



Inspiring Healthier Lives



Rwanda

Inspiring Healthier Lives

Annual Report 2020

FOREWARD

Despite COVID 19 interruptions during this reporting period, a lot has been achieved due to strategic partnerships within both public and private sector with overall aim of providing life-saving products, clinical services as well as social behavior change communications (SBCC) to empower Rwandan's most vulnerable populations lead healthier lives through enhanced market driven solutions.

At SFH Rwanda, Client centered programming is the cornerstone of our interventions and as such, beneficiaries have been engaged in program design, implementation as well as monitoring as much as possible. With this belief, SFH Rwanda in 2020 embarked on a truly impactful journey as we implemented diverse public health interventions in HIV/AIDS, Reproductive health, Malaria, Maternal child health, WASH and systems strengthening.

HIV/AID prevention: Finding new positive cases, linking them to care and supporting them to adhere to treatment as well as counselling those found negative on how to stay negative was at the core of our programming. As such, working with peer educators from the target audience (FSWs, MSM) and health centers, Voluntary Counselling and testing sessions were conducted using a combination of community VCT, Community mobile and Community Index modalities. This was supplemented by provision of branded condoms, self- testing kits, support the initiation of PrEP for KPS as well as audience targeted SBC. This was to bring care and services right to beneficiaries and delight them with great health care experiences for better healthcare outcomes

Family Planning/SRH: Breaking down barriers (access, behavior, poor counselling, discontinuation etc) that limit uptake of modern contraceptives among women of reproductive age (15-45), promoting couple communication and spousal support was the focus of our intervention this year. Targeted SBC interventions coupled with service provision during community outreaches and social marketing of affordable modern contraceptive products (pills, injectables and condoms) and training of service providers ensured that we are reaching our client "SARA" with quality services and affordable products hence increasing adoption and therefore BETTER lives for families!

For the youth/ adolescents, with more access to technology, Young people more than ever need programs that reimagine the way sexual health services are designed, delivered, measured and evaluated. Youth-friendly information and services about contraception need to be easily accessible to them and not necessarily in a clinic setting for great health impact.

Purposefully, SFH has launched a digital platform(website) that aims to improve the health and livelihoods of urban and semi-urban adolescents (12-19 years). Co-designed with Rwandan youth, this Direct-to-Consumer platform weaves together choose-your-own-adventure storylines, a robust FAQ library, online ordering, and a clinic locator to deliver integrated age-appropriate SRH information, employment skills, and linkage to high-quality, youth-friendly services.

Malaria Prevention: CHWs as the 1st line health care workers are very key for impactful malaria prevention efforts. Therefore, empowering CHWs to sustainably support communities adopt better and healthy practices was at the core of our 2019 malaria prevention programming. CHWs were trained on effective communication strategies (IPCs), product use, provided mosquitoes repellents(seedstock) for sale and generation of profits. These economically empowered and trained CHWs have organized several SBC interventions including HHs that have influenced healthy practices among communities. SFH Rwanda Supported the Government of Rwanda to develop A regional malaria Strategic plan as well as its costing through Malaria cross border initiative workshops of EAC/DRC National Malaria Program Managers.

Water, Hygiene and sanitation: The practice of safe sanitation and hygiene behaviors is a pre-condition for health and development. Easing access to point-of-use safe water products (Sur'eau and P&G) to disinfect household water at low cost as well as strengthening targeted district authorities' capacity to achieve universal access to basic sanitation services were our focus under WASH

Systems strengthening: During this reporting period, SFH Rwanda accelerated her efforts during this reporting period in systems strengthening through construction of health posts under "Girubuzima brand"; Construction of early childhood development (ECD) Centers, upgrading of Kagitumba health center and piloting "second generation" health post models. Training/ capacity building of service providers on new service delivery package and maternity standard operating procedures (SOPs) was also done in order to improve access to primary care services for better health outcomes especially in the rural areas.

COVID 19 Prevention & Treatment: In partnership with plan International, CDC-Africa/Amref and SCJ, SFH Rwanda actively supported MOH/RBC in its efforts of combating the spread of COVID19 especially through community awareness, PACT Initiative the Digitalization of CHWs education on covid-19 outbreak as well as case management.

Lastly, we thank our partners and our funders, like MOH, USAID, CDC, Imbuto, Abbott, GF, SC Johnson, Africa CDC/Amref and other Donors without whom, none of this would have been possible.



Manasseh Wandera Gihana
Executive Director

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ACRONYMS

ANC	Antenatal Care
ASRH	Adolescent Sexual Reproductive health
ARV	Ant retroviral
BCC	Behavior Change Communication
CBOs	Community Based Organizations
CBD	Community Based Distribution
CDP	Center for Disease Control
CHWs	Community Health Workers
CPR	Contraceptive Prevalence
CYP	Couple Years of Protection
DALYS	Disability Adjusted Life Years
DHS	Demographic Health Survey
DoD	Department of Defense
ECD	Early Development Center
FAQ	Frequently Asked Questions
FP	Family Planning
FY19	Financial Year 2019
GoR	Government of Rwanda
GP	General Population
HC	Health Center
HF	Health Facility
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HVST	HIV Self Testing Kits
IEC	Information Education Communication
IPC	Interpersonal Communication
ITN	Insecticide Treated Nets
IUD	Intrauterine
JADF	Joint Action Development Forum
KP	Key Population
LA/ PMS	Long Acting and Permanent Methods
LLINs	Long Lasting Insecticide-Nets
MARPS	Most at Risk People
MCH	Maternal and Child Health
M&E	Monitoring and Evaluation
MoH	Ministry of Health
MoPDD	Malaria and Other Parasitic Disease Division
MNCH	Maternal newborn and Child Health
MSM	Men who have sex with men
MVU	Mobile Video Unit
NCD	None Communicable Diseases
NGO	Non-Governmental Organization
NSP	National Strategic Plan
PSI	Population Service International
PNC	Postnatal Care
PP	Priority Population
PPCP	Public Private Community Partnership
PrEP	Pre-exposure prophylaxis

QI	Quality Improvement
RBC	Rwanda Biomedical Center
RBS	Rwanda Bureau of Standards
RDF	Rwanda Defense Forces
RH	Reproductive Health
RHCC	Rwanda Health Communication Center
RSMP	Rwanda Social Marketing Program
SBC	Social behavior Change
SCJ	SC Johnson
SFH	Society for Family Health Rwanda
SGHPs	Second-generation” health posts
SRH	Sexual Reproductive Health
STIs	Sexually Transmitted Infections
TFR	Total Fertility rates
TWG	Technical Working Group
UmC	Umurage Communication for Development
UNAIDS	United Nations Program on HIV and AIDS
USAID	United States Agency for International Development
USG	United States Government
VCT	Voluntary Counselling and Testing
WASH	Water, Sanitation and Hygiene
YLABS	Youth labs for Development

1.0. INTRODUCTION

Society for Family Health (SFH) Rwanda is a legally registered Rwandan NGO since 2012 when it transitioned from PSI/ Rwanda with the support of GoR and is the leading Social Marketing and behavior change communication (BCC) Organization with cutting edge and innovative business approaches that empower vulnerable people to adopt healthier solutions for healthier lives.

