



HDI

HEALTH DEVELOPMENT INITIATIVE
Striving for a healthy society

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2011 ANNUAL REPORT





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HEALTH DEVELOPMENT INITIATIVE

Striving for a healthy society

Message from the Executive Director

Health Development Initiative has made some major advancements in the past year. We have taken great strides in the realm of projects to increase community health among vulnerable groups in Rwanda as well as advocating for disadvantaged communities.

In 2011 we expanded our Family and Community Health program to six projects which focused on stopping the spread of preventable diseases, such as TB, HIV/AIDS and other STDs. Additionally, we continued to manage the Community of Potters Health and Development project to bring sustainable development to Bwiza Village.

We also continued to host international doctors in Rwanda in order to teach our local health care providers how to treat specific conditions and assist in treating patients themselves. In fact, in 2011, we hosted two delegations of doctors, one which assisted in mass circumcisions and another which consisted of plastic surgeons who held workshops for Rwandan doctors.

Finally, our advocacy program also grew significantly in 2011. We launched three new advocacy campaigns, one to decriminalize abortion, another to allow condoms in secondary schools and a third to educate people on Patient's Rights. HDI has become a key proponent of the above initiatives and plans to continue our advocacy in these areas into 2012. We have also continued to be a key force in the fight against GBV and for LGBTI rights in Rwanda.

HDI is also expanding its reach, partnering with organizations we have not previously worked with. For example, in 2011 we conducted our first research project to find out if condoms should be allowed in secondary schools in Rwanda. To do this, we partnered with the Institute of Policy Research-Rwanda who helped to train our staff about proper research techniques. HDI formed a coalition with Rwanda NGO Forum on AIDS and Health Promotion and AIMR Ihorere Munyarwanda in order to effectively advocate for the allowance of condoms in secondary schools as well. Additionally, our staff attended several IREX training workshops to help improve our organization's advocacy capacity and give us additional tools to apply to our activities.

Therefore, 2011 was a year of expanding and diversifying our activities in all three of HDI's program areas: Family and Community Health, Technical and Medical Support and Advocacy and Policy Monitoring. We also worked hard to form new alliances and partnerships and expand the reach of our organization. This progress will help propel HDI into 2012 strong and ready to take on more challenges.

I would like to take the opportunity to thank our 2011 funders, including Global Fund, UNAIDS, WHO, UN WOMEN, Pygmy Survival Alliance, IREX, IPAS, UHAI and Rwanda Governance Advisory Council. Your support has contributed to the health and well being of vulnerable groups in Rwanda and is great appreciated by HDI.

The following annual report will review the key projects HDI conducted in 2011 in more detail.

Regards,

Aflodis Kagaba, M.D, MS
Co-Founder and Executive Director
Health Development initiative

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HDI

HEALTH DEVELOPMENT INITIATIVE

Striving for a healthy society

WHO WE ARE

Health Development Initiative-Rwanda (HDI) is an independent, non-governmental, non-profit organization based in Kigali and registered with the Rwandan government. We strive to improve both the quality and accessibility of health care for all Rwandans through advocacy, education, and training. HDI was founded in 2005 by a dedicated group of Rwandan physicians working in health facilities and communities across the country. This diverse group of health professionals was united by a shared commitment to improve the health of disadvantaged communities within and outside of the health care system. Today, HDI brings together a team with vast experience in medicine, public health, and community development to bridge the gap between communities and the health care system.



VISION

A healthy society in which medical care is accessible to all communities regardless of socioeconomic level; in which women and their families are educated and informed about reproductive health, family planning, and newborn care; and in which preventable disease no longer threatens lives.

MISSION

To organize and promote community-based health care development in Rwanda. We work to build sustainable alliances between the community and professional health care providers, as well as to empower providers to better educate and serve their communities. Through education and improved health care capacity at different levels, we seek to bridge the inequalities in health care in our country.

OBJECTIVES

1) To build the capacity of Rwandan communities and institutions to provide better health services to all segments of Rwandan society. This includes advocating for the right to affordable health care services for all.

