New, emerging and re-emerging infectious diseases: prevention and control of malaria

Draft resolution proposed by the delegations of Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, United Republic of Tanzania, Zambia and Zimbabwe

The Forty-ninth World Health Assembly,

Aware that the global malaria situation is of serious concern and that malaria remains a disease of major importance, with an annual incidence of up to 500 million clinical cases, African countries south of the Sahara accounting for more than 90% of the global burden;

Noting with regret that the malaria situation in Africa is alarming to the extent that there are between 140 and 250 million malaria attacks every year in children less than five years of age, among whom the death toll is about one million every year, and pregnant and lactating women;

Alarmed by the extension and intensification of resistance of the parasite to many of the limited antimalarials;

Deeply concerned at the recent occurrence of extensive malaria epidemics, particularly in Africa, due to civil disorders, movements of refugees and displaced populations, or major ecological changes;

Noting with regret that the Malaria Action Programme that had been operating as a WHO division was downgraded into a unit;

Noting with concern the progressive reduction of technical staff for malaria control at WHO headquarters (while in 1989, the WHO Malaria Action Programme had a total of 30 staff members, today the Malaria unit under the WHO Division of Control of Tropical Diseases has 10 staff members - seven professional and three general service), in spite of the worsening malaria situation;

Recalling resolutions WHA38.24, WHA42.30, WHA46.32 of the World Health Assembly and resolutions on strengthening of malaria control efforts, EB83.R16, EB91.R4 of the Executive Board;

Recalling the resolution E/1995/63 adopted in 1995 by the United Nations Economic and Social Council, which called for increased resources for preventive action and intensification of the struggle against malaria in developing countries, particularly in Africa,

1. RECOGNIZES WITH CONCERN the inadequacy of the current malaria control organization at WHO headquarters, and the commitment of insufficient financial and human resources in spite of the increased demands from Member countries;
2. RECALLS the recommendation of the Executive Board at its ninety-seventh session that the Director-General should allocate additional human and financial resources for malaria control and reinstate the activity to the original divisional status;

3. NOTES WITH APPRECIATION the efforts undertaken by the WHO technical staff at headquarters, regional and country level in assisting countries where malaria is endemic;

4. NOTES WITH SATISFACTION that technical documents essential for the implementation of the Global Malaria Control Strategy have been prepared by WHO;

5. SUPPORTS the United Nations system-wide initiative in Africa for the promotion of health sector reform and the control of major diseases, such as malaria;

6. CALLS ON organizations of the United Nations system, other intergovernmental agencies and governmental and nongovernmental organizations to support a concerted effort for malaria control;

7. REQUESTS the Director-General:
   (1) to reinstate the malaria control unit at WHO headquarters to its divisional status;
   (2) to restore the staffing of the malaria programme at WHO headquarters at least to its level of 1990, when it was downgraded to a unit;
   (3) to promote the mobilization of technical and financial assistance in order to better tackle the ever-increasing problem of malaria; and
   (4) to report the progress in the implementation of this resolution to the Executive Board and Fiftieth World Health Assembly.