We kicked off the month of August with a campaign around breastfeeding focusing on emotional support the community can offer to breastfeeding mothers so that they can achieve their goals. Through different social media platforms and we joined the rest of the world in observing #breastfeedingweek2022, an annual celebration which is held every year from 1 to 7 August in more than 120 countries, including Rwanda.

According to the World Health Organization (WHO), breastfeeding is one of the most effective ways to ensure child health and survival. The WHO recommends exclusively breastfeeding for at least 6 months to ensure they benefit fully from breastfeeding.
In our YouTube video interview with Aude Kaze, a midwife and the Founder of Kwezi, a platform that encourages breastfeeding and postpartum care, Kaze stated that breastfeeding has to start from a place of willingness, where a mother is dedicated to exclusively breastfeeding her child.

She acknowledges that it’s never easy, but the benefit to the mother and the child are worth it. Kaze acknowledged the physical, environmental, and psychological challenges that women face when breastfeeding including low milk supply, soreness, engorgement, clogged milk ducts, infection, exhaustion, and depression.

Mothers are encouraged to breastfeed every 3 to 4 hours; however, often during the night mothers may fail to breastfeed. She encourages mothers to ask for help from partners, and ask from members of her community.

In order for women to have the highest chance at continued to breastfeed for at least six months, Kaze recommends that all breastfeeding mothers is to have a healthy and balanced diet, and hydrate.

For employers of women who practice exclusive breastfeeding, she encourages them to be supportive and flexible. She encouraged them to create a designated breastfeeding room, give women control of their pumping schedules in order for them to keep up their milk supply, and make breastfeeding policies known to everyone.

Breastfeeding has benefits for both the mother and the child. For the mother, it reduces the chances of getting breast cancer and increases the bond between her and her baby. For the child, breastfeeding protects the baby from infections and diseases. Breast milk also helps build and support the baby’s immune system.

- Kaze Aude
The 2022 Global Gender Gap Report ranks Rwanda as the most gender-equal country in Africa and 6th in the world, indicating that, among other things, the country has achieved parity at Ministerial and Parliamentary levels. Despite the progress, there are still harmful practices and myths against women embedded in Rwandan culture that continue to be the leading causes of gender inequality in the country.
These include high levels of intimate partner violence, labia elongation among children, sexist sayings that allude to how women should behave, perceptions about women speaking up and stigma around being a victim of violence among others.

At a two-day intergenerational dialogue organized by HDI in partnership with the Rwanda Men's Resource Center (RWAMREC) and AfriYAN, member organizations of the Rwanda Coalition of the Gen G Program, participants agreed that although there are still many challenges, positive change is possible if all stakeholders are open to working together to make a difference.

Bringing together a group of 30 participants from relevant ministries and government institutions, women-led, feminist, and faith-based organizations; and gender champions, the participants shared best practices and strategies aimed at building solidarity and catalysing bold, transformative, and ambitious action towards achieving gender equality.
The Director of Communication at HDI, Juliette Karitanyi, said that the dialogue aimed at bringing different stakeholders to the same table where they can identify the links between social norms, power dynamics and gender-based violence; and commit to advocate for behavioral change at the individual and community level. Karitanyi commended the government for its efforts in championing gender equality and women’s empowerment. However, she pointed out that there are still challenges—including harmful social norms based on patriarchy—that can only be uprooted through collaborations between the government, civil society organizations and the general community especially by putting young people at the forefront of all decision making.
Over 50 percent of the Rwandan population is under the age of 20. To build a country where gender inequality and discrimination has no place in the society, we must encourage the full participation of young people.

Juliette Karitanyi
The Director of Communication at HDI
In collaboration with the Rwanda Biomedical Center, we organized an orientation meeting with supervisors of Community Health Workers, Monitoring and Evaluation Officers, Data Managers and Pharmacists from 48 hospitals across Rwanda, where we discussed the Ministerial Order on Safe Abortion and indicators related to Family Planning. Addressing the participants, the Advisor on Comprehensive Abortion Care (CAC), Eugene Kanyamanza, touched on the burden of abortion, unintended pregnancies, and the status of maternal mortality in Rwanda.

According to the Rwanda Biomedical Center, nearly half of pregnancies in Rwanda are unintended and 10% end in unsafe abortion.

He explained that confidential inquiry into maternal deaths that occurred in health facilities in 2019 revealed that the leading causes of maternal deaths were direct obstetrical complications (79%), abortion outcomes (12%), and hypertensive disorders (7%).

“47% of pregnancies in Rwanda are unintended. 10% of those end in induced abortion.”

