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REPUBLIQUE RWANDAISE
MINISTERE DE LA SANTE
PROGRAMME NATIONAL DE LUTTE CONTRE LE SIDA
B.P 2717 KIGALI
TEL: 78471/2 -FAX : 78473
E-mail : pnls@rwandatel1.rwanda1.com

THE RWANDA NATIONAL HIV/STD/AIDS STRATEGIC PLAN FRAMEWORK FOR THE MTPIII PERIODE 1998 TO 2001

WITH SUPPORT FROM UNAIDS

October 1998.

PRESIDENT OF TWIZERE ASS

MUNGANYINKA BEATRICE
TWIZERE ASS.
C/O PNLS B.P 2717
KIGALI RWANDA
FAX 78473
HOME ADDRESS

MUNGANYINKA BEATRICE
B.P 921 KIGALI
Tel 08501687

USAID RWANDA

BRIEFING BOOK

Visit of
Ms. Sandra Thurman
White House National AIDS Policy Director

January 2000

Govt. leadership is strong

Many from Uganda

From 1994 recovery is great

Infrastructure was non-existent

Rwandans are working for reconciliation

ups and down – on balance

Beth Payne – economy

rapid recovery since 1994 esp. agricul

'99 – stagnant 5% down from 10%+

budget deficit

Weakness – human capacity – strong need for training

Creation of new skills

looking for

export – coffee + tea

Inc. in petroleum prices creating hardship

ext. debt 16.7% of GDP –

military exp. high

US business ties expanding – used clothing largest

Lucent / Panzoil /

Weak university system

Development

Chronic malnutrition

most densely pop. - agrarian

13% HIV prevalence / life expectancy ↓

Donor dependent

Heath services 250,000 returnees prov. health services

Micro-credit programs for 200,000 widows

"Women in transition"

Partners → FHI

AIDS less than 100 doctors in country

nurse training ??

huge problems in rural areas.

AIDS prev est. at 14% no testing military

more testing

Congo war having huge impact

Uganda - political situation - very organized

Cultural structure can help get message out.

legislative reluctant to challenge executive steps

decentralization is ..

democratic procedures - being implemented

problem: society traumatized

less than 100 lawyers

---

public affairs problem. 2 women to DC to prepare

plans programs

Feb. 11

AMBASSADOR OF
THE UNITED STATES OF AMERICA
KIGALI

January 10, 2000

Welcome to Rwanda:

We hope that you enjoy your stay. The American Embassy and the United States Agency for International Development's Mission to Rwanda are actively engaged in helping the government and people of Rwanda to build a society that provides justice, stability, and greater prosperity.

One of the Embassy's primary functions is protecting and assisting the Americans who live in or visit Rwanda. We also promote American values and business and facilitate contacts between Rwanda and the United States. Although your stay in Rwanda may be brief, we hope that it will be long enough to give you appreciation of the extraordinary beauty of this land, and of the accomplishments we have made, and of the challenges Rwanda still faces.

The Embassy and USAID will provide whatever support we can to make your visit productive, enjoyable, and safe. If you need any assistance or information, please contact your Visit Control Officer, Stephen Giddings. He and the entire Embassy community are ready and willing to help.

