Healthy Lives: Winning the Battle Against Malaria in Rwanda

As few as five years ago, malaria was the leading cause of death in Rwanda, with half of those fatalities in children under five. However, this nation of seven million rapidly scaled-up malaria interventions and achieved dramatic reductions in the deadly disease—In just over two years of rapid scale-up, deaths due to malaria have dropped to only 7%, a dramatic 60% reduction. Rwanda stands out as one of PSI’s platforms that have made dramatic progress in controlling malaria.

A number of factors contributed to the significant gains in reducing the malaria burden in Rwanda. Backed by the strong political will and bold leadership of the Rwandan government, the National Malaria Control Program, together with its partner organizations and donors, assembled a multifaceted approach that currently has malaria on retreat across Rwanda.

:: Scaled-up Ownership and Usage of Long-Lasting Insecticide-Treated Nets (LLINs)
Prior to 2005, there was a modest 30,000 mosquito nets distributed by the national government to protect its citizens against malaria. In 2005 however, Rwanda received its first grant from the Global Fund to Fight AIDS, Tuberculosis and Malaria—300,000 bednets were supplied. By the next year, as the new resources went to work, 1.4 million LLINs were distributed to the country’s most vulnerable populations. In 2006 and 2007, a coordinated national multi-channel distribution of three million nets reached 10 million Rwandans through antenatal clinics, vaccination sites and private sector outlets in 100% of district towns.

:: Conversion to Artemisinin-Based Combination Therapy (ACT)
LLINs were just one piece of a well-planned, comprehensive malaria control program in Rwanda. While LLIN distribution was being scaled-up, the Rwandan Ministry of Health introduced new guidelines making ACTs the first-line treatment of malaria, with both public clinics and private pharmacies stocking the most effective anti-malarial available. Expectant mothers were given intermittent treatment in pregnancy, making them less susceptible to malaria infections during this vulnerable time.

:: Improved Home-Based Management of Fever
Programs for home-based management of fever ramped up throughout Rwanda, spearheaded by a new cadre of trained community health care workers. With two selected in each village, Community Health Workers put national malaria policies in motion at the local level. Galvanizing community engagement in the fight against malaria, Community Health Workers played a vital role in translating the national strategy into impact by providing information and resources for prompt and effective treatment and malaria prevention. Behavior change communication programs such as mobile cinemas have resulted in additional widespread sensitization about net use and malaria transmission, even in the most rural areas.

:: Increased Health Facility Utilization
Health center utilization rate is over 70%, with only 10% of patients seeking treatment for malaria, due in part to nationwide government health insurance and improvements in quality of care and availability of services. Last year, indoor residual spraying (IRS) with pesticide for protection against malaria was provided to more than 190,000 homes in targeted areas.
Even with such significant progress, the battle against malaria in Rwanda is far from over, and the Rwandan National Malaria Control Program is aiming to achieve even more ambitious goals, including universal coverage of LLINs, expanded IRS, subsidized ACTs nationwide, and bolstered monitoring and evaluation to tackle epidemics. Decreased malaria also brings a new set of challenges, including possible drops in net usage as malaria prevalence declines, reductions in natural immunity to the malaria parasite and the need to implement a regional strategy for continued gains against the disease.

This expanding scope of new challenges underscores the need for sustained resources to fully control malaria. Rwandans have achieved remarkable success yet find themselves at a critical turning point in the fight against malaria. If current progress and achievements can be expanded with the support of continued investment, sustained political commitment and diligent management, Rwanda is positioned to become a global model of success. However, if funding recedes and national programs lose momentum, Rwanda could face tremendous and deadly disease resurgence and millions of lives lost.

For more information, visit: http://www.malariafreefuture.org/rwanda/index.php