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Act to End Neglected Tropical Diseases
| West
FY 2023 Work plan–Mali
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ACRONYM LIST

AE	Adverse event
ALB	Albendazole
CY	Calendar Year
CDD	Community drug distributor
CDPFIS	<i>Centre de Documentation, Planification, Formation et de l'Information Sanitaire</i> (Center of Documentation, Planning, Training and Health Information)
CES	Coverage evaluation survey
CIND	Country Integrated NTD Database
CNHF	Conrad N. Hilton Foundation
CNIECS	<i>Centre National d'Information, d'Education et Communication pour la Santé</i> (National Center for Health Information, Education, and Communication)
CNPVTM	<i>Le Comité National Pour la Validation de l'Élimination du Trachome au Mali</i> –the National Committee for the Validation of Trachoma Elimination in Mali
CSCOM	<i>Centre de Santé Communautaire</i> (Community Health Center)
CSRef	Health Reference Center
DGSHP	<i>Direction Générale de la Santé et de l'Hygiène Publique</i> (General Directorate of Health and Public Hygiene)
DRS	<i>Direction Régionale de la Santé</i> (Regional Health Directorate)
DSA	Disease-specific assessment
DTC	<i>Directeur Technique du Centre</i> (Technical Director of the Health Center)
END Fund	End Neglected Tropical Diseases Fund
EU	Evaluation unit
FEFO	First expiry, first out
FTS	Filariasis test strip
FY	Fiscal year
GOM	Government of Mali
HA	Health Area
HD	Health District
Helen Keller	Helen Keller International
HSS	Health system strengthening
INSP	National Institute of Public Health
IVM	Ivermectin
JAP	Joint application package
LF	Lymphatic filariasis
MCD	<i>Médecin-Chef de District</i> (Health District Chief Medical Officer)
MDA	Mass drug administration
MoH	Ministry of Health and Social Development
NTD	Neglected Tropical Disease
NTDP	National NTD Programs
OMVS	<i>Organisation pour la Mise en Valeur du Fleuve Sénégal</i> (Organization for the Development of the Senegal River)
OV	Onchocerciasis
PC	Preventive chemotherapy
PNEFL	<i>Le Programme National d'Élimination de la Filariose Lymphatique ou Éléphantiasis</i> (National Lymphatic Filariasis Elimination Program)
PNLO	<i>Programme National de Lutte Contre l'Onchocercose</i> (National Onchocerciasis Control Program)
PNLSH	<i>Programme National de Lutte Contre de La Schistosomiase et les géohelminthiases</i> (National Schistosomiasis/Soil-Transmitted Helminths Control Program)

PNSO	<i>Programme National de Soins Oculaire</i> (National Program for Eye Health)
PZQ	Praziquantel
SAC	School-age children
SAE	Serious adverse event
SAFE	Surgery–Antibiotics–Facial Cleanliness–Environmental Improvements
SCH	Schistosomiasis
SCI	Schistosomiasis Control Initiative
SDLM	Sub-Directorate for Disease Control
SOP	Standard operating procedure
STH	Soil-transmitted helminths
STTA	Short-term technical assistance
TA	Technical Assistance
TAS	Transmission assessment survey
TF	Trachomatous inflammation—follicular
TIPAC	Tool for integrated planning and costing
TT	Trachomatous trichiasis
USAID	United States Agency for International Development
WASH	Water, sanitation, and hygiene
WHO	World Health Organization
WV	World Vision

NARRATIVE

NATIONAL NTD PROGRAM OVERVIEW AND SUPPORT

Mali is located in the Sudano-Sahelian zone in Africa and covers an area of 1,241,238 km². Mali's population will reach an estimated 23,570,466 by 2023, with the majority of the population concentrated in the southern and central regions of the country. The country is divided into eighteen administrative and political regions, the district of Bamako, 59 prefectures, and 703 rural and urban communes. There are 75 health districts (HDs) and 1,510 health areas (HA).

In Mali, mass drug administration (MDA) of preventive chemotherapy for neglected tropical diseases (PC-NTDs) has been integrated and implemented since 2007 with support from the United States Agency for International Development (USAID), first through the RTI-managed NTD Control Program and later the ENVISION project, which closed in 2019. End Neglected Tropical Diseases Fund (END Fund) has a history of supporting NTD activities in Mali, notably by stepping in to support MDA from 2012– 2014 when USAID funding was suspended due to political instability in country. END Fund continues to support onchocerciasis (OV) activities and LF morbidity management in Mali. Elimination strategies have been developed for lymphatic filariasis (LF), OV, and trachoma, and control strategies for schistosomiasis (SCH) and soil-transmitted helminths (STH). The Ministry of Health and Social Development (MoH) has focused on these five PC-NTDs with the creation of four NTD programs: the National Lymphatic Filariasis Elimination Program (PNEFL), National Onchocerciasis Control Program (PNLO), National Schistosomiasis and Soil Transmitted Helminths Control Program (PNLSH), and National Program for Eye Health (PNSO). Since 2008, Helen Keller Intl (Helen Keller) has provided technical assistance (TA) to the MoH, establishing a longstanding relationship with the national program. The current Act to End Neglected Tropical Diseases | West (Act | West) program, which began in August 2018, will continue to support integrated NTD control through fiscal year (FY) 2023. Act | West is managed globally by FHI 360, with Helen Keller serving as the lead implementing partner in Mali. World Vision (WV) and Deloitte are also consortium partners, providing TA on sustainability initiatives implemented within the Act | West program.

