



The dual challenge of COVID-19 and malaria



Dr Soumya Swaminathan
Chief Scientist, WHO

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In 2020, global health weathered a turbulent year. Once again, a new, lethal virus caused disruption worldwide and brought global health security back into the limelight. From the moment the World Health Organization (WHO) classified SARS-CoV-2 as a Public Health Emergency of International Concern, the virus began to stress test the resilience of all health systems. Hundreds of compounds, including antimalarials, continue to be investigated as potential treatment and prevention for this disease, some with initial success. Crucially, an increasing number of SARS-Cov-2 vaccines are now being deployed to millions of people across the world.

Throughout 2020 and into 2021, health professionals struggled with the excessive load of COVID-19 patients, and of people with untreated emergencies and non-infectious diseases like cancer, heart disease and diabetes. We have had to learn and continue to relearn how to manage the impact of the disease not only on people, but also on societies and economies.

Malaria was not forgotten

Throughout this upheaval, malaria and other deadly diseases remained high on the WHO's list of priorities. As caretakers of the world's health, the WHO lost no time in sending out both an immediate call for countries to keep a close watch on their malaria control programmes and guidelines to jointly address malaria and the COVID-19 pandemic.¹ The concern was that in a worst-case scenario, a 75% simultaneous reduction in long-lasting insecticidal net distribution campaigns and antimalarial drug coverage could double malaria deaths in 2020 compared to 2019,² and possibly lead to greater increases in the years ahead. Countries were thus urged to prioritize case-management interventions, while taking care to protect their healthcare workforce and patients from COVID-19.³

Gains in malaria control in jeopardy

The World Malaria Report issued in November 2020 outlined the significant gains made in malaria control since 2000 – 1.5 billion cases and 7.6 million malaria deaths have been averted, and malaria deaths in Africa have been reduced by 44%. However, this unprecedented progress has since tapered off (see Figure 1). The major concerns highlighted were the deceleration of progress and insufficient support to R&D, as well as access to proven tools, due to a recent shortfall in both international and domestic funding (in 2019, total funding reached \$3 billion vs the targeted \$5.6 billion). With the additional burden of COVID-19, the report's authors predict that the global 2020 target for reducing malaria cases and mortality will be missed by 37% and 22% respectively, killing more people than COVID-19 in sub-Saharan Africa in 2020.⁴ To avoid a reversal of two decades of progress, and avert this looming public health disaster it is imperative to maintain malaria as an integrated priority alongside the response to COVID-19.⁵

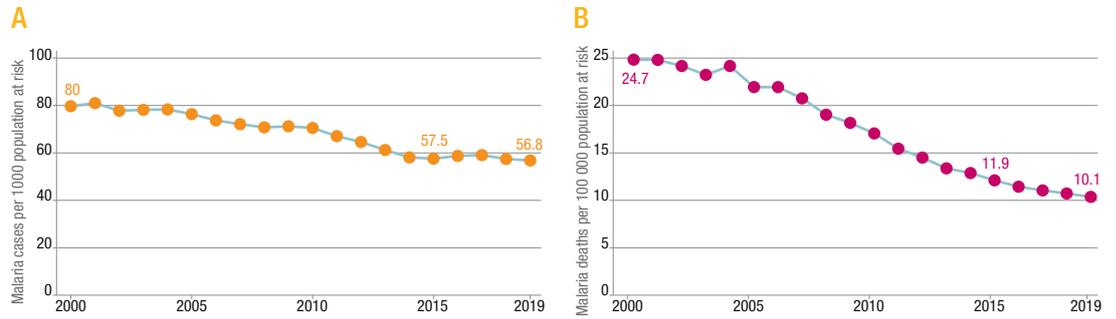
1 <https://www.who.int/docs/default-source/documents/publications/gmp/tailoring-malaria-interventions-covid-19.pdf>
2 Weiss D.J. *et al.*, "Indirect effects of the COVID-19 pandemic on malaria intervention coverage, morbidity, and mortality in Africa: a geospatial modelling analysis" *Lancet Infect Dis*; 21(1): 59–69 (2020). <https://pubmed.ncbi.nlm.nih.gov/32971006/>
3 Sherrard-Smith, E., Hogan, A.B., Hamlet, A. *et al.*, "The potential public health consequences of COVID-19 on malaria in Africa." *Nat Med* 26, 1411–1416 (2020). <https://doi.org/10.1038/s41591-020-1025-y>
4 <https://www.who.int/news/item/30-11-2020-who-calls-for-reinvigorated-action-to-fight-malaria>
5 Weiss D.J. *et al.*, *IBID.* 2020.

