

SAFEGUARDING A STRATEGIC ASSET: THE UK'S ROLE IN MALARIA SCIENCE

WHY MAINTAINING SCIENTIFIC LEADERSHIP
STRENGTHENS NATIONAL HEALTH SECURITY



**ZERO
MALARIA**

BRITAIN



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FOREWORD

For generations, malaria has often been perceived as a disease that happens “elsewhere” - a challenge facing only the countries where transmission occurs. But as a scientist working in this field, I have seen first-hand that malaria research is not separate from Britain’s interests or priorities. It is a vital part of our scientific ecosystem, our global partnerships, and our ability to protect health in an increasingly interconnected world.

The discoveries made through malaria research have advanced our understanding of infectious diseases, strengthened research capabilities, and contributed to innovations in medicines, vaccines, diagnostics and disease surveillance. This work has helped save millions of lives globally - while also building the knowledge, technologies and expertise that strengthen the UK’s own health security.

The findings in this report reflect a strong consensus among British-backed malaria scientists: investing in malaria science is not only an investment in tackling one of the world’s oldest and deadliest diseases; it is an investment in Britain’s ability to anticipate and respond to future health threats.

However, malaria science does not happen in isolation. Progress depends on genuine partnerships between researchers, institutions, governments and communities across the world. From laboratory discovery to clinical trials and delivery in affected communities, innovation is strongest when it is co-created with the countries and people who understand the challenge first-hand. These partnerships ensure that new tools are not only scientifically advanced, but practical, equitable and able to deliver impact where they are needed most.

We are living through a period of profound global change. Climate change, population movement and evolving infectious disease threats remind us that health security is a shared challenge. The science we support today will shape our ability to respond tomorrow.

Continued investment in malaria research is therefore not simply a commitment to global health. It is a commitment to scientific excellence, international collaboration and a safer, healthier future for Britain and the world.

Professor George Christophides

*Director of Vector Immunogenomics and Infection Laboratory
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PROFESSOR GEORGE CHRISTOPHIDES

DIRECTOR OF VECTOR IMMUNOGENOMICS AND INFECTION LABORATORY
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EXECUTIVE SUMMARY

Britain has long been a global leader in malaria science - from pioneering discoveries that transformed our understanding of the disease to developing the next generation of tools that could help end malaria for good. This leadership has delivered benefits far beyond malaria, strengthening scientific capability, driving innovation, and building partnerships that help protect people everywhere.

But this leadership cannot be taken for granted. As the world faces growing health challenges - from emerging infectious diseases to the impacts of climate change - the case for sustained investment in global health science has never been stronger.

This report explores why malaria science matters to Britain today. It highlights the contribution of UK researchers and institutions, the wider benefits of innovation developed through malaria research, and the importance of international collaboration in protecting health security at home and abroad.

Our central argument is clear:

Malaria science strengthens the UK's health security.

By advancing understanding of infectious diseases, developing new technologies, and strengthening global surveillance and response capabilities, malaria research contributes to a safer, more resilient world.

It drives innovation with applications far beyond malaria.

Research into malaria has helped accelerate breakthroughs in areas including drug discovery, diagnostics, vaccines, data science, and disease prevention - creating knowledge and technologies that can benefit wider healthcare challenges.

And it depends on global partnerships to succeed.

Malaria does not respect borders. The UK's scientific leadership is most effective when combined with the expertise, experience and priorities of partners in malaria-affected countries around the world.

The findings from UK scientists demonstrate the strength of this contribution:

- **80% believe malaria science helps protect the UK from health threats¹**
- While malaria is not currently a domestic threat, scientists warn that climate change could alter that trajectory over time
- Scientists are most optimistic about the pipeline of new malaria medicines, including those still in development

At a time when funding for global health research and development is under pressure, these findings underline a critical point:

Reducing investment in malaria science risks weakening Britain's ability to anticipate, prevent and respond to future health threats.

This is not only a question of global responsibility. It is about national resilience, economic opportunity, and maintaining the UK's position as a world leader in science and innovation.

Investing in malaria science means investing in a healthier, safer and more prepared future - for Britain and for the world.

Gareth Jenkins

Managing Director, Malaria No More UK

80% BELIEVE MALARIA SCIENCE HELPS
PROTECT THE UK FROM HEALTH THREATS¹

¹ YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q25.
London: Malaria No More UK.

RESEARCH APPROACH

OVERVIEW

The Malaria Science Index has been developed to provide a structured, evidence-based overview of the UK's contribution to malaria research and innovation. The project was designed to capture the perspectives of leading experts across the malaria science ecosystem, offering a “bird's eye view” of current progress, challenges and future opportunities.

At its core, the Index is intended to act as a recurring barometer of malaria science - enabling stakeholders to better understand the strength of the research pipeline, the value of ongoing work, and the role this plays in wider global and domestic health security.

This report represents the first phase of what is intended to become an annual or regular exercise, allowing for the tracking of trends over time.

ROLE OF THE ADVISORY PANEL

To ensure the robustness and credibility of the research, an independent Advisory Panel of senior experts was established to guide the development of the Malaria Science Index.

The Advisory Panel played a key role in:

- **Shaping the overall research design and approach**
- **Advising on participant selection**, ensuring the panel reflects the breadth of UK malaria science
- **Providing input into survey design**, including question framing and thematic coverage
- **Supporting engagement with participants**, helping to ensure strong response rates and representation
- **Advising on interpretation and communication of findings**, to ensure accuracy and relevance

Advisory Panel members were selected based on their expertise and leadership within the malaria science community. Their involvement helps ensure that the Index reflects both scientific rigour and sector-wide credibility.

EXPERT PANEL METHODOLOGY

The findings in this report are based on insights gathered from a panel of 35 senior UK malaria scientists. Participants were selected to reflect:

- **Scientific leadership and seniority** within their respective fields
- **Diversity of expertise**, spanning the full malaria research and innovation pipeline (including drugs, vaccines, diagnostics, vector control, data science and implementation)
- **Diversity of institutional and personal backgrounds**, ensuring a broad and

representative set of perspectives

- **Active engagement in malaria research**, with participants contributing directly to advancing interventions and scientific understanding

This panel-based approach enables the Index to draw on the collective expertise of those at the forefront of malaria science, rather than relying solely on published outputs or secondary data.

SURVEY DESIGN

The survey was designed to capture both quantitative and qualitative insights from participating scientists. It explored key themes including:

- The contribution of malaria science to UK and global health security
- The strength and direction of the research and innovation pipeline
- Areas of scientific progress and optimism
- Emerging risks and future challenges, including environmental and epidemiological shifts
- Perspectives on the funding and policy landscape

Survey development was undertaken in collaboration with research specialists, with input from the Advisory Panel to ensure that questions were relevant, clear and reflective of the realities of THE SECTOR.

RECRUITMENT AND DATA COLLECTION

Participants were recruited between January and March 2026 through a structured outreach process led by Malaria No More UK, with support from Advisory Panel members where appropriate.

Participation was voluntary, and respondents were informed about how their insights would be used.

Data collection was conducted through a structured survey conducted by YouGov between 26th March and 6th July, with responses aggregated to identify overall trends, areas of consensus and key insights across the panel.

LOOKING AHEAD

By capturing the perspectives of those leading the field, the Index offers a unique insight into the current state and future trajectory of malaria science in the UK.

Over time, this will enable the identification of trends, emerging priorities and potential risks - supporting a more informed and strategic understanding of the UK's role in global health science.

1. WHY MALARIA SCIENCE MATTERS TO UK HEALTH SECURITY

80%

OF UK-BACKED MALARIA SCIENTISTS AGREE THAT MALARIA SCIENCE PROVIDES HEALTH BENEFITS TO THE UK PUBLIC.

89%

BELIEVE MALARIA RESEARCH STRENGTHENS THE UK'S GLOBAL LEADERSHIP IN INFECTIOUS DISEASE RESEARCH

Why should UK policymakers care about malaria science?

