

**XIII AMI/RAVREDA Annual Evaluation Meeting
XXV AMI/RAVREDA Steering Committee Meeting**

**Managua, Nicaragua
March 11 – 14, 2014**

**Amazon Malaria Initiative (AMI)
Amazonian Network for Surveillance of
Antimalarial Resistance (RAVREDA)**

Trip Report

Submitted by

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March 2014

This report was made possible through support provided by the U.S. Agency for International Development, under the terms of Contract No. AID-527-C-13-00004. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the U.S. Agency for International Development.



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About Links Media

Links Media, LLC is a management consulting company based in the Washington D.C. metropolitan area, specializing in information technology and marketing communications. We provide advanced management consultation services to governments and private sector clients in the areas of health, environment, science and technology, biotechnology, governance, human rights, economic prosperity, conflict resolution, education, public engagement, risk and crisis management, and social entrepreneurship.

Recommended Citation

Links Media. 2014. XIII Annual Evaluation Meeting of the Amazon Malaria Initiative (AMI)/Amazon Network for the Surveillance of Antimalarial Drug Resistance (RAVREDA), Managua, Nicaragua, March 11–14, 2014: Trip Report. Submitted to the U.S. Agency for International Development by Links Media, LLC. Rockville, MD: Links Media, LLC.

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Abbreviations and Acronyms

AMI	Amazon Malaria Initiative
CDC	U.S. Centers for Disease Control and Prevention
COTR	Contracting Officer's Technical Representative
EMMIE	Elimination of Malaria from Mesoamerica and Hispaniola
InDRE	Mexico's Institute of Epidemiological Diagnosis and Reference
IRS	Indoor residual spraying
KAPs	Knowledge, attitudes and practices
LAC	Latin America and Caribbean
LLIN	Long-lasting insecticide-treated nets
M&E	Monitoring & evaluation
MSH	Management Sciences for Health
PAHO	Pan American Health Organization
PCR	Polymerase chain reaction
RAVREDA	Amazon Network for the Surveillance of Antimalarial Drug Resistance
USAID	U.S. Agency for International Development
USP	U.S. Pharmacopeial Convention

I. Background

The United States Agency for International Development (USAID) launched AMI in 2001 to improve the prevention and control of malaria in partner nations of the Amazon basin. The initiative's mission is to (i) ensure that national malaria control programs in the Amazon basin substantially incorporate selected best practices and (ii) promote lasting, evidence-based policy change in the partner countries. AMI's objectives include: strengthening the partner countries' systems of antimalarial medicine resistance surveillance; encouraging the evidence-based formulation of policies that promote the adequate use of effective antimalarials; and addressing including diagnostic accuracy and access, medicine quality, access to treatment, and vector control.

USAID established AMI as a collaborative partnership among organizations (the AMI technical partners) that provide technical and scientific expertise and collaborate with the nations' ministries of health and national malaria control programs to proactively address malaria prevention and control. AMI partner countries take an active role, working closely with USAID and AMI's technical partners at the regional and national levels, to ensure that positive impacts made in the reduction of malaria are sustained and sustainable. The partner countries also collaborate with one another and maintain an ongoing exchange of information and expertise (i.e., South-South collaboration).

The initiative's subregional approach benefits partner countries through (i) subregional training and technical assistance (TA), (ii) the development of standardized guidelines and protocols across all partner countries, (iii) the comparability of research and monitoring results within and across countries, and (iv) coordinated approaches to addressing cross-border problems.

II. Purpose of the Trip

On March 10–15, 2014, Links Media traveled to Managua, Nicaragua to participate in the XIII AMI/RAVREDA Annual Evaluation Meeting XXV AMI/RAVREDA Steering Committee Meeting. This meeting was organized in collaboration with USAID, the Pan-American Health Organization and the Ministry of Health of Nicaragua.

Links Media attended in order to present the advocacy strategy that was drafted for AMI during the Evaluation Meeting, and to provide the required report of activities conducted within its scope of work for the period of September 2013 through March 2014 at the Steering Committee meeting.

III. Scope of Work

Links Media plays an important role in stakeholder outreach, which entails the translation of research findings into accessible, actionable information that can be promoted by health practitioners and adopted by policy makers. This is crucial to ensuring that the detailed presentations of surveillance data and other studies by the AMI technical partners and NMCPs resonate with external audiences. Links Media also supports national capacity in the areas of communication and advocacy to keep malaria on the public agenda in the long term. The scope of work for Links Media at the March meetings included the following specific activities:

- Participate in the XIII Technical Meeting of the Amazon Malaria Initiative (AMI).
- Present the advocacy strategy for AMI with the aim of validating the recommended approaches with AMI partners and obtaining additional input.
- Present Links Media's work plan and budget for FY 2014.
- Contact AMI partners and representatives from each AMI country to:
 - Make new country representatives aware of Links Media as AMI's communication partner.
 - Catalyze thought and action among officials responsible for malaria control regarding the need to conduct effective advocacy with multiple levels of in-country decision-makers.
 - Assess NMCPs' communication capabilities and training needs in order to orient communication strategies that will support effective malaria control efforts.
 - Understand the results of a recent KAPs study completed among small-scale miners in Suriname, and the planned regional response to artemisinin resistance by Guyana Shield countries.
 - Identify relevant impact measures, articles, technical reports and potential studies for dissemination.
 - Encourage partner contributions for annual report to the U.S. Congress by underscoring the importance of having plain-language materials to help make the case for the sustainability of regional, collaborative malaria control efforts.
 - Promote the use of online collaboration tools to improve internal information sharing (Facebook, Twitter, website, etc.).
- Inform USAID and AMI partners about key findings and recommendations from the meeting.
- Prepare media materials for targeted post-meeting outreach.

