

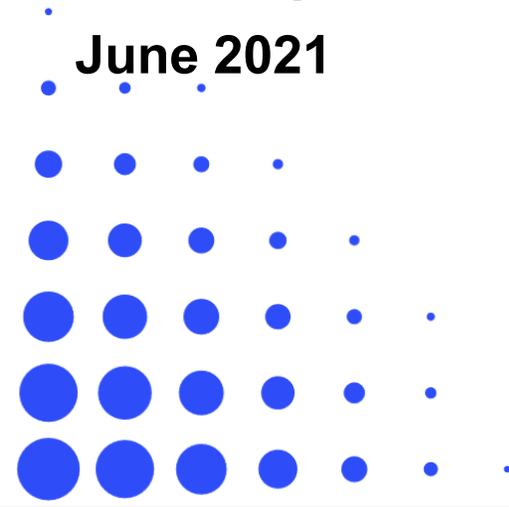


# Malaria: Global Progress, Challenges and Priorities

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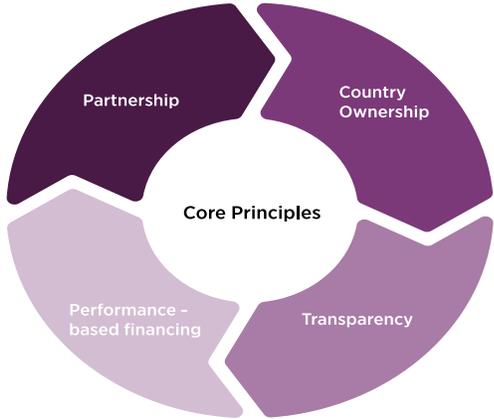
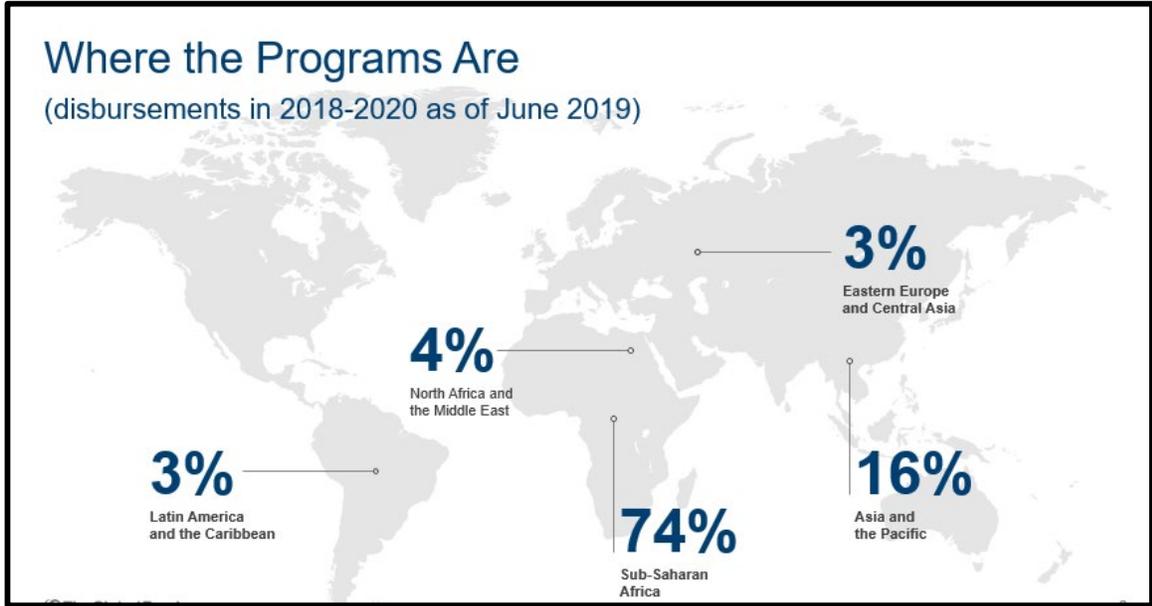
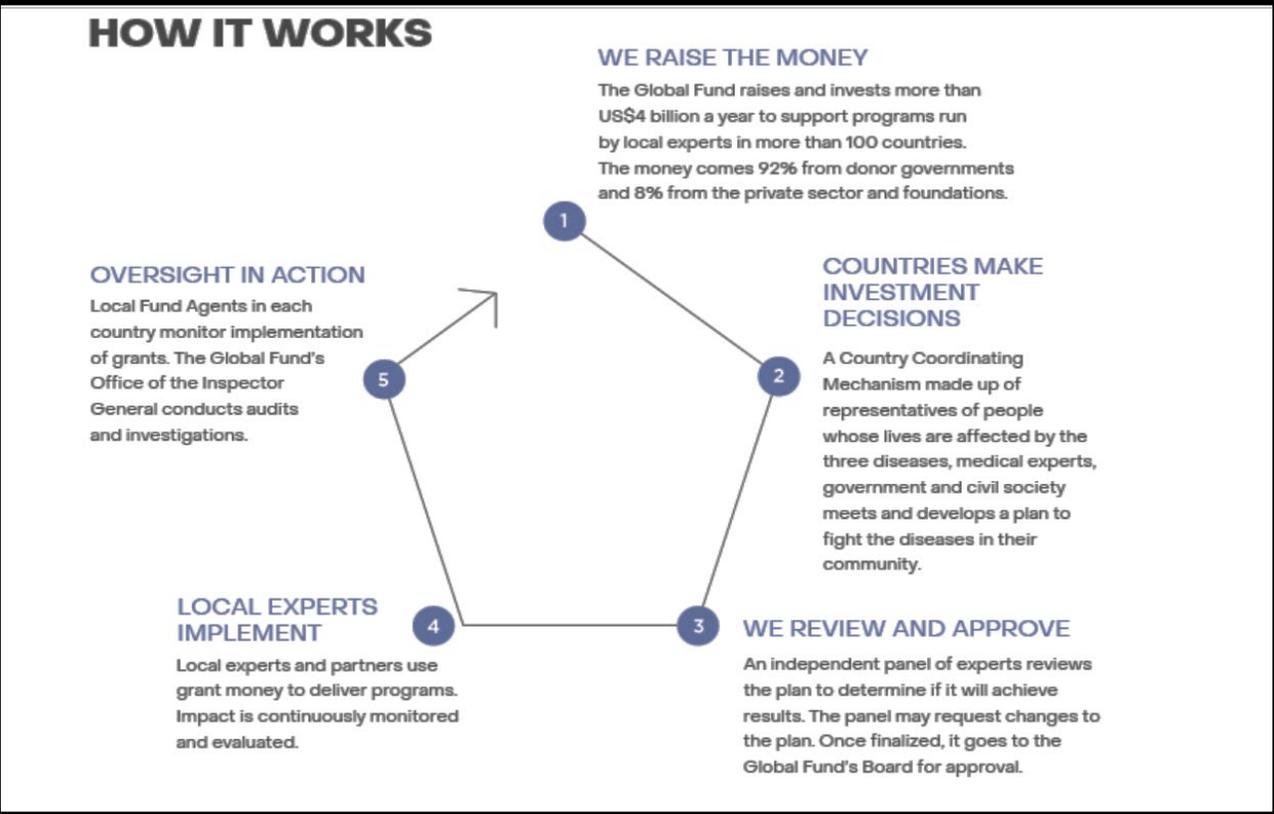




