From community to regional, and even the global level, we all have important roles to play in partnership to achieve our goal. APLMA was born to help facilitate this process and we look forward to working with you.

Dr Nafsiah Mboi
Leaders’ Envoy, Asia Pacific Leaders Malaria Alliance
Foreword

This report presents a short overview of the work of the Asia Pacific Leaders Malaria Alliance (APLMA) and its Secretariat during 2015. During the year, APLMA consolidated as a movement with the unanimous endorsement of the Leaders’ Elimination Roadmap by 19 Heads of Government. Critically, through the Roadmap, the Secretariat also spearheaded the development of a leader-endorsed, ongoing policy process to give life to the Roadmap going forward.

The Secretariat fulfilled its mission to build a broad coalition in support of APLMA Leaders. The year saw the Secretariat continue to drive forward engagement and ownership from Prime Ministers, through Ministers, Secretaries and National Malaria Programme Managers. The endorsement of the Roadmap, and substantial engagement at central agency level, created unprecedented momentum for the regional elimination movement. Ministries of Finance and Foreign Affairs from across the region were engaged in the elimination agenda, in most cases for the first time.

At the close of 2015, a number of countries were already developing new elimination strategies, including Cambodia, India, Myanmar and Papua New Guinea. In 2015, we also welcomed the appointment of Dr Nafsiah Mboi as APLMA Leaders’ Envoy. 2016 will see the Secretariat substantially reconfigure to better support our Envoy and our Leaders in realizing the regional commitment for an Asia Pacific free of malaria by 2030.

Dr Benjamin Rolfe
Executive Secretary
Asia Pacific Leaders Malaria Alliance Secretariat
2015 in Review

Malaria in the Asia Pacific region

Even though fifty-seven countries have reduced their malaria cases by 75% or more in the past 15 years, more than 3.2 billion people remain at risk of malaria throughout the world. About 2.3 billion of these are in Asia Pacific, particularly in India, Indonesia, Myanmar, Pakistan and Papua New Guinea (PNG).

2015 was a year when the world demonstrated that malaria investment provides unparalleled returns. Fourteen countries in the region achieved the target of reducing malaria incidence by more than 75% by 2015: Bangladesh, Bhutan, Cambodia, Democratic People’s Republic of Korea, Malaysia, Nepal, the People’s Republic of China, the Philippines, the Republic of Korea, Solomon Islands, Sri Lanka, Timor-Leste, Vanuatu and Viet Nam. Sri Lanka continues to experience no cases of local transmission, and is on the threshold of elimination.

Despite strong results, the external financing that has to a large extent delivered these gains remains vulnerable.

During 2015, a substantial part of the Secretariat’s work focused on promoting understanding of these potential risks among the broader range of stakeholders outside the health sphere. Ministries of Finance, Foreign Affairs, Planning and the offices of Heads of Government are becoming increasingly aware of the latent capacity for malaria resurgence, and the fragility of recent gains against the disease.

In 2014, representatives from APLMA member states1 called out the lack of clear data on the forward financing requirements for elimination. In 2015, the Secretariat responded by working with the Asian Development Bank (ADB) to commission new analysis on the costs of malaria elimination, tailored to the unique epidemiology of the region. In addition, programmes need to make their current budget allocations stretch further and, to this end, the Secretariat commissioned additional work on value for money and efficiency.

The risks posed by multidrug-resistant malaria in the Greater Mekong Subregion (GMS) are increasingly recognized as a major threat to health security. The Secretariat worked to expand risk perception to the global scope of this emergency. Without urgent action, the most important first-line treatments for malaria could become ineffective within years, triggering a devastating rise in malaria mortality globally, as well as significant losses in economic productivity.

This urgency was reflected in partner actions. Critically, 2015 saw a groundbreaking move from the World Health Organization (WHO), working with its Member States to develop and adopt global

1 East Asia Summit Leaders: Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, the Philippines, Singapore, Thailand, Vietnam, Australia, China, India, Japan, New Zealand, the Republic of Korea, the United States and Russia, (plus Vanuatu).
2015 was a year when the world demonstrated that malaria investment provides unparalleled returns.

and regional frameworks for action. The combined impetus provided by the APLMA 2030 elimination goal, the Roadmap development process, together with the launch of the WHO Global Technical Strategy for Malaria 2016–2030 and WHO GMS Elimination Strategy was significant. By the end of 2015, many countries in the region were already developing revised elimination strategies, including Cambodia, India, Myanmar and PNG – together accounting for 66% of the regional burden.

