

ANNUAL RESULTS REPORT 2018



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Ensure 81% Coverage of Long Lasting
Insecticide Treated Nets in Vanuatu Programme



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Programme details

| | |
|---------------------------|---|
| Programme title: | Ensure 81% Coverage of Long Lasting Insecticide Treated Nets in Vanuatu |
| Global Fund grant number: | QUA-M-UNDP |
| Duration: | January 2018 – December 2020 |
| Principal Recipient: | UNDP Pacific Office in Fiji |
| Sub-recipients: | Vanuatu Ministry of Health and Medical Services |
| Geographic coverage: | Vanuatu |
| Budget 2018-2020: | US\$1,566,350 |

Summary

This was the first year of the new funding cycle for the Ensure 81% Coverage of Long Lasting Insecticide Treated Nets (LLINs) in Vanuatu Programme. The three-year (2018-2020) US\$1,566,350 programme is supported by the Global Fund and implemented by UNDP in collaboration with the Ministry of Health.

In Vanuatu, malaria has historically been one of the leading causes of ill health. The country is a disparate rural archipelago consisting of 83 islands across six provinces. Intensified efforts by the Ministry of Health’s National Vector Borne Disease Control Programme over the past several years, in cooperation with UNDP through the Global Fund, the World Health Organization (WHO) and the Australian Department of Foreign Affairs and Trade (DFAT), have seen significant reduction in malaria prevalence. This has been accomplished by: widespread access to diagnosis by microscopy or rapid diagnostic tests (RDTs); widespread access to highly effective treatment with artemisinin-based combination therapy (ACT); high coverage of LLINs; extensive community engagement; and intensive, targeted technical assistance.

As a result, malaria-related deaths have been nearly completely eliminated – no deaths have been recorded since 2012 – and the annual parasite incidence (API) has fallen from 74 per 1,000 in 2003 to 2.2 per 1,000 in 2018 (see Figure 3). The province of Tafea has been declared malaria-free and efforts continue towards achieving the same results country-wide.

Mass LLIN distribution campaigns are being scaled up to maintain high levels of coverage and promote prevention efforts, especially in the medium- and high-risk parts of the country. Challenges remain, however, with API rates persistently high in the northern provinces of Malampa and Sanma and difficulties in delivering interventions and poor access to health services in certain remote areas.

The Ensure 81% Coverage of LLINs in Vanuatu Programme plays an essential role in fulfilling the vector control objectives within Vanuatu’s National Malaria Strategic Plan 2015-2020. The programme is the sole actor responsible for procuring and distributing LLINs in the country – totaling 205,413 over the three-year grant period. In addition, the programme continues to support several staff within the Ministry of Health: one M&E Officer, six Health Information System Officers and one National Vector Control Officer.

Figure 1: Population at risk, 2018

| Ethnicity | Province | Population |
|---|-----------------|----------------|
| Number of people living in high risk areas (reported malaria incidence \geq 1 per 1,000 population) | Malampa & Sanma | 97,685 |
| Number of people living in low risk areas (reported malaria $<$ 1 per 1,000 population) | Shefa & Penama | 144,422 |
| Number of people living in malaria-free areas | Tafea & Torba | 47,008 |
| Total population | Vanuatu | 289,115 |

