

HDI NEWSLETTER

JANUARY – MARCH 2022



East African activists convene to advance sexual and reproductive health and rights

Regional civil society organizations convened in Kigali in January for a two-day conference to discuss, share, and foster partnerships on access to safe abortion and sexual and reproductive health (SRH).

The conference was organized by Health Development Initiative (HDI) in coalition with Great Lakes Initiative for Human Rights and Development (GLIHD), Ihorere Munyarwanda (IMRO), and Rwanda NGOs Forum on HIV/AIDS and Health Promotion (RNGOF on HIV/AIDS & HP).

The conference gathered together CSO representatives from Rwanda, Burundi, Kenya, Uganda, Tanzania, South Sudan, and Democratic Republic of the Congo to learn from each other and share best practices, challenges, and in preparation

for the long-awaited East African Sexual and Reproductive Health Bill, which has been with the regional parliament for years now.

The countries in the region discussed how they can form partnerships to advance reproductive health rights but more specifically, the provision of safe abortion.

Dr. Aflodis Kagaba, Executive Director of HDI explained that “all our countries are not at the same level when it comes to safe abortion. We have some countries where gender-based violence is still high and where safe abortion is still treated as a taboo subject. **We have to work together and ensure that not one more person dies in our region due to unsafe abortion.**”



*Looking at the **EAC Sexual Reproductive Health Bill** that is currently being tabled at the East African Legislative Assembly, **this conference is crucial because if there are disagreements between member states, there is a chance that the Bill will not be enacted. We have a chance here to ensure that we agree on each provision,**” she noted.*

- Mwikali Kivuvani,
The Executive Director of the Sexual Reproductive Alliance in Kenya

A 2012 report released by the New York-based Guttmacher Institute in partnership with the University of Rwanda's School of Public Health and the Ministry of Health indicates that about 18,000 women and girls in Rwanda require treatment annually from the effects of unsafe abortion.

The Guttmacher Institute report indicated that about 60,000 abortions are carried out in Rwanda annually and that the government spends \$1.7 million (Rwf1.1 billion) annually on treatment for complications resulting from unsafe abortion.

The report does not indicate the financial toll unsafe abortions and their consequences have on the women who seek them.

Dr. Kagaba encouraged the participants to share knowledge and expertise to advance sexual and reproductive health (SRH) in their countries.



*...We have different skill sets and ideas. We should exchange our experiences and scale up our **partnerships through common strategies, research and advocacy**. Let us use this conference to learn what each one of us is doing in the areas of SRHR and access to safe abortion and how we best we can collaborate to do even better...*

- Dr. Aflodis Kagaba, Executive Director of HDI



Commenting on the matter, Fortunate Kagumaho, the Communications Coordinator of Reproductive Health Uganda (RHU) demonstrated some of the SRHR inequalities still present in Uganda, more specifically in cases of access to safe abortion.

He pointed out that in Uganda, 16 women die every day because of pregnancy-related complications, and of those, 8% are a result of unsafe abortion.

“If you put 16 women in a car every day and it crashes, that

would be a national issue. So why is this happening in Uganda and no one is saying anything?” he wondered.

He pointed out that such a high number of unsafe abortions should be a matter of concern and that this contradicts the commitments made when countries signed to deliver Goal 3 of the Sustainable Development Goals, which states that countries will ensure good health and wellbeing.

The Executive Director of Alliance Burundaise Contre le

SIDA et pour la promotion de la santé (ABS), Pierre Claver Ndayizeye admitted that Burundi is still lagging behind in the provision of safe abortion services to women who need them.

The participants discussed their countries’ abortion laws and particularly pointed out that the existing laws and policies on abortion can be interpreted differently by the judicial systems, making it difficult for women and the medical community to understand when abortion is permitted.

If you look at other countries, we [Burundians] are still lagging behind. A pregnant woman in our country is not allowed to have an abortion unless the pregnancy gravely endangers the woman’s health. Otherwise, abortion is punished by imprisonment and a fine and this includes victims of rape, la santé (ABS),

- Pierre Claver Ndayizeye

The Executive Director of Alliance Burundaise Contre le SIDA et pour la promotion de la santé (ABS).

