

Country Profile | President's Malaria Initiative (PMI)

RWANDA

April 2010



At a Glance: Rwanda

Population – 2010: 11.0 million¹

Life expectancy at birth – 2009:
56 years (male), 59 years (female)¹

Population at risk of malaria: 100%²

Under-5 mortality rate – 2008:
112/1,000 live births, or
approximately 1 in 9 children die
before their fifth birthday³

¹ US Census Bureau, International Data Base 2010

² PMI Malaria Operational Plan FY 2010

³ UNICEF State of the World's Children 2009

Background

With a population of more than 10 million, Rwanda is one of Africa's most densely populated countries. Its entire population is at risk of malaria. Recent data indicate that malaria transmission has decreased substantially since 2005–2006. Reported malaria illnesses seen at health facilities have declined from 1.5 million in 2005 to 900,000 in 2007.

The President's Malaria Initiative (PMI)

Rwanda is one of the 15 original countries benefiting from PMI, which was launched in 2005 and is led by the U.S. Agency for International Development and implemented together with the Centers for Disease Control and Prevention. As a key component of President Obama's Global Health Initiative and with the Lantos-Hyde Act of 2008, PMI's funding has been extended through fiscal year (FY) 2014, and a new six-year malaria strategy has been developed. Under the new strategy, the goal of PMI is to work with partners to halve the burden of malaria in 70 percent of the at-risk populations in sub-Saharan Africa (approximately 450 million residents), thereby removing malaria as a major public health problem and promoting development throughout the African region.

PMI works with national malaria control programs and coordinates its activities with national and international partners, including the Roll Back Malaria Partnership; The Global Fund to Fight AIDS, Tuberculosis and Malaria; the World Health Organization; the World Bank; Malaria No More; the Bill and Melinda Gates Foundation; nongovernmental organizations, including faith-based and community groups; and the private sector.

Key Interventions

In line with Rwanda's national malaria control strategy, PMI supports four key interventions to prevent and treat malaria:

- **Insecticide-treated mosquito nets (ITNs):** Sleeping under a long-lasting ITN provides protection from malaria-carrying mosquitoes. The nets are nontoxic to humans, but can repel and kill mosquitoes for up to three years.
- **Indoor residual spraying (IRS):** IRS involves the coordinated, timely spraying of the inside walls of houses with insecticides. Mosquitoes are killed when they land on these sprayed walls, reducing malaria transmission.
- **Intermittent preventive treatment for pregnant women (IPTp):** IPTp is a highly effective means of reducing the serious consequences of malaria in both the pregnant woman and her unborn child, which include maternal anemia and low birthweight babies. IPTp consists of the administration of at least two doses of the antimalarial drug sulfadoxine-pyrimethamine (SP), given not less than one month apart during the second and third trimesters of pregnancy. In most countries, SP needs for IPTp are being met by national governments and other donors.

- **Diagnosis and treatment:** Effective case management of malaria depends on early, accurate diagnosis with microscopy or rapid diagnostic tests and prompt treatment with an effective drug. Artemisinin-based combination therapies (ACTs) are the recommended first-line treatment for uncomplicated *Plasmodium falciparum* malaria in most malaria-affected regions of Africa, and are extremely effective against malaria parasites; they have few or no side effects.

Progress to Date

Rwanda is in its fourth year as a PMI focus country. With support from PMI and its partners, malaria control interventions are being implemented, and vital commodities are being distributed to vulnerable populations.

PMI-Supported Activities	2007	2008	2009	Cumulative
IRS: Houses sprayed ¹	159,063	189,756	295,174	-
IRS: Residents protected ¹	720,764	885,957	1,329,340	-
ITNs: Procured	-	550,000	912,400	1,462,400
ITNs: Distributed	-	-	500,000	500,000
ACTs: Procured	715,000	-	-	715,000
ACTs: Distributed	-	715,000	-	715,000
ACTs: Procured by other donors and distributed with PMI support	-	-	396,625	396,625
Health workers trained in ACT use ²	5,127	8,565	7,672	-

¹ A cumulative count of the number of houses sprayed and people protected is not provided since some areas have been sprayed on more than one occasion.
² A cumulative count of individual health workers trained is not provided since some health workers have been trained on more than one occasion.

Impact

As a result of the contributions of PMI as well as prior USG assistance, host country governments, and other donors, household surveys in Rwanda showed that between 2005 and 2008 ITN use in children under five increased from 13 to 58 percent, while the malaria prevalence in children in 2008 was just 3 percent. Over approximately the same time period, 2006–2008, the proportion of hospital deaths attributed to malaria fell from 41 percent to 16 percent. All-cause mortality in children under the age of five also declined by 32 percent between 2005 and 2008. While a variety of factors may be influencing the decline in under-five mortality rates, there is strong and growing evidence that malaria prevention and treatment efforts are playing a major role in these reductions.

PMI Funding

For FY 2010, PMI allocated \$18 million in funding for malaria prevention and treatment in Rwanda. Of this amount, 39 percent will support IRS, 21 percent will support procurement and distribution of long-lasting ITNs, 15 percent case management and laboratory diagnosis, 4 percent malaria in pregnancy activities, and approximately 2 percent monitoring and evaluation. Approximately 40 percent of the total budget will be spent on commodities.

	FY 2006 Jump start funds	FY 2007	FY 2008	FY 2009	FY 2010
Budget	\$1.5 million	\$20 million	\$16.8 million	\$16.3 million	\$18 million

For details on FY 2010 PMI activities in Rwanda, please see the **Rwanda Malaria Operational Plan:**
http://pmi.gov/countries/mops/fy10/rwanda_mop-fy10.pdf.

