

Energizing the Global Fight Against Malaria

Innovative approaches and sustainable financing are key to effective malaria prevention

OVERVIEW

The reduction of malaria cases and mortality has been a priority for global health programming since 2000, and the results have been significant. Between 2000 and 2023, 2.2 billion malaria cases and 12.7 million malaria deaths were averted globally, through the joint efforts of stakeholders including the WHO, the Global Fund, international donors, the private sector, and domestic governments in malaria-endemic countries. As of 2025, 45 countries and one territory are certified malaria-free, and an estimated three billion insecticide-treated nets (ITNs) have been distributed in affected countries, as part of an arsenal of highly effective prevention and case management strategies.

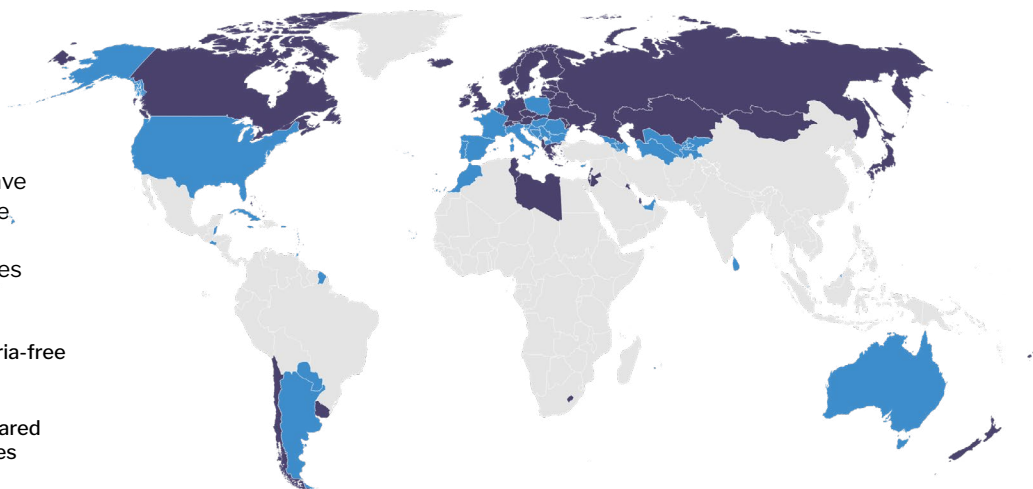
In 2016 the WHO developed a Global Technical Strategy for Malaria 2016–2030 (GTS), with the goals of reducing malaria incidence and associated mortality by at least

90 percent, compared with 2015 levels, eliminating malaria from at least 35 new countries, and preventing re-establishment in all malaria-free countries. Achieving these targets could increase Africa's GDP by an estimated USD 126.9 billion, boost international trade by USD 80.7 billion, and avert 600,000 deaths globally. However, since then, progress toward malaria elimination has stalled, due to a combination of challenges, including insecticide resistance, COVID-19-related disruptions to services and resource distribution, and a plateauing of funding. As a result, the WHO estimates that at the current rate, none of the GTS goals will be met by 2030. Achieving global goals to eliminate malaria, and improving quality of life for the millions who still suffer from it, will require a considerable re-alignment and re-commitment across the global health ecosystem.

45 countries and one territory are certified malaria-free by WHO as of 2025

Malaria-free countries have at least three consecutive years of zero local-transmission malaria cases

- Countries certified malaria-free
- Countries where malaria never existed or disappeared without specific measures



A business-as-usual approach to malaria control and treatment is no longer sufficient, as new threats emerge, and long-term challenges persist

In 2023, global malaria cases were estimated at 263 million, an increase of 11 million, compared to 2022. High burden, high impact (HBHI) countries represented 66 percent of cases and 68 percent of deaths in 2023, with 94 percent of cases occurring in the WHO African Region.

Crucially, there is a vast funding gap for malaria elimination programs, despite continued population growth in malaria-endemic countries. While 37 percent of funding for malaria control in 2023 came from domestic funding in malaria-endemic countries—a notable share that is growing—international donors are still critical to provide the remaining necessary funds. A 10 percent decrease in malaria cases is associated with a 0.11 percentage point increase in annual GDP per capita, making investment in malaria prevention sound economic policy and key to driving growth. However, in 2023, only 48 percent of the estimated USD 8.3 billion needed annually for GTS programming was paid out. The January 2025 freeze on U.S. foreign aid will widen this gap, as the U.S. has been a major malaria donor, both bilaterally and via the Global Fund, to which it provided around 65 percent of its total funding from 2021–2023. In addition to the malaria cases and deaths that will stem directly from funding gaps, the economic costs to malaria-endemic countries will be multifold.

Inadequate funding is a major driver of another key challenge to malaria prevention: Although a 2000–2015 study found that ITNs contributed to 62 to 72 percent of decline in the malaria prevalence rate during that period, populations in need still lack access to ITNs and other effective interventions. Barriers to access include supply chain disruptions, failure in last-mile delivery, and health care disruptions due to weather events and conflict.

Where ITNs are available, inconsistent usage and increasing insecticide resistance of malarial mosquitos undermine their effectiveness. Resistance to pyrethroids, the main insecticide used on ITNs, has been confirmed in 55 of 64 monitored countries. While culturally sensitive education can help prevent ineffectual use of nets, overcoming insecticide resistance will require investment in research and development for new insecticides, and innovative approaches to resistance management, such as the rotation and combination of different ITNs. Effective interventions are underway via new dual active ingredient insecticide ITNs, certified by the WHO for widespread use in 2017 and 2023, which need to be combined with other techniques such as vaccines. Effective malaria prevention methods and innovative new approaches will be acutely needed as the prevalence and habitats of malarial mosquitos shift due to climate change and urbanization.

LOOKING AHEAD

Harnessing innovation to accelerate malaria control and achieve global health goals

The year 2025 marks a moment for global stocktaking and re-commitment to the achievement of the ambitious WHO GTS and UN Sustainable Development Goal targets. Doing so will require inventive and collaborative approaches to the multiple challenges impeding malaria prevention and elimination, and particularly to reinvigorate funding. These include:



- **Improving the access and availability** of proven and effective prevention and case management strategies, particularly ITNs;
- **Leveraging sub-national tailoring of intervention methods** to assess and implement effective malaria strategies, including identifying gaps, effective approaches, and areas in need of adjustment;
- **Managing insecticide resistance** through the development of insecticide options with new active ingredients and effectively rotating insecticide to mitigate risk;
- **Supporting research and development** for new innovative tools to address emerging threats, to be used independently or in combination with existing effective strategies;
- **Increasing community leadership and ownership** of malaria control programs, to support uptake and improve cultural and contextual relevance, including through community-led monitoring (CLM) programs;
- **Securing financing from a variety of sources**, and particularly increasing domestic funding in malaria-endemic countries, to build ownership and unlock economic dividends.