

RWANDA: INNOVATING FOR IMPACT

Unitaid is collaborating with the people of Rwanda to usher in innovations that can transform the country's health care landscape. Unitaid investments are working directly in Rwanda to fight malaria, HIV, cervical cancer and pediatric tuberculosis, and are also operating on a global level to break down barriers between the latest innovations and the people who need them.

I. UNITAID INVESTMENTS IN RWANDA

Investment Area	Issue	Action	Impact
Malaria vector control: Next generation bed nets	Next generation vector control tools are critical for Rwanda, which is at risk of increasing insecticide resistance.	The New Nets project ¹ will pilot new versions of insecticide-treated nets to fight malaria-carrying mosquitoes in various countries including Rwanda.	Accelerating access to next-generation bed nets will support the WHO's malaria goals, which aim by 2030 to reduce malaria cases and deaths by 90 percent.
Malaria vector control: Next generation indoor residual sprays (IRS)		In 2018, over 800k people were protected from malaria using next-generation sprays in Rwanda which was supported by Unitaid's catalytic investment to the NGenIRS project. ²	At scale, next generation sprays could help to avert one-sixth of all malaria cases in Rwanda.
HIV Diagnostics: Point-of-Care (POC) Testing and Early Infant Diag- nosis (EID)	Without early diagnosis and treatment, 30 percent of HIV-infected infants will die before their first birthday, and 50 percent by their second.	Unitaid has made a catalytic investment to introduce point-of-care diagnostics in several countries including Rwanda, to reduce the time taken for infants to receive an HIV diagnosis and care.	Evidence from Rwanda shows that the use of point-of-care diagnostics led to more than 98% of HIV-infected infants being initiated on HIV treatment within 2 days of testing. ³
Cervical Cancer: Optimal screening tests and treatment devices	Cervical cancer is the fourth most common cancer in women. It affects over half a million women each year and kills more than a quarter of a million. Women in low- and middle-income countries are eight times more likely to develop cervical cancer than women in high-income countries.	Cervical cancer can be prevented by effective screening and treatment for pre-cancerous lesions. Unitaid is catalyzing access to cutting-edge screen-and-treat solutions that could eventually be available for less than \$1 per person. Rwanda is among the first countries to take advantage of these innovative solutions.4	It is estimated that over a million women will be screened in Rwanda over the next few years, significantly reducing the burden of cervical cancer for the highest-risk groups, particularly women living with HIV.

^{1.} Jointly funded by Unitaid and The Global Fund - https://unitaid.org/project/the-new-nets-project-in-partnership-with-the-global-fund/#en

^{2.} https://unitaid.org/project/new-insecticides-combat-malaria/#en

^{3.} https://www.pedaids.org/press-release/egpaf-celebrates-point-of-care-early-infant-diagnosis-successes-marks-19-year-partnership-with-rwanda

^{4.} https://unitaid.org/news-blog/rwanda-and-unitaid-to-collaborate-on-health-innovations-including-screen-and-treat-tools-to-prevent-cervical-cancer/#en



UNITAID-SUPPORTED INNOVATIONS MAKING AN IMPACT IN RWANDA

Investment Area	Issue	Action	Impact
Child-friendly tuberculosis medicines	Previously, there were no child TB medicines that met WHO guidelines.	Unitaid's investment into the STEP-TB project accelerated access to child-friendly TB medicines that taste good, come in the proper doses, and simplify treatment for children and those who care for them. Two child-friendly TB medicines are now WHO prequalified.	In 2018, Rwanda began procuring the child-friendly TB medicines, which are now widely avail- able across the country. Globally, more than a million treatment courses of the new child-friendly medicines have been procured across 93 countries.5
HIV Self-Testing	To find those living with HIV who are undiagnosed —most often men, adolescents and other high-risk groups —we must circumvent common barriers to HIV testing, such as stigma, discrimination and a lack of access to diagnostic services. Self-test kits offer a means to inform millions of people of their HIV status. The kits use an oral swab or blood collected from a finger pinprick to provide a fast diagnosis within 20 minutes. The tests can be done at home, enabling people to learn their HIV status in private.	Unitaid has played a lead role in demonstrating that HIV self-testing can be used accurately, is widely accepted and can reach high-risk populations cost-effectively. ⁶ Rwanda has included HIV self-testing in its national guidelines and is one of the 10 countries in the WHO AFRO region where self-testing is authorized for use, sale and distribution.	At scale, self-testing can play a key role in closing the HIV status gap. Based on current procurement projections, self-testing can help close the global status gap by onethird.
Optimal HIV treatment - Dolute- gravir	Without antiretroviral therapy (ART), people living with HIV risk rapid progression to death. New HIV treatments - such as Dolutegravir - work faster, are less toxic, are less prone to drug resistance, and are less expensive than other options available.	Unitaid is making catalytic invest- ments to accelerate access to new, optimal HIV treatments. ⁷ Rwanda has recommended Dolutegravir-based regimens as part of its National HIV guidelines.	Dolutegravir-based regimens are widely now available for only US \$75 per person, per year- unlocking access to improved treatment for millions of people living with HIV.

^{5.} https://www.tballiance.org/child-friendly-medicines 6. https://unitaid.org/assets/Impact-story-HIV-Self-Testing.pdf 7. https://unitaid.org/assets/impact-story_dolutegravir.pdf