The entire population of the Democratic Republic of Congo is at high risk of malaria and transmission is intense year round with seasonal variations. The annual reported number of malaria cases in 2019 was 21,934,127 with 13,072 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, Adolescent and Child health, Neglected Tropical Diseases and malaria.

For the Democratic Republic of Congo, it was of vital importance to ensure that the rolling long-lasting insecticidal net (LLIN) campaigns scheduled for 2020 were completed. The country is congratulated for successfully rolling out the 2020 campaigns. Under the worst-case scenario, in which the LLIN campaigns are not completed and there is a 75% reduction in access to effective antimalarial medicines, WHO estimate that there could be a 14.2% increase in malaria cases, and a 98.2% increase in malaria deaths in The Democratic Republic of Congo. This scenario would represent a complete reversal in the substantial progress in malaria mortality reductions seen over the last 2 decades.

It is essential to ensure the continuity of malaria, RMNCAH and NTD services in 2021 as the COVID-19 pandemic continues to impact our continent. This may include the implementation of any necessary catch-up activities and ensuring timely planning to account for potential delays in procurement and delivery. Any intervention must ensure the safety of communities and health workers given the ease of transmission of COVID-19.

Progress
The Democratic Republic of Congo procured sufficient ACTs, RDTs and LLINs to achieve 100% operational coverage of the targeted at risk population in 2021. The country has carried out insecticide resistance monitoring since 2015 and has reported the results to WHO. The Democratic Republic of Congo has secured the resources required to sustain coverage of LLINs, ACTs and RDTs in 2021. The country is also showing leadership in malaria control through its participation in the High Burden High Impact approach. The country has also successfully launched the Zero Malaria Starts with Me campaign.

In line with the legacy agenda of the ALMA chair, His Excellency President Uhuru Kenyatta, the country has enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard. This scorecard is up to date but has not yet been posted on the ALMA Scorecard Hub. The Democratic Republic of Congo plans to announce the creation of the End Malaria Council and Fund.

Impact
The annual reported number of malaria cases in 2019 was 21,934,127 with 13,072 deaths.

Key Challenges
- Resource gaps to fully implement the national strategic plan.
- 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

<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>All protective measures against COVID-19 were respected while implementing malaria control interventions. The country reports there are adequate stocks of ACTs and RDTs. The 2021 LLIN campaigns are scheduled for quarter 4. However, the campaigns originally scheduled for 2020, including Kinshasa and Ituri were delayed due to the impact of the COVID-19 pandemic but have now been completed. The pandemic has also impacted malaria financing, with an increase in costs of training</td>
</tr>
</tbody>
</table>

The country has responded positively to the recommended actions addressing CPIA cluster D and continues to track progress as these actions are implemented.

### RMNCAH and NDTs

#### Progress

The Democratic Republic of Congo has achieved high coverage in the tracer RMNCAH intervention of skilled birth attendants. The country has enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn and Child Health Scorecard.

Progress in addressing Neglected Tropical Diseases (NTDs) in Democratic Republic of the Congo 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 Democratic Republic of the Congo is very good for Soil Transmitted Helminths (86%), onchocerciasis (81%) and lymphatic filariasis (80%), with 68% coverage of schistosomiasis and 67% for trachoma. Overall, the NTD preventive chemotherapy coverage index for Democratic Republic of the Congo in 2019 is 74, which represents substantial increase compared with the 2018 index value (53).
<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>Green</td>
<td>A survey was conducted to understand the supply and demand for RMNCAH services, targeting Kinshasa which was most impacted by the COVID-19 pandemic. Data from January to April 2020 were collected in 103 facilities of the City of Kinshasa. A trend of increasing use of delivery service during the COVID-19 period was observed and the use of childbirth services by teens and young people increased by 29%. ANC-1 decreased including in adolescents and young people, however an increase in coverage of ANC4 was observed. A decrease in PNC was observed. The Ministry of Health produced RMCAH/nutrition guidelines in the context of Covid-19, with the Specialized Programs directly involved. The country organised a briefing by video conference for health staff, and the materials have been disseminated.</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>Green</td>
<td>In 2020, by respecting COVID-19 preventive measures, DRC organized MDA for Lymphatic Filariasis, onchocerciasis and for Trachoma. The country also conducted Morbidity Management and Disability Prevention in the Ituri region. The NTD key interventions continue in 2021 whilst using Covid-19 sensitive guidelines.</td>
</tr>
</tbody>
</table>

The country has responded positively to the RMNCAH recommended actions addressing accelerating coverage of ARTs in children and vitamin A (with a recent increase in coverage reported) and continues to track progress as theses action are implemented.

**Key**

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

¹ RMNCAH metrics, recommended actions and response tracked through WHO