

ARRUAL REPORT 2023



STRIVING FOR A HEALTHY AND INCLUSIVE SOCIETY

ABOUT HDI

HDI (Health Development Initiative) is a non-governmental, non-profit organization based in Kigali and registered with the Rwandan government. HDI strives to improve both the quality and accessibility of healthcare for all Rwandans. A dedicated group of Rwandan physicians with vast experience in the health sector founded HDI in 2005.

This group was united by a shared commitment to advance health and inclusive development for disadvantaged communities. HDI believes that health outcomes can be improved by putting in place laws, policies and programs that are responsive to the needs of those who are poor and vulnerable, such as women and children, historically marginalized communities, people living with HIV/AIDS, young people and other marginalized populations.

HDI advocates for friendly health related policies and builds the capacity of both duty bearers and right holders with tools and knowledge to advance the health and rights of their communities so that all Rwandans may lead healthy lives, free from preventable disease and premature mortality.



A society in which everyone has the opportunity to enjoy the highest attainable standard of health and well-being, regardless of social, cultural, economic or any other status.



To empower individuals, communities, and institutions to improve community health and development in Rwanda.

Using a rights-based approach,

HDI builds sustainable alliances to advocate for and support inclusive, health-friendly policies and services for everyone regardless of social, cultural, economic or any other status.

AREAS OF INTERVENTION

- Sexual and Reproductive Health and Rights: with focus on adolescent sexual and reproductive health and rights, contraception, safe abortion, HIV (and other Sexually transmitted infections), gender equality, and comprehensive sexuality education.
- Community Health & Development: with a focus on human rights-based programming, social justice, accountability, inclusion and leaving none behind, and rights of patients and health service users.
- Human Rights: HDI works with government institutions, policy makers, civil society organizations, and communities to advocate for and promote health-friendly policies and strengthen accountability

OUR VALUES:

Equality: HDI promotes and advocates for the human rights of all persons using a rights-based approach.

Accountability: HDI is accountable to the communities it serves, its donors, and stakeholders for resources that come into its possession.

Partnership: HDI believes in building nurturing partnerships for efficient, effective, and collaborative service to Rwandan communities.

Transparency: HDI's primary responsibility is to the target beneficiaries of its interventions; the organization operates in an open manner, with all stakeholder voices respected.

Sustainability: HDI believes that communities and partners should be made stronger and more resourceful after its interventions are complete.

Equity: HDI strives to ensure that everyone has a fair opportunity to achieve their full health potential regardless of social, cultural, economic or any other status.

WHO WE SEEK TO SERVE:



WOMEN AND GIRLS



ADOLESCENTS AND YOUNG PEOPLE



PEOPLE LIVING WITH HIV/AIDS



LGBTQIA+ INDIVIDUALS



SEX WORKERS



PEOPLE WITH DISABILITIES



PEOPLE WHO USE DRUGS



REFUGEES AND HISTORICALLY MARGINALIZED POPULATIONS

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

HDI TOLL-FREE HOTLINE

HDI's toll-free hotline (3530) has been one of its most effective approaches to reaching the most vulnerable and hard-to-reach populations in Rwanda with accurate information on SRHR and referral for services. Established in 2016, the HDI hotline has reached over 200,000 Rwandan residents across all 30 districts of Rwanda. The majority of these callers are adolescents and young people, especially young women and girls. The data collected from the hotline generates evidence for future advocacy initiatives.

In 2023, the HDI hotline received a total of 89,357 calls, with 52,874 calls completed. This represents nearly double the calls received in the previous year. Among the callers, 85% were women, 14.7% were men, and 0.13% identified as another gender. The majority of these callers were adolescents between the ages of 10 to 19, with nearly 90% identifying

as adolescent girls. Most calls originated from rural areas outside Kigali City.

Among the most common questions asked through the hotline were question related to the menstrual cycle, female genital elongation, masturbation, reproductive health (physical changes during puberty), safe abortion, pregnancy, and other sexual-related matters. The hotline data also revealed that the majority of callers were older adolescents (ages 15-19), making up 64% of the total, followed by young people aged 20-24 years at 26%.

This year, HDI added additional hotline counselors and fully established a call center system, enabling counselors to answer more calls simultaneously. Next year, HDI plans to establish an Integrated Voice Recording system for callers, which will provide callers with menu options to get their questions answered quickly and confidentially. Additionally, a USSD chatbot solution is in the pipeline, which will allow callers who prefer written information or those who are hard of hearing to access a menu of offline information free of charge from anywhere in the country.



