

Regional Committee for Africa

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Provisional agenda item 11

Draft resolution

Addressing threats and galvanizing collective action to meet the 2030 malaria targets
(Document AFR/RC75/8)

The Regional Committee,

Having considered the technical report entitled “Addressing threats and galvanizing collective action to meet the 2030 malaria targets” (AFR/RC75/PSC/6);

Recalling the global commitments outlined in the Global technical strategy for malaria 2016–2030 (GTS) through resolution WHA68.2 (2015), and the subsequent endorsement of the updated GTS in resolution WHA74.9 (2021);

Referring to resolution AFR/RC59/R3 (2009) of the WHO Regional Committee for Africa on accelerated malaria control and the Regional framework for the integrated control, elimination and eradication of tropical and vector-borne diseases 2022–2030 (AFR/RC72/7), which provide guidance to Member States on accelerating implementation of integrated person-centred interventions, including malaria prevention and control strategies towards eventual elimination;

Recognizing the critical contributions of development partners such as the Global Fund to fight AIDS, Tuberculosis and Malaria, the US President’s Malaria Initiative; the RBM Partnership to End Malaria; the Governments of France, the United Kingdom, China, Monaco, Spain and others, philanthropists such as the Gates Foundation and others, as well as regional partners, including the African Union and the African Leaders Malaria Initiative (ALMA), that have supported endemic countries to mobilize over US\$ 50 billion since 2002;¹

Cognizant of the progress made by countries over the past years in responding to malaria and opportunities and lessons learnt from the response to the COVID-19 pandemic, as reflected in the new vision and strategy for ending disease in Africa, including best practices in malaria elimination as recently witnessed in Cabo Verde;

¹ WHO, World Malaria report 2024

Recognizing the opportunity to further reduce malaria by building on the unprecedented demand for malaria vaccine currently being rolled out across Africa, and through the deployment of dual active ingredient insecticide-treated nets;

Acknowledging with deep concern that despite the progress made, the 2024 WHO World Malaria Report presents sobering annual accounts since 2017, revealing an alarming stalling of progress in the WHO African Region, where approximately 95% of malaria morbidity and mortality persist, with 11 African countries bearing the heaviest burden and together accounting for more than 70% of the global malaria burden;

Recognizing the urgency of addressing the root causes of this stagnation, such as changing ecology and vector behaviour; low access to and insufficient quality of health services, including gender-related and financial barriers within households; humanitarian crises, including conflicts, natural disasters and migration; climate change; and biological threats, such as insecticide and drug resistance as well as emerging malaria vectors; limited adaptation of guidance, and insufficient technical support to countries;

Deeply concerned about the extensive, unprecedented and unplanned reductions in official development assistance for malaria and other health programmes in low-income, high-endemic countries, which have opened up critical gaps in life-saving commodities and interventions, reversing two decades of hard-won malaria control gains, and potentially endangering millions of lives in endemic areas;

Deeply alarmed by the accelerating spread of partial resistance to artemisinin across Africa, gravely concerned by inadequate real-time surveillance systems to track its expansion and warning with utmost urgency that these converging threats could catastrophically reverse two decades of hard-won malaria control gains, placing millions of lives at immediate risk across endemic countries in the Region;

Recalling the renewed commitment by Ministers of Health of the 10 highest burden malaria endemic countries² in the Region, through their signing of the Yaoundé Declaration for accelerated malaria mortality reduction in March 2024, in which they agreed on a multifaceted strategic approach to reignite the momentum of malaria elimination efforts and achieve the goal of zero malaria across Africa;

Subscribing to the fundamental principle that, despite the prevailing high case incidence and threats, no one should die from malaria, which is preventable and curable;

1. ADOPTS the technical report on “Addressing threats and galvanizing collective action to meet the 2030 malaria targets”, which highlights challenges and issues currently faced by the Region and recommends actions that should be taken by Member States to galvanize the fight against malaria, principally comprising system strengthening for improved programme performance and resilience, strengthening country leadership in coordination and resource mobilization for malaria, and implementing flagship multisectoral initiatives to ensure a whole-of-society response;

2. RECOMMITS to concerted action to end malaria deaths by implementing the commitments and key actions of the Yaoundé Declaration which include: strengthening political will; ensuring the

