A Malaria Community Statement —

April 25th is World Malaria Day and also Malaria Awareness Day in the United States. In observance of this day and in recognition of the tremendous opportunities to reduce the burden that malaria imposes on the health of people worldwide, we, the Malaria Community, stand in support of the following statement.

We Have Made Progress

Dynamic new public and private partnerships and renewed commitments to strengthen longstanding efforts to combat malaria are showing positive results. Global partners include bilateral, multilateral and U.N. programs, faith-based groups, business coalitions and private foundations. The single largest U.S.-funded malaria program, the President’s Malaria Initiative (PMI), has accomplished the following:

- Indoor residual spraying benefiting more than 17 million people;
- Procurement and distribution of 5 million insecticide-treated mosquito nets;
- Procurement of 12.6 million artemisinin-based combination therapy (ACT) treatments and training of more than 28,000 health workers in use of ACTs; and
- Procurement of malaria treatment for more than 4 million pregnant women.

Expanding Access to Current Interventions

It is imperative that stakeholders in the fight against malaria maximize global access to existing proven interventions including insecticide-treated nets, indoor residual spraying with insecticides, and effective medications. Through generous donor contributions, access to essential interventions is improving—yielding dramatic successes in places like Ethiopia and Rwanda where malaria infections and deaths have decreased by more than 50 percent. But the availability of interventions is only half the battle. We must find means to expand delivery of proven interventions, strengthen the capacity of partner countries to administer basic interventions at the community level, share best practices across countries, and motivate individuals to protect themselves and their families.

Investing in New Tools

Simultaneously, we must increase investment in developing new, improved technologies for controlling malaria, including effective drugs, insecticides, and vaccines. Resistance to the most commonly prescribed drugs in most countries has been rapidly increasing. Artemisinin-based combination therapies (ACTs) must be readily available and affordable, and new therapies must be developed to prevent resistance to ACTs and eventually replace them. The U.S. government’s commitment to expedite the development of highly effective malaria vaccines is needed now, understanding that the process will take significant time and investment. The potential of developing a vaccine of even limited efficacy could have a significant impact on deaths and illness, especially among infants and young children.

Global Problem, Local Solutions

Achieving results will also depend on the effective engagement of national, regional and local governments in the effective deployment of malaria control tools. To guarantee the best use of resources, steps must be taken to ensure that anti-malaria tools, research and investment reach the communities that need them the most, while ensuring that no community is left unsupported. Community-based efforts to deliver malaria prevention and treatment programs must inform the development of the comprehensive global strategy needed so that efforts can be sustained over time. All stakeholders need to be engaged in thoughtful, coordinated planning that brings to bear the best evidence from all levels of efforts to control or eliminate malaria while addressing changes in the epidemiology of the disease.
Building a Pathway to Eradication

Significant investments since the 1970s are demonstrating that not only is malaria control working, but there is hope of preventing the one million deaths caused by malaria each year. With the advent of new tools, elimination and, ultimately, eradication may be possible. Because malaria is a massive global scourge and a medically complex disease, the pathway to eradication is a long one. Achieving eradication will depend on carefully coordinated efforts to build upon malaria control and elimination programs and on securing a shared willingness on the part of all stakeholders to be transparent, work together to build on initiatives that work, and redirect efforts that don’t work. Building a pathway to eradication will take time, but it can be considered an integral part of the enormous strides forward that all stakeholders can take today to prevent malaria deaths in Africa and elsewhere. Now is the time to begin charting the course.

Next Steps for U.S. Policy and Investments

Committed U.S. leadership in the fight against malaria is critical at every stage of this effort—from malaria control, to elimination, to eventual eradication. We call upon the U.S. Congress to

- Support U.S.-funded malaria programs by passing the Lantos-Hyde U.S. Leadership Act Against AIDS, TB and Malaria of 2008, authorizing $5 billion for malaria programs over five years.

- Appropriate at least $500 million in FY2009, including full funding for the President’s Malaria Initiative and support for other bilateral efforts.

- Appropriate $1.65 billion in FY2009 as the U.S. contribution to the Global Fund to Fight AIDS, TB and Malaria, an estimated 24 percent of which would be dedicated to malaria programs.

- Accelerate the development of new and improved tools to combat malaria in FY 2009, through biomedical and clinical research, by providing: the National Institutes of Health with a total budget of $31.1 billion; NIH’s National Institute of Allergy and Infectious Diseases with at least $4.9 billion; NIH’s Fogarty International Center with at least $71 million; the Centers for Disease Control and Prevention’s malaria programs with a doubling from $9 million to $18 million; the U.S. Agency for International Development’s malaria programs with an increase in research and development programming proportional to the PMI increase recommended above; and the Department of Defense’s malaria programs with a total budget of $30 million.