Since 2000, the world has made tremendous progress against malaria, thanks to committed global partnership. Together, we have prevented 1.5 billion cases of malaria and saved 7.6 million lives. This represents millions of children who have grown up to lead happy and productive lives as a result of our malaria control and prevention efforts.

This success put the world on a path to ending malaria. Since 2000, 21 countries reported zero malaria cases for three consecutive years, 10 of these have been certified malaria free by WHO. With ongoing commitment, optimized use of current resources and new investments, we can deliver on the promise of ending malaria within a generation.

In 2019, global malaria deaths slightly decreased to 409,000 – the lowest ever number of malaria deaths – while malaria cases slightly increased to 229 million.

Investments in the fight against malaria strengthen health systems and build more resilient economies that are better prepared to respond to health threats as they arise. In the face of COVID-19, countries around the world are leveraging primary health care, lab capacity and other infrastructure built to fight malaria to now respond to the pandemic.

With support from global partners, malaria-affected countries must continue to protect gains against malaria while actively fighting COVID-19. We must sustain malaria investments and invest even more funding for pandemic preparedness in the malaria fight and its infrastructure.
However, countries' heroic efforts and strong leadership are helping prevent a projected doubling of malaria deaths in sub-Saharan Africa this year and kept eliminating countries on track to achieve or maintain zero malaria cases and deaths.

Despite the COVID-19 pandemic, >90% of life-saving campaigns went on in 28 countries: 200 million mosquito nets are on track to be delivered by the end of the year and over 20 million children have been reached with seasonal malaria chemoprevention.

We cannot let the COVID-19 pandemic distract us from protecting hard-fought gains and accelerating efforts to end this disease within a generation. Ending malaria is critical for countries to better manage other diseases, as well as current and emerging threats.

Using real-time data is vital to the malaria fight and enables countries to innovate and adapt approaches in real-time and to local circumstances. This helps ensure maximum impact of limited resources, particularly during COVID. We also must also continue investing in innovations that will help us stay ahead of a changing vector and parasite, particularly in the face of growing insecticide and drug resistance.

We must increase equitable access to proven tools that help save hundreds of thousands of lives each year and ensure millions of people are able to seek and can safely receive malaria diagnostic and treatment, especially during COVID. Despite current challenges, we must keep our sights firmly set on achieving a malaria-free world.
Detailed messages

Since 2000, the world has made tremendous progress against malaria, thanks to committed global partnership. Together, the global malaria community has prevented 1.5 billion cases of malaria and saved 7.6 million lives.

This success put the world on a path to ending malaria. Since 2000, 21 countries reached zero malaria cases for three consecutive years, 10 of these have been certified malaria free by WHO.

As recently as two decades ago, malaria exacted a devastating toll, killing millions and costing billions in lost productivity and economic hardship. The world has made transformative strides since then, thanks to significant increases in investment, the development and scaled-up delivery of new tools and a global coalition of partners committed to the same goal. Time and again, leaders at the local, national and global level have shown that significant progress against malaria is possible. It’s a fact: with the needed investments, innovation and accountability, we can change the course of this disease, shrink the malaria map and, ultimately, get to a malaria-free world.

- Global efforts and commitment to fight malaria saved more than 7.6 million lives from malaria and prevented over 1.5 billion malaria cases.
  » This remarkable progress was not by chance; partners overcame significant challenges and adapted their response
- One of the biggest global health success stories of the past two decades, global commitment reversed the disease's trajectory and drove a 60% reduction in malaria deaths since 2000.
- Between 2000 and 2019, the number of countries with fewer than 100 indigenous malaria cases – a strong indicator that malaria elimination is within reach – increased from 6 to 27.
- WHO's South-East Asia region is on track to achieve a 40% reduction in malaria case incidence by 2020 – a global target set in 2016 – largely thanks to remarkable year-over-year progress in India and in the Greater Mekong Subregion.

