that the "basis for better-coordinated and enhanced cross-border RAI3 funding proposals" influenced country-level malaria efforts. In contrast, another participant stated Timor-Leste’s reliance on Indonesia to ensure national progression toward elimination. Again, this statement may suggest that targeted sessions for inter-country work between countries that strategically need to collaborate could lead to a more impactful malaria elimination response in-country and regionally.

**Timely and Quality Data**

The survey summarized the recommendations from SOM 2020 on timely and quality data. It stated the following:
During this year's Senior Officials' Meeting and Malaria Week sessions, several recommendations were made regarding timely and quality data management. These recommendations included the importance of establishing mechanisms to share the data across borders, data availability at every level, and ensuring human resource capacity to guarantee completeness in reporting and accuracy and verification of data. Good quality data can inform a more targeted and efficient malaria response.

**FIGURE 11 – LIKERT SCALE RESPONSES ON DATA SESSIONS**

![Bar chart showing Likert scale responses on data management influence actions.](chart.png)

Slightly less than half of the survey participants reported that the recommendations on timely and quality data somewhat or very much influenced their actions toward integrated activities (N = 22). In contrast, the other half either didn’t respond, felt
indifferent to the recommendations, or stated they did not or mostly did not influence their actions.

A free-text question followed, asking those who felt the recommendations on timely and quality data somewhat or very much influenced their actions toward integrated activities to clarify the specific action taken. As visualized in the pie chart below, 41% did not specify an action taken forth.

**FIGURE 12 – DATA SESSIONS: SPECIFICITY OF INFLUENCE**

Below are examples of the free-text answers shared by those who said the recommendations somewhat or very much influenced their actions:

“Timely data is most focused at country level. Sharing data across borders has not materialized in a meaningful way.”
“National program organized training specifically on malaria reporting for the service providers of the high endemic zones. Regular data verification was on despite the pandemic situation. However, there is still no mechanisms to share the data across borders.”

“The data sharing for both country Timor-Leste and Indonesia was not routinely shared due to the COVID 19 situation. However, MOH is planning to establish cross border response collaboration on COVID 19 with Indonesia. Malaria is part of this program to be included in the action plan in order to strengthening the implementation of malaria specially an area with 2km radius. This under discussion, the timeline of the implementation not define yet.”

“Regular sharing of Myanmar data is happening to the WHO MME Hub housed at WHO Cambodia for couple of years already, even before this recommendation.”

As noted previously, when asked about data quality and access, some of the free-text responses suggested that more can be done for inter-country collaboration, in this case, sharing of data across borders. Given that the Malaria Week sessions around data-sharing have been primarily centered around general best practices, as opposed to working sessions, this may indicate revisions to the events are needed. Instead, working groups between different but connected country representatives could yield
more impactful results, particularly around cross-border data sharing, so that timely data is more accessible and can help with a timely and targeted response.

**Access**

The survey summarized the recommendations from SOM 2020 on access. It stated the following:

Achieving elimination will require finding and treating every case by improving the use of existing malaria tools, ensuring their access to the most underserved populations, and introducing new tools to manage P. vivax better where necessary. During Malaria Week, new diagnostic tools and treatments to address P. vivax malaria, such as Point-of-care G6PD diagnostics and single-dose treatment options, were proposed as part of the solution. The sessions also highlighted the importance of leveraging existing tools adapted to each country’s needs — for example, repurposing Primaquine as a radical cure by offering shorter treatment regimens to improve treatment adherence.

Another critical part of access includes procurement. To achieve malaria elimination by 2030, countries need accelerated policy and procurement processes to introduce new malaria case management tools. Building on lessons learned during COVID-19, we know the importance of diversification of manufacturers to improve the quality and supply timelines of essential commodities.
Slightly less than half of the survey participants reported that the recommendations on access somewhat or very much influenced their actions toward integrated activities (N = 22). In contrast, the other half either didn’t respond, felt indifferent to the recommendations, or stated they did not or mostly did not influence their actions.

A free-text question followed, asking those who felt the recommendations to improve access somewhat or very much influenced their actions toward integrated activities to clarify the specific action taken. As visualized in the pie chart below, 68% did not specify an action taken forth.
Below are examples of the free-text answers shared by those who said the recommendations somewhat or very much influenced their actions:

“Piloting of G6PD deficiency point of care testing is being piloted in the country.”

“VDCP Bhutan was already considering introduction of G6PD testing and operational research to evaluate newer and novel malaria diagnostics tools and surveillance approaches.”

