World Malaria Report 2019 Key Messages

Malaria increasingly is a disease of poverty and inequity, with the most vulnerable at greatest risk of dying from a mosquito bite. According to this year’s World Malaria Report, malaria deaths and cases are declining but at a slowed rate, and malaria still strikes hardest against pregnant women and children in Africa. Focusing on reducing malaria cases and deaths among these populations offers one of the most significant opportunities to improve maternal health and child survival.

Every year, global investments and action against malaria are making a big difference—with these, malaria deaths and cases would be significantly higher. In addition, more countries than ever are within reach of elimination. To reach ambitious targets toward reaching zero malaria, we must accelerate progress in the next few years. We cannot leave anyone behind. Stepped up action is critical to stay ahead of an evolving parasite and vector, save and improve millions more lives, unlock trillions of dollars in economic potential, and achieve a malaria-free world within a generation.

Key messages and proof points

Malaria increasingly is a disease of poverty and inequity, with the most vulnerable at greatest risk of dying from a mosquito bite. According to this year’s World Malaria Report, malaria deaths and cases are declining at a slowed rate, and malaria still strikes hardest against pregnant women and children in Africa. Focusing on reducing malaria cases and deaths among these populations offers one of the most significant opportunities to improve maternal health and child survival.

New data in this year’s World Malaria Report shows that malaria prevalence is uneven, and we need to prioritize reaching those most at-risk—pregnant women and babies in sub-Saharan Africa—with life-saving interventions. In addition to improving maternal and child survival around the world, preventing and ending malaria can help stop the cycle of extreme poverty by keeping everyone healthy, children in school and ensure more sustainable livelihoods.

- A child still dies every 2 minutes from malaria.
- There were 228 million cases of malaria in 2018 globally compared to 231 million cases in 2017.
- In 2018, malaria killed 405,000 people—compared to 416,000 in 2017 and 585,000 in 2010—globally.
- Five sub-Saharan African countries account for 50% of malaria cases - Nigeria, DRC, Uganda, Mozambique and Cote d’Ivoire
  - The WHO Africa region has 22x higher case incidence rate than the Eastern Mediterranean region and 88x higher than the Western Pacific region.
- Pregnant women and children under five in sub-Saharan Africa are disproportionately impacted by malaria, with pregnancy reducing a woman’s immunity to malaria, making her more susceptible to malaria infection and increasing the risk of illness, severe anemia and death. Malaria infection during pregnancy carries substantial risks for the pregnant woman, her fetus and the newborn child.
  - Last year, an estimated 11 million pregnant women in sub-Saharan Africa – 29% of all pregnancies – were infected with malaria.
Nearly 900,000 children in 38 African countries were born with a low birth weight due to malaria in pregnancy.

While malaria deaths in children under five dropped in 2018, children under five still accounted for two-thirds (67%) of all malaria deaths worldwide.

There is a strong correlation between malaria and anemia in children under 5. In 2018, approximately 14 million children in sub-Saharan Africa had moderate or severe anemia. Severe anemia is a major contributor to child mortality.

A range of effective tools – from diagnostics to long-lasting insecticidal nets to anti-malarial drugs and indoor residual spraying – are not reaching universal coverage of the at-risk population.

The percentage of eligible women receiving the 3 recommended or more doses of Intermittent Preventive Treatment in Pregnancy (IPTp) increased from 22% to 31% in just one year, but still is far from universal coverage.

Nearly 2 billion mosquito nets have been delivered to malaria affected countries since 2004 and an estimated 61% of pregnant women and children under five living in malaria-endemic areas of sub-Saharan Africa slept under an ITN in 2018 compared to 26% in 2010. However, half of people at risk of malaria in sub-Saharan Africa are sleeping under a mosquito net in 2018 and coverage has improved only marginally since 2015.

Every year, global investments and action against malaria are making a big difference—without these, malaria deaths and cases would be significantly higher.

In most parts of the world, a child who gets malaria today has a better chance of survival than at any other point history. By significantly expanding the distribution and use of effective tools such as mosquito nets, treatment and diagnostic testing over the past two decades, global efforts are responsible for preventing millions of malaria cases and deaths since 2000. Paired with improved health systems and surveillance, we’re getting smarter about how to fight the disease.

Sustained global efforts to drive malaria cases and deaths down over the last two decades saved over 7 million lives and prevented more than 1 billion cases.

Every year, global investments and political will to prioritize fighting malaria are making a big difference and holding the line against the disease—without these, malaria deaths and cases would be significantly higher.

Estimates show that in 2018, global efforts saved almost 600,000 lives per year and prevented almost 100 million malaria cases per year compared to 2000 levels.

Had case incidence and death rates remained at 2000 levels globally, there would have been an estimated 321 million cases of the disease in 2018 (vs. 228 million) and 995,000 deaths (vs 405,000).

The global incidence rate of malaria (number of cases per 1000 population) fell from 71 in 2010 to 57 in 2014 and remained at similar levels through 2018.

Two high-burden countries achieved significant reductions in malaria cases in 2018 over the previous year: India (2.6 million fewer cases) and Uganda (1.5 million fewer cases).

More countries than ever are within reach of elimination.

