

HDI NEWSLETTER

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**For questions, comments, or
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Dear Partner,

Welcome to our April Newsletter.

In this edition, we reflect on a two-day workshop to unpack cultural norms that affect minors. The conversation opened up critical reflections on consent, tradition, and the rights of girls.

We also share highlights from our workshop with Community-Based Organizations (CBOs) on using courts as a tool for advocacy. The session aimed to strengthen their capacity to engage the legal system in advancing human rights.

As the AmplifyChange Project comes to an end, we share how the SRHR Coalition is strengthening collaboration to sustain gains in sexual and reproductive health rights advocacy.

Finally, we also bring you details from our observance of the World Malaria Day, where we joined the national level celebrations to raise awareness, highlight progress, and renew collaborative efforts to eradicate malaria.

Thank you for your continued partnership and commitment to driving change.

The Communication Team



EXAMINING THE HUMAN RIGHTS IMPLICATIONS OF HARMFUL CULTURAL NORMS ON MINORS

This March, we convened an intergenerational dialogue to discuss cultural norms and practices that continue to affect women and girls, often without their full understanding, consent, or choice. The 2-day intergenerational dialogue gathered more than 30 activists, feminists, legal and medical professionals,

youth leaders, and women-led civil society organizations to reflect and critically examine practices such as labia elongation performed on minors and collectively advocate for its elimination in Rwanda. The session commenced with an exploration of the historical and cultural origins of labia elongation.



Participants looked at how this practice is considered a traditional rite of passage into womanhood in some Rwandan communities, preparing young girls for marriage and symbolizing aspects of femininity such as sensuality, fertility, and maternal nurturing.

The participants examined societal belief that elongated labia enhance sexual stimulation and pleasure, particularly for men, and how this belief contributes to intense social pressure on girls and women to conform.

Commenting on this, our Senior Program Officer, Gender and Inclusion said that framing labia elongation as a way to enhance male pleasure sexualizes girls before they understand sexuality, reinforcing gender inequality.



This is not only harmful to body image and autonomy but also violates girls' rights and well-being, preparing them for roles of compliance rather than empowerment.



- Annonciata Mukayitete,

Senior Program Officer, Gender and Inclusion

They raised concerns about the involvement of older friends or relatives, in assisting minors with the stretching process, which poses significant child protection issues. Here, the participants looked at how touching children's genitalia during labia elongation without freely given consent raises serious concerns of sexual violence and abuse, particularly considering that minors lack the legal capacity to provide consent.

The participants explored how perpetrators are likely to exploit this practice to conceal their sexual abusive behavior, making it difficult for victims to seek help.

Besides consent, participants discussed how the practice's irreversibility can affect children into adulthood, leaving them unable to undo changes to their bodies and facing lasting emotional and physical challenges.

Peace Hillary Tumwesigire, a gender activist and feminist pointed out how such practices even when not classified as physically violent, still reinforce harmful gender norms.

"Practices such as labia elongation should be eliminated from our society. Not only are they outdated but they normalize the idea that a girl's body exists to serve a man. This is how our society subconsciously promotes inequality. We should not be teaching our girls to endure, and remain silent in the face of society's unrealistic demands," she said.

ADDITIONAL CHALLENGES

Additionally, the participants discussed its initiation during adolescence typically around the age of seven,



exploring the methods used during this practice including manual stretching and the application of herbal concoctions believed to promote tissue elasticity and growth.

Dr. Dan Butare, a gynecologist, emphasized that performing labia elongation is often done under unsanitary conditions or using unsafe methods, exposing girls to health risks.

He pointed out that these risks include infections caused by poor hygiene, physical injuries, contaminated objects, long-term scarring, and complications that may affect their sexual and reproductive health.



Furthermore, participants addressed how labia elongation, deeply entrenched in cultural traditions and norms, reinforces harmful stereotypes and discriminatory attitudes toward women and girls' bodies.

Those who deviate from cultural beauty standards or choose not to undergo the practice may experience stigma, discrimination, and social exclusion.

Chris Azaza, an adolescent participant, highlighted that although both younger and older generations acknowledge the significance of culture, there is a pressing need for open conversations centering minor girls and how certain cultural practices negatively affect them.



