
World Malaria Day event
Congress House, 10:30-12:30
Friday 25 April

Make malaria medical history!

Speech by GAIL CARTMAIL, Assistant General Secretary, Unite the Union (Amicus Section) and TUC General Councillor

CHECK AGAINST DELIVERY

Colleagues and friends, sisters and brothers, I am very happy to be here not only to welcome you to Congress House on behalf of the British trade union movement, but also to speak to you about the impact malaria has on working people and about what unions can and want to do about it.

The impact of malaria

By now, the basic facts and figures about malaria will be familiar to you, even if you didn't already know them when you entered the room:

- the 350-500 million people infected every year, mostly in sub-Saharan Africa;
- the million people who die every year; and
- the appalling child death rate – roughly one child every thirty seconds.

But malaria is more than just a public health problem. Malaria affects productivity and traps communities in continuing poverty.

The disease causes an average loss of 1.3% of annual economic growth in countries with intense transmission. To some people that may not seem a huge figure. But if it happened in the UK, it would halve our current growth rate.

In some countries with a very high malaria incidence, the disease may account for as much as 40% of public health expenditure, 30-50% of in-patient admissions and up to 60% of outpatient visits.

I repeat these figures not because I think you don't know, but because I want to use them to explain why trade unions believe that:

- malaria is a workplace issue, so unions and employers have a key role in addressing the disease; and
- malaria is a development issue so it needs to be addressed much more broadly

than as a specific disease – it requires progress towards the Millennium Development Goals including decent public health systems.

Why malaria is a trade union issue

But first I want to say a little bit about trade unions, and why I am here on the platform today.

Trade unions have an interest in malaria for several reasons. At home, here in Britain, that's probably mostly because we care about what happens in other countries, and especially that we care about the problems facing those who live in developing countries. I'm sure that's true of everyone here, and no one should be ashamed of that motivation.

But trade unionists are engaged for other reasons too.

It's our sisters and brothers in other parts of the world who suffer the scourge of malaria, either directly through being infected or seeing members of their family affected, or because their workplaces and wider economies suffer as a result of the productivity losses and healthcare costs.

Trade unionism may have been a British invention, but it is a truly global phenomenon these days, and the International Trade Union Confederation to which the TUC belongs has 168 million members in 155 countries on every continent. For many of our global unions, malaria is a local problem.

And there is a third reason why trade unions are involved. My own union has a substantial number of members in the National Health Service and the pharmaceutical industry – people who are professionally, as well as personally committed to fighting disease and keeping people healthy.

That's true in the countries where malaria transmission is most intense, too, and I'd like to welcome in the audience one particular trade unionist who knows a lot more about this issue than me – he's a perfect illustration of why trade unionists care about malaria.

Quinton Dlamini is the General Secretary of the Swaziland National Association of Civil Servants who is here in Britain, sponsored by two trade unions – Prospect and Unison – on a course at Ruskin College in Oxford. As well as being a trade unionist in a country where 30% of the population is at risk, Quinton is also professionally a parasitologist – so malaria really is his business.

So, having established that malaria is a trade union issue, what do we think needs to be done about it?

Trade union action on malaria

First, at the workplace, trade unions are campaigning to get employers to provide the medicines, the mosquito nets and help for people with responsibilities towards infected family members.

I should also say that we are looking to those people who provide the nets and the drugs – like the Department for International Development in the UK – source them ethically so that the people making them are treated with respect.

Second, unions are and need to do more training for workers about how to avoid malaria. It sounds simple, but then most effective ideas are.

And third, trade union leaders - like business leaders and politicians – need to give this issue the profile it deserves as an economic issue.

I mentioned earlier that in intensely affected areas, malaria can reduce GDP by 1.3%. As a percentage it doesn't sound like much. But most governments would love to increase their GDP by that much, and it would have an enormous effect on so many other aspects of society – more goods, more services, more taxes.

Support for public health services

This isn't much different from the work we do on HIV/AIDS, and that leads me to my second argument, which is that most of the measures that are needed to address malaria are needed also to combat the other great diseases, like TB. Indeed the diseases can often overlap – people infected by HIV are far more likely to contract malaria.

There is an unnecessary controversy in the global development movement at the moment about the proposal, made initially by the British Government in its International Health Partnership, that the UN and the G8 should give a higher priority to building up health systems in developing countries rather than simply fighting individual diseases.

The TUC has no qualms about supporting the British Government on that issue, and we don't think it contradicts our consistent support for the Global Fund for HIV/AIDS, TB and Malaria, or our demand that our Government and other Governments in the industrialised world should increase their contributions to the fund.

But while on that subject, we also believe that the way the fund is spent needs to be reformed – all too often, trade unionists in countries affected are excluded from the national bodies that deal with the funds, and trade union programmes on these diseases therefore remain unfunded.

Bluntly, we need to focus both on individual diseases and on building up public health services. Fighting individual diseases without developing health services

overall is just a sticking plaster solution. Developing countries need adequately funded health systems with sufficient numbers of qualified staff.

As a trade unionist with a lot of experience in representing NHS workers, I know that that requires money for training, money for facilities and money for decent wages, too. And it needs to be delivered free at the point of need, because the people who are most at risk are the people who are least able to pay for their treatment.

We believe that only the public sector can deliver that sort of health system.

That's why we are calling on the G8 meeting in Japan in July to agree to support health systems in developing countries, including setting targets for increases in the number of health workers.

Conclusion: make malaria medical history!

Colleagues, I said at the beginning that I was pleased to be here and one of the things I am most pleased about is the range of organisations, not just here but around the world, who are focusing our efforts on combating malaria.

World Malaria Day, building on seven years of Africa Malaria Day, is a vital contribution to meeting the Millennium Development Goals.

Combating malaria isn't just about achieving the health goals. The economics of malaria, as I mentioned, mean that we need to address this challenge to meet the first goal of reducing poverty: malaria is a product of poverty and a cause of poverty. And the impact of malaria on children means we won't meet the education goals if we don't tackle malaria, either.

So let's make every effort to tackle this dreadful disease, and make malaria medical history!