World Malaria Day, 25 April 2020

Talking points

COVID-19 and the need for stronger national and international health and surveillance systems

The current COVID-19 outbreak underscores the critical importance of having strong surveillance and health care systems to effectively address existing infectious diseases like malaria and new and emerging ones like COVID-19.

- Efforts to limit the spread of COVID-19 are necessary to protect health systems, yet these efforts must not compromise access to life-saving malaria prevention, diagnosis and treatment services or threaten to reverse decades of hard-fought progress against malaria.
  - We must continue, safely, universal coverage campaigns for long-lasting insecticide treated nets (LLINs), seasonal malaria chemoprevention (SMC) and indoor residual spraying (IRS), focusing on reaching those at highest risk – women and children under 5 in sub-Saharan Africa. We cannot leave anyone behind.

- At the national level, the COVID-19 pandemic puts extra strain on the provision of essential malaria services, which may lead to higher morbidity and mortality.

- At the global level, potential impacts include the disruption of supply chains for life-saving commodities, such as insecticide treated mosquito nets and antimalarial drugs.

- At the community level, we must support community-based, integrated case management to ensure quality care for malaria patients and relieve pressure placed on health facilities by non-COVID-19 febrile illness.

- The challenges of multimorbidity as COVID-19 moves through malaria endemic countries will require continuous monitoring and innovation for community and facility health providers.

- Robust health systems are our primary line of defence. Every dollar invested in the fight against malaria helps build stronger and more resilient health systems, which are central to combatting existing threats like malaria and emerging ones like COVID-19. The investments in malaria increase capacity of health workers, strengthen supply chain management systems, build real-time surveillance and data management infrastructure, improve laboratories, and reinforce monitoring and evaluation.

- Outbreaks like COVID-19 threaten healthcare workers on the frontlines of the fight against both emerging diseases like COVID-19 and longstanding diseases like malaria, who are at greater risk and must have the protection they need to continue delivering vital health services. Consistent and adequate global health funding helps provide the tools healthcare workers need to carry out surveillance, address outbreaks and protect themselves from disease.

- Diseases don't respect borders. Increased malaria transmission resulting from overburdened health systems could spread into countries that are approaching zero malaria cases. Without upholding commitments to end malaria, we risk losing the major gains we have made towards malaria elimination.

- Efforts to fight malaria have been a hallmark of global cooperation of the early 21st century. More than ever, we must unite to protect our hard-won gains against malaria and effectively address existing and emerging threats to global public health.
World Malaria Day: Talking Points

1. ZERO MALARIA STARTS WITH ME
2. MARKING PROGRESS AGAINST MALARIA
3. STEPPING UP THE FIGHT
4. MALARIA INNOVATION
5. MALARIA’S IMPACT ON WOMEN AND CHILDREN
6. CLOSING THE FUNDING GAP
7. MALARIA AND UNIVERSAL HEALTH COVERAGE
8. FROM HIGH BURDEN TO HIGH IMPACT
9. MALARIA ELIMINATION IN THE AMERICAS

1. Zero Malaria Starts with Me

- The theme of World Malaria Day 2020 — Zero Malaria Starts with Me — is a movement dedicated to driving action and making change, and this starts with each and every one of us.

- In 2020, World Malaria Day will highlight, recognize and revitalize the involvement of high-burden countries in Africa, which account for about 70% of the global malaria burden. Involving political decision-makers, the private sector, civil society, the academic community and the public, World Malaria Day 2020 will highlight, recognize and revitalize malaria control and elimination efforts across the globe.

- In 2018, African Union leaders endorsed “Zero Malaria Starts with Me”, a continent-wide campaign co-led by the African Union Commission and the RBM Partnership to End Malaria, to get more people involved in the fight against the disease that kills 400,000 Africans every year.

- Since 2018, fourteen African nations have joined the Zero Malaria Starts with Me movement, with more expected to follow later this year.

2. Marking progress against malaria

- Since 2000, sustained global investments have driven malaria cases and deaths to historically low levels, saving 7 million lives and preventing more than 1 billion malaria cases. In most parts of the world, a child who gets malaria today has a better chance of survival than at any other point in history.

- Half the world is malaria-free, and today, more countries than ever before are close to elimination.
  - Algeria, Argentina, Uzbekistan and Paraguay have all been certified malaria-free over the past two years.
  - 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 malaria strategy, including 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, the number of malaria cases has fallen by 76% since 2010 and deaths have plummeted by 95%.

- Several countries with a high burden of malaria have also achieved significant reductions in malaria cases. India reported 2.6 million fewer malaria cases in 2018 over the previous year, while Uganda reported 1.5 million fewer cases.

3. Stepping Up the Fight

- Despite remarkable progress, every two minutes a child still dies of malaria. Malaria is increasingly a disease of poverty and inequity, with the most vulnerable at greatest risk of dying from a mosquito bite. Today, half the world remains at risk of malaria – 405,000 people died in 2018 from the disease and more than 90% of cases and deaths are concentrated in Africa.

