



VIETNAM | JANUARY 2020 - DECEMBER 2021

GEMS+ MALARIA SURVEILLANCE BULLETIN



57,847
Suspected cases Tested



311
Confirmed positive cases

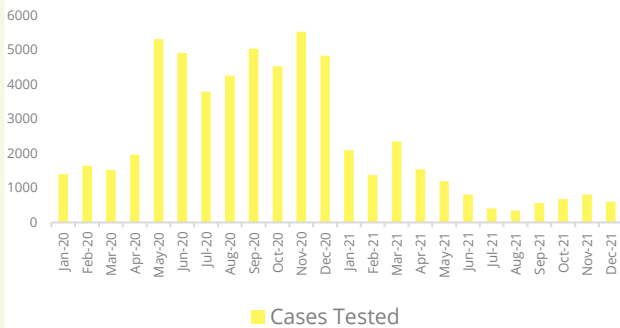


0.54%
Average positivity rate

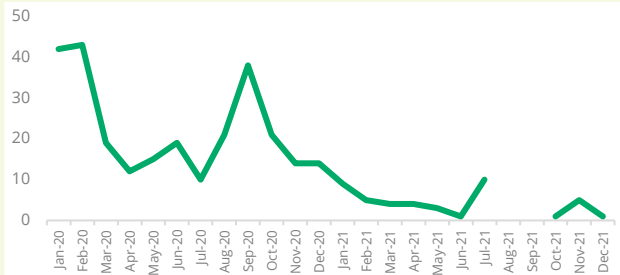


237*
270
Private outlets enrolled in GEMS+
Outlets transitioned to NMP

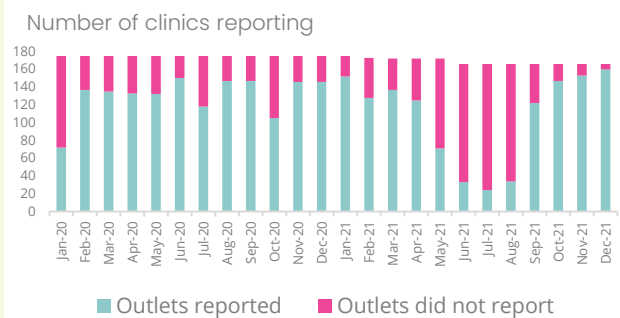
Suspected Cases Tested



Confirmed Positive Cases



Reporting



69%
Average reporting rate

Quality of Case Management



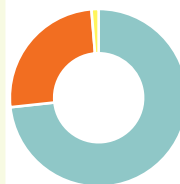
99%
Suspected cases received blood tests



90%
Cases treated or referred according to guidelines

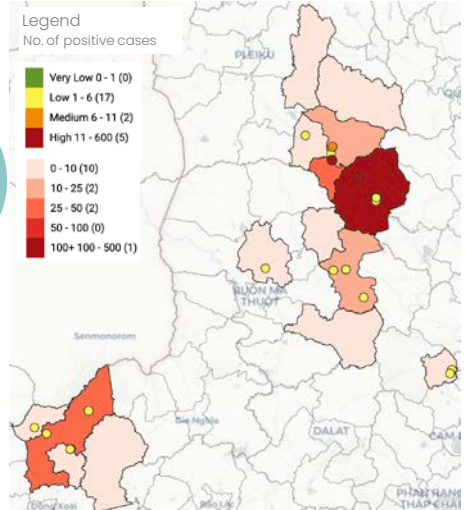
Characteristics & Distribution of Confirmed Positive Cases

Positive cases by Plasmodium species



■ P.f. (73.3%)
■ P.v. (25.4%)
■ Mixed (1.3%)

Positive cases detected by outlets

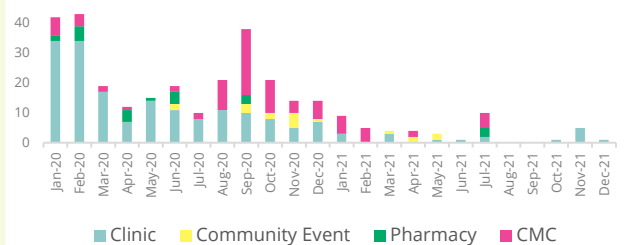


Client's location 14 days prior to fever among confirmed positive cases (n=257)



