



2017

UPHLS

ANNUAL REPORT



UMBRELLA OF ORGANIZATIONS OF PERSONS WITH DISABILITIES
FIGHTING AGAINST HIV & AIDS AND FOR HEALTH PROMOTION
UPHLS

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(JANUARY 2017-DECEMBER 2017)



Kigali on 23th December 2017

I. INTRODUCTION

UPHLS is an Umbrella of organizations of Persons with Disabilities in the Fight against HIV&AIDS and for Health Promotion in Rwanda created on September 21th, 2006 by DPOs and recognized by Rwanda Governance Board as a Rwandan NGO registered under final Registration No 048/NGO/2015. The head office is located in Kacyiru sector, Gasabo District with Four regional offices across the country and is composed by 10 member DPOs.

UPHLS' Vision is to have an inclusive society where people with disabilities are empowered and enjoy wellbeing and dignity. Its Mission is to strengthen the capacities of member organizations, support, and guide and coordinate programs to promote the rights of PWD for inclusive services in HIV&AIDS, health and employability.

From January 2017 to December 2017, under support from different Partners (including Government institutions and International funding agencies) and in collaboration with its members, UPHLS have sustained interventions targeting DPOs as well as various other institutions for a better access to HIV&AIDS services, health promotion and the Employability among youth with disabilities in the following projects:

1.2. HIV and AIDS Projects

1. RBF project funded by the Ministry of Health under the sponsorship of Global Fund.
2. Back GIZ/ Global Fund Project funded by GIZ and Global Fund.

Health Promotion Projects

1. LCI Project sponsored by the CDC Rwanda with the support of the PEPFAR.
2. Every life matters Project funded by Light for the World Netherlands

Promotion of Employment Projects among Youth with Disabilities

1. Employable phase II Project funded by Light for the World Netherlands
2. Huguka Dukore project funded by Education development Center and USAID

This report is highlighting the progress made within 3 main intervention areas (HIV and AIDS, Health Promotion Projects and Employment) from January to December 2017, it shows also challenges and lessons learnt which will help the organizations to plan accordingly for the next year and in alignment to its 5 years strategic plan.

II. ADMINISTRATION

II.1 Organs meetings and participation in the event by UPHLS board members

From January to Decembers 2017, different were held as follows:

- ✓ One General Assembly composed by all Members organizations representatives
- ✓ Four Board meetings and 6 Bureau meetings.
- ✓ Three audit committee meetings including training, meeting and an audit exercise.
- ✓ Consultative meetings with Members organizations
- ✓ Social events where Board members or members organizations Representatives participated on behalf of UPHLS.
- ✓ Participation of implementation of activities by member's organizations.

The strong collaboration between UPHLS' organs help to achieve more from National Level to the Community Level where the organization is implementing different activities using its Volunteers and Regional Offices.

II.2 Management of staff and materials

During this period, equipment and staffs were managed according to the UPHLS Administrative and financial manual and Rwandan laws. UPHLS has a total of 23 staff as well as many equipment and materials which are registered in a database system.

Staff meetings and management meetings were held and matter arising were solved accordingly and smoothly. UPHLS has participated in National and District Meetings where different staffs have represented UPHLS (e.g. TWGs on disability and/or HIV, CCM, Partners' meetings, Disability Coordination Forum etc.

Some changes happened in the staffing where one staff left and others automatically promoted by the Board of Directors.

II.3 National and International conferences

The Executive secretariat participated in national disability and/or HIV&AIDS, local/District level meetings as well as international conferences and workshop where UPHLS was invited. UPHLS Field staffs and volunteers participated in JDAF and CDLS' meeting.

II.4 Administration issues

Generally the Executive Secretariat of UPHLS has successfully ensured daily management of resources and property of UPHLS, Coordinated the development process of consolidated action plans at different levels; oversaw the design and execution of projects' activities, collect and consolidate different reports and presented them to funders on a regular basis..

II.5 Fundraising and resource mobilization

UPHLS in collaboration with its partners developed a number of Proposals for sustaining the interventions. In this Period, two new projects have been funded and a third one is expected to start in January 2017.

II.6 Social activities

UPHLS social fund is in place and is supporting social events as well as economical event, its regulation is in place and bank account is opened.

