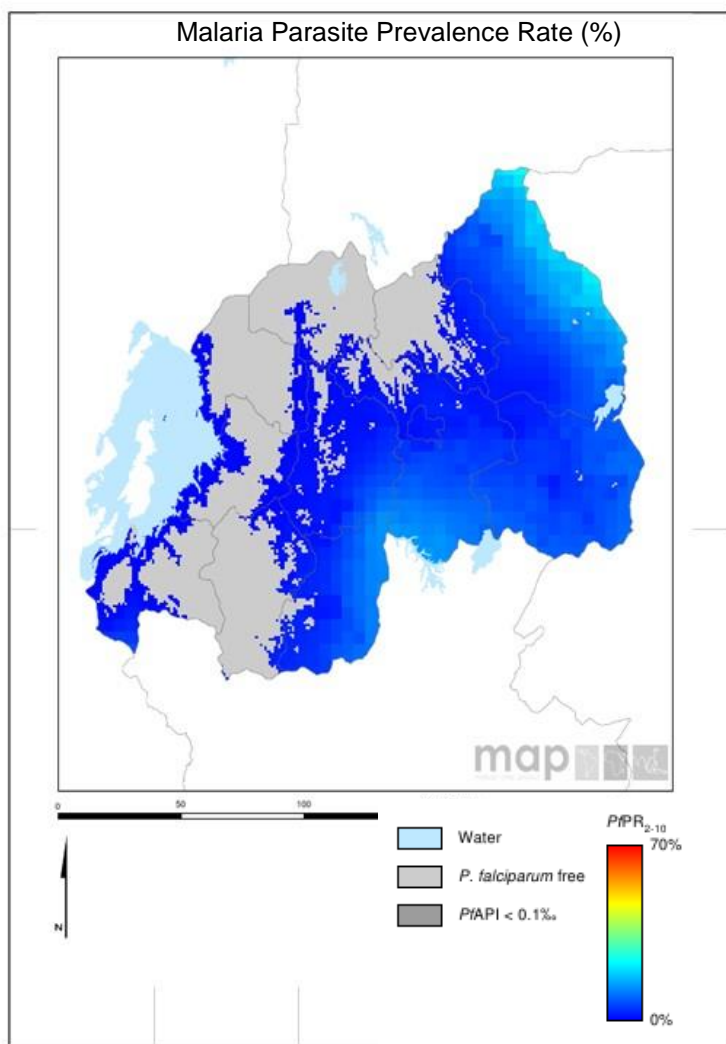


Scorecard for Accountability and Action



The annual reported number of malaria cases in 2013 was 939,076 with 409 deaths.

Metrics

Policy and Financial Control		
Oral Artemisinin Based Monotherapy Ban status (2015)		
Community case management (Pneumonia)(2015)		
Community case management (Malaria)(2015)		
World Bank rating on public sector mgmt and institutions 2014 (CPIA Cluster D)		3.6
Commodities Financed, Implementation and Malaria Impact		
LLIN financing 2015 projection (% of need)		100
Public sector RDT financing 2015 projection (% of need)		100
Public sector ACT financing 2015 projection (% of need)		100
Operational LLIN/IRS coverage (% of at risk population)		100
On track in 2013 to Reduce Malaria Incidence by >75% by 2015 (vs 2000)		
Tracer Indicators for Maternal and Child Health		
PMTCT coverage 2014 (% pregnant HIV pts receiving ARVs)		95
% deliveries assisted by skilled birth attendant	▲	91
Exclusive breastfeeding (% children < 6 months)		87
Vitamin A Coverage 2012 (2 doses)		3
DPT3 coverage 2013 (vaccination among 12-23 month olds)		98
Postnatal care (within 48 hrs)	▲	42

Key

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

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 also achieved high coverage of tracer MNCH interventions, including PMTCT, exclusive breastfeeding and DPT3 vaccination and has recently increased coverage of postnatal care and skilled birth attendants. Rwanda has achieved MDG4 by reducing under-five child mortality by over two-thirds since 1990.

Impact

There has been a significant decline in malaria cases and deaths in Rwanda with 939,076 cases and 409 deaths reported in 2013. Rwanda has achieved the target of 75% reduction in malaria incidence since 2000.

Recommended Actions

Rwanda has responded positively to the recommended actions addressing low coverage of vitamin A and postnatal care, with coverage of the latter having recently increased, and continues to track progress as these actions are implemented.