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Figure 1:

A. Global trends in malaria case incidence rate (cases per 1000 population at risk)⁶

B. Global trends in malaria mortality rate (deaths per 100 000 population at risk)⁶

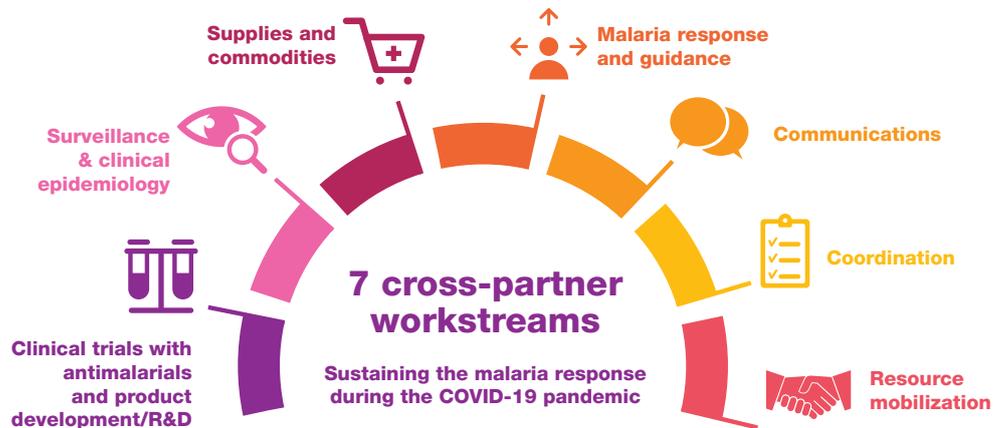


Invaluable partnerships

In March 2020, the need to mitigate the negative impact of COVID-19 and build a coordinated, integrated response to both COVID-19 and malaria, led the WHO Global Malaria Programme to quickly establish a cross-partner effort. Seven workstreams comprising malaria specialists from around 20 organizations met regularly to share updates on a variety of issues. Medicines for Malaria Venture (MMV),

a non-state actor in official relations with the WHO since 2018, joined three of these workstreams: malaria supply-chain, clinical trials with antimalarials (and product development,) and communications, with experts providing invaluable advice and input.⁷ This partnership was invaluable to Member States as they sought to maintain essential health services and care for their people.

Figure 2: WHO-Good Manufacturing Practice (GMP)'s cross-partner effort for the coordinated response to COVID and malaria



With the help of existing surveillance systems and networks of community health workers (CHWs), trained by partners in integrated community case management and malaria treatment and control procedures, countries swiftly mobilized resources to tackle the dual challenges of the COVID-19 pandemic and endemic malaria. Experiences in Mozambique, Uganda and Rwanda bear testament to this. In Zambia, CHWs trained for the MMV-supported Mobilizing Access to Maternal Health Services in Zambia (MAMaZ) (pp. 30-31) project, to improve the treatment and case management of severe malaria, and received further training in COVID-19 health and safety procedures. They were then able to disseminate vital information on safety measures to prevent the spread of the pandemic. Meanwhile, MMV's assiduous support of the implementation of seasonal malaria chemoprevention campaigns in the Sahel helped protect 12 million children in Nigeria, three times more than in 2019.

A new era of partnerships has begun. Our hyper-connected world worked together in 2020 in a time of urgent global need, with partners old and new committed to ensuring access to healthcare interventions for as many people as possible. At the WHO, we recognize that the next pandemic could be caused by another virus or antimicrobial drug resistance and we must be fully prepared to meet it head on with new tools and interventions. It can only be tackled holistically, using a coordinated, multisectoral One Health⁸ approach, in which global health programmes, policies, legislation and research are designed and implemented by multiple sectors. The WHO relies on strong partnerships, such as the one with MMV, as the only way forward if we are to successfully steer global health through future turbulent pandemic events, achieve universal healthcare, and make the world malaria free.

⁶ Source: WHO estimates.
⁷ Jointly addressing endemic malaria and pandemic COVID-19: https://www.who.int/malaria/areas/epidemics_emergencies/covid-19/who-gmp-response-covid-19.pdf?ua=1
⁸ 'One Health' is an approach to designing and implementing programmes, policies, legislation and research in which multiple sectors communicate and work together to achieve better public health outcomes.