

CSO priorities for 2021-2023

Enabling Environment

- To maintain/increase the funding allocation towards CSOs from the donors to maintain/enhance current CSO involvement in national malaria control and elimination efforts
- Development of operational guideline/SOP for outbreak response and elimination activities including clear role of CSOs working in both GCA and NGCA areas
- Enough human resource to continue malaria control and elimination program and capacity building of CSOs staff on epidemiological analysis

Prevention

- Mass and continuous distribution of LLINs with regular monitoring of the coverage, utilization and lost and damage
- Develop item list for forest goer package adaptable to local context (repellent, hammock, LLIN, etc.)
- IRS activity in hard to reach EHO areas with technical and material support from NMCP
- Capacity building for basic entomological surveillance for CSOs including EHOs
- Insecticide treatment for conventional bed nets who prefer it and Insecticide treated bed sheet/blanket (high endemic and high risk groups) as appropriate

Case management

- Additional resources for referral of non-malaria cases (TA cost, additional support) and referral linkage with existing system for other diseases
- DOT for PQ treatment – at least three times in low caseload areas
- Screening at informal border crossing point and screening service for pre and post deployment (different armed forces)

Case based surveillance

- Web-based database should be user friendly, should include all partners' coverage and some applications like GIS
- MCBRS to be integrated into web-based database.
- Regarding ABER target, training for VMW and BHS should include the criteria for testing
- Regular monthly monitoring on reporting status and performance
- Case notification within 24 hrs. (asap) and single package intervention should be used to investigate the case and respond 3 days after notification. Then, Follow up secondary cases by ICMVs or BHS on 4th and 5th week

Expanding access to hard to reach areas

- Partner mapping and gap analysis of service delivery (led by Township Health Department in collaboration with CSOs)
- Improve financial, technical and commodity support to EHOs to deliver services, to improve population coverage in Malaria control and elimination
- System strengthening of EHOs (HMIS, HRIS, LMIS, etc.) and capacity development for EHOs
- CSOs to fill the gaps, technical and management support in EHO areas where needed and for skill transfer

Research

- Research prioritization and evaluation on utilization of conducted malaria researches according to annual research plan
- Drug resistance surveillance: using IDES drug resistance molecular markers and follow up testing
- The use of Tafenoquine and point-of-care testing for G6PD deficiency