

# **ALMA Awards for Excellence**

**January 2014**  
**Addis Ababa, Ethiopia**

Seven African countries are the recipients of the 2014 African Leaders Malaria Alliance (ALMA) Award for Excellence for their exemplary leadership in maintaining an average of 95% coverage year round, in the implementation of Long-Lasting Insecticidal Nets and/or Indoor Residual Spraying interventions against malaria. The awardees were chosen by an independent selection committee representing the World Health Organization (WHO), Roll Back Malaria (RBM), the private sector, civil society and academia. The selection is based upon the data collected by RBM Partners and reflected in the ALMA Scorecard for Accountability and Action and country quarterly reports.

Recipients of the **2014 ALMA Awards for Excellence in Implementation of Vector Control** are: 1) Cape Verde, 2) Madagascar, 3) Malawi, 4) Namibia, 5) Rwanda, 6) São Tomé and Príncipe, and 7) Swaziland.

Congratulations to the recipients of the 2014 ALMA Awards for Excellence for their significant contribution in the fight against malaria.

As a result of this significant scaling-up of malaria control interventions, an estimated 3.1 million lives have been saved in Africa since 2000, reducing malaria mortality rates by 49%. This is an unprecedented success for Africa!

Countries have scaled-up malaria case management and vector control throughout the continent using domestic resources, as well as funds from bilateral donors, the World Bank and the Global Fund. Resource commitments have increased from less than US \$100 million in 2000 to an estimated US \$1.97 billion in 2013.

If we are to achieve the goal of near-zero malaria deaths by 2015, now is the time for a big push to sustain and even enhance the funding available for malaria control and elimination.

The Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria announced a successful replenishment with pledges of \$12 billion US Dollars. Based on disease burden estimates, globally malaria control should receive 32% of these resources. The allocation from the Global Fund to each country and the subsequent allocation within each country between the three diseases will vary according to country specific disease burdens.

In March 2014, the Global Fund will provide all countries with information on their overall indicative funding amount, including, for information purposes, the breakdown by disease component. Through a country dialogue process, these resources will then be earmarked for each of the three diseases. Countries, working with their RBM Partners will need to submit their New Funding Model malaria concept notes in 2014 to secure these resources. ALMA member countries are urged to allocate sufficient resources from their overall Global Fund country allocation to malaria control commensurate with the size of their malaria burden.