IV. Source of Funding for the Trip

Funds from USAID/Peru for the AMI project supported this trip.

V. Trip Activities

AMI partners, including health and medical researchers, healthcare providers, policymakers, representatives of the 11 AMI countries (Belize, Brazil, Colombia,

Ecuador, Guatemala, Guyana, Honduras, Nicaragua, Panama, Peru, Suriname), and representatives of additional observer countries such as Costa Rica, Dominican Republic, El Salvador, French Guiana (Department of France), participated in the three-day XIII Annual Evaluation Meeting of AMI/RAVREDA, held in Managua, Nicaragua from March 11–14, 2014.

Day One, March 11, 2014

Representatives from the Ministry of Health of Nicaragua, USAID/Nicaragua and PAHO/ WHO Mission, AMI's coordination from USAID/Peru, and the U.S. President's Malaria Initiative spoke at the opening of the XIII Annual Evaluation Meeting of AMI/RAVREDA.

In his speech, Dr. Luis Gerardo Castellanos of PAHO/Washington noted that the meeting aimed to review AMI/RAVREDA's work in order to see both where we have been and where we are going. He emphasized the partners' contributions to evidence-based decision making. Dr. Rene Salgado of PMI described AMI as an integral part of the PMI family, and part of the global fight against malaria. He supported making more people aware of AMI's successes, especially with regard to low transmission settings. Advocacy for AMI will help to hold decision-makers' interest in terms of financing, so that partners can continue the efforts, or redouble them if necessary. Dr. Salgado will be helping to develop an internal strategy to advocate for AMI within PMI.

Dr. Carlos Sáenz of the Ministry of health of Nicaragua provided an overview of malaria in the country hosting the annual meeting. Malaria is now considered under control, but in the past, Nicaragua has had years with anywhere from 610 to 70,000 cases. The average is now around 1,000 cases per year, thus this may be a sign of reemergence. Populations in the Atlantic and Pacific regions are at high risk of malaria transmission. Areas with malaria are clearly multicultural. There are no borders for indigenous people who move between Nicaragua and Honduras, e.g. people are constantly on the move to play sports, or go to church. Nicaragua is participating in the Elimination of Malaria from Mesoamerica and Hispaniola (EMMIE). To that end, a number of municipalities have already been free of transmission over the last 5 years. There is a need to increase surveillance in certain regions in order to have early detection of cases. Subsequently, Dr. Puello of the Dominican Republic covered the EMMIE goals set by the Global Fund.

Dr. Keith Carter of PAHO/Washington presented a general overview of AMI/RAVREDA for new meeting participants. He presented the 6 lines of work for malaria control and the 2011-2015 Strategy and Action Plan. Later, participants mentioned that they would find it useful to have a translated version of the presentation providing an overview of AMI/RAVREDA.

Individuals from Guyana, Peru and Panama presented their countries' latest challenges with regard to the tension between rising malaria versus gold mining as an economic opportunity, maintaining access to health services in remote areas, and diagnosing and treating malaria among indigenous populations, respectively. Links Media spoke with Reyaud Rahman, the Guyana NMCP director and other staff, as well as PAHO focal point for Guyana Maria Jesús Sanchez, in follow-up to initial telephone assessment.

Willy Lescano presented on behalf of the U.S. Department of Defense's NAMRU in Peru and the Malaria Elimination Working Group. He mentioned the grant "Accelerating to Zero: Strategies to Eliminate Malaria in the Amazon" from the Bill and Melinda Gates Foundation, which helped to fund a conference from February 16-17, 2014 in Iquitos, Peru. Jaime Change of USAID/Peru was there, but other individuals expressed that they had not heard anything about this meeting and would have liked to attend.

Representatives from Suriname, Guyana and Brazil presented the results of a standardized confirmatory study protocol testing Day 3 parasitemia of *P. falciparum* malaria patients as an early sign of possible drug resistance, whether or not treatment failure had occurred. Countries covered the incentives given to study participants, most of whom were presumed to be Brazilians who were working in gold mining areas in the hinterlands. As an incentive to compensate the miners for time away from the mines, study participants had hotel rooms paid for them along with additional compensation. The percentage of participants treated with artesunate who had slower-than-normal parasite clearance was around 10%, however the enrollment numbers remained small. The PAHO focal point in Suriname nevertheless made the point that if reduced parasite clearance was occurring in a controlled environment, then the percentage of patients showing reduced parasite clearance after being treated with artesunate in real world settings would likely be much higher. At least two participants expressed that some action should be taken from a public health perspective to prevent or contain drug resistance among itinerant miners. Links Media spoke with Gustavo Bretas, the PAHO focal point in Suriname, about the implications of the recent KAPs study for changing relevant health behaviors among miners.

New editions of the AMI/RAVREDA strategic orientation documents were presented by CDC's Alexandre Macedo de Oliveira and PAHO's Maria de la Paz Adé. The documents were distributed via USB memory and are also available at the PAHO website. Different approaches have been recommended for epidemiological contexts that differ according to levels of malaria transmission. Per one document that was presented, in order to monitor efficacy and resistance to antimalarials the guidance is to conduct multicentric studies, home visits with study participants, and use genetic and molecular markers to obtain reliable data.

