



BANGKOK MEETING BOOSTS BATTLE AGAINST MALARIA

BANGKOK, 9 July 2004— Malaria, a disease that kills a child every 30 seconds, was high on the agenda at the Global Fund Partnership Forum, which wrapped up yesterday in Bangkok. The event took place just days after the announcement of the Global Fund's fourth round of grant approvals, which saw about US\$900 million in new funding for malaria control over five years. Over 40 percent of the funds approved in the fourth round were earmarked for malaria, bringing total Global Fund allocations for the disease to US\$1.8 billion since 2002.

The Roll Back Malaria Partnership, which was heavily represented at the forum, welcomed this new funding as well as the outspoken commitment of forum participants to malaria control.

"We are delighted with this progress," said Dr Awa Marie Coll-Seck, Executive Secretary of the RBM Partnership, in Bangkok. "This combination of financial and political commitment will allow countries to scale up their efforts to roll back malaria."

The new funds for malaria control are a major milestone in the fight against the killer disease, especially since the amount allocated in this fourth round for artemisinin-based combination therapies (ACTs)—the most effective treatment for malaria—represents a fivefold increase over Rounds 1-3 in terms of the number of ACTs that countries will be able to purchase with Global Fund monies. It is estimated that countries will require US\$1 billion per year to purchase ACTs, which are 10 to 20 times more expensive than the antimalarial drugs traditionally used, as their first-line treatment for malaria. In 2004-2005, Global Fund recipient countries will be able to access up to US\$200 million for ACTs.

"While bilateral, multilateral and domestic spending on ACTs will also need to increase, these increased resources from the Global Fund are a tremendous step in the right direction," said Coll-Seck.

Throughout the two-day event, stakeholders from a wide range of constituencies emphasized the need for all malaria sufferers to have access to the best available treatment and showed strong support for the country-level partnerships that are essential for supporting countries in the development and implementation of Global Fund proposals.

"The malaria proposals approved so far use an integrated approach to tackling malaria, which is essential. The strength of these proposals reflects the strength of the Roll Back Malaria Partnership at country level," said Brad Herbert, the Global Fund's Chief of Operations.

Malaria kills at least a million people each year, most of them children under five. Most of these deaths could be avoided by a combination of effective treatment and preventive measures such as insecticide-treated mosquito nets and intermittent preventive treatment during pregnancy. In total over all four rounds thus far, the Global Fund will finance 160 million ACTs and 108 million insecticide-treated mosquito nets. The number of ACTs financed should increase significantly as the Global Fund and other Roll Back Malaria partners are working with countries to reprogram previous grants, shifting funds originally allocated for the purchase of other malaria drugs to ACTs.

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Background Notes

About ACTs

The parasite that causes the most deadly strain of malaria (*Plasmodium falciparum*) is increasingly resistant to the most commonly used antimalarial drugs, leading to increased malaria mortality. The most effective treatment for resistant falciparum malaria is a combination of artemisinin—a drug derived from the *Artemisia annua* (sweet wormwood) plant—and an appropriate synthetic drug. This is known as artemisinin-based combination therapy, or ACT.

Forty malaria-endemic countries have already changed their national malaria treatment policies to adopt ACTs, and several others are in the process of treatment policy change.

Challenges to the implementation of ACTs include cost—they are 10 to 20 times as expensive as traditional monotherapies—and supply in the face of increasing demand.

About the Roll Back Malaria Partnership

To provide a coordinated international approach to fighting malaria, the Roll Back Malaria Global Partnership (RBM) was launched in 1998 by the World Health Organization, UNICEF, UNDP and the World Bank. The Partnership's goal is to halve the global burden of malaria by 2010, with a particular focus on Africa.

The Partnership now includes governments of countries affected by malaria, bilateral and multilateral agencies, non-governmental organizations, the private sector, and research groups, and has succeeded in raising global awareness of malaria, generating increased resources and achieving consensus on the tools and priority interventions required to control the disease.

About the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria

The Global Fund is a unique global public-private partnership dedicated to attracting and disbursing additional resources to prevent and treat AIDS, tuberculosis and malaria. This partnership between governments, civil society, the private sector and affected communities represents a new approach to international health financing. The Fund works in close collaboration with other bilateral and multilateral organizations to supplement existing efforts dealing with the three diseases.



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