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# Global Fund Overview



# The Global Fund Strategy 2017-2022

## Objectives

1  
Maximize Impact  
Against HIV, TB,  
and Malaria

2  
Build Resilient  
& Sustainable  
Systems for Health

3  
Promote & Protect  
Human Rights and  
Gender Equality

4  
Mobilize  
Increased  
Resources

## Targets



**14M**

Lives saved in the three-year period  
beginning in 2017



**194M**

New infections or cases of  
HIV, TB and malaria averted



**US\$35B**

Catalyzed in domestic  
finance for health



**US\$230B**

Driven in  
economic gains

# The Global Fund Partnership Achievements to Date



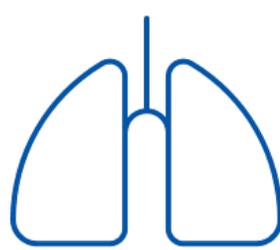
**38**  
**MILLION**

**LIVES  
SAVED**  
through  
the Global Fund  
Partnership



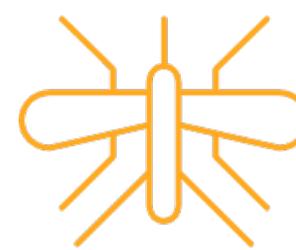
**20.1**  
**MILLION**

**PEOPLE on  
ANTIRETROVIRAL  
THERAPY for HIV**  
In 2019



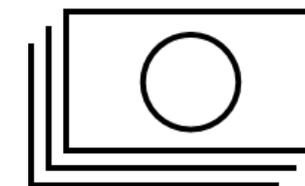
**5.7**  
**MILLION**

**PEOPLE WITH  
TB TREATED**  
In 2019



**160**  
**MILLION**

**MOSQUITO NETS  
DISTRIBUTED**  
In 2019



**45.4**  
**BILLION**

**US\$  
DISBURSED**  
as of June 2020

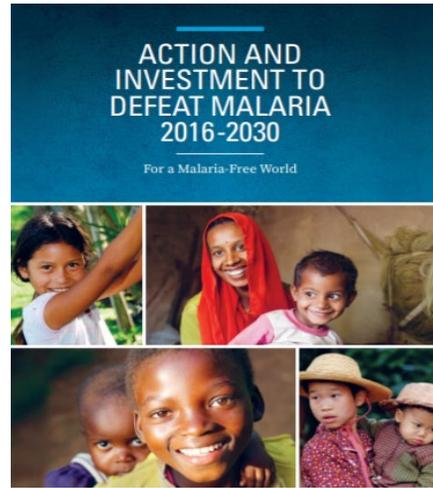
Source: Global Fund Strategic Information Analysis

# THE GLOBAL FUND STRATEGY 2017-2022

## Maximize impact against malaria

Scale up and maintain interventions to reduce Malaria transmission and deaths and support countries to eliminate Malaria, in line with the Global technical strategy and AIM:

1. Scale-up evidence-based interventions with a focus on the highest burden countries with the lowest economic capacity and on key and vulnerable populations.
2. Evolve the allocation model and processes for greater impact, including innovative approaches differentiated to country needs
3. Support grant implementation success
4. Support sustainable responses for epidemic control and successful transitions



### Global technical strategy for malaria (2016-2030)

Vision	A world free of malaria			
	Goals	Milestones		Targets
		2020	2025	2030
1. Reduce malaria mortality rates globally compared with 2015	≥40%	≥75%	≥90%	
2. Reduce malaria case incidence globally compared with 2015	≥40%	≥75%	≥90%	
3. Eliminate malaria from countries in which malaria was transmitted in 2015	At least 10 countries	At least 20 countries	At least 35 countries	
4. Prevent re-establishment of malaria in all countries that are malaria-free	Re-establishment prevented	Re-establishment prevented	Re-establishment prevented	

#### Pillar 1

Ensure universal access to malaria prevention, diagnosis and treatment

#### Pillar 2

Accelerate efforts towards elimination and attainment of malaria-free status

#### Pillar 3

Transform malaria surveillance into a core intervention

Supporting Element 1. Harnessing Innovation & Expanding Research

Supporting Element 2. Strengthening the Enabling Environment

# THE GLOBAL FUND STRATEGY 2017-2022

## Maximize impact against malaria

The Global Fund provides 56% of all international financing for malaria, and has invested more than US\$13.2 billion in malaria control programs as of June 2020.

### Key results in countries where the Global Fund invests in 2019:



**243 million**

Suspected cases tested for malaria in 2019

**124 million**

Cases of malaria treated in 2019

**US\$2**

The cost of an insecticidal net. Economies of scale have enabled 11 million extra nets to be purchased