In discussions, the point was made that as long as there are regions of Peru, Brazil, etc. where 30% of the population tests positive for malaria, actors should not expend time or resources on elimination. They must first achieve control before looking at elimination, meaning the health system capacity for malaria control must be put in place and maintained. The situation in Central America differs greatly from that of the Amazon basin. However, neither control nor elimination can be done in isolation from other countries.

Day Two, March 12, 2014

Met with Luis Gerardo Castellanos and Brazil's NMCP staff: Camila Damasceno, Oscar Lapouble (PAHO focal point), Liana Blume, and Roger Rousseau. Dr. Castellanos urged Brazil to take action to fill the hole left in the Amazon basin by extending cooperation to non-AMI/RAVREDA countries (Bolivia, Venezuela, Paraguay, Argentina).

Links Media exchanged information with Brazilian NMCP staff in order to allow close collaboration during the temporary leave of the NMCP director through August 2014. Camila Damasceno is one of the main persons providing national-level coordination in her absence.

The M&E Session covered different indicators, and the notion that indicators such as annual parasite index (API) to have an idea of malaria morbidity depend on the diagnostic capacity of the country in question, even in places with low incidence and low parasite density. Often the reported figures depend on having very well trained microscopists. In terms of time, AMI has been measuring the moment of illness and the moment of diagnosis. False positives and false negatives remain a challenge in diagnosis and case reporting. Thus, the indicators may require actual monitoring of the performance of the microscopists and the quality of diagnosis. What we measure should speak to our real needs. We need to look at how to put the available tools together. The adequacy approach is one that has been used to determine whether implementation has been adequate or inadequate. However, as impact indicators, these indicators do not give us enough information about how good the capacity in place is, how economic conditions have been impacted by increase or decrease in malaria, and many other important results.

Dr. Aníbal Velazquez presented the external evaluation commissioned by the USAID/Peru mission. Case studies will be done of Brazil, Nicaragua, Colombia, and Peru. He mentioned that the same problems are being addressed with the same solutions; there is progress in malaria control, but the problem persists. The evaluation's hypothesis is that the implementation of AMI's lines of work shows the level of strength of national control programs. He noted that AMI lacked a theory of change, and mentioned that the AMI website is not very friendly, with too few documents in Spanish. A variety of preliminary recommendations by the evaluators included helping strengthen institutional capacity at the central level in AMI countries.

Links Media presented its forthcoming advocacy strategy for AMI with the main themes "Learn. Create. Share." The presentation called on AMI/RAVREDA partner organizations to do their part to learn about ways to engage with key audiences, create activities and materials to reach out to those audiences, and share with one another about their communication and advocacy efforts. Key audiences for AMI were defined as: USAID and other United States government agencies, governments of the Amazon basin and Central American countries, cooperation agencies and other donors, key decision-makers and public opinion leaders, researchers and academic institutions, non-governmental organizations, and the private sector. Suggested actions included the distribution of policy briefs and other AMI materials to key decision-makers, libraries, and digital information centers, the provision of agreements and policy recommendations that result from technical meetings to multiple levels of health authorities, as well as the building of alliances with other regional institutions, and others. The need to demonstrate return-on-investment was presented as a gap. Afterwards, Links Media held one-on-one discussions with partners and other stakeholders to help adjust the suggested approach to reflect AMI's current needs and situation. For instance, the NMCP director from Suriname mentioned that his country intends to submit a proposal to the Global Fund soon to enable the purchase and distribution of bed nets to itinerant miners in border regions. José María Parisi of PAHO/Washington suggested that aside from contributing to the quality of medicines,

savings attained through the joint purchase of antimalarial medicines would be a useful data point to demonstrate AMI/RAVREDA's return on investment. The joint acquisition of quality medicines through PAHO should be presented to the U.S. Congress in terms of how much money has been saved: PAHO has consolidated regional demand and created a process for a regional acquisition of medicines, which by country consists of very small quantities. The regional acquisition for the year 2013-2014 totaled \$1,387,213.47, and medicines were acquired for Venezuela, Brazil, Colombia, Bolivia, Ecuador and Argentina. PAHO has also made its capital fund available to help countries purchase medicines, although none have taken advantage of this yet. A savings amount, if calculated, would be an easily understand data point for the U.S. Congress. It should be possible to calculate the difference using an "average dosage price" from PAHO's *Precios de Referencia* (Reference Prices) list of medicines.

Dr. René Salgado of PMI commented in discussions that the ability to provide reliable data to decision-makers is paramount. The information presented to leadership in Washington must be "digestible," for example in a single page. AMI partners must become tactical in the presentation of information. There is a language barrier in terms of scientific language versus information that political leaders can understand.

Links Media spoke with the Ecuador NMCP director Luis Enrique Saavedra, Ministry of Health liaison Carlos Tumaco, and PAHO focal point César Díaz about the challenges of providing technical assistance in the context of government resistance to working with USAID/PAHO. USAID currently has programs being carried out in Ecuador through 2015. Links Media will probably need to be in touch with the ministry of health directors Dr. Amparo and Dr. Vallejo who are able to make decisions.