“Influenced programming activities of village Health Workers in remote areas.”
Several free text answers touched on how their countries were piloting the use of G6PD point of care test and village health workers as examples of improvements in access to care. There may be an opportunity to engage with representatives from the countries who succeeded in their pilots to lead a working group session with participants from other countries trying to do the same. This type of engagement might create a more tangible link between the convening sessions focus on improving access and implementation and policy efforts at the country level.

**Sustainable Financing**

The survey summarized the recommendations from SOM 2020 on sustainable financing. It stated the following:

During Malaria Week, we also reviewed the importance of ensuring the program can be financially sustained to progress toward elimination. Government representatives have committed to providing sustainable financing so that national programs continue through 2030 and beyond.
Slightly less than half of the survey participants reported that the recommendations on sustainable financing somewhat or very much influenced their actions toward integrated activities (N = 23). In contrast, the other half either didn’t respond, felt indifferent to the recommendations, or stated they did not or mostly did not influence their actions.

A free-text question followed, asking those who felt the recommendations on sustainable financing somewhat or very much influenced their actions toward integrated activities to clarify the specific action taken. As visualized in the pie chart below, 52% did not specify an action taken forth.
Below are examples of the free-text answers shared by those who said the recommendations somewhat or very much influenced their actions:

“Domestic funding in Timor-Leste still an issue, even though every year we increased funds for health sector. However, the MoH has more priority for other diseases for example, Malnutrition, Dengue program ect. were need funds for implementation compared to Malaria were the cases becoming drastically reduction. The efforts of continue to be made to ensure that the Government will allocate funds to sustaining the program in future.”

"Importance of vector-borne diseases and human health explained to the senior officials."

“Other external fundings, besides global fund for 3 diseases, are required.”
“Government commitment on annual budget allocation.”

Several of the free-text comments touched on the need for government commitment on annual budget and lack of much needed domestic financing. The Malaria Week platform could potentially be used for inter-ministry sessions for countries that could significantly impact domestic financing challenges. If these convening events are not the right platform for this kind of work, then these findings may inspire a conversation internally about how APLMA’s organizational resources can be redirected to help countries work with the different ministries in their own country.

Another comment was on the external funding. APLMA could potentially use its convening platform to create space for countries to connect with external donors interested in contributing more to malaria. Another potential opportunity to address this concern could be for APLMA to help identify additional funders amenable to connecting with country partners.

**Whole Government Approach**

The survey summarized the recommendations from SOM 2020 on a whole government approach. It stated the following:

In an effort to achieve elimination across the Asia-Pacific region, an inter-ministerial and whole government approach is required. Awareness and commitment by all government stakeholders are essential to expedite malaria elimination. Achieving a whole government approach requires leaders empowering agencies and officials to see it through. For
example, Ministries of Health are responsible for designing and implementing specific elimination activities. Ministries of Finance are also crucial for ensuring sustained funding, including the burden of malaria declines and deploying new types of financing. As mentioned earlier, Ministries of Foreign Affairs have a vital role in ensuring cross-border coordination. Likewise, Ministries of Agriculture, Trade, Immigration, and Industry must ensure that relevant regulations are harmonized and enforced. In the past, a coordinated whole government approach has underpinned successful elimination strategies.

FIGURE 17 – LIKERT SCALE RESPONSES ON WHOLE GOVERNMENT SESSIONS

Slightly less than half of the survey participants reported that the recommendations on a whole government approach somewhat or very much influenced their actions toward integrated activities (N = 22). In contrast, the other half either didn’t respond, felt
indifferent to the recommendations, or stated they did not or mostly did not influence their actions.

A free-text question followed, asking those who felt the recommendations on a whole government approach somewhat or very much influenced their actions toward integrated activities to clarify the specific action taken. As visualized in the pie chart below, 68% did not specify an action taken forth.

**FIGURE 18 – WHOLE GOVERNMENT SESSIONS: SPECIFICITY OF INFLUENCE**

Below are examples of the free-text answers shared by those who said the recommendations somewhat or very much influenced their actions:
"In 2018 our national Government has launched a Malaria Elimination roadmap. following this event, there is an increase in funding by global fund to cater for the necessities towards achieving the control and elimination efforts."

“During the implementation of malaria elimination, the task force of malaria was not established. For this year the NMP has able to convince the Prime Minister to establish the task force were involving of relevant Ministries, Religious and Civil Society by this year. This has been agreed, and the Program will have present the ToR of task force to the Council of Ministers to get the agreement and approval for the implementation. If this apply than we think approaches of implementation of prevention re-establishment of malaria link to cross border can be well implemented. MoH also has now thinking of apply a certificate free malaria card for any foreign country entering to TL as per immunization program. However, this still under discussion and plan.”

