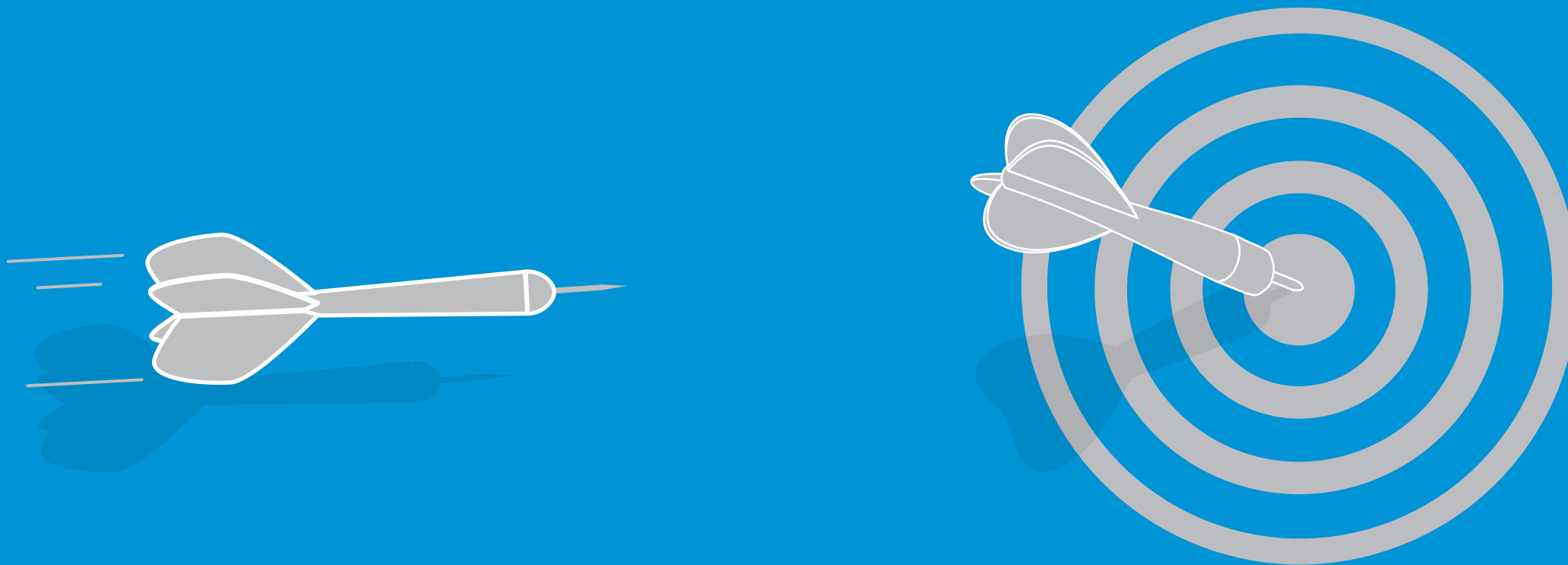


WORLD MALARIA DAY 2021

COMMUNICATIONS TOOLKIT

// Reaching the zero malaria target //



KEY MESSAGES

A FOCUS ON ELIMINATION

- This year, WHO and other partners are marking World Malaria Day by celebrating the achievements of countries that are approaching, and achieving, malaria elimination.
- They provide inspiration for all nations that are working to stamp out this deadly disease and improve the health and livelihoods of their populations.

- Visit our **World Malaria Day 2021** campaign page at <https://www.who.int/campaigns/world-malaria-day/world-malaria-day-2021>

ELIMINATION A VIABLE GOAL FOR ALL COUNTRIES

- Many countries that have eliminated malaria carried, at one time, a very high burden of malaria.
- Together, they have shown the world that malaria elimination is a viable goal for all countries, no matter how near or far they may be from the target today.
 - » In 1965, El Salvador carried the highest malaria burden in Central America, with approximately 34 000 cases of malaria. Following a more than 50-year commitment by the Salvadoran government and its people, the country became the first in the subregion to eliminate the disease. Despite reporting its last malaria-related death in 1984, El Salvador has maintained domestic investments for malaria to this day. El Salvador was **certified malaria-free** by WHO in February 2021.
 - » In the early 1960s, malaria was the main health challenge in Algeria, with an estimated 80 000 cases reported each year. After a 60-year commitment, the country beat the disease through a well-trained health workforce, a rapid response to disease outbreaks, and the provision of free diagnosis and treatment for everyone within its borders, regardless of nationality or legal status. In 2019, Algeria became the second country in the WHO African Region to be **certified malaria-free** in more than 45 years.

- » Sri Lanka achieved a dramatic reduction in its malaria burden – from 2.8 million cases in 1946 to just 17 cases in 1963. But after relaxing its malaria control activities in the 1960s, the disease came roaring back. Fifty years later, and in the face of a civil war, the country succeeded in eliminating malaria through a combination of effective vector control, surveillance and treatment. The use of mobile malaria clinics in high transmission areas ensured prompt diagnosis and care for all in need. Sri Lanka was [certified malaria-free](#) by WHO in 2016.