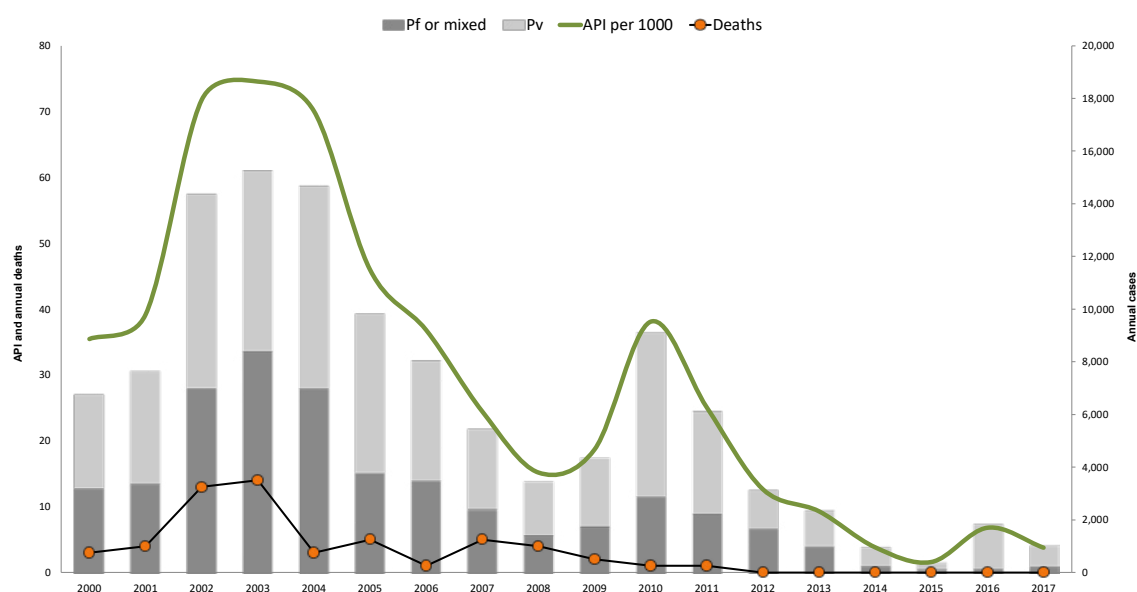
Source: National Vector Borne Disease Programme (2018). Annual Report 2018.

Figure 2: Annual parasite incidence by province, 2015-2018

| Province | 2015 | 2016 | 2017 | 2018 |
|----------------|------------|------------|------------|------------|
| Malampa | 2.8 | 24.3 | 10.7 | 5.1 |
| Sanma | 3.8 | 15.7 | 10.7 | 3.8 |
| Penama | 2.2 | 0.6 | 0.78 | 0.17 |
| Shefa | 0.2 | 0.4 | 0.18 | 1.7 |
| Tafea | 0.0 | 0.0 | 0.03 | 0.08 |
| Torba | 2.4 | 0.7 | 0.0 | 0.72 |
| Vanuatu | 1.6 | 6.8 | 3.8 | 2.2 |

Source: National Vector Borne Disease Programme (2018). Annual Report 2018.

Figure 3: Malaria situation in Vanuatu, 2000-2017



Source: National Vector Borne Disease Programme

Programme objectives:

- Maintain an 81% coverage of LLINs in the population.
- Each household has at least one LLIN.
- All children under 5 years old sleep under LLINs.
- All pregnant women sleep under LLINs.
- By the end of 2018, the annual parasite incidence rate is reduced to < 2.5 per 1,000 nationally, the annual parasite incidence rate is reduced to < 1 per 1,000 in one additional province (Torba) and zero confirmed deaths from malaria is maintained.
- By the end of 2020, the annual parasite incidence rate is reduced to < 1 per 1,000 nationally and zero confirmed deaths from malaria is maintained.

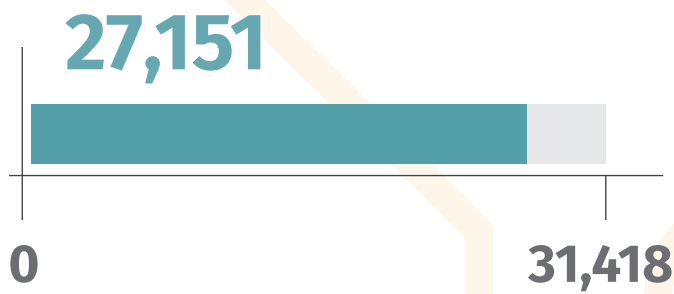
The programme goes beyond the traditional malaria prevention activities of LLINs distribution to also employ targeted interventions that will strengthen diagnosis and improve the long-term financial sustainability of the country's response.

