WORLD HEALTH ORGANIZATION Regional Office for the Eastern Mediterranean ORGANISATION MONDIALE DE LA SANTE Bureau régional de la Méditerranée orientale





REGIONAL COMMITTEE FOR THE EASTERN MEDITERRANEAN

October 2015

Sixty-second Session Kuwait, Kuwait City, 5-8 October 2015

TECHNICAL MEETING

REGIONAL MALARIA ACTION PLAN (2016–2020)

Objectives of the event

The objectives of the event are to:

- brief Member States on the WHO *Global technical strategy for malaria 2016–2030* and the Roll Back Malaria Partnership's *Action and Investment to Defeat Malaria 2016–2030*;
- share information on regional achievements and challenges in malaria control and elimination and the way forward in the post-2015 development agenda and sustainable development goals;
- highlight key priority actions in the regional action plan to operationalize the global strategy in the Region from 2016 to 2020.

Background

In May 2015, WHO Member States endorsed the *Global technical strategy for malaria for 2016–2030*. The new strategy was developed in close consultation with all countries of the Region and partners. It provides a comprehensive framework for countries to develop tailored programmes that will sustain and accelerate progress towards malaria elimination. It emphasizes the need for universal coverage with core malaria interventions for all populations at risk and highlights the importance of using high-quality surveillance data for decision-making. It also identifies areas where innovative solutions will be essential for attaining the goals, and summarizes the estimated global costs of implementation.

In order to ensure shared goals and complementarity, the WHO strategy was developed in close alignment with the Roll Back Malaria Partnership's *Action and investment to defeat malaria* 2016–2030, which highlights the need for further and continued investment in malaria control and elimination in the coming 15 years.

The strategy has an ambitious vision of a world free of malaria, aiming to reduce malaria incidence and mortality rates globally by at least 90% by 2030, to eliminate the disease in at least 35 countries, and to prevent its re-establishment in countries that are free of malaria. It includes associated milestones for 2020 and 2025. The strategy aims to reduce the global disease burden by 40% by 2020, and to eliminate malaria in at least 10 new countries by 2020.

The strategy is built on the three pillars of: ensuring universal access to malaria prevention, diagnosis and treatment; accelerating efforts towards elimination and attainment of malaria-free status; and transforming malaria surveillance into a core intervention, supported by innovation, research and an

enabling environment (including strong political commitment, robust financing, increased multisectoral collaboration and strong health systems).

Regional malaria action plan (2016–2020)

The regional malaria action plan to operationalize the global malaria strategy considers regional heterogeneity in terms of malaria transmission and the specific challenges facing malaria programmes in Member States. The Region has eight countries with local transmission. Fourteen countries have eliminated malaria, but remain at risk of reintroduction. The regional plan builds on resolution EM/RC55/R.9 adopted in 2008. The vision, goal, objectives, guiding principles and strategic framework are in line with the global strategy, which was endorsed by the Sixty-eighth World Health Assembly in May 2015.

The vision of the plan is that all countries in the Region are malaria-free. Its goal is by 2030 to interrupt malaria transmission in areas where it is feasible and reduce the burden by more than 90% in areas where elimination is not immediately possible, so that malaria is no longer a public health problem or barrier to social and economic development.

Regional progress

In 2013, six countries were still endemic for malaria and in the control phase – Afghanistan, Djibouti, Pakistan, Somalia, Sudan and Yemen. Islamic Republic of Iran and Saudi Arabia were close to elimination with only 519 and 34 local cases, respectively, in 2013, and malaria transmission was limited to a few border areas.

The number of confirmed malaria cases reported in the Region decreased from 2 million in 2000 to 1 million in 2013. Two countries accounted for 84% of cases in 2013: Sudan (57%) and Pakistan (27%). Seven countries – Afghanistan, Islamic Republic of Iran, Iraq, Morocco, Oman, Saudi Arabia, Syrian Arab Republic – achieved more than a 75% decrease in the incidence of confirmed cases between 2000 and 2013. An assessment of trends was not possible for Djibouti, Pakistan, Somalia, Sudan and Yemen, owing to inconsistent reporting and weak malaria surveillance systems.

Efforts have been made to scale up the coverage of diagnosis, treatment with effective drugs and prevention measures, but coverage is still below optimum in the six high-burden countries.

Expected outcomes

- Greater awareness among Member States of the need to sustain political commitment for malaria control and elimination in malaria-endemic countries in the Region.
- Input of senior policy-makers in finalizing the regional malaria action plan.
- Consensus on updating national malaria strategies in line with the global strategy.