- In recent years, global progress in reducing malaria infections and deaths has levelled off, particularly in countries with a high burden of malaria. Stepped up action is critical to stay ahead of an evolving parasite, save and improve millions more lives and unlock trillions of dollars in economic potential.

4. Malaria innovation

- Thanks to an array of innovations, including long-lasting insecticidal nets, rapid diagnostic testing and artemisinin-based combination therapies, as well as the improved use of data for a better targeting and delivery of these interventions, countries and their development partners have been able to prevent, detect and treat millions of malaria cases around the globe.

- In 2020, global malaria partners working together achieved the distribution of 2 billion insecticide-treated mosquito nets since 2004. These life-saving nets were responsible for almost 70% of the malaria cases prevented in Africa between 2000 and 2015.

- Two landmark reports on malaria eradication confirm 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. This will only be possible with increased investment in researching, developing and scaling up transformative tools to combat growing drug and insecticide resistance and to prepare us for the next set of challenges in the malaria fight.

- Innovative tools and training to detect and diagnose communicable and fever-related diseases reach beyond malaria.

5. Malaria’s impact on women and children

- Malaria strikes hardest against pregnant women and children in sub-Saharan Africa. We must prioritize reaching these groups with life-saving interventions, to help stop the cycle of extreme poverty by keeping everyone healthy, children in school and ensuring more sustainable livelihoods.

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

- In 2018 an estimated 11 million pregnant women (1 in 3) were infected with malaria in 38 countries across sub-Saharan Africa; as a result, nearly 900,000 children were born with a low birthweight, a leading cause of child mortality.
Intermittent preventive treatment in pregnancy (IPTp) with quality-assured sulfadoxine-pyrimethamine (SP) has been proven as a cost-effective tool in preventing maternal and neonatal deaths, and reduces maternal malaria episodes, maternal and fetal anaemia, and low birthweight.

In 2020, the RBM Malaria in Pregnancy Working Group will launch the #speedupscaleup campaign to rally a larger community of stakeholders to bring this lifesaving intervention to all eligible women in sub-Saharan Africa.

6. Closing the funding gap

- Every year, global investments and political will to prioritize fighting malaria make a significant difference - without these, malaria deaths and cases would be significantly higher. Yet more funding is needed to close the $2 bn a year gap in funding to reach all those at risk with the life-saving malaria tools they need.

- New ALMA chair President Kenyatta has called on African leaders to join him in establishing at least 15 End Malaria Councils and Funds to boost high-level, multi-sectoral engagement and advocacy at country level while increasing domestic resource mobilization. He also committed to engage Africa’s regional economic blocs to address key challenges and provide solutions in the fight against malaria.

- Last year, countries pledged a record amount to fully fund the Global Fund to Fight AIDS, TB and Malaria for the next 3 years. These funds are critical to reaching millions with life-saving malaria interventions and making progress toward the goal of halving malaria in Commonwealth countries by 2023.

7. Malaria and Universal Health Coverage

- Guaranteeing everyone at risk of malaria has access to effective malaria prevention, diagnosis and treatment will accelerate progress, strengthen health systems and contribute to achieving the global goal of Universal Health Coverage.

- Robust health systems are our primary line of defense. Community health workers who test and treat people for malaria and other infectious diseases also form an extensive network for surveillance and response to new diseases threats.

- Innovative tools and training to detect and diagnose fever-related diseases detect communicable diseases reach beyond malaria.

8. From high burden to high impact

- Stepped-up action is needed across all endemic countries, particularly in countries hardest hit by malaria. The country-led “High burden to high impact” approach, spearheaded by WHO and the RBM Partnership to End Malaria, provides a response that can help ensure future success in malaria control.

- The response is being led by 11 countries that, together, account for approximately 70% of the world’s malaria burden: Burkina Faso, Cameroon, Democratic Republic of the Congo, Ghana, India, Mali, Mozambique, Niger, Nigeria, Uganda and the United Republic of Tanzania

- Nigeria – the continent’s most densely populated nation – has a hugely important role to play in tackling this deadly disease. Representing a quarter of the world’s estimated 228 million annual cases of malaria, Nigeria is the country hardest hit by the disease. Despite significant reductions in 2018,
Nigeria still accounts for the highest number of malaria-related deaths in the world, most of them in children under the age of five.

9. Malaria elimination in the Americas

- The Americas region is at a critical crossroads. Targeted investments in the Americas to fill gaps in malaria programming would propel the elimination effort forward, taking a large step toward global malaria eradication.

- The crisis in Venezuela accounts for a sharp uptick in malaria cases in the Americas region. In one year, from 2016 to 2017, the country saw more than a 170% increase in reported cases, and now accounts for 53% of all known cases in the region.

- This year, Venezuela has received a $19.8-million allocation from the Global Fund for a 3-year malaria grant, the first non-“emergency” Global Fund funding that the country has received. Efforts to combat malaria in Venezuela must be scaled up through this grant; the cost of inaction and the risk of resurgence of the disease exacerbated by a growing crisis in Venezuela could result in a reversal of progress made to date.