Major achievements of the programme in 2018:

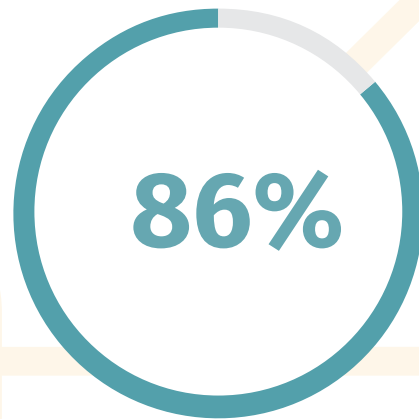
- Distributed 27,151 bed nets through mass campaigns in five out of six provinces of Vanuatu, including Torba, Sanma, Malampa, Shefa and Penama.
- Piloted a project in Vanuatu in 2018 using glucose-6-phosphate-dehydrogenase (G6PD) rapid diagnostic tests, with the support of WHO. The rapid test enables health workers to determine G6PD status and administer primaquine to treat *P. vivax* malaria. The Ministry of Health has now started implementing the use of primaquine for *P.vivax* patients as per the National Treatment Guideline 2015.
- Formulated capacity development plans to support the Ministry of Health to take on the role of Principal Recipient of the grant following this current funding cycle.
- As part of the Ministry of Health's sustainability plans, a consultation was organized to initiate discussions on developing a resource mobilization strategy for the procurement of LLINs for the national malaria programme beyond 2020.
- Conducted and disseminated a comprehensive review of the national malaria programme, which provided concrete and actionable recommendations to improve the malaria response going forward.
- Renovated the National LLIN Storage Centre to ensure compliance with good warehousing and storage standards for LLINs. The centre stores up to 95,000 LLINs for distribution during campaigns, and all stocks are now stored appropriately and safeguarded from hazard.
- Supported relief efforts by supplying electrical generators to the Government of Vanuatu, used for restoring vital health services for the people of Ambae who were relocated to Maewo following the volcanic eruption.
- The programme demonstrated strong financial performance in 2018 with 77 percent financial delivery. The Principal Recipient and Ministry of Health are working together to reinvest savings of US\$111,560 in 2019 on interventions recommended in the national malaria programme review.

Programme performance highlights

NUMBER OF LLINs DISTRIBUTED AGAINST 2018 TARGET



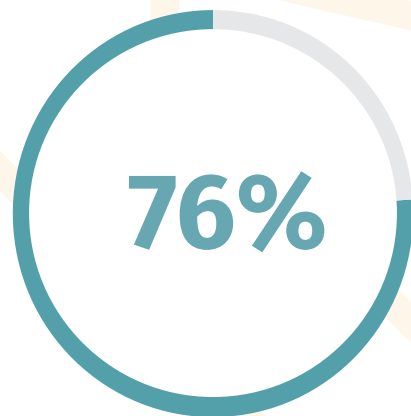
2018 LLIN DISTRIBUTION COVERAGE: % ACHIEVEMENT AGAINST TARGET



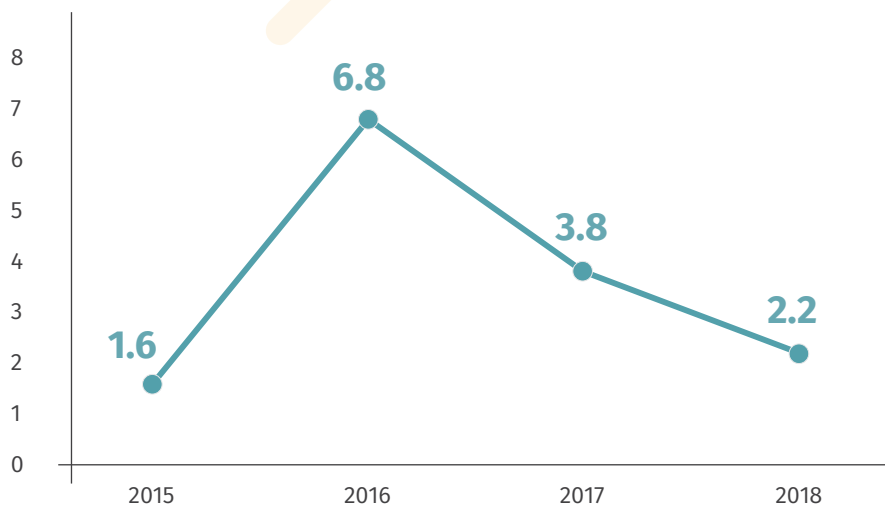
COVERAGE RATE IN LLIN DISTRIBUTION AREAS



