

Terms of Reference

Consultancy for the Development of Malaria Elimination Multisectoral Framework in Zanzibar

Introduction

The Swiss Tropical and Public Health Institute (Swiss TPH) has been assigned by the Gates Foundations through Population Health International (PSI) to implement a project to accelerate the elimination of local malaria transmission in Zanzibar. The MEZA project (Accelerating Malaria Elimination in Zanzibar) is a comprehensive intervention aiming to speed up the goal of zero malaria transmission in the islands. The campaign includes four separate initiatives. The first initiative, MAlaria eLImination in ZAnzibar (MALIZA - Swahili for finish it), intends to create an enabling environment for managing the elimination efforts. MALIZA is a cross cutting initiative that include integrated health and non-health sector actions at national, district and community level. The second initiative, MAnaging Pemba Elimination of MAlaria (MAPEMA – Swahili for soon), intends to achieve malaria elimination in Pemba and satellite islands in a short period of time through intensified multisectoral actions towards blocking local transmission and mitigating the importation of new cases. The third initiative, ELImination of Malaria in Unguja (ELIMU - Swahili for education), aims to achieve malaria elimination in Unguja and satellite islands in a relatively longer time period through a two-steps concerted actions to initially mitigate urban and seasonal transmission and later stopping local transmission and controlling importation of new cases. A last initiative Joint TAnzania mainland & ZAnzibar MAlaria (TAZAMA – Swahili for lookup) aims to address the source management of imported malaria cases and to contribute to bring to an end malaria re-introduction.

The Revolutionary Government of Zanzibar through the Ministry of Health in collaboration with partners are dedicated to accelerate malaria elimination agenda across the Islands. The Zanzibar Malaria Elimination Programme (ZAMEP) is mandated to technically guide all implementing actors and document results. Over the decades (since 2007), significant progress has been made culminating in the reduction and subsequent sustaining of malaria prevalence to less than one percent. This National Malaria Strategic Plan (NSP), covering the period 2024 to 2029, aims to accelerate the trajectory of malaria elimination to zero indigenous case and prevent re-introduction.

Current Malaria Epidemiological Trends

Zanzibar reached and maintained very low malaria prevalence of less than 1% for more than 15 years with zero (0) malaria prevalence for the 2022. Cases have been reduced to 813 local and 2937 imported in 2022. Since case classification started in 2019 it is noted that the local vs imported case ratio (a marker for the reproduction rate under control measures, R_c) has been less than 1 every year indicating favorable conditions for malaria elimination with declining receptivity despite high vulnerability. Nevertheless, local transmission, fueled by local receptivity and introduced cases, still is a reality. Reduction of malaria mortality to an average of <5 deaths per year in 2022 should be as well considered a success.

In the recent years 71%, 63% and 67% of cases were reported respectively in 2020, 2021 and 2022 in the three districts of most urbanized areas of Zanzibar, Mjini-Magharibi region. This fact account for special consideration in fighting urban malaria.

Unguja and Pemba islands are at a different epidemiological transmission level and showing different receptivity. Apart from the macro-malaria heterogeneity within the two islands, there is a remarkable micro-heterogeneity within the same island. These two facts need to be taken into account to realistically plan for local transmission elimination.

Achievements to attain malaria elimination so far

Zanzibar has been in the forefront of malaria control and elimination since early 2000s by introducing universal coverage of innovative initiatives such as ACT, IPTp, mRDT, ITN, IRS and Surveillance and Response System. Some interventions have been scaled down (e.g. IRS) from universal to targeted and, ultimately, to focal implementation. Others (IPTp) have been dropped in 2017 due to the evidence of extremely low level of infection among pregnant women.

A robust malaria surveillance system has been established through the Malaria Epidemic Early Detection System (MEEDS since 2008) and the Malaria Case Notification System (MCN since 2012). Attempts to link malaria surveillance with foci identification and coordinated MCM and IMVC response are ongoing.

Multi-Sectoral and Collaborative Efforts

The fight against malaria needs a multi-sectoral joint efforts and commitments from different stakeholders such as; Sectoral Ministries, Zanzibar Malaria Elimination Council, Academia / Research Institutions, Implementing and Developments Partners as well as from Private Sector. In order to accomplish all these, there is a need of having an official joint document to guide implementation of the Multi-Sectoral Collaboration.

Rationale

ZAMEP under the MoH is responsible for malaria elimination interventions in the country. There are a number of sectors other than health that impact on malaria sustainability for example through activities that encourage the breeding of mosquitoes (agriculture and road construction) or importation of cases for instance, movement of high risk population increases the risk of imported cases if no deliberate control measures are taken. Ministry of Agriculture, Irrigation, Natural Resources and Livestock is involved in rice fields and



other agricultural programs that encourage mosquito breeding. On the other hand, the livestock keepers use significant number of pesticides that may contribute to insecticide resistance such as pyrethroid commonly used in LLINs. Ministry of Infrastructure, Communications and Transport is responsible for ports (sea and the airports) link to influx of travelers from different countries. The port and airport authorities are the gatekeepers of potential malaria carriers from endemic areas; the mainland Tanzania in particular and from neighboring countries.