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WHERE WE WORK

Headquarters: Kigali, Rwanda

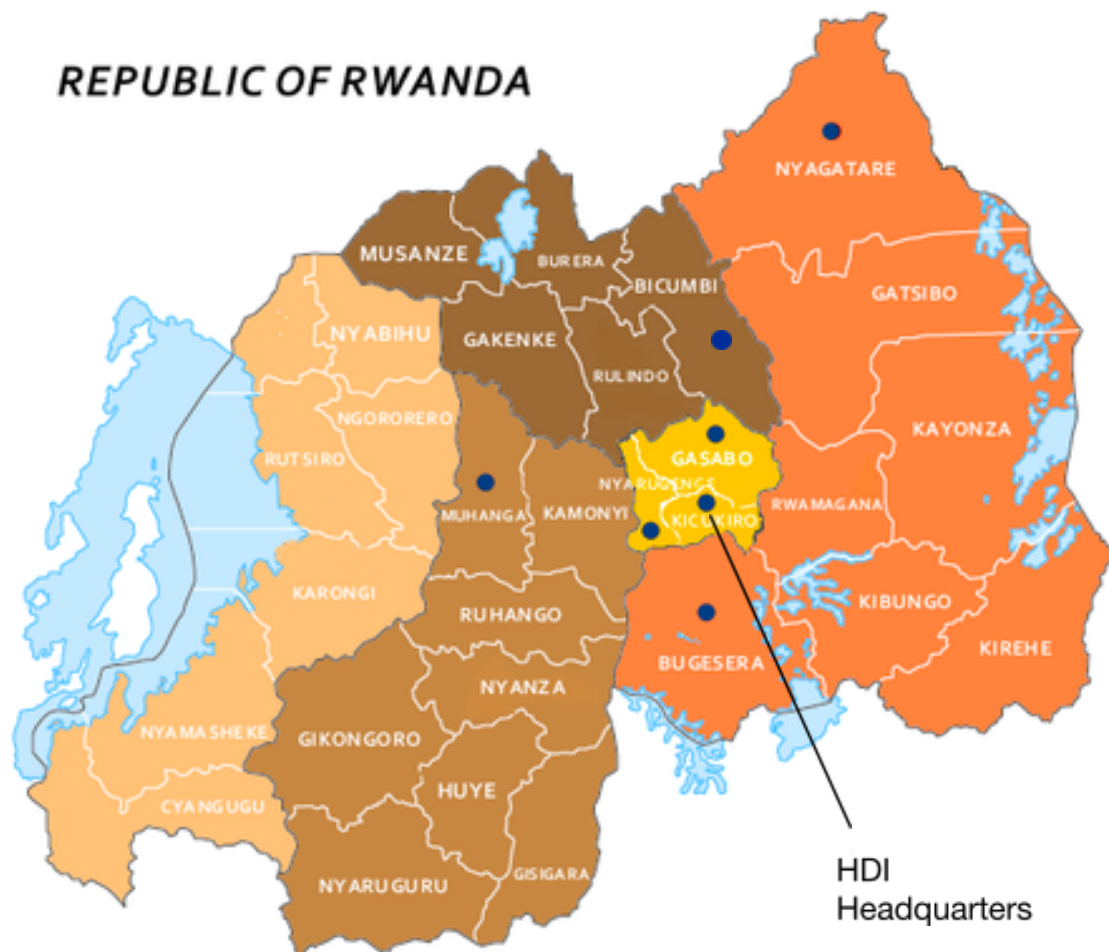
HDI-Rwanda works in three provinces and seven districts:

Eastern Province (*Nyagatare, Bugesera Districts*)

Southern Province (*Muhanga District*)

Northern Province (*Gicumbi District*),

Kigali City (*Gasabo, Kicukiro, Nyagatare Districts*)





HDI Programs

We believe health outcomes can be improved through parallel development of the community and the medical profession's capacity to support prevention, care and treatment of disease and illness. Therefore, we support community and health systems strengthening through our three program areas: Family and Community Health; Medical and Technical Support; and Advocacy and Policy Monitoring.

