



Rwanda Malaria Control Efforts Coordination

Thirty-Third Meeting of the RBM Partnership (SMERG)

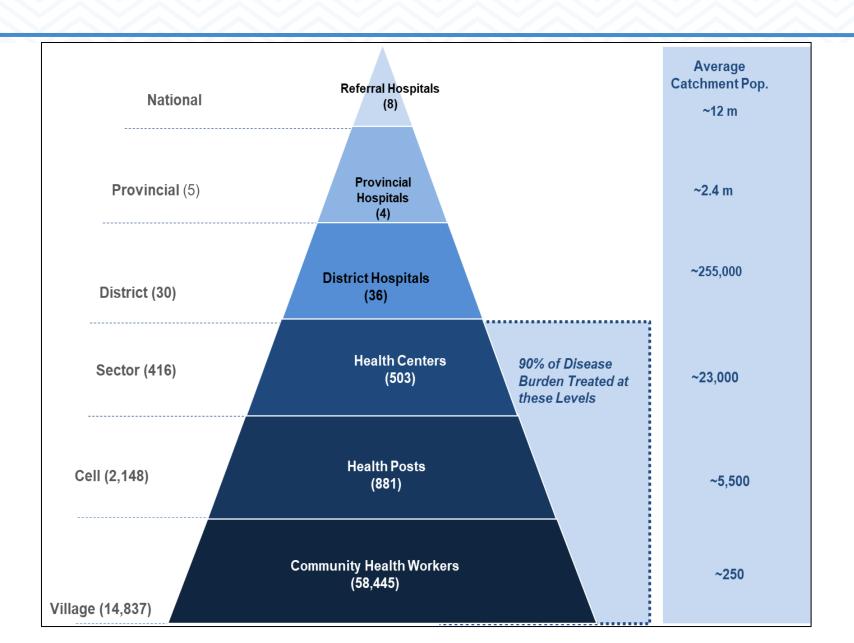
Venue: Marriot Hotel, Kigali Rwanda

Dr. Aimable MBITUYUMUREMYI
MOPD Division Manager
HDPC/MOPDD

17/05/2022

Rwanda Health Sector Structure





Organizational Structure of MOPDD



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Ministry of Health Rwanda Biomedical Center **HDPC** Department Malaria & Other Parasitic Diseases **Control Division Manager** BCC Officer (1) Supply Chain Officer (1) Director of Case Director of Vector Director of Director of Director of **Epidemiology Unit** Control Unit Prevention Unit Management Unit NTDs Unit Epidemiology Senior Officer (1) NTD Research Senior Officer (1) - Prevention Senior Officer (1) - Clinical CM Senior Officer (1) Vector Control Supervisor (1) Community CM Senior Officer (1) Risk Mapping Senior Officer (1) NTD Senior Officer (1) - ITN Senior Officer (1) - Entomology Senior Officer (1) - IGA Supervisor (1) Supervisors (4) Podo Program Coordinator (1) - IVM Senior Officer (1) - HBM Supervisors (4) Data Manager (1) - GIS Officer (1) - Capture Technicians (3) - Entomology Coordinator (1) Insectary Technician (1)

Total: 36

- CS: 17
- Contractual: 14
- Seconded Staff: 5

National Strategic Plan 2020-2024- Goal



GOAL

By 2024, reduce malaria morbidity and mortality by at least 50% of the 2019 levels

OBJECTIVES

- By 2024, at least 85% of population at risk will be effectively protected with preventive interventions;
- All suspected malaria cases are promptly tested and treated in line with the national guidelines;
- By 2024, strengthen surveillance and reporting in order to provide complete, timely and accurate information for appropriate decision making at all levels;
- Strengthen coordination, collaboration, procurement & supply management and effective program management at all levels;
- By 2024, 85% of the population at risk will have correct and consistent practices and behaviors towards malaria control interventions.

Key National Malaria Control Interventions, FY21/22



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Malaria Prevention with LLINs



2



Indoor Residual Spraying (IRS)





Malaria Case Management (CHWs and HFs)





SBCC





Surveillance-M&E

6



Other Tools



Malaria Prevention with LLINs

Central Level

- Planning/Policy/Guidelines
- Resources Mobilization
- Procurement
- Quality Control
- Coordination of Distribution

• District/HFs/CHWs

- Needs Assessment
- Distribution
- Monitor Use



Indoor Residual Spraying-Entomo

Central Level

- Planning/Policy/Guidelines
- Resources Mobilization
- Procurement
- Quality Control of IRS/Surveillance
- Coordination of IRS Implementation

Districts/HFs/CHWs

- Needs Assessment
- Implement IRS
- Community Mobilization
- Surveillance



Malaria Case Management (CHWs and HFs)

Central Level

- Planning/Policy/Guidelines
- Resources Mobilization
- Procurement (Anti-malarial drugs, Tests)
- Quality Control of Drugs and Tests/Surveillance
- Coordination of Services at all levels
- Coordinate Supply Chain

Districts/HFs/CHWs

Diagnosis and Treatment



Surveillance-M&E

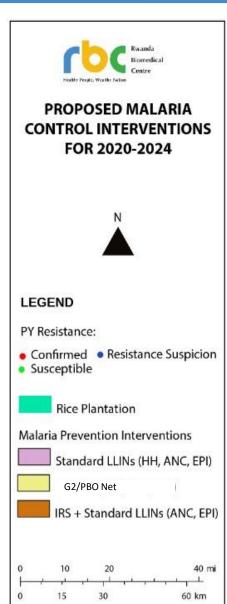
Central Level

- Planning/Policy/Guidelines
- Resources Mobilization
- Indicators Definition
- Reporting Systems
- ISS-DQA
- Feedback