Mwikali Kivuvani, the Executive Director of the Sexual Reproductive Alliance in Kenya touched on the EAC Reproductive Health Bill and called on the CSOs to agree on provisions of the Bill before it comes before parliament again. Among other suggestions, **the Bill will oblige each partner state to include comprehensive sexuality education in school curricula and outline the roles of religious and community leaders in providing SRHR information and services, among other provisions.**

New Research: Study on the Lived Experiences of the LGBT Community in Rwanda

In collaboration with African Population and Health Research Center (APHRC), HDI held a dissemination meeting on the findings of the 'Study on Lived Experiences of LGBT Community in Rwanda'.

The study seeks to provide insights into how LGBT individuals in Rwanda are living and the factors that contribute to their social exclusion. The study also seeks to examine appropriate recommendations and to inform interventions that tackle indifference and hostile attitudes toward the LGBT

community. The study was conducted in six districts in the City of Kigali and Southern Province targeting individuals aged 18 and older who identify as LGBT, and the general population who are not part of the LGBT community.

Speaking at the opening of the meeting, the Executive Director of HDI, Dr. Aflodis Kagaba thanked APHRC and the Swedish International Development Agency (SIDA) for the expertise and resources that made the study possible.



...So far we have had a very positive response from the government and their willingness to engage. Let's all ensure that we continue to combine our efforts to create a more inclusive, more enabling environment that is in line with the government's core principle of leaving no one behind...



He applauded the government for making strides in terms of a good policy framework that ensures that no one is left behind. However, he pointed out that discrimination towards LGBT community members is still happening and many are still struggling.

He encouraged other civil society organisations (CSOs) that work on human rights, inclusive development, and gender to take advantage of the government's willingness to engage on such topics.

Study Highlights

The study involved interviews with 1,254 heterosexual people and 499 LGBT. Of the 499 LGBT individuals interviewed in the study, 152 (30.5%) reported having faced discrimination while trying to rent houses, 119 (23.8%) encountered discrimination from safety and security organs, 118 (23%) while seeking education and 113 (22.6%) experienced discrimination while trying to access healthcare services.

The majority (182 representing 41.7%) had faced discrimination while participating in cultural events while 224 (44.9%) had been discriminated against while expressing religious beliefs. 17% of the participants reported having avoided someone because they were an LGBT person in the 12 months preceding the survey, 21% stated that they used derogatory names to refer to an individual because of that person's sexuality while 3% reported that they had physically harmed someone because of that person's sexuality. 48% agreed that people in the community were fearful of LGBT people, and 36% agreed with the statement that it is unsafe to discuss LGBT issues in Rwanda. Of the 499 respondents, approximately a quarter (24%) of respondents reported moderate to severe depressive symptoms.



Study Recommendations

The study findings demonstrate low awareness of LGBT rights among the general Rwanda community, which contributes to the social exclusion of LGBT persons.

To address the social exclusion of LGBT people, the report recommends governmental and non-governmental organizations to:

- *Conduct awareness campaigns among LGBT people to ensure that they know their human rights and policies that protect them*
- *Implement awareness raising campaigns in the general population to create acceptance of the LGBT community*
- *Train local leaders and public officials to create environments that are open and friendly to LGBT persons*
- *Involve faith leaders in influencing community perceptions of the LGBT community*
- *Enact a comprehensive anti-discrimination legislation and policies that address all forms of direct and indirect discrimination including that based on sexual orientation and gender identity*

Speaking on behalf of APHRC, Dr. Emmy Igonya, an Associate Research Scientist, told the participants that there are still challenges in conducting research in areas that involve sensitive topics like lived experiences of the LGBT communities on the African continent.

She thanked HDI for involving other local CSOs and giving them an opportunity to acquire basic skills in conducting research. “We worked with HDI at every step of putting this research together and I was particularly impressed that they brought

in other CSOs that worked with us so they got training on conducting research. We are hoping that we shall continue such collaborations,” she said.

Prior to the dissemination meeting, HDI and APHRC had conducted a validation meeting in Huye District, Southern Province where they presented the study findings to the members of the community for their review and comments.



Research: Injecting Drug Use Practices and HIV infection among People Who Inject Drugs in Kigali

We held a dissemination meeting on 'Injecting Drug Use Practices and HIV infection among People Who Inject Drugs' in Kigali. Conducted by HDI, the study was also published in the Harm Reduction Journal, a peer-reviewed medical journal covering harm reduction with respect to the use of psychoactive drugs.

The meeting also provided a platform for open discussions on the feasibility of providing harm reduction interventions and other health and social services to

People Who Inject Drugs (PWID). Dr. Jean Olivier Twahirwa Rwema, who is among those who led the research team said that the study results showed that 99% of study participants reported heroin as their drug of choice and called for further research to determine which other drugs are available for the users. He added that there is still suboptimal People who Inject Drugs programming in Rwanda.

