

The Commonwealth malaria commitment

APRIL 2018



*To halve malaria across the Commonwealth by 2023:
securing 50% reductions in the rates of cases and deaths
saving 650,000 lives and preventing 350 million cases of malaria*

This briefing is to support a new Commonwealth malaria commitment for the Commonwealth Heads of Government Meeting (CHOGM) 2018 in London.

WHY A COMMONWEALTH MALARIA COMMITMENT?

Since 2000, thanks to significant investment, strong political leadership and the development and distribution of new tools, we have seen a marked decline in malaria cases and deaths, saving almost 7 million lives from this deadly disease.

However, as the World Health Organization's World Malaria Report 2017 data shows, we are at a crossroads.

Due to plateaued funding, competing political priorities and coverage gaps, the past decade of remarkable progress has now stalled.

Approximately half the world still lives at risk from malaria. It remains one of the leading causes of childhood deaths across the Commonwealth.

90%

of Commonwealth citizens live in malaria affected countries.

The Commonwealth:

- Is disproportionately affected by malaria
- Accounts for **more than half** of all global cases and deaths from malaria.

The Commonwealth is disproportionately affected by the disease with a high burden of cases, particularly amongst women and girls, which significantly affects its economic and social development.

The Commonwealth is central to accelerating progress to meet globally agreed malaria targets, through its political leadership, multi-sectoral investments, cross-country initiatives, cutting edge science and research, and committed engagement from businesses and civil society.

Building on the legacy of the Commonwealth's efforts to support polio eradication, this new commitment would put the Commonwealth at the vanguard of a 21st century campaign to fight malaria, ensure global health security, and contribute to resilient and sustainable systems for health.

THE COMMITMENT

The new commitment to halving malaria across the Commonwealth by 2023 is defined as a 50% reduction in malaria case and death rates across the Commonwealth.ⁱ

Achieving this proposed commitment would be a significant contribution towards achieving the existing global goals, including:

- The *WHO Global Technical Strategy 2016-2030* which aims to reduce global malaria cases and deaths by at least 75% by 2025, and at least 90% by 2030.
- UN Sustainable Development Goal (SDG) for healthⁱⁱ.
- Malaria affected Commonwealth countries' own national plans and regional commitments to either control or eliminate malariaⁱⁱⁱ.

WHAT WOULD SUCCESS LOOK LIKE?

In addition to cases averted and lives saved, achieving this target would have a far-reaching impact on Commonwealth citizens, communities and countries including;

- **Return on investment:** Progress to fight the disease represents excellent value for money; every \$1 invested in malaria interventions gives back \$36 in social and economic benefits.^{iv}

650,000 more

lives saved from
malaria
and

350 million

cases prevented across
the Commonwealth by
2023.^{vii}

- **Education enrolment and attainment:** It is estimated that up to 50% of preventable school absenteeism in high burden African countries is caused by malaria.^v Reducing malaria enables children to attend school more regularly and learn more effectively. This improves their school performance and later wage-earning capacity.
- **Jobs and productivity:** 72% of African companies surveyed reported a negative impact of malaria on their business.^{vi} Reducing malaria creates healthier and more productive workforces that can help attract trade and commerce. When combined with pro-poor policies, these factors drive job creation, inclusive growth and shared prosperity.
- **Health systems:** Reducing malaria saves resources in under-staffed facilities where malaria contributes up to 50% of inpatient hospital admissions and up to 60% of outpatient visits in high burden countries. At the household level, reducing malaria also protects families from lost earnings and from the costs of seeking medical care.

WHAT IS NEEDED TO ACHIEVE THE COMMITMENT?

Achieving this commitment will require a combination of interventions tailored to local contexts including:



- Sustained increase in funding levels from donor and domestic countries, and innovative financing from the private sector.
- Domestic political leadership, with dedicated support from business, cultural and religious leaders, and a grassroots movement that energizes the support of affected communities.
- A multi-sectoral approach, that promotes “malaria-smart” investments across malaria endemic countries, in areas including energy and extractive industries, agriculture and nutrition, water and sanitation, tourism, and infrastructure.
- Improved routine and integrated surveillance, monitoring and evaluation for malaria with geographically disaggregated data from publicly available data sources.
- Improved access to health services for the most vulnerable and hard-to-reach populations through strengthened community systems.
- Innovations in tools and practices, coupled with timely operations research and piloting, for rapid deployment and scale-up.

Commonwealth partnerships and action will also help to address critical cross-cutting issues. These include; building strong and resilient systems for health, targeting and adapting vector control interventions to the evolving

environmental context, integrating and strengthening disease surveillance and routine data collection for improved decision making, as well as addressing the current and prospective challenges of drug and insecticide resistance.

New multisector and government commitments will be announced at the Malaria Summit on 18th April during CHOGM 2018 to help accelerate action to beat malaria.



TRACKING PROGRESS TOWARDS SUCCESS

This new Commonwealth commitment would represent a significant opportunity to keep malaria high on the political agenda.

The Commonwealth could continue to show leadership and accountability against the commitment through regular reviews of progress including at the annual Commonwealth Health Ministers' meetings and by Heads of State and Government at CHOGM 2020.

The commitment is backed by a plethora of global malaria community partners who would be happy to support countries in reporting progress towards this target, including the World Health Organization (who tracks global progress through the annual World Malaria Report), the RBM Partnership to End Malaria, African Leaders Malaria Alliance, Asia Pacific Leaders Malaria Alliance, Malaria No More UK and many more.

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GATES foundation

Imperial College
London

malaria
NO MORE
united kingdom

ⁱ 50% reduction in malaria mortality and case incidence compared to 2015 baseline, aligning with the UN SDG targets measurements

ⁱⁱ SDG 3 Ensure healthy lives and promote wellbeing for all at all ages
<http://www.who.int/sdg/targets/en/>

ⁱⁱⁱ There are a number of countries with national elimination plans and targets before the proposed 2023 target including; Belize, Botswana, Malaysia, Namibia, South Africa, Swaziland, Vanuatu and Zambia

^{iv} *Here's how to wipe malaria off the map*, Copenhagen Consensus (2015)

^v [https://www.rollbackmalaria.org/wp-content/uploads/2017/08/RBM Education Fact Sheet 170915.pdf](https://www.rollbackmalaria.org/wp-content/uploads/2017/08/RBM_Education_Fact_Sheet_170915.pdf)

^{vi} Roll Back Malaria Progress & Impact Series, Business Investing in Malaria Control: Economic Returns and a Healthy Workforce for Africa, 2011

^{vii} These are the cumulative cases and deaths averted between 2017 and 2023 if the Commonwealth target is achieved over this period compared to incidence/mortality remaining at 2015 levels.