• Districts/HFs/CHWs

- Data collection
- DQA
- Reporting

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Core Interventions

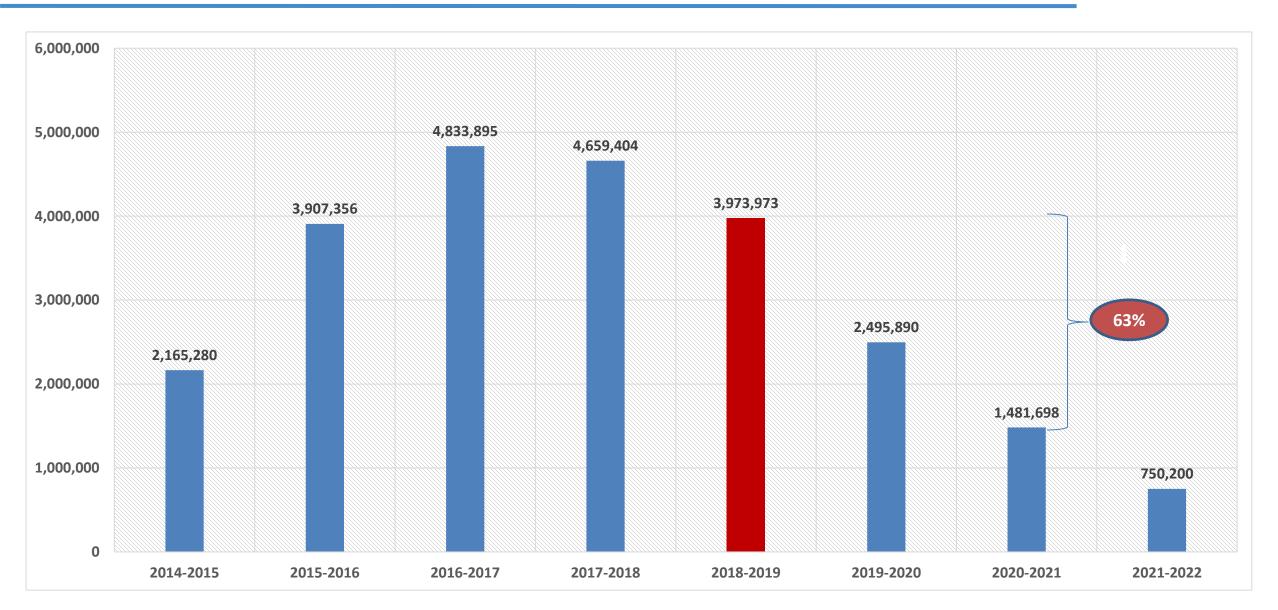
- Malaria Case Management (HFs, HPs, HBM)
- IRS in 12 Districts (with Targeted IRS in few Sectors)
- LLINs (Routine Distribution, Last Mass Campaign in 2020)
- SBCC with Support from CSOs

Supplemental

- **Drone Based Larviciding**
- Mosquito Repellents
- Community Based IVM

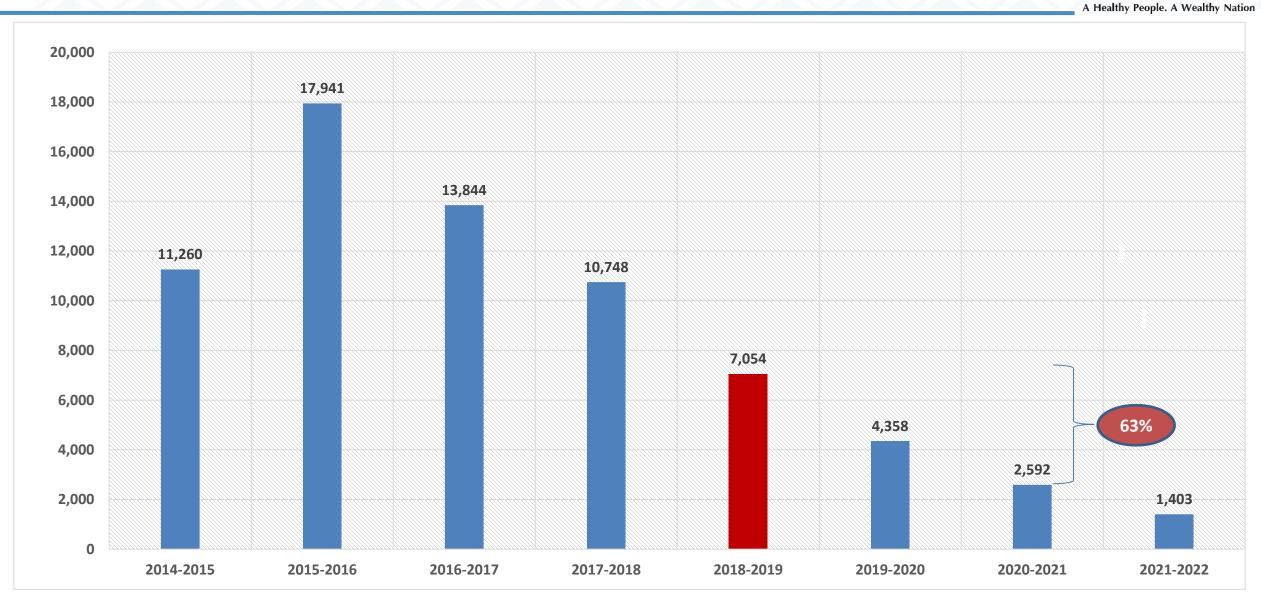
Malaria Cases from 2014-March 2022





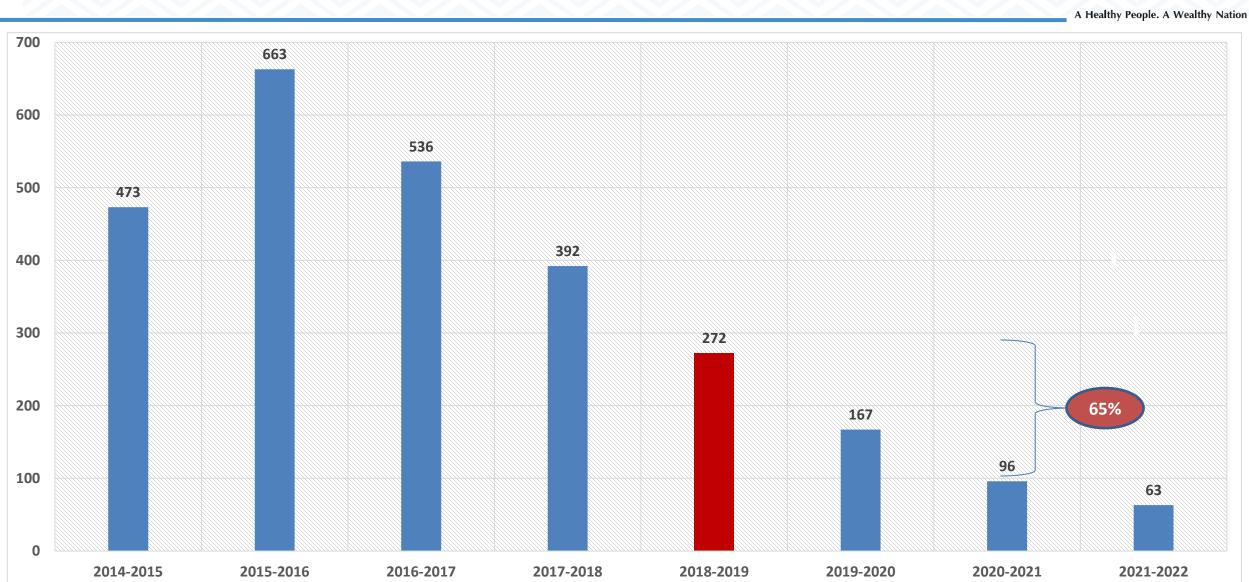
Severe Malaria Cases from 2014-March 2022