At an evening meeting, Links Media spoke with the Brazil NMCP staff, as well as Gustavo Bretas (PAHO/Suriname), Catherine Bernard of the French ministry of health and Laure Garancher of PAHO for the Caribbean region. Discussion focused on coordinating the selection of LLINs to be purchased soon in Brazil and Suriname. In terms of the regional strategy, it was mentioned that it would be useful to bring Links Media in during the planning and implementation of providing kits to itinerant miners, but limited funding for Links Media's involvement was a concern.

Day Three, March 13, 2014

At morning meeting with Jaime Chang, the following topics were discussed:

- Reviewed Links Media's progress in terms of assessing countries' needs. Because of Ecuador's inevitable departure, starting with Ecuador's strategy was recommended so that that country could still benefit from Links Media's support; and,
- Guyana Shield countries' proposed strategy to give out ACTs to Brazilian miners as part of a "kit." Brazil is planning to distribute nets on the border with French Guiana in the state of Amapá, and in Maripassoula on the Suriname side. Noted that PAHO and WHO guidelines (Test. Treat. Track.) are just recommendations, thus there is some flexibility for "outside the box" solutions. The situation in French Guiana is difficult, but according to some, it may be possible to have French soldiers help with diagnosis of malaria among miners. The question is how to ensure treatment compliance. Possible use of a mobile

app to aid miners in self-diagnosis and provide reminders to take doses of ACTs until treatment is completed. Such an app would have to be very simple and functional offline. A more comprehensive health approach instead of a standalone intervention for malaria among miners was discussed.

- Possible development of an AMI Success Story based on the ongoing certification/accreditation of Peru's *Instituto Nacional de Salud* after receiving laboratory capacity building and accreditation with technical assistance from USP. Enough time has passed to see the long-term positive impact.

Links Media implemented its tool for the assessment of communication and advocacy needs with NMCP directors from Belize (Kim Bautista) and Suriname (Hedley Cairo) and asked follow-up questions. Found that Belize is looking for creative ideas to achieve elimination. Meanwhile, Suriname is facing a majority of cases imported from neighboring countries, and needs to better understand why itinerant miners are not using LLINs. Also spoke one-on-one with the NMCP director of Guatemala, Sergio Aguilar, Engel Banegas of Honduras, Julio Rosales of Nicaragua, and Guillermo Gonzalvez, the PAHO focal point for Peru, and agreed to follow up with a telephone assessment to interview Jorge Escobedo who recently took over in Peru. Spoke with Colombia NMCP staff led by Julio Padilla, and agreed to follow up via email in order to be put in touch with higher-level authorities (Dr. Osorio and Dr. Fernando Valderrama) who can provide approval for deployment of a communication strategy to the different departments.

Presentations by the CDC discussed how vector populations' behavior and susceptibility to insecticides should be monitored in different epidemiological contexts. Likewise, vector control interventions should be monitored to confirm their efficacy and appropriately plan for their replacement (in the case of LLINs) or replication (in the case of IRS).

Dr. Maria de la Paz Adé of PAHO presented on the trainings carried out recently at Mexico's Institute of Epidemiological Diagnosis and Reference (InDRE) facility towards achieving quality control for microscopic diagnosis in all AMI/RAVREDA countries. This fell under the External Quality Assurance Program for malaria microscopy in the Americas (EQAP).

Dr. Ventkatchalam Udhayakumar presented about the advanced tools available to detect low-density parasitemia: RealAmp Kit (produced by the CDC) and the LAMP method. There are also the PET-PCR fluorogenic primers developed by the CDC for screening a large number of samples at once. Brazil is currently validating the use of the latter tool.

Day Four, March 14, 2014

The XXV AMI/RAVREDA Steering Committee Meeting was held on this day. Regarding the topic of possible artemisinin resistance, partners remarked that they still lacked certainty about the situation on the ground. Links Media pointed out that from the perspective of acting as if artemisinin resistance already exists, it is entirely possible to do work with itinerant miners without mentioning the "artemisinin resistance" phenomenon at all.

A discussion was held about the likelihood that Ecuador will soon leave the initiative as Bolivia and Venezuela have done in the past. Jaime Chang clarified that when USAID says partners cannot work in a country, such a determination does not necessarily apply to PAHO's multilateral funds. However, PAHO relies substantially on USAID support in order to carry out its work in the countries, and is generally unable to continue to conduct activities in countries without USAID resources.

Partners presented their work plans and budgets. Jaime Chang stated that USAID provides \$3.5 million to AMI annually. Under USAID's current agreement with PAHO, which covers September 2012 to February 2016, the overall budget is \$6,766,000. Of that funding, 57% goes to the Regional Malaria Program, and 43% goes to the 11 countries supported by AMI. (Note: Since the year 2002, USAID has provided total resources in the amount of \$22,279,669 directly to PAHO for AMI/RAVREDA.)

Approximate AMI partner budgets for FY 14 are:

PAHO: \$1,503,556
Links Media: \$700,000
MSH: \$519,875
CDC: \$476,569
USP: \$300,000

Links Media completed a post-meeting news release on March 15, 2014 (see Annex 4, attached). The news release was sent via the USAID/Peru COTR for use by USAID/Nicaragua.

VI. Conclusions and Recommendations

Links Media had a fruitful exchange with AMI country representatives and international technical partners. Links Media obtained useful information and ideas from this event and networked with AMI partners and collaborators. The ideas shared will orient Links Media's design and development of appropriate training and technical assistance activities in the areas of communication and advocacy, laying the groundwork for the institutionalization of proven approaches in malaria control communications within the NMCPs of participating countries.