“ I believe if young girls had a choice, without pressure or fear, most wouldn't change anything on their bodies to meet cultural expectations. We are told that it's to prepare us to be 'good wives,' but no one has really asked us how we feel about such practices.

- **Chris Azaza**, adolescent

In conclusion, the participants agreed that while labia elongation practices may be undertaken by consenting adults, it is important to safeguard minors from this practice until they reach an age where they can make informed decisions for themselves.



CELEBRATING WORLD MALARIA DAY IN GASABO DISTRICT

This past month, we joined the global community in marking World Malaria Day, an important occasion to raise awareness and reaffirm our collective commitment to ending malaria.

In Gasabo District, the day was celebrated in Ndera Sector, Nyarugenge District where we joined the celebrations to educate the public, highlight progress, and renew collaborative efforts to eradicate malaria once and for all.

During the month of April, we also played an active role in the ongoing campaign to eliminate malaria by mobilizing the community and encouraging renewed collaboration in the fight against this preventable disease. The campaign emphasized the importance of regular testing, early detection, and timely treatment. Free malaria testing was conducted on-site, helping community members understand their health status and access care without delay.



As part of our coverage and engagement, we sat down with Dr. Aimable Mbituyumuremyi, the Director of Malaria and NTDs Control at the Rwanda Biomedical Centre, who shed light on the country's strategic approach to malaria control.

First, the Dr. Mbituyumuremyi attributed the increase in cases to the resistance of malaria causing parasites to malaria treatment drugs as well as mosquito-killing insecticides.

He said this is due to delays in seeking treatment, misuse of medication (such as not taking the medicine as prescribed by the doctor or not completing the full dose), self-medication without consulting healthcare professionals, using doses inappropriate for the person's age where for instance, an adult takes medicine for children or vice versa.

As a result, malaria-causing parasites continue to multiply in the body, with some of them changing their structure and behavior to evade the effects of the medication, making malaria increasingly difficult to treat.

He emphasized the significance of community-based interventions and the power of partnerships between government institutions, civil society, and local communities.

He highlighted how Rwanda has made substantial progress in reducing malaria-related deaths through widespread net distribution, indoor residual spraying, and effective case management. However, he also pointed out emerging challenges, such as climate-related shifts in mosquito breeding patterns and resistance to insecticides.

He emphasized the importance of sustained community involvement, noting that public health campaigns thrive when people are not just informed but empowered to take initiative in their homes and neighborhoods.

We also ran a social media campaign where we discussed prevention and management. The campaign attracted over 13,804 impressions. The interview with Dr. Mbituyumuremyi was watched by over 290 people.



HARNESSING COURTS AS A STRATEGIC ADVOCACY TOOL

This April, we facilitated a three-day capacity-building workshop that brought together over 50 representatives from 25 gender-diverse Community-Based Organizations (CBOs) across the country.

The workshop aimed to equip participants with the skills and knowledge to use strategic litigation as a powerful advocacy tool to advance and protect the rights of their communities that often face legal, societal, and institutional barriers.

In her opening remarks, Annonciata Mukayitete, our Gender and Inclusion Senior Program Officer, encouraged participants to view the training not just as a commitment to defending the dignity and rights of the communities they serve.

Led by human rights and litigation expert Christian Garuka, the sessions began by grounding participants in the foundational principles of human rights including non-discrimination, equality and equal protection under the law.



Garuka connected these principles to economic and social rights such as access to health care, education, housing, and social protection. He emphasized that governments are obligated to progressively realize these rights based on available resources, and that they are inseparable from civil and political rights.

He noted that overlooking any category perpetuates injustice and deepens inequality, particularly for vulnerable groups. Building on this foundation, the workshop shifted to the core theme: strategic litigation. Garuka clarified how it differs from ordinary litigation, which typically resolves individual issues.



He explained that strategic litigation is designed to spark broader legal or social change including challenging unjust laws, clarifying legal standards, and advancing systemic reform. He reminded that while outcomes aren't guaranteed, even unsuccessful cases can raise public awareness, influence policy, and prompt institutional responses.

To illustrate its potential, participants analyzed landmark cases from Rwanda, Kenya, Botswana, South Africa, and India. These case studies demonstrated how litigation has catalyzed transformative change.