Sincerely,

George M. Staples

George M. Staples
Ambassador

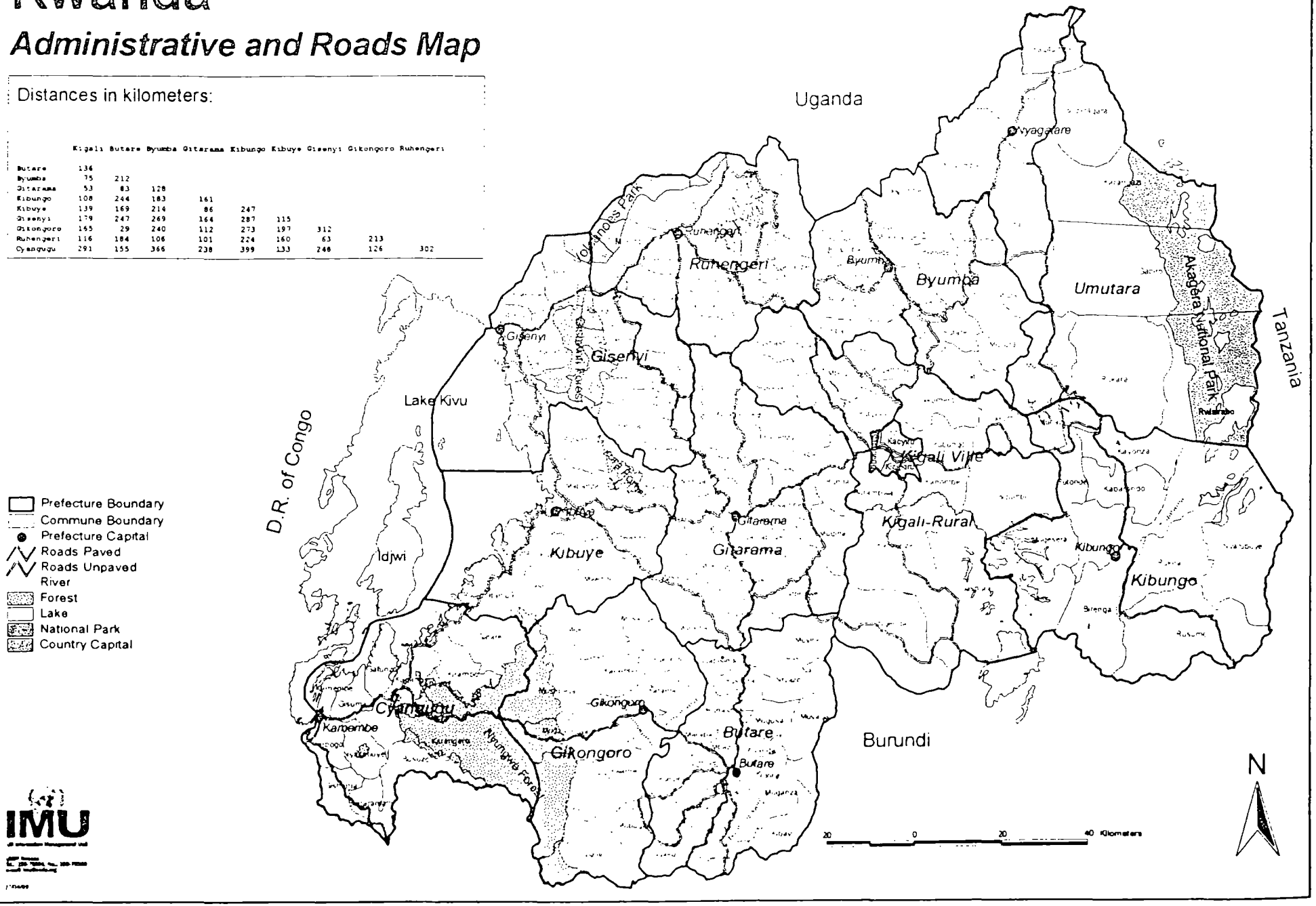
RWANDA

Rwanda

Administrative and Roads Map

Distances in kilometers:

	Kigali	Butare	Byumba	Gitarama	Kibungo	Kibuye	Gisenyi	Gikongoro	Ruhengeri
Butare	136								
Byumba	75	212							
Gitarama	53	83	128						
Kibungo	108	244	183	161					
Kibuye	139	169	214	86	247				
Gisenyi	179	247	269	164	287	115			
Gikongoro	165	29	240	112	273	197	312		
Ruhengeri	116	184	106	101	224	160	63	213	
Cyangugu	291	155	366	238	399	133	248	126	302



Rwanda 2000: *Looking to the Future*

How does a nation rebuild and heal the wounds of a genocide that killed as many as one million people, that displaced nearly half of the country's population, and which decimated its natural and human resources? This is what Rwanda has faced for the past five years as it has tried to move beyond ethnic conflict, beyond emergency, and into transition and sustainable development. In this struggle, Rwanda's young government and the people of Rwanda have not been alone. USAID and other donors have been helping to rebuild, to heal, and to overcome.

The challenges are colossal: The population density is among the highest in the world with 91% of the population depending on agriculture for existence. Agriculture production has yet to reach pre-war levels. Farmers are confronted with growing land constraints and environmental degradation. The situation was further complicated by the return of nearly one million refugees at the end of 1996. More than half of the population is illiterate, the number of schools inadequate, and secondary school enrollment very low. The rate of HIV/AIDS is alarming as are other health indicators in a country where only 44% of the population have access to clean water. Rwanda has debt of over US$1 billion, equal to 65% of the Gross Domestic Product (GDP). Of the population of 7.9 million, more than 50% live below the poverty line. In 1997, Rwanda ranked 174 out of 175 countries on the Human Development Index.

Still, the Government of National Unity is committed to development and to improving the livelihoods of all Rwandans. Genocide survivors and returnees demonstrate a powerful commitment to rebuilding their country and to learning from the past. They provide a source of inspiration for what the future can hold. They seek to form the Rwanda of the new millennium; a Rwanda that is secure, peaceful, and prosperous. USAID Rwanda has a unique opportunity in Rwanda to make a real difference for the people of this small nation, a people who have witnessed a horrible tragedy, who are searching for strength to come to terms with the past, and to believe in the future.

Rwanda Statistics: *At a Glance*

Area: 26,338 Square kilometers

Population: 7.9 million

Human Development Index rank: 174 out of 175 (1997)

GNP: US$240 per capita (1997)

Debt: US$11.64 billion (1997)

Adult Literacy: 52.7%

Female-headed Households: 34%

Population Growth: 3.1%

Life Expectancy: 42

HIV Prevalence Rate: 12.75%

Military meeting

HIV + other Countries

Transitions caused problem —

1) [illegible], more long

2)

Other problems seem more [illegible] immediate

Poverty
recovery
customs
polygamy
unprotected sex

Communication spree
Shameful — believe in
bewitched

Govmt also slow to respond

AIDS not immediately high on agenda 94-95-96-97

people who served in Congo got AIDS/
lack of faithfulness during war is problem

[illegible] condom use in military.
losing battle on condoms.
most officers but 22-30 years old
[illegible] seeking

ABC DE[illegible]HI JKLMNOP QRSTUVWXYZ

genocide factor
° orphans
° widows

applied leadership
VP [illegible] Prog [illegible]

15-45 sexually active group
military more [illegible] + not

testing

risk of HIV
very small
compared to others
out of touch

are their figures out of date

Campaign ~~by~~ on
1) Condom
2)

Cost of ~~ART~~ is 5X
Salary of

HIV counseling invol[illegible]

Commander is #1 voice

· peer educator -
they do [illegible]

battalion' 800-900 men Company
NOT job of one person
inc. rate of transmission in Congo
soldiers who are away are one
problem -
Social stigma still high
reappear to not know - pat [illegible] ; [illegible] change
~~[illegible]~~ when you don't have [illegible]
A10 [illegible] [illegible] [illegible] TB and women

VISIT CONTACTS & SCHEDULE

Phone Numbers

Embassy Switchboard	75601/2/3, 72126, 77147
USAID Switchboard	73251/2/3, 75746
Hotel Mille Collines	76530, 76531, 76533/4/5
Stephen Giddings, Visit Control Officer	8300361

Name	Title	Cellular Phone	Home Phone
George Staples	U.S. Ambassador to Rwanda	8300543	83219

USAID Contacts

Dick Goldman	USAID Mission Director	8300357	82185
Stephen Giddings	Supervisory Program Officer	8300361	75981
Jeffrey A. Nedoroscik	Executive Officer	8300358	77204
James DuVall	Controller		72654
Kenneth Lizzio	Acting SO1 Team Leader	8300373	75530
Christian Barratt	SO2 Team Leader		85172
Heather Goldman	Regional Food For Peace Officer	8302129	82185
Mervyn Farroe	Deputy Program Officer	8302131	76331
Eric Kagame	Health Specialist	8302133	96352

