



**RBM Partnership
Strategic Plan
2021–2025**

Table of contents

Acknowledgements	5
Foreword	6
Introduction	8
Historic progress since 2000	8
Growing challenges	10
Fighting malaria in the face of the COVID-19 pandemic	13
Accelerating action towards zero malaria	14
The power of partnership	15
RBM Partnership to End Malaria 2021–2025 strategy framework	17
Vision, mission and principle	18
Strategic Objectives and Actions	19
Strategic Objective 1: Optimize the quality and effectiveness of country and regional programming	19
1.1 Support countries in the design of quality, prioritized programmes	19
1.2 Support countries in the use of real-time subnational data in planning, implementation and monitoring	19
1.3 Facilitate timely access to implementation support to address bottlenecks and gaps	20
1.4 Support building local management and technical capacity	20
1.5 Support countries to strengthen multi-stakeholder partnership coordination at the national and subnational level	20
1.6 Leverage regional alliances and initiatives to ensure cross-border and cross sectoral coordination and coherence	21
Strategic Objective 2: Maximize levels of financing	22
2.1 Advocate for optimizing global resource envelopes from existing donors and new channels of financing	22
2.2 Support countries with mobilizing and prioritizing domestic and other resources for malaria and health	23
Strategic Objective 3: Facilitate the deployment and scale-up of new products, techniques or implementation strategies	24
3.1 Promote and support the inclusion of new interventions in the design and delivery of programmes	24
3.2 Foster peer learning and knowledge exchange to facilitate deployment and scale-up of new products, techniques or implementation strategies	24
Strategic Enablers to implement the Strategic Plan	26
Strategic Enabler 1: Data-sharing and use	26
Strategic Enabler 2: Effective partnerships	26
Strategic Enabler 3: Targeted advocacy and communications	27
Strategic Enabler 4: Focused Secretariat	27

RBM Partnership to End Malaria Strategic Plan 2021–2025

© RBM Partnership to End Malaria, United Nations Office for Project Services (UNOPS) 2020

All rights reserved. The reproduction of any materials from this publication must be accompanied by a reference to the title and a website location of this publication.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of UNOPS concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

All reasonable precautions have been taken by UNOPS to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall UNOPS be liable for damages arising from its use.

This publication may be reproduced for personal use but may not otherwise be reproduced or, stored in a retrieval system or transmitted, in any form or by any means, electronic, photocopying, recording or otherwise, without prior written permission of UNOPS.

Credits

Cover page photo: © James Roh / Cotopaxi Foundation

Contact

For more information or for to provide feedback, contact: info@endmalaria.org



About the RBM Partnership to End Malaria

The RBM Partnership to End Malaria is the largest global platform for coordinated action against malaria. Originally established as Roll Back Malaria (RBM) Partnership in 1998, it mobilizes action and resources and forges consensus among partners. The Partnership is comprised of more than 500 partners, including malaria-endemic countries, their bilateral and multilateral development partners, the private sector, non-governmental and community-based organizations, foundations, and research and academic institutions. The RBM Partnership Secretariat is hosted by the United Nations Office for Project Services (UNOPS) in Geneva, Switzerland. endmalaria.org

Photography by © James Roh / Cotopaxi Foundation

Acknowledgements

This Strategic Plan was developed under the guidance of the RBM Partnership to End Malaria Board and the CEO.

Consultative interviews and discussions have drawn from the perspectives of endemic countries across regions, bilateral and multilateral partners, affected communities, civil society and the private sector, and others (see [Figure 1](#) below). The rich, diverse feedback has helped clarify the landscape of partner activities and contributions to shape and focus objectives, actions and enablers.

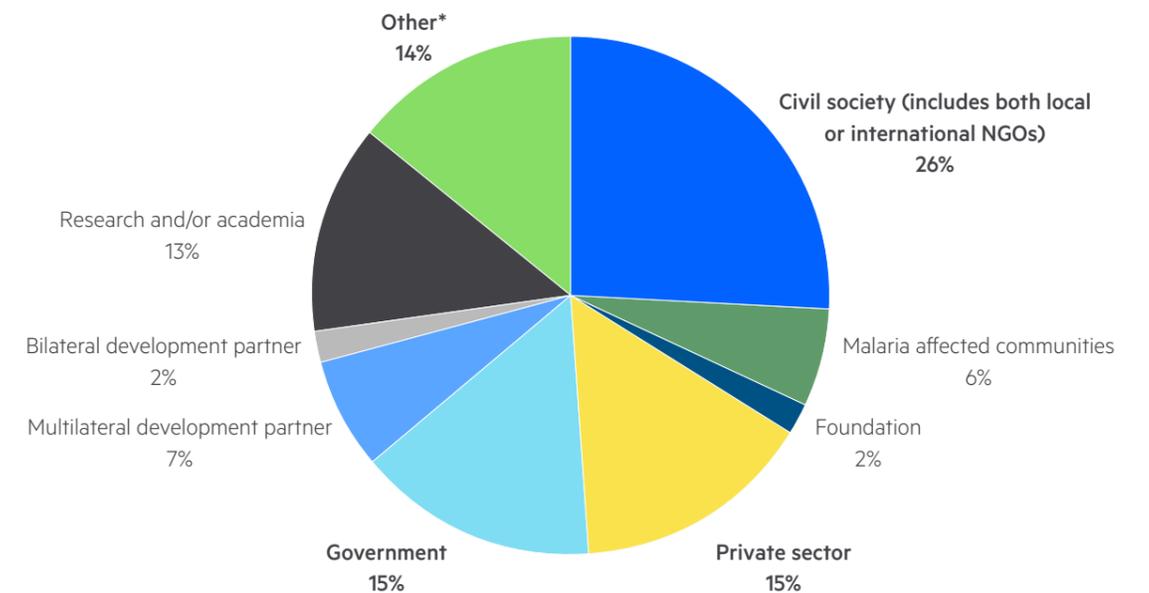
An open call for input through an online survey has provided additional feedback on priorities, strengths to build upon, and areas for improvement, based on experiences over the current strategic period and perspectives going forward.

The process of developing the Strategic Plan has also benefited from multiple engagements with the RBM Partnership Board. These discussions have resulted in Board steering and insights on the consultative process; emerging themes and areas of focus; initial translation of feedback into Strategic Objectives, Actions and Enablers, and iterative refinement of the strategy framework and narrative. We are also grateful for the consultations and inputs provided through the three RBM Partner Committees.