“In the past, there is strong coordination among ministries through Health Sector Coordination Committee (HSCC) platform. But not sure about the future because of military coup.”

The qualitative responses under the Whole-Government-Approach section suggest that APLMA could do more tailored in-country work, bringing stakeholders from different ministries to talk about how they can work together to ensure progress toward malaria elimination in their country. Furthermore, some
of the in-country work can also bring together different divisions within MOH to talk about how malaria-related work can be layered onto ongoing COVID-19 response efforts or any other public health programs (For example, if there is a Community Health Worker initiative that focuses on chronic disease, explore if an initial screening for malaria can be layered onto that, without adding too much to the workload).

**TABLE 1 – SUMMARY OF FINDINGS PER THEMATIC AREA**

<table>
<thead>
<tr>
<th>Thematic Area</th>
<th>Very Much Influenced Actions (5)</th>
<th>Somewhat Influenced Actions (4)</th>
<th>Indifferent (3)</th>
<th>Mostly Did Not Influence Actions (2)</th>
<th>Did Not Influence Actions At All (1)</th>
<th>Average on a 5 Point Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integration (N=44)</td>
<td>18%</td>
<td>39%</td>
<td>17%</td>
<td>23%</td>
<td>7%</td>
<td>3.38</td>
</tr>
<tr>
<td>Cross-Border Collaboration (N = 42)</td>
<td>17%</td>
<td>40%</td>
<td>21%</td>
<td>12%</td>
<td>10%</td>
<td>3.42</td>
</tr>
<tr>
<td>Timely and Quality Data (N = 41)</td>
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<td>29%</td>
<td>24%</td>
<td>17%</td>
<td>5%</td>
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<tr>
<td>Improved Access (N = 43)</td>
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<td>37%</td>
<td>19%</td>
<td>21%</td>
<td>9%</td>
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<td>41%</td>
<td>24%</td>
<td>12%</td>
<td>7%</td>
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<tr>
<td>Whole Government Approach (N = 41)</td>
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<td>29%</td>
<td>22%</td>
<td>17%</td>
<td>7%</td>
<td>3.46</td>
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</tbody>
</table>

* Please note that certain people didn't answer specific questions, and this table doesn't include people who left their answers blank. That is why the N differs from the graph above - it does not include those who left the questions blank.

This summary table (Table 1) shows that participants responded similarly across thematic areas, with an average score between the events that influenced their actions and indifferent to the influence. While these findings lean somewhat favorably, there isn’t a compelling enough association between the sessions and the perceived influence on malaria elimination efforts among stakeholders. These findings should give event
organizers pause and encourage them to rethink how to strengthen this link. I will offer more concrete recommendations for the organizers in the Recommendations section below.

**Qualitative Findings:**

The mixed-method survey had two qualitative questions at the end. The two questions were:

1. What can we do better to make the outputs of the SOM more effective and impactful?
2. Across any of these thematic areas, what challenges, if any, did you face in implementing or applying recommendations from the SOM?

These two questions were added to the survey based on recommendations by APLMA staff to get feedback on improving the sessions to best support stakeholders.

Three themes surfaced in the qualitative responses. Those themes included:

1. Accountability and Follow Up
2. County and Regional Level Support
3. Resource Mobilization

**Qualitative Theme #1: Accountability and Follow Up**

The most common theme was creating more robust accountability structures around commitments made at SOM and regular follow-up on those commitments by stakeholders who attended.
Some direct quotes include:

“Need to develop clear follow up actions and continue to engage with stakeholders for action”

"Need for regular follow-up meetings and measurement of output"

"Perhaps few key indicators need to be formulated during SOM and then monitored for progress and implementation."

"Commitments from senior officials and setting tangible and time-bound impact & outcome targets"

“[SOM] Outputs are more theoretical than practice. SOM recommendations are blanket and in future it is better they look at more practical and binding output from the Ministries of Health”

"No follow through on anything - no action on the ground"

“Need for diligent follow up on recommendations for action”

"Most of the recommendations are generic and well known for all countries to address. These are already recommended in ministerial call for action (GMS, SEAR Countries),"
exists in national plans, global malaria documents. Countries are already implementing these even before malaria week 2020.”

“Generally supportive of all these recommendations, but this has not translated to real programming”

“Strict legal action”

Based on these qualitative responses, it seems participants would like a more structured follow-up on the pledges made at the SOM to improve accountability and strengthen the potential impact.