Malaria is widely recognised as one of the world's most significant infectious diseases, yet discussions about its impact often focus on the countries where transmission occurs. The findings of the inaugural Malaria Science Index suggest that this perspective overlooks the substantial contribution malaria science makes to the United Kingdom and wider life sciences sector. Instead, leading experts in this field see malaria science as making an important contribution to Britain's health security, scientific leadership, innovation economy and international influence (1).

The survey of 35 UK-backed malaria scientists, conducted by YouGov on behalf of Malaria No More UK, reveals a remarkable degree of consensus. **Four in five scientists agree that malaria science provides health benefits to the UK public, while an identical proportion believe it strengthens the UK's health security.** More broadly, every scientist surveyed identified at least one way in which malaria research contributes to the UK's wider life sciences ecosystem,

highlighting benefits ranging from scientific discovery and translational research to clinical trials capability, international partnerships and data-driven innovation (2).

Taken together, these findings suggest that malaria science should not be understood solely as a component of international development or global health policy. Rather, it represents a strategic scientific capability that delivers tangible benefits for the United Kingdom itself.

This conclusion reflects an important shift in how malaria research is framed. Historically, the case for investing in malaria has rested primarily on its humanitarian imperative. Malaria remains one of the world's deadliest infectious diseases, disproportionately affecting young children and pregnant women in sub-Saharan Africa. That moral case remains compelling. However, as global health has become increasingly interconnected, so too have the arguments for investment. Malaria science now sits at the intersection of health security, scientific competitiveness, economic growth and pandemic preparedness. Investments made to tackle malaria increasingly generate capabilities that extend well

beyond a single disease. Reports including The Malaria Dividend, Best of British and Britain & Beyond evidence that malaria innovation creates returns across multiple sectors of the UK economy, strengthening research capability while supporting trading opportunities, international partnerships and scientific leadership (3).

The scientists surveyed for the Malaria Science Index strongly reinforce this wider perspective. Asked how malaria research contributes to the UK's overall life sciences strategy, **almost nine in ten identified its role in strengthening Britain's global leadership in infectious disease research. Four in five highlighted collaboration between academia, industry and international partners, while over two-thirds recognised its contribution to platform technologies and translational science with applications extending far beyond malaria itself.** Scientists also pointed to advances in genomics, artificial intelligence, clinical trials infrastructure and biomedical discovery that continue to benefit wider areas of medicine (4).

Perhaps most strikingly, respondents consistently described malaria science as an enabling discipline rather than a narrow field of specialist research. One scientist observed that *"The Oxford-AZ COVID vaccine would not have happened without a decade of malaria research to develop the underlying technology."* Another reflected that malaria research *"supports the development of excellent scientists whose skills can be multiple... and supports UK reputation on global health."* These comments illustrate an important theme running throughout the survey: malaria science produces capabilities that strengthen Britain's broader research ecosystem and improve its ability to respond to future health challenges (5).

The relationship between malaria science and UK health security emerges even more clearly when scientists consider the practical consequences of maintaining research

capacity. **Four in five respondents agreed that malaria science makes the UK safer, while nearly three-quarters believed it could play a major role in responding to future pandemics.** Their reasoning extends beyond malaria itself. Scientists highlighted the importance of maintaining expertise in infectious disease biology, sustaining innovation pipelines for drugs and vaccines, strengthening surveillance capabilities and preserving international research networks that can be mobilised rapidly when new threats emerge. As one respondent noted, *"Malaria science is vital to secure a steady pipeline of innovative products and tools... It is a vital component of epidemic and pandemic preparedness and resilience."* (6).

"The Oxford-AZ COVID vaccine would not have happened without a decade of malaria research to develop the underlying technology."

These findings align with a growing body of evidence demonstrating that investments in disease-specific research often generate wider benefits across health systems and biomedical innovation. Britain's response to COVID-19 illustrated the value of maintaining world-class expertise in vaccinology, clinical trials and genomic surveillance long before a pandemic emerges. Malaria research has contributed directly to each of these capabilities through decades of sustained investment in discovery science, product development partnerships and international collaboration. Malaria No More UK's Best of British shows that the infrastructure developed through malaria R&D has repeatedly created technologies and scientific expertise that can be adapted for other infectious diseases, reinforcing the UK's position as a global science leader (7).

The benefits identified by scientists are not confined to health alone. Respondents consistently described malaria science as generating economic, strategic and societal value for Britain. Several emphasised that reducing malaria globally creates stronger trading partners, supports economic growth in endemic countries and opens opportunities for increased UK exports and scientific collaboration. Others highlighted the contribution malaria science makes to Britain's international reputation, soft power and diplomatic relationships. One respondent argued that collaboration with endemic countries represents *"a source of soft power for the UK,"* while another described malaria science as something that *"the UK public should be proud of."* (8).

These observations closely mirror previous analysis undertaken by Malaria No More UK. The Malaria Dividend estimated that accelerating progress against malaria could generate substantial economic returns for endemic countries while simultaneously creating commercial opportunities for Britain through trade, research collaboration and innovation. Rather than representing a choice between global responsibility and national interest, the report demonstrates that malaria investment increasingly delivers both (9).

Importantly, the Malaria Science Index suggests that scientists themselves recognise this dual dividend. Their responses reveal a profession that sees malaria research not only as a means of saving lives overseas, but also as a strategic national capability that strengthens Britain's resilience, prosperity and scientific competitiveness.

This distinction matters because it changes how malaria science should be understood within UK policy. It is not simply overseas health research undertaken for humanitarian reasons. It is part of the UK's wider scientific infrastructure. Like investments in pandemic preparedness, antimicrobial resistance or vaccine development, malaria research creates expertise, technologies and international partnerships that improve Britain's ability to anticipate and respond to future threats (10).

The remainder of this report explores this proposition in greater depth. It examines how scientists perceive the changing threat landscape, where they see the greatest opportunities for innovation, the challenges they believe threaten future progress, and the international partnerships that underpin Britain's scientific leadership. Collectively, these findings point towards a clear conclusion. Investment in malaria science is not solely an investment in tackling one disease. It is an investment in the scientific capability, international influence and health security upon which Britain's future resilience increasingly depends.

Malaria science is not just global health - it is national interest.

It strengthens Britain's economy, protects its people, and reinforces its role as a global leader in science and innovation.

Footnotes

1. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists. London: Malaria No More UK.
2. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14. London: Malaria No More UK.
3. Malaria No More UK (2024) The Malaria Dividend; Malaria No More UK, Best of British; Malaria No More UK, Zero Malaria: Britain & Beyond.
4. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14. London: Malaria No More UK.
5. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q12m, qualitative responses. London: Malaria No More UK.
6. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q25 and qualitative responses. London: Malaria No More UK.
7. Malaria No More UK (year) Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK.
8. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, qualitative responses on the wider value of malaria science to the UK. London: Malaria No More UK.
9. Malaria No More UK (2024) The Malaria Dividend. London: Malaria No More UK.
10. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and Q22–Q25. London: Malaria No More UK; Malaria No More UK (year) Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK.

2. A CHANGING THREAT LANDSCAPE

43%

BELIEVE THE THREAT OF
MALARIA TO THE UK
POPULATION IS INCREASING.

0%

BELIEVE THE THREAT
IS DECREASING.

Why is malaria science becoming increasingly important to Britain's future health security?

An important part of scientific investment is preparing for the future rather than responding to the past. Decisions about which research capabilities to develop should be driven not just by today's disease burden, but by an assessment of tomorrow's risks. The findings of the inaugural Malaria Science Index suggest that UK-backed malaria scientists increasingly view malaria through precisely this lens. While malaria is not currently regarded as a significant domestic public health threat, respondents consistently describe a global environment in which infectious disease risks are becoming more interconnected, less predictable and increasingly influenced by environmental, demographic and geopolitical change (1).