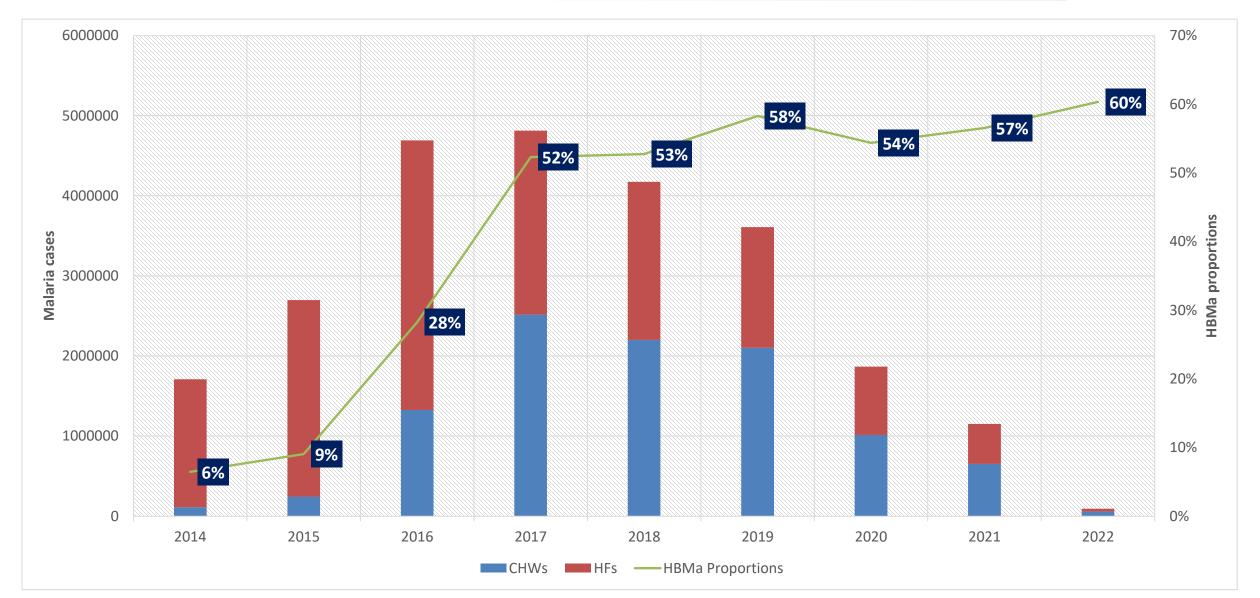
Malaria Related Deaths from 2014-March 2022





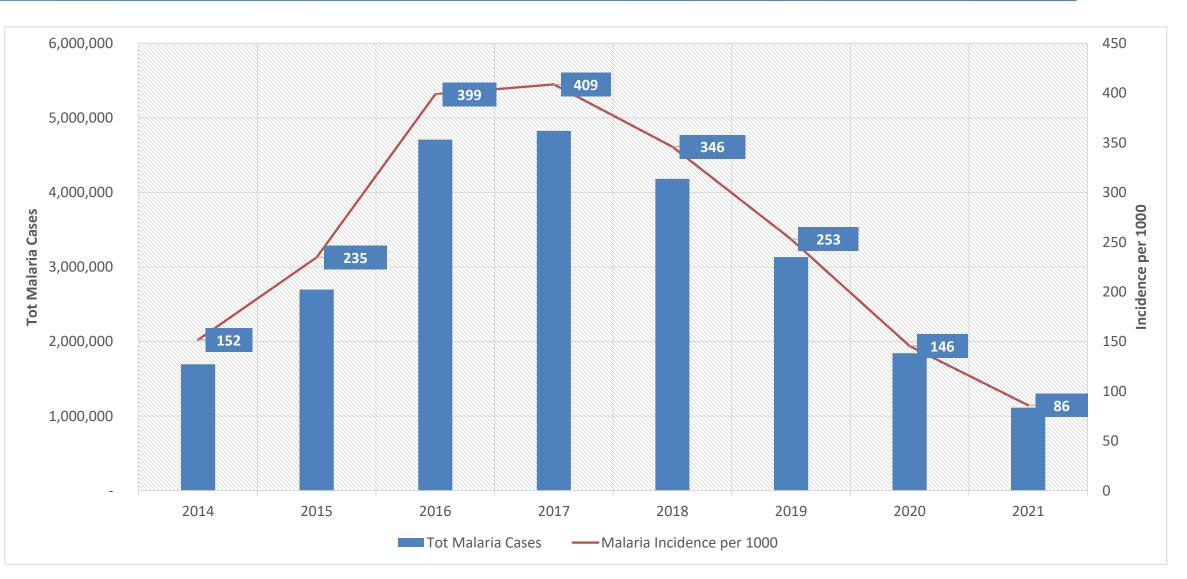
Proportion of Malaria HBM 2014-March 2022





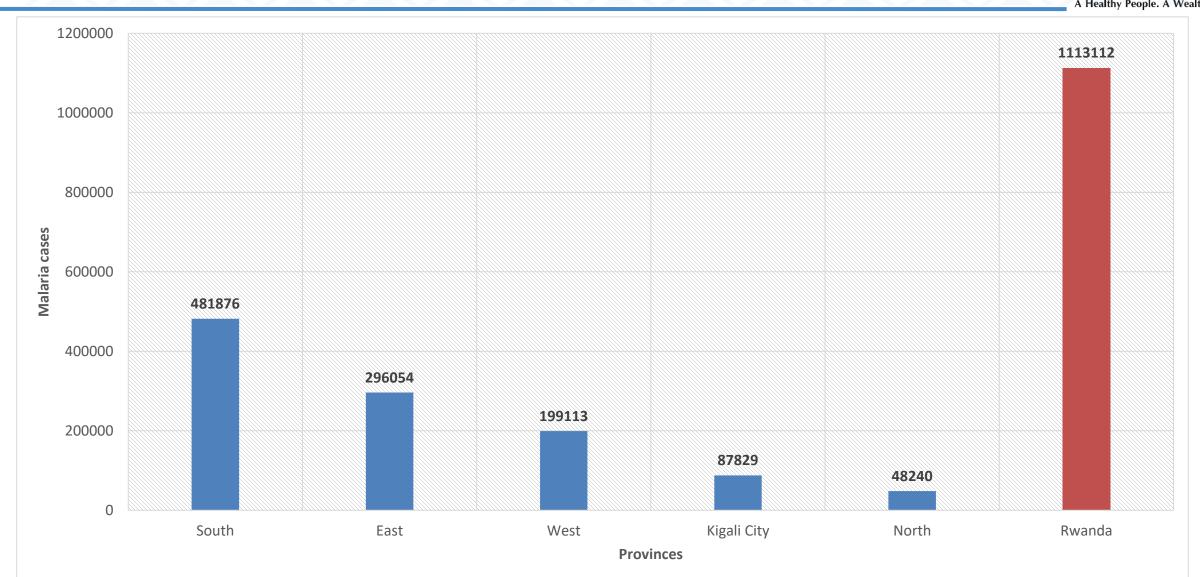
Malaria Cases and Incidence from 2014 to 2021 in Rwanda





