



IMAGINE NO MALARIA COMPREHENSIVE IMPACT REPORT



\_\_ The people of The United Methodist Church®





IMAGINE NO MALARIA (INM), A GLOBAL HEALTH PROGRAM OF THE UNITED METHODIST CHURCH (UMC), COMBINES INTEGRATED HEALTH INFRASTRUCTURE, EDUCATION, AND ADVOCACY TO ADDRESS DEATH AND THE DEBILITATING EFFECTS OF MALARIA IN SUB-SAHARAN AFRICA. BY DOING SO, IT IS SAVING LIVES AND LOOSENING THE GRIP OF POVERTY FOR FUTURE GENERATIONS, BUILDING UPON DECADES OF METHODIST PRESENCE AND RELATIONSHIPS IN AFRICA, INM IS STRATEGICALLY POSITIONED TO FIGHT MALARIA IN THE MOST REMOTE AND IMPOVERISHED AREAS NOT SERVED BY **GOVERNMENTS OR OTHER NON-GOVERNMENTAL** ORGANIZATIONS (NGOS). THE AIM IS TO REACH THE MOST AT RISK POPULATIONS, WITH WOMEN AND CHILDREN UNDER FIVE BEING PRIORITIES.

#### **MY SISTERS AND BROTHERS:**

Words are inadequate symbols to express the depth of my gratitude and joy as I think about what God has done and is continuing to do through each of us because of Imagine No Malaria. You dared to believe in a God-sized dream and we are witnesses to its fulfillment.

Because of your faith and hard work, together, we have accomplished the miraculous. In the following pages, you will read about our shared accomplishments and see the evidence of our work. Death and suffering from malaria in Sub Saharan African has been substantially reduced. This outcome is possible because you dared to care and to believe that God was at work in this endeavor.

You joined us, as we renewed our commitment to believe that God can do "immeasurably more than we can ask or imagine" (Ephesians 3:20). As we launched Imagine No Malaria in 2010, we set goals that seemed unbelievable, but God proved able in and through us.

I count it a unique blessing and opportunity to participate in this movement called Imagine No Malaria with you. So many people now live because of this ministry and countless future generations are impacted.

Our Christian witness honors God most of all. Thank you to all who knew all along, that through faith, all things are possible.

I live on the edge of expectancy as to what God will do next with us.

**REVEREND GARY R. HENDERSON** 

EXECUTIVE DIRECTOR IMAGINE NO MALARIA

#### **IMAGINE NO MALARIA CAMPAIGN STAFF**

SHERI ALTLAND, CAMPAIGN DIRECTOR
DEEANN BOGLE, ADMINISTRATIVE ASSISTANT
TOBY CANNON, DEVELOPMENT OPERATIONS
LERAE COLLINS, SPECIAL PROJECTS
ASHLEY GISH, ASSISTANT CAMPAIGN DIRECTOR
DIANE MALONEY, PROJECT COORDINATOR



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BRING
CHANGE.
MAKE A
WORLD OF
DIFFERENCE.



# IMPACT OVERVIEW: GLOBAL MALARIA STATISTICS & TRENDS

#### **GLOBAL MALARIA STATISTICS & TRENDS**

Global malaria mortality rates have fallen by an estimated

60% since we began this effort

395,000

deaths from malaria still occur yearly in Africa

When we began this effort, a child in Africa died from malaria EVERY 30 SECONDS...
THEN 45 SECONDS...
THEN 1 MINUTE.
We still lose a child every

### 2 MINUTES

but this progress is reason for hope and celebration.