**US\$0.58**

Is the cost of antimalarials, enabling the treatment of 24 million extra people

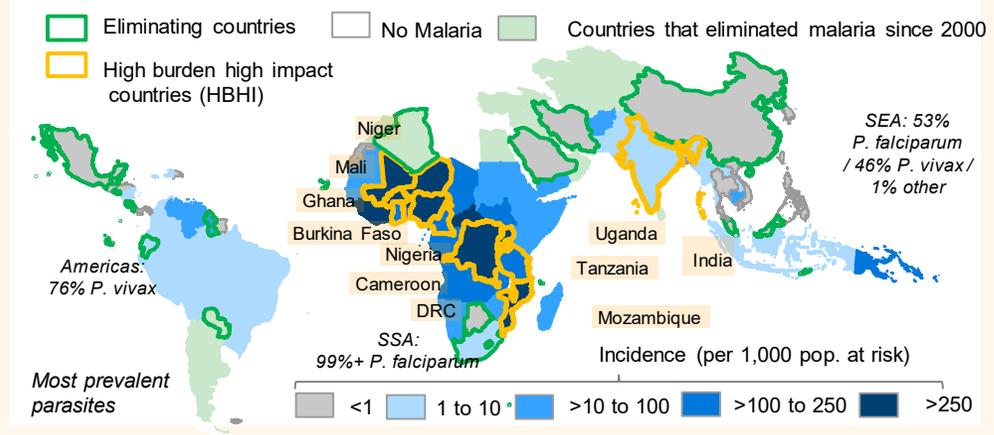
Responding to the threat of increasing drug resistance in the Greater Mekong region, the Global Fund is investing more than US\$244 million through the Regional Artemisinin-resistance Initiative

# Malaria: Global Progress, Challenges, Priorities

\$ Global Fund accounts for 37% of global Malaria funding and 56% of international financing

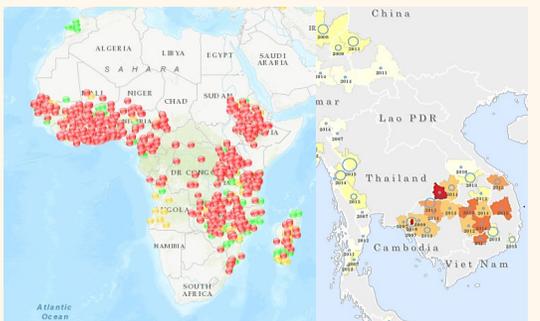


## Progress towards malaria elimination



## Pyrethroid and drug resistance

**Widespread insecticide resistance:** Resistance to pyrethroid-based insecticides has spread in every malaria endemic region. In 2017 nearly a quarter of the 80 reporting countries reported resistance to all 4 insecticide classes



**Concentrated drug resistance:** Antimalarial resistance remains concentrated in the eastern Greater Mekong Subregion – with 3 or more ACTs failing

**Rising costs:** Expected increases in unit costs for LLINs due to new AIs will limit effective coverage in current state

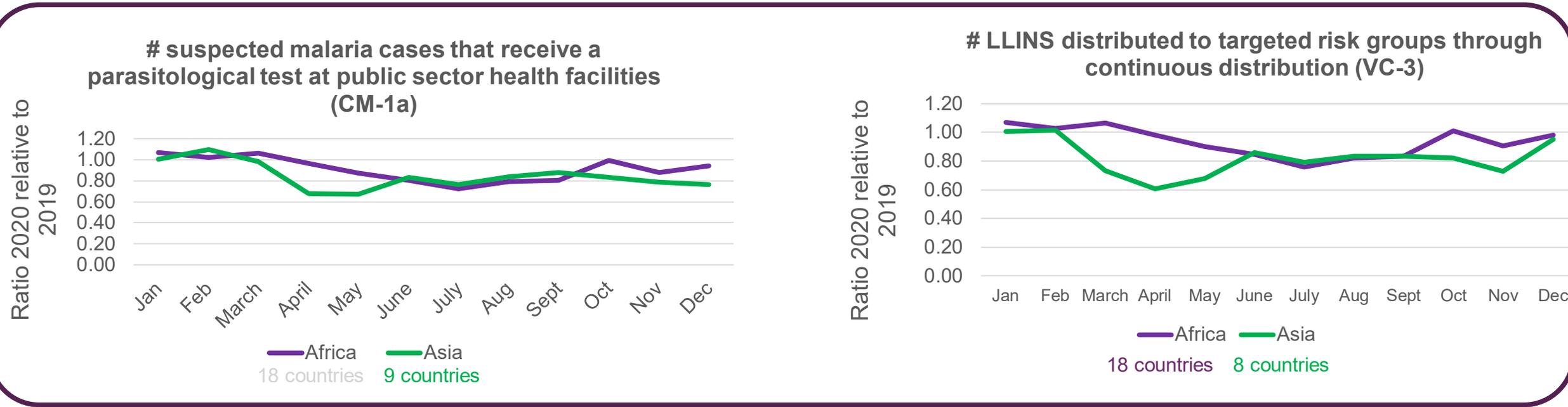
Sources for graphs and key messages: WHO; World Malaria Report (WHO), 2020; IHME Financing Global Health; IR Map per; WWARN Database; Global Technical Strategy for Malaria 2016-2030 (WHO); Global Fund's Malaria Landscape Analysis, LLINs = Long Lasting Insecticide-treated Nets, ACTs = Artemisinin-based combination therapies, AIs = active ingredients

