

#### **ALMA SUMMARY REPORT DECEMBER 2022**

#### Introduction

When the member states of the United Nations adopted the 2016-2030 Sustainable Development Goals, there was universal consensus that there were three critical core goals for humanity. Goal 1-"No poverty"; Goal 2-"Zero Hunger"; and Goal 3-"Good Health and Well-being". All the other goals create an enabling and supportive environment for the attainment of the three interconnected key goals which serve as indicators of success. These SDGs are being heavily compromised by multiple shocks of Climate change, conflict, and disease (most notably the global COVID-19 pandemic).

The Managing Director of the IMF, Kristalina Georgieva, channeled Athena, the Greek Goddess of wisdom, at the IMF/World Bank Fall meetings in October. She called on the Global community to appreciate the interconnectedness of economies, sectors and players; asking for a revitalization of global cooperation in early and joint action to regroup and re- think; echoing the call of the ALMA chair HE President Umaro Sissoco Embaló at the UNGA for solidarity amongst states and peoples.

This report seeks to unpack how this can be done for the fight against malaria on the African continent. A disease that has ravaged communities for centuries, malaria inhibits productivity and reduces learning; therefore limiting earnings now and in the future. In addition to reduced earnings, the disease imposes a heavy tax on households; increasing expenditures to finance treatment and care. Infecting 234 million people in Africa in 2021, it is a major driver of poverty, hunger and ill health, and mortality. Africa loses up to 5% in gross domestic product a year due to malaria, which also contributes 15% to school absenteeism.

#### **Funding the fight**

In 2021, total investments in the fight against Malaria, from both domestic and external sources was estimated by WHO to be US\$3.5 billion. This fell far short of the estimated US\$7.3 billion per year needed to stay on track towards elimination; the goal set by the AU in its Catalytic Framework to end AIDs, TB and Eliminate Malaria.

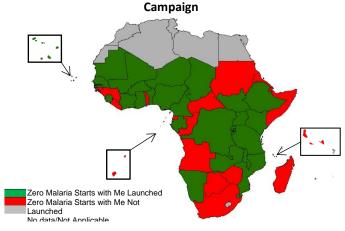
Given the current challenging financial environment, transformational reforms are required. One such catalytic reform, is full scale collaboration amongst all stakeholders in the economy, to collectively own and address the fight. The Chair of ALMA, His Excellency President Umaro Sissoco Embaló, is calling for multisectoral launches of Zero Malaria Starts with Me campaigns in all member countries, to engage all stakeholders. All countries should also launch their malaria youth corps. This should be accompanied by the establishment of End Malaria Councils and Funds; which will use the national and sub national malaria scorecards to monitor progress in the fight against malaria and address the bottlenecks; including using a private sector driven Fund to plug funding gaps.

Algeria Angola Benin Botswana Burkina Faso Burundi Cameroon Central African Republic Cabo Verde Chad Comoros Republic of Congo Côte d'Ivoire Democratic Republic Djibouti Egypt Equatorial Guinea Eritrea Eswatini Ethiopia Gabon Ghana Guinea Guinea Bissau Kenya Lesotho Liberia Libya Madagascar Malawi Mali Mauritania Mauritius Mozambique Morocco Namibia Niger Nigeria Rwanda Sahrawi Arab Democratic Republic São Tomé and Príncipe Senegal Sevchelles Sierra Leone Somalia South Africa South Sudan Sudan The Gambia Togo Tunisia Uganda United Republic of Tanzania Zambia

MEMBERS

**Zimbahwe** 

### Country Reporting Launch of Zero Malaria Starts with Me



Source: Quarter 4 2022 ALMA Scorecard

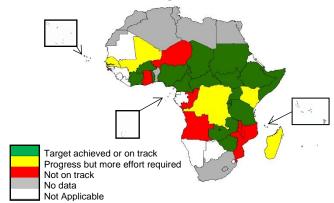
The designation employed and the presentation of material in these maps does not imply the expression of any opinion whatsoever on the part of ALMA concerning the legal status of any country, territory or area of its authorities or concerning the delimitation of its frontiers or boundaries

This is particularly urgent as the Global Fund was not fully replenished, tax revenues have declined, and the costs of interventions are being driven up by inflation, the need for new innovative and more expensive products, supply chain challenges and Human Resource shortages.