The RBM Partnership Secretariat extends its appreciation to all participants in the Strategic Plan development process for their time and valuable insights, particularly during a period of unprecedented challenges and uncertainty due to the COVID-19 pandemic.

Figure 1: RBM Partnership Strategic Plan consultations – Respondent profile

RBM Partnership Strategic Plan 2020–2025 consultations – Respondent profile



Total responses: 157, including:

- 71 respondents from 31 malaria-endemic countries in Africa, Asia-Pacific and the Americas
- 84 respondents from non-malaria-endemic countries
- 2 non-specified

*Includes Product Development Partnerships, RBM Secretariat and Independent Contractors.

Foreword



Professor Maha Taysir Barakat
Board Chair
RBM Partnership to End Malaria

The 2021–2025 Strategic Plan outlines the RBM Partnership to End Malaria’s priorities over the next five years for accelerating action across all regions and sectors towards achieving a “zero malaria” world.

As the global, multisectoral platform for coordinated action to end malaria, our work together as a global community will be instrumental in achieving the ambitious 2025 and 2030 malaria reduction and elimination targets and milestones, as well as the 2030 Sustainable Development Goals (SDGs).

The RBM Partnership’s actions and impact in these next few years will help determine whether the world achieves what we know is possible: succeeding against one of the world’s oldest and deadliest diseases.

While the realities of the COVID-19 pandemic have added significant challenges to our fight, we are confident that by building on 20 years of steadfast commitment and partnership, and guided by this Plan, we can – and we must – end this disease within a generation.

The next phase of the partnership’s work remains focused on its core mission: catalyse, convene and coordinate an inclusive, multisectoral response to control, eliminate and ultimately eradicate malaria.



Dr Abdourahmane Diallo
Chief Executive Officer
RBM Partnership to End Malaria

The 2021–2025 Strategic Plan is structured around three strategic priorities that will be implemented through partners’ coordinated efforts: 1) optimize the quality and effectiveness of national and regional programming; 2) maximize levels of financing; and 3) facilitate the deployment and scale-up of new products, techniques or implementation strategies. Fortifying these efforts are the Strategic Enablers of open and timely sharing of quality data; meaningful partner engagement; targeted advocacy and communications, and a focused Secretariat.

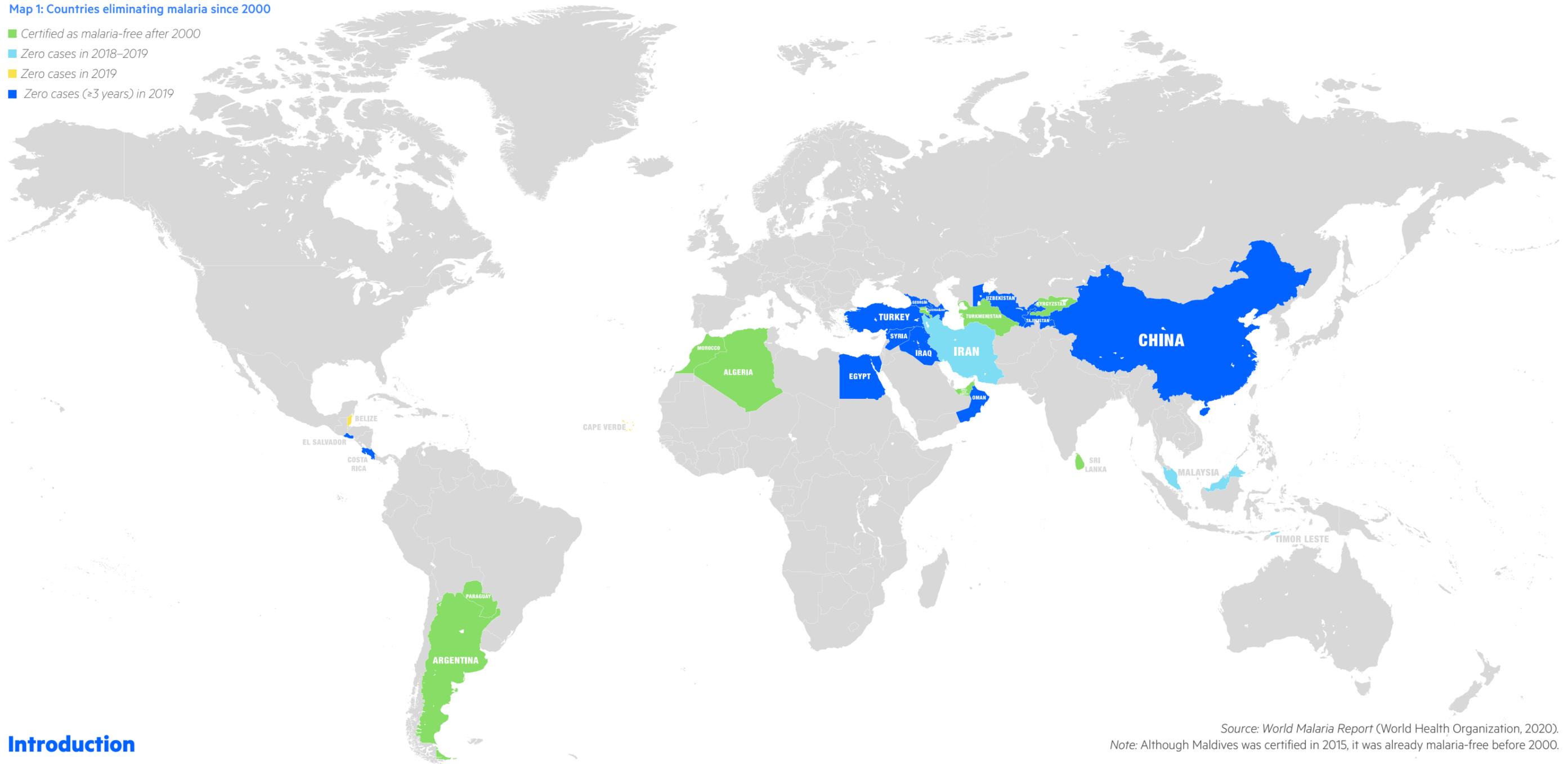
The strategy accounts for the current landscape – including recent progress made towards malaria elimination and challenges such as COVID-19 – as well as longer-term milestones, and is a living document that will be regularly reviewed and refreshed. We are grateful to all our partners and leaders in the malaria and broader health and development sectors who engaged with us throughout the Plan’s development via global online surveys, numerous sessions with countries and partners, and RBM Partnership committee consultations.