Embassy Contacts

Donald Koran	DCM	8300539	75314
Lynn Allison	Political Officer	8300348	83711
Susan Page	Political Officer	8300350	76581
Beth Payne	Consular Officer	8300538	75632
William Mellott	Regional Security Officer	8300542	
Timmie Chatelain	Information Program Officer	8300534	72114
Gustavo Mejia	Administrative Officer	8300537	87496
Major Richard Skow	DATT	8300540	75609
Ergibe Boyd	Public Affairs Officer	8300541	87497

ROOM ASSIGNMENTS
HOTEL DES MILLE COLLINES
KIGALI, RWANDA

NAME	ROOM NUMBER
Ms. Sandra Thurman	326
Dr. Michael Iskowitz	332
Ms. Kathleen Carr	328
Ms. Mary Fisher	330
Mr. Thomas Niblock	334
Mr. Ron Johnson	336

Draft 01/11/2000 14:45

VISIT TO RWANDA OF SANDRA THURMAN
WHITE HOUSE NATIONAL AIDS POLICY DIRECTOR
JANUARY 12 – 14, 2000

Thurman Party: Ms. Sandra Thurman, Director, White House National AIDS Policy

Dr. Michael Iskowitz, Office of National AIDS Policy (ONAP) Consultant
Ms. Kathleen Carr, Executive Director of Elizabeth Glaser AIDS Foundation
Mary Fisher, Family AIDS Network
Thomas Niblock, Deputy Director Africa Economic Policy Staff, U.S. Department of State
Ron Johnson, Member of Presidential HIV/AIDS Advisory Committee

Control Officer: Stephen Giddings, Deputy Director, USAID Rwanda

SCHEDULE

Wednesday, January 12

10:10 ***Arrive on Alliance Air #102 at Kigali International Airport from Entebbe, Uganda***
Site: Kigali International Airport
Site Officer: Jeffrey A. Nedoroscik
Greeting: Ambassador Staples, Minister of Health, Dick Goldman
Expediting: Jeffrey Nedoroscik, Hadiza Linganwa

10:30 Leave Kigali International Airport for Ambassador's residence (Ambassador's Vehicle, Dick's Vehicle, Van)
Jeffrey & Hadiza take luggage to Hotel Mille Collines and Check-in all visitors (Landcruiser)

10:45-11:45 ***Mini-Country Team Meeting with Powerpoint Presentation***
Participants: entire delegation
Site: Ambassador's Residence
Site Officer: Mervyn Farroe

11:45 Leave Ambassador's Residence for Goldman Residence (Dick's car, Van)

12:00 – 13:25 ***Working Lunch with USAID Health Staff***
Participants: entire delegation (except Thomas Niblock) (15 people)
Site: Dick Goldman Residence
Site Officer: Jeffrey A. Nedoroscik

12:00-13:15	***Beth Payne, Economic Officer, U.S. Embassy has private lunch with Thomas Niblock*** (Landcruiser)
13:30	Leave Goldman Residence (Dick's car, 2 Landcruisers)
13:30	Niblock leaves lunch for Ministry of Defense (Landcruiser)
13:45-14:45	***Meeting on AIDS in the Military*** ***Participants: Entire Delegation, Ambassador Staples, Major Richard Skow, D. Goldman*** Site: Ministry of Defense – Conference Room Site Officer: Major Richard Skow
14:50	Depart Ministry of Defense for Kicukiro (Dick's car, Two Landcruisers)
15:00-16:00	***Visit Training of AIDs Outreach Workers*** ***Sponsored by CARE, Ministry of Health, and Ministry of Social Affairs*** ***Participants: Entire Delegation*** Site: Kicukiro Training Center Site Officer: Eric Kagame
15:40	Ms. Thurman, Iskowitz, Niblock and Goldman break away from group and depart for Vice President Kagame's office (Dick's Car, Landcruiser)
16:05	Carr, Fisher, Johnson and Chris Barratt depart Kicikiru for Kigali Health Institute (Landcruiser)
16:15-17:00	***Tour Training School*** ***Participants: Carr, Fisher, Johnson, Barratt*** Site: Kigali Health Institute Site Officer: Patricia Mwanuyera
16:00-17:00	***Meeting with Vice President Kagame & Dr. Charles Mulego*** ***Participants: Ms. Sandra Thurman, Ambassador Staples, Iskowitz, Niblock, Goldman*** Site: Vice President Kagame's Office (Site Not Confirmed) (Ambassador's Car, Dick's Car, 1 Landcruiser)
17:05	Depart Vice President's Office Ms. Thurman, Iskowitz, Niblock to Hotel Mille Collines (Dick's Car, Landcruiser)
17:05	Depart Kigali Health Institute Carr, Fisher, Johnson, Barratt for Hotel Mille Collines (Landcruiser)
18:10	Depart Hotel Mille Collines for Ambassador's Residence (Two Landcruisers)
18:30-20:00	***Reception with Theme: AIDS in Rwanda*** Participants: approximately 40 Guests Site: Ambassador Staples's Residence
20:10	Depart Reception for Hotel Mille Collines (Two Landcruisers)