The Public Sector Partners include the sector Ministries (Health, PO-RALG and Special Department, Education, Environment, Defense) and Government Institutions including Parastatals. The Ministry of Education, for instance, links with families through the students. The current malaria school health clubs involving primary school pupils and teachers need to be strengthened and sustained. There is a need to see whether education curriculum includes malaria issues that would reinforce students' behavior change because the students should be trained as agents of change in their families towards better health supporting behavior.

Nevertheless, Zanzibar has no clear framework that can guide all responsible sectors in supporting malaria programme efforts. For better coordination and support, ZAMEP is determined to strengthen its coordination and collaboration with all stakeholders in efforts to control and pre-eliminate the disease. To the heart of this, it is important for ZAMEP to map out and identify sectors and collaborators that are key in implementing malaria control in line with the national strategic plan. It is important to look into current practices and plans and identify which areas / activities need to be supported from other sectors, identify the key sectors and their responsibilities towards achieving elimination goal.

Accordingly, the Swiss TPH through ZAMEP is planning to engage a national consultant in developing the framework for multi sectoral collaboration to guide implementation and enhance engagement of various sectors towards malaria elimination

Roles and Responsibilities of the Consultant

Through desk review, a workshop and consultations with Malaria stakeholders, the consultant will help ZAMEP to:

- Synthesize national priority areas and activities (National Strategic Plan V 2024 - 2029, available guidelines, Annual reports, Annual workplans etc). *Activity partly done by ZAMEP and MEZA team.
- Identify and Review different regional and global guidance on Multisectoral collaboration framework for Malaria to identify best practices relevant to Zanzibar
- Synthesize information on important factors influencing Malaria transmission, services, prevention and control.
- Facilitate mapping of sectors and stakeholders that influence actions that need to be taken in accordance with the national strategic plan
- Facilitate identification of roles and responsibilities for various stakeholders in implementing and/or supporting malaria activities per thematic areas.
- Facilitate a first consultative workshop for malaria multisectoral initiative stakeholders including final documentation
- Develop a multisectoral collaboration framework with validation from stakeholders
- Draft the road map to develop a multisectoral action plan for malaria control and elimination.

The process of developing the multisectoral framework will involve a 4-day workshop with key malaria stakeholders to be identified by ZAMEP. The workshop will aim at synthesizing information to inform the framework as well as working with the consultant in drafting the multisectoral framework. Follow on meetings may be needed for finalization and/or validation of the framework. It is estimated that this assignment will take 22 days of work.

Expected Deliverables and timeline

No	Expected deliverable	Timeline
1	A brief inception report summarizing approach and activities, types of documents to be reviewed, and expected deliverables	13 th April 2025
2	PowerPoint slides summarizing information from document review (Malaria thematic areas, actions and potential actors, key considerations for a multi-sectoral collaboration framework, etc): To be presented at the stakeholders' workshop	17 th April 2025
3	Materials and templates for the stakeholders workshop (Agenda, presentation and group work templates, discussion guiding questions, information gathering templates)	16 th April 2025
4	Facilitated 5-day workshop with stakeholders (May 16-20)	16 th - 20 th April 2025
5	Document meeting procedures	31 st April 2025
6	Documenting consultative process for identification of multisectoral actors	7 th May 2025
7	1 st Draft multisectoral framework (for circulation)	14 th May 2025
8	2 nd draft multisectoral framework including stakeholders comments (both in hard and soft copy)	24 th May 2025
9	Road map towards the development of a multisectoral action plan for malaria control and elimination	30 th May 2025

Level of efforts

	# of Days
Pre workshop activities	3

Stakeholders Workshop facilitation	5
Workshop report	1
Stakeholder consultations	5
1 st draft framework	4
2 nd draft framework	2
Roadmap for development and ratification of multisectoral action plan	2
Total	22

Deliverables

1. Workshop agenda, facilitation guide and list of references
2. Workshop report and recommendations
3. Consolidate mapping of multisectoral actors and consultative process outcomes.
*Mapping partly done by the ZAMEP and MEZA team.
4. Roadmap for development and ratification of a multisectoral action plan
5. Revision of multisectoral guideline (update the existing multisectoral guideline)
6. Advocacy meeting with stakeholders to introduce initiative and select focal person
7. Finalise MS framework based on the input from the identified sectors (workshop)
8. Develop malaria elimination multisectoral framework document
9. Support in setting up malaria elimination multisectoral secretariat
10. Support the design of MALARIA SMART INITIATIVES for each sector (workshops)
– legislation of malaria smart initiatives protocol

Qualifications and Competencies of a consultant

- Postgraduate degree in public health, medical, nursing and/or other health related academic qualification. A PhD in a relevant field will be an added advantage
- Minimum of 10 years working experience in the Tanzania and /or Zanzibar health sector, with at least 5 years' experience in Malaria programming.
- Demonstrated experience in program management including stakeholders engagement
- Previous experience in developing and/or operationalizing national health strategic documents
- Demonstrated familiarity and experience in working with the Zanzibar MoH, ZAMEP, DHMTs and development partners
- Demonstrated ability to execute consultancy assignments and deliver in time.

Swiss TPH



Swiss Tropical and Public Health Institute

- Good organizational skills, including time management and ability to work with teams.
- Strong analytical, strategic thinking and planning skills and ability to work under tight deadlines
- Skills in facilitating consultative meetings and workshops
- Good written and oral communication skills