

# Inspirational multisectoral approach to HIV/AIDS in Rwanda

Albert TUYISHIME, MD, MSc  
Director of Planning / RBC



# Presentation outline

---

- **Background**
- **Multisectoral approach**
- **Lessons learnt**
- **Challenges expected**
- **Multisectoral approach for other SRH issues**
- **Conclusion**



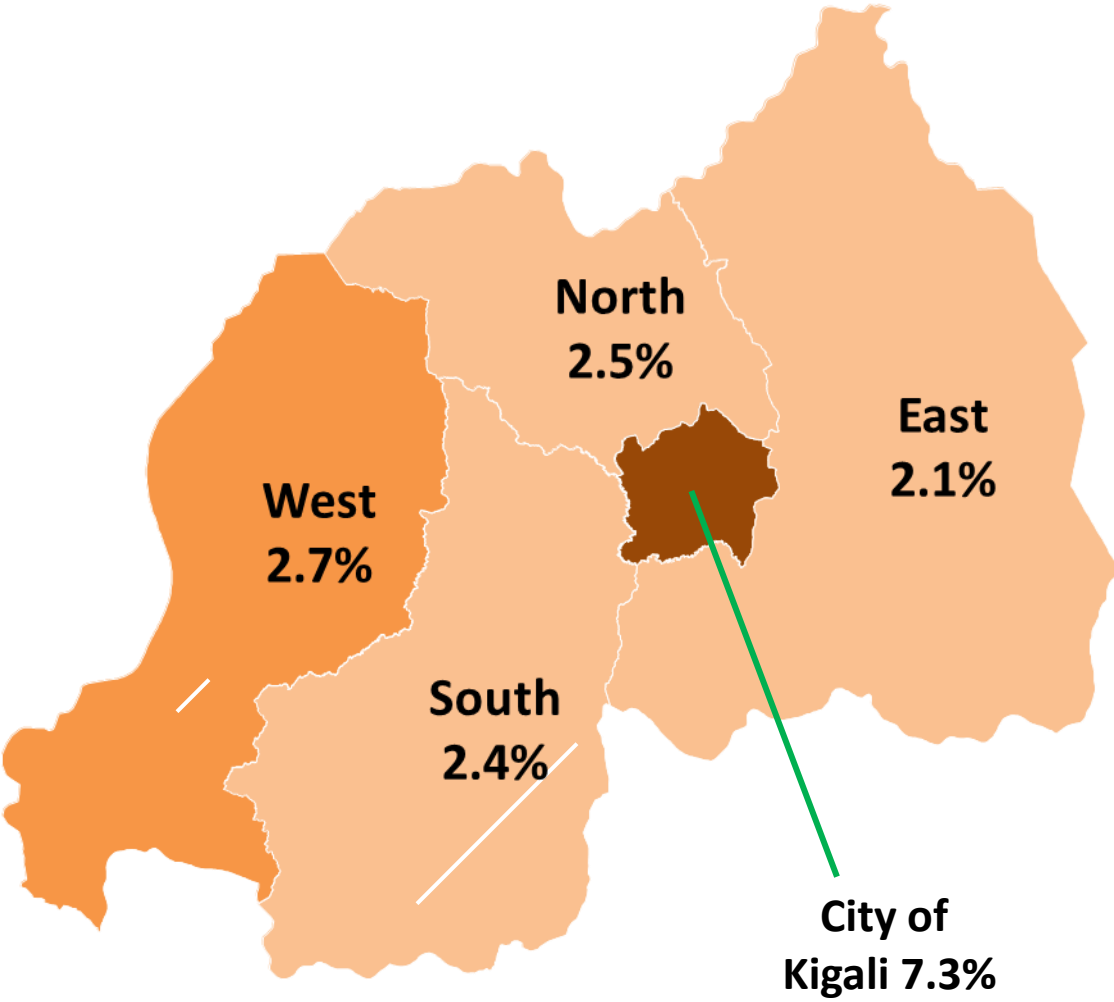
# Rwanda Geographical Location



- Small country of 26,338 km<sup>2</sup>
- 11,689,696 inhabitants
- A Hilly Terrain  
➤ **A country of a Thousand Hills)**
- 30 administrative Districts
- GDP per capita :644 \$



