State of Malaria Elimination Efforts: Overview of Global and Regional Malaria Trends

D. Moonasar and D. Pandey

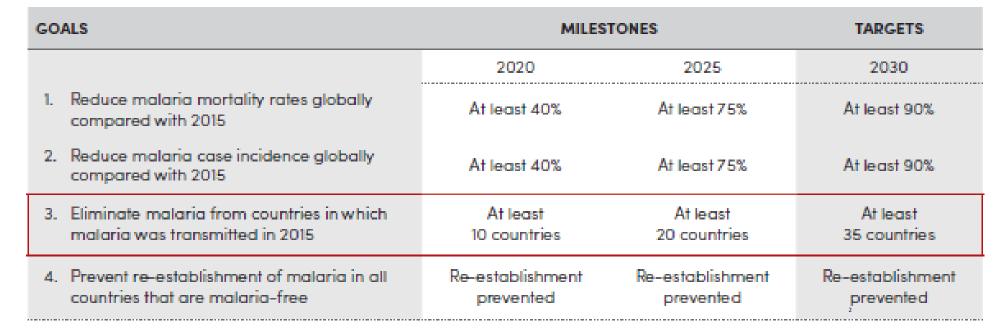
05 November 2025



Global Malaria Targets

Goals, milestones and targets of the Global technical strategy for malaria 2016–2030

Vision – A world free of majaria







GLOBAL and Regional Trends of Malaria

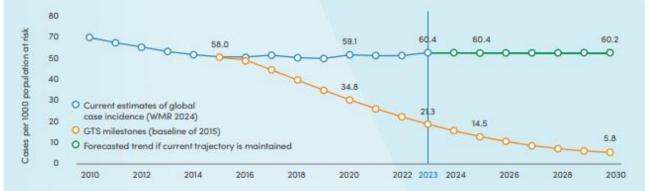
The 2023 global malaria incidence rate of **60.4 cases per 1000** population at risk is nearly **3 times** higher than the **21.3 cases per 1000** needed to reach the target.

In addition, there were **13.7 malaria deaths** per **100 000 population** at risk in 2023, more than twice the target of **5.5 deaths** per **100 000**

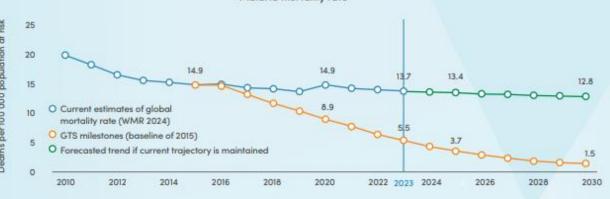


Comparison of global progress considering two scenarios: current trajectory maintained (green) and targets of the global strategy achieved (orange)

Malaria case incidence



Malaria mortality rate

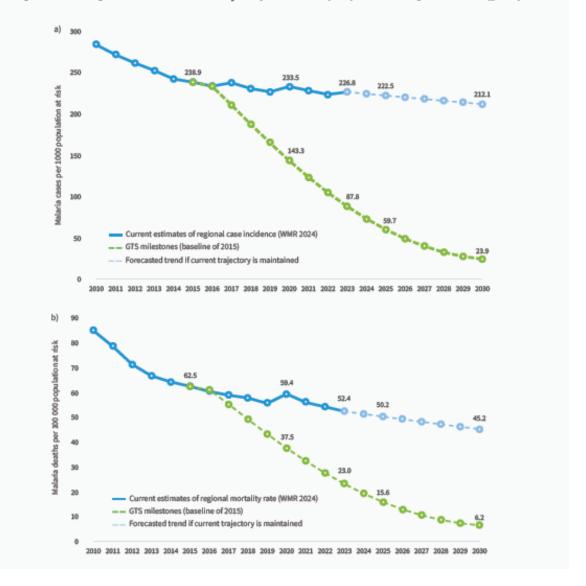


Malaria Trends on the African Continent

- Between 2015 and 2023, the African Region as a whole achieved a reduction in case incidence and mortality rate of 5% and 16%, respectively. However, rates for both indicators are more than double the target levels set by the global strategy (Fig. 3.4 a & b).
- Of the remaining malaria-endemic countries in the Region, only Rwanda is on track to meet the GTS 2025 target of a reduction in malaria case incidence of at least 75% (compared to a 2015 baseline).
- Sao Tome and Principe is the only endemic country to meet the GTS
 2025 mortality reduction target, with zero estimated malaria deaths in 2023.



