# **RAI4E Malaria Grant - Laos Progress Update**

2<sup>nd</sup> Plenary Meeting of Country Coordinating Mechanism 2 July 2025



### **Outline**

- 01 Epidemiological trend
- 02 Key activities
- Independent Monitoring Panel visit's findings
- 04 Outbreak responses

05

07

08

- Notification to SRs regarding GF Letters "Adjustments to RAI4E"
- Update of Fund disbursement to SRs
  - 2024 Audit findings and GF's Grant rating for 2024 performance
  - Key Highlights



### **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% (232,345)

84 -2 % Malaria cases (82)

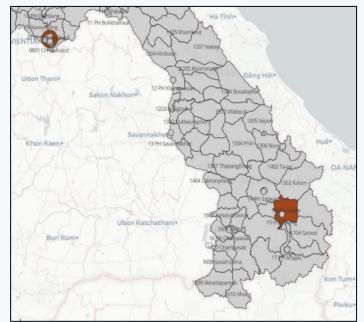
25 -88 % Pf & Mix (3)

59 + 34% Pv (79)



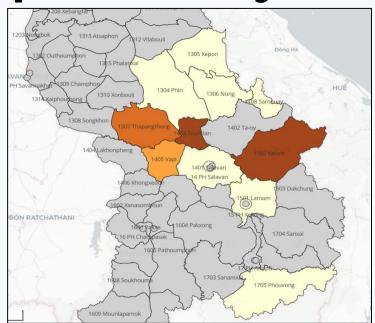


## Pf/Pv Malaria Hotspots Jan-May 2025



#### 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**

#### 2026 implementation strategies

Q2

Key implementation strategies for 2026 are discussed and prioritized according to the epidemiological context and potential budget cuts.

Forecasting and quantification of malaria commodities for 2026 have been drafted.

## **Key Activities Updates**



#### Malaria Programme Review (MPR)

**Q2** 

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. Trainings were completed.

## Py outbreak: Reactive Drug Administration (RDA) Nalan Mountain

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



3 rounds of RDA in Thaphangthong districts for targeted group in village, and 2 rounds of RDA in Vapi districts for targeted forest goers are ongoing.

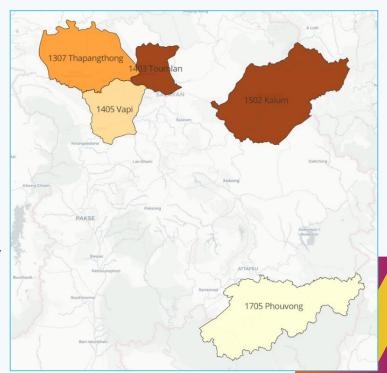
- April: RDA (no PvSeroTAT)
  - Thaphangthong District (3 villages): RDA1 = 95% coverage, RDA2= 75% coverage
  - 2. Vapi District (1 village): RDA1 = 94% coverage, RDA2= 70% coverage

# Pv outbreak: Reactive Drug Administration (RDA) Forest related cases

Effective strategies to target forest goers in the greater Mekong subregion include Intermittent Preventive Treatment for Forest Goers (IPTf).

## In June, the Pv cases increased which linked forest-going at Nalan Mountain

As a response, 7 villages under Thapangthong, Toumlan, Vapi, Kalum, Phouvong districts started RDA for forest goers in the end of June.



## 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**

#### **UNOPS** presentation

Notification to SRs regarding GF Letters - "Adjustments to RAI4E"

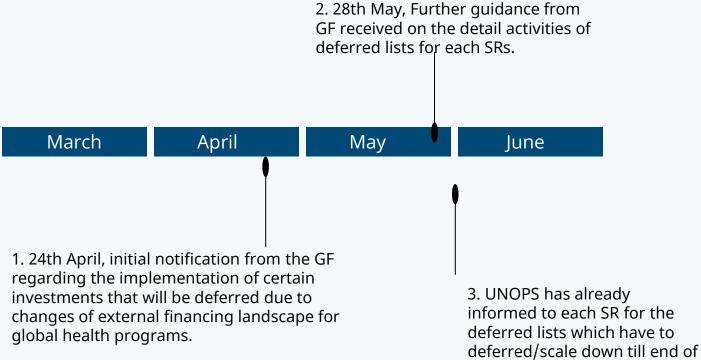
Update of Fund disbursement to SRs

07 2024 Audit findings and GF's Grant rating for 2024 performance

08 Key Highlights



# **GF Letter: "Adjustments to RAI4E" Grant revisions process**



september

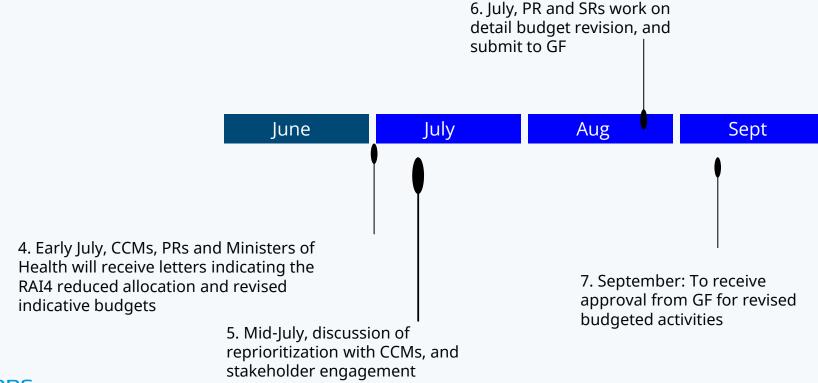
## **GF Letter: "Adjustments to RAI4E"**

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)

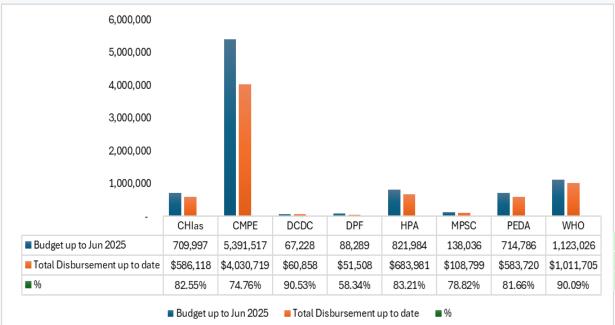


## **Grant revisions process**





## Disbursements to SRs (2024 - June 2025)



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



## **Preliminary Audit Findings**

#### **Summary of 2024 Audit Findings:**

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



## **GF Grant Rating for RAI grant-2024**



#### **Performance Rating Tool**

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

Rated Period: 1 Jan 2024 to 31 Dec 2024

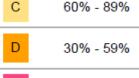
#### Annual Performance Rating

Congratulations!

2023 2024

**B - 99%** 

**A – 102%** 



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>=100%

90% - 99%

<30%

**UNOPS** 

PRACT

## **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 considered in line with epidemiology context and budget aspects
- **Cross border malaria:** Surveillance system at borders should be strengthened.



## Thank you!

