

Ministerial Declaration on Accelerating and Sustaining Malaria Elimination in the South-East Asia Region



New Delhi, 29th November 2017

We, the Ministers of Health and delegates


- Emphasizing that a unique window of opportunity exists to eliminate malaria from the Region because of the significant and sustained progress made by many countries,
- Commending the Maldives and Sri Lanka on their tremendous achievement of eliminating malaria and remaining malaria-free, and the dedicated efforts of the several other countries in the Region that are now within reach of eliminating malaria, and reiterate the need to support them in achieving and sustaining elimination,
- Reaffirming the commitment by all countries in the Region to eliminate malaria by the year 2030 or earlier, as specified in their national malaria strategic plans, the Sustainable Development Goals, the World Health Assembly Resolution WHA68.2: Global technical strategy and targets for malaria 2016-2030, the United Nations General Assembly Resolution A/RES/69/325 on Consolidating gains and accelerating efforts to control and eliminate malaria in developing countries, and the statements on malaria by Heads of Governments during the East-Asia Summits,
- Commending the World Health Organization, the Roll Back Malaria Partnership, the Global Fund, and other external partners for their vital financial, programmatic, scientific and technical support,
- Expressing with concern that despite the steady decline in malaria incidence and deaths our Region still has the second highest malaria burden and the highest *Plasmodium vivax* malaria burden globally, taking a major toll in terms of human wellbeing, health expenditures and economic productivity,
- Noting with concern the emergence of malaria multi-drug resistance, including resistance to artemisinin and partner drugs causing artemisinin-based combination therapy failures, in multiple locations in the Greater Mekong Subregion, and that failure to eliminate these parasites could lead to their further spread,
- Recognizing the emergence of resistance to several key insecticides used for malaria vector control, weakening the impact of this intervention and raising the costs of elimination efforts,
- Noting with concern that domestic public expenditures on national malaria programmes are declining in several countries of the Region, continue to be inadequate in the countries with the largest populations at risk, and that financial support from external partners has waned in many countries,
- Recognizing that accelerating elimination efforts requires additional resources to ensure that countries are fully supported in their endeavors to consolidate the results achieved and move further towards their elimination goals,


Calling upon the support of WHO in the South-East Asia Region on all aspects of this Declaration, we, Ministers of Health and delegates, therefore pledge our commitment to accelerate progress towards achieving elimination of malaria by 2030 or earlier, and sustaining elimination thereafter, by:

1. Ensuring, first and foremost, that high-level political commitment to eliminating malaria is sustained in each of our countries irrespective of competing priorities;
2. Mobilizing adequate and sustained funding for national malaria elimination programmes from both domestic and external sources, as well as ensuring that these funds are appropriately distributed and efficiently utilized at every level of implementation;
3. Assuring our full political commitment to providing universal access to quality-assured prompt malaria diagnosis and treatment as well as effective prevention to all those at risk. We emphasize that universal access means that our national malaria programmes will provide all vulnerable and at-risk populations including the disadvantaged communities, communities in border and conflict areas, and refugees and migrants with free or affordable prevention (including long-lasting insecticidal nets or indoor residual spraying), diagnosis and treatment services;
4. Ensuring that malaria is included in the list of notifiable diseases and that there are national guidelines and procedures in place to transform surveillance into a core intervention;
5. Ensuring that elimination programmes at national and sub-national levels are fully staffed with personnel with the required skills and motivation, and are led by competent senior staff empowered to play an effective leadership role;
6. Mobilizing leadership commitment to malaria elimination at national and sub-national levels including districts and other administrative units, including as appropriate through the establishment of local multisectoral task forces to ensure effective coordination and implementation;
7. Advocating and establishing collaboration with other health sector programmes, institutions and systems, with other relevant state non-health sectors (for instance, agriculture, education, mining, forestry, immigration, military, and urban planning) as well as private sector, civil society and other stakeholders (for instance, the private health sector, community based organizations and non-governmental organizations);
8. Securing adequate quality-assured supplies for malaria diagnosis, treatment and vector control through national policies and, where needed, for instance participation in regional/international public procurement, a regional stockpile, and preventing stock outs through effective procurement and supply management. Promoting participation in WHO prequalification programmes and regulatory cooperative mechanisms such as the South East Asia Regulatory Network (SEARN) to ensure access to quality-assured malaria commodities;
9. Ensuring that new programmatic interventions (such as low-dose primaquine as a gametocytocidal drug in elimination settings) and technological innovations (such as G6PD deficiency testing, for the safe administration of drugs for *P. vivax* infection) that are appropriate to the Region and recommended by WHO are promptly incorporated into national elimination programmes;
10. Ensuring synergistic South-South and Triangular inter-regional coordination and collaboration on every aspect of the elimination efforts, including sharing information on core surveillance of malaria cases and drug- and insecticide-resistance on a real time basis, capacity building, research, and complementary cross-border responses, with support of WHO;
11. Strengthening an empowered national malaria elimination task force (or similar body) in each country that provides technical guidance, monitors performance of the malaria programme and evaluates progress towards achieving key milestones. In countries which have progressed further towards malaria elimination, establishing an independent national malaria elimination advisory committee to provide guidance and an external view of progress.
12. Requesting the WHO South-East Asia Regional Office to follow up on the implementation of this Declaration.

We call upon all leaders, policy makers, development partners, donors, private sector, non-governmental organizations, civil society and the public in the South-East Asia Region and around the world to actively support these commitments to accelerate progress towards achieving the elimination of malaria for a malaria-free South-East Asia Region by 2030.

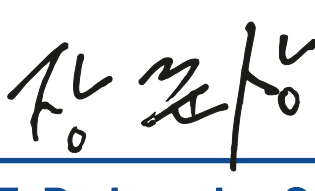
Working together, we will definitely free our Region of malaria.


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