

## STRATEGIC FOCUS

Since 2002, the U.S. Centers for Disease Control and Prevention (CDC) has supported the Rwandan Ministry of Health (MOH) to strengthen its capacity to prevent and detect diseases and respond to public health threats. Together, we address HIV and tuberculosis (TB) through workforce capacity building, epidemiology, HIV prevention among key populations, improving case finding, providing high-quality HIV and TB treatment, strengthening the national surveillance systems, laboratory infrastructure, health information systems, and monitoring and evaluation capacity.

**Strengthening Clinical Services:** CDC provides direct support and technical assistance (TA) to build expertise for MOH’s facility-based HIV/TB clinical services to provide comprehensive, integrated clinical prevention and treatment, including TB Preventive Treatment (TPT) and six-month multi-month dispensation of optimized antiretroviral therapy (ART) for adults and children at all 192 CDC-supported care and treatment sites. In FY 24, CDC support will expand to include TA for implementation of non-communicable disease and HIV integration and management of advanced HIV disease among people living with HIV (PLHIV).

**Strengthening Laboratory Systems:** CDC supports the national laboratory network and quality management system (QMS), laboratory commodity security, workforce development, and laboratory information systems (LIS) for HIV, TB, and other diseases of public health importance. Support towards sustained HIV epidemic control includes HIV drug resistance surveillance, HIV rapid and early infant diagnostics, recency, and viral load testing. CDC also supports reduced turnaround times of core HIV test results through continuous quality improvement, nimble rollout and use of LIS by healthcare providers, improved site-level lab/clinical interface, and optimization of specimen referral system. The laboratory network infrastructure established with support from PEPFAR was used in Rwandan Government led COVID-19 response.

**Strengthening HIV Prevention Activities:** CDC provides MOH with financial support and TA in the prevention of Mother-to-Child Transmission (PMTCT), Pre- and post-exposure prophylaxis (PrEP and PEP), Voluntary Medical Male Circumcision (VMMC), and targeted HIV case finding and linkage across the continuum of HIV services, provide comprehensive HIV services to key and priority populations.

**Strengthening Health Information Systems and Surveillance:** CDC supports and provides TA on using electronic health information systems to collect, analyze, and disseminate data for HIV prevention, care & treatment, and reporting purposes. Using the data from multiple digital systems, CDC Rwanda, in collaboration with the host government, improves decision-making regarding HIV prevention and treatment program performance and individual health outcomes. Moreover, the existing case-based surveillance (CBS) system provides patient level data on newly identified individuals with HIV infection and treatment outcomes of PLHIV in PEPFAR / CDC-supported health facilities. CDC Rwanda, in collaboration with its partners, provides updates on Bio-Behavioral Surveillance Surveys and Population Size Estimation data for selected key populations and modeling national HIV estimates every two to three years.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

**HIV Prevention and Clinical Services:** CDC maintains the quality and sustainability of ART services by supporting “Treat All” and the differentiated service delivery models, including monitoring to identify challenges and inform strategic planning. As of 2022, CDC implementing partners performed 96,353 VMMCs, scaled-up index testing nationally to increase HIV case detection, and initiated a social network strategy to reach, test, and link to treatment hidden at-risk risk populations. Initiated 3,571 persons on pre-exposure prophylaxis from key populations, serodiscordant couples, and adolescent girls and young women. A total of 4,266 new clients with HIV infection were initiated on ART, and loss to follow-up of 0.2%.

**Preventing Mother to Child Transmission (PMTCT):** CDC supports the country’s effort to eliminate mother to child transmission of HIV and keeps mothers alive by providing ART to HIV positive pregnant and breastfeeding mothers and their children. In 2022, the HIV prevalence among all women in antenatal care was estimated at 1.86 % (MOH National HIV Report 2022). National data indicate that 98.14% of HIV exposed infants tested at 24 months during the PMTCT follow-up period were HIV negative.

**TB/HIV:** To reduce the TB burden among PLHIV on ART, PLHIV are routinely screened for TB disease. PLHIV diagnosed with TB receive TB treatment. Those without TB receive TB Preventive Treatment (TPT) to reduce their chance of acquiring TB. Rwanda’s TB treatment success rate for all forms of TB is 89%, and TPT services have been scaled up to all HIV care and treatment health facilities nationally.

**Laboratory Systems:** The viral load testing network is fully connected with the LIS, and the NRL attained international accreditation (ISO15189) in 2021, guiding local laboratories to achieve QMS certification.

**Field Epidemiology Training Program (FETP):** CDC supported 64 FETP-Advanced and 232 FETP-Frontline graduates. Over 80% of the graduates have been deployed to Government of Rwanda institutions, providing epidemiological and public health leadership. FETP residents have led and responded to over 70 outbreaks and authored 40 scientific publications that have informed public health policies and decisions.

### Key Country Leadership

President:  
Paul Kagame

Minister of Health:  
Sabin Nsanzimana

Ambassador:  
Eric W. Kneedler

CDC/DGHT Program Director:  
Thierry Roels

[Country Quick Facts](https://worldbank.org/en/where-we-work)  
([worldbank.org/en/where-we-work](https://worldbank.org/en/where-we-work))

Per Capita GNI:  
\$930 (2022)

Population (millions):  
13.77 (2022)

Under 5 Mortality:  
39.4/1,000 live births (2021)

Life Expectancy:  
66 years (2021)

[Global HIV/AIDS Epidemic](https://aidsinfo.unaids.org)  
([aidsinfo.unaids.org](https://aidsinfo.unaids.org))

Estimated HIV Prevalence (Ages 15-49): 2.3% (2022)

Estimated AIDS Deaths (Age ≥15): 2,500 (2022)

Estimated Orphans Due to AIDS: 93,000 (2022)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 209,948 (2022)

[Global Tuberculosis \(TB\) Epidemic](https://who.int/tb/country/data/profiles/en)  
([who.int/tb/country/data/profiles/en](https://who.int/tb/country/data/profiles/en))

Estimated TB Incidence:  
56/100,000 population (2021)

TB patients with known HIV status who are HIV-positive:  
16% (2022)

TB Treatment Success Rate:  
89% (2022)

**DGHT Country Staff: 39**  
Locally Employed Staff: 32  
Direct Hires: 6  
Fellows & Contractors: 1

Our success is built on the backbone of science and strong partnerships.

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