

MALARIA IS EVITABLE

2023 WORLD MALARIA DAY STATEMENT

April 25, 2023

After years of steady declines, malaria cases and deaths are on the rise. We are not on track to reach the goal of ending malaria as a public health threat by 2030 and gender inequalities.

We must strive to provide better and more equitable access to all health services, greatly increase funding for malaria programs, invest in new approaches and innovations, and improve the use of existing tools, prioritizing women in their diversity, as a comprehensive way to eliminate gender inequalities.

Women4GlobalFund (W4GF) calls on the Global Fund and country governments to address gender inequalities, which is essential to the success of national malaria elimination strategies and programs.

1. Dying from malaria is preventable. We must act now.

Although malaria deaths are resuming a downward trend, following the increase during the COVID-19 pandemic crisis, countries are not regaining the pace of disease reduction as they were before 2015. Of particular concern are the persistent barriers to access to prevention and treatment faced by many women, adolescents and girls.

The World Malaria Report 2022 estimates 247 million cases and 619,000 deaths in 2021, 96% occurred in the African region and one in five of these were in children under 5 years of age. In addition, in the same year, 32% of pregnancies in this region (13.3 million) were exposed to Malaria infection, 1.2 million more than in 2020. The Global Fund provides 63% of all international funding for malaria programs, covering 94 countries, investing \$16.2 billion through June 2022.

Many women in these countries face unique challenges when trying to access prevention and treatment services due to social, economic and cultural factors. Lack of access to education, employment, health services, along with discrimination and stigma limit opportunities to realize their right to health.

The Global Fund and its countries must adapt to these dangerous realities. We cannot insist on fighting malaria with strategies that are blind to gender inequalities. For this reason, we call for Global Fund Country Coordinating Mechanisms in countries to include key gender indicators with specific funding to address gender inequities during this 7th grant cycle. We call for the Country Coordinating Mechanisms to coordinate the development and submission of national funding requests in a transparent and equitable manner, including the voices of women, adolescents and girls in their diversity.

¹ World Malaria Report 2022, pp 14.

² Ibid, pp. 30.

³ The Global Fund, World Malaria Day, April 25th 2023.

2. Why Gender Equality and Gender Transformative Responses Matter

Malaria prevents economies, communities and families from reaching their potential, with women and girls facing the greatest barriers. Women are more vulnerable than men, have less access to education, which often translates into less ability to respond to threats to their health or that of their children, including comprehensive access to malaria prevention and related services.

Data suggest that women's access to malaria prevention and treatment is often limited by their low socioeconomic position in their households and communities. This is highlighted in several documents, such as Roll Back Malaria's 2021 guidelines and a Gates Foundation review on gender and malaria of several studies that show direct links to decreasing malaria incidence and prevalence and strengthening women's agency over resources and decision-making in the household.

Finally, women are often more vulnerable during pregnancy; changes in the immune system and increased blood volume can make pregnant women more susceptible to malarial infection. This can also increase the risk of complications such as anemia, miscarriage, and low birth weight.

3. Call to action:

In the new opening of the Global Fund's Seventh Grant Cycle, we are urging both the Global Fund and country governments to take the following steps:

- Develop more accurate and effective data collection tools and indicators to address the gender barriers that hinder progress towards malaria control. This can be achieved by ensuring that malaria surveillance systems systematically collect and report age- and sex-disaggregated data. Additionally, community-led monitoring should be prioritized and funded to collect qualitative data that complements the quantitative data being collected.
- Ensure meaningful participation of women, including those from diverse backgrounds, throughout the entire cycle of strategy planning, implementation, and monitoring. This participation should be led by women themselves and be integrated into the End Malaria Councils being established in 24 African countries. These councils will bring together leaders from all sectors and levels to drive advocacy, action, and resource mobilization for malaria control, with the active and meaningful participation of women.
- Orient malaria policy and program approaches towards community and gender integration. This includes addressing gender gaps in mobility and decision-making power and empowering women financially and as decision-makers. Additionally, malaria education programs should be launched for household decision-makers, including husbands/parents and elders, to increase women's access to treatment.

By taking these steps, we can address the gender disparities that currently hinder progress towards malaria control, and ensure that women's voices are heard and valued in the fight against this disease.

⁴ RBM, Malaria No More. 2021. Achieving a double dividend: the case for investing in gendered approach to the fight against Malaria.

⁵ Gates foundation. 2022. Gender and Malaria evidence review.