The RBM Partnership belongs to everyone working to end malaria in their community, in their country, and around the world. As we embark with you on this new chapter in our collective efforts, we look forward to strengthening this partnership and forging new pathways until we reach our shared vision of a malaria-free world.

Our reward will be measured not only in terms of lives saved, but also lives improved, lives enriched, and lives empowered.

Map 1: Countries eliminating malaria since 2000

- Certified as malaria-free after 2000
- Zero cases in 2018–2019
- Zero cases in 2019
- Zero cases (≥3 years) in 2019



Source: World Malaria Report (World Health Organization, 2020).
 Note: Although Maldives was certified in 2015, it was already malaria-free before 2000.

Introduction

Historic progress since 2000

Since 2000, working in global partnership and solidarity, we have made historic progress against malaria, saving an estimated 7.6 million lives, preventing over 1.5 billion new malaria infections, and setting the world on a path to end the disease once and for all.

Together, we have mobilized a tenfold increase in malaria investments and used our collective voice to keep malaria high on the political and developmental agendas. This has enabled us to significantly expand access to life-saving tools and to launch and scale up innovations such as long-lasting insecticide treated mosquito nets, a new generation of antimalarials and insecticides to guard against resistance, rapid diagnostics, and the first-ever malaria vaccine.

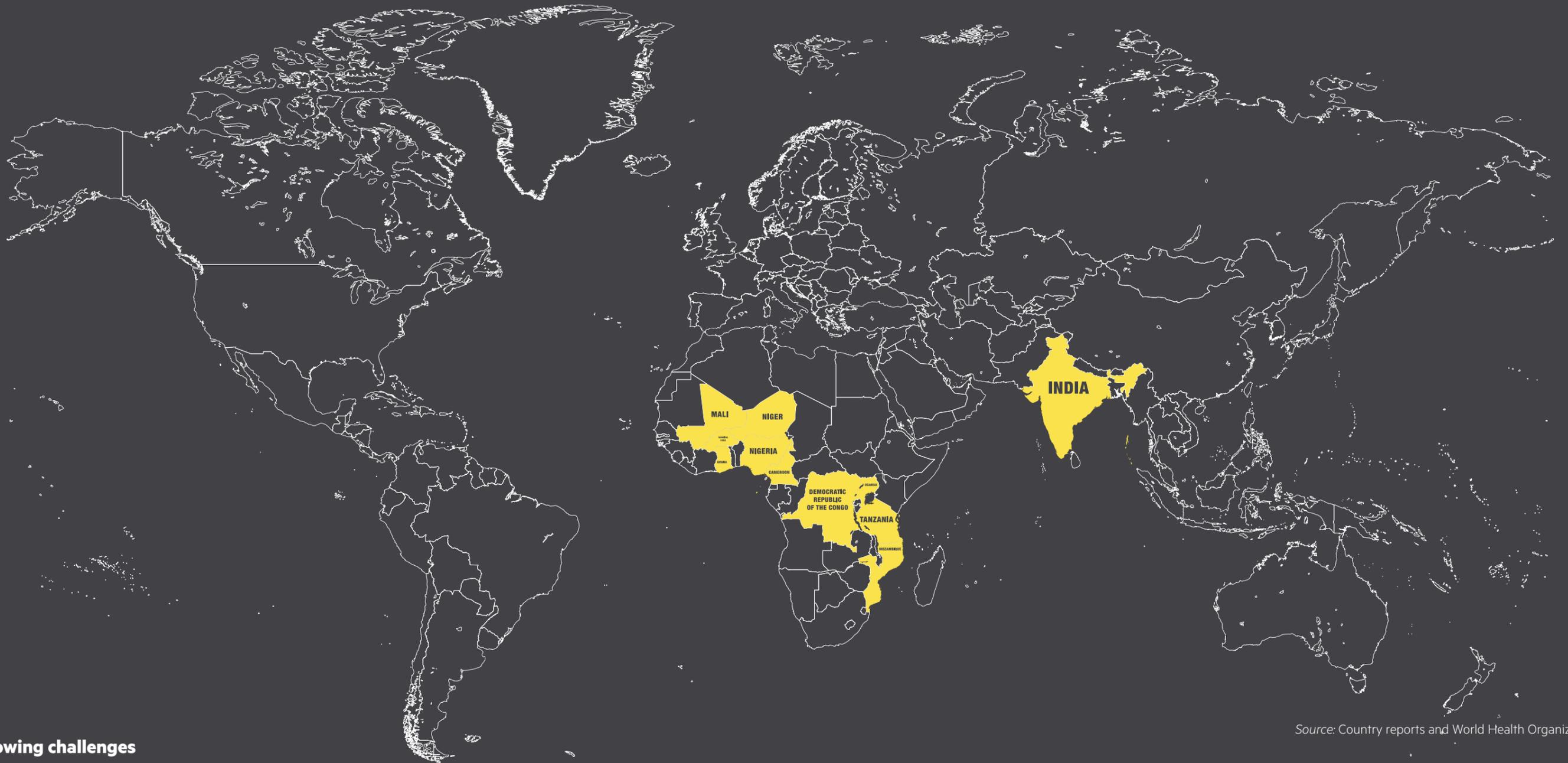
At the beginning of 2020, the international community celebrated a major milestone of two billion insecticide-treated mosquito nets distributed worldwide since 2004; these life-saving tools are credited with preventing nearly 70 per cent of all malaria cases in Africa over the past two decades. Malaria mortality rates have fallen by more than 60 per cent since 2000, and some countries, notably those in the Greater Mekong Subregion, registered reductions of more than 90 per cent in both malaria cases and deaths.

Between 2000 and 2019, the number of countries with fewer than 100 indigenous malaria cases – a strong indicator that elimination is within reach – increased from 6 to 27. Since 2015, 10 countries have reached zero malaria, meeting the World Health Organization (WHO) Global Technical Strategy (GTS) elimination target for 2020. Algeria, Argentina, Paraguay and Uzbekistan were certified as malaria-free in the last three years (see Map 1).

