**THE GLOBAL PARTNERSHIP FIGHTING MALARIA** has witnessed much success in the last 20 years. Yet, according to the 2019 World Malaria Report, this progress is slowing down. An estimated 405,000 people died from malaria in 2018, compared to 416,000 in 2017. Ninety-four percent of these deaths occurred in Africa, disproportionately affecting women and children. Lack of community awareness about prevention and treatment, the emergence of drug-resistant malaria parasites, and the limited capacity of public and private institutions to use resources effectively make the fight against malaria difficult. The challenges and consequences of malaria are complex and far-reaching for individuals, communities, and health organizations, requiring multiple paths to successful prevention and treatment.

**Strong Health Systems to Prevent and Treat Malaria**

Management Sciences for Health (MSH) has been fighting malaria for three decades in over 40 countries. In partnership with national malaria control programs (NMCPs), donors, and international and local stakeholders, MSH helps countries scale-up proven interventions to combat malaria, while building the capacity of health systems and developing innovative tools and technologies to prevent and treat the disease.

MSH focuses on building strong health systems that deliver high-quality health services. In the case of malaria, we do this by developing accreditation standards—such as treatment guidelines—and building capacity of district officials, health workers, and community members. In Benin, for example, MSH is supporting health departments in establishing benchmarks and leveraging health data to guide officers and health workers toward improving the quality of service delivery for malaria and other illnesses.

**Nearly half** of the world’s population is at risk for malaria.

**Every 2 minutes** malaria claims the life of one child under age five.

**228 million new cases** of malaria worldwide were diagnosed in 2018, a decrease from 2017.

**94% of all malaria deaths** occur in Africa, an increase from 2017.

In 2018, there were **31% fewer deaths** due to malaria than in 2010.

As a partner to the Government of Nigeria, home to **25% of the world’s malaria cases**, MSH is combating malaria through our work with the Global Fund and USAID and the President’s Malaria Initiative. We are supporting Nigeria’s National Malaria Eradication Plan, from the Ministry to the facility level, **across nearly 60% of the country**, directly supporting 15% of the global malaria response in one country.

**MSH FIGHTS MALARIA IN THE HIGHEST BURDEN COUNTRIES IN THE WORLD**

Benin, Madagascar, Malawi, Nigeria

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Stronger health systems. Greater health impact.
Improving Availability of Malaria Commodities

A malaria-free world requires strong pharmaceutical systems that deliver on their mandate to ensure universal access to quality, safe, and effective diagnostic, preventive, and treatment tools. The MSH-led, USAID-funded Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program supports countries in strengthening governance, transparency, and accountability of supply chain systems (procurement, distribution, and use of information) for artemisinin-based combination therapies and rapid diagnostic tests in the public and private sectors.

MSH supports several key interventions to prevent, diagnose, and treat malaria

- improving treatment guidelines;
- institutionalizing malaria quality of care;
- building capacity in supply chain management and leadership, management, and governance and health data information systems;
- supporting training and supervision of health care providers;
- supporting performance-based financing;
- facilitating public-private partnerships;
- supporting implementation of lifesaving interventions, such as seasonal malaria chemoprevention;
- supporting scale-up of community case management of malaria;
- supporting scale-up of expanded channels for insecticide-treated net distribution; and
- supporting operations research to identify improved malaria service delivery practices.

For more information about our malaria work, please contact communications@msh.org.

in Benin

Funded through USAID, the MSH-led Integrated Health Services Activity (IHSA) works closely with the NMCP, supporting efforts to improve the availability, quality, and demand of malaria services in health facilities and the community—including scale-up of seasonal malaria chemoprevention, an intervention that significantly reduces malaria mortality. IHSA supports capacity-building efforts for management and oversight of malaria prevention and treatment, particularly as it relates to using data for decision making. At the national level, IHSA supports the NMCP in developing a strategy that will guide the country toward malaria elimination.

in Madagascar

USAID’s Accessible Continuum of Care and Essential Services Sustained (ACCESS) Activity, led by MSH, builds on the country’s success in reducing malaria in target areas by supporting the NMCP in improving the quality, availability, and uptake of malaria treatment and prevention services provided in health facilities and by community health workers. This includes building capacity in supportive supervision and management, use of health data, and improved communication and messaging within communities.

in Malawi

Through the USAID-funded Organized Network of Services for Everyone’s Health (ONSE) Activity, MSH is assisting the NMCP in providing high-quality malaria services at the facility and community levels in ten districts. ONSE is also leading implementation of operational research on administering intermittent preventive treatment (IPTp) for pregnant women by community health workers.

in Nigeria

With funding from the Global Fund and the President’s Malaria Initiative, MSH is supporting national and 21 state malaria elimination programs to improve the quality of diagnostic and treatment services in public and private facilities, increase the uptake of IPTp, and improve the quality and use of health data for malaria. MSH is also supporting the improved management of malaria commodities within facilities.