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RAYMOND CHAMBERS: Excellencies, ladies and gentlemen, on behalf of the Secretary-General and Peter Chernin, my partner and the Chairman of Malaria No More, welcome to United Nations and the 2008 MDG Malaria Summit. We apologize that we couldn't accommodate everyone, because of space limitation. Also because, many of the guests have to leave by 2:00pm, we have reduced the time of the program by one hour. Therefore, Peter and I will ask everyone speaking to try and keep their comments as quickly as possible and try and average out to one minute. So, if somebody speaks three minutes, then two others have to speak 25 seconds.

PETER CHERNIN: And we're both from New York, Ray so we're going to be fairly rigorous about enforcing this, right?

RAYMOND CHAMBERS: [Laughs] So, thank you again for being here and thank all of you for all you've done in many ways to bring us to this point with malaria. Bill Gates, one of our honored guests today, has called malaria the worst on the planet. It's easy to see why. Malaria kills more children in Africa than any other disease and it affects half the world's population, \$3.3 billion people and it costs the continent of Africa, more than \$30 billion dollars a year in health costs and lost economic opportunity.

But we're not here just because malaria is a massive problem. Malaria is also a massive opportunity. No other issue in the world offers the chance to save lives or improve

livelihoods on the same scale. We have the elements of success in the room today. One, a plan, two, major new resources, and three, leadership to get the job done. First the plan. We are here to debut a hard-nosed action plan called the Global Malaria Action Plan, prepared by the rollback malaria partnership that sets two ambitious short-term goals that set the stage for eventual eradication. Goal one, in response to the Secretary-General's call for universal coverage by 2010 of bed nets, spraying, medication. We're now really focused on accomplishing that goal and it's only 26 months from now.

Goal two and most importantly, because ending deaths of children as quickly as possible is our main objective. Our goal is to reduce deaths to near zero by 2015, which would be absolutely stunning, if we could reduce deaths in Africa by 2015 to near zero. By keeping the pressure on, we can literally prevent the loss of millions of innocent children in the next seven years. Now, what this means statistically, if we accomplish our goals by 2015, all mortality of youngsters in Africa will decrease by 20-percent and it's possible at the same time to decrease maternal mortality by 10-percent.

PETER CHERNIN: As Ray said, you know the first thing we had to have is a plan and I think Ray went through very well just then. The second element we needed were new resources and we needed dramatic increases in funding to fight this disease. You know and frankly, I'm truly stunned by how

far we've come and that's what makes today so exciting. When Ray and I formed Malaria No More at the White House Summit a little less than two years, I think only a few hundred million dollars were being spent annually on malaria. And I think what's so exciting about today and thanks to the remarkable efforts of almost everyone in this room today. We're here to announce today, more than \$3 billion dollars in new funding for malaria. It's truly a landmark event.

And I think through the efforts of everyone in this room, we really have now put malaria at the forefront of the global health initiative. So, we have a plan, we now have resources. The third thing and probably the most important, is we need leadership. And in this room, we do have today the global leadership to attack this disease. We have remarkable array of heads of state from malaria endemic countries. We have health and banking institutions that are helping us finance the malaria fight. We have some of the largest and most forward-thinking private sector companies in the world today and we have some great announcements there. And finally, we have faith groups and NGOs who actually do the work.

The other thing I think the other piece of fantastic news that we have today in addition to the increased funding, is we just had major statements from both presidential candidates today. Senators Obama and McCain both made major malaria statements today, I think particularly gratifying with

Senator Obama calling for the eradication of malaria by 2015. So I think what that guarantees to us is that, we've had such remarkable support from President Bush and the current administration. And I think what this guarantees us is that, whoever the new president may be, and from whatever party, it shows that malaria is not a partisan issue and that we will continue that support.

So, but I think— I think what's important is let's set a little context before we start. And I think it's important to recognize that malaria is not an isolated disease. It's both a cause and a consequence of extreme poverty. And I can't think of anyone who's fought more concretely and more specifically and with greater courage and dignity for poverty eradication in Africa than Bono. And so Bono, if we could maybe get you to talk a little bit about the context and just give us a few words? Which I know you're good at.

BONO: Asking Irish people to do the few words thing is really risky. But, I think I might be able to keep to my minute. Is that it?

PETER CHERNIN: That's it. And I'm right behind you.

BONO: I'd like to say I'm not here as a rock star, really I'm here as a fan. And I'm fan of malaria no more and what you two gentleman have done is extraordinary. I'm a great fan of Africa, in particular. I'm a great fan of these leaders, credible, Jakaya Kikwete, President Kufuor, these are— I'm in their fan club. And I'm a great fan of the

physicians and the scientists who gathered on this problem. Bill Gates, he's a rock star. You know Jeffery Saxal [misspelled?], all the people who've ganged up on the problem. People in red who've campaigned for global fund money, started out with AIDS but it's going to malaria now. Christy Turlington, I'm a great fan. Friends, Richard Curtis, grades of a big Englishman, says he's not English, he's Australian.

I am very excited about the announcements that have been made my Senators Obama and McCain that's really significant. Gordon Brown is an extraordinary man and he's been at this for a long time and I want to give him a special shout out, I don't know if he's here. There he is. There he is. Who else is here? There are, you know some extraordinary- there's Bill now. So, I mean really what's exciting about malaria is that it actually proves the case that if we get together- by the way, greatest singer in the world, [inaudible].

So it's just a momentum. It just shows what's possible, when you match leadership with funding, a strategic plan and so I'm just going to shut up at that and just say- what's the next disease, pneumococcal? Rotavirus? Because, you know this malaria thing is extraordinary and it just shows what else we can do, thank you.

RAYMOND CHAMBERS: Thank you, Bono. We're going to dive right into the commitment to unite around a common plan.

The Global Malaria Action Plan has short term, mid term and

long term objectives. We'd like to turn to Doctor Awa Coll-Seck, the executive director the Rollback Malaria Partnership. Doctor Coll-Seck, would you tell us why this plan is so important and what will it cost?

AWA COLL-SECK, M.D.: Maybe it will not be one minute for me, if you can act a little bit, because I want to tell you that this plan is really unique. Because it's the first comprehensive real plan to control malaria in the near future but also to eliminate malaria everywhere it is possible and really prepare the way for eradication. This plan is also unique, because it's a result of a consensus done between partners of the Rollback Malaria Partnership. It's a lot of them and a lot of them are here today. And I would like to thank them, because if you have a plan today, it's because of them.

It's because of the countries, it's because of all the actors who have been involved, and you too are part of that. I would like also to add another thing, is that this plan is not a dream. It is built on real things, experience in the field, success of country like Tanzania and Rwanda. All this are concrete things and it is why we are very proud to have this plan, because it's really an action plan. It's also a global plan. It's is reaching not only Africa, because everybody's focusing in Africa but also in Asia, Latin America. It is a real global plan. I would like to tell you that, this plan also is a bridge between donors towns like

here, New York, D.C., Seattle, Paris, London, with the families there in the field, in the villages.

It's also a bridge between commitment and delivery. It's a bridge between what we can say— commitment but also action. It is why this plan is really unique and it's the only plan we have today where all the stakeholder agree to work around this plan to end malaria. I would like now to respond to your question again on the costs. We need a lot of commodities and a lot of support to countries. And all this development in the plan you have in front of you.

And I would like to tell you that it will cost something for 2009, like 5.3 billion. For 2010, we are expecting 6.2 billion. And after it will go down around 5 billion a year from 2011 to 2020. This plan is not a short term one; it is a plan for short term, medium term and long term. This is also important to add that through this money, we would like also to see money for research and development. We need new tools; we need new tools for treatment and for prevention.

And I would like finally to say that it is not really a lot, if we are speaking of 5 billion a year, it is really a cost effective intervention. We need to work together to raise this money to be able to support country, to scale up and have more successes. This is why I am sure why we are here today and thank you so much to give me the opportunity really, to share with you this experience. Thank you.