#### **Inclusiveness**

The engagement of all members of the community must include displaced persons, mobile populations and immigrants. The WHO 2022 report estimates

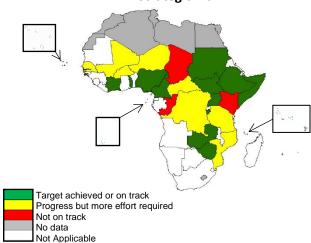
# Malaria activities targeting refugees in Malaria Strategic Plan



Source: Quarter 4 2022 ALMA Scorecard

The designation employed and the presentation of material in these maps does not imply the expression of any opinion whatsoever on the part of ALMA concerning the legal status of any country, territory or area of its authorities or concerning the delimitation of its frontiers or boundaries

#### Malaria activities targeting IDPs in Malaria Strategic Plan



#### Source: Quarter 4 2022 ALMA Scorecard

The designation employed and the presentation of material in these maps does not imply the expression of any opinion whatsoever on the part of ALMA concerning the legal status of any country, territory or area of its authorities or concerning the delimitation of its frontiers or boundaries

that 268 million people in 37 malaria endemic countries are caught in humanitarian emergencies caused by conflict, famine and flooding.

Countries are urged to include these populations in their strategic plans, and funding priorities, as well as engage in cross border malaria programme collaboration with the support of regional economic blocs; to address border dynamics and movements between countries of both the vector and people.

#### **Fighting Resistance**

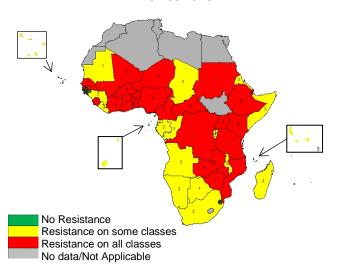
The fight against malaria is experiencing increasing resistance in critical areas. First, mosquitos are evolving, with widespread resistance to all four commonly

### Drug Resistance Monitoring Conducted (2018-2020) and data reported to WHO



Source: Quarter 4 2022 ALMA Scorecard
The designation employed and the presentation of material in these
maps does not imply the expression of any opinion whatsoever on
the part of ALMA concerning the legal status of any country,
territory or area of its authorities or concerning the delimitation of
its frontiers or boundaries

### Insecticide classes with mosquito resistance confirmed since 2010



Source: Quarter 4 2022 ALMA Scorecard
The designation employed and the presentation of material in these
maps does not imply the expression of any opinion whatsoever on the
part of ALMA concerning the legal status of any country, territory or
area of its authorities or concerning the delimitation of its frontiers or
boundaries

used classes of insecticides used for vector control, including the pyrethroid insecticides used for conventional long-lasting insecticide treated nets. African countries rely heavily on nets which have contributed more than any other intervention to reducing malaria mortality. In 2021, 68% of households had at least one net, representing a remarkable increase from 5% in 2000. On the other hand, indoor residual spraying, covers only 2.4% of the population since it is much more expensive. Mosquito resistance to Pyrethroids has been found in 87% of countries globally. In a show of international solidarity, new technologies have been developed, and the use of more effective PBO (pyrethroid & piperonyl butoxide) nets doubled in 2021 to 44% of nets delivered, and making up 51% of the nets delivered in 2022. Dual insecticide nets have also been piloted in

Africa over the last three years, with 21 million delivered in 2022, significantly reducing malaria cases and deaths. In addition there is active research into up to 28 new vector control interventions, some of which are very promising.

Secondly, emerging resistance to anti-malarial drugs has been detected in Eritrea, Rwanda and Uganda. With our continent's heavy reliance on ACTs (artemisinin-based combination therapy) we call for increased international collaboration to find a new class of drugs.

Thirdly malaria parasites with HRP2 deletions are evading current rapid diagnostic tests, giving false negative results. This means that malaria cases are remaining untreated where these deletions are present in the malaria parasites. Rapid tests that can detect these parasites are currently under development.

#### **An unexpected Threat**

The most unexpected threat to the fight against malaria is the spread of an urban adapted mosquito species (Anopheles stephensi) (spreading both P. falciparum and P. vivax malaria) which has started in the horn of Africa. Given the heavily populated urban areas on the continent, this species poses a serious threat. It is resistant to most public health insecticides, with implications of huge increases in vector control, diagnostic, and treatment costs. The IGAD Regional Economic Group is urged to focus efforts on containing and stopping the spread of this species to other parts of the continent.