Other partners made critical contributions. The Roll Back Malaria Partnership developed and launched Action and Investment to defeat Malaria 2016–2030 (AIM). The Bill and Melinda Gates Foundation spearheaded – with the UN Secretary General’s Special Envoy for Financing the Health MDGs and for Malaria – the launch of From Aspiration to Action, a powerful global call to action. The ADB ramped up implementation of the Regional Malaria and Communicable Disease Trust Fund (RMTF), integrating malaria into critical work on health security in the GMS. In addition, the Clinton Health Access Initiative (CHAI) made significant contributions to the work of the Secretariat, as well as to accelerating progress in the GMS.

APLMA mission and mandate

APLMA was established by the East Asia Summit (EAS) during its 2013 meeting in Brunei. This was in response to Leaders’ concerns about health security and the rising risks of malaria resurgence, in particular due to increasing drug-resistant malaria in the GMS. The need to engage and support leaders and finance ministers led to the creation of APLMA, using the EAS process to galvanize Heads of Government.

In November 2014, 18 East Asia Summit (EAS) and malaria-endemic Pacific Heads of Government committed to a goal of an Asia Pacific free of malaria by 2030. They requested the APLMA Co-Chairs – the Prime Ministers of Australia and Viet Nam – to present an action plan for achieving the goal to the 10th EAS in Kuala Lumpur in November 2015. This APLMA Leaders’ Malaria Elimination Roadmap (Roadmap) was subsequently endorsed, and highlights six key priorities that nations of Asia and the Pacific can pursue to achieve the 2030 elimination goal.
The six priorities of the Leaders’ Roadmap

Improve targeting and efficiency to maximize impact

Mobilize domestic financing and leverage external support

Innovate for elimination
The six priorities of the Leaders’ Roadmap

1. Unite national efforts and regional action
2. Map, prevent, test and treat the disease, everywhere
3. Ensure high quality malaria services, tests, medicines, nets and insecticides
4.
5.
6.
What was achieved?

The Secretariat focused on delivering outcomes in four key areas to maximize impact.

**Leadership and advocacy**, to build increased political commitment to malaria elimination by Leaders in the Asia Pacific region.

**Accountability**, to ensure Heads of Government in endemic and non-endemic countries increasingly hold each other mutually accountable for progress against agreed malaria targets using the APLMA Dashboard. **Financing**, to ensure national, regional and global resource mobilization to progress malaria elimination and prevent its resurgence. Lastly, **quality medicines** to take forward the recommendations of the Access to Quality Medicines and Other Technologies Task Force (AQMTF), co-chaired by Australian Secretary of Health and Indian Secretary of Health, and subsequently endorsed by Leaders at the EAS in 2014.

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**OCTOBER 2013**
- 8th EAS endorses creation of APLMA and its secretariat
- Govt. of Australia approves initial funding for APLMA secretariat

**JANUARY 2014**
- APLMA secretariat established and hosted at ADB

**SEPTEMBER 2014**
- APLMA Task Forces finalize outcome statements/recommendations

**AUGUST 2014**
- UN General Assembly welcomes APLMA

**OCTOBER 2014**
- APLMA Co-Chairs Australia PM and Viet Nam PM write letters to EAS Leaders urging support for APLMA recommendations
- Bill and Melinda Gates Foundation awards grant to APLMA

**NOVEMBER 2014**
- 9th EAS endorses Asia Pacific Malaria Elimination Goal by 2030
FEBRUARY 2015
APLMA Reference Group meeting

APRIL 2015
Australia and Viet Nam co-host World Malaria Day event

MAY 2015
WHO publishes Global Technical Strategy for Malaria 2016–2030

JUNE 2015
Dr Nafsiah Mboi appointed APLMA Envoy

JULY 2015
APLMA Senior Officials Meeting

SEPTEMBER 2015
Sustainable Development Goals (SDGs) adopted by UN General Assembly

From Aspiration to Action released

OCTOBER 2015
International ministerial meeting discusses malaria elimination (London)