This perspective emerges clearly from the survey findings. **More than two in five UK-backed malaria scientists believe the threat malaria poses to the UK population is increasing, while none believe it is decreasing. Although a similar proportion considered the**

level of threat broadly unchanged, the complete absence of respondents who perceived declining risk is striking. Rather than suggesting that malaria is becoming an imminent domestic challenge, **the findings suggest a scientific assessment in which the balance of risk is stable or increasing, rather than declining (2).**

Importantly, respondents were careful to distinguish between current reality and future possibility. Scientists' qualitative responses consistently suggest that they do not regard endemic malaria transmission within the United Kingdom as a near term risk. However, many also argued that it would be complacent to assume that the environmental and epidemiological conditions underpinning this position will remain constant (3). As one respondent observed:

"I do not think that in-country transmission of malaria within the UK is likely any time soon... however... climate change... is never something that can be ruled out in the long term. A much more real and present issue is the rise in imported cases coming from overseas." (4).

This distinction is important. The survey

does not suggest that malaria should now be considered a domestic infectious disease. Rather, it reflects the judgement of specialists that the global context within which malaria exists is changing, with implications for how Britain thinks about preparedness, surveillance and scientific capability.

Climate change features prominently within this assessment. Scientists repeatedly identified changing climatic conditions as a factor likely to reshape malaria transmission over coming decades. Alterations in temperature, rainfall and humidity influence both mosquito ecology and parasite development, creating opportunities for vectors to establish themselves in areas previously considered unsuitable for sustained transmission. Malaria No More UK's analysis in Britain & Beyond similarly shows that climate change is expected to alter patterns of infectious disease globally, reinforcing the importance of maintaining scientific capacity capable of anticipating and responding to these emerging risks (5).

Yet respondents viewed climate change as only one component of a broader shift in the global health landscape. Increased international travel, migration, urbanisation and geopolitical instability were also frequently cited as factors likely to influence future malaria risk. One scientist summarised this interconnected reality simply: *"Global country because of migration, wars and travel."* (6).

Another warned that: *"Trends in immigration and weather anomalies make malaria outbreaks in formerly endemic zones of the UK a plausible scenario."* (6)

These comments reinforce a central theme emerging throughout the survey: infectious diseases can no longer be understood solely through national boundaries. Population movement, environmental change and global connectivity increasingly determine where disease risks emerge and how rapidly they evolve. This reflects a broader principle set out in Britain &

Beyond, which argues that Britain's health security is inseparable from global health security in an interconnected world (7).

"We are seeing dramatic rises in malaria cases and deaths globally... due to climate change... emergence and spread of drug resistance... reduction in funding..."

The scientists' concerns extend beyond where malaria occurs to how the disease itself is evolving (8). Throughout the survey, respondents highlighted the growing challenge posed by insecticide resistance, antimalarial drug resistance and changing transmission patterns. These biological changes complicate efforts to control malaria globally while increasing the importance of maintaining an active research pipeline capable of adapting interventions as the disease evolves. Rather than representing static threats, malaria parasites and mosquito vectors continue to change in response to both natural selection and public health interventions. Sustained scientific capability is therefore essential if progress is to be maintained.

Alongside these biological and environmental changes, scientists also drew attention to pressures affecting the wider global health system. Several respondents linked future malaria risk to reductions in international investment, describing recent cuts to overseas development assistance and research funding as having consequences extending beyond malaria programmes themselves. One respondent remarked: *"The huge scale back of investment... is almost unprecedented... it is widely anticipated that malaria and other aspects of global health will not be the main focus."* (9).

Although funding is explored in greater detail later in this report, these observations illustrate that scientists perceive changing risk as multidimensional. Future vulnerability is shaped not only by pathogens and climate, but also by political decisions that determine whether surveillance systems, research partnerships and innovation pipelines remain sufficiently robust to respond.

This emphasis on preparedness reflects a broader lesson that has emerged from recent global health crises. The COVID-19 pandemic demonstrated that the costs of an emerging infectious disease risks can be profound, while also illustrating the value of sustained investment in scientific capability before crises occur. Malaria science contributes directly to this preparedness by maintaining expertise in infectious disease biology, vaccine development, diagnostics, vector surveillance and international research collaboration. Malaria No More UK's report *Investing in Malaria – A Pathway to Greater Pandemic Prevention, Preparedness and Response*, demonstrates that malaria research strengthens precisely the capabilities required to identify and respond rapidly to future epidemic and pandemic threats (10).

The Malaria Science Index findings suggest that UK-backed malaria scientists increasingly see malaria research through this wider pandemic preparedness lens. Their concern is not that Britain faces an imminent resurgence of malaria, but that future health security depends upon maintaining scientific capabilities before changing risks materialise. Waiting until those risks become acute would mean rebuilding expertise, partnerships and research infrastructure that currently provide strategic advantage (11).

Viewed in this context, malaria science becomes more than a response to a single disease. It represents part of Britain's wider capacity to understand emerging infectious diseases, anticipate changing epidemiological patterns and develop the innovations required to respond. As global environmental and demographic conditions continue to evolve, maintaining that capability becomes increasingly important.

Ultimately, the Malaria Science Index points towards a measured but significant conclusion. UK-backed malaria scientists do not believe that Britain faces an immediate malaria crisis. They do, however, believe that the global context in which malaria exists is changing, and that these changes increase the value of sustained investment in research, surveillance and innovation. The challenge for policymakers is therefore not to respond to today's level of risk alone, but to recognise the direction in which that risk is travelling (12).

The next chapter considers why scientists remain optimistic that the UK is well placed to meet this changing challenge. Despite increasing uncertainty, respondents identify an exceptionally strong pipeline of innovation—spanning drugs, vaccines, vector control and diagnostics—that has the potential not only to accelerate malaria elimination globally, but also to strengthen Britain's own scientific leadership and preparedness for future health threats.

Footnotes

1. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Executive Summary and Q21–Q21a. London: Malaria No More UK.
2. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q21. London: Malaria No More UK.
3. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q21a, qualitative responses. London: Malaria No More UK.
4. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q21a, qualitative response. London: Malaria No More UK.
5. World Health Organization (2023) El Niño Southern Oscillation (ENSO). Geneva: World Health Organization; Malaria No More UK (2022) Zero Malaria: Britain & Beyond. London: Malaria No More UK.
6. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q21a, qualitative responses. London: Malaria No More UK.
7. Malaria No More UK (2022) Zero Malaria: Britain & Beyond. London: Malaria No More UK.
8. World Health Organization (2025) World Malaria Report 2025: Addressing the threat of antimalarial drug resistance. Geneva: World Health Organization; YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, qualitative responses on drug resistance and changing malaria risk. London: Malaria No More UK.
9. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q7m, qualitative response. London: Malaria No More UK.
10. Malaria No More UK (publication year to verify) Investing in Malaria: A Pathway to Greater Pandemic Prevention, Preparedness and Response. London: Malaria No More UK.
11. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, qualitative findings on UK health security and pandemic preparedness; Malaria No More UK (publication year to verify) Investing in Malaria: A Pathway to Greater Pandemic Prevention, Preparedness and Response. London: Malaria No More UK.
12. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q21–Q21a. London: Malaria No More UK.

3. INNOVATION MOMENTUM: CONFIDENCE TODAY, OPTIMISM FOR TOMORROW

71%

IDENTIFY DRUGS AND THERAPEUTICS AS THE MOST FREQUENTLY IDENTIFIED CURRENT INNOVATION AREA WITH STRONG POTENTIAL FOR SIGNIFICANT IMPACT.

Can UK-backed malaria science meet the challenges of tomorrow?

If the previous chapter established why malaria science is becoming increasingly important, the findings of the inaugural Malaria Science Index provide an equally important reason for optimism. Faced with a changing global health landscape, UK-backed malaria scientists express remarkable confidence in the strength of the current innovation pipeline and the technologies emerging to tackle one of the world's oldest and deadliest diseases. Their responses describe a field characterised not by stagnation, but by scientific momentum, with advances spanning prevention, diagnosis, treatment and vector control (1).

This confidence is one of the clearest messages to emerge from the survey.

Asked to identify innovative malaria technologies currently in development with strong potential for significant impact, respondents most frequently highlighted three areas: drugs and therapeutics (71%), vaccines (69%), and vector control technologies (57%) (2).

