

World Malaria Day 2010: Africa Update

World Malaria Day 2010: Africa Update, the second report in the 2010–2011 Roll Back Malaria (RBM) Progress & Impact Series, benchmarks the remarkable progress and momentum that are building toward halting malaria in Africa. Dramatic increases in malaria control funding and national capacity to fight the disease have brought about corresponding steep declines in malaria illness and deaths in many countries. Nearly a million lives have been saved since 2000, the vast majority since 2006, when Africa's scale-up efforts began in force. However, as countries look to achieve global targets in 2010, there is much work that remains to be done.

Global malaria control targets are within reach

World Malaria Day 2010 serves in part to highlight the ambitious RBM 2010 targets and Millennium Development Goals (MDGs) the worldwide malaria community aims to meet. The RBM 2010 targets call for:

- Achieving universal intervention coverage of all populations at risk of malaria by 2010.
- Reducing the 2000 malaria burden by three quarters and reducing the number of preventable deaths to near zero by 2015.
- Eliminating malaria by 2015 in at least eight countries currently in the pre-elimination phase.

- Eradicating the disease worldwide as a long-term goal.

Reaching these targets will contribute to the attainment of several of the MDGs, particularly those concerning child survival and maternal health, a key focus in the malaria elimination effort. Indeed, children under five years old in sub-Saharan Africa account for the majority of deaths from malaria, with an estimated 850 000 deaths occurring in 2008 alone.

Intervention coverage progress

Controlling malaria is based on both preventing transmission and obtaining prompt and effective treatment when infection does

occur. Many countries have already made important progress with regard to prevention, focusing on scaling up long-lasting insecticide-treated bednets (ITNs), indoor residual spraying (IRS) of insecticides, and prevention of malaria during pregnancy. In the last decade, all 26 countries with trend data have significantly increased ITN coverage, with great impact. The report estimates that, between 2000 and 2010, ITNs saved over 908 000 lives—with three quarters of those deaths having been prevented since 2006 (Figure 1). If countries can reach 100% coverage of ITNs alone, an estimated 55% of projected annual malaria

Summary of key points

- *Achieving and sustaining malaria control is central to achieving many of the MDGs, particularly those related to child mortality and maternal health.*
- *Though global funding for malaria control has increased 10-fold in the last six years—from US\$ 0.3 billion to US\$ 1.7 billion annually—existing levels still fall far short of the estimated US\$ 6 billion needed in 2010 alone.*
- *Increases in funding and commitment to malaria control have led to significant country progress, helping to quickly scale-up intervention coverage and reduce bottlenecks, and providing support for countries to adopt more effective—but more expensive—treatment and diagnostic strategies.*
- *Most malaria-endemic African countries have developed national plans for achieving the universal coverage targets by the deadline of the end of 2010; RBM partners will help ensure that monthly ITN distribution plans are implemented and monitored effectively.*
- *These efforts are already demonstrating a clear impact on the lives of people at risk of malaria in many countries and areas. More evidence of positive impact will become available as additional countries scale up their programmes and document results.*

deaths will be prevented in 2010. In 2008, nearly 25 million people were protected by IRS as opposed only 2 million two years prior. However, while over 60% of pregnant women in Zambia and Sao Tome and Principe received the required doses of intermittent preventive treatment during their last pregnancy, coverage rates are variable, and still too low in most African countries.

While prompt and effective malaria treatment is reaching more children in Africa than ever, obstacles still remain. Artemisinin-based combination therapy (ACT) is the most effective form of antimalarial treatment but a very expensive one. So, as procurement of ACT has risen worldwide from half a million doses in 2001 to 160 million doses in 2009, very few children in Africa are actually receiving it. From 2005 to 2009, among children in African countries who received any antimalarial drug, the percentage that received ACT varied in range from zero to 50.

Financing is critical to sustaining progress

Increases in annual global financing for malaria control are encouraging. During the last six years contributions have grown approximately 10-fold. This

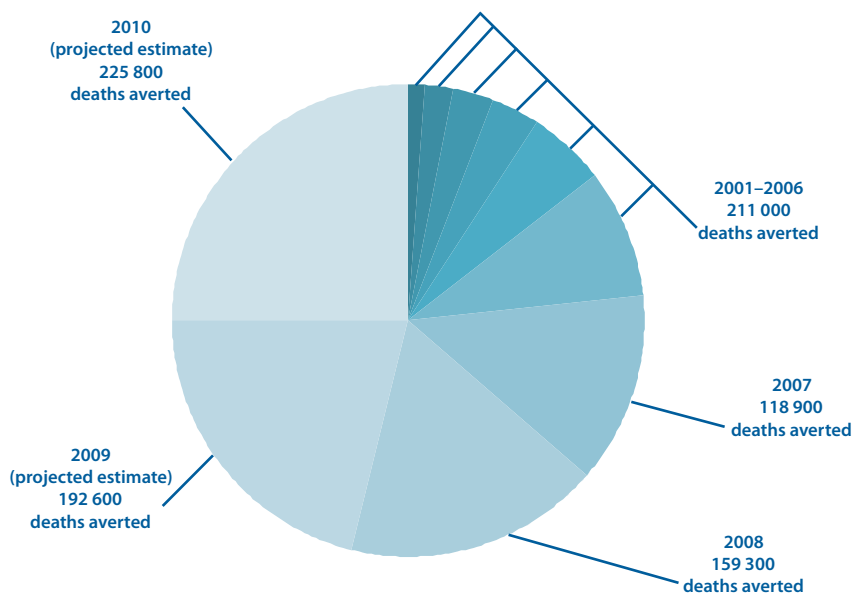
financing has fuelled global production of key intervention commodities, country procurement, and distribution of these lifesaving interventions. But, as noted in the first report in the RBM Progress & Impact Series, *Malaria Funding and Resource Utilization*, current funding is only 25% of what is needed in order to achieve

the RBM 2010 goals and the MDGs. Malaria control has proven to be a sound investment with life-saving results and committed countries—such as Nigeria, which plans to distribute around 60 million nets by the end of 2010—are taking decisive action to stop malaria.

FIGURE 1

Predicted number of malaria deaths averted in children under five years of age due to changes in ITN coverage during 2000–2010 based on modeled estimates, 35 African countries

An estimated 908 000 malaria deaths have been averted through ITN coverage between 2000–2010, with three quarters of the deaths averted since 2006.



Source: Data were abstracted from national surveys (Demographic and Health Surveys, Multiple Indicator Cluster Surveys, or Malaria Indicator Surveys).

The Roll Back Malaria Progress & Impact Series is a strategic effort to secure high levels of commitment to malaria control among donor countries, international health organizations, and governments of endemic and epidemic countries. The second report in the series, World Malaria Day 2010: Africa Update was authored by UNICEF, WHO, and MACEPA, a programme at PATH.

For more information

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