However, Garuka stressed that litigation should be a last resort, used only when other advocacy methods have been exhausted; pointing out that it may not always be the most effective strategy in every context.

Participants engaged in hands-on exercises to learn how to identify strong strategic cases. They considered key questions such as is the case legally sound? Can it benefit the broader community? Can it establish a precedent for future action?

Discussions highlighted the importance of timing, community readiness, and the need to exhaust alternative approaches. Garuka also emphasized the importance of thorough documentation and consistent community engagement throughout the litigation process. During the session on risk assessment, Sylvie Mutuyimana from Blossom Bridge Initiative raised a crucial question: What factors might undermine litigation efforts?

Together, participants examined a range of potential risks such as personal security threats and reputational damage as well as unmet expectations among communities and partners.



Garuka provided practical strategies for anticipating and managing such risks, emphasizing that even seemingly minor oversights can have serious consequences.

The conversation paid particular attention to the vulnerabilities faced by groups such as sex workers and LGBTQIA+ individuals, especially in environments where stigma remains a challenge. Mutuyimana cited the repeated arrests of sex workers ahead of public events and questioned the legal basis for such actions, bringing the discussion to lived experience and urgent advocacy.



In the final sessions, attention turned to the importance of partnerships in successful strategic litigation. Garuka encouraged participants to think beyond financial support, stressing the value of building strong alliances with legal experts, human rights organizations, the media, and grassroots stakeholders.

Participants discussed the advantages of collaborative action, as well as potential risks such as misrepresentation or backlash from cultural and religious actors. In her closing remarks, Mukayitete reminded participants that this training was just

one part of HDI's broader commitment to strengthening legal capacity within communities most affected by stigma and discrimination. The workshop concluded with participants expressing their determination to apply what they had learned to advance justice in their communities.

As Jean Claude Uwihoreye from My Rights Alliance put it, "The road ahead may be tough, and full of risks and challenges, but we now have the tools and legal knowledge to face it with confidence."



STRENGTHENING THE SRHR COALITION MOVEMENT TO BUILD SUSTAINABLE IMPACT

On April 9th, the SRHR Rwanda Coalition convened a strategic reflection meeting with its six implementing partners to assess progress, identify challenges, and capture key lessons.

The meeting opened with remarks from our Executive Director, Dr. Aflodis Kagaba, who highlighted the need for cumulative evaluation and results-driven advocacy. “We must move beyond reporting activities and focus on measuring the real outcomes

that drive change in the SRHR landscape in Rwanda.” He said.

Dr. Kagaba called on all implementing partners to step up their efforts and engage in critical reflection; examining where we are, the impact we’ve achieved, and what strategic shifts are needed to enhance outcomes in these remaining months of the Amplify Project.

He reminded that every activity must be evidence-informed, and aligned with the coalition's shared goals.

Importantly, he reminded partners that the coalition's work is interconnected. "Our efforts are strongest when they are complementary. One activity should reinforce another, we are building a web of change, not isolated interventions," he said.

Participants raised critical questions around progress tracking, such as: What percentage of activities have been completed? What insights can we draw from each organization's implementation? And how can we foster deeper learning across partners to amplify collective impact?

COALITION HIGHLIGHTS

Yassina Igihozo, Gender and Inclusion Lead at RNGOF, highlighted the power of storytelling in shifting narratives. "Real stories fuel real change," she said. RNGOF also led impactful advocacy during International Safe Abortion Day, creating inclusive spaces for young women to speak and be heard.



Iriza Alpha, SRHR Associate at GLIHD, showcased their celebration of the International Day of the Maputo Protocol, raising public awareness around this critical African instrument for SRHR and gender rights.

"We want Rwandans to understand the power and promise of the Maputo Protocol," said Iriza.

Teta Denise, Policy and Advocacy Officer for the Coalition, presented the coalition's institutional progress. Key milestones included the formal establishment of the SRHR Rwanda Coalition, supported by a clear operational framework outlining roles, responsibilities, and joint priorities.