The NTD programs once existed vertically, are now integrated, and collaborate under the remit of the Sub-Directorate for Disease Control (SDLM). A focal point within the SDLM acts as a liaison between the NTD disease programs and the SDLM, which is attached to the General Directorate of Health and Public Hygiene (DGSHP). Regional Health Directorates (DRS) represent the DGSHP at the regional level and centrally in Bamako. Each DRS provides technical and institutional support to the HDs. Within each DRS, there is a focal point for all NTDs who coordinates NTD control activities under the supervision of the Regional Health Director. At the HD level, there is also a focal point for all NTDs who monitors and coordinates NTD control and elimination activities (along with various other health activities unrelated to NTDs) under the supervision of the health district chief medical officer (MCD). The Directorate of Health at the HD level provides planning, training, and supervision to the various HAs in their district. At the HA level, the technical directors of the health centers (Directeurs Technique du Centre or DTCs) are responsible for the provision of health services and the implementation of activities at the community level.

Mali has made tremendous progress towards the elimination and control of NTDs. With USAID support, 100% geographical coverage has been achieved for all PC-NTDs since 2009. USAID and the Conrad N Hilton Foundation (CNHF) supported trachoma MDA, with USAID support ending in 2012 following a coup and temporary suspension of USAID funding. With the continued support of the Conrad N Hilton

Foundation (CNHF), the elimination target for trachomatous inflammation – follicular (TF) was met in all endemic HDs, and MDA for trachoma has stopped throughout the country since 2016. In July 2022 the PNSO completed the last trachomatous –trichiasis (TT)-only survey in Koro HD in the Mopti region. In August 2022, the results of the survey were finalized, confirming TT in adults aged 14 and older less than <0.2%. The PNSO hopes to complete and submit the trachoma elimination dossier to the World Health Organization (WHO) by the end of calendar year (CY) 2022. Pending submission of the dossier for validation, Mali may be the fourth sub-Saharan African country to have eliminated trachoma as a public health problem.

The PNEFL completed all remaining transmission assessment surveys (TAS1) in November 2020. All 75 HDs in the country have now passed TAS1, qualifying all HDs to stop mass treatment for LF throughout the country. Current projections indicate that the final TAS3 surveys will be completed in 2025. Assuming all surveys pass, the PNEFL will submit the LF elimination dossier in 2025. Until then, the PNEFL will monitor and update the dossier pending survey results and work with all relevant stakeholders, including national experts, research institutions and technical and financial partners, to ensure the dossier meets WHO requirements.

OV elimination activities in Mali are supported by the END Fund. As planned by the OV Elimination Committee (OEC), the FY 2021 ivermectin (IVM) MDA in 20 HDs was carried out in FY 2022 for programmatic reasons. With support from the END Fund, Helen Keller - Mali subsequently conducted an MDA coverage evaluation survey (CES) and data analysis is ongoing. Entomological stop-MDA surveys were conducted in 2021 in all transmission zones (see section “ii. Onchocerciasis” for details). Additional entomological surveys are planned for 2022 during the rainy season. Stop MDA surveys are ongoing in transmission zones in Koulikoro and Sikasso regions and will extend into FY 2023. MDA will continue in 2022 and 2023 until stop-treatment data are validated by the OEC.

Mali is well positioned to achieve control of schistosomiasis (SCH) and soil transmitted helminths (STH). In Mali, the PNLSH uses the original WHO definition of control for SCH (control of morbidity for SCH and prevalence of heavy infection <5%). For STH, control indicates that STH no longer poses a public health problem where prevalence of moderate and heavy infection <2%. Significant progress was noted during the SCH/STH data review workshop conducted in May 2021. Results reviewed at this workshop showed that of the 1,510 total HAs, 210 had zero SCH prevalence; 586 had low SCH prevalence (<10%); 403 had moderate prevalence (10%–50%); and 311 had high prevalence (>50%). In FY 2021, the PNLSH conducted MDA in 56 HDs (795 HAs), implemented at the sub-district level for the first time. For FY 2022, MDA is planned in 626 HAs across 44 HDs. For FY 2023, the PNLSH plans to target 741 HAs in 53 HDs for SCH MDA, of which 71 HAs in four high prevalence HDs will be targeted for expanded treatment to include adults. Since shifting to HA implementation, coverage rates are gathered at the HA level and reported during data review meetings.

