

TC Document

I. Basic Information for TC

▪ Country/Region:	REGIONAL
▪ TC Name:	Supporting the Malaria Elimination Efforts in Mesoamerica while Addressing the COVID-19 Pandemic
▪ TC Number:	RG-T3735
▪ Team Leader/Members:	Iriarte Carcamo, Emma Margarita (SCL/SPH) Team Leader; Aleman, Marco Andres (VPC/FMP); Almeida Oleas, Natalia (LEG/SGO); Arguello, Marlene Zoraida (VPC/FMP); Bermudez Plaza, Neili Carolina (SCL/SPH); Dinarte Mendoza, Mauricio Jose (SCL/SPH); Perez Calvo, Rafael Mauricio (SCL/SPH)
▪ Taxonomy:	Client Support
▪ Operation Supported by the TC:	.
▪ Date of TC Abstract authorization:	12 Jun 2020.
▪ Beneficiary:	Mexico, Belize, Guatemala, El Salvador, Honduras, Nicaragua, Costa Rica, Panama, Dominican Republic, and Colombia
▪ Executing Agency and contact name:	Panamerican Health Organization
▪ Donors providing funding:	Japan Special Fund(JSF)
▪ IDB Funding Requested:	US\$1,200,000.00
▪ Local counterpart funding, if any:	US\$240,000.00 (In-Kind)
▪ Disbursement period (which includes Execution period):	24 months (execution period included)
▪ Required start date:	July, 2020
▪ Types of consultants:	Individuals and firms
▪ Prepared by Unit:	SCL/SPH-Social Protection & Health
▪ Unit of Disbursement Responsibility:	SCL-Social Sector
▪ TC included in Country Strategy (y/n):	N/A
▪ TC included in CPD (y/n):	N/A
▪ Alignment to the Update to the Institutional Strategy 2010-2020:	Social inclusion and equality; Productivity and innovation

II. Objectives and Justification of the TC

- 2.1 2.1 On March 11, the Director-General of the World Health Organization (WHO) declared the outbreak of a novel coronavirus, COVID-19 Public Health Emergency of International Concern, as a pandemic, due to its rapid spread across the world. The virus has rapidly spread from China to 185 countries and regions. As of July 2, 2020, there are more than 2.6 Million confirmed cases of COVID-19 with over 118,000 deaths in Latin America and the Caribbean. The number of cases, deaths, and affected countries are expected to continue to rise. The potential health and economic impact of COVID-19 on the Central American territories can be devastating. Furthermore, tourism, migration, and market interconnectivity can facilitate rapid spread to and within the Region.
- 2.2 The rapid increase in the number of COVID-19 cases in the region is putting pressure on health systems, which will likely compromise their ability to provide a timely, high-quality response to the pandemic. To date, COVID-19 cases have been reported in all

Mesoamerican Countries (Mexico, Central American, Dominican Republic and Colombia). The rapidly evolving situation requires readiness and rapid response to take key measures to contain the transmission, improve detection rates, respond to the importation of cases and local transmission, increase their capacity for surveillance and update their pandemic preparedness plans. The health systems also need to maintain other essential services, including those related to vector borne diseases to prevent outbreaks of malaria, for example, overwhelming the already strained national health systems.

