Malaria 2012: Saving Lives in the Asia-Pacific

Sydney, Australia
October 30- November 2, 2012

Conference Report

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Promoting the Quality of Medicines
Implemented by U.S. Pharmacopeia
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Executive Summary

With the common purpose of combating and eventually eliminating malaria from the Asia-Pacific region, over 300 representatives from 30 countries and 130 organizations, mostly from the region, gathered in Sydney, Australia from October 31 to November 2, 2012. *Malaria 2012: Saving Lives in the Asia-Pacific* was organized by the Australian Agency for International Development (AusAID). On the last day of the event, ministerial level representatives gathered consensus to work together on the following areas to accelerate progress toward the goal set by member states of the World Health Assembly of a 75 percent reduction in malaria cases and deaths by 2015:

1. Promoting high level regional political leadership and collaboration
2. Closing the financial gaps
3. Expanding access to quality medicines and technologies
4. Achieving universal coverage of key malaria interventions in priority areas
5. Accelerating highest priority research and development

The Australian Government, through AusAID, committed over AUD $100 million over three years to support the efforts described above.
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About PQM
The Promoting the Quality of Medicines (PQM) program, funded by the U.S. Agency for International Development (USAID), is the successor of the Drug Quality and Information (DQI) program implemented by the United States Pharmacopeia (USP). PQM is USAID’s response to the growing challenge posed by the proliferation of counterfeit and substandard medicines. By providing technical assistance to developing countries, PQM helps build local capacity in medicine quality assurance systems, increase the supply of quality medicines to priority USAID health programs, and ensure the quality and safety of medicines globally. This document does not necessarily represent the views or opinions of USAID or the United States Government. It may be reproduced if credit is given to PQM and USP.
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<thead>
<tr>
<th>ACRONYMS</th>
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<tr>
<td>ACT</td>
<td>Artemisinin-combination therapy</td>
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<tr>
<td>APLMA</td>
<td>Asia-Pacific Leaders Malaria Alliance</td>
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<tr>
<td>AusAID</td>
<td>Australian Agency for International Development</td>
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<td>BMGF</td>
<td>Bill &amp; Melinda Gates Foundation</td>
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<td>GFATM</td>
<td>Global Fund for AIDS, Tuberculosis and Malaria</td>
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<td>PQM</td>
<td>Promoting the Quality of Medicines Program</td>
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<tr>
<td>SEARO</td>
<td>Regional Office for South-East Asia (WHO)</td>
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<td>USAID</td>
<td>United States Agency for International Development</td>
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<td>USP</td>
<td>United States Pharmacopeia</td>
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<td>WHO</td>
<td>World Health Organization</td>
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<td>WPRO</td>
<td>Office for the Western Pacific Region (WHO)</td>
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Background
Despite the fact that many countries have made significant progress reducing the number of cases and mortality rates in the past decade, malaria—a preventable and curable disease—continues to affect millions of people. The emergence of resistance to artemisinin, the core ingredient in the most effective malaria treatment, artemisinin-based combination therapy (ACT), is an urgent concern. This puts at risk the gains countries have made to combat malaria, and may seriously jeopardize further progress in malaria control and elimination in the Asia-Pacific region. The impact of widespread resistance to ACT would be a health disaster for the region and beyond. Among the main challenges in the region include the fact that mosquitoes are developing resistance to certain insecticides used to treat mosquito nets and for indoor residual spraying. Large-scale population movements in the country and across borders, urbanization, changes in land use for agriculture or industry, and the prevalence of poor-quality medicines in the region can also exacerbate the spread of malaria and artemisinin-resistant malaria. In addition, the global financial crisis has put pressure on external aid budgets and domestic financing for priority diseases, including malaria.

Purpose of Workshop
To discuss and gain consensus on action items to accelerate priority interventions in malaria control and ultimately work together toward eliminating malaria in the Asia-Pacific region.

Highlights of Workshop Deliberations and Presentations
Representatives from over 30 countries, mostly in the region, and 130 organizations and institutions, including donors such as the Australian Agency for International Development (AusAID); United States Agency for International Development (USAID); Bill & Melinda Gates Foundation; the Global Fund for AIDS, Tuberculosis and Malaria; and the World Health Organization (WHO) were among the participants in Malaria 2012: Saving Lives in the Asia-Pacific. On the last day, ministerial level representatives gathered consensus to work together on the AusAID initiative (summarized below) of accelerating progress toward the goal set by member states of the World Health Assembly of a 75 percent reduction in malaria cases and deaths by 2015. The Australian Government, through AusAID, committed over AUD $100 million over three years to support these efforts. The WHO Office for the Western Pacific Region (WPRO) and Regional Office for South-East Asia (SEARO) will be the principal coordinating and technical assistance bodies for the implementation of this initiative.

