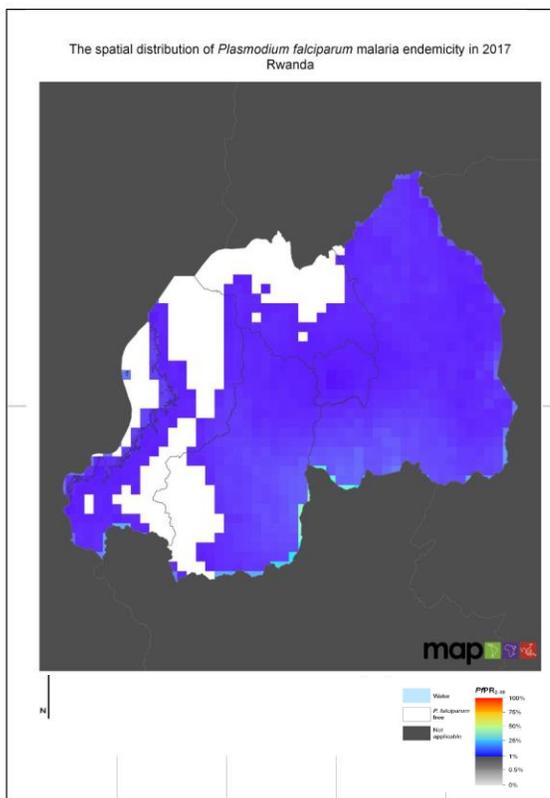


Scorecard for Accountability and Action



The annual reported number of malaria cases in 2019 was 3,572,761 with 224 deaths.

Metrics

Commodities Financed and Financial Control	
LLIN financing 2021 projection (% of need)	100
Public sector RDT financing 2021 projection (% of need)	91
Public sector ACT financing 2021 projection (% of need)	100
World Bank rating on public sector management and institutions 2019 (CPIA Cluster D)	3.8
Insecticide Resistance Monitoring, Implementation and Impact	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	3
Insecticide resistance monitored since 2015 and data reported to WHO	
National Insecticide Resistance Monitoring and Management Plan	
RDTs in stock (>9 months stock)	
ACTs in stock (>9 months stock)	
LLIN/IRS campaign on track	
Country Reporting Launch of Zero Malaria Starts with Me Campaign	
Scale of Implementation of iCCM	
Operational LLIN/IRS coverage (% of at risk population)	100
On track to reduce case incidence by ≥40% by 2020 (vs 2015)	
On track to reduce case mortality by ≥40% by 2020 (vs 2015)	
Tracer Indicators for Maternal and Child Health and NTDs	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2019)	83
Estimated % of Total Population living with HIV who have access to antiretroviral therapy (2019)	87
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2019)	50
% deliveries assisted by skilled birth attendant	91
Postnatal care (within 48 hrs)	43
Exclusive breastfeeding (% children < 6 months)	87
Vitamin A Coverage 2018 (2 doses)	92
DPT3 coverage 2019 (vaccination among 0-11 month olds)	98

Key

	Target achieved or on track
	Progress but more effort required
	Not on track
	No data
	Not applicable

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, Neglected Tropical Diseases and malaria.

For Rwanda, we commend the Ministry of Health, in the decision to go ahead with the universal coverage campaign for LLINs and IRS, in accordance with the guidance and recommendations from WHO and the RBM Partnership to End Malaria. Based on WHO modeling, this decision, allied with sustained malaria case management through the health system, will prevent a significant increase in malaria cases and deaths. Under the worst-case scenario, in which all ITN campaigns are suspended and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could have been a 33.9% increase in malaria cases, and a 100.1% increase in malaria deaths in Rwanda. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

Progress in addressing Neglected Tropical Diseases (NTDs) in Nigeria is measured using a composite index calculated from preventive chemotherapy coverage achieved for lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths and trachoma. Preventive chemotherapy coverage in Nigeria is high for schistosomiasis (99%) and for onchocerciasis (80%), good for soil transmitted helminths (76%), for trachoma (67%) and for lymphatic filariasis (62%). Overall, the NTD preventive chemotherapy coverage index for Nigeria in 2019 is 76, which represents a substantial increase compared with the 2018 index value (60).