An annual sport system among UPHLS staff is put in place at National and District level.

UPHLS staff and some of board members participated in the commemoration of anniversary of the genocide perpetrated against Tutsi in 1994 in collaboration with NCPD.

III. PROJECTS ACHIEVEMENTS

III.1 HIV & AIDS PROJECTS

III.1.1 Results Based Funding (RBF) project funded by the Ministry of Health/Global Fund

Under financial support of the Ministry of Health, UPHLS carries out interventions targeting the improvement of access to HIV and AIDS services among PWDs countrywide.

The following activities have been carried out during this year:

1. Training of Peer Educators,
2. Disability Friendly Outreach Campaigns,
3. Reproduction of adapted IEC materials,
4. Meeting with Peer educators and District authorities to share the lessons learnt, best practices during the outreach campaigns,
5. Participation in the celebration of the World AIDS Day (WAD),
6. Participation in the celebration of Internal Day of Persons with Disabilities (IDPD)

III.1.1.1. Training of Peer Educators

In a way of reinforcing the capacities of peer educators who play an important role in organizing and carrying out disability friendly outreach campaigns within self-help groups of PWDs and to respond to the gaps identified during supervision, UPHLS organized training sessions for its community volunteers (PE). These trainings were organized two times during the year (one conducted from 19th April to 4th May and another conducted from 6th to 15th December 2017).

The main areas focused on are: HIV and AIDS generalities, disability and human rights, UNCRPD and the Rwandan framework on the rights of PWDs, peer education approach, BCC, leadership and cooperative management. Besides the topics mentioned, it was a good opportunity to document best practices from outreach campaigns.

Around the country, 371 people have been trained (254 males and 117 females). Participants were recruited from self-help groups of PWDs in 16 Districts (5 Districts in Western Province including Rubavu, Karongi Rutsiro, Nyamasheke and Rusizi; 4 in Southern provinces including Muhanga, Nyanza, Gisagara and Nyaruguru; two Districts in Kigali namely Gasabo and Nyarugenge; 2 Districts in Eastern Province namely Gatsibo and Nyagatare and 3 Districts in Northern Province including Gakenke, Burera and Musanze).



Training of peer educators



Training of Peer in Rubavu and Rwamagana Districts

III.1.1.2. Disability Friendly Outreach campaigns and Mobile VCT

The fact that PWDs were left behind in the programs of HIV and AIDS prevention services, inaccessibility of HIV messages and illiteracy, the good manner of spreading the message to this population is to reach them at the grass root level through their self-help groups by using peer education approach. These activities are organized and conducted by peer educators under the supervision of District Coordinators. It is this framework that UPHLS organized 104 outreach campaigns in 16 Districts all over 2017.

In total 2,789 people (1,454 females and 1,335 males) have been reached during outreach campaigns. Among these people reached, 2,576 people (1389 females and 1287 males) were tested for HIV through mobile VCT organized in collaboration with Health centers.



Outreach campaign



PWDs got tested for HIV



Youth with mental disabilities also got messages on HIV and got HIV testing

III.1.1.3 **Communication materials**

Lack of access to information is among the challenges that persons with disabilities are facing. So to deal with this issue UPHLS adapted and reproduced IEC tools to various types of disabilities including: Large print, Braille, Audio CD, Video message with sign language and Image boxes.

The adapted tools have been distributed to PE and self-help groups of PWDs and some health facilities for use in awareness campaigns. A total of 1,950 copies have been produced and distributed. We also reproduced 300 copies of training manual for peer educators.

III.1.1.4 **Meeting with PE and District authorities to share the lessons learnt, best practices**

These meetings aimed at sharing best practices and lessons learnt during outreach campaigns that were carried out through self-help groups of PWDs, collect and analyze the reports of Peer educators, share information with the local authorities in a way of reinforcing collaboration between District authorities and beneficiaries. It was a good moment to share with local authorities the challenges faced by PWDs in order to seek the solution for remedy.

These meetings have been conducted in 11 Districts from different provinces and Kigali city and brought together 11 District Disability Mainstreaming Officers, 22 Officials from Sectors in charge of Social Affairs and 52 representatives of self-help groups of PWDs and Peer educators.