PETER CHERNIN: Thank you so much Doctor Cull-Seck. You know I think it's important that one of the truly great catalysts in the progress we've made over the last year or two, has been the Bill and Melinda Gates Foundation and we're so grateful to have Bill Gates here with us today. And I know, Bill you've— the Gates Foundation has been such a big supporter of the Rollback Malaria Partnership in getting this plan done. And maybe you could help us put this plan in context and give us some indication why this plan is so important.

BILL GATES: Well, it's phenomenal to see the group gathered here and the attention getting to malaria. That is a real change from just a few years ago. And I think it's based on several things. It's based on the success stories; it's based on the innovation, it's based on the new resources and I'm certainly very enthused about the plan, this is a great plan. It's going to make huge difference and malaria's the disease that creates the most disease burden in many of these countries. And so the effect when you don't have these children suffering is that you free up resources, you allow them to live healthy lives and you get all these other positive effects that come in as health improves.

We've seen the numbers, one of the first countries that we went in with a comprehensive plan with indoor residuals spraying, bed nets and a countrywide intervention was Zambia. That started only about two years ago and we've

seen the childhood incidence malaria drop by 50-percent. And that's a really stunning thing to have that happen. Now, malaria's very tricky as you attack it with various tools, it has a way of changing, evolving around those tools, so just going in a little bit, actually can be counterproductive. You just get a better bug instead of the impact you want. So, you have to go in very, very aggressively and that's why the additional resources and commitments that are in this plan are a very key thing.

You know people are talking about how far we can go with this, eradication is a top challenge it should be in the long term plan. I'm not certain when we're going get there but I know this plan is the best path to take us in that direction.

RAYMOND CHAMBERS: Thank you, Bill. Doctor Margaret Chan is the Director General of the World Health Organization and a wonderful partner in our efforts. The World Health Organization just issued the World Malaria Report. Doctor Chan, why is so important to have accurate information to define the scope of the problem?

MARGARET CHAN, M.D.: Thank you, Ray. And first and foremost Peter and Ray, thank you for organizing this wonderful meeting and great honor to share the platform with so many of you and also the friends in the audience. Malaria is a very interesting disease. Let me give you a bit of a background. For decades, you know we have suffer a lot of

setbacks. And you know Mr. Bill Gates mentioned some and vaguely and let me be honest with you. Resistance of the parasite to the medicines that we've been using.

Fragmentation of activities. Weak institutional capacities in countries, pardon me for being so frank. And also in U.N. organizations, duplications.

But all these are changing. And that's why we are here today and this is what I call a billion dollar moment for a century old disease, why are we getting our eggs together now? Because it's a doable thing. We are driven by our commitment to support countries to achieve the millennium development goals. Goal number six. You know I'm happy to see Professor Sax here. You are a constant reminder of us that we need to do better. Not only with money but also to deliver results.

Now, to answer your question, you know Ray. We need evidence to substantiate the success or otherwise of our investment. Especially now, when we have so much more resources. Because you are accountable to your taxpayers. You are accountable to whoever you're getting your money to support the work of different countries. And accountability goes for all the stakeholders, the donor countries, the development partners, the recipient countries and all this civil society as well as U.N. organizations.

But the coming together of others, all of us through the Rollback Malaria Partnership. It's wonderful. But there

is a big gap in demonstrating whether or not we are going the right direction. If I tell you in the World Health Organization, we have 193 member states. Less than one-third of them have a decent, robust, health information system to capture data for us to verify successful otherwise. To guide policy, to guide our response. So, this is a big gap that we need to invest in. Other than the commodities. ACT medicine is important, bed net is important, indoor residual spraying with insecticide is important. Don't forget, the system that needs to capture information to verify to you to be accountable to you, whether we are doing our job well, whether we are investing in the right place.

So, once again, strengthening houses when we need manpower but don't forget the health information system. And that [inaudible] plans to work in a close partnership with all of you. We will continue to produce the World Malaria Report on annual basis. Why annual basis? A point statistics is not accurate. We need to monitor the trend over time and that we will see a difference. And we have started this, this year we will continue to do that with your support, with your help, we pledge to kill malaria.

RAYMOND CHAMBERS: Thank you, Margaret. The World Malaria Report cites statistics from 2006 and a lot has happened since 2006. But even from 2004 to 2006, bed net coverage increased eight-fold from 3-percent to 24-percent. Perhaps the largest procurer of bed nets is UNICEF and we have

here today another great partner, Anne Veniman, the Executive Director of UNICEF. Anne, can you tell us how the picture has changed?

ANNE VENIMAN: Thank you very much. 9.2 million children are dying in the world of largely preventable causes. 51-percent of those are in Africa, despite the fact that Africa only has about 15-percent of the world's population. Malaria is killing an estimated 20-percent of those. The good news is at least 15 countries in sub-Saharan Africa have shown at least a five-fold increase in net coverage since year 2000. UNICEF procures about 25-percent of the world's bed nets, 60 million bed nets have been procured by UNICEF since 2006. In 2008, we've procured 15 million nets so far, we'll procure an additional 12 million nets this year and we have a tender for 25 million additional nets to stimulate the manufacturers.

These nets are being distributed through an integrated community based approach, so that hopefully we can save the lives of more and more children and see those numbers continue to go down. Thank you.

PETER CHERNIN: Thank you, Anne. So now let's turn to Africa itself. And I think that some of the success stories we have emerging from some the most progressive countries in Africa in the last two years. There has been a lot what's inspired us to really think we can go all the way. And particularly a handful of countries. Ethiopia, Rwanda, Eretria have managed to cut malaria incidence and deaths by

more than 50-percent. And I think in some ways, the great leading example in Africa right now, has been Rwanda, due to the leadership of my good friend, President Paul Kagame.

And President Kagame was kind enough to play host to both my wife and I but more importantly, he and his country hosted my 21-year-old daughter for two months this summer and really remarkable experience for her. But Mr. President, you know Rwanda really has been the great dramatic success, cutting malaria incidence by I think more than 60-percent and cutting deaths by more than two-thirds, maybe if you can just give us a few minutes of how exactly you've achieved that in your country?

H.E. PAUL KAGAME, PH.D.: Well thank you, Peter. And I wanted to thank you Peter and Ray for your commitments as well as the head of the state and the government who are here and the partners in the crowd here. First of all, you every one of us is partners and for us, we did hard to what we were supposed to do and that was 2 million the recesses were evaded and the need to talk with this program. And three things as they mentioned, I- in the area of bed nets, indoor residual spraying and the treatment. These- and it was not just about talking of what we know what this can be, we went ahead and made sure that we worked with the rural communities. And made sure first of all they use the bed nets, because sometimes you distribute bed nets and in the end the people don't use them.

So, you got make sure you follow when you distributed a bed net so that they are actually being used and we were able to build on the local administration structures and they have walkers to actually ensure that that is the case. And also went ahead and used modernization campaigns in the rural areas so that people can report cases to the nearest health centers. And this was also done. And then we also made sure that our people followed up to make sure that spraying is also done.

And with this experience, therefore we have been able to prove that with the coincided effort, with the key players, the fought the war in the area of health and in times there were sources and the [inaudible] people themselves doing what they've been made to understand we work for them. We've seen exhorted results can be achieved like we have done in the rate of mortality and morbidity reducing that for children five and below to 64-percent in the- between 2005 and 2007.

So, these are real results, these are things that how happened and we were seeing that with the coordinated effort and harmonization of actions and activities, there's no doubt that we can get the results my country has already achieved and will continue to achieve in the near future.

RAYMOND CHAMBERS: Thank you, President Kagame. With what President Kagame said about what's happened in Rwanda and reductions in incidence and mortality by over 50-percent, it's answering some of the skeptical questions that have been

raised by the media, since the World Malaria Report was issued. Can you actually reduce deaths? Can you actually reduce incidence of malaria and we're seeing it. Living, tangible proof in Rwanda and also in Ethiopia and in Zambia, as Bill Gates referred.