Based on the work conducted during this meeting, Links Media recommends:

- In the context of low transmission of malaria, proceed with caution when communicating about the region's fragile and reversible gains against malaria. It is advisable that scientists hone their ability to convey key points about malaria surveillance and research in order to inform the decision-making process.
- Conduct advocacy with multiple levels of leadership through the presentation of facts in a simple and easily understandable format for people in other disciplines (e.g. be prepared to demonstrate that malaria control interventions are cost effective). Clear and effective communication is paramount to securing political leaders' commitment to sustaining regional efforts against malaria.
- Develop a comprehensive strategy to orient the communication activities to be undertaken by Brazil, Guyana, and Suriname, which in addition to addressing

the immediate problem also paves the way for a long-term solution to making quality antimalarial medicines available to itinerant gold miners in and around French Guiana. This strategy should include a strong communication component.

- Select most relevant activities to be included in country-level communication and advocacy strategies.
- Target virtual training in communication to those individuals directly involved in the response to possible artemisinin resistance in the Guyana shield. With money for direct implementation of behavior change communication (BCC) campaign lacking, Links Media should seek to reinforce the understanding of those individuals who will need to hire “marketers.” This could entail training on developing scopes of work for trainings to ensure that key public sector individuals understand the basic tools of health communications, i.e. what to ask of communication and/or social marketing companies, how to set and understand indicators, etc.
- Explore new ways to disseminate AMI’s contributions and success stories to advocate for the institutionalization of its methods at the country and regional levels.

**Annex 1
Event Agenda**

**Amazon Malaria Initiative (AMI)
Amazonian Network for Surveillance of Antimalarial Resistance (RAVREDA)**

Annual Evaluation Meeting

Tuesday March 11, 2014	
08:30 – 09:00	Registration
09:00 - 09:30	Welcome Remarks PAHO/WHO Representative in Nicaragua Unit Chief, Neglected, Tropical and Vector Borne Diseases, PAHO/WHO Washington, D.C. Representative of Ministry of Health of Nicaragua
09:30 – 09:45	Overview of the meeting, Presentation of participants Carter K.. PAHO / Chang J., USAID Security session UN/NIC
09:45 – 10:25	SESSION 1: Analysis of the situation and challenges of countries in the prevention, control and elimination of malaria Regional Perspective <ul style="list-style-type: none"> - Regional situation of Malaria - Carter K., PAHO (20) - Challenges for AMI/RAVREDA – Chang J., USAID (10) - USAID Global Health/PMI perspectives and expectations – Salgado S., USAID (10)
10:25 – 10:35	<i>Coffee break</i>
10:35 – 12:00	Country Perspective: Re-emergence and increase of cases in countries in control phase in the past year in some areas of the country. Challenges and Activities <ul style="list-style-type: none"> - GUY (:20) - PAN (:20) Kuna Yala & Darien - PER (:20) Loreto Discussion (:30)
12:00 -12:50	Elimination efforts in the Region of the Americas <ul style="list-style-type: none"> - EMMIE Malaria Elimination in Mesoamerica and the Hispaniola. Puello JM., RCM. (:15) - Malaria Elimination Working Group. Lescano A., NAMRU/PER (:15) -Comments (: 20)
12:50 - 14:00	<i>Lunch</i>
14:00 – 16:00	SESSION 2: MONITORING AND CURRENT SITUATION OF ANTIMALARIAL RESISTANCE IN THE REGION OF THE AMERICAS <ul style="list-style-type: none"> - Methodologies used and update on efficacy studies conducted recently and/or in the process, by: - SUR (:20) - GUY (:20) - BRA (:20) Discussion (:30) - Analysis of the situation in the Region of the Americas, response to date and next

	steps. Carter K., PAHO (:30)
16:00 - 16:15	<i>Coffee break</i>
16:15 - 17:30	<p>-Presentation of the Document for Strategic orientation for monitoring the efficacy and resistance to antimalarials. AMI/RAVREDA, PAHO/CDC (:20)</p> <p>-Monitoring efficacy with small number of cases: Results of routine surveillance for <i>P. falciparum</i>. HON (:20)</p> <p>Discussion (:30)</p>
Wednesday, March 12, 2014	
09:00 - 10:30	<p>SESSION 3: MONITORING & EVALUATION, AND COMMUNICATION</p> <p>- Monitoring and evaluation of malaria programs: "Policy Brief". Chang J. (:20)</p> <p>- External-evaluation of AMI: Preliminary findings and recommendations for monitoring and evaluation. External Evaluators (:20)</p> <p>- Communication Strategy: "Strategic Advocacy: a call to action." Links Media (:20)</p> <p>Discussion (:30)</p>
10:30 – 10:45	<i>Coffee break</i>
10:45 – 12:55	<p>SESSION 4: ACCESS TO AND QUALITY OF DIAGNOSIS</p> <p>- Programs that ensure access and guarantee the quality of diagnosis: installed capacity in countries</p> <p>-HON (:20) Introduction of RDTs in areas of difficult access. La Mosquitia</p> <p>-COR (:20) Challenges for elimination and use of other diagnostic tools for the diagnosis of malaria</p> <p>- Revised protocol and follow-up actions to monitor the HRP2 gene deletion in the region. Udhayakumar V., CDC (:20)</p> <p>- Results of the External Performance Evaluation Programme and consequent follow-up actions. PER/HON/PAHO, Ade MP, PAHO (:20)</p> <p>- Summary of WHO technical meeting on diagnostic tools in areas of low transmission. Udhayakumar V., CDC (:20)</p> <p>Discussion(:30)</p>
12:55 - 14:00	<i>Lunch</i>