It was the first time to organize such activity but we realized that it is very important as we met with different District authorities together with our beneficiaries. District authorities were informed about UPHLS interventions, specifically those interventions carried out in their communities. Peer educators and representatives of self-help groups of PWDs presented challenges faced by PWDs.

Particularly, Peer educators revealed that there are some PWDs not reached out because they are not able to join their fellows without assistive devices. They mentioned also having limitation in communication with persons with hearing impairment who attend sessions on HIV and AIDS campaigns.

As outcome of these meetings, some DDMOs committed to solve the issue of assistive devices. In Nyagatare District one representative of self-help group returned back in the community with three wheelchairs for his peers who are in need.

The representatives of self-help groups and peer educators were also informed about services that are available for PWDs and the social affairs committed to collaborate with them particularly in the activities related to HIV prevention, mobile VCT and other services related to PWDs.



Pictures captured during the meetings in Rusizi and Gisagara

III.1.1.5 OTHER ACHIEVEMENT

Participation in the Celebration of World AIDS Day

On 1st December of each year, Rwanda joins the rest of the World to celebrate the World AIDS Day. The 2017 World AIDS Day Global Theme was “Right to health” highlighting the need for

all people living with HIV and those who are vulnerable and affected by the disease to reach the goal of universal health coverage.

Rwanda also identifies 2017 theme is *“Get tested for HIV. If positive, Start and Stay on life-saving treatment.”* The theme reaffirms Rwanda’s commitment to achieving the UNAIDS global target of 90-90-90; aiming at ensuring that 90% of people living with HIV know their status, 90% of people living with HIV who know their status are receiving antiretroviral treatment and 90% of people on treatment have viral load suppression.

It is in this framework that UPHLS joined other stakeholders in HIV response in the launch of the World AIDS Day campaign at Petit Stade – Remera Sector, Gasabo District on 1st December. UPHLS mobilized and facilitated PWDs to join others during the event where around 150 PWDs coming from different DPOs participated.

UPHLS through *“Troupe des Personnes Handicapées TWUZUZANYE (THT)”* a group of PWDs performed a drama in line with the national theme. It also organized exhibition to inform the public what we are doing for PWDs in the area of HIV and health promotion.



Pictures captured during event

Participation in the celebration of International Day of Persons with Disabilities

The annual observance of the International Day of Persons with Disabilities was proclaimed by the United Nations General Assembly resolution 47/3 in 1992. It aims to promote the rights and well-being of persons with disabilities in all spheres of society and development, and to increase awareness of on the situation of persons with disabilities in every aspect of political, social, economic and cultural life.

As an Umbrella of Organizations of persons with disabilities in the fight against HIV&AIDS and for health promotion, UPHLS participated in all activities related to 2017 IDPD. On 3rd December

2017 UPHLS joined different Districts to celebrate the IDPD while at National level we were at Kayonza District, Gahini sector. It is in this framework that UPHLS organized mobile VCT for PWDs who participated in the event. In total 133 persons were tested for HIV. UPHLS also participated in exhibition where we presented our interventions to the public in the area of HIV and health promotion.



Pictures captured during the event

Participation in open day organized by Karongi District

As member of JADF Karongi District, UPHLS participated in Open day organized by the District from 13-17 March 2017. UPHLS exhibited the adapted communication materials to different categories of disabilities. At the same time we took this time to convey the message on HIV and AIDS to those who visited UPHLS stand as it is seen on the pictures below.



UPHLS stand during open day Karongi

III.1.2 Back up GIZ/ Global Fund Project funded by GIZ and Global Fund

After realizing that there is a need to strengthen constituency engagement especially for Civil Society organizations, the CCM Rwanda mobilized funds for increased CSOs constituency engagement.

It is in this regard that UPHLS received financial support to conduct consultation meetings with its constituencies for their increased engagement in response to HIV, TB and Malaria. Besides these meetings sponsored financially, UPHLS participated in other activities organized by CCM under the mentioned project as follows:

- Consultation Meetings of UPHLS constituencies,
- Sensitization of other CSOs not member of UPHLS,
- Participation at the National CSOs' Advocacy meeting.