NOVEMBER 2015
APLMA Co-Chairs transmit Roadmap to Leaders

18 Heads of Government endorse Roadmap at the 10th EAS in Kuala Lumpur, Malaysia

SEPTEMBER 2015
WHO publishes Global Technical Strategy for Malaria 2016–2030

RBM publishes Action and Investment to defeat Malaria 2016–2030

MAY 2015
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OCTOBER 2015
International ministerial meeting discusses malaria elimination (London)
1. Leadership and advocacy

The development of the Roadmap included unprecedented levels of consultation and collaboration. In addition to incorporating the Task Force recommendations, the Secretariat crafted the Roadmap with guidance from a Reference Group meeting held in Bangkok in February 2015. It was further refined in July 2015 following a meeting of Senior Officials from Ministries of Foreign Affairs, Finance and Health, together with development and technical partners. The draft Roadmap was transmitted to Ministers of Foreign Affairs, Finance and Health of EAS and malaria-endemic Pacific countries for review and discussion during the EAS Senior Officials Meeting in October. A final version of the Roadmap was transmitted by the APLMA Co-Chairs to Leaders, and endorsed by 18 Heads of Government at the 10th EAS in Malaysia in November 2015.

The Roadmap highlights six key priorities that Heads of Government can pursue to achieve the 2030 goal. Advocating for implementation of Roadmap priorities will be the focus of the Secretariat’s work in 2016.

Supporting the Leaders’ commitment

Building on the commitment of the EAS in 2014, the Secretariat coordinated partners to deliver an advocacy strategy to maintain Leaders’ commitment to elimination. The strategy encouraged senior
officials to champion united support for elimination, innovative financing and new technologies, as well as access to high-quality medicines and services. Based on priority actions identified by the APLMA Task Forces, it ensured the Roadmap ultimately reflected appropriate priorities for a comprehensive regional initiative.

The APLMA Leaders’ Envoy and Secretariat used a range of forums to engage with senior government officials, and both bilateral and multilateral agencies, to advocate for the Roadmap. Intensive outreach was conducted by both the Secretariat and partners, to senior government officials in Ministries of Health, Foreign Affairs, and Finance. The Governments of Australia and Viet Nam provided particularly critical support. The result was strong support to both the process of Roadmap development, and ultimately leaders’ endorsement of the Roadmap at the 10th EAS in 2015.

External communications

In 2015, the aims of the Secretariat’s public communications were to: 1) provide a supportive political climate to encourage leaders and decision-makers to take additional action to counter malaria; and 2) build awareness and momentum around a regionally owned elimination movement.

Outreach approaches included:

- Media outreach, with and through partners
- APLMA eNewsletter published three times (and now bi-monthly)
- Blog platform on APLMA website with some cross-posting to ADB (20 blog posts during 2015)
- Expanded social media presence.
Media outreach and coverage

In 2015, the Secretariat issued a number of press releases for distribution to regional media contacts. These included:

- Former Indonesian Minister of Health, Dr Nafsiah Mboi appointed as APLMA Envoy
- Asia Pacific Leaders push towards malaria-free region by 2030
- India stands with Asia Pacific nations in drive for malaria-free region
- WHO: Asia Pacific malaria down by more than 45% in past 15 years

Fifteen high profile news and media items referred specifically to APLMA (see box). This coverage resulted from media outreach by the Secretariat, and through a growing interaction with regional media. The Secretariat contributed significantly to a feature article entitled Malaria eradication: Breaking the fever published by the Economist on 8 October 2015.

In addition, APLMA issued two full-page ‘advertorial’ pieces in the Financial Times: A statement by the Secretariat describing the Leaders’ Roadmap was published on 8 October 2015 ahead of the EAS Senior Officials meeting; and an open letter from the APLMA Leaders’ Envoy commending the foresight of EAS Leaders was published immediately prior to the EAS on 21 November 2015.


Drug resistant malaria strain in Myanmar causes alarm. The Straits Times; 20 February, 2015.


India joins regional Asia Pacific Malaria Elimination Network. Pharmabiz; 20 March, 2015.

APMEN meet to focus on malaria eradication strategies; Viet Nam News; 24 March, 2015.

Vietnam’s major regional thrust for a malaria-free Asia Pacific by 2030; The Hans India; 24 March, 2015.