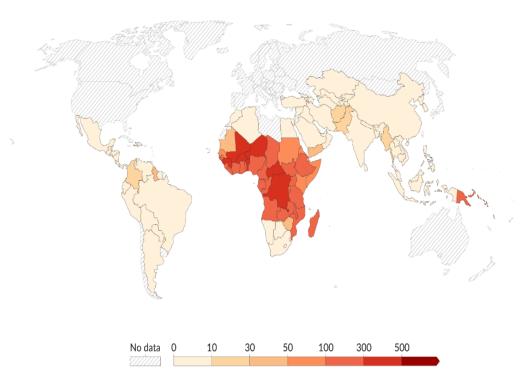
Fig. 3.4. Comparison of progress in malaria a) case incidence and b) mortality rate in the WHO African Region considering two scenarios: current trajectory maintained (blue) and GTS targets achieved (green)



New cases of malaria per 1,000 people at risk, 2023



Malaria¹ is a life-threatening disease caused by parasites that are transmitted by certain types of mosquitoes.



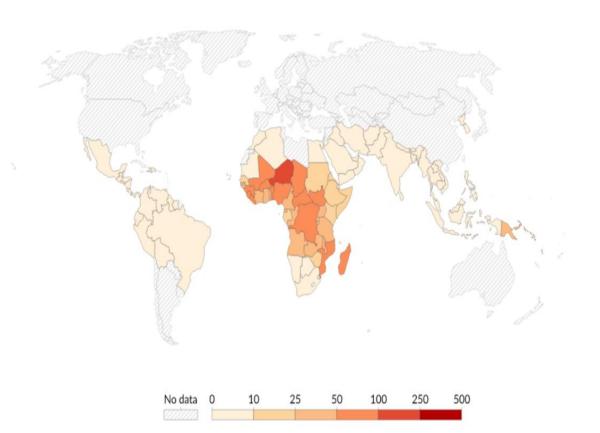
Data source: World Health Organization, via World Bank (2025)

OurWorldinData.org/malaria | CC BY

Death rate from malaria, 2023



The number of deaths from malaria per 100,000 people.



Data source: World Health Organization - Global Health Observatory (2025)

OurWorldinData.org/malaria | CC BY

5

^{1.} Malaria Malaria is a life-threatening disease caused by parasites that are transmitted by female Anopheles mosquitoes. There are five parasite species that cause malaria in humans. Two of these species – P. falciparum and P. vivax – pose the greatest threat.

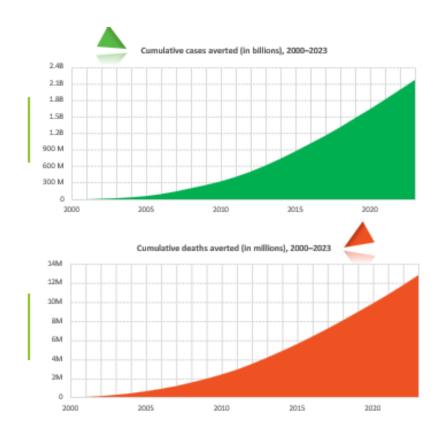
The first symptoms – fever, headache and chills – usually appear 10 to 15 days after the infective mosquito bite and may be mild and difficult to recognize as malaria. Left untreated, P. falciparum malaria can progress to severe illness and death within 24 hours.

Read more on our page on malaria.

