The annual reported number of malaria cases in 2019 was 3,572,761 with 224 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, 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.
<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></td>
<td>Malaria control activities continue in Rwanda whilst respecting COVID-19 preventive measures. Malaria case management at health facility and community levels are continuing by respecting covid-19 preventive measures. From January to March 2021, IRS was implemented in Huye, Nyanza, Gisagara, Rwamagana, Kayonza and Gatsibo districts; and, from April to May 2021, IRS was conducted in Bugesera and in Rusizi by keeping COVID-19 prevention measures</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Objective</th>
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<th>Progress</th>
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</tr>
</thead>
<tbody>
<tr>
<td>RMNCAH*: 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>Green</td>
<td>Despite the covid-19 pandemic, RMNCAH services are being provided respecting prevention measures. Regular community activities including monthly nutrition screening and CHWs support are ongoing. Coordination meetings including the Technical Working Group and workshops are being held using online platforms and Covid-19 vaccination is ongoing.</td>
</tr>
<tr>
<td>NTDs</td>
<td>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</td>
<td>Q4 2021</td>
<td>Yellow</td>
<td>Rwanda has continuously conducted NTD interventions at the same time as respecting the COVID-19 preventive guidelines in place and in consultation with COVID-19 task force to ensure that all preventive measures are respected. From 16 to 30th June 2021 the country conducted MDA in a decentralized and integrated approach where each teacher administers drugs to the pupils in schools and community health workers with village leaders’ support administer drugs in their catchment area. The country conducted Data Quality Assessment of MDA data reported through the HMIS. The country was able to complete and submit an elimination dossier requesting WHO validation of HAT elimination in Rwanda. A workshop to analyse and report Schistosomiasis and Soil Transmitted Helminths mapping data and to complete the Joint Application Forms (JAP) was organized and the JAP was submitted to WHO in April 2021. Rwanda also developed an NTD annual joint plan 2021-2022 that captures activities that will be implemented by all NTD stakeholders from health, WASH, animal, academic, wildlife and the environment towards elimination of NTDs in Rwanda</td>
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</tbody>
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**Key**

- Green: Action achieved
- Yellow: Some progress
- Red: No progress
- Grey: Deliverable not yet due

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1 RMNCAH metrics, recommended actions and response tracked through WHO