Website

The APLMA website (www.aplma.org), launched in November 2014, was continually updated throughout the year. The events section made the Secretariat the go-to hub for malaria-related events in the region. Nearly thirty events were added during the course of 2015, with an average readership of about 800 per event. The World Malaria Day 2015 event, co-hosted by Australia and Viet Nam in Geneva entitled An Asia-Pacific Free of Malaria by 2030, was viewed over 2400 times.

Blog posts on the APLMA website average approximately 1200 reader views around their release. Two noticeably popular posts during 2015 were: Asia Pacific Leaders push towards malaria-free region by 2030 (22 November 2015: 5235 views), and Widespread artemisinin resistance could wipe out a decade of malaria investment (9 April 2015: 3703 views).

The bimonthly APLMA eNewsletter, launched during 2015, was integrated into the website, allowing interested visitors to subscribe to receive the eNewsletter directly, by email.

The Secretariat is developing new sections of the website aimed at facilitating password-protected exchange of information with and between APLMA collaborating partners. These will be launched in early 2016.

Social media

The Secretariat expanded APLMA social media activity significantly during 2015, focusing primarily on the Twitter and Facebook platforms. Twitter activity increased to an average of around 70 tweets per month, with around 1000 users reviewing the APLMA profile each month. APLMA Facebook activity averages around 20 posts per month, with an approximate four-fold increase in followers during the year.

Dr. Sara Canavati was the winner of the 2015 Social Media Awards: Malaria Heroes, in the Regional Malaria Champion: AsiaPacific category. She is a research scientist at the Mahidol-Oxford Tropical Medicine Research Unit (MORU) in Cambodia. (Illustration: Zahra Zainal)

The Secretariat was pleased to join the 2015 Annual Social Media Awards as the institutional partner for the ‘Regional Malaria Champion: Asia Pacific’ award category. The 2015 Awards had the theme Malaria Heroes and engaged over 4500 people around the world. It recognizes the work of dedicated and highly motivated malaria champions, leaders and innovators. It also aims to strengthen the malaria community across countries, sectors and specializations.
Partnership building and leveraging

Australia Department of Foreign Affairs and Trade (DFAT)

During 2015, DFAT was a major external financier of the Secretariat. DFAT supported the Secretariat by seconding a full-time Health Specialist. In addition, DFAT has deployed its extensive diplomatic network in support of APLMA goals, including brokering access to Heads of Governments, Ministers of Foreign Affairs, Finance, and Health, and other senior government officials in malaria-endemic countries.

The Australia and Viet Nam Governments also co-hosted a World Malaria Day event in Geneva entitled An Asia-Pacific Free of Malaria by 2030.
**World Health Organization (WHO)**

The Secretariat maintains a close working relationship with WHO, including the Southeast Asia Regional Office (SEARO), the Western Pacific Regional Office (WPRO), the Global Malaria Programme in Geneva, and the Emergency Response to Artemisinin Resistance (ERAR) hub in the GMS. WHO provided important technical advice and expertise during consultations to develop the Roadmap. WHO has also been instrumental in developing APLMA accountability tools such as the Regional Elimination Dashboard for regional elimination.

**Association of Southeast Asian Nations (ASEAN)**

APLMA engagement with ASEAN has increased as the capacity of the Secretariat evolved throughout the year. In July, the ASEAN Secretariat participated in the APLMA Senior Officials Meeting for development of the Roadmap. The Secretariat is regularly invited to participate in the ASEAN Expert Group on Communicable Diseases, providing an important opportunity to coordinate the malaria and health security agendas.

**Asia Pacific Malaria Elimination Network (APMEN)**

APMEN includes most malaria-endemic countries in the Asia Pacific, and is a key partner for
APLMA. It comprises 18 Asia Pacific countries that are pursuing malaria elimination, as well as leaders and experts from key agencies and academic institutions. APMEN complements APLMA’s mission by collectively addressing the unique challenges of malaria elimination through peer leadership, advocacy, capacity building, knowledge exchange, and evidence base development.

**The Bill and Melinda Gates Foundation (BMGF)**

In November 2014, BMGF became a major supporter of the Secretariat. Under its multi-year malaria strategy, Accelerate to Zero, BMGF is focusing on demonstrating an accelerated pathway to elimination, as well as investing in new technologies and mobilizing support. Through a grant to the Secretariat, the BMGF supports outreach and advocacy to improve regional coordination, increase financing, and promote innovation for malaria elimination.