Malaria situation worldwide | Global cases and deaths averted, 2000-2023

Malaria responses worldwide are preventing illness and saving lives

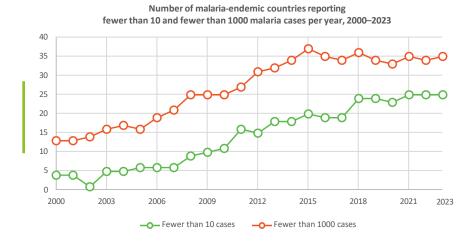
- Globally, an estimated 2.2B cases and
 12.7M deaths were averted between 2000 and
 2023.
- In 2023 alone, more than 177 million cases and 1 million deaths were averted globally.
- Most cases (80%) and deaths (94%) averted were in the WHO African Region.
- Alongside targeted malaria control interventions, other factors have also likely contributed to lowering malaria transmission and disease (e.g. improvements in socio-economic status and urbanization).



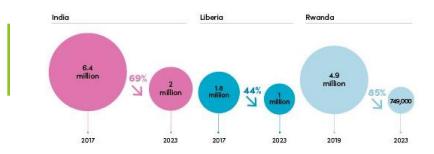
Malaria situation worldwide | Country-level progress

Progress has been reported across many countries

- 25 countries reported fewer than 10 cases in 2023 vs. 4 countries in 2000.
- WHO has certified 44 countries and 1 territory as malaria-free – including, most recently, Egypt in October 2024.
- Some higher burden countries are also making strong gains:
 - Rwanda: 85% reduction in cases since 2019
 → from 4.9M to 749K
 - Liberia: 44% reduction in cases since 2017 → 1.8M to 1M
 - India: 69% reduction in cases since 2017 → 6.4M to 2M



Reductions in malaria cases in 3 higher burden countries



Source: World Malaria Report 2024

Malaria Incidence in the SADC Region in 2024

Table 1: Cases and incidence attributed to malaria in 2024 by country.

Member State	Cases	% Contribution	Incidence	Rank(Incidence)
DRC	29,529,234	37.39%	229.66	5
Angola	11,962,466	15.15%	340.61	4
Mozambique	11,622,449	14.71%	349.61	3
Zambia	9,553,384	12.10%	454.24	2
Malawi	9,429,749	11.94%	465.20	1
Madagascar	3,375,785	4.27%	all 109.57	6
Tanzania	3,358,011	4.25%	old 52.72	8
Zimbabwe	57,090	0.07%	all 3.65	11
Comoros	55,277	0.07%	old 62.14	7
Tanzania (Zanzibar)	21,290	0.03%	all 10.46	9
Namibia	16,113	0.02%	old 5.34	10
South Africa	4,639	0.01%	0.08	14
eSwatini	364	0.00%	oli 0.30	12
Botswana	290	0.00%	0.12	13
Mauritius		0.00%	0.00	15
Seychelles		0.00%	0.00	15
SADC	78,986,141		187.96	