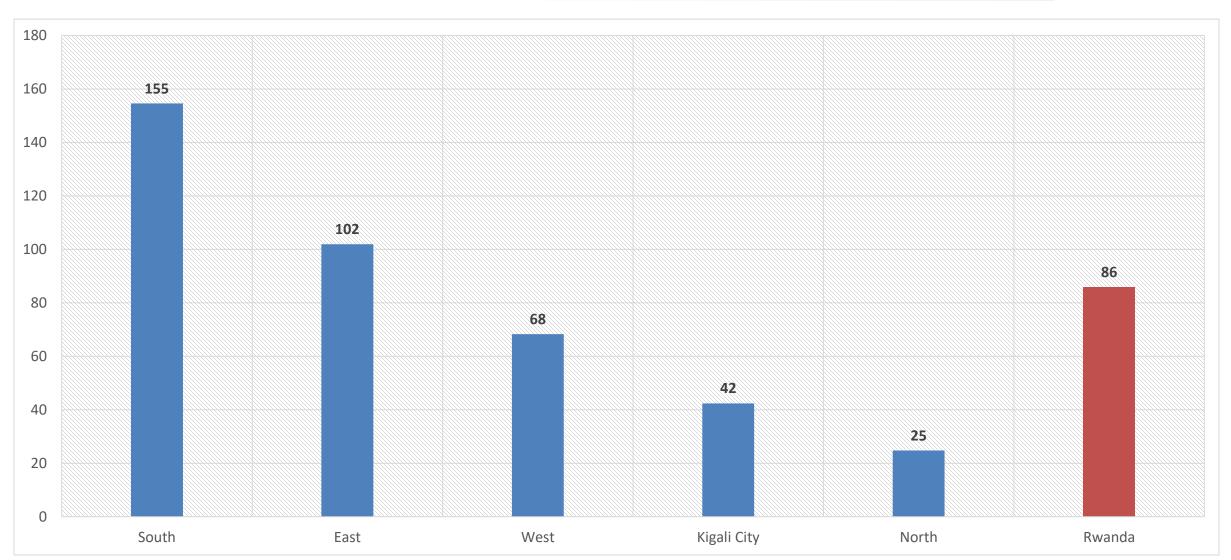
Malaria Cases by Province, January to December 2021





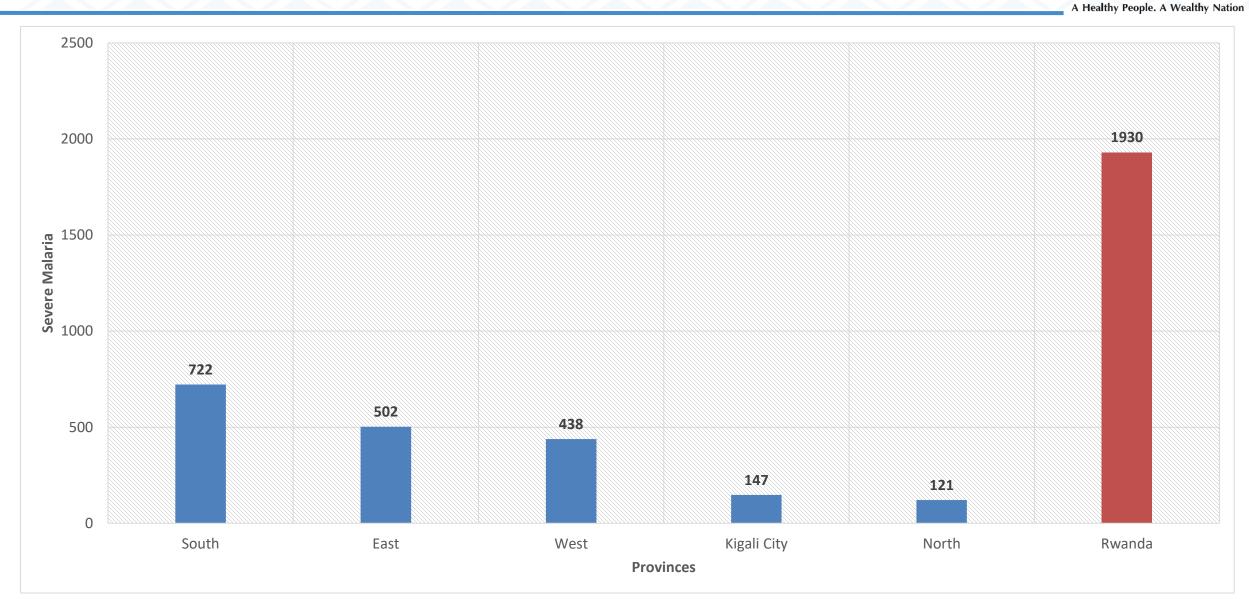
Malaria Incidence per 1000 by Province, 2021





