

MESSAGE FROM OUR CO-CHAIR

Dear Members and Supporters of the APPG on Malaria and NTDs,

It has been a busy few months for our All-Party Parliamentary Group – with events on topics ranging from *Anopheles stephensi* to World NTD Day, meetings with key partners including Medicines for Malaria Venture, and testimonies from inspiring and passionate advocates including noma survivor, Fidel Strub, malaria survivor and midwife, Mirriam Banda Chisamba, and healthcare worker, Anju Chaurasia, who was diagnosed with leprosy as a teenager.

There have been some incredibly exciting successes across the malaria and NTD communities – including the certification of Cabo Verde as malaria free, the elimination of visceral leishmaniasis and lymphatic filariasis from Bangladesh, the interruption of leprosy transmission by Maldives, the inaugural roll-out of the RTS,S malaria vaccine in Cameroon, and the official recognition of noma as an NTD. As Chair of the United Against Rabies Forum Steering Group, I have also been pleased to see Gavi’s renewed support for rabies post-exposure prophylaxis (PEP), with discussions ongoing as to criteria for eligibility for countries to receive the vaccine. Gavi had suspended financial support for PEP and some other vaccines during the COVID-19 pandemic to prioritise support for COVID-19 vaccines. The UK Government has also made some exciting announcements around support for the roll-out of malaria vaccines RTS,S and R21, through matching the first £2 million of new pledges from the private sector to Gavi, and a pledge of £10 million new funding with UK Research and Innovation’s Medical Research Council for research into which measures can make the rollout most effective.

However, despite these causes for celebration, the global burden of malaria and NTDs remains significant and continues to be a barrier to health equity, prosperity, and development. The World Health Organization’s World Malaria Report 2023 showed that progress in fighting malaria continues to stall, with malaria cases on the rise, deaths remaining above pre-pandemic levels, and emerging threats such as climate change and invasive species threatening to reverse the great strides taken towards the eradication of this deadly disease. Following the publication of the report, the APPG released a statement, Members asked questions in both Chambers, and my Co-Chair Catherine West co-hosted a reception to draw attention to the findings and discuss with partners ways in which the UK can support efforts to get back on track. Vice-Chair James Sunderland also hosted a specific session dedicated to the invasive *Anopheles stephensi* mosquito to discuss this particular emerging threat and the need for new research, surveillance, and funding.



Lord Trees meeting with Global Fund advocate Mirriam Banda Chisamba

Members of the APPG have also been able to keep the topic of malaria and NTDs firmly on the Parliamentary agenda. Following the APPG’s visit to Malawi last July and ahead of World NTD Day last month, APPG Member Patrick Grady led a Westminster Hall debate on the role of the UK in ending malaria and NTDs, with a number of Members able to contribute to the lively and timely discussion. The debate profiled some of the incredible work being done by UK institutions to treat, prevent, and eliminate these diseases and also brought attention to some of the challenges to progress, including a widening funding gap, climate change, and conflict. For World NTD Day itself, I co-hosted a packed session to raise awareness of these diseases in Parliament under the core theme ‘Unite, Act, Eliminate’, with a focus on the disproportionate impact on women and girls. I also led a debate in the House of Lords on infectious disease threats to UK biosecurity, including human, animal, and plant health, in an age of globalisation and climate change.

As ever, I want to pay particular thanks to all those individuals and organisations we have collaborated with over the past few months. With an election expected to take place at some point in the next year, we will continue to maintain focus and attention on these devastating diseases, and push for continued UK support.

Professor the Lord Trees FRCVS FMedSci HonFRSE

Co-Chair of the APPG on Malaria and NTDs

EVENTS

World Malaria Report

Each year, the World Health Organization publishes its World Malaria Report providing a comprehensive and up-to-date assessment of trends in malaria control and elimination across the globe. This year's report included, for the first time, a dedicated chapter focused on the intersection between climate change and malaria.



WHO's Dr Alastair Robb speaking at the World Malaria Report reception

In December, our Co-Chair, **Catherine West MP**, hosted a Parliamentary reception on behalf of the APPG with Malaria No More UK to mark the findings of the World Malaria Report, and to discuss the ways in which we can get back on track to end malaria with UK support.

Speakers included **Dr Alastair Robb** from the World Health Organization who introduced the report, outlined key threats to progress – with a focus on climate change – and spoke to the importance of collaboration across diseases and sectors to meet the challenge. The Foreign, Commonwealth and Development Office's Head of Human Development **Chris Carter** outlined the Department's work in the fight against malaria – including through continued support for the Global Fund to Fight AIDS, Tuberculosis and Malaria – as well as the UK's role in innovation, science, and research and development.



Speakers Dr Alastair Robb and Mirriam Banda Chisamba with Vice-Chair Virendra Sharma MP

We also heard from Global Fund Advocate, **Mirriam Banda Chisamba**, an inspiring midwife and primary healthcare provider working in rural Zambia, who has experienced malaria both personally – having almost lost her daughter to severe malaria in 2011 and suffered from malaria herself countless times – and professionally. Mirriam spoke passionately about her work, especially with pregnant women and babies, and about the transformation of diagnosis and management of malaria in her community thanks to interventions from the Global Fund, which have enabled the rapid prescription of life-saving treatment, particularly for children, and have improved and expanded health services in rural and hard-to-reach communities.