As a local organization, we are committed to working in partnership with communities, Government, civil society and the private sector around the country to bring about sustainable, impactful changes that improve the lives of the target audience.

Vision, Mission and Values

The vision of SFH is to achieve *Healthier lives for Rwandans*. Society for Family Health is driven by a mission *to use evidence-based health promotion innovations and partnerships to empower Rwandans to improve their health*. Society for Family Health achieves her purpose through Innovation, Integrity, Accountability, Long -term commitment, results focused, efficiency and Consumer centered.

Priority Health Areas:

HIV/AIDS; Family Planning & Reproductive Health; Malaria; Maternal, Newborn & Child health, Water, Hygiene and Sanitation (WASH), Health Systems Strengthening and Primary Health Care

Solution Areas

- Behavior changes communication (Community engagement& awareness)
- Social marketing of health products through Private sector distribution approaches
- Capacity Building of health care workers
- Digital health
- Policy and advocacy
- Measurement (Monitoring & Evaluation)

OFFICES (HQ & Regional Offices)	Staff+ Volunteers	Projects in 2020
5	124	12

SUMMARY OF PROJECTS IMPLEMENTED

TITLE OF PROGRAM/PROJECT	PROJECT SCOPE	PROJECT DURATION	DONORS	GEOGRAPHIC FOCUS
CDC HIV Project	The project aims at providing HIV prevention and treatment services to key populations (KPs) in Rwanda through finding new positive using 3 testing modalities (community_index, community_VCT, and community_mobile); maintaining positive KPs on treatment to attain viral suppression, as well as providing prevention services to KPs including provision of PrEP and HVST kits.	5 years (2019-2024)	CDC/PEPFAR	currently operating in 90 health centers (HCs) in 23 districts of Rwanda
BAHO NEZA	Baho Neza project's purpose is to support the GOR to improve UHC strengthening the capacity of health posts and ensure services are available at cell level and to improve entrepreneurship skills for health post operators as well as health care providers.	3 yrs	Imbuto/ Buffet	30 Districts
INGOBYI	Ingobyi Activity" is a program intended to improve the quality of reproductive, maternal, newborn and child health (RMNCH) and malaria services, in a sustainable manner with the goal of reducing infant and maternal mortality in Rwanda. It is funded by IntraHealth International.	5 years (2018-2023)	USAID/ Intrahealth	20 Districts
Cyber Rwanda	CyberRwanda is a digital platform that aims to improve the health and livelihoods of urban and semi-urban adolescents (12-19 years). platform weaves together choose-your-own-adventure storylines, a robust FAQ library, online ordering, and a clinic locator to deliver integrated age-appropriate SRH information, employment skills, and linkage to high-quality, youth-friendly services.	4 years: (2019 to 2022)	USAID Washington/ Ylabs	8 districts
SC Johnson Malaria project	The SCJ Targeted Expansion program is focused on social marketing of mosquito repellents for malaria prevention and Social Behavior Change Communication (SBCC) in community. Supporting the implementation of EAC and DRC Cross Boarder Malaria initiative	Ongoing based on the availability of funds	SC Johnson	Mosquito Repellents distribution in 10 districts
Rwanda Social Marketing Program (RSMP)	The goal of the extended program is social marketing of condoms with the following objectives: Objective 1: increased availability and access to socially marketed condoms in Rwanda; objective 2: increased distribution and promotion of free condoms among DREAMS beneficiaries and objective 3: increased capacity of SFH.	2019 - 2022	USAID	National level

Access to F Products	Social marketing of Plaisir, Pills and Injectables	Ongoing	UNFPA	National level
HIV Prevention Among Rwanda Defense Forces (USG Department of Defense)	HIV prevention program among the members of the Rwanda Defense Forces (RDF), their families and communities surrounding military bases.	2017-2020	DoD	National level 30 districts
HIV Prevention among General population	GF previous framework ended in December 2017 and the new award started in April 2018 up to 2020. GF HIV activities are implemented country wide (30 districts) and they include Social marketing of Plaisir condoms	7 years 2013-2020	Global Fund Ministry of Health, SPIU	National level 30 districts
HIV Prevention among the adolescents in Gasabo District	The overall objective of the project is reduced HIV incidences and unwanted pregnancies within the adolescents aged 14-25	1 year (2020)	UNICEF	Gatsibo District
Hygiene and Sanitation Promotion	The overall objective of the program is to strengthen the district authorities' capacity to achieve universal access to basic sanitation services.	30 months July 2017-January 2020	UNICEF	11 districts
Systems Strengthening (Abbot)	A pilot project implemented in partnership with MoH and Abbott create a new model for decentralizing healthcare in the country. The pilot's goals are: 1) create a "second generation" health post that brings high-quality services within walking distance of where people live; 2) prove it works; and 3) help catalyze expansion of the model across the country and beyond.	Ongoing based on the availability of funds	Abbot	Bugesera District
PACT Initiative project on the Digitalization of CHWs education on covid-19 outbreak	A pilot Project allowing to enhance and support the community-based interventions of COVID-19 outbreak in Rwanda. This specific intervention aimed at enhancing the capacity of 1,000 CHWs from 10 districts near the borders to conduct active case and contact tracing at community level. The PPEs were distributed to the CHWs to project themselves to spread the covid-19 and also infrared thermometers to screen for fever in the communities.	5 months October 2021 to March 2021	Africa CDC/ Amref-Africa	10 Districts near the boards

ANNUAL IMPACT AT A GLANCE

A. Social Marketing:

The distribution of 17,317,914 condoms (Prudence& Plaisir), 156,520 cycles of confidence pills, and 20,060 Doses of Injectables led to the provision of 278,630 DALY'S, 129,884 CYP while averting 813 Deaths and 36,580 unintended pregnancies.