Family and Community Health

Our Family and Community Health program provides support and health education to individuals, communities, and community health workers in a bid to increase prevention and treatment of disease and illness. We believe the dissemination of information goes beyond individuals and has the power to mobilize whole communities to achieve greater health. We target women, youth, children, and vulnerable groups.

In 2011 we focused on promoting community health education by linking health professionals with community groups and leaders, and empowering individuals to prevent disease and promote health-seeking behaviors. Our projects, therefore, aimed to educate and empower people on how to prevent HIV/AIDS and TB Co-infection, supported income generating activities for cooperatives of people living with HIV and Rwanda's vulnerable communities, educated youth on their sexual health, and ensured women/girls who are subject to Gender Based Violence get the appropriate care and HIV/AIDS prevention services.

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Medical and Technical Assistance

Our Medical and Technical Assistance program aims to foster long-term collaboration between the international and Rwandan medical community. The medical missions we organize provide lifesaving treatments and surgeries not otherwise available to patients in Rwanda's health facilities.

Visiting medical specialists in the fields of cardiology, obstetrics and gynecology, orthopedics, and plastic surgery work alongside their Rwandan counterparts to treat patients while also providing mentorship. In 2011 we hosted two groups of international doctors who provided medical and technical assistance to local Rwandan doctors and treated patients.

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Advocacy and Policy Monitoring

Our Advocacy and Policy Monitoring Program aims to promote health and human rights for all Rwandans. We work with district authorities, schools, government institutions and other organizations to promote both small and large -scale policy change.

In 2011 our projects focused on promoting the sexual and reproductive health and rights of secondary school youth to have access to condoms, advocated for the decriminalization of abortion, promoted the rights of LGBTIs and launched a campaign to educate the public about patients' rights.

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Family and Community Health Program



HDI staff (Janet), discussing sexual and reproductive health with secondary school students.

2011 Projects

- Sexual Health and Reproductive Education (SHARE)
 - HIV Prevention and Impact Mitigation Among Communities in Gicumbi District
 - Preventing TB & HIV Co-infection
 - Strengthening the Capacity of Local Government to Promote TB/HIV Education
 - Responding to Gender Based Violence
 - Community of Potters Health and Development (COPHAD)
- Sexual Health and Reproductive Education (SHARE)
 - HIV Prevention and Impact Mitigation Among Communities in Gicumbi District
 - Preventing TB & HIV Co-infection
 - Strengthening the Capacity of Local Government to Promote TB/HIV Education
 - Responding to Gender Based Violence
 - Community of Potters Health and Development (COPHAD)

Sexual Health and Reproductive Education (SHARE)

HDI's Sexual Health and Reproductive Education (SHARE) is conducted throughout secondary schools in Kigali City. As a project of HDI's Family and Community Health Program, it provides sexual health and reproductive education and training for secondary school students. Topics discussed include HIV/AIDS transmission, STIs, pregnancy, how to promote sexual health, how to access and use a condom, and alternative forms of protection. Our facilitators are trained youth peer educators on sexual and reproductive health. Additionally, we release a monthly newsletter, called Open Talk, which responds to secondary school youth's questions regarding their sexual health and rights.

SHARE Facilitator Training

In August 2011 HDI hosted several volunteers from Sexpression (UK) for a seven day training in Kigali to inaugurate the new SHARE peer-led sex and relationships education programme. 38 peer educators were trained. This served as a pilot study to train young people from secondary schools in three central districts of the county with the intention to scale-up this project to reach all of Rwanda in the future.



Sexpression trainers in a workshop with Rwandan youth at HDI.



Peer facilitator leading a discussion on condoms in schools.

Secondary School Visits

We visited over 15 secondary schools around Kigali in 2011, where we discussed why it is important to use a condom, whether or not condoms should be available in secondary schools and debated whether or not promoting abstinence was a better way to stop the spread of HIV/AIDS and other STDs than condom promotion.