So, we have here today, the Administer of Health, Minister Tedros, from Ethiopia. And Minister Tedros, what were the biggest challenges or challenge you faced, when you started doing this?

MINISTER TEDROS: Thank you very much. And I would like thank all partners like [inaudible], because as what Peter said, money is not the forefront, because of all the partners here. And I would like to thank all partners on behalf of RBM partnership, this is really exciting. Coming back to the question. I think the biggest challenge of all is full commitment. And Ethiopia, we actually started with that and we tried to address the commitment issue.

Once you're committed to ambitious targets, to making a difference, like what we have been saying, you know to elimination and eradication. I think that's the start, the political commitment. And with that comes candid assessment of your situation, especially your [inaudible] and trying to address that. And from that setting, ambitious targets like what I say, the elimination or eradication. After setting the targets, what we have done is we really started to scale up

base it on that. And we started to scale up on two areas, actually.

One, directly attacking malaria. Like for instance, a very ambitious target of distributing 20 million nets in two years, from 2005 to 2007. Which we did actually. On the other hand, scaling up in terms of building our institution and deploying, you know more than 24,000 [inaudible] in the front line of the grassroots that worked with the communities. And that took us to mobilizing communities.

The social mobilization is very important and with that partnership is very important to make a difference. And we believe that that's what made the Egyptian experience successful taking care of these three elements of the five and we believe that in a nation and beyond that eradication is possible. And I'm glad again to see how the world it is changing and how the paradigm is changing in relation to addressing the malaria problem and its [inaudible]. Thank you so much.

RAYMOND CHAMBERS: Thank you. Minister Tedros is also the chairman of the Rollback Malaria Partnership. In Zambia, there's been a great deal of progress and Minister Chitoeau [misspelled?], how would you describe the reasons for your success in Zambia?

MINISTER CHITOEAU: Thank you. Thank you, [inaudible] your excellencies distinguished partners. It really is an honor to be here this afternoon. In Zambia, we have been able

that by harnessing partnership, local and international, we can do a lot more. And this is a lesson we learned very early. We observed and we were guided by our political leadership. The excellencies, some of them seated in the front here. And about declaration, how do we implement this? We were able to leverage on this political leadership to get the partners, work around one national consensus arrived at plan.

Which is uncut in the national heel of the plan and malaria being a developmental subject that was uncut in the fifth national development plan. Your excellencies, we have been able to demonstrate that with a strong partnership, partners like World Bank was the program, the President's Malaria Program, Global Fund, Jake and many more. WHO, UNICEF and many others, we have been able to save 75,000 young live in Zambia since the start of this program. We have been able to demonstrate that malaria parasite in children has reduced by 50-percent. We have been able to show that severe anemia has reduced by 60-percent since 2008 Malaria Indicator Survey.

Your Excellency, more needs have been distributed protecting two-thirds of our women in Zambia from malaria. The fight goes one and we are confident with this partnership for us at country level Your Excellency, we are there to demonstrate that we can work that we can serve together, the many lives of our children and pregnant mothers. Thank you.

RAYMOND CHAMBERS: Now, we're running a bit behind schedule, so Peter and I would ask that all speakers try and condense and compact what they have to say so that everybody has a chance to speak. As the WHO World Malaria Report indicated, malaria is a global problem. Over 90-percent of the deaths occur in sub-Saharan Africa. But malaria is a problem all over the world. And we have here with us today, Doctor Fawk Ruden [misspelled?], the Chief Advisor in Bangladesh. And can you tell us what's going on in Bangladesh to combat malaria?

FAWK RUDEN, M.D.: Thank you. Thank you very much and it's a great honor and privilege to be in this distinguished gathering. Let me just start off by saying that Bangladesh has had malaria eradication programs in the 1960s. And quite a successful one at that point in time. But again, all experience shows and that successful effort is by one country, it is not adequate. And we saw it elapse of malaria in certain districts of Bangladesh in the 1980s. Therefore, we must have combined and sustained efforts had subluminal regional global levels to permanently eliminate this scourge.

What we are doing in Bangladesh now, is that we have [inaudible] our malaria epidemiology consultant system and established repeat response teams at national and district levels. We are also, are getting the support the NGOs in the private sectors, in this effort. We have procured about 1.2 million long lasting insecticide treated nets. And our

objective is to cover more than 40-percent of the poor households in the high-risk areas. And double up in partners, therefore all must come together really and respond with eloquent, timely and predictable funding to fight this global discouragement. And new innovative sources of finance must be there for be made available, so that we can eliminate this once for all. Thank you.

RAYMOND CHAMBERS: Thank you. Doctor Disylva is here, the Health Minister of Sri Lanka and they have deaths plummet from almost 700,000 to less than 200. Could you quickly tell us how that was accomplished in Sri Lanka?

DR. DISYLVA: Thank you very much. In Sri Lanka, I must tell you. We consider health education the project of health education as an investment. Not as an expense. Since independence [inaudible] government has invested lot on the health care and health care is totally free in Sri Lanka. So we had to spring boat to free now. So therefore, our health system was sufficient and strong enough and we could eradicate— we had the eradication's staged out. When I took over the health ministry in 1997, there were 400,000 reported cases of malaria every year. I managed to reduce and my government had managed to reduce it to 285 last year without a single death. That was our success. And social determinant, we address not isolating only malaria, or help, but all other we'll shall determine factors on record, thank you.

RAYMOND CHAMBERS: Thank you very much.

PETER CHERNIN: Thank you Minister Disylva. Let's go back to Africa for a second, because Africa really is ground zero. And in many regards, one of the most important countries is Tanzania. And Tanzania started off by experiencing tremendous success in certain areas of the country; especially the islands of Zanzibar, where we have seen malaria deaths virtually eliminated. And now at this point, Tanzania's expanding this to a mainland campaign to cover every single child under five. And we're fortunate enough to have President Kikwete here with us and maybe you can tell us Mr. President, what's it going to take for that campaign to succeed?

H.E. JAKAYA KIKWETE: Well, thank you Peter. Well, it is true that indeed in Zanzibar we have reached a point where we may soon announce that malaria has been eliminated, which to us is a big success. Of course our preoccupation now is to create the mechanisms to sustain the success, so that we don't have a re-emergence, because we have succeeded, it is the third time we are succeeding in Zanzibar. And I want this time to be the final time. So, what I have been doing in Zanzibar is establishing these village mechanisms, so that once there is a detection—there is incidence of malaria, there's going to be a quick response to deal with that particular case.

So, now we say one of the mechanisms, insurance policy for sustaining Zanzibar case is to scale up on the mainland.

And this is what we are now working on and what we're really

trying to do is build on the Zanzibar experience as the basis. What we need two- three things there. One is the residue spray, indoor and outdoor residue spray, because we made sure of that. Also, the second thing is, is availability of treated mosquito nets at every bedside. At every bedside. And then of course the health treatment, using ACTs. So this is the plan, this is the plan. So of we of course we already doing it on the mainland, that's where we also have experience reduction of 50-percent of malaria incidence under my own on the mainland.

So, what we are trying to do with the mainland is just scale up what we are now doing. So one of the things we are trying to do is make sure that all children under five sleep on mosquito net. And of course we appreciate when President Bush came there; he announced this program providing 5.2 million mosquito nets. So, once these one is realized, definitely we'll get there. But of course we're also working on a program of assuring that we'll be able to get mosquito nets for every bedside. We have about 15 million bedsides in the country. So, now getting the 15 million mosquito nets is one of those challenges but they are things that we are working on.

So, and then of course we're doing the spraying for in every household. And ensure availability of ACTs for treatment. Well, this is the things that are in the plan now, and I am grateful it's succeeded in Zanzibar; we will soon

succeed on the mainland. The only problem is the mainland is huge, we are talking about a country 945 southern square kilometers, it's huge territory. It's a daunting task. That's why we really need this support and cooperation of everybody else.