Progress

Rwanda has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO and has completed the national insecticide resistance monitoring and management plan. The country has rolled out iCCM countrywide and has secured sufficient resources to distribute the required LLINs, ACTs and most of RDTs in 2021. Rwanda has implemented an emergency response programme to address the upsurge in malaria cases. The country has a high rating in terms of public sector management systems (CPIA cluster D). The country has launched the Zero Malaria Starts with Me campaign

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, Rwanda has enhanced the tracking and accountability mechanisms for malaria with the development of the Malaria Control Scorecard and posting this scorecard to the ALMA Scorecard Knowledge Hub. The country is planning the launch of a Health Fund including malaria and NTDs in quarter 2 2021.

Impact

The annual reported number of malaria cases in 2019 was 3,572,761 with 224 deaths.

Key Challenges

- Reported malaria upsurges from 2015.
- Sustaining the delivery of essential life-saving interventions during the COVID-19 pandemic including for Reproductive, Maternal, Newborn, Adolescent and Child health, malaria and Neglected Tropical Diseases.

Previous Key Recommended Actions

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Ensure that malaria services including case management and vector control are sustained and implemented whilst using COVID-19 sensitive guidelines during the pandemic	Q4 2020		Malaria control activities continue in Rwanda whilst respecting COVID-19 preventive measures. Malaria case management at health facility and community levels are continuing and currently 56% of malaria cases are managed by CHWs. From January to March 2021, IRS was implemented in Huye, Nyanza, Gisagara, Rwamagana, Kayonza and Gatsibo districts by keeping COVID-19 prevention measures.
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and mortality between 2015 and 2019, which means that the country is not on track to achieve the 2020 target of a 40% reduction in malaria incidence and mortality	Q4 2021		The Rwanda malaria upsurge was documented due to: Mosquito resistance to insecticides; climate change; Low coverage in malaria control interventions such as IRS (as the country was inconsistently spraying only less than 5 to 7 districts till 2018 due to insufficient budget). In response to the upsurge, in 2018 the Government increased the budget for IRS, and the GF availed a budget for 6 districts for IRS making a total of 10 districts covered by IRS, increasing to 12 districts from 2019. Considering the 2020 HMIS data, Rwanda is on track for both incidence and mortality: <ul style="list-style-type: none"> - Incidence of 240 per 1,000 in 2015 compared to 148 per 1,000 in 2020 (almost 50% reduction in incidence expected by 2023); - Malaria related deaths of 492 in 2015 compared to 148 in 2020 (over 50% reduction expected in 2023)

Rwanda has responded positively to the previous recommended action on the increase in cases observed since 2010 and continues to track progress as this action is implemented.

RMNCAH and NTDs

Progress

Rwanda has achieved high coverage of tracer RMNCAH interventions, including exclusive breastfeeding, vitamin A, ARTs in the total population, DPT3 vaccination and skilled birth attendants. The country has significantly enhanced the tracking and accountability mechanisms with the development of the Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Rwanda is measured using a composite index calculated from preventive chemotherapy coverage achieved for schistosomiasis, and soil transmitted helminths. Preventive chemotherapy coverage in Rwanda is high for soil transmitted helminths (99%), and good for schistosomiasis (70%). Overall, the NTD preventive chemotherapy coverage index for Rwanda in 2019 is 83, which represents a large increase compared with the 2018 index value (85).

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
RMNCAH ¹ : Impact	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	Q4 2020		RMNCAH services continue to be provided whilst respecting COVID-19 preventive measures. The Maternal and Child Health week was conducted from 22 February to 7 March 2021 at community and at school level. Community health workers have continued to prioritise case management. The COVID-19 vaccination campaign is rolling out
NTDs	Ensure that NTD interventions including Mass Drug Administration, vector control and Morbidity Management and Disability Prevention are sustained and implemented whilst using Covid-19 sensitive guidelines during the pandemic. This includes prioritising key necessary catch up activities	Q4 2021		Rwanda has implemented NTD activities whilst respecting all COVID-19 preventive measures. This includes the first round of MDA in June 2020, whilst the second round that was planned in December 2020 was delayed and implemented in Q1 2021. Community-based re-mapping of Soil Transmitted Helminths and Schistosomiasis in Q4 2020. Snail mapping was completed in March 2021. The country has developed the elimination dossier for Human African Trypanosomiasis as a public health problem. Awareness activities around World NTD day have been carried out and the design of the NTDs treatment algorithm finalised

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due

¹ RMNCAH metrics, recommended actions and response tracked through WHO