**Clinton Health Access Initiative (CHAI)**

CHAI works to improve markets for life-saving medicines and diagnostics, lower the costs of treatments, and expand access to lifesaving technologies. CHAI has expanded its efforts to counteract multidrug-resistant malaria in the GMS. CHAI supported the Secretariat by seconding two Specialists to support efforts on financing and access to quality medicines, and development of the Roadmap.

**Roll Back Malaria Partnership (RBM)**

The Secretariat has collaborated with RBM and its various advocacy working groups to manage joint external relations, advocacy and policy development efforts to elevate the work of APLMA and RBM in the Asia Pacific region. During 2015, the Secretariat provided substantial input into the RBM Transition Oversight process during the restructuring of the Partnership.

**Malaria No More (MNM)**

MNM is policy advocacy non-profit organization with operations in the United States, United Kingdom and Japan. It uses high-profile champions to target US and international leaders to do more to tackle malaria. It is active in demonstrating the cost effectiveness of malaria interventions, and in mobilizing additional financing to make those interventions more accessible.

The MNM and APLMA partnership builds leadership for accelerating malaria elimination across Asia and the Pacific. MNM works with the Secretariat to leverage diplomatic and political support for malaria elimination efforts, and with the communication team on social networking for APLMA activities.
Development diplomacy

**APLMA Leaders’ Envoy**

The Secretariat’s efforts were significantly enhanced by the appointment of the APLMA Envoy. In June, Dr Nafsiah Mboi, former Minister of Health of Indonesia and Chair of the Global Fund Board, was appointed APLMA Envoy to provide strategic guidance and engage with other internationally prominent people. With the endorsement of the Roadmap in November, Dr Mboi became the Leaders’ Envoy.

The Leaders’ Envoy communicated directly with Heads of Government and Senior Government Officials to advocate for and support the leaders’ commitments to malaria elimination and endorsement of the Roadmap at the 10th EAS.

**Targeted outreach**

Malaria-endemic Pacific and ASEAN countries comprise a key priority for Secretariat engagement, together with non-endemic EAS nations. An APLMA Reference Group meeting convened in February and the Strengthening Regional Support for Malaria Elimination in the Greater Mekong Subregion meeting convened in November focused on outreach to and coordination among countries in the GMS. The inaugural APLMA Senior Officials Meeting, held in July, convened government officials from 15 countries to discuss and finalize the Roadmap. In addition, outreach and advocacy visits were made to Indonesia, Myanmar, and Viet Nam.
APLMA Envoy’s Open Letter to EAS Leaders

A direct public approach to leaders was made in the lead up to the EAS meeting in November. Dr Nafsiah Mboi penned an open letter to EAS leaders asking for their endorsement of the Roadmap. The letter was published on 21 November in the Financial Times, one day ahead of EAS. The Financial Times reaches up to half a million highly influential readers.

WHO Western Pacific Regional Committee Meeting, Guam

APLMA was represented at the WHO Regional Committee for the Western Pacific – WHO’s governing body in the Western Pacific – at its sixty-sixth session in Guam from 12–16 October. Professor Paul Lalvani, APLMA Senior Advisor on Access to Quality Medicines raised several critical issues related to malaria elimination during the Regional Committee dialogue.
2. Accountability

A critical part of the Roadmap is the development of a high profile mechanism to track progress on malaria elimination in the Asia Pacific. The Regional Elimination Dashboard will help countries track progress towards the 2030 goal and beyond. Developed in partnership with WHO, it will highlight bottlenecks, encourage prompt action, serve as a key tool to demonstrate progress in the region, and leverage continued support of Governments and partners for financing malaria elimination.

In 2015, a model of the Dashboard was developed and refined through a series of consultations in order to align them to the Roadmap priorities. This has taken into account the overall Roadmap process and the latest work on elimination indicators from the WHO and others. Work on the Dashboard continues, with a final version to be presented at the APLMA Senior Officials Meeting in May 2016.