# Epidemiological Situation



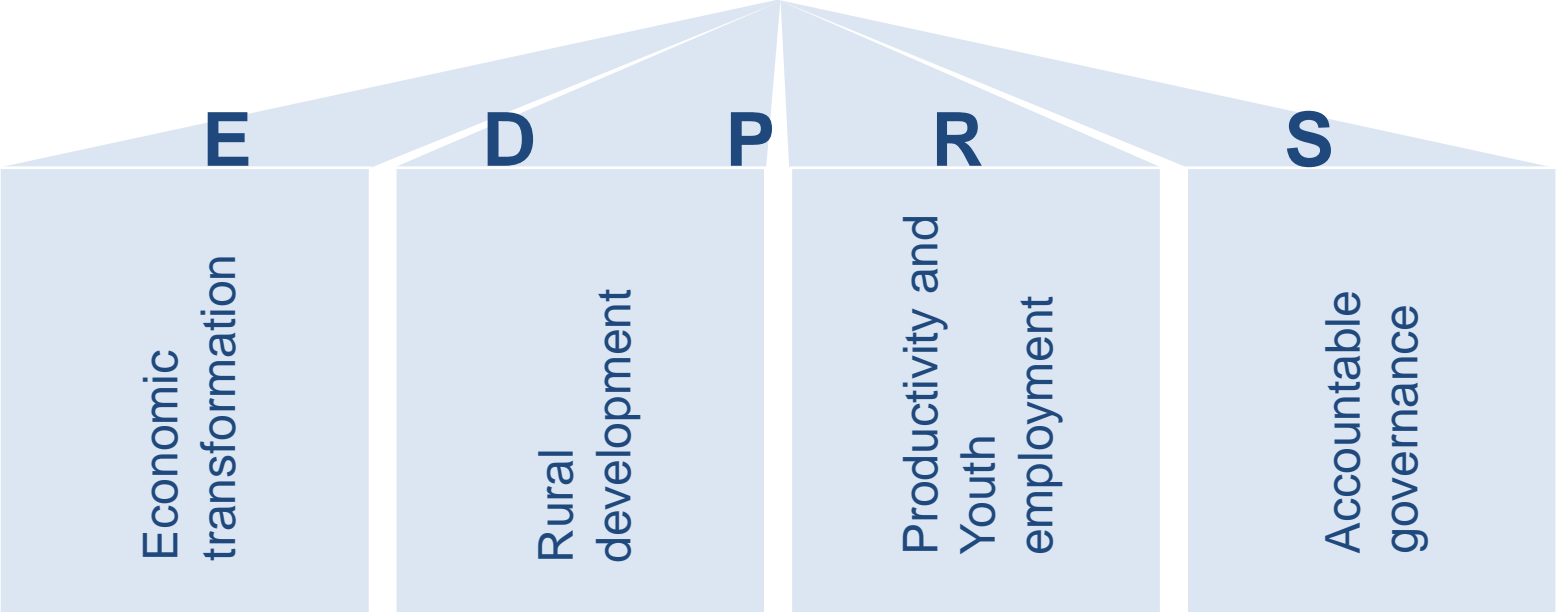
**National  
Average: 3%**

**Male: 2.3%  
Female: 3.6%**

Source: RDHS 2010



# The Rwanda national guiding strategy ( EDPRS\* ) mainstreams HIV

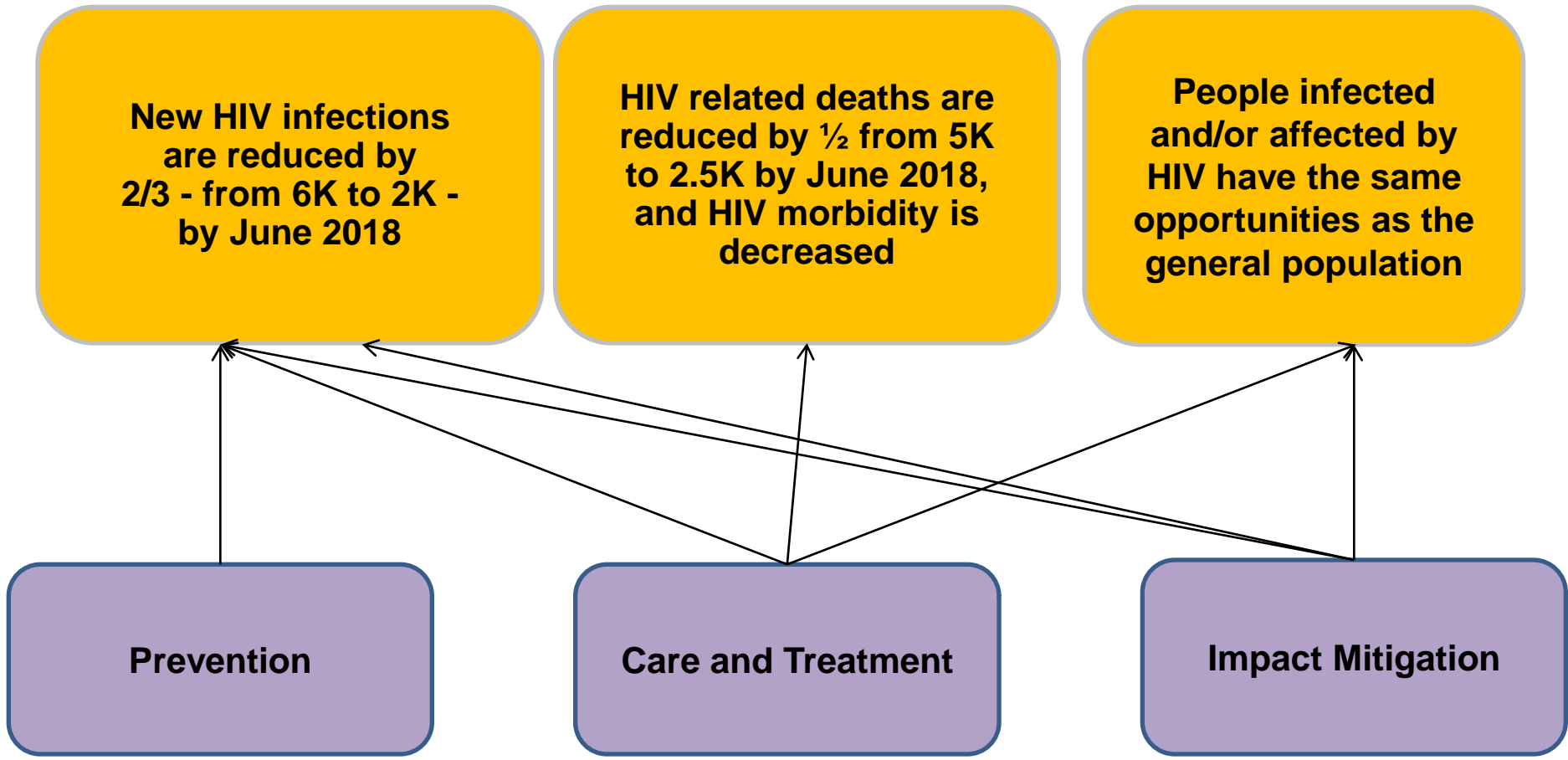


All sectors coalescing around each and every EDPRS thematic area have to mainstream HIV interventions

**EDPRS\*:** Economic Development and Poverty Reduction Strategy



# The national HIV Strategic plan depicts the overall objectives



# The national HIV Strategic plan integrate SRH services through EMTCT, FP, SGBV, MC and STIs prevention and management

	EMTCT	FAMILY PLANNING	SGBV
<b>Interventions</b>	<ul style="list-style-type: none"> <li>• Sensitization of Young Girls and Boys</li> <li>• Couple testing in ANC</li> <li>• ART prophylaxis</li> </ul>	<ul style="list-style-type: none"> <li>• Education on contraceptive methods</li> <li>• Increase accessibility to FP methods</li> <li>• Community based provision of FP services</li> </ul>	<ul style="list-style-type: none"> <li>• Communication against GBV</li> <li>• Services for GBV Victims</li> <li>• One stop centers for SGBV</li> </ul>

**Approach**

- Health Providers trained on comprehensive services provision
- Integrated management manuals
- Services can be provided by one Health care Provider
- Same Health infrastructures

<b>Results</b>	<ul style="list-style-type: none"> <li>• High PMTCT and couples testing coverage (&gt;80%)</li> </ul>	<ul style="list-style-type: none"> <li>• The total fertility rate fell from 6.1 per woman in her lifetime in 2005 (RDHS 2005) to 4.6 per woman in 2010 (RDHS 2010)</li> </ul>	<ul style="list-style-type: none"> <li>• 63% of HF offer referral services for survivors of GBV</li> </ul>
----------------	---	---	--



## Lessons learnt from this approach

- Strengthen national response to control the spread of HIV :
  - ❖ Through participatory planning