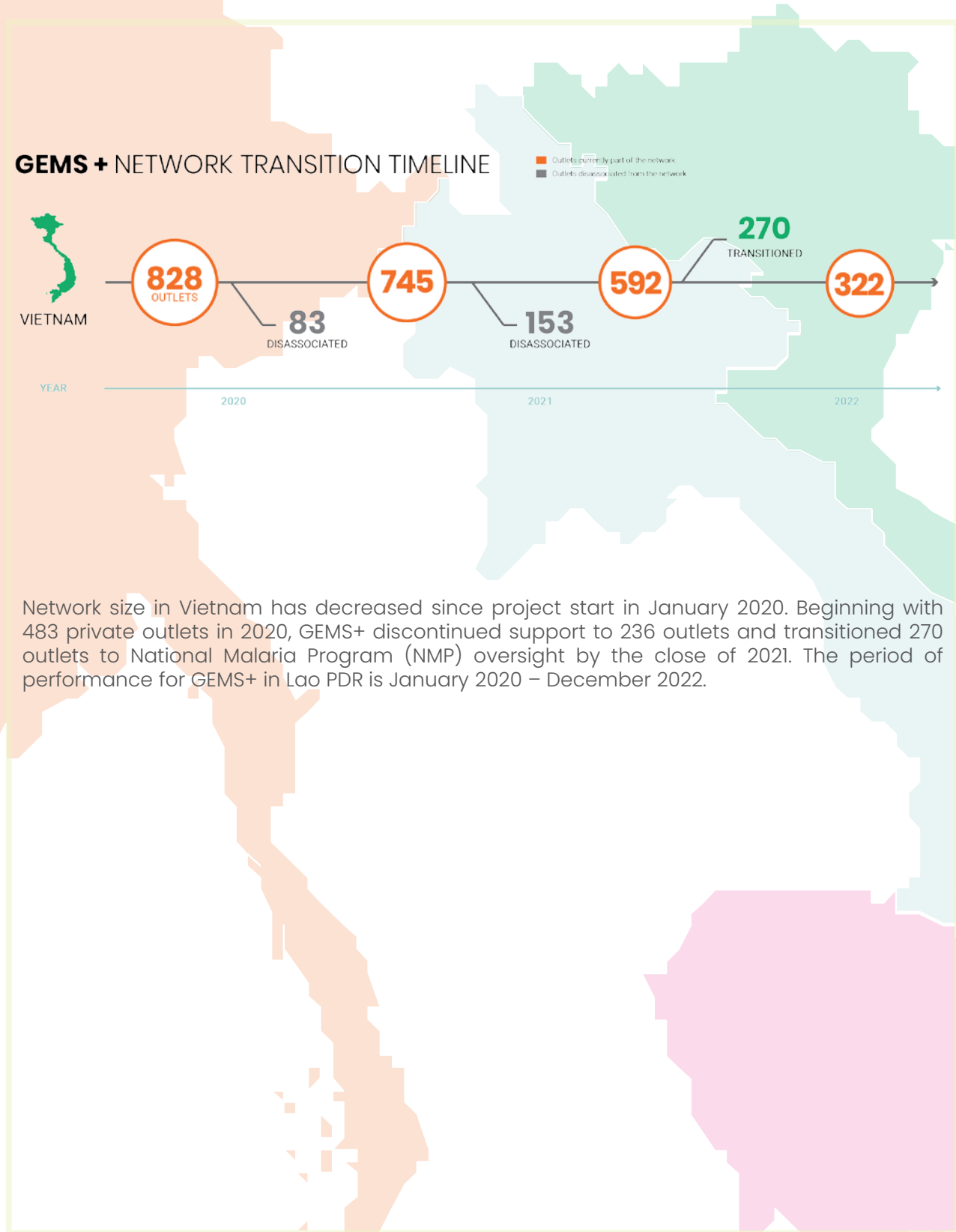
■ Forest (63%)
■ Plantation or Farm (23%)
■ Village of Residence (14%)

Positive cases detected by channel



*The GEMS+ network in Vietnam also includes 85 Community Malaria Champions (CMCs).