Asia Pacific malaria elimination targets

Many countries have already developed detailed national malaria elimination plans. The figure above summarizes those plans and elimination targets (as of early 2016).
<table>
<thead>
<tr>
<th>Country</th>
<th>Type</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>SRI LANKA</td>
<td>NATIONAL</td>
<td>Expected WHO validation</td>
</tr>
<tr>
<td>SOLOMON ISLANDS</td>
<td>SUB-NATIONAL</td>
<td>Subnational elimination in Temotu province</td>
</tr>
<tr>
<td>BHUTAN</td>
<td>NATIONAL</td>
<td>Planning for WHO validation 2020</td>
</tr>
<tr>
<td>PHILIPPINES</td>
<td>SUB-NATIONAL</td>
<td>Sub-national elimination or pre-elimination phase for 40 provinces/chartered cities</td>
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<tr>
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<td>Elimination in one province</td>
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<td>SUB-NATIONAL</td>
<td>Subnational elimination of 60% of districts</td>
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<tr>
<td>NEPAL</td>
<td>SUB-NATIONAL</td>
<td>Pre-elimination, 90% reduction of the 2010 malaria incidence</td>
</tr>
<tr>
<td>BANGLADESH</td>
<td>NATIONAL</td>
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</tr>
<tr>
<td>CHINA</td>
<td>NATIONAL</td>
<td>Potential to revise goal for 4 provinces - Palawan, Tawi Tawi, Sulu, Puerto Princesa</td>
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<tr>
<td>MALAYSIA</td>
<td>NATIONAL</td>
<td>Peninsular &amp; Borneo</td>
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<td>Subnational elimination of 80% in districts</td>
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<td>CAMBODIA</td>
<td>SUB-NATIONAL</td>
<td>National elimination of P. falciparum malaria</td>
</tr>
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<td>INDONESIA</td>
<td>SUB-NATIONAL</td>
<td>Kalimantan, Sumatra &amp; Sulawesi</td>
</tr>
<tr>
<td>VIET NAM</td>
<td>SUB-NATIONAL</td>
<td>Maintain elimination in 16 provinces/municipalities, 34 in elimination phase, and 10 in pre-elimination phase</td>
</tr>
<tr>
<td>INDIA</td>
<td>SUB-NATIONAL</td>
<td>Maintain elimination in 16 provinces/municipalities, 34 in elimination phase, and 10 in pre-elimination phase</td>
</tr>
<tr>
<td>LAO PEOPLE’S DEMOCRATIC REPUBLIC</td>
<td>SUB-NATIONAL</td>
<td>Pre-elimination and focal elimination in selected provinces</td>
</tr>
<tr>
<td>CAMBODIA</td>
<td>NATIONAL</td>
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</tbody>
</table>

**Notes:**
- **2017:**
  - SRI LANKA: Expected WHO validation
  - SOLOMON ISLANDS: Subnational elimination in Temotu province
  - BHUTAN: Planning for WHO validation 2020
  - PHILIPPINES: Sub-national elimination or pre-elimination phase for 40 provinces/chartered cities
  - VANUATU: Elimination in one province
  - THAILAND: Subnational elimination of 60% of districts
  - NEPAL: Pre-elimination, 90% reduction of the 2010 malaria incidence

- **2020:**
  - BANGLADESH: Reduced malaria incidence by 75% (baseline 2013) and achieved 'zero deaths' aiming at phased elimination in targeted districts
  - CHINA: Potential to revise goal for 4 provinces - Palawan, Tawi Tawi, Sulu, Puerto Princesa
  - MALAYSIA: Peninsular & Borneo
  - VANUATU: Elimination in one province
  - THAILAND: Subnational elimination of 80% in districts
  - CAMBODIA: National elimination of P. falciparum malaria
  - INDONESIA: Kalimantan, Sumatra & Sulawesi

- **2025:**
  - VIET NAM: Maintain elimination in 16 provinces/municipalities, 34 in elimination phase, and 10 in pre-elimination phase
  - INDIA: Maintain elimination in 16 provinces/municipalities, 34 in elimination phase, and 10 in pre-elimination phase
3. Regional Financing

Regional Financing for Malaria Task Force

The Regional Financing for Malaria Task Force (RFMTF) was established in early 2014 and focused on developing a situation assessment for regional financing. The RFMTF settled on five recommendations that were presented to, and accepted by leaders at the 9th EAS in November 2014. These recommendations provided the initial framework for subsequently developing the Roadmap and Dashboard, as well as APLMA’s work plan for 2015 and beyond.