She also introduced a curated directory of Medical Doctors for Choice, a resource listing stigma-free healthcare providers offering safe and respectful SRHR services. “This tool helps us map where stigma-free care exists—and where we need to strengthen our advocacy,” said Teta.

Teta highlighted the coalition’s growing public visibility and influence. “We’re witnessing a real shift in attitudes around SRHR, including on sensitive issues such as safe abortion. Public engagement is increasing, and that’s a testament to our collective advocacy,” she said.



LOOKING AHEAD

Looking forward, participants pledged to maintain the SRHR-Rwanda Coalition’s focus and ensure it remains aligned with its core objectives.

They stressed the importance of leaning into collective strengths, reflecting on the impact so far, and ensuring that the legacy of the AmplifyChange project tells a story of real, measurable change.

IN OTHER NEWS

This April, **we hosted the following radio shows:**



5TH APRIL 2025:

PROVISION OF SRHR SERVICES: ARE THEY ADEQUATE FOR WOMEN AND YOUTH?

19TH APRIL 2025:

THE LINK BETWEEN SEXUAL AND REPRODUCTIVE HEALTH AND MENTAL HEALTH.

26TH APRIL 2025:

THE INCREASE IN MALARIA CASES: PREVENTION AND RESPONSE.



6TH APRIL 2025:

WHAT CAN BE DONE TO REDUCE MATERNAL MORTALITY?

20TH APRIL 2025:

HOW WE CAN TAKE CARE OF OUR MENTAL HEALTH AND SUPPORT OTHERS.

27TH APRIL 2025:

THE ROLE OF YOUTH IN PREVENTING THE SPREAD OF HIV.

STAKEHOLDERS SPEAK:



HDI Rwanda
@HDIRwanda

Promote

Members of the [@RwandaParliamnt](#)-ary Committee on Social Affairs are currently revising the Draft Law Regulating Healthcare Services.

One proposal that stands out is the suggestion that anyone seeking Assisted Reproductive Technology (ART) services, such as surrogacy, IVF, as well as sperm and egg donation, must submit proof of infertility from three qualified medical experts.

What impact do you think this proposal would have on individuals seeking surrogacy, IVF, or egg and sperm donations?

You reposted



Olive
@uolive22

1. ART is expensive treatment, consulting 3 doctors can delay the treatment and cost more.
2. They should emphasize on prohibiting the exploitation especially surrogacy
3. They can evaluate how other insurance can help people with infertility, currently MMI cover partial.

You reposted



Richard Mugisha
@RichardMugisha1

This proposal could create significant barriers for individuals seeking ART services delaying access, increasing costs, and adding emotional strain. While ensuring ethical practices is important, requiring proof of infertility from *three* experts may be excessive.



HDI Rwanda
@HDIRwanda

Promote

Abagize Komisiyo y'Imibereho Myiza y'Abaturage mu Nteko Ishinga Amategeko y'u Rwanda bari gusuzuma umushinga w'itegeko rigenga serivisi z'ubuvuzi.

Imwe mu ngingo iri gukurura impaka ni icyifuzo gisaba ko umuntu wese ushaka gukoresha uburyo bw'ikoranabuhanga mu kuroroka (Assisted Reproductive Technology), harimo nk'ivangwa ry'intanga ngabo n'intanga ngore bikorerwa hanzwe y'umubiri (IVF), gutwitira undi (surrogacy) cyangwa guhabwa intanga z'umugabo cyangwa igi ry'umugore (egg or sperm donation), agomba kubanza kugaragaza icyemezo cy'uko atabwira cyemejwe n'abaganga batatu babifitiye ububasha.

Wowe ubona ute iki kifuzo?



Wiceceka.org
@InfoWiceceka

Replying to [@HDIRwanda](#) and [@RwandaParliamnt](#)

Abaganga batatu nibenshi jye nakwemeza umwe ABA ahagije

9:29 PM · 16 Apr 25 · 292 Views

1 Repost 4 Likes



Jane #TeamPK
@Janebreys

Replying to [@HDIRwanda](#) and [@RwandaParliamnt](#)

Kuki uburenganzira bwanyije Ariko abantu bakwiye kubugena mu mategeko? ibi bintu ni uburenganzira bwa muntu nta mpamvu yo kubanza kumenyako ntabwira cg mbyara.

