

## Press Release

### **PARTNERSHIP GAINS GROUND IN THE FIGHT AGAINST MALARIA**

**Geneva / Lusaka / Brussels / Washington DC, 21 April 2005**— A single word has become the touchstone for hopes that a successful battle can be waged against malaria in Africa: *partnership*. At a time when funding to fight malaria is still sorely lacking, a kaleidoscope of organizations, governments, businesses and celebrities in Africa, Europe, North America and Asia, united under the banner of the Roll Back Malaria Partnership, have made unprecedented gains over the past year.

On Monday 25 April, partners around the world will celebrate these successes as they commemorate Africa Malaria Day 2005. Under the theme “Unite Against Malaria”, celebrations will focus on the importance of partnership at the national, regional and global levels for fighting malaria.

“Working with partners has allowed Zambia to make great strides in the fight against malaria, which include exceeding our 2005 target for providing malaria prevention for children under five,” said Zambian Health Minister Dr Brian Chituwo, whose country will be hosting this year’s main regional Africa Malaria Day event.

Zambia is not alone; many countries have had similar successes enabled by the commitment and coordination of partners:

- In Togo and Zambia, ambitious campaigns shielded millions of children from malaria by distributing insecticide-treated nets—one of the very best protections against the disease—in the context of measles immunization programmes. The December 2004 Togo campaign ensured that 98 percent of households with children under five now own at least one treated net; the overall percentage of households covered rose tenfold, from 6% to 62%.

Additional cooperation between antenatal care, childhood immunization and malaria programmes in other countries including Malawi, Senegal and Mali is also boosting the provision of insecticide-treated nets to pregnant women and young children on an increasingly wide scale while strengthening health systems.

- In Tanzania, partnership enabled the introduction of new technology to Africa for the local manufacture of the most advanced, long-lasting insecticide-treated mosquito nets. Production, which began in 2004, will hit 7 million nets by the end of 2005.
- In Kenya and other African countries, agricultural projects were launched by local people with the support of partners to relieve the shortage of raw materials needed to make artemisinin-based combination therapies—the most effective antimalarial medicines



available today. These projects could yield an estimated 35 million or more additional courses of treatment with these medicines by the end of 2005.

- Throughout Africa—and the world—tens of millions of people will benefit from greater availability of these medicines thanks to public-private collaboration by partners in Europe, China and the United States to ramp up production by the end of this year.
- In Senegal, partners organized and produced a star-studded two-day concert to raise international awareness about malaria.

Monday's Africa Malaria Day commemorations in Zambia's capital, Lusaka, will bring together individuals, community groups, entertainers and local, national and international dignitaries—including Zambian President His Excellency L.P. Mwanawasa, World Health Organization Regional Director for Africa Dr Luís Gomes Sambo and Roll Back Malaria Executive Secretary Prof. Awa Marie Coll-Seck—for a day of reflection, advocacy and mobilization around malaria.

Lusaka will also be the finish line for two events on wheels: The 135-km Bicycle Race Against Malaria, and the Nairobi–Lusaka Drive Against Malaria featuring disabled driver David Robertson, who has covered most of Africa in his specially modified Land Rover, raising awareness and delivering treated mosquito nets to remote corners of the continent.

Europe will commemorate Africa Malaria Day in Brussels, with briefings for both the European Union Parliament Development Committee and the Belgian Senate on how partnerships can effectively tackle malaria control.

Echoing the sentiments of many other political figures who have come to recognize fighting malaria as a top global priority, Member of British Parliament Stephen O'Brien commented, "There is not one of us who can turn a blind eye to the terrible toll of malaria, especially where it strikes hardest—Africa. I applaud and support Africa Malaria Day as a means to bring this challenge and opportunity to the top of the public consciousness worldwide."

Across the Atlantic, Washington DC will be host to briefings on Capitol Hill highlighting the need for US leadership in the fight against malaria, as well as a press event featuring Senegalese music star and Roll Back Malaria Special Envoy Youssou N'Dour, US Members of Congress, African ambassadors, private-sector representatives and other high-level participants.

Congresswoman Sheila Jackson Lee (D-Texas), Chair of the Congressional Children's Caucus, said: " We can defeat malaria—we have seen it done in our own back yard when nearly 50 years ago, malaria was stamped out in the United States. I am proud to be joining members of the Roll Back Malaria Partnership including the World Health Organization, the Global Health Council and our colleagues in Africa to sound a clarion call for bold leadership to unite against malaria. I look forward to working with Roll Back Malaria partners to scale up malaria programs, saving millions of children's lives. This is a call to arms, and we shall respond!"

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### **Malaria in Africa**

Malaria kills nearly a million African children under five each year, more than any other single infection. Every day 3 000 children die from this disease; those who survive may suffer from brain damage or paralysis.

Pregnant women and their unborn children are also especially vulnerable to malaria, which is a major cause of low birth weight, anaemia and infant death.

Malaria can be prevented through personal protection against mosquito bites and treated effectively with medication.

Malaria costs African countries US\$ 12 billion every year in lost GDP. The cost of effective malaria control in Africa would be just US\$ 2 billion per year.

### **The Roll Back Malaria Partnership**

To provide a coordinated international approach to fighting malaria, the Roll Back Malaria Partnership (RBM) was launched in 1998 by the World Health Organization, the United Nations Children's Fund (UNICEF), the United Nations Development Programme (UNDP) and the World Bank.

The Partnership now brings together governments of countries affected by malaria, their bilateral and multilateral development partners, the private sector, non-governmental and community-based organizations, foundations, and research and academic institutions around the common goal of halving the global burden of malaria by 2010.

### **Africa Malaria Day**

On 25 April 2000, African leaders from 44 malaria-endemic countries met in Abuja, Nigeria for the first-ever African Summit on Malaria. At the summit, they signed the historic Abuja Declaration, which commits governments to an intensive effort to halve the burden of malaria in Africa by 2010 and sets interim targets for the year 2005.

To highlight the gravity of the malaria situation on the continent—where 90% of malaria deaths occur—the Summit participants also declared 25 April of each year "Africa Malaria Day".

Africa Malaria Day is commemorated by a variety of activities organized by a wide range of groups including governments, non-governmental organizations, schools and communities, in both malaria-endemic and industrialized countries. Previous activities have included parades, rallies, poster competitions for children, radio and television phone-in sessions, awards ceremonies honouring health workers and/or agencies, press conferences and letter-writing campaigns.

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**World Malaria Report: 3 May 2005**

The World Malaria Report 2005—the most comprehensive effort ever made to present the available evidence on malaria worldwide—will be launched on 3 May 2005 in Cairo, Geneva and New York.

*For more information, contact Judith Mandelbaum-Schmid (details above)*

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