**Qualitative Theme #2: Country and Regional Level Facilitation and Support**

Another theme that surfaced from the qualitative free-text questions was wanting country and regional level facilitation and support from APLMA/APMEN partners. Some direct quotes include:

“SOM [APLMA] assist the program to coordinate with NMP in Indonesia specially MoH Jakarta, effort in elimination in Timor Island as per agreed action plan 2019. Funds for cross border meeting and implementation of the program maybe to Indonesia. For TL funds are available from the Global Fund.”
“We need strong voice for enhancement of Domestic resources; Strong cross border collaboration; pool of experts for TA to neighboring countries; establishment/strengthening of regional research facilities; Voice for reduction of tax and tariff of malaria commodities”

“Need more advocacy to governments to continue or increase resourcing and improving management systems”

These responses suggest an opportunity for more inter-country collaboration that will address the specific, targeted needs of different countries. Malaria Week and SOM provide a unique platform where country representatives across the Region can come together in one place. APLMA can create space for them to do work together.

**Qualitative Theme #3: Resource Mobilization**

The third theme that surfaced was related to resource mobilization. Some direct quotes included:

“Continued lobbying for increased government ownership resource mobilization.”

"Increase in the government resources continued to remain a challenge, and there is heavy reliance on donor funding.”
"During this time funding was an issue. Without global fund support, the program would have collapsed. The system did not function as it should have as the administrative systems were in disarray"

Sustainable financing is a crucial component to progress toward malaria elimination. These comments may point to frustration around the lack of technical support needed to garner these funds and the loss of opportunity to work together. Additionally, in regard to domestic funding, there may be an opportunity to create intra-country, inter-ministry sessions where Ministry of Health representatives can work with their Ministry of Finance counterparts of the same country to align on domestic funding initiatives, which could lead to more tangible progression toward increased domestic funding.

**Limitations**

There were several limitations of this study. One limitation is that, for similar reasons, we only obtained a 53% response rate (N=59), of which only 48 completed 50% or more of the survey. While this response rate is generally pretty good, many participants were also grappling with the COVID-19 crisis, so many voices weren't captured. Key Informant Interviews (KII), along with the survey, would have provided richer qualitative context on what has been working, more specified understanding between SOM and Malaria Week, and the perceived influence of the event. It would have also ensured voices that should be included were heard. However, because we were surveying
senior officials, mainly in the government sector within the Ministry of Health, the survey alone was a considerable ask amid the ongoing COVID-19 pandemic.

Relatedly, as seen in the results section, for five out of six of the thematic areas, among those who reported that they were very much or somewhat influenced, more than half did not specify the action taken. We cannot presume to know what this means, but it does underscore an information gap. Similarly, we were missing information from participants who noted that the sessions did not influence any program or policy action taken. While some of them provided information in the sections that asked how the Malaria week and SOM sessions could be improved, there is a lot of missing data on insights and advice they might have offered otherwise. A follow-up KII could have helped bridge this information gap.

Another limitation is that this survey was short in length, and what we were able to assess is limited. However, the survey length was intentionally short because we anticipated a lower response rate if we made the survey longer than twenty questions.

Lastly, while the APLMA/APMEN were invited to edit and suggest additional survey questions during the survey design phase, the staff were not interviewed on the current process for planning and designing APLMA SOM and Malaria Week events. It was unclear if some of the best-practice suggestions, such as those mentioned earlier in this report, were carried out.
Recommendations

Based on the survey results, I put several recommendations to the APLMA/APMEN leadership team for consideration. I will explain the five main recommendations in more detail below. I offer these recommendations to guide the leadership to think more about if convenings should remain the organization's primary focus and if APLMA continues to carry our SOM and Malaria Week, how those sessions can be improved for impact (see Figure 19 below).

**FIGURE 19 – RECOMMENDATIONS SUMMARY**

1. Leverage event planning toolkits for purposive sessions
2. Routine assessment during scheduled meetings
3. Focused working group sessions during MW/SOM
4. Cost-benefit and SWOT analysis of current format
5. Monitoring & Evaluation system for accountability

1. **Leverage event planning toolkits such as those introduced in this paper to help plan Malaria Week and SOM sessions more purposively.**

As discussed in the framework portion of this paper, many planning components were not preemptively determined, including setting a more clear purpose for convening sessions and related outcomes to measure success for each event. Going through a
more purposeful and intentional planning process would help APLMA and their partners better draw links between the topics covered and the impact that it has made. If APLMA can plan Malaria Week and SOM with an event “legacy” in mind, it can yield a more significant impact in achieving the goals for the event and the organizational legacy goal of malaria elimination. Also, because Malaria Week and SOM are annual events, there is an opportunity to iterate, adapt and improve each year – hence the process being cyclical (as mentioned in the framework section above).

