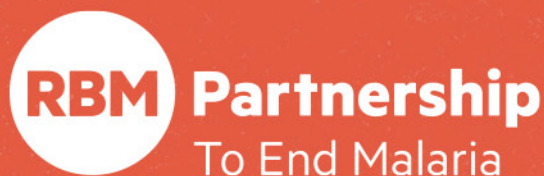




MALARIA
IN AFRICA
IN LIGHT OF
COVID-19

Key Messages



Malaria and COVID-19

Developed by the RBM Partnership to End Malaria

In the face of COVID-19, countries must move fast and distribute malaria prevention and treatment tools in this relatively early phase of the COVID-19 outbreak in sub-Saharan Africa and do their utmost to safely maintain these essential malaria control services.

Severe disruptions to insecticide treated mosquito net campaigns and access to antimalarials due to COVID-19 could lead to a surge in malaria cases and a doubling of malaria deaths this year, increasing the burden on challenged health systems, according to a new modelling analysis by WHO, in close collaboration with partners including PATH, the Malaria Atlas Project, and the Bill & Melinda Gates Foundation.

Acting now, before the rainy season, will save lives and prevent a surge in malaria cases that will overburden challenged health systems. Sustaining investments in the malaria fight could save hundreds of thousands of lives – especially those most vulnerable, children under 5 who make up two-thirds of malaria deaths, and pregnant women, prevent additional strain on health systems, and protect the gains of anti-malaria efforts-to-date. Countries and partners are working together to safely move ahead with anti-malaria programmes, where and when possible.

Current and potential impact of COVID-19

- Suspends distribution campaigns of insecticide-treated mosquito nets that are estimated to have prevented more than two-thirds (68%) of malaria cases in sub-Saharan Africa since 2000.
- Limits access to essential health services and prevent community health workers from conducting testing and providing antimalarials that lead to early diagnosis and treatment of malaria.
 - Without access to early treatment, a mild case of malaria can rapidly progress to severe illness and death.
 - In 2018, children under 5 accounted for 2/3 of all malaria deaths and an estimated 1 in 3 pregnant women in sub-Saharan Africa were infected with malaria.
- Discourages people with fevers to seek effective and life-saving treatment.
- Disrupts the supply chain of antimalarials and proven malaria interventions, including rapid diagnostic tests (RDTs), insecticide-treated mosquito nets (ITNs), indoor residual spraying (IRS), and seasonal malaria chemoprevention (SMC).
- Lack of PPE to protect and enable frontline health workers to go into communities/door-to-door and do effective integrated community case management and be able to treat people safely at health clinics.

Recommendations for countries

- Sustain and increase investments in the malaria fight, which will benefit the COVID-19 response.
- Ahead of the rainy season, get as many prevention campaigns done and as many people protected as possible with effective vector control (ITNs and IRS) and preventive therapies for pregnant women and children (SMC, intermittent preventive treatment in pregnancy (IPTP), intermittent preventive treatment in infants (IPTi).

- Maintain access to essential health services that lead to early diagnosis and treatment of malaria, which prevents malaria cases from becoming severe and requiring hospitalization.
- Get the word out about the importance of sleeping under mosquito nets, staying safe and seeking treatment when you have a fever.
- Provide health workers with personal protective equipment (PPE) so they can conduct campaigns safely, patients can get treated at home or be treated safely at health clinics.
- Coordinate among partners to ensure drugs and tools are where they're needed most.

Taking action

- Several countries have already heeded the call to continue their planned malaria programmes while taking precautionary measures against COVID-19, including Benin, Chad, the Democratic Republic of the Congo, Niger, and Sierra Leone, which are going ahead with their mass distribution campaigns of ITNs.
- Kenya, Ghana and Malawi are continuing to immunize children against malaria through a pilot malaria vaccine programme announced on World Malaria Day last year.

Current investments in ending malaria are saving nearly 600,000 lives compared to 2000 levels and building capacity and helping health systems fight malaria and emerging diseases like COVID-19 by

- training tens of thousands of health care workers to conduct early diagnosis and treatment and integrated community case management of people with malaria and/or fever;
- increasing access to life-saving treatments, rapid diagnostics and preventive interventions;
- building data systems to improve real-time surveillance of infectious diseases;
- improving supply chains and availability of effective medicines and medical equipment;
- building in-country lab capacity.



For more information on malaria and COVID-19, please visit www.endmalaria.org