1. Promote high-level regional political leadership and collaboration
   • Establish the Asia-Pacific Leaders Malaria Alliance – APLMA (by Apr 2013) to:
     o Review progress and report to appropriate regional bodies to promote accountability at all levels
     o Advocate for action for prevention of malaria across relevant sectors such as housing, education, agriculture, and environment
     o Engage the private sector and communities

2. Close the financing gap
   • Convene a taskforce with support from technical and funding partners (by May 2013) to:
     o Identify financial shortfalls and commodity gaps to meet the agreed targets (by Sep 2013)
o Develop a strategic plan to address these gaps, including options for a regional financing mechanism based on voluntary contributions (by Dec 2013)

o Agree on priorities and implement financing options as appropriate (by Jan 2014)

o Report to appropriate regional bodies

3. Expand access to quality medicines and technologies
   • Convene a taskforce with support from technical and funding partners (by May 2013) to:
     o Identify and implement options to increase regional production capacity for and access to medicines and technologies that meet international standards (by Dec 2013)
     o Identify opportunities for regional collaboration to strengthen regulatory services in public and private sectors (by Dec 2013)
     o Work to halt the use of oral monotherapies and medicines that do not meet international standards
     o Report to appropriate regional bodies

4. Achieve universal coverage of key malaria interventions in priority areas
   • Intensify support for national plans with immediate priority to areas where artemisinin resistance has emerged, to vulnerable groups and high burden areas through:
     o Strengthening management of field operations in areas where artemisinin resistance has emerged (by June 2013)
     o Immediately prioritizing 100 percent coverage for effective interventions in high burden population areas and areas where artemisinin resistance is present
     o Tracking all malaria cases and deaths through strengthened surveillance systems
     o Using innovative approaches to address the needs of migrant/mobile populations and other vulnerable groups
     o Ensuring community ownership and engagement
     o Gaining commitment of key private sector and non-government actors in high-risk areas to help achieve 100 percent coverage of key interventions for their workforce, and where appropriate, other populations at risk
     o Building country capacity in areas such as service delivery, surveillance, and research, and strengthening cross country linkages

5. Accelerate highest priority research
   • Agree on and implement a focused research and development agenda (under APLMA by May 2013)
     o National malaria programs, researchers, and technical partners collaborate to agree priorities
     o Secure adequate funding

Conclusions and Action Items
The conference was successful, with consensus being reached on goals, priorities, and action items. PQM will seek opportunities to meet with WPRO and SEARO for potential collaboration in the area of medicines quality and will invite an AusAID representative to attend the Build Regional Expertise in Medicines Regulation, Information Sharing, Joint Investigation and Enforcement (BREMERE) meeting in Siem Reap, Cambodia in February 2013.
<table>
<thead>
<tr>
<th>ARRIVAL</th>
<th>DAY 1</th>
<th>DAY 2</th>
<th>DAY 3</th>
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<tbody>
<tr>
<td>Registration</td>
<td>8:30am – Registration</td>
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<tr>
<td>Breakfast</td>
<td>to be confirmed</td>
<td>to be confirmed</td>
<td>Roll Back Malaria Report Launch – by invitation</td>
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<tr>
<td>Early morning</td>
<td>9:00am – Plenary Session</td>
<td>9:00am – Plenary Session</td>
<td>Ministerial Action Meeting</td>
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<tr>
<td>Setting the scene: the Asia-Pacific context</td>
<td>Introduction</td>
<td>Delegates Observing ministerial meeting (via live-stream) and side events</td>
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<tr>
<td>10:15am – Plenary Session</td>
<td>10:15am – Thematic sessions</td>
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<tr>
<td>The global context: progress and challenges in malaria control and elimination</td>
<td>Theme 1: Sustainable financing for malaria control and elimination and resistance containment</td>
<td>Theme 2: Ensuring access to quality medicines and commodities – production and supply chain</td>
<td>Theme 3: Priority programming – expanding coverage and depth of programs in high burden areas</td>
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<tr>
<td>11:15am-12pm – Plenary Session</td>
<td>11:15am-12pm – Plenary Session</td>
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<td>Successes and challenges in Asia and the Pacific</td>
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<td>Ministerial Action Meeting</td>
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<td>12:15pm – Lunch</td>
<td>12:15pm – Lunch</td>
<td>Delegates Lunch</td>
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<td>Early afternoon</td>
<td>2:15pm – Plenary Session</td>
<td>2:15pm – Thematic sessions</td>
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<td>Priorities for action in Asia and the Pacific: the development challenge of malaria drug resistance</td>
<td>Theme 1: The role of the private and non-state sector in ensuring equity and access to services</td>
<td>Ministerial Action Meeting</td>
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<td>3:15pm – Plenary Session</td>
<td>3:15pm – Plenary Session</td>
<td>Delegates Observing ministerial meeting (via live-stream) and side events</td>
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<td>Priorities for action in Asia and the Pacific: technical challenges</td>
<td>Theme 2: Research and development of new technologies</td>
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<td>3:45pm – Plenary Session</td>
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<td>Introduction to the agenda for action</td>
<td>Plenary Feedback – the way forward</td>
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<td>4:15pm-4:30pm – Afternoon tea</td>
<td>4:15pm-4:30pm – Afternoon tea</td>
<td>Malaria 2012 Close and official photographs</td>
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<td>Afternoon tea</td>
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<td>Welcome reception</td>
<td>Dinner function</td>
<td>Harbour function</td>
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