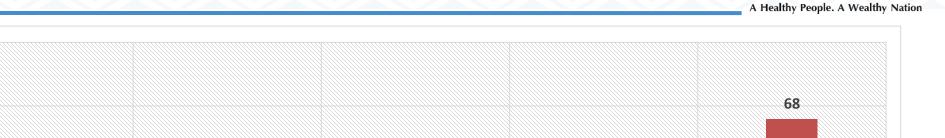
Severe Malaria Cases by Province, 2021

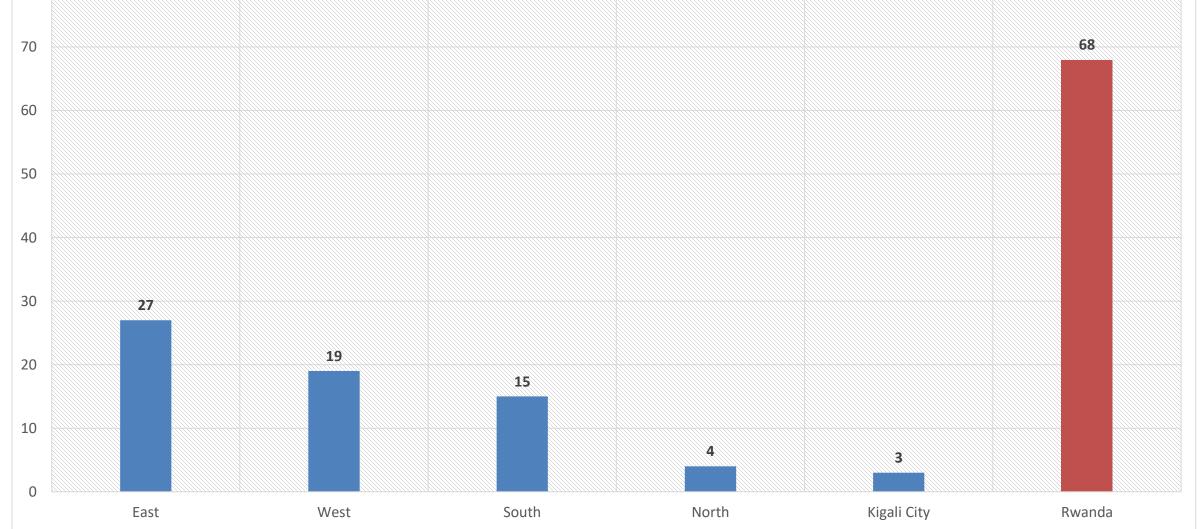




Malaria Related Deaths by Province, 2021



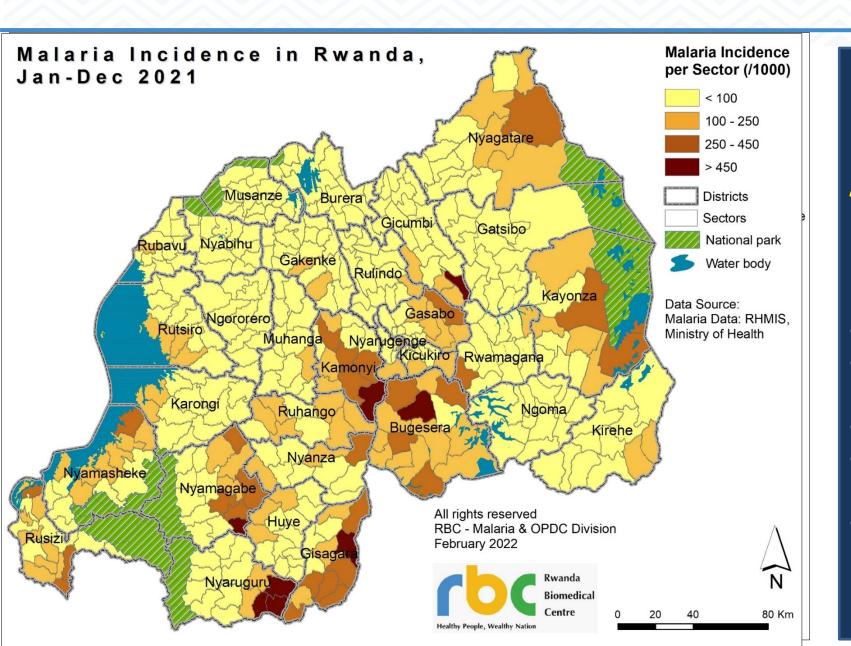




Malaria Incidence per Sector, 2016 vs 2021



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Are We Ready to Eliminate?

- Role of Strong Surveillance
- Stratification of Data (Cell or Village Level)
- Rapid District Response
- Use of Data at the Lowest Level
- Innovative Tools

Summary of Program Successes



Drop in Malaria Burden from 2016 to 2021:

- Incidence from 408 to 86 per 1,000
- Malaria cases from 4.6 M to 1.1M
- Severe malaria cases from 18K to 2K
- Deaths from 700 to 69

Innovations

- Multi-Sector Collaboration (MINAGRI, MINEDUC, MOE, MINALOC, Private Sector, Local NGOs,..)
- Community Engagement in IVM (CHWs, Farmers, Mining Company Staff,..)
- Drone-based Larviciding targeted areas

Data Use for Decision Making

- Malaria burden (Incidence): guiding the Central level for interventions deployment
- Mosquito Resistance: Guiding the Central level for interventions deployment)
- Scorecards: Guiding Local NGOs and HFs efforts

Key Malaria Program Challenges



- Funding Gaps and Sustainability of Interventions
 - IRS in 12 Districts
 - Dependance on External Funding
- Mosquito and Parasite Resistance
 - Insecticides (LLINs and IRS)
 - AL
- Capacity Building
 - Staff
 - Lab Equipment
 - Molecular Biology
 - Quality Control Tests
 - Surveillance
- Needs for New Interventions
 - Lack of Operational Researches to inform design of new interventions
 - Addressing Residual Infection (Foci)
 - Community Based Surveillance and Response
- Impact of COVID-19 on Products Unit Cost (LLINs, Insecticide, Bti)
- Non availability of Data at the Lowest Levels (Stratification and Individual Data)



Overview of the Rwanda Malaria Surveillance System – Including Community

Dr. Aimable MBITUYUMUREMYI
MOPD Division Manager
HDPC/MOPDD

Key Reporting Systems/Platforms for Malaria Related Data



- HMIS

- SISCOM
- RapidSMS
- eLMIS
- RHAP

Key Surveillance Components

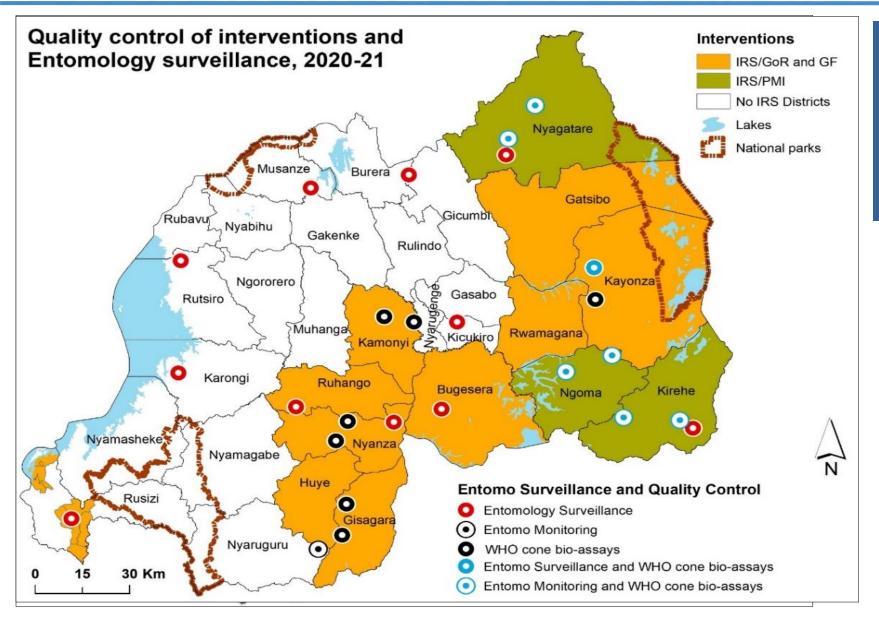


- Routine Data Collection and Reporting (HMIS, SISCOM, RHAP)
- Real Time Notification through RapidSMS (Stock, Severe Malaria)
- Therapeutic Efficacy Study (TES)
- Health Facility Surveys
- Entomological Surveillance (Vectors, Insecticides)
- Meteo Sites