## Goals, milestones and targets for the Global technical strategy for malaria 2016–2030

GOALS	MILESTONES		TARGETS
	2020	2025	2030
1. Reduce malaria mortality rates globally compared with 2015	At least 40% 18% reduction achieved 22% off track	At least 75%	At least 90%
2. Reduce malaria case incidence globally compared with 2015	At least 40% 3% reduction achieved 37% off track	At least 75%	At least 90%
3. Eliminate malaria from countries in which malaria was transmitted in 2015	At least 10 countries On track	At least 20 countries	At least 35 countries
4. Prevent re-establishment of malaria in all countries that are malaria-free	Re-establishment prevented On track	Re-establishment prevented	Re-establishment prevented



# delivery of malaria services has been significantly impacted with 10-16% fewer cases tested in 2020 compared with 2019



**14,7 million (-10%) fewer cases tested** in 2020 vs 2019; levels recover to -5% by Dec  
**LLINs:** 12 mn (7%) fewer LLINs provided through continuous distribution; levels recover by Dec 2020



The decline in suspected malaria cases tested is smaller in absolute terms but represents a larger proportion relative to the previous year: **1,4 million (-16%) fewer cases tested** in 2020 vs 2019; levels remain -23% by Dec  
**LLINs:** 1,8 million (18%) fewer LLINs were distributed through continuous distribution