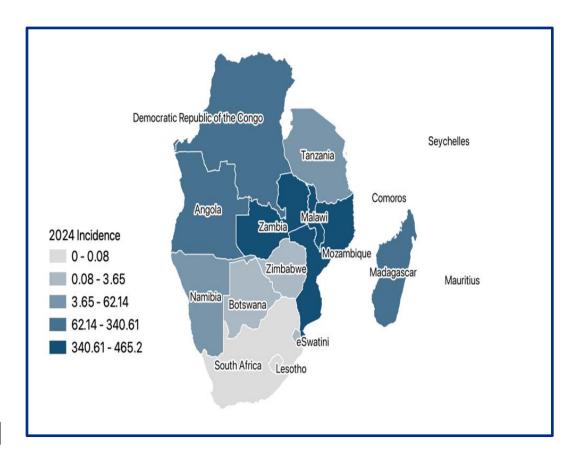
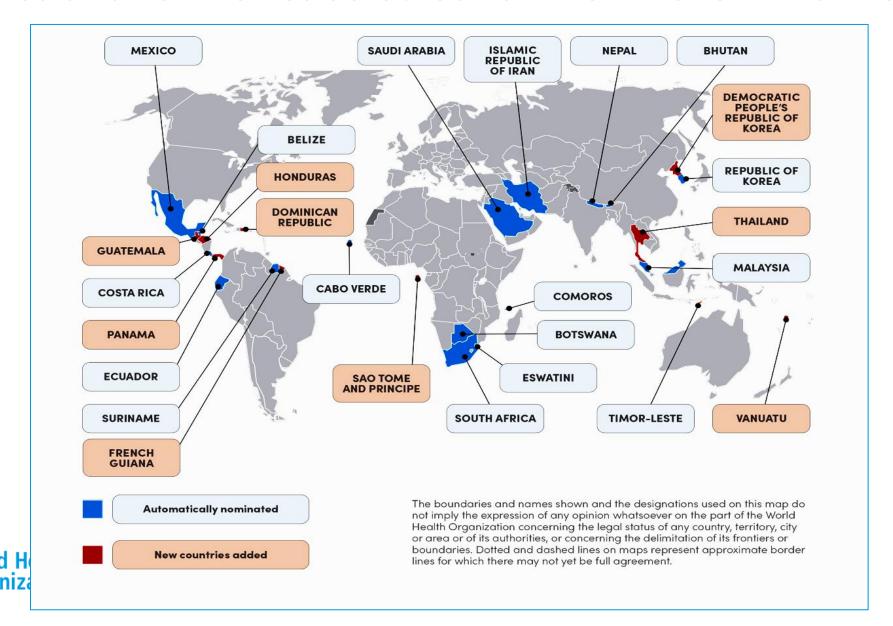


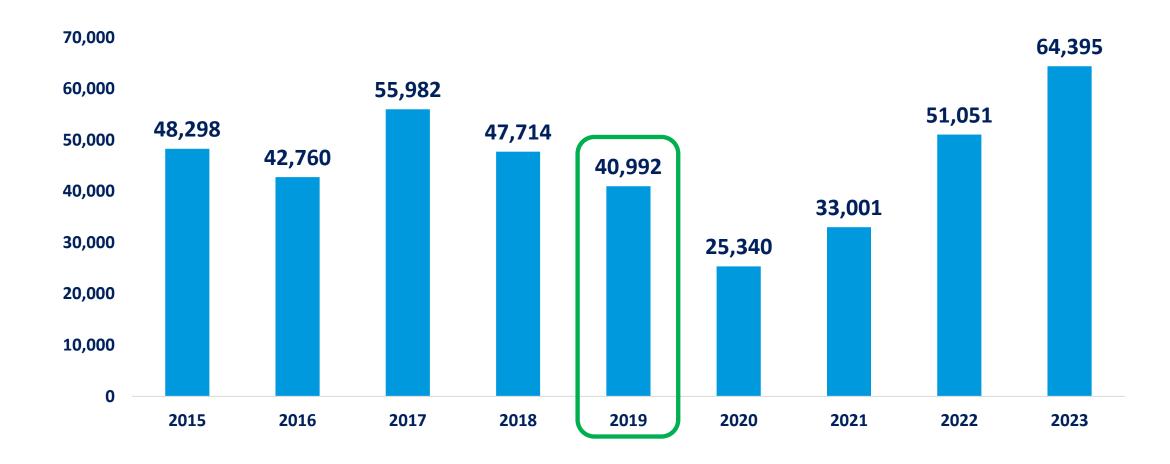
Table 2: Deaths and mortality attributed to malaria by country 2024

