



FINAL EVALUATION OF THE COMIC RELIEF GSK



**'FIGHTING MALARIA,
IMPROVING HEALTH'
PARTNERSHIP**

BACKGROUND

There were **214 million cases** of malaria detected with about **438,000 deaths worldwide in 2015.**

From 2016 to 2021



and



formed a five year £22million partnership to fight malaria and strengthen health systems in some of the countries most affected by the disease.



The core focus of the Partnership was to improve malaria control through health systems strengthening

Improved awareness of malaria and the work of the Partnership

Demand for and access to Primary Health Care

4

3

Better surveillance and Information Systems

2

1

Supply of Good Quality Primary Health Care

FOUR KEY PILLARS

The Partnership awarded grants to 25 organisations on the frontline



4

Malaria endemic country in sub-Saharan Africa

3

Across the **Greater Mekong Sub-region** (GMS)

THE EVALUATION ASSESSED

Relevance and coherence

Effectiveness

Sustainability and Resilience

Grant management and partnership approach

Intended Outcomes

Improve diagnostic services

Increase the number of health care providers with greater capacity to prevent, diagnose or treat malaria

Improve quality of referral and treatment services

Increase the number of people who access improved treatment and diagnostic services

TOP 5

Achievements of the partnership

➤ **1** Improved capacity of health workers in the five geographies



4,046

Community health workers (incl. volunteers) trained



3,385

Private sector health care providers trained



2,798

Primary level government health staff trained

➤ **2** Increased awareness and knowledge of malaria due to **SBCC strategies** implemented in all the countries.

By 2021

>1.4 million

People with increased knowledge of malaria prevention, diagnosis and /or treatment

➤ **3** Private informal sector was strengthened and integrated better into the formal health system.

Private community providers in Cambodia; private outlet providers in Myanmar; accredited drug dispensing outlets (ADDOS) and autonomous laboratories in Tanzania; and licensed chemical sellers in Ghana were strengthened.

➤ **4** The Partnership showed some evidence of broader health systems strengthening.

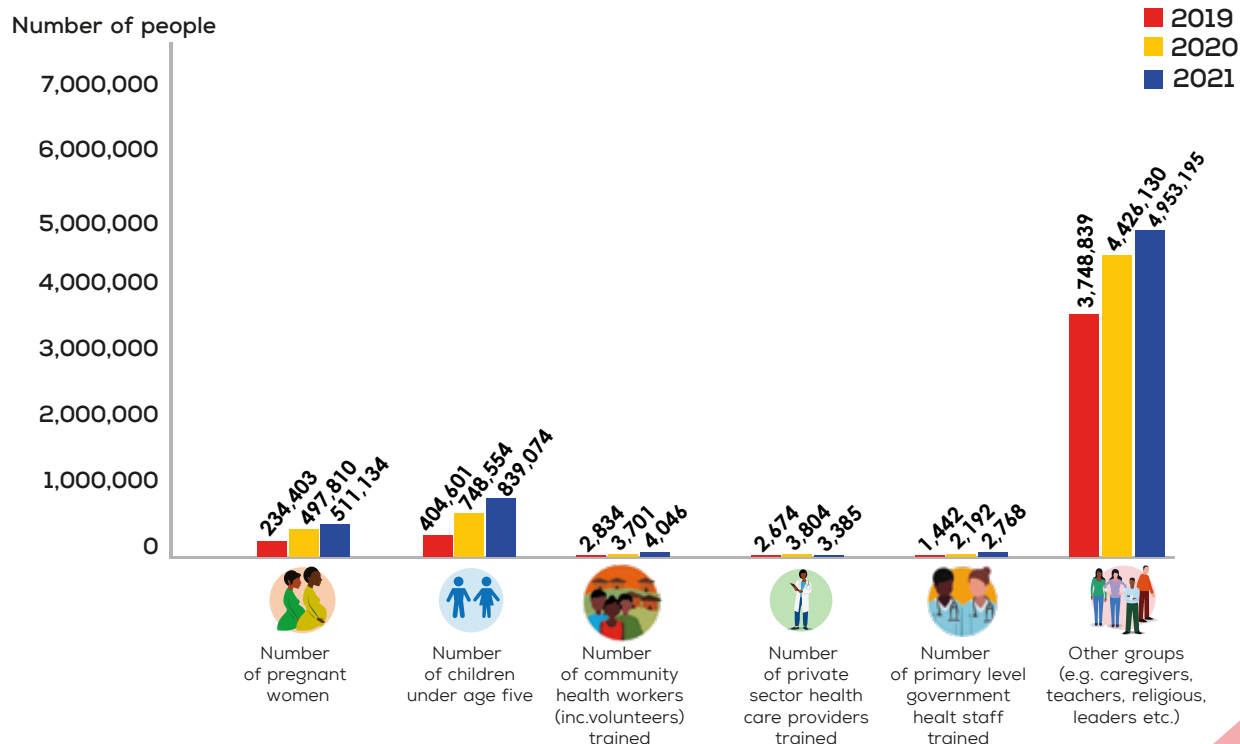
Capacity built in the treatment of Tuberculosis, HIV, Leprosy, Diarrhoea, and infectious diseases.

