

Strengthening Malaria Control



Project full name:
NETCELL Strengthening
malaria control

Domain:
Health

Phase V:
2013 - 2019

SDC contribution:
CHF 6'253'000

Total phase budget:
USD 200 million

Implementing partner:
Swiss Tropical and Public
Health Institute (Swiss
TPH)

Main Partners:

- Ministry of Health,
Community
Development, Gender,
Elderly and Children
(MoHCDGEC)
- President's Office –
Regional Administration
and Local Government
(PO-RALG)

Other Partners:

- DfID
- USAID
- World Bank
- Global Fund to Fight
AIDS, Tuberculosis and
Malaria (GFATM)
- Mennonite Economic
Development
Associates (MEDA)

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Project Overview

Malaria is a major cause of illness and death in Tanzania, with an estimated 90% of the population at risk. An array of intense control efforts such as preventive treatment for pregnant women, use of Insecticide Treated Nets (ITNs) and improved Case Management have been engaged since 2000.

Switzerland has provided technical assistance to the National Malaria Control Program (NMCP) of the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) through the NETCELL project since 2002.

NETCELL has played a key role in strengthening the capacity of NMCP to plan, coordinate and implement efficacious malaria prevention and control interventions. The NETCELL team has supported the NMCP in management and implementation of interventions on both vector control (prevention) and case management. The overall goal of case management is to ensure universal access to appropriate, quality and timely diagnosis and treatment of malaria.

The project mobilises resources from several external malaria control partners and manages an annual budget of USD 100 million (up from USD 1 million in 2001). It has one of the best track records in Africa. Continued support will be needed in the coming years in order to sustain the gains and further decrease malaria prevalence.

Phase five of NETCELL will focus on capacity building of local staff and progressively handing over the overall management of the project to MoHCDGEC. After 12 years of support, Switzerland expects the MoHCDGEC to take over and fully integrate coordination of malaria interventions into its own structures. In this regard, the NETCELL project is giving particular attention to strengthening human

and administrative capacity of the NMCP. During this phase, Switzerland expects to contribute to the following outcomes:

- Effective functioning of the ITN Cell and the Case Management Unit, and harmonization of all active donors in an aligned way.
- Enhanced ownership of the MoHCDGEC for the ITN and case management components, and strengthened human and administrative capacity of NMCP.
- The Tanzanian experience on process and impact of the past and upcoming activities within NATNETS (National Insecticide Treated Nets programme) and the case management component are presented in the relevant forums nationally and internationally.

Overall Goal

To contribute to a reduction in illness and deaths caused by malaria especially for vulnerable groups (pregnant women and children under-five) by strengthening and supporting the NMCP, more specifically the ITN and case management units.

KEY ACHIEVEMENTS

The Tanzania NMCP with technical support from NETCELL has been very successful in developing and implementing a range of strategies to distribute ITNs to ensure all Tanzanians have access to a net.

The NETCELL project has led to the decline in malaria prevalence among children under-five and the number of malaria cases in Tanzania is decreasing from an estimated 16 million in 2000 to 7.7 million in 2015.

An estimated 60,000 child deaths are averted each year in Tanzania as a direct result of increased access to ITNs and improved treatment.

With support from NETCELL, the Tanzania malaria programme is also leading the trail globally for malaria surveillance.

Ten years since the beginning of NETCELL, NMCP staffing level has seen a tenfold increase to over 40 people.

Beneficiaries

The project will benefit Tanzanians suffering from the burden of malaria disease, particularly those in rural areas and those in the highest risk groups (pregnant women and children).