



External Evaluation of the President's Malaria Initiative

PMI Management Response

February 15, 2012

The President's Malaria Initiative (PMI) leadership welcomes the findings and recommendations of the external evaluation of the first five years (FY2006-2010) of PMI's activities. We view the evaluation findings as essential to our on-going efforts to improve the overall management and implementation of PMI. We commissioned this evaluation in order to have an independent review of PMI performance in five areas:

- How have PMI leadership, management and resources advanced the Initiative's goals?
- How have PMI's core operating principles been put into practice?
- How has PMI operated in the wider partnership environment?
- What evidence is there of program progress and impact? and
- What are the lessons learned that have broad application (across PMI countries and across other USG Initiatives and programs)?

PMI leadership is proud of the overall conclusion of the evaluation team that, "PMI is by-and-large a very successful, well-led component of the USG Global Health Initiative." We recognize the hard work and dedication of the teams in PMI focus countries who have worked closely with their national counterparts and partners to bring about the many accomplishments detailed in the report.

We agree with key the findings and view the ten main recommendations as relevant and useful for program improvement. Several of the recommendations are directly in line with management and technical improvements that are already underway. PMI leadership and technical teams have carefully reviewed all comments in the report and, with input from PMI's Interagency Advisory Group¹, have developed a detailed management response including a plan and timeline for implementation of each recommendation. Below is a summary of this management response:

Policy Recommendations:

I. Congress should expand PMI's financial resources and geographic reach

PMI leadership is committed to continuing to work with national malaria control programs and partners to reduce the burden of malaria. PMI continues to seek value for money through implementation of cost-effective approaches and leveraging our resources with those of other donors to support national programs

¹ The IAG includes representatives from the Department of State, Department of Defense, Department of Health and Human Services, and the Office of Management and Budget.

to reach those most at risk for malaria. In this difficult economic environment, PMI appreciates the increased funding provided by Congress in FY 2012 above previous years funding levels. If Congress makes increased resources available for malaria in the future, the PMI team is well-positioned to expand geographic reach, including adding additional countries as outlined in the Lantos-Hyde USG Malaria Strategy.

II. Improve PMI organizational clarity on key programmatic issues [Monitoring & Evaluation and Operational Research] to improve decision-making, efficiency, and effectiveness

We concur with the evaluation team that the presence of a Lead Agency (USAID) improves the functioning of PMI. The evaluation team rightly points out that greater clarity is needed on roles, responsibilities and decision-making in the program areas of monitoring and evaluation (M&E) and operational research (OR). Action: PMI USAID-CDC technical teams are developing plans to improve clarity for M&E and OR and will present these to the U.S. Global Malaria Coordinator for approval. (see below under technical recommendations for additional details).

III. Apply the “Country Ownership” principle thoughtfully to improve program effectiveness

PMI has been at the forefront of putting country ownership principles into action. PMI’s standard program planning and management approach supports national malaria control plans. The annual malaria operational plan development process relies on active participation of partners and stakeholders and budget priority setting directly with national malaria control programs. This process results in a detailed one-year country plan of budget inputs and priority activities that includes descriptions of how PMI resources will complement those of other donors to support and strengthen the national malaria control program strategy and plan.

PMI leadership agrees with the evaluation team that countries vary in their ability to assume responsibility for planning and implementation of PMI-supported program activities. Some countries where the human resources are adequate and management control systems meet foreign assistance standards are already well-positioned to assume greater responsibility. Action: PMI will undertake a critical review of the process and pace of transferring responsibilities to country control in a subset of PMI countries. We will complete these country reviews by the end of FY 2012. For those countries that are determined to be ready to assume increased responsibilities, PMI will initiate or increase direct government-to-government support in line with USAID financial risk assessment requirements.

We also agree with the evaluation team that working with and through country health systems should be a priority. However, there will continue to be situations where establishing a parallel supply chain is a necessary temporary measure to protect USG and other donor commodity investments in order to ensure that life-saving commodities reach those most at risk. Action: PMI will only bypass government supply chains and establish parallel supply chains as a last resort when repeated serious problems occur with commodity security. While temporarily supporting a parallel supply chain, we will continue to invest in strengthening the government supply chain system with the longer-term objective of transitioning back to commodity delivery through government supply chain systems.

