

# Opinion

## Prioritising malaria: one best way to save lives

By Dr Bjorn Lomborg & Dr Keziah L. Malm

**W**HAT are the best policies to save lives in Ghana? Ghana Priorities, a cooperation

between the National Development Planning Commission (NDPC) and the award-winning think-tank Copenhagen Consensus, has searched to find the answer to this question, and in general, how to improve the welfare of all Ghanaians by collaborating with a wide set of policymakers, researchers, stakeholders and youth-groups.

More than 400 ideas were initially proposed, out of which 79 policies were selected for further analysis.

Ideally, Ghana should address all challenges, fix all problems. But all countries are constrained by scarce

resources and that ultimately means that prioritisation is needed to allocate scarce resources to where they can do most good.

That is why we've worked with local and international economists to find out how much good each cedi spent can deliver for Ghana across all these solutions.

The result has been dozens of thorough and peer-reviewed papers and their short summaries, which you have read in the *Daily Graphic* for the past half year.

### Combating malaria

Out of all of these policy ideas, the research showed that interventions on combatting malaria were one of the most effective ways to save lives.

This research was evaluated by an eminent panel that assembled in Accra to meet with the researchers, hear their arguments and ask questions.

The panel consists of Finance Minister, Mr Ken Ofori-Atta; Planning

Minister, Prof. George Gyan-Baffour; former Finance Minister, Prof. Kwesi Botchway; Prof. Augustin Fosu from the University of Ghana; the Secretary-General of the African Research Universities Alliance, Prof. Ernest Aryeetey; Prof. Eugenia Amporfu of the Kwame Nkrumah University of Science and Technology (KNUST) and Prof. Finn Kydland, winner of the Nobel Prize in Economic Sciences.

At the conclusion of the conference, the panel was tasked with ranking all of the different interventions to show which ones should be implemented first.

Three of the top 10 interventions focused on combatting malaria.

The panel's ranking was based on research done by the Edward Nketiah-Amponsah from the University of Ghana, Timothy Awine and Sheetal Sital from the University of Cape Town and Brad Wong from Copenhagen Consensus, who studied the best current initiatives to limit the spread of the disease.

### Benefits

They calculated the benefit of scaling up three strategies already in use: diagnostic testing of suspected malaria cases at health facilities, distribution of insecticide-treated bed nets and seasonal malaria chemoprevention.

It turns out that malaria prevention strategies are some of the very most effective health interventions. For every cedi spent on the most effective policy, diagnostic testing, would create 133 cedis of societal good.

How is this possible? Part of this has to do with the scope of the problem. Malaria is the leading cause of cause of death and morbidity in Ghana. It is also a major strain on the health system, as more than a third of all outpatient visits relates to suspected cases of malaria.

Malaria also affects the economy because that on average, 13.5 per cent of the workforce will contract malaria annually, suggesting that up to two per cent of all workdays may be lost to malaria.

Any intervention that will tackle malaria better will not only be addressing Ghana's deadliest challenge

but will also help reduce the damage to the economy.

What's in the way of getting this started?

**It turns out that malaria prevention strategies are some of the very most effective health interventions.**

Malaria has naturally long been a top health priority for any Ghanaian government as the Ghanaian health

system has been combating it since the 1950's and have made significant progress since then.

The proposed new interventions simply find significant benefits from further scaling-up of present initiatives. Clearly, promising technocratic scaling-up of existing policies carries less oomph than more exciting policy promises. But it shouldn't.

Right now, Ghana tests 90 per cent of possible malaria patients.

Expanding testing to the last 10 per cent will be much more costly per individual but it will still deliver amazing benefits: over the next 10 years, it could avoid 435,000 severe cases and nearly 25,000 deaths.

Each cedi spent would deliver 133 cedis of social benefits. Similarly, increasing the distribution of bednets to 90 per cent could avoid 700,000 severe cases and 40,000 deaths. Finally, increasing preventive treatment in the Guinea Savannah Region to 90 per cent would bring preventive medicine to 600,000 children.

Although it would require significant planning and human resources, it could in total help save more than 3,000 lives by 2030.

There is clearly a political focus on malaria in Ghana, as it is deadly and costly. But what the eminent panel shows us is that there should be even more political will invested in focusing on scaling-up of simple but effective malaria policies.

This is a policy that will both strengthen health and productivity in Ghana, ensuring it a yet brighter future. The problem is clear and the solution is ready for implementation. Now is the time for political action.

*The writers are President of the Copenhagen Consensus & the Manager of the National Malaria Control Programme, respectively.*



• Preventing malaria. A mother places her child under a mosquito net