International Day of Persons with Disabilities

On International Day of Persons with Disabilities in December, the APPG Secretariat met with **Anju Chaurasia** who works at The Leprosy Mission India's Muzaffarpur Hospital in Bihar, and heard about her experience after being diagnosed with leprosy as a teenager and her commitment to disability inclusion at the Foreign, Commonwealth and Development Office and Bond NGO's special event in Parliament.



Anju Chaurasia speaking at the FCDO and Bond NGO special event for International Day of Persons with Disabilities

Anopheles stephensi in Africa

In January, Vice-Chair **James Sunderland MP** hosted a roundtable led by RAFT, Resilience Against Future Threats consortium at the London School of Hygiene and Tropical Medicine on *Anopheles stephensi* in Africa and why this invasive vector matters for the future of malaria control.

The event explored the emergence of the *Anopheles stephensi* mosquito in urbanised environments in several African countries, exposing vast numbers of people living in unplanned urban settlements to a new health risk. These mosquitoes can breed in man-made water containers and so thrive in urban areas with unreliable water supply. Evidence suggests that this invasive vector could put 129 million people in major cities in Africa at increased risk of malaria. Where prior exposure and immunity to the disease is low, this could result in outbreaks with high morbidity and mortality.



Panellists at the Anopheles Stephensi meeting, Professor Sian Clarke, Dr Seth Irish, Dr Jo Lines, Dr Fitsum Tadesse, and James Sunderland MP

Panellists included **Dr Seth Irish** from the World Health Organization who leads the development of the Organization's initiative against *Anopheles stephensi*, **Dr Fitsum Tadesse**, a Wellcome Trust Fellow at the London School of Hygiene and Tropical Medicine and the Armauer Hansen Research Institute in Ethiopia where he leads the malaria research team, and **Dr Jo Lines** from RAFT, a vector biologist who has been working on practical methods of malaria mosquito control for decades.

The panel discussion focused on the need for new research into *Anopheles stephensi* behaviour and biology, monitoring and surveillance, and funding, as well as the importance of raising awareness and political commitment. We also heard how collaboration across sectors, including water and sanitation, environment, and development, is crucial to control, adding to other known public health benefits.

You can read more about the event, [here](#).

World NTD Day

30 January was the fourth annual World NTD Day – an awareness day for addressing NTDs. To mark the day, and to raise awareness of these devastating diseases in the UK Parliament, our Co-Chair, **Lord Trees**, hosted a Parliamentary reception on behalf of the APPG with the UK Coalition against NTDs under the theme ‘Unite, Act, Eliminate’.

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Speakers at the World NTD Day Parliamentary reception, Dr Socé Fall, Tijana Williams, Dr Wendy Harrison, Lord Trees, Dr Guruge, and Fidel Strub

The event also drew attention to the disproportionate impact these diseases have on women and girls, celebrated recent NTD successes – including noma’s inclusion in the WHO official NTD list and the UK-supported elimination of visceral leishmaniasis and lymphatic filariasis in Bangladesh – and highlighted the importance of cross-sectoral collaboration, national government leadership, and the need for continued investment into implementation, research, and partnerships for sustainable NTD control, elimination, and eradication.

Fidel Strub, Co-Founder and Director of Elysium Noma Survivors Association spoke passionately about surviving noma, his journey through countless reconstructive surgeries, and his drive to get more attention to both this cruel disease and oral health, so that no other child has to suffer so long after noma.

The World Health Organization’s Director of the Department of Control of NTDs, **Dr Ibrahima Socé Fall**, shared his vision of a world where health equity is not just a goal but a reality for everyone, pointing to recent elimination successes and achieving the halfway point towards the 100-country target set for 2030.

Dr Dinu Guruge, an epidemiologist in Sri Lanka working with the Drugs for Neglected Diseases *Initiative’s* Dengue Global Programme spoke about the impact of dengue outbreaks, including on women and children, the difficulty for health systems to cope, innovations in treatment, and the importance of everyone working together through long-term, sustainable partnerships.

Tijana Williams, Director of GSK’s albendazole drug donation programme, highlighted not only the huge role that GSK plays in supporting elimination success for lymphatic filariasis and other NTDs through its drug donation programme, but also in supporting research innovations for NTDs – a shining example of UK institutions and pharmaceutical companies delivering impact and reaching the most vulnerable communities.

We also heard powerful video presentations from **Dr Dinesh Mondal** of the International Centre for Diarrhoeal Disease Research and **Professor Nazmul Islam** of the Centre for Disease Control in Bangladesh, edited by Brighton and Sussex’s Professor Shahaduz Zaman, which incorporated heartfelt testimonies from Bangladesh’s elimination successes for visceral leishmaniasis and lymphatic filariasis.

Dr Poonam Khetrpal Singh, Regional Director at WHO for Southeast Asia, also provided an update via video on regional challenges and successes and spoke to the importance of political commitment.

To close, **Dr Wendy Harrison** spoke on behalf of the UK Coalition against NTDs to call for stakeholders to unite across sectors to achieve shared goals, building on the Kigali Declaration’s call for comprehensive, partnership-driven NTD programmes and strategies that promote gender equity and support country ownership. Dr Harrison and Lord Trees also announced the winners of Unlimit Health’s ‘Shine a Light’ poster competition to raise awareness of NTDs. Art has a real power to shed light on important issues that some people may not be aware of, and is a fantastic way of engaging young people in raising awareness of these neglected diseases. This year’s poster winners showed not only artistic brilliance, but also creativity and clarity in their interpretation of the brief.