PROVIDING SRHR SERVICES

At the heart of HDI's work on SRHR is its Center for Health and Rights with branches in Kicukiro and Nyakabanda. The Center for Health and Rights is a stigma-free and SRHR-friendly service model established in 2015 to reach the most vulnerable populations in Rwanda with accurate and free information and services.

Those who often face stigma, discrimination, and unfriendly services from healthcare providers, such as LGBTQIA+ community members, men who have sex with men (MSM) adolescents, sex workers, female victims of GBV and refugees, come to our centers as alternative inclusive safe spaces for those who may not feel comfortable seeking services at health centers or hospitals.

The Center offers advice on family planning, emergency contraceptives, pre and post-abortion counseling, referral and legal aid for safe abortion, psychosocial support for survivors of GBV, screening for HIV/AIDS and STIs.

This year, the Center for Health and Rights reached a total of **10,165** community members seeking SRHR services, with nearly 60% of our clients being women and girls. Among those who received services, 2,244 LGBTQIA+ members, including men who have sex with men, who received services through HDI's HIV prevention and treatment program and 6,249 clients came for voluntary counseling and testing (VCT), family planning, counseling, pregnancy testing, and other services.

EXPANDING ACCESS TO SAFE ABORTION

HDI continues to be a leading player in expanding access to safe abortion services in Rwanda both through leveraging the hotline and through direct provision of pre-abortion counseling services and legal aid to women and girls visiting our Center for Health and Rights. Since the establishment of the Ministerial Order on Abortion in 2018, HDI has been supporting women to access safe abortion provided they fall under one of the five grounds for legal abortion.

In 2023, HDI received a total of 1,842 vulnerable women and girls seeking information and/or referral for safe abortion, which represents a 32% increase from the previous year. Most of the women and girls who come to HDI seeking information and/or referral are poor and vulnerable.

The financial barrier to safe abortion is often too great for them to surpass on their own. This year, HDI financially supported 458 of these women and girls to access safe abortion. This year, HDI empowered 3,010 women involved in domestic work with information on gender-based violence, the Ministerial Order on Abortion, family planning, and other topics related to sexual and reproductive health and rights. Many of these women also received services at the HDI Center for Health and Rights.

Domestic workers are typically vulnerable young women with little education on SRHR topics. The campaigns emphasized their right to sexual and reproductive health, access to justice, access to medical services, gender-based violence, and the provisions in the ministerial order on safe abortion for those who were sexually abused.

The women were also given information on where they can access services, including at HDI's Center for Health and Rights.

Radio programs have also contributed to the increased awareness of women and girls seeking safe abortion services. HDI hosts radio programs which are broadcast across the country that discuss issues regarding SRHR, including family planning and unwanted pregnancies via Isango star and Kiss FM every Saturday and Sunday. This year, HDI held 109 radio programs.

The topics of these radio shows often come directly from the observed need from the community. When asked how they learned about the toll-free hotline, 87.8% mentioned that they heard about the hotline from one of HDI's radio programs.

These radio programs raise awareness of SRHR including legal provisions on abortion in Rwanda, GBV, family planning and unwanted pregnancies among adolescents and young and vulnerable women.

EXPANDING SRHR ACCESS FOR ADOLESCENTS AND YOUNG PEOPLE

Adolescents and young people represent a key target group for HDI and a key group for which SRHR information is critical. This year, HDI reached a total of more than 100,000 in school and out of school adolescents, including 63,443 through HDI's toll-free hotline and 36,750 through in-person outreach.

HDI reach over 31,000 students through school outreach events in 41 different schools dubbed school "edutainment" focusing on delivering knowledge of comprehensive sexuality education, the rights of children, gender-based violence and ways to report it, contraception options accessible in Rwanda and where to get them, the menstrual cycle, and menstrual health in general.

HDI also reached 1,257 students through school health clubs in 22 different schools in all three districts of Kigali City and Bugesera, 600 students through Agahozo Shalom Village, and 3,056 out of school adolescents and young people who were reached with SRHR and GBV information.



