

A conversation with Desmond Chavasse on February 18, 2014

Participants

- Desmond Chavasse — Senior Vice President, Malaria Control and Child Survival, Population Services International (PSI)
- Jake Marcus — Research Analyst, GiveWell

Note: This set of conversation notes was compiled by GiveWell and gives an overview of the major points made by Dr. Chavasse.

Summary

GiveWell spoke with Dr. Chavasse as part of its investigation of philanthropic opportunities in data collection for malaria control and elimination. Conversation topics included: why more data is needed for effective malaria control, why large funders generally do not fund data collection, and the success of ACTwatch.

Malaria control strategies and the need for more data

Ten years ago, malaria was such a widespread problem in Africa that bed nets and anti-malarial drugs did not need to be perfectly targeted to have a major impact. The 2013 World Malaria Report shows that recent malaria control efforts have been very successful—malaria mortality has decreased by 50% over the last 10 years.

However, to continue to make progress on malaria control, anti-malaria resources must be allocated more carefully than in the past. Insecticide resistance and drug resistance will eventually undermine the value of providing bed nets and artemisinin-based combination therapies (ACTs), so the use of these interventions needs to be optimized to eliminate malaria as soon as possible.

Additionally, some areas need significantly more attention than others. For example, Kenya contains some areas that are malaria-free and some areas that have the highest rates of malaria in the world. It is necessary to distinguish between these types of areas so that resources can be allocated to where they are needed most.

The malaria control community needs more high-quality data to guide the allocation of malaria control resources. Data should be collected on several topics, including drug quality, drug resistance, malaria incidence, bed net coverage, and insecticide resistance. These data also need to be properly mapped so that researchers can identify the highest need areas. Acquiring this data will take a very large investment, but without it, malaria elimination will not succeed.

Major malaria control funders

The major funders of malaria control are the President's Malaria Initiative (PMI), the US Agency for International Development (USAID), the Global Fund to Fight AIDS,

Tuberculosis, and Malaria (GFATM), and the UK's Department for International Development (DFID).

These donors tend to fund data collection to support particular malaria control projects, for instance monitoring the number of bed nets distributed in a region, rather than big picture research questions on how to allocate resources. Some donors have restrictions on the amount of research they can fund. USAID has to devote a certain percentage of their budget to expenses more directly related to delivery (e.g. commodities), because of the political pressures they have faced from the government and taxpayers who want to ensure their money is not wasted.

GFATM grantees can spend up to 10% of grants on monitoring and evaluation, but the full amount is rarely spent, because delivery is prioritized over more research.

Underinvestment in data collection and research

Malaria control is a series of fragmented projects, which leads to underinvestment in data collection and research.

Some of the large donors understand that more data collection and research are needed. For example, DFID may be interested in funding these types of projects. Alastair Robb, a Senior Health Adviser and Regional Malaria Advisor at DFID, recently asked organizations to submit funding proposals for projects that would increase the use of evidence in malaria control.

The Alliance for Malaria Prevention thinks about data issues and malaria research, but it does not have a significant amount of funding, so it cannot increase the amount of data and research that is available.

The Gates Foundation is one of the few donors that provides flexible funding for data collection and research related to malaria control.

ACTwatch

As part of the Affordable Medicines Facility for Malaria, high-quality ACTs were subsidized so that they could compete with ineffective artemisinin-based monotherapies. The Gates Foundation offered to fund an organization to monitor the effect of this large-scale, politically controversial intervention. PSI won the contract and created ACTwatch.

ACTwatch is one of the few examples of useful large-scale data collection on malaria control. Once ACTwatch was shown to be successful and it was clear that donors were using the data, DFID provided funding to it because it was seen as important and low-risk.

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