14:00 – 16:30	<p>SESSION 5: ACCESS AND USE OF ANTIMALARIALS</p> <p>Country experiences (activities conducted in the past one year)</p> <ul style="list-style-type: none"> - Ecuador (:15) - Peru (:15) <p>Questions (:10)</p> <ul style="list-style-type: none"> - Current status of the joint-purchase through the PAHO Strategic Fund. Giron N/ Chaparro M., PAHO (:20) - Monitoring of antimalarial stock, coordination among partners and countries. Giron N., PAHO (:20) -How to ensure availability in low transmission areas. Barillas E., MSH (:20) - Presentation of proposed interventions in mining areas. MSH/SUR (:20) <p>Discussion (:30)</p>
16:30 – 16:45	<i>Coffee break</i>
16:45 – 17:45	<ul style="list-style-type: none"> -Panel: Standardization of treatments for P. vivax- 7 days vs 14 days, problems to treat in border areas. HON/NIC (:20) - Treatment and follow-up of patients. Update on treatment for severe cases and experiences with MDA in different epidemiological situations. Carter K., PAHO (:20) <p>Discussion: Relevance and needs given the present situation (:20)</p>
Thursday, March 13, 2014	
09:00 -10:30	<p>SESSION 6: QUALITY OF ANTIMALARIALS</p> <ul style="list-style-type: none"> - Suggestions/recommendations to the network and countries for sustainability of quality control, in the present context. USP (:20) - Presentation of the results of the quality control of drugs purchased through the PAHO Strategic Fund. Parisi JM, PAHO (:20) - Presentation of Strategic Orientation Document. (:20) <p>Discussion: Relevance and needs given the present situation (:30)</p>
10:30 – 10:45	<i>Coffee break</i>
10:45 – 12:35	<p>SESSION 7: VECTOR SURVEILLANCE AND CONTROL</p> <ul style="list-style-type: none"> - Experiences with integral interventions using LLINs, including monitoring and evaluation. COL (:20) -LLIN Durability, Experience in Nicaragua. NIC (:20) -Novel vector control strategies and discussion on their relevance/applicability in the Americas. Lenhart A., CDC (:20) <p>Discussion: Relevance and needs of human resources given the present situation (:30)</p> <ul style="list-style-type: none"> - Presentation of Strategic Orientation Document. AMI/RAVREDA, CDC (:20)
12:45 - 14:00	<i>Lunch</i>

14:00 - 16:00	<p>SESSION 8: EPIDEMIOLOGICAL SURVEILLANCE IN SITUATIONS OF LOW TRANSMISSINO AND DECENTRALIZATION</p> <p>-Challenges and lessons learned:</p> <ul style="list-style-type: none"> - ECU (:20) - COR (:20) <p>-National initiative to strengthen malaria prevention and control towards pre-elimination in Pacific Coastal region. COL (:20)</p> <p>- Panel Discussion: What are the gaps in knowledge that are relevant to improve the decisions we are making regarding the management of malaria. NAMRU/CDC/PAHO (:30)</p> <p>Discussion: Relevance and needs given the present situation (:30)</p>
16:00 -16:15	<i>Coffee break</i>
17:30 – 18:00	Conclusions and closure

Annex 2

Request for Country Clearance

TO: Angela Cardenas, USAID/Nicaragua, acardenas@usaid.gov

FROM: Brian Kubiak, authorized staff, Links Media, under Contract Number: AID-527-C-13-00004

SUBJECT: Request for country clearance for travel to Managua, Nicaragua for the Amazon Malaria Initiative (AMI) international partner Links Media's staff members Julie N. de Carvalho, Senior Project Manager, and Rosane Lopes, Technical Coordinator, from March 10 to March 15, 2014, for the annual AMI/Amazon Network for the Surveillance of Antimalarial Drug Resistance (RAVREDA) evaluation and steering committee meetings.

COPY: Jaime Chang, PHN Officer, USAID/Peru
Marisabel Sanchez, President, Links Media
Julie N. de Carvalho, Senior Project Manager, Links Media
Rosane Lopes, Technical Coordinator, Links Media

Links Media wishes to request country clearance for proposed travel to Nicaragua from March 10 to 15, 2014 for international AMI partner staff Julie N. de Carvalho, Senior Project Manager, and Rosane Lopes, Technical Coordinator, both of Links Media.

Background

The United States Agency for International Development (USAID) Latin America and Caribbean Bureau, Office of Regional Sustainable Development launched AMI in 2001 to improve the prevention and control of malaria in partner nations of the Amazon Basin. The initiative's mission is to (i) ensure that national malaria control programs in the Amazon Basin substantially incorporate selected best practices and (ii) promote lasting, evidence-based policy change in the partner countries. AMI's objectives include: strengthening the partner countries' systems of antimalarial medicine resistance surveillance; encouraging the evidence-based formulation of medicine policies that promote the adequate use of effective antimalarials; and addressing including diagnostic accuracy and access, medicine quality, access to treatment, and vector control.