- 2.3 The Regional Malaria Elimination Initiative (RMEI) is a multi-donor trust fund administered by the Inter-American Development Bank (IDB). The IDB, along with the Pan American Health Organization (PAHO), the Executive Secretariat of the Council of Health Ministers of Central America and the Dominican Republic (SE-COMISCA), the Executive Director of the Mesoamerica Integration and Development Project (MP), and the Clinton Health Access Initiative (CHAI) make up the strategic committee that provides technical and operational assistance to the countries for malaria elimination. RMEI's main elements are: (i) results-based financing model using a blended financing instrument with new financing through grants and new or redirected existing IDB loans or national budgets; (ii) regional approach; (iii) improved quality; (vi) the fostering of a culture of learning; and (v) strategic and operational technical assistance focused on malaria elimination.
- 2.4 Currently, the RMEI is implementing a strategy that places special emphasis on improving the detection and early treatment of malaria cases and generating additional efforts to detect more cases in the community. The DTI-R strategy (Diagnosis, Treatment, Investigation, and Response) actions are implemented by hundreds of health workers and community actors in hundreds of foci throughout the countries. In the context of COVID-19 transmission, in malaria areas, the approach with emphasis on fever detection has a very large overlap with the detection and surveillance of COVID-19, with potential synergies for the joint approach of the two diseases, but also with serious consequences in the transmission of COVID-19 and malaria if case detection and management is not properly organized. The increase in malaria morbidity and mortality due to delay in detection of cases and the risk of COVID-19 in health workers due to the lack of access to personal protective measures and equipment are the main expected consequences in endemic areas.
- 2.5 The COVID-19 pandemic in Central American countries can significantly affect the achievements and actions of control and/or elimination programs for other priority diseases in public health. It is expected the disruption caused by the general COVID-19 pandemic in health services will increase the severity of local malaria outbreaks or more general epidemic situations that currently affect some of the countries of the Region; which constitutes a great threat to the spread of transmission between countries, increasing malaria mortality, and even a threat to the reintroduction of transmission in disease-free territories.
- 2.6 In response to the COVID-19 pandemic, PAHO/WHO has supported regional and country incident management system teams to provide direct support to Ministries of Health and other national authorities for their response to the epidemic. Guidelines are available to help countries implement strategies and policies to manage this pandemic in their territories. PAHO has also developed guidelines on COVID-19 and malaria; and together with the IDB has worked in their dissemination. RMEI organized meetings

with countries and partners from ten countries¹ to discuss the operational implications of these guidelines, and malaria priorities have been agreed upon to continue for the duration of COVID-19.

- 2.7 In order to address the COVID-19 pandemic, as well as working towards the objective of eliminating malaria by 2022, RMEI will follow PAHO/WHO guidelines which include: (1) adapt malaria diagnostic process to algorithms and triage of COVID-19; (2) simplify malaria surveillance and management operations, according to local COVID-19 situation; (3) ensure and optimize management of necessary malaria supplies and medical supplies for COVID, especially at the primary levels of attention; (4) protect health workers and personnel involved in the implementation of interventions.
- 2.8 It is in context, that PAHO/WHO, as the global authority and the leading agency to develop the guidelines to manage malaria along with COVID-19², has offered its technical support to the RMEI's members (Mexico, El Salvador, Belize, Guatemala, Honduras, Nicaragua, Costa Rica, Panama, Dominican Republic, and Colombia) and requested this technical cooperation to the Bank³.
- 2.9 **Objective.** The general objective of this Technical Cooperation (TC) is to adapt and sustain efforts to prevent, detect and treat malaria at the primary care level cases while preventing the spread of COVID-19, and ensuring the safety of service providers and the affected population. The TC will provide technical assistance and financing to beneficiary countries, at the national and local levels, for detecting, diagnosing, treating, and reporting malaria, as well as detecting and managing COVID-19 cases. Interventions proposed in this TC are closely aligned with recommendations made by PAHO/WHO for the malaria and COVID-19 strategic preparedness and response at the in-country plan level. Also, the objectives and products of the TC are complementary to those of RMEI.
- 2.10 The added value of this TC is to support health services efficiently responding to COVID-19 and malaria. The pandemic may derail all the RMEI's efforts because countries are leaving behind the public health attention from malaria and other diseases. Having this TC is a critical milestone to prevent the malaria program -an investment of US\$52 million from the Bank and US\$49 million as a counterpart from countries- from being neglected or delayed.
- 2.11 **Strategic alignment.** This TC is consistent with the Second Update to the Institutional Strategy (UIS) (AB-3190-2) as it is strategically aligned with the development challenges of: (i) Social Inclusion and Equality, by supporting the regional inter-governmental collaboration to explore regionally integrated efforts to address common health problems, especially in the most vulnerable populations; and (ii) Productivity and Innovation by increasing and maintaining the competitiveness of each participating country and at the same time, countries of the CID region. The TC will also contribute to the Corporate Results Framework (GN-2727-12) by supporting the

¹ Mexico, El Salvador, Belize, Guatemala, Honduras, Nicaragua, Costa Rica, Panama, Dominican Republic and Colombia.

