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IN THE SENATE OF THE UNITED STATES

MAY 5, 2009

Received

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Referred to the Committee on Foreign Relations

CONCURRENT RESOLUTION

Supporting the goals and ideals of Malaria Awareness Day.

Whereas April 25 of each year is recognized internationally as Africa Malaria Day and in the United States as Malaria Awareness Day;

Whereas despite malaria being completely preventable and treatable and the fact that malaria was eliminated from the United States over 50 years ago, more

than 40 percent of the world's population is still at risk of contracting malaria;

Whereas, according to the World Health Organization, nearly 1,000,000 people die from malaria each year, the vast majority of whom are children under the age of 5 in Africa;

Whereas malaria greatly affects child health, roughly every 30 seconds a child dies from malaria, and more than 3,000 children die from malaria every day;

Whereas malaria poses great risks to maternal health, causing complications during delivery, anemia, and low birth weights, with estimates by the Center for Disease Control and Prevention that malaria infection causes 400,000 cases of severe maternal anemia and from 75,000 to 200,000 infant deaths annually in sub-Saharan Africa;

Whereas HIV infection increases the risk and severity of malarial illness, and malaria increases the viral load in HIV-positive people, which can lead to increased transmission of HIV and more rapid disease progression, with substantial public health implications;

Whereas in malarial regions, many people are co-infected with malaria and one or more of the neglected tropical diseases, such as hookworm and schistosomiasis, which causes a pronounced exacerbation of anemia and several adverse health consequences;

Whereas the malnutrition and consequent chronic illness that result from childhood malaria leads to increased absenteeism in school and perpetuates cycles of poverty;

Whereas an estimated 90 percent of deaths from malaria occur in Africa and the Roll Back Malaria Partnership

estimates that malaria costs African countries \$12,000,000,000 in lost economic productivity each year;

Whereas the World Health Organization estimates that malaria accounts for 40 percent of health care expenditures in high-burden countries, demonstrating that effective, long-term malaria control is inextricably linked to the strength of health systems;

Whereas heightened efforts over recent years to prevent and treat malaria are currently saving lives;

Whereas progress and funding to control malaria has increased ten-fold since 2000, in large part due, to funding under the President's Malaria Initiative (a United States Government initiative designed to cut malaria deaths in half in target countries in sub-Saharan Africa), the Global Fund to Fight AIDS, Tuberculosis and Malaria, the World Bank, and new financing by other donors;

Whereas the President's Malaria Initiative has purchased almost 13,000,000 artemisinin-based combination therapies (ACT), protected over 17,000,000 people through spraying campaigns, and distributed over 6,000,000 insecticide-treated bed nets, the Global Fund to Fight AIDS, Tuberculosis and Malaria has distributed 7,000,000 bed nets to protect families from malaria and provided 74,000,000 malaria patients with ACTs, and the World Bank's Booster Program is scheduled to commit approximately \$500,000,000 in International Development Association funds for malaria control in Africa;

Whereas public and private partners are developing effective and affordable drugs to treat malaria, with more than 23 types of malaria vaccines in development;

Whereas according to the Centers for Disease Control and Prevention, vector control, or the prevention of malaria transmission via anopheles mosquitoes, which includes a combination of methods such as insecticide-treated bed nets, indoor residual spraying, and source reduction (larval control), has been shown to reduce severe morbidity and mortality due to malaria in endemic regions;

Whereas the impact of malaria efforts have been documented in numerous regions, such as in Zanzibar, where malaria prevalence among children shrank from 20 percent to less than 1 percent between 2005 and 2007, and in Rwanda, where malaria cases and deaths appeared to decline rapidly after a large-scale distribution of bed nets and malaria treatments in 2006; and

Whereas a malaria-free future will rely on consistent international, national and local leadership, and a comprehensive approach addressing the range of health, development, and economic challenges facing developing countries: Now, therefore, be it

1 *Resolved by the House of Representatives (the Senate*
2 *concurring), That Congress—*

3 (1) supports the goals and ideals of Malaria
4 Awareness Day, including the achievable target of
5 ending malaria deaths by 2015;

6 (2) calls upon the people of the United States
7 to observe this day with appropriate programs, cere-
8 monies, and activities to raise awareness and sup-
9 port to save the lives of those affected by malaria;

1 (3) reaffirms the goals and commitments to
2 combat malaria outlined in the Tom Lantos and
3 Henry J. Hyde United States Global Leadership
4 Against HIV/AIDS, Tuberculosis, and Malaria Re-
5 authorization Act of 2008;

6 (4) commends the progress made during the
7 last year by anti-malaria programs including the
8 President's Malaria Initiative and the Global Fund
9 to Fight AIDS, Tuberculosis and Malaria;

10 (5) recognizes the work of the Roll Back Ma-
11 laria Partnership and affirms United States support
12 for and contribution toward the achievement of the
13 following targets:

14 (A) Achieve universal coverage for all pop-
15 ulations at risk with locally appropriate inter-
16 ventions for prevention and case management
17 by 2010 and sustain universal coverage until
18 local field research suggests that coverage can
19 gradually be targeted to high-risk areas and
20 seasons only, without risk of a generalized re-
21 surgence.

22 (B) Reduce global malaria cases from
23 2000 levels by 50 percent in 2010 and by 75
24 percent in 2015.

25 (C) End malaria deaths by 2015.

1 (6) encourages fellow donor nations to maintain
2 their support and honor their funding commitments
3 for Malaria programs worldwide;

4 (7) urges greater integration between United
5 States and international health programs that target
6 malaria, HIV, Tuberculosis, neglected tropical dis-
7 eases, and basic child and maternal health; and

8 (8) commits to continued United States leader-
9 ship in efforts to reduce global malaria deaths, espe-
10 cially through strengthening health care systems
11 that can deliver effective, safe, high-quality interven-
12 tions when and where they are needed, and assure
13 access to reliable health information and effective
14 disease surveillance.

Passed the House of Representatives May 4, 2009.

Attest: LORRAINE C. MILLER,
Clerk.