

MALARIA DAY IN THE AMERICAS 2012: Guidelines for Commemoration, Communications, and Advocacy

I. Background

In September 2005, the 46th Directing Council of the Pan American Health Organization (PAHO) adopted Resolution CD46.R13 which highlighted, among other things, the need to establish policies and operational plans to achieve a reduction of the malaria burden by at least 50% by 2010 and 75% by 2015; and to designate a Malaria Control Day in the Americas on a selected annual date, to recognize past and current efforts to prevent and control malaria, promote awareness, and monitor progress. Similarly, in May 2007, the 60th World Health Assembly passed resolution WHA60.18: "Malaria, including a proposal for establishment of World Malaria Day" which provides, among other things, that: "World Malaria Day shall be commemorated annually on 25 April or on such other day or days as individual members may decide ..." Guyana, which has been commemorating a National Malaria Day since 2003, proposed the date for the Americas to be 6 November, which coincides with the day when the presence of malaria parasites in the blood of patients with febrile symptoms was first observed by Charles Louis Alphonse Lavéran in 1880. With these precedents, the 27th Pan American Sanitary Conference held in Washington DC from 1-5 October 2007 resolved that November 6 will henceforth be observed annually as Malaria Day in the Americas. (CSP27.R11)

Currently on its sixth year of commemoration, Malaria Day in the Americas is regarded as an important opportunity and mechanism for countries of the Region to engage various stakeholders in aggressively fighting malaria. In June 2008, the PAHO Executive Committee emphasized the need to build upon the momentum of Malaria Day in the Americas and for peoples of the Region to become strong and involved advocates against the disease.

II. Malaria Day in the Americas: Concept and Objectives

The Strategy and Plan of Action for Malaria in the Americas 2011 – 2015, approved by the 51st PAHO Directing Council (September 2011), highlights communications and advocacy as among the key issues in malaria that needed increased emphasis in the Region. An important element of these efforts is the commemoration of *Malaria Day* in the countries of the Americas which campaigns for increased advocacy and commitment among stakeholders and draws communities and the general population into concrete actions that contribute to the achievement of goals and targets in all levels – global, regional, country, and community.

The Region of the Americas continues to pursue its commitment to global targets beyond 2010, including the UN Millenium Development Goals (MDGs), towards the long term objective of stopping local malaria transmission in areas where such is deemed possible. Malaria is among the diseases identified as feasible to be eliminated in a number of countries

in the Region by the Pan American Health Organization in <u>"CD49/R19: Elimination of Neglected Diseases and other Poverty-Related Infections"</u>

Malaria Day in the Americas which will be observed for the sixth time on **6 November 2012** is envisioned to be the platform upon which countries of the Region can engage in a year-round aggressive campaign against the disease. Specifically, *Malaria Day in the Americas* seeks to attain the following objectives:

- → Improve the communication process and extension of advocacy work to all stakeholders and target audiences.
- → Enhance visibility/interest on Malaria in the Region of Americas and the global scourge that the disease brings to peoples of the world.
- → Increase awareness and understanding of the key issues among target audience/population.
- → Catalyze change of attitudes and modification of behaviors.
- Generate advocacy/support from the public, policy makers, clients and strategic partners.
- → Encourage increased and enduring support to efforts against malaria, including the elimination of local transmission in areas where such is feasible.

Partners and malaria stakeholders in the Region are encouraged to consider this concept and objectives in the commemoration of *Malaria Day in the Americas 2012*.

Theme for Malaria Day in the Americas 2012

"Test. Treat. Track. - Scaling up diagnostic testing, treatment, and surveillance for malaria."

On the occasion of World Malaria Day 2012, and in keeping with this consolidated effort by the global malaria community to highlight the reported successes and the remaining challenges in malaria control today, and to maximize the impact of substantial investments for this preventable and treatable disease, Roll Back Malaria (RBM) partners have agreed to use the theme: "Sustain Gains. Save Lives. Invest in Malaria." Stakeholders in the Region have the option of using this theme. However, as deemed more appropriate for the situation in the Americas, focus towards the World Health Organization's Test, Treat, Track campaign is advocated.

Key Messages for 2012

1. Keep malaria prevention and control high on political agendas

During the past decade, investments in malaria prevention and control have created an unparalleled momentum and saved hundreds of thousands of lives. A concerted effort by governments, international agencies, donors, research and civil society organizations, has led to a one-third reduction in the malaria death rate on the African continent.

But these gains are fragile. Malaria transmission still occurs in 99 countries – killing an estimated 655,000 people every year – mainly children under five years of age. It is vital that efforts are expanded through increased national and international political commitment and through greater investment in malaria prevention and control tools. Research and development efforts also need to be scaled up to develop new and better tools, in particular to combat drug and insecticide resistance.