Malaria Program Surveillance Capacity



- 12 Entomological Monitoring Sites
- 30 Insecticide Resistance Sites
- 4-5 Therapeutic Efficacy Study (TES) Sentinel Sites
- Experimental Huts
- Entomology Lab with Insectarium
- Meteo Sites

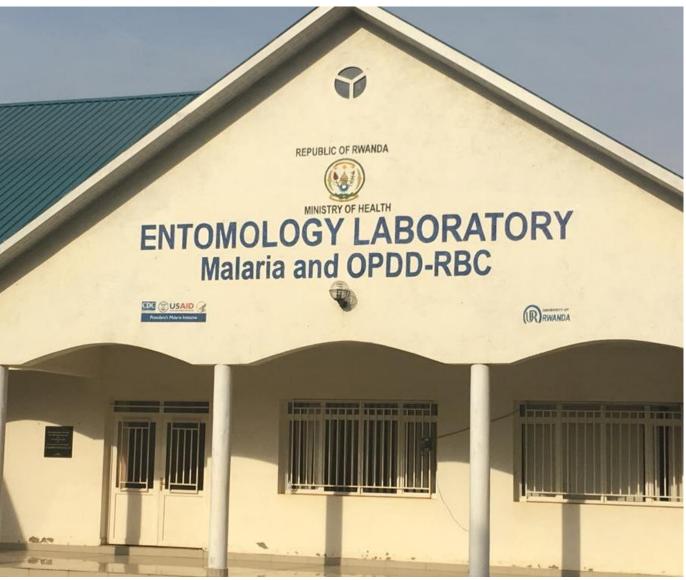


- LLINs Monitoring
- IRM
- Insecticide Rotation
- Bio-assay

Meteo Sites and Entomology Lab/Insectarium

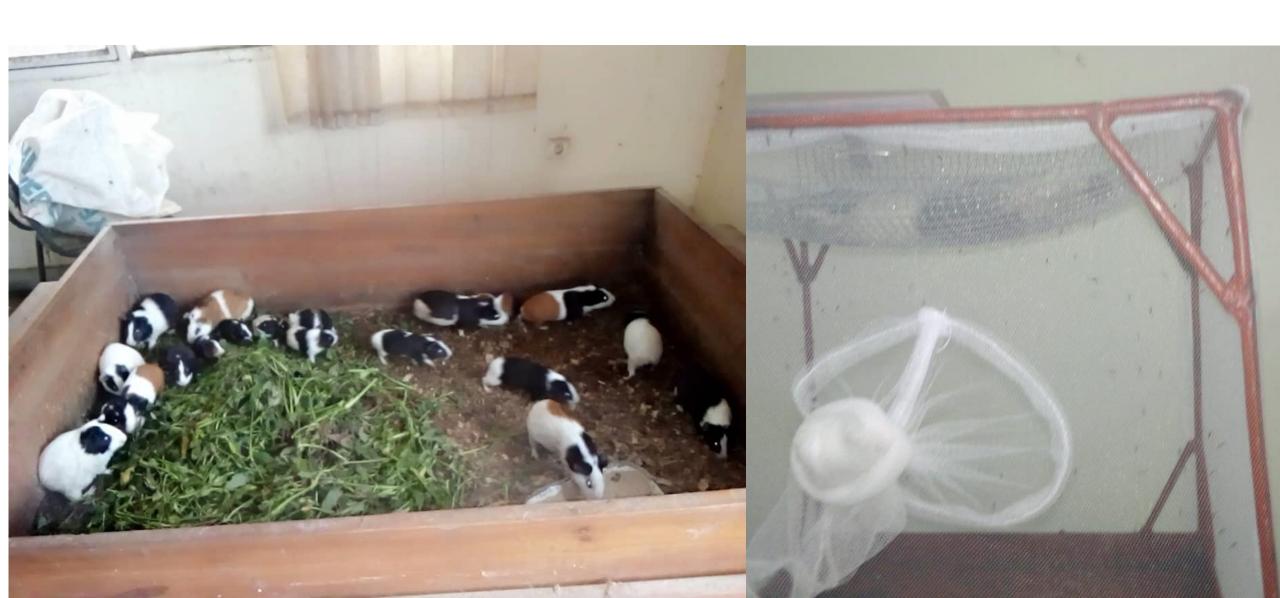






Guinea Pigs Raised for Daily Feeding of Mosquito

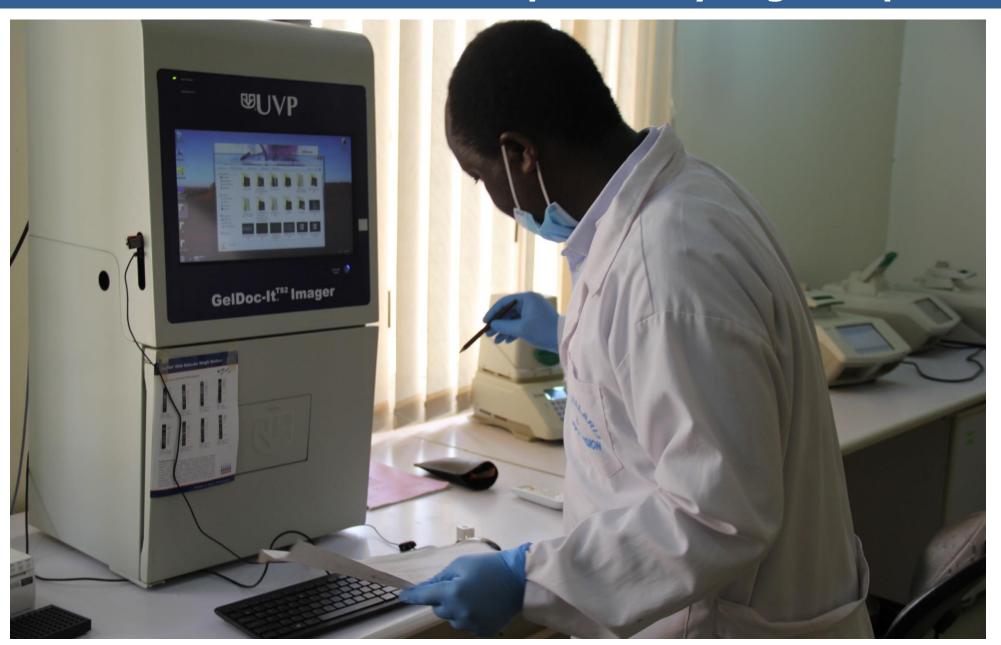




Mosquitos Collected by CDC LT Waiting to Be Identified

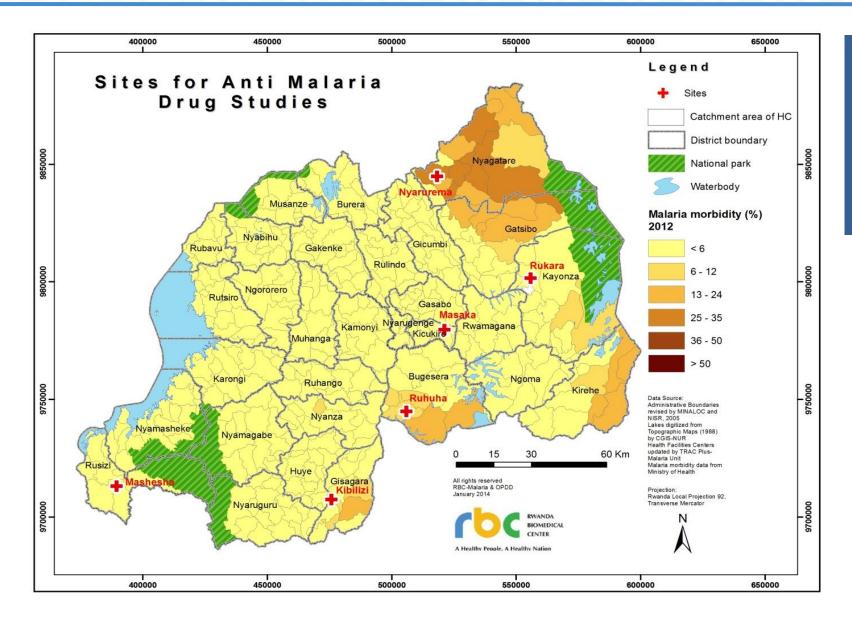


MOPDD Vector Control Expert Analysing Mosquitos



Anti-Malaria Drugs Resistance Sites in Rwanda





- First TES in 2003
- Artemisinin Combination