- Eugene Kanyamanza
Advisor on Comprehensive Abortion Care (CAC)
**Challenges**

Kanyamanza added that although Rwanda’s leadership is committed to facilitating access to safe abortion services, there are still challenges that need to be addressed. He pointed out that religious influences, negative attitudes and beliefs of some health care providers, abortion-related stigma and cultural sensitivity forces victims and families to keep cases of rape and incest confidential.

He also pointed out that although the Ministerial Order on Abortion is clear—a woman seeking abortion services must sign a form affirming that they are telling the truth about whether they fall in the five categories of those that are legally permitted to have an abortion—some healthcare providers still require women to first report to the Rwanda Investigation Bureau (RIB), while others send them to Isange One Stop Centers.

Additionally, some hospitals do not accept Mutuelle de Santé for those seeking safe abortion services and those that do accept it, require transfers from health centers, even though the safe abortion process should begin at the hospital level according to the Ministerial Order on Abortion. This makes the process complicated.

“Other challenges include high costs, with an abortion procedure going for at least $150, long distances for poor women with no financial means and district hospitals that are affiliated to religious groups that do not offer the services,” he said.
Recommendations

Kanyamanza suggested training for hospital staff in Values Clarification and Attitudes Transformation (VCAT) at all levels at hospitals, health centers, as well as for local leaders and youth.

It was also suggested that advocacy efforts are scaled up to push RSSB to produce clearer instructions about payment of abortion services in hospitals and health centers for women insured by Mutuelle de Santé.

He called for more research on future task shifting in the provision of safe abortion services at health center level, by a trained and validated nurse or midwife to ensure efficiency and effectiveness under all circumstances.

Until today, I didn't know about the Ministerial Order on Abortion and more specifically, that there are categories of people who are legally permitted to have abortions.

The Supervisor of Community Health Workers in Gatonde Hospital in Kirehe District, Francoise Nzakizwanayo, admitted that before the orientation workshop, she was unaware of the Ministerial Order on Abortion and called for more such gatherings, which she said can improve service delivery in the medical field. “We have been dealing with an issue of unsafe abortions in our area of operation.

I am going to take this information and disseminate it widely within community workers that I work with and the communities that we serve,” she said.

The Data Manager of Rubavu Hospital, Samuel Siborurema, said that the orientation workshop was an ‘eye opener’ for service providers.

“Although our hospital welcomes those seeking safe abortion services, we don’t all have the same information and knowledge about safe abortion services. We have been filling the form based on our personal sentiments, but today, we have learnt about the rights of the patient and what is expected of us.

-Samuel Siborurema
The Data Manager of Rubavu Hospital
Before the government issued the Ministerial Order on Abortion, only seven safe abortion procedures were reported from 2012 to 2018. The small number was attributed to the challenges posed by the requirement of the Court Order at the time. Upon revising the law and removing some barriers in 2018, 610 cases were recorded between January to December 2020 and an additional 1109 cases in January to December 2021.

Current Status
In honor of International Youth Day 2022, HDI celebrated in Cyaruzinge where both youth and elders reflected on intergenerational solidarity; a theme that aims to create a world inclusive of all ages.

Opening with a traditional dance by the Youth Traditional Troupe of Cyaruzinge, both young people and elders gathered for a dialogue on the burden of teenage pregnancies, the importance of family planning and children’s rights.

Diane Uwase, hotline coordinator at HDI, put emphasis on the responsibility of young people to make informed choices on contraception and methods of safe sex.
Youth today have the opportunity to access resources for them to ensure a healthy sexual life. It is important that they understand contraception is an efficient method to prevent unwanted pregnancies and be aware of other methods of safe sex that not only work as contraceptives, but also help prevent Sexually Transmitted Infections and Diseases (STI, STD) including HIV/AIDS.

- Diane Uwase
Hotline Coordinator, HDI

Young attendees of the day mentioned the challenges that limit their access to contraception including not having a trusted source of information on available contraception, their use and places to access different methods of contraception.

This led to an open discussion on factors that contribute to high numbers of teenage pregnancies and methods to prevent these pregnancies.

“Poverty and unemployment are the leading cause of increasing teenage pregnancy. Elvis Benimana while facilitating the session highlighted that both elders and young people should be involved in preventing teenage pregnancies.

Collaboration between the two generations is crucial to tackle the issue of teenage pregnancies on all levels, in families and communities at large. The solution will be to increase access to education on SRHR.
On children’s rights, Diane Igihozo encouraged parents to participate in registration of their children as it helps during IGENAMIGAMBI and children are entitled to be registered.

