

The Economic Impact of Malaria Control: Moving the Agenda Forward

Report from a Consultative Meeting



Rationale for the Consultation

In the course of implementing a health financing and economic research agenda for the President's Malaria Initiative (PMI), the Health Finance and Governance Project (HFG) together with PMI identified the absence of an entity with the responsibility of establishing an organizing framework for malaria economic research. Many organizations and universities are undertaking this research, but we aren't pulling it together, synthesizing it, identifying gaps and priorities, and effectively facilitating the process of policymakers, advocates, and implementers incorporating the generated evidence into policy and program implementation decision making. We know that malaria is more than treatment and control and we have evidence beyond cost-effectiveness and impact data but the economic story that places malaria in the development context is absent because the evidence is scattered and possibly incomplete.

The Roll Back Malaria (RBM) initiative acknowledged this need when they sought to create the Economic Research Group for Malaria in late 2014 early 2015. However, this working group never got off the ground in the wake of RBM disbanding.

HFG and PMI began this consultation as a way to start addressing this need.

Introduction

HFG with support from PMI hosted the Economic Impact of Malaria Control - a Consultative Session at the 64th Annual Meeting of the American Society of Tropical Medicine and Hygiene in Philadelphia, Pennsylvania (USA) on October 27, 2015. The session brought together senior malaria stakeholders, including Dr. Bernard Nahlen, Deputy Coordinator for PMI, Dr. Kathleen Rankin with the Gates Foundation and, Dr. Regina Rabinovich, Director of the Malaria Elimination Initiative with ISGlobal and an ExxonMobil Malaria Scholar in Residence at Harvard University.



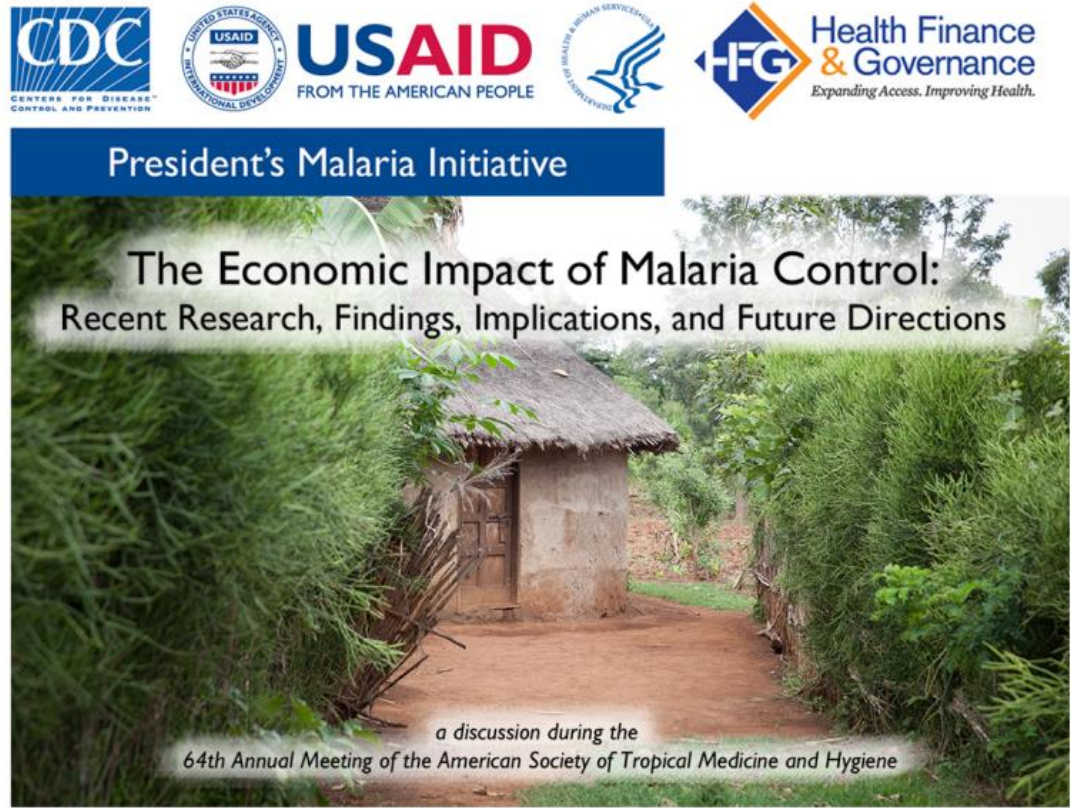
Dr. Martin Alilio opened the session for PMI, “We know a lot about malaria disease burden, but what we haven’t done is systematically link interventions to economic impact in countries.”

Dr. Elaine Baruwa from HFG introduced the two scientific presentations by establishing the purpose of the meeting: to initiate the process of providing more structure around which to organize available research and identify research needs in terms of the malaria’s audience and their needs.

Dr. Louis Niessen of the Liverpool School of Tropical Medicine in Kenya presented a current micro-economic research study in Kenya. The study is reviewing data from the past 15 years, with the objectives of estimating the economic household burden, by poverty level for and assessing the cost-effectiveness of control options in terms of costs per episode averted, costs per DALY averted as well as societal costs.

Dr. Sian Clark of the London School of Tropical Medicine and Hygiene presented her research on malaria in school children and the economic implications of the findings, including the potential to prevent negative impacts on cognitive performance, educational outcomes, and socioeconomic development with effective malaria control.

