In collaboration with the National Rehabilitation Service (NRS) with support from GIZ, HDI organised a 3-day workshop and a 1-day high level meeting with key stakeholders involved in national drug responses with the aim of equipping them with knowledge and skills on Harm Reduction Programming. Participants included representatives from the Ministry of Health, Rwanda National Police, Rwanda Investigation Bureau, Rwanda Correctional Service, NRS and CSOs. During the workshop, HDI invited Mrs Helgar Musyoki from National AIDS and STIs Control Program (NASCOP) under the Ministry of Health/Kenya and Sylvia Ayon from Kenya AIDS NGOs Consortium (KANCO) to share the Kenya experience on harm reduction interventions. Helgar Musyoki made a presentation on “Regional and Kenya Experience in HIV Prevention through Harm Reduction”. She explained that harm reduction is recognized under the East African Community (EAC) Regional Policy on Alcohol, drugs and Substance Abuse adopted in 2019. This means that all members of the EAC have the obligation to implement the policy. Participants manifested eagerness to learn more about these interventions and recommended to continue the consultation as well as carry out research to understand more on the magnitude of drug use and the health associated risks such as HIV/AIDS and Hepatitis C. HDI plans to continue this conversation and advocate for initiation of harm reduction interventions in Rwanda.
In the first week of November, HDI held a learning visit to Kenya on harm reduction programming. Some of the public/private institutions that were visited include National Authority Campaign Against Drugs and Alcohol (NACADA), NASCOP, Medecins du Monde (MDM), Kenya Red Cross Society (KRCS), KANCO, Ngara Methadone Clinic (MAT Clinic), ISHTAR MSM, KARURI Hospital MAT clinic, LVCT Health Prevention center, and Mathari National Teaching and Referral Hospital. All these entities are working with communities to provide the comprehensive package of health services recommended by the World Health Organization for HIV prevention, treatment and care for PWUDs/PWIDs. These services include but not limited to Needle syringe programmes (NSP), opioid substitution therapy, HIV testing and counselling, condom programming, HIV care and support, behavioural interventions, prevention and management of viral hepatitis, TB and mental health conditions, SRHR interventions, provision of naloxone and training on overdose prevention for the PWIDs. Our team has gathered a lot of learning like the accessibility of methadone to PWID and group therapy sessions, which will help HDI to improve the programming for PWUDs/PWIDs. We hope to continue this partnership in order to strengthen the communities and respective institutions.
Strengthening the Role of CSOs in the Prevention of Teenage Pregnancy in Rwanda

October 15th

HDI organized several consultative meetings with CSOs working on SRHR, including a meeting which addressed the issues of increasing teenage pregnancy rates and the unmet need for contraception. The purpose of the meeting was to raise awareness of CSOs on teenage pregnancy strategies and increase their participation in the fight against teenage pregnancy. Among different strategies shared concerning prevention of teenage pregnancy, included men engagement in promotion of FP, dissemination of SRHR information and creating spaces to adolescents to express themselves freely on SRHR related topics and access to services. As a way forward, the CSOs committed to conduct evidence-based advocacy, involve young people in decision making process and train healthcare providers on laws and policies around SRHR to be able to provide friendly stigma free services.
Inter-Universities Debate on Access to Contraceptives for Adolescents

October 24th-25th

HDI has found debate to be one of the tools that encourages active participation and increased critical thinking in addressing key sexual and reproductive health issues affecting the youth. It is in this regard that HDI organized an inter-university debate competition which was started in May and ended in October. The competition attracted students from 10 universities in Rwanda debating on topics that aim at raising awareness and promoting access to contraceptives among adolescents as a response to prevention of teenage pregnancies. The winners were UR Huye Campus, UR Remera and Ines Ruhengeri. One of the debaters highlighted that sexual health education is being implemented, but there's still lack of access to contraceptives among young people. This year’s competition demonstrated students' increased knowledge, use of evidence and better understanding of strategies to prevent teenage pregnancy.
Amplifying Adolescents' Voices in the National Response Against Teenage Pregnancy