“The process of registration can be done at birth at the hospital or 15 days after birth at the sector. When the due time has passed children can still be registered given one or both of their parents/guardian is present.” Igihozo said. “Although the process of registering children has been made easy, a number of children remain unregistered due to lack of information on registration and the know-how of the process. Therefore parents have the responsibility to understand children’s rights at the foundation level. This goes to education and health rights as well.” She continued

We encourage the youth to be aware of their rights in order to vouch for their welfare as it plays a key role in their development.
This August, we begun providing legal aid to female sex workers to acquire National IDs as well as have their children registered in the Civil Registration and Vital Statistics (CRVS) system. This activity was carried out in Nyarugenge and Gasabo districts. According to Annonciata Mukayitete, the HDI Senior Program Officer in Charge of Gender and Inclusion, this exercise is aimed at giving the women and their children an opportunity to access national services that are within their rights more easily.
“An unregistered person is considered unknown to policymakers and those who budget for the communities that serve us. This exercise is therefore aimed at supporting those who come to gain identification documentation that enables them to enjoy social services like community based health insurance among others. Being an unregistered member of the society limits the would-be beneficiary from accessing services that they are entitled to,” she said.

Mukayitete said that although this analysis was done in these two districts, the issue of unregistered adults and children was observed in almost all the districts in the country, especially Huye and Ruhanga.

“An unregistered person is considered unknown to policymakers. This helps the government to plan for the available resources based on the population. Being an unregistered member of the society limits the would-be beneficiary from accessing services that they are entitled to,” she said.

Challenges

Clarisse M, a mother of two, who attended the session said that at 39, she has never been registered in the CVRS system but was interested in changing the error. “My mother was a sex worker, and she too was unregistered before she moved to West Africa. I did not know many details about her, and although I know that my father was Rwandan, I had no information about him. That discouraged me when it was time to register for an identity Card. However, I am very keen to change that,” she said.

Clarisse hopes that by getting her national ID, she can also have her teenage children registered so that her family can begin enjoying some social welfare benefits including community-based health insurance scheme (Mutuelle de Santé).

22-year-old Jean Luc K says that both he and his mother do not have national IDs. He explains that his mother, who is a sex worker was also a child of sex worker and none of them knew who their fathers were. However, Jean Luc K says that he wants to break the cycle and pursue his right to an ID and then encourage his mother to do the same.
“I am determined to break this cycle because as a family, not being registered as citizens has cost us in many ways. We especially felt the repercussions at the height of the Covid-19 pandemic when we needed food but had trouble registering for it with the local authorities,” he said.

Although registration for a national ID is free, vulnerable women and children, especially those from key populations, continue to face challenges that discourage them from seeking out the service. The challenges include fear, shame or stigma that is faced by some single mothers, which results in delayed or late birth registration.

Additionally, there is still an issue of lack of awareness where some individuals still tie registration of births to legal marriage yet birth registration without established paternity is legal. As a result, there is an issue of reluctance to recognize the paternity of children born out of wedlock and consequent delay in registration.

In some cases, gender division of labor affects birth registration where there is still a misconception especially in some rural areas, that women are the ones with time to register births.

Although the CRVS system was overhauled in 2019 to allow health facilities to complete the registration of births that occur within their premises and for those that occur in the communities to be registered at the cell level, some vulnerable women and children continue to be unregistered. These processes therefore contribute to Rwanda’s vision to increase birth registration to 95% by 2025 by making “every life known and count.”
MY DREAM FOR TEEN MOTHERS IS COMING TRUE
- TUYISENGE

17-year-old Marlene Tuyisenge is a senior three student at Groupe Scolaire Nyabagendwa located in Ngema Sector, Bugesera District. Her dream is to be a journalist, a profession that she hopes can help her realize her passion to speak for others, fight injustice and do advocacy work towards supporting her peers, especially girls. Chosen among those who would be trained on advocacy and SRHR last year, Tuyisenge says that by the end of the program, she knew that this was the beginning of her long journey to stand-up for herself and others.

“The training opened my eyes to many possibilities. I didn’t know that any Rwandan is free to raise an issue affecting an individual or the society despite their age or social status. I am 15 years old. I didn’t know that it was possible for me to approach my leaders and actually be heard,” she said.
Besides the information and knowledge that the training imparted, Tuyisenge attributes her newfound confidence to the lessons she learnt from the advocacy sessions.

Tuyisenge took the lessons learnt from the training to her own parents. After a lengthy conversation, her father agreed to give her the support that she needed to fight for her childhood friend.

“My parents listened to me quietly and asked a few questions. Surprisingly, it is then that my father decided to accompany me on a visit to my friend’s family. We talked to them about the value of supporting the teenage mother to return to school. They were convinced and today, I am happy to say that she came back to school, and this month, she sat for her O’Level exams.”

“It was a big victory for all of us” she continued.

Besides using what she learnt to support a friend, Tuyisenge is also the Secretary of ‘Turengere Umukobwa’ Club at her school, a position that she has held for three years. She says that the 30-member group started a savings club, but has now allocated savings talks to Wednesday while Monday, Tuesday and Thursday evenings are specifically set aside to discuss issues that affect young people in their school and communities.