In addition, the distribution of 99,045 bottles of Sur'eau and 1,147,638 sachets of P&G disinfected 110,521,350 liters of drinking water hence contribution to the reduction of diarrhea related diseases

B. HIV Prevention

- ✓ 902 individuals out of the 40, 247 individuals tested are aware of their positive status and have been effectively linked to care and treatment.
- ✓ 2,064 new eligible clients were initiated on PrEP hence reducing new infections among key populations (Kps)
- ✓ 20,350 HIVST kits were distributed easing access and availability of testing services for people located in hotspots and who otherwise do not use testing services especially KPs and their partners

C. RMNCAH social Behavior Change Communication.

- ✓ 5500 new users adopted modern contraceptives, limiting family size and improving their health as well
- ✓ CHWs' IPC sessions led to the distribution of 78,418 Coils, 10,418 Off lotion tubes and 110,0866 off tube sachets and these contributed to the reduction of malaria incidences in targeted districts

D. WASH

- ✓ 26,376 households were triggered to construct or upgrade their latrines. 28,137 additional handwashing facilities were registered as well improving the lives of communities

2.0. 2019/2020 IMPLEMENTATION RESULTS

2.1. Social marketing of Health Products

To ensure access and availability of various health products under its social marketing portfolio, SFH Rwanda during this reporting period distributed condoms (Plaisir& prudence), Confidence Pills & Injectables, water purifiers (Sur'eau & P&G), Mosquito nets and Mosquito repellents (Coil, Off Lotion) through a well-established private sector distribution channel consisting of wholesalers, semi wholesalers and retailers. **Eighteen (18)** wholesale outlets at district level, **143 cell level outlets** were created while **3,025 outlets** in all the 30 districts were supervised to ensure effective distribution of the health products. **Special events** were organized as well to create demand for health products. In addition, to ensure continued distribution of health products during lockdown and travel ban period between provinces in a bid to prevent the spread of COVID 19, SFH requested for a special permission from MoH.

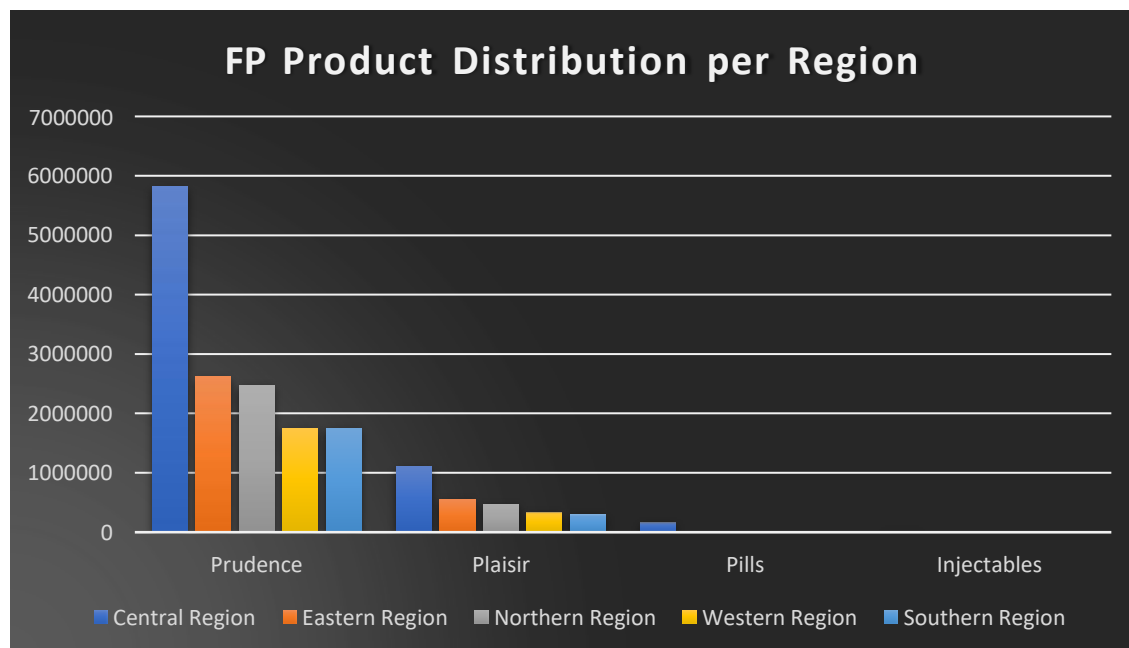
The summary of the products distributed in this reporting period is provided below:

Table 1: Products Distributed in the reporting Period

Products	Annual Targets	Annual Achievements	% Achievements	Comments
Prudence	15,159,375	14,545,348	96	on track achievement
Plaisir	2,500,000	2,772,566	111	Over achievement due to the availability of the product, new depharmaceutical outlets created as well as increased sales efforts
Pills	79,860	156,520	196	
Injectables	29,040	20,060	69	Underachievement due to free injectables to private clinics that have been our clients by MoH
Sur'eau	100,032	99,045	99	on track achievement
P&G	1,135,000	1,147,638	101	Overachievement due to FH that purchased large quantities
Baygon	140,112	78,418	56	Under achievement is due to limited budget for sales through outlets, stock out of off lotion tube as well as COVID 19 prevention measures
Off lotion tube	34,560	10,561	31	
Off lotion Sachets	172,800	110,866	64	
Mosquito nets	10,500	7,683	73	

Data source: Sales Reports, triangulated with CTL

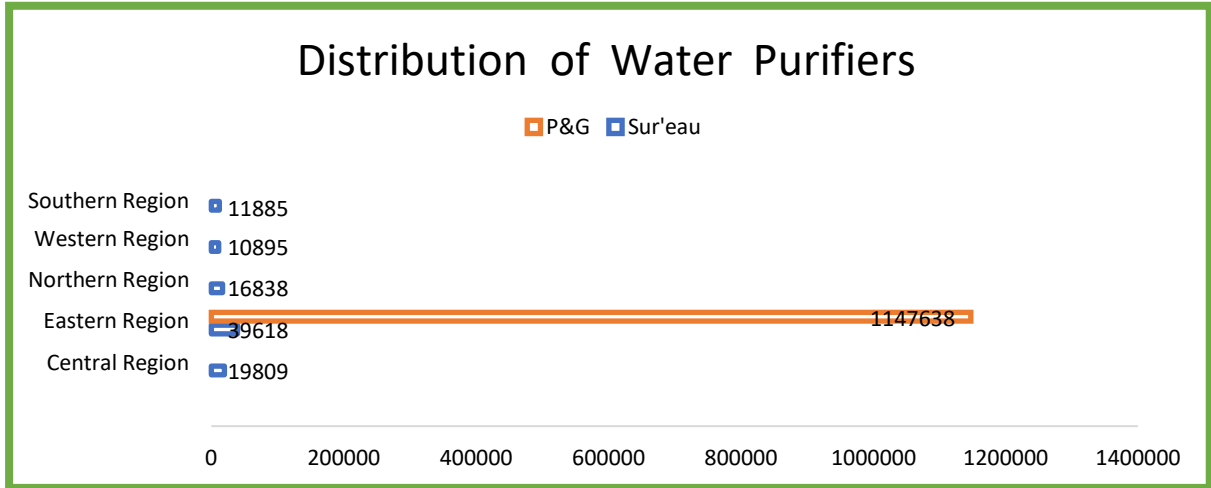
Graph1: Family Planning/HIV products distribution per region



Data source: Sales Reports, triangulated with CTL

- Condoms (Plaisir and Prudence) were distributed majorly in Central region due to the presence of many wholesalers in Kigali city as well as potential clients (bars, hotels etc)
- Pills and Injectables are exclusively sold in Kigali through pharmaceuticals and private clinics.

