

Malaria

Transmitted by mosquitoes, malaria is a disease caused by parasites of the *Plasmodium* group, two of which -P. *falciparum* and P. vivax - pose the greatest threat to humans. Malaria's symptoms include flu-like symptoms (chills, fever), vomiting, diarrhea, and jaundice, and if left untreated, malaria can lead to acute illness and death.

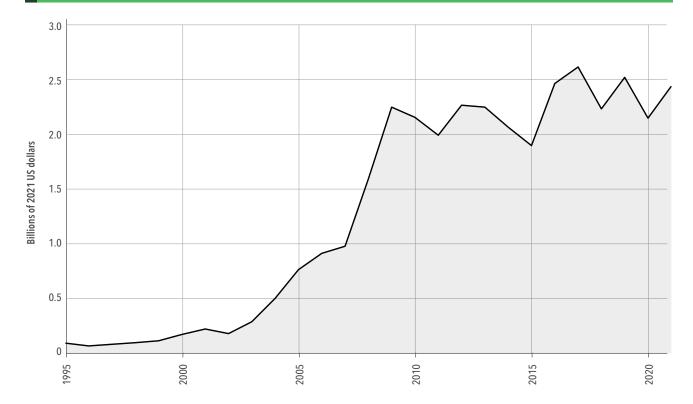
According to the Global Burden of Disease 2019 study, in 2019 most global malaria burden remained in sub-Saharan Africa, with the highest age-standardized rates of disability-adjusted life years (DALYS) in Sierra Leone, Côte d'Ivoire, and Burkina Faso. The most malaria deaths were in Nigeria (nearly 200,000) and the Democratic Republic of the Congo (over 55,000). However, these numbers obscure the tremendous progress in the fight against malaria: in 1990, there were almost 850,000 deaths from malaria globally, but by

2019, that number had dropped to roughly 650,000. And a malaria vaccine is expected to be distributed widely in 2023.

There was a total of \$2.4 billion in DAH for malaria in 2021. In comparison, a total of \$4.3 billion (comprising government spending, prepaid private spending, out-of-pocket spending, and DAH) was spent on malaria across malaria-endemic countries in 2017, the latest year for which we estimate total spending by health focus area; 38.8% of total spending on malaria was DAH.

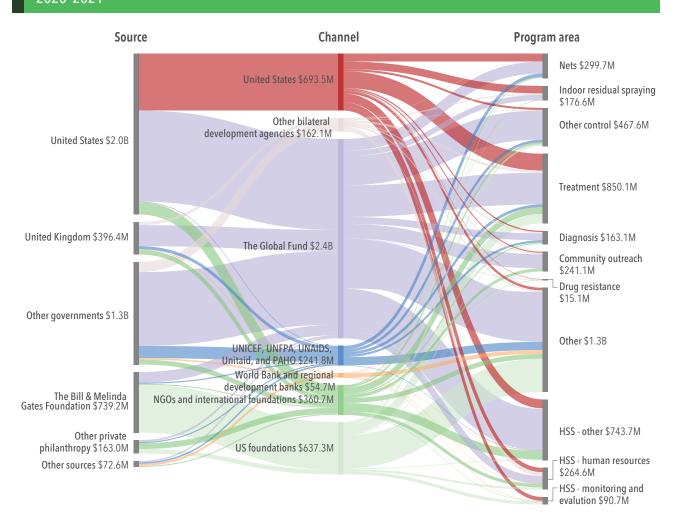
The malaria profile illustrates the sources, disbursement channels, and program areas to which malaria DAH was allocated. Figure A gives a high-level view of DAH for malaria between 1995 and 2021, while Figure B illustrates how DAH for malaria flowed from source to channel to program area in 2020–2021.

FIGURE A Development assistance for health for malaria, 1995–2021*



*2021 estimates are preliminary.

FIGURE B Flows of development assistance for health for malaria from source to channel to program area, 2020-2021



"Other sources" captures development assistance for health for which we have source information but which is not identified as originating within any of the sources listed.

Health assistance for which we have no source information is designated as "Unidentified."

"Other governments" include Afghanistan, Angola, Argentina, Australia, Austria, Azerbaijan, Bangladesh, Belgium, Bhutan, Brazil, Brunei, Bulgaria, Cameroon, Canada, Central African Republic, Chad, China, Colombia, Côte d'Ivoire, Croatia, Czechia, Democratic Republic of the Congo, Denmark, Egypt, Estonia, Ethiopia, Finland, France, Gabon, Germany, Greece, Guinea, Hungary, Iceland, India, Indonesia, Iran, Iraq, Ireland, Italy, Jamaica, Japan, Jordan, Kenya, Kuwait, Latvia, Lebanon, Libya, Lithuania, Luxembourg, Madagascar, Malaysia, Malta, Monaco, Myanmar, New Zealand, Nigeria, Norway, Oman, Pakistan, Palestine, Peru, Poland, Portugal, Qatar, Romania, Russia, São Tomé and Príncipe, Saudi Arabia, Serbia, Singapore, Slovakia, Slovenia, South Africa, South Korea, South Sudan, Spain, Sudan, Sweden, Switzerland, Syria, Taiwan (province of China), Thailand, the Netherlands, Togo, Turkey, Uganda, Ukraine, United Arab Emirates, Yemen, and Zimbabwe.

"Other bilateral development agencies" include Austria, Belgium, Canada, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Japan, South Korea, Luxembourg, the Netherlands, New Zealand, Norway, Spain, Sweden, Switzerland, the United Arab Emirates, the United Kingdom, the European Commission, and EEA.

"Regional development banks" include the African Development Bank, the Asian Development Bank, and the Inter-American Development Bank.

"Other" captures development assistance for health for which we have program area information but which is not identified as being allocated to any of the program areas listed.

CEPI = Coalition for Epidemic Preparedness Innovations $NGOS = Non-governmental\ organizations$ PAHO = Pan American Health Organization

UNAIDS = Joint United Nations Programme on HIV/AIDS

UNFPA = United Nations Population Fund UNICEF = United Nations Children's Fund

wно = World Health Organization