

Written evidence submitted by the Malaria No More UK (INR0025)

1. Introduction

Malaria No More UK welcomes the Foreign Affairs Committee's inquiry into the role of the FCO and the Integrated Review.

The UK is a long-standing and generous donor to the cause of eradicating malaria. It has currently committed to spend £500m per annum on malaria reduction until March 2021. The UK government has stated that it is committed to "leading global efforts to tackle Ebola and malaria".ⁱ

In this submission, we set out the evidence for why malaria should be a foreign policy consideration in the integrated review and why the FCO, working with other government departments, is important to achieving maximal outcomes for those suffering from the disease.

2. Malaria's existence threatens UK citizens and is a drain on partners in Africa and the Commonwealth

The impact on our citizens

Malaria has a negative impact on the health of citizens in the UK. In 2015, nearly 1600 cases of malaria were treated in the UK, either from foreign nationals travelling to the UK or our own citizens returning from overseas.ⁱⁱ

It creates expensive barriers to safe travel around the world. Preventative treatments for malaria are a cost on the traveller and for government agencies, companies and other organisations who require their staff to travel. The Ministry of Defence alone spent £1.3m on anti-malaria drugs in 2016/17ⁱⁱⁱ.

Estimates show that the combined costs of treatment, productivity loss and time incurred by GPs to the UK taxpayer, as well as self-paying individuals was £74.8m in 2017.^{iv}

The impact on our allies

Malaria is prevalent in over half the countries worldwide and creates a huge burden on the health systems of many of our trading partners and allies. In 2018, it was the 6th largest killer of children under 5, the 3rd for those aged 5-14^v. Over 400,000 people died from malaria in 2018, over 90% of these in Sub-Saharan Africa and more than 50% in the Commonwealth. It is estimated there were more than 228 million cases of malaria in 2018.^{vi}

Quantifying the precise economic impact for a single disease such as malaria is challenging but studies have shown that the cost can have a dramatic impact on the prosperity of our partners' economies.

Malaria has been found to have a strong economic drag on countries with a high prevalence, reducing their growth rate by 0.25%-1.3% per year.^{vii} One of the most important reasons for this is the cost of the disease on productivity. As highlighted by DFID's Economic

Development Strategy, a critical prerequisite for growth is a healthy, educated and productive workforce for the future.

The continued existence of malaria creates a drag anchor for global trade, travel and our relations with countries that are malaria endemic. As the FCO considers ways in which we can expand trade with countries in sub-Saharan Africa in particular, further consideration must be given to our role in helping allies deal with this disease.

3. UK trade is held back by malaria, and overcoming it has strong business support

For British businesses operating in endemic countries, malaria has a disruptive influence, affecting operations and reducing profits repatriated to the UK, and in turn reducing UK growth and tax receipts. In primary sectors such as mining and agriculture, the cost of preventative clothing, equipment and medication increases operating costs, while sickness absence attributable to malaria disrupts operations and supply chains.

The total value of trade between the UK and countries affected by malaria was £57bn in 2015, and with the 20 countries with the highest incidence of malaria the value of trade was £15.8bn. The largest values of trade were with India £10bn; Nigeria £2.5bn; Angola £1bn; Kenya £600mn; Ghana £500mn.^{viii}

Looking at the 20 largest malaria endemic countries between 2000 and 2015, a total of £96bn-£524bn world economic output could have been lost as a result of malaria. This is equivalent to 2015 GDP being £11bn-64bn lower than it might otherwise have been were these countries malaria free.

British business leaders are strongly in support of UK efforts to reduce malaria and see a clear link between UK policy on the disease and developing revenues outside of the UK. 54% agreed that British aid for malaria makes it easier to negotiate good trade deals; 70% agreed that it is right that Britain plays a part in leading the fight to end malaria within a generation. More than a quarter (26%) also stated they would like their own business to play a leading role in ending malaria.^{ix}

4. The Commonwealth sits at the heart of future trading relationships and is committed to halving malaria

As the UK looks to build new trade alliances globally, our relationships with multi-national groupings will be of greater importance than ever before. The 2018 CHOGM in London and the UK-Africa Investment summit in 2020 showed how clearly our interests overlap with those of the Commonwealth.

