



## Regional: Strengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific

Project Name	Strengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific																				
Project Number	47278-001																				
Country	Regional																				
Project Status	Active																				
Project Type / Modality of Assistance	Technical Assistance																				
Source of Funding / Amount	<table border="1"><tr><td colspan="2"><b>TA 8485-REG: Strengthening Regional Response to Malaria and other Communicable Diseases in Asia and the Pacific</b></td></tr><tr><td>Government of Australia</td><td>US\$ 1.50 million</td></tr><tr><td colspan="2"><b>TA 8485-REG: Stengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific (Supplementary)</b></td></tr><tr><td>Regional Malaria and Other Communicable Disease Threats Trust Fund under the Health Financing Partnership Facility</td><td>US\$ 750,000.00</td></tr><tr><td colspan="2"><b>TA 8485-REG: Strengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific (Supplementary)</b></td></tr><tr><td>Bill and Melinda Gates Foundation</td><td>US\$ 1.08 million</td></tr><tr><td>Government of Australia</td><td>US\$ 635,545.00</td></tr><tr><td colspan="2"><b>TA 8485-REG: Strengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific (Supplementary)</b></td></tr><tr><td>Government of Australia</td><td>US\$ 617,200.00</td></tr><tr><td>Bill and Melinda Gates Foundation</td><td>US\$ 2.41 million</td></tr></table>	<b>TA 8485-REG: Strengthening Regional Response to Malaria and other Communicable Diseases in Asia and the Pacific</b>		Government of Australia	US\$ 1.50 million	<b>TA 8485-REG: Stengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific (Supplementary)</b>		Regional Malaria and Other Communicable Disease Threats Trust Fund under the Health Financing Partnership Facility	US\$ 750,000.00	<b>TA 8485-REG: Strengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific (Supplementary)</b>		Bill and Melinda Gates Foundation	US\$ 1.08 million	Government of Australia	US\$ 635,545.00	<b>TA 8485-REG: Strengthening Regional Response to Malaria and Other Communicable Diseases in Asia and the Pacific (Supplementary)</b>		Government of Australia	US\$ 617,200.00	Bill and Melinda Gates Foundation	US\$ 2.41 million
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Strategic Agendas	Environmentally sustainable growth Inclusive economic growth Regional integration																				
Drivers of Change	Governance and capacity development Knowledge solutions Partnerships Private sector development																				
Sector / Subsector	<b>Health</b> - Disease control of non-communicable diseases and other priority programs																				
Gender Equity and Mainstreaming	No gender elements																				