Thursday, January 13

8:00	Delegation, Dick Goldman depart Hotel Mille Collines (Ambassador's Car, Dick's Car, Two Landcruisers)
8:15 – 9:15	***Meeting with the Minister of Health*** ***Participants: Entire Delegation, Ambassador Staples, Dick Goldman, Chris Barratt*** Site: Ministry of Health Site Officer: Eric Kagame
9:15	Depart Ministry of Health (with Minister of Health) (Dick's Car, Two Landcruisers)
9:20-10:15	***Guided Tour of National AIDS Control Program (PNLS), National Retro-Viral Laboratory, Rwanda Information Center on HIV/AIDS, and the Rwanda Health Communications Center*** ***Participants: Entire Delegation, Minister of Health*** Site: Rwanda Health Communications Center Site Officers: Eric Kagame, Patricia Mwanuyera, Kristen Kalla
10:20-12:15	***Roundtable & Presentations on Rwanda HIV/AIDS Programs*** ***Participants: Entire Delegation, approx. 30 participants*** Site: Rwanda Health Communications Center Site Officer: Mervyn Farroe
12:20	Depart Rwanda Health Communications Center for Hotel Mille Collines (Dick's Car, Two Lancruisers)
12:30-14:00	***No Host Lunch at Hotel Mille Collines (4th floor ball room)*** ***Participants: Entire Delegation, DCM, Minister of Health*** Site: Hotel Mille Collines Site Officer: Jeffrey A. Nedoroscik
14:15-14:45	***Press Conference*** ***Ambassador Staples to give introductory comments*** Site: Hotel Mille Collines Site Officer: Ergibe Boyd
14:50	Depart Hotel Mille Collines for Bilyogo (Dick's car, Two Landcruisers)
15:00-16:00	***Visit Community Based AIDS Program*** ***Participants: Entire Delegation, Minister of Health*** Site: Bilyogo Health Center Site Officer: Eric Kagame
16:15	Depart Bilyogo for Kicukiro (Dick's Car, Two Landcruisers)
16:30-17:30	***Visit and Tour UNICEF Supported Mother to Child AIDS Prevention Center*** ***Participants: Entire Delegation, Minister of Health*** Site: Kicukiro Mother to Child AIDS Prevention Center Site Officer: Stephen Giddings
17:35	Depart Health Center for Hotel Mille Collines (Dick's car, Two Landcruisers)

17:45 –19:15	Down Time at Hotel Mille Collines
19:15	Depart Hotel Mille Collines for Location TBA (Two Landcruisers)
19:30-21:30	***Dinner Hosted by the Government of Rwanda (Confirmed)*** ***Participants: Entire Delegation*** Site: TBA (La Villa Restaurant – Not Confirmed)
21:30	Depart Dinner for Hotel Mille Collines (Two Landcruisers)

Friday, January 14

8:00-8:15	***Thurman party check-out of Hotel Mille Collines*** with assistance of Jeffrey A. Nedoroscik and Hadiza Linganwa
8:15-9:00	***Exit Meeting Breakfast at Hotel – Terrace Restaurant*** ***Participants: Entire Delegation, Dick Goldman, Chris Barratt, Eric Kagame*** Site: Hotel Mille Collines Site Officer: Jeffrey A. Nedoroscik
9:15	***Baggage, Ticket & Exit Tax ($20) Collection*** Linganwa & Nedoroscik Assist
9:15	Depart Hotel Mille Collines for Kigali Central Hospital (Dick's Car, Two Landcruisers)
9:15	Nedoroscik and Linganwa take baggage to airport, conduct pre-check-in (Landcruiser)
9:30-10:30	***Tour of Central Hospital Medical Ward*** ***Participants: Entire Delegation, Minister of Health*** Site: Kigali Central Hospital (C.H.K.) Site Officer: Patricia Mwanuyera
10:35	Depart C.H.K. for Airport (Dick's car, Two Landcruisers)
10:50	***Arrive Kigali International Airport*** ***Greet and Goodbye: Ambassador Staples, Minister of Health, Dick Goldman*** Expedite: Nedoroscik, Linganwa, Isadore
11:20	DEPART FOR NAIROBI (Kenyan Airways 471)

Briefing Notes on Field Visits
White House Delegation on HIV/AIDS
USAID/Rwanda

1. **National AIDS Control Program (PNLS)**

The National AIDS Control Program (PNLS) is the focal point of Rwandan central government efforts to combat the spread of HIV/AIDS. PNLS was created in 1997 as part of a restructuring of the Ministry of Health. PNLS serves as a planning, advocacy, coordination, public information and research organization. Decentralized health districts provide resource management and service delivery. The National Retro-Viral Laboratory supports the PNLS and is the primary HIV/AIDS testing laboratory in Rwanda. The Rwanda Health Communications center, with financial and technical assistance provided by USAID and the World Bank, supports the PNLS by producing and disseminating HIV/AIDS related information. PNLS also includes the Rwanda Information Center on HIV/AIDS. The Director of PNLS reports directly to the Minister of Health. PNLS also receives technical assistance and grant funding from the Governments of Luxembourg and Belgium.

2. **Community-Based AIDS Program**
Bilyogo Health Center

The Bilyogo Health - Social Center was founded 26 years ago as an independent facility sanctioned by the Government of Rwanda with which it works closely. It is supported financially by the Catholic Church, particularly Caritas-Rwanda, and other benefactors of the Catholic community. The Center primarily services a very poor neighborhood of Kigali and provides care to anyone with a health problem. It provides four basic services: general care and counseling, nutritional counseling, schooling for AIDS orphans and other children coming from poor families, and an HIV/AIDS program.

The HIV/AIDS program was established in 1998 and provides care to HIV positive and AIDS infected patients. It provides services in counseling, sensitization, testing, treatment, follow- up, rehabilitation and assistance with funerals. The Center has created a needlework/sewing vocational program for sero-positive individuals, a restaurant (assisted by the UN) and a small dairy and chicken farm for providing jobs to patients.

The Center provides follow-up for people living with HIV/AIDS that have opportunistic infections. It does not provide specific drug treatment for the AIDS virus or hospital facilities for patients who have AIDS. The Center is a facility where patients (with their children) with various opportunistic infections can rest, recover and become familiar with their condition before trying to resume a normal life in the community. Services are provided free of charge to the poorest patients. It works in close collaboration with Kigali Central Hospital.

3. **Mother to Child AIDS Prevention Center**
Kicukiro District Health Center

The Kicukiro District Health Center, with the financial and technical support of UNICEF, initiated an innovative pilot program in 1999 to treat sero-positive expectant mothers with drug therapy during the later stages of pregnancy to reduce the risk of mother to child transmission of the virus. Through the program, the Center provides testing for HIV and treatment of those women who test positive. Drugs are provided by UNICEF. This is the only program of its kind in Rwanda. Information about the program is disseminated throughout the country. If the pilot proves successful, the Ministry of Health would like to replicate it in other parts of the country. This would require outside assistance because of the high cost of the drug treatment.