Congratulations to the winners! You can read all about winner Emilia’s experience, [here](#).



Emilia, one of the winners of the Unlimit Health poster competition, with Dr Harrison and Lord Trees

On World NTD Day **Lord Trees** also attended a screening of ‘The Fly Collectors’ at the Royal Society of Arts, co-hosted by Reaching the Last Mile Forum, the World Health Organization, and the UAE Embassy in London. This incredibly powerful documentary follows the work of leading entomologist, Dr Daniel Boakye, and his determination to eliminate onchocerciasis, or river blindness, from Senegal.

MEETINGS

MMV

In January, Co-Chairs **Catherine West MP** and **Lord Trees** met with Medicines for Malaria Venture’s CEO **David Reddy** and Chief Officer for Corporate Strategy and Affairs **Andrea Lucard**. MMV is a leading Product Development Partnership (PDP) in antimalarial drug research, development, and access facilitation, and a long-standing supporter and partner of the APPG. The meeting was an opportunity to hear more about MMV’s activities, pipeline, and equitable partnerships, and to understand priorities for the next year.

MMV’s mission is to reduce the burden of malaria in disease-endemic countries by discovering, developing, and delivering new, effective, and affordable antimalarial drugs. MMV’s antimalarial portfolio is the largest ever assembled and includes thirteen compounds in clinical development targeting unmet medical needs, including medicines for children, pregnant women, and people suffering from drug-resistant malaria. It is estimated that MMV-supported products have saved 13.6 million lives to date and protect 50 million children every year.

The UK is MMV’s largest country-donor and has been supporting MMV since its inception in 1999. Over the last five years, MMV invested \$65 million back in the UK. Currently, MMV has over 50 UK based partners, 100+ consultants, and UK experts on its Board of Directors and Governance committees.

PARLIAMENTARY ACTIVITY

Westminster Hall debate



Patrick Grady MP opening the Westminster Hall debate on malaria and NTDs

In January, Member **Patrick Grady MP** led a Westminster Hall debate on the role of the UK in ending malaria and NTDs following the findings of the World Health Organization's World Malaria Report 2023 and ahead of World NTD Day. A number of Parliamentarians contributed to the debate and spoke passionately in support of tackling these devastating diseases, including **Gregory Campbell MP**, **Jim Shannon MP**, **Tan Dhesi MP**, **Wendy Morton MP**, **James Sunderland MP**, **Chris Law MP**, and **Catherine West MP**, with Minister **Anne-Marie Trevelyan MP** responding to the debate.

The debate highlighted how malaria and NTDs are preventable and treatable, pointing to recent elimination successes including trachoma in Malawi, malaria in Azerbaijan, Belize, and Tajikistan, and visceral leishmaniasis in Bangladesh – **Patrick Grady MP**, for example, who met people affected by trachoma on a recent APPG visit to Malawi noted: “What we witnessed was not just individual transformation – men and women whose sight had been restored and who could again live independently – but community transformation, because they could go back to actively contributing by caring for their grandchildren and helping with other tasks around the home. In turn, their families benefit from that support and can focus their time and energy back on education or employment. That is the reality of the statistics, which demonstrate both the value of taking action and the cost of continuing to neglect these diseases.”

The debate also emphasised how we remain at a critical juncture in the fight against these diseases, with progress stalling and challenges such as climate change, conflict, and humanitarian crises threatening to knock us further off course. Vice-Chair **Tan Dhesi MP** noted that “the worsening climate crisis has had an alarming impact on malaria and neglected diseases. Locally acquired cases of malaria have now been found in the US, and a recent UK Health Security Agency report concluded that dengue fever could be transmitted in London by 2060. . . addressing the climate crisis is imperative in our fight against these diseases, and. . . this global challenge requires a unified global response”. Co-Chair **Catherine West MP** noted that “conflict and humanitarian crises are considerable threats to progress. Many countries have seen increases in malaria cases and deaths, and a few experienced malaria epidemics. Ethiopia saw an increase of 1.3 million cases between 2021 and 2022, and political instability in Myanmar led to a surge in cases, from 78,000 in 2019 to 584,000 in 2022, with a knock-on effect in neighbouring Thailand. Last June, mycetoma services in Sudan were suspended due to a lack of safety, resulting in patients not receiving vital medication. We know that in refugee camps there is a particularly high risk of scabies due to overcrowding. Can the Minister reassure us that the UK is working to support countries affected by conflict and other humanitarian crises to ensure the safe delivery of medical supplies, which are the basics?”

Co-Chair **Catherine West MP** also pointed to the disproportionate impact of these diseases on women and girls “due to various biological, social, economic and cultural factors. Limited financial resources, time constraints, diminished autonomy, and stigma and discrimination create barriers that prevent women from gaining access to timely healthcare, education, and employment opportunities. Due to their responsibility for home and family care, they often miss out on crucial treatments. Through close contact with children, women are two to four times more likely to develop trachoma, which is a neglected tropical disease, and are blinded up to four times as often as men.”