III.1.2.1 Consultation meeting with UPHLS constituencies and sensitization of other CSOs

As mentioned above, three meetings have been hosted from June to December 2017. The first meeting with UPHLS DPO members was hosted on 30th June at Great Seasons Hotel, the second one with non - members were hosted on 14th July while the last one with UPHLS members was hosted on 14th December 2017. The two last meetings were held in UPHLS premises.

III.1.2.2 Sensitization meeting with other CSOs

This meeting brought together 32 representatives of CSOs not members of CCM and UPHLS staff on 12th July 2017 at the Centre Hozana in Kacyiru. Most of the invitees are the organizations that working with children with disabilities. The aim of the meeting was to sensitize 25 CSOs not members of CCM to increase their engagement in response to HIV, TB and Malaria response, identifying / discussing challenges faced by PWDS in the areas of HIV, TB and Malaria, priorities to be considered in the CCM agenda and updates on current situation of HIV, TB and Malaria in Rwanda.

III.1.2.3 Participation at the National CSOs' Advocacy Meeting

This meeting was organized in collaboration with CCM Rwanda and Civil Society organizations with the financial support from the Global Fund and GIZ. The main objective of the meeting was to share and promote the contribution of CSO in the National response to HIV/AIDS, Malaria and Tuberculosis and to advocate for the continuous support for their work and its sustainability. The meeting held at MARASA/ UMUBANO Hotel on 22 September 2017 and brought together around 80 participants that include the civil society organizations, public institutions, National Programs, UN Agencies.

Apart from the speeches and discussions, there was an exhibition of the CSOs and UPHLS supported persons with disabilities to participate in the meeting and one of UPHLS beneficiaries who is blind and live with HIV provided a testimony. In her testimony she emphasized on the challenges met by persons with disabilities living with HIV where she called the participants for paying attention to this category.



*"I have been positive for more than twenty years and I feel good now. I go regularly to health center to take my medicines. I request all CSOs to continue HIV awareness and prevention especially to people with disability who are HIV positive in particular and Rwandans in general. From advice of counselors, I try also to teach others how to prevent from HIV and I live very well with other people without any discrimination. We wish to be supported and do small generating income business for livelihood sustainability" said by **MUKARUKUNDO Donatille**.*



*"A healthy population is precondition for a health nation. The civil society has played an important role in fight against HIV, TB and malaria. We are mobilizing resources to be able to respond to needs in communities because funds are vital in the process of responding to the three diseases," said by **Dr. Patrick Ndimubanzi**, State Minister /MoH*

During the meeting, there was a space reserved for exhibition where different exhibitors presented what they are doing for their beneficiaries. Most of them were in the area of income generating activities including handcrafts while others were the promotion materials. On the side of UPHLS we presented the adapted IEC tools as it is shown in the below picture.



UPHLS Stand during the exhibition

The support to the CSOs interventions that are disability inclusive was one of the recommendations take during the meeting.



The meeting brought together different stakeholders including CSOs, Public institutions, National Programs, UN Agencies.

III.2. HEALTH PROMOTION PROJECTS

III.1.1 LCI Project funded by the CDC

For the project third year, funding continued with a focus on sustainability and building on lessons learnt to address key areas in fostering the inclusion of persons with disabilities (PWDs) in HIV care and treatment services. The project covered a number of activities under the three objectives of the project as follows:

III.1.1.1 Conduct regional meetings with stakeholders in HIV response around model HC:

The purpose of regional semi-annual workshops was to develop and share vision of disability friendly service provision in order to seek for everyone's commitment and contribution in advancing the inclusion of persons with disabilities in health services, HIV and AIDS services in particular. Workshops were held in each province of Rwanda (Gakenke, Gatsibo, Karongi and Nyanza Districts) and Kigali City (Gasabo District).



III.1.1.2 **Train local partners and DPOs in the design and running of inclusive HIV projects**

In previous advocacy events held by UPHLS and partners, there was a significant commitment of stakeholders to include PWDs in their programs. However, they expressed the need to acquire skills and knowledge in designing HIV and health projects that are disability inclusive, include PWDs in the implementation of these projects as well measure the impact of projects in improving health conditions for PWDs in their catchment areas.