Although these interventions target different stages of the disease, together they represent a diversified portfolio of scientific innovation that is capable of addressing the evolving challenges posed

by malaria, including drug resistance, insecticide resistance and changing transmission patterns.

The breadth of this innovation is significant. Rather than relying upon a single breakthrough, scientists describe an increasingly sophisticated toolkit in which multiple interventions work together. This reflects an important aspect of malaria science: today's research increasingly seeks to combine complementary approaches, integrating medicines, vaccines, diagnostics and vector control into comprehensive strategies capable of accelerating malaria elimination (3).

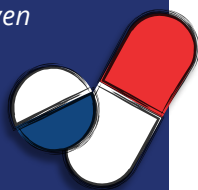
Among current innovations, drugs and therapeutics were the most frequently identified area with strong potential for significant impact. Scientists highlighted long-acting injectable medicines, novel anti-relapse therapies and single-dose treatments that could simplify malaria prevention and improve adherence while addressing the growing threat of resistance (4).

One respondent identified cabamiquine (M5717) as *"a single dose cure treatment with potential for chemoprevention"* following successful Phase II clinical trials, while another highlighted *"novel anti-relapse therapies not toxic to G6PD deficient patients."*

These examples illustrate a pipeline focused not simply on improving existing treatments but on fundamentally reshaping how malaria can be prevented and managed (5).

Single-dose cure.

Completely cures malaria in one dose - instead of needing several doses over 3 days (like current standard therapies). This would be a simpler cure that patients can complete, and health workers can deliver, even in challenging situations. A single dose could save more lives and help slow drug resistance by reducing incomplete treatment.



Vaccines were identified almost as frequently. Scientists described a field entering a period of rapid progress, building upon decades of sustained investment and scientific collaboration. Respondents pointed to second-generation vaccines, transmission-blocking vaccines and integrated approaches combining seasonal malaria chemoprevention with existing vaccines as particularly promising areas of research. This included responses highlighting blood-stage vaccines and vaccines designed to interrupt transmission as examples of technologies in which UK-backed researchers continue to make internationally significant contributions.

This optimism reflects a broader transformation in malaria vaccine development. Once regarded as one of the most difficult challenges in infectious disease research, vaccines are now moving from scientific aspiration towards widespread implementation. Malaria No More UK's analysis in Best of British argues that UK researchers have played a central role in this journey, from early discovery science through to clinical trials and product development. The scientists surveyed suggest that this leadership is far from complete; rather, they anticipate further advances that will improve efficacy, extend protection and contribute increasingly to malaria elimination strategies (6).

Innovation in vector control represents a third pillar of scientific progress. While insecticide-treated bed nets and indoor residual spraying remain essential components of malaria control, respondents highlighted a new generation of approaches designed to respond to changing mosquito behaviour and growing insecticide resistance. Gene-drive technologies, genetically modified mosquitoes and novel interventions targeting outdoor biting vectors were repeatedly identified as areas in which UK-backed science is helping to shape the future of malaria control. One scientist described "*gene-drive and GM Anopheles mosquitoes*" as technologies capable of limiting transmission. Given the relatively recent history of gene drive technologies, this makes this tool a vector control measure that was unimaginable only a decade ago (7).

Gene drive.

Genetically modifies the mosquito to reduce its ability to transmit malaria. Lowers transmission across whole communities, saving lives and protecting all other tools.



Importantly, respondents did not limit their optimism to technologies already progressing through development. When asked to look further ahead, scientists identified an equally exciting pipeline of concept-stage innovations likely to enter formal research and development over coming years. Forty per cent highlighted next-generation vaccines as the most promising emerging technology, while others pointed to gene drives, advanced diagnostics, discovery science and chemical biology (8).

These responses illustrate one of the defining strengths of UK-backed malaria science: its ability to sustain innovation across the full research pathway. Discovery science, translational research, clinical trials and implementation are not viewed

as separate activities but as interconnected stages within a continuous innovation ecosystem. This end-to-end capability enables promising ideas to progress from laboratory discovery to real-world deployment through partnerships involving universities, product development organisations, industry and endemic-country researchers (9).

Perhaps most encouragingly, scientists expressed overwhelming confidence that these emerging technologies will contribute meaningfully to malaria elimination. Among respondents who identified at least one concept-stage technology, more than three-quarters believed it would advance progress towards elimination, with many emphasising that combinations of interventions would prove particularly powerful. One respondent argued that *“a high efficacy malaria vaccine will be inherently a transmission blocking vaccine,”* enabling simultaneous reductions in disease burden and onward transmission. Another highlighted the potential of artificial intelligence to accelerate drug discovery, noting that AI could *“enable more rapid drug discovery”* at a time when resistance to existing drugs and insecticides continues to emerge (10).

Next generation vaccines.

Among the tools in development to further improve malaria control. They are expected to offer improved, longer-lasting protection and more simple delivery. Better vaccines mean fewer cases and stronger economies. The UK is helping to build them - sustained investment is what gets them to the people who need them most.



This confidence reflects more than scientific enthusiasm. It is grounded in the UK's long-standing leadership across multiple

disciplines underpinning malaria research. These capabilities provide the scientific foundation upon which future innovations are built. Scientists repeatedly emphasised the importance of institutions that have sustained investment in malaria research over many decades, generating expertise that extends beyond malaria itself into wider areas of infectious disease biology, genomics and translational medicine (11).

The wider implications extend well beyond malaria. Throughout the survey, respondents repeatedly emphasised that malaria research serves as a platform for broader biomedical innovation. Advances in artificial intelligence, genomics, diagnostics and vaccine technologies developed through malaria research increasingly have applications across global health. Rather than representing a niche area of biomedical research, malaria science has become an important driver of innovation throughout the wider health ecosystem (12).

This breadth of impact helps explain why scientists remain optimistic despite recognising the growing complexity of the global malaria challenge. Drug resistance, environmental change and evolving transmission patterns undoubtedly present significant obstacles. Yet respondents consistently believe that the scientific community possesses both the expertise and the innovation pipeline required to respond. Their confidence lies not in any single breakthrough, but in the cumulative strength of a diverse research portfolio capable of adapting as new challenges emerge.

Ultimately, the findings of the Malaria Science Index present a compelling picture of scientific progress. UK-backed malaria scientists believe that the tools needed to accelerate malaria elimination are not hypothetical ambitions for the distant future; many are already emerging through laboratories, clinical trials and international

research partnerships. The challenge is therefore no longer simply one of scientific discovery. It is one of ensuring that this innovation pipeline continues to receive the investment, collaboration and long-term support necessary to translate scientific promise into public health impact (13).

That challenge forms the focus of the next chapter. While scientists express overwhelming confidence in the future of malaria innovation, they are equally clear about the factors that threaten its success. Foremost among these is the increasingly fragile funding environment that underpins research, development and implementation. Without sustained investment, the scientific momentum described in this chapter risks slowing at precisely the moment when it has the greatest potential to transform global health.

Footnotes

1. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Executive Summary and Q1–Q5. London: Malaria No More UK.
2. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1. London: Malaria No More UK. Drugs/therapeutics were mentioned by 25 respondents (71%), vaccines by 24 (69%) and vector control by 20 (57%).
3. World Health Organization (2024) Malaria vaccine: WHO position paper – May 2024. Weekly Epidemiological Record, 99, pp. 225–248. Geneva: World Health Organization.
4. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1–Q2, qualitative responses. London: Malaria No More UK; World Health Organization (2025) WHO Guidelines for Malaria. Geneva: World Health Organization.
5. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1, qualitative responses. London: Malaria No More UK.
6. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1 and Q3–Q5. London: Malaria No More UK; World Health Organization (2024) Malaria vaccine: WHO position paper – May 2024. Weekly Epidemiological Record, 99, pp. 225–248. Geneva: World Health Organization.
7. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1, qualitative responses. London: Malaria No More UK; World Health Organization (2025) Twenty-first meeting of the WHO Vector Control Advisory Group: meeting report, 21–25 October 2024. Geneva: World Health Organization.
8. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q3. London: Malaria No More UK. Vaccines were mentioned by 14 respondents (40%), gene drives/GM mosquitoes by nine (26%), diagnostics by five (14%) and discovery science by five (14%).
9. Malaria No More UK, Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK; YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and qualitative responses. London: Malaria No More UK.
10. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q4–Q5. London: Malaria No More UK; World Health Organization (2025) WHO Guidelines for Malaria. Geneva: World Health Organization.
11. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q12–Q14 and qualitative responses. London: Malaria No More UK; Malaria No More UK, Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK.
12. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and qualitative responses. London: Malaria No More UK; Malaria No More UK, Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK.
13. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1–Q5. London: Malaria No More UK; Malaria No More UK, Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK.

