



DEVELOPING HEALTH INFRASTRUCTURE

FACT SHEET



New health center in Ngeruka



New health center in Gashora

Overview

The Access Project improves the health of poor communities and health infrastructure by applying a business management approach to public health systems and increasing access to life-saving drugs and quality care. Since 2006, the Access Project has focused on improving care at the health center level – where 85% of all medical consultations in Rwanda take place. In addition to implementing improved management systems at 79 health centers in six districts, the Access Project works to ensure that every health center has clean water, electricity, and the other critical infrastructure needed to provide quality health services. Where infrastructure does not exist or is too dilapidated to be rehabilitated, the Access Project partners with the NGO Rwanda Works to mobilize support for health center construction.

The Need for Health Infrastructure in Rwanda

In the six years that the Access Project has been working in Rwanda, it has become apparent that piece-meal programs targeting single diseases or part-time, temporary, mobile health care do not adequately serve a community over the long term. To significantly improve health outcomes, a community must be given access to a permanent health center which offers a full range of services, including HIV prevention and treatment programs, tuberculosis treatment, prenatal care, family planning and maternity care. The Rwanda Ministry of Health (MOH) has determined that one health center per administrative sector (15,000-20,000 people) is required to adequately serve the population.

In the six districts where the Access Project works, there are currently over 300,000 people living in sectors without a health center. These men, women, and children are among the poorest in the country and are least able to travel the six or more hours on foot required to access care in a neighboring sector. As a result, many of Rwanda's most vulnerable people have no preventive or curative care. Without regular access to quality health care, illnesses progress, contagion spreads, babies are born in unsanitary conditions without skilled birth attendees and maternal

and child mortality rates rise. In addition to being devastated by endemic illnesses, these communities have limited to no opportunities to increase their productivity and pull themselves out of deep poverty.

Breaking the Illness-Poverty Cycle: Constructing New Health Centers

To break the cycle of illness and poverty currently affecting many Rwandan communities, the Access Project is working to develop 17 new health centers in six districts. With funding from Rwanda Works and donors such as Columbia University and the Schmidt Family Foundation, the Access Project partners with district government entities to ensure that new health centers are constructed on time, funds are deployed efficiently, and centers are designed to optimally serve communities' current and future needs. Two new health centers were recently built in Gashora and Ngeruka, sectors located in the impoverished district of Bugesera, a region that was particularly devastated by the 1994 genocide. The Access Project is currently concentrating its health center construction efforts in Bugesera District and will expand its efforts to the other five districts in which it works as resources become available.



Solar energy at Bisate Health Center

Incubators and other machines in Nyamata Hospital

Resources Required

The construction of a new health center in Rwanda requires investments from the local community in the forms of donated land and manual labor, investment from the Rwanda government, which deploys adequately trained staff and funding for operating costs, and investment from local and international donors with the means to purchase construction materials and pay for the designing of the health center and other skilled labor. The construction of a health center serving a Rwandan sector, home to 15,000-20,000 people, requires between \$500,000 and \$700,000. As of early 2009, the Access Project and Rwanda Works had secured close to \$2,000,000 in contributions from the Schmidt Family Foundation, the Garth Brooks Teammates for Kids Foundation, Harold Simmons, and others. These funds will ensure that by the end of 2010 over 50,000 people in three sectors will have access to care for the prevention and treatment of devastating illnesses such as HIV and AIDS, tuberculosis and malaria, as well as access to other health services that they deserve.

For more information please visit www.theaccessproject.com or contact us directly.

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