Participants of the SCH/STH data review workshop, which included representatives from the PNLH, WHO–Geneva, the Global Schistosomiasis Alliance, Helen Keller, and national technical experts, carefully examined recent STH data. At baseline, 65 HDs had a prevalence between 1 and 20%, 10 HDs had a prevalence above the 20% treatment threshold, and the national prevalence was 8%. Impact surveys conducted after years of integrated STH MDA showed that no HDs exceeded 10% prevalence (see section “ii. Soil Transmitted Helminths” for more details). After a thorough examination of the data, the participants classified Mali as a country where STH is no longer a public health problem. WHO participants confirmed that all districts can stop mass treatment for STH.

Under the Act | West program, USAID provides support in Mali for MDA and disease-specific assessments (DSAs) for LF and SCH, as well as sustainability and health systems strengthening (HSS) activities, with technical support from World Vision and Deloitte. In addition to longstanding support from USAID through the Act | West program, additional stakeholders work with the NTD programs to implement complementary NTD activities in the country. END Fund supports the PNEFL and PNLO to conduct OV MDA and surveys, and LF morbidity management. Sightsavers supports the PNLO to conduct OV MDA and surveys. CNHF supports the PNSO to eliminate trachoma as a public health problem, with Helen Keller, Sightsavers, and The Carter Center as implementing partners. The Task Force for Global Health selected Mali to conduct an SCH oversampling survey in FY 2022. Data collection was conducted from June to August 2022. Preliminary results indicate that overall SCH prevalence is 36.74% in the three districts surveyed in the Kayes region (Bafoulabé: 36.22%; Diéma: 40.60%; and Oussoubidiagna 32.52%). For details on partner supported activities for FY 2023,

IR1 PLANNED ACTIVITIES: LF, TRA, OV:

Lymphatic filariasis

Plan and justification for FY 2023:

MDA

No LF MDA is planned for FY 2023 as all HDs have met the criteria to stop MDA.

DSA

In FY 2023, the PNEFL plans to carry out TAS2 in 5 EUs (15 HDs) in the regions of Kidal, Mopti, Menaka, and Gao with Act | West support. The TAS2 will be conducted in insecure zones in the center and northern regions of the country. Local authorities will monitor local security and determine the safest time to conduct the survey. To ensure the safety of survey teams and successful implementation of the survey, the PNEFL will apply the same strategies used during the FY2020 TAS1, FY 2021 TAS2, and FY 2022 TAS3 in the central and northern regions to carry out these surveys safely and effectively. The PNEFL will increase the number of new survey teams trained and ensure the strategies meet the security needs so that TAS are completed as planned. Training more DTCs as surveyors has the added advantage of working with local staff who can safely navigate targeted villages and result in quicker completion of surveys. The training of TAS surveyors will take place in Bamako in a three-day workshop.

Act | West will conduct field supervision or with the WhatsApp group for insecure areas to ensure compliance with the protocols and COVID-19 SOPs in all targeted EUs.

With Act | West support, a total of 302 boxes of FTS (inclusive of the 8% wastage factor) will be procured to conduct TAS2 in FY 2023.

Dossier Status for LF:

In FY 2021, with support from Act | West, a national consultant was hired to provide short-term technical assistance (STTA) to develop the current draft zero of the elimination dossier narrative available to the LF program.

In FY 2022, the PNEFL is planning two workshops to support continued dossier development: a workshop to review and tabulate LF morbidity data in Mali and the annual workshop to update the draft of the LF

elimination dossier narrative and company Excel file, according to WHO guidelines.

Workshop to update the LF elimination Dossier (20 participants) Location: Banankoro

The PNEFL planned to organize a workshop by the end of FY 2022 to review and tabulate LF morbidity data and to update the draft of the LF elimination dossier narrative and Excel file developed in FY 2021.

In FY 2023, the PNEFL will organize a workshop to update the elimination dossier with the most recent survey and morbidity data. This will be a two-day workshop including two days of travel for 20 participants in Banankoro (Koulikoro region). The participants will include representatives of the NTD program coordinators, research institutions, NTD partners, and Center of Documentation, Planning, Training and Health Information (CDPFIS). Act | West will provide technical and financial support to cover all costs associated with this workshop, including venue rental, per diem, stationery, and lodging.

Trachoma

Plan and justification for FY 2023:

Trachoma MDA

In FY 2023, no trachoma MDA is planned as all HDs have reached the criteria to stop MDA.

DSA

No DSA is planned in FY 2023. The PNSO conducted the final remaining TT-only survey in Koro HD with support from The Carter Center through funding from CNHF. The results of the survey were finalized in August 2022 and no further trachoma surveys are required in Mali.