GEMS+ NETWORK TRANSITION TIMELINE



Network size in Vietnam has decreased since project start in January 2020. Beginning with 483 private outlets in 2020, GEMS+ discontinued support to 236 outlets and transitioned 270 outlets to National Malaria Program (NMP) oversight by the close of 2021. The period of performance for GEMS+ in Lao PDR is January 2020 – December 2022.



GREATER MEKONG SUB-REGION ELIMINATION OF MALARIA (GEMS) COUNTRY FACTSHEET: VIETNAM 2016 – 2019



PRIVATE SECTOR COVERAGE

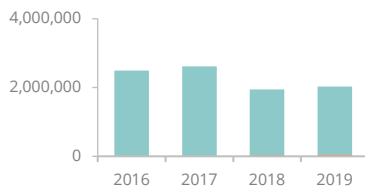


- Private clinics are authorized to provide testing and treatment (n=227).
- Pharmacies (n=476), community malaria champions (n=63) and fast-moving consumer goods outlets (FMCGs, n=45) are trained and supported by PSI to provide RDT service and refer positive cases. Binh Phuoc collaborated with PSI to pilot 10 pharmacies in Bu Gia Map for ACT provision. Testing, referral service and SBC activities are also available on 13 highly targeted worksites.
- Additional active case detection through community screening events are conducted in targeted areas including worksites and communities located near forests.

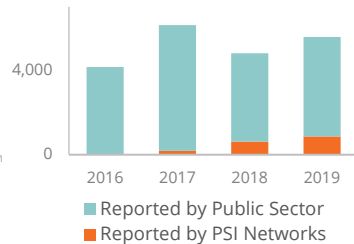
	2016	2017	2018	2019
No. private outlets supported	0	632	618	828
No. suspected cases tested	0	3,771	18,152	28,422
No. confirmed positive cases	0	188	626	877

CASE SURVEILLANCE

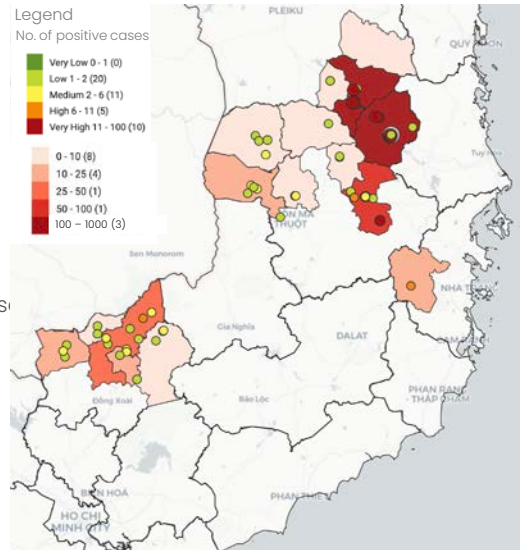
National testing data by sector



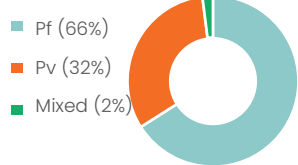
National confirmed case data by sector



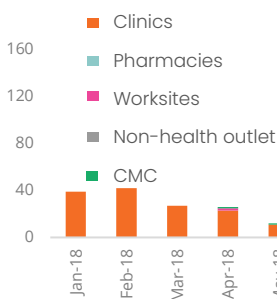
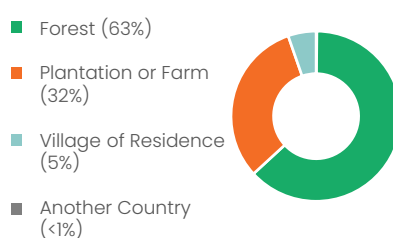
Confirmed cases reported by PSI networks (2019)