After these presentations on current and ongoing malaria economic impact research, Dr. Elaine Baruwa asked the 30 participants to consider the need for an organizing framework for malaria research to determine whether the available evidence is fit for purpose? Participants discussed the need for a framework and broadened the discussion on the purpose of malaria economics data with regards to policy, advocacy, and implementation, and the final frontier of eradication.



Importance of Research for Policy, Advocacy, Implementation, and ... Eradication

The participants agreed that after ten years of investing in malaria treatment and prevention that we need a more compelling story of how it’s helping reduce inequalities, improve economic and educational attainment, and helping countries grow their economies.

As Matthew Chico with the London School of Hygiene and Tropical Medicine said, “we are in a second golden age of malaria eradication. The first one failed, and this one is facing flat-lining resources.” Without investment over the long term, this Golden Age will fail again.

All participants agreed that the research was important across all areas. Audiences for this type of research include policy makers like ministries of health setting regulations and optimal packages of services, political parties and leaders who make appointments to ministries, district politicians, ministries of health finance who need to know total costs for funding services and also the benefits and externalities or cost savings. Audiences also include the private sector engaged in malaria treatment and prevention for their employees, donors and political bodies in donor countries, and

university and research partners in countries to understand gaps and pursue research to address gaps.

Dr. Nahlen, the Deputy Coordinator for PMI, raised an important point: “The dilemma is: the more successful the disease program, the more difficult to keep the same level of (donor) support. This is the value of pushing towards elimination. Otherwise likely in a decade, we’ll see malaria coming back with a vengeance.” He also stated that the next three to five years would be critical to keep [malaria progress] on track.



Dr. Bernard Nahlen, Deputy Coordinator for PMI, discusses the challenges of malaria programming.

Participants agreed on the importance of engaging governments with resources with a persuasive case to make investments in eradication. However, this requires more compelling data than number of lives saved.

Participants agreed in the importance of modeling elimination as a business case that demonstrates a return on investment under different scenarios, including rapid and moderate pace, and equipping Ministries of Health in their own countries with the right evidence to advocate for greater resources toward eradication from ministries of planning/finance, appropriations bodies such as parliaments and the private sector.

In the process, economic impact research could be used to demonstrate how health systems are strengthened because malaria control efforts can free up substantial amounts of resources currently used for treatment (e.g. clinician time, blood, drugs and laboratory tests) that can instead be used to invest in health systems to yield benefits now and the in the future. A comprehensive

framework for organizing the research would also highlight gaps such as the missed opportunities of studying private sector investments in malaria control that have been implemented with the goal of directly increasing productivity in specific industries.

Finally, Dr. Regina Rabinovich mentioned the importance of looking across sectors including education, agricultural, and health systems when developing cost effectiveness studies in light of the Sustainable Development Goals. Donors and country actors are speaking this language now, and so must research. Scientific evidence such as Dr. Lloyd’s research demonstrates how investing in education without malaria control can severely impact the return on the investment in education the SDG’s are linked in practice not just in theory.

Participants agreed to the importance of bringing together a community of practice to share the evidence generated from malaria economic research for policy, implementation and advocacy purposes. This was the purpose of Roll Back Malaria’s nascent Economic Research Group for Malaria. Now that RBM is no more, it is an identified gap.

Recommendations for Moving Forward

HFG will be reaching out to broaden consultations with participants in the coming weeks and months to move this agenda forward.

We recommend forming a Community of Practice (CoP) with the objective of structure and collating Malaria economic research around an inclusive framework. While HFG would coordinate the effort as the Secretariat, we would not recommend housing the information through the HFG project, but rather identifying a chair or co-chairs, working potentially with PMI and/or whatever entity replaces RBM or within the World Health Organization (WHO).

To begin, we will further define our objectives for a Community of Practice with PMI. After establishing these objectives and the activities therein, we will reach out to those invited to the consultative session to identify others who should be included, obtain a comprehensive understanding of all the current and recent research, published and gray, in this area, and receive buy in to participate and contribute to thinking around the framework for collating the malaria economic research in one place.



About HFG:

A flagship project of USAID's Office of Health Systems, the Health Finance and Governance (HFG) Project supports its partners in low- and middle-income countries to strengthen the health finance and governance functions of their health systems, expanding access to life-saving health services. The HFG project is a five-year (2012-2017), \$209 million global health project. The project builds on the achievements of the Health Systems 20/20 project. To learn more, please visit www.hfgproject.org.

The HFG project is led by Abt Associates in collaboration with Avenir Health, Broad Branch Associates, Development Alternatives Inc., Johns Hopkins Bloomberg School of Public Health, Results for Development Institute, RTI International, and Training Resources Group, Inc.

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HFG proposes to develop a draft structure or framework with consultation and input from stakeholders, build out a repository of Malaria economic research, establish a future home for this collated information, and establish a series of meetings with stakeholders, including regional stakeholders in Africa and Asia, to look at the compiled research, identify gaps in what has been done, develop a field guide to support implementers in initiating this type of research, develop briefs highlighting major findings, and inform the future research agenda in this space.

HFG also proposes supporting PMI in developing a symposia around these topics at the 65th Annual Meeting of the American Society for Tropical Medicine and Hygiene.