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 2021 was 6,618,492 with 2,292 deaths.
Malaria
Progress
The country continues to work on strengthening and maintaining health services following the devastating impact of the COVID-19 pandemic. In this regard Burundi procured sufficient LLINs to achieve universal coverage of the targeted at-risk population. The country secured sufficient resources to procure the ACTs and RDTs required in 2023. The country has carried out drug resistance monitoring since 2018, and insecticide resistance monitoring since 2015 and has reported the results to WHO. The country has also developed an insecticide resistance monitoring and management plan. The national strategic plan includes activities targeting refugees and IDPs.

In line with the priority agenda of the ALMA chair, His Excellency President Umaro Sissoco Embaló, Burundi has significantly enhanced the tracking and accountability mechanisms for malaria with the development of a Malaria Control Scorecard. This scorecard tool has been updated and is being decentralized but has not yet been shared on the ALMA Scorecard Hub. The country RMNCAH scorecard has been shared through the Scorecard Hub. The country is working on establishing the End Malaria Council and Fund to enhance domestic resource mobilization and multi-sectoral action.

Impact
The annual reported number of malaria cases in 2021 was 6,618,492 with 2,292 deaths.

Key Challenges
- The country has experienced a malaria upsurge from 2015.
- Gaps to further scale up IRS.

RMNCAH and NTDs
Progress
Burundi has achieved high coverage of tracer RMNCAH interventions, including DPT3 and vitamin A coverage. 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 trachoma (100%), schistosomiasis (100%), soil-transmitted helminths (98%) and zero for onchocerciasis (0%). Overall, the NTD preventive chemotherapy coverage index for Burundi in 2021 is 18 and this represents a very substantial decrease compared with the 2020 index value (95).
## 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>Optimise quality of care</td>
<td>Address the falling coverage of vitamin A</td>
<td>Q4 2023</td>
<td></td>
<td>Children from 6 to 59 months are supplemented with vitamin A during mother and child health weeks organized twice a year. The country has noted declines in coverage through this approach. To address this, the Ministry of Public Health in collaboration with UNICEF commissioned action research to test switching vitamin A distribution to a routine supplementation strategy including with the distribution of vitamin A and Albendazole by community health workers and by health structures to all children under 5 years old. Based on the pilot, the country is now working on a country-wide strategy and fund raising plan</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. The country has also responded to the recommended action on NTD MDA, and continues to track progress as the identified actions are implemented.

### Key

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