Positive cases by Plasmodium species (2019)



Client's location 14 days prior to fever among confirmed positive cases



Confirmed cases reported by GEMS+ PPM network, by month

SUPPLY CHAIN & CASE MANAGEMENT

- PSI has negotiated access to RDTs through national Global Fund supply chain; PSI also procures a supply of RDTs and first-line treatment for direct distribution to private outlets due to unreliable access.
- Clinics are authorized to provide malaria treatment; pharmacies, community malaria champions and fast-moving consumer goods/non-health outlets test and refer cases for treatment.
- 30% of positive cases were referred for treatment since community malaria champions (CMCs)/Pharmacies are not allowed to provide treatment. Some referrals are due to the nature of the case (severe cases, children under 3 years old, pregnant women and those treated for malaria 14 days prior); traditional medicine and external clinics also tend to refer positive cases.



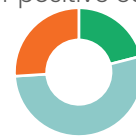
70%

Percentage of cases Treated according to guidelines (2019)



72%

Outlets with non-expired RDT & ACT in stock at time of visit (2019)



INQIS quality of care score (clinics, 2019)

■ Class A (21%)
■ Class B (53%)
■ Class C (26%)

Mystery Client Survey Results (2019)

- 72% of providers offered a malaria RDT, out of which 65% offered an unprompted test.
- Nearly all clients received a correct diagnosis except for one client who was diagnosed as positive for malaria at a private clinic and one doctor who did not tell the client the result of the test.

PRIVATE SECTOR REPORTING AND INTEGRATION WITH NATIONAL SURVEILLANCE



76%

Reporting rate (2019)

- Providers report case data to PSI monthly by sending a picture of reporting logbook form via Zalo chat app.
- PSI compiles reports into National Institute of Malariology, Parasitology and Entomology (NIMPE) format and submits to provinces, including line listing of positive cases.
- Private sector case detection was integrated to national reporting system for Dak Lak and Binh Phuoc provinces.
- The status of NIMPE's new malaria information system (MIS) is unclear; PSI has no access to the MIS to confirm integration of data and check data quality. There are concerns about duplicate reporting of positive cases detected by pharmacies, CMCs, and FMCGs who refer cases to nearby public health centers.
- Challenges in routine reporting among non-health outlets targeted for improvement

ELIMINATION PROTOCOLS



50%

Cases notified within 24 hours (2019)

- By the end of 2019, 53 clinics in 4 provinces have been trained on case notification protocols and submit a photo of a shortened Case Notification form to district and PSI within 48 hours via Zalo app. In 2019, 53 providers notified the government of 651 cases by phone/SMS/Zalo.
- PSI supported Dak Lak CDC to conduct 7 investigation sessions for cases found by private sector.

EVIDENCE, ADVOCACY & OTHER INITIATIVES

- Binh Phuoc province has requested PSI to support community-based foci-by-foci clearance approach.
- Ethnographic research was conducted in Binh Phuoc with the institute of Tropical Medicine (ITM), which generated robust qualitative data to inform an Empathy-Insights-Prototyping co-design process with communities in Phuoc Long in 2019.
- PSI Vietnam has designed and executed the Zero Malaria (Sot Ret) SBC campaign to support NIMPE, targeting forest goers and communities in high risk areas.
- Provider motivation survey has been documented and shared with NIMPE and sub-national partners.
- During 2019, PSI Vietnam participated in a series of workshops held by MOH/NIMPE to provide inputs for the new period of malaria national strategy 2020-2025 advocating for strengthening the role of private health facilities in malaria elimination.
- Sub-national cross border collaboration is underway in Binh Phuoc, where province has requested PSI to assess 14 border police posts for cross-border intervention, and in Dak Lak where the MOH has asked PSI to partner in their work with army medical unit along borders.

COMPLEMENTARY MALARIA PROGRAM FUNDING

- Global Fund RAI2E (2018-2020): Complementary funding supports expansion of the private sector network and community malaria champions in Gia Lai, Dak Lak and Binh Phuoc provinces, as well as RDT and hammock net distribution to forest-goers.