PETER CHERNIN: Thank you very much, President Kikwete. So let's turn from being on the ground to what really is going to drive this fight and frankly that's money. And the successes we've just heard about have been fueled by this steadfast visionary support of the donor community, lead by two great organizations. The World Bank and The Global Fund. And without their continued support, we will not meet our ambitious targets for the future. And really one of our most steadfast supporters has been the World Bank and in 2005, the World Bank launched a 470 million dollar booster program for malaria control in Africa. Tackling the problem in really high burden countries, like Nigeria and DRC which these are really, really tough places to do it. And with great effects and so with great pleasure that I introduce the head of The World Bank, Robert Zeleck to tell us about the progress and also I think to make some exciting announcements.

ROBERT ZELECK: Well thank you and really thanks goes to you and to Ray and Raja who really have demonstrated in this area in a relatively short time how you can make a huge difference. As well as the leaders of the developing countries that have done it on the ground. The leaders of the

developed countries, this is really a fascinating example of how you can focus on a problem. And here I really want to thank Jeff Sax as Jeff and I have talked about before, I was actually at the U.S. State department when he brought what I thought was a pretty simple mechanism of being able to focus on bed nets, the residual insecticides and some simple medicine use. The devil in the details of actually deploying it, which is what all of you are about.

You know there is some problems in the world that frankly, people haven't figured out. This one you know how to deal with, it's just a question of getting it organized and put together. From The World Bank's point of view, this is such a fundamental issue, because malaria is not only a disease of poverty, but it's a cause of poverty. Now we estimate that in sub-Sahara in Africa alone, that the loss of GDP from malaria is about \$12 billion dollars a year. That's a tremendous amount of lost resources. And like a lot of other problems, it tends to have a ripple effect through the overall system.

Some 40-percent of the health care system needs are now burdened with malaria. And so countries health care systems can be just totally broken down by trying to deal with malaria. As we try to look at the next level of challenges, we've decided to launch a booster program for malaria— a phase two program for Africa, which we are seeking to do \$1.1 billion dollars over the next three years. This is a

recognition that as part of this we also have to link this to overall public health care systems drive. And it's also a recognition that what we started with some \$500 million dollars has been difficult, because we started with some of the most challenging countries, at D.R.C. and Nigeria, but it's absolutely vital that we move forward with it.

We've supported programs in some 17 other sub-Saharan African countries. And in those programs, there's a coverage of about 228 million people. 45 million are children under five. And 11 million are pregnant mothers and those are the two groups as you've heard that have become the most vulnerable categories. But as you've also heard, this is not just an African issue. This is an issue that we need to see its regional and global connections. Part of this phase two approach, is to recognize that for all the efforts that are done in individual countries, if you can't deal with this in a cross border way, the disease is not going to stay within territorial lines. So we're going to try to devote about 500 million of that 1.1 billion on regional and across border efforts.

But you also have other countries. India has had some and an expected 2 million cases of malaria a year. It's a system that is now— as you've heard mention, is starting to have some of the more fatal parasite development, so it's a critical lesson of how you not only need to get at this issue but try to set the aim, as Bill Gates said, of dealing with it

once and for all as public health care issue. I know some people have questioned that, the challenge of it but I think it's got to be the aim that we go forward with. And we also— just this year, launched an over 500 million dollar project out of our IDA program to help deal with malaria in India.

So in some, when you come back and you look at these individual millennium development goals, each one has a tremendous merit in its own right. And you can see the benefits of health and saving lives. But remember, that middle word is development. This is all about the foundations of development. And if we're going to create the basis for integration and infrastructure and energy in private sector, we have to address these issues, because you can see if we don't, it just leaves a country broken down and held back by a disease. So, thank you.

RAYMOND CHAMBERS: Thank you, Bob. Did we all hear that? \$1.1 billion dollars, from The World Bank. The largest funder of malaria today has been the Global Fund to fight AIDS, tuberculosis and malaria. Today the Global Fund has committed \$1.3 billion dollars to malaria. We have the privilege and honor of working with its brilliant Executive Director, Michelle Catzascan [misspelled?]. And its Chairman, Rajat Gupta. Raja Gupta is here today to tell us of some exciting news from the Global Fund.

RAJAT GUPTA: Thank you, you've been a great inspiration to join this fight for malaria and I thank you for

that. And I also thank Bob Zeleck for making this announcement today and really working together with the fund to do that. And I was inspired by the Gates Summit on malaria when it was held in Seattle to really take that up the next notch. In previous years, the malaria program has not fared well with the Global Fund, actually. Only 23-percent of proposals were successful for a total of 198 million over two years.

So, when I took over the Chairmanship, I told the board that increasing attention to malaria would be one of my top priorities. Together with Michelle Catzascan, we decided that more was needed to be done and to encourage countries to submit ambitious proposals. Last April, we asked RBM to present their overall strategy. We showcased the ambitious programs implemented by Minister Tedros of Ethiopia. As a result, the Global Fund board issued a call to countries to submit proposals to massively scale up their malaria programs, particularly nets, ACTs and indoor spraying but at the core of it, was also community health workers.

Today, I am pleased to report that the countries have responded very, very well to that call. For round eight, the Global Fund technical review panel, will be recommending to the board \$1 billion \$624 million for malaria for the next two years. Surround when approved with financial 100 million bed nets and 60 million malaria treatments. This represents the largest commitment of any round the Global Fund has made to

malaria and indicates that 68-percent success rate globally. And almost 80-percent success rate in Africa. 14 out of 18 African country proposals were approved, so thank you for all your support and terrific.

The countries of course could not have done it alone, I would to take this opportunity to personally thank the Rollback Malaria harmonization working group, which under the leadership of Melanie Venshaw [misspelled?] and [inaudible], who worked tirelessly to make all this happen. The entire process has truly been a public/private partnership model working at its best. Although in many ways the work has just begun. This along with other important commitments made today, represents a scaling up of three to five times from where we are today. This calls for an all out holistic coordinated effort. It means translating these proposals into implementable action plans in the country, state and community levels.

It means setting up ways of exchanges best practices between countries, to break down bottle necks and supply chain and other aspects. It means upfront planning and architecting is going to decree to the success. We at the Global Fund, really believe that this goal set by the Secretary-General, with everyone's help, we can be confident of delivering zero preventable deaths, as you said Ray, by 2015. Thank you.

RAYMOND CHAMBERS: Thank you very much, Raja. Let's just think about that a moment between phase two of the

booster program at The World Bank and Round Eight of the Global Fund, we're now looking at \$2.77 billion dollars of new money to carry out the Secretary-General's plan.

PETER CHERNIN: So, now let's move to a different part of the world and I really think one of the key players in the world today and really one of the reasons why we're all here today is a man I greatly admire, Prime Minister Gordon Brown. And in many ways this started, Prime Minister in January, I came and visited you. And had the temerity to ask you to help me lead a campaign to sort of both get the U.K. to step and also get the G8 countries to step up and see if we really could close the bed net gap in Africa. We identified that we thought we needed about 120 million nets by the end of 2010 to make it so every sleeping site in Africa was covered with a bed net.

And I asked Prime Minister to help me achieve this and you made an extraordinary promise to help me achieve that and I was wondering if maybe Mr. Prime Minister you could report on how we're doing.

PRIME MINISTER GORDON BROWN: This is an historic meeting and an historic moment. And I think people are beginning to realize everybody here that it's not just a one billion dollar moment; it's going to be a 3- 3.5 billion dollar moment. And I want to thank Ray and Peter for everything they've done. This campaign and the campaigns for malaria ruled by partnership, have achieved more in a year

than most campaigns achieve in 100 years. And thank you very much for what you have done.

This is the most extraordinary group of people here today. People from business, who've been contributing through what they have done. People from trusts and charities, people from faith groups, governments like the Government of Australia, Kevin Rodd that has given new money since he's come in to par. And great campaigns like the American Idol campaign. There's some campaign in Brittan. And this has been the most extraordinary coming together of people to make possible one of the greatest campaigns that you have already seen has the power to change lives. And I believe if we'd saved only one life it would have been important. But be able to say, I think with conviction for the first time. But not only will Tanzania be able to see an end to malaria deaths by 2015 but all countries will be able to see an end to malaria deaths by 2015 is indeed an historic moment of great significance. And now with these announcements we can believe that what seemed impossible a few years ago is now possible and we together can make it happen. No injustice can last forever.