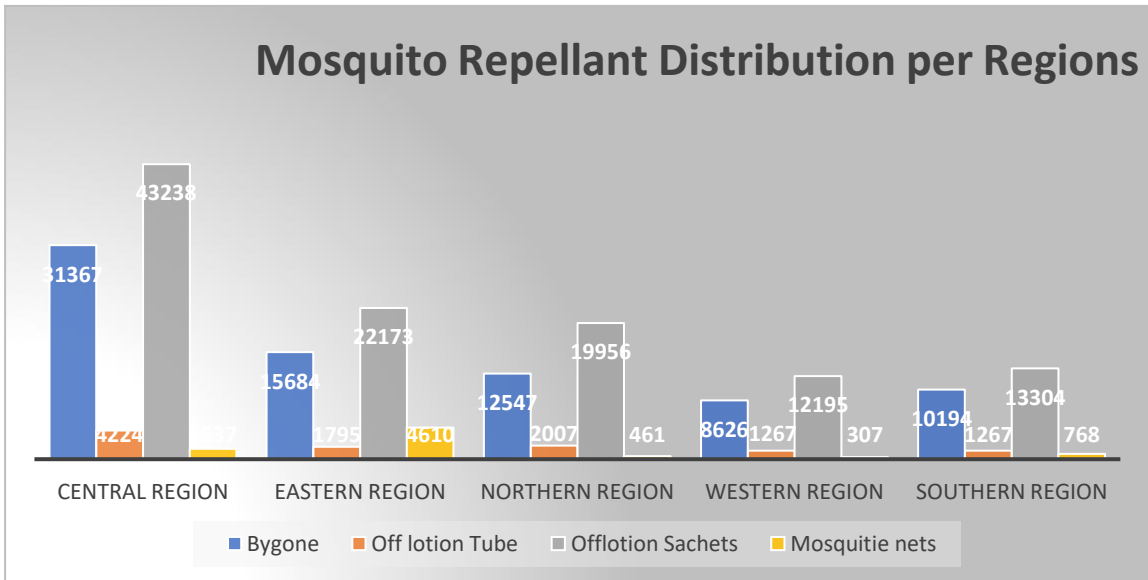
Graph 2: Distribution of Water Purifiers (Sur'eau & P&G) per region



Data source: Sales Reports, triangulated with CTL

- P&G (water purifier for turbid water) was exclusively distributed in the Eastern zone due to our partnership with Food for Hungry that implements a WASH project in Nyagatare

Graph 3: Distribution of mosquito repellents & LLINs per region



Data source: Sales Reports, triangulated with CTL

- Off lotion sachets and bygone were the most distributed products through CHWs
- Mosquito nets in the eastern region, a majority were distributed for free in Mahama refugee camp with support from SC Johnson



Outlet supervision and creation

Demand creation special event (Road show) in Kirehe District

2.2. Behaviour change communication (Community engagement & awareness),

Using audience targeted interventions, SFH during this reporting period conducted social behavior change activities at community and individual levels to increase knowledge on HIV, FP, Maternal child health, Malaria as well as Hygiene and sanitation. At individual level, SFH aimed at addressing knowledge, attitudes, and practices on better RMNCH/ Malaria services, while at community-level the focus was aimed at changing social and cultural norms including myths and misconceptions as well as spousal support regarding RMNCH. IEC materials were also designed, produced, and distributed to support SBCC efforts. However, despite this progress, COVID 19 prevention measures especially ban on public gatherings, travel restrictions between provinces and the city of Kigali from Late march to May 2020 affected timely implementation of activities. The details per health area are provided below.

2.2.1. HIV Prevention

In collaboration with MoH/RBC, Health Centers, Medical Regiment and trained peer educators from targeted audience (Adolescents, FSWs, MSM & Military), SFH during this reporting period implemented several HIV prevention interventions. Finding new positive cases, linking them to care and supporting them to adhere to treatment as well as counselling those found negative on how to stay negative was at the core of our programming. As such, Voluntary Counselling and testing sessions were conducted using a combination of community VCT, Community mobile and Community Index modalities. This was supplemented by other innovative strategies to better serve the target KPS (PrEP, HVSTs, and digital technology), Training of providers, as well as provision of branded condoms & Lubricants to increase brand appeal and use, and audience targeted messaging. The details of implementation are provided below:

Table 2: Summary of Achievements per Project

Project	Activities	Annual Target	October 2019- May 2020 Achievements	June-September 2020 Achievements	# of positives	Annual Achievement	% Achievement	Comments
DoD	HTC Mobile	7798	3693	4,708	161	8,401	108%	On track achievement
	HIV prevention messaging through IPC	662	355	363	N/A	718	108%	
	PrEP New	105	-	114	N/A		109%	
	PrEP_CURR	114	-	109	N/A		96%	
	HIV Self Testing kits distributed	8,502	-	2,896	N/A		34%	Under achievement due to late provision of the targets by the donor
	Training of medical staff working in HIV Prevention	30	30	30	N/A	30	100%	10 finger prick & 20 on HIV counseling for KPs and vulnerable people focused on 5 Cs as recommended by WHO
CDC	HTS (Community VCT Mobile & Index)	28,002	15,668	15,318	736	30,986	110.7%	Increased efforts of the staff & HC collaboration despite disruptions by COVID 19

	PrEP provision by HCs (Fsws, MSM & VIP FSWs)	450	1,538	412	N/A	1,950	433%	Supported by 21 HCs within Kigali City
	Distribution of HIV Self testing	13,256	7,848	9,607	N/A	17,454	131.7%	Peer navigators supported the provision of which 99% was unassisted
	Finding of new positives	1,369	736	699	1435	1,435	104.8%	Index testing was very strategic to finding new positives
	Linkage of positives to Treatment	1,435	690	743	1433	1433	99.9%	Community VCT eased immediate linkage as testing was done at the HC
	KP_Prev (HIV prevention Information)	18,886	7,983	23089	N/A	31,072	165%	
RSMP	Reach of AGYW through IPC & special events	4792	3,195	3,695	N/A	154		On track achievement due to 82 cell level peer educators & strong partnership with Caritas mentors
Unicef-HIV	District Inception meeting	1	1	1		1	100%	Being a new project, these were preparatory activities
	Selection & Training of peer educators	152	152	152	N/A	152	100%	
	HIV Education	71,526		62,492	N/A	62,492	87.3%	Reached through talk-shows and community level activities- HHS, IPC etc. 3 more months of implementation
	Testing and Referrals	14,305	131	860	5	991	7%	These are individuals tested through mobile HTC, more numbers will come from HCs which are being collected
	Capacity building of Kiramuruzi YC	Provide tents, chairs & Sound system		Sound system, 250 chairs and tents provided				Items to be used during education sessions
	Monthly meetings with Peer educators	9	2	4	N/A	6	67%	3 more will be done by December