Member State	Deaths	% Contribution	Mortality Rate	Rank(Mortality)
DRC	21,260	54.76%	16.54	2
Angola	11,447	29.48%	all 32.6	1
Malawi	2,252	5.80%	• 8 11.11	3
Tanzania	1,518	3.91%	oll 2.39	5
Zambia	1,219	3.14%	oll 5.8	4
Mozambique	358	0.92%	old 1.08	8
Madagascar	564	1.45%	on 1.84	6
Zimbabwe	107	0.276%	old 0.69	10
South Africa	28	0.072%	on 0.05	14
Namibia	50	0.129%	old 1.66	7
Botswana	2	0.005%	0.09	12
eSwatini	1	0.003%	0.09	12
Tanzania (Zanzibar)	18	0.046%	old 0.89	9
Comoros	3	0.01%	oll 0.34	11
Mauritius	-	0.00%	on))	15
Seychelles	-	0.00%	on))	15
SADC	38,827.00		9.24	

Countries and territories selected for the E-2025 initiative

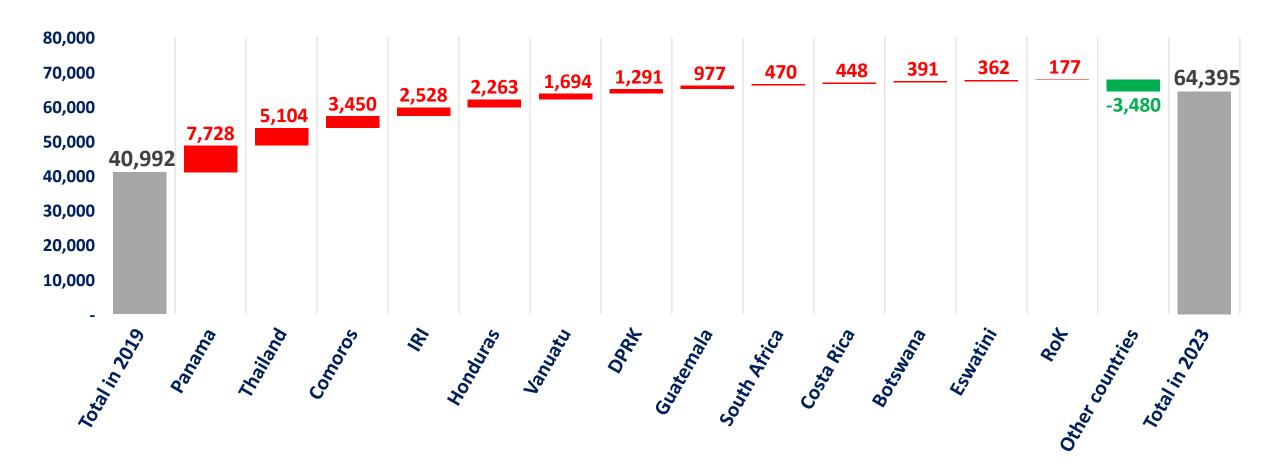


Total number of cases reported in E-2025 initiative countries





Changes in reported cases in E-2025 initiative countries by countries





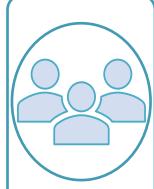
Certification of malaria elimination

11 COUNTRIES	15 COUNTRIES and 1 TERRITORY	0	7 COUNTRIES	12 COUNTRIES
1955–1969	1970–1987	1988–2006	2007–2017	2018–2025
 Bulgaria Cyprus Dominica Grenada Hungary Jamaica Poland Romania Saint Lucia Spain Trinidad and Tobago 	 Australia Bosnia-Herzegovina Brunei Darussalam Croatia Cuba Italy La Réunion (France) Mauritius Montenegro Netherlands North Macedonia, Portugal Serbia Singapore Slovenia United States of America 		 Armenia Kyrgyzstan Maldives Morocco Sri Lanka Turkmenistan United Arab Emirates 	 Algeria Argentina Azerbaijan Belize Cabo Verde China Egypt El Salvador Georgia Paraguay Tajikistan Uzbekistan Suriname Timor-Leste



- 47 countries and 1 territory have been certified malaria-free
- 61 countries listed in supplementary list

Key success factors, The enabling environment towards attaining of malaria elimination in Cabo Verde



Political commitment

High levels of political commitment to malaria elimination evidenced by high-level proportional domestic financing commitments.