The Commonwealth is disproportionately impacted by malaria. 1/3rd of the world's population lives in a Commonwealth country and yet it sees more than 50% of the deaths and cases.

Countries in the Commonwealth are natural partners and allies to the UK, with our shared heritage creating commonalities, including language and legal structures. As a result, it has been estimated that it costs British companies 20% less to do business with them.^x

The 2018 CHOGM saw all Commonwealth countries pledge to halve malaria by 2023. Guided by the FCO, the UK was pivotal in reaching this commitment. As the largest funder of malaria treatment in the Commonwealth, the UK has a special role to play.

As the UK seeks to expand both its role within the Commonwealth and the significance of trading relations with partners in the grouping, overcoming malaria is a clear example of how our national scientific expertise and wider resources are assets to deliver the shared prosperity of all.

The FCO's network of High Commissions should be central to this Commonwealth commitment. First, in building up the visibility of our nation's commitment to preventing malaria. Second, in championing the role of British science and technology which are making ground-breaking strides towards eradication efforts. And third, in supporting conversations in our partner countries on how to increase domestic resource allocation to better fight this disease.

5. The FCO has a clear role in championing UK science and technology sectors which have much to add, and gain from, overcoming malaria

Innovation and research are vital forces of the UK economy. They are equally fundamental to the fight against malaria. The UK's world leading life sciences sector is at the cutting edge of malaria treatments and technology whether this is the Liverpool based International Vector Control Consortium's work on the next generation of long lasting insecticide treated mosquito nets, or GSK's involvement in the ground-breaking malaria vaccine trail in sub-Saharan Africa.

The ability of the UK to leverage our life sciences sector to drive progress on malaria will be crucial to eliminating the disease in trading partners affected by the disease. As such it is an area of significant value, and competitive advantage for the UK in our engagement with these partners.

The investments and research capacity driven by malaria also benefit the UK. Life sciences is a key sector for the UK as it hosts c. 5000 companies with c. £51bn combined turnover and employs c. 170k people. ^{xi} To achieve continued growth in this sector, the UK must build and exploit sources of competitive advantage. The FCO can play a role by nurturing and championing the work of UK life science companies and organisations in their efforts overseas in supporting malaria eradication.

The FCO should use the upcoming review to consider how they can further a cross government foreign policy to leverage the UK's historic leadership in malaria research and development. Doing so offers a strong opportunity to create new global engagement with UK life science capability.

6. The FCO should prioritise strengthening global and national health systems within our foreign policy

Whilst the Integrated Review was conceived before the COVID-19 pandemic crisis, the events of recent months have given the whole world a new understanding of the

importance of health security. The existence of the virus anywhere in the world is a threat to UK citizens at home. The emergence of COVID-19 has given new priority to foreign policy cooperation designed to defeat infectious disease threats.

Ensuring that countries can track, test and treat for the COVID-19 virus will be critical to restoring normal functioning to the UK economy, society and our foreign relations. Supporting the development of more effective health systems in low- and middle-income countries will be vital for this. Leveraging the investment in malaria (and other infectious diseases) can play a key role here.

Addressing systemic challenges to malaria eradication can allow governments and partners to pioneer the development of more efficient, integrated approaches to health care which will not only increase access to malaria interventions, but also contribute to the development of stronger, more resilient health systems which helps drive greater global health security.

Liberia, for instance, is already leveraging its National Community Health Assistant Program – whose core responsibilities include integrated community case management of childhood illnesses, including diarrhoea, acute respiratory infection and malaria - to strengthen covid-19 preparedness and response.^{xii}

7. A single UK government strategy, convened through a united foreign policy statement, can help end malaria and cement our relationships with dozens of countries worldwide.

