



# GEOGRAPHIC EVALUATION OF L'INITIATIVE INTERVENTIONS IN MADAGASCAR

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EVALUATION DATES: JANUARY - AUGUST 2025



**COUNTRY:**  
MADAGASCAR



**BUDGET :**  
€29,400,000  
since 2012, including  
multi-country



**LEAD  
ORGANIZATION:**  
L'Initiative

**PARTNERS:**  
The Global Fund,  
Ministry for Europe  
and Foreign Affairs



**START DATE:**  
01/01/2025

**END DATE:**  
31/08/2025

## THE PORTFOLIO

### Background

Madagascar is a low-income country with a triple epidemic (HIV, tuberculosis and malaria) that faces ongoing structural challenges: low level achievement of the 95-95-95 targets, resurgence of malaria, limited treatment success rates for tuberculosis, insufficient human resources and uneven access to care in remote areas. It was against this backdrop, in a context dependent on external funding and where the health system requires strengthening, that the evaluated interventions (projects and technical assistance) aimed to support the Ministry of Public Health to consolidate its response to the three pandemics through health systems strengthening and community approaches. Interventions focused on service quality and continuity, improving the availability of supplies, strengthening local capacity and mobilizing community stakeholders and the private sector to strengthen the resilience of the national health system.

### Evaluation methodology

The evaluation took a participatory, inclusive and learning-oriented approach, involving key stakeholders throughout the process. Data collection involved an in-depth literature review, individual and group interviews and participatory workshops (a discussion workshop with civil society and communities and a co-creation workshop on strategic recommendations for the future L'Initiative portfolio in Madagascar) using collective intelligence methods. An analysis of L'Initiative's portfolio in Madagascar, a donor analysis and an innovative methodological approach to analyzing stakeholder networks were also undertaken. The "most significant change" methodology documented outcomes observed by beneficiaries. Two assignment visits were carried out between March and June 2025.

## OBJECTIVES

### Specific objectives

This evaluation has one strategic objective, with the central aim being to inform L'Initiative teams on future interventions in Madagascar, on its positioning around demand versus approach, on the specification of interventions and on the catalytic role of interventions it could roll out. The evaluation was based around two intrinsically linked focus areas:

- ▶ A retrospective focus on interventions carried out, assessing the impact and changes that L'Initiative contributed to, taking into account the multi-stakeholder context.
- ▶ A forward-looking focus to identify the challenges, needs and catalysts for strategic change for future funding rounds, in order to strengthen the relevance and impact of future interventions.

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## EVALUATION FINDINGS

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### Future health concerns in Madagascar

Health concerns to respond to the three diseases relate primarily to the availability of supplies, the quality and quantity of human resources, the quality of data for better decision-making and engaging the private sector in the disease surveillance system.

### Status of interventions

Interventions improved the consistency of services with the needs of target populations and partially strengthened the capacity of civil society. The interventions have highlighted the importance of improving recognition and the value attributed to community expertise and of strengthening dialogue with the public authorities at all levels. Strengthening links between civil society organizations opens up opportunities for collaboration, which have not been sufficiently explored. The impact on national policies remains limited, despite some targeted progress, and technical assistance assignments have contributed to institutional capacity strengthening.

### Analysis of L'Initiative's portfolio in Madagascar

The portfolio analysis highlights a high concentration of HIV and TB interventions and fewer relating to malaria, which highlights the need to reconsider the thematic balance. NGOs in Madagascar have limited access to direct funding and technical assistance, which highlights the need to strengthen capacity building and organizational support mechanisms. There is still limited participation in calls for projects, indicating the need for more inclusive and incentivizing approaches. Finally, because interventions are fragmented and their multiple French actors in the health sector, it makes it hard to assess the overall coherence and clarity of the portfolio, which highlights that there is potential to improve coordination and strategic alignment.

### Donor analysis

60% of health financing provided by technical and financial partners (TFPs) is almost exclusively structured around a project-based financing and intervention model. This means there is a high level of dependence and volatility of national resources around external financing, which presents several key risks: risk of siloed or duplicated interventions and risk of past investments in the health sector not being sustainable due to the global decline in official development aid. In addition, there is a lack of operational coordination space that incorporates all actors in the health sector, including CSOs.

### Analysis of stakeholder networks

HIV actors (in particular Doctors of the World, the National AIDS Program, MAD'AIDS) and other national programs/institutions (NACP, Ministry of Justice) hold strategic positions in terms of the flow of information and coordination. There is strong local cohesion, however, there is segmentation between communities. The dependence on a small number of centralized stakeholders creates systemic vulnerability. Strategic positions are mainly held by international stakeholders, raising questions about local ownership of partnership dynamics.



## Conclusions and recommendations

The evaluation makes six major recommendations to L'Initiative to strengthen coherence, sustainability and added value of its interventions in the response to the three pandemics in Madagascar.

**1. Strengthen the integration of institutional and community interventions (projects).** It is suggested that L'Initiative consolidates its links with the Ministry of Public Health through structured ongoing dialogue, involving national, regional and local authorities at all stages of the project cycle. Integrate project indicators into DHIS2 and establish cross-project steering committees to promote institutional ownership and sustainability of interventions.

**2. Strengthen the capacity and organizational development of civil society organizations (CSOs).** The evaluation recommends including Madagascar in the SOFIA mechanism, and in future calls for projects including dedicated budget lines for organizational strengthening and covering core costs of CSOs. This would support governance, accountability and increased participation in public health policies.

**3. Strengthen the leadership of the Ministry of Public Health.** L'Initiative could support technical assistance assignments aimed at consolidating national coordination bodies, in particular the Ministry of Public Health's partnership and contracting service. This support would help to streamline the interventions of CSOs and partners, while strengthening national ownership of health dynamics.

**4. Allocate future funding to malaria and tuberculosis.** The evaluation recommends prioritizing these two pandemics in future calls for projects, given their high incidence, the need for operational innovation, and the potential for leveraging health system resilience.

**5. Support GC8 preparation and strengthen CSO participation.** L'Initiative should support CSOs and communities with GC8 preparations, including through dedicated technical assistance and advocacy to ensure a transparent and inclusive negotiation process. This support would strengthen the representation of community stakeholders in Global Fund governance bodies.

**6. Strengthen coordination with Team France, the EU and TFPs.** Finally, it is suggested that L'Initiative strengthens consultation between French stakeholders (AFD, Expertise France, the embassy) and to organize regular meetings with partners from the health sector. A joint «Team France» communication and increased synergy with TFPs would make it possible to pool resources and increase collective visibility in a context where international funding is scarce.

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