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Resolution adopted by the General Assembly

[without reference to a Main Committee (A/58/L.53 and Add.1)]

58/237. 2001–2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa

The General Assembly,

Recalling its resolutions 49/135 of 19 December 1994, 50/128 of 20 December 1995, 55/284 of 7 September 2001 and 57/294 of 20 December 2002 concerning the struggle against malaria in developing countries, particularly in Africa,

Bearing in mind the relevant resolutions of the Economic and Social Council relating to the struggle against malaria and diarrhoeal diseases, in particular resolution 1998/36 of 30 July 1998,

Taking note of the declarations and decisions on health issues adopted by the Organization of African Unity, in particular the declaration and plan of action on the “Roll Back Malaria” initiative adopted at the Extraordinary Summit of Heads of State and Government of the Organization of African Unity, held in Abuja on 24 and 25 April 2000,¹ as well as decision AHG/Dec.155 (XXXVI) concerning the implementation of that declaration and plan of action, adopted by the Assembly of Heads of State and Government of the Organization of African Unity at its thirty-sixth ordinary session, held in Lomé from 10 to 12 July 2000,²

Also taking note of the Maputo Declaration on Malaria, HIV/AIDS, Tuberculosis and Other Related Infectious Diseases, adopted by the Assembly of the African Union at its second ordinary session, held in Maputo from 10 to 12 July 2003,³

Recognizing the linkages in efforts being made to reach the targets set in the Abuja Summit as necessary and important for the attainment of the “Roll Back Malaria” goal and the targets of the United Nations Millennium Declaration⁴ by 2010 and 2015, respectively,

¹ See A/55/240/Add.1

² See A/55/286, annex II.

³ A/58/626, annex I, Assembly/AU/Decl.6 (II).

⁴ See resolution 55/2.

Also recognizing the urgent need for scaling up national malaria control programmes if African countries are to meet the intermediate target set by the Abuja Summit for the five-year period of 2000–2005,

Further recognizing that malaria-related ill health and deaths throughout the world can be eliminated with political commitment and commensurate resources if the public is educated and sensitized about malaria and appropriate health services are made available, particularly in countries where the disease is endemic,

Emphasizing the importance of implementing the Millennium Declaration, and welcoming in this connection the commitment of Member States to respond to the specific needs of Africa,

Commending the efforts of the World Health Organization and the United Nations Children's Fund and other partners to fight malaria over the years, including the launching of the Roll Back Malaria Partnership in 1998,

1. *Takes note* of the report of the Secretary-General,⁵ and calls for support for the recommendations contained therein;

2. *Calls upon* the international community to continue to support the "Roll Back Malaria" partner organizations, including the World Health Organization and the United Nations Children's Fund, as vital complementary sources of support for the efforts of malaria-endemic countries to combat the disease;

3. *Appeals* to the international community to ensure that the Global Fund to Fight AIDS, Tuberculosis and Malaria receives increased funding to support sound national plans to control malaria in endemic countries to be implemented in a sustained and equitable way that contributes to health system development;

4. *Urges* malaria-endemic countries to increase domestic resource allocation to malaria control;

5. *Encourages* all African countries that have not yet done so to implement the recommendations of the Abuja Summit to reduce or waive taxes and tariffs for nets and other products needed for malaria control, both to reduce the price of nets to consumers and to stimulate free trade in insecticide-treated nets;

6. *Calls upon* the international community to support ways of stimulating the development of manufacturing capacity of insecticide-treated nets in Africa and, in this connection, to encourage and facilitate the transfer of technology needed to make insecticide-treated nets more effective and long-lasting;

7. *Recognizes* the importance of the development of effective vaccines and new medicines to prevent and treat malaria, and the need for further research, including through effective global partnerships such as the various malaria vaccine initiatives and the Medicines for Malaria Venture, in securing their development;

8. *Reiterates* the need for expanded public-private partnerships for malaria control and prevention, and in this context urges petroleum companies operating in Africa to consider providing polymer for the manufacture of mosquito nets at reduced prices as a contribution to rolling back malaria in Africa;

9. *Urges* the pharmaceutical industry to take note of the increasing need for effective combination treatment for malaria, particularly in Africa, and to form

⁵ A/58/136 and Corr.1.

additional alliances and partnerships to help to ensure that all people at risk have access to prompt, affordable and quality treatment;

10. *Requests* the Secretary-General, in close collaboration with the World Health Organization, developing countries and regional organizations, including the African Union, to conduct in 2005 an evaluation of the measures taken and progress made towards the achievement of the mid-term targets, the means of implementation provided by the international community in this regard and the overall goals of the Decade, and to report thereon to the General Assembly at its sixtieth session;

11. *Also requests* the Secretary-General to report to the General Assembly at its fifty-ninth session on the implementation of the present resolution, under the agenda item entitled “2001–2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa”.

*78th plenary meeting
23 December 2003*