

REVIEW OF GLOBAL STRATEGY OF MALARIA ERADICATION

BRIEFING NOTES FOR STUDY TEAMS

1. PURPOSE

The purpose of the studies is to identify and assess in selected malaria eradication programmes in various stages of progress the socio-economic, administrative and technical factors, both favourable and unfavourable, related to their planning and implementation. In each country visited, the teams will study:

- 1) the socio-economic impact of malaria;
- 2) the effect of the malaria eradication programme on, and its relationship to, the national socio-economic development plan;
- 3) the place of the malaria eradication programme within the national health plan;
- 4) the planning and implementation of the malaria eradication programme covering the technical as well as the administrative and economic aspects.

A study will also be made in a country with no malaria eradication programme to assess the health and economic factors which need to be considered in determining the prospect for the implementation of such a programme.

The information gathered and the conclusions drawn from this study will be used for the re-examination of the global strategy of malaria eradication and to suggest the strategy to be adopted (a) in malaria eradication programmes where success can be reasonably expected; (b) in malaria eradication programmes which show little hope of success, and (c) in countries where conditions for implementing an eradication programme cannot be met for some years to come.

2. FUNCTIONS

Each team will consist of an economist, a public health administrator/national health planner, a malariologist and a statistician. Although the group works as a team the specific competence of each one of its members is

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called upon to provide the answers to specific questions and to evaluate their validity. The latter point is most important because most of the data for the teams' assessments will be provided by the Government or its advisers or will be derived from published material.

2.1 Economist

The economist will firstly have to find out whether the impact of malaria on the socio-economic development of the country has been realistically estimated and taken into account in deciding the priorities in the country's development plan. If this has not been done, the economist should collect a posteriori such data as are available to measure the impact of malaria on the exploitation of the main resources and on the development programme of the country, and the expected benefits of its eradication.

Secondly, the economist will need to study the cost of the programme itself based on a sound technical estimate of the requirements to reach eradication. To assess the soundness of the economic foundations of the eradication programme, the cost should be compared to the per capita income and to the investments and running costs considered essential for the planned trend of economic development of the country. Should this analysis prove that the country cannot afford an eradication programme because the cost would jeopardize the country's economic development, the economist should, in consultation with the malariologist and the health planner, arrive at an estimate of the expenditure that the country could afford for the alleviation of morbidity and mortality and to permit productive work on the part of the population, especially in those areas and fields more susceptible to economic development. (See also 2.3)

In considering those two main aspects, the economist will need to explore also the level and trend of general education of the population, their social patterns and the political structure of the country; in short all those elements likely to lead, if properly stimulated and exploited, to an active participation of the population in the eradication programme and to the awareness of the advantages to be derived from it.

2.2 Health administrator/planner

He will have to assess the general structure of the health services in the country, their relation with the malaria eradication programme, the health

priorities of the country and the way in which they are being tackled in short-term and long-term planning, the place of malaria in this and the justifications for it, the resources in health staff - actual and potential - and the adequacy of the training programme and facilities. He will have to give special attention to the level of priority that has been assigned to malaria eradication in the national health plan as part of the socio-economic development plan, to the reasons for this priority, taking also into account the malaria situation in neighbouring countries and their programmes or plans for its control or eradication.

In assessing the structure of the health services his attention will be focussed not only on the number and distribution of health posts but also more particularly on their functions and on the actual or possible extent of home visiting carried out by them, especially in areas at a distance from the post. It would be useful if the PHA could, on the basis of the list of diseases which are prevalent in the area, assess the benefits that could be derived from the organization of a regular home visiting service.

He will have to evaluate the awareness at all levels of the health services of malaria as a public health problem to which they should give attention, the training they have received for this and the means they use or could use to help in solving the problem.

In the national health plan he will have to evaluate whether the "flexibility" required of the malaria eradication programme has been satisfactorily translated into adequate budgetary and staff provisions both in quantities and in duration and the positive or negative repercussion this could have on the development of the national health plan. The organization of the epidemiological service at all levels needs to be particularly examined in view of its leading role after eradication has been achieved.

2.3 Malariologist

He will need to evaluate the technical and administrative adequacy of the plan of operations, and of its implementation. Depending on the phase of the programme the detailed scrutiny of the following main points will be relevant: definition of malarious area; knowledge of the epidemiology of malaria in the country; proof that the methods of attack are capable of

bringing about interruption of transmission under the normal conditions of the country; correct application of the methods of attack; plans for surveillance and/or vigilance; correct implementation of the plan in all its aspects and for each phase; the limits and population of areas where the progress was below expectation; technical reasons, if any, for this; detailed measures that could confidently be recommended, if any, that would lead to success and in what period of time; estimation of additional funds, material and staff required to deal effectively with these areas including reserves to meet either a possible extension of the areas with technical problems or a partial failure of the recommended remedial measures; estimation of services whose continuation is required during the maintenance phase in order to supplement adequately the existing health services. Some assessment of receptivity and vulnerability of the country to malaria will need to be made. A similar estimation would be required for countries which have not yet embarked on a malaria eradication programme.

Should the malariologist arrive at the conclusion, either alone or in consultation with other team members, that malaria eradication is not feasible under the present conditions of the country for technical, financial, political or regional reasons, he should then indicate what measures should be applied, in order to maintain as far as possible the results already achieved and to prevent morbidity and mortality to the maximum extent compatible with the available resources and the local conditions. (See also 2.1, end of second paragraph)

2.4 Statistician

The main functions of the statistician are to collect, analyse and elaborate the data required by other members of the team and to express his opinion on their significance, based chiefly on an evaluation of the methods followed by the relevant Government services in collecting and presenting them. He will specifically assist the economist in his investigation aimed at evaluating the impact of malaria on the economy of the country and on the benefits derived from its eradication. He will also be responsible for the proper tabulation of data to be presented in the report of the team.

3. GUIDELINES

Detailed guidelines are provided to the team and its individual members including the following questionnaires and schemes of study:

- i) Proposed Study for the Socio-Economic Evaluation of Malaria Eradication (prepared by Professor Destanne de Bernis)
- ii) Data for Country Information (Secretariat Meeting on Selection and Processing of Data Report, Annex V)
- iii) Questionnaire for Health Administrator/Planner
- iv) Questionnaire on malaria eradication programmes (prepared for the assessment of global malaria eradication programme by the Expert Committee on Malaria 1966 - see Thirteenth Report)
- v) Basic Malaria Eradication Programme Project Data (Secretariat Meeting on Selection and Processing of Data Report - Annex IV)
- vi) Quarterly report form (Secretariat Meeting on Selection and Processing of Data Report - Annex II)

4. BRIEFING

During the briefing at headquarters prior to visiting the country of assignment it will be the responsibility of ME Division to provide the team not only with background documents on the countries and their malaria eradication programmes, but also to indicate clearly the suspected or confirmed causes of success or failure mainly in terms of failures ascribed to technical reasons, to administrative and management reasons, to financial and socio-economic reasons, to various factors connected with the general maturity and awareness of the country in general of its problems and priorities, to the reliability and completeness of the data available and to the interrelationship between any of these factors.

The teams will also have briefing and discussion sessions with Professor Destanne de Bernis, Social Economics Consultant, and with members of the Division of Public Health Services and the Division of Health Statistics.