

Protecting Mothers, Saving Children: Integrating Health Solutions in Rwanda

Teresa* is from Rwanda. She has four children, the youngest - a 10 month-old daughter. Teresa, her husband and her children all receive health care services at the Nzangwa Health Center, a health facility supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) through the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF). During her third pregnancy, Teresa and her husband received HIV counseling and testing as part of the antenatal care package of services at Nzangwa. They both tested positive for the virus.

Teresa immediately began antiretroviral treatment (ART) regimen to prevent the virus from being passed to her child. In addition, when her daughters were born, they were given ART for six weeks to protect them from the virus.

In Rwanda, PMTCT services have been integrated into the existing Maternal and Child Health (MCH) services offered by health facilities. During her first antenatal care visit, a new mother and ideally her partner too, receive group counseling on a full spectrum of health information: HIV/AIDS, hygiene, family planning, birth spacing, nutrition, safe delivery care, sexually transmitted infections and gender issues. The couple then receives HIV counseling and testing. If the pregnant woman is HIV-positive, she will receive ART to prevent transmission to her child, and will return after giving birth to test the child for HIV. The integration of PMTCT into other maternal and child health services has resulted in improved and harmonized health service delivery package and reduced multiple clinical visits with significant reduced mother to child transmission rates.

Health facilities like the one in Nzangwa are able to bundle these services together and provide a full range of holistic care services through the support of PEPFAR. This process has led to impressive results. In 2011, PEPFAR facilities in Rwanda provided more than 150,000 women with PMTCT services as well as tested 105,396 male partners of women in PMTCT programs. Now that more women are being tested through PMTCT programs, the health facilities have a greater chance to follow up with the women and encourage them to deliver at the facility. This has resulted in about 90% of the HIV-positive women identified delivering at a health facilities.

Teresa goes to the Nzangwa Health Center for not only for HIV care and treatment, but also to participate in a USG-supported nutrition program, which provides nutrition counseling and food supplementation through CSB (Corn, Soy Blend). As people living with HIV have increased nutritional needs, these services are especially important for HIV positive pregnant and lactating women and HIV exposed infants.

"If I had not come to the health center, my children would have acquired HIV; I believe in the treatment we received as well as in the counseling because that helped a lot too," said Teresa. "Though I feed my baby daughter other complimentary foods," she added, "the CSB is important for keeping her healthy and strong."

Teresa and her husband have made the decision not to have any more children, and will focus on keeping their four children healthy and happy. As a result of the PMTCT services Teresa received during her pregnancies, both children were born HIV-free.

**Not her real name.*



Photo: E. Nikuze, EGPAF Rwanda.

Theresa* and her baby standing in front of the Nzangwa health center garden.