In addition to training for in-school students, HDI aheld orientation meetings with teachers on comprehensive sexuality education to enable them to transfer accurate, age appropriate sexual and reproductive health information, promote healthy attitudes and raise awareness on SRH in school communities in a fun, engaging way.

This training aims to build a network of empowered and trained educators who can pass on the knowledge acquired to other teachers in their respective schools.

This year, HDI reached more than 680 teen mothers with information on sexual and reproductive health. Among them, in close collaboration with health centers, HDI supported 360 teen mothers living with HIV/AIDS with information on the importance of adhering to treatment. 184 teen mothers were enrolled in TVET programs and were provided with startup kits following their graduation in order to strengthen their entry into the workforce. Another 170 teen mothers were equipped with SRHR information including contraception and safe abortion, and enhance their decision-making

ability to prevent recurring unwanted pregnancies and unsafe abortion among them thus contributing to the reduction of preventable maternal death.

This year, HDI created 32 videos to increase awareness among young people and adolescents about topics including family planning, safe abortion, and overall sexual and reproductive health. These educational videos had a viewership of 148,194 people, with youth making up 83.2% of this audience and females accounting for 57.64%. Radio programs have also contributed to awareness around sexual and reproductive health information. HDI currently hosts radio programs broadcasted across the country that discuss issues regarding SRHR, including family planning and unwanted pregnancies via Isango star and Kiss FM every Saturday and Sunday.

These radio shows have promoted HDI's services and raised awareness of SRHR including legal provisions on abortion in Rwanda, GBV, family planning and unwanted pregnancies among adolescents, and young and vulnerable women.



FAMILY PLANNING AND FERTILITY AWARENESS

In 2023, HDI reached 118 healthcare providers through the mobile mentorship program to reduce preventable maternal and neonatal morbidity and mortality.

The intervention has provided continuous on-the-job mentorship to bridge gaps in emergency obstetric neonatal care, family planning, and comprehensive abortion care.

During Women's Month HDI in partnership with other civil society organizations organized events in recognition of the achievements made by women and to raise awareness on critical issues affecting women's rights, particularly in maternal health including a mass sports event attended by pregnant women, Gasabo district officials, and gynecologists, Besides the walk, the participants were also provided information on nutrition for pregnant women, family planning and postpartum family planning counseling services for women as well as NCD screening. During the International Day of the Midwife and World Contraceptive Day, HDI reached nearly 16,800 people with information on family planning, antenatal care, and non-communicable disease. During these events, HDI distributed family planning to 7,788 people and screened over 6,500 people for non-communicable diseases, including screening for cervical cancer.



ENGAGING THE MEDIA TO PROMOTE SEXUAL AND REPRODUCTIVE HEALTH

The media is also a key player in the promotion of SRH information and rights. For the 8th year in a row, HDI held the Reproductive Health Journalism Awards, an awards ceremony that recognizes outstanding journalists who openly report on issues related to sexual and reproductive health.

During the reporting period, HDI attracted the participation of 150 journalists from media houses across the country for a total of 225 submissions.

The awards offer a unique intervention to encourage journalists to continue reporting on

SRHR issues. This year, HDI observed an increase in inclusive reporting covering all relevant topics and an improvement in the quality of the articles submitted, an indication that journalists are investing extra efforts to deliver winning stories.

HDI mobilizes social media influencers to use their wide reach and lead conversations on SRHR.

HDI's partnership with influencers boosts HDI's visibility, promotes awareness on SRHR, and increases the opportunity to effectively engage policymakers through different Twitter Spaces and other social media platforms. From March to December through social media, HDI reached over 2.1 million people.



PREVENTION OF GENDER-BASED VIOLENCE

This year, HDI conducted dialogues with local and district officials to raise awareness about the prevention and response to Gender Based Violence (GBV) and teenage pregnancies. The dialogue, facilitated under the Generation Gender Program, targeted over 700 anti-GBV key stakeholders including 30 GBV service providers at the district level and 691 Inshuti z'Umuryango (Friends of the Family) across all the sectors and at district level, equipping them with the information and community engagement tools to support them to break the cycle of GBV and early pregnancies.

Nominated by their communities, 'Inshuti Z'Umuryango' (IZU) are a pair (male and female) of community-based child and family protection volunteers found in each of Rwanda's villages.

IZU volunteers are tasked with responding to the everyday needs of Rwandan children and families through household visits, during which they identify and handle Sexual and Gender-Based Violence and child abuse among others.