Dossier Status for trachoma:

The CNPVTM was established in 2018 to prepare the dossier for the elimination of trachoma as a public health problem. As the initial goal was to complete the dossier by the end of 2019 for submission in 2020, a consultant was recruited in 2019 to draft an initial version. Since then, the CNPVTM met several times and updated the versions submitted by the consultant. The few remaining activities required to complete and submit the dossier were delayed due to the COVID-19 pandemic, political unrest, and ongoing insecurity in Mopti region. In April 2022, the security situation improved enough for the PNSO to complete a trachoma surveillance survey in Douentza HD, and limited *ratissage* (door-to-door case finding) in Koro HD, followed by a TT-only survey. The results of the survey were finalized in August 2022. Shortly thereafter, the CNPVTM met to revise the dossier with the most recent survey data and to review the dossier package. With support from CNHF, the PNSO will hire a consultant to complete a last review of the dossier and to add any finishing touches before sharing with the MoH for their final approval. The CNPVTM and PNSO aim to receive approval from the MoH to submit the dossier to WHO by the end of CY 2022. Mali will be among the first sub-Saharan countries with high baseline prevalence to eliminate trachoma as a public health problem, an enormous accomplishment for the PNSO and for all Malians.

Onchocerciasis

Plan and justification for FY 2023:

MDA

In FY 2023, the PNLO plans for MDA in 20 OV-endemic HDs, pending the validation of ongoing stop MDA surveys' results. END Fund will support the OV treatment.

DSA

In FY 2023, the PNLO plans to complete stop MDA surveys and to conduct a pre-stop MDA survey in the KA05 zone (Kéniéba HD) of the Kayes region that failed in 2019, once MDA is completed. These surveys will be supported by END Fund and Sightsavers.

OV Elimination Committee Meeting

In FY 2023, the PNLO plans to hold one OV Elimination Committee meeting.

Dossier Status for OV:

The OEC will provide guidance to the PNLO on the dossier development process during their next meeting planned for FY 2023. Though dossier development has not started in Mali, it is expected that dossier development will start during post treatment surveillance stage after stopping MDA. Mali will use the experience and lessons learned from Niger to advise and support the Mali dossier development process. Key partners including USAID and Act | West will be invited to attend the OEC meetings to advise the PNLO on dossier development, and coordination with END Fund and Sightsavers will be needed to provide all supports to develop the dossier.

IR2 SUSTAINABILITY AND HSS STRATEGY ACTIVITIES**Systems Strengthening****Data Security and Management**

Data Security Policy Workshop: Mali has taken steps to strengthen NTD data management, including the transition to DHIS2 for the storage of NTD data. The DGSHP does not have an established or documented NTD data security process, procedures, or guidelines to store, access, and secure electronic and paper-based data (programmatic and financial). Data is currently stored on a computer stationed at the DGSHP and on external drives of NTD staff with no documented or shared standard procedures for backups.

The DGSHP and CDPFIS have resolved to prioritize robust data management and support the transition to storing data in DHIS2. The Sustainability Plan likewise highlights a need to strengthen information systems and improve data quality, particularly as they prepare elimination dossiers for trachoma and LF.

In FY 2023, Act | West will begin providing TA to the DGSHP through the CDPFIS in Mali to determine the appropriate means for securing data based on recommendations from the landscape analysis and the workshop.

Deloitte will organize with relevant stakeholders to determine the best approach to institutionalize data backup procedures.

Training workshop for the NTD focal points of the DRS and DHIS2 Districts in the regions of Tombouctou, Gao, Kidal, Ménaka, Taoudénit

In previous years, the DGSHP and NTDPs held DHIS2 training workshops for HD and regional NTD focal points in Kayes, Sikasso, Segou and Mopti regions with Act | West support, and in Koulikoro region with Sightsavers support. The DGSHP and NTDPs have increasingly recognized the value of the DHIS2 and will undertake a series of activities in FY 2023 to support the transition to DHIS2 for NTD data storage. To

support this transition, the DGSHP and NTDPs will organize two workshops to provide DHIS2 training to the NTD focal points in the remaining regions in the north. At the end of this workshop, DHIS2 training will be scaled to all regions in Mali. Starting last year, an extra day has been added to the district-level data review meetings to provide participants with sufficient time for MDA data entry into DHIS2, providing a chance for routine data entry into DHIS2.

The training workshops will be provided to the HD and regional level NTD focal points from the regions of Tombouctou, Gao, Kidal, Menaka, and Taoudenit. The workshop in Tombouctou will gather participants from Tombouctou and Taoudenit regions, while the Gao workshop will include participants from Gao, Menaka, and Kidal. Each five-day session will be facilitated by CDPFIS staff. These two workshops will be financed by Act | West (including room rental, per diems of participants, internet, and fuel, and flight tickets for CDPFIS staff).