² "Clinical management of COVID-19 – interim guidance", June, 2020 and "Measures to ensure the continuity of the response to malaria in the Americas during the COVID-19 pandemic", April, 2020

³ The Team Leader will ensure receiving the respective Letters of Non-Objection before the commencement of any activity of the beneficiary's countries from the liaison entity with the Bank.

strengthening of health institutions in the CID region. In addition, the TC is squarely aligned with the following priority actions set out in the Health and Nutrition Sector Framework Document (GN- 2735-7) by: (i) improving population health by supporting countries' efforts to strengthen their preparation and response capacity to address public health emergencies through fostering greater efficiency in the mobilization, pooling, and use of resources and strengthening key sector management capacities, health intelligence, and intersectoral coordination; and (ii) strengthening partnerships and promoting joint actions in supporting systems for health surveillance and control of public health events. Additionally, the TC will contribute to the strategic lines of action and goals at regional level in PAHO's Plan of Action for Malaria Elimination 2016-2020, the Strategic Plan of the Pan American Health Organization 2020-2025, and the 2019 PAHO's Disease Elimination Initiative: A Policy for an Integrated Sustainable Approach to Communicable Diseases in the Americas. Finally, this TC is aligned with Japan Special Fund (JSF) by allowing beneficiary countries to formulate and implement guidelines and protocols to tackle malaria in the context of the COVID-19 transmission, contributing to the local society and economy through the transfer of know-how and capacity building.

III. Description of activities/components and budget

- 3.1 **Component 1. Integrating malaria interventions with strategies and flows for the detection of COVID-19 cases (US\$240,973).** This component has the objective of integrating malaria interventions with strategies and flows for the detection of COVID-19 cases, in situations with simultaneous transmission of both diseases. The surveillance and case management of the two diseases must be ensured; PAHO/WHO will work directly with national authorities to adjust and integrate the strategies and monitor changes, including adjustments in the information systems. The PAHO country offices will seek to promote and guide the interaction between the national malaria program and the mechanism in charge of the COVID-19 response at the national level. This component will finance: (i) elaboration of national technical guidelines and protocols with adjustments in malaria activities in the context of the COVID-19 transmission; (ii) the adaptation of algorithms and patients' flows for the diagnosis of malaria cases and detection of COVID-19 cases, including malaria and COVID-19 community case management procedures; (iii) implementation of national guidelines toward the optimization and simplification of malaria actions [case investigation, reactive case detection, direct observed treatment, case notification and reporting], all integrated with guidelines for COVID-19 management; and (iv) production of COVID-19 and malaria situation analysis reports and scenarios at the national level. PAHO/WHO will provide counterpart funding with other consultants hired to compliment/ guide the work of the regional level consultant regarding the above topics.
- 3.2 **Component 2. Implementing activities at local levels (US\$599,027).** This component has the objective of implementing the activities at local levels in line with the guidelines and products developed in Component 1. It refers to the implementation of operational adjustments necessary to maintain malaria and COVID-19 activities in malaria endemic areas. The management of febrile cases and ensuring their prompt access to healthcare (locally) are critical for containment of both malaria and COVID-19 transmission. This component will finance: (i) the hiring of consultants in each beneficiary country who will support the implementation of protocols/guidelines developed in Component 1; (ii) training of healthcare workers and community health workers in malaria care protocols where COVID-19 transmission is occurring; (iii)

analysis of the local COVID-19 and malaria situation and micro-planning activities; (iv) support for the establishment of malaria focus management teams, trained in integrating malaria and COVID-19 interventions; (v) supervision of field operations with personal protection measures to prevent COVID-19 transmission; and (vi) active case detection and response to malaria outbreaks in hard-to-reach communities at risk of COVID-19. PAHO/WHO will provide counterpart funding with other national level consultants hired at local level.

- 3.3 **Component 3. Management of cases of malaria and COVID-19 cases at primary health care level (US\$340,000).** This component will finance: (i) procurement of personal protection equipment for primary health care providers and community health workers to prevent COVID-19 infections while conducting prevention, detection and management of cases of malaria and COVID-19 cases; and (ii) technical support to the national level in regards to assessment, selection and estimation of needs; and management of malaria supplies during the COVID-19 pandemic and its prioritization according to COVID-19 transmission' scenarios.
- 3.4 The total cost of this TC will be US\$1,440,000, of which US\$1,200,000 will be financed by the Japan Special Fund (JSF) and US\$240,000 corresponds to in-kind counterpart resources from PAHO. These in-kind contributions will cover the salaries of the PAHO personnel to provide technical assistance at regional and national levels of the 10 participating countries. The total execution and disbursement period will be 24 months for all activities including six months for evaluation.