IMAGINE NO MALARIA IS PART OF A CONCERTED WORLDWIDE EFFORT THAT HAS SHOWN RESULTS

Because of the global effort to fight malaria, it is estimated that

6.8 MILLION

deaths from malaria have been averted since 2001

In the past decade, life expectancy in Sub-Saharan Africa has increased by

9.4 YEARS

1.2 years of which is directly attributable to the reduction in malaria mortality

United Methodists engaged in a global effort

**49 CONFERENCES** 

representing over

6 MILLION

United Methodists accepted the challenge to raise funds

**TOGETHER, WE HAVE...** 

Provided over

4 MILLION

life-saving bed nets

Renovated
61 FACILITIES

**Treated over** 

2.7 MILLION

people for malaria

**Protected over** 

175,000 STRUCTURES

with IRS (indoor residual spraying)

**Trained** 

**THOUSANDS** 

of community health workers and volunteers

#### A BRIEF HISTORY

The United Methodist Church has been supporting community-based health initiatives and health facilities in Africa for more than a century. In light of this, The United Methodist Church recognized the denomination had a unique opportunity to fight malaria in sub-Saharan Africa where over 90% of all malaria deaths occur.

In 2006, The United Methodist Church became a founding partner in Nothing But Nets (NBN), a campaign by the United Nations Foundation (UNF) to raise funds to purchase and distribute bed nets in Africa. In 2008, the denomination named Global Health as a strategic Area of Focus for the Church at General Conference and United Methodist Communications (UMCOM) accepted the charge to lead the fundraising effort which would be known as Imagine No Malaria.

The United Methodist Church officially joined the global effort against malaria in 2010, defining Imagine No Malaria as the Church's effort to address malaria in sub-Saharan Africa, officially launching INM's \$75 million fundraising campaign, and partnering with the Global Fund.

Programmatically, this partnership takes advantage of the denomination's network of hospitals and clinics in Africa and the Global Fund's scope and resources, accomplishing more than either could alone. Partnerships not only sustain INM programs in Africa, they give The United Methodist Church a seat at the table with global organizations fighting diseases of poverty.

What distinguishes INM from programs such as Nothing But Nets are the UMC Health Boards, resulting from The Church's long-term relationships in African communities. Across Africa, UMC Health Boards, monitored by Global Ministries, deliver comprehensive malaria programs comprised of a variety of components: raising awareness about malaria, training health workers, providing commodities (including nets, medication, and test kits), along with strengthening health facilities.

2006	The UMC became a founding member Nothing
6	but Nets, eventually raising over \$7 million for
	the UNF's campaign.
2007	UMC met with United Nations Foundation and
	Bill and Melinda Gates Foundation.
0000	
2008	Bill Gates addressed UMC General Conference.
2009	The UMC officially joined the global fight
2007	against malaria, creating the Imagine No
	Malaria \$75 million fundraising campaign.
	The same of the sa
2010	INM formally launched in the Democratic
	Republic of Congo (DRC) with a small net
	distribution. INM's U.S. fundraising launched
	on the steps of the state capital in Austin, TX
	with the Southwest TX Annual Conference
	becoming the first to raise dollars for INM.
0011	
2011	Granting process began to Health Boards in Africa.
	Technical Review Panel (TRP) formed to assess grants to ensure they control and decrease
	mortality and morbidity of malaria.
	mortancy and morbialcy of maidria.
2012	A new church-centric fundraising model was
	developed and implemented.
	V
2013	GHI Co-Chair, Bishop Bickerton reports on
	UMC leadership role at the international 4th
	Global Fund Replenishment Conference
2014	First william dellar plades was in ad
2014	First million-dollar pledge received.
2015	90% of fundraising goal reached.
	55/5 S. Fariancian B Boar Features.
2016	Imagine No Malaria celebrated at General
	Conference in Portland, Oregon. Global
	Ministry's Abundant Health program introduced.
<b>201</b> 7	Imagine No Malaria transitions to
	Abundant Health.

#### THE FUTURE

The United Methodist Church has been and will continue to be a recognized faith leader in global health. The pledges made by faithful supporters of Imagine No Malaria will continue to support the work of malaria prevention, treatment, communication, and education even as we endeavor as a denomination to widen the scope and address the many challenges to global health.

WE ARE COMMITTED TO WORKING TO BRING BETTER HEALTH TO PEOPLE IN EVERY PLACE, FROM OUR OWN BACKYARDS TO AROUND THE WORLD.