Workshop to Migrate Key Historical NTD Data and Indicators from country integrated NTD database (CIND) to DHIS2

All historical NTD data through FY 2021 is stored in the country integrated NTD database (CIND), with support from Act | West. However, DHIS2 is the priority database in use by the MoH, implemented at all levels of the country's health system. Currently, DTCs are responsible for monthly data entry at the district-level referral health centers (CSRefs). The integration of historical NTD data is a major priority for NTD programs in order to develop elimination dossiers and improve the use of data for decision making. However, there are many challenges associated with transitioning NTD data from CIND to DHIS 2 because there are more NTD variables and indicators in CIND than in DHIS2. To address this limitation, CDPFIS, the entity responsible for synthesizing and disseminating health data, will select key NTD indicators to prioritize across data platforms. The process to select these indicators will be based on the experience of Niger shared by Helen Keller team during the Pause and Reflect meeting held in Ghana in April 2022.

Act | West will support a five-day workshop in Bamako where 19 NTDP staff, researchers, the DGSHP pharmacist, CDPFIS staff, and NTD NGO partners will convene to select the relevant indicators, determine the key processes that will be important for operationalizing the DHIS2 for use among the NTD programs and input historical from the last seven years for key indicators. These processes will include assigning frequency of update, ensuring alignment with the data security policy, migrating data into DHIS2, and outlining a process for indicators that are aggregated from the local levels, such as clinic based MMDP data.

Workshop to Update the CIND

Ideally, the MoH through the DGSHP would employ a single, country-wide database like DHIS2. However, not all NTD data from the CIND can be migrated into DHIS2 for reasons specified in the preceding section. As such, Act | West will support the MoH to enter FY 2022 NTD data into the CIND in FY 2023. Act | West will support a three-day workshop to update the CIND in Banankoro, Koulikoro region.

Drug Management

The national manual for the management of NTD drugs and inputs guides all NTD drug management in Mali. The MoH and DGSHP complies with the principle of "first expiry, first out" (FEFO), which is outlined in the national NTD drug manual. FEFO is adhered to at all levels of drug transport and management and strong supply chain management is central to all drug storage and transportation activities. The national NTD program manages drug supply chain and ordering systems in Mali. All NTD MDA medicines are included in the country's essential medicines list. The SDLM has a central warehouse where drugs and NTD inputs such as dose poles are stored. Each region has an appropriate warehouse for storage of drugs

and MDA inputs. With support from Act | West, drug transportation from the central to regional levels is organized by the DGSHP. Each DRS organizes drug transportation from the regional warehouses to health centers. In FY 2022, the DGSHP plans to assess all national and regional warehouses used by the NTDPs in addition to 5% of district and peripheral health level warehouses. This assessment will be completed during the FY 2022 SCH MDA.

Drug quantification for NTDs and WHO 2024 Joint Application Package (JAP) Filling Meeting

During FY 2023, NTD drug quantification and WHO JAP completion for 2024 MDA will be developed during a one-day working session in Bamako, gathering all NTD Program Coordinators or their representatives and the DGSHP Pharmacist. Act | West - Mali and the WHO Mali NTD Focal Point will provide technical support.

Evaluation of NTD drug storage facilities and processes in four health districts and five health areas per HD

In FY 2023, Act | West will support the evaluation of the NTD drug storage facilities and processes in four HDs (five HAs per HD) using the assessment tools developed by Act | West.

Reverse logistics

Supply Chain Management and Reverse Logistics from PZQ and FTS

Act | West will provide TA to support the reverse logistics for remaining drugs after the MDA in the Kayes, Koulikoro, Sikasso, Ségou, and Mopti regions. After the MDA and following the NTD Annual Review workshop, two Act | West staff members (one driver and one NTD program staff member) and one MoH staff member will travel for 15 cumulative days to collect and return all remaining drugs from the health areas, districts, and regions to the national storage warehouse at the DGSHP in Bamako. The Act | West staff are trained doctors; the MoH staff member is a doctor/pharmacist. All have received logistics management training on NTD drugs and inputs under USAID's ENVISION project. In the regions of Gao and Tombouctou the medicines are stored and monitored in the regional warehouses after MDA due to the distance and security situation. A physical inventory of these remaining MDA medicines will be completed, and the DRS will send this information to the head pharmacist of the DGSHP, the PNLISH and Act | West – Mali so that in the following MDA campaigns, drug need is quantified considering the remaining stock in these regions. The FEFO policy is applied throughout all levels of NTD drug management in the country to ensure that the remaining drug quantities are used first during MDA. The stock will be stored in the regional warehouses and monitored by the regional team.

Equip the central warehouse with handling equipment, ventilation, and drug storage space.

WHO guidelines and best practices for drug storage and packaging include good ventilation, temperature control, secured storage sites, and proper drug arrangement at the storage site. In FY23, Act | West will support the MoH to make needed improvements to the DGSHP NTD drug central storage warehouse, which includes equipping the warehouse with drug handling supplies, updating the ventilation system, and improving the drug storage shelving. The NTD Technical Multisectoral Committee identified these improvements during the development of the Sustainability Plan. To achieve these improvements, Act | West will support the purchase of two trolleys and two ladders, and install six fans, six air conditioners, ten large shelves, and the cost of labor for installing these supplies.