FIVE KEY DRIVERS OF SUCCESS

- Although each country's elimination journey is unique, common drivers of success have been seen across all regions.
 - » **Robust political commitment.** Successful malaria elimination efforts are owned and led by countries. Political commitment to ending the disease often transcends any one government and is maintained over many decades.
 - » **Sustained funding.** Most countries that succeed in eliminating malaria cover the cost through domestic funding that is sustained over a period of many decades.

- » **Health systems that leave no one behind.** In countries with zero malaria, all people at risk of the disease, regardless of their citizenship or ability to pay, have been reached with the services they need to prevent, detect and treat the disease.
- » **Strong health information systems.** Countries that succeed in eliminating malaria have invested in robust surveillance systems that are capable of generating reliable and timely data.
- » **Community ownership and engagement.** Many countries that reach the zero malaria target have relied on dedicated networks of community-based health workers to prevent, detect and treat the disease, even among vulnerable and hard-to-reach populations.

E-2020 / E-2025 INITIATIVE

- Since 2017, WHO has supported a group of 21 countries in reaching their elimination goals through the E-2020 initiative. A new report, "Zeroing in on malaria elimination", summarizes progress and lessons learned over the last three years (to be released on 21 April 2021).
 - » Through the initiative, WHO has provided specialized technical support and guidance to these 21 countries as they work towards the goal of zero malaria transmission.

WHO has also convened global forums with E-2020 countries, providing a platform for malaria programmes to share best practices and lessons learned.

- » By the end of 2020, eight E-2020 member countries reported zero indigenous cases of malaria: Algeria, Belize, Cabo Verde, China, El Salvador, the Islamic Republic of Iran, Malaysia¹ and Paraguay.
- **Building on the success of the E-2020 initiative, WHO has identified a new group of countries that have the potential to interrupt malaria transmission within a five-year timeline.**
 - » Launched on 21 April 2021, the E-2025 initiative will support countries as they walk the last mile to towards elimination.
 - » Eight new countries have been included in the E-2025 initiative: Dominican Republic, Democratic People's Republic of Korea, Guatemala, Honduras, Panama, Sao Tome and Principe, Thailand and Vanuatu.²
 - » Seventeen E-2020 member countries have automatically been nominated as E-2025 member countries: Belize, Bhutan, Botswana, Cabo Verde, Comoros, Costa Rica, Ecuador, Eswatini, Islamic Republic of Iran, Malaysia, Mexico, Nepal, Republic of Korea, Saudi Arabia,

¹ Although Malaysia has eliminated the malaria species transmitted between people (*P. falciparum*, *P. vivax*, *P. ovale* and *P. malariae*), the *P. knowlesi* parasite, normally found in monkeys, continues to infect a large number of people.

South Africa, Suriname, Timor Leste. This includes countries that have reached zero indigenous cases of malaria but have not officially requested a malaria-free certification from WHO.

ELIMINATION IN THE GREATER MEKONG SUBREGION

- In the face of the dual threat of antimalarial drug resistance and COVID-19, countries of the Greater Mekong subregion have also made major strides towards their shared goal of elimination by 2030.
 - » In the six countries of the subregion – Cambodia, China (Yunnan Province), Lao People's Democratic Republic, Myanmar, Thailand and Viet Nam – the reported number of malaria cases fell by 97% between 2000 and 2020.
 - » Malaria deaths were reduced by more than 99% in these six countries over the same period of time; there were an estimated 15 malaria-related deaths in 2020 compared to 6000 deaths in the year 2000.
- Since the emergence of the COVID-19 pandemic, WHO's Mekong Malaria Elimination (MME) programme has provided regular analyses on global stocks of malaria drugs and commodities in the Greater Mekong subregion.

- » The [MME programme](#) continues to convene regular meetings with national malaria programmes on the risks and impact of COVID-19 on malaria services.
- **The last pockets of malaria in the subregion are found among hard-to-reach populations living and working in remote, forested or mountainous areas.**
 - » The MME programme continues to provide countries in the subregion with technical expertise and epidemiological data to accelerate progress towards malaria elimination among these populations.

ELIMINATING MALARIA DURING A PANDEMIC

- Since the early days of [COVID-19](#), national malaria programmes have encountered a number of challenges – notably a diversion of human and financial resources to tackle the pandemic.
- In some countries, lockdowns and restrictions on the movement of people and goods led to delays in the delivery of malaria preventive measures, such as insecticide-treated nets.

- » Following lockdowns that prevented health workers from travelling quickly to rural areas, Timor Leste – a country that had reported zero indigenous cases of malaria in 2018 and 2019 – saw an outbreak of the disease along its shared border with Indonesia in mid-2020.
- » In Bhutan, the delayed distribution of nets and other disease control tools led to a spike in malaria cases in 2020.
- **Malaria diagnosis and treatment services were also interrupted during the pandemic as many people were unable – or unwilling – to seek care in health facilities.**
 - » According to the preliminary results of a recent WHO survey, one third of countries globally have experienced at least partial disruptions in the delivery of malaria services during the pandemic.
 - » The survey shows that many people are not seeking care due to the fear of contracting COVID-19.
 - » WHO is calling on all people living in malaria affected countries to “beat the fear”: if you have a fever, go to the nearest health facility to be tested and treated for malaria. Health workers will ensure you are safely treated according to national COVID protocols.

