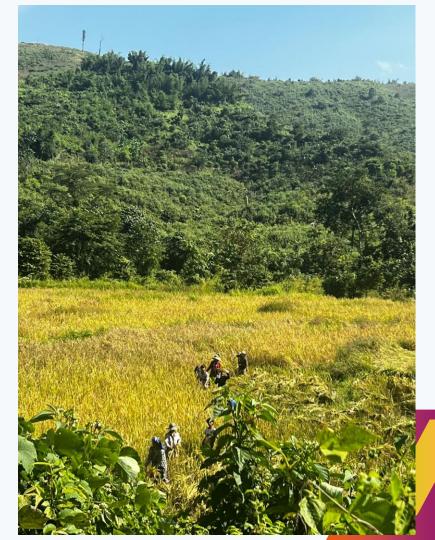
RAI4E Malaria Grant - Laos Progress Update

Excom&OC Meeting

10 June 2025



Outline



Malaria situation in Laos

Laos has made remarkable progress in malaria control over the years:

From 2014 to 2024, malaria cases have been reducing from 50,235 to approximately 343, demonstrating the impact of comprehensive prevention, diagnosis, and treatment efforts and acceleration activities.

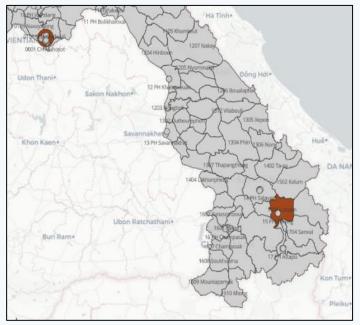
Malaria Cases 2024 Vs 2025

Jan-May	Jan-May
2024	2025
306,016	-24%
Tests	(232,345)
84	-2 %
Malaria cases	(82)
25	-88 %
Pf & Mix	(3)
59	+ 34%
Pv	(79)



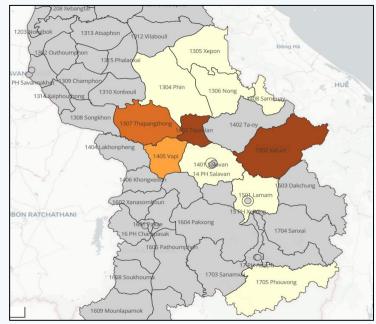
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Pf/Pv Malaria Hotspots Jan-May 2025



Pf cases

Jan-May 2025 2 districts (Mittaphap hospital in Vientiane Capital and Lamarm in Sekong)



Pv hotspots Jan-May 2025 3 districts (Thapanthong in Savannakhet, Toumlan in Salavan and Kalum in Sekong)

Key Activities Updates



Malaria Programme Review (MPR)

Desk review, completed, analysis is ongoing.

Subnational verification

Q1&Q2

SNV and self assessment is on process in five northern provinces for elimination certification preparation

Prevention of Re Establishment (POR)

SOP developed in Q4 2024, pilot POR in Oudamxai Province and Vientiane Province

Pv outbreak: Reactive Drug Administration Nalan Mountain

Mar-May increase in Pv in 4 districts, linked forest-going at Nalan Mountain



- April: RDA (no PvSeroTAT)
 - 1. Thaphangthong District RDA1 = 95% coverage
 - 2. Vapi District RDA1 = 94% coverage
- The number of villages around Nalan Mountain has reported cases during May.
- Planning to do RDA for forest goers in 7 villages in 5 districts is on process.



IMP field visits findings

Independent Monitoring Pannel field visit conducted in March 2025



Sites visited: SVK Province, Xepone District, Dongsavanh Health Centre, Lakhuem-tai village;

Key observations

- Generally, Laos is doing well in Malaria, and close to elimination.
- Given the RDT sensitivity issues, QA of RDTs should be conducted routinely through a WHO collaborating center.
- Maintaining quality-assured malaria microscopy services is a key to sustainable prevention of re-establishment (POR).
- CMPE's PCR facility should be utilized more routinely as it will become increasingly important during POR.
- Given funding constraints, support for SeroTAT should continue to come from research grants rather than from RAI4E.
- The Department of Communicable Disease Control (DCDC) should report malaria numbers to the National Assembly to raise the political profile of malaria.