In order to address this concern, UPHLS has organized a 5 day training for 25 local authorities and selected stakeholders including: district officials, local and international organizations, faith based organizations and representatives from disability organizations working at a national level. This training started on Monday February 20th up to Friday February 24th at la Palme Hotel –Musanze.



III.1.1.3 **Quarterly meetings with Regional Partnership Steering committees**

The steering committees' meeting aimed at fostering, strengthening and coordinating the local partnership and networking around the inclusive HIV&AIDS and health care services around the model health facilities in five Districts (Gasabo in Kigali, Gatsibo in Eastern province, Gakenke in Northern province, Nyanza in Southern province and Karongi in Western province).

The steering committee meetings contributed to the strong partnership in the inclusion of persons with disabilities in health services and regular follow up of recommendations provided during the regional networking and partnership workshops.

III.1.1.4 **Run the National Resource Center on disability and HIV/AIDS**

The installation permits as well as the budget for the physical installation of the resource center have become a challenge! UPHLS has approached relevant authorities and is waiting for the feedback, at the same time continuously seeking a partner that can support the physical installation of this important resource Center on disability and HIV in a way that is allowing free movement and user friendly for persons with disabilities.

III.1.1.5 **Host HIV and Health promotion workshops with HIV stakeholders:**

Since the start of the project, 5 health facilities (1 in each province) namely Kinyinya Health Center in Gasabo- City of Kigali, Nemba Health Center in Gakenke-Northern Province, Kabarore Health Center in Gatsibo-Eastern Province, Rubengera Health Center in Karongi-Western Province and Nyanza Health Center in Nyanza-Southern Province were modified and upgraded to meet the accessibility needs of clients with disabilities.

It is in this framework that UPHLS in collaboration with the National Council of Persons with Disabilities (NCPD) conducted an official launch of Kabarore model health center in the provision of disability friendly HIV services.

This event brought together HIV and Health promotion stakeholders made by senior government leaders from the Ministry of Health – Rwanda Biomedical Council, District officials, development partners, FBOs and different NGOs operating in countrywide and took place on 13th July 2017 in Gatsibo district at Kabarore health center to gain and share knowledge on inclusive health services, learning from and officially launch Kabarore Model HC in Gatsibo District, Eastern Province.

The event was conducted into two phases: the first phase consisted of official launch and touring Kabarore health center and, the second phase consisted of the exhibition of IEC tools developed/shared under LCI project and speeches made by different authorities.



The Mayor of Gatsibo and Deputy Director CDC launching Kabarore HC

After agreement with Project Officer based at CDC Kigali, UPHLS will host another HIV&AIDS and Health promotion workshop with MoH, RBC, NCPD and HIV&AIDS stakeholders for Official Project close-out in end of January 2018 to present project achievements, gaps, reports, plans and tools as well as their handover to MoH, RBC and NCPD to allow them decide on the next steps.

III.1.1.6 **Train local authorities in designing and running of inclusive HIV projects and programs**

In order to address the need to acquire more skills and knowledge in designing HIV&AIDS and health projects that are disability inclusive, UPHLS has organized a 5 days training for local authorities from different Districts including: Gasabo, Kicukiro, Gatsibo, Kirehe, Nyanza, Muhanga, Gakenke, Musanze, Karongi and Rutsiro. This training started on Monday march 13th up to Friday March 17th at la Palme Hotel –Musanze.



Participants in the training

The training covered different topics including: Historical background of disability in Rwanda, Linkage between HIV and Disability, Models of disability, Disability Mainstreaming concepts, Studies on the current situation of disability inclusion in health and HIV programs, Best practices for HIV&AIDS and Health services delivery for PWDs, Planning and running disability inclusive HIV&AIDS and health advocacy programs/campaigns, Monitoring and evaluating for the integration, participation and involvement of PWDs in HIV&AIDS and health programs.

III.1.1.7 Facilitate health facilities per Province to carry out study tours to the model health HC

As the organization is striving for change in providing inclusive services, UPHLS facilitated different health facilities to carry out study tour to the model health facilities to learn from them. This activity aimed at facilitating 10 health centers per province to learn from upgraded health center so they can also plan and make their facilities accessible to PWDs.