Table 3: Summary of CDC Project achievements per District

District	HTS (Community Mobile, VCT, Index)	Finding of new positives	Linkage HIV Positives on ART	Distribution of HIV Self testing	KP Prev (HIV prevention)	PrEP provision by HCs (Fsws, MSM & VIP FSWs)
Bugesera	1378	68	68	634	905	-
Burera	292	3	3	53	533	-
Gakenke	1013	37	37	334	802	-
Gasabo	2386	143	143	1104	3187	523
Gisagara	1135	45	45	56	658	-
Huye	1727	82	82	1098	1928	-
Karongi	742	39	39	141	805	-

Kayonza	966	43	43	588	938	-
Kicukiro	4235	210	210	3073	4088	889
Kirehe	615	15	15	574	1087	-
Muhanga	2249	156	156	769	1162	-
Musanze	1781	51	51	2050	1641	-
Ngoma	474	13	13	465	694	-
Ngororero	432	8	8	235	528	-
Nyagatare	1049	36	35	870	792	-
Nyamasheke	1514	56	56	498	1151	-
Nyanza	870	30	30	366	1066	-
Nyarugenge	1898	94	94	913	2463	538
Rubavu	1234	69	68	932	1956	-
Ruhango	862	28	28	594	773	-
Rulindo	1694	58	58	530	1185	-
Rusizi	1058	64	64	1068	1825	-
Rwamagana	1382	87	87	509	905	-
Total	30,986	1,435	1,433	17,454	31,072	1950

Data source: Field Reports

Regarding RSMP and Ubuzima Bwiza Ishema Ryange (UNICEF HIV Prevention) Project, interventions were implemented only in Rwamagana and Gatsibo Districts respectively.



Peer educator demonstrating condom use during construction sites' HIV prevention outreach-TTC Kabarore

Lessons learned

- Identification of the biggest hotspots and a strong mobilization done by trained FSWs peer educators has increased identification of new positives
- Integration of nurses in charge of ARVs services in mobile HTC services is continuously improving the linkage of clients tested positive.

2.2.2. RMNCAH/ Malaria Services

To contribute to preventable infant and maternal deaths, reduce incidences of malaria, as well as bring high quality, integrated health services to vulnerable communities, SFH during this reporting period supported audience targeted SBC campaigns facilitated by facility (HC) personnel for integrated health services in hard-to-reach, vulnerable communities; Trained FP nurses from Ingobyi supported HCs on counselling, management of FP side effects and communication skills. These interventions were focused on increasing health seeking behaviors among youth, women of reproductive age and men, Cognizant of the rising issues of unplanned pregnancies and HIV/STIs infections among youth/ adolescents & current limited access to ASRH, efforts to effectively implement the Cyber Rwanda Pilot project in the two districts of Gasabo and Nyagatare as well as plan for scale up(that will consist of the evaluation of the intervention in a controlled research design as well) to 6 more districts were strengthened. Cyber Rwanda is a digital platform(website) that aims to improve the health and livelihoods of urban and semi-urban adolescents (12-19 years) and consists of a robust FAQ library, online ordering, and a clinic locator to deliver integrated age-appropriate SRH information, employment skills, and linkage to high-quality, youth-friendly services. Details of the implemented activities are provided in the table below.

Table 4: Details of SBC interventions under RMNCAH/ Malaria Services

Project	Main Activities	Annual target	Annual Achievement	% of Achievement	Comments
Ingobyi	Integrated mobile community outreaches	40,000 individuals	40,536	101%	Collaboration with HCs enabled on overachievement 342 supported HCs were given IEC Materials as well as youth centers in Ingobyi supported districts Could not be implemented due to COVID that put a stop on public gatherings
	Design, produce and distribute integrated IEC Materials	3881 posters;200 Flipbooks &350 ASRH Job Aids for 10-15 and 15-24 yrs each	All planned IEC materials produced	100%	
	Support community mobilization during community dialogue sessions known as “Inteko z’Abaturage”	9600 Individuals	6,534	68%	
	Conduct male involvement campaign to increase uptake of RMNCAH	56 Talk-shows & 2 radio sports	56 Talk-shows & 2 radio sports	100%	

	Training of health providers (nurses, midwives and doctors) in IPC to reduce inappropriate provider attitude and practices	103 Health providers	99 Health providers	96%	Kacyiru hospital never sent providers for the training
	Training of FP nurses on communication & FP counseling	614 Nurses	570	93%	On track achievement
Cyber Rwanda	1st season content review & Validation	Youth validation & HPWG workshop	One workshop	100%	Story lines for 1st season approved by HPTWG
	CR School & YC launches for promotion & awareness under pilot phase	6 Launches	6	100%	implemented as planned; Coordinates to guide selection of facilities for scale up & improving the online locator
	Mapping & collection of coordinates of schools, Ycs, HFs & Pharmacies in 8 Districts	Coordinates of all schools, Ycs, HCs, HPS & Pharmacies	Mapping of all schools, YCs, HFs & pharmacies	100%	
	Conduct recruitment of schools & YCs in the 8 districts of expansion	64 schools, 9 YCs & over 90 pharmacies	64 schools, 9 YCs & 90 pharmacies were recruited	100%	Implemented as planned due to strong support & partnership with districts
	Conduct district school randomization meetings in all the 8 districts	8 randomization meetings	8 randomization meetings conducted	100%	
SC Johnson	Malaria Prevention IPC by CHWs	560,000 individuals	591,252	105%	Overachievement due to increased efforts by CHWs who conduct IPCs

Data Source: Field Reports

Table 5: Summary of Ingobyi Activity implementation per District

District	Individuals reached with RMNCAH Messages	Method Adoption	IEC Materials distributed	Talk-shows conducted/ Community Radios	FP Nurses Trained	HP trained on Inappropriate behaviours
Kicukiro	1460	413	229	2	32	4
Gasabo	1700	360	229	2	32	4
Gicumbi	1440	279	229	3	20	4
Kamonyi	1670	311	229	2	31	6
Muhanga	2600	340	229	2	33	4
Nyaruguru	2653	310	229	2	20	4
Nyanza	2783	300	229	2	32	4
Huye	2309	350	229	2	31	6
Nyamagabe	3004	290	229	2	20	4

Ngororero	2827	300	229	3	34	7
Rubavu	2124	295	229	4	32	6
Rutsiro	2196	272	229	4	32	4
Nyabihu	1861	320	229	4	32	6
Musanze	654	280	229	4	36	4
Ruhango	1796	302	229	2	32	4
Bugesera	3464	300	229	2	29	6
Ngoma	1472	278	229	3	29	4
Nyagatare	2125	285	229	4		6
Rwamagana	1846	240	229	3	28	6
Gatsibo	552	279	230	4	35	6
Total	40,536	6,104	4,581	56	570	99