More than half of all countries have eliminated malaria. Of the remaining 91 countries and territories with ongoing malaria transmission, 49 countries have made significant progress toward zero malaria, demonstrating that elimination is feasible. Many countries are eliminating malaria entirely or at sub-
national levels by prioritizing elimination and increasing their investments in the fight against malaria, collaborating with neighboring countries to improve surveillance and strengthen primary health care.

- Over the last decade, 23 countries have achieved zero malaria and the number of countries with less than 10,000 cases continues to increase, demonstrating that elimination is possible with sustained effort.
- In the past 2 years, 4 countries have been certified as malaria free and another 5 are either at or close to achieving zero malaria cases and deaths
  - Paraguay, Uzbekistan, Algeria and Argentina were certified malaria-free in 2018 and 2019.
  - At least 10 countries that are part of the WHO “E-2020” initiative are on track to reach the 2020 elimination milestone of the global strategy: Algeria, Belize, Bhutan, Cabo Verde, China, El Salvador, the Islamic Republic of Iran, Malaysia, Suriname and Timor-Leste.
- Globally, the elimination net is widening, with more countries moving towards zero indigenous cases: in 2018, 49 countries reported fewer than 10,000 such cases, up from 46 countries in 2017 and 40 countries in 2010. The number of countries with fewer than 100 indigenous cases – a strong indicator that elimination is within reach – increased from 17 countries in 2010 to 25 countries in 2017 and 27 countries in 2018.
- In the Greater Mekong Subregion, where anti-malaria drug resistance poses a challenge, progress has been remarkable: the number of cases has fallen by 76% since 2010 and deaths have plummeted by 95%.

To reach ambitious targets toward reaching zero malaria, we must accelerate progress in the next few years. We cannot leave anyone behind.

Landmark reports on malaria eradication earlier this year have confirmed that a malaria-free world can and should be achieved, and that the benefits of malaria eradication will greatly exceed the investment needed to reach it. In the last 2 years, global and country leaders and partners made new commitments to prioritize fighting malaria. We need to hold leaders accountable to these commitments and advocate for more action to accelerate progress and ensure we can achieve ambitious global targets.

- $14B in new funding through 2022 – World leaders committed to increase funding for The Global Fund to Fight AIDS, Tuberculosis and Malaria – accounting for 65% of all external funding for malaria programmes, for the next three years, which will result in additional funding for malaria control and elimination efforts.
- Halve malaria by 2023 in 53 Commonwealth countries – leaders committed to reduce malaria cases and deaths in Commonwealth countries by half by 2023.
- Malaria-affected countries will use locally appropriate mix of interventions and optimal means of delivery – The top 11 highest malaria burden countries are working to accelerate progress to reduce malaria through the High Burden to High Impact approach.
  - 2 of these countries – India and Uganda – achieved significant reductions in malaria cases in 2018 over previous years (India 2.6 million fewer cases and Uganda 1.5 million fewer cases)
  - 2 of these countries reported significant increases (Nigeria 3.4 million cases; Ghana .5 million more cases)
- Increased R&D budgets – Investments in malaria R&D reached US$663 million in 2018, marking the 3rd consecutive increase in funding and the largest budget to-date since 2009.
• New tools are being rolled out to address growing challenges including insecticide and drug resistance –
  o Three countries introduced RTS,S, the world's first malaria vaccine shown to provide partial protection against malaria in young children through a WHO-coordinated pilot programme.
  o Countries are piloting the use of new tools such as next generation mosquito nets to combat insecticide resistance.
• Malaria-affected countries are also investing more of their own financing:
  o The highest-ever amount of pledges from African countries were made to the Global Fund for the 2020-2023 granting cycle;
  o African Heads of State and Government made commitments at the February 2019 AU Summit to increasing investments in domestic financing.
  o Several countries launched national End Malaria Funds to diversify funding sources to combat malaria.
• Zero Malaria Starts with Me campaigns, rolled out in 11 African countries, are engaging people at every level in the fight against malaria.

Stepped up action is critical to stay ahead of an evolving parasite and vector, save and improve millions more lives, unlock trillions of dollars in economic potential, and achieve a malaria-free world within a generation.

To achieve ambitious global targets, we must increase accelerate the rate of progress against malaria by increasing funding levels to US$5 billion per year, getting smarter about how we fight this disease, realizing the promise of renewed commitments and action against malaria; and, catalyze new actions and commitments.

We need to:

• Increase funding – to close the US $2 billion a year gap in funding to reach all those at risk with the life-saving malaria tools they need. The new sources of funding must come from a mix of malaria-affected country financing, innovative financing solutions and ensuring donor commitments are met or increased;
• Equitably expand access to quality health services – to reach the most vulnerable populations – especially pregnant women and children under five in sub-Saharan Africa – with life-saving interventions by using new tools such as the Malaria Matchbox to identify the people that global efforts are still missing, and continuing to step up efforts in the highest burden countries;
• Strengthen country capacity to collect, analyze and use real-time quality data -- to guide and improve efficient targeting and scaling up of life-saving interventions and ensure global efforts are getting the right tool to the right person at the right time;
• Invest even more in researching, developing and scaling up transformative tools – to combat growing drug and insecticide resistance and prepare us for the next set of challenges in the malaria fight and transform how we beat this disease;
• Further integrate malaria interventions into health systems – to strengthen health systems, provide access to malaria prevention, diagnosis and treatment and contribute to universal health coverage.