Malaria

Business Community

Pfizer

Pfizer commits through ongoing programs and partnerships to support the UN Secretary General's Every Woman, Every Child objectives by helping address health priorities in the following areas: infant immunization for the prevention of pneumococcal disease; education, training and advocacy programs on maternal and infant health; development of intermittent preventative treatment for malaria in pregnant women; infant and young child nutrition; healthcare system capacity building; and sustainable commercial models for products addressing the needs of women and children in developing countries.

CSOs & NGOs

Global Alliance for Improved Nutrition (GAIN) with DSM and Herbalife

The Global Alliance for Improved Nutrition (GAIN) is an alliance driven by the vision of a world without malnutrition. GAIN's commitment to Every Woman Every Child is the launch of its new Future Fortified campaign – which seeks to help millions of women and children around the world gain access to the essential nutrients they need to lead healthy and enriched lives. GAIN's Future Fortified campaign seeks to increase sustainable access to essential nutrients for 50 million pregnant and lactating women and children through innovative, market-based approaches by 2015, helping ensure women are well nourished for a safe and healthy pregnancy and children get the nutrients they need for proper physical and mental growth. In response to the emergency in the Horn of Africa, GAIN and its partners, DSM and Herbalife, have committed to jointly provide 20 million packets of micronutrient powders to reach 400,000 women and children in Ethiopia over a 6 month period to address their critical nutrient gap and support long term health and development. Further, The Goldsmith Foundation and GAIN have contributed vitamin and mineral Premix to fortify 15 million servings of food assistance to reach up to 300,000 people in partnership with the World Food Programme.

Junior Chamber International

JCI (Junior Chamber International) commits to reaching our goal of raising US $10 million by 2015 to combat malaria through the JCI Nothing But Nets campaign in partnership with the United Nations Foundation. JCI members in 115 countries are raising awareness about malaria and raising funds for the purchase and distribution of nets, as well as working on the ground in Africa to assist national distributions. Members have raised more than US $800,000 to date. At the 2011 JCI Global Partnership Summit, members reaffirmed our dedication to advancing the MDGs with a firm commitment for every JCI National Organization to run at least one MDG-focused project in the next year.
Population Services International (PSI)

Population Services International (PSI) commits on behalf of PSI and their partners to support over the next 5 years the provision of life-saving products, clinical services, and behaviour change communications that empower the world's most vulnerable populations to lead healthier lives. PSI's commitment will help the UN address key global health priorities, including malaria, child survival, HIV and reproductive health.

Governments

Australia

Australia will spend $1.6 billion over five years to 2015 under the Global Strategy for Women’s and Children’s Health to help give poor women and their babies the best chance of survival. A strong health system, available 24 hours a day, 365 days a year is needed to ensure women have healthy pregnancies, safe deliveries and access to services for their newborn babies. Working in partnership with national governments, Australia helps to strengthen health systems by improving service delivery and access to health clinics, training skilled health workers and ensuring reliable supplies of essential medicines, educating women on nutrition, prenatal and postnatal care, and providing quality emergency care if a delivery becomes complicated. Australia also supports efforts to prevent preterm births and improve the health of preterm babies through substantial core contributions to WHO, UNFPA, UNICEF; global initiatives such as the GAVI Alliance, the Global Fund to Fight AIDS, Tuberculosis and Malaria; and civil society organizations.

Cameroon

Cameroon commits to implement and expand the Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA), re-establish midwifery training to train 200 midwives a year, and pilot a performance-based financing and a voucher system in order to promote access to maternal and child care services. Cameroon further commits to increase the contraception prevalence from 14% to 38%; the proportion of HIV+ pregnant women access to antiretrovirals from 57% to 75%; and the vaccine coverage from 84% to 93%. Cameroon will increase to 60% the proportion of health facilities offering integrated services; increase to 50% the proportion of women with access to Emergency Obstetric Care (EmOC) services; offer free malaria care to children under 5; ensure free availability of mosquito-treated nets to every family; increase funding to paediatric HIV/AIDS; strengthen health information systems management and integrated disease surveillance.

