THE WINNING FORMULA
TO BEAT MALARIA

Towards safe and healthy living

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Saving lives, changing minds.

International Federation of Red Cross and Red Crescent Societies
Malaria
Addressing health inequities and strengthening resilience

ISSUE

Malaria kills a child somewhere in the world every 45 seconds.

The number of malaria deaths in 2010 were estimated at 655,000. More than 91 per cent of malaria deaths occur in Africa...

91% =

9% =

...where malaria accounts for about one in five childhood deaths.

The greatest threat to current malaria control efforts is lack of sustainable funding.

Source: World Malaria Report 2011

HOW WE HELP

Red Cross Red Crescent role

Mass long-lasting insecticide-treated net (LLIN) distribution campaigns

Community-based programmes

Integrated community case management

RAPID MOBILE PHONE-BASED SURVEY

Building strong partnerships

Providing technical and financial support to member National Societies

Promote an effective and coordinated global response

IMPACT

Since 2002, National Societies, in partnership with other organizations, have distributed some 16.5 million LLINs, protecting more than 29.7 million people and preventing more than 490,000 malaria deaths.

Mass distribution of LLINs for malaria prevention has been shown to reduce malaria incidence by 50 per cent and child mortality by 20 per cent

16.5 million

-50%

Reduced malaria incidence

-20%

Child mortality

Almost half the world’s population – some 3.3 billion people – are at risk of malaria. Malaria is a killer disease: the number of malaria deaths in 2010 was estimated at 655,000. The majority of these deaths are children under five years of age. More than 91 per cent of malaria deaths occur in Africa, where malaria accounts for about one in five childhood deaths. Malaria and poverty are intimately interrelated. In Africa alone malaria costs at least US$ 12 billion in direct losses and more than that in lost economic growth each year. Estimates show malaria reduces gross domestic product by as much as 1.3 per cent each year in high-burden countries.

To date, investments in malaria prevention, diagnosis and treatment show great progress. In Africa, for example, malaria deaths have been cut by one-third. In countries where access to malaria control interventions has improved most significantly, overall child mortality rates have fallen by approximately 20 per cent. Despite this progress, the greatest threat to current malaria control and elimination efforts is lack of sustainable funding.

The International Federation of Red Cross and Red Crescent Societies (IFRC) supports the work of National Red Cross and Red Crescent Societies to rapidly and equitably scale-up malaria prevention, diagnosis and treatment at community level. The first level of health care is the household. With almost 19,000 Red Cross Red Crescent community-based volunteers worldwide, we are able to reach millions of households in the most vulnerable communities, empowering them to respond comprehensively to malaria and thus strengthening community resilience.

At the global level
The IFRC’s work focuses on building strong partnerships and providing technical and financial support to member National Societies to deliver high-quality evidence-based programmes and promote an effective and coordinated global response. We are an active partner in the Roll Back Malaria (RBM) initiative and chair a highly successful, results-focused health partnership on malaria, the Alliance for Malaria Prevention, which aims at scaling up ownership and use of long-lasting insecticide-treated nets (LLINs). The IFRC also hosts RBM’s Central and Southern Africa sub-regional network focal points.
At the national and community levels
National Red Cross and Red Crescent Societies support the strategic objectives of National Malaria Control Programmes. Through household visits and community meetings, our trained community-based volunteers have the access and the ability to pass on key messages aimed at prompting care-givers and families to make informed decisions, recognize danger signs and take timely action to save lives.

Core interventions of the malaria programme include:
• **mass LLIN distribution campaigns:** National Societies continue to play a central role in piloting and expanding effective methods for LLIN distribution and use, and investing in communication for social and behaviour change
• **community-based programmes:** building on strong volunteer networks, the Red Cross Red Crescent is committed to long-term activities focused on integrated health programming; the emphasis is on promoting and sustaining evidence-based behaviour change initiatives, including encouraging positive health-seeking behaviour
• **integrated community case management:** expanding on successful home management of malaria programmes, the Red Cross Red Crescent works to bring malaria diagnosis and treatment closer to the community and improve populations’ access to key integrated child survival interventions
• **monitoring and evaluation of malaria programmes:** the rapid mobile phone-based survey (RAMP) is a low-cost, innovative method for evaluating project performance using mobile phones.

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**IMPACT**
In 2011 almost 19,000 Red Cross Red Crescent volunteers reached more than 8.1 million people with malaria messages prevention and treatment through household visits. Volunteers’ visits and community outreach have been associated with higher rates of treatment with an appropriate anti-malarial within 24 hours and with greater use of LLINs in households. Evidence on the positive results of community case management has indicated that volunteers can deliver life-saving curative interventions for common childhood illnesses in areas where access to health facility-based services is limited.
Case study
In Liberia, a new bednet protects a new life
Sarah lives on the outskirts of Zwedru in south-eastern Liberia. She is busy cleaning her house and cooking. Children play in and around the house, while her parents work in the fields.

Sarah frequently has malaria, five to six times a year. Access to health facilities is one of the main problems in Africa. In Sarah’s case, she is lucky as the nearest hospital is only a few kilometres away.

“I had malaria twice when I was pregnant – once at the beginning and again at the end just before I gave birth,” she says. Sarah gave birth prematurely to twins after seven and a half months of pregnancy.

“The doctor said that they were very small and that it must be due to malaria. The second baby died at the hospital after three days because she was too small. That’s why I called the other baby Blessing,” she says.

Some time later, Liberian Red Cross Society volunteers came to Sarah’s village to distribute free LLINs. They visited Sarah’s house to assess how many nets she needed, explaining that they can give each household three nets.

The volunteers then returned with the free nets, telling Sarah and her neighbours how to use them and keep them in good condition. They go to each sleeping place in the houses to install the nets.

“We actually hang a net on each bed,” says the Red Cross supervisor. “We explain how to hang it back up after they have washed it. That way we are sure that people have the nets hanging correctly over their beds.”

Sarah is watching their every move, listening very carefully to all the instructions they give her. “I am very happy that tonight I will be able to sleep under a mosquito net with my daughter. My daughter is called Blessing and this is a blessing too!”
Humanity The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.