

Evaluation of the Impact of Malaria Interventions in Sub-Saharan Africa

President's Malaria Initiative
M&E Team

Roll Back Malaria (RBM) Partnership Objectives

- **Reduce global malaria cases from 2000 levels by 50% in 2010**
- **Reduce global malaria deaths from 2000 levels by 50% in 2010**

President's Malaria Initiative (PMI)

- **Announced June 2005**
- **Part of global effort to combat malaria under RBM Partnership**
- **\$1.2 billion commitment to fight malaria in sub-Saharan Africa**
- **15 countries chosen for first five years of interventions**

PMI Countries

Round 1	Round 2	Round 3
FY 2006	FY 2007	FY 2008
Angola	Round 1 countries	Round 1 and 2 countries
Tanzania	Malawi	Benin
Uganda	Mozambique	Ethiopia (Oromia)
	Rwanda	Ghana
	Senegal	Kenya
		Liberia
		Madagascar
		Mali
		Zambia



FINAL REPORT

Global Fund Five-Year Evaluation: Study Area 3 The Impact of Collective Efforts on the Reduction of the Disease Burden of AIDS, Tuberculosis, and Malaria

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Submitted to:

The Global Fund to Fight AIDS, Tuberculosis, and Malaria
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Interventions

- **Focus on children <5 years old, pregnant women**
- **Scale up four key interventions to 85%**
 - **Insecticide-treated bednets**
 - **Indoor residual spraying**
 - **Intermittent preventive treatment for pregnant women**
 - **Prompt, effective case management with artemisinin-based combination therapy**

PMI Objective:

Reduce malaria-related deaths in children <5 years old by 50% in 15 PMI countries by 2010

PMI Objective:

Reduce malaria-related deaths in children <5 years old by 50% in 15 PMI countries by 2010

Impact Evaluation Objective:

Determine reduction in mortality children <5 year old in 15 PMI countries—

Was 50% target reached?

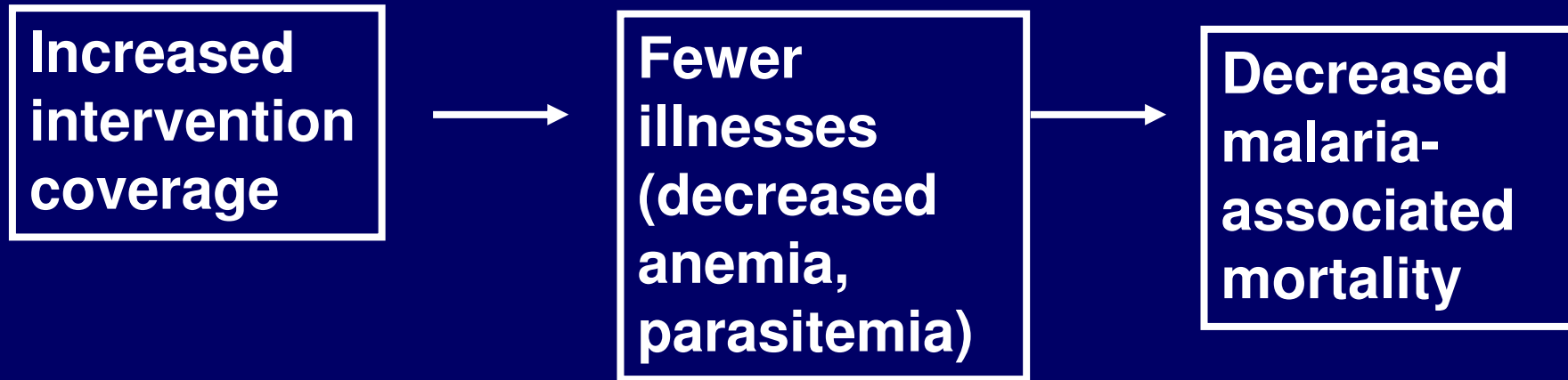
Challenges to Measuring Impact

- **No reliable way to directly measure malaria mortality in most of Africa**
 - Low coverage of vital registration systems
 - Cause of death data often has unknown validity
- **As a proxy, analyze changes in all-cause under 5 mortality**
 - Determine whether changes could be caused by malaria interventions
 - Account for possible confounders (e.g., increased immunization coverage, excessive rainfall)

Outline of Methodology

1. Measure all-cause mortality in children <5 → *Did it decrease?*
2. Measure intervention coverage → *Was it increased enough to expect a mortality reduction?*
3. Measure morbidity (anemia, parasitemia), transmission → *Did they decrease?*
4. Measure and describe trends in possible confounders → *Can anything else (e.g., rainfall) account for mortality reduction?*
5. Conclusion: If all-cause mortality in children <5 years old decreased and intervention coverage adequately increased and no other explanations for mortality decrease, then **conclude that it is plausible** that interventions caused mortality decrease

Methodology



Other possible explanations (e.g., rainfall, immunizations)

Conclusion: malaria control efforts reduced malaria-associated mortality

In-Country Plan

- **Present plan for impact evaluation to NMCP, other stakeholders**
- **Work with NMCP, in-country USG team, and key stakeholders to identify and compile data**
- **Ensure that planned surveys are completed on time**
- **Prepare outline and annotated evaluation**

Thank you!
Questions?