Recent landmark reports have confirmed that a malaria-free world can and should be achieved, and that the benefits of malaria eradication will greatly exceed the investment needed to reach it. Moreover, as the RBM Partnership to End Malaria framework document, *Action and Investment to Defeat Malaria 2016–2030 (AIM)*, clearly articulated, ending malaria is vital for achieving the SDGs beyond health, including those related to education, poverty eradication and gender equality.

“ We have made historic progress against malaria, saving an estimated 7.6 million lives, preventing over 1.5 billion new malaria infections ”

Map 2: High burden to high impact



Source: Country reports and World Health Organization.

Growing challenges

However, in the past few years, the rate of progress against malaria has slowed significantly, particularly in countries that carry the highest burden of the disease on the African continent, which accounts for over 90 per cent of global malaria cases and deaths (see [Map 2](#)). More than 400,000 people still die of malaria every year, two thirds of whom are children under five. The achievement of most of the WHO GTS and other malaria-related targets is currently off track (see [Table 1](#)).

This slow and uneven global progress against malaria in recent years can be attributed to a variety of factors. Funding for the global malaria response has plateaued since 2010, falling at least US\$2.6 billion short per year of the total amount necessary to provide all those at risk with the life-saving malaria tools they need.

At the same time, new challenges – including emerging drug and insecticide resistance, increasing population movement, and rising cases in the highest burden countries – mean we must invest even more in researching, developing and scaling up essential tools.

Finally, malaria has often been a victim of complacency: as an age-old disease, there is arguably less of a sense of urgency around it than with more recent health emergencies.

“ More than 400,000 people still die of malaria every year, two thirds of whom are children under five ”

Fighting malaria in the face of the COVID-19 pandemic

In 2020, the rapid spread of COVID-19 to all corners of the global threatened to undermine decades of hard-won gains against malaria, presenting an added danger for millions of families at risk of malaria and with the potential to overwhelm the fragile health systems in malaria-affected countries.

In response, these countries have demonstrated incredible leadership and commitment, acting quickly, efficiently and safely to move ahead with essential malaria prevention programmes. Despite the unfolding COVID-19 pandemic, millions of mosquito nets have been delivered, hundreds of thousands of houses have been sprayed, and millions of children have been reached with seasonal malaria chemoprevention.

Thanks to this unprecedented mobilization and support from the global malaria community, the worst-case scenario of a projected doubling of malaria deaths in sub-Saharan Africa in 2020 has thankfully been averted. However, even with the remarkable action taken by countries, malaria cases and mortality are expected to increase, and the full impact of COVID-19 on malaria control and elimination efforts will not be known for some time.

The existing gap in total financing for malaria, a disease concentrated in low-income countries, will be further exacerbated by the economic fallout of the COVID-19 pandemic as economies contract, health spending demands grow, and fiscal space tightens. This presents a significant challenge for the next five years and reinforces the critical importance of continued international and domestic resource mobilization.

If anything, the COVID-19 pandemic has underscored that investments in malaria over the past decades have been doing “double duty” by building stronger health systems, significantly reducing the burden of disease, and positioning countries to be better able to respond to future health emergencies.

The COVID-19 pandemic has also shone a light on the importance of timely, accurate and geo-localized data and modelling for public health. Over the last few years, we have seen major progress in the use of data for decision-making by malaria programmes and their partners, and the global malaria community must make the most of the opportunity to use real-time data to inform real-time decision-making. This approach, catalysed and facilitated by the RBM Partnership, will further support countries' resilience in the face of the unexpected barriers that can arise when fighting malaria.

“
The COVID-19 pandemic has shone a light on the importance of timely, accurate and geo-localized data and modelling for public health.”

Accelerating action towards zero malaria

Through its 2021–2025 Strategic Plan, the RBM Partnership to End Malaria will accelerate action across all regions and sectors towards achieving a “zero malaria” world.

As we head into a new decade of ambitious malaria reduction and elimination targets, we will work together to research, deliver and expand access to transformative tools and approaches to get the global malaria response back on track, reinvigorate our march towards eradication, and secure the necessary funding.

Continued global investment and commitment to a world free of malaria have been critical to sustaining the progress made by the malaria community to date. Without these global efforts, malaria cases and deaths would be significantly higher and the burden on health systems would have been devastating.

Investments in the fight against malaria help build stronger health systems and stronger economies, so we must protect existing sources of financing and identify new ones in all countries – malaria-burdened and malaria-free alike – and across multiple sectors, all of which benefit from ending this debilitating disease. This will be achieved by expanding the number of End Malaria Councils and Funds that serve as high-level platforms to advocate and leverage resources for the malaria fight at the national level.

Malaria elimination directly supports the achievement of universal health coverage (UHC) and can serve as a yardstick by which the success of UHC is measured. We must double down on our efforts to reach everyone, everywhere, with the life-saving tools they need, while also focusing on developing new ones to stay one step ahead of an ever-evolving parasite by fostering innovations and bringing them to scale.

Malaria is increasingly a disease of poverty and inequity, with the most vulnerable (pregnant women and children in Africa) at greatest risk of dying from a mosquito bite. Focusing on reducing malaria cases and deaths among these populations offers a significant opportunity to achieve maternal health and child survival SDGs, and will go a long way in achieving gender equality, education and poverty eradication SDGs.

The RBM Partnership to End Malaria recognizes that countries and communities are at the centre of an effective malaria response, and will continue to provide them with mission-critical support. Working in partnership, we will collaborate extensively on the Global Malaria

Dashboard and use technology and data to strengthen health systems, improve supply chains, maximize the efficiency of limited resources, and share best practices and lessons learned. This includes implementing the high burden to high impact (HBHI) response to get back on track in achieving malaria reduction targets, as well as supporting an increasing number of countries that are approaching and reaching zero malaria.

Finally, we need to nurture a society-wide movement to achieve a “zero malaria” world, and the RBM Partnership to End Malaria will continue to play a leading role in this regard by mobilizing targeted advocacy and communications to keep malaria high on the political agenda, driving leadership, commitment and change. Importantly, we must continue to convince people, from Heads of State to heads of households, about why it is worth investing in achieving a malaria-free world, what is to be gained by prioritizing this goal, and what is needed to keep leaders accountable. Zero malaria truly starts with all of us.