Data Source: Field Reports

Table 6: Summary of CR Activity implementation per District

District	season content review & Validation	CR School & YC launches for promotion & awareness under pilot phase	Mapping & collection of coordinates of schools, Ycs, HF's & Pharmacies in 8 Districts	Conduct recruitment of schools & YCs in the 8 districts of expansion	Conduct district school randomization meetings
Nyarugenge					
Gasabo	5- days workshop	3 launches	50 schools & one Yc	50 schools & one Yc	one
Rwamagana	-	3 launches	25 Schools & 2 YCs	25 Schools & 2 YCs	one
Kayonza			47 schools & 1 YC	47 schools & 1 YC	one
Gatsibo			62 schools & 1YC	62 schools & 1YC	one
Nyagatare			51 schools & 1YC	51 schools & 1YC	one
Bugesera			45 schools & 1YC	45 schools & 1YC	one
Huye			45 schools & 1YC	45 schools & 1YC	one

Data Source: Field Reports

Summary of Impact under RMNCAH/ Malaria services

- i. As a result of integrated community outreaches, 5500 new users adopted modern contraceptives (3797 from June to September 2020). Injectable was the most adopted method (30.6 %), followed by implants at 27.2%, pills at 21.5 %, Jadele at 11.8% and condoms at 8.5%. Fifty-six (56) individuals chose permanent methods (IUD & tubal ligation) and were referred to the nearest health facilities.

- ii. CHWs' IPC sessions led to the distribution of 78,418 Coils, 10,418 Off lotion tubes and 110,086 off tube sachets and these contributed to the reduction of malaria incidences in targeted districts



Outreach in Muhanga, Kabacuzi



Integrated community outreach in Ruvune sector



E.S of Rugendabari cell (Muhanga) addressing attendants of the RMNCAH outreach



Service providers from Huye district undergoing IPC training





District school randomization meeting in Rwamagana District

2.2.3. Water, Hygiene and Sanitation

The practice of safe sanitation and hygiene behaviors is a pre-condition for health and development. As such during this reporting period, SBCC interventions under WASH focused on strengthening authorities' capacity to achieve universal access to basic sanitation services in targeted districts (Burera, Gatsibo & Gicumbi) through a campaign named "Gira Isuku Gira Ubuzima" campaign. Details of the implemented activities are provided in the table below.

Table 5: Details of interventions under Gira Isuku Gira Ubuzima campaign.

ACTIVITY	PROGRAM TARGET	Annual Achievement	% Achievement	COMMENTS
Sanitation promotion conducted through government system (umuganda, inama y'ubudehe, Umugoroba w'ababyeyi and special events & Talk shows	2,535,000	2,076,397	82%	COVID 19 limitation
Training of latrine builders to provide technical support to HHs that need to construct/upgrade latrines	905	956	105%	Overachievement due to district support
Purchase and distribute megaphones to help deliver previously recorded hygiene and promotion messages	247	247	100%	Distributed in 247 cells
Promote hygiene and sanitation through community radio talk - shows	18 Radio talk-shows	18 Radio talk-shows	100%	
Creation of cell level outlets by convincing existing vendors to stock sanitation materials	600	555	93%	Some cells did not have existing outlets resulting into underachievement
Basic latrines built with direct UNICEF support through voucher system	11,667	16,919	145%	On track achievement due to district collaboration.
HH with handwashing facility	10% increase	28,137		

Data source: Field reports

Summary of Impact of Gira Isuku Gira Ubuzima campaign

As a result of the campaign, 26,376 households were triggered to construct or upgrade their latrines. 28,137 additional handwashing facilities were registered as well.

Challenges

- The prevailing challenge is the environmental conditions including unfavorable soil types (volcanic, sandy soils etc) that threaten sustainability of the latrines.
- National lockdown adopted to curb the spread of corona virus pandemic has affected field activities like community gatherings and local authorities' door to door supervisions.



Improved latrine with hygienic slab

3.0. Systems Strengthening

With support from Imbuto and SC Johnson, SFH Rwanda accelerated her efforts during this reporting period in systems strengthening through constructing health posts under “Girubuzima brand and upgrading of Kagitumba health center as well as Training/ capacity building of service providers on new service delivery package and maternity standard operating procedures (SOPs) to ensure access to primary care especially for rural communities in Rwanda. Below are details of achievement;

3.1. Construction and Equipping of Health posts

In partnership with district authorities, health posts were constructed, equipped and branded “Girubuzima”. 35 HPs were constructed (11 in Gicumbi and 24 in Nyagatare, and have all been provisionally handed over to districts to start offering services under Public Private Community Partnership (PPCP) model that work to strengthen mixed health systems by bringing together providers—commonly from the private sector—into a quality-assured health network to deliver health services by established standards.



Butare HP-Nyankenke



3.2. Training on Entrepreneurship and business planning

Thirty-seven (37) nurses were trained on how to run health services as a business, business planning, leadership and management as well as financial management. They were also provided with an introduction to Standards Operating Procedures.

In addition, the health posts accreditation standards, performance assessment tool as well as the performance road map have been established and submitted to the Ministry of Health for validation. The validation process at the level of the Ministry of Health has started already.

3.3. Upgrade of Kagitumba Health Center

The upgrade funded by Imbuto involved construction and renovation of buildings (existing administration block, construction of new block for dental and ophthalmology services), plus HC fence as well as supply and installation of medical furniture and equipment. The main construction works as well as additional works (walkways, stony parking, elevated water tanks, trenches among others) have all been completed and technical handover done, while equipment and furniture has also been purchased with guidance from RBC technical teams and delivered to Kagitumba HC. However, there were a few other requests done to meet the required specifications; collapsible side rails, mounted dental x-ray box (OPG film size, Ophthalmoscope, two new pinhole occluders whose delivery will be completed in June 2020.



Showing compound planted with paspalum grass

Challenges

- The main challenge is lack of accessibility to electricity and water on many sites; 16 out of 35 sites do not have an electricity line whereas 15 sites do not have potable water line. Under this project, tentatively a solar energy for lighting and energy for computer (laptop use) has been provided and a 5000ltrs water tank has been provided.

3.4. Second generation HPs

In partnership with MoH and ABBOT, 8 Second Generation Health Posts (SGHPs) were constructed in Bugesera District, equipped and started to deliver essential health services including the maternity services, Ante-Natal and Post Natal care (ANC and PNC), screening of Non-communicable diseases (NCDs) such as diabetes and heart diseases.

VCT-HIV screening, malaria and basic wound care. Pregnant women systematically undergo testing and management of Hepatitis, Sphyllis and HIV via the use of ANC panel. ANC panel are rapid tests of Hepatitis, Sphyllis and HIV; utilized for pregnant women at their first ANC visit; these types of tests have contributed to the improvement of care at the HPs and increase the demand creation.

