



Australian High Commission
Papua New Guinea



PNGAus Partnership

DFAT management response to the 2024 independent evaluation of the Australia-China-Papua New Guinea Trilateral Collaboration on Malaria and Health Security

The Australian Department of Foreign Affairs and Trade (DFAT), through Abt Associates and in consultation with the Joint Project Working Group (JPWG) of the Trilateral Malaria Partnership (TMP), engaged the services of a team to conduct an independent final evaluation of TMP. The team commenced work in March 2024 and undertook fieldwork in Papua New Guinea (PNG) over three weeks in April—May 2024.

The purpose of this evaluation was to assess the progress of phase 2 of TMP (January 2020—December 2023) and to provide recommendations to the JPKG on the remaining project period to 31 December 2024, and possible future interventions and investments based on lessons learned.

The evaluation used data collected through document review and in-country fieldwork comprising key informant interviews, site visits and Focus Group Discussions from 15 April—3 May 2024. The evaluation undertook 74 consultations in Port Moresby, West Sepik Province and Madang Province, and remotely in Australia and China.

The evaluation team noted that the effects of COVID-19 on the Project were significant and affected the ability of partners and staff to travel, implement activities and attend training, notably in 2020 and 2021.

The evaluation provided five recommendations for the trilateral partners to consider. While invited to comment, DFAT did not receive any feedback on the evaluation from other trilateral partners.

Table 1 below outlines DFAT's response to the evaluation's recommendations.

Table 1. Individual DFAT management responses to the independent evaluation's recommendations

No.	Recommendations	Response (Agree, partially agree, or disagree)	Comments	Action plan	Timeframe
1.	The JPWG should not plan on a further phase of the TMP in its current form.	Agree	DFAT agrees that a further phase of the TMP should not be planned.	N/A	N/A
2.	PATH and TMP should work with partners to carry out a mapping and planning exercise to ascertain which of their current activities can be transitioned to Papua New Guinean or other donor entities.	Agree	DFAT acknowledges the importance of this exercise, some of which has already been completed through PATH and the JPWG. Other partners, including the Global Fund, may have scope to continue some activities. See also DFAT comments on recommendation 4.	DFAT will consult with the PNG National Department of Health and National Malaria Program and explore with development partners whether there is a scope to collaborate in malaria control activities.	Q1, 2025
3.	PATH and TMP should consider opportunities for improving the sustainability of existing initiatives including through programs and approaches in PATH that address themselves to transition, strengthening PHAs, GEDSI, and broader health security issues.	Agree	DFAT supports the focus on sustainability and transition, and the strengthening of PHAs, GEDSI, and health security, as crucial for ensuring the long-term impact of the initiatives.	DFAT will ensure PATH and TMP share and integrate lessons to strengthen PHAs, GEDSI, and health security programs.	January 2025
4.	The TMP country and implementing partners should consider the benefit of rolling any remaining relevant activities requiring donor support into a broadened STRIVE or other similar program. This should be with a multi-disease focus, utilising a gender and disability lens, and include the option for partnering with relevant Chinese or other technical expertise.	Partially agree	DFAT agrees to continue supporting some of the remaining activities of the TMP through bilateral collaboration with PNG, and to consider expanding relevant support under other regional programs, including STRIVE.	As an interim measure, DFAT will continue to fund two microscopists based at PNG's Central Public Health Laboratory, and support the roll out of the Laboratory Information Management System, through the PNG-Australia Partnership. DFAT will consider the need for expanded malaria programming in PNG through a forthcoming health program design process.	Q1 and 2, 2025
5.	Any planning by donors for future contributions to reducing the malaria burden in PNG should take adequate account of the changed donor landscape to reassess the most useful contributions that can be made, without the encumbrance of demonstrating a trilateral model.	Agree	DFAT agrees that future contributions should consider the changed donor landscape and focus on the most effective interventions to address the malaria burden in PNG.	DFAT will consult with the PNG National Department of Health, National Malaria Program, and development partners group when considering future contributions.	Q1 and 2, 2025