Co-Chair Catherine West MP speaking in the Westminster Hall debate on malaria and NTDs

Wendy Morton MP spoke about the UK's leadership role in multilateral initiatives such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, Unitaid, and Gavi, the Vaccine Alliance, and in the UK's support for this agenda through the Foreign, Commonwealth and Development Office's recent White Paper on International Development and targets on ending preventable deaths, and Member **Patrick Grady MP** spoke about the UK's commitments to the Kigali Declaration and the Sustainable Development Goals. A number of Members also profiled the incredible work of UK research and development in the fight against these diseases – including Dundee's Drug Discovery Unit, Liverpool's Centre for Snakebite Research and Interventions, the Liverpool School of Tropical Medicine, the London School of Hygiene and Tropical Medicine, the University of Glasgow, Brighton and Sussex Medical School, Imperial College, and Product Development Partnerships, MMV, DND*i*, and IVCC. Member **Patrick Grady MP** in particular called for more sustained support: “Many of us know about researchers' frustration with the lack of certainty around funding. The product development partnership model funded by the former Department for International Development worked to overcome shortcomings in the commercial research and development sector and was seen as a leader in funding such efforts through public ODA until the axe began to fall in 2021. Since then, the Foreign, Commonwealth and Development Office has been able to provide funding guarantees only one year at a time, which causes massive uncertainty for projects that require long-term funding. Clinical trials cannot be turned on and off like a tap; they take time and effort in the field and have to run over defined periods of time. They cannot be driven by political funding cycles.”

Member **Chris Law MP** also spoke about reductions to ODA: “The UK was once a global leader in tackling those diseases, particularly in research and innovation, but that contribution has been fundamentally undermined by the reckless decision to cut ODA from 0.7% of GNI to 0.5%. For example, in June 2021, the UK Government decided to terminate the Accelerating the Sustainable Control and Elimination of Neglected Tropical Diseases programme – otherwise known as ASCEND – with no alternative funding offered to more than 20 beneficiary countries in Africa. That resulted in over 250 million treatments and over 180,000 disability-preventing surgeries being stopped. In Zambia alone, it resulted in the cancellation of 1,500 sight-saving trachoma surgeries and 1,500 disability-preventing lymphatic filariasis surgeries. . . In the recent FCDO White Paper on

international development, there was noticeably no recommitment to the 0.7% spending on ODA and no reinstatement of the pre-2021 projects or commitment to beneficiaries of cut projects. The UK Government must therefore, as a matter of utmost urgency, recommit to the UN-mandated 0.7% spending of GNI on ODA, and they must go further and clarify that funds from that are available for research into tropical diseases including malaria.”

Member **Patrick Grady MP** highlighted NTDs as a best-buy in global health: “Many of the researchers and practitioners who are taking an interest in this subject have told us that investment in NTDs really is a best-buy in global health intervention. The campaign group Uniting to Combat NTDs reckons that, in some cases, investing just \$1 in tackling these diseases could unlock \$25 of benefits. Brighton and Sussex Medical School has calculated that the economic burden to a patient with podoconiosis, which is a form of elephantiasis, can be up to £100 per year, but that the one-off cost of a single treatment is just £52. A study by Deloitte showed that, if Nigeria met its NTD elimination targets by 2030, it could add \$19 billion to the value of its economy. If we want to achieve the sustainable development goals, unlock wasted economic potential, change the nature of aid flows and release new forms of finance to help developing countries drive poverty reduction and grow their economies, investing properly and effectively in tackling NTDs is essential.”

And a number of Members spoke to the moral duty to act, with Member **Chris Law MP** arguing: “Finally, these diseases are referred to as ‘neglected’ because they have been largely wiped out in more developed parts of the world, but they persist in its poorest, most marginalised or isolated communities. I cannot help but feel that we would be doing more if they existed here. Of course we would – we just have to look at the experience of covid-19 to see that, and the subsequent inequitable distribution of vaccines from high and middle-income countries to low-income countries as another example of the moral failure to protect the most vulnerable in our world. . . . The elimination of malaria and neglected tropical diseases is possible, and it will be a small step to a more equal world when it is achieved.”



Chris Law MP speaking in the Westminster Hall debate on malaria and NTDs

Closing the debate, Minister **Anne-Marie Trevelyan MP** noted: “This has been an important and positive debate. The UK plays a long-standing and leading role in the fight against malaria and neglected tropical diseases, both as a leading donor and with our world-leading scientific and research capability, which has focused on this issue for decades. Although, as a global community, we have made incredible progress in the last 20 years, we know that too many countries still face major challenges, not the least of which is the impact of climate change. As colleagues have pointed out, in many countries the most challenging health problems are across boundaries – diseases do not see a line in the sand. As we set out in the development White Paper, we will continue to lead the fight against poverty and climate change, including, very importantly, on global health.”

Other Westminster Hall debates

In October, Chairman of the International Development Select Committee, **Sarah Champion MP**, raised the serious and painful condition of female genital schistosomiasis in an intervention in a Westminster Hall debate on water, sanitation, and hygiene (WASH): “In certain regions, water collection can increase the risk of women contracting diseases. As part of our inquiry into the FCDO’s approach to sexual and reproductive health, my Committee heard that women risk getting infected with the neglected tropical disease, female genital schistosomiasis through snails carrying parasites in bodies of water. It is a serious and painful condition, which also increases the risk of contracting HIV.”

In the same debate on WASH, Member **Patrick Grady MP** spoke about the successful elimination of trachoma in Malawi: “Where efforts are made, benefits can be seen by all, and the potential for benefits can be predicted. Earlier this year, I and other members of the APPG on Malaria and Neglected Tropical Diseases had the privilege of visiting Malawi. We met people in communities where trachoma had been eliminated, thanks to the adoption of WHO’s SAFE strategy: surgery to treat blindness; antibiotics to clear infection; facial cleanliness; hand hygiene to reduce transmission; and environmental protection to stop the infection spreading. Malawi has now been declared a trachoma-free country – something that many other countries in that part of the world aspire to”.

