Unitaid and Malaria

Unitaid is committed to bringing to market innovative solutions to prevent, treat and diagnose malaria more quickly, more cheaply and more effectively. Unitaid’s commitment to the global malaria community has contributed to a 37 percent global decrease in incidence and a 60 percent decrease in global malaria mortality rates between 2000 and 2015.

Some of our interventions include:

Prevention

The most effective way to prevent malaria is to use vector control tools that protect people from being bitten by parasite-infected mosquitoes.

- One tool is Indoor Residual Spraying (IRS) where treating the inside walls of dwellings with insecticides kills mosquitoes before they bite. Frequent exposure can make mosquitoes resistant to the insecticides used for IRS. Unitaid has invested US$65 million to encourage governments to combat insecticide resistance by making new effective insecticides cheaper.
- Unitaid is also funding an intervention that aims to provide up to 30 million seasonal malaria chemoprevention (SMC) treatments annually to 7 million children under-five years of age across the Sahel region of Africa.

Testing

Early diagnosis with quality tools followed by appropriate treatment is crucial in stemming deaths from malaria and reducing the risk of drug resistance.

- Unitaid’s investments in malaria diagnostics focus on innovative approaches to improve the availability, affordability and access to quality point-of-care tests, including a special focus on the private sector.
- Unitaid has supported an intervention to create a private sector market for quality-assured rapid diagnostic tests (RDTs) in five malaria endemic countries through a US$34 million investment. Unitaid has also invested $9.2 million to establish sustainable standards to ensure the quality of malaria RDTs by evaluating the quality of rapid diagnostic tests and by developing new technology to simplify and expand quality testing capacity and make it more sustainable.
Treatment

With access to high quality, effective medicines, malaria is curable. The World Health Organization (WHO) recommends artemisinin-based combination therapies (ACTs) to treat P. falciparum malaria.

- Unitaid is supporting two projects to ensure that timely and reliable market information is available on ACTs: 1) $1.6 million from Unitaid is financing quarterly forecasts to monitor and report on ACT demand including the artemisinin market (the active pharmaceutical ingredient of ACTs); 2) $2.8 million from Unitaid is contributing to research to understand ACT availability, price and market share at public and private facilities in a number of endemic countries.

- $34 million from Unitaid is accelerating the global adoption of injectable artesunate (a derivative of artemisinin) to treat severe malaria. To ensure that children are given a chance to reach hospital for treatment of severe malaria, the market entry of rectal artesunate is also being supported. A community health worker or a mother can administer these suppositories; in effect, ‘buying time’ while the child is transported to hospital.

New grants

Unitaid’s Executive Board approved the following malaria grants in April 2017:

- A US$50 million investment to generate evidence needed to support community-based delivery of intermittent preventive treatment of malaria in pregnancy (IPTp). The five-year project, being implemented by Jhpiego, will increase IPTp coverage while expanding antenatal care attendance in four African countries.

- A US$19 million investment to treat suspected cases of severe malaria in children under five with rectal artesunate suppositories and demonstrate the potential of how pre-referral treatment can save lives. The project, being implemented by the Clinton Health Access Initiative (CHAI), will identify more than 5,000 cases per year in the Democratic Republic of Congo, Nigeria and Uganda.

- A US$3.4 million investment in Medicines for Malaria Venture to increase availability of new, effective, affordable, user-friendly and quality-assured products for malaria pre-referral treatment with rectal artesunate suppositories, and malaria prevention with medicines used for Seasonal Malaria Chemoprevention in children and pregnant women.

Some of our partners


Malaria is an infectious disease caused by parasites of the genus Plasmodium. Female Anopheles mosquitoes carry the parasites, which pass into the human bloodstream when the insects bite. According to WHO, in 2015 there were 212 million cases and 429,000 deaths from malaria worldwide.