

Statement:

Given that Malaria continues to be a needless, silent killer within our communities in Africa, the following key issues have been identified by African countries as priorities to be addressed. That:

1. Community participation and involvement in decision making is weak;
2. Despite increased resources for malaria programmes, access to commodities and services by many communities continues to be inadequate;
3. Information on resources is not being adequately collected and appropriately shared; and
4. Coordination and harmonization of systems for the effective delivery of Malaria, TB and HIV services to the community is insufficient.

We, the African Malaria advocates, gathered in Lusaka on 23 May 2007, based on our resolve that malaria cannot continue to kill nearly a million people in Africa every year - demand that a common voice from African communities be amplified and heard. We therefore request the following actions in order to successfully achieve this aim:

- Increase effective community representation in key decision making fora – namely national, regional and global institutions, including GFATM, RBM, etc. - to ensure the efficient and effective use of resources currently available;
- Dissemination of information down to the community level – including better guidance on how to access services and resources;
- Establish a flexible, public information system tracking resource flows, including identification of country-specific programmatic bottlenecks, resource gaps and impact; and which effectively captures information from the community; and
- Increase interaction between Malaria, TB and HIV programs to find common platforms and processes to improve access to services, especially early diagnosis and treatment, by the communities.

We commit to:

- Strengthen existing and establish new communication channels within malaria networks as well as with other stakeholders on issues of common interest to facilitate collaboration and establish a common voice at key fora;
- Participate actively and cohesively in existing regional and global institutions, including GFATM, RBM, etc to make their work more effective and reduce duplication of efforts; and
- Reach out to national and international advocacy groups working on HIV and TB to implement cross-cutting issues.

To this end, we call upon all African civil society organizations and networks who share in our common vision to join us in **Mobilising Against Malaria Across Africa (MAMA Movement)**

Cameroon Coalition Against Malaria (CCAM) (45 members)

Malaria and Child Illness Secretariat (MACIS) Uganda (70 members)

Zambia Malaria Foundation (100 members)

Voices Mozambique (15 members)

Coalition Against Malaria Ethiopia (CAME) (55 members)

Voices Ghana

Group Pivot Sante Population Mali (166 members)

Princess of Africa Foundation

Kenya NGO Alliance Against Malaria (KeNAAM) (55 members)

Tanzania NGO Alliance Against Malaria (TaNAAM) (150 members)