% OF HEALTH FACILITIES REPORTING MALARIA-RELATED DATA THROUGH THE DHS



ANNUAL PARASITE INCIDENCE OVER LIFE OF THE PROGRAMME





Voices



RIGHT: Anna Chernyshova, Programme Manager with UNDP, officially unveils the renovated National Bednet Storage Centre, witnessed by senior officials from the Ministry of Health.



“ Anna Chernyshova, Programme Manager, UNDP Pacific Office in Fiji

We are pleased to be able to support the Ministry of Health to ensure that high quality long lasting insecticide treated nets reach the people in need and achieve its goal of eliminating malaria in Vanuatu. This newly renovated storage centre is an important part of this. It will help facilitate effective and efficient bed net distribution campaigns and contribute to the dropping incidence of malaria across the country.



ABOVE: Ken Mera, a Malaria Supervisor in the province of Panama, speaks to locals in Kole Village in Santo about the importance of LLIN use to protect themselves and their families from malaria and other vector borne diseases.



“ Ken Mera, Penama Malaria Supervisor

Distribution of LLINs is one thing, but most importantly is the education component on the proper use of the nets – families need to know why it is important to sleep under these nets every time, as it will protect them from getting sick.”



Key programme activities

Despite challenges associated with the ongoing volcanic disaster in Penama, the malaria programme achieved significant results in 2018, as evidenced by the continued drop in API to 2.2 per 1,000 and zero malaria-caused deaths since 2012. The partnership with WHO, who have provided substantive in-country technical assistance to the programme, has been crucial in accomplishing this. The dedicated Malaria Officer based with WHO in Port Vila has been a significant resource relied upon by the programme, given that the programme's management unit is situated at the UNDP Pacific Office in Fiji.

Below is a summary of key activities under the programme in 2018.

Providing universal coverage of LLINs to all households

An essential part of effectively controlling malaria and full elimination, as outlined in the National Malaria Strategic Plan, is to maintain universal coverage of bed nets as well as provide universal access to accurate diagnosis and effective treatment. In 2014, Tafea achieved zero local malaria transmission and in 2017 received a recognition award for becoming malaria-free. The programme is extending the same interventions that led to this success to all other provinces: Malampa, Penama, Sanma, Shefa and Torba. The control efforts are augmented with enhanced surveillance and rapid responses to identified cases.

To support the bed net coverage goals, the programme has a target of distributing 205,413 bed nets throughout the country from 2018-2020. In 2018, a total of 27,151 were distributed, replacing nets that had been in use for three years, reaching 86 percent of the 31,418 target. Against a population of 35,312, this makes a coverage rate of 1 LLIN per 1.2 people. The 27,151 LLINs, coated with deltamethrin, will play a very significant role in the prevention and control of vector-borne diseases, especially malaria. They provide personal protection towards mosquito bites and, in settings with sustained high levels of coverage, help to reduce transmission and enable protection for the entire community.