## WHERE WE'VE WORKED



Imagine No Malaria funding implements health-care strategies, develops infrastructure, and sponsors integrated health campaigns that promote malaria prevention, diagnostics, and treatment and health education across the sub-Saharan region.

#### Côte d'Ivoire

Democratic Republic of the Congo

Liberia

**Sierra Leone** 

**Zimbabwe** 

Mozambique

**Angola** 

Rwanda

Uganda

Zambia

**Burundi** 

Kenya

**Guinea** 

Nigeria

South Sudan

Malawi

### **SIERRA LEONE**

The United Methodist Church worked in partnership with the government of Sierra Leone to distribute more than **350,000 bed nets**, along with vitamins and medicine for children under 5 in a massive campaign to eradicate malaria and keep children alive and healthy. **1,720 volunteers** were trained in preparation for the launch of this lifesaving program.





### **ANGOLA**

Residents of Bom Jesus, Angola received **9,000 insecticide-treated mosquito nets** to help protect them from malaria. The nets were delivered house-to-house throughout the community by a locally trained cadre of community educators.

### **ZIMBABWE**

The Health Center in Chimanimani is the main treatment facility serving this rural district and was the center for distribution of over **22,000 insecticide-treated nets** as well as a community-based education program.



## IMAGINE NO MALARIA IN ACTION: GLOBAL MINISTRIES

Global Ministries delivers INM funded comprehensive malaria programs across Africa through UMC Health Boards. The Boards deliver programs that have a variety of components: raising awareness about malaria, training health workers, providing commodities (including nets, medication, and test kits), along with strengthening health facilities.

Global Ministries is tasked with grant processing and technical support to the health boards. The health boards in turn implement activities in malaria education, prevention, diagnosis, and treatment. All of these activities are aimed at reducing the number of malaria cases and malaria related deaths in these communities. In 2012, Global Ministries began awarding grants to UMC Health Boards representing UMC episcopal areas and annual conferences in Africa.

To date, 13 Health Boards, along with selected faith-based partners have received grants to implement integrated malaria programs. Integral to this is process is the complementary, individualized UMC Health Board trainings and regular Pan-African forums to build the programmatic, financial, and technical implementation of quality health care programs. Global Ministries also provides technical support in the form of assistance with best practices, data collection, community engagement and community needs assessment. Over \$4 million has been given out in grants to support malaria control activities in Africa between 2012 and 2017. UMC Health Board strategies utilized to achieve program objectives

- Develop an effective implementation of contextually appropriate programs to combat malaria.
- Focus on the trust and relationships that the UMC has with members in our communities to encourage behavior change and participation in UMC malaria and integrated health programs.

- Use malaria programs as an integral part of a larger integrated strategy to combat other diseases of poverty and address the over-arching issues of maternal and child health.
- Emphasize monitoring and impact evaluation of Methodist-based programs for the treatment and prevention of malaria.
- Comprehensive Malaria Programming: Prevention, Treatment, Education, Communication
- INM funded programming through Global Ministries
- Trains Community Health Workers, lab technicians and other allied health professionals on proper malaria case detection, testing, treatment, and follow up.
- Ensures case management workers are trained to understand the importance of early detection as we strive to diagnose and treat within 24 hours of symptom onset
- Distributes and provides education on using diagnostic kits and appropriate medication
- Establishes in-country health boards that plan and implement strategies against malaria, write grants for funding received, provide oversight and report successes
- Conducts program site visits and timely evaluation reviews to ensure that the funds granted through INM are judiciously used
- Facilitates behavior change through communications and education resulting in effective use of preventative bed nets and other necessary measures to ensure healthier communities free from mosquito infestations

The success of this comprehensive approach is measured against the use, efficacy, and sustainability of INM funded programs. Reports provided from Global Ministries provide the primary source of statistical evidence on these criteria. Additionally, the UN Millennium Development Goals (MDG) inform INM's work – as part of the "global fight," they are the guiding benchmarks against which most, if not all, anti-malaria organizations base their programming.