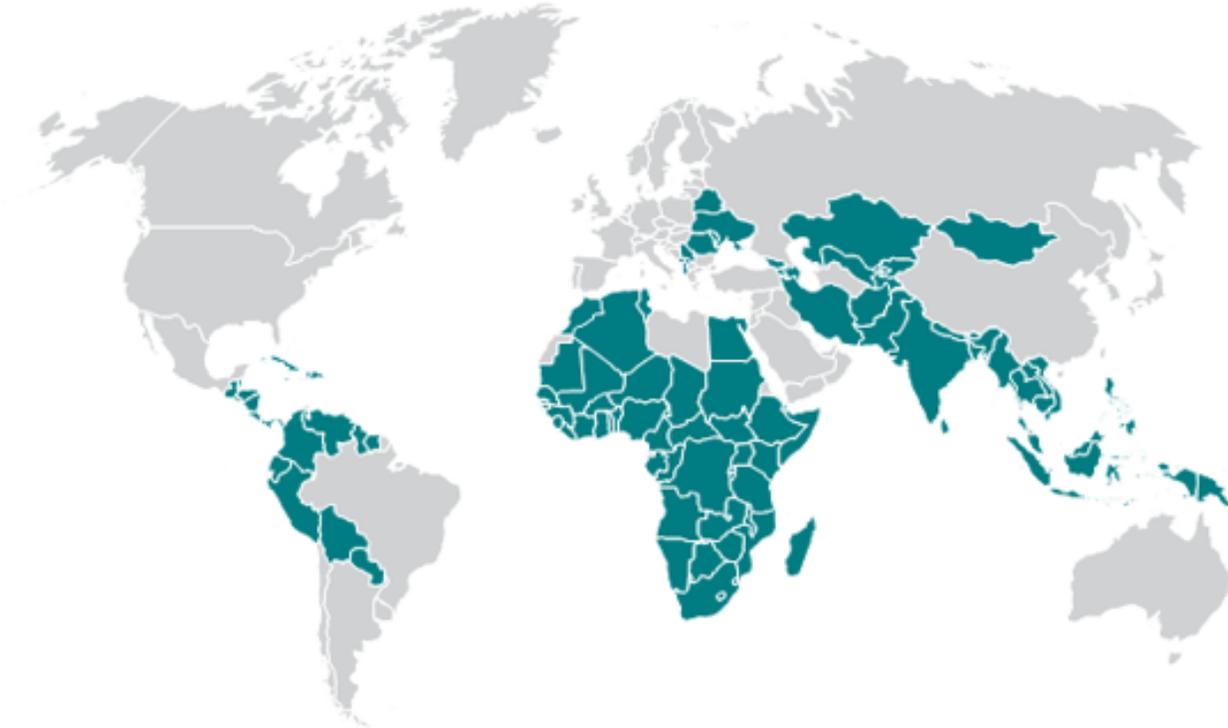
# Global Fund COVID-19 response

The Global Fund response to the COVID-19 pandemic makes funding available through the COVID-19 Response Mechanism and grant flexibilities. This report lists approved funding.

Learn more at <https://www.theglobalfund.org/en/covid-19/>

Total approved in USD equivalent	1,063,484,269
Total countries and multicountries	119

Countries Accessing Global Fund Support to Fight COVID-19



# Malaria strategic direction

## Current cycle (2020-2022)

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### Sub-national tailoring

1. Unrestricted allocation – Across intervention types
2. Unrestricted allocation – Within intervention types
3. Budget restricted allocation – Across and within intervention types
4. Delivery and Implementation

### Case Management and Chemoprevention

- Increase access to quality test, treat and track
- Maximize impact of chemoprevention
- COVID- 19 adaptations

### Vector Control

1. On-going efforts to ensure high coverage of effective transmission reduction
2. COVID – 19 adaptations - More than 200m nets are on track to be distributed in 2020

### Surveillance

- Continue to push for real time data on morbidity for country level decision making
  - Evolve HMIS systems
  - Build trust and utilization of data
  - Develop capacity for epidemiological stratification and action at country level