October 30th-31st

Despite the impressive progress of the Government of Rwanda to protect and fulfil the right to health, there are still legal provisions related to SRHR that constitute a barrier for adolescents’ access to SRHR services. For instance, article 11 of the medical professional liability insurance law, stipulates that health professionals must obtain prior consent from parents, or guardians before providing healthcare to minors or disabled people. It is in this regard that HDI organized a national conference which gathered in and out of school adolescents, teen mothers and teen fathers, parents and school representatives, decision and policy makers, to provide a space for adolescents and young people to share their views and foster their meaningful engagement in the ongoing advocacy efforts for the removal of barriers to access SRHR services. Several peers suggested that parents should be open about sexuality and reproductive health. Adolescents also affirmed that contraceptives are key to preventing unintended pregnancies and recommended that they are given access to contraceptives of their choice as one of the options. Teen mothers shared their experience during the meeting.
Testimonies from teenage mothers

October 30th-31st

I conceived and gave birth to a child 2 years ago when I was 15 years old. At that time, I had a friend who told me that she regularly slept with her boyfriend but never got pregnant. She introduced me to a man and when I had sex at 14 I became pregnant. When I asked my friend why this happened to me, she said I was stupid to have unprotected sex, as she was using contraceptives. I had vaguely heard about contraceptives but was afraid to discuss it with my parents, who might think that I had become a prostitute.

I first became pregnant when I was 13 years old, with a 20-year-old young man who worked as the house boy. He disappeared as he was afraid of being prosecuted. I had no support from anyone since my parents have rejected me. I succumbed to sexual favours for other men to survive, as I was homeless with no support at all. Two years later I became pregnant again, this time with a 30-year-old man. I was still young and had no knowledge about contraceptives. Now, I am empowered with knowledge especially after the training from HDI and cannot go wrong.
HDI has been implementing the project “Empower, Include, and Respect: Making Human Rights work for LGBT and Sex Workers Communities in Rwanda” since January 2018. The project is aimed at protecting LGBT persons & sex workers’ rights in Rwanda, and promote actions of non-discrimination through a rights-based approach. HDI with implementing partners conducted a mid-term evaluation workshop to assess implementation progress, identify challenges and propose the way forward to achieve the expected outcomes. Among the lessons learnt is that adopting a human rights approach has positively influenced interactions between duty bearers & right holders, and self-help group meetings have become a safe space for exchange on common issues and ways to address them; however we encountered some challenges such as lack of evidence to denounce rights violations. These communities have undergone training on drafting petitions, policy briefs, grant proposal writing, public speaking and advocacy strategies and human rights monitoring and documentation of human rights violations. The training has further helped them to increase knowledge on how to document cases of discrimination against LGBT and sex workers.
HDI in collaboration with Young Women Mentors Network (YWMNET) organized outreach campaigns in 8 universities in Kigali to raise awareness on family planning and HIV prevention. Activities included voluntary HIV testing, information on family planning services and self-testing demonstration, as well as discussions on HIV/AIDS linkage to services. HDI engaged with more than 3000 people with information, distribution of more than 600 condoms and Information Education and Communications (IEC) materials. In total, 535 students from Adventist University Central Africa (AUCA) Masoro campus, Integrated Polytechnic Regional Centre (IPRC) Kicukiro, University of Tourism and Business (UTB), AUCA Gishushu 42 students were tested, Kigali Independent University (ULK) Gisozi, University of Kigali, University of Rwanda –College of Science and Technologys were tested. Together, we can stop the spread of HIV!
Enabling Women Empowerment towards Ending HIV Epidemic

November

In partnership with Sister Love Inc., HDI hosted the Women Now Summit prior to ICASA conference aimed at exchanging information emerging from research on women and girls’ vulnerability to HIV, GBV and SRHR abuse. The summit was officially opened by The UNFPA Executive Director Dr. Natalia Kanem and Minister of State in Charge of Public Health and Primary Health Care Dr. Patrick Ndimubanzi. It was an opportunity for women and girls to strategize and build a collective movement on the intersections of HIV, GBV and sexual and reproductive well-being. To mark the event, 20 women living with HIV were recognized for their outstanding efforts towards eradicating HIV/AIDS. The executive Director of UNFPA Dr. Natalia Kanem received a Pandora Singleton Ally Award that is given to a non-positive activist, for her dedicated service for the past 20 years in HIV advocacy work. This conference raised several calls to action, these include among others: To respond to the increasing rate of teenage pregnancy, to avail health services including condoms & contraceptives for young people, to diversify SRHR information to suit all age groups of women and enable access to HIV and SRHR services that are not limited to the legal maturity age.
The 20th International Conference on AIDS and STIs (ICASA) was held in Kigali from 2nd-7th December 2019 with more than 10,000 delegates. The conference’s theme was “AIDS Free Africa: Innovation, Community and Leadership”. It was an opportunity for communities to develop strategies for advancing collective efforts to end AIDS by 2030. HDI was part of the steering committee and supported 31 key populations, young people and other civil society organizations to attend the conference. Its presence and visibility at the Community Village was important, as it helped showcase the advocacy work done in towards access to SRHR associated stigma and discrimination against key populations, and other human rights advocacy initiatives so far done. HDI received approximately 2000 visitors and distributed over 10,000 self-test kits, lubricants and condoms.
HDI was excited to present its research findings on (1) Substance use, HIV, and depression among key populations: Experience from a mixed cross-sectional study in the City of Kigali, Rwanda, (2) Advocating for the decriminalization of sex work in Rwanda: sharing lessons learned in the penal code review process, (3) The burden of stigma and discriminatory practices towards key populations by health-care-providers in Rwanda, and (4) Criminalizing homosexuality: Threat to HIV services among men who have sex with men in Africa. HDI also held different informative sessions at the conference.
Celebrating Media Participation in Advancing Sexual and Reproductive Health and Rights

