Malaria

Over the past 20 years, remarkable progress has been achieved in the fight against malaria. But this progress is under threat.

Funding has stalled, vital tools are becoming less effective, shifting climate patterns are changing mosquito behavior and expanding malaria zones, and the COVID-19 pandemic has created new setbacks.

Children under five account for three-quarters of all deaths from malaria worldwide. It also poses serious risks to pregnant women, causing one in 10 maternal deaths in regions where malaria is endemic. Nearly all the 249 million infections and 608,000 deaths from malaria globally in 2022 occurred in sub-Saharan Africa.

If we act now, we can get ahead of the rapidly mutating malaria parasite and the mosquitoes that transmit the disease. We need a range of new and updated tools to consolidate hard won gains and confront the challenges of the future.

This is where we have a vital and unique role to play, bridging the gap between the scientists, researchers and companies that develop new malaria-fighting tools and interventions, and the organizations, governments, and health workers that deliver them to people on the ground.

**How we work**

At Unitaid, we save lives by making new health products available and affordable for people in low- and middle-income countries. We identify innovative treatments and tools, help tackle the market barriers that are holding them back, and get them to the people who need them most – fast.

We work with communities to identify emerging challenges and underserved populations. We then invest in cutting-edge technologies and innovative approaches that strengthen the malaria response.

Market barriers often stall the development and uptake of novel tools and delivery strategies, leaving them unaffordable, unattainable or unusable where they are needed most. Together with our partners, our interventions tackle those barriers to improve the reach of malaria efforts globally.
Prioritizing the most vulnerable. In the case of malaria, this means children under 5, who account for more than 75% of all deaths. Pregnant women and children under 10 account for almost all the rest. Our work helped launch seasonal malaria chemoprevention, now recognized as a highly effective prevention method involving monthly delivery of antimalarial drugs to young children during the rainy season when infections spike. By addressing several barriers at once – questions about feasibility, insufficient drug supplies, and cost – we laid the foundations for an approach that now protects 49 million children each year.

Building on these efforts, we are now proving out effective and feasible ways to deliver malaria prevention to children under 2 in different geographies and have developed methods to reach more pregnant women with malaria prevention too. Meanwhile, we’re working to promote sustainable supplies of locally manufactured, quality, preventive drugs. Our targeted interventions, such as those aimed at reaching people with the preventive care they need, where they live, or piloting implementation of the first-ever malaria vaccine to provide protection to babies, we put the people most at risk of malaria at the center of our response.

Fighting to outpace resistance. Malaria parasites and the mosquitoes that transmit them are developing resistance to the recommended antimalarial medicines and the insecticides used to repel and kill them, threatening our strongest lines of defense. In response to the critical need for updated tools and delivery approaches, we are playing a key role in introducing next-generation mosquito nets treated with a new class of insecticide, while helping increase production and reduce costs so more people can benefit. We are evaluating innovative approaches to see if we can reduce malaria transmission by treating humans and livestock with a drug that is harmless to us, but deadly to mosquitoes who bite us. And we are designing new interventions to mitigate antimalarial drug resistance and protect critical medicines needed to save lives from the disease.

Supporting countries to reach malaria elimination targets. The most common type of malaria outside of sub-Saharan Africa is P. vivax malaria, a complex and persistent form of the disease that poses a risk to more than one-third of the world’s population. The parasite remains in a person’s liver even after successful treatment of the initial, blood-stage infection, causing recurring illness and contributing to onward transmission. We are leading real-world research aimed at advancing effective diagnostic tools and simpler treatments that can clear the parasite from the liver and eliminate this insidious form of malaria.

Helping people adapt to the health risks caused by climate change. As temperatures across the world rise, hot and humid areas where mosquitoes thrive are expanding. The spread of an invasive mosquito species that can transmit the two malaria parasites that pose the greatest threat to humans is an emerging concern. This mosquito thrives in cities, and as alternating floods and drought in some regions accelerate migration to urban areas, malaria outbreaks may become more common.
We are backing vital research to prove the public health potential of promising vector control tools like spatial repellents – products that are permeated with slow-release chemicals that can be placed in the home to ward off mosquitoes – while working to encourage additional manufacturers to get involved, increase supplies, and reduce costs. As warmer climates increase the burden of other mosquito-borne diseases like dengue and zika, we’ve got an eye on potential future needs for vector control tools like this one and others in our pipeline.

