What is APLMA?

The Asia Pacific Leaders Malaria Alliance (APLMA) is an affiliation of Asian and Pacific Heads of Government, formed to accelerate progress against malaria and to eliminate the disease in the region by 2030. It is not an organization, a program or a funding body, and does not involve formal country or organizational membership. Participation from other nations is welcome with, for example, the Governments of Papua New Guinea and Vanuatu having expressed support.

APLMA was established by the East Asia Summit (EAS) during its 2013 meeting in Brunei in response to Leaders’ concerns about the rising risks of malaria resurgence, in particular due to increasing drug-resistant malaria in the Greater Mekong sub-region.

By virtue of its Heads of Government status, APLMA has a policy-making capacity and can establish priorities for action. It works with and through national and international authorities. Firstly, to ensure leaders are informed of the latest scientific evidence, and secondly to assist in translating the collective will of the region’s leaders into coordinated action by relevant authorities.

APLMA is served by a small secretariat, currently based at the Asian Development Bank. It works closely with two relevant World Health Organization (WHO) Regional Offices, the Asian Development Bank and with the Asia Pacific Malaria Elimination Network (APMEN).

1 The East Asia Summit is an annual meeting of leaders of the 10 members of the Association of South East Asian Nations together with those of the Australia, China, India, Japan, the Republic of Korea, New Zealand and the United States.
APLMA has supported policy action through two expert task forces focused on:

1. Improving access to quality malaria medicines and other technologies (such as rapid diagnostic tests, long-lasting bed nets and insecticides); and
2. Regional malaria financing.

Task force recommendations\(^2\) culminated in the joint proposal to the 2014 EAS that leaders adopt the goal of an Asia Pacific free of malaria by 2030. At the EAS in November 2014, the 18 Leaders, representing 55% of the world’s population, adopted the goal. At their request, a Leaders’ Elimination Roadmap is under development, identifying priority actions to accelerate progress towards the regional malaria elimination goal. The Roadmap will be presented to leaders at the 10th EAS in Malaysia in November 2015.

APLMA also anticipates the nomination of a regional Leaders’ Envoy to lead policy development, including through a group of regional and international malaria champions.

Why malaria? A regional public health emergency

While malaria was once one of the world’s biggest killers, its burden is now much reduced. Yet still today over two billion people in the Asia Pacific region are estimated to be at risk of infection.

Increased trade integration and dynamic population movements are creating new and significant Asia Pacific public health challenges. Malaria, a mosquito-borne infection that may cause lethal complications, is arguably the greatest such challenge. The disease is endemic in 22 countries in the region, causing an estimated 32 million cases and over 47,000 deaths each year. In addition, endemic countries have a massive chronic disease burden as millions of people carry the parasite but display no malaria symptoms, contributing to a perpetual cycle of disease transmission. Primarily a disease of poverty, malaria can be prevented and treated through cost-effective interventions, but most countries do not have adequate funding or health infrastructure to cover all populations at risk.

The campaign against malaria is an international health success story. The Asia Pacific region has made unprecedented progress toward achieving the World Health Assembly Goal of a 75% reduction in the number of cases and deaths from 2000 to 2015.

\(^2\) See www.aplma.org.
Following this success, it may seem timely to shift resources to address other issues. Unfortunately, that simple logic is mistaken. Completing the ‘final mile’ against malaria is critical to protecting what has been achieved to date.

A 2012 study documented 75 instances of malaria resurgence from the past eight decades – the majority linked to premature reductions in funding and other resources. Recent progress is the result of concerted effort and intensified resources. Less of either risks rapid resurgence of the disease. That risk is high now because some of our best tools – malaria medicines and insecticides – are losing their effectiveness. A growth in resistant strains of malaria could see the number of malaria cases – and the number of deaths – increase significantly.

Experts agree the best strategy involves addressing malaria broadly, by strengthening health systems so they are better able to manage the disease – and any other health threats. APLMA targets malaria, but is not promoting a malaria-exclusive approach. Increased efforts against malaria must be configured to increase capacity to tackle other diseases and build regional health security.

Why APLMA?

With all of the existing organizations working on malaria there had to be a very clear argument for establishing another body, even a small one that serves leaders directly. Asia Pacific Leaders established APLMA to bolster existing efforts to defeat malaria, and is unique in two respects:

1. It carries the authority of Leaders and therefore can help resolve problems that are outside the scope of health ministries and partner organizations;

2. It spans the Asia Pacific region and is able to identify deficiencies and opportunities in regional public goods, and advise leaders accordingly. APLMA offers the opportunity for high-level engagement on the essential building blocks for malaria elimination, including around research, policy and program coordination, regulatory collaboration, finance and governance.

APLMA recognizes and complements country efforts led by national governments, supported by WHO. It also acknowledges the large number of existing organizations working to reduce and eliminate malaria. Part of its function is to enhance coordination and collaboration.

APLMA works on a manageable number of critical priorities that require leaders-level attention and regional collaboration. It works to galvanize leadership at the highest levels of government to:

a) bring difficult policy questions to leaders, for their attention and decision;

b) illuminate and help fill important knowledge and resource gaps at the regional level, and;

c) mobilize the authority and influence of leaders to set clear goals and align everyone in the region to achieve them.

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How APLMA works

The Prime Ministers of Australia and Viet Nam serve as the Co-Chairs of APLMA. They take a leading role in working with the secretariat to progress policy development and advocacy.

Taking direction from EAS and malaria-endemic Pacific leaders, the secretariat:

- collaborates with partner organizations to set the APLMA agenda and to prioritize issues for leaders’ attention;
- conducts and commissions research to build the evidence base for effective interventions and to develop policy options;
- convenes expert groups to scrutinize, interpret and determine the implications of evidence;
- prepares reports and recommendations for leaders’ consideration;
- advocates for the policy priorities established by member states of the region.

The initiative aims to support the region in realizing the goal of an Asia Pacific free of malaria by 2030.