Indicative Budget (US\$)

Component	Component and Activities	IDB/JSF Fund	Counterpart (in-kind)	Total
Component 1:	Regional Experts Consultants	176,947	180,000	356,947
	Technical missions to countries	64,026	0	64,026
Component 1. Sub-total		240,973	180,000	420,973
Component 2:	National consultants	375,000	60,000	435,000
	Supervision, travels, logistics for local teams	224,027	0	224,027
Component 2. Sub-total		599,027	60,000	659,027
Component 3:	PPE for malaria personnel	230,000	0	230,000
	Supplies and equipment for microscopy	60,000	0	60,000
	Rapid diagnostic tests	50,000	0	50,000
Component 3. Sub-total		340,000	0	340,000
Other costs	Evaluation	20,000	0	20,000
Other costs		20,000	0	20,000
TOTAL		1,200,000	240,000	1,440,000

IV. Executing agency and execution structure

- 4.1 The Pan American Health Organization (PAHO) will be the Executing Agency of the TC and is accountable for all components and project administration. PAHO is the health specialized agency for the Inter-American System and the Regional Office for the Americas of the World Health Organization, specialized health agency of the United Nations. It covers 52 countries and territories of the Americas and is physically

present in 28 countries through its network of PAHO/WHO Country and Sub regional Offices. PAHO engages in technical cooperation with its member countries to fight communicable and noncommunicable diseases and their causes, to strengthen health systems, and to respond to emergencies and disasters. PAHO is committed to ensuring that all people have access to the quality health care they need, without fear of falling in poverty. Through its work, PAHO promotes and supports the right of everyone to good health.

- 4.2 The TC will be implemented under frameworks already established between PAHO and the Member States in relation to the technical cooperation in malaria and COVID-19 response. Technical execution will be the responsibility of the PAHO's Regional Malaria Program and Team under the supervision of the Unit Chief of the Neglected, Tropical and Vector Borne Diseases Unit, Department of Communicable Diseases and Environmental Determinants of Health. Actions will be carried out in close coordination with PAHO country offices through the person in the role of International Communicable Diseases Advisor (CDE), which is the responsible for the malaria and COVID-19 response at country level. The PAHO's regional office will transfer funds to the country offices through its administrative system, which maintains channels for political and technical relations with national authorities. Technical cooperation in malaria should be integrated transversally to the agenda to support the COVID-19 response in the country level.
- 4.3 This TC will benefit from the synergies within the existing administrative structure at PAHO who leads the technical agency for health issues in the Americas; and in addition, it currently manages the following IDB funded agreement⁴ in support of the RMEI in Mesoamerica and the Dominican Republic. PAHO also coordinates its work with national, regional, and international counterparts, donors, and stakeholders towards a harmonized regional response. Also, specific arrangements concerning the TC knowledge products and intellectual property with the Executing Agency will be included in the Technical Cooperation Agreement.
- 4.4 **Procurement.** The TC will benefit from the special measures under the Policies for the Procurement of Goods and Works, and the Policies for the Selection and Contracting of Consultants financed by the IDB for the immediate public health response authorized by the Board of Executive Directors in response to the COVID-19 Pandemic Outbreak (based on paragraph 4.2, section IV of document GN-2996-13 and DE- 28/20 resolution). Based on that resolution, PAHO will acquire all goods, and will select and contract all consultants, using its own regulations, rules, process, and procedures. Due to the need of specific expertise's, PAHO has already identified all the consultants of Component 1 and 2, to guarantee the technical approach continuity. The Bank, through its FMP division, has provided no objection to PAHO's procurement mechanism and procedures as one option for regional and consolidated or aggregated procurement for COVID- 19. PAHO will use its own warehouse based in Panama, for strategic and efficient shipment and distribution according to countries' needs.
- 4.5 **Disbursements.** The Bank will disburse the project resources in advance according to the next 180 days liquidity needs of the project, as evidenced by the Executing Agency project's financial plan and its updates, its annual budget, and the corresponding annual operating plan, including the procurement plan, as appropriate.

⁴ IREM-001/2019.

To request the next disbursement, PAHO will need to justify, through an expenses statement, at least 80% of the cumulative disbursements made up to date.