Description	<p>Regional cooperation and integration is one of three institutional objectives of the Asian Development Bank (ADB) corporate guidance in Strategy 2020, which recognizes health security from the control of communicable diseases as a regional public good. The Operational Plan for Health and the Regional Cooperation and Integration Strategy also highlight ADB's role in supporting Asia and the Pacific to expand opportunities for addressing health challenges at regional and subregional levels.</p> <p>The region continues to face communicable disease challenges, including a continuing burden from malaria, particularly in border areas. Malaria control and elimination remain relevant to the health agenda, even as many countries have made strong progress in meeting the Millennium Development Goal (MDG) target on malaria (6c) of reducing by 75% the incidence of malaria by 2015. After 2015, countries in the region are targeting further reductions, with some countries declaring malaria elimination goals within the next 10_15 years.</p> <p>However, sustained progress in reducing malaria will depend on better regional cooperation to prevent cross-border transmission; sustained attention from national health authorities; maintaining financing, even as malaria garners less global and national concern as a result of lower incidence; and containing growing artemisinin resistance (drug-resistant) malaria, particularly in the Greater Mekong Subregion (GMS). High-level engagement within and beyond the health sector is needed if malaria control and elimination are to be achieved.</p> <p>This regional technical assistance (TA) will support regional leadership and cooperation on malaria control and elimination, including containment of drug-resistant malaria, and pave the way for strengthened regional cooperation on long-term control and prevention of communicable diseases. It will help build stronger collaboration between governments, the private sector, and other stakeholders, to improve regional leadership, financing, and drug management for malaria.</p>
Project Rationale and Linkage to Country/Regional Strategy	<p>Asia and the Pacific has made significant progress in combating malaria_reducing malaria deaths by more than 25% since 2000. Despite this, malaria remains a major cause of death and illness, with an estimated 30 million cases and around 42,000 deaths in the region each year. This high rate of illness and loss of human life affects economic development and is both unacceptable and preventable.</p> <p>In addition, the emergence of drug-resistant malaria in parts of the GMS is a threat to regional and global health. While much progress has been made in reducing malaria, the rise of drug resistance in the GMS threatens progress made to date, not only in Asia, but in other regions of the world. The previous history of drug resistance saw resistance that developed in the GMS spread throughout Asia and transfer rapidly to Africa through trade and labor migration, overwhelming fragile malaria control programs. As new drugs entered the market rapidly, the disease was again beaten back. However, no viable new drugs are in the antimalarial drug development pipeline, so the situation is considered grave.</p> <p>Malaria, including drug-resistant malaria, does not recognize national borders. A regional approach is needed to address the causes and spread of malaria and drug-resistant malaria, which is linked to increased human mobility, migration, trade, logging, and illegal trade of counterfeit drugs. Urgent coordinated, multi-country action is needed to keep countries on course. Failure to do so will result in reversing malaria trends, at the cost of hundreds of thousands of lives and billions of dollars.</p> <p>In this context, representatives of governments and partners from Asia and the Pacific and beyond met in Sydney, Australia, for the Malaria 2012 conference from 31 October to 2 November 2012, to accelerate progress on malaria control and elimination and to accelerate containment of drug resistance. The leaders attending the meeting agreed to (i) accelerate progress toward the goal set by member states of the World Health Assembly of a 75% reduction in malaria cases and deaths by 2015, thus contributing to the United Nations Secretary General's goal of near-zero deaths from malaria worldwide; and (ii) support urgent collective action to contain drug-resistant malaria. To do this, it was agreed to establish the Asia Pacific Leaders Malaria Alliance (APLMA). The subsequent agreement of East Asia Summit (EAS) leaders on 20 November 2012 to the Australian-proposed declaration on Regional Responses to Malaria Control and Addressing Resistance to Antimalarial Medicines gave further political leadership and support to this issue. The APLMA is a regional initiative led by Australia and Viet Nam. ADB was asked to provide secretariat functions for the APLMA because of its strength in regional cooperation, multisectoral collaboration, donor harmonization, and innovative partnerships. The APLMA, including co-chairing arrangements, the secretariat, and the task forces, will have an initial mandate through the end of 2015, to coincide with the ending of the timeline for meeting the MDG targets. The objectives of the APLMA are to (i) undertake high level policy advocacy with decision makers in Asia and the Pacific, to drive progress and accountability to achieve the goals of 75% reduction in malaria cases and deaths by 2015; (ii) contribute to the worldwide target of near-zero deaths and to the long-term aspiration of Asian and Pacific countries to achieve malaria elimination; (iii) mobilize urgent country and regional action to address emerging public health issues, in the first instance addressing antimalarial drug resistance; and (iv) track progress by working with existing regional institutions, such as the WHO; Global Fund for AIDS, Tuberculosis, and Malaria; Roll Back Malaria Initiative; and the Asia Pacific Malaria Elimination Network.</p>
Impact	Reduced malaria incidence in the GMS and other selected high-malaria burden developing member countries

## Project Outcome

Description of Outcome	Financing, support, and quality drugs and technologies for malaria programs increased in the region
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Progress Toward Outcome	The expected impact was to help advance the Asia Pacific region towards becoming malaria-free by 2030. The expected outcomes were policy, technical, and financial commitments for malaria elimination in the Asia Pacific region fulfilled by heads of government and other stakeholders. The expected outputs included: (1) commitments from heads of government, multilateral and regional organizations and key donors are mobilized, sustained, and measured; (2) overall financing for malaria elimination in Asia and the Pacific is increased; and (3) interventions for malaria elimination, particularly ensuring access to quality malaria medicine and health technologies, are implemented in malaria-endemic countries in Asia and the Pacific. These outputs were delivered through a group of individual consultants organized as the APLMA secretariat, and the convening of task forces and meetings. This is an appropriate TA approach as the APLMA Secretariat enabled policy development and advocacy work for malaria elimination which ADB staff would be have difficulty doing on their own.
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### Implementation Progress