Canada

As Chair of the G8, Canada made maternal, newborn and child health a priority for the G8 Muskoka Summit in June 2010. At the Muskoka Summit, Prime Minister Stephen Harper committed C$1.1 billion in new and additional funding for women’s and children’s health as part of the Muskoka Initiative. Prime Minister Harper also confirmed renewal of existing resources of C$1.75 billion, meaning Canada will provide C$2.85 billion for MNCH by 2015. Canada will focus its efforts on improving the services and care needed to ensure healthy pregnancies and
safe delivery, and placing a particular emphasis on meeting the nutritional needs of pregnant women, mothers, newborns and young children. Canada will work to increase access to the high-impact, cost-effective interventions that address the leading killers of children under the age of five. Canada will also commit an additional $540 million over three years to the Global Fund to Fight AIDS, Tuberculosis and Malaria. This is in addition to a total of $978.4 million that Canada has committed and disbursed to the Global Fund since 2002.

**France**

France announced 500 million euros for the period 2011-2015 to support the Muskoka initiative. Furthermore, France announces this week an increase by 20% of its contribution to the Global Fund to fight AIDS, TB and Malaria over the period 2011-2013 (1.080 billion euros as compared to 900 million euros for the previous triennium).

**Netherlands**

The Netherlands endorses the Global Strategy for Women's and Children's Health, as the effort to ensure that women's and children's health issues have the priority they deserve in the 21st century. In 2011 the Netherlands' Parliament approved development policies focusing on sexual and reproductive health and rights including HIV/AIDS, food security, water and security and governance issues. The Netherlands directly supports efforts to improve the health of women and children through our substantial core contributions to UNICEF, UNFPA and UNAIDS. In addition, the Netherlands has allocated EUR 29 million in 2011 to the Global Programme to enhance Reproductive Health Commodities Security and the Maternal Health Thematic Fund; EUR 55 million to the Global Fund to fight AIDS Tuberculosis and Malaria; and will maintain its ongoing support to the GAVI Alliance for the period 2011-2015.

**Norway**

Norway will increase its contribution to the Global Fund for AIDS, Tuberculosis and Malaria by 20% for the next 3 years, making a total contribution in 2011-13 of USD 225 million. This is in addition to the commitment made in June as part of the Muskoka initiative of USD $500 million for the period 2011-2020, partly subject to the annual budgetary process.

**Uganda**

Uganda commits to ensure that comprehensive Emergency Obstetric and Newborn Care (EmONC) services in hospitals increase from 70% to 100% and in health centers from 17% to 50%; and to ensure that basic EmONC services are available in all health centers; and will ensure that skilled providers are available in hard to reach/hard to serve areas. Uganda also commits to reduce the unmet need for family planning from 40% to 20%; increase focused Antenatal Care from 42% to 75%, with special emphasis on Prevention of Mother-to-Child Transmission (PMTCT) and treatment of HIV; and ensure that at least 80% of under 5 children with diarrhea, pneumonia or malaria have access to treatment; to access to oral rehydration salts and Zinc within 24 hours, to improve immunization coverage to 85%, and to introduce pneumococcal and human papilloma virus (HPV) vaccines.
United States

USAID continues to focus its MCH resources on reducing maternal and child mortality in 24 countries, which represent more than 70% of the mortality. In 23 of these countries, USAID’s family planning programs also make a substantial contribution to mortality reduction, through health timing and spacing of pregnancies as well as reduction in the lifetime risk of dying as a consequence of pregnancy and childbirth. In partnership with Feed the Future, USAID’s nutrition programs reduce under-nutrition, a key determinant of maternal and child mortality. In countries in sub-Saharan Africa where malaria’s contribution to maternal and child mortality is high, USAID’s malaria programs make substantial contributions to overall mortality reduction. USAID’s programs also build on partnership commitments launched at the June 2012 Call to Action.