December 20th

HDI envisions a country of people with clear knowledge of their reproductive health and rights, and believes that media is one of the key tools that can help raise more awareness about SRHR. It is in this regard that HDI, in partnership with Rwanda Media Commission (RMC), organized the 4th edition of the Annual Reproductive Health Journalism Award under the theme “Enhancing media participation in advancing sexual and reproductive health and rights in Rwanda”. The 4th edition received over 170 submissions from 105 journalists from 48 media houses including print & online, radio and TV. The awards attracted different participants including accredited journalists working in Rwanda, development partners, government institutions and reproductive health sector actors. HDI awarded 6 journalists, 2 from each category, who forthrightly wrote on one of the seven key areas in sexual reproductive health and rights; Family planning, maternal & new born health, safe abortion, HIV/AIDS and other STIs, teenage pregnancy, gender-based violence, sexual health & education.
**Dissemination meeting on Concluding Recommendations by the African Committee of Experts on the Rights and Welfare of the Child (ACERWC)**

**December 24th**

In collaboration with the Ministry of Justice and National Child Commission (NCC), HDI organized a dissemination meeting to raise awareness with stakeholders involved in the protection and promotion of the rights of the child. This meeting was an opportunity to jointly reflect on synergies between the government and CSOs in the implementation of the concluding recommendations from the ACERWC. Among other recommendations to be implemented, there is increasing access of sexual reproductive health services to adolescent girls to prevent teenage pregnancy and creating a conducive environment for CSOs to improve the health of the children. Participants were of the view that adolescents still face a number of barriers when trying to access SRHR services and this puts them at risk of unwanted pregnancies and HIV infections. Both government and CSOs agreed to join efforts in the implementation and evaluation of these recommendations.
Enhancing the role of stakeholders in the Prevention of gender based violence

December 31st

HDI held a values clarification workshop with 30 participants that included: healthcare providers, GBV officers and National Women Council (NWC) from 8 Districts of Rwanda. This workshop served as an opportunity to share knowledge and experience on gender based violence against women. It was reported that when the perpetrators have an influence over the victims or have a relationship with the victims, there is a tendency of not reporting. In other cases, victims do not report because of the advantages promised by the perpetrators to help them. Some of the challenges identified that contribute to the increase of women’s violence, include social stigma and lack of a supportive environment in which they can report acts of violence committed against them. Healthcare providers were dedicated to addressing violence against women through provision of comprehensive health services.
Consultative Meeting with Local Leaders on HIV Prevention among Key Populations

December 31st

During this quarter, HDI conducted 3 consultative meetings with local authorities and key population peer educators to discuss on the National Strategic Plan (NSP) interventions towards the reduction of new HIV infections among key populations and MSM peer educators. In addition, the meeting was an opportunity to raise awareness on the rights of children born to FSWs, share the outcomes from the implementation of the projects, as well as reinforce collaboration among different stakeholders. The NSP interventions highlight the importance of leaving no one behind which will contribute to the 2030’s agenda “AIDS free Africa”. Despite the progress made in the fight against HIV at country level, there’s still a gap in reaching transgender and people who inject drugs with inclusive healthcare services.
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- Ministry of Gender and Family Promotion
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- Rwanda Education Board
- Rwanda Governance Board
- Imbuto Foundation
- GLIHD
- IMRO
- RNGOF
- RSOG
- RBP partners
- Women’s Link WorldWide
- Global Giving
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