### REACHING THE MOST VULNERABLE IN DRC

In the Democratic Republic of Congo (DRC), malaria is a serious threat that causes over 40% of consultations and hospitalizations and is the leading cause of death for children under 5. This threat is especially felt in the most remote communities who receive very few resources for malaria control. Due to the vast landscape and the difficulty reaching these remote malaria medications and lifesavina interventions too often fail to make it to vulnerable populations where the need is the greatest. Through the support of INM, the UMC Health Boards in DRC work to reach the hardest to reach areas, filling a critical gap in malaria prevention and control in the DRC.

Distributing malaria medication and supplies to the rural health facilities of the South Congo Episcopal Area involves a long journey through rough terrain and roads that are regularly affected by heavy rains, sometimes making roads impassable. For the South Congo Health Board this is a journey that is worth taking, as the precious malaria medication and supplies they carry are preventing pregnant women and young children from infection and death by this preventable disease. Faith-based health facilities like the Mulingwishi Health Center and Samutab Hospital in South Congo provide essential services to the thousands of subsistence farmers in the surrounding communal areas who often cannot afford to pay for health services. Imagine No Malaria makes it possible for the South Congo Health Board to continue to provide medications for very little or no cost to these and other marginalized communities throughout Africa.



## PARTNERING FOR IMPACT IN ZAMBIA

UMC Health Boards are encouraged to forge partnerships at all levels of implementation in order to increase project impact. At the community level, partnerships encourage local ownership and participation in program activities, broadening the reach as well as encouraging the sustainability of programs.

Beyond the community level, INM partnerships have included other health organizations as well as both local and the national governments. Having buy-in from various stakeholders has prevented duplication of efforts while ensuring that resources and skills are used in an equitable manner. INM has also forged partnerships with various external organizations in order to increase our reach into areas where INM did not have a presence previously, like Zambia.

The Council of Churches in Zambia (CCZ), a long term partner of The United Methodist Church, recognized gaps in malaria programing in the country, particularly in the severely affected Zambezi region. With more than 4 million infected annually resulting in close to 8,000 preventable deaths from the malaria, there was a demonstrated need for malaria programing in this region. Seeing this need, INM awarded the CCZ a grant to implement a school-based net distribution and education campaign to primary school children in the Zambezi region.

Through the partnership, more than 4,000 students in Zambia received life-saving insecticide treated mosquito nets. In addition to nets, these young children in rural Zambia also received important behavior change messaging in malaria prevention through the use of their nets and the importance of seeking treatment when they have a fever.

Recognizing the significance of such partnerships within their country the CCZ has pledged to encourage other member churches of the CCZ within the country to replicate the efforts of Imagine No Malaria and continue to meet unfulfilled needs in malaria programing.

## **COMMUNITY CARE IN ZIMBABWE**

Village health workers (VHWs) in Zimbabwe have become integral in the country's malaria elimination efforts. Through support from INM, VHW's are trained to provide malaria testing and treatment as well as education and prevention in rural communities in the Mutasa District of Zimbabwe. Over the past three years, the number of people being tested and treated by community health workers has increased significantly.

VHWs have been especially successful in malaria control in this district because they are trusted members of their communities and neighbors feel at ease reaching out to VHWs when ill. Their proximity to the community provides access for malaria diagnosis and treatment even where health facilities are distantly located, allowing VHWs to reach the most marginalized individuals with lifesaving interventions.



# IMAGINE NO MALARIA IN ACTION: THE GLOBAL FUND

The United Methodist Church is the first faith-based partner of The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund), the largest international public-/private-funding source for health programs. This historic partnership has also given The United Methodist Church a "seat at the table" with world health leaders. Our Global Fund partnership extends INM dollars through their greater purchasing power and is a means to quickly and effectively apply funds raised.