People who suffer can go forward with hope that if you succeed here, we can succeed in other areas as well. And I am very pleased to be able to say, first of all that through the pressure of all of you, governments have run the world started to listen. And you came to me and I said that we would— as a

result of your pressure, we would provide 20 million bed nets. Then you said, well can you and us go to the European Union? And so the European Union promised 75 million bed nets. And you said, well that's not enough, go to the G8 and we proceeded the G8, thanks to your efforts to make sure that they committed themselves. On that day, it was not in the communicate, it was not planned to be there, it was put into the communicate at the last minute because of the pressure that people were putting on.

And it was not only a commitment to a number 100 million bed nets, it was to a date by 2010. And that is thanks to the pressure of everybody here and I wanted to thank you all for what you have done.

I was thinking that this is most extraordinary collection of people, probably only rivaled by the people that tend upon his concerts. I also wanted to say today that this is a comprehensive plan. We will not only support bed nets, we will support research, we will support cutting the costs of drugs, and we will also support building the capacity of healthcare systems. So first of all, we will support the research, we will put more money supporting Bill Gates' research, which I had the pleasure to see we're not [inaudible] an extraordinary project; now yielding great and very positive results. We need to reduce the cost of drugs and treatment so we will put an additional 40 million pounds today into making that possible.

And we want to build the capacity of healthcare systems to be able to deliver. And for today we are announcing \$450 million for eight different countries, so that we can build that capacity to deliver a healthcare system on the ground. And we want that to be part of a new project where we can raise public and private money like the vaccination initiative that we've undertaken, so that every healthcare system in developing countries can be built up over the next few years. So today, it is indeed historic, money that has never been promised before, now promised. A plan to deliver results by 2015, a commitment that is not just a pledge but one that you can now see is possible that we will end the avoidable deaths by 2015 and I want to thank all of you this marvelous group of people who've come together in a way that we've never seen before to build not only hope that we can eliminate deaths from malaria. But there's no problem in the world that we cannot solve if we work together.

PETER CHERNIN: Thank you so much. You know, Mr. Prime Minister, you talked about Ray and I putting pressure but I think it's important to point out that you're not so bad at it yourself. And it is the Prime Minister who really drove the agenda to G8 and we're really grateful. But the other thing I want to point is, I just want to remind you Mr. Prime Minister, when I asked you for this, you pressured me back and you said that I'm not going to do this from a purely government point of view, unless you can also arrange

grassroots funding, private sector funding, faith based funding and that that was the key part that you wanted everybody to gather together.

And I think one of the things that we're particularly proud of, is how much progress we've made on the grassroots front. And so, you know on the grassroots fund, we've been raising money for bed nets through a terrific campaign called Nothing But Nets, here in the U.S. and also Malaria No More has been very aggressive with us. It's such a simple grassroots message, \$10 buys a bed net, saves a life. And while we've been announcing billions of dollar commitments here today, there's some commitments also that I want announce that I am probably just as excited about if not more excited.

But we have two young people here today, Kevin Vernon, who's I think 14-years-old, who's raised close to \$10,000 and Gracie Abram, so I believe is 9-years-old. And Gracie Abram's over there who's I think is 9-years-old. And Gracie, every couple of weeks I show up at my office and there's an envelope filled with cash that Gracie has sent to me and she's been selling vegetables and she goes to her dad's office and holds people up but I think it's really- as inspiring as the billions of dollars from governments and big organizations, I think the engagement of the young people in this country is also truly an inspiration to us, so thank to two of you so much.

We've also had some other remarkable grassroots and awareness building efforts and probably the single most important one in this country has been American idol. American Idol as I'm sure you know has been pretty good to me among other things. But is America's most popular television show and I think in the last two years through our Idol Gives Back program, we've hit probably 50 million Americans with more awareness about malaria than probably any other single event. And I think one of the reasons we've so much progress in this disease, is because of the awareness of American Idol. And not only have we reached all those people but I think we have raised an astonishing \$29 million dollars in just last two years.

And all of this is because really of the visionary leadership of the man who proposed this all to me. The creator of American Idol, my friend Simon Fuller who I just wanted to mention. And I would like to point out that Simon's also agreed to join the board malaria No More in the U.K. and he's really an unstoppable force, so I think we're going to make a lot more progress. Another key partner in the U.K. is also remarkable organization which those of you in U.K. know about but for the rest of us, which is called Comic Relief. And Comic Relief has been just an extraordinary grassroots fundraiser and is about to launch another public awareness and fundraising campaign.

And you know some people are sort of gifted with too much and our next guest, Richard Curtis, who's both the founder of Comic Relief and also one of the great movie directors in the world, is going to tell us about this new campaign, Richard?

RICHARD CURTIS: Thank you very much, indeed. I've been to the Oscars, only once but this room full of much more glamorous and excellent people than the room there. We've been doing Red Nose Day for about 20 years in the United Kingdom, during that time the public have given I think a billion dollars to try and change hard lives in Africa and in the U.K. And that climaxed in the way To Make Poverty History campaign, when the U.K. as with one voice, really pushed to try and make poverty history and make the G8 leaders fulfill their dreams.

And this year, what we're doing on Red Nose Day is a portioning, a chunk of the evening for the time ever to the issue of malaria. We're going to call it the night of million nets and we're very confident. But by the end of this period, we will have raised the \$10 million dollars which will have meant that a million people in the U.K. will have bought nets themselves. And I just want to stress to communication partners here, the extraordinary magic of the net. I know its not the whole story, but it is a heck of a story that somebody for \$10 can actually buy something specific which they think will change someone's lives.

And my dream is that we will be able to actually create a huge, try and really push this and create a huge international consensus of put normal people who will consider themselves stakeholders in this battle against malaria and will push their governments to fight scandal of a disease killing quite so many people, a disease which in many of our countries, we manage to rid ourselves of decades and years ago. So, I'm hoping that not only can we do that, create millions of stakeholders, create pressure on governments but then as Gordon I think so brilliantly said, this is going to be the proof of the pudding. And if you can create a great triumph around malaria, it will create an optimism for the possibilities and success in Africa in the years to come. And will indeed be the thing that pushes people to make extreme poverty history in our lifetime.

RAYMOND CHAMBERS: Thank you Richard. We have a special guest who's just arrived that I'd like to introduce. On April 25th, the World Malaria Day this year, the Secretary-General of the United Nations, Ban Ki-moon, challenged us to have full coverage of all the people at risk of malaria by the end of 2010. Mr. Secretary-General, I want you to know that everybody here heard your challenge and has responded to it. We've heard commitments today of new funds for malaria, exceeding \$3 billion dollars. And, we would like to thank you for so challenging us and we're also embracing a plan that embraces your goal of full coverage hopefully down to zero

deaths by 2015 and eventual eradication of malaria. Please join me in welcoming the Secretary-General of the United Nations.

UN SECRETARY-GENERAL BAN KI-MOON: Thank you very much, Mr. Chambers. Just thank the head of state and government. Just thank the ministers, ladies and gentlemen. First of all, let me apologize for being too late. I know that I'm late by 40 minutes from scheduled time. But I couldn't have any control over my schedules, particularly this week. I have been delayed and delayed by all this continuing bilateral meetings and I hope you will excuse me and understand this particular situation. I'm very much excited and overwhelmed by such a great presence of great leaders of our international community of united nations.

Many has of stayed in government are taking place here with all great leaders of business community, World Bank and all private sector leaders, civil community leaders. Now with this \$3 billion dollars commitment, this is really encouraging one, of course we need more. There are so many areas we need the urgent fundings but this is a good, we'll demonstrated to the international community as a part of your participation. With your support, we may have a full coverage of malaria interventions by 2010 and then end virtually- virtually end death from the disease by 2015. That's our target and when I attended [inaudible] Summit meeting last July, with the strong

help of G8 leaders, Prime Minister Gordon Brown is sitting here.