USAID established AMI as a collaborative partnership among organizations (the AMI technical partners) that provide technical and scientific expertise and collaborate with the nations' ministries of health and national malaria control programs to proactively address malaria prevention and control. The AMI partner countries take an active role, working closely with USAID and AMI's technical partners at the regional and national levels, to ensure that positive impacts made in the reduction of malaria are sustained and sustainable. The partner countries also collaborate with one another and maintain an ongoing exchange of information and expertise (i.e., South-South collaboration).

The initiative's subregional approach benefits partner countries through (i) subregional training and technical assistance (TA), (ii) the development of standardized guidelines and protocols across all partner countries, (iii) the comparability of research and monitoring results within and across countries, and (iv) coordinated approaches to addressing cross-border problems.

Purpose of Proposed Visit

Links Media will be visiting Nicaragua to participate in the XIII AMI/RAVREDA Technical Meeting and the XXV AMI Steering Committee Meeting to review and discuss best practices, lessons learned, contributions, and achievements made to malaria control, prevention, and treatment efforts in the Latin American region, as a result of the initiative. As part of this meeting, Links Media will also present its contributions as an international technical partner.

Scope of Work

Links Media will engage in the following activities during the visit to Nicaragua:

- Brief/debrief USAID/Peru officials as requested.
- Participate in the XIII AMI/RAVREDA Technical Meeting and XXV AMI Steering Committee Meeting.
- Present relevant information on communication and information dissemination activities conducted during the span of Links Media's participation in AMI and present materials developed within the initiative.
- Work with national and international partners to identify specific communication and information dissemination needs moving forward.
- Upon returning from the trip, Links Media will also:
 - Develop a trip report describing activities during the trip and next steps; and,
 - Make adjustments to the work plan to reflect any decisions made during the working meeting.

Anticipated Principal Contacts

- **O. Jaime Chang**, USAID/Peru; jachang@usaid.gov; tel.: (51-1) 618-1266
- **Julio Cesar Rosales Caballero**, Responsable Programa de Malaria, Ministerio de Salud; jrcrlll@hotmail.com; tel.: (505) 2289-4260
- **Rolando López Ampié**, Supervisor de Programa de Malaria, Ministerio de Salud; supervision@minsa.gob.ni; tel.: (505) 2289-4700
- **Alberto Montoya Pérez**, Director de Parasitología Médica, Centro Nacional de Diagnóstico y Referencia; parasitologia@minsa.gob.ni; (505) 2228-94700
- **Sandra Judith Pérez Sánchez**, Supervisora, Dirección General de Insumos Médicos, Ministerio de Salud; dais07@minsa.gob.ni; tel.: (505) 2289-0433
- **Núbia Blanco Sampson**, Centro Nacional de Diagnóstico y Referencia, Ministerio de Salud; lnccm-cndrminsa@hotmail.com / dir-cndr@minsa.gob.ni; tel.: (505) 2289-7723
- **Aída Mercedes Soto Bravo**, Enfermedades Transmisibles-Enfermedades Vectoriales, OPS/OMS; sotoa@nic.ops-oms.org; tel.: (505) 2289-4200 ext. 260

Logistics

The AMI international partner will be arriving in Managua, Nicaragua on March 10, 2014. The AMI international partner will depart from the country on March 15, 2014. The flight itinerary is listed below. Hotel reservations have been made at the Crowne

Plaza Managua, Octava Calle Sur Oeste 101, Managua, 1, Nicaragua. No additional Mission assistance is requested.

Itinerary for Julie N. de Carvalho, Links Media.

[REDACTED]
[REDACTED] [REDACTED] [REDACTED]

March 10

Flight Copa CM476 Lv Washington 2:13pm

Ar Managua 5:44pm

March 15

Flight Delta 0392 Lv Managua 8:10am

Ar Washington DC 6:10pm

Itinerary for Rosane Lopes, Links Media.

[REDACTED]
[REDACTED] [REDACTED] [REDACTED]

Brazil

March 10

Flight Copa CM0872 Lv Rio de Janeiro 1:27 am

Ar Panama City 6:48 am

Flight Copa CM0711 Lv Panama City 7:06 pm

Ar Managua 7:48 pm

March 15

Flight Copa CM0105 Lv Managua 2:34 pm

Ar Panama City 5:08 pm

Flight Copa CM0216 Lv Panama City 9:04 pm

March 16

Ar Rio de Janeiro 6:28am

Funding

Links Media staff will be supported through the USAID/AMI budget.

Action

Please inform Links Media whether country clearance has been granted for the proposed activity. Please reply via e-mail to the attention of O. Jaime Chang, USAID/Peru; jachang@usaid.gov; tel.: (51-1) 618-1266. Please send carbon copies to Marisabel Sanchez at msanchez@linksmedia.net, Brian Kubiak at bkubiak@linksmedia.net, Julie N. de Carvalho at jdecarvalho@linksmedia.net, and Rosane Lopes at rlopes@linksmedia.net.

Thank you for Mission cooperation.

Annex 3 Selected Photographs



Participants at the XIII Annual AMI/RAVREDA Meeting: Dr. Stephen Vreden of Suriname makes a comment.



Engels Banegas of Honduras finishes his presentation.



Dr. Keith Carter of PAHO/Washington presents regarding Global Fund targets for malaria elimination in Central America and Hispaniola.