2. Develop standardized questions to inquire further how SOM influenced program or policy change during scheduled country engagement calls and meetings.

As noted in the results section, among those who reported that the recommendations very much or somewhat influenced their actions, more than half of those respondents, except for one category, did not provide a free-text response explaining how it influenced their actions. Even with the answers provided, some were not clear how they perceived the session directly influenced their actions. I drafted a brief Key Informant Interview questionnaire to supplement the survey (see Appendix C). Because the survey participants were extremely busy high-level officials in the government, NGO, academia, and non-profit sector, who were already taking time out of their schedules to participate in the survey, it was difficult to justify re-engaging them again for a KII. Instead, I recommend that a set of standardized questions about both country-level needs and how SOM, Malaria Week, or other engagements have influenced their actions. Doing this might provide the additional context needed to inform annual
organizational strategy and priorities. I have included the brief KII questionnaire for the team's consideration.

3. **Consider more focused working group sessions, instead of general presentations, during Malaria Week and SOM.**

Based on the free-text answers, there is an opportunity for more targeted inter-country, particularly with bordering countries, and inter-ministry work within a particular country. Cross-border transmission is a considerable barrier toward malaria elimination progress. As noted, countries like Timor-Leste and Indonesia and Nepal, and Bhutan with India may benefit from targeted working group sessions during Malaria Week, where they can collaborate to produce specific outcomes. Similarly, it seems that better integration within governments and between ministries can help with malaria elimination efforts. For example, a session on Sustainable Financing may produce more impactful results if Ministry of Health representatives, National Malaria Program Leads, and Ministry of Finance representatives from the same country sat together for a facilitated working group session to collaborate on increasing domestic financing. Similarly, a session on taking a whole-government approach toward malaria elimination can bring together Ministry of Health Representatives with Ministries of Agriculture and Ministry of Foreign Affairs to ensure that relevant regulatory and supply-chain efforts are streamlined. Organizers can predetermine what success looks like when setting a session outcome for success – such as each working group determining three action points that they will collectively integrate into their ministry's annual strategic plans.
4. **Carry out a cost-benefit analysis and a Strengths-Weaknesses-Opportunities-Threats (SWOT)-analysis to determine if SOM and Malaria Week should continue in their current format.**

One limitation of this study is that it did not juxtapose the financial investment or implications of these convening events with the population health impact in the Region. The team should consider how the organization can maximize both financial resources and elimination efforts. The link between SOM and MW on malaria elimination remains unclear after the findings of this study. Based on the qualitative responses, it is clear that there is a call to action for support in other areas of their work, both at the country and regional level. It will be necessary for the APLMA/APMEN team to carry out a cost-benefit analysis to confidently determine the right next step as the organization continues to contribute to malaria elimination in the Region. This analysis can be strengthened if coupled with a SWOT analysis by the leadership team to understand the risks, threats, and opportunities associated with this type of change. Lastly, part of this analysis should include leveraging existing literature, such as those shared in the literature review portion of this paper, to plan the convening for impact, and ensure tangible and measurable markers for success are prospectively determined before implementing the events.

5. **Create a robust Monitoring & Evaluation (M&E) system related to the SOM and Malaria Week recommendations distinct from the existing dashboard.**

The largest number of qualitative responses called for stronger accountability and follow-up to the SOM and Malaria Week sessions. APLMA/APMEN has done a good job
developing a dashboard that looks at broader population health indicators related to malaria. A meeting M&E tracking system based on SOM recommendations, coupled with scheduled follow-up progress meetings, might provide participants and meeting planners with insight and accountability into how recommendations from the sessions are taken forward. An evaluation system might also provide insight on how APLMA and APMEN can tailor their country-level efforts throughout the year so that national partners can achieve those goals. The SOM-specific M&E tracker should include indicators that are developed based on each recommendation that comes out of the convening event. These recommendation-related indicators should be coupled with periodic follow-up tracking meetings with SOM attendees. The intervals for these meetings can be determined with the collective but would suggest quarterly follow-up, if not more, between each year's SOM and Malaria Week. Again, the BestCities framework discussed earlier in this paper provides guidance on how meeting and session outcome indicators can be developed and measured.