4. **Kigali Central Hospital**
Central Hospital Medical Ward

This is the primary facility in Kigali for treatment of those infected with AIDS who require and can afford hospitalization. Anti-viral triple therapy treatment for AIDS is available but unaffordable by almost all Rwandans. Currently there are just 140 people who can afford this treatment. Most patients in the medical ward are being treated for AIDS-related infections, predominantly tuberculosis. Approximately 70% of all patients being treated in the medical ward have AIDS.

5. **Training of AIDs Outreach Workers Sponsored by CARE, Ministry of Health, and Ministry of Social Affairs**
Kicukiro Training Center

CARE International, in collaboration with the Ministry of Health and the Ministry of Social Affairs, is embarking on a program to provide AIDS prevention counseling and other social support services to unaccompanied minors and other at-risk children in Rwanda. The program will target an estimated 85,000 child-headed households and children who remain in centers separated from families. Counseling and social services strengthened in communities will also help to protect the growing number of AIDS orphans in Rwanda.

The Kicukiro Training Center was used by the Ministry of Health as a training school for nurses until 1994 when it was destroyed by civil war. USAID funds rehabilitated the facility and it now operates as an autonomous, income-generating training site, used frequently by the Ministry of Health and its partners.

6. **Kigali Health Institute Para-Medical Training Facility**

The Kigali Health Institute (KHI) is the principle training institution for Rwanda's medical support personnel, including radiology and laboratory technicians, physical therapists, and other types of health workers. Since 1994, Rwanda has suffered from an acute lack of professional health manpower to operate public health services. A key role of KHI is now to train senior-level nursing staff to manage government health centers. KHI has received support from USAID, the Swiss Government and the Belgian Cooperation to rehabilitate and strengthen its teaching capacity.

U:\users\public\so2\sites2

AIDS in the Military

Location: The Senior Officer's Mess, or the Etat-Major Conference Room. They are near to one another. Confirmation of exact location forthcoming.
Date: 12 January 2000
Time: 1345 hours to 1445 hours

Participants:

1. Rwandan Patriotic Army Chief of Staff Brigadier General Kayumba NYAMWASA

2. Rwandan Patriotic Army Deputy Chief of Staff Colonel Frank MUGAMBAGE

3. Rwandan Patriotic Army G1 Lieutenant Colonel Geoffrey BYEGEKA

4. Rwandan Patriotic Army Surgeon Major Joseph NTARINDWA

Purpose: To inform the delegation on the current situation of AIDS in the military, followed by what initiatives and programs they would like to start in combating HIV.

Talking Points: Current resources available for sampling the army, and care for those infected. Effect on Army leadership and morale in general.

You may be asked:
Can the U.S. assist us in resources for:
1. Sampling the army to get an accurate rate of infection.
2. Care and treatment of infected individuals.

Background: The Rwandan Patriotic Army currently tests every individual that comes to Kanombe Military Hospital for treatment, and that testing has so far resulted in an approximate 14% infection rate. Some people are concerned that this rate will increase due to current extended deployments in DROC. The army makes condoms readily available to soldiers, and uses the army leadership at all levels to educate soldiers regarding HIV.

RECEPTION FOR MS. SANDRA THURMAN,
WHITE HOUSE NATIONAL AIDS POLICY DIRECTOR AND PARTY
WEDNESDAY, JANUARY 12, 2000
18:30 – 20:00
AMBASSADOR STAPLES' RESIDENCE

HOST

Ambassador Staples

Thurman Party

Ms. Sandra Thurman
White House National AIDS Policy Director

Dr. Michael Iskowitz
ONAP Consultant

Ms. Kathleen Carr
Executive Director, Elizabeth Glaser Pediatric AIDS Foundation

Ms. Mary Fisher
Family AIDS Network

Mr. Thomas Niblock
Deputy Director AF Economic Policy Staff

GUESTS

Dr. Ezechias Rwabuhihi
Minister of Health

Ambassador Theogine Rudisingwa
Advisor to the Vice President

Dr. Desire Ndushabandi
Secretary General, Ministry of Health

Ms. Kristen Kalla-Jabri
Resident Technical Advisor, AIDSMARK

Ms. Pia Schneider
Health Economist, Abt. Associates PHR Rwanda

Ms. Deborah Murray
IMPACT

Mr. Brian Smith
PSI

Ms. Edith Gasana
Secretary General
Minister of Finance and Economic Planning

Dr. Donald Kaberuka
Minister of Finance and Economic Planning

Dr. Innocent Ntaganira
Director, National AIDS Control Program (PNLS)

Dr. Maurice Bugagu
Director, National Office of Population (ONAPO)

Dr. Antoine Muyombano
Director, Clinique Plateau

Dr. Innocent Nyaruhirira
Director, Kigali Central Hospital (CHK)

Dr. Jean Kagubare
Director, King Faisal Hospital

Mr. Emmanuel Gakwaya
Member, Persons Living with AIDS

Mr. Gasana Ndoba
President of the National Commission for Human Rights

Mr. Bacar Abdouroihamane
UNDP Representative

Mrs. Guenet Guebere-Christos
UNHCR Representative

Ms. Anders Ostman
UNICEF Representative

Dr. Amidou Baba-Mousa
WHO Representative

Ms. Rose Rwabuhihi
UNFPA, Officer in Charge

Mr. Ivan Hermans
UNAIDS Country Programme Officer

Major Rose Kabuye
Parliamentarian

Ms. Kathy Zeig
CRS

Mgr. Salvatore Pennacchio
Nonce Apostolique
Papal Nonciature

Mr. Jean Paul Kimonyo
Director of the Center for Conflict Management

Dr. Emmanuel Ndahiro
Physician to the Vice President

Dr. Anne DePorter
Physician, Belguim Embassy

Dr. Mohamed Ayad
Regional Coordinator, MACRO International

Mr. Juvenil Karimba
Director, Rwanda Center for Health Communications

Ms. Aloysie Inyumba
Executive Secretary, National Commission for Unity and Reconciliation