In 2015, the RFMTF provided discrete inputs that were distilled into key priorities for the Roadmap. This culminated in the identification of three key finance interventions for the Roadmap, namely: 1) improve targeting and efficiency to maximize impact; 2) mobilize domestic financing and leverage external support; and 3) innovate for elimination. A synthesis and policy dialogue document was developed to provide background, rationale and justification for the inclusion of the above three finance interventions in the Roadmap. In 2016, a reconstituted Task Force will focus on resource mobilization and innovative finance.

Resource mobilization strategy

Achieving elimination will require a significant boost in regional resources. In 2015, APLMA’s resource mobilization efforts focused on: 1) developing a provisional regional investment forecast for elimination; 2) estimating potential cost savings and social benefits from elimination in the Asia Pacific region; 3) one-on-one briefings with ADB Directors on opportunities presented through the malaria elimination agenda for the ADB to increase health sector lending; 4) developing advocacy briefs for maintaining and increasing donor funding; and 5) supporting national resource mobilization efforts, in particular, identifying health financing opportunities in Myanmar and developing advocacy briefs for Indonesia and PNG.
New scoping studies

During the development of the Roadmap, the Secretariat identified areas that required more in-depth analysis, and commissioned new bodies of work during 2015, as follows:

- Mapping malaria incidence at sub-national level for priority malaria-endemic countries and a case study in four countries to estimate the potential under-reporting of disease burden, coupled with specific recommendations on how to improve the surveillance system in those countries. [Conducted by Mahidol-Oxford Clinical Research Unit (MORU); funded by the Government of Australia].

- A landscape analysis and options appraisal to inform the business case for a regional financing mechanism to support health security in the region. [Conducted by Health Resource Facility for Australia’s Aid Program (HRF); funded by the Government of Australia].

- In partnership with WHO and the Roll Back Malaria Partnership, assessed various costing models for elimination and provided an initial estimate of the cost of elimination for the 22 malaria endemic countries in the Asia Pacific region.

- Convened a Finance Experts’ meeting with ADB to identify options for resource mobilization for malaria and health security. [Funded by ADB].

- A case study in Myanmar as one example of health financing opportunities at national level. [Conducted by Myanmar Health & Development Consortium (MHDC)].
4. Quality medicines

APLMA Roadmap development

During 2015, the APLMA Access to Quality Medicines (AQM) team engaged in consultation processes with National Malaria Programmes and international experts in malaria elimination throughout the region. In undertaking these extensive consultations and detailed analyses, the Secretariat was able to identify information gaps and key AQM barriers, and outlined priority interventions that must be addressed to achieve a fully-coordinated response. The Secretariat commissioned additional analysis, especially in relation to private sector activities. These findings were used to formulate the AQM elements of the Roadmap and, to shape the Secretariat’s response in term of policy engagement and support for endemic and non-endemic nations.

Tracking key developments of the malaria landscape

2015 saw a rapid pace of change in technological developments in the commodity pipeline and service delivery for Asia and the Pacific. These included:

- Documented geographical expansion of multidrug-resistant malaria, especially near the western borders of Myanmar with Bangladesh and India.
• Reports of greater prevalence of *P. vivax* malaria within the region.
• Reports of increased insecticide resistance.
• Reported emergence of ‘early biting’ mosquito patterns, changing the vector control landscape.
• New antimalarial treatments and malaria diagnostics emerging from the development pipeline, especially for *P. vivax*.
• New methods for rapid quality testing of medicines using handheld devices.
• These developments have required the APLMA AQM Team to continually engage with national programmes and partners to ensure the AQM Task Force recommendations remain current.

Supporting national and regional regulatory efforts

Efforts to support and promote AQM regulatory functions at a regional level have focused on collaboration with the programmes of the Centre of Regulatory Excellence (CoRE) at Duke-NUS Medical School, Singapore. With financial support from ADB, CoRE has launched a programme to identify gaps and strengthen regulatory systems and policies throughout the GMS. The Secretariat provided technical support in the launch and planning meeting for this project. In addition, the secretariat participated in CoRE’s first Annual Conference, which brought together approximately 200 international experts from key national regulatory agencies, industry and academia, and was inaugurated by Mr Gan Kim Yong, Minister for Health, Singapore. During this meeting, the Secretariat highlighted regulatory challenges in ensuring access to medicines, especially malaria health commodities.