The Integrated Review is a clear opportunity to further cross-departmental approaches to our foreign and development policy priorities. We are calling on the FCO to fully consider the UK government's commitment to leading the fight against malaria in their engagement with the review.

The fight to eradicate malaria, which experts agree can be achieved within a generation^{xiii}, exemplifies how an integrated foreign policy drawing on the strengths of our trade, development, health and science expertise can position the UK as a preeminent partner to countries in the Commonwealth and beyond.

A single government agenda on defeating malaria could become a pillar of our foreign engagement, with the FCO playing an active role. It would include:

- Maintaining our bilateral and multilateral ODA support on malaria, particularly for the transparent and effective Global Fund to Fight AIDS, Tuberculosis and Malaria.
- Ensuring our trade policy is malaria smart, so new deals incentivise our partners to ensure investment in malaria reduction strategies that will benefit the relevant sectors e.g. investment in improved conditions for mining communities, adequate standards of malaria prevention in agricultural systems.
- Ensuring the department of health and social care's (DHSC) engagements at the World Health Assembly and the Commonwealth Health Ministers Meeting drive accountability for the progress targets committed to. Using the DHSC's influence to back efforts increasing the prevalence of UHC in malaria endemic countries and

supporting efforts of the international community to improve regulatory environments that stamp out the threat of fake anti-malarials.

- Ensuring the FCO's network of Embassies and High Commissions showcase and further the UK's world leading impact on malaria eradication. Regularly convening stakeholders acting in malaria endemic countries to drive renewed progress towards existing targets, research and innovation as essential building blocks to eradication success.
- Using our role in the Commonwealth to support initiatives that encourage regional collaboration between countries and partners to accelerate progress on malaria eradication.

About Malaria No More UK

Founded in 2009, Malaria No More UK is one of the leading UK organisations working to eradicate malaria worldwide. We work to unite policymakers, private sector actors and public audiences in this fight.

ⁱ House of Commons debate on Official Development Assistance Target, 13 January 2020, Column 862 <https://hansard.parliament.uk/Commons/2020-01-13/debates/3A62CF52-5546-489F-A8A8-433822F1B20D/OfficialDevelopmentAssistanceTarget?highlight=leading%20global%20efforts%20tackle%20ebla%20malaria#contribution-21103CE2-55BB-4D1E-A6C6-DB03803061B6>

ⁱⁱ Public Health England, Imported Malaria in the UK 2015: Statistics

ⁱⁱⁱ, EY and Malaria No More UK, (2016), Global Britain and Ending Malaria: The Bottom Line, pp. 17

^{iv} EY and Malaria No More UK, (2016), Global Britain and Ending Malaria: The Bottom Line, pp. 17

^v <https://ourworldindata.org/causes-of-death>, Derived from Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2017 (GBD 2017) Results. Seattle, United States: Institute for Health Metrics and Evaluation (IHME), 2018.

^{vi} WHO, World Malaria Report (2019).

^{vii} Gallup, John Luke, and Jeffrey D. Sachs (2001), The economic burden of malaria

^{viii} EY and Malaria No More UK, (2016), Global Britain and Ending Malaria: The Bottom Line, pp. 11

^{ix} YouGov, Malaria No More report, 2017

^x House of Commons (2012), The role and future of the Commonwealth: Fourth Report of Session 2012-13

^{xi} Association of the British Pharmaceutical Industry (2015), Bridging the skills gap in the biopharmaceutical industry: Maintaining the UK's leading position in life sciences

^{xii} S Olasford Wiah, Marion Subah, Brittney Varpilah, Ami Waters, John Ly, Madeleine Ballard, Matt Price, and Raj Panjabi (2020), Prevent, Detect, Respond, How Community Health Workers can help in the fight against COVID-19, <https://blogs.bmj.com/bmj/2020/03/27/prevent-detect-respond-how-community-health-workers-can-help-fight-covid-19/>

^{xiii} Richard G A Feachem et al (2019), "Malaria eradication within a generation: ambitious, achievable, and necessary", The Lancet, Vol 394

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