In October, in a Westminster Hall debate on the Sustainable Development Goals, Vice-Chair **Virendra Sharma MP** raised the social and economic impact of malaria and NTDs: “It is no cliché to say that the world changed when we eradicated smallpox. A disease that killed millions, scarred many more and blighted lives was ended. That same spirit can live on. Malaria claims 600,000 lives a year, and a child under five dies from malaria almost every minute. As with TB, eradication does not just save lives; it drives growth and equality, and allows the reprioritisation of vast sums of money. For households experiencing poverty, malaria costs can account for up to one third of their income. Think what they could do with that money. Parents struck down by any of the neglected tropical diseases that we have committed to eradicate cannot work. In turn, that takes education and childhoods from the children forced into work, which can be tiring, exhausting and backbreaking, or even dangerous, degrading and illegal. Childhoods are ruined and more generations are inured to the cruellest of behaviours.”

In that same debate, **Patrick Grady MP** spoke about Sustainable Development Goal 3: “Goal 3 is on achieving healthy lives for all, and in particular, there is a target within that on ending epidemics. We know that that is affordable, transformative, and possible. During our visit to Malawi, we saw people who had benefited from the elimination of trachoma in their communities. We met the very first child who had received a malaria vaccine – it was fantastic. We know that ending TB and even AIDS, as the hon. Member for Ealing, Southall said, can be done if we are willing to put in the effort and resources”.

Responding to the debate on behalf of Labour, Shadow Minister **Lyn Brown MP** noted how progress to end malaria is off track: “Our progress to end HIV, tuberculosis and malaria is off track. In 2021, there were 1.5 million new HIV infections worldwide. There were 1.6 million deaths from TB and 600,000 malaria-related deaths. We can do better: we have world-leading universities and the expertise to work with partners around the world to strengthen global health security and defeat these epidemics once and for all. Our communities, and so many people around the world, need a Government that will give us our future back”.

Responding from the Government, Development Minister **Andrew Mitchell MP** spoke about the new malaria vaccines and the work of the Global Fund: "Finally, both the hon. Members for West Ham and for Ealing, Southall raised the issue of malaria and TB. In the case of malaria, the new vaccination that was announced a fortnight ago, which is the second vaccination – again, British technology – is a very welcome moment. I was in Mozambique recently with the head of the Global Fund, and together we saw how climate change is leading to an uptick in the number of people affected by malaria. In Mozambique, the amount of malaria had been driven down below 50 per cent among children, but is now rising again for the first time in many years because of climate change and the amount of flooding. Let me be clear that the first announcement that we were able to make once the Prime Minister came into Government last October was about a replenishment for the Global Fund of £1 billion. It is a very significant commitment by Britain, because we know the Global Fund is so effective when it comes to HIV, TB and malaria. I hope that the hon. Members for West Ham and for Ealing, Southall will accept that this is a powerful British ambition in all three of those areas, and that our support for the Global Fund is a reflection of that".

In November, Vice-Chair **Tan Dhesi MP** led a Westminster Hall debate on the escalating debt crisis in Africa drawing attention to the fact that, currently, more than half of the continent's low-income developing countries are either in debt distress or on the brink of debt distress, impacting investment in vital public services such as healthcare. Intervening in the debate, Member **Patrick Grady MP** raised the APPG's visit to Malawi and the impact of the country's external debt, which effectively tripled between 2009 and 2021, on the ability to leverage the resources to build vital infrastructure.

Debates in the Lords

In November during a debate on climate change, Co-Chair, **Lord Trees** asked about the potential for dengue transmission in the UK: "My Lords, with regard to global health and climate change, the latter is having a huge impact on insect-borne diseases of both humans and animals. Malaria has been mentioned, but another very specific threat is that of dengue viral disease in humans, which is no longer confined to the tropics. Indeed, there was an endemic outbreak in people in the Paris region only two to three months ago. So I ask the Minister, what preparations His Majesty's Government are making to prepare for, detect and hopefully prevent incursions of similar insect-borne infections into the UK."

Responding for the Government, **Lord Ahmad** said: "I agree with the noble Lord. When we look not just at malaria but at the spread of dengue fever, I know this for myself because a member of my own family sadly and tragically was infected and then died from dengue fever. We are working in this respect. The noble Lord is correct. We have seen those infections, those transported diseases, very much in evidence now in the UK. The rare and imported pathogens laboratory at Porton Down has accredited, reliable tests for dengue and other infections and we are working with partners and local authorities. We had a question just now about heat as well, and it is notable that, even at a local level in southern England, we have found invasive mosquito vectors appearing on six occasions. That reflects how global transmission is very much a reality, but we do have laboratories very much at the front end of our research to address these issues."



Lord Browne of Ladyton speaking in a debate in the House of Lords on climate change and malaria

In the same debate, **Lord Browne of Ladyton** asked about the impact of climate change on malaria transmission: "My Lords, climate change is already having a material effect on malaria transmission. Forecasts suggest that owing to a rise in global temperatures, transmission seasons could be up to five months longer by 2070. Already, malaria rates in Mozambique are at their highest since the current reporting phase began in 2017. More than 70 per cent of anti-malaria drugs used in Africa are imported, so what is the international community doing, and what are we doing, to stimulate local manufacture of drugs to ensure that weaknesses in the international supply chain do not result in preventable deaths?"