In addition to these, in partnership with SC Johnson 12 more SGHPs were constructed with 2 constructed in Gasabo (Rugando and Kimironko sectors) already operational while the remaining 10 are still under construction in the districts of Burera (3), Nyagatare (4) and Gicumbi(3). The 10 HPs were strategically constructed in areas that are bordering with other countries and designed to provide a more comprehensive service package including EYE and Dental care

Other key achievements under systems strengthening realized this reporting period are;

- i. The finalization of SGHP standards; the Ministry of Health has approved and signed the SGHP standards
- ii. The capacity building interventions continued with the 8 SGHPs located in Bugesera district. Under the leadership of RBC/MCCH division, two certification trainings on **Emergency Obstetric and Newborn Care (EmONC)** and **the Integrated Management of Childhood Illnesses (IMCI)**; the EmONC trainings were conducted to enhance the capacity of Health workers working in SGHPs in the management and safety insurance of pregnant women, safe pregnancy delivery and adequate primary care to newborns while the **ten-day training (IMCI)** was organized to strengthen the capacity of Health workers in the management of the top five children killing conditions (Fever, diarrhea, respiratory affection, ear infections and malaria) and were introduced to ICAT which an electronic tool that allows self-training and coaching about childhood illnesses. All the 8SGHPs received **IMCI registers** to register patients' records. All trained were provided with MOH signed certificate qualifying them for the service delivery through EmONC and IMCI approaches. Considering the beneficiaries of services in the communities served by the 8 SGHPs in Bugesera district, the following are the number of community members who benefited from the delivered package:

- 26,577 patients served: averaging of 1,108 visits/SGHP per month and 37 visits/day per HP.
- 5,925 malaria tests delivered; 2,067 positive cases treated
- 7227 respiratory infections treated

- 6,000 cases of intestinal parasites resolved
- 895 new participants in family planning
- 231 ANC visits and panels completed; Averaging 1.2 visits/mother
- 123 babies safely delivered

EmONC Training of newborn resuscitation



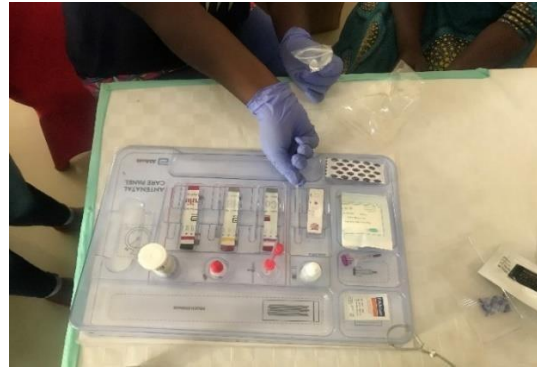
EmONC training on pregnancy delivery



(iii) Development of HPs business model. Ensuring the sustainability of Health posts platform, SFH organized a 4-day workshop to brainstorm on a proposal of a business plan that can address current operational challenges faced by HPs. This business plan will play as guidance for future fundraising opportunities and SGHPs establishments.

(iv) ANC panel usage expanded: during the month of September ANC panel tests were expanded to HCs level, targeting five districts including Bugesera, Gicumbi, Gatsibo, Nyanza and Nyagatare. The inclusion of HCs to offer ANC panel tests aims at increasing the opportunity for women who attend ANC visits at HC level have access to the 4 combined tests (HIV, Malaria, Syphilis and HepB.) at the same time. 167 health providers (nurses and lab technicians) were trained. After the training, **19,675 ANC panels** were distributed to

the health centers. SFH continue to monitor the usage of the ANC in Health posts and Health centers, through its monthly reports currently showing an uptake of more than 60%



of the distributed ANC panels.

Health workers in a training on ANC panel tests. Health workers assembling of ANC panel test during a training

Challenges

- Delayed payment of bills by RSSB; this hinders the operationalization of HPs as private entities delaying the payment of staffs and depts of medication purchased at the district pharmacy.
- Due to the national Lockdown field (physical)supervision and coordination meetings were not conducted as planned.

4.0. MONITORING AND EVALUATION

Two studies were conducted in addition to the routine monitoring activities (Quarterly coordination meetings, supportive supervision visits and data quality assessments (DQA)). These surveys are;

(i) **Cyber Rwanda Pilot study** that was aimed at evaluating the pilot phase in regard to implementation, CR engagement, data collection and data utility, and the (upcoming) impact evaluation. The following is a summary of study findings that have guided season one content review, changing of characters, online shop improvements among others,

Engagement: Overall, students were very enthusiastic about CyberRwanda and found the content to be interesting and relevant to their lives. Almost all students had heard of CyberRwanda and 62% reported using the site, with wide variation by implementation model (self-service: 91%; facilitated: 45-50%). There was considerable variation in tablet access by school, regardless of implementation model (self-service vs. facilitated). Use of the CyberRwanda site was concentrated almost entirely in schools; very few students reported using the site outside of school on their own devices. Google Analytics data show that patterns of use of the site were consistent with school events (e.g., Cyber club launch, school exams). However, overall use as indicated through Google Analytics was slow (estimated at 38% of those with access) given that 2,508 students attended pilot schools and had access to the site.

Shop: Despite enthusiasm for the shop on the CyberRwanda site, very few students used the ordering system. Of those who did use it, only a small number went to the pharmacy to pick up their order. Several barriers to purchasing products and picking up orders were identified through student and stakeholder interviews: distance barriers - pharmacies were too far and not accessible; financial barriers - products were priced too high and could be purchased at non-CyberRwanda pharmacies for less money; fear/shame - despite praising the confidential nature of the CyberRwanda site, students and other stakeholders expressed concern that fear or embarrassment inhibited ordering and pick up of orders.

Perception: There was support and praise for the CyberRwanda program among most stakeholders, however, teacher sentiment about the program was mixed; some were enthusiastic and wanted more training on the program, others felt that the content of CyberRwanda was not appropriate for the students. Pharmacists asked that more staff be trained so that all staff know how to use the CyberRwanda system and engage with CyberRwanda orders and clients.

(ii) **Evaluation of the impact of coils and lotion mosquito repellents** used in combination with LLINs on the prevention of malaria vector transmission in high and low malaria endemicity areas, Kinazi Sector (Ruhango District) & Mabuga Sector (Karongi District) respectively, The study being conducted in partnership with RBC and is still on going, however preliminary finding indicate the following ;The entomological survey has shown that both sites were positive to malaria vectors and other non- anopheles mosquitoes with control villages displaying a low density of mosquitoes in comparison with the intervention villages.