Description of Project Outputs	<p>APLMA secretariat supporting regional leaders to deliver on national malaria targets</p> <p>Policy recommendations implemented by the majority of APLMA members for sustained financing of malaria control and elimination</p> <p>Policy recommendations implemented by majority of APLMA members on improving access to quality malaria medicines and other technologies</p>
Status of Implementation Progress (Outputs, Activities, and Issues)	<p>: For Output 1, all targets were achieved on time, with Roadmap for Malaria Elimination in Asia and the Pacific including a scorecard to track the compliance to the roadmap endorsed in the 2015 EAS. Scorecard indicators on malaria elimination were agreed at the 2016 Senior Officials Meeting and an implementation plan was established. The commitment to malaria elimination was reiterated in the 2016 EAS. Output 2 has been achieved, with overall financing for malaria significantly increased. Several countries have made announcements of increased domestic funding. Malaysia, Philippines, Republic of Korea, Sri Lanka, Thailand and Viet Nam maintained or increased funding since 2013. New financing mechanisms for malaria elimination have been established with the Asian Development Fund (ADF) set aside for health security; the Health Security Partnership Fund from the Government of Australia; and the planned new Global Fund grant for the GMS region. Country and regional-level costing tools are being developed and the crafting of investment cases for malaria elimination was supported. Output 3 was achieved with comprehensive analysis on expanding access to quality medicines and health technologies conducted and presented at several international fora and meetings within of the planned timelines. Regulatory processes of malaria medicines have been strengthened through a new agreement with the WHO pre-qualification programme to develop new modalities of expedited review for critical malaria products. The outputs are generally of good quality as they had been accepted by the countries comprising the APLMA and had informed statements adopted by countries in several East Asian Summits. All Outcome indicators in the DMF have been met. Recommendations made by the financing and AQM task forces in 2014 were communicated as planned to EAS and Pacific Island countries and regional partners. The Chairman's Statement at the end of the 9th EAS in Nay Pyi Taw in 2014, affirming the Leaders' commitment to the Declaration of the 7th East Asia Summit on Regional Responses to Malaria Control and Addressing Resistance to Anti-malaria Medicines included explicit recognition of the APLMA Task Forces Progress Reports and a call to the APLMA co-chairs to submit to the 10th EAS in Malaysia a plan for achieving this goal and to implement the recommendations of the APLMA Task Forces. The Malaria Elimination Roadmap was delivered as planned to Leaders for endorsement at the 10th EAS by the APLMA Co-Chairs, the Prime Ministers of Australia and Viet Nam with the Chairman's Statement from the 10th EAS reaffirming commitment to the goal of an Asia Pacific free of malaria by 2030. It also endorsed the Asia Pacific Leaders' Malaria Elimination Roadmap as a framework for shared action, committed to the Roadmap's six priority areas, and called for a rapid and sustained scale-up effort in the Mekong region to prevent the spread of drug-resistant malaria. Following the endorsement of the Roadmap, Cambodia, India and Thailand launched new malaria elimination strategies with other countries subsequently moving forward to develop elimination plans. The scorecard indicators endorsed by senior officials in 2016 is currently being populated with national data and will be evaluated in the during the 2017 SOM. Development of national malaria elimination costing tools continues with the tool expected to be made available and evaluated in 2017.</p> <p>This TA highlighted how investing in knowledge work including convening of meetings, participation in international meetings, and production of knowledge products (even in the absence of current or planned lending projects related to such knowledge work) will increase ADB visibility as an expert resource on health system reforms, highlight that ADB brings in not just financing but knowledge with financing, and lay down the groundwork for the development of future sovereign and non-sovereign lending projects in the near future. The TA also showed how knowledge and evidence-based policy advocacy, and intensive stakeholder engagement can generate political support for ambitious health reforms and targets. Finally, it showed how active engagement of co-financing partners contributed in achieving the TA outputs.</p> <p>The APLMA secretariat, having been successfully nurtured by ADB, has been incorporated as an independent entity. ADB should continue to support DMC efforts towards malaria elimination by 2030 including exploring how to integrate malaria elimination with universal health coverage strategies of DMCs, and collaborating with the now independent entity in supporting the elimination efforts. The story of this RETA as to how commitments were mobilized, and evidence generated and adopted by countries will be disseminated to inform similar efforts that ADB will be doing.</p>
Geographical Location	