In addition, the Secretariat is partnering with WHO, CoRE, the Australian Therapeutic Goods Administration (TGA), the Medicines for Malaria Venture, PATH and the Bill & Melinda Gates Foundation to explore ways to permit fast-track review of new tools, without compromising on process and quality.

Support for country programmes

Supporting malaria elimination planning in India

Throughout 2015, the APLMA AQM team met with the National Vector Borne Disease Control Programme (NVBDCP) and the National Malaria Control Programme of India to support planning and programme design options for the launch of the National Framework for Malaria Elimination (NFME) in India (2016–2030). The process involved meeting with several of India’s key stakeholders, including the Global Fund India team, CARITAS (a leading NGO working in malaria), the Clinton Health Access Initiative, and private sector partners. In addition, the Secretariat provided input for the establishment and launch of the India Malaria Elimination Foundation, a public–private partnership, due to be established in April 2016.
What’s next for APLMA? Priorities for 2016

Following the endorsement of the Roadmap, the mission of the Secretariat going forward is to support Leaders and the APLMA Leaders’ Envoy in driving implementation of the Leaders’ Malaria Elimination Roadmap by benchmarking progress against priorities, coordinating regional action and brokering policy and financing solutions to regional challenges.

The Secretariat will deliver on this mission by making specific contributions to the implementation of the Roadmap. These priorities, together with specific 2020 outcomes, are reflected in the APLMA Secretariat 2016–2020 Strategic Plan.

This expansion of the level of ambition for the Secretariat will require new institutional arrangements. The Secretariat will incorporate as an independent entity, with the role of ADB transitioning from management and implementation, to governance and oversight. An expanded Secretariat will relocate to Singapore, with a new Board of Governance, and will continue to attract world-class expertise to support endemic and non-endemic countries in Asia-Pacific to implement the Roadmap.

In addition, the APMEN Secretariat will co-locate to bring policy support, advocacy and malaria programme peer support under one roof.

The Asia Pacific Malaria Elimination Network (APMEN) was established in 2009 to bring attention and support to the under-appreciated and little-known work of malaria elimination in Asia Pacific, with a particular focus on P. vivax. APMEN currently comprises 18 Asia Pacific countries (Bangladesh, Bhutan, Cambodia, People’s Republic China, Democratic People’s Republic of Korea, India, Indonesia, Lao People’s Democratic Republic, Papua New Guinea, Malaysia, Nepal, Philippines, Republic of Korea, the Solomon Islands, Sri Lanka, Thailand, Vanuatu and Viet Nam) that are pursuing malaria elimination, as well as leaders and experts from key multilateral and academic agencies. The mission of this diverse but cohesive network is to collaboratively address the unique challenges of malaria elimination in the region through leadership, advocacy, capacity building, knowledge exchange and building the evidence base.

While APLMA brings together Leaders in a coalition to eliminate malaria, APMEN provides an equally critical function in uniting a diverse range of implementers – ensuring the region truly moves together towards elimination by 2030.
Roadmap priority 1: The Alliance sustains ongoing Leader level recognition, as a platform that promotes accountability and action amongst central agencies, line ministries and other actors. Functions required for elimination that are beyond the remit of any single country are facilitated by countries as part of improved cooperation on health and health security.

Roadmap priority 2: Coverage gaps are identified and highlighted using the Dashboard, providing the visibility required to bring key populations at risk into coverage.

Roadmap priority 3: Countries are increasingly accountable for quality service delivery. The APLMA Secretariat facilitates a strong enabling environment for regulatory systems, supply chains and delivery.

Roadmap priority 4: Develop and deploy an evidence base to support more cost-effective elimination strategies. Engage the private sector more effectively for service delivery.

Roadmap priority 5: The region achieves a transition from excessive reliance on Organisation for Economic Co-operation and Development (OECD) external donor financing to sustainable domestic and sub-regional malaria financing.

Roadmap priority 6: Research and Development of innovative technologies and techniques is stimulated in critical areas to finance and deliver elimination.