**Conclusion**

Given both the progress made in the Region and the risk of resurgence in the wake of the COVID-19 pandemic, it is imperative that APLMA/APMEN prospectively consider the potential impact of every organizational activity to ensure it is contributing to the 2030 elimination goals. SOM and Malaria Week are hallmark activities of the organization. Convening without planning and purpose may waste resources and represent a missed opportunity to achieve meaningful impact.
Ultimately, APLMA must ensure organizational activities lead toward malaria elimination progress and population health impact because the actual beneficiaries are the communities suffering from this insidious disease and their pain from the related loss of life. Progress can be through effective convening or other means, like technical programs or policy support. If done right, convening events can have an incredible impact. APLMA is at a crossroads – they need to decide whether they are going to continue as a convening organization. If they do, they need to focus more strategically on planning purposeful convenings that will lead to impact. If not, they need to assess how they will contribute to malaria elimination efforts across the Asia-Pacific – whether through technical support, like the WHO, or as a fundraising arm, to assist with needed financing efforts. Whatever they decide, the work at the center, achieving malaria elimination in the Region by 2030, should ground them in their efforts. I hope this study provides additional guidance to achieve that goal.
References


69


Wangdi, K., Pasaribu, A. P., & Clements, A. C. A. (n.d.). Addressing hard-to-reach populations for achieving malaria elimination in the Asia Pacific Malaria Elimination Network countries. *Asia & the Pacific Policy Studies, n/a(n/a).* https://doi.org/10.1002/app5.315


## APPENDICIES

### APPENDIX A: APLMA Leaders’ Dashboard 2019

![APLMA Leaders’ Dashboard 2020](image)

### Progress Towards Elimination

<table>
<thead>
<tr>
<th>Country</th>
<th>Indigenous malaria deaths 2019</th>
<th>Indigenous malaria cases 2019</th>
<th>Administrative efforts (indicators)</th>
<th>Total malaria elimination plan in place and adopted</th>
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### Appendix: Notes

- \* = Significant change since previous year
- \*\* = Notable increase since previous year
- \*\*\* = Decrease since previous year
- \*\*\*\* = Not available for the current year
- \*\*\*\*\* = Data not yet collected

### ALPHABETICAL

<table>
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<th>Country</th>
<th>Legislation in place to make malaria a notifiable disease within 365 days</th>
<th>National strategy and plan for malaria elimination in place and adopted</th>
<th>Targeting intermittent preventive treatment (IPT) for malaria risk identification</th>
<th>Elimination financing and support strategies developed and implemented</th>
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### Status Indicators

- On track
- Progress but more effort needed
- Not on track
- No data
- Achieved in 2020

### Additional Notes

-Nationally, malaria control efforts continue to be made, with disease control efforts measured using indicators provided. As of April 2022, 27 nations have moved to the elimination phase.
APPENDIX B: Impact Evaluation Survey on Malaria Week and SOM

Evaluation Goal: To understand the level of impact and influence the APLMA Senior Officials’ Meeting and Malaria Week have had on increased malaria elimination commitments across the Asia-Pacific.

I. **Background**

1. What country do you represent? _______________________________________

2. What entity do you represent?
   - Ministry of Health
   - Ministry of Finance
   - Ministry of Foreign Affairs
   - National Malaria Program
   - NGO
   - Bilateral or Multilateral organization (Please name entity here ___)
   - Private Sector (Please name entity here _____________)
   - Other (Please name entity here _________________)

II. **Integration**

COVID-19 has impacted government revenues and health budgets in unanticipated ways. With financial resources for malaria potentially being redirected toward relief for COVID-19, the risk of resurgence, that has been linked to decreased financing in the past, is alive. A key recommendation that
surfaced at the virtual Malaria Week 2020 was to integrate activities for malaria within the general health system in an effort to sustain financing during this period of fiscal constraint. For example, integrating activities and interventions for vector borne disease can maximize budgets and ensure continued usage of web-based surveillance.

3. Given the impact of COVID-19 how did these recommendations influence your actions toward integrated activities?

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</tbody>
</table>

4. Can you please specify any related policy or programmatic action taken forward from this session?

____________________________________________________________________________________

5. During Malaria Week, recommendations were made for a more targeted approach focused on ensuring access to the right tools for all vulnerable populations through a more integrated approach to health services. How did
these recommendations influence actions made toward addressing cross-border collaboration?

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<th>Very much influenced actions</th>
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</table>

6. Can you please specify any related policy or programmatic action taken forward from this session?

III. Cross-border collaboration

Movement of malaria across international borders poses a major obstacle to achieving malaria elimination. In some border areas, malaria prevalence is often higher than in other areas due to higher forestation, lower access to health services, treatment-seeking behavior, difficulties in deploying prevention programs to hard-to-reach communities in difficult terrain, and the constant movement of people across porous national boundaries. Malaria elimination in border areas will be challenging. A key recommendation to address this, from the APLMA Senior Officials Meeting was that cross-border collaboration should be strengthened and that surveillance and information sharing across the border is essential. For that, engaging stakeholders beyond health is crucial, from
Ministries of Foreign Affairs and Defense.

