

## **Joint mission praises Rwanda's AIDS response, urges continued leadership, coordination**

*Luxembourg, DFID, UNICEF and UNAIDS conclude two day visit*

**KIGALI, RWANDA, 14 February 2006** – Leaders from Luxembourg, the United Kingdom, UNICEF and the Joint United Nations Programme on HIV/AIDS today heralded the progress Rwanda is making in their AIDS response and pressed for continued leadership and improved coordination to ensure further success.

"The strong political will and leadership of Rwanda have enabled great progress in the fight against HIV/AIDS, said Mr. Jean-Louis Schiltz, Luxembourg Minister for Development and Humanitarian Action. The challenge now is to work on the sustainability of efforts. We need a truly integrated approach, including prevention, treatment and care in the context of a broader health system and agenda. One crucial element to sustainability is capacity building and adequate human resources."

The joint mission included Sir Suma Chakrabarti, Permanent Secretary, United Kingdom Department for International Development (DFID); Ms. Ann M. Veneman, Executive Director of UNICEF; and Dr Peter Piot, Executive Director of UNAIDS.

The mission emphasized that Rwanda is at a key point in its AIDS response and stressed that preventing new infections remains the most sustainable means of curbing the epidemic. At the same time, they emphasized the need for a comprehensive approach to provide care and treatment to all Rwandans living with HIV.

Some 250,000 people are estimated to be living with HIV in Rwanda; 22,000 of these were estimated to be children under the age of 15, according to the 2004 UNAIDS Global Report. The most recent data on HIV prevalence from the national Demographic Health Survey 2005 indicates an overall estimate of 3 percent nationally. The growing number of women affected by the epidemic is a concern, with HIV prevalence rates among women aged 15-24 years five times the rate among men of the same age group.

### **Progress made**

As of September 2005, more than half (199) of the country's 365 health facilities were offering services to prevent mother-to-child transmission. Sites for voluntary counseling and testing have increased and, according to national estimates, the number of people receiving antiretroviral therapy rose from 8,700 in 2004 to more than 19,000 by December 2005. With this increase, Rwanda already treats about half the people estimated to be in need of treatment, one of the highest coverage rates in Sub-Saharan Africa. The mission found that the approach taken and the results achieved makes Rwanda's experience a model for other countries.

The mission met with representatives of the government, civil society, UN and donor agencies to gain a joint perspective on the progress made in Rwanda's national AIDS response, and to explore ways to continue and improve partner harmonisation at all levels.

They also visited community-based programmes that provide care and support to people living with HIV, as well as prevention services, including HIV testing and

counselling. The mission was impressed with the comprehensive family oriented approach as well as the economic development programmes.

A national HIV/AIDS strategic plan for 2006-2009 has been developed by the government together with its partners to provide a framework for financing, coordinating, monitoring and evaluating the national AIDS response.

### **Challenges**

The mission observed that Rwanda still faces some challenges which include ensuring that HIV/AIDS is integrated in Rwanda's Economic Development Poverty Reduction Strategy.

As international funding for AIDS increases, one key factor is to ensure money is spent effectively, focused on the most at risk to HIV as well as people living with and affected by AIDS. To make the money work, the mission recommended stronger coordination efforts by government, donors and civil society in the response.

"Donors need to do more to support the government in its efforts. This means responding to Rwanda's priorities, using government systems and making our aid more long term and predictable. During this visit, the UK signed a ten-year development partnership arrangement with Rwanda," said Sir Suma Chakrabarti.

### **Children and AIDS**

According to the last census in 2002, Rwanda has one of the highest proportions of orphans in sub-Saharan Africa where 30 per cent or more of all children under 18 were orphaned. Out of 1.3 million orphans from all causes, 160,000 children were orphaned because their parents died of AIDS related causes. This situation places a heavy burden on the traditional safety nets of communities to cater for the rights of children affected by HIV/AIDS.

"For too long, children have been the missing face of the AIDS pandemic," said UNICEF Executive Director Ann M. Veneman. "We must work to provide protection, care and treatment for children infected and affected by HIV/AIDS. We applaud the leadership of the President and the First Lady to address the issue of HIV/AIDS and children."

Two campaigns which reinforce the need to address children as an integral part of the AIDS response are the 'Unite for children, Unite against AIDS' campaign and the 'Treat every child as your own' campaign by the Organization of African First Ladies Against HIV/AIDS. These campaigns provide new opportunities for innovative actions for children.

### **New Phase**

The mission leaders concluded that Rwanda had a solid foundation in place. They further committed themselves to strengthen their unified approach in the fight against HIV/AIDS and poverty.

Dr. Piot concluded, "Rwanda is moving into a new phase of the AIDS response – where the quality of the response and sustainability are crucial. The mission is

confident that Rwanda's vision and political commitment will enable it to successfully address the challenges ahead."

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Since 2000, Luxembourg is among the 5 countries that devote more than 0.7% of their gross national income (GNI) to official development aid, focusing on the fight against poverty. Lux-Development is Luxembourg's implementing agency for the majority of the bilateral cooperation.

Rwanda was one of the first countries to benefit from bilateral cooperation of Luxembourg, starting in the 1980's. A cooperation agreement was finalized and signed in December 2002. Since 1996, Luxembourg intensified its cooperation with Rwanda, and supported activities in the areas of rural development, youth vocational training, and particularly health (hospital maintenance, HIV/AIDS, nursing school, ESTHER project).

The Department for International Development (DFID) is the UK Government department responsible for promoting sustainable development and reducing poverty. The central focus of the Government's policy, based on the 1997 and 2000 White Papers on International Development, is a commitment to the internationally agreed Millennium Development Goals, to be achieved by 2015. ([www.dfid.gov.uk](http://www.dfid.gov.uk))

For nearly 60 years, UNICEF has been the world's leader for children, working on the ground in 157 countries to help children survive and thrive, from early childhood through adolescence. The world's largest provider of vaccines for poor countries, UNICEF supports child health and nutrition, good water and sanitation, quality basic education for all boys and girls, and the protection of children from violence, exploitation, and AIDS. UNICEF is funded entirely by the voluntary contributions of individuals, businesses, foundations and governments. ([www.unicef.org](http://www.unicef.org))

UNAIDS, the Joint United Nations Programme on HIV/AIDS, brings together the efforts and resources of ten UN system organizations to the global AIDS response. Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. Based in Geneva, the UNAIDS secretariat works on the ground in more than 75 countries world wide. ([www.unaids.org](http://www.unaids.org))