IV. Expand the use of well-trained and effective Foreign Service Nationals (FSNs) as PMI resident staff

PMI already makes broad use of FSNs (host country workers) as an integral component of PMI in-country teams. Increasing the use of FSNs to complement the two malaria resident advisors and USAID health team staff is a cost-effective means of expanding local management and technical capacity. Action: PMI leadership will review the current staffing structure on a country-by-country basis to assess existing skill-sets and identify gaps. As gaps are identified, recruiting FSNs will be considered as a first option.

V. Acknowledge the successes to date and initiate change as appropriate, based on the local context

We appreciate the recognition of the Initiative's accomplishments and successes to date. PMI has always tailored its programmatic approaches to the local context, modifying those approaches as required by the changing local epidemiology of disease and health infrastructure. With the successes to date in reducing malaria burden, PMI recognizes the need to remain flexible and adapt quickly to changing country situations.

Technical Recommendations:

VI. Reevaluate the indoor residual spraying (IRS) strategy

PMI leadership agrees that a strategic review of PMI's support for IRS is warranted to inform future investments in this area. Given our approach to supporting national malaria strategic plans and priorities, a country-by-country review will be required. Action: PMI will initiate country-specific reviews of IRS investments and engage external vector control experts, when indicated. PMI technical experts will continue to monitor evidence on IRS effectiveness in different epidemiologic settings to maximize public health impact. PMI will also continue to work with the World Health Organization (WHO) to develop policies and tools related to insecticide resistance management for IRS and insecticide-treated nets.

VII. Improve resistance monitoring for both insecticides and antimalarial (artemisinin) drugs

PMI leadership agrees with the evaluation team that the emergence of insecticide resistance and artemisinin resistance are major threats to the progress achieved to date in malaria control. PMI ensures that all focus countries are able to conduct antimalarial drug and insecticide resistance monitoring, either through direct PMI investments or by making sure that other partners are supporting these studies. USAID also provides financial support to the Medicines for Malaria Venture (www.mmv.org) for development of new antimalarial drugs.

VIII. Strengthen national surveillance and health management information systems (HMIS)

PMI agrees that case surveillance and HMIS systems should be strengthened and that this is not the sole responsibility of the malaria sub-sector. PMI has been actively involved in new approaches to case detection and reporting (e.g. Malaria Early Epidemic Detection System in Zanzibar). PMI staff continues to

collaborate with WHO on the development of updated Disease Surveillance for Malaria Elimination guidelines. Although PMI continues to co-invest in country HMIS systems, these systems are challenging to build, requiring long-term donor and host country support with resource needs that exceed any one sub-sector. Action: PMI will continue to engage in country-level discussions related to both malaria case surveillance and HMIS and will seek to provide strategic investments to strengthen these systems.

IX. Define PMI operations research (OR) strategy and expand the research agenda

PMI leadership agrees that a clearly defined operational research strategy including a prioritized research agenda is needed. PMI also agrees that PMI-supported OR should be program and policy relevant, focus on short-term studies to improve programs, and that greater field and external scientific input is needed to inform PMI's research agenda. Initiated in 2011, a PMI OR strategic planning and research prioritization process is already underway. This process includes engagement of members of the external malaria research community. Action: PMI will complete the strategy development process that is underway and, by the end of June, will present a draft strategy to the U.S. Global Malaria Coordinator for review and approval. The draft strategy will include a plan for clarifying leadership and responsibilities and for ensuring input from external scientific experts into the PMI research agenda and activities.

X. Accelerate the impact evaluation activities at appropriate levels of scientific rigor

PMI has played a major role globally in driving consensus on a common approach to national-level impact evaluations. Impact evaluations require sufficient time for scale up of interventions and for expected health improvements to take place. The ongoing country-level impact evaluations that PMI and other partners are supporting use all available relevant data, including all cause child mortality. The PMI interagency Monitoring and Evaluation Team has prepared a timeline for all PMI focus country impact evaluations that takes into account the status of program implementation. Action: PMI leadership will monitor progress of impact evaluation activities according to the established timeline. PMI will continue to work through the Roll Back Malaria Monitoring and Evaluation Reference Group to obtain consensus on updated approaches to impact evaluation.