Thank you for joining us for this important hearing on malaria, one of the most serious health issues facing the developing world, and particularly Africa, today.

For the last century, America has been a leader in the fight against malaria. While the United States and several other countries have been able to eliminate malaria, this deadly disease still presents a serious challenge to other parts of our world.

The World Health Organization estimates that 781,000 people died from malaria in 2009 and that 225 million people suffered from infection. Malaria is the fifth leading cause of death from infectious diseases worldwide. It inflicts a particularly severe toll on the people of sub-Saharan Africa, where ninety percent of deaths are caused by malaria. Moreover, approximately 85 percent of malaria deaths occur in children under five years of age. Every 45 seconds, a mother and father in Africa lose their child to malaria.

There is also a far-reaching impact on the wealth and development of countries with endemic malaria. Africa may lose up to $12 billion in productivity due to malaria each year due to the disease, while the disease in turn consumes about 40 percent of Africa’s public health expenditures. These numbers and statistics are staggering, but they have a greater impact when one has been to Africa and met the individuals who must live with the disease.

Anyone who spends any meaningful amount of time in Africa and mingles with the African people will soon notice the prevalence of malaria. When you ask someone whether he or she has ever had malaria, they likely will respond not with a yes but with the time that has passed since they last suffered from it.
More astounding than the sad reality that malaria is killing or harming so many millions of people is the reality that malaria is preventable and treatable. The world has the tools to prevent and treat malaria. No one in the twenty-first century should have to suffer from it, let alone die from it.

When I last visited Uganda, I visited several homes, including a home in the remote region of Bushenyi. The three-room dwelling of white-washed walls and dirt floors was practically empty, and this made the insecticide-treated mosquito net over the floor mats all the more striking. These nets may seem like insignificant items when listed on paper, but they are noticeably visible in the modest homes of those families who rely on them for protection from this ravaging disease.

What began for the United States as an effort to protect our troops abroad and citizens here at home has become for us a larger global health objective.

In the last decade we have seen a renewed commitment by the United States, international organizations, and private foundations to eliminate all malaria deaths. The effort received a notable boost in 2007 when Bill and Melinda Gates renewed the challenge of worldwide malaria eradication.

While much progress has been made in combating malaria, as we have seen from past eradication efforts, malaria can resurge when treatment becomes ineffective through drug resistance. While the global commitment remains to beat this disease, and to beat it as soon as possible, the stakes are too high to bet it all on doing so before the tools we have lose their impact.

At today’s hearing the subcommittee will receive an update on the progress toward malaria elimination in the most endemic countries with a focus on the vitality and effectiveness of the treatment component. The hearing will examine the future of anti-malarial drug and vaccine development, and challenges in ensuring an adequate supply of effective medicines. We will also hear about the continued availability, affordability, and safe distribution of quality anti-malarial medicines.

I look forward to hearing the testimony of our distinguished witnesses and exploring means for achieving the immediate goal of saving lives, and the ultimate goal of eradicating malaria from our world.