

Dear readers,

I am delighted to introduce this edition of the Rwanda Public Health Bulletin (RPHB), which highlights Rwanda's commitment to public health in the face of emerging global health threats. It emphasizes our collective efforts to combat and successfully contain the Marburg virus disease (MVD) outbreak while shedding light on the often-overlooked mental health impacts associated with such outbreaks.

MVD, a highly virulent and epidemic-prone illness, posed a significant public health challenge since the first case was reported on 27th September 2024. Thanks to the swift and coordinated response of Rwanda's health sector, supported by dedicated healthcare workers, communities and partners, the threat was effectively managed, showcasing our country's preparedness, resilience, and collaboration.

This edition features an article that detail response strategies, including robust case identification, effective quarantine and containment measures, community engagement, and the use of evidence-based interventions. It not only documents Rwanda's achievements but also serve as a resource for policymakers, health professionals, and researchers globally who are committed to enhancing preparedness and response mechanisms for similar health threats.

The publication also underscores the importance of addressing the mental health impacts of MVD. The fear, stigma, and uncertainty that accompany an outbreak can have profound psychological consequences for affected individuals, their families, and healthcare workers. It explores innovative approaches to providing mental health support during outbreaks, ensuring holistic care for our population.

Additionally, the report on conjunctivitis surveillance in a boarding school offers valuable insights into the detection and management of localized outbreaks, reminding us of the critical role of vigilance and early intervention in preventing widespread transmission.

Concluding the health crisis reports, this edition also includes a compelling commentary on the persistent challenge of cholera in Africa. The commentary explores the complex interplay of environmental, social, and health system factors that perpetuate the disease, urging a multisectoral approach to address this persisting issue.

Other featured studies reflect the diversity and depth of other public health matters in Rwanda. The study on stroke patients' perceptions of rehabilitation services provides actionable insights into improving care for non-communicable diseases. Equally significant is the article on adherence to secondary prophylaxis among children and adolescents with rheumatic heart disease, which sheds light on the factors, beliefs, and barriers influencing treatment outcomes. The study on employee absenteeism in a tertiary hospital further highlights systemic challenges in the health sector, calling for strategic solutions to optimize workforce productivity.

As we reflect on the achievements and challenges of Rwanda's health system, let us also remain vigilant and committed to building on these successes. Strengthening Rwanda's health systems, and fostering community resilience will remain central to safeguarding the health and well-being of our population.

I extend my gratitude to all contributors to our commitment for their dedication to advancing knowledge dissemination. Together, we remain steadfast to a healthier, more resilient Rwanda.

Regards,

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