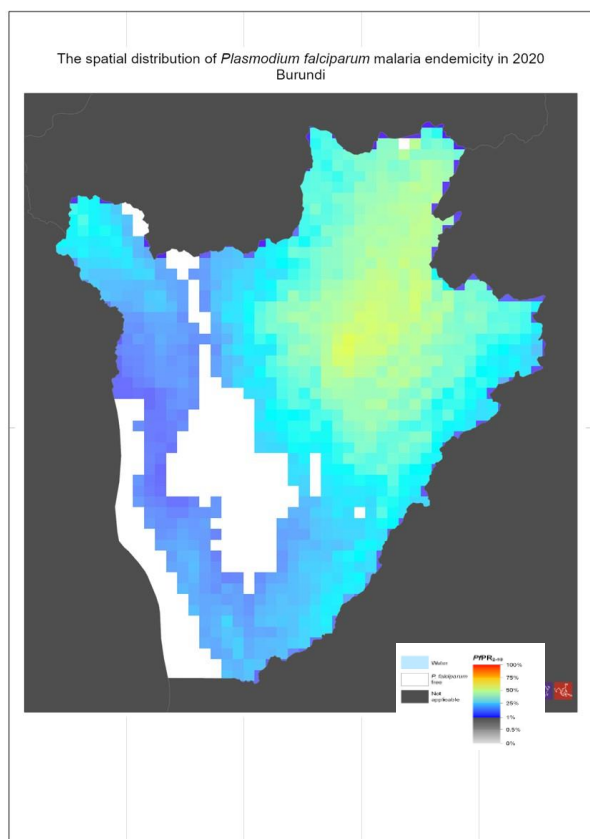


Scorecard for Accountability and Action



Metrics

Financing	
LLIN financing (2024-2026) projection (% of need)	100
Public sector ACTs and RTDs financing (2024-2026) projection (% of need)	100
% of National Malaria Strategic Plan Financed (2024-2026)	25
Policy	
Signed, ratified and deposited the AMA instrument at the AUC	
Malaria activities targeting refugees in Malaria Strategic Plan	
Malaria activities targeting IDPs in Malaria Strategic Plan	
Zero Malaria Starts With Me Launched	
End Malaria Council and Fund Launched	
Resistance Monitoring, Implementation and Impact	
Drug efficacy studies conducted since 2019 and data reported to WHO	
Insecticide classes with mosquito resistance in representative sentinel sites confirmed since 2010	2
Insecticide resistance monitored since 2015 and data reported to WHO	
RDTs in stock (>6 months stock)	
ACTs in stock (>6 months stock)	
LLIN/IRS campaign on track	
% of vector control in the last year with next generation materials	64
On track to reduce malaria incidence by at least 75% by 2025 (vs 2015)	
On track to reduce malaria mortality by at least 75% by 2025 (vs 2015)	
Tracer Indicators for Maternal and Child Health and NTDs	
Mass Treatment Coverage for Neglected Tropical Disease (NTD index, %)(2022)	17
% of Neglected Tropical Disease MDAs Achieving WHO Targets	75
Estimated % of children (0–14 years old) living with HIV who have access to antiretroviral therapy (2022)	37
Vitamin A Coverage 2022 (2 doses)	9
DPT3 coverage 2022 (vaccination among 0-11 month olds)	91

Key

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

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 2022 was 8,124,159 with 2,374 deaths.