Table 1: Global targets for 2030 and milestones for 2020 and 2025

By 2020	By 2025	By 2030
<ul style="list-style-type: none"> Malaria mortality rates and incidence are reduced by at least 40 per cent compared with 2015. Off track. Malaria does not re-emerge in countries that were malaria-free in 2015. Off track. Malaria is eliminated in a further 10 countries compared to 2015. On track. 	<ul style="list-style-type: none"> Reduce malaria incidence and mortality rates by at least 75 per cent compared with 2015. Prevent re-emergence of malaria in countries that were malaria-free in 2015. Eliminate Malaria in a further 20 countries compared to 2015. 	<ul style="list-style-type: none"> Reduce malaria incidence and mortality rates by at least 90 per cent compared with 2015 levels. Eliminate malaria in a further 35 countries compared to 2015. Prevent re-emergence of malaria in all malaria-free countries. End the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, waterborne diseases and other communicable diseases.

*Source: World Health Organization Global Technical Strategy for Malaria 2016–2030 and Sustainable Development Goals



The power of partnership

The accomplishments of the past decades have been the sum of unique and valuable contributions by the collective power of global partners in an effective Partnership. Similarly, only through partnership will we be able to end malaria once and for all. The RBM Partnership stands ready to support meaningful engagement with partners at the global, regional and national levels to leverage their unique capabilities, expertise and perspectives, and to continuously reach out to sectors beyond health in expanding and strengthening our collective response to end malaria.



RBM Partnership to End Malaria 2021–2025 strategy framework

Strategic Objectives and Strategic Actions	SO1. Optimize the quality and effectiveness of country and regional programming	SO2. Maximize levels of financing
	1.1 Support countries in the design of quality, prioritized programmes	2.1 Advocate for optimizing global resource envelopes from existing donors and new channels of financing
	1.2 Support countries in the use of real-time subnational data in planning, implementation and monitoring	2.2 Support countries with mobilizing and prioritizing domestic and other resources for malaria and health
	1.3 Facilitate timely access to implementation support to address bottlenecks and gaps	SO3. Facilitate the deployment and scale-up of new products, techniques or implementation strategies
	1.4 Support building local management and technical capacity	3.1 Promote and support the inclusion of new interventions in the design and delivery of programmes
	1.5 Support countries to strengthen multi-stakeholder partnership coordination at the national and subnational level	3.2 Foster peer learning and knowledge exchange to facilitate deployment and scale-up of new products, techniques or implementation strategies
1.6 Leverage regional alliances and initiatives to ensure cross-border and cross-sectoral coordination and coherence		

Vision

A world free from the burden of malaria

Mission

To convene and coordinate an inclusive, multisectoral response to control, eliminate and ultimately eradicate malaria

Principle

Ending malaria is central to achieving UHC and global health security, and reducing poverty and inequality

Cross-cutting Strategic Enablers

Data-sharing and use	SE1: Open and timely sharing of quality data to drive decision-making, build transparency and foster accountability.
Effective partnership	SE2: Meaningful engagement of partners at the global, regional and national level to leverage their unique capabilities, expertise and perspectives.
Targeted advocacy and communications	SE3: Targeted advocacy and communications to keep malaria high on global health and development agendas to drive leadership, commitment, and change.
Focused Secretariat	SE4: A Secretariat that energizes the partnership to deliver the strategy.

Adapt to the evolving COVID-19 environment



Vision, mission and principle

The **vision** of the RBM Partnership to End Malaria is a world free of the burden of malaria.

The **mission** of the RBM Partnership is to convene and coordinate an inclusive, multisectoral response to control, eliminate and ultimately eradicate malaria.

The RBM Partnership's **principle** is that ending malaria is central to achieving UHC and global health security, and reducing poverty and inequality.

Strategic Objectives and Actions

Strategic Objective 1:

Optimize the quality and effectiveness of country and regional programming

This first Strategic Objective reflects an overarching principle that countries and communities are at the centre of an effective malaria response. It aims to support countries and regions in the planning, implementation and monitoring of effective programmes through the coordination of technical and implementation support, bottleneck resolution, advocacy and partnerships. It aligns with and builds on the country-led HBHI approach. The Strategic Actions under this Objective are as follows:

Strategic Actions

1.1 Support countries in the design of quality, prioritized programmes

This aims to support countries in their design of quality prioritized programmes that optimize available resources, including the development of robust funding applications and operational plans.

This Strategic Action complements support to countries in the development of national strategic plans (NSP) and costed operational plans by WHO and other partners, as well as the country partners that participate in malaria programme reviews (MPR).

To do it, the RBM Partnership will continue to coordinate and facilitate technical and implementation support where gaps exist in the NSP, operational plan and MPR processes. It will also continue to assist countries in the development of Global Fund funding applications, conduct mock technical review panel (TRP) peer reviews and support the grant-making process. Going forward, the RBM Partnership will also draw on the Mock TRP model and build on its role as a platform to facilitate information exchange and learning to convene and facilitate peer review and learning in the NSP, operational plan and MPR processes. Such engagement enables continued support for the upscaling of integrated community case management of malaria (ICCM) through community health workers as part of the HBHI initiative and broader efforts on integrated service delivery.

1.2 Support countries in the use of real-time subnational data in planning, implementation and monitoring

This aims to maximize the impact and cost-effectiveness of available resources by supporting countries in ongoing targeting and prioritization of interventions according to the type of subnational context (e.g., district, subdistrict, village).

Endemic countries work with a range of critical partners on building national malaria data repositories, strengthening monitoring and surveillance systems and capacity, supporting stratification (national and subnational), and promoting accountability.

The RBM Partnership will complement these collective efforts by helping national programmes coordinate support across partners at the national and subnational level and address gaps where needed. The RBM Partnership will also focus on enabling subnational stratification and routine use of quality data to inform decision-making throughout the full programme lifecycle in countries where partners are not already doing so. This will include supporting countries in the use of qualitative analyses from tools such as the Malaria Matchbox equity assessment tool.

1.3 Facilitate timely access to implementation support to address bottlenecks and gaps

This aims to ensure that country needs for addressing operational and implementation challenges and bottlenecks, including emergencies and coverage gaps, are efficiently met through timely coordination across partners.

This complements the first two Strategic Actions by coordinating real-time responses to strengthen programmatic delivery and implementation, including working with countries on programming newly available resources towards unfunded priorities.

The RBM Partnership will continue to triage bottlenecks and gaps by seeking support first from in-country partners and resources (human and financial), followed by regional and then global partners and resources before deploying its own direct support and resources.