The distribution underachieved against targets primarily due to disruptions to distribution activities associated with the ongoing volcanic eruption on the island of Ambae in Penama provinces which caused acid rain and contamination of water supplies. The volcanic activity began in 2017 and there was hope that it would cease, however it continued throughout the year. The government ordered mass evacuations and resettlement of all the residents. Most health workers, including staff of the Ministry of Health, were assigned to support the crisis relief efforts. This caused serious disruption to LLIN distribution plans for this area. Due to the population movements, some communities that were previously targeted for LLIN campaigns were no longer available. Adjustments were made to provide LLINs to evacuated populations in Santo, although they did not reach evacuees in Maewo. Those that were missed in 2018 will be included in 2019 operations.

As part of the distribution plan, the programme leverages the existing community structures and resources. In each zone, local health personnel, including village health workers and nurses, are used to mobilize communities, gather respective population data and guide the daily operation of the distribution as they understand and know the local context well.

To maintain high LLIN coverage, the programme also provided support to the Ministry of Health on procurement, supply management, operational planning, distribution, monitoring and information management. In 2017-2018, the programme funded major renovations for the national LLIN storage centre in Port Vila to ensure compliance with internationally recognized good warehousing and storage standards for LLINs. The centre can store up to 95,000 LLINs for distribution during campaigns in the provinces, and all stocks are stored appropriately and safeguarded from hazard. It was officially opened at a ceremony on 20 March 2018. While this is an important achievement, provincial LLIN storage remains a challenge and will be addressed in 2019.

Figure 4: LLINs distributed by province in 2018

| Province | Health zone | Students covered | Households covered | Population covered | Small nets given | Medium nets given | Large nets given | Total LLINs distributed |
|----------------|-------------|------------------|--------------------|--------------------|------------------|-------------------|------------------|-------------------------|
| Torba | 1 | 40 | 204 | 1,071 | 120 | 797 | 0 | 917 |
| Sanma | 1 | 339 | 1,542 | 6,813 | 1,379 | 2,640 | 1,485 | 5,504 |
| Malampa | 3 | 394 | 2,417 | 10,550 | 1,456 | 3,862 | 2,843 | 8,161 |
| Shefa | 2 | 522 | 2,880 | 11,747 | 1,235 | 4,355 | 2,827 | 8,417 |
| Penama | 2 | 0 | 1,423 | 5,131 | 681 | 2,190 | 1,281 | 4,152 |
| Vanuatu | 9 | 1,295 | 8,466 | 35,312 | 4,871 | 13,844 | 8,436 | 27,151 |

Strengthening surveillance systems and health information

A malaria module has been developed by the Ministry of Health and WHO and integrated into the web-based District Health Information System 2 (DHIS2) in 2018 as part of the Ministry of Health's approach to aligning programme database systems onto one common platform with the goal of improving ability to monitor, analyze, report and use data to inform actions at the provincial and national levels. The database generates national and provincial 'dashboards' that facilitate easy and rapid access by provincial staff to view and analyze key national malaria programme indicators. The system strengthens health facility monitoring and reporting and improves evidence-based decision making.

In 2018, 76 percent of health facilities reported malaria-related data through the DHIS2, achieving 95 percent of the target. The programme indicator assesses health facility reporting capacity. Several staff are being supported through the programme at the Ministry of Health to support facility-level reporting through training, capacity building and technical support. This includes one National Malaria M&E Officer and six Health Information System Officers.