  - ❖ Actors addressing the causes and effects of the HIV/AIDS epidemic
- Increased ownership by all stakeholders including community
- Increased transparency and accountability at all levels

## How

- Grouping actors, regular meetings / working sessions for better coordination:
  - ❖ National coordinating body ( RBC)
  - ❖ Strategic sectors
  - ❖ Civil society organizations
  - ❖ Private sector
  - ❖ HIV multisectoral committees at districts level





# Due to ever changing environment, some challenges may be expected

---

1. Adapted messages for all
2. Reach Youth out of schools
3. Tracing / retention of Clients in services in context of growing Cities / Mobile people
4. Increased workload for Health care Providers
5. Vertical external support sometimes reluctant to support the integrated approach



# This approach can be used to address other SRH issues

- **Advocacy for their consideration in the guiding documents / strategies**
- **Build on existing channels and structures**
  - e.g:
    - Health system in place*
      - ❖ Health services for women, men and youth
      - ❖ Increased access to range of services
      - ❖ Increased effectiveness and efficiency
- **Integrated approach to SRH issues**
- **Avail and provide gender-specific services**



# For the promotion of SRHR through a multisectoral approach, Belgian cooperation should

---

- 1. Advocate and promote HIV-SRH integration at all levels : policy, service delivery, individual, community,...**
- 2. Provide guidance on SRHR – HIV integration**
- 3. Effective resources allocation**



# CONCLUSION

---

- 1. Multisectoral approach to HIV/AIDS epidemic proved to be the right way in RWANDA**
- 2. Active participation from all Stakeholders key to successful multisectoral approach**
- 3. Same approach can be used for other SRH issues**
- 4. Targeted interventions needed for some specific groups**





*Thank You*

