



1211 West 22nd Street, Suite 900 ■ Oak Brook, Illinois 60523-3384 USA
T: (630) 928-1400 ■ F: (630) 928-1559 ■ www.zonta.org



INTERNATIONAL SERVICE PROGRAM 2010-2012

Prevention of Mother-to-Child Transmission of HIV and Gender-Based Violence in Rwanda

**UNICEF
US\$500,000**

Project Update: October 2011

PROJECT SUMMARY

Women and children in Rwanda are still vulnerable to the repercussions of the genocide and war that took place 16 years ago. Treating HIV-positive women, preventing transmission of the virus to their offspring, and ensuring access to health care and reproductive services, as well as preventing and responding to the violence awoken by the brutalization of the society during the genocide, are critical issues for the development of Rwanda and the safety of its women and children. Building on the success of the project during the 2008-2010 Biennium, the project will continue to focus on the prevention of mother-to-child transmission (PMTCT) of HIV by providing the full range of family package services at 20 UNICEF-supported PMTCT sites throughout Rwanda during the 2010-2012 Biennium. In addition, the project will seek to expand holistic care and services at support centers for survivors of domestic and gender-based violence to ensure access to proper medical, legal, psychosocial and police support.

GOALS AND OBJECTIVES

With the overall goal of preventing mother-to-child transmission of HIV in Rwanda, the project will focus on the following objectives:

- Support evidence-based programming through evaluation of the impact of the national PMTCT program on rates of mother-to-child transmission of HIV at 6-weeks postpartum and a comprehensive assessment of the family package program.
- Model and document the elimination of vertical transmission of HIV to infant at district level.
- Strengthen the early infant diagnosis (EID) program through an improved transportation system for dry blood sample (DBS) and polymerase chain reaction (PCR) results

between sites and the National Reference Library (NRL) and mentoring to sites staffed by TRACPlus (Treatment and Care AIDS Research Centre).

- Support the PMTCT family package services model and ensure routine provision of comprehensive PMTCT services in 20 UNICEF-supported PMTCT sites supported by Zonta International.

With the overall goal of preventing gender-based violence (GBV) in Rwanda, the project will focus on the following objectives:

- Increase access for victims of GBV seeking services, through increased knowledge and increased quality of services to survivors of violence.
- Strengthen the capacity among key service providers in one stop centers and in surrounding health centers and hospitals, particularly among PMTCT service providers, and improve referral of cases and quality of services to survivors of violence.
- Improve the capacity for resilience among survivors and families and decrease the incidence of acute traumatic stress developing into post-traumatic stress disorder among survivors of violence.

PROJECT RESULTS

Results in the area of PMTCT

- UNICEF is currently supporting a national study to evaluate the effectiveness of the PMTCT program at six weeks postpartum. Data collection started in June 2011 with 50 children and mothers initially enrolled in the study and will continue until May 2012 at which time the study expects to reach 2,150 mother-infant pairs.
- With the leadership of UNICEF and the support of other UN agencies, the Ministry of Health/Rwanda Biomedical Center (RBC) launched the National Initiative for the Elimination of Mother-to-Child Transmission of HIV by 2015 under the patronage of the First Lady of Rwanda. Following the launch, a three-week advocacy and social mobilization campaign was initiated in the five provinces and all 381 PMTCT sites countrywide.



A team of psychologists at Isange Center

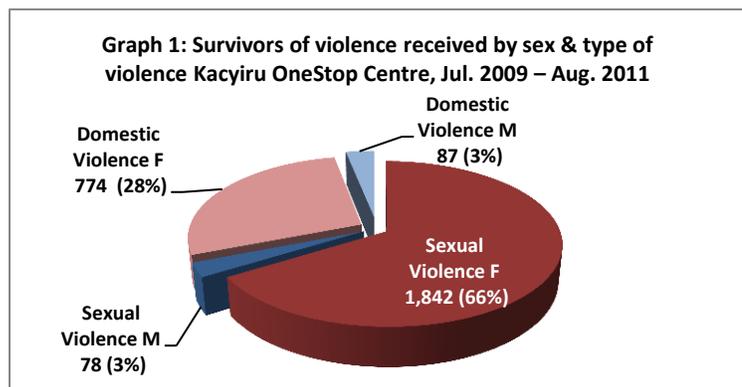
- UNICEF supported model projects in the Bugesera and Musanze districts to work toward the Ministry of Health/Rwanda Biomedical Center's national initiative to eliminate mother-to-child transmission of HIV by 2015. In Bugesera, UNICEF supported 11 health

centers to ensure effective transportation of laboratory samples, trained 1,743 community health workers on comprehensive PMTCT services, and trained 2,054 PMTCT clients on micro-project management. In Musanze, an analysis of PMTCT activities was conducted and a district specific elimination plan was developed.

- UNICEF is continuing to emphasize early infant diagnosis as one of the key components of the PMTCT package, including transportation of EID samples and results.
- From November 2010 to September 2011, UNICEF supported numerous projects through the PMTCT Family Package plan, a health care initiative launched to assist families affected by HIV and AIDS. Through this project, UNICEF helped provide:
 - Routine PMTCT services to 21,721 women in 20 hard-to-reach sites, which resulted in 97% of women and 85.7% of their male partners being tested and counseled for HIV.
 - More effective anti-retroviral drugs (ARVs) for 99.7% of mothers and 64.7% of newborns who were reached through PMTCT services.
 - An expansion from 7 to 12 PMTCT Family Package sites where 88 HIV positive women and their partners enrolled in support groups.