The United Methodist Church has developed health initiatives in Africa for more than a hundred years, providing clinics, hospitals, and community-based health services without regard to race, religion, or political creed. Imagine No Malaria's Global Fund partnership underscores our belief that collaboration among governments and private sector partners is a key in the fight against the diseases of poverty that decimate lives, especially those of women and children. None of us can eliminate these diseases on our own.

The United Methodist Church is in a unique position to see the challenges from both a global and local perspective, which is why the Church joyfully contributes to the Global Fund and also continues to seek out direct opportunities to provide community-based health services. UMC initiatives place great importance on community and faith-based health organizations, believing that strategies developed on a national or centralized level must also integrate and involve the local level, where the best solutions are often created and generated. Partnership with the Global Fund has enhanced the breadth and depth of Imagine No Malaria programs, engaging local communities in the training of health workers and community education. Local buy-in is often the primary means that propel our efforts to substantially reduce deaths from malaria and build capacity for future interventions.

Our financial commitment of up to \$28 million to the Global Fund to fight malaria is an affirmation of our efforts to reduce death and suffering from this disease that decimates the lives of women and children.

<sup>\*</sup>Funds raised by the Imagine No Malaria campaign flow through the Global Fund to support malaria programs in nine African countries in which there are UMC Conferences: Angola, Côte d'Ivoire, Democratic Republic of Congo, Liberia, Mozambique, Rwanda, Sierra Leone, Uganda, Zimbabwe.

## IMPACT ON OUR CHURCH

## REVITALIZED CHURCHES THROUGH UNIFIED PURPOSE AND ACTION

A small church worshiping less than 25 each Sunday and with no children, Ardsley UMC in Ardsley, NY saw the opportunity to reach out in their community at the local Ardsley Day event through the interactive message of Imagine No Malaria. At an INM-themed table, a colorful mosquito attracted children to their many activities and gave church members the opportunity to build relationships with families in the community in an unprecedented way.





# INVITED CHURCHES TO PARTICIPATE IN GLOBAL MISSIONS

For some churches, INM provided an opportunity to engage in global missions for what may have been the first time. But Edenton Street UMC in Raleigh, NC seized on the opportunity to continue a legacy of reaching out, dating back to 1831 when their pastor, Melville B. Cox, resigned from the pulpit and became the first American Methodist missionary sent to Africa. In recognition of this legacy, the people of Edenton came together to provide a \$100,000 Christmas Eve offering for INM.

# GAVE CHURCHES THE OPPORTUNITY TO PUT THEIR CREATIVITY ON DISPLAY

Imagine No Malaria inspired churches to be creative in ministry — countless churches chose to do something different and creative from sky diving to head shaving to preaching from the roof to "moving" members' seats. George Button is a long-time lay leader and youth sunday school teacher who used his creativity challenge his church to double their gift to INM, offering to shave his head if they reached their new goal. A few weeks later a ceremonial head shaving was held during worship in celebration of the church's life-saving gift.



## HELPED THE CHURCH AT ALL LEVELS TO IDENTIFY AND TRAIN NEW LEADERS

When Ken Edmonds of McLouth, KS agreed to be part of a committee charged with leading INM efforts in his local church, he didn't know what to expect but his passion quickly became evident to himself and to the whole congregation. "I won't stop until we make our goal. Then we will start over. I have already warned the membership that this is not going away... Just like those mosquitos, I will rear my ugly head again to ask for prayers and money! This has been great for my soul!" Just two months later, McLouth UMC surpassed their goal, leaving Ken "proud as a peacock!"



# GAVE CHILDREN AND YOUTH THE OPPORTUNITY TO LEAD AND INSPIRE THEIR CHURCH

Take young Olive Kronz, age 6, for instance. A member of Wesley UMC, Hartsville, the first-grader was propelled to step up after seeing a TV commercial that said a quarter can help save a life; she has since raised more than \$4,000 to fight the disease by collecting and crushing aluminum cans with her mother. Not only has she inspired her church, but also her whole community. "(Children like Olive) see no barriers to accomplishing God-sized dreams," which is often what makes them so effective in advocacy, said Olive's pastor, the Rev. Fran Elrod.