Philanthropy & Funders

Bill and Melinda Gates Foundation

The Bill & Melinda Gates Foundation commits $1.5 billion over the next 5 years to improving women’s and children’s health. This includes investments to support maternal, neonatal and child health, family planning and nutrition programs in developing countries. This investment does not reflect the foundation’s grant making for vaccines, or for the prevention of pneumonia, diarrhea, malaria or HIV/AIDS—all of which are closely linked to child health.

UN Foundation

The UN Foundation commits (with its partners) $400 million over the next 5 years in support of the Global Strategy (including $215 million committed in June 2010). Through campaigns and partnerships UNF’s commitment will help the UN address key global health priorities including childhood immunizations, malaria prevention, holistic health for adolescent girls, access to reproductive health supplies and services, clean cook-stoves, and improving maternal and other health outcomes through mobile technologies.

UN, Multilateral Organizations & Partnerships

Global Fund to fight AIDS, Tuberculosis and Malaria

2010

The Global Fund, a major international channel for development assistance for health, is contributing to the improvement of maternal and child health through its support of a range of HIV, TB and malaria interventions for women and children across the continuum of care. The Global Fund is committed to intensifying its contributions to maternal, newborn and child health (MNCH) and will continue to augment its investments in order to accelerate progress toward the health related MDGs in general and MNCH in particular. To date, The Global Fund has provided direct support to MDGs 4 and 5 with contributions of at least US$ 4.4 billion, and this figure is expected to increase substantially in the 2011-2013 period subject to the outcome of the Global
The Global Fund to Fight AIDS, Tuberculosis and Malaria is fully committed to continue supporting comprehensive programs that will promote the health of women and children. AIDS, tuberculosis and malaria account for nearly 20 percent of total deaths of women and children in resource poor countries. Through its investments in AIDS, tuberculosis, malaria and Health Systems Strengthening, the Global Fund already has had a substantial impact on efforts to reduce child mortality (MDG 4) and to improve maternal health (MDG 5). The Global Fund supports a range of high-impact HIV, TB and malaria interventions for women and children across the continuum of pre-pregnancy, pregnancy, birth and child care and has substantially contributed to the scale-up of essential services for these populations. It is estimated that 32% of total Global Fund disbursements support services for women and children. In addition, another 12% of the total disbursements contribute to MDG 4-5 through health system strengthening actions.

Following its replenishment in 2010 under the leadership of Secretary General Ban Ki-moon the Global Fund expects to disburse at least USD 11 billion over the years 2011-2013 of which USD 3.5 – 4.8 billion should benefit directly the health of women and children.

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Organization of the Islamic Conference

The Organization of the Islamic Conference (OIC) has taken action to meet MDGs 4 and 5 through advocacy, and its active support of health training institutions and programmes, and health delivery in the most challenging settings. The General Secretariat and relevant OIC institutions are actively engaged through the OIC-US Cooperation Framework on Mother and Child Health projects in Bangladesh and Mali; the Statistical, Economic and Social Research and Training Centre for Islamic Countries Health Programme; and the Committee on Scientific and Technological Cooperation. OIC provides support to health professional training through the nursing diploma and bachelors degree programme housed at the International Islamic University in Uganda (IUIU) and a programme in medicine and nursing held at the International Islamic University Malaysia (IIUM). The IUIU has also established a nursing school to train Ugandan and East African country nurses. The OIC will aim, in collaboration with partners, to support the operation of field hospitals in conflict areas around the world. OIC will continue its support to the Global Fund to Fight against HIV/AIDs, Tuberculosis and Malaria, through fund raising and religious fatwa efforts.
Partners in Population and Development

We collectively resolve to ensure universal access to essential health services and proven, life-saving interventions as we work to strengthen health systems. These range from family planning and making childbirth safe, to increasing access to vaccines and treatment for HIV and AIDS, malaria, tuberculosis, pneumonia and other preventable diseases. We acknowledge, the needs of each country vary and depend on existing resources and capacities. Often the solutions are very simple, such as clean water, exclusive breastfeeding, nutrition, and education on how to prevent poor health.