He pointed out that **according to the research, at least 17% of PWID start injecting before they turn 18 years**

old. There is also a high prevalence of PWID in Kigali where findings showed that 9% live with HIV and the majority of PWID reported to have shared needles. Findings show that 91% mentioned having shared a needle in their lifetime.

The participants also pointed out that harm reduction interventions need to be supported by other services including life skills training, psycho-social support, stigma mitigation, and response to social issues affecting PWID.

Research recommendations



The research found that PWID in Kigali have a disproportionate burden of HIV and recommended a minimum package of HIV services



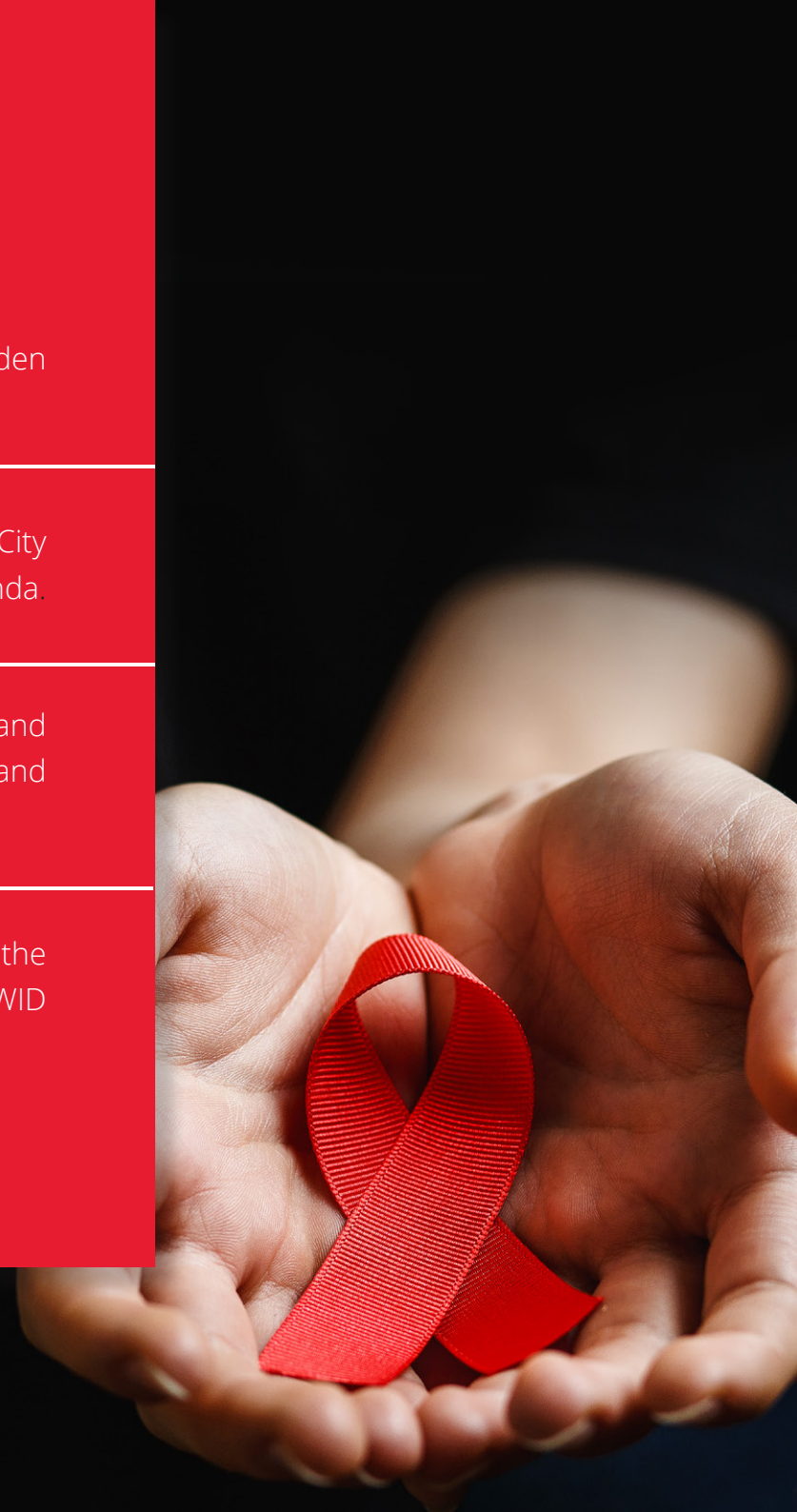
It also pointed out the high prevalence of needle sharing within Kigali City and recommended a needle and syringes program for PWID in Rwanda.