We are investing in adding to our toolbox of defenses because we know that with malaria, there is no simple solution. We come at access from several angles at the same time so that once an intervention is proven feasible and effective, there are adequate, high-quality supplies available – at affordable prices – so we can quickly deliver them and reach more people.

**Our impact**

We achieve our impact through collaboration with partners across the global health sector. We aim our interventions at the complex range of factors that can stop a good idea from becoming a global health success story. As such, the full impact of our work is achieved several years after our work is done, once governments and partners step in to replicate proven models and roll out new tools on a wide scale.

Together with our partners, we are playing an important role in advancing the tools and approaches needed to meet global targets to reduce malaria cases and deaths by 90% by 2030. This includes:

- Getting seasonal malaria chemoprevention off the ground, which now reaches 49 million children and saves more than 100,000 young lives each year.

- Proving the effectiveness of next-generation bed nets and rapidly bringing them to market. With 35 nets distributed to date, the novel tool is expected to reach more than 800 million people by 2030.

- Demonstrating community-based antimalarial distribution to reach pregnant women, which is estimated will prevent 1 million cases of malaria in pregnancy, 180,000 episodes of low birth weight, and around 40,000 deaths of mother and baby every year when implemented widely.

- Vaccinating 1.7 million children through malaria vaccine pilots, providing the evidence that underpinned the World Health Organization’s recommendation. Subsequently, 18 million doses have been allocated to 12 African countries over 2023-2025 through Gavi, the vaccine alliance.
Case Study: Prevention on the doorstep

In a previous pregnancy, Dorcas was infected with malaria and delivered twins – one healthy, and one in need of lifesaving treatment to survive, because of the disease. In her most recent pregnancy, she connected with a community health worker who brought malaria care right to her door.

“With previous pregnancies, I started antenatal care after 6 or even 7 months, but with this pregnancy, I started in my third month,” Dorcas says. “Now, I have already taken my malaria medicine twice.”

The community health worker was part of a Unitaid initiative to pilot community-led delivery of antimalarial medicines to pregnant women at home and link them with antenatal services for a healthy pregnancy and safe birth.

Building off previous successes with seasonal malaria chemoprevention, this combination of making the right medicine and the right care available at the right time has increased coverage of malaria prevention in pregnancy by an average of 35 percentage points – and up to 50% in some settings.

The impact of this work reaches far beyond Dorcas and her community. Governments and partners are now working to replicate this model in other malaria-endemic countries. Taken to scale, it is expected to benefit approximately 7 million additional women and prevent nearly 40,000 maternal and infant deaths every year.

Photo: Dorcas takes her malaria medicine provided by a community health worker who brought malaria care right to her door. © Unitaid

Future-proofing the malaria response

Progress made against malaria is noteworthy – yet these gains are fragile. Unitaid is determined to meet the greatest challenges to malaria head on. We are designing solutions to outpace antimalarial resistance and protect the most promising new medicines in development.

As more people migrate to cities, we are taking action to address the growing threat of malaria in urban environments, and we are pushing ahead with new vector control tools to build layers of protection.

We know no single tool will end malaria. That’s why we are advancing on all fronts, from novel spatial repellents to long-lasting drugs for vector control. Through rigorous research, we will continue to gather the evidence needed to demonstrate the effectiveness of these innovative approaches and ensure they are affordable and available everywhere they are needed.

Staying ahead of quickly adapting mosquitoes

Protecting malaria treatments from growing resistance

Countering the effects of climate change

About Unitaid:

We save lives by making new health products available and affordable for people in low- and middle-income countries. We work with partners to identify innovative treatments, tests and tools, help tackle the market barriers that are holding them back, and get them to the people who need them most – fast. Since we were created in 2006, we have unlocked access to more than 100 groundbreaking health products to help address the world’s biggest health challenges, including HIV, TB, and malaria; women’s and children’s health; and pandemic prevention, preparedness and response. Every year, more than 170 million people benefit from the products we’ve helped roll out.

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