Highlights of the year 2016-17





Where saving lives and good science go hand in hand

"Year on year we are building on past achievements and experience as we continue to explore new ways to fulfil our mission."

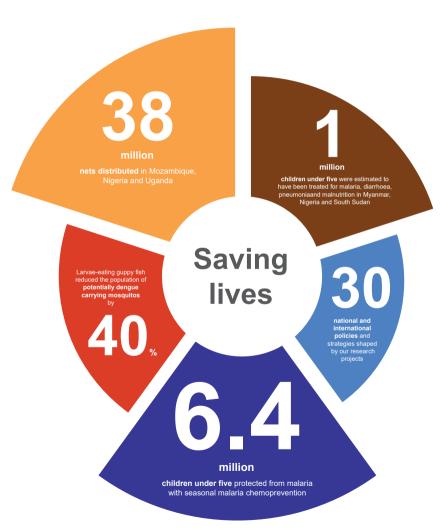
- Charles Nelson, Chief Executive, Malaria Consortium

Malaria Consortium's aim is to reach the most vulnerable and bridge the gaps in health systems where they are weakest, with interventions based on evidence, good science and effective partnerships. Our expertise goes beyond malaria to include other childhood illnesses, neglected tropical diseases and malnutrition, and, with funding from international donors and foundations, we are building sustainable solutions for healthcare in Africa and Asia. Part of this is through supporting large scale roll out of proven interventions, and through finding and demonstrating the effectiveness of innovative products and approaches.

In 2016, our malaria prevention activities in the Sahel region of Africa were presented to GiveWell, a US-based organisation dedicated to finding outstanding giving opportunities for foundations and philanthropists. After a rigorous review, we are now named as one of GiveWell's top charities for our work protecting and saving the lives of young, vulnerable children, under the age of five, through seasonal malaria chemoprevention.

Malaria Consortium's status as a GiveWell top recommended charity has opened additional funding opportunities, and is allowing us to expand the scope of our seasonal malaria chemoprevention work, to reach more eligible children in new areas. It is also allowing us to enhance the quality of the data being captured to demonstrate the effectiveness of the intervention and its value for money, as well as its contribution to the efforts to eliminate malaria.

OUR IMPACT



HIGHLIGHTS 2016-17

In the past year we have extended our reach to improve access to effective prevention and treatment of malaria, pneumonia and neglected tropical diseases for the poorest populations in Africa and Asia. A snapshot of our year, linked to our strategic goals, is shown below:

Goal 1: To guide international and national policies and strategies to enhance control and accelerate elimination of targeted diseases and malnutrition

We participated in key international partnerships and working groups linked to policy and advocacy, partnered with Ministries of Health in each country and worked with local partners in endemic areas, to ensure change in policy and practice.

Goal 2: To reach at least 10 million people with preventive treatment, supporting the uptake of emerging vaccines and drug-based prevention approaches

- We led a partnership to scale-up seasonal malaria chemoprevention in seven countries in the Sahel to over 6.4 million children. This was instrumental in the reduction of millions of malaria cases and prevented an estimated 40,000 deaths.
- We provided treatment for worm infections in nearly 170,000 children in South Sudan, demonstrated the impact of community dialogues increasing uptake of treatment for schistosomiasis in Mozambique, and piloted an integrated malaria, schistosomiasis and soil-transmitted helminth approach in Ethiopian schools.

Goal 3: To engage in at-scale delivery of effective vector control interventions and develop, investigate, promote and implement novel, vector-focused approaches that reduce disease transmission

 We distributed 16 million nets during the second universal net distribution in Uganda, 14 million nets in Mozambique, and 6.5 million nets in Nigeria. We focused on implementing an integrated vector management programme for dengue control in Cambodia, which will provide significant insight on a number of diseases. We are also assuring the most appropriate interventions in the Greater Mekong Subregion through technical support to the regional vector control working groups.

Goal 4: To improve access to, and the quality of services for the diagnosis and treatment of diseases and/or those that enhance child and maternal health

- We evaluated pneumonia diagnostic devices, testing a new automated respiratory rate counting aid for Ethiopian health facility workers, and strengthening parasitological diagnosis of malaria prior to treatment into countries' protocols.
- Integrated community case management (iCCM) of malaria, pneumonia and diarrhoea remains a key approach to reducing child mortality. In Mozambique, Nigeria, Uganda, South Sudan and Myanmar, we contunue to link iCCM to community assessment of malnutrition and access to therapeutic feeding.
- We were awarded the lead agency for a five-year flagship USAID programme covering 43 districts in Uganda with a total population of more than 13 million. The programme will bring malaria interventions to all aspects of the healthcare system across the country.

Goal 5: Improving health system effectiveness and efficiency through enhanced surveillance, outbreak response, referral, reporting, and capacity and market development

 We expanded support and supervision for community health workers in Mozambique through a digital strategy to strengthen health systems and improve supervision and performance of community health workers.

ABOUT US

Our mission is to improve lives in Africa and Asia through sustainable, evidencebased programmes that combat targeted diseases and promote child and maternal health.

Malaria Consortium works with partners, including all levels of government, to improve the lives of all, especially the poorest and marginalised, in Africa and Asia. We target key health burdens, including malaria, pneumonia, diarrhoea, dengue and neglected tropical diseases, along with other factors that affect child and maternal health.