The students were asked questions about sex, and given the opportunity to respond and give their opinion. Some role playing exercises were also performed. At the end, students were given the opportunity to write questions related to their sexual health which would be answered in HDI's Open Talk newsletter.

PROJECT RECOMMENDATIONS

- Increase at-school availability of condoms at little or no cost to students.
- Implement teacher and parent sensitization to the benefits of youth participation in condom usage.
- Support and encourage school-based anti-AIDS clubs.



HIV Prevention and Impact Mitigation Among Communities in Gicumbi District *Funded by Global Fund*

We received funds from Global Fund in 2011 to sustain created cooperatives among HIV+ individuals, conduct training, and implement a door to door sensitization campaign with Community Health Workers (CHWs) on family planning, male circumcision, EMTCT and other infectious diseases in Gicumbi District.

Key Strategies

Integrate communication on Male Circumcision and Family Planning into broader HIV community sensitization.

Involve community leaders and community health workers to create local ownership and sustainability of campaign to promote Male Circumcision and Family Planning.

Improve economic opportunities for People Living with HIV (PLWHIV) through capacity development of their associations/cooperatives.

Integrate sensitization on prevention with positives and family planning into PLWHIV cooperative development trainings.

Outcome s

12 cooperatives of PLWHIV, which raise cows, have been created.

Community Health Workers were trained on how to mobilize people for mass circumcision and family planning.

Over 1400 males committed to circumcisions as a result of the door to door campaign.



Community sensitization meeting



Cows distributed to cooperatives.

Project Recommendations

- People committed for circumcisions should get service as soon as possible.
- Health Centres need more trained people to do circumcision.
- The sensitization campaign should cover all cells.
- Increase startup capital of cooperatives in all quarters of the project.
- District officials should support cooperatives' members, especially by training them to take care of their cows.

Preventing TB & HIV Co-Infection

Funded by UNAIDS

The project aims to improve Tuberculosis (TB) detection, care and treatment for people living with HIV (PLHIV) in Rwanda, in support of the goals of the National TB Program (PNILT). This project, conducted in 2011 in Bugesera, Gasabo and Muhanga Districts, engaged health care providers, civil society organizations, associations of people living with HIV, and community health workers to foster greater understanding of TB/HIV co-infection and support for intensified TB case finding.



Outreach sensitization sessions

Activity	Outcome
Training of PLHIV association and educational brochures on TB screening, care and treatment.	Increased capacity of associations/cooperatives to support members in preventing TB and receiving integrated services for the management of TB and HIV co-infection
Training and community outreach awareness sessions conducted with Community Healthcare Workers	Increased capacity of CHWs to identify signs and symptoms of TB and refer PLHIV for appropriate testing and treatment
Training of health care providers on national guidelines and tools for TB detection, care and treatment.	Strengthened capacity of health care providers and health delivery system to support intensified case findings for TB and assure rapid diagnosis.
Training of associations and CHWs have sensitized PLHIV on TB/HIV co-infection.	Increased knowledge among PLWHIV of the link between TB and HIV, prevention methods and where to access integrated services.
Facilitating links between CHWs, associations, and health facilities.	Improved health sector capacity for identifying cases of TB.

Strengthening the Capacity of Local Government to Promote TB/HIV Community Education

Funded by WHO

This 2011 project aimed at strengthening the commitment of local government authorities at the sector level to advocate for and prioritize TB detection and treatment among PLWHIV and promoting community-led TB/HIV awareness initiatives to ensure timely diagnosis and treatment among PLWHIV at the sector level in Bugesera District. Specifically, the project sought to empower the Social Affairs Officers who are responsible for health planning and policy-making at the sector level.

Major Activities



Sensitization workshop for local officials to raise awareness on TB/HIV coinfection.

Results

- All workshop participants stated their commitment to raise awareness and advocate for TB screening among PLWHIV.
- 50 participants in partnership meetings agreed to take action by talking about TB, TB screening among PLWHIV and TB/HIV awareness.
- 15 local government officials committed to focus on people living with HIV/AIDS as a vulnerable group in Kigali, Rwanda.