# **Malaria strategic direction**

## Immediate priorities

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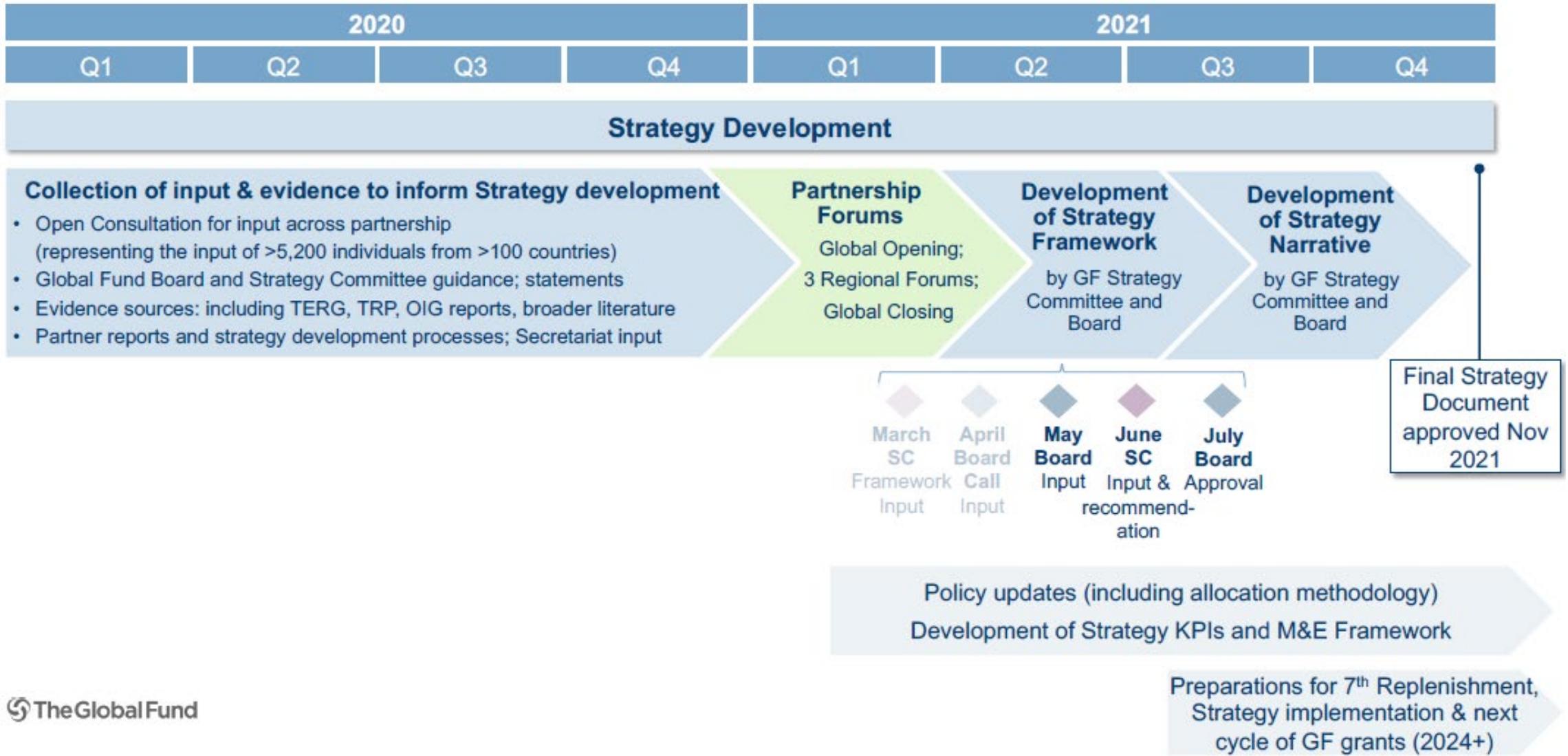
**Ensure 2020 - 2022 allocation well programmed and implemented**

**Address acute issue of upsurges in several countries due to climate perturbations**

**Address Key and Vulnerable populations**

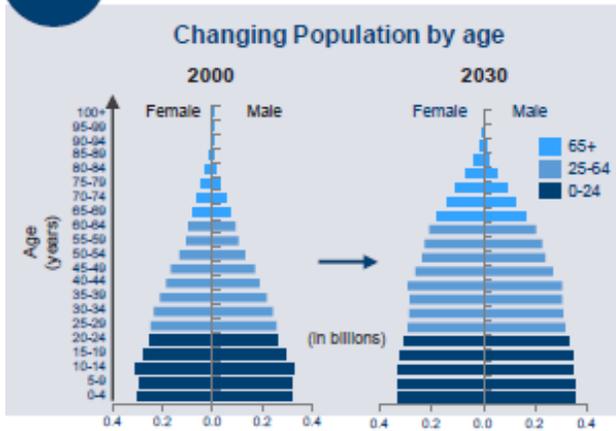
**Catalyze on the even further galvanized partnerships**

# Global Fund Strategy Development (2023+) Timeline



# Broader Health and Development Landscape

## Demographic Shifts

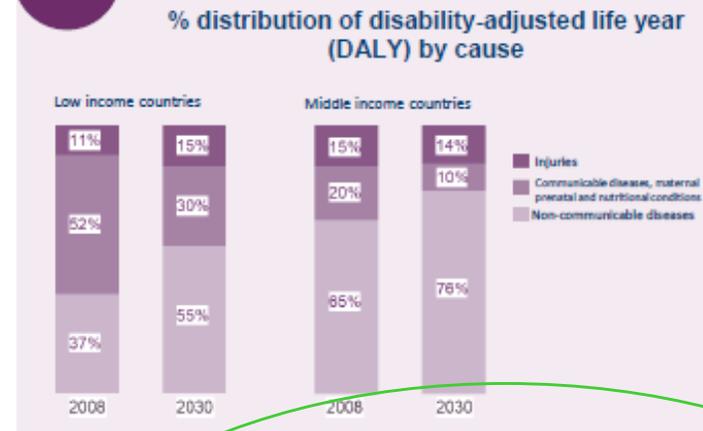


Source: UN World Population Prospects 2019

The world's population is growing, causing increased demand on health systems.

