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Malaria Prevention during Pregnancy Improves Health of Mothers and Babies

*Roll Back Malaria (RBM) partners launch new report and call for renewed
commitment from health & development community*

(10 July 2014; New York) A new report highlighting the impact of malaria interventions on maternal, newborn and child health was launched today alongside the annual High-Level Segment of the United Nations Economic and Social Council (ECOSOC) in New York.

The Contribution of Malaria Control to Maternal and Newborn Health is the latest in the Roll Back Malaria (RBM) Partnership's *Progress & Impact Series* to help assess progress towards targets set out in the Global Malaria Action Plan (GMAP) and the United Nations Millennium Development Goals (MDGs).

Co-authored by the Liverpool School of Tropical Medicine, the report includes contributions from various Roll Back Malaria partners and shares evidence that intermittent preventive malaria treatment during pregnancy and the use of insecticide-treated mosquito nets (ITNs) can reduce the risk of death to malaria within the first 28 days of life by 18%. Authors also highlight that these protective tools can decrease low birth weight deliveries by 21%.

"Each year, there are an estimated 125 million pregnancies in areas of high malaria transmission around the world, resulting in some 83 million live births," noted RBM's acting Executive Director, Dr. Thomas Teuscher. "Pregnant women in malaria endemic areas have a 50% higher risk of malaria infection during pregnancy than non-pregnant women. We must do everything we can to protect these precious moments and allow all women the opportunity to safely carry and deliver their child without the risk of this killer disease."

Between 2009 and 2012, an estimated 94,000 newborn deaths were averted as a result of the scale-up of these malaria interventions during pregnancy. Countries attaining high coverage and use of malaria control interventions during this period saw child mortality rates fall by as much as to 20%. Effective roll-out and use of these proven preventive measures contributes positively to the achievement of the MDGs – especially those related to maternal health improvement and reduction of under-five mortality – while also allowing progress against broader targets by contributing to a healthier and more vibrant society.

Despite these advances, malaria in pregnancy still exerts a heavy toll and contributes largely to maternal and neonatal mortality. In Africa, 10,000 women and between 75,000 and 200,000 children under the age of one are estimated to die annually as a consequence of malaria infection during pregnancy. Malaria is a major cause of anaemia in pregnant women, and can lead to maternal death at delivery due to haemorrhage. It is also responsible for stillbirth, preterm birth, and low birth weight, which increases the risk of death within the first days of the child's life.

The notable results outlined in the report have been achieved with generally low levels of intervention coverage across sub-Saharan African countries, suggesting the highly effective nature of malaria prevention efforts during pregnancy and the need for greater collaboration to ensure stronger protection among this key population. Authors note that an estimated 300,000 neonatal deaths could have been averted had an 80% coverage of these interventions been achieved between 2009 and 2012.

While launching the report in New York, RBM partners called for renewed commitment and greater collaboration between the maternal health and malaria communities to increase access to interventions and maximize the impact of efforts. With some 500 days until the 2015 deadline of the MDGs and a challenging financial landscape, continued partnership to scale-up delivery of these life-saving interventions will be critical to ensuring mothers and children are able to lead healthy lives and contribute to their communities.

The report will be available online on 10 July at:

<http://www.rollbackmalaria.org/multimedia/progress-and-impact-series.html>

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About the Roll Back Malaria Partnership (RBM)

The Roll Back Malaria Partnership was founded by UNICEF, WHO, UNDP and the World Bank in 1998 as a global framework to coordinate global action against malaria. Today, RBM is a global public-private partnership made up of more than 500 organizations across sectors that provides a neutral platform for consensus-building, developing solutions to challenges in the implementation of malaria control interventions and strategies, promotes high-level political commitment to keep malaria at the top of the global agenda, and monitors progress towards universal goals.