

The Civil Society and Malaria Affected Communities Statement in Africa and Asia on the Occasion of World Malaria Day 2023

Deliver Zero Malaria: Reach the Unreached!

April 25th, 2023

Despite the disruption of malaria prevention, testing and treatment services due to Covid-19 and the sometimes devastating effects of the pandemic on economic, social and health systems, national malaria control programmes and their partners have held their own in 2021 and 2022 in the face of new challenges. However, according to the World Health Organization's (WHO) latest World Malaria Report (2022), the number of malaria cases has continued to rise between 2020 and 2021: an estimated 247 million cases in 2021, up from 245 million in 2020 and 232 million in 2019.

Africa is the region with the highest malaria burden: with an estimated 234 million malaria cases and 593,000 associated deaths in 2021, the African continent is still the hardest hit by the disease (95% of cases and 96% of deaths globally). This situation is all the more intolerable given that the disease is treatable and preventable, and it is the most vulnerable people who pay the highest price: more than two-thirds of the deaths were recorded in children under the age of 5.

Asia is the second most affected continent by the disease, particularly the Greater Mekong Subregion. The last kilometer efforts in the Greater Mekong Subregion require accessibility of malaria services, personal protection products, antimalarials, testing for malaria and Glucose-6-phosphate dehydrogenase (G6PD) deficiency to all people, including in the remote, forested, and/or border areas and for marginalized, mobile and migrant and indigenous populations. Providing these services by community-based volunteers and health workers, in an inclusive quality and safe way, and supporting people to navigate the system and adhere to required behaviours, facilitates communities to trust and own the malaria program. Thus, community engagement and ownership are essential for achieving and maintaining malaria elimination.

Indeed, the fight against malaria faces many challenges: the global funding gap is large and growing, increasing from US\$ 2.6 billion in 2019 to US\$ 3.5 billion in 2020 and US\$ 3.8 billion in 2021. States are struggling to mobilize resources specifically from national budgets. Community engagement and mobilization remain very weak and underfunded, even though community engagement and ownership are key to malaria elimination.



However, opportunities exist to tip the balance! With the right investments, research and development, community engagement and political will, it is possible to reverse the trends and accelerate progress towards malaria elimination.

Many countries are currently drafting their National Malaria Control Strategic Plans and concept notes for the next round of the Global Fund Grant Cycle (GC7). The Malaria Civil Society recommends that these documents include:

- The institutionalization, training and motivation of Community Health Workers and Community Relays in order to improve their performance;
- Control strategies adapted to each context so that they can take into account the specific realities and needs of the communities by using data from the stratification of malaria interventions.

In addition, CS4ME members recommend that policymakers and leaders **ensure that the priority needs of vulnerable populations are taken into account in malaria control policies, strategies and programmes through the following actions:**

- **Strengthen** collaboration and joint coordination of interventions of different actors for malaria prevention with the most vulnerable populations;
- **Integrate** the needs of these populations and the specific responses into the national strategic plan for the fight against malaria;
- **Consider** the specific needs of people with disabilities when developing awareness materials;
- **Establish** community-led monitoring of malaria interventions through community vigilance committees to strengthen community monitoring, access to quality services and decision-making in malaria control;
- **Ensure** the supply of Community Health Workers to the various health facilities in a timely manner and in sufficient quantity;
- **Carry** out community diagnosis at specific times to better take into account the needs of vulnerable populations in the strategies;
- **Maintain** a high level of vigilance in order to intensify the fight against racketeering and additional costs and to perpetuate the gains of free access;
- **Set up** a working framework in the Parliamentarian National Assembly to carry out strong advocacy to mobilize decision-makers to increase funding for the fight against malaria;
- **Establish strategic and sustainable collaborations** with Decentralized Territorial Communities in order to involve them in the mobilization of resources and information necessary for the eradication of malaria at the Communal and Regional levels;
- Establish partnerships with the private sector for the mobilization of financial and logistical resources to fight malaria at local, national and continental levels.
- **Encourage civil society** to participate in the Global Fund Malaria Concept Note process to ensure that gender, rights and community engagement gains are maintained and to advocate for appropriate implementation modalities.



• **Ensure** that community voices, (all genders, ages, abilities and social groups), feed into the design, implementation and monitoring and evaluation of malaria control services to promote the sustainability of malaria control programs.

About CS4ME : Civil Society for Malaria Elimination (CS4ME) is a global platform of Civil Society Organizations (CSOs) committed to malaria elimination. Our mission is to make malaria control programmes and interventions more effective, sustainable, equitable, innovative, civil society-inclusive, community-centred, human rights-based, gendersensitive and adequately funded.

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