The study tour was specifically about to understand the accessibility concept, understand why it is necessary to have a trip chain that is accessible to PWDs, share best accessibility practices, and acquire practical experience applicable to disability inclusive HIV&AIDS and health services.



III.1.1.8 Conduct accessibility check for 10 health facilities per Province

UPHLS organized accessibility check for 10 health facilities to assess their accessibility for persons with different categories of disabilities (Physical accessibility, information accessibility, etc.) in order to show gaps and guide them in having their services accessible.



The accessibility check was carried out for Janja HC, Kinigi HC, Biryogo HC, Masaka HC, Gisenyi HC, Nkanka HC, Gahini HC, Rukomo HC, Kibilizi HC and Huye HC.



The accessibility check examined the location, accessibility of main entrance, parking, signage, walkways, ramps, lighting, doors, reception, toilets, exam room, water fountains, policies, visibility, information, confidentiality, weighing scales, wheelchair, exam tables, regular follow up, training, focal persons and feedback.



The accessibility check further provided recommendations to redress and upgrade existing services to make them disability friendly. Main services visited were: Head office, Reception, Waiting room, VCT, ART, Vaccination, Consultation rooms, Laboratory, Hospitalization, PMTCT, and Maternity.

III.1.1.9 **Conduct annual joint visit to model health facilities.**

UPHLS planned organized joint visits with RBC/MoH, NCPD, DPOs and District officials so as to learn from the best practices of the upgraded health centers, discuss on sustainability and together generate ideas for the possibility of making other health centers disability friendly as well.



The joint visits are expected to facilitate officials to advise their HIV&AIDS programs and construction projects to make them disability friendly since the start instead of waiting for renovations and some key points and decisions have been taken.

III.1.1.10 **Provide ground transport to health professionals from Model Health facilities**

This activity was to support health professionals from disability model health facilities to provide HIV services (VCT, CD4 count, etc.) at institutional homes and centers of PWDs in the catchment area of model health facilities in order to prevent HIV and/or improve the adherence and observance of PWDs who are HIV+.



CWDs getting tested for HIV

CWDs trained PEs after mobilization

III.1.1.11 **Painting and buying kid toys for counseling rooms in centers of CWDs living with HIV**

Toys and colors stimulate the development of the child and make it easier for him/her to learn. Particularly, children with disabilities who are HIV positive staying or going during the day in institution for rehabilitation, education and counseling.

It is in this framework that UPHLS recruited an artist for the painting and provision of kid toys to institutional homes and centers of children with Disabilities.



Five centers around the country have been selected by UPHLS, painted and provided with kid toys as follows: HVP Gatagara "HUMURA" in Gasabo District, Centre "AMIZERO" in Gisagara District, Fair Children Youth Foundation in Musanze District, Centre Filippo Smaldone in Bugesera District and Centre "URUGWIRO" in Rusizi District.

III.1.1.12 **Provide ground transportation to 50 PWDs in providing inclusive HIV HBC**

Based on the feedback provided by the Peer Educators, a big number of PWDs living with HIV did not care of attending ART program before being reached by trained peer educators but afterwards they understood the importance of positive living unfortunately most of them are living in extreme poverty. Other challenges include but not limited to: lack of care givers and lack of transportation means for those living far from health facilities.

Through this activity it was realized that whenever the client changes the residence and s/he is not followed up, she/he tend to skip doses without doctor's instructions due to lack of information or other disability related challenges. So, this activity has been the ways to help the clients with disabilities living with HIV make a good decision for their life. This activity contributed to the

good adherence of PWDs on HIV treatment and, to the raise of their knowledge on positive living.



Peer educators with visual impairment together with IHBC beneficiaries

III.1.1.13 **Installation of kitchen garden and education on nutrition for PWDs living with HIV**

UPHLS contributed to the improvement of the nutrition of PWDs living with HIV through education and installation of kitchen gardens for some of them.