 Therapeutic (ACT)
- Now more drugs included

Community Based Surveillance





Community Based Surveillance



Peri-domestic Breeding Sites identification and education on appropriate management (NGOs, Communities)



Experimental Huts of RBC (Semi-field Evaluation), Ruhuha Sector-Bugesera

Community Based Surveillance







THANK YOU



Data Use for Programmatic Decision Making

Experience from Rwanda

Dr. Aimable MBITUYUMUREMYI
MOPD Division Manager
HDPC/MOPDD

IRS and LLNIs Deployment Plan 2022-2024



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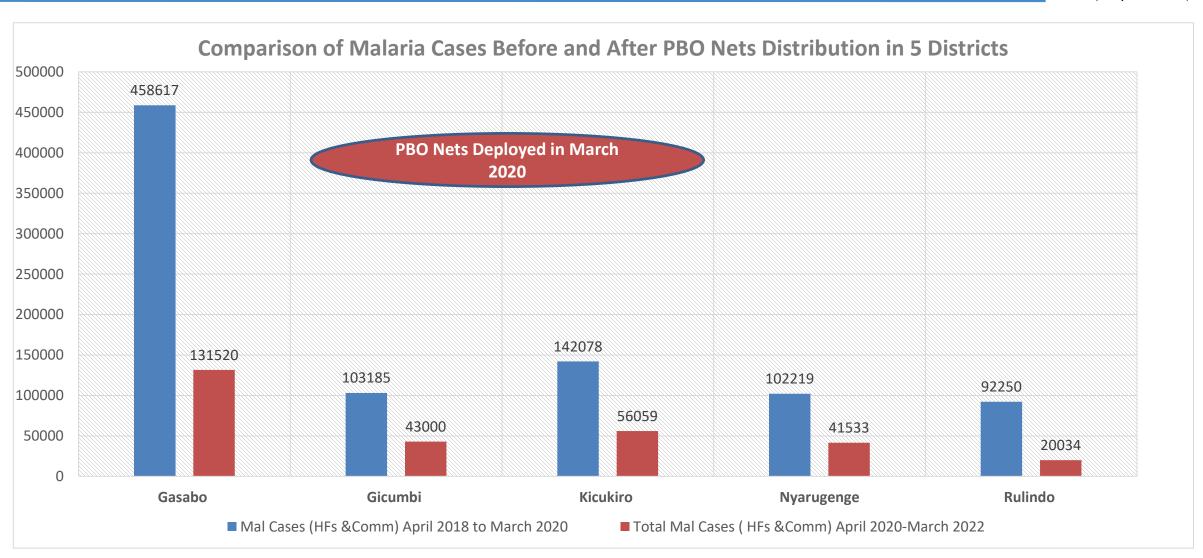


Deployment Principles

- Malaria Incidence
- Mosquito Resistance
- Deployment per Block
- Now shifting from G2 Nets to PBO Nets in 2022 (Cost and Impact)