Ms. Angelina Muganza
Minister of Gender

Dr. Vincent Biruta
Minister of Public Works, Transport and Communications

Dr. Camille Karimwabo
CARITAS

Mr. Emile Rwamasirabo
Rector, National University of Butare

Dr. Joseph Ntaganaira
Head, School of Public Health

Dr. Emmanuel Gasakure
Dean, Medical School, National University of Butare

Mrs. Therese Bishagara
Head, Kigali Health Institute

Dr. Karita Etienne
Head, National Reto-viral Laboratory

Ms. Judith Cowley
Health Technical Advisor, Save the Children UK

Ms. Mahtilde Kayitesi
Director, PROFEMME

Lieutenant Colonel Frank Rusagara
Secretary General, Ministry of Defense

Brigadier General Kayumba Nyamwasa
Chief of Staff, Rwandan Patriotic Army

Dr. Charles Mulego
Director of Medical Services, Ministry of Defense

Lieutenant Colonel Geoffrey Byegeka
Rwandan Patriotic Army G1

Ms. Julie Uwamwiza
Women In Transition (WIT) Project

U.S. Embassy Community

Mr. Dick Goldman
USAID Mission Director

Mr. Donald Koran
DCM, U.S. Embassy

Mr. Stephen Giddings
USAID Supervisory Program Officer

Mr. Christian Barratt
USAID SO2 Team Leader

Mr. Eric Kagame
USAID Health Specialist

Ms. Patricia Mwanuyera
Administrative Assistant, USAID SO2 Team

Major Richard Skow
Defense Attache, U.S. Embassy

Ms. Ergibe Boyd
Public Affairs Officer, U.S. Embassy

Rwanda - so little can go so far

prevention is the message

empowerment of women

if we fail to support the children, then what

Uganda -
success of
voluntary testing

Meeting w/ Vice President - Rowanda

hear assessment of impact / concerns about future

VP - adds to many other problems - AIDS / poverty / genocide
Combination of tragedies

Start w/ awareness - sensitizing the population - how to help those who are infected

people don't discuss sex - cultural change
need to overcome hostilities

Army has been involved in communicating message - (role of military)

even in Congo trying to get message out - some people there have never been a doctor

Challenges
- few doctors (100)
- testing + counseling
- treatment unaffordable
- trying to change culture

(VP) despite limitations better to fill in gaps and build capacity

- no lack of will to engage in this effort
- more progress will be made

People are coming forward voluntarily to be tested

have started on testing - information
antiviral drugs too expensive
need to do more training for testing

300,000 orphans in orphanages - trying to move into foster homes
many infected
5% of Rwa. go to genocide rally
VP looks after 7 orphans
how to protect future

— Church - powerful
— also to talk about Church
— fast evolution to learn
— in last year people are talking more + more.

USAID RWANDA OVERVIEW

— Optimistic

INFORMATION SHEET
USAID/RWANDA

PROGRAM GOAL: *SUPPORT INCREASED STABILITY AND STRENGTHENED DEVELOPMENT CAPACITY.*

Strategic Objective One: Increased Rule of Law and Transparency in Governance.

The purpose of this strategic objective is to strengthen those institutions that form the foundation of a sound legal and judicial system and to promote national development based on the Rule of Law.

Key Accomplishments since 1994:

- Rwandans issued ethnicity-free identity cards.
- Law for prosecuting genocide crimes developed.
- Number of anglophone lawyers tripled.
- Rwandan public freely discusses issues of public interest on call-in radio talk shows.
- 375 police officers trained in basic police skills and human rights.
- 75% of compromised land cleared of land mines and National Demining Office made technically self-sufficient.
- USAID-developed structures for participatory local government incorporated as law.
- 15,000 elected local government officials trained in project development.

Focus for 1999/2000:

- creating the institutional capacity for more effective administration of justice;
- increasing security of property and persons;
- supporting the establishment and the smooth implementation of the new ***gacaca legislation***;
- building consensus for greater public participation in decision making at the local and national level;
- promoting unity and reconciliation through research and technology application.

Budget Levels:
FY 1999 OYB amounted to **$13.5 million** comprising DA ($2.5m), GLJI ($10m), EDDI ($1m).
FY 2000 planned is for a level of **$2.9 million** comprising DA ($2.4m) and EDDI ($0.5m).

Strategic Objective Two (modified): Increased Integration of Quality Primary Health Care (PHC) and Basic Social Services in Target Regions, with Special Focus on Decreasing the Incidence of Sexually Transmitted Infections (STIs)/HIV/AIDS.

The purpose of this strategic objective is to increase the utilization of quality primary health care (PHC) and basic social services in target regions.

Key Accomplishments since 1994:

- 250,000 returnees provided access to curative and preventive health services.
- Rehabilitated Kigali Health Institute and provided training to students in three disciplines.
- Health Communications Center established with a primary focus on sexually transmitted diseases like HIV/AIDS.
- Prepayment scheme for health services developed in three health districts.

Focus for 1999/2000:

- integrating and improving the planning, management and implementation of STI/HIV services within existing PHC delivery systems in four pilot regions;
- assuring improved quality of health care services through better design and control procedures;
- improving HIV/AIDS prevention through peer education and communication messages to target groups;
- improving financial and administrative management systems for the Ministry of Health (MOH);
- developing and piloting sound health care cost recovery systems to reinforce MOH efforts to deploy qualified health care providers;

- developing the skills and confidence of health workers at all levels through in-service and pre-service training;
- increasing the capacity of local communes to identify and address the needs of the vulnerable populations, especially children.

Budget Levels:
FY 1999 OYB amounted to **$5.9 million** comprising DA ($5.4m) and EDDI ($0.5m).
FY 2000 planned is for a level of **$4.25 million** comprising DA ($3.5m) and EDDI ($0.75m).

Strategic Objective Three: Increased Ability of Rural Families in Target Communities to Improve Household Food Security.