4. INNOVATION UNDER PRESSURE

94%

OF RESPONDENTS IDENTIFY LIMITED R&D FUNDING AS A HIGH OR MEDIUM RISK TO FUTURE MALARIA INNOVATION

What could prevent UK-backed malaria science from delivering future breakthroughs?

The previous chapter demonstrated that UK-backed malaria scientists remain optimistic about the future of malaria innovation. Respondents identified a strong pipeline of advances spanning therapeutics, vaccines, vector control and diagnostics, expressing confidence that these technologies have the potential to accelerate malaria elimination while strengthening Britain's wider life sciences ecosystem. Yet alongside this optimism sits a clear and consistent warning. Scientific progress cannot be taken for granted. Without sustained investment, long-term partnerships and a supportive research environment, today's innovation pipeline risks failing to deliver tomorrow's breakthroughs (1).

This tension is one of the defining findings of the inaugural Malaria Science Index. Scientists are not concerned about a lack of ideas or scientific capability; they are concerned about whether the environment in which innovation takes place remains sufficiently robust to translate discovery into impact. Across multiple survey questions, respondents repeatedly returned to the same theme: the UK's malaria research community possesses world-

leading expertise, but maintaining that leadership requires long-term commitment and predictable investment (2).

“The UK grant funding landscape has never been harsher.”

When asked about the greatest risks to future malaria innovation, funding emerged overwhelmingly as the dominant concern. More than nine in ten respondents (94%) identified limited research and development funding as either a high or medium risk to future progress, making it the most frequently cited challenge in the survey. Other barriers - including regulatory complexity and international collaboration - were recognised as important, but funding consistently underpinned scientists' concerns about each of these issues (3).

The qualitative responses reinforce the strength of this consensus. One respondent described the current environment starkly: *“The UK grant funding landscape has never been harsher.”* (4)

Another reflected on the consequences for scientific discovery: *“Potential life-saving product do not get developed or arrive at to the population who need it because of*

uncertain routes of access and payment". (4)

These comments illustrate that respondents view funding not simply as a financial issue, but as a determinant of whether scientific ideas are able to progress from laboratory research into interventions capable of improving public health.

Importantly, scientists' concerns extend beyond the availability of individual grants. Many described an increasingly uncertain funding landscape in which short-term investment cycles make it difficult to sustain research programmes, retain specialist expertise and build the long-term international partnerships upon which malaria science depends. Respondents highlighted the cumulative effect of uncertainty, arguing that inconsistent investment can disrupt careers and discourage early-career researchers (5).

These findings align closely with previous analysis by Malaria No More UK. The Malaria Dividend argues that investment in malaria research should be viewed not as a cost, but as a long-term investment in scientific capability, economic growth and health security. Likewise, Investing in Malaria R&D: A Pathway to Greater Pandemic Prevention, Preparedness and Response highlights that sustained research funding enables the development of scientific platforms, technologies and partnerships that strengthen preparedness for future infectious disease threats. Rather than supporting a single disease area, investment in malaria science contributes to the resilience of the UK's wider research and innovation ecosystem (6).

Scientists also expressed concern about the UK's ability to maintain its international competitiveness if current trends continue. Earlier chapters demonstrated that respondents regard the UK as a global leader in malaria research, particularly in vaccinology, genomics, vector biology and clinical research. However, leadership is not viewed as permanent. Several respondents warned that reductions in investment risk eroding capabilities that have taken decades to build, potentially allowing

expertise, infrastructure and scientific talent to migrate elsewhere (7).

This concern reflects the nature of scientific capability itself. Research excellence cannot be switched on and off in response to changing priorities. It depends upon sustained investment in people, institutions and partnerships over many years. Laboratory infrastructure, clinical trial networks and specialist expertise are cumulative assets that become increasingly valuable over time, but can be difficult to rebuild once lost. For this reason, respondents frequently framed malaria science as a strategic capability requiring long-term stewardship rather than intermittent support (8).

Scientists also identified challenges beyond funding that could constrain future innovation. Regulatory complexity, difficulties translating research into implementation and maintaining access to international collaboration were all highlighted as areas requiring continued attention. Respondents recognised that effective innovation depends upon an environment in which discovery science, product development, clinical evaluation and implementation can progress efficiently and collaboratively. While these challenges were generally viewed as secondary to funding, they nevertheless form part of the broader ecosystem required to sustain scientific excellence (9).

International collaboration emerged as a particularly important consideration. As explored in the following chapter, malaria research depends heavily upon long-standing partnerships between UK institutions and researchers in endemic countries. Scientists suggested that instability in funding can undermine these relationships, making it more difficult to sustain collaborative programmes, support capacity strengthening and maintain the trust that underpins effective global research. In this sense, investment influences not only the pace of scientific discovery but also the partnerships through which innovation is achieved (10).

Despite these concerns, the survey does not paint a picture of pessimism. Rather, respondents distinguish clearly between the strength of the science and the challenges facing the research environment. Their confidence in the innovation pipeline remains high; their concern is whether the conditions necessary for that innovation to flourish will continue to exist. This distinction is important. The challenge identified by scientists is not a shortage of scientific ambition, creativity or expertise. It is ensuring that these strengths are matched by sustained policy and financial commitment.

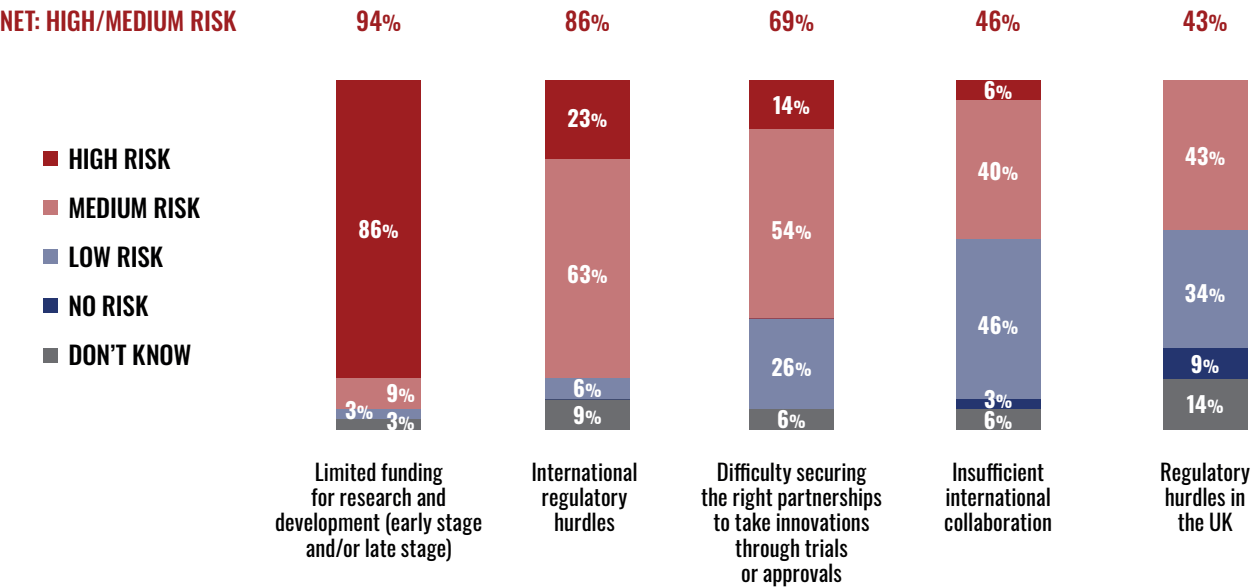
The implications extend beyond malaria. Throughout the survey, respondents repeatedly describe malaria research as

contributing to broader scientific capability, pandemic preparedness and the UK's international standing. If investment in this ecosystem weakens, the consequences are unlikely to be confined to malaria alone. They may also affect the wider life sciences sector, its research infrastructure and global partnerships that have enabled Britain to respond effectively to emerging infectious disease threats in the past. This reinforces the argument advanced in earlier chapters: protecting malaria science is also an investment in protecting the UK's future resilience (11).

