Interventions for HIV Positive People

**PVT also known as PMTCT** involves taking ARVs to prevent the transmission of HIV to an infant before or during childbirth or while breastfeeding.

Who takes ARVs: Either infant who has been exposed to HIV, mother living with HIV or both.

**Treatment as prevention** involves taking ARVs as soon as you are diagnosed with HIV—irrespective of the CD4 count. Early treatment has been proven to prevent sexual transmission and can improve health outcomes.

Interventions for HIV Negative People

**PrEP:** Use of ARV taken before an anticipated potential exposure to HIV to prevent acquiring HIV.

Who takes ARVs: key populations who are HIV negative and willing to avoid contracting HIV.

**ARV-based Microbicides:** are products formulated for vaginal or rectal application before or during sexual activity to reduce the risk of infection by HIV.

Who takes ARVs: HIV-negative people wishing to avoid acquiring HIV.

**PEP:** Short-term use of ART to prevent acquiring HIV after (potential) exposure to HIV.

Who takes ARVs: Taken by HIV negative people.

Pre-exposure Prophylaxis and HIV Prevention

For hundreds of thousands of people in Rwanda today—some 3% of the population—HIV is a fact of daily life. In addition to living with a serious health burden, these people often experience stigmatization from family and friends, and struggle to find employment. Furthermore, they constantly risk transmitting HIV to their partners and children.

Much progress has been made in the area of HIV prevention—thanks to the hard work of the Rwandan government and other stakeholders, HIV rates have reduced from 25,000 new infections annually five years ago to 15,000 new infections now. However, much more needs to be done to ensure that no new cases of HIV arise and the global goal of zero infections by 2015, is achieved.

The PrEP (Pre-exposure Prophylaxis) approach involves giving ARV medication to HIV-negative people before they have a sexual encounter that will put them at risk of contracting HIV. This medication will then dramatically reduce their chance of catching HIV.

Why We Encourage Pre-Exposure Prophylaxis

Over the years, major studies have been done to test the effectiveness of Anti-Retroviral Therapy (ART) in reducing the risk of HIV transmission. In Rwanda however, most ARVs are given either to people as an emergency measure such as PEP, after being unexpectedly placed at risk of HIV such as healthcare providers; or to people who are already HIV-positive.

Pre-exposure prophylaxis medications such as Truvada, if taken as prescribed by the doctor will be beneficial to women in abusive relationships and key populations including MSM, sex workers and sero discordant couples who are trying to conceive. HDI wants to empower these people by promoting an ARV-based prevention approach’.
Our PrEP Project

HDI, in collaboration with AVAC, a US based NGO working to prevent the spread of HIV, has launched an advocacy project calling for PrEP access and awareness. This campaign has three main elements:

Engaging with CSO’s: We are creating brochures, policy briefs, posters and factsheets on PrEP. We are then using these publications in a series of workshops with other CSO’s to inform them about PrEP, and encourage and support them to advocate for PrEP availability.

Raising Media Awareness: In today’s world, the media has a huge influence over people’s views and knowledge. That’s why HDI is distributing PrEP information including brochures and a press release to all major newspapers and websites in Rwanda. We’re also holding an information session with journalists, encouraging them to spread awareness about PrEP.

Influencing Policymakers: In collaboration with other NGOs, we are meeting with influential policymakers, and encouraging them to provide access to PrEP. We are also distributing fact sheets and booklets to an extremely wide range of policymakers.

About HDI Rwanda: Striving for a healthy society

Health Development Initiative (HDI) is a non-profit organization working to improve the quality and accessibility of healthcare in Rwanda. We do this through a combination of education, advocacy and medical support.

Our Work

**Family & Community Health Education**
We provide health education to communities. Much of this work focuses on reproductive health.

**Medical & Technical Assistance**
We support volunteers to treat Rwandan medical patients and train their Rwandan counterparts in specialized medical treatments.

**Advocacy & Policy Monitoring**
We work with government institutions and NGO’s to advocate for positive healthcare policy change.
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