7. How did the discussion and recommendation on cross-border collaboration influence actions made toward addressing cross-border collaboration?

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</table>

8. Can you please specify any related policy or programmatic action taken forward from this session?

__________________________________________________________________________

IV. **Timely Data**

During this year’s Senior Officials’ Meeting and Malaria Week sessions, there were several recommendations put forth around timely and quality data management. This included the importance of establishing mechanisms to share the data across borders, data availability at every level, and ensuring Human Resources capacity to ensure completeness in reporting and accuracy and verification of data. Good quality data can inform a more targeted and efficient malaria response.
9. How did the discussion and recommendation on data management influence actions made toward improving access to timely and quality of data?

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</thead>
</table>

10. Can you please specify any related policy or programmatic action taken following this session?

_________________________________________________________________________________________

V. **Access**

Achieving elimination will require finding and treating every case by improving the use of existing malaria tools, ensuring their access to the most underserved populations, and introducing new tools for better management of *P. vivax* where necessary. During Malaria Week, new diagnostic tools and treatments to address *P. vivax* malaria such as Point-of-care G6PD diagnostics and single-dose treatment options were proposed as part of the solution. The sessions also highlighted the importance of leveraging existing tools that can be adapted to each countries’ needs. For example, repurposing Primaquine as a radical cure by offering shorter treatment regiments to improve treatment adherence.
Another key part of access includes procurement. To enable malaria elimination by 2030, countries need accelerated policy and procurement processes for the introduction of new malaria case management tools. Building on lessons learned during COVID 19 we know the importance of diversification of manufacturers and lessons to improve the quality and supply timelines of essential commodities.

11. How did the discussion and recommendations for new diagnostic and treatment options influence actions made toward addressing access to care?

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<th>It mostly did not influenced actions</th>
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12. Can you please specify any related policy or programmatic action(s) taken following this session?

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13. How did the discussion and recommendation on procurement influence actions made toward addressing access to care?
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14. Can you please specify any related policy or programmatic action(s) taken following this session?

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VI. **Sustainable Financing**

During Malaria Week we also reviewed the importance of ensuring the program can be sustained in the specific financing context to ensure we maintain progress toward elimination. Government representatives have committed to ensuring sustainable financing so that national programs can be have financial sustainability through 2030 and beyond.

15. How did the Senior Officials’ Meetings and Malaria Week sessions on sustainable financing influence actions toward creating sustainable financing plans, including increasing domestic financing at the country level and/or also with bilateral and multilateral partners?
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16. Can you please specify any related policy or programmatic action taken following this session?

VII. Whole Government Approach

In an effort to achieve elimination across the Asia-Pacific region, an inter-ministerial and whole government approach is required. Awareness and commitment by all government stakeholders is important to expedite malaria elimination. This requires leaders empowering agencies and officials to see it through. For example, Ministries of Health are responsible for designing and implementing specific elimination activities. Ministries of Finance are also crucial for ensuring sustained funding – including as the burden of malaria declines – and for deploying new types of financing. As mentioned earlier, Ministries of Foreign Affairs have a key role in ensuring cross-border coordination. Likewise, Ministries of Agriculture, Trade, Immigration and Industry all need to be involved to ensure relevant regulations are harmonized and enforced. In the past, successful elimination strategies have been underpinned by strong Whole of Government coordination.
17. How did the SOM and Malaria Week recommendations influence actions toward creating a whole government approach?

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18. Can you please specify any related policy or programmatic action taken following this session?

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VIII. Conclusion

19. Across any of these thematic areas, what challenges, if any, did you face in implementing or applying recommendations from the SOM?

____________________________________________________________________________________

20. What can we do better to make the outputs of the SOM more effective and impactful?

____________________________________________________________________________________

APPENDIX C: Key Informant Interview Questionnaire
Primary Question of Interest: How have the convening and advocacy work through SOM and Malaria Week influenced malaria elimination programmatic and policy efforts across the Asia-Pacific?

Potential Key Informant Interview Questions:

Intro question:

- Can you tell us a bit more about your role and how your work impacts malaria elimination work in your country?

Thematic questions:

- Integration: A key recommendation that surfaced at Malaria Week 2020 was to integrate activities for malaria within the general health system in an effort to sustain financing during this period of fiscal constraint.
  