Ultimately, the Malaria Science Index presents policymakers with a clear message. The UK's malaria research community possesses the expertise,

Limited funding for R&D and International regulatory hurdles stand out as the biggest threats to successful development and approval of future technologies to eliminate malaria.

YouGov



Q6. How much of a threat, if at all, do each of the following factors pose to the success of future research, development and approval of future technologies or approaches to eliminating malaria?
Base: All UK based malaria scientists
Note: Respondents were able to skip questions. Where a small number of respondents have done that we have recoded them as “Don’t know” to give a consistent base size for analysis.

ideas and innovation pipeline required to deliver transformative advances in global health. Scientists do not question whether progress is possible; they question whether the environment needed to sustain that progress can be maintained. Addressing this challenge requires recognising research funding not simply as support for individual projects, but as investment in a strategic national capability whose benefits extend far beyond malaria itself (12).

The next chapter explores one of the principal reasons why UK-backed malaria science has achieved such international success: the strength of its global partnerships. Scientists consistently identify collaboration with endemic-country researchers as fundamental to scientific excellence, innovation and impact, demonstrating that the UK's leadership in malaria research is built not in isolation, but through long-term, mutually beneficial international relationships.

Footnotes

1. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1–Q7. London: Malaria No More UK.
2. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q6–Q7 and Q12–Q13, including qualitative responses. London: Malaria No More UK.
3. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q6. London: Malaria No More UK. Limited funding for research and development was rated a high or medium risk by 33 of 35 respondents (94%), the highest of the threats assessed.
4. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q7m, qualitative responses. London: Malaria No More UK.
5. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q7m and qualitative responses concerning research funding, career development and the research talent pipeline. London: Malaria No More UK.
6. Malaria No More UK, The Malaria Dividend. London: Malaria No More UK; Malaria No More UK, Investing in Malaria R&D: A Pathway to Greater Pandemic Prevention, Preparedness and Response. London: Malaria No More UK.
7. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q12–Q13 and associated qualitative responses concerning UK scientific leadership, investment and research capability. London: Malaria No More UK.
8. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, qualitative responses concerning long-term funding, research capability and implementation. London: Malaria No More UK.
9. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q6–Q7 and Q13. London: Malaria No More UK.
10. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q7m and Q14, qualitative responses. London: Malaria No More UK.
11. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and findings concerning UK health security and pandemic preparedness. London: Malaria No More UK; Malaria No More UK, Investing in Malaria R&D: A Pathway to Greater Pandemic Prevention, Preparedness and Response. London: Malaria No More UK.
12. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q6–Q7 and Q12–Q14. London: Malaria No More UK; Malaria No More UK, The Malaria Dividend. London: Malaria No More UK.

5. THE POWER OF PARTNERSHIP

91%

OF UK-BACKED MALARIA SCIENTISTS
BELIEVE PARTNERSHIPS WITH
RESEARCHERS AND INSTITUTIONS IN
SUB-SAHARAN AFRICA ARE IMPORTANT
TO THE FUTURE OF UK MALARIA R&D

54%

BELIEVE AFRICAN COUNTRIES
ARE THE MOST IMPORTANT
INTERNATIONAL COLLABORATORS
FOR UK MALARIA SCIENTISTS

Why are international partnerships essential to the success of UK-backed malaria science?

The previous chapter explored the conditions required for scientific innovation to flourish, highlighting the importance of sustained investment in research capability. However, funding alone does not explain the UK's long-standing leadership in malaria science. Throughout the inaugural Malaria Science Index, UK-backed malaria scientists repeatedly identify another defining strength of the UK's research ecosystem: its ability to build, sustain and learn from long-term international partnerships. Far from being a supplementary aspect of malaria research, scientists describe collaboration with researchers, institutions and communities in malaria-endemic countries as fundamental to scientific excellence, innovation and impact (1).

This finding reflects the inherently global nature of malaria. Unlike many areas of biomedical research, malaria cannot be effectively studied in isolation from the populations and health systems where transmission occurs. Scientific discovery depends upon close collaboration between laboratory scientists, clinicians, epidemiologists, entomologists, public

health practitioners and communities across multiple countries. The survey demonstrates that UK-backed malaria scientists view these partnerships not simply as mechanisms for delivering research overseas, but as relationships that strengthen science itself (2).

This view is reflected in one of the clearest findings of the survey. More than nine in ten respondents agreed that partnerships with sub-Saharan Africa are important to the future of UK malaria research and development. Scientists consistently described these collaborations as essential to advancing scientific knowledge, evaluating new interventions and ensuring that innovations are designed around the realities of malaria transmission in endemic settings (3).

Importantly, respondents viewed these relationships as reciprocal rather than one-directional. Scientists repeatedly emphasised that collaboration generates mutual learning, shared expertise and stronger scientific outcomes for all partners involved. Several highlighted that many of the most significant advances in malaria research have only been possible because of trusted, long-term partnerships between UK institutions and research centres across

Africa and Asia. Rather than exporting expertise, respondents described a model of co-production in which knowledge is generated collectively (4).

One respondent summarised this by stating that *“shared knowledge, equitable partnership”* where we “learn from each other”. (5)

Another observed that these collaborations enable researchers to understand local epidemiology, strengthen implementation and develop interventions that are both scientifically rigorous and operationally relevant.

These perspectives closely align with previous Malaria No More UK analysis. Britain & Beyond argues that Britain’s contribution to global malaria research has been built not only upon scientific excellence, but also upon decades of collaboration with endemic-country partners, creating networks that support innovation, capacity strengthening and health security. Similarly, Best of British demonstrates that many of the UK’s most significant scientific achievements in malaria - including advances in vaccines, therapeutics and diagnostics - have emerged through international research partnerships spanning academia, governments, product development partnerships and local research institutions (6).

The survey suggests that these partnerships deliver benefits extending well beyond individual research projects. Respondents consistently highlighted opportunities for knowledge exchange, professional development and shared innovation. Scientists described how collaborations support the training of early-career researchers, strengthen laboratory and clinical research capacity and facilitate the exchange of expertise between institutions. These investments not only improve malaria research in endemic countries but also enrich the UK’s own scientific community by exposing researchers to

diverse perspectives, field experience and new scientific questions (7).

“We have remarkable talent and initiatives in the UK, many of which rely on collaborations with Africans, for the benefit of Africans. This area could also be a source of soft power for the UK.”

Several respondents also recognised the wider strategic value of these relationships. Beyond their contribution to research outputs, partnerships were described as strengthening the UK’s international reputation, reinforcing diplomatic relationships and demonstrating global scientific leadership. One scientist referred to malaria collaborations as *“a source of soft power for the UK,”* reflecting the view that sustained scientific engagement contributes positively to Britain’s international influence while supporting shared global objectives (8).

This perspective reinforces an important theme running throughout the report. Investment in malaria science is not solely an investment in laboratories or technologies; it is also an investment in relationships. These relationships create the trust required to undertake complex clinical trials, respond rapidly to emerging health threats and translate scientific discoveries into interventions that improve public health. Such partnerships are built gradually over many years and depend upon continuity, mutual respect and sustained commitment.