² Burkina Faso, Cameroon, Democratic Republic of the Congo, Ghana, Mali, Mozambique, Niger, Nigeria, United Republic of Tanzania, Uganda.

strategic use of information for action; providing better technical guidance; enhancing coordination and multisectoral action; strengthening national health systems, building collaborative partnerships for resource mobilization, research and innovation and ensuring a functional national malaria accountability mechanism;

3. RESOLVES to adopt an agenda for malaria investment optimization to enhance the efficient use of the limited resources for malaria and improve the performance of malaria programmes by adopting the most cost-effective strategies with the greatest potential to achieve set targets. This includes aligning malaria investments with a single costed and optimized operational plan; increasing the use of digital technologies for capacity-building, service delivery, reporting and communication; and strengthening malaria programme performance and governance;

4. COMMITS to foster country ownership and promote equitable and resilient health systems to deliver quality services, including innovative tools such as next-generation vector control tools, diagnostics, antimalarials and malaria vaccines, which are adaptive to local situations; analyse and use high-quality data to target interventions and guide decision-making to ensure no one is left behind; and better address the wider determinants that potentially disrupt or facilitate access to and the quality of services, particularly for vulnerable people, including women and children under five years old;

5. URGES Member States to:

- (a) map key drivers of malaria mortality in their respective contexts, develop mitigation strategies, and implement targeted approaches to reduce malaria-related deaths as part of their national malaria strategy, targeting young children, pregnant women, hard-to-reach communities and other vulnerable groups;
- (b) strengthen health systems by investing in comprehensive capacity-building and retention of skilled health care workers, including community health workers, to permit continuous access to diagnostic and treatment services at all levels within the framework of primary health care and quality integrated person-centred health services;
- (c) extend investments in integrated, accessible, affordable, acceptable and quality prevention, detection, diagnosis and treatment services, including the expansion of malaria vaccine coverage, the use of technology-based solutions at facility and community levels to improve access for the most rural, remote and marginalized populations that have the lowest access and coverage of interventions;
- (d) invest in the deployment of efficient and reliable health information systems, including analytics and geographic information system technologies to support data-driven tailoring and targeting of interventions for enhanced impact and efficient use of resources;
- (e) adopt and implement strategies to respond to insecticide and antimalarial drug resistance, which comprise strengthening institutional capacity to conduct insecticide resistance testing, therapeutic efficacy studies, malaria molecular surveillance, and scale-up of novel vector control tools and multiple first-line treatment policies;
- (f) accelerate domestic resource mobilization by working with parliamentarians and communities and through the promotion of national advocacy initiatives such as End Malaria Councils and End Malaria Funds involving the private sector, to bridge financial gaps and ensure the efficient and effective use of funds;

6. REQUESTS the Regional Director to:

- (a) conduct a rigorous evaluation of current strategies to ensure interventions, deliver the greatest health impact for their cost and to determine the resources needed to achieve the malaria targets.
- (b) mobilize sufficient resources to deliver on WHO's mandate to lead and coordinate malaria stakeholders, disseminate global and regional normative and technical guidance, technical tools and services, and provide quality country support;
- (c) support local manufacturing of malaria commodities and regional pooled procurement initiatives to ensure a greater supply of affordable quality-assured antimalarials;
- (d) promote a regional mechanism to support malaria epidemic containment by strengthening coordination with humanitarian partners such as UNICEF, UNHCR and WFP, prepositioning malaria commodities in conflict-prone and disaster areas, and ensuring integration of malaria services into emergency response systems;
- (e) support the generation and use of data to monitor threats to malaria tools, by establishing or strengthening subregional resistance monitoring networks and continentwide tracking of the spread of the invasive species, *Anopheles stephensi*, and changes in vector behaviour;
- (f) support research and innovation by strengthening coordination and building partnerships in research and development, promoting the introduction of locally appropriate, cost-effective novel malaria tools and strategies by Member States and fostering the exchange of best practices among Member States making exceptional progress.
- (g) monitor the implementation of the Regional framework for the integrated control, elimination and eradication of tropical and vector-borne diseases 2022–2030, and evaluate its impact in terms of progress towards set milestones and targets for malaria elimination;
- (h) roll out a malaria advocacy campaign on “Ending malaria deaths in Africa”, identifying regional champions and providing technical, logistical and communications resources to the campaign actors.