Without concerted action, international funding for malaria may fall in the coming years. It will be crucial to have a fully-funded Global Fund, which can deliver the core financing for existing interventions. A continued engagement by major donors - such as the United States, the United Kingdom and the World Bank - will also be essential to achieving 2015 targets. High-burden countries should also be supported in identifying new potential funding streams through innovative financing options and in forging new relationships with emerging donors.

2. Scale up diagnostic testing, treatment and surveillance

While prevention efforts such as the scale-up of long-lasting insecticidal nets and indoor residual spraying have benefited from a significant increase in funding during the past decade, resources dedicated to the expansion of diagnostic testing, anti-malarial treatment coverage and surveillance have not received the same degree of attention.

Through the <u>T3: Test. Treat. Track</u> initiative, launched during the commemoration of World Malaria Day, WHO will urge malaria-endemic countries, donors and partners to substantially increase investment in diagnostic testing, treatment and surveillance capacity, coverage and infrastructure. The initiative will bring the most urgent programmatic needs under one theme, and highlight the importance of WHO's technical guidance available through the following core documents:

- Achieving Universal Access to Malaria Diagnostic Testing: An Operational Manual (2011);
 - Guidelines for the Treatment of Malaria, Second edition (2010);
 - Disease Surveillance for Malaria Control/Elimination (2012).

Improved diagnosis presents an unprecedented opportunity to improve surveillance, and better surveillance helps national program managers and communities to direct scarce resources to where they are needed the most. Scaled-up work on T3 will result in a better overall understanding of the disease burden and lead to a more effective delivery of international aid. These efforts are also essential for the containment of drug and insecticide resistance.

By strengthening the focus on these three key areas, the malaria community can make a consolidated push toward the Millennium Development Goals and get closer to achieving the World Health Assembly target of reducing the malaria burden by at least 75% by 2015.

3. Malaria interventions are inexpensive and highly cost-effective.

The procurement price of a rapid diagnostic test (RDT) is between US\$ 0.30 - 1.30. A course of artemisinin-based combination therapy (ACT) costs between US\$ 0.60 - 5.10 for an adult and US\$ 0.20 - 0.40 for a young child. A long-lasting insecticidal net that lasts three years cost US\$ 1.40 per person per year of protection. Investing in an increased supply of RDTs in malaria-endemic countries will bring down ACT supply requirements, because only confirmed cases will need to be given ACT medication. In Senegal, for example, the scale-up of malaria diagnostic testing through the use of RDTs has resulted in the saving of approximately 250,000 ACT courses per year. International funding for malaria control has increased substantially in the last 10 years. With rapid economic growth in malaria-endemic countries in the past decade, there is potential for domestic financing for malaria control to grow, too. If just 1% of total domestic government spending in endemic countries was made available for malaria prevention and control, 75 countries could provide enough long-lasting insecticidal nets to cover everyone at risk.

III. Key Figures

(Cost estimates are based on the Global Malaria Action Plan, 2008)

In the Americas, achievement of the target for 2010 and the malaria-specific UN MDG for 2015 means:

- Decreasing annual malaria cases from approximately 1.15 million in the year 2000 to 575,000 by 2010 (50% reduction) and to 287,000 by 2015 (additional 25% reduction)
- Reducing malaria deaths from 348 in the year 2000 to less than 174 (50% reduction) and to less than 87 (additional 25% reduction)

Globally and in the Americas,

- Effective, long-term malaria control is inextricably linked to the strength of health systems. Strong health systems can deliver effective safe, high-quality interventions when and where they are needed and assure access to reliable health information and effective disease surveillance. At the same time, integrating malaria treatment, prevention and surveillance into existing health programs and activities in endemic countries will ensure that funding earmarked for malaria control contributes to the development, expansion and continuous improvement of national health systems.
- The international community has recognized the importance of health systems strengthening in combating the major poverty-related diseases in the poorest countries of the world

Success stories in the Americas, resulting from the implementation of best practices and collaboration include...

- Some 25 million people in the Americas live in areas at high or moderate risk for malaria.
- In 2011*, the region reported 541,464 confirmed malaria cases and 72 malaria deaths.
- These figures represent a 54% decline in cases and an 81% decline in deaths since 2000.
- Malaria incidence in the Americas declined in 18 of 21 endemic countries between 2000 and 2010.
- Between 2000 and 2010, cases declined over 75% in 10 countries, 50-75% in five countries, and less than 50% in three countries.
- In three countries—the Dominican Republic, Haiti and Venezuela—malaria cases increased between 2000 and 2010; however, overall case trends in the Dominican Republic has been downward since 2005
- Non-endemic countries in the Americas report an average of 2,000 malaria cases (imported or introduced) per year. Most are reported by the United States (1,414) and Canada (385).
- Currently, four countries are in pre-elimination phase (Argentina, El Salvador, Mexico and Paraguay); other endemic countries are in control phase.