Management of serious and adverse events (AEs)

During the FY21 SCH MDA campaign, all AEs reported were minor and were managed with supportive treatment, as stipulated in the guidelines developed for NTD campaigns. The same guidelines will be followed for the FY22 SCH MDA campaign. In case of a serious adverse event (SAE), the DRS in charge notifies the National Pharmacovigilance Center. The National Pharmacovigilance Center located at the National Institute of Public Health (INSP) has the personnel and tools to conduct investigations in case of any suspected SAE. The cause of the SAE is determined by the Technical Pharmacovigilance Committee. The MoH supports the operating costs of the National Pharmacovigilance Center. Act | West will support the National Pharmacovigilance Center to report SAEs to the manufacturer Merck KgaA, in accordance with their guidelines and WHO guidelines. Helen Keller will also support the DGSHP through the pharmacist to notify and report to all partners in a timely manner. These same serious and adverse events management procedures will be applied for the FY 2022 SCH MDA campaign taking place in June-July 2022 and for the FY 2023 SCH MDA campaign.

ACHIEVING SUSTAINABILITY: MAINSTREAMING & HEALTH SYSTEMS STRENGTHENING

Mali is in phase three of USAID's five-phase sustainability approach, whereby the DGSHP is in the process of planning the technical and political validation of Sustainability Plan. Held in July FY 2021, the joint Guided Self-Assessment workshop built upon the results of the stakeholder landscape and cross-sector barrier analysis, as well as the results of the financial gaps analysis completed by the MoH/DGSHP using the Tool for Integrated Planning and Costing (TIPAC). In November FY 2021, the MoH/DGSHP joined key stakeholders in education, water, sanitation, and hygiene (WASH), veterinary and health sectors for the Sustainability Plan Workshop. The Guided Self-Assessment workshop, using the Sustainability Maturity Model tool, was a critical input for the development of the Sustainability Plan. As a component to finalize the Sustainability Plan and prepare for its implementation, the MoH convened NTD stakeholders from health and non-health sectors to complete a budgeting workshop in June 2022, which was co-financed by Sightsavers, the corresponding budget for the Sustainability Plan was finalized.

In addition to the progress made towards the five phases of the Sustainability Plan development and implementation, the MoH/DGSHP has made progress in strengthening cross-sector collaboration for a more integrated approach to maintain gains made in NTD elimination and control. Guided by the findings from the landscape and cross-sector barrier analyses, in December 2020, Act | West provided technical support to the MoH/DGSHP to facilitate a three-day roadmap development workshop to establish a cross-sector coordination mechanism for the elimination and control of NTDs. In addition, cross-sector participants also reviewed and validated the draft TOR for the National Multisectoral Coordination Committee followed by the launch of the National Multisectoral Coordination Committee for the Control and Elimination of NTDs with preventive chemotherapy in Mali, held on December 23, 2021, in Bamako. The ceremony was chaired by the representative of the Minister of Health and Social Development. The launch gathered all health and non-health sector NTD stakeholders and representatives of WHO, Act | West, Sightsavers and World Vision Mali, and online participants. At the end of the meeting, an announcement of the Official Launch of the National Multisectoral Coordination Committee for the Control and Elimination of NTDs with Preventive Chemotherapy was presented by the Deputy Director of Disease Control representing the Ministry of Health and Social Development. The committee has already held two meetings in November 2021 and March 2022.

As Mali advances toward the elimination of four out of five PC-NTDs, the DGSHP has an increased priority on the sustainability of NTD programs and maintaining the gains made thus far. In the development of the NTD Sustainability Plan, the DGSHP has prioritized domestic resource mobilization, data security, and

increased coordination with health and non-health sectors in the first year of implementation.

Governance activities

Strategic Planning Session to Create a Roadmap for Securing Financial and Operational Commitments for NTD Services

CNIECS and the national NTD programs in Mali are currently planning a session with the MoH to discuss the feasibility of allocating more resources to NTD interventions to sustain the tremendous success of control and elimination progress. The session, planned for September FY 2022, will use analysis from FY 2021 TIPAC data, clarify the potential role the government can have in improving access to NTD treatment as well as provide an updated list of opportunities for support from the government, particularly the MoH. The outcomes will inform this activity in FY 2023, to develop a strategy to finance the sustainability plan. The Mali NTDPs recognize the critical role that private sector financing can provide to long-term sustainability, based on investments secured during the 2012 government coup that caused donors to reduce funding. Mali NTDPs also want to maintain the progress achieved via sessions with the government, such as the activity mentioned above with the MoH, as an avenue for support.

