



CIVIL SOCIETY FOR MALARIA ELIMINATION

COMMUNITY BASED INTERVENTIONS IN THE FIGHT AGAINST MALARIA MUST BE PRIORITIZED IN THE (GC7 GLOBAL FUND) AT COUNTRY LEVEL TO SAVE LIVES

An Address to Civil society organizations, CCM members, Sub Recipients, Principal Recipients and National Malaria Control Programs

Community activities in the Global Fund grant are indeed a life-saving strategy in global health interventions, particularly in the fight against malaria. The continuous engagement of community members and community health workers is central to improving access to malaria prevention, diagnosis, and treatment services, especially in remote and underserved areas. The suspension of these activities would reverse much of the progress made in the fight against malaria and could lead to an increase in morbidity and mortality.

Community-based interventions, particularly those delivered through Malaria CLM, have proven to be effective in reducing the malaria burden as evident in the success stories on increased acceptability, availability, accessibility, affordability, and quality of care. Over the years of implementation, the Community Accountability Teams have been serving as the intermediary support and point of contact for health services in rural and hard-to-reach areas.

According to the Global Funds Result report 2024, The Global Fund's investments in the fight against malaria contribute greatly to strengthening health and community systems, making them more resilient, sustainable and inclusive."

Still, according to the same report, Malaria remains a daunting global health challenge. It is urgent to get back on track to fight malaria, with investments to accelerate the deployment of innovative tools, scale up interventions and strengthen critical health system capabilities, like disease surveillance, community health workers and last-mile logistics.

Since the beginning of the year, the World is facing a challenge in the area of health funding. African civil society organizations expressed their concern in February in a statement addressed to African Heads of State and Government, considering the effects that this suspension will have, and undoubtedly already has, on the continuity of malaria prevention and care services, particularly on mortality in the most vulnerable groups, namely pregnant women, children under 5 and socially vulnerable groups such as orphans, refugees, internally displaced persons, migrants in our countries. **To optimize the use of Global Fund grants to preserve and enable the implementation of life-saving services, the Global Fund has published an update on adaptation measures for Cycle 7 grants (GC7) on June 6th, 2025.**

Through this document, civil society and communities wish to bring to the attention of CCMs and country-level decision-makers that, in order to maintain the course and efforts already made in the

fight against malaria, the following elements and points must be kept in mind during the reprioritization process. **While precisising that communities do NOT need to revise their community priority annex**, the list below represents the priority community interventions that must be maintained in Global Fund GC7 funding prioritization.

Prevention

- Intensification of interpersonal communication activities in communities;
- Ensuring the participation of community actors and CSOs in household surveys, distribution, and monitoring of LLINs installation and use, making sure to respect equity throughout mass distribution campaigns;
- Conducting advocacy and community engagement meetings with traditional leaders, religious leaders, association leaders, and local elected officials to strengthen their involvement in efforts to prevent and fight malaria.

Case management

- Maintain Community Health Workers in the various countries to continue managing community cases;
- Intensification of advocacy efforts with mayors, governments and the private sector to support Community Health Workers (material and/or financial incentives);
- Intensification of awareness-raising campaigns on malaria control methods among the general population, refugees, internally displaced persons, people with disabilities, albinos, migrants, nomads, indigenous populations and prisoners, as well as in border health posts and corridors.

Health sector planning and governance for integrated, person-centred services

- Implementation of community-led monitoring to use data for advocacy;
- Technical and financial support for CSOs to continue awareness-raising activities, social mobilization, monitoring, malaria community-led research and advocacy, social dialogue, etc.

Support gender-transformative community-led malaria empowerment

- Education programmes, including messaging addressing women's decision-making power in households, educational programs at schools and antenatal and postpartum care at healthcare facilities and community services.

Click here to know more about the Grant Adaptation Measures for Global Fund Grant Cycle7
<https://plataformalac.org/en/2025/06/grant-adaptation-measures-for-global-fund-grant-cycle-7-a-guide-for-communities/>