Responding for the Government, **Lord Ahmad** said: "The noble Lord is correct and I can assure him, from our experience of the Covid pandemic, that we are working in collaboration with India on global health generally but specifically on malaria. We welcome India in tackling global health threats and the whole issue of malaria is something we are looking at specifically, based on our research, in terms of collaboration with India on manufacturing. Indeed, two of the main vaccines currently being developed for malaria are actually UK research based."

In January, a number of Members took part in a debate led by Baroness Northover on the UK's contribution to international development, in particular in regard to the impact of climate change on developing nations. **Baroness Bottomley** focused specifically on malaria in her contribution, with strong support for the Global Fund to Fight AIDS, Tuberculosis and Malaria and the UK's world-leading and innovative scientific research and development sector: "It is the leadership, the science base, the collaborative approach and the consistency that can ensure that we play a real part in reducing climate change and assisting developing nations further." **Baroness Sheehan** also spoke about malaria noting that "wetter, warmer conditions mean that malaria is on the increase" pointing to the increase in malaria cases as a result of flooding in Pakistan: "Does the Minister agree that our Government must do much more to support the eradication of this dreadful disease, which is now within our grasp? It would be nothing short of enlightened self-interest. The West is fast becoming a hospitable climate for the malaria mosquito and the mosquito that spreads dengue fever." And **Lord Collins** noted that: "we need to continue to raise awareness of the intersection between global health and climate change on the global stage, while working to improve climate resilience in healthcare systems and ensuring that climate-sensitive diseases such as malaria are factored into health programmes. We know that malaria is a climate-sensitive disease, threatening hard-won progress in many areas."



Lord Purvis speaking in the House of Lords on the impact of ODA cuts to NTDs

Lord Purvis spoke about NTDs: “On climate, no doubt the Minister will refer to the £100 million of UK funding announced at COP 28; I am sure that is in his contribution. He will cite the £18 million for an innovative new programme to adapt and strengthen health systems. I suspect what he will not say is that the cuts for neglected tropical diseases and cuts in health systems made prior to that included a 95% cut for neglected tropical diseases and health systems, where the UK had led a global flagship programme on transition and climate. We know that one of the impacts of climate change is the increase in disease and those debilitating conditions which the UK has cut aid on, so there is little point in issuing press releases announcing £100 million extra, where just a few months before, £150 million had been cut from health systems.”

Responding to the debate, Minister **Lord Benyon** noted:

“I am conscious that I want to address malaria. We are making a range of investments to fight malaria, which include our £1 billion contribution to the seventh replenishment of the Global Fund. This supports vital tools in combating malaria, including the distribution of 86 million mosquito nets, 450,000 seasonal malaria chemoprevention treatments, and treatment and care for 18 million people—but the future is where the benefits really lie. We are funding R&D support on next-generation bed nets and vaccines and are supporting research that has paved the way for the rollout of RTS,S and R21 malaria vaccines, mainly targeting children under five who are at much greater risk of malaria. Additionally, we have supported the rollout of these vaccines through our £1.6 billion funding to GAVI, including for further clinical trials. This is really important work and, with our biotech industry and ability to move fast on vaccines, we can benefit from some of the tragedies we have had in recent years, such as Covid, and see real benefit to the world in what we are delivering.”

In January, Vice-Chair **Lord Trees** led a debate on infectious disease threats to UK biosecurity, including human, animal, and plant health, in an age of globalisation and climate change. Opening the debate, Lord Trees spoke of climate change as one driver of changes in infectious disease geography, noting that the mosquito-transmitted dengue fever virus is a major potential disease threat to the UK, and highlighting the importance of a OneHealth approach. Vice-Chair **Baroness Hayman** also raised dengue and the need for global responsibility: “We cannot protect ourselves totally by putting up barriers. The burden of many diseases...is being felt not in the future... but in the here and now in parts of Africa and Asia, where they are spreading”. Member **Lord Browne of Ladyton** addressed the impact of climate change on incidences and the geographic spread of malaria and dengue: “These are not merely warnings of a possible dystopian future, but something that already is crystallising into observable reality”.

Oral Questions in the Commons

In December’s Foreign, Commonwealth and Development Office Questions, Vice-Chair **James Sunderland MP** asked how the UK is the UK is supporting malaria eradication following the publication of the World Malaria Report which showed the number of malaria cases and deaths remaining above pre-pandemic levels. Responding, Minister **Andrew Mitchell MP** pointed to the important role that scientific expertise is playing in the fight against malaria, including the development of the RTS,S and R21 malaria vaccines, and also to the UK’s continued support for the Global Fund to Fight AIDS, Tuberculosis and Malaria, which helps to deliver critical bed nets and seasonal malaria chemoprevention treatment.



James Sunderland MP asking a question on malaria in FCDO Questions

In January’s Foreign, Commonwealth and Development Office Questions, **Wendy Morton MP** asked about the UK’s support for malaria eradication through Gavi, the Vaccine Alliance, highlighting the recent pre-qualification of the R21 malaria vaccine. Responding, Minister **Andrew Mitchell MP** spoke about his recent visit to the Jenner Institute at Oxford to meet the remarkable people who had worked so hard to develop that vaccine.