- Since 2000, 21 countries reached zero malaria cases for three consecutive years. 10 of these countries accomplished this in the last five years, meeting the WHO Global Technical Strategy's elimination target for 2020.
  » The European region was declared malaria-free in 2015.
  » Algeria, Argentina, Paraguay and Uzbekistan were certified malaria-free since 2018.
  » El Salvador, Malaysia and China, which have registered zero malaria cases for 3 consecutive years, have kept malaria at bay despite COVID-19.
- Some regions, such as the Greater Mekong Subregion, have reduced malaria cases and deaths by over 90% since 2000.
- Experts agreed that with continued political leadership, increased funding to expand access to life-saving tools and the development and delivery of transformative tools, we can – and must – end malaria within a generation.
Long-time investments in the malaria fight continue to bring outsize returns and are paying off during the pandemic. However, despite remarkable progress, we are not advancing the fight against malaria in most high burden countries and progress has levelled off in recent years.

*Investments in the fight against malaria deliver outsize returns. They strengthen health systems and build more resilient economies that are better prepared to respond to health threats as they arise. In the face of COVID-19, countries around the world are leveraging primary health care, lab capacity and other infrastructure built to fight malaria to now respond to the pandemic. Ensuring this impact continues will require more support.*

- In 2019, global malaria deaths slightly decreased to 409,000 – the lowest ever number of malaria deaths – while malaria cases slightly increased to 229 million.

- In addition to saving lives, investments over the past 2 decades have strengthened health systems, improved economies, enabled countries to achieve zero malaria and increased global health security.
  
  » Preventing over 1.5 billion malaria cases since 2000 significantly increased health care capacity in countries, drastically reducing the burden of the disease on health systems while boosting health care worker training and adding lab capacities and disease surveillance.

  » Decades of country leadership and global investment in research, innovation, health systems and mass scale up of innovative life-saving tools are saving hundreds of thousands of lives from malaria every year, compared to 2000.

  » Since the High Burden to High Impact initiative launched in 2018, malaria deaths in the 11 highest malaria burden countries declined from 263,000 to 226,000.

    - Cases in India were reduced by 1.2 million and Mali by 800 000, there was an increase in cases in Nigeria (2.4 million) and the Democratic Republic of the Congo (1.2 million) over the last two years.

- Significant reductions in malaria cases helps countries be better positioned to deal with COVID and other future health threats.

- The return on these investments goes far beyond a single disease, which is currently being demonstrated in the response to COVID-19:
  
  » Many countries, including Suriname and Uganda, leveraged their malaria programme experience in the fight against COVID-19;

  » Niger combined the SMC campaign with child malnutrition surveillance amidst the COVID-19 pandemic;

  » South Sudan used mosquito net distribution campaign to reach remote, underserved communities with COVID-19 prevention messaging;

  » Kenya, Ghana and Malawi continued to immunize close to half a million children against malaria through a pilot malaria vaccine programme.

- Despite a tenfold in global funding for the malaria fight since 2000, funding for the global malaria response has plateaued in recent years 2010, falling US$2.6 billion a year short of the total amount targeted to reach all those at risk with the life-saving malaria tools they need.

  » The existing gap in total financing for malaria, a disease that is concentrated in low-income countries, will be further exacerbated by the economic fallout of the COVID-19 pandemic.
The ongoing spread of COVID-19 creates added challenges for the malaria response, putting millions more people at greater risk for this preventable and treatable disease, and further threatening progress-to-date against malaria. However, countries’ heroic efforts and strong leadership are helping prevent a projected doubling of malaria deaths in sub-Saharan Africa this year and kept eliminating countries on track to achieve or maintain zero malaria cases and deaths.

The pace of progress against malaria has slowed in recent years, well before the emergence of COVID-19. In 2020, barriers to continued progress have only grown. Extraordinary efforts by countries at highest risk have helped prevent the potential for a disastrous resurgence of malaria for now, but the threat is far from over. Scaled-up support for their work is essential, both to protect past progress and accelerate toward a malaria-free world.