"The largest offering in Annual Conference history"... A fact repeated in Conferences around the country. The Holston Conference not only collected the largest Conference offering in its history — it surpassed the previous total by more than three times! Imagine No Malaria challenged, inspired, and presented the opportunity for United Methodists to successfully organize, connect, and fundraise around a common mission.

# GAVE INDIVIDUALS THE OPPORTUNITY TO CONNECT SPIRITUALLY AND TANGIBLY TO THE WORK OF THE CHURCH

Monica Kleman is a busy mother of five. Monica believed so strongly in the work of Imagine No Malaria that she was inspired to get a holiday job exclusively to support the ministry, raising over \$1,000. Monica is one of many whose faith was challenged and deepened through Imagine No Malaria. Through Monica, and so many others, we are reminded of the words of *Ephesians 3:20* that God can do immeasurably more than we could ever ask or imagine.



## SPECIAL THANKS

A very special thank you to the thousands of donors who have supported Imagine No Malaria, to church leaders who have inspired people to get involved and scores of volunteers who have given their time to support this effort, to staff who have lent their time and talents in support of INM's mission, and perhaps most especially to the Field Coordinators who championed this mission in their local Conferences:

Susan Hunt Alabama-West Florida

Martha Taylor Arkansas

Sylvia and David Simpson Baltimore-Washington

Sasha Arjannikova California-Nevada

Toni Bond Leonard & Katie Kevorkian California-Pacific

Rolly Loomis
Desert Southwest

Molly Turner
West Michigan and Detroit

Kylie Foley Florida

Ashley Gish Great Plains

Rebecca Nichols
Greater New Jersey

Julia Frisbie Greater Northwest Episcopal Area

LeRae Collins
Holston

Brittanie Wilczak Illinois Great Rivers

Katie Dawson

Leia Williams

Minnesota

Jill Wondel and Jennifer Long

Bonnie Marden New England

Lynda Gomi New York

Adlene Kufarimai North Alabama

David Harvin
North Carolina

Jamie Jenkins North Georgia

Rachel Birkhahn-Rommelfanger Northern Illinois

Maria Brocato North Texas

Kerry Greenhill Rocky Mountain Jeri Katherine Sipes
South Carolina

Wilson Marimi
Southwest Texas

Dilip Abeyasekara Susquehanna

Holly Neal
Tennessee and Memphis

Laurel O'Connor Upper New York

Maria Maxwell Virginia

Laura Meengs Western Pennsylvania

Dave Boling West Ohio

Nicole Wilken
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Kristen Cates Yellowstone

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Through the work of Imagine No Malaria, we have helped to make great strides in the fight against malaria over the past 8 years. However, malaria continues to claim lives and promote a cycle of poverty in many communities in Sub-Saharan Africa. The need for malaria prevention and control measures is still relevant and the INM will continue to play a significant role in the fight against malaria beyond 2016.

As the UMC Global Health focus for the next quadrennium, the people of The United Methodist Church are working through the Abundant Health initiative to bring better health and wholeness to people in every place, from our own backyards to around the world.

#### HERE ARE FOUR WAYS YOU CAN HELP TO ENSURE ABUNDANT HEALTH FOR ALL:

**1** EDUCATE AND INFORM

Learn about global and local health challenges, what your church is doing to prevent them, and how you can take part. **Check out: UMCAbundantHealth.org.** 

- **2** ADVOCATE FOR GLOBAL HEALTH
  - United Methodists are called to promote awareness of global health issues and to support funding of health programs.
- 3 ENGAGE IN YOUR COMMUNITY

Ask how your church supports healthcare treatment, education, and preventative measures in your community. By promoting exercise and proper nutrition, your church can play a proactive role in the physical well-being of both children and adults.

4 BE A MODEL FOR HEALTH AND WHOLENESS

Share the story of how you and/or your church are helping people in your community and beyond live a healthier life. Visit: UMCAbundantHealth.org/submit-success-story.