In-country Institutional capacity deployed

The National
Public Health
Institute providing
critical local
expertise and
epidemiologic
intelligence.



Decentralization of malaria elimination efforts

Each **health**

delegation
responsible and
capacitated for
malaria
elimination within
its jurisdiction.
driving the
response with
central levels
oversight and

support.



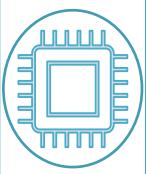
Strong integration into PHC

Health delegation supported with quality assured laboratory and health services.
Good tele-medicine capacities that links experts at periphery, centrally and diaspora with patients, enhanced access to care.



Multi-Sectoral approach

Coordinated
response for Vector
Borne Diseases led
by municipal
authorities and
oversight functions
of an intersectoral
committees with
participation of
tourism
environment,
agriculture, water
resources, finance



Adopting technology solutions

Detailed GIS
Mapping of vector
breeding sites and
routine monitoring
enabled by
analytics
technologies
guiding adaptations
to timely
surveillance and
vector control
strategies for
malaria elimination



Next Steps: Advancing Malaria Elimination Efforts.

1. Enhance Regional Collaboration:

- Strengthen cross-border partnerships to address shared challenges and leverage regional expertise.
- Promote coordinated responses through regional initiatives like the Elimination 8 (E8), MOSASWA, and Great Lakes Malaria Initiative, SAHEL initiative etc.

2. Optimize Surveillance and Response Strategies in low transmission settings:

- Implement robust surveillance systems with real-time data sharing to improve early detection and response in low malaria transmission settings.
- Expand the use of digital tools and predictive modelling (e.g. potential impact of climate change) for more targeted interventions and resource allocation.

3. Address Emerging Challenges:

- Develop strategies to combat vector resistance to insecticides and drug resistance in malaria parasites.
- Enhance monitoring of HRP2 gene deletion and adapt diagnostic approaches accordingly.
- Incorporate measures to mitigate the impact of climate change on malaria transmission patterns.

4. Capacity building approach for Scaling up sub national capacity on bottle neck identification and response :

- □ Going beyond focus on "what to do" to "how to do" e.g. foci investigation and response
- Leveraging capacities of local institutions to support malaria elimination programs eg National Health Institutes,
 Academia etc
- Cross learning and use of sub national score cards

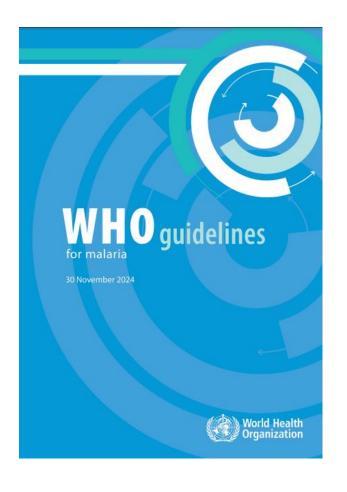


Thank you





Main malaria prevention and treatment strategies



- WHO Guidelines for Malaria (2021)
 - These consolidated guidelines replaced 2 WHO guidelines the Guidelines for the treatment of malaria, 3rd edition and the Guidelines for malaria vector control.
 - The consolidated WHO Guidelines for malaria include
 - Prevention (vector control, preventive chemotherapies and vaccines)
 - Case management
 - Elimination and prevention of re-introduction
 - Surveillance*
 - As new evidence becomes available, the recommendations will be reviewed and updated, where appropriate, using WHO's transparent and rigorous guideline development process.
- Current 9th update published on 13 August 2025, to be updated on a continuing basis (moving towards living guidelines)
- Available online: https://www.who.int/publications/i/item/guidelines-for-malaria

^{*} Not developed following the WHO guidelines development process

