The 2013 Rwanda Malaria Indicator Survey (RMIS) assessed malaria knowledge, prevention, and treatment practices. Over 4,700 households were interviewed.

**ITN Ownership**

Percent of households with at least one ITN

- North: 85%
- East: 80%
- West: 80%
- South: 86%
- City of Kigali: 84%

Ownership of ITNs increased dramatically between 2005 and 2010 but has remained unchanged since the 2010 survey.

**Trends in Ownership of ITNs**

Percent of households with at least one ITN

- 2005 RDHS: 15%
- 2007-08 Interim RDHS: 57%
- 2010 RDHS: 82%
- 2013 RMIS: 83%

Two-thirds of Rwandans have access to an ITN if up to 2 people share one ITN.

Ownership of ITNs is about 75% in all wealth groups, but the poorest households are least likely to own an ITN.

**Indoor Residual Spraying (IRS)**

Percent who slept under an ITN the night before the survey

- 2005 RDHS: 58%
- 2007-08 Interim RDHS: 61%
- 2010 RDHS: 70%
- 2013 RMIS: 74%

Indoor residual spraying is most common in the East and South Regions, where 22% and 16% of households, respectively, were sprayed in the year before the survey.

Children and pregnant women are the most vulnerable to malaria. About three-quarters of children and pregnant women slept under an ITN the night before the survey or in a house protected by IRS.

**Use of ITNs and IRS**

- Slew under an ITN the night before the survey
- Slew under an ITN the night before the survey or in a dwelling sprayed by IRS in the past year

**Trends in the Use of ITNs**

Percent who slept under an ITN the night before the survey

- 2005 RDHS: 58%
- 2007-08 Interim RDHS: 61%
- 2010 RDHS: 70%
- 2013 RMIS: 74%

ITN use among children and pregnant women increased dramatically between 2005 and 2007-08. Since 2007-08, the use of ITNs has continued to increase gradually.
Three in ten Rwandan children had a fever in the two weeks before the survey, a symptom of malaria. Only 11% of children with fever received ACT, the recommended antimalarial. Fewer received ACT promptly.

### Management of Childhood Fever

<table>
<thead>
<tr>
<th>Percentage of children under 5 with fever in the 2 weeks before the survey</th>
<th>29</th>
</tr>
</thead>
<tbody>
<tr>
<td>Among children under 5 with fever in the 2 weeks before the survey, percentage who:</td>
<td></td>
</tr>
<tr>
<td>Sought treatment from health facility</td>
<td>68</td>
</tr>
<tr>
<td>Had blood taken from finger or heel for testing</td>
<td>30</td>
</tr>
<tr>
<td>Took ACT</td>
<td>11</td>
</tr>
<tr>
<td>Took ACT same/next day</td>
<td>7</td>
</tr>
</tbody>
</table>

### Women’s Malaria Knowledge

<table>
<thead>
<tr>
<th>Percent of women age 15-49 who:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognize fever as a symptom of malaria</td>
<td>88</td>
</tr>
<tr>
<td>Reported mosquito bites as a cause of malaria</td>
<td>95</td>
</tr>
<tr>
<td>Reported sleeping under a mosquito net protected against malaria</td>
<td>66</td>
</tr>
<tr>
<td>Have seen or heard a message about malaria in past 6 months</td>
<td>59</td>
</tr>
</tbody>
</table>

The majority of women know that fever is a malaria symptom and that malaria is caused by mosquito bites. Only two-thirds of women reported that sleeping under a mosquito net protected them against malaria. About six in ten women have recently seen or heard a malaria message.

For more information on the results of the 2013 Rwanda Malaria Indicator Survey, please contact:

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