
The \$10 Solution

Listen for a moment to the beautiful and dignified voices of Africa's mothers. Despite their burdens of poverty and hunger, they will tell you not of their endless toil but of their hopes for their children. But softly, ever so softly, they will also recount the children they have lost, claimed by a sudden fever, children who died in their arms as they were carried in a desperate half-day's journey by foot from the village to the nearest clinic.

This is the ineffable sadness of malaria. Another African child has died of malaria since you started reading this article. Perhaps 2 million children in all will succumb this year.

The long-term consequences are insidious as well as tragic and even relate to the ability of the U.S. to prevail against the jihadists. Not only does malaria sap worker productivity and scare away business investment, but it also, paradoxically, increases the rate of population growth. Instead of having two or three children, couples in a malarial region often choose to have six or seven—unsure how many will survive.

Malaria also helps create a poverty trap with special ferocity in Africa. By a quirk of ecological fate, Africa has the world's heaviest toll of this disease, the result of its tropical climate, its specific types of mosquitoes and its limitless mosquito-breeding sites. Children are struck down in unmatched numbers. And Africa's disease toll from malaria may be even higher than previously recognized. Recent research has found that malaria infection increases the likelihood that an HIV-infected individual will transmit the AIDS virus to others. Many millions are also infected simultaneously with malaria and worm infections, multiplying the disease burden.

Osama bin Laden has called for jihad in Africa, trying to capitalize on its extreme poverty. Here's how we can respond. While malaria has shaped Africa's poverty trap, it is a trap that can finally be unlocked. Spectacular technological advances, some stunningly simple, offer practical and low-cost solutions. The most obvious one is insecticide-treated bed nets, now cleverly engineered to last up to five years. The cost to manufacture, ship and distribute each net is \$10. A new generation of medicines based on artemisinin, an extract from a traditional Chinese herbal remedy, is remarkably effective in treating cases of the disease, at a cost of about a dollar per treatment.

Yet these solutions still aren't reaching the vast proportion of Africans in need. Hard as it is for us to imagine, Africa's households simply can't afford even \$10 for a net, or a dollar for medicines when a child falls sick. Nor can African governments carry these costs on meager budgets or take extra vital steps to train local health workers and ensure that every village has reliable access to effective medicines.

Here is where you and I come in. Considering the costs of the nets, medicines and other components of malaria control, a comprehensive program would cost about \$4.50 per African at risk, or about \$3 billion a year for the whole continent. This is an amount that is too large for Africa but truly tiny for the rich world.

Let me put the \$3 billion in perspective: there are a billion of us in the high-income world—that amounts to \$3 a person, or one Starbucks coffee a year. It's around 12.5% of the estimated \$24 billion in Wall Street's Christmas bonuses.