Scientists also emphasised the practical importance of conducting research where malaria transmission occurs. Endemic

settings provide opportunities to evaluate vaccines, medicines, diagnostics and vector control interventions under real-world conditions that cannot be replicated elsewhere. Close collaboration with local researchers and health systems therefore enables UK-backed science to generate evidence that is scientifically robust while remaining directly relevant to those communities most affected by malaria. In turn, the lessons learned frequently inform broader advances in infectious disease research with applications extending beyond malaria itself (9).

The importance of partnership became particularly apparent during discussions of future innovation. As explored in the previous chapter, respondents expressed considerable optimism regarding emerging technologies including next-generation vaccines, long-acting therapeutics, artificial intelligence and novel vector control approaches. Scientists consistently recognised, however, that translating these innovations into public health impact will depend upon continued collaboration between UK institutions and international partners. Discovery, clinical evaluation, implementation and surveillance increasingly rely upon integrated global research networks rather than isolated national programmes.

Respondents also acknowledged that these partnerships require long-term support. Short-term or unpredictable funding can make it difficult to maintain research programmes, retain experienced staff and sustain the trust that underpins effective collaboration. In this respect, the themes of partnership and investment are closely connected. Stable funding enables stable relationships, and stable relationships enable better science. Protecting one therefore helps protect the other (10).

These findings carry wider implications for UK life science policy. Increasingly, scientific leadership is determined not simply by the quality of individual institutions but by their ability to convene international expertise and coordinate collaborative research at scale. The survey suggests that UK-backed malaria science exemplifies this model. Britain's contribution derives not only from scientific excellence within its own universities and research institutes, but also from its capacity to build enduring international partnerships that generate knowledge, strengthen capability and accelerate innovation.

Ultimately, the Malaria Science Index demonstrates that partnership is not an optional component of malaria research; it is one of its defining characteristics. UK-backed malaria scientists overwhelmingly believe that collaboration with endemic-country researchers strengthens both the quality and impact of their work. These partnerships advance discovery, improve implementation, develop scientific capacity and reinforce Britain's position as a global leader in infectious disease research. In an increasingly interconnected world, they also contribute to wider objectives including health security, scientific diplomacy and resilience against future global health threats (11).

As the report has shown, UK-backed malaria science delivers benefits that extend well beyond malaria itself. It strengthens Britain's health security, drives scientific innovation, supports preparedness for future infectious disease threats and fosters international collaboration. The final chapter brings these themes together, considering what the survey findings mean for policymakers and why safeguarding this unique scientific capability should be regarded as a strategic national priority.

Footnotes

1. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q18–Q20 and associated qualitative responses. London: Malaria No More UK. Q18 found that 54% of respondents identified African countries as the most important countries for UK collaboration, while Q19 found that 91% regarded country partnerships with sub-Saharan Africa as very or quite important to UK malaria R&D.
2. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q20, qualitative responses. London: Malaria No More UK. Respondents identified knowledge exchange and scientific expertise (46%), access to technology and infrastructure (40%), capacity building and training (40%), networks and partnerships (31%), and equitable partnerships and local leadership (31%) among the benefits derived from UK collaboration.
3. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q18–Q19. London: Malaria No More UK. Q19 found that 91% of respondents regarded country partnerships with sub-Saharan Africa as very or quite important to UK malaria R&D.
4. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q20, qualitative responses. London: Malaria No More UK. Respondents emphasised knowledge exchange, equitable partnership, local leadership, capacity building, access to technology and long-standing research relationships.
5. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q20, qualitative response. London: Malaria No More UK. The full response states: ‘Shared knowledge, equitable partnership, learn from each other and putting endemic countries at the table of decision makers.’
6. Malaria No More UK (2022) Zero Malaria: Britain & Beyond. London: Malaria No More UK; Malaria No More UK, Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK.
7. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q20. London: Malaria No More UK. Respondents identified knowledge exchange and scientific expertise (46%), capacity building and training (40%), access to technology and infrastructure (40%), networks and partnerships (31%), equitable partnerships and local leadership (31%), and career development (9%) among the benefits of collaboration.
8. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q20 and Q24, qualitative responses. London: Malaria No More UK. Respondents referred to UK-African malaria collaboration as ‘a source of soft power for the UK’, to ‘soft diplomacy with malaria endemic countries’, and to UK global-health expertise as beneficial to international relations.
9. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and Q18–Q20. London: Malaria No More UK. Q14 found that 83% of respondents identified collaboration between academia, industry and global partners as a contribution of UK-backed malaria research to the UK’s life-sciences strategy.
10. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q6–Q7 and Q18–Q20, including qualitative responses concerning funding, international collaboration and long-term research relationships. London: Malaria No More UK.
11. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14, Q18–Q20 and Q24–Q25. London: Malaria No More UK.

6. SAFEGUARDING A STRATEGIC ASSET

80%

AGREE MALARIA SCIENCE DELIVERS
HEALTH BENEFITS TO THE UK

89%

BELIEVE MALARIA RESEARCH
STRENGTHENS THE UK'S
GLOBAL LEADERSHIP IN
INFECTIOUS DISEASES RESEARCH

91%

SAY AFRICAN PARTNERSHIPS
ARE IMPORTANT

What do the findings of the Malaria Science Index mean for UK policymakers?

The findings of the inaugural Malaria Science Index point towards a clear and consistent conclusion. UK-backed malaria science should no longer be viewed solely through the lens of international development or global health. Rather, it represents a strategic national capability that delivers significant benefits for Britain's health security, scientific leadership, international partnerships and economic competitiveness (1).

Throughout this report, UK-backed malaria scientists have described a research ecosystem that extends far beyond a single disease. Their responses demonstrate how malaria research contributes to vaccine development, drug discovery, genomics, diagnostics, vector biology, artificial intelligence and clinical research, while simultaneously strengthening Britain's ability to anticipate and respond to future infectious disease threats. Scientists consistently emphasise that the value of malaria science lies not only in the lives it saves overseas, but also in the capabilities it creates and sustains within the United Kingdom itself (2).

“Very solid expertise in trials, globally respected independence and statistical rigour.”

The evidence presented throughout the survey reveals three interdependent conclusions.

First, malaria science is delivering substantial value to the United Kingdom today. Scientists overwhelmingly recognise its contribution to health security, pandemic preparedness, scientific discovery and the wider life sciences ecosystem. Far from existing at the margins of British science, malaria research contributes directly to capabilities that underpin the UK's international reputation as a leader in biomedical innovation. Previous Malaria No More UK analysis has similarly demonstrated that investment in malaria research generates economic returns, commercial opportunities and scientific expertise extending well beyond malaria itself (3).

Second, the importance of these capabilities is increasing rather than diminishing. Scientists believe the context in which

malaria exists is changing as climate change, population movement, antimicrobial resistance and wider geopolitical instability reshape patterns of infectious disease risk. Although respondents do not suggest that malaria represents an immediate domestic public health emergency, they consistently argue that maintaining expertise in malaria science strengthens Britain's ability to anticipate and respond to an increasingly uncertain global health landscape. In an interconnected world, scientific preparedness can no longer be separated from global health (4).

Third, and perhaps most importantly, these capabilities cannot be assumed to endure indefinitely. Throughout the survey, respondents repeatedly distinguish between the strength of UK-backed malaria science and the pressures affecting the environment in which it operates. Scientists express confidence in the innovation pipeline, yet concern about the long-term sustainability of research funding, international partnerships and the wider conditions required for scientific excellence to flourish. Leadership built over decades can be eroded more quickly than it can be rebuilt (5).

Taken together, these findings suggest that malaria science should be understood as strategic infrastructure. Like advanced manufacturing capability, national laboratory capacity or critical digital infrastructure, its value extends beyond the immediate outputs it produces. It represents a reservoir of expertise, partnerships, technologies and institutional knowledge that strengthens Britain's resilience to future challenges whose precise nature cannot yet be predicted.