1.4 Support building local management and technical capacity

This aims primarily to strengthen national and subnational managerial capacity to effectively deliver malaria interventions and strengthen broader health systems. Expanding managerial capacity at the national, district and community level enables more targeted malaria responses while also responding to the challenges and opportunities presented by integration or decentralization of health sectors.

To do this, the RBM Partnership will assist countries in convening periodic (e.g. quarterly) reviews of needs in programme and data management as well as partnership coordination at all levels. The RBM Partnership will also work with partners supporting countries in NSP, operational planning and MPR processes to factor in these needs. Furthermore, it will help countries in coordinating capacity-building support through mentorship, peer learning, shadowing and potentially training that is tailored to local structures, practices and contexts.

1.5 Support countries to strengthen multi-stakeholder partnership coordination at the national and subnational level

This aims to support countries in expanding access to quality services in a way that puts people at the centre of the response and takes an integrated, comprehensive approach across public, private and community service providers.

Communities play a critical role in designing, implementing and monitoring equitable, rights-based and gender-responsive programmes to effectively respond to the barriers (e.g. socioeconomic, cultural) and needs of those affected or at risk, particularly underserved, marginalized or vulnerable populations. Given that a significant portion of populations seek services from private providers in many contexts, neither quality nor access can be fully addressed without their engagement as part of an overall response. Promoting and convening stronger engagement with communities and private providers also paves the way for aggregating public, private and community data for use in decision-making.

To help address this, the RBM Partnership will raise awareness of and facilitate the involvement of affected communities and local civil society in existing platforms or bodies that govern or coordinate the design, implementation and monitoring of malaria responses. This will include facilitating the uptake of the Global Fund's community, rights and gender technical support to ensure that affected communities are meaningfully engaged and human rights and gender barriers are effectively addressed in malaria programmes. This Action builds on existing efforts to lead and coordinate diverse partners on advocacy and implementation of the "Zero Malaria Starts with Me" campaign, which includes enhancing community and private-sector engagement at all levels.

Given the varied nature of private providers across countries, the RBM Partnership will support countries in convening the private health-care sector in existing platforms or bodies that govern or coordinate the design, implementation and monitoring of malaria responses. It will also document and share lessons and experiences, and facilitate peer learning and exchange, to identify best practices or evidence to inform the development of related guidance.



Photography by Emmanuel Aframah, PMI Impact Malaria

1.6 Leverage regional alliances and initiatives to ensure cross-border and cross sectoral coordination and coherence

This aims to facilitate information exchange, policy coherence and coordinated action across borders through existing regional platforms for political, technical and economic cooperation.

Regional malaria alliances (e.g. African Leaders Malaria Alliance –ALMA, Asia Pacific Leaders Malaria Alliance – APLMA) and regional malaria elimination initiatives (e.g. Greater Mekong Subregion – GMS, E8, Mesoamerica Regional Malaria Elimination Initiative – RMEI, Sahel Malaria Elimination Initiative, Great Lakes Malaria Initiative, Malaria Elimination in Melanesia and Timor-Leste Initiative – MEMTI) drive accountability, cross-border collaboration, resource mobilization and elimination strategies. Regional economic communities, or other similar regional groupings of countries, provide a broader platform for prioritizing malaria and enhancing subregional coordination.

To complement these efforts, the RBM Partnership will continue operationalizing Memorandums of Understanding with ALMA and regional economic communities to collaborate on maintaining high-level political commitment to end malaria, cross-border elimination initiatives, and subregional technical support and capacity-building. Enhanced strategic engagement and collaboration will facilitate coherence and efficiencies across national and regional malaria strategies and align health, social and economic priorities (e.g. education, environment, housing, agriculture).

Best practices and lessons learned from such collaborations will be used to expand the approach across endemic regions, through the African Union (AU), APLMA, GMS and RMEI.

Strategic Objective 2: Maximize levels of financing

The gap in total financing for malaria is a significant challenge, particularly with plateauing trends for donor financing and malaria burden concentrated in lower-income countries which face disproportionate fragility, instability and other complex challenges. This will be exacerbated by the economic fallout of the COVID-19 pandemic as economies contract, health spending demands grow and fiscal space tightens. At the same time, the combination of population growth and higher costs of new interventions will require increased resources to maintain and expand coverage levels. There is a need to focus on promoting understanding of malaria's impact on broader global health and development priorities to maintain and expand donor financing, while supporting countries on prioritizing malaria and health within available fiscal space. The Strategic Actions under this Objective are as follows:

Strategic Actions

2.1 Advocate for optimizing global resource envelopes from existing donors and new channels of financing

This aims to maintain and expand malaria financing from existing and potential donors (e.g. multilateral, bilateral, private or innovative) by promoting the inclusion of malaria in broader health and development financing priorities.

Keeping malaria high on global health and development agendas as a focused priority and an integral part of achieving broader UHC, global health security, equity and poverty reduction goals is critical for mobilizing the resources needed to achieve the GTS targets. This requires leveraging global partners, such as the End Malaria Council, to mobilize high-level champions from the public and private sector, and regional partners (e.g. political unions, economic communities, malaria alliances or elimination initiatives) that facilitate cross-sectoral leadership and accountability from the Head-of-State level. Civil society partners are also critical in driving strategic communications and advocacy.

Evolving priorities and constrained development assistance budgets highlight the need for a coordinated approach to engaging current and new donors. Rather than duplicate the ongoing efforts of partners, the RBM Partnership will map the landscape of funding sources and opportunities to partners that are leading, or well placed to lead, such engagements. Where partners are well placed, the RBM Partnership will track efforts and lessons learned, and assist with coordinating or leveraging partners and supplying analyses, messaging or briefs, as needed. In other instances, the RBM Partnership will lead and shape engagements, collaborating with partners that can activate political or high-level champions to initiate or amplify efforts targeted at existing or new donors.

The engagement of donors or partners with mandates or priorities broader than malaria, such as multilateral health agencies and development banks (such as Global Financing Facility, World Bank, African Development Bank, Asian Development Bank and Inter-American Development Bank), presents the RBM Partnership with an opportunity for such leadership. Regular communication at the executive leadership level will pave the way for updating or establishing partnership agreements to establish areas of common interest, regular dialogue channels and collaborative approaches. This will facilitate the inclusion of malaria in broader financing strategies on health and other priorities to maximize the levels and efficiency of available resources.