The purpose of this strategic objective is to increase access to agricultural inputs and staple foods for rural families through expanded production, better market access, an improved environment for small scale private enterprise and through increased capacity to monitor and respond to those most affected by food insecurity.

Key Accomplishments since 1994:
- Distributed food to more than 2.8 million beneficiaries including about 50% of the returnees.
- Provided seeds and tools to 100% of vulnerable families in 32 communes affected by war.
- Provided micro credit and small ruminants to women's associations whose combined membership totals more than 200,000.
- Supported research and transfer of agricultural technology.
- Increased agricultural productivity through work with farmer associations.

Focus for 1999/2000:
- increasing the capacity of the Ministry of Agriculture (MOA) to plan and implement sound food security policies and programs;
- creating and enhancing broad-based economic growth through improved internal production-marketing chains;
- increasing the capacity of institutions to develop and disseminate agricultural technologies that can increase profitability;
- improving national human resource capacity to increase household food security.

Budget Levels:
FY 1999 OYB amounted to **$7.4 million** comprising DA ($6.4m), OTI/WIT ($0.5m), EDDI ($0.5m).
FY 2000 planned is for a level of **$7.85 million** comprising DA ($7.1m) and EDDI ($0.75m).

Special Program Objective: *Multilateral Debt Relief Trust Fund*
Purpose: *Assist the Government of Rwanda in reducing its external debt burden through a **$5 million** U.S. Government contribution to the Multilateral Debt Relief Trust Fund. This contribution will support the Government of Rwanda's economic reform program including debt servicing and increased social sector spending.*

Special Emergency Assistance: In FY 1999, USAID's *Office of Foreign Disaster Assistance (OFDA)* allocated **$2.5 million** in emergency food aid for vulnerable populations. *Food for Peace* made available **$10 million** in food assistance in 1998 and 1999.

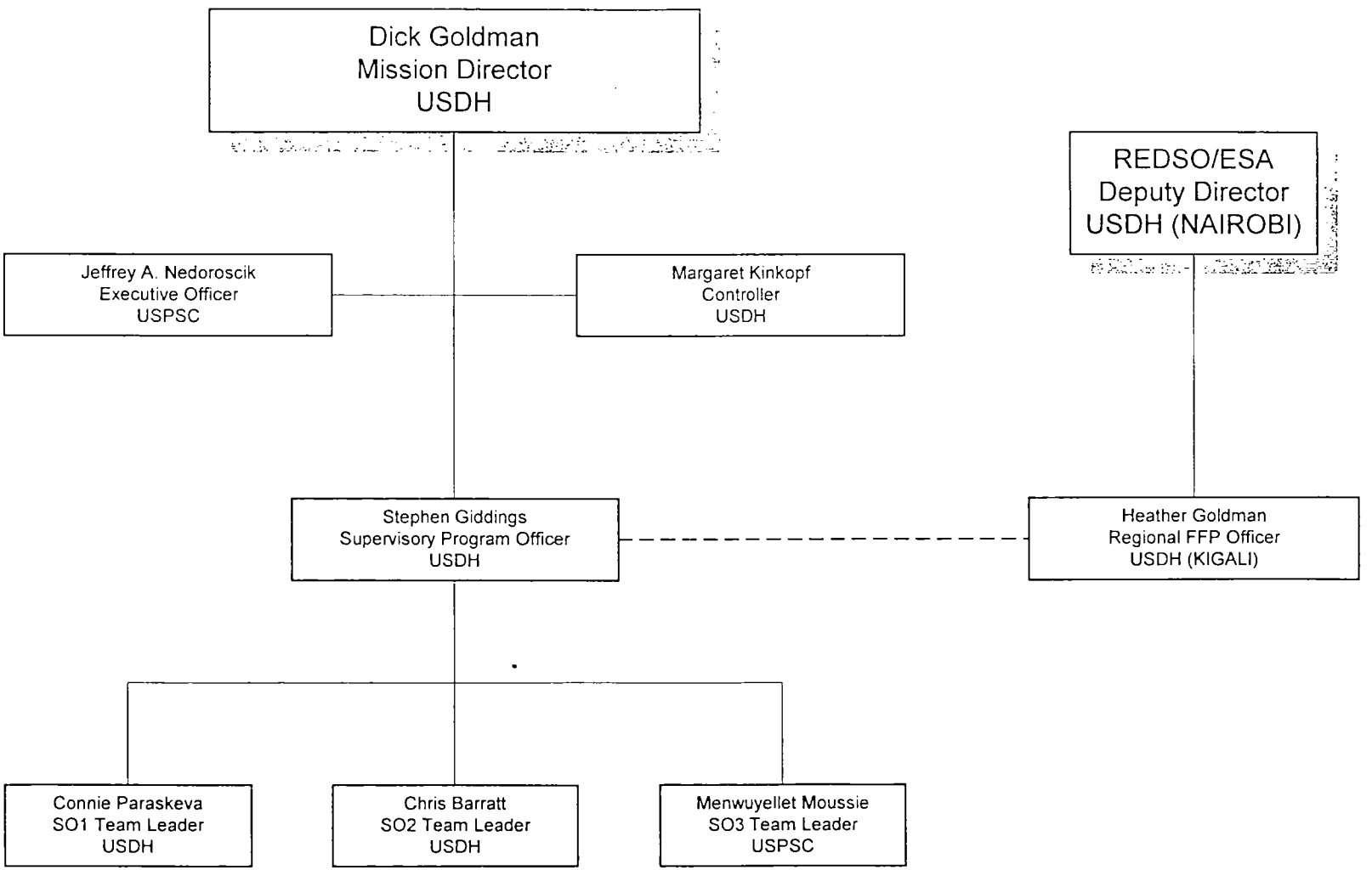
Total FY 1999 USAID Assistance to Rwanda is $34.355 million (excluding Food for Peace). FY 2000 planned assistance is $15 million.