- In the past few years, the rate of progress against malaria had slowed significantly—particularly in countries that carry the highest burden of the disease on the African continent, which accounts for over 90% of global malaria cases and deaths.
- Countries’ heroic efforts this year are helping avert the worst-case scenario of a doubling of malaria deaths and prevent health systems from collapsing.
- Countries proved they don’t need to choose between protecting their populations from COVID-19 or malaria; they can do both.
  » In April, a modelling analysis by WHO and partners predicted that malaria deaths in sub-Saharan Africa could double in 2020 – to rates last seen almost 2 decades ago – if access to life-saving insecticide-treated nets and antimalarial treatment was severely curtailed.
  » Despite the unfolding COVID-19 pandemic, >90% of life-saving campaigns went on across Africa, Asia and Latin America: 200 million mosquito nets are on track to be delivered by the end of this year and over 20 million children have been reached with seasonal malaria chemoprevention.
  » Although malaria deaths are projected to increase in 2020 due to disruptions in malaria diagnostic and treatment services ranging between 5-50% across countries, the situation would have been much worse if not for the unprecedented mobilization by countries and partners this year.
COVID has reinforced the critical importance of timely, accurate and localized data and innovation to effectively fight an infectious disease. Investing in real-time data use is vital to the malaria fight – particularly during COVID – and enables countries to adapt approaches to local circumstances and to make maximum impact of limited resources.

Many of the tools and approaches we need to effectively fight malaria already exist. But as COVID-19 has showed the world, even the most effective tools fall short without strong data to inform their use. Leveraging lessons from COVID-19 to understand and adapt to what’s needed at a local level, we can scale up use of data, tailor responses and achieve impact in the fight against malaria.

- Over the last years, we have seen major progress in the use of data for decision-making by malaria programmes and their partners, for example:
  - Benin pioneered a fully digitized, door-to-door mosquito net distribution campaign, paving the way for COVID-safe malaria campaigns.
  - Mozambique, Tanzania, and Zambia, among others, stratify the malaria burden sub-nationally, enabling them to better target interventions for maximum impact.
  - Following stockouts of ACTs in Namibia, the E8 countries mobilized to allow rapid procurement of ACTs from South Africa amidst the COVID-19 pandemic.

- We need to use real-time data and optimize tools for local circumstances. Being able to innovate and adapt our approaches in real-time will ensure maximum impact of limited resources, particularly during COVID.

- We also must also continue investing in innovations that will help us stay ahead of a changing vector and parasite, particularly in the face of growing insecticide and drug resistance.

Every malaria death today is avoidable. It is unacceptable that hundreds of thousands of the most vulnerable – children and pregnant women – continue to die each year from this preventable and treatable disease. We must recommit to accelerating efforts to achieve a malaria-free world.

Malaria is preventable and treatable, making every death an unacceptable tragedy. As long as malaria exists, it will continue to disproportionately burden the most vulnerable, especially pregnant women, babies and children under five and robbing families and communities of their future. Ending malaria also is critical for countries to effectively manage other diseases as well as current and emerging threats.

- While fewer people suffer and die from malaria than ever before, over 400,000 people still died last year from a preventable and treatable disease. That number has likely increased with the onset of COVID.
- Malaria cases and deaths will go up unless countries and partners continue to focus on sustaining malaria campaigns and treatment.
- Focusing on reducing malaria cases and deaths among these populations offers one of the most significant opportunities to improve maternal health and child survival and will go a long way in terms of achieving gender equality, education and poverty eradication goals.
- Only 1 in 3 women in sub-Saharan Africa is currently protected against malaria during pregnancy with at least 3 recommended doses of preventive treatment (IPTp).
- Malaria is a leading cause of child mortality across many African countries.
- Each year, maternal malaria is responsible for 20% of stillbirths in sub-Saharan Africa.
- As long as malaria exists, it will burden the most vulnerable communities, limiting their capacity to respond to new threats and will always have the potential to resurge in times of crisis.