Furthermore, as a member of the partners constituency on the Global Fund Board, the RBM Partnership will continue to strengthen malaria's representation to promote strategic and funding policies reflective of malaria priorities.

To deliver these actions, the RBM Partnership will develop an updated global investment case aligned to an updated GTS, factoring in the impact of COVID-19, to demonstrate and communicate the impact malaria investments have on achieving UHC, global health security and integrated service delivery goals. This will draw on strong primary health care, community health workers, surveillance and outbreak response systems as common pathways to malaria elimination, and strong, resilient and integrated health systems. Furthermore, it will show how malaria investments reduce inequity

and accelerate human and economic development given pregnant women, infants, children under 5 years of age, and patients with HIV/AIDS are among the most vulnerable while those impacted by conflict (e.g., refugees, internally displaced persons), women and children living in poverty, ethnic minorities, indigenous populations or undocumented workers are among the most underserved populations. Drawing on themes and positioning put forward in the Action and Investment to Defeat Malaria 2016 – 2030 (AIM), a series of graphics, briefs or toolkits tailored by geography, sector, donor type or other factors could also be developed, including to support the prioritization of domestic resources in health and malaria, as well as promote resource needs of new interventions.

2.2 Support countries with mobilizing and prioritizing domestic and other resources for malaria and health

This aims to support countries in ensuring that malaria is a core and essential element of health strategies and in advocating for prioritization of domestic government health spending within available fiscal space. It also seeks to support countries in mobilizing external and non-government domestic resources, including from the private sector.

Regional malaria alliances and civil society partners, among others, enable countries to bring political leaders and multisectoral partners together with malaria programmes to drive accountability as well as political, technical and financial cooperation through End Malaria Councils (EMCs), End Malaria Funds (EMFs), national malaria elimination task forces or similar bodies, and parliamentary groups. Additional support – whether that be development of health financing strategies or provision of advocacy, guidance or support on domestic resource mobilization for health – comes through the financial, technical or political advocacy support of multilateral, bilateral and other donor partners working in conjunction with regional, political or economic unions such as the African Union. Rather than duplicate existing efforts, the RBM Partnership will work with partners to complement such initiatives as needed. In other cases, it will lead or drive activities, and remain flexible so that this balance of effort can be adjusted as needs and contexts evolve over time.

Opportunities for the RBM Partnership to lead, as well as draw from and feed into partner efforts, include linking planning, design, advocacy, capacity-building and partner-coordination actions under Strategic Objective 1 to the health and broader financing discussions driven by platforms or initiatives described earlier. To do this, the RBM Partnership will work with countries to strengthen malaria representation on cross-disease, cross-priority coordinating mechanisms and bodies at all levels of national and regional planning. This will enable national malaria control programmes to coordinate with the broader health sector and other ministries, particularly finance, to ensure malaria NSPs and operational plans are well incorporated in the strategies and financing plans of the health sector (e.g. social insurance schemes, UHC strategies) and other related sectors. Such representation will also enable advocacy for prioritization of health and malaria spending, and maximize the amount of co-financing commitments used to access external financing (e.g. Global Fund) that goes towards malaria interventions. This will be complemented by continued efforts to implement the “Zero Malaria Starts with Me” campaign to drive community-led change, advocacy and engagement.

Countries will also be supported to mobilize non-government domestic resources (e.g. private sector, innovative sources), with efforts under Strategic Action 2.1 at the global level being leveraged to help countries access resources from current and new external donors. The RBM Partnership will also facilitate sharing of best practices and lessons learned across countries or regions on setting up and operating EMCs, EMFs, national malaria elimination task forces, or other similar bodies, to expand and amplify whole-of-government approaches that include affected communities, leverage public-private partnerships, and contribute to the political-will element of the HBHI approach.

Strategic Objective 3:

Facilitate the deployment and scale-up of new products, techniques or implementation strategies

The current development pipeline indicates that the next five years could see the introduction of important new products, techniques or implementation strategies. Rapid deployment and upscaling of new interventions can significantly accelerate progress, but regulatory approvals, evidence generation, higher costs and relative prioritization can all present challenges. A wide range of partners contribute along the chain of research, development, roll-out, and scaling to address obstacles. The RBM Partnership will continually analyse wider efforts to avoid duplication, but will remain responsive when the need for additional engagement to fill gaps or align actions or messaging arises. The Strategic Actions under this Objective are as follows:

Strategic Actions

3.1 Promote and support the inclusion of new interventions in the design and delivery of programmes

This aims to effectively introduce and scale up new products, techniques or implementation strategies as part of the technical and partner-coordination support provided to countries in their design, implementation and monitoring of programmes.

Product development pipelines are supported or led by a variety of partners, including the Foundation for Innovative New Diagnostics, Medicines for Malaria Venture, Innovative Vector Control Consortium, Target Malaria and Unitaid. The WHO prequalification process ensures that health products meet international quality, safety and efficacy standards. Work by WHO with country regulatory systems, as well as that by product development partnerships, further facilitates access. WHO issues guidance and guidelines on the roll-out of new health products, while other partners provide critical funding and implementation support. This is complemented by advocacy from partners such as regional malaria alliances and civil society organizations.

The RBM Partnership will monitor these ongoing partner efforts to track progress, and focus on coordinating technical and implementation support to optimize the relative prioritization and mix of new and existing interventions as part of the planning, design, implementation and monitoring support that underpins Strategic Objective 1. Similarly, the RBM Partnership will coordinate with partners with production, normative, financing, advocacy and implementation roles to help shape the market for new products, building on catalytic efforts to introduce new long-lasting insecticide nets. Where there are diverging views, bottlenecks that disrupt access, or gaps in evidence or guidance, the RBM Partnership will convene cross-sectoral dialogue to remove such barriers.

3.2 Foster peer learning and knowledge exchange to facilitate deployment and scale-up of new products, techniques or implementation strategies

This aims to facilitate peer learning on delivering or implementing new tools or approaches through sharing of experiences, lessons learned and best practices.

Endemic countries engage with WHO, key donors and other partners on a variety of support and financing to facilitate South-South learning, and to generate lessons from operational and implementation research. Regional malaria initiatives or cross-sectoral bodies also provide opportunities for subregional dialogue and knowledge-sharing.

