In Burundi, about 24% of the population is at high risk for malaria and nearly 22% live in malaria-free highland areas. The annual reported number of malaria cases in 2018 was 5,149,436 with 2,481 deaths.
Malaria
Sustaining Essential Health Services During the COVID-19 Pandemic

The COVID-19 pandemic is putting an incredible strain on health systems across Africa. Health systems are required to maintain routine health services for other illnesses even as they handle the additional burden. In order to prevent widespread morbidity and mortality, it is of vital importance that we work to sustain the delivery of essential life-saving interventions during this difficult time including for Reproductive, Maternal, Newborn, Child and Adolescent health and malaria.

WHO underlines the critical importance of sustaining efforts to prevent, detect and treat malaria during the COVID-19 pandemic. It is of vital importance to ensure the continuity of malaria prevention and treatment services including distribution of insecticide-treated nets and indoor residual spraying, as well as chemoprevention for pregnant. Any intervention must consider the importance of both lowering malaria-related mortality and ensuring the safety of communities and health workers given the ease of transmission of COVID-19.

For Burundi, with the universal coverage campaign for long-lasting insecticidal nets (LLINs) completed, it will be important to ensure that these nets are used by at-risk populations through targeted behaviour change communication. The planned indoor residual spraying (IRS) campaigns should also be completed as planned, and malaria case management should also be sustained. Without these malaria control and prevention interventions in place, there will be an increase in malaria cases and deaths. Under the worst-case scenario, in which there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 23.2% increase in malaria cases, and a 99.8% increase in malaria deaths in Burundi. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress
Burundi procured sufficient LLINs to achieve universal coverage of the targeted at risk population. The country has secured sufficient resources to procure the LLINs, and ACTs required in 2020. The country completed the LLIN campaign in early 2020. Burundi has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has developed an insecticide resistance monitoring and management plan.

Impact
The annual reported number of malaria cases in 2018 was 5,149,436 with 2,481 deaths.

Key Challenges
- The country has experienced a malaria upsurge from 2015.
- Gaps to further scale up IRS.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health including malaria.
### Previous Key Recommended Actions

<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>
</tr>
</thead>
<tbody>
<tr>
<td>Impact</td>
<td>Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic</td>
<td>Q4 2020</td>
<td>Burundi facilitated a rapid procurement of ACTs in order to address stock outs as a result of delayed delivery of essential commodities due to the COVID-19 pandemic. The country completed the LLIN distribution in quarter 1 before the onset of the COVID-19 pandemic</td>
<td></td>
</tr>
</tbody>
</table>

### RMNCAH and NTDs

#### Progress

Burundi has achieved high coverage of tracer RMNCAH interventions, including exclusive breastfeeding, DPT3, ART coverage and skilled birth attendance. Burundi enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Burundi is measured using a composite index calculated from preventive chemotherapy coverage achieved for onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Burundi is high for schistosomiasis (100%), soil transmitted helminths (95%) and for onchocerciasis (83%). However, the country did not implement preventive chemotherapy for trachoma (0%). Overall, the NTD preventive chemotherapy coverage index for Burundi in 2018 is 17, the same as 2017 index value (17).

Burundi is commended for completing the required rounds of MDA for Trachoma, and reducing the prevalence to less than 5%. The country has also reached WHO targets for Preventive Chemotherapy for schistosomiasis, soil transmitted helminths and onchocerciasis.

#### Previous Key Recommended Actions

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>RMNCAH¹: Impact</td>
<td>Ensure that essential RMNCAH services are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. Address any stock-outs of essential RMNCAH commodities</td>
<td>Q4 2020</td>
<td>Deliverable not yet due</td>
<td></td>
</tr>
</tbody>
</table>

Burundi has responded positively to the RMNCAH recommended actions addressing low coverage of ART coverage in children, with a 2% increase in coverage reported in the last year.

### Key

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

¹ RMNCAH metrics, recommended actions and response tracked through WHO