

# INDIA DASHBOARD



# INDIA DASHBOARD 2020

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## India plans to achieve the 2030 goal of malaria elimination in a phased manner

At the 9th East Asia Summit (EAS) in 2014, the Honourable Prime Minister Shri Narendra Modi and 17 other Leaders committed to the goal of an Asia Pacific free of malaria by 2030 and subsequently endorsed the Asia Pacific Malaria Elimination [Roadmap](#) at the 10th East Asia Summit in 2015. In accordance with the World Health Organization (WHO) Global Technical Strategy for Malaria 2016-2030, the National Vector Borne Disease Control Programme (NVBDCP) launched the [National Framework for Malaria Elimination \(NFME\) 2016-30](#) and the [National Strategic Plan for Malaria Elimination](#) in India 2017-2022. These documents lay out the pathway to elimination. India has been an active participant in the Asia Pacific Malaria Elimination Network (APMEN) since joining it in 2015. APMEN, in collaboration with malaria programs, research, academic and implementing organizations, provides technical and operational support to countries to further the malaria elimination agenda.

**2015**

APLMA Leaders Roadmap endorsed by Prime Minister Narendra Modi

**2016**

National Framework for Malaria Elimination 2016-30 (NFME) launched

**2017**

National Strategic Plan (NSP) 2017-22 launched

**2019**

High Burden to High Impact (HBHI) started in 4 states of India

**2022**

26 States/Union Territories targeted for malaria elimination

**2024**

Reduce malaria incidence to less than 1 case/1000 across the country

**2027**

Indigenous transmission of malaria interrupted across the country

**2030**

Malaria-free certification from WHO



# KEY HIGHLIGHTS

The APLMA Leaders [Dashboard](#) tracks progress and achievements in malaria control and elimination for each of the 22 countries in Asia Pacific across the six milestones of the Roadmap. Figure 1 below shows a snapshot of the 2020 Dashboard for India.

	Status	Progress Towards Elimination			Unite national efforts and regional action		Map, prevent, test and treat the disease everywhere		Ensure high quality malaria tests, medicines, nets and insecticides	Improve targeting and efficiency to get the most impact	Mobilize domestic financing and leverage external support	Innovate for elimination
Country	Country program status	Indigenous malaria deaths 2019	Indigenous malaria cases 2019	Administrative units free of malaria (%)	Functional elimination task force (or equivalent) in place	Costed malaria elimination plan in place and adopted	Case reporting from all providers	Legislation in place to make malaria a notifiable disease within 24-48 hrs	Formal mechanism in place to ensure quality of health commodities for the prevention, diagnosis and treatment of malaria and other priority diseases	Targeting interventions based on up to date malaria risk stratification	Elimination financing sustainability plan developed	Innovative tools/ approaches supported or implemented
India	Moving to Elimination	▼ 77	▼ 338,494	0			No date set <sup>1</sup>	No date set <sup>1</sup>				

Figure 1: APLMA APMEN Leaders Dashboard 2020

## ON TRACK TO ELIMINATION

India has made impressive gains in the fight against malaria and has seen a sharp decline of 60% in number of confirmed malaria cases in 2019 compared to 2017 (See Figure 2). The WHO has identified India as one of the few countries which has shown a consistent decline in the malaria burden at a time when global progress against malaria has been plateauing.