- COVID-19 has affected malaria case numbers in other ways, too. In all E-2020 countries but one (Saudi Arabia), restrictions on movement due to COVID-19 have led to lower rates of imported malaria cases, reducing the risk of local transmission of the disease.
 - » Countries that have seen the greatest drop in importation rates are: Cabo Verde, Belize and El Salvador (100%); Timor-Leste (89%); Eswatini (75%); Malaysia (74%); Bhutan (70%); Republic of Korea (61%); China, Mexico and South Africa (59%).

VIRTUAL EVENT

Ahead of World Malaria Day, country leaders, frontline health workers and global partners will come together in a virtual forum to share experiences and reflections on efforts to reach the target of zero malaria.

The event will be co-hosted by WHO and the RBM Partnership to End Malaria from 12:00 to 13:30 GMT. Discussions will be in English, with simultaneous interpretation provided in French and Spanish. Everyone is welcome to join: registration details can be found on this [webpage](#).

REACHING ZERO

VIRTUAL FORUM ON MALARIA ELIMINATION TO MARK WORLD MALARIA DAY 2021

Despite the COVID-19 pandemic and other challenges, a growing number of countries are approaching and achieving malaria elimination. This virtual event, held ahead of World Malaria Day 2021, will inspire more nations around the world to reach the target of zero malaria.

DATE:
Wednesday,
21 April 2021

TIME:
12:00 - 13:30
GMT

REGISTER HERE:
[BIT.LY/3D6HW2F](https://bit.ly/3D6HW2F)

RBM Partnership To End Malaria

World Health Organization

KEY DATA

Over the last two decades, a growing number of countries have been approaching, and achieving, malaria elimination.

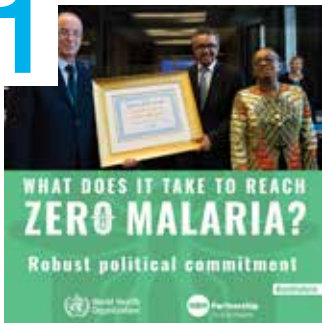
- The number of countries with less than 1000 malaria cases more than doubled – from 14 countries in 2000 to 34 countries in 2019.
- Twenty-four countries achieved zero malaria transmission for three years or more between 2000 and 2020. These countries include:
 - » Algeria, Argentina, Armenia, Azerbaijan, Cabo Verde, China, Egypt, El Salvador, Georgia, Islamic Republic of Iran, Iraq, Kazakhstan, Kyrgyzstan, Malaysia, Morocco, Oman, Paraguay, Sri Lanka, Syrian Arab Republic, Tajikistan, Turkey, Turkmenistan, United Arab Emirates and Uzbekistan.
- Eleven countries were certified malaria-free by WHO between 2000 and 2021.
 - » United Arab Emirates (2007), Morocco (2010), Turkmenistan (2010), Armenia (2011), Sri Lanka (2016),

Kyrgyzstan (2016), Paraguay (2018), Uzbekistan (2018), Algeria (2019), Argentina (2019) and El Salvador (2021).

- » Globally, a total of **38 countries and territories** have been certified malaria-free by WHO.

SOCIAL MEDIA TILES

1



Robust political commitment

Successful malaria elimination efforts are owned and led by countries. Political commitment to ending the disease often transcends any one government and is maintained over many decades.

2

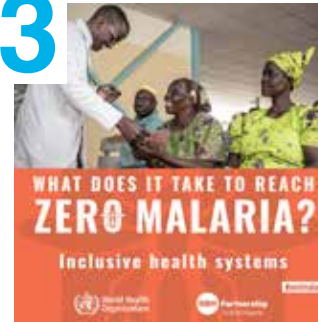


Sustained funding

Most countries that succeed in eliminating malaria cover the cost through domestic funding that is sustained over a period of many decades.

These images are available at: <https://www.who.int/campaigns/world-malaria-day/world-malaria-day-2021/social-media-tiles>

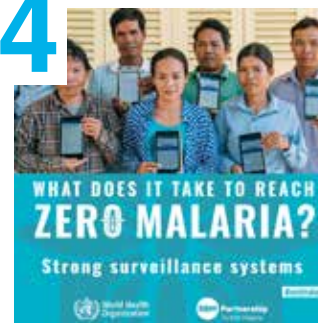
3



Health systems that leave no one behind

In countries with zero malaria, all people at risk of the disease, regardless of their citizenship or ability to pay, have been reached with the services they need to prevent, detect and treat the disease.

4



Strong health information systems

Countries that succeed in eliminating malaria have invested in robust surveillance systems that are capable of generating reliable and timely data.

5



Community ownership and engagement

Many countries that reach the zero malaria target have relied on dedicated networks of community-based health workers to prevent, detect and treat the disease, even among vulnerable and hard-to-reach populations.