Foreword

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Getting the global malaria response back on track

In November 2017, I signalled to the international community that the global response to malaria had stalled and we risked losing some of the precious gains we have made over the past 20 years.

One year on, the data in this year’s World malaria report reconfirms that we are off course to meet two critical 2020 milestones of the WHO Global Technical Strategy for Malaria 2016-2030: reducing case incidence and death rates by at least 40% from 2015 levels.

There are two findings that I find particularly worrying: first, several countries that carry a disproportionate burden of disease have reported increases in malaria cases, setting us back even further; and second, the level of investment in malaria control remains inadequate.

The World malaria report 2018 estimates that there were 219 million cases of malaria in 2017. The 10 highest burden African countries saw an estimated 3.5 million more malaria cases in 2017 compared with the previous year.

Malaria continues to claim the lives of more than 435 000 people each year, largely in Africa. Children under the age of 5 are especially vulnerable; the fact that every two minutes a child dies from this preventable and curable disease is unacceptable.

The report also reveals insufficient levels of access to and uptake of lifesaving malaria tools and interventions. To truly conquer malaria, we need a comprehensive approach that includes vector control measures and early diagnosis and treatment, especially at the village level. A considerable proportion of people at risk of infection are not being protected, including pregnant women and children in Africa.

Clearly, we need to change course and improve how we combat malaria, particularly in those countries with the highest burden. The status quo will take us further off track and have significant negative socio-economic consequences beyond malaria.

Earlier this year, at the 71st World Health Assembly, I announced an aggressive new approach to drive progress against malaria. This new initiative, called “High burden to high impact,” will be led by countries hardest hit by the disease.

Supported by WHO and the RBM Partnership to End Malaria, the approach is based on four pillars: galvanizing political will nationally and globally to reduce malaria deaths; using strategic information to drive impact; implementing best global guidance, policies and strategies suitable for all malaria-endemic countries; and applying a coordinated country response.
Importantly, “High burden to high impact” calls for increased funding, with an emphasis on domestic funding for malaria, and better targeting of resources. The latter is especially pertinent because many people who could have benefited from malaria interventions missed out because of health system inefficiencies.

The World malaria report 2018 delivers a clear message: the actions we take on malaria over the next 24 months will largely determine whether we can meet the 2025 milestones of WHO’s global malaria strategy. It also sets the path for our collective contribution to the achievement of the Sustainable Development Goals.

I am optimistic. The 2018 report highlights pockets of progress. For example, more countries are getting closer to eliminating malaria, and several others including Ethiopia, India, Pakistan and Rwanda recorded substantial declines in cases in 2017.

We need to build on this success. We must double down on malaria and make good on the promise to significantly reduce the global burden of the disease in the next decade. Critically, we must invest in robust health systems that deliver quality services for combating malaria and all diseases.

I know we can defeat malaria. With the continued commitment of all countries, and the support of development partners, I am confident we will win this fight with this centuries-old disease and get back on track toward our common vision: a malaria-free world.