- Sensitization workshop for local government officials to raise awareness of TB/HIV and advocate for increased screening of PLWHIV, with a focus on local authorities, especially district officers in charge of social affairs.
- District partnership meeting to support stakeholder collaboration for TB/HIV awareness raising at the sector level.
- Organization of social mobilization campaign to promote community-led advocacy for TB screening at the sector level.

Responding to Gender Based Violence (GBV)

Funded by UN WOMEN

In 2011 HDI developed a one year project aimed at strengthening the districts of Bugesera and Nyagatare's response to Gender Based Violence at the district, sector, cell and umudugudu level and to ensure that women and girls have access to HIV/AIDS prevention services. The overall aim of the project is to raise awareness and the capacities of more than 554 people involved in handling GBV issues by providing information through training, awareness sessions, documentations and networking. This project is ongoing, and as of February 2012, only the situation analysis has been completed.

Key Findings in Situation Analysis

- * Limited knowledge on GBV and PEP at community, umudugudu and cell levels;
- * Many players working in isolated way;
- * Lack of information on GBV cases
- * Attitude of keeping silent on GBV cases;
- * No training at all on GBV across health centres in Bugesera district.
- * Limited capacity of police focal point to handle the GBV cases;
- * Lack of equipment, materials and space required for health centers to provide care services to GBV victims;
- * Bureaucratic procedures delays PEP;
- * Lack of synergy among players.

Targeted Groups for Outreach and Capacity Building

The project focused on increasing the capacity of health service providers, policy and local community leaders to better deal with HIV/AIDS in the context of GBV. The categories of individuals who will be targeted, as this project continues into 2012 include:

- 64 gender Focal Point from Rwanda National Police.
- 60 community leaders participating in GBV protection committees.
- 30 community liaison officers from community policing committees.
- Almost 400 community members in targeted districts reached by outreach awareness sessions.



Community of Potters Health and Development (COPHAD) *Funded by Pygmy Survival Alliance*

COPHAD is a special project within HDI which works to reduce child and maternal mortality in Bwiza Village in Ndera Sector, Gasabo District. COPHAD assists this vulnerable community, through an innovative, cost-effective and locally driven process of personal engagement through health, education, nutrition, sanitization and housing.



Children of the Bwiza Potter's Village.



Traditional baskets made by the women of Bwiza.

Specific activities include:

- Assisting the communities shift to better housing.
- Supporting income generating activities, including brick making, basket weaving, and cultural entertainment troops.
- Supporting agriculture by providing supplies such as terracing, manure and seeds.
- Providing training and drugs to allow for the proper care and treatment of animal livestock, especially cows.
- Buying health insurance cards for community members.
- Providing funds for treatment of chronically ill community members.
- Conducting health education in the community.
- Supporting general education, including supplying scholastic materials, school fees, visiting students, and supporting them in vocational training.



The women of Bwiza village weave baskets, as an income-generating activity.



Medical and Technical Support



In 2011 HDI welcomed two groups of international doctors who specialized in cervical cancer and plastic surgery. We conducted the following activities:

- Organized training for health care professionals on cervical cancer and held cervical cancer screenings, open to the community, at Nyamata Hospital.
- Facilitated the surgery and treatment of 30 patients who required plastic surgery by the visiting international plastic surgeons.



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Advocacy and Policy Monitoring



Advocacy sensitization meeting of LGBTI Rights in Rwanda.

2011 Projects

- Identifying Policy Barriers to Safe Sex
 - Promoting Youth Sexual and Reproductive Rights
 - Decriminalizing Abortion in Rwanda
 - LGBTI Right to Health: Educating Health Care Providers on the Right to Health and Human Rights of MSM
 - Know Your Rights: A Project to Promote Patients' Rights in Rwanda
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Identifying Policy Barriers to Safe Sex

A Project Funded by IREX

In 2011 we conducted our first research project, in collaboration with the Institute of Policy Research-Rwanda (IPAR). The main goal of this research was to explore to what extent young people in secondary schools understand issues relating to safe sex and are able to take appropriate precautions to avoid the dangers of contracting sexually transmitted diseases and unplanned pregnancies. This project supported our advocacy project, also conducted in 2011, to promote condom access in Rwanda's secondary schools.