HDI has also trained 30 district officials, including DASSO and law enforcement officers on sexual harassment, abuse, and exploitation to emphasize the important of adopting a gender-transformative approach in laws and policies and seek to challenge and change the underlying power dynamics and societal norms that perpetuate gender inequalities and discrimination.

Officials who are trained in this approach are expected to use the knowledge they have been provided to establish mechanisms for accountability and enforcement within their jurisdiction, ensuring that laws and policies are not just on paper but are effectively implemented and enforced, creating a safer environment for youth and women.

HDI and coalition members joined the Ministry of Gender and Family Promotion in an annual walk against GBV. After the walk, coalition members gathered to reflect and discuss different ways to create a community free from violence.

The team reflected on a world where women and girls exercise their rights, where household and care work are not only a woman's responsibility, where men display positive masculinity and where women and girls are emancipated.

The annual global campaign kicked off on November 25th and ended on December 10th marking a committed time to raise awareness and work towards preventing GBV at all levels.

SRHR EDUCATION FOR MARGINALIZED COMMUNITIES

As part of the Community of Potters Health and Development program, HDI engaged in sessions with 16 adolescents, comprising 13 girls and 3 boys, from Cyaruzinge village.

The sessions were dedicated to addressing various aspects of sexual and reproductive health, providing comprehensive education and guidance to enhance their understanding and awareness in these critical areas of adolescent development.

The sessions covered a range of topics such as sexuality and rights, puberty and hygiene, relationships, communication and consent, pregnancy, STIs, HIV/AIDS, and contraception.

Through interactive discussions, participants gained valuable knowledge on key aspects of their sexual and reproductive health, dispelling myths and fostering informed decision-making. demonstrations on condom usage and self-testing for HIV were conducted, enhancing the community's awareness and preventive measures against STIs.

Furthermore, participants, empowered by the knowledge gained, have committed to advocate for safer sex practices within their peer groups and the community at large.

TRAINING OF HEALTHCARE PROVIDERS

In 2023, HDI trained a total of 918 healthcare providers on a variety of topics to improve the availability and quality of SRHR service provision including, the legal framework around safe abortion, family planning, and the rights of health service users. HDI reached 473 healthcare providers with values clarification and attitudes transformation workshops, 120 healthcare providers with training on patient's rights, 67 healthcare providers on disability inclusion, and 125 healthcare providers on e-LMIS (Electronic logistic management information systems (eLMIS) and supply chain management. Additionally, HDI reached 118 healthcare providers through the mobile mentorship program to reduce preventable maternal and neonatal morbidity and mortality. The intervention has provided continuous on-the-job mentorship to bridge gaps in emergency obstetric neonatal care, family planning, and comprehensive abortion care.

HDI also held a 10-day refresher training for healthcare providers on obstetric ultrasound for 22 mentors, which is a critical element to comprehensive abortion care, enabling providers to confirm pregnancy, estimate gestational age, monitor fetal development and wellbeing as well as detect any abnormalities among others. HDI successfully facilitated a two-day training session that was attended by 60 community pharmacists; 30 from private pharmacies and another 30 from public hospitals, representing all 30 districts of Rwanda to introduce the concept of abortion self-care, sparking a dialogue about its potential implementation in Rwanda. Beyond supporting healthcare workers to provide stigma-free services and equipping them with knowledge on the legal framework related to abortion, an important outcome from these trainings was the formal working relationships with both public (government) and private health facilities. As healthcare workers are better able to serve the community, they have begun to recognize the importance of HDI's trainings. To date, HDI has established formal partnerships with over 20 public and private health facilities who have committed to provide legal safe abortion services to women and girls being linked to their health facilities.

Another important component in ensuring health care providers is providing informed, stigma-free, nonjudgmental services is the training of future health care providers. This year, HDI strengthened the capacity of over 500 members of health professional associations—including Medical Students for Choice, Medical Doctors for Choice, and Medical Students Association of Rwanda—by continuing to support their meetings, offering values clarification training and mentorships for their members, as well as creating spaces to network and engage with other SRHR focused organisations. These activities have allowed these medical professionals to remain actively informed and benefit from the experiences of young physicians in the field. They are currently being invited to spaces such as radio and TV programs, to discuss SRHR and safe abortion related issues. In addition to working with the school of medicine at the University of Rwanda, HDI expanded its partnership with the university by engaging and building relationships with the school of nursing and midwifery and the University of Global Health Equity to advocate for curriculum review and institutionalize gender transformative SRH education with informal pre-service training of healthcare providers.