Building the capacity of the health sector to ensure long-term sustainability

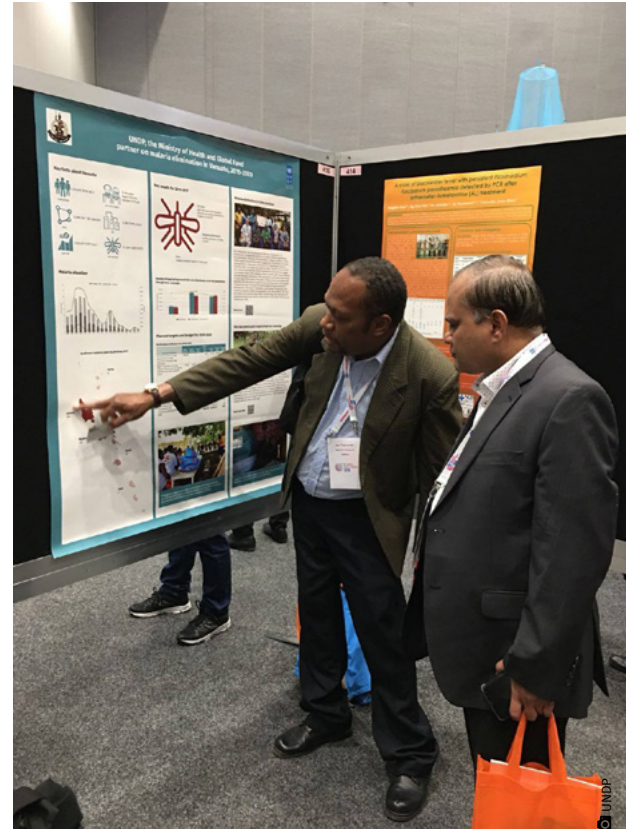
In January 2019, a [review](#) of the Vanuatu National Vector Borne Diseases Control Programme was released. The review was supported by UNDP and the Ministry of Health and conducted by independent experts. It provides an independent look at the Programme in terms of its organization, management framework, and assesses progress towards malaria elimination. Recommendations are made to help define next steps for improving programme performance and redefining strategic directions and focus, including revising policies where necessary. The review highlighted key weaknesses and gaps the malaria programme is facing, including staffing and capacity challenges as well as reduced funding. A lack of a full set of malaria control interventions that are necessary to reach malaria elimination by 2025 as planned by the Government of Vanuatu is one of the key challenges. The review, although it has been critiqued, presents a solid roadmap for future interventions in malaria control in the country.

In 2018, pilot project to implement G6PD rapid diagnostic tests was conducted with the support of WHO. The rapid tests enable health workers to determine G6PD status and administer primaquine to treat *P. vivax* malaria. Primaquine is an essential treatment for *P. vivax* malaria, which is the species of malaria parasite that causes the majority of cases in Vanuatu, however there is a risk of drug-induced haemolysis for people who have G6PD deficiency. The Ministry of Health has now started implementing the use of G6PD rapid test to diagnose G6PD deficiency and application of primaquine for *P. vivax* patients as per the National Treatment Guideline 2015. Considering the endemic presence of *P. vivax* malaria, the introduction of G6PD tests countrywide may have a significant impact on malaria morbidity.

A key component of the programme in this funding cycle is to prepare the sub-recipient, the Ministry of Health, to take over the role of Principal Recipient after 2020. Several activities in 2018 were organized to advance this preparedness, including conducting assessments on the management, finance, procurement and M&E capacity of the national programme. On 3-4 December 2018, a Capacity Building Plan



RIGHT: Dr. Len Tarivonda from the Ministry of Health of Vanuatu and Anna Chernyshova from UNDP present results of the malaria grant during a poster exhibition at the 1st Malaria World Congress in Melbourne on 3 July 2018.



Development Workshop was held in Port Vila. It brought together participants from the Ministry of Health, the malaria programme team, finance, human resources, procurement and asset management, UNDP and development partners. At the workshop, concrete plans were developed to bridge the identified gaps in capacity. The plans were shared with the Global Fund portfolio manager for further review and funding approval, with the anticipation this will pave the way to further build capacity of the Ministry of Health to become Principal Recipient.

Immediately following the capacity building workshop, on 5 December 2018 a resource mobilization planning workshop was also held in Port Vila. Participants examined the needs and options for the Ministry of Health's procurement of LLINs in 2021, including alternative channels for procurement that would ensure sustainability. UNDP made detailed presentations on the current procurement costs and distribution process, and emphasized the special attention that needs to be paid to quality assurance of LLINs – it was recommended that only WHO quality-assured nets be procured to avoid poor quality. It was agreed that a resource mobilization plan and an investment brief would be developed regarding the procurement and distribution of LLINs, beginning 1 January 2021. The investment brief will be drafted for presentation at the next partners meeting scheduled in quarter 2 of 2019 in Vanuatu.