View of Managua, Nicaragua from Crowne Plaza Hotel.

Annex 4
News Release



FOR IMMEDIATE RELEASE

March 27, 2014

Media Contact: Julie de Carvalho (Spanish, Portuguese, English)

Links Media: 301-987-5495 ext.109

jdecarvalho@linksmedia.net

Media Contact: Scott Barnes (English)

Links Media: 301-987-5495 ext.101

sbarnes@linksmedia.net

Website: usaidami.org

News Release

Malaria challenge debated at meeting of regional health initiative in Managua from March 11-13, 2014

USAID, the Pan American Health Organization, ministries of health, and scientists discussed ongoing regional strategies for malaria control.

MANAGUA, NICARAGUA — Despite being preventable and treatable, malaria represents a persistent threat in 21 malaria-endemic countries in the Americas. One approach to address it has been to consolidate regional collaborative efforts for malaria control through the Regional Network for the Surveillance of Antimalarial Drug Resistance (known as RAVREDA for its acronym in Spanish) and the Amazon Malaria Initiative (AMI), with support from the United States Agency for International Development (USAID) and the Pan American Health Organization (PAHO).

From March 11-13, 2014, at a meeting in Managua sponsored by the Ministry of Health of Nicaragua, PAHO and USAID, representatives of the national malaria control programs of the 11 countries participating in AMI and RAVREDA (Belize, Brazil, Colombia, Ecuador, Guyana, Guatemala, Honduras, Nicaragua, Panama, Peru, and Suriname) and four guest countries met to discuss progress in the implementation of evidence-based strategies to address increasingly localized malaria.

The regional approach has contributed to a considerable and sustained decrease in malaria transmission in all but one of the countries participating in AMI and RAVREDA. According to PAHO, the incidence of malaria has decreased by 60% from 2000 to 2013. Dr. Socorro Gross Galiano, PAHO's representative in Nicaragua, underscored that malaria control is related to economic development, since economic factors drive the population migration in Central America and the search for gold in the Amazon that contribute to disseminate malaria and make it more difficult to reach affected persons with diagnosis and treatment. She added that although some countries in the Americas have seen a reemergence of malaria along the past years, there is a big opportunity to eliminate malaria in the Americas, particularly in Central America and the Caribbean, where tourism is one of the most important sources of revenue, pointing out that "malaria and tourism do not go together."

USAID provides technical cooperation to Central American and Amazon countries based on a successful model for technical cooperation that began with eight Amazon basin countries in 2001. Additional information about USAID's Amazon Malaria Initiative is available at usaidami.org.

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PARA DIVULGACIÓN INMEDIATA

27 marzo del 2014

Contacto para los medios: Julie de Carvalho (Español, Portugués, Inglés)

Links Media: 301-987-5495 ext.109

jdecarvalho@linksmedia.net

Sitio web: usaidami.org

Comunicado de Prensa

Desafío de la malaria debatido en reunión de iniciativa regional de la salud que sucedió en Managua de 11 a 13 de marzo del 2014

USAID, OPS, ministerios de salud y científicos discutieron la continuación de estrategias regionales para el control de la malaria.

MANAGUA, NICARAGUA — A pesar de ser prevenible y tratable, la malaria es una enfermedad que representa un desafío persistente en 21 países de las Américas. Un abordaje para enfrentarla ha sido consolidar los esfuerzos colaborativos regionales para controlar la malaria a través de la Iniciativa Amazónica contra la Malaria (AMI) y la Red Amazónica para la Vigilancia de la Resistencia contra las Drogas Antimaláricas (RAVREDA), con el apoyo de la Agencia de los Estados Unidos para el Desarrollo Internacional (USAID) y la Organización Panamericana de la Salud (OPS).

En Managua, del 11 al 13 de marzo del 2014, durante una reunión auspiciada por el Ministerio de salud de Nicaragua, OPS y USAID, los representantes de los 11 países participantes en AMI y RAVREDA (Belice, Brasil, Colombia, Ecuador, Guyana, Guatemala, Honduras, Nicaragua, Panamá, Perú, y Surinam) y cuatro países invitados se reunieron para discutir los avances en la puesta en práctica de estrategias basadas en evidencia para enfrentar una malaria cada vez más focalizada.

La aproximación regional ha contribuido a lograr una considerable y sostenida disminución en la transmisión de malaria en todos menos uno de los once países participantes en AMI y RAVREDA, que según la OPS ha sido de 60% entre los años 2000 y 2013. La Representante de la OPS en Nicaragua, la Dra. Socorro Gross Galiano, subrayó la relación entre la malaria y el desarrollo económico, dado que son factores económicos los que estimulan en Centroamérica y en la Región Amazónica la migración y la minería ilegal de oro que hacen más difícil proporcionar diagnóstico y tratamiento a las personas afectadas. La Dra. Gross añadió que aunque algunos países en las Américas han presentado una reemergencia de la malaria durante los últimos años, se tiene una gran oportunidad para eliminar la malaria en las Américas, particularmente en Centroamérica y el Caribe, donde el turismo es una de las fuentes de ingreso más importante, señalando que “la malaria y el turismo no van bien juntos”.

USAID colabora técnicamente con los países de Centroamérica y la Región Amazónica a través de AMI, siguiendo un modelo exitoso de cooperación que se inició el año 2001 con ocho países amazónicos. Información adicional sobre AMI está disponible en www.usaidami.org.

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