  - How has this recommendation on the integration of broader health systems activities been taken forward in your country?
  - What have been the biggest influence for why this was/wasn’t taken forward?
  - Aside, SOM and Malaria week, are there other ways APLMA/APMEN can support country level integration activities?

- Cross-border collaboration: A key recommendation to address this, from the APLMA Senior Officials Meeting was that cross-border collaboration should be strengthened and that surveillance and information sharing across the border is essential.
  
  - How has this recommendation been taken forward in your country?
- What have been the biggest influence for why this was/wasn’t taken forward?
- Are there others ways that you feel APLMA/APMEN can support country-level efforts toward cross-border collaboration, aside what we’ve currently done during malaria week and SOM?

- **Timely data:** This included the importance of establishing mechanisms to share the data across borders, data availability at every level, and ensuring HR capacity to ensure completeness in reporting and accuracy and verification of data.
  - How has this recommendation been taken forward in your country?
  - What have been the biggest influence for this was/wasn’t taken forward?
  - Are there others ways that you feel APLMA/APMEN can support country-level efforts toward ensuring timely and quality data?

- **Access:** Improving access to existing and new interventions, which also involved improved procurement efforts, were a focus during MW and SOM.
  - How has this recommendation been taken forward in your country?
  - What have been the biggest influence for this was/wasn’t taken forward?
  - Aside, SOM and Malaria week, are there other ways you would want APLMA support to improve access to existing and new interventions, as well as support with procurement and supply-chain efforts at the country level?

- **Sustainable Financing:** During Malaria Week we also reviewed the importance of ensuring the program can be sustained in the specific financing context to
ensure we maintain progress toward elimination. Government representatives have committed to ensuring sustainable financing so that national programs can be have financial sustainability through 2030 and beyond.

- Can you tell me a bit about what efforts are being made to achieve a sustainable financing model for malaria in your country?
- How much of these efforts were influenced by malaria week and SOM?
- Do you have other ideas on how APLMA/APMEN can better support country level efforts toward a sustainable financing model for malaria?

**Whole government approach:** In an effort to achieve elimination across the Asia-Pacific region, an inter-ministerial and whole government approach is required. Awareness and commitment by all government stakeholders is important to expedite malaria elimination. This requires leaders empowering agencies and officials to see it through. For example, Ministries of Health are responsible for designing and implementing specific elimination activities. Ministries of Finance are also crucial for ensuring sustained funding – including as the burden of malaria declines – and for deploying new types of financing. As mentioned earlier, Ministries of Foreign Affairs have a key role in ensuring cross-border coordination. Likewise, Ministries of Agriculture, Trade, Immigration and Industry all need to be involved to ensure relevant regulations are harmonized and enforced. In the past, successful elimination strategies have been underpinned by strong Whole of Government coordination.

- Can you tell me a bit about what efforts are being made toward a whole government response for malaria in your country?
- What were the biggest influencers of these efforts?
- How much of these efforts were influenced by malaria week and SOM?
- Do you have other ideas on how APLMA/APMEN can better support country level efforts toward a whole government approach to malaria elimination?
**Potential KII Participants**

**Priority 1 Countries**

*India*

Dr. Neeraj Dhingra, National Vector Borne Disease Control Program (NVBDCP), Director

*Indonesia*

Dr. Desriana Elizabeth Ginting, Head Section of Prevention Malaria Disease Directorate Vector Borne and Zoonotic Disease Prevention and Control, Ministry of Health

*PNG*

Dr. Paison Dakulala, Deputy Secretary National Health Services Standards, National Department of Health

**Priority 2 Countries**

*Cambodia*

Dr. Dysoley Lek, Deputy Director National Center for Malaria Control, Ministry of Health

*Laos PDR*

Dr. Sisavath Southaniraxay, Deputy Director General, CDC/MOH

*Thailand*
Mr. Boonserm Aumaung, Chief of Entomology and Vector Control, Department of Disease Control Bureau of Vector Borne Diseases

Dr. Preecha Prempree, Deputy Director General, Department of Disease Control Ministry of Public Health

**Vietnam**

Dr. Tran Thanh Duong, Director National Institute of Malariaiology, Parasitology & Entomology, MOH

**Bhutan**

Mr. Tobgyel Drukpa, Deputy Chief Program Officer Department of Public Health, MOH

**Solomon Islands**

Mr. Albino Bobogare, Director National Vector Borne Disease Control Programme, Ministry of Health and Medical Services

**Vanuatu**

**Need to identify the right participant since they did not have adequate representation present in the 2019 and 2020 SOMs**