

**Working Together to Eliminate Malaria in Myanmar
August 3, 2015 in Washington, D.C., USA**

Conference Statement

On August 3, 2015, an exceptionally diverse array of Myanmar government and non-government representatives met in Washington, D.C. to discuss shared efforts to eliminate malaria. The parties represented included: the office of the President; the Ministry of Health; military medical experts; members of Parliament; the main opposition party, the National League for Democracy; and representatives of Shan, Karenni, and Karen health organizations.

This unprecedented dialogue, convened by the Center for Strategic and International Studies' Global Health Policy Center, the American Society of Tropical Medicine and Hygiene, and the Institute for Global Health at the University of Maryland School of Medicine, also featured the main external partners actively supporting scientific research, capacity building, and evolving malaria control activities in Myanmar. These include the U.S. government, including the President's Malaria Initiative, the U.S. Pacific Command, the Centers for Disease Control and Prevention, the National Institutes of Health, and the Uniformed Services University of the Health Sciences; the World Bank; the Global Fund to Fight AIDS, Tuberculosis and Malaria; the Bill & Melinda Gates Foundation; and the Asia Pacific Leaders Malaria Alliance. The U.S. Ambassador to Myanmar, the Myanmar Ambassador to the United States, and the World Health Organization each offered active support and guidance to the conference.

Several key points of consensus emerged from these rich discussions:

1. **Myanmar has seen significant progress in controlling malaria.** Prevalence and mortality have declined in recent years. The government has embraced elimination as a goal and is developing a costed national plan. External donors have committed significant resources. Myanmar, as a member of the East Asia Summit and the Association of Southeast Asian Nations, has committed to the ambitious goal of a malaria-free Asia Pacific by 2030.
2. **Still, significant challenges remain. The burden of malaria in Myanmar is among the highest in the Greater Mekong sub-region, and artemisinin-resistant malaria poses a rising threat.** Malaria imposes serious burdens on Myanmar's economic growth and the health and vitality of all people of Myanmar. These burdens may also pose risks regionally and globally: with a sustained and successful effort in Myanmar, it will be possible to eliminate malaria in Southeast Asia and reverse the spread of resistance, which is a global threat to malaria control.
3. **As it reemerges from years of isolation and makes social and economic progress, Myanmar also confronts special challenges in building essential capacities to manage and coordinate diverse, fragmented malaria programs.** A top priority in the next few years should be to build durable

capacities within Myanmar government and non-government institutions. That includes investing in skilled staff, managerial expertise, scientific research, laboratories, and data systems.

4. **Success in eliminating malaria in Myanmar relies on reaching *all people in Myanmar*:** with effective and targeted deployment of malaria prevention and surveillance tools, along with expedited, quality diagnosis and treatment of those with malaria. This includes ethnic, migratory, military, and border and other hard-to-reach populations.
5. **Success requires expanded cooperation among governmental and non-governmental organizations, civil and military medical expertise, ethnic health organizations, and technical and donor partners.** It also requires increased cooperation and communication across political and cultural lines, rising above tensions to work together in achieving a shared commitment to eliminating malaria. Ongoing scientific research collaborations engaging civilian, military, public, and private partners provide a model for the larger goal of malaria elimination.
6. **What did the August 3rd meeting accomplish?** By coming together in good faith in Washington, D.C., to commit to working collectively to eliminate malaria, the diverse Myanmar participants and their scientific, public health, and development partners illuminated one very powerful reality: eliminating malaria in Myanmar has the potential to unify Myanmar society and serve as a catalyst for social change. There is a baseline consensus on the way forward that better informs all colleagues about the significance of investing in malaria control and elimination to promote health in Myanmar as well as the surrounding region. This consensus transcends political and cultural differences, and attracts significant support from external partners. This unity of effort needs to be carefully consolidated and sustained.
7. **Donors noted their continued commitment** to supporting the efforts in Myanmar, noting the critically important opportunity for tackling malaria, and how that will help advance universal health coverage. They also noted the importance of increased domestic financing, improved coordination, data sharing, efficiency in using resources, and sustained progress in implementing existing grants. This is critical to attracting additional resources in the future.
8. **The platform for dialogue created on August 3rd is an important first step.** It is the shared opinion of the participants that the dialogue should be carried forward urgently, most immediately in Myanmar with broadest participation, to focus on concrete priority challenges. It holds the promise of helping achieve a malaria-free Myanmar, a malaria-free region, and ultimately a malaria-free world.

Meeting Participants

Sahil Angelo
Center for Strategic & International Studies

Colin Chinn
U.S. Pacific Command

Thomas Cullison
Uniformed Services University of the Health Sciences

Karen Goraleski
American Society for Tropical Medicine & Hygiene

Paul Hamilton
PATH

Murray Hiebert
Center for Strategic & International Studies

Tin Maung Hlaing
Myanmar Directorate of Defense Medical Services

Thein Thein Htay
Myanmar Ministry of Health

U Kyaw Myo Htut
Myanmar Embassy

Fang Huang
Chinese Center for Disease Control & Prevention

Deepika Kandula
Clinton Health Access Initiative

Thomas Kanyok
The Bill & Melinda Gates Foundation

Saw Tamala Khin
Karen Department of Health & Welfare

Sai Laeng
Shan State Development Foundation

Nay Lin
Myanmar Parliament

Saw Lwin
Myanmar Directorate of Defense Medical Services

Htin Lynn
Myanmar Ministry of Foreign Affairs

Alan Magill
The Bill & Melinda Gates Foundation

Richard Moore
Asia Pacific Leaders Malaria Alliance

J. Stephen Morrison
Center for Strategic & International Studies

Bernard Nahlen
The President's Malaria Initiative

Mya Sapal Ngon
The President's Malaria Initiative – Burma

Aung Moe Nyo
Myanmar Parliament

Myaing Myaing Nyunt
University of Maryland Institute for Global Health

Khoon Philip
Karenni Mobile Health Committee

Christopher V. Plowe
University of Maryland Institute for Global Health

Hnin Hnin Pyne
World Bank

Eh Kalu Shwe Oo
Karen Department of Health & Welfare

Larry Slutsker
U.S. Centers for Disease Control and Prevention

Silvia Spring
U.S. Department of State

Todd Summers
Center for Strategic & International Studies

Nu Nu Tha
Myanmar President's Office

Kyaw Zin Thant
Myanmar Ministry of Health

Aung Thi
Myanmar Ministry of Health

Khine Zar Win
Myanmar Ministry of Health

Than Win
Myanmar Ministry of Health

Tin Myo Win
National League for Democracy

Susan Youll
The President's Malaria Initiative

Tim Ziemer
The President's Malaria Initiative