

RBM Multi-Sectoral Action Working Group

Brief update of mid-term online membership meeting

16 August 2023, 14:00-15:30 CET

ABOUT THE RBM MULTI-SECTORAL WORKING GROUP

The MSWG convenes and coordinates RBM Partnership members around a multi-sectorial action in the field of malaria to facilitate learning and share best practices from the field. The MSWG brings together different stakeholders across different sectors including health, science and technology, international cooperation, infrastructure, water and sanitation, environment, food and agriculture, education, security, finance, trade, social protection and justice. The aim is to align partners in their actions for new interventions as well as put new life into those that already exist and coordinate and manage these in new and innovative ways. The MSWG welcomes new members and potential partners to join the MSWG distribution list, which counts 400 entries as of August 2023, to receive news on multi-sectoral actions, project updates, publications, guidelines and job advertisements. If interested, please send an email to konstantina.boutsika@swisstph.ch

To keep the momentum, **the mid-term online membership meeting** was held online, and **welcomed 364 registrants (198 attendants)**. The registrants came from 6 continents (see Figure 1).

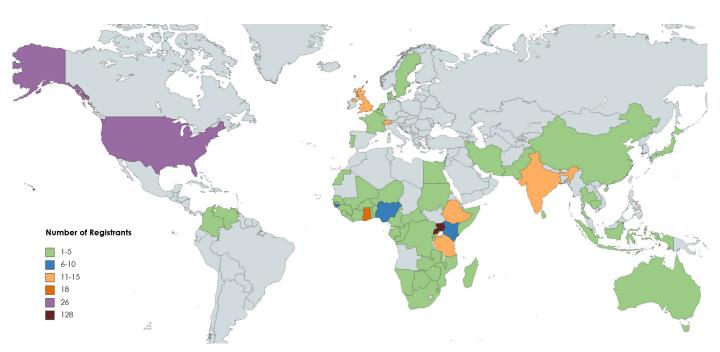


Figure 1 Country Map of Registrants at MSWG mid-term

AFR Benin, Botswana, Burkina Faso, Burundi, Cameroon, Central African Republic, Comoros, Congo, DRC, Côte d'Ivoire, Eswatini, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Namibia, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Somalia, South Africa, Sudan, Tanzania, Uganda, Western Sahara, Zambia, Zimbabwe

AMR Colombia, Puerto Rico, United States, Venezuela

EMR Egypt, Iran, Pakistan

EUR Belgium, Denmark, France, Israel, Netherlands, Portugal, Sweden, Switzerland, Turkey, United Kingdom

SEAR Cambodia, India, Indonesia, Sri Lanka, Thailand, Togo

WPR American Samoa, Australia, China, Japan



COUNTRY REGIONS

74% of registrants were from AFR, 10% from EUR, 8% from AMR, 6% from SEAR and 1% each from EMR and WPR (see Figure 2).

CONSTITUENCIES

The majority of the registrants were drawn from the south: governmental agencies (26%) and civil society (22%), research/academia (14%) and private sector (8%). In addition, from the north: civil society accounted for 5% followed by private sector (5%) and research/

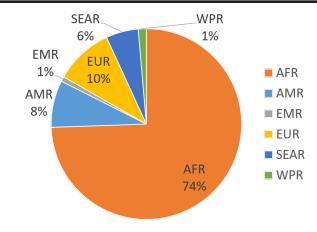
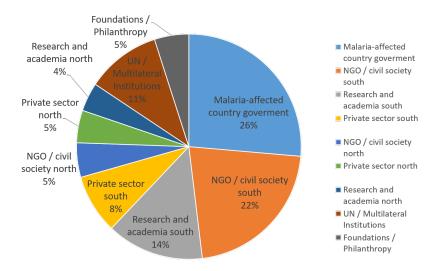


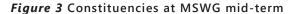
Figure 2 Country Regions at MSWG mid-term



academia (4%). UN/multilateral institutions (11%) and foundations/philanthropy (5%) (see Figure 3).

MALARIA-AFFECTED COUNTRIES

49 of the 65 represented countries were malaria-affected (see Figure 4) which accounted for 81% of registrants. Uganda made up the majority followed by Ghana, Tanzania, India, Ethiopia, Nigeria, Guinea-Bissau and Kenya (see Figure 4).



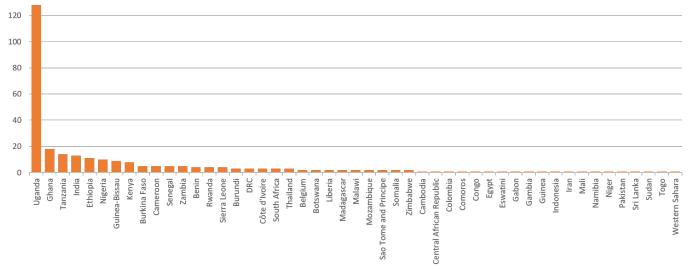


Figure 4 Malaria-affected countries at MSWG mid-term