I told the leaders that I need 120 million bed net-insecticide treated bed net. Then G8 leaders they immediately committed 100 million bed nets. Then later, I jokingly said, we may need \$20 million dollars, we'll be the homework and task of Mr. Ray Chambers. He will take care of \$20 million dollars. And they were encouraged by all these support from the international community. In that regard, let me thank especially my special envoy, Mr. Ray Chambers for his passionate leadership in this campaign. I'm also grateful to all of you who are here today, top government officials, as I said, leading artists, members of the faith community, educators, UN officials, philanthropists and medical experts.

This is exactly the kind of broad and global coalition we need to reach all of our millennium development corners. As I told the general assembly on Monday, Tuesday and today, I will approach to malaria can serve as a model for other campaigns to battle the evils we face now. Not just the disease but also hunger, poverty, illiteracy and gender inequality. The great progress we have seen on malaria comes thanks to you the generous donors and our other partners who are putting their money to good use.

That is because you are thinking and doing. You are carefully considering the best course of action. And at the same time, you're moving ahead with a life saving

interventions. You are supporting governments in ways that they need most. And you are involving individuals in this equate drive to end malaria death. It is impossible to calculate the human suffering that mothers endure when their children die. What we do know is that the [inaudible] runs in the tens of billions of dollars annually.

The impact of the successful campaign will be immeasurable. Over the course of this week, I have walked hard to convince governments that end digits can be met. There has been some doubt that whether this end digit equals achievable. With this strong commitment, I'm convinced that this is achievable goal. Today I point to your achievement as proof that when we pull together we may do more. More than just reach the goals, we just might surpass them. And I count on your leadership and commitment and contributions. Thank you very much. Thank you.

PETER CHERNIN: Thank you, Mr. Secretary-General. We really appreciate your leadership on this issue. Just quickly going back to the issue of awareness building. I think it's important that we build awareness not only in rich countries and rich western countries, but also on the ground in Africa. And I think one of our— we're particularly proud to introduce Gary Nell, who's the President CEO of Sesame Workshop. Who's got one of the best known and beloved children brands in the world to help us, Gary?

GARY NELL: Peter, thank you. I'm proud to represent the United Nations of Muppets here today. Who we are going to deliver to this most important cause by targeting kids under the age of five in Tanzania, Mr. President, thanks to the first lady as well for her support and fro USAID support. Well we're taking the power of the Muppets and Kilamine Sesame, in each of your bags, there is a Muppet named Kemmie. She is sort of the Big Bird or the Elmo of Southern Africa. And we and- Kemmie and her friends Zquay [misspelled?] and Moysha [misspelled?] will be in Tanzania to teach children how to use bed nets, treated bed nets and make it cool and fun.

So, we can deliver the bed nets through Malaria No More and through Save the Children, my friend Charlie McCormick is here. We will be delivering in new partnership with Malaria No More and Save the Children a way of reaching children through the power of television, radio and print materials and their Muppet friends to get them to use the bed nets and in this way we will save many, many lives indeed. So we're very proud to announce a partnership today, supported by Mattel, who is donating both money and toys to get kids involved and engaged and we are just proud to be part of this most important effort in joining you common cause of eliminating all deaths from malaria by 2015. Thank you.

PETER CHERNIN: Thank you, Gary. I think moving from the grassroots business also has to play a lead role in combating malaria. Providing nimble investments that can be

leveraged to great effect and today I'm proud to announce a major new initiative, called the Malaria Capital Campaign. Malaria Capital Campaign is a partnership between the global business collation on AIDS, TB and malaria, lead by Ambassador Richard Holbrook, Malaria No More and the United Nations Foundation. And together we're going to raise \$100 million dollars, to move us much more quickly towards this goal of universal coverage by the end of 2010.

And to announce the lead gift to capital campaign, I'd like to introduce the President of Marathon Oil, Clarence Kazalow [misspelled?] and also the President of Equatorial, Guinea where we are going to put this campaign. His Excellency Tay Adoria Obemnini Emguema Bosco [misspelled?], I hope I didn't butcher your name too badly sir.

TAY ADORIA OBEMNINI EMGUEMA BOSCO: Thank you very much.

INTERPRETER: Thank you very much, I do not speak English but I will use an interpreter to be able to speak to you the experience in Equatorial, Guinea. About five years ago, malaria was endemic situation in Equatorial, Guinea and it was considered one of the major [inaudible] issues of mortality rate in Equatorial, Guinea, affecting children below the age of five years old. Definitely, we could not tackle this alone because the budget required for us to tackle this fight against Malaria was very, very huge and we have to

invite the private sector and we called upon one of the major investors in our country, Ishmael Marathon [misspelled?].

TAY ADORIA OBEMNIN EMGUEMA BOSCO: [Speaking foreign language]

INTERPRETER: Actually, we have initial project together with Marathon and Associates, business associates at that moment, and we have the budget estimated around \$15.8 million and we carried out this project unanimously and together we were able to achieve a lot. Though, never the less, we think at this moment we will be able to put much more because we were able to implement the Abuja [misspelled?] in regards with malaria, fight against malaria.

TAY ADORIA OBEMNIN EMGUEMA BOSCO: [Speaking foreign language]

INTERPRETER: Over 70-percent of the children from about five years ago were affected and we've been able to see that the reduction of these in our country has been reduced to close to 49-percent reduction rate, which affects all malaria children in the country. Presently, we have been able to walk together with marathon in order to establish a new partnership that will do all that square. The reduction in the mortality rate of the children have actually been very, very positive and we have been able to attain great levels in that aspect.

TAY ADORIA OBEMNIN EMGUEMA BOSCO: [Speaking foreign language]

INTERPRETER: This project actually has been widely accepted and recognized by the international community as a model of control in the fight against malaria in our country. Therefore, we believe that we're on the right track and are able to get this done. We have now, together, combined with social [inaudible], we have been able to put together a new project plan that's going to cost \$28 million U.S. for a new plan and we expect that will achieve— if not totally eradicating malaria in our country by year 2015— at least will reduce to a great extent the devastating effects of malaria on the children below the age of five. [Applause] Thank you very much.

PETER CHERNIN: Thank you very much, Mr. President. I just want to remind people that the lead behind this a \$28 million gift from Marathon Oil and it's presidency of Clarence Cazalot. So, thank you, Clarence. [Applause] I also just want to say one other piece of important news here. Because this campaign is so important, I've agreed to co-chair it, but as my co-chair, we're about to announce today, my co-chair's going to be the CEO of the largest corporation in the world, Exxon Mobile, Mr. Rex Tillerson.

Exxon Mobile has shown great leadership in this disease. They've already given us \$10 million, \$3 million and so, already here to today, we're announcing that we're \$38 million on the way towards this \$100 million fundraising, so we appreciate all the private sector's support. [Applause]

RAYMOND CHAMBERS: I'd also like to add that Philippe Douste-Blazy is here, the Chairman of UNITAID and UNITAID recently committed \$108 million for bed nets to UNICEF, so we thank you Phillippe. [Applause]

As some of you may have realized, the astute ones, we're not going to finish by two o'clock. [Laughter] So, I know some of you have to leave. We thank you for being here, your generosity, your support and feel free if you do have to leave. We're going to continue the program and try and get it all finished. At the present time, much work is going on in the Pacific region to try and shrink the borders of malaria toward a goal of eliminating malaria in a unique way. We have Prime Minister Rudd of Australia here today to tell us of the progress their making and their plans. Prime Minister Rudd. [Applause]

PRIME MINISTER KEVIN RUDD: Thanks very much. You'll be please to know I'm sticking to my 60 seconds. First of all, can I say something about Gordon Brown? On Millennium Development Goals and on malaria, I've got to say about Gordon, what you have before you is the person who represents the continuing conscience of the G Seven and I got to say, the OECD [applause] and he's about to escape from the room. [Laughter] Gordon rang me up nine months and I became Prime Minister of Australia and said, "Congratulations, Kevin," next sentence, "what are going to do about malaria?" [Laughter]

That's his way of a conversation starter, but it was effective, which brings me to what we're talking about here.