Oral Questions in the Lords

On World NTD Day, Co-Chair **Lord Trees** asked about the UK’s commitment to EU Horizon research funding which has been hugely valuable in supporting British scientists at our world-class biomedical institutions to collaborate with Asian, African, South American, and European scientists to tackle NTDs and diseases such as malaria which threaten the most disadvantaged populations in the world and also the UK’s own public health. Responding, Minister **Viscount Camrose** confirmed that the UK’s associate membership of Horizon would give access to these sorts of Horizon calls.

Written Questions

A number of Members laid written questions on a range of topics, including:

- **Lord Alton** on what action the UK is taking to address the continuing health crises in Sudan and South Sudan, particularly given the worsening malaria outbreaks in those countries.
- **Baroness Ritchie** on the impact that the development of a malaria vaccine by the Oxford-based Jenner Institute will have on saving lives around the world.
- **Baroness Ritchie** on funding for Gavi, the Vaccine Alliance, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and Unitaid over their next funding cycles to ensure that vaccines and other life-saving tools can be delivered at scale.

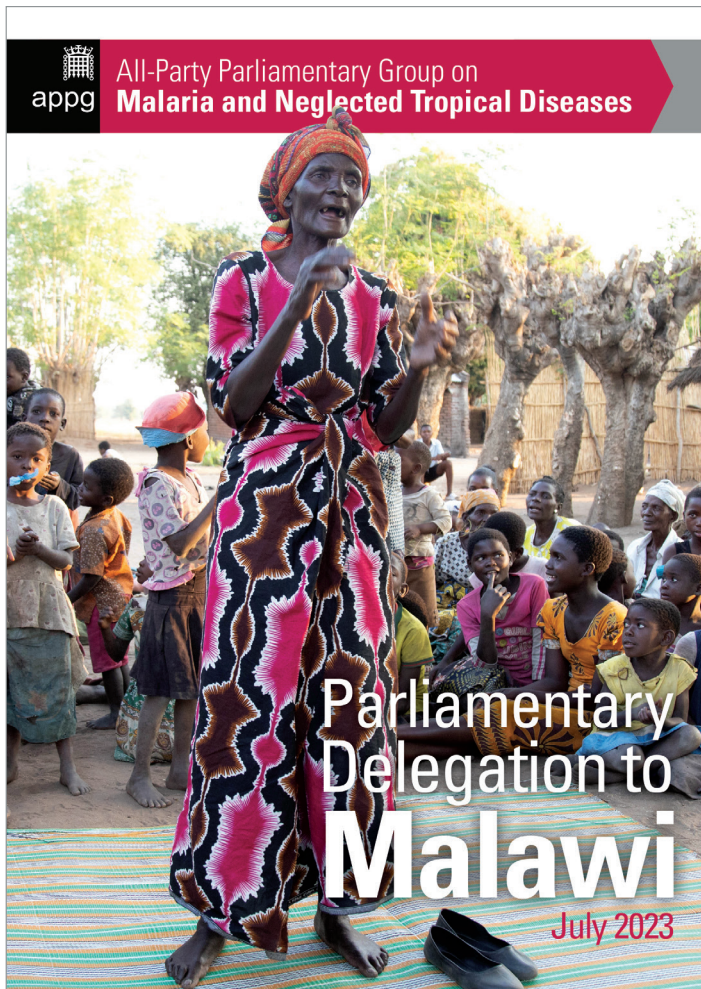
REPORTS

Malawi

Last July, Co-Chair **Catherine West MP**, Vice-Chairs **Tan Dhesi MP** and **James Sunderland MP**, and Member **Patrick Grady MP** visited Malawi to see the impact of malaria and NTDs, the important work being done by government, partners, and local communities to fight these diseases on the ground, and the huge role of scientific research in finding innovative ways to tackle disease and overcome threats to progress.

The delegation visited Mitundu Community Hospital to learn about the roll-out of the RTS,S malaria vaccine pilot programme, Salima to meet some of the inspiring health workers and patients who had been at the forefront of the successful elimination of trachoma as a public health problem in Malawi, Balaka to learn about the indoor residual spray (IRS) campaign supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria, and the Malawi Liverpool Wellcome Programme in Blantyre to meet with scientists and researchers working across global health.

The APPG has now published a report of the delegation visit, which you will be able to read on the APPG's website shortly.

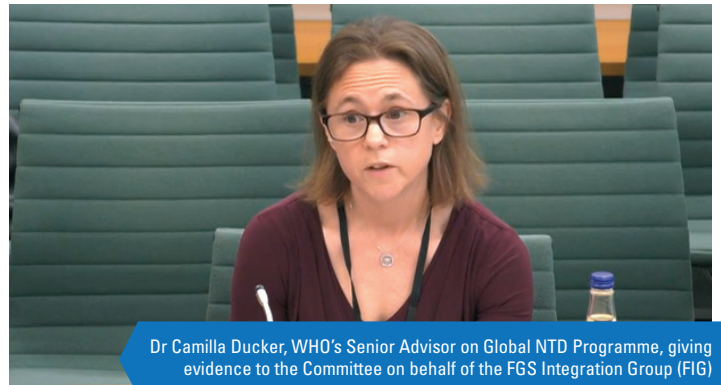


International Development Committee report

In January, the Commons' International Development Committee published a report following its inquiry into the Foreign, Commonwealth and Development Office's approach to sexual and reproductive health. The report included a chapter on female genital schistosomiasis (FGS), a painful and debilitating, yet treatable NTD, which affects up to 56 million women and girls. FGS is caused by parasitic worms, transmitted to humans through snails that live in lakes, rivers, and ponds, and is linked to a lack of access to safe, clean water, good hygiene and sanitation facilities, and quality, affordable healthcare services.