Anopheles gambiae s.s. was found as the dominant sibling species of An. gambiae s.l. in the two study sites and as well as the primary malaria vector in Kinazi while the dominant anopheles' mosquitoes in Mubuga was An. Rhodesiensis. The infection of anopheles mosquitoes was high

in Kinazi than Mubuga with Sporozoite Inoculation Rate (SIR) respectively of 3.9% and 1.5%. In conclusion, the implementation of complimentary vector control strategies using mosquito repellents in addition to constant community mobilization and sensitization towards the use of current vector control strategies such as ITNs will contribute to reducing the density of malaria vectors, the risk of malaria transmission and thus malaria disease in human

(iii) An annual survey (Assessing the use of Prudence Condoms in Rwanda) was conducted, and the preliminary findings briefly indicate among others that:

- The most preferred condom brand on the Rwandan market is Prudence - more than half (51%)
- Prudence is the most accessible condom brand (representing 57%)
- 51% of those who use Prudence condoms, use it consistently

(iv) An annual survey (Assessing the pricing of SFH socially marketed products for cost recovery and sustainability) was conducted in quarter four and the preliminary results indicate among others that:

- The outlet survey findings indicate that adherence to the recommended retail price was good for Prudence condoms with a level of 87%.
- Adherence to correct pricing was also high across 7 districts ranging from 81.0% in Rubavu to 94.7% in Rwamagana district.
- The coverage of Prudence and Plaisir was relatively high with 94.2% and 96.4% respectively, Sur'Eau and Supernet coverage is very low with 30.2% and 14.4%.
- More than 94% of cells in 7 districts had at least one outlet selling Prudence.
- Results by district indicate that Kicukiro and Rubavu has the highest Prudence coverage rate (100%) followed by Nyarugenge and Rwamagana with 95.2% and 94.7% respectively.
- Expiry of products is not common for Prudence.

5.0. COLLABORATIONS & PARTNERSHIPS

During this reporting period, SFH Rwanda collaborated with MoH/RBC, Districts, Private sector, Donors among others. However, of key importance to note are;

5.1. Malaria Prevention:

- SFH Rwanda supported RBC workshops to develop and validate malaria strategic plan 2020-2024 spearheaded by RBC/Malaria and other parasitic diseased division (MoPDD)
- SFH Rwanda Supported the Government of Rwanda to develop A regional malaria Strategic plan as well as its costing through Malaria cross border initiative workshops of EAC/DRC National Malaria Program Managers held in Zanzibar & Dar Es Salaam in Tanzania in January 2020 and October 2020 respectively.



- SFH actively participated in the national launch of zero malaria starts with me campaign spearheaded by Malaria No More UK, and apart from exhibiting malaria interventions, SFH supported MoPDD purchase of **VECTOBAC**, a biological larvicide used to control mosquitoes and is being used for malaria control in rice swamps and other agricultural sites



5.2. COVID 19 Control, Treatment and intervention



- ❖ In partnership with SCJ and Plan International, SFH Rwanda actively supported MOH/RBC in its efforts of combating the spread of COVID19 especially through community awareness & awareness as well as case management. In regard to awareness, SFH Rwanda produced leaflets, produced and aired TV and Radio adverts including animations & radio mentions. Two (COVID) songs were produced including an integrated one to address issues of child protection, GBV, positive parenting, MCH and ASRH as well. In addition, COVID-19 preventions and control and integrated messages on food security and nutrition interventions targeting the general population and police markers were disseminated through.

- ✓ Social media platforms using social media influencers (media personality and artist)
- ✓ DJ mentions; 5 radio stations (Radio Rwanda, Radio 10, Kiss FM, Flash FM & Isango Star were used to disseminate messages through their popular shows
- ✓ Newspaper Articles: IGIHE and New times featured articles targeting policy makers

For Case management, SFH-Rwanda provided 400 testing kits, tents and chairs at different sites as well as provided branding materials for the National control & Command Post.



- ❖ In December 2020, SFH Rwanda received funds from the CDC Africa, the African Union and in collaboration with Amref-Africa, allowing the organisation to enhance and support the community-based interventions of COVID-19 outbreak in Rwanda. This specific intervention aimed at enhancing the capacity of one thousand Community Health Workers (CHWs) from ten districts to conduct active case and contact tracing at community level. The selected districts are MOH prioritised districts bordering with neighbouring countries and included **Kirehe, Nyagarare, Karongi, Bugesera, Rusizi, Rubavu, Musanze, Nyamasheke, Huye and Burera.**



During this project, the selected 1,000 CHWs were trained on COVID-19 Outbreak; subjects of training included: transmission mode, contract tracing, home based care, and existing prevention methods to educate to the community members under their responsibilities. As they continued to conduct routine home visits in their respective villages,

In addition to the above interventions, three health kiosks were built in partnership with Sc Johnson (Nyaruguru, Rusizi & Gasabo) and these serve as outlets for health products except the one in Rusizi(Bugarama) that doubles as a testing site!



FY 2021 Planned Activities.

For 2021, SFH will implement several projects, both new and on going

1. New projects.

Project	Scope	Donor	Start and End date
-Global Fund Malaria	Malaria Prevention-	GF- SPIU	2020-2023
-Assess digital solutions & options to fast track efficiency in claims' re-imburement & increase accountability & transparency in the use of resources in HPs in Rwanda	-Study across 12 HPs in 12 Districts	UNFPA	2020
-Assess the capacity of HPs Platform for a sustainable Primary Care in Rwanda	-Study across 30 health posts from 10 selected districts		
Amref/COVID-19 - The digitalization of CHWs education on covid-19 outbreak	Building the capacity of CHWs to conduct health education on Covid-19 and community health systems strengthening in 10 selected districts in Rwanda	AMREF	2020 (5 months)

2. On-going projects

Project	Scope	Donor	Start and End date
CDC HIV Project	HIV prevention and treatment services to key populations (KPs) in Rwanda	CDC	2019-2024
DOD HIV Project	HIV prevention program among the members of the Rwanda Defence Forces (RDF), their families and communities surrounding military bases.	DOD	2017-2020
Rwanda Social Marketing Program (RSMP)	Social marketing of condoms & HIV prevention among Dream Partners	USAID	2019 - 2022
GF-HIV Project	HIV prevention among General Population	Global Fund- SPIU	2018-2023
Ubuzima bwiza Ishema Ryange	HIV Prevention among adolescents-15-24yrs	UNICEF	2020
Cyber Rwanda	A digital platform that aims to improve the health and livelihoods of urban and semi-urban adolescents (12-19 years) to deliver integrated age-appropriate SRH information, employment skills, and linkage to high-quality, youth-friendly services.	Ylabs/USAID	2019 - 2023
Ingobyi Activity	Improve the quality of reproductive, maternal, newborn and child health (RMNCH) and malaria services, in a sustainable manner with the goal of reducing infant and maternal mortality in Rwanda	Intrahealth/USAID	2018-2023
Access to F Products	Social marketing of FP products	UNFPA	
SC Johnson Malaria project	Malaria prevention- product distribution & systems strengthening	SC Johnson	
Systems Strengthening (Abbot)	UHC	Abbot	
Baho Neza	UHC	Imbutu/ Buffet	2018-2020
Amref	UHC	Amref	