Project Activities

- Workshop Training Session, hosted by IPAR, which provided training for HDI researchers who would be conducting the field work.
- A pilot study, conducted at Kagarma Secondary School.
- A full study, which consisted of focus group discussions in six schools throughout Rwanda with students and interviews with parents, teachers and school administrators.
- The publication of the research findings in a research report.
- A workshop with the media and other civil society organizations to validate the findings of our study.



Workshop training session with IPAR.



Focus group discussions with secondary school students.

Key Findings

- * Students are aware of risks associated with sexual relations.
- * Sexual health education is needed.
- * Access to condoms was reported as challenging.
- * Many respondents supported the idea of a free condom distribution program in schools.

Promoting Youth Sexual and Reproductive Health and Rights

A Project Funded by IREX

In 2011 HDI formed a coalition with Rwanda NGO Forum on AIDS and Health Promotion and Association Ihorere Munyarwanda to conduct an advocacy campaign, funded by IREX to help improve youth's sexual and reproductive health. The main goal of this project was to improve the availability and accessibility of condoms for secondary school youth, for the purposes of preventing the spread of HIV, unwanted pregnancy and other STIs.



Health advocacy workshop for members of civil society to promote youth sexual and reproductive health.

Impact

- The coalition started the debate in Rwandan government, the media, and civil society regarding condoms in secondary schools.
- Through our meetings with civil society and government officials we gained interest from many CSOs, provincial government and MPs on the issue.
- The topic is now regularly debated in the media.
- Conducted effective advocacy trainings with anti-AIDS clubs in schools.

Main Activities:

- Sensitization workshops
- Press conferences
- Radio show
- Position paper
- Anti-Aids Clubs advocacy trainings
- Meetings with key stakeholders.

Challenges

- Resistance from Rwandan culture.
- Difficulty gaining support from other CSOs.
- The Ministry of Health publicly taking a position against condoms in secondary schools.
- Lack of research on condom use and access in Rwanda's secondary schools.



Campaign launch press conference.



Decriminalizing Abortion in Rwanda *Funded by Ipas*

Many women in Rwanda undergo unsafe abortions due to Rwanda's restrictive abortion laws which prohibit the practice. Women sometimes suffer dire health consequences and even death. This project, implemented in 2011, aimed to build a coalition of civil society organizations to advocate for women's right to safe abortion and safe post-abortion care and to enable sustainable advocacy on issues of women's sexual and reproductive health and rights.

Activities

- Civil Society Workshop on Decriminalizing Abortion
- Civil Society Meetings
- Meetings with MPs
- Media Workshop on Decriminalizing Abortion
- Meetings with Journalists
- Radio Show Appearances

Recommendations

- Research which focuses on abortion in Rwanda needs to be conducted.
- Key policy makers and stakeholders which this project failed to engage, such as the ministries and officials at the province level need to be engaged.
- More awareness needs to be created among professionals who have a direct link to the issue, such as the media, police officers, lawyers, judges, doctors, nurses and other healthcare staff.
- Additional outreach still needs to be conducted with CSOs, especially Women groups which would like to support decriminalizing abortion in Rwanda, but are unwilling to publicly support it.

Impact

HDI has opened up the discussion surrounding the decriminalization of abortion in Rwanda.

Gained support of the Rwandese Family Planning Association (ARBEF) and Rwanda Women Network and interest of other CSOs.

Through workshops, radio appearances and meetings, we have been able to reach the media and alter their reporting to be more objective.

HDI has developed important allies within parliament.

The sentence for committing abortion was reduced from 5-15 years to 1-3 years and exemptions were added for women who are raped, victims of incest or subjected to a forced marriage.