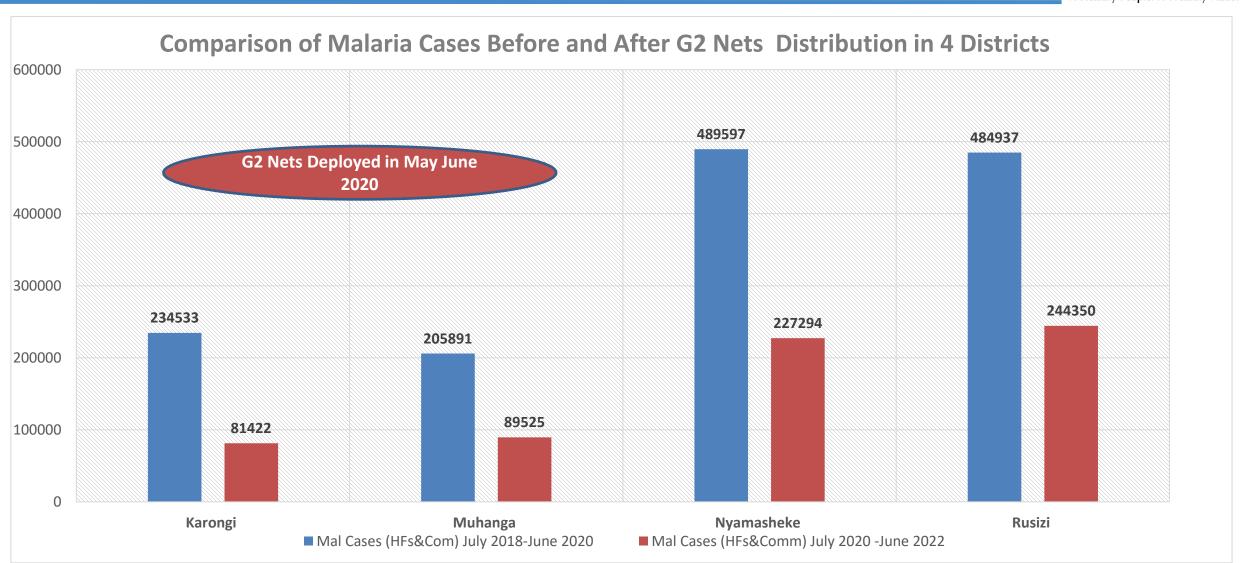
Impact of PBO Nets on Malaria Cases April 2018-March* 2022





Impact of G2 Nets on Malaria Cases July 2018-June* 2022

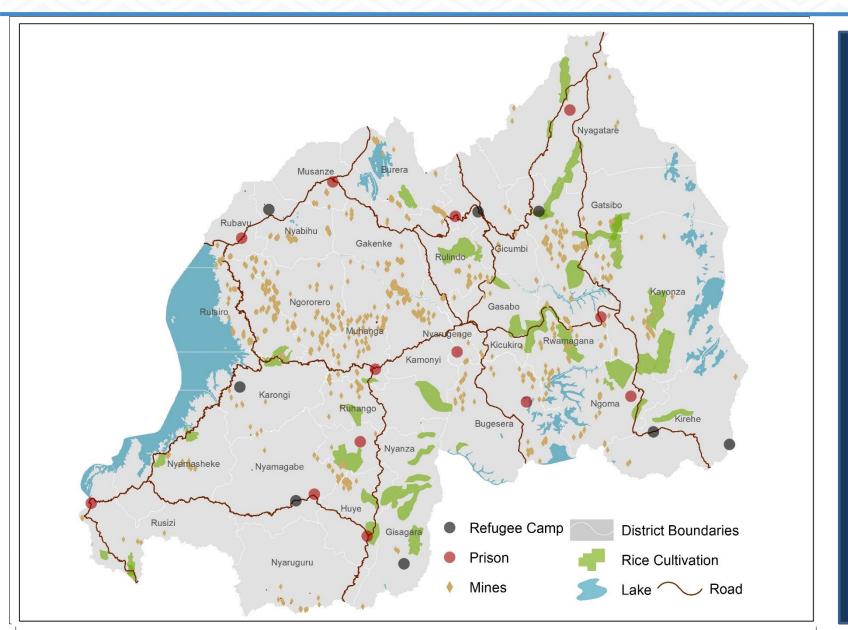




^{*} Data from April 2022 to June 2022 were estimated based on the average on previous months to have the same period of comparison

BIOMEDICAL

Malaria Incidence per Sector, 2016 vs 2021-Hotspots?



Are We Ready to Eliminate?

- Role of Strong Surveillance
- Stratification of Data (Cell or Village Level)
- Rapid District Response
- Use of Data at the Lowest
 Level
- Innovative Tools
- Why Malaria Hotspots
 - Which groups
 - Which interventions
 - Local NGOs

Summary of Key Areas of Data Use for Decision Making

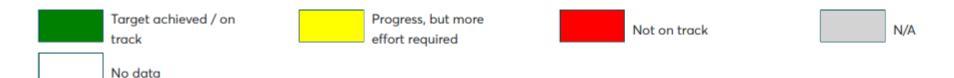


- Malaria Burden to deploy intervention
- Data use for resource mobilization
- Mosquito Resistance to deploy IRS, PBO Nets, IG2 Nets or Standard Nets
- Mapping water bodies for Larviciding
- Use of Dashboards and Scorecards from HMIS or RHAP to guide Supervisions
 - Central level
 - Local NGOs
- Bio-assays to guide IRS Products Selection and Timing/Frequency
- Etc.

Example: Rwanda Scorecard per Province-Q4 2020



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▲ Increase from last period ▼ Decrease from last period

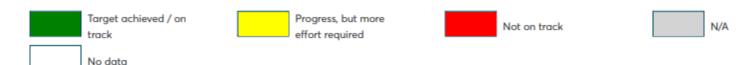
•	Proportion (%) of malaria cases_new	Coverage (%) of LLINs in EPI_new	Malaria Total OPD Cases at Health Facility_New	Coverage (%) of LLINs in ANC_new	total severe malaria_2020	Malaria_total_ deaths_2020	Number of schistosomiasis cases	number snake bites cases
Rwanda	5.8	80.08	245437	74	896	▼ 28	215	743
East	5.1	68.77	54925	71.7	175	8	▼ 17	206
Kigali City	2.6	36.15	14152	36.3	▲ 51	1	4	96
North	0.72	84.4	5009	89.2	21	5	27	157
South	12.9	99.38	143347	8 9	450	10	35	179
West	3.3	97.95	▼ 28004	80.9	▼ 199	▼ 4	132	105

Example: Rwanda Scorecard per District-Q4 2020



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3/1/2021 Scorecard



▲ Increase from last period ▼ Decrease from last period

•	Proportion (%) of malaria cases_new	Coverage (%) of LLINs in EPI_new	Malaria Total OPD Cases at Health Facility_New	Coverage (%) of LLINs in ANC_new	total severe malaria_2020	Malaria_total_ deaths_2020	Number of schistosomiasis cases	number snake bites cases
Bugesera District	14.8	60.79	27531	61.9	122	6	▼ 9	54
Gatsibo District	1.3	43.73	2040	59.2	1	0	3	▼ 3
Kayonza District	9.9	59.02	11844	57.8	▼ 19	o	0	25
Kirehe District	1.6	82.59	▼ 2432	86.4	▼ 13	0	0	31
Ngoma District	0.51	89.48	▼ 663	99.2	8	0	1	▲ 72
Nyagatare District	1.2	81.15	▼ 2069	77.2	2	1	4	▼ 11
Rwamagana District	5.8	68.37	8344	64.7	10	1	o	10



THANK YOU