	DA*	ESF	BHR
FY 1999	$16.3m	$15m	$3m
FY 2000	$15m	---	---

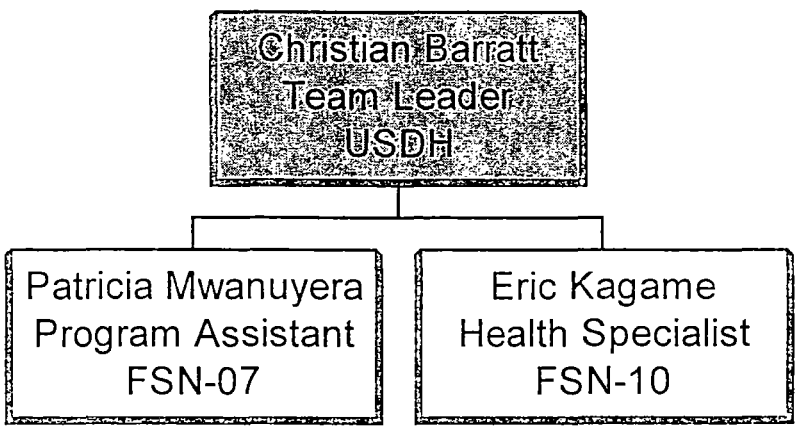
*Includes EDDI

Organization Chart - USAID RWANDA

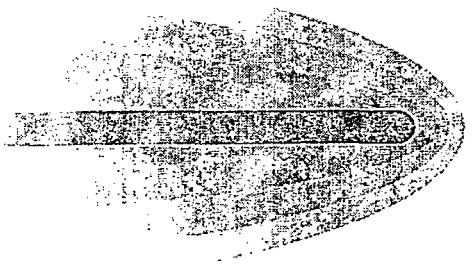
January 4, 2000



Organization Chart - SO2 Team

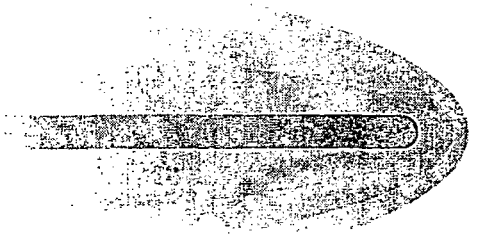


Strategic Objective #2



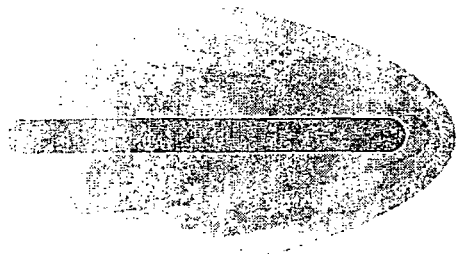
Increased Use of Health and Social Services, and Changed Behaviors Related to STI/HIV, Maternal and Child Health by Building Service Capacity in target Areas

Access



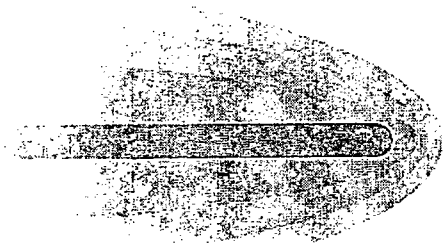
- Increased Availability of Quality Decentralized Primary Health Care (PHC) and STI/HIV Services in Target Areas

Demand



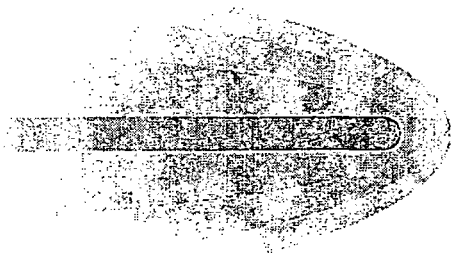
- Improved Knowledge and Perceptions Related to Reproductive Health, Emphasizing STI/HIV, in Target Areas

Sustainability



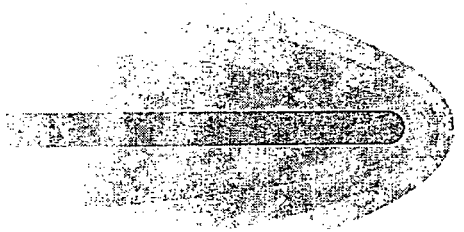
- Enhanced Sustainability of PHC Services through Improved Financial Accountability and Improved Health Care Financing

Social Services



- Increased GOR Ability to provide Basic Social Services

Partners: Access

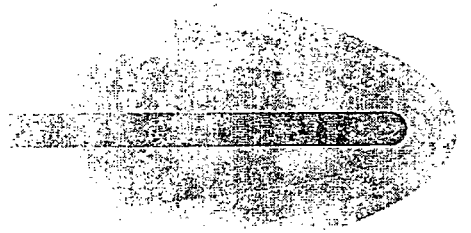


- IMPACT
- Johns Hopkins IEC
- MACRO-DHS
- CDC
- Quality Assurance

Partners: Demand

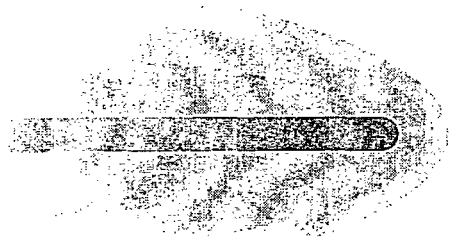
- IMPACT
- Johns Hopkins IEC
- CARE International
- World Relief

Partners: Sustainability



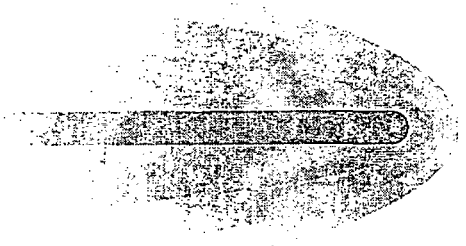
- Partnerships for Health Reform (PHR)

Partners: Social Services



- Tulane University School of Public Health
- Johns Hopkins School of Public Health
- International Rescue Committee (IRC)

MOH Strategic Objectives



Rationalize accessibility

Disease control

Improve management of services

Reinforce community participation