What we haven't discussed here is the fact that 5-percent of malaria deaths occur in the Pacific and our particular focus and interest has been what can we do in practical terms with our friends in the Pacific island countries?

The greatest concentration of the disease is in Proper New Guinea, in the Solomon's and also in Vanuatu. So, together with the prime ministers of Vanuatu and the Solomon's, we've committed to a program to eliminate malaria in those two islands. We're committing now \$25 million worth of new effort to make sure that we can eliminate this dreadful from those two island neighbors of ours.

Our next stop is Proper New Guinea; much bigger challenge, much bigger population. That's where we're going. Australia's responsibility, as we see it, is to take the lead in eliminating this terrible disease among our Pacific Island neighbors and we will do so. [Applause]

The last thing I'll say is about all of you. In terms of this great plan, The Malaria Action Plan, and our commitment to the Pacific Malaria Initiative and the fact that we're also going to host the inaugural meeting of the Asia-Pacific Malaria Elimination Network in 2009 in Australia is this, it only works with continued political will.

We're new to this. We've only recently been elected, committed to the MDG's and our work has just begun. But to all of the governments here, can I say, let us not drop the baton when the focus comes off this meeting. The hard work will be next week and the week after and the year after and the year after that. Our proposal's modest. It's to deal with our own neighborhood, but we'll take it from there. Thanks very much. [Applause]

RAYMOND CHAMBERS: Thank you, Prime Minister Rudd. Peter.

PETER CHERNIN: Yeah, also want to thank the Prime Minister. One of the other people who has to leave in a moment, I just wanted to move up in a minute because I think we've all talked a lot about the things we're doing immediately, but I think no one on earth has taken a more long-term view of the truly long-term issues we need to do to eradicate malaria than the Bill and Melinda Gates Foundation. And Bill, we've talked a lot about all the things we're doing in the short-term, but I think you really have focused on the long-term eradication and maybe you could talk a little bit about what some of the key elements that you guys are working on to achieve that goal.

BILL GATES: Yeah, the world has several times, called for the eradication of malaria and set ambitious timeframes and then, unfortunately, when it's not achieved, malaria goes

into a state where people aren't paying attention to it and then another cycle comes along.

So, someone might ask, why is this different than those previous times? And the answer is that we're going to keep driving new innovations and these innovations are critical to achieving the eradication. The mosquito will evolve beyond the current pesticides on the bed nets. It'll even evolve beyond the current drug regime that's the best, the artimicenines [misspelled?] that we're working so hard to get the price down and drive up the supply and so, we need to keep coming up with new drugs. There's a real commitment to that. In the long run, perhaps the most dramatic thing we need is a vaccine.

Historically, before the very recent times, all the malaria vaccine efforts had no effect at all. Now, we have a lead vax in Canada that the Path Malaria Vaccine Initiative, working with our partner, GlaxoSmithKline has completed a phase two on, that reduces the deaths by over 50-percent. And that's about to enter a phase three and we're very optimistic that those results will either hold up or even get better and that'll become a new tool that we can use.

Beyond that, we want to have a vaccine that has even better effect, that has 100-percent coverage and in order to promote that, we're announcing today that the Gates Foundation is giving an additional \$168 million to the malaria vaccine initiative. [Applause]

One last comment about today that I thought was interesting is five years ago when Bono and I talked about getting disease onto the political agenda, I challenged him that at some point in a presidential debate or lecture that one of our favorite diseases would get mentioned. And so, I think it's worth noting that today in New York, that happened. Both of the candidates went to the Clinton Global Initiative and they both talked, not just lightly, but in some depth about their commitment to the malaria plan, so I think it's an amazing milestone, both what we have here, and the fact that that kind of political awareness and activity is going on.

[Applause]

RAYMOND CHAMBERS: Thank you, Bill. A major part of the effort, as you all know and you've all learned today, is the coverage by bed nets of the endemic population. And the biggest source of supply of the bed nets resides with approximately five manufacturers. The two leading ones are Festaguard Fanson and Sumitomo Chemical and they have been not just suppliers, but wonderful partners and to speak on behalf of the manufacturers, we have here today Mr. Yanekura, who is the Chairman and CEO of Sumitomo Chemical.

Mr. Yonekura, can you tell us what your vision and plans are?

HIROMASA YONEKURA: We have a capacity of a little bit more than 30 million nets a year, bed nets all over the world and we are planning to have a 30 million bed nets more in

Africa in one and a half years. And so, in total, a little bit more than 60 million bed nets a year around the end of next year, but I would like to point out today that in order to enhance the production efficiency, we ought to standardize the product choices.

Sumitomo Chemical is committed to doing this, but I would like to propose that WHO and also [inaudible] Malaria Partnership convene a meeting of key stake holders to build a consensus on standardization. And second, I would like to stress the need to eliminate long delays in the delivery of bed nets. We must deliver more transparent [inaudible]. When tenders are awarded to other companies, [inaudible] should be avoided. This adds unnecessary delays and also costs lives.

If selection criteria clear and publicly available, then we do not challenge such bed nets tender decisions. We urge our fellow manufacturers to do the same. Thank you very much.

RAYMOND CHAMBERS: Thank you very much. We know that 40-percent of the children who die from malaria in Africa are Muslim. So, we reached out through our U.S. Ambassador, Sadir Kumbar, [misspelled?] to the Organization of Islamic Conference to see if we could all come together to fight a common enemy and the Secretary-General of the Organization of Islamic Conference couldn't be with us today, but he and the organization have pledged to mobilize their resources to help

us accomplish the goals set forth today, so we thank you very much.

We've heard from the Prime Minister of the United Kingdom, who has been a great leader, a great partner, but the United States government has been a really significant partner. Not just in the fight against malaria, but to help Africa and the fight against AIDS and tuberculosis. And we were so fortunate several years ago when President Bush created the President's Malaria Initiative and point Admiral Timothy Zemer to be the head of it and he has been one of the best, most effective, most constructive partners we could have ever hoped for. And so we're so grateful for all that's happened with the U.S. government and most recently, in July with the PEPFAR authorization bill, malaria has now been included for \$5 billion over five years.

And we have here today, the director of USAID, the honorable Henrietta Fore and she's really the person, the quarterback, the orchestrator behind all that's happened and we're wondering if you might take a few minutes to give us some insight into where you see us going in the future with malaria and with the support of the U.S. government and thank you for giving us Admiral Zemer.

HENRIETTA FORE: You are welcome and thank you Ray and Peter and of course, to everyone in the room. I think when all of this began several years ago, we had high hopes and we had a personal commitment by the President and the First Lady

and we had a clear need in a number of countries around the world. But what has happened has been astonishing. It's the results that have really mattered and so because of that, what Ray just mentioned, on a bi-partisan basis, our Congress has tripled the funding for malaria.

So, up to \$5 billion over the next five years and that is an extraordinary commitment and we are really proud to be able to work with all the partners in this room because we all do it together; corporations and foundations and non-profit organizations and U.S. government and host country governments together. And our focus is on building capacity on developing countries and training people on the ground.

We've changed many lives and we've changed the world, but we've got much more to do so, thank you, Ray. [Applause]

RAYMOND CHAMBERS: Thank you very much, Henrietta.

PETER CHERNIN: In addition to American leadership and British leadership, we're also delighted to have with us here today the Secretary of State for Foreign Affairs and Human Rights of France, Miss Rama Yade and I'd like to point out that France is Europe's biggest owner of the Global Fund, [inaudible] approximately \$21 million in 2007.

Miss Yade, we're just at the beginning of this fight and what can we do to make sure that we maintain the support of countries like France going forward?

