Achieving Universal Coverage to End Malaria Deaths

A Discussion with the Global Fund Board

Prof Awa Marie Coll-Seck
Mr Raymond G. Chambers

April 29, 2008
Progress in a growing number of sub-Saharan African countries (e.g. Ethiopia, Kenya, Zambia, Kenya, Swaziland, Namibia, Tanzania)

Global Malaria Business Plan under development, with short-medium-long term benchmarks

Growing political momentum at international and country levels (UN Secretary-General’s Call, African Union Chairman’s Statement)
**Rwanda, 2001-2007, 19 health facilities**

In-patient malaria and non-malaria cases in children <5 years old.

**Ethiopia 2003-2007, 7 in-patient facilities**

In-patient malaria and non-malaria cases in children <5 years old.

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**Source:** WHO 2008
Universal coverage with a comprehensive package of malaria control interventions by December 31, 2010

Improved support to countries to expand delivery mechanisms in both the public and private sectors

Scale-up implementation support to countries to help translate money into results
BUT MUCH REMAINS TO BE DONE TO ACHIEVE THE RBM TARGETS AND SECRETARY-GENERAL’S VISION

Source: UNICEF, on behalf of RBM HWG, 2008
The Roll Back Malaria Partnership complements the essential financing of the Global Fund with core technical support for countries.

### International Financing – Global Fund

- **Global Fund**: 66%
- **World Bank, PMI, UNITAID, Others**: 33%

### Technical Support – Roll Back Malaria

- **Harmonization Working Group** coordinating technical support efforts of broad range of technical partners.
- 25 countries supported in development of sound Round 7 & 8 proposals.
- 12 countries supported in accelerating signature of Round 7 grants.
- 21 countries currently supported in comprehensive needs assessments.
- Over US$5 million allocated by RBM on Global Fund-related support (~40% of total RBM budget) over past 14 months.
- Additional implementation support is planned, but RBM facing a budget shortfall of about US$20 this year alone.
AN EXAMPLE: RBM SUPPORT DURING ROUND 7

**FIGURE 5. Growth in Successful RBM Supported Proposals to the Global Fund**

Source: Global Fund
FIVE OBSERVATIONS FOR DISCUSSION

1. Total financing for scaled-up response is insufficient

2. Flexibility in timing and procedures issues could help achieve the December 31, 2010 goal

3. Procurement of essential commodities could be streamlined, particularly for economic “public goods” (e.g. nets)

4. Implementation support from the RBM Partnership crucial for Success

5. Country-level capacity to deliver needs strengthening and support including for urgent scale-up and sustained response (e.g. contracting out, community health workers)
FUNDRAISING

The Special Envoy and RBM Executive Director stand ready to assist the Global Fund with resource mobilization to reach the December 31, 2010 target, including outreach with G8.

ROADMAP TO ACHIEVE THE TARGETS

Step-by-step plan to achieve target over the next 974 days (based on existing country and partner plans), including activities to strengthen in-country delivery channels and health systems

IMPLEMENTATION SUPPORT

The RBM Partnership has agreed to put into place a full-time team to assist countries translate increased resources into results (through the Malaria Implementation Support Team, which we expect to be operational by end May 2008).
### ONE EXAMPLE: TIMING OF GLOBAL FUND LLIN DISBURSEMENTS

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**Global Fund grant**

**Approval**

**Illustrative Estimates**

- 12 Count of LLINs, million

**Source:** Interviews, Global Fund, team analysis

* Assumes 5 LLIN procurements/deliveries per grant round; first at earliest possible date in Phase 1 (40% of grant lifetime LLIN volume); second peak at earliest possible date in Phase II (30% of volume), 3 smaller procurements (~10%) in other years of grant
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Potential change

1. Decrease signature delays from 8-10 months (current) to 2 months
2. Front-load and accelerate LLIN purchases

LLINs accelerated (millions)

- Decrease signature delays: 5
- Front-load and accelerate: ~15
ONE EXAMPLE: TIMING OF GLOBAL FUND LLIN DISBURSEMENTS

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Additional LLIN delivery would save 70-100k lives/year
The announcement today by the UN Secretary General is the answer that we in Africa have been waiting for. On behalf of the people, leaders and governments of Africa, I welcome and support Secretary General’s call for action. Africa seeks – and actually deserves – universal coverage of malaria control interventions, with access for all, including the poor who suffer the most.

We undertake to play our part in implementing and sustaining this noble effort. To help us do so, we continue to appeal for adequate and timely support of the international community.

Jakaya Mrisho Kikwete
President of the United Republic of Tanzania
Chairman of the African Union
April 25, 2008