Outline

01	Epidemiological trend	
02	Key activities, and IMP visits findings	
03	Outbreak responses: Reactive drug administration	
UNOPS presentation		

04 Notification to SRs regarding GF Letters - "Adjustments to RAI4E"
05 Fund disbursement
06 OPS GF Grant rating for 2024 and Key Highlights

GF Letter: "Adjustments to RAI4E"

24th April 2025

• Letter received on 24th April 2025 regarding the implementation of certain investments that will be deferred due to changes of external financing landscape for global health programs.

28th May 2025

- Further guidance from GF received on the detail activities of deferred lists for each SRs.
- PR has already informed to each SRs for the deferred lists which have to deferred/scale down till end of september.

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GF Letter: "Adjustments to RAI4E"

End of June 2025

• The GF will inform to PR/CCM for the revised country funding envelopes and illustrative grant amounts

July

• PR and SRs will work detail budget calculation based on the prioritized activities in alignment with the revised budget envelopes



Internal Timelines for grant revisions



UNOPS

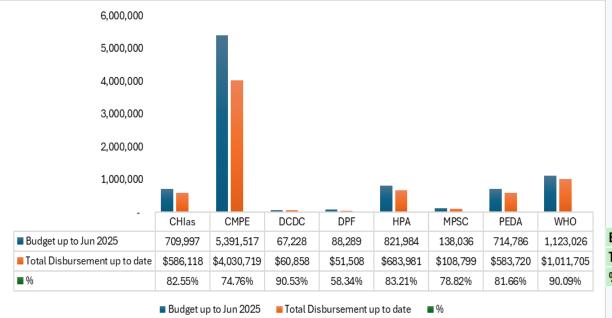
GF Letter: "Adjustments to RAI4E"

The guiding principles used for decision making on activities are highlighted here:

- To discontinue funding residential workshops for data related activities (e.g., development of guidelines, strategies, etc
- To pause surveys
- To consider less frequent supervision activities.
- To stop hotel-based workshops/meetings for any policy and strategic planning, dissemination, validation purpose.
- Focus on protecting critical planning for integration and sustainability
- Stop purchases of IT equipment
- Discontinue data audits, routine data quality assessments (RDQA)



Disbursements to SRs (2024 - June 2025)



Budget up to Jun 2025	\$9,054,864
Total Disbursement up to date	\$7,117,408
%	79 %



Preliminary Audit Findings

Summary of 2024 Audit Findings:

- External audits by BDO UK were conducted for four out of seven Sub-Recipients (SRs).
- One SR had no audit issues.
- Two SRs had a total of five finance findings.
- Two SRs had a total of two program management findings.
- One SR had one asset management finding.



GF Grant Rating for RAI grant- 2024

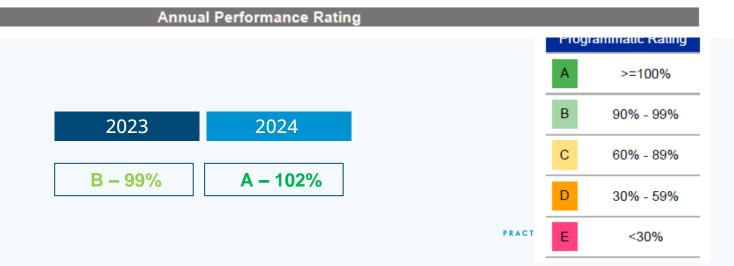
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Performance Rating Tool

Rated Period: 1 Jan 2024 to 31 Dec 2024

Grant: QSE-Z-UNOPS Country: Multicountry HIAS RAI Principal Recipient: United Nations Office for Project Services Implementation Period: 1 Jan 2024 to 31 Dec 2026



Key Highlights

- **Reprioritization based revised allocated budget from the GF** : National programme (CMPE) needs to prioritize the key essential activities, and the related health product procurement
- **Sustainability and Integration:** The sustainability of integration of malaria into the national disease surveillance system and integration of VMWs into VHVs should be executed under leadership of MoH.
- **Reduction of Pv:** The cost effective and efficient strategies should be considerd in line with epidemiology context and budget aspects
- **Cross border malaria:** Surveillance system at borders should be strengthened.









PRACTICAL SOLUTIONS