### Malaria cases and deaths

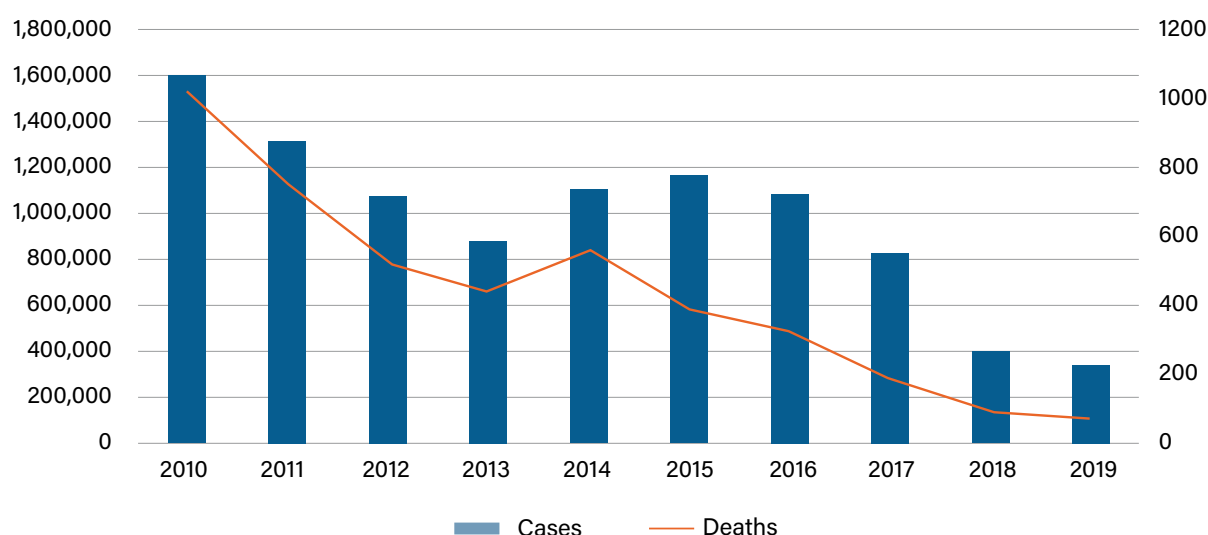


Figure 2: Malaria cases and deaths in India (Source: WHO World Malaria Report)

Strong political commitment and increase in domestic funding, coupled with scaling up of testing, treatment and vector control efforts, improved surveillance, training health workers to test all fever cases, have been key in achieving this impressive decline.

# KEY HIGHLIGHTS

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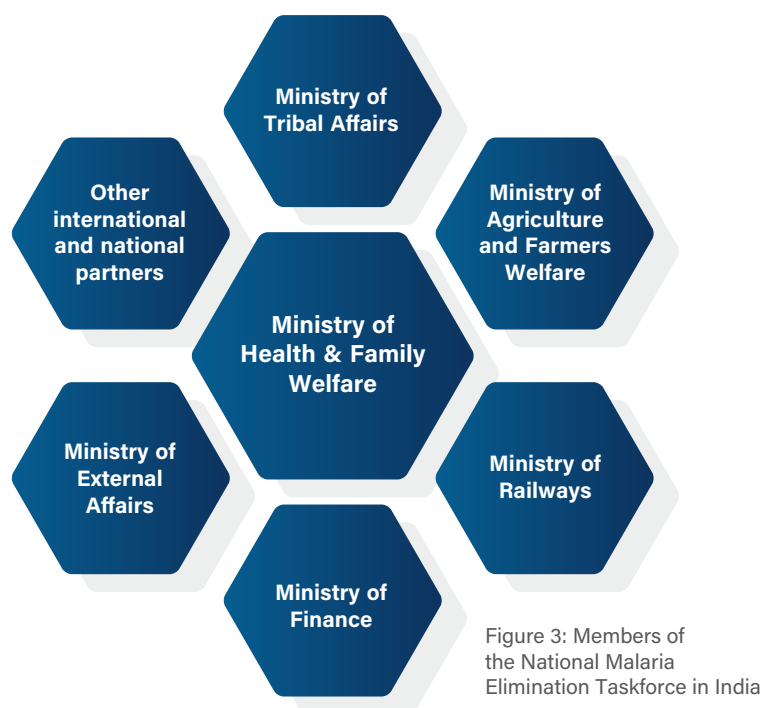
## WHOLE OF SOCIETY EFFORT

### National Malaria Elimination Taskforce

The National Malaria Elimination Taskforce, headed by the Ministry of Health & Family Welfare (MoHFW), was formed with representatives from different government departments, private sector and civil societies (See Figure 3). It is mandated to meet at least twice a year to review progress, assess gaps in implementation, provide guidance for policy planning and implementation, identify areas of coordination and collaboration between different ministries and other stakeholders, mobilise funds and other resources.

