Written statement relating to agenda point 8.2: Strengthening health emergency preparedness and response in the SE Asia Region building upon lessons learnt from COVID-19

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Chairperson, Honorable Delegates, Regional Director
Thank you for the opportunity to provide a statement today on behalf of the global malaria community.
The RBM Partnership to End Malaria commends WHO for the well positioned progress report on the Strengthening health emergency preparedness and response in the SE Asia Region building upon lessons learnt from COVID-19.
As we all know, during the pandemic, global efforts were directed to the COVID-19 response, but, in many cases, this was at the expense of other disease control efforts. As a result, the fight against malaria is now at a precarious juncture.
While partners and communities on the ground did their best to minimise the impact on malaria deaths, disruption to malaria programmes during the pandemic could not be avoided. Social distancing created barriers to campaign delivery; malaria patients were hesitant to come forward and seek diagnosis, and the supply chains for lifesaving tools were disrupted, resulting in the first increase in global malaria deaths in over a decade.
As you will be aware, the burden of malaria extends beyond the disease itself, and it impacts fragile health systems and limits countries’ ability to detect and fight emerging diseases. Hot spots for malaria can mask outbreaks of other illnesses and undermine global health security.

It has become increasingly clear that it’s not enough to allocate resources to tackle just one disease or prevent the next; our recent experience underlines the urgent need for investments and approaches to tackle existing conditions and strengthen the country's capacity to avert future threats in tandem.

At the RBM Partnership, we are dedicated to supporting partners to integrate our response to emerging health threats better. There are several key takeaways from our experience delivering malaria programmes that I would like to share with you today:

- Firstly, health programmes that engaged external knowledge and resources were better equipped to respond to COVID-19 and adapt malaria programmes. A greater focus on multisectoral partnership will be critical to building a well-integrated response to future health threats.

- Investments to strengthen disease surveillance and drive innovative approaches are critical to effectively detect new threats' emergence. Disease surveillance was core to the COVID-19 response and is also recognised as key for pandemic preparedness. These systems already exist for other disease areas; commitments to increase testing capacity, invest in more accurate testing technologies, and promote multi-disease testing will help prevent, detect, and respond to pandemics.

- The global health community must now normalise the capture, sharing, and reporting of disease data in real-time, as we have become accustomed to doing for COVID-19.
The malaria community is progressing in this regard, bringing together national governments and global partners to share real-time data to avoid widespread stockouts of life-saving malaria medicines and rapid diagnostic tests. However, there is still a long way to go to improve the agility of our combined response.

This is necessary to help countries move from a one-size-fits-all approach to responsive, data-driven programming adapted to the local context.

- Community health workers were mobilized to spearhead the COVID-19 response while ensuring routine health care delivery amidst the pandemic’s disruptions. They also play a crucial role in detecting the emergence of disease outbreaks. We know that investing in community health workers is instrumental in eliminating malaria and fighting other health threats, providing a return of up to 10 dollars for every dollar spent.

- The huge strides in health innovation over the past few years have also demonstrated how increased funding, political will, and collaboration can accelerate the development and delivery of transformative tools. We must continue to foster collaboration with the private sector and academia to maintain and accelerate this innovation.

- And finally, strong leadership was a defining factor in countries’ experience of the pandemic. We found that countries that responded quickly to threats and introduced new guidelines could protect health systems and prevent outbreaks of other diseases.

Our investments in malaria programmes before the pandemic reinforced health systems, the community health workforce, and the laboratory capacity and surveillance systems that enabled rapid testing and diagnosis of COVID-19. Many of these investments are made through The Global Fund, which quickly earned more than US$4 billion to support countries to the pandemic, adapt their HIV, TB, and malaria programs, and reinforce overall health systems.

Southeast Asia’s remarkable commitment to malaria elimination in recent decades and ongoing country leadership were fundamental to the region’s experience of COVID-19. Today, I urge you to prioritize expanding and integrating the region’s existing health programmes to achieve a safer world.

We in the RBM Partnership are here to support all countries in this effort, alongside with the WHO. I thank you very much Chairperson.

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