The entire population of Rwanda is at risk of malaria, but transmission is most intense in the eastern and south-western parts of the country. The annual reported number of malaria cases in 2012 was 478,955 with 459 deaths.
Progress
Rwanda has made significant progress in scaling-up malaria control interventions, including in key policy areas: banning oral artemisinin-based monotherapies and introduction of policies on Community Case Management of malaria and pneumonia. Rwanda has successfully mobilised most of the resources for the procurement of the majority of the LLINs, ACTs, and RDTs required to sustain universal coverage in 2014. Rwanda has also achieved high coverage of tracer MNCH interventions, including exclusive breastfeeding, DPT3 vaccination and PMTCT. Rwanda was awarded a 2014 ALMA Award for Excellence in Implementation of Vector Control.

Impact
There has been a significant decline in malaria cases and deaths in Rwanda with 478,955 cases and 459 deaths reported in 2012. Rwanda has achieved the target of 75% reduction in malaria incidence since 2000.

Previous Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
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</thead>
<tbody>
<tr>
<td>MNCH¹: Optimise quality of care</td>
<td>Identify and address reasons for decreasing vitamin A coverage</td>
<td>Q2 2015</td>
<td>Green</td>
<td>The country reports 81% vitamin A coverage</td>
</tr>
</tbody>
</table>

Key
- Action achieved
- Some progress
- No progress
- Deliverable not yet due

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/iERG