A strategic three-day workshop will serve to map all stakeholders across multiple sectors (public and private) and explore the lessons learned from the MoH budget advocacy on Day 1, review updated FY 2022 TIPAC data insights based on TIPAC data entry and analysis workshops planned as an FY 2022 carryover, on Day 2, and create a roadmap and timeline for engagement with multi-sector actors to secure financial and operational commitments for the continued access to NTD drugs, services, and operations of the Mali NTDPs on Day 3. The workshop will include participation from the multi-sectoral committee, such as Ministry of Finance, Education, WASH, Mining, and private sector stakeholders from telecommunications, banks and other potential supporters of NTDs. The workshop will identify opportunities to leverage funding from other sector budget processes and other funding opportunities that have been identified by the Global Financing Facility and determine which potential opportunities would be most appropriate for the long-term financing of NTDs. The roadmap will be multisectoral, cover the period of the sustainability plan and identify actionable steps, timing, and responsibility of each action for accountable sustainable financing for NTDs.

Follow up technical support to the NTD Programs to validate strategic alignment and integration of NTDs into relevant health and other sector strategies and policies

Since FY 2020, Act | West has provided technical support to the NTD Programs to identify, review, analyze, and advocate for the strategic alignment and integration of NTDs into the education, WASH, and veterinary sectors' national policies, strategies, or tools as a critical step towards integrated service delivery in Mali. This process began with (1) a sensitization of these three key ministries on NTD sustainability processes, leveraging cross-sector approaches and advocating for the inclusion of NTDs into their respective sector priorities (FY2020); (2) a holistic review of pre-selected existing and relevant strategic sector documents and policies as entry points for NTD integration (FY 2021); and (3) the development of a roadmap and timeline for a revision process of the selected sector strategies (FY 2021).

In FY 2022, Act | West planned to continue to provide TA to the NTD Programs to coordinate the strategic revision and NTDs integration process in line with the previously defined roadmap. The NTDPs will lead the roll out of the strategy integration framework for the identification of pertinent tools or strategies to be integrated for each sector, starting with the Education sector.

In FY 2023, Act | West will provide TA to the MoH/DGSHP for the revision, development, and validation of the Education sector strategies and tool adaptation for NTD integration through the following steps:

- a. **Technical Development:** This five-day meeting would convene the Ministry of Education and other relevant stakeholders to apply a methodology to update the identified sector strategies in the roadmap development such as existing training curricula and annual workplans to reflect NTD priorities. It is expected that the engagements and collaboration between these sectors would lead to the development of the first draft of an updated training curricula for Education actors and an integrated annual joint action plan between the two sectors.
- b. **Technical Review and Finalization:** Following the development meeting, the DGSHP will convene the technical teams from the respective ministries to a five-day meeting to review and propose recommendations to the proposed changes and NTD integration priorities in the training curricula and joint action planning drafts. This will ensure that the revised tools and strategies are reflective of mutualized resources between the health and education sectors with a defined process for validation and joint implementation.
- c. **Technical Validation:** The MOH/DGSHP with technical support from Act | West will host a three-day validation meeting with high-level stakeholders in these cross-sector Ministries as well as their relevant partners. The aim of this validation meeting is to (1) present the progress made to mainstream NTD priorities within sector policies, strategies, and planning tools; (2) validate the joint action planning and proposed integrated curricula; and (3) obtain commitment for their collaborative engagement with the NTD programs while ensuring continuous representation and inclusion of NTD priorities in their sector tools/strategies revision cycles.

Sustainability Plan Political Validation Location: Bamako

In FY 2022, the DGSHP in Mali developed the sustainability plan with support from Act | West, which was technically validated by the MOH in August FY 2022. The technical validation brought together high-level stakeholders from other sectors and the MOH to finalize the plan, align with the budget, and present to the advisors to the Minister of Health. The plan was technically validated and will advance to be presented to the cabinet before it is politically validated by the MOH. With support from Act | West, a half-day signing event will be planned to serve as the final political validation of the plan by the MoH. This event will invite high-level stakeholders and media to publicize the validation of the plan and mark the start of implementation.

Support sustainability bilateral negotiation process in Mali

In FY 2022, USAID initiated bilateral negotiations with Senegal. Lessons learned from Senegal and Cote d'Ivoire, which is planned for early FY 2023, will inform the design of the Mali process after the completion of the political validation of its sustainability plan in early FY 2023.

The bilateral negotiation process is a key step between Phases 3 and 4 of the sustainability planning process. The main goal is to increase government leadership and investment in national NTD programs, aligning with the principles of the WHO's emphasis on government ownership in the 2030 NTDs Roadmap. Through the process, USAID expects that MOHs will lead activities to achieve sustainability goals, while receiving various forms of technical and financial assistance from Act | West and other partners as needed. In FY 2022, the DGSHP in Mali has made great strides to develop the sustainability plan and technically validate it by the MOH in August FY 2022. In FY 2023, the sustainability plan will be presented to the cabinet and move to the final political validation, which will serve as a launching point to open discussions

between USAID and the MOH on the bilateral negotiation. The process will require dialogue over time to agree upon plans that reflect both USAID and Government of Mali (GOM) contributions.

In FY 2023, Act | West will continue to provide support to bilateral negotiations by further analyzing sustainability plan priorities to support USAID's and MOH/GOM decision making, sensitizing national stakeholders on the process and the expected outcomes and, most importantly, supporting the follow-up of the implementation of the decisions made during the bilateral negotiation process.