Sub-Saharan Africa is experiencing a youth bulge, while population aged 65+ fastest growing in all regions.

## Shifts in Burden of Disease



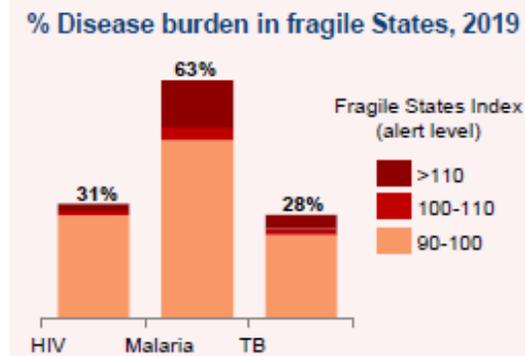
Source: World Bank

Looking towards the 2030 horizon, the world is expected to see an **epidemiological transition** from communicable diseases to non-communicable diseases (NCDs) as the major driver of disease burden.

## Displacement, Fragility and Instability

>1% of world population is displaced from their home.

The most fragile States account for 2/3 of malaria burden and less than 1/3 of HIV and TB burden.

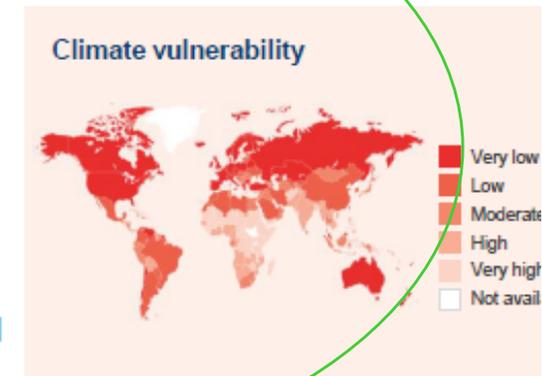


Sources: Fragile States Index (The Fund for Peace), Global Fund. Disease burden measured per 2020-2022 allocation methodology

## Climate and Environment

Climate change is expected to impact the fight against the three diseases (warming, changing rainfall, extreme weather, and air pollution).

Food & water insecurity resulting from global warming, extreme weather events can lead to increased vulnerability of already at-risk populations



Source: Salas and Jha, 2019. BMJ, 360, p.J5302

# Sub-objective of the Evolving Objective on Pandemic Preparedness and Response: Encourage climate, environmentally sensitive & One Health approaches



## Bi-directional relationship: Climate/Environment and Global Fund

### Global Fund

The Global Fund impacts the climate and environment throughout its entire value chain.



It is difficult to sometim draw the distinction whether a product or a human activity has a negative impact on the environment in general is a contributory factor climate change.

### Climate & Environment

Changes in the climate and environment impact the Global Fund's ability to deliver on its mission.

# Priorities for Malaria as we move into the next strategy (2023+)

## Sub-objectives:

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- ❑ Expand equitable access to basic primary health services that includes quality early diagnosis and treatment of malaria and accurate recording and reporting of the clinical encounters.
- ❑ Achieve and sustain adequate levels of effective vector control of locally appropriate tools
- ❑ Optimize the implementation of malaria interventions, utilizing more granular data and capacitating decision making and action at a sub-national level.
- ❑ Drive towards elimination and facilitate prevention of reestablishment in areas near to the end game.
- ❑ Establish consistent levels of control for all areas of historically high malariogenic potential And strive for regional elimination in a select geographic area of sub-Saharan Africa to demonstrate the path to eradication.
- ❑ Contribute collectively to health system strengthening, capacity building and sustainability to prepare and respond to external threats to malaria control such as climate change, pandemics, complex emergencies, political instability

## Contributory objectives:

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- ❑ Maximizing people-centered Integrated systems for Health to deliver impact, resilience and sustainability
- ❑ Maximizing the engagement and leadership of most affected communities to leave no one behind
- ❑ Maximizing health equity, gender equality and human rights
- ❑ **Mobilizing Increased Resources for Health**

**Thank you**



The Global Fund to Fight  
AIDS, Tuberculosis and Malaria

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