### Summary of Environmental and Social Aspects

Environmental Aspects

Involuntary Resettlement

Indigenous Peoples

### Stakeholder Communication, Participation, and Consultation

During Project Design	The project was designed in consultation with the donors, the Greater Mekong Subregion (GMS) and other selected high-malaria incidence developing member countries (DMCs) and other partners working on Malaria elimination.
During Project Implementation	The TA initially aimed to help reduce the incidence of malaria in the Greater Mekong Subregion (GMS) and other selected high-malaria incidence developing member countries (DMCs) but this was subsequently expanded into helping aim for the elimination of malaria in the Asia and the Pacific by 2030. This support was to be achieved through its hosting and enabling the Asia Pacific Leaders Malaria Alliance (APLMA) secretariat, and the development of policy recommendations for sustained financing of malaria control and elimination, and for improved access to quality malaria medicines and other technologies.

### Business Opportunities

Consulting Services	<p>The Asia-Pacific Leaders Malaria Alliance (APLMA) will work through existing institutions, processes, and networks. It will advocate approaches to combat malaria that are consistent with strengthening the capacity of the overall health system, for example, sustainable financing and improving access to quality medicines.</p> <p>A team of consultants will be recruited to form part of the APLMA secretariat, which will be based in the Asian Development Bank (ADB) headquarters or in an adjacent location. All consultants to be engaged in the technical assistance (TA) will be recruited in accordance with ADB's Guidelines on the Use of Consultants (2013, as amended from time to time). The APLMA secretariat will perform the following functions: (i) establish and support mechanisms for effective regional cooperation toward the elimination of malaria in the region; (ii) manage the task forces, advance analytical work, and develop policy briefs and technical reports; (iii) facilitate effective decision making within the APLMA and the different task forces, and coordinate communications at all levels; (iv) develop a multisector, long-term strategy and priority operational areas at regional and national levels; (v) engage with regional institutions and partners to encourage more effective coordination and collaboration; (vi) facilitate formal agreements focusing on regional and cross-border cooperation, including on planning, program implementation, research and technology, financing, and resource allocation; and (vii) support APLMA activities, its regular meetings, and all related events and activities; and help coordinate the work of the different task forces.</p>
Procurement	Equipment (computers and office equipment) and supplies shall be procured in accordance with ADB's Procurement Guidelines (2013, as amended from time to time).

### Responsible Staff

Responsible ADB Officer	Banzon, Eduardo P.
Responsible ADB Department	Sustainable Development and Climate Change Department
Responsible ADB Division	SDSC
Executing Agencies	<i>Asian Development Bank 6 ADB Avenue, Mandaluyong City 1550, Philippines</i>

### Timetable

Concept Clearance	17 Sep 2013
Fact Finding	19 Dec 2013 to 19 Dec 2013
MRM	-
Approval	21 Oct 2013
Last Review Mission	-
Last PDS Update	04 Apr 2017

### TA 8485-REG

Milestones					
Approval	Signing Date	Effectivity Date	Closing		
			Original	Revised	Actual
21 Oct 2013	-	21 Oct 2013	31 Dec 2015	30 Sep 2016	-

Financing Plan/TA Utilization	Cumulative Disbursements
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ADB	Cofinancing	Counterpart				Total	Date	Amount
		Gov	Beneficiaries	Project Sponsor	Others			
0.00	6,989,374.00	0.00	0.00	0.00	0.00	6,989,374.00	21 Oct 2013	4,327,930.70

Project Page

<https://www.adb.org/projects/47278-001/main>

Request for Information

<http://www.adb.org/forms/request-information-form?subject=47278-001>

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