Additionally, HDI also distributed 780 bedsheets and 390 medical scrubs to health facilities in three districts. These IPC materials support health facilities to fight healthcare associated infections that compromise patient and healthcare provider safety in the maternity ward.



TECHNICAL SUPPORT TO THE MINISTRY OF HEALTH

Through HDI's years of experience in sexual and reproductive health and rights, duty bearers and other stakeholders look to HDI for technical guidance.

The Ministry of Health in particular frequently reaches out to HDI for technical support. In 2023, HDI supported the Ministry of Health to develop the following key documents:

- The Termination of Pregnancy Guideline
- Values Clarification and Attitudes Transformation training manual
- Pre-abortion Care Guideline
- Family Planning Reference Manual
- Family Planning booklet for local and religious leaders
- FP 2030 Action Plan
- Family Planning Flipchart

HDI also supported the Ministry of Gender and Family Promotion with the development of a Flipbook for Isange One Stop Centers on communicating with survivors of sexual and gender-based violence.

HDI is actively engaging with Comprehensive Abortion Care (CAC) stakeholders and the Ministry of Health to streamline the coordination of abortion service interventions. This collaborative effort has led to the establishment of a CAC sub-Technical Working Group, chaired by the Rwanda Biomedical Center and co-chaired by HDI. HDI also convened technical working group meetings including the Family Planning, Adolescent SRH, Safe Motherhood, Neonatal, Health Sector and Midwifery Technical Working Groups.



HUMAN RIGHTS AND THE RIGHT TO HEALTH

LGBTQIA+ AND SEX WORKER RIGHTS TO HEALTH AND NON-DISCRIMINATION

In 2023, HDI reached a total of 4,831 key populations. HDI has created a network of peer educators among key populations to ensure community education on HIV and sexually transmitted infections and ensure the distribution of preventative commodities such as condoms and lubricants. During the reporting period, HDI reached 126 peer educators among sex workers and 42 peer educators among men who have sex with men to strengthen their capacity on HIV and other sexual-related diseases, patients' rights, peer education techniques, and communications skills.

In May 2023, HDI celebrated the International Day against Homophobia, Transphobia, and Biphobia. Together with a large team of other CSOs working on human rights. HDI raised awareness of discrimination and repression of the LGBTI community worldwide and in Rwanda and mobilized stakeholders to take action against discrimination and advocate for an enabling environment to ensure the enjoyment of non-discriminatory access to SRHR services for all.

HDI also empowered 12 sex worker-led and 21 LGBTI-led community-based organizations in human rights advocacy, and provided mentorship as their organizations are growing. Participants were enlightened about the right to health, right to education, right to freedom of movement and learned different principles, standards, and tips related to the documentation of human rights violations.



IMPROVING INCLUSION OF PEOPLE WITH DISABILITIES

Disability continues to be a sensitive issue in some local communities. A significant number of people with disabilities continue to face challenges related to accessing services for example due to barriers posed by venues that are not inclusive, making it difficult for them to access the premises.

Some of these premises include buildings that were built before guidelines favoring people with disabilities came into force. Accessing information is also often a challenge, as most health information is in formats that are not universally accessible. In 2023, HDI reached out to 251 people with disabilities to equip them with knowledge of their rights and gender-based violence. The outreach created awareness on SRHR commodities such as contraceptives, menstrual hygiene and access to SRHR information. The outreach fostered dialogue on inclusive participation of people with disabilities towards inclusive and sustainable development including shedding light on barriers affecting their participation. HDI also joined celebrations for Disability Week and the International Day for People with Disabilities.

The celebrations gathered representatives of people with disabilities, government officials, and civil society organizations to shed light on the progress and challenges for people with disabilities. The



activities were meant to identify SRH issues for adolescents and youth with disabilities, raise awareness on available SRH services, and address other newly identified issues in this community.

Community awareness messages, banners, and posters were visible in every sector of Rusizi District and at the district level in an attempt to capture the attention of people and spark discussions among community members around the rights and needs of people with disabilities. Additionally, 200 assistive devices were distributed.