Various ministries are engaged as part of the Task Force. The Task Force also includes representatives from the WHO, the Global Fund, the World Bank, the Indian Council of Medical Research (ICMR), NGOs and the military. With the presence of the Indian Medical Association and representatives from the corporate sector on the Task Force, efforts are underway to include the private sector in the fight against malaria.

In addition to a National Task Force, states, and in some cases malaria endemic districts, have established task forces to oversee sub-national progress. As India progresses steadily towards malaria elimination, the National and State Task Forces will continue to play a greater role in development and implementation of the elimination strategy.



### Malaria Elimination Research Alliance (MERA)

ICMR launched the Malaria Elimination Research Alliance (MERA) India in 2019 to 'identify, articulate, prioritise and respond to the research needs of the country in a coordinated and combinatorial way to eliminate malaria from India by 2030.' The aim of the alliance is to bring together researchers from ICMR, non-ICMR and other institutions and universities working on malaria research. A coordinated research approach will aid the national malaria program in developing malaria interventions and strategies.

# KEY HIGHLIGHTS

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## PROMPT AND TRAGETED SURVEILLANCE

The number of states declaring malaria as a notifiable disease has increased from 6 in 2017 to 15 states in 2018 and 27 states in 2019. Making malaria notifiable at sub-national level is key to the phased approach of elimination that India has adopted and is an important step in developing strong surveillance systems for appropriate response.

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## INCREASED DOMESTIC FINANCING

In 2019, the Government of India increased funding by more than 25% for the NVBDCP and increased support as a donor to the Global Fund to Fight AIDS, Tuberculosis and Malaria by committing USD 22million towards Global Fund's Sixth Replenishment. India's support to the Global Fund demonstrates political will, leadership and commitment towards achieving Universal Health Coverage. As one of the leading emerging economies of the region, India's international and domestic financing efforts can serve as a push for other nations in the region to increase their commitment towards financing health outcomes.

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## PROTECTING THE VULNERABLE

Tribal communities in India predominantly live in remote, hilly, forested areas and have limited access to healthcare services. While tribal communities constitute only 8% of the population, they account for 30% of India's malaria cases and 50% of malaria deaths. India's malaria response has shown a renewed focus on tribal communities. The Tribal Malaria Action Plan (TMAP), in the National Strategic Plan for Malaria Elimination focuses on reducing the malaria burden in tribal districts in India. It prioritises the 152 districts in India having more than 25% tribal population. In 2020, the Union Minister of Tribal Affairs, Shri Arjun Munda,

launched the e-portal on tribal health named '[Swasthya](#)'. The portal hosts a Dashboard which provides district level data on demographics, disease status (including malaria), a list of public health facilities, human resources and health and nutrition profiles. It also provides information on innovative practices, case studies and best practices from different parts of India to facilitate exchange of information, evidence and expertise. Protecting the tribal communities is a good step towards Universal Health Coverage of malaria services and ensuring access to health services and commodities for the most vulnerable communities.

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## HIGH BURDEN HIGH IMPACT (HBHI) APPROACH

India has adopted the [High Burden High Impact approach](#) in 2019 with support from WHO in the four high burden states of Madhya Pradesh, Jharkhand, Chhattisgarh, and West Bengal. So far, two training workshops were held to orient the staff on the HBHI approach. Malaria situation analysis, along with operational plans were presented at the workshops which were then finalised with support from NVBDCP and WHO.

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India's recent progress against malaria is exemplary. Read more about progress against malaria in Indonesia and in the Asia Pacific Region [here](#).