Additionally, the report points at unmet overdose prevention and addiction treatment needs leaving a gap for overdose prevention and addiction treatment interventions in Rwanda



Particularly, the research report recommends tailor interventions to the specific needs of different demographic groups especially female PWID in Kigali who have distinct vulnerabilities





Training: Equipping adolescent leaders to influence policy on child rights

During the month of February, we engaged adolescent leaders from Bugesera and Gatsibo districts on how they can advocate and effectively contribute to policy and promote child and adolescent rights including Sexual and Reproductive Health and Rights (SRHR).

Adolescents are in the best position to advocate for their access to SRHR information and services, yet they are often left out of the conversation. By equipping them with the skills to participate in policy-making spaces, adolescents can confidently influence policies and laws that affect their lives.

The adolescents learned about the intersection between the Constitution and some laws like those on child protection and human reproductive health and rights.

They learned that an advocate should have leadership and passion in representing his/her peers in case they want a problem to be solved. The adolescents understood that they have to analyze the problem with allies before embarking on advocacy actions to solve it.

Raising voices of young women leaders in the fight against teenage pregnancies and harmful social norms



Miss Rwanda is one of the platforms that guarantees a wider reach of information to young women and girls who play a big role in influencing and advocating for their fellow youth. As part of its partnership with Miss Rwanda, Health Development Initiative (HDI) trained Miss Rwanda finalists during their Bootcamp at Hotel Lapalisse Nyamata, on gender equality, feminism and access to sexual and reproductive health and rights information and services.

During the Bootcamp, Juliette Karitanyi, Director of Communications and Ingabire Emery Jocelyne, Director for Community Outreach at HDI, took the finalist through two sessions.

Discussions centered around gender equality with a focus on social norms that contribute to gender inequalities, access to sexual and reproductive health and rights and prevention of HIV.

Ingabire delivered a discussion on fighting teenage and unwanted pregnancies. She shared with finalists ways to track one's menstrual cycle but also share cycle beads app that she called a modern runigi "Cycle beads".

Juliette also delivered a discussion on harmful social norms that contribute to gender inequalities. She highlighted some of the negative stereotypes that restrict women's

ability to thrive economically and socially. During an interview on one of the most popular youtube platforms in Rwanda, Miss Photogenic 2022, Ndahiro Queen mentioned that among partners that interacted with them during the boot camp, she enjoyed sessions with HDI Rwanda.

HDI uses this platform to empower these young women leaders to contribute to the fight against gender inequalities in Rwanda and teenage and unwanted pregnancies in Rwanda.

Contestant Bahali Ruth emerged the winner of the Sexual and Reproductive Health Challenge. She has joined the HDI team starting in the month of April as a youth ambassador working with young people and teenagers in advancing sexual and reproductive health and rights through arts.



"We had very great conversations during the Bootcamp, but one that really impacted me was a conversation with HDI Rwanda. I liked the fact that they tackled my project which fights against harmful social norms such as power dynamics in couples. They also displayed around 12 contraceptive methods that I had never heard about."

- Ndahiro Queen



Celebrating International Women's Day at HDI

As part of International Women's Day and in observation of Women's History Month, HDI staff and partners reflected on the theme from International Women's Day earlier in the month of March—gender equality today for a sustainable tomorrow—under the International campaign #BreakTheBias. and HDI's campaign #DuhindureImyumvire and #Hinduralmyumvire that calls to take action on gender stereotypes, bias and discrimination, because bias often creates a barrier for women to thrive.

HDI joined the national celebration of International Women's Day in Gakenke, under the theme: "Uburinganire n'Ubwuzuzanye mu mihindagurikire y'ibihe" which is translated as "Gender equality to address climate change". This celebration reflected the achievements, challenges, and advanced gender equality in the context of the climate crisis as one of the greatest global challenges and therefore urge action about the issue. We also held a Gender Cafe, which is an HDI staff

monthly discussion centered around gender issues. During the women's history month, a dialogue titled "Gender mainstreaming from a feminist perspective" moderated by our Senior Program Officer in charge of Gender and Social inclusion, Annonciata Mukayitete together with Feminist Clementine Nyirarukundo and Gender Champion Virgile Uzabumugabo. Participants were enlightened on feminism values and principles such as dismantling bias, Inclusion, responsibilities and transparent use of power, and accountability.