Kitchen gardens for the beneficiaries

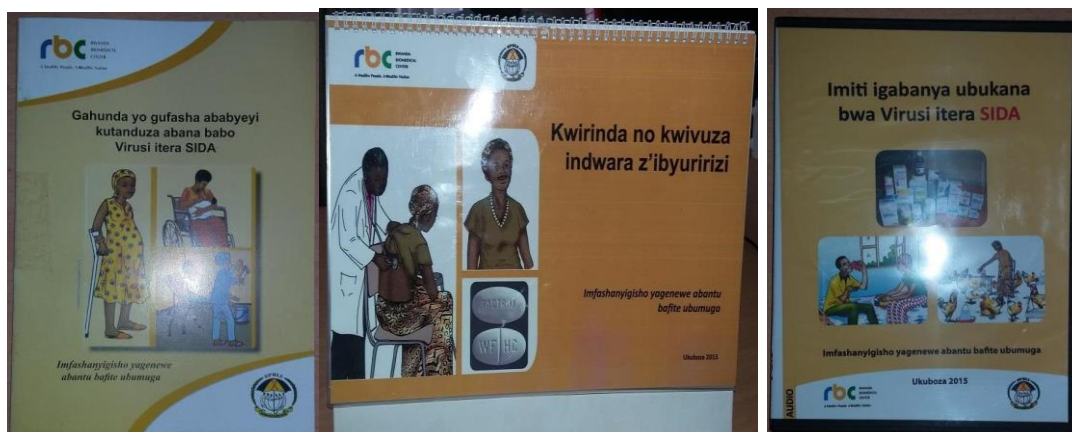
III.1.1.14 **Installation of garden and education on nutrition for parents of CWDs living with HIV:**

UPHLS under the LCI Project contributed to the improvement of the nutrition of PWDs living with HIV through education and installation of kitchen gardens for some of them. These kitchen gardens were piloted in 25 homes of PWDs and 10 homes of parents of CWDs living with HIV selected as most vulnerable in category 1 and 2 of Ubudehe from catchment areas of Model Health Centers in Gasabo, Gakenke, Gatsibo, Nyanza and Karongi Districts.

This activity was carried out by contracted experienced individuals based in Gasabo, Gatsibo, Gakenke, Karongi, and Nyanza districts, who undertook the education and installation of kitchen gardens for PWDs living with HIV in order to improve their nutrition.

III.1.1.15 Reproduce adapted IEC materials on ART, OI and PMTCT

Six hundred copies of adapted IEC tools on ART, OI and PMTCT have been reproduced for 10 health facilities per Province that carried out study tours to the model health facilities to learn from them. Samples of reproduced IEC materials (in Kinyarwanda) are provided below:



Booklet on PMTCT Image box on OI

DVD on ART

III.1.2 No –Cost Extension

On July 26th, 2017 the Umbrella of organizations of Persons with Disabilities in the fight against HIV&AIDS and for health Promotion (UPHLS) requested for a no-cost extension period for the cooperative agreement (Award Number: 6NU2GGH001239-03-02) for 4 Months (from September 30th, 2017 to January 31st, 2018) due to constraints faced during project implementation that had an impact on project timeframe. The requested period is expected to allow the organization to fully complete the implementation of all project activities in a way that ensures their sustainability beyond project lifespan.

III.1.3 Every life matters Project funded by Light for the World Netherlands

UPHLS in collaboration with Light for the World Netherlands and partners in Rwanda are implementing a Project to make inclusive eye care services and Sexual Reproductive health in Rwanda. Through a four year project, titled Every Life Matters, which will run from 2017-2020, the partners aim to document and develop good practices on inclusive health care, with a particular focus on eye care and sexual and reproductive health services. The project started with a baseline assessment (consisting of an accessibility check and DISC) and a planning workshop to guide its implementation.

III.1.3.1 Accessibility assessment

Partners in this Project have come together to learn and understand how healthcare services can be made accessible for persons with disabilities through Focus Group Discussions with DPOs members and Accessibility check with Disability Inclusive Score Card (DISC) which were conducted at Kabgayi Eye unit and Shyogwe health center in Muhanga on the issue of eye care services, Vision Jeunesse Nouvelle, Rubavu youth friendly center and Nyundo health center in Rubavu district on the SRH services.



In the first months of the project, an initial assessment has taken place in order to understand the good practices, gaps and barriers in inclusive eye and, sexual and reproductive health services. The results of this assessment are expected to feed into the rest of the project, and will define key questions that partners shall focus on answering.

