

World Economic Forum on Africa
Cape Town, 13-15 June 2007

• **Awa Marie Coll-Seck** • **Obiageli Katryn Ezekwesili**
• **Armando Emilio Guebuza** • **Robin Slatter** • **Michael Smalley**
Moderated by • **Steven C. Phillips**

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13.00 - 14.15
malaria

Putting a Stop to Malaria

Renewed efforts at bringing malaria under control have given hope to millions in Africa and could lead to many lives being saved. Although malaria is unlikely to be reduced by any significant amount in the next 10 years, some major steps in bringing the disease under control are being taken.

Sketching the background to the discussion, session moderator **Steven C. Phillips**, Medical Director, Global Issues and Projects, Exxon Mobil Corporation, USA, described the disease as a giant social health problem and a significant development challenge. "Malaria has killed millions and is responsible for 20% of deaths of all children under the age of five years. Apart from the human toll, it is an economic and social drag on development," Phillips said. However, he commented that new interest in the disease provides great opportunity for a meaningful reversal of the devastation the disease had caused in Africa over the last 50 years.

Phillips said that among the factors providing a climate for a renewed attack on the disease are a new political will in the United States, the United Kingdom and Germany, in addition to the focus on the disease from leaders in African countries. "We also have the necessary tools to take on the disease. We have the right drugs, the right insecticides, the right nets and the right prevention programmes in pregnancies. Malaria can be stopped." Phillips also said there has been an increase in resources needed for fighting malaria. For example, he said the United States has increased its aid for combating malaria from US\$ 1 million in 2000 to US\$ 350 million for 2008. He said the World Health Organization has also increased its funding significantly.

"How do we take advantage of the new opportunity that has been provided?" Phillips asked the panel. **Armando Emilio Guebuza**, President of Mozambique, said a coordinated policy that includes all branches of society is needed. He also called for support for training and research in his country and for greater urgency in the search for a vaccine against malaria.

Awa Marie Coll-Seck, Executive Director, Roll Back Malaria Partnership (RBM), Geneva, identified three requirements for bringing the disease under control. "Firstly we need strong leadership if we are going to win this fight," she said. She also called for partnerships between the public and private sectors and civil society, including communities at the local level. "We need partnerships – there is no sector that can do it on its own," she said. Coll-Seck also called for the "harmonization of policies" dealing with the fight against malaria. She said many of the failures in controlling malaria in the past can be linked to the lack of an integrated policy aimed at managing the disease.

Michael Smalley, Director-General, African Medical and Research Foundation, Kenya, said it is essential that communities receive education about how the disease should be treated. He said people need to fully understand how the disease spreads and how it can be counteracted. He also called for the establishment of functional health systems as part of general health delivery.

Obiageli Katryn Ezekwesili, Vice-President, Africa Region, World Bank, Washington DC, said the prevention and treatment of malaria is costly and needs the support of donor organizations. She reckoned appeals for aid should be made in a coordinated way.

Robin Slatter, Manager, Business Development, Global Vector Control, Sumitomo, United Kingdom, said such necessary tools as bed nets are available but the process of delivering them to the right people needs to be speeded up and simplified. He also called for improvements in communication between the authorities that are providing the tools and the people who need them. "Delivering a positive message is what is going to facilitate a positive momentum," Slatter said. He quoted an example of a donation of bed nets in a town in Kenya that resulted in a 70% reduction in malaria in the area. Coll-Seck also cited areas where the distribution of nets was increased from 10% to 90% of all people in certain areas.

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Guebuza said the visible benefits of interventions would go a long way towards mobilizing the will to control the disease. He said figures in his country show that fewer people are dying of malaria although more people are being infected than in the past. However, Guebuza was not optimistic about the prospects of defeating the disease in his country. When asked whether he could quote any success stories, he replied, "I can talk of hope more than success stories." He said malaria should not be viewed in isolation, but as a health problem in conjunction with other diseases such as AIDS and tuberculosis.

In summing up, Phillips said the strongest message that came out of the discussion is that the focus should be on the communities where the fight against the disease is taking place. He said it is evident malaria should be seen as part of the larger problem of poverty. "What is clear is that it may not be eradicated in 10 years, but timely interventions can result in many lives being saved."

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