Malaria

Africa is at the centre of a perfect storm that threatens to disrupt malaria services and undo decades of progress. We must act urgently to both prevent and mitigate the adverse effects of the ongoing global financial crisis, increasing biological threats, climate change, and humanitarian crises. These threats represent the most serious emergency facing malaria in 20 years and will lead to malaria upsurges and epidemics if not addressed. AU Member States face a \$1.5 billion gap just to sustain existing, yet inadequate, levels of malaria-related services between now and 2026. To get back on track and eliminate malaria, we will need to mobilise another \$5.2 billion dollars annually to fully finance our national malaria plans. Climate change presents a significant threat to the progress that we have made. Africa is disproportionately exposed to the risks of climate change and by the 2030s, 150 million additional people will be at risk of malaria because of warmer temperatures and increased rainfall. Climate disasters displace millions and destroy roads and health facilities, reducing access to health services. There is urgency to decarbonise and reduce our carbon footprint. We must implement integrated and multisectoral solutions, and adapt our health systems to the threats of both climate change and pandemics. We must also take action to confront the threats of insecticide and drug resistance, reduced efficacy of rapid diagnostic tests, and the *Anopheles stephensi* mosquito which spreads malaria in both urban and rural areas. The good news is that the malaria toolkit continues to expand. WHO has approved the use of dual-insecticide mosquito nets that are 43% more effective than traditional mosquito nets and will address the impact of insecticide-resistance. New medicines for treating malaria and two malaria vaccines for children have also been approved with an increasing number of countries deploying these new tools. The scaling up of these interventions will help us achieve our goal of eliminating malaria. This will require integrated approaches with malaria as a pathfinder for pandemic preparedness, climate change and health, Primary Health Care and Universal Health Coverage. We must work to sustain and increase domestic resource commitments including through multisectoral End Malaria and NTD councils and Funds, which have raised over US\$50 million

Progress

Burundi has secured sufficient resources to procure the ACTs, RDTs and LLINs required in 2024-26. The country has carried out drug resistance and insecticide resistance monitoring and has reported the results to WHO. The national strategic plan includes activities targeting refugees and IDPs. 65% of the insecticides and LLINs distributed in the country are next generation commodities designed to combat insecticide resistance.

In line with the priority agenda of the ALMA chair, His Excellency President Umuro 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 2022 was 8,124,159 with 2,374 deaths.

Key Challenges

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

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Impact	Investigate and address the reasons for the increase in estimated malaria incidence and mortality since 2015, which means that the country is not on track to achieve the 2025 target of a 75% reduction in malaria incidence and deaths	Q4 2024		The NMCP is implementing activities of the new MSP 2024-2028 developed in collaboration with WHO and in-country partners. The country will implement the mass ITN campaign in 2025 switching to the next generation dual ai ITNs to address insecticide resistance. The NMCP is implementing activities with financial support from the GF and has the advantage of receiving resources from PMI for the first time with the NMCP in the process of planning the US PMI Malaria Operational Plan. Discussions are ongoing about the launch of an End Malaria Council and Fund.

Reproductive, Maternal, Newborn, Adolescent and Child Health

Progress

Burundi has achieved high coverage of the tracer RMNCAH intervention, DPT3. Burundi enhanced the tracking and accountability mechanisms with the development of a Reproductive, Maternal, Newborn, Child and Adolescent Health Scorecard.

Previous Key Recommended Actions

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 low coverage of vitamin and continues to track progress as the identified actions are implemented.

Neglected Tropical Diseases

Progress

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%), for onchocerciasis (83%), for soil-transmitted helminths (98%) and zero (0%) for schistosomiasis. Overall, the NTD preventive chemotherapy coverage index for Burundi in 2022 is 17 and this represents a decrease compared with the 2021 index value (18). Apart from schistosomiasis, the country reached WHO MDA targets for other targeted diseases. Burundi has significantly enhanced the tracking and accountability mechanisms for NTDs with the development of a NTD Scorecard tool.

Previous Key Recommended Action

Objective	Action Item	Suggested completion timeframe	Progress	Comments - key activities/accomplishments since last quarterly report
Optimise quality of care	Work to implement preventive chemotherapy for schistosomiasis and reach WHO targets	Q4 2024		In 2023, the country organized Mass Drug Administration (MDA) targeting school age children for both schistosomiasis (SCH) and soil transmitted helminthiasis (STH) and reached WHO targets for both MDAs, with SCH MDA coverage of 75% and STH MDA coverage of 98%. The country also submitted trachoma elimination dossier to WHO and is waiting for feedback. Other routine activities are being conducted as planned.

Key

	Action achieved
	Some progress
	No progress
	Deliverable not yet due