RAMA YADE: Thank you. Ladies and gentlemen, today governments, NGO's and foundations have been brought together

by a common ambition: to eradicate malaria. This is an issue of resources in the service of determination. Without prevention, access to care, medication or treatment, we all know that the Millennium Development Goals will become nothing more than just a set of goals.

Today, malaria threatens nearly three billion people in more than 100 countries. In the next five minutes, ten African children will die because infected mosquitoes bite them. This disease can be fought and we cannot allow entire generations to be decimated. Health care is a basic right upon which all other rights are based.

How can we create [inaudible] in societies where populations are devastated by disease? How can we ensure development when health care systems are [inaudible]? Without public health, there can be no democracy.

France has also been at the forefront of this struggle. Whether it be in terms of research or funding. In 1818, Alphonse Laveran, a French medic, first discovered the cause of malaria and the struggle continues to this day. More recently, several French teams, from the Research Institute for Development, the Pasteur Institute and the CNRS, which are world renowned in all fields of major research from the mental, human and social sciences have been tackling this issue. [Inaudible] a top French pharmaceutical firm, and industry leader is in the vanguard in malaria treatments.

Since 2000, France has allocated almost half a billion Euros to malaria research, prevention and combating the disease. France has always been a pioneer in innovative financing as witnessed, for example, by its contribution as regards plane tickets.

Thanks to its contribution to the World Fund and UNITAID, France and the French fund 20-percent of the international effort. France is the second-largest contributor to the World Fund, the number one European contributor as well as the number one preceptor contributor in the G8. Lastly, we participated in actively supporting the world-backed malaria partnership, which between 2004 and 2007 distributed 150 treated mosquito nets, crucial tools in fighting this epidemic.

A few weeks ago, at an event to raise awareness to the fight against malaria, President Sarkozy, recalled France and the European Union determination to vigorously combat pandemics in the poorest countries. He also stated that France would continue and step up its efforts. It is the idea of fraternity and solidarity that enshrined in the Universal Declaration of Human Rights whose 16th anniversary we are celebrating this year and which we are also honoring by mobilizing against this scourge. Together, I'm sure we will be victorious in making malaria a disease of the past.

[Applause]

MALE SPEAKER: Well, we have now a very important partnership with the UN Foundation for the distribution of bed nets, but I think it's important to see it into the proper perspective.

Malaria is the number one killer of refugees in Africa and most of the refugees' situations escape the national control plans, which means refugees are not included in the national control plans in many of those countries.

We decided to identify the gaps and to answer the problem. We started in 2007 with an extra budgetary line with savings we made with our own internal reform process in 2006, mainly aiming at having the ACT treatment covering all refugee camps in Africa. But, this obviously was not enough so now we have a comprehensive 2008-2012 control plan with prevention, with treatment, with early diagnostic and with some additional protection measures. For that, we are looking for a certain number of meaningful partnerships. UN Foundation is a very important one.

We'd like to partner with industry for tests, for treatment. We still have a funding gap of about \$25 million for the next two years, but with or without additional support, this is a program we are going to implement because it is an absolute priority for us. [Applause]

RAYMOND CHAMBERS: Thank you. As I mentioned last night at a function, Jeff Sachs was the person who inspired me to get involved with the Millennium Development Goals and with

malaria and he's going to give us a very quick vision of what he sees as our challenges ahead to try and get to the goal of near zero deaths by 2015.

JEFF SACHS: This is a great act, which you can take on the road and you have and it's a thrill to have this whole community here. I want to recognize a couple of people very quickly. David Navarro, if you would stand up and Duash Teclahamanad [misspelled?]. [Applause] David, Duash and I had a conversation 10 years ago about bed nets. David was leading the bed net effort and it raises a point that I want to emphasize because this will work. It will succeed. It will be wonderful.

The gap between knowledge and action is too long in this world. What we're going to do has been known for a long time. The scientific community has been pounding at the door, especially the scientists, like a great scientist, Chris Curtis, who died earlier this year, who was a champion of free distribution of bed nets, but he died of cancer before he could see this, but he spent his life out in villages knowing that this works, but he couldn't be heard.

The gap is too big between the true knowledge and what we're doing and we've got to shorten that space because we lost ten million lives between that conversation and now and we'll lose more until we close the gap; the same as with the conversation on food that we're having, with climate change.

The expert knowledge is truly expert in this world. It's not

heard where it needs to be heard and then it's not backed when it needs to be backed.

This is my main message: for us to succeed, please listen to the scientific community and then fund it properly. Everything that happens is because of funding shortfalls. We spent eight years trying to sell bed nets to people. This was flawed, profoundly wrong from the beginning. Even two years ago, I was in a bitter battle over this with a lot of the donor agencies.

So, the gap is too big and we take short cuts cause of money. And we need our national governments to understand that we can shorten the gap and make the world the place that all of the leaders here want it to be by listening more carefully. Remember, I'm going to make a political statement. We spend \$1.9 billion every day on the Pentagon. So, there's no shortage of funds to get this job done. Ray and Peter will get the job done with all of you, but take no short cuts between here and 2015. Do it comprehensively. Listen to the knowledge. It's the shortcuts that kill the children. Thank you very much. [Applause]

PETER CHERNIN: Thank you, Jeff and thank you for your inspiration and leadership. So, I know it's a profound disappoint to you all, but the Ray and Peter comedy routine is drawing to an end here. [Laughter]

RAYMOND CHAMBERS: It wasn't very funny.

PETER CERNIN: But, before we wrap up, I do want to just take a moment to appreciate how genuinely far we've all come today and what a profound and meaningful occasion it is. Look at the monitors up here and look at all the facts. Look around the room at everybody's who's contributed and two, two and half years ago when Ray and I first started talking about this issue, we had almost no successes to point to. We had a little bit of success with some bed nets, but we didn't have Rwanda, we didn't have Ethiopia, we didn't have Zambia, we didn't have Tanzania, we didn't have the progress of UNICEF, of the World Bank of World Health Organization. We didn't have all these tremendous achievements.

The other thing that we didn't have is we didn't have any money and I don't think any of us in our wildest dreams could have predicted that we'd be sitting here announcing \$3 billion of new funding in a single day and I think the thing that's most important to point out— at least for me— is I couldn't be prouder of what we've achieved and I think everyone in this room should proud. But, what we cannot do is be satisfied because this is a disease which the moment we let up a little bit, it's going to come back and it's going to come back worse, as Bill Gates said.

So, I think we should be proud of what we've achieved, but I also think we need to resolve that we are at the very beginning of a long, tough fight and I know all of us in this room are committed to getting all the way there. So, I really

want to thank all of you for your help and participation.

[Applause]

RAYMOND CHAMBERS: I'd like to add my thanks to those, of Peter, to all of you. In your own unique way, you've helped us get to this point and as Jeff said and as Peter said, the bulk of the work is yet ahead of us and it's difficult work and we're aspiring to goals that we would have never even considered several years ago.

I just want to take a minute to also thank Peter Chernin. As most or all of you know, he's the President and Chief Operating Officer of News Corporation. Unlike me, he has a day job and he's really mobilized every spare moment of his time, his resources, his networks, his connections to help bring us to this point. And we wouldn't be here today were it not for Peter's efforts, so please join me in thanking Peter.

[Applause]

Great commitments today, positive momentum, it's wonderful to hear that Senators McCain and Obama have taken noticed and have joined us in this fight against malaria. It is a devastating disease and we're projecting ahead, but we're still in a moment where 3,000 or more children still are dying every day needlessly. So, we really have to ratchet up our work on the ground with all the partners, take these resources, leverage them and optimized the utilization of each net, each intervention to reach our goals.

We're really grateful for the Secretary-General who's challenged us, who's inspired us, who caused us to reach and when he did that, I thought about President Kennedy, whom Jeff Sachs quotes a lot; "Put a man on the moon by the end of the decade." Eliminate deaths from malaria by 2015. I think we can do it and thank you very much. [Applause]

[END RECORDING]