The COVID-19 pandemic provided a powerful reminder that scientific capability must exist before crises emerge. Vaccine platforms, clinical trial networks, genomic surveillance and international research collaborations cannot be assembled overnight. They depend upon decades of sustained investment, scientific

curiosity and international cooperation. As highlighted throughout this report, UK-backed malaria science contributes directly to many of these same capabilities. Protecting malaria research therefore strengthens Britain's preparedness not only for malaria, but for future infectious disease threats more broadly (6).

Importantly, the findings of the Malaria Science Index also challenge a false distinction that has often shaped discussions about global health investment. Too frequently, investment in diseases such as malaria is framed as a choice between supporting vulnerable populations overseas and advancing Britain's own national interests. The scientists surveyed suggest that this is a misleading dichotomy. Their responses consistently demonstrate that these objectives are mutually reinforcing. Research undertaken to tackle malaria strengthens UK science, while stronger UK science improves the global response to malaria. Investment therefore generates both humanitarian and national benefit (7).

“Fund the excellent science that already exists.”

This principle is perhaps best illustrated through the partnerships that underpin UK-backed malaria science. As Chapter Five demonstrated, collaboration with researchers and institutions in endemic countries is regarded by scientists not simply as a mechanism for delivering research overseas, but as an essential driver of scientific excellence. These partnerships enable innovation, strengthen capacity, accelerate implementation and enhance Britain's international standing. They also demonstrate how scientific leadership is increasingly built through collaboration rather than competition (8).

The implications for policymakers are therefore clear. Protecting the UK's

leadership in malaria science requires recognising its contribution across multiple areas of public policy. Decisions relating to research funding, international development, life sciences, health security and industrial strategy should not be considered in isolation. Together, they shape the environment in which UK-backed malaria science can continue to thrive. Maintaining this capability is unlikely to depend upon any single intervention; rather, it requires a sustained commitment to the research ecosystem that scientists themselves identify as fundamental to future success (9).

This report does not argue that malaria should receive investment at the expense of other important areas of research. Instead, the evidence suggests that malaria science exemplifies the type of interdisciplinary, internationally connected research capability that the United Kingdom should seek to sustain. Its contributions extend across infectious disease research, vaccine development, translational medicine, genomics, data science and global scientific collaboration. These are capabilities where value is likely to grow as the world becomes increasingly interconnected and future health threats become more complex.

The Malaria Science Index provides a unique insight into how those working at the forefront of malaria research understand both the opportunities and challenges facing their field. Their message is neither complacent nor alarmist. It is one of cautious confidence. Scientists believe that the UK possesses exceptional expertise, internationally respected institutions and a strong pipeline of innovation capable of transforming malaria control over the coming decades. At the same time, they recognise that these strengths depend upon continued investment, stable partnerships and long-term policy support.

Ultimately, safeguarding UK-backed malaria science is about more than preserving excellence in a single field of research. It is about protecting a strategic capability that strengthens Britain's resilience, reinforces its international scientific leadership and contributes to a safer, healthier and more prosperous future. The findings of the Malaria Science Index suggest that continued investment in this capability is not simply an investment in tackling malaria. It is an investment in the United Kingdom's future (10).

What the scientists told us.

- *The UK is a global leader in malaria science.*
- *Malaria science delivers benefits that extend well beyond malaria.*
- *International partnerships are fundamental to continued scientific leadership.*
- *Protecting this capability requires sustained long-term investment.*



Footnotes

1. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and Q22–Q25. London: Malaria No More UK. Respondents identified benefits to UK health security, the wider life-sciences ecosystem and economic, scientific, strategic and societal value; the survey report characterises malaria science in the UK as ‘a national asset generating economic, scientific, strategic and societal value’.
2. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1–Q5, Q12–Q14 and Q25–Q27. London: Malaria No More UK. The survey identifies UK-backed activity and expertise spanning therapeutics, vaccines, vector control, diagnostics and wider scientific disciplines, alongside perceived contributions to UK health security and pandemic preparedness. The evidence audit confirms that 80% believe malaria science makes the UK safer and 71.4% believe it could play a major role in responding to future pandemics.
3. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q14 and Q22–Q25. London: Malaria No More UK; Malaria No More UK (2024) The Malaria Dividend. London: Malaria No More UK; Malaria No More UK (2023) Best of British: UK Leadership in Malaria Research and Development. London: Malaria No More UK. The earlier MNMUK evidence base identifies wider economic and scientific benefits associated with malaria R&D, while the Science Index identifies benefits across UK life sciences and health security. The source documents themselves give 2023 for Best of British.
4. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q21, Q21a and Q25–Q27. London: Malaria No More UK; Malaria No More UK (2022) Zero Malaria: Britain & Beyond. London: Malaria No More UK. The survey finds that 42.9% perceive the malaria threat to the UK population as rising, 42.9% perceive no change and none perceive it as falling; 80% believe malaria science makes the UK safer in health-security terms.
5. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1–Q7 and Q12–Q13, including qualitative responses on UK scientific leadership and research funding. London: Malaria No More UK. Limited R&D funding was rated a high or medium risk by 94% of respondents, while qualitative responses emphasised both existing UK scientific excellence and the importance of sustained investment.
6. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q12m and Q25–Q27. London: Malaria No More UK; Malaria No More UK, Investing in Malaria R&D: A Pathway to Greater Pandemic Prevention, Preparedness and Response. London: Malaria No More UK. One respondent observed that the research infrastructure underpinning malaria vaccine development also supported vaccine development for other diseases, stating that ‘The Oxford-AZ COVID vaccine would not have happened without a decade of malaria research to develop the underlying technology’; 71.4% of respondents said malaria science could play a major role in responding to future pandemics.
7. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q22–Q25. London: Malaria No More UK; Malaria No More UK (2024) The Malaria Dividend. London: Malaria No More UK. Qualitative responses identify economic, scientific, strategic and societal benefits to the UK alongside benefits from reducing malaria in endemic countries, including trade, international relationships, scientific capability and global health security.
8. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q18–Q20. London: Malaria No More UK. More than nine in ten respondents (91%) regarded country partnerships with sub-Saharan Africa as important to UK malaria R&D, while qualitative responses highlighted knowledge exchange, capacity strengthening, technology access, networks, equitable partnership and local leadership.
9. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q6–Q7, Q13–Q14 and Q18–Q20. London: Malaria No More UK. These findings identify funding, scientific leadership, wider life-sciences capability and international collaboration as interconnected elements of the UK-backed malaria research environment.
10. YouGov and Malaria No More UK (2026) Malaria Science Index: Survey of UK-backed malaria scientists, Q1–Q7 and Q14–Q27. London: Malaria No More UK. Taken together, the survey findings identify a strong innovation pipeline alongside contributions to UK life sciences and health security, international partnerships, and substantial concern regarding the future funding environment. The YouGov report describes malaria science in the UK as ‘a national asset generating economic, scientific, strategic and societal value’.

SUPPORTING UK HEALTH SECURITY: OPPORTUNITIES FOR GOVERNMENT

POLICY CONSIDERATIONS FOR GOVERNMENT

The findings of the Malaria Science Index highlight five opportunities to strengthen the UK's health security, scientific leadership and global impact.

1. Recognise malaria science as a strategic health security capability

Malaria research underpins the expertise, partnerships and innovation needed to strengthen the UK's preparedness for future infectious disease threats.

2. Sustain long-term investment in global health R&D

Predictable funding enables scientists to retain expertise, pursue ambitious research and translate discoveries into life-saving innovations.

3. Back UK leadership in life sciences and innovation

Continued support for Product Development Partnerships and translational research will help ensure UK-backed discoveries deliver health, scientific and economic benefits.

4. Strengthen international scientific partnerships

Long-term collaboration with malaria-endemic countries drives better science, builds research capacity and reinforces the UK's global leadership.

5. Champion Gavi and the Global Fund as pathways from innovation to impact

Supporting Gavi and the Global Fund helps ensure UK-backed scientific discoveries reach the communities that need them most, translating research into real-world health impact while reinforcing the value of UK investment in science.

The UK's future health security will depend not only on how it responds to future threats, but on the scientific capability and international partnerships it chooses to sustain today.







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