As part of its partnership with Miss Rwanda Organization, Miss Rwanda 2022 finalists also dropped a video during the women's history month calling everyone to take action and #BreakTheBias. **Staff and partners shared messages of encouragement, calling for a daily individual and collective effort in breaking the bias toward creating a world free from violence where everyone enjoys their full rights in freedom and in dignity.**

Partnership & Learning Experiences



We had a courtesy visit from the Embassy of the Kingdom of the Netherlands (EKN) team in Kigali. During the visit, the discussion centered around the work HDI is doing on social inclusion with the LGBT community.

In the month of March, we received a team from Norwegian People's Aid (NPA) who paid us a visit aimed at monitoring activity progress under our Public Policy Information Monitoring and Advocacy (PPIMA) project partnership. The discussion centered around the progress assessment report on LGBTI and sex workers' rights in Rwanda. We also discussed the analysis report on the social economic and cultural rights of special groups in Rwanda.

The discussion ended with reviewing the advocacy roadmap for 2022, particularly on policy topics specifically on rights abuses, stigma, limited access to health services for LGBTI and sex workers.





We were paid a visit by representatives of **the Youth Alliance for Reproductive Health-YARH from the Democratic Republic of Congo**, a youth organization that aims at promoting Sexual and Reproductive Health and Rights, and the well-being of adolescents. We exchanged experiences on sexual and reproductive health with a focus on access to safe abortion.

We also received a team from Kasha (an E-commerce company for women's health, personal care, and beauty in East Africa). During the learning visit, the Kasha team was interested in getting more understanding on how safe abortion digital interventions operate on our hotline.



Stakeholder's speak

 **Matilda Ernkrans** 
@ernkrans



Inspiring discussion with  civil society actors on inclusion, participation and accountability. @HDIRwanda, @NARwanda, @AmahoroR, @chante_MKS #DriveforDemocracy

 **Jean d'Amour NIYONKURU**
@NiyonkuruJeand4

Replying to @Annemwiza and @HDIRwanda


Ooh, this reminded me a friend who had these exact words from elder men. They deserve respect and rightful world, This is harming the mind of human being and falls in #GBV and it's openly violating #HumanRights

#ToallMen, respect to sisters and teen/single mothers.
@HDIRwanda


 **Jane UWIMANA** 
@Janeuwimana

#Kumbe
@HDIRwanda empowering adolescent leaders with skills on advocacy around sexual reproductive health and rights.
@1023KISSFM
@SengogaChristo1
@PanoramaNewspaper1
@NezaTubeHo – at la Palast Rock Hotel



 **UR Public Health Students Ass...**
@urphsa

We're grateful to ISHIMWE Alliance Stella for her devoted time to be with us in this activity. We're looking forward to blossomed partnership with @HDIRwanda in preparing our brothers and sisters for a better future that is against #STDs and #unwanted pregnancies.



HDI wishes to thank our partners and supporters

- AMPLIFYCHANGE
- BLACK WOMEN'S HEALTH IMPERATIVE
- CATHOLICS FOR CHOICE
- CDC
- DELEGATION OF THE EUROPEAN UNION TO RWANDA
- DFID
- EAHP
- FEMNET
- FOSI/OSIEA
- GIZ
- GLIHD
- GLOBAL HEALTH CORPS
- IMBUTO FOUNDATION
- IMRO
- MINISTRY OF GENDER AND FAMILY PROMOTION
- MINISTRY OF HEALTH
- MINISTRY OF JUSTICE
- MINISTRY OF LOCAL GOVERNMENT
- NORWEGIAN PEOPLE'S AID
- PLAN INTERNATIONAL RWANDA
- PROMUNDO
- PSA
- PSF/EMORY UNIVERSITY
- PYXERA
- RBP PARTNERS
- RNGOF
- RSOG
- RWANDA BIO-MEDICAL CENTER
- RWANDA EDUCATION BOARD
- RWANDA GOVERNANCE BOARD
- SAAF/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 FOUNDATION
- WHO
- WOMEN'S LINK WORLDWIDE
- IPPF-Asociación Profamilia
- IRH
- JHPIEGO/MCGL
- RWAMREC