#### A call for sustainable Revitalization

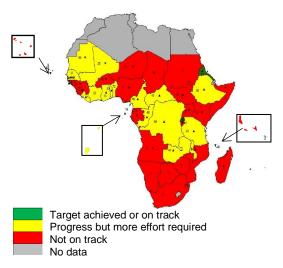
Despite the challenges of the COVID-19 pandemic, and constrained resources, the African continent has continued to deliver many malaria services at the same level. Indeed treatment and diagnosis figures increased by about 2 percent in 2021. More mosquito nets than ever before were delivered in 2022, despite the huge constraints imposed by the COVID-19 pandemic, and 59% of these nets were either PBO or dual insecticide nets, designed to address insecticide resistance. For Children, a massive increase of seasonal malaria chemoprevention, led to a continental increase from 200,000 in 2012 to 45 million in 2021. In 2021, approximately 364,000 children in Ghana, Kenya and Zambia received at least 1 dose of the RTS,S malaria vaccine, and 27 other countries have shown an interest.

Although protecting mothers and their babies through Intermittent Preventive Treatment in Pregnancy (IPTp) has doubled to 35% between 2015 and 2021; the 2021 coverage shows stagnation since 2019. Countries are urged to scale up coverage to at least the same level as antenatal care clinic visits, which average between 53% and 87% of pregnant mothers on the continent.

#### A silent epidemic

Attacking the poor and voiceless, Neglected Tropical Diseases (NTDs) have no place in 21st century Africa. With relatively inexpensive (sometimes free – due to donations from the manufacturers) treatments, the programme should be an integral part of all Primary Health

## Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2021)



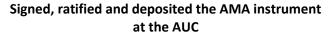
Source: Quarter 4 2022 ALMA Scorecard

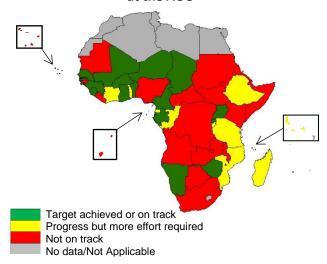
The designation employed and the presentation of material in these maps does not imply the expression of any opinion whatsoever on the part of ALMA concerning the legal status of any country, territory or area of its authorities or concerning the delimitation of its frontiers or boundaries

Care (PHC) services across the continent. Just over 600 million; half of Africa's population require treatment for at least one NTD every year. Togo is the first country in the world to eliminate 4 NTDs; showing that it is possible with prioritization by governments, and full integration into countries' PHC services; to rid the continent of this disease burden that fuels poverty and exclusion.

#### Winning the fight

To win this fight, there is an urgent need for enhanced collaboration and strengthened African capacity. Partners working on the development of and testing of new technologies in vaccines, vector control, diagnostics, treatment, etc; must move beyond simply just engaging African country partners, to co-leading with, and positioning efforts/programmes within African institutions to develop sustainable capacity. To be ready to embrace new technologies early; countries are urged to sign, ratify and deposit the African Medicines Agency (AMA) instruments.





Source: Quarter 4 2022 ALMA Scorecard

The designation employed and the presentation of material in these maps does not imply the expression of any opinion whatsoever on the part of ALMA concerning the legal status of any country, territory or area of its authorities or concerning the delimitation of its frontiers or

The malaria partners starting at country level, must work with other sectors. Research has demonstrated that we cannot effectively address agriculture, water, environment, or even climate change without integrating malaria prevention, control and elimination into these programmes. Education, research, information technology, pharmaceutical manufacturing, and medical technologies, must respond to the most pressing health needs of the 30% to 50% of the population that are infected with malaria and/or NTDs every year.

Countries and partners are currently making large investments (some funded through loans) in pandemic prevention, preparedness and response. A key investment is in a country data and analytics war room for pandemics. Malaria is an ideal pathfinder candidate; for regular testing of the surveillance provided by this war room.

We are at a crossroads in the fight against malaria, and the time for working together, for solidarity towards elimination, is now. Zero Malaria starts with me; Zero Malaria starts with all of us.