Following the International Day of People with Disabilities, HDI committed to supporting income generating activities of young people with disabilities. Toward the end of the year, HDI fulfilled this commitment and supported 6 businesses created by young people with disabilities.

STRENGTHENING THE CAPACITY OF THE MEDIA IN NON-DISCRIMINATORY REPORTING

The media is also a key player in the promotion of SRH information and rights. Following the dissemination of a research conducted on the lived experiences of the LGBT community in March 2023, HDI engaged 30 media professionals in training on advocacy and communication

skills to assess, document, and report on issues related to sexual and gender minorities in a non-discriminatory way. The media plays a crucial role in contributing to the social inclusion and civic engagement of LGBTQIA+ people by creating visibility and combating inequalities.

RESEARCH AND ADVOCACY

GENERATING EVIDENCE FOR ADVOCACY

HDI prides itself on its capacity to use evidence-based advocacy for legal and policy reform, and to raise awareness on critical issues in sexual and reproductive health and rights (SRHR). This year, HDI conducted four significant studies aimed at addressing various critical aspects within this domain.

- Research on Gender-Based Violence Among Domestic Workers: This study focuses on understanding the prevalence, nature, and impact of gender-based violence faced by domestic workers in Rwanda
- Sexual and Reproductive Health Issues Among Adolescents and Young Persons with Disabilities: Recognizing the unique challenges faced by adolescents and young persons with disabilities, this research will guide targeted interventions and policies to ensure inclusive SRHR services for all young people.

- Case Study on Regional Vaccine Production in Africa: With a specific focus on the BioNTech facility for mRNA vaccines in Rwanda, this case study examined the potential for regional vaccine production.
- Gaps and Challenges in the Legal, Policy, and Strategic Frameworks on SRHR in Rwanda: This comprehensive study examined the existing legal, policy, and strategic frameworks governing SRHR in Rwanda, identifying critical gaps and challenges.

The findings from these studies are instrumental in shaping HDI's future advocacy initiatives. This evidence-based approach not only strengthens HDI's advocacy but also ensures that their initiatives are grounded in the lived experiences and realities of the communities they aim to serve.

GENERATING EVIDENCE FOR ADVOCACY

HDI takes pride in its work to empower civil society organizations to actively contribute to the building of the broader SRHR movement. This year, HDI empowered and mentored 93 civil society organizations with the skills necessary to join the SRHR movement such as evidence-based advocacy and policy influencing, communication, human rights, financial management and in some cases how to register their organizations.

HDI strengthened the advocacy capacity of 30 CSOs working with sexual minorities in Rwanda to equip them with skills on advocacy strategy and to strengthen the overall SRHR CSO movement in

Rwanda. During the meeting, CSOs sought to find ways to build a strong advocacy coalition that can present evidence-based findings to policy makers, influence agenda settings of policy makers, and have an advocacy strategy that will contribute to social change. HDI also met for a 2-day workshop with 35 representatives from CSOs to discuss international human rights mechanisms, VCAT, and the human rights-based approach, challenging CSOs to think from a human rights perspective.

ADVOCATING FOR CHANGE AT NATIONAL, REGIONAL, AND INTERNATIONAL LEVELS

During the reporting period, HDI contributed to the development of 5 policy briefs on a variety of topics related to access to safe abortion and access to contraception for minors. The policy briefs highlight legal barriers preventing adolescent access to safe abortion, hindering the ability of economically vulnerable women to use community-based health insurance to pay for abortion services, and limiting access to contraception for adolescents.

The policy briefs also highlight that conscientious objection to the ministerial order on safe abortion continues to hinder women's access to safe abortion.

In order to elevate issues to the highest level of government, HDI uses every opportunity to

engage stakeholders in high level meetings. This year, HDI engaged high level government ministries and parliament to discuss gaps in laws and policies, including harmonizing the Ministerial Order on Abortion with the current Rwanda Social Security Board legal framework, which currently impedes women's ability to use Mutuelle de Santé for safe abortion by requiring women to first report their case to the Isange One Stop Center.

Additionally, HDI co-hosted meetings with stakeholders to discuss the East African Community Sexual and Reproductive Health Bill, which has been in the works for years. The meetings are a chance to come to a common understanding on key issues and highlight issues for national and regional advocacy.

