**Remote mentoring to ensure continuity of malaria service delivery during the COVID-19 pandemic in Zimbabwe, Cote d’Ivoire, and Cameroon**

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After the COVID-19 pandemic emerged in March 2020, global health experts warned that significant disruptions to malaria programs could lead to a doubling of malaria deaths in 2020, with a major spike overwhelming fragile health systems. To ensure the continuity and safety of malaria service delivery during the pandemic and associated lockdowns, Zimbabwe, Cote d’Ivoire (CI), and Cameroon transitioned from in-person, facility-based mentorship for health care providers to phone-based e-mentorship. Working with the 3 National Malaria Control Programs, an e-mentoring package was developed and provided to mentors including technical guidance on malaria service delivery during COVID-19, a sample call guide, and a call tracker. Mentorship calls focused on continuity of malaria service delivery and applying WHO and PMI COVID-related guidance on triaging of patients and infection control measures. From April to June, Zimbabwe reached 134 providers in 24 of 25 health facilities that previously received in-person mentorship. CI reached 41 providers in 33 facilities, where mentors already worked with staff in-person. Cameroon reached 179 providers in 116 lower performing facilities. In Zimbabwe, e-mentorship identified malaria commodity shortfalls and over-stocking, and facilitated re-distribution. Mentors advocated successfully for provision of PPE. E-mentorship identified a facility that had incorrectly stopped providing routine services; mentors were able to clarify COVID-related guidance from central authorities and assist in re-establishing routine services. In CI, the most frequently discussed topics were malaria commodities and case management. In Cameroon, frequent stockouts reported were better understood, and national stakeholders contacted for better solutions, including redeployment of medicines and commodities from overstocked sites to stocked-out areas. All 3 countries demonstrated that e-mentorship successfully offers health care providers support and guidance to deliver quality malaria services during a crisis. Lessons learned can be applied in the context of natural disasters, political instability, and other potential disruptions to malaria programs.