The RBM Partnership's subregional meetings, collaboration with regional economic committees and peer-review processes such as the Mock TRP provide platforms to harness the knowledge and experience of local experts to help peer countries replicate successes, overcome challenges and adapt to the local context. These forums will also be opportunities to widely disseminate operational and implementation research supported by other partners. The RBM Partnership will use case studies, webinars or other media to document and share such best practices on effectively introducing and delivering new tools and approaches, as well as overcoming barriers. The RBM Partnership will further leverage existing regional platforms so that peer exchanges include broader determinants that can enable or constrain the adoption and use of new products, techniques or implementation strategies. In doing so, the RBM Partnership will be a "bridge" for feeding the evidence and experience of endemic countries and affected communities back into global forums on policy, guidance and financing.



Strategic Enablers to implement the Strategic Plan

The following cross-cutting elements enable delivery of the Strategic Actions and achievement of the Strategic Objectives. They reflect critical modes of delivery to drive successful strategy implementation.

Strategic Enabler 1: Data-sharing and use

The aggregation, sharing and use of real-time data identifies strategic and operational progress, challenges and risks (e.g. natural disasters, outbreaks), and drives coordinated action and messaging necessary for an effective and timely response at the global, regional and subregional level.

Ongoing collaboration across partner organizations facilitates improved data management and integration, including alignment and harmonization of data to improve sharing and interoperability. Furthermore, endemic countries work closely with partners to strengthen national data and surveillance systems, and capacity, as described in [Strategic Action 1.2](#).

The RBM Partnership Global Malaria Dashboard will build on and complement these efforts by pooling available data across a wide range of sources to support timely situational analyses (e.g. quarterly) that will guide policy and programme management decisions, as well as partner coordination to deliver targeted support to overcome bottlenecks.

Promoting the adoption and use of new digital or information technologies that can capture, validate and share real-time, granular data from a wide range of sources (e.g. communities, private providers, front-line health-care workers) will further facilitate data-driven management, reporting and advocacy, as will advocating for open data policies, standards and platforms that enhance transparency and accountability. Coordinating support to build the capacity needed to analyse and utilize such information will also be an important part of strengthening local management capacity under [Strategic Objective 1](#).

Strategic Enabler 2: Effective partnerships

The RBM Partnership convenes and coordinates partners at the global, regional and national level to leverage their unique capabilities, expertise and perspectives. Globally, the RBM Partnership serves as a collaborative platform to keep malaria an integral part of the evolving global health and development landscape. The RBM Partnership will continue to build on existing regional platforms to foster cross-border and cross-sectoral coherence, learning and cooperation. Similarly, the RBM Partnership will continue to support countries in convening and coordinating partners at the national and subnational level according to local context and needs (e.g. language), drawing on councils, task forces and other bodies that prioritize malaria with high-level political engagement and multisectoral coordination.

The RBM Partnership tracks partner efforts to avoid duplication and fragmentation. This enables the RBM Partnership to maintain visibility on progress, obstacles and emerging issues to identify where the Secretariat or partners lead, as well as where gaps, missing consensus or other factors require the RBM Partnership to convene partners and align on coordinated messaging and action. The RBM Partnership's Global Malaria Dashboard facilitates such efforts by aggregating available data to trigger and guide timely responses to progress, challenges and risks as they emerge.

Meaningful partner engagement and participation requires clarity on the contributions sought or expected from sectors and organizations so that partners are engaged and leveraged according to their comparative advantages. Doing so enhances the quality and focus of partnerships. This will require the RBM Partnership to prioritize which sectors and organizations to engage, and to be deliberate in the aims and outcomes they support. Such prioritization and specificity will facilitate tailored, differentiated and proactive engagement across partners while also instilling greater accountability.

Strategic Enabler 3: Targeted advocacy and communications

The Strategic Objectives and Strategic Actions set an advocacy and communications agenda for the RBM Partnership. As such, the RBM Partnership advocates to keep malaria high on the global health and development agendas by crafting, aligning or amplifying narratives and messages and engaging high-level decision makers and influencers. This catalyses the leadership, commitment, and change (e.g. behavioural, social, policy) needed for effective programming, partnership and financing, positioning malaria in broader health and development financing.

This is done through the production, commissioning or dissemination of analyses, reports, briefs or other published materials. Campaigns and events, as well as their accompanying communications (whether organized or supported by the RBM Partnership), are additional means for unifying action, raising awareness and spreading critical messages. Leveraging partners' access to influential leaders of government, multilateral organizations, industry and communities helps to broaden the base of champions, funders and partners.

Publications, campaigns and events will be targeted to achieve outcomes that serve the Strategic Actions under each Strategic Objective, and to specific issues and audiences to drive necessary actions. For outcomes, issues or audiences well addressed or covered by partners, the RBM Partnership will play a supportive and amplifying role by bringing attention to such messages, campaigns or events and coordinating or convening as necessary. A critical tool for doing so is the RBM Partnership's website, which is intended as the leading source of information for partners vested in the fight to end malaria.

Global narratives and messages will be tailored to the local contexts of endemic countries and affected communities. Furthermore, the RBM Partnership will continue to serve as a platform that collects and channels regional and national accounts to inform and influence global advocacy and policy.

Strategic Enabler 4: Focused Secretariat

The strategy draws and builds upon partnerships at the global, regional, national and subnational levels, with partners committing resources and capabilities to support its implementation.

The RBM Partnership Secretariat has the important role of actively convening these partners, facilitating dialogue and learning, and coordinating messaging and action as the voice of the collective partnership. As part of this role, the RBM Partnership Secretariat will coordinate, facilitate and contribute to the work of Partner Committees established to galvanize and amplify the efforts of partners in support of the Board-approved strategy.

The Partner Committees, in turn, will be focused to best serve the countries and the Strategic Objectives, with the RBM Partnership Secretariat enabling and coordinating the work of the Committees and any ad hoc or ongoing working groups that may be set up from time to time.

Specific functions, interlinkages and competencies are required to fulfil the Strategic Objectives, Actions and Enablers. As such, focusing the RBM Partnership Secretariat with the necessary competencies, resources and systems will ensure that it is positioned to implement the strategy effectively and efficiently, which includes enabling the work of the Partner Committees.



Contact

RBM Partnership to End Malaria
5th floor, Global Health Campus
Chemin du Pommier 40
1218 Le Grand-Saconnex
Geneva, Switzerland

info@endmalaria.org
endmalaria.org

Hosted by