Workshop for civil society members on decriminalizing abortion. Email: info@hdirwanda.org Web: www.hdirwanda.org



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LGBTI Right to Health: Educating Health Care Providers on the Sexual Health and Human Rights of MSM

Funded by UHAI

In 2011 HDI implemented a project to educate health care providers at 8 Hospitals throughout Kigali City about the health and human rights of LGBTI and MSM individuals. As an organization of health care providers, HDI is keenly aware of the role of stigma and discrimination in reducing access to and quality of health care provided to LGBTI individuals, particularly MSM. Discrimination from health care providers not only violates the human and health rights of MSM, but also negatively impacts HIV prevention efforts among this most-at-risk population. This project aimed to facilitate the creation of an enabling environment for health care provision and HIV prevention to LGBTI and MSM in particular.



Civil Society Workshop on Sexual Minorities and Human Rights participants.



Civil Society Review Meeting on campaign.

Activities

Prepared sensitization meetings in eight health centres with 20 invited participants.

Brochures and other sensitization materials were distributed in the targeted health clinics.

Two day workshop for journalists on health and human rights of MSM

A civil society workshop on the human rights of MSM was organized.

Impact

Cases of arbitrary arrests to sex workers have reduced and there have not been any reported cases of police arrest to LGBTI.

We have raised awareness among journalists and some have since improved their reporting both with Radio and print media.

We have established links with other activists both in Rwanda and the region and the coalition is getting stronger.

The LGBTI and sex workers community has come out of isolation and are participating to *foster their own rights*

Know Your Rights: A project to Promote Patients' Rights in Rwanda

Funded by Rwanda Governance Advisory Council

The project aimed to educate health care providers, patients, and the general population on patients' rights and responsibilities in Rwanda. Specifically, the project aimed to improve understanding, promotion, and respect for patients' rights through a pilot project in two districts: Gasabo (Kibagabaga Hospital and affiliated health centers) and Bugesera (Nyamata Hospital and affiliated health centers).

Activities

- Trainings on patients' rights for 40 health care providers and staff.
- 8 bi-weekly radio programs to educate the community on patients' rights
- Disseminated brochures to educate patients and health care providers on patients' rights.
- Distributed Know Your Rights posters on patients' rights.
- Trained hospitals and health centers to set up customer care centers with patient complaint boxes.
- Review Meetings to inform trained health care providers and staff in each district of patient complaints.
- Produced and disseminated a report to document implementation of patients' rights training and assessment of Patients' Complaint.

Impact

When HDI started this project, the entire community did not know and was not sensitized about patients' rights. We have now encouraged people to claim their rights and opened debates between healthcare providers, especially on the issues of patients' confidentiality.

Hospitals and health centers have now started to include patients' rights in their morning education sessions and head nurses are installing customer desks, suggestion boxes and signs in different languages in order to orient patients looking for various services in the hospital.

All hospital and health centers in Bugesera and Gasabo Districts have brochures and posters to disseminate.

Some hospitals and health centers have changed their education manuals/ documents to include patients' rights and are prioritizing patients' rights in their annual performance contracts.



Looking Forward to 2012

2012 Projects

In 2012 HDI would like to:

- Conduct research on abortions in Rwanda, in order to find out the rate of abortion, the reasons women in Rwanda seek abortions and how to effectively promote healthy abortions.
- Expand our work educating health care providers on LGBTI and MSM health and rights past Kigali City, into the various provinces of Rwanda.
- Grow our partnership with LGBTI groups in Rwanda and work with them to become a strong force in civil society.
- Continue our SHARE project, and expand it into more schools, so that we can ensure secondary school students are informed about their sexual and reproductive health and rights.
- Educate people in more districts about Patient's Rights and install suggestion boxes in health care facilities throughout Rwanda.



HEALTH DEVELOPMENT INITIATIVE

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Cassien exchanging contact information with district officials in Gicumbi district.



Cassien and Josephine sensitizing people on the need for mass circumcision.



Cassien and Patrick meeting with cooperative members in Gicumbi District.

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