(Source: Malaria Country Reports, 2011)

Investment needed worldwide to achieve global goals:

- \$5 billion USD annually from 2011 to 2020 to sustain progress
- \$1 billion USD annually for research and development of new prevention and treatment tools

In the Americas, the investment needed for malaria control and elimination are:

- \$219 to 226 million USD annually from 2011 to 2020 to sustain progress
- \$120 million USD annually by 2025 if current trends are sustained

IV. Regional and National Events for Malaria Day in the Americas: Examples from 2007 to 2011

Since 2007, simultaneous activities were held to commemorate Malaria Day in the Americas in various countries such as Belize, Bolivia, Colombia, Dominican Republic, Ecuador, El Salvador, Guatemala, Guyana, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Suriname, and Venezuela which include various exhibits, contests, health promotion activities, discussion forums, recognition ceremonies, and intensive multi-media campaign.

During the past five years, important events were held in Washington DC to commemorate Malaria Day in the Americas. These include:

- (2007) Scientific session entitled "Combating Malaria: What Works?" held during the American Public Health Association Annual Conference where the experience of the Region on malaria in the Amazon was featured and discussed.
- (2008) PAHO coordinated the "Malaria in the Americas Forum: Overcoming the Challenges of a Borderless Disease", participated in by representatives from various global, regional, and national stakeholders in malaria, focusing on key issues that include climate change and malaria; borders and health diplomacy; and lessons learned and future needs. During the malaria day activities in 2008, PAHO launched the search for the Malaria Champions of the Americas, to identify, celebrate, and provide avenues to emulate best practices and success stories in malaria prevention and control.
- (2009) The awarding ceremony for the Malaria Champions of the Americas is a key event in the commemoration of the 2009 Malaria Day in the Americas at the PAHO headquarters in Washington DC, held alongside the "Malaria in the Americas Forum: Counting Malaria Out towards the 2010 Targets and the UN Millennium Development Goals". Featured topics in the forum include updates on the status of malaria in the Region; malaria and mobile populations; and lessons learnt during the eradication era and their possible application to malaria elimination in the Americas.
- (2010) Three new Malaria Champions of the Americas were honored during the commemoration of the 2010 Malaria Day in the Americas at the PAHO headquarters in Washington DC. Also held was the Malaria in the Americas Forum that featured the work of the Amazon Malaria Initiative / Amazon Network for the Surveillance of Anti-malarial Drug Resistance (AMI/RAVREDA).
- (2011) Malaria Elimination and the Integration of Malaria Programs in the Health Systems were featured as important evolving strategic directions in the Region during the Malaria Day in the Americas Forum. Outstanding efforts in Honduras, Brazil, and Nicaragua were also honored as Malaria Champions of the Americas during the commemoration of the 2011 Malaria Day in the Americas at the PAHO headquarters in Washington DC.

Since November 6th coincides with the US Presidential elections this year, the Regional event in Washington DC will be held on November 8th, 2012 (Thursday). The top finalists for the 2012 Malaria Champions of the Americas Award will be honored in a ceremony that celebrates people and organizations who contributed most this year to containing this disease that annually afflicts more than half a million people in the region and places the health of millions more are at risk. The 2012 Malaria in the Americas Forum will also feature discussions on: "Test. Treat. Track. - Scaling up diagnostic testing, treatment, and surveillance for malaria."

Partners and stakeholders in the countries and communities are enjoined to hold similar events/efforts on Nov. 6, 2012 or any time during the year. It is emphasized that while the

commemoration is set annually on the 6th of November, advocacy efforts will be carried out throughout the year.

The Region envisions having stronger and more consolidated set of events for the annual commemoration in 2012. It is hoped that partners and stakeholders in all levels of work will also have increased and stronger participation in planning and commemorating *Malaria Day in the Americas* in the coming years. While a region-wide theme and activities are advocated, countries are encouraged to use the annual commemoration as platform to share a message and engage in activities that directly address national realities and specificities. Partners are enjoined to inform the PAHO Regional Malaria Program of specific activities scheduled in the countries for the 2012 Malaria Day in the Americas so that the information can be disseminated accordingly.

Specific country activities and events for Malaria Day in the Americas 2012 will be announced to the public in advance.

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