COMMUNITY HEALTH AND DEVELOPMENT

HDI supports vulnerable and marginalized communities with education on nutrition; maternal, newborn, and child health; infectious disease prevention; mental health; harm reduction and the prevention and treatment of non-communicable diseases.

TUBITEHO -HARM REDUCTION PROGRAM

This year, HDI has begun a new program on harm reduction, TUBITEHO. The program aims to improve the quality of life of People Who Use Drugs (PWUD) in accordance with a gender and human rights approach by creating a conducive and enabling environment to make quality harm reduction services for PWUD available and accessible, empowering PWUD through capacity

building on their rights and harm reduction approach, and initiating provision of minimum package of Harm Reduction services for PWUD in pilot health facilities. Later in the year, the consortium officially launched the program marking a significant milestone in advocating for harm reduction services among People Who Use Drugs in Rwanda. The launch brought together 60 stakeholders - including representatives from the Ministry of Health, Rwanda Biomedical Centre, Ministry of Justice, Parliamentarians, security organs, Human Rights Commission, National Rehabilitation Services, and respective district authorities where the program will be implemented, U.S. Government and UN Agencies, Embassies, the

media, Local and International NGOs supporting harm reduction advocacy efforts in Rwanda.

The launch established a solid foundation for ongoing discussions on potential avenues for developing a minimum package of harm reduction services for PWUD. By engaging a diverse group of stakeholders, the event set the stage for collaborative efforts in realizing the program's goals by uniting, sharing insights, and laying the groundwork for impactful policy and advocacy initiatives.

This multi-sectoral approach ensures a comprehensive and holistic strategy to address the complex challenges associated with drug use.

COMMUNITY OF POTTERS HEALTH AND DEVELOPMENT PROGRAM

HDI has been working with historically marginalized populations since 2008 through a program known as Community of Potters Health and Development (COPHAD). The program uses multiple approaches to improve the lives of the communities living in the villages of Cyaruzinge, Bwiza, and Masaka. The aim of this program is to improve health outcomes in the community by conducting nutrition programs, supporting health insurance and school fees, vocational and occupational training programs, and giving microloans for community members to start small businesses.



This year, the HDI team conducted a learning visit to the University of Rwanda - Musanze, sending four members to explore modern solutions to waster management, consisting of using biodegradable wastes to produce energy. The aim was to gather insights into the feasibility of replicating a similar initiative in Cyaruzinge. During the visit, the team focused on estimating the project cost, construction dynamics, and maintenance considerations. The knowledge gained from this learning visit played a pivotal role in shaping the team's perspective of introducing a more environmentally friendly waste management model in Cyaruzinge.

The women-led basket weaving cooperative with 29 members received a loan of 1 million RWF. This loan has played a crucial role in amplifying the cooperative \$\#39\$;s productivity and sales, leading to a notable increase in overall profit. With enhanced resources, the cooperative not only expanded its operations but also saw a positive impact on the economic well-being of its members. The cooperative allocated a portion of its profits to cover essential utilities such as water and electricity for their workspace to ensure smooth functioning of their operations and contribute to the cooperative's longterm sustainability. Additionally, members experienced improvements in their personal finances, with the ability to afford school fees and materials for their children, thereby fostering positive economic and educational outcomes within the community. HDI, through the COPHAD program, also provided manure to Cyaruzinge farmers, contributing to an increase in agricultural

productivity. The farmers reported a successful harvest of up to 1 ton of beans, marking a step in addressing food security challenges within the community. The increased productivity enabled Cyaruzinge farmers to generate surplus harvest, allowing them to sell the excess produce in the market. The vocational training program for Cyaruzinge community members aims to empower them with valuable skills in hairdressing, sewing, and car driving. The initiative was designed to address unemployment in the community, and benefited 15 ladies in hairdressing, 14 ladies and 1 man sewing, and 1 man in driving.

They also had the opportunity to do internships. The initiative not only contributed to individual empowerment but also represented a collective step toward fostering economic development within the Cyaruzinge community. The community-focused initiative aimed at improving sanitation in Cyaruzinge involved providing support for the construction of toilets. HDI played a crucial role by supplying roofing materials for this initiative. A total of 27 toilets were planned for construction, with 17 successfully completed this year. This initiative has been well-received by community members, providing them with improved and more accessible sanitation facilities, contributing to overall community health and well-being. Since 2015, HDI has been supporting child nutrition in Cyaruzinge village. In 2023, through the COPHAD program, HDI provided nutrient-dense porridge for 130 young children at Irerero Nursery School. The children in the school were also given vaccinations and vitamin supplements.