IR3 PLANNED ACTIVITIES: SCH, STH:

Schistosomiasis

Plan and justification for FY 2023:

MDA

In FY 2023, Act | West will support school-based SCH MDA for SAC in 49 HDs (670 HAs) and expanded treatment for SAC and adults in four high-risk HDs (71 HAs). These four high-risk districts are Bafoulabé HD in Kayes region, Bankass HD in Mopti region, and Macina and Niono HDs in Segou region. These HDs were selected based on cross-sectional sentinel site surveys that were conducted between 2014 and 2019 that demonstrated persistently high SCH prevalence following at least 10 rounds of MDA since 2005. As of the most recent available survey data, these districts have SCH prevalence >50%. The geographic and socioeconomic profile of these HDs may also account for high SCH prevalence. These HDs contain freshwater bodies such as dams and irrigation zones for rice production. Agricultural activities are a key livelihood of community members in these districts, which puts them at further risk of infection. Supervision

Act | West will provide technical and financial support to the MoH to conduct supervision of the Act | West-supported SCH MDA. MoH staff from the national, regional, and district levels, community health centers (CSCOMs), Act | West - Mali, and other partners' staff will provide supportive supervision during MDA. The Supervisor's coverage tool (SCT) will also be implemented for the first time in Mali to ensure effective treatment coverage.

Supervision of SCH MDA (national and regional level)

The NTDP coordinators will conduct MDA supervision in the regions of Kayes, Koulikoro, Mopti, Ségou, Sikasso, and Bamako. In collaboration with the DRS, CSREF, and CSCOM, the central level health authorities will review the drug management documents, MDA coverage rates reported by the health centers, and problems identified during the MDA. In addition to supervision at the regional level, the national NTDP coordinators will visit the HAs and villages to directly observe the MDA and offer solutions to any problems.

The regional health authorities from the DRS' will supervise the HDs during the MDA campaign. In collaboration with the MCDs and NTD focal points, they will review documents on the management of drugs received, MDA coverage results achieved by the health centers, and all problems encountered. Recommendations will be made on site, and the problems identified will be discussed during the annual review meetings. They will ensure that data gathering has been conducted and that the reporting forms are maintained properly. Act | West will support supervision in Kayes, Koulikoro, Sikasso, Segou, Mopti regions and the HD of Bamako. For the regions of Gao and Tombouctou, consultants will be hired to conduct supervision due to the distance of these regions as well as for security purposes.

Supervision of SCH MDA (HD-level)

The MCDs and NTD focal points will provide supervision in the HAs where distribution occurs. The NTD focal points from the HDs will select the HAs in need of supervision based on historical MDA data and local knowledge. Supervisors will cover approximately 70% of HAs during five days of supervision in each region. In collaboration with the MCDs, they will review the drug management documents, results obtained by the health centers, and problems identified. They will also examine documents relating to the distribution scorecards, distribution supplies, and supervision programs in the villages, and direct a physical drug inventory. Act | West will support this level of supervision in all 53 HDs targeted for MDA.

Supervision of SCH MDA (CSCOM level)

The DTCs will conduct supervision activities in villages where MDA is being held. They will observe the MCDs during distribution and will make recommendations and propose solutions to problems encountered. As part of the supervision, the DTCs will work with the MCDs to confirm their knowledge on NTDs, the drug distribution protocol, drug supply and management, and their data collection and transmission skills. The supervisors will also hold interviews with village and community leaders to assess the coverage of the target population area. They will prepare a supervision report and send it to the MCD. This report will note all areas where proper implementation practices were not followed to allow for corrective measures to be implemented.

DSA

In FY 2023, the PNLISH proposes a SCH/STH impact assessment survey in eight districts across four regions that have conducted at least five effective rounds of MDA by the end of FY 2022. The results will provide information on the impact of the previous rounds of MDA in the targeted districts and inform decisions for scaling down MDA to community-level MDA or expanding treatment to HAs where prevalence remains persistently high, based on the new WHO guidelines for SCH. The survey is planned for January 2023.

National SCH Expert Program and Data Review Meeting (29 participants)

In FY 2023, the PNLISH will organize a three-day SCH program and data review meeting which will convene national and international experts to conduct a deep dive on the epidemiological situation of SCH in each health area, discuss program data and treatment coverage, and strategies to improve treatment quality. During the workshop, participants will review the prevalence/intensity data; review treatment strategy and coverage data over time at the health area level; and identify issues affecting program progress and discuss strategies to improve program progress. This session will clarify the prevalence in each health area according to recent WHO guidelines.

Participants will include research institutes, staff from national NTD programs, Act | West, WHO, and other partners.

Soil-transmitted helminths**Plan and justification for FY 2023:**

No MDA is planned for FY 2023.

DSA

A SCH/STH impact assessment is planned in eight HDs for FY 2023 (see SCH section).