- 4.6 **Monitoring and Evaluation.** PAHO and the IDB will monitor the output and outcome indicators as set out in the Results Matrix and a project evaluation report will be completed within six (6) months after project completion. IDB will monitor the execution of the activities under this TC using administrative data generated by the project execution plan, disbursement plan, technical supervision, and financial reports submitted by the executing agency to IDB. The project team will also share a progress report with the IDB Country representative, CID general manager, and FMP every six months. This progress report will be discussed and consolidated along with loan reformulation reports carried out by SPH in response to the COVID- 19 emergency. IDB country offices will also share reports with the corresponding Embassy Offices in each beneficiary country.
- 4.7 **Financial management and internal control systems.** The executing agency (EA) shall maintain internal controls to ensure that: (i) Project resources are used for agreed purposes, with particular attention to the principles of economy and efficiency; (ii) The transactions, decisions and activities of the TC are duly authorized and executed in accordance with applicable norms and regulations; and (iii) Transactions are appropriately documented and recorded in a timely manner in order to provide reliable reports⁵.
- 4.8 **Financial reports and other reports.** PAHO will maintain a separate identifiable fund code (ledger account or "Account") to which all PAHO receipts and disbursements for the purposes of this Agreement will be recorded. The ledger account shall be subject exclusively to the PAHO's internal and external audit in accordance with the PAHO/WHO's financial regulations and rules.
- 4.9 PAHO will submit a progress technical and financial report every six (6) months. Every progress report shall include a financial statement signed by an authorized official of the PAHO: "We hereby confirm to the best of our knowledge and based on the available records that the above amounts have been paid for the proper execution of the Agreement and in accordance with the terms and conditions thereof. All documentation authenticating these expenditures has been retained by PAHO/WHO in accordance with its document retention policy and will be available to PAHO/WHO's External Auditors for examination in the course of the audit of PAHO/WHO's Financial Statements."
- 4.10 PAHO/WHO will provide the Final Certified Financial Statement issued by PAHO/WHO Department of Finance, issued within four (4) months following the date of the last disbursement or the completion date of activities, whichever occurs last.
- 4.11 **Visibility of JSF.** In keeping with Annex 1 of the April 2016 Operating Guidance for the JSF, once the TC is approved, a joint press release will be issued by the Bank and Government of Japan through the Japanese Embassy of the participating Countries. The press release will include the financial contribution from the Government of Japan and provide a summary of the project objective and activities of the TC that will address COVID-19 in the participating countries.

V. Major issues

⁵ Based on OP-273-12 guidelines.

- 5.1 Given the time-sensitive nature of this COVID-19 public health emergency, it is critical that the executing agency carries out the project activities within the timeline established as conditions allow considering the still uncertainties around the pandemic and its development. IDB and PAHO will monitor execution closely and jointly for early warnings. This requires solid project planning and execution; PAHO has the experience, competences, and presence in all benefited countries. Some activities of component 2 are expected to be conducted face to face with the front-line providers and regional staff of the MOH. In the case, circumstances related to COVID-19 pandemic does not allow to face to face activities, the executing agency has an alternative plan to provide support through virtual channels. Additionally, and depending on the individual countries' dispositions, the presence of local consultants at in country level might be one way of executing some activities.
- 5.2 Due to the higher global demand of COVID-19 supplies and broken chain of production and distribution, there is a risk of important delays in availability; consequently, delaying the TC implementation. Mitigation actions include permanent monitoring of suppliers and their stocks, as well as close coordination with other procurement entities. The Strategic Fund of the PAHO is a regional technical cooperation mechanism for pooled procurement of essential medicines and strategic health supplies, supplies will be procured using this mechanism. The products purchased by PAHO through its Strategic Fund meet international standards in safety, efficacy, and quality.

VI. Exceptions to Bank policy

- 6.1 No exceptions are considered.

VII. Environmental and Social Strategy

- 7.1 According to the Environmental and Safeguards Compliance Policy (OP-703), Indigenous Peoples (OP-765), and Gender Equality (OP-270), this TC is classified as category "C". The TC will not finance infrastructure or civil works. The proposed interventions are expected to cause minimal to no negative impacts. See filters [SPF](#) and [SSF](#).

Required Annexes:

[Results Matrix_75638.pdf](#)

[Terms of Reference_49272.pdf](#)

[Procurement Plan_88015.pdf](#)