INSTITUTIONAL GROWTH

Organization Development Plan

2023 was a critical year for HDI's institutional growth, with significant effort invested in internal reflection and capacity building. This year, HDI developed a comprehensive organizational development plan to address areas of improvement that were identified during the Sida due diligence, as well as feedback received from other HDI partners. The organizational development plan has given us a roadmap for institutional growth. In 2023, HDI embarked on a number of organizational development interventions to improve staff capacity, gender mainstreaming, environmental conscientiousness, staff retention and knowledge transfer, and revision of policies and procedures. HDI has also made some organizational structure changes to improve overall operations.

Gender Mainstreaming

As a commitment to promoting a gender-just and violence-free society, HDI dedicated this implementation period to retraining staff on gender-based violence, principles to prevent gender-based violence and evidence-based reporting, and increasing the visibility of gender programs. In its ongoing pursuit of gender equity, HDI has reviewed the number of women in leadership positions and made changes to ensure that management roles and project/program coordination positions are held by women.

In an effort to improve HDI's sexual exploitation, abuse, and harassment policy and ensure a survivor-centered approach, revised our SEAH policy. Moreover, an external gender audit was commissioned following an internal review of the gender policy, identifying areas for further enhancement in workplace gender mainstreaming, power dynamics, training, and gender integration across all programs.

HDI hosts gender cafés in which staff and partners are provided a safe and open space to engage in meaningful discussions about gender.

During the reporting period, HDI held three gender cafés covering a variety of topics including gender-based violence, gender norms, and labia elongation.

Environmental Protection

HDI's commitment to environmental sustainability is reflected in its recent internal environmental assessment, culminating in the formulation of a comprehensive environmental protection policy. Notable eco-friendly initiatives implemented thus far include measures to reduce printing, minimize electricity consumption, and discourage unnecessary travel by car. Additionally, HDI has taken preliminary steps towards incorporating solar panels into one of its office locations. HDI is examining the possibility of incorporating solar power in one of our other buildings as a means to go green and as a backup for our hotline call center and server room.

HDI Policies and Procedures

In 2023, HDI revised a number of key policies and procedures including the sexual exploitation, abuse, and harassment policy; gender policy; environmental protection policy; communication strategy; and digitalization strategy. In October, HDI also went through a thorough revamping of the procedures in place for data protection and received a data controller certification in December.

Knowledge Transfer and Succession Planning

HDI staff gathered to formulate a comprehensive knowledge transfer and succession strategy that

Job Evaluation and Salary Scale Design

In order to address high rates of turnover, HDI has pursued a job evaluation and salary scale design process. The process was four-fold: review of existing HDI terms of reference, structure, salary scale, and compensation philosophy; development of a competitive compensation philosophy; and design of an equitable salary scale which will ensure HDI's compensation philosophy is competitive compared to the organizations HDI strives to benchmark itself against.

Staff and Structure Changes

In terms of staff and structure changes, HDI has brought three essential staff members on board. As part of its decentralization strategy and in an effort to ensure women are represented at the highest level of management, HDI has appointed a female deputy executive director to oversee day-to-day operations. HDI has hired a human resources officer and an internal audit and compliance officer to oversee HDI's financial compliance and to ease the audit process in the future. The internal audit and compliance officer

will also work with our implementing partners in due diligence processes and in their continued compliance with HDI's policies and procedures.

Staff Capacity Building

HDI strives to ensure all staff have multiple opportunities per year to attend trainings both internally (as learning sessions offered by HDI staff) and externally (offered by HDI partners). In addition to many other trainings conducted for staff during this first year of implementation, HDI held a 3-day budget analysis workshop, where staff were trained on budget analysis as a tool for advocacy. The training aimed to provide participants with an understanding of the principles of conducting budget analysis and equip them with the skills to learn, design, collect data, analyze, and present SRHR budget analysis. HDI staff also participated in trainings on gender, equity and human rights integration into health policies/programs. HDI staff were trained to become VCAT master trainers and others completed training of trainers on positive masculinity and positive parenting. HDI staff also received a refresher training on conducting evidence-based advocacy. In light of the new personal data protection law, HDI also held a













Health Development Initiative (HDI)



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