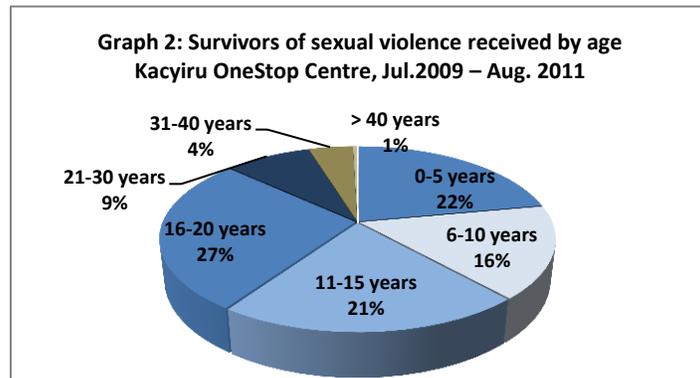
Results in the area of gender-based violence

- UNICEF supported the Kacyiru One Stop Center, a hospital offering medical, legal, psychological and social services to victims of violence free of charge. In two years, this center received 2,781 survivors. With the growing number of individuals coming into the One Stop Center, UNICEF supported another hospital opening in the Rusizi district.



- Of the victims of violence taken in by Kacyiru One Stop Center, 94% were women and 59% were children under the age of 15. The center averaged 135 cases per month between January and August 2011, of which 70% were cases of sexual violence.
- In order to reach a larger number of survivors and to increase their safety, UNICEF supported an expansion of the Kacyiru One Stop Center where they rehabilitated several rooms to provide a new “safe home” for women and children seeking help and refuge. The expansion also provides additional space for professionals providing services in the Center, as well as a guard post to ensure the safety of temporary residents.
- Violence against women and children is still a taboo subject in the community, which results in many women and children not reporting acts of violence or seeking any kind of assistance. Therefore, the Kacyiru One Stop Center ran three-day training sessions for 200 local leaders in Kigali on the issue of sexual violence against women and children in May 2011 in order to raise awareness and increase sensitization in the community on the issue of violence against women and children.

- Due to the sensitivity of the issue of physical and sexual violence, UNICEF offered support for a two-week training of seven professionals at the Gihundwe hospital on ways to offer better care for victims of physical and sexual violence.



- In addition to support provided in the Kacyiru and Gihundwe One Stop Centers, 70 follow-up home visits were conducted for survivors who seek help for physical or sexual abuse to support them in their reintegration into their homes and communities.

CHALLENGES

- Despite efforts to increase access to ARVs and highly active antiretroviral therapy (HAART) for pregnant HIV positive women, about 22% still are not receiving ARVs during pregnancy. The same gap in treatment is seen in preventative ARV treatment for HIV-exposed infants. Services need to be brought to rural and hard-to-reach health facilities and efforts need to be made to target adolescent pregnant women who are reported to be less compliant with the PMTCT program.
- Many of the female survivors of violence return to the same homes where they were abused. Without proper assistance, these women may continue being abused. UNICEF is working with the two One Stop Centers to provide better support for survivors when they return to their communities.
- The Kacyiru Police Hospital had internal changes that delayed the enactment of some of their GBV programs. With a new administration, the hospital is once again functioning at its normal capacity.

LESSONS LEARNED

- In an effort to increase the quality of PMTCT services, attention needs to be focused on more than just training of staff. Mentorship needs to decentralize to assist in increasing the effectiveness of task allocation among health care staff. In addition, supervision of these health care facilities needs to occur by a joint team from both national and local authorities to ensure recommendations are being implemented.
- Community involvement is important to increase demand and fight stigma. It also promotes male involvement that is critical to support mother-infant pair follow up.
- The Family Package PMTCT program offers better outcomes as it focuses on both maternal and male partner health, in addition to helping the children survive HIV-free. It also provides an incentive for the adoption of positive and preventive behaviors among people living with HIV, including HIV sero-discordant couples (couples where only one partner is HIV-positive).

- Need to coordinate at both local and national level with organizations and individuals to increase understanding and capabilities in prevention of PMTCT. Local figures are helpful in creating effective plans for mother-to-child-transmission (MTCT) prevention of HIV at the district level, while national organizations and figures assist in creating frameworks for PMTCT prevention.

NEXT STEPS

PMTCT

- Continue collecting data on PMTCT and Family Package programs.
- Continue supporting the national strategic plan to eliminate MTCT of HIV by 2015.
- Maintain support for 20 hard-to-reach PMTCT sites, providing Family Package programs.
- Increase effectiveness and implementation of MTCT and EID programs nationally.

Gender-Based Violence

- Raise awareness of violence against children through the national campaign to “break the rule of silence” around violence.
- Increase sensitization and training of community-based child protection programs.
- Develop a monitoring and data collection tool for One Stop Centers.

INTERNATIONAL SERVICE PROGRAM

The International Service Program is a Zonta International program, funded by contributions to the Zonta International Foundation's **International Service Fund**. During the 2010-2012 Biennium, three projects are being funded by the International Service Fund:

- Prevention of Mother-To-Child Transmission of HIV and Gender-Based Violence in Rwanda
- Towards Elimination of Obstetric Fistula and the Reduction of Maternal and Newborn Mortality and Morbidity in Liberia
- Safe Cities for Women in Guatemala City, Guatemala and San Salvador, El Salvador