**Planning for the future**

Tuyisenge says that she is using her long school break to approach local leaders in her area and introduce the idea of taking what she has learnt to peers and parents within her community during communal cleaning Umuganda weekends as well as during the ‘Family Evenings’ commonly known as Umugoroba Wumuryango. She also hopes to be getting more such training opportunities and to later be a journalist who will specialise in youth and health related matters. As a journalist, I know that I will have an opportunity to reach more people and hopefully, change attitudes.
Partnership & Learning Experiences

This August, together our partners under the project “Strengthening Rwandan Civil Society Organizations’ Capacity to influence Policy”, we were paid a courtesy visit by Ms. Grethe Peterson, the CEO of AmplifyChange.

We updated Peterson on the work that we are doing around advocacy aimed at improving policy and action on SRHR issues including eliminating gender-based violence, addressing the causes of unsafe abortion, increasing access to comprehensive reproductive health services and challenging stigma and discrimination.
STAKEHOLDERS SPEAK

GIZ Rwanda @giz_rwanda

Just in: we are on day 1 of a 2-day workshop on fundamental principles of human rights under the constitution of 2003 revised in 2015 organised in collaboration with @HDIRwanda 4 security officers in @RuhangoDistrict. The Vice Mayor/Social Affairs is present 4 the opening remarks.

Empower Rwanda @EmpowerRwanda

This is the way to go....Thanks @HDIRwanda for organizing this vital dialogue and for valuing @EmpowerRwanda’s participation! Indeed, the next generations shouldn’t suffer from gender inequalities which the past generations negatively experienced! #WeAreGenerationEquality

Impanuro Girls Initiative @... · 11 Aug
We are grateful to be taking part of this insightful conversation between young people and policy makers from various sectors from across the country for the purpose of developing new strategies to achieve #GenderEquality in Rwanda.

#GenerationG

HDI Rwanda @HDIRwanda · 11 Aug
We are gathering for a 2-day Intergenerational Dialogue on Gender Justice, where young people and policy makers are sharing best practices and strategies; to build solidarity and catalyze bold, transformative, and ambitious solutions.

THINK OUT OF THE BOX!... · 14 Aug
Indeed this dialogue was highly needed. To underscore the fact that without gender equality and justice, the country is going nowhere.

HDI Rwanda @HDIRwanda · 11 Aug
We are gathering for a 2-day Intergenerational Dialogue on Gender Justice, where young people and policy makers are sharing best practices and strategies; to build solidarity and catalyze bold, transformative, and ambitious solutions.

M Edwards Rwanda @medsar_rwanda
The impact of the FAM Project for the future of family planning in Rwanda is really promising!

To keep strengthening the provision of FP information and services while also taking into consideration inclusivity is a key. #Kubonezurubyaro

HDI Rwanda @HDIRwanda · 6d
We are at the Marriott Hotel where we are meeting the Family Planning Sub-TWG and other FP actors to update them on the Fertility Awareness Method (FAM) Project and discuss on how we can strengthen FAM into...
HDI wishes to thank our partners and supporters

- Amplifychange
- Black Women’s Health Imperative
- Catholics For Choice
- Center for Disease Control
- Delegation of the European Union to Rwanda
- DFID
- East African Health Platform
- Femnet
- FOSI/OSIEA
- GIZ
- Great Lakes Initiative for Health and Development
- Global Health Corps
- Imbuto Foundation
- Ihorere Munyarwanda
- Ministry of Gender and Family Promotion
- Ministry of Health
- Ministry of Justice
- Ministry of Local Government
- Norwegian People’s Aid
- Plan International Rwanda
- Promundo
- Pygmy Survival Alliance
- Project San Francisco/Emory University
- Pyxera
- RBP Partners
- Rwanda NGO Forum on HIV Prevention
- Rwanda Society of Gynecologists and Obstetricians
- Rwanda Bio-Medical Center
- Rwanda Education Board
- Rwanda Governance Board
- Safe Abortion Action Fund/IPPF
- Sisterlove Inc.
- Society for Family Health
- Stephen Lewis Foundation
- Stop TB Partnership
- Tearfund
- The Center for Reproductive Rights
- The David and Lucile Packard Foundation
- The Embassy of Germany
- The Embassy of Sweden
- The Embassy of the Kingdom of Netherlands
- The Global Fund
- Uhai-Eashri
- UNAIDS
- UNFPA
- UNICEF
- Wellspring Philanthropic Fund
- World Health Organization
- Women’s Link Worldwide
- Ippf-Asociación Profamilia
- Institute For Reproductive Health
- Jhpiego/MCGL
- Rwanda Mens Resource Center
- The Newtimes