To further build capacity of the national programme, share knowledge and learn from best practices from around the world, Dr. Len Tarivonda from the Ministry of Health and Anna Chernyshova, Programme Manager from UNDP, participated in the 1st Malaria World Congress in Melbourne, Australia. During a poster presentation session, they jointly presented key results of the malaria grant. The conference attracted over 1,000 participants from around the world. Of particular interest to the programme were the good practices presented related to the promotion of community champions to raise awareness in communities about malaria, and assist health workers in their activities removing breeding sites, distributing bed nets, etc. Campaigns such as 'Zero Malaria Starts with Me' have had significant impacts in Africa and hold valuable lessons for Vanuatu.

The programme was also able to support disaster relief efforts in response to the volcanic disaster on Ambae in Penama, by procuring and supplying generators to the Ministry of Health. The generators were used to restore vital health services, including for malaria, tuberculosis, HIV and other sexually transmitted infections, for approximately 5,000 evacuees. The generators powered medical instruments and devices, diagnostic tools and other equipment, for the people of Ambae who were relocated to Maweo following the eruption.

Summary tables

Financials

By recipients

| By recipients | Budget 2018 | Sub-recipient agreement | Expenditure 2018 | Balance | Utilization |
|---|----------------|-------------------------|------------------|----------------|-------------|
| Vanuatu Ministry of Health and Medical Services | 163,486 | 145,404 | 140,749 | 4,655 | 97% |
| United Nations Development Programme | 369,240 | | 271,538 | 97,702 | 74% |
| Total | 532,726 | | 412,287 | 120,439 | 77% |

By intervention

| By modules, interventions | Budget 2018 | Expenditure 2018 | Balance | Utilization |
|---|----------------|------------------|---------------|-------------|
| Vector control | | | | |
| Long-lasting insecticidal nets (LLIN) - Continuous distribution | 216,467 | 190,745 | 25,722 | 88% |
| RSSH: Health management information systems and M&E | | | | |
| Analysis, review and transparency | 94,164 | 45,863 | 48,300 | 49% |
| Program management | | | | |
| Grant management | 222,096 | 175,679 | 46,417 | 79% |
| Total | 532,726 | 412,287 | 74,022 | 77% |

Procurement for Vanuatu malaria programme

| Item | Classification | Cost |
|--|-----------------|---------------------|
| CareStart G6PD RDT, 25s | Diagnostic Test | \$2,962.50 |
| PermaNet 2.0 Rect. 100d. 130x180x150,LC6 Light Green | LLIN | \$16,900.00 |
| PermaNet 2.0 Rect. 100d. 160x180x150,LC4 Light Blue | LLIN | \$50,979.20 |
| PermaNet 2.0 Rect. 100d. 190x180x150, LC2 Pink | LLIN | \$43,841.60 |
| Renegade Generator Electric Start 8.0KVA/6.5KW MAX | Generator | \$4,956.86 |
| Freight, Insurance, Storage & Quality Assurance Cost | PSM COST | \$24,762.96 |
| PSM Support - In Country Travels | | \$3,980.00 |
| Total | | \$148,383.12 |

Performance against key programme indicators

| Coverage indicators | Target | Results | Achievement rate |
|--|--------|---------|------------------|
| VC-1: Number of long-lasting insecticidal nets distributed to at-risk populations through mass campaigns | 31,418 | 27,151 | 86% |
| M&E-2: Proportion of facility reports received over the reports expected during the reporting period | 80% | 76% | 95% |

UNDP would like to extend sincere gratitude to all of the programme partners named in this report – the Vanuatu Ministry of Health and Medical Services, WHO, the Vanuatu Country Coordinating Mechanism and the Pacific Islands Regional Multi-Country Coordinating Mechanism. Without your hard work and dedication, the results would not have been possible.



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