

Dear readers,

It is my pleasure to present Volume 7, Issue 2 of the Rwanda Public Health Bulletin (RPHB), a publication that reflects Rwanda's continued commitment to generating, sharing, and applying high-quality evidence to improve population health and strengthen our health system.

The articles featured in this issue are united by the theme "*Advancing Equitable, Evidence-Informed and People-Centred Healthcare*." Together, they address important public health priorities across the continuum of care, including retention of women in HIV treatment, childhood immunization, early intervention services for children with developmental delays, and the sociocultural dimensions of palliative care. Although these studies address different populations and health challenges, they share a common message: achieving better health outcomes requires health services that are accessible, responsive, equitable, data-driven, and centred on the needs of individuals, families, and communities.

This issue also demonstrates the growing importance of innovation and the effective use of routine health data. The policy brief on predicting loss to follow-up among women receiving HIV care illustrates how machine learning and predictive analytics can support earlier identification of individuals at risk of disengagement and enable more targeted interventions. At the same time, the research on measles vaccination highlights the continuing importance of addressing practical barriers such as distance, transport costs, waiting times, caregiver knowledge, and vaccine availability.

The findings on early intervention services for children with developmental delays remind us that strong health systems depend not only on infrastructure and technology, but also on capable healthcare professionals, effective referral pathways, multidisciplinary collaboration, and meaningful engagement with families. Similarly, the evidence on palliative care reinforces the importance of understanding and responding to the cultural and social contexts that shape healthcare experiences and access to services.

These contributions are particularly relevant as Rwanda continues to advance universal health coverage, strengthen primary healthcare, embrace digital transformation, and promote the use of evidence in policy and practice. Research achieves its greatest value when its findings move beyond publication to inform decisions, improve programmes, guide resource allocation, and ultimately contribute to better health outcomes.

I commend the authors for their valuable contributions and acknowledge the reviewers, editors, and editorial team whose dedication and scientific rigour have made this issue possible. I also extend my appreciation to our national and international partners for their continued collaboration in strengthening Rwanda's public health research and knowledge ecosystem.

I encourage readers to engage critically with the evidence presented in this issue and, most importantly, to consider how these findings can be translated into practical action. By connecting research with policy and implementation, we can continue to build a resilient, innovative, equitable, and people-centred health system that leaves no one behind.

The seal of the Rwanda Biomedical Center is a circular emblem. It features a central shield with a sun, a mountain, and a river. The shield is flanked by two olive branches. The text "RWANDA BIOMEDICAL CENTER" is written around the perimeter of the circle.

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