➤ **5** The communications strategy supported communities affected by malaria in telling their own stories and sharing their own experiences.

70 case studies, over 500 pieces of media coverage, 4,500,452 readers and viewers reached



>6 MILLION PEOPLE BENEFITTED.¹



The non-prescriptive approach in grant making enhanced relevance at the country levels.

The scoping exercise carried out at the start of the partnership ensured that the programme was well aligned with global and national priorities and local realities.

By 2021

>2.6 million

People applying their malaria prevention, diagnosis or treatment knowledge / demonstrating health seeking behaviour

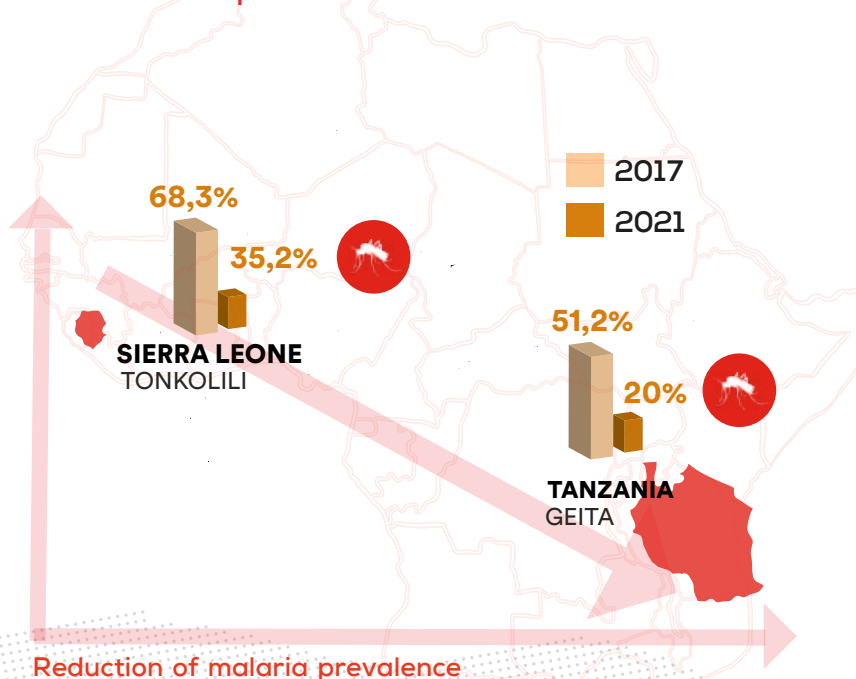
>1.6 million

People accessed improved diagnostic services in Tanzania, Sierra Leone, Ghana and GMS due to the Partnership's interventions

≈1.0 million

People accessed improved quality of treatment services

The programme contributed to reduction in malaria prevalence in intervention areas.²





DRIVERS OF CHANGE

Integrated approaches involving other sectors beyond malaria were the most effective

Flexibility of projects enabled responsiveness to emerging and context-specific problems, especially during the COVID-19 pandemic.

Extensive collaboration with government stakeholders at national, regional and provincial levels enabled transformation.

Projects which were already embedded in the contexts (and had a history of collaboration with the national malaria programme) before the partnership achieved stronger outcomes.

The Partnership Advisory Group provided oversight, guidance and direction to the programme; and was a dynamic force of the Partnership.



KEY LEARNINGS AND REFLECTIONS

WHAT WORKED WELL

Scoping exercise carried out by an academic institution provided a strong foundation for success

The partnership was properly structured based on evidence and avoided many pitfalls as a results.

The flexibility of Comic Relief's grant management created space for the funded projects to provide innovative solutions to emerging problems during implementation

WHAT COULD HAVE BEEN DONE BETTER ?

Systematic exit strategies and transition plans could have been developed by funded projects at the start of the programme

The purpose, structure and potential benefits of the collective learning component should have been clearly defined and introduced to the funded partners at the time of the Request for Proposals

Non-prescriptive approach could have been balanced with insistence on more rigour in choice of individual project indicators

CONCLUSION

The 'Fighting Malaria, Improving Health' Partnership is an example of a successful Global Health Collaboration.

- It had a model of strong collaboration with governments including the National Malaria Control Programmes
- Embedded a number of its initiatives within existing structures in health systems.
- Community level approaches enabled good outcomes due to amplification of community voices and empowerment of communities. All these created potentials for sustainability.

1. Numbers have been rounded up to the nearest figures where appropriate
 2. The Partnership played a contributory role in the reduction of malaria prevalence in Tonkolili and Geita - other government and partner initiatives were in the intervention areas.