12:50 AM · 17 Apr 25 · 224 Views

1 Repost 2 Likes



Maxime
@maxime_ntaganda

Replying to [@Annemwiza](#) [@HDIRwanda](#) and [@RwandaParliamnt](#)

Nibyo, ongeraho ko mu buryo bwa siyansi hari igihe umuntu aba Ari muzima byuzuye ariko kubwira bikanga cg se bikaba byamugiraho ingaruka mbi mu gihe afite ubundi burwayi runaka

8:13 AM · 16 Apr 25 · 796 Views

2 Reposts 6 Likes



HDI Rwanda
@HDIRwanda

Promote

Mu cyumweru gishize, twagiranye ibiganiro byiza n'abahagarariye ibigo by'urubiruko bizwi nka YEGO Youth Centers hamwe n'abaforomo bakorera muri ibyo bigo.

Twagiranye impaka nyinshi, aho bamwe bavugaga ko gukomeza gufunga abakoresha ibiyobyabwenge bagafatwa nk'abanyabyaha ari byo, abandi bati nyamara ntibitanga umuti urambye, bati ahubwo bafatwe nk'abarwayi, bafashwe kubona ubuvuzi no gusubira mu buzima busanzwe.

Ese wowe ubibona ute?



You reposted



Nzeyimana Jean Bosco
@NzeyimanaJB

Mwarakoze kuganira kuri iyi nsanganyamatsiko. Ikoreshwa ry'ibiyobyabwenge nikibazo gikomeye Kandi gikwiye umuti urambye. Gufunga umuntu rero numva bitatanga igisubizo ahubwo hakenewe ubuvuzi buteye imbere ku bantu babaswe n'ibiyobyabwenge, Kandi ubuvuzi buhendutse. Kuko ubuhari burahenze Kandi ntabwo buri mu gihugu hose.

HDI WISHES TO THANK OUR PARTNERS AND SUPPORTERS

- AMPLIFYCHANGE
- ANGEL FAMILY FUND
- BLACK WOMEN'S HEALTH IMPERATIVE
- CATHOLICS FOR CHOICE
- CRICKET BUILDS HOPE
- DELEGATION OF THE EUROPEAN UNION TO RWANDA
- EAFP
- EQUIMUNDO
- EXPERTISE FRANCE
- FEMNET
- FOSI/OSIEA
- FP2030
- GIZ
- GLIHD
- GLOBAL HEALTH CORPS
- IMBUTO FOUNDATION
- IMRO
- IPPF
- JHPIEGO/MCGL
- MEDECIN DU MONDE
- MEDICAL DOCTORS FOR CHOICE
- MEDICAL STUDENTS FOR CHOICE
- MINISTRY OF GENDER AND FAMILY PROMOTION
- MINISTRY OF HEALTH
- MINISTRY OF JUSTICE
- MINISTRY OF LOCAL GOVERNMENT
- NORWEGIAN PEOPLE'S AID
- PARLIAMENT OF RWANDA
- PLAN INTERNATIONAL RWANDA
- PSA
- RNGOF
- ROBERT ANGEL AND FAMILY FOUNDATION
- RWANDA CIVIL SOCIETY PLATFORM
- RWANDA SOCIETY OF OBSTETRICIANS AND GYNECOLOGISTS
- RWANDA BIOMEDICAL CENTER
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- RWANDA GOVERNANCE BOARD
- RWAMREC
- SISTERLOVE INC.
- SOCIETY FOR FAMILY HEALTH
- STEPHEN LEWIS FOUNDATION
- STOP TB PARTNERSHIP
- STRIVE FOUNDATION RWANDA
- THE CENTER FOR REPRODUCTIVE RIGHTS
- THE DAVID AND LUCILE PACKARD FOUNDATION
- THE EMBASSY OF SWEDEN
- THE EMBASSY OF THE KINGDOM OF NETHERLANDS
- THE GLOBAL FUND
- THE NEWTIMES
- UHAI-EASHRI
- UNAIDS
- UNFPA
- UNICEF
- VSO
- WELLSPRING PHILANTHROPIC FUND
- WEMOS
- WHO
- WOMEN'S LINK WORLDWIDE