The Committee recommended that programming and care for FGS should be integrated into broader sexual and reproductive health and rights (SRHR): "FGS is best tackled through an integrated approach with wider SRHR programming, as well as with other areas of programming such as education, WASH, and HIV and AIDS. The UK should integrate female genital schistosomiasis (FGS) care into its SRHR programming. This should include (a) improving access to adequate water, sanitation and hygiene facilities, (b) increasing girls' enrolment in education and supporting distribution of FGS medicine in schools, (c) distributing educational materials on WASH, and (d) considering integrating FGS and HIV and AIDS programming, including by discussing the integration of HIV and AIDS programming with FGS care with its multilateral partners, such as the Global Fund".

You can read the report, [here](#).



STATEMENTS

Following the publication of this year's World Health Organization World Malaria Report, our Co-Chair, **Catherine West MP** put out a statement on behalf of the APPG: "The UK's political leadership, funding contributions, and scientific innovations have historically been at the forefront of the fight against malaria. Yet this year's World Malaria Report from the World Health Organization indicates that progress continues to stall, with malaria cases on the rise and deaths remaining above pre-pandemic levels. Increasing drug resistance and emerging threats such as climate change are threatening to reverse the great strides taken towards the eradication of this deadly disease. We cannot let years of progress go to waste. The UK must continue to work with its global allies to get the world back on track for meeting our 2030 goals".

ARTICLES

The role of the UK in ending malaria and NTDs

Following on from his Westminster Hall debate, **Patrick Grady MP** wrote in Parliament Politics:

“When we talk about malaria and Neglected Tropical Diseases (NTDs), as we did in a Westminster Hall debate on 8th January, we are not just talking about a group of 21 diseases that exist in test tubes or petri dishes in a lab somewhere. We are talking about diseases that are having a daily impact on the lives of 1.7 billion people – nearly one in five around the world. They can cause immense suffering, disability, disfigurement, and can often be fatal. In many ways, it is not just the diseases that are neglected – the people affected by them are also, by definition, being neglected.

On Monday 30th January, we will mark World NTD Day, a day designated by the World Health Organisation to raise awareness of the challenge and opportunity we have to eliminate many of these deadly diseases. This year’s theme is “unite, act, eliminate”, and challenges decision-makers and those in positions in power to work together and mobilise the resources necessary to eliminate malaria and other neglected tropical diseases.

The evidence shows that it is the poorest, most vulnerable, marginalised and remote people and communities, and particularly women and girls that are affected most by these diseases. Schistosomiasis, for example, can lead to female genital schistosomiasis, with an estimated 56 million cases worldwide, which can triple the risk of HIV and cause infertility, ectopic pregnancy, and in some cases maternal death.

So the human cost of these diseases is incredibly high. Last year, a cross-party group of MPs visited Malawi with the All-Party Parliamentary Group on Malaria and NTDs, to see for ourselves the impact of these diseases and efforts to overcome them. In the Salima district, we met a number of people who had lived with trachoma, a bacterial infection which can cause eyelashes to draw in and can damage eyesight and cause blindness. People affected can lose their independence, and their family and friends have to dedicate time and resources caring for them in turn. But caught early, trachoma can be treated with antibiotics or surgery. It can be prevented with good water and sanitation for health practices, and – and this was the key lesson from our visit – it can be eliminated altogether.

The people we met had been affected by trachoma, but interventions – supported by Queen Elizabeth Diamond Jubilee Trust Trachoma Initiative – have helped restore their sight, and since 2022 trachoma has been eliminated as a public health concern in Malawi – the first country in Southern Africa, the fourth country in the WHO Africa Region, and the 15th country globally to achieve this milestone.

So what we witnessed was not just individual transformation – men and women whose sight had been restored, who could live independently, but the community transformed, as they could go back to actively contributing, caring for grandchildren and helping with other tasks. And their families in turn benefit from that support, and can focus their time and energy back on education or employment.

The campaign group Uniting to Combat NTDs reckons that in some cases, investing just US\$ 1 in tackling these diseases can unlock US\$ 25 of benefits. A recent study by Deloitte showed that if Nigeria met its NTD elimination targets by 2030, it could add US\$ 19 billion to its economy.

So if we want to reach the Sustainable Development Goals, if we want to unlock wasted economic potential, change the nature of aid flows and release new forms of finance to help developing countries drive poverty reduction and grow their economies, then investing properly and effectively in tackling malaria and NTDs is essential.

The government must also make sure that it recognises the importance of a cross-sectoral approach, and ensure that there is coordination and collaboration between malaria and NTD programmes and existing investments in nutrition, education, WASH, disability inclusion, and maternal and child health. In all of this we have to address massive structural issues, including the climate emergency and the growing debt burden on developing countries.

Malaria, and many other tropical diseases, have been neglected for too long – and that means that the people most affected by these diseases have also been neglected for too long. But all the evidence shows that we can cure, prevent and ultimately eliminate these diseases. For relatively little cost, we can achieve a massive return on investment, both in terms of long-term savings of the costs of chronic treatment, but also in the actualisation of economic and social potential of people no longer confined to a sick-bed or condemned to an early death, but working for the betterment of their families and communities.”

You can read the article, [here](#).

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