## 2018 Rwanda

## First assessment of injection drug use practices and associated HIV risks in Kigali, Rwanda

Led by Dr. David Riedel

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## **Project Summary**

Injection drug use (IDU) was one of the earliest risk factors identified for acquisition of HIV infection, and it remains an important risk in the United States, Eastern Europe (e.g., Russia), and some South Asian countries (e.g., Thailand). However, IDU is much less frequently recognized in sub-Saharan Africa, yet the true scope of this high-risk behavior is not widely known. There is currently no data about IDU in Rwanda.

Our project began with the students conducting a complete review of the literature of IDU in sub-Saharan Africa and its potential association with HIV infection. We then partnered with a team of Rwandan medical students to develop a directed survey to ascertain the prevalence and associated behaviors for injection drug use. In collaboration with the Rwandan students, we wrote a study protocol and then obtained approval from the Rwanda National Ethics Board and UMB IRB for the study.

At the end of July 2018, we all traveled to Rwanda, where we carried out the program. First, we met the Rwandan students and collaborators at the Rwanda Biomedical Center. Over the subsequent few days, we reviewed the survey and entered it onto PDA devices. We then traveled to Biryogo Health Center in Kigali, where we met the hospital staff and explained the activity. Over the next two weeks, we worked with hospital staff and community leaders to recruit and interview people who used drugs. Several were excluded from the survey because they never injected. We also built a database and entered all of the data from the survey. We are currently working with partners in RBC to analyze the data.

This project was designed around an interprofessional and cross-cultural student collaboration to assess an important social/behavioral risk for HIV acquisition. Since there is very little work in the space of IDU in sub-Saharan Africa, it required heightened sensitivity among the students to work within the medical/social/behavioral context in a foreign country. Addressing people who inject drugs requires multidisciplinary collaboration across various professions, including medical, nursing, social, pharmacologic, and legal. Such a program required the expertise of numerous professionals,

including physicians, nurses, social workers, pharmacists, lawyers, and health policy decision-makers. The prevailing work environment in Rwanda involves professionals from all fields collaborating to improve the health-related outcomes of all patients. Students had a significant opportunity to meet with these other professionals at the research site to discuss similarities and differences in practice across disciplines.

## Reflections

"Conducting injection drug use research in Rwanda has been an illuminating opportunity. I'm happy to have experienced both the joys that graciously come with global health and the often-unexpected challenges that are also associated with such work. I'm grateful to have learned from Dr. Riedel and his years of experience in a system that operates differently than our own in the United States. It puts into perspective what realistic expectations I should set on an international stage in my own future career as a physician and, more importantly, as a humanitarian. Thank you, UMB Center for Global Education Initiatives, for an unforgettable journey!" - Kayli Workman