III.1.3.2 Project planning workshop

A planning workshop has taken place in Musanze from 28th to 30th November 2017 to share knowledge on disability, disseminate findings from the assessment and allow project partners to plan accordingly.

The planning workshop brought together 20 participants including: 4 persons from UPHLS, 2 persons from the Light for the World, the Netherlands, 6 persons from DPOs, 3 persons from partners, 3 persons from Health Facilities and 2 persons from Youth friendly centers. The workshop came up with project action plan for both SRHR and EYE care services.



Facilitator and participants

III.2. PROMOTION OF EMPLOYEMENT PROJECTS

III.1.1 Employable phase II Project funded by Light for the World Netherlands and EDC Huguka Dukore Project

EmployAble Project and USAID Huguka Dukore Project, both projects are based on *“employability skills so that the youth (vulnerable youth including Youth With Disabilities) can find work in the local job market”*. While Rwanda is on track to achieve its goals of economic growth, education for young adults is lagging behind. With many unable to complete middle school, young adults aged 16–30 need training in work readiness and employability skills so they can find work in the local job market.

The USAID-funded Huguka Dukore project (USAID HD AKA Project) provides learning and internship opportunities; entrepreneurship training and coaching; and access to financing, family planning, and reproductive information. The project promotes gender equality, social inclusion for youth with disabilities, and holistic health programming. It builds upon workforce development strategies successfully implemented by EDC under the USAID Akazi Kanoze and the Mastercard Foundation Akazi Kanoze 2 activities. Within one year, the HD project is targeting 500 vulnerable youth including Youth with Disabilities.

The EmployAble Project II is funded by Light for the World/Netherlands and Liliane Foundation, the EmployAble II is implemented in partnership between the Umbrella of Organizations of Persons with Disabilities in fighting against HIV/AIDS and for health promotion (UPHLS) and the National Union of Disabilities ‘Organizations of Rwanda (NUDOR).

EmployAble II is designed to contribute to “Inclusion of YWDs in labour market through relevant technical and business skills development in Rwanda. Within three years (2017-2019), at least 400 youth with disabilities will be selected and supported in training and finding (self) employment. Employers and (self)-employment agencies will be trained in inclusive workplace management and inclusion of disabled employees/producer groups will be promoted in different ways.

The both Projects District Partners have shown a strong partnership in the Project to improve the lives of unskilled youth with disabilities fleeing the village to cities for begging. Those Districts (Rulindo, Musanze, Rubavu and Muhanga) have owned the project and considered it seriously up to put it in the “District Performance Targets/IMIHIGO” format, fiscal year 2017-2018.

III.1.1.1 Key activities and achievements

The EmployAble and HD AKA both are complementary projects, but EmployAble mainly focuses on improving Youth With Disabilities' technical skills and employment whereas HD AKA come in with a particularity of WRN! curriculum. Work Ready Now! (WRN!) is EDC's curriculum and approach for delivering effective work readiness training to youth, in and out of school. WRN! helps young people in emerging economies develop the "soft skills" needed to succeed in earning a living. Both projects are implemented through the following activities:

III.1.1.2 Introduction of the project at the level of the Districts

The objective of the meeting at each district partners was to inform the District authorities about the two activities (Mobilization of YWDs and Group Formation, market survey) to come and meet with local partners (some) who will do the identification in other to provide them guide lines on identification of YWD beneficiaries to the project.

On the agenda of each meeting we had to discussed the back grounds on UPHLS & NUDOR , Brief presentation on the EmployAble project Phase 1&2 and Discussing on the identification form and process of the identification of YWDs

Participants to the meeting at each respective District were: The District Mainstreaming Officer, NCPD Coordinator at district level, four representatives of NUDOR POs and the Employable team from UPHLS and NUDOR.

III.1.1.3 Mapping project stakeholders: Labour market analysis

This activity was about mapping all labor market actors include skills training providers, employment services and agencies, training institutions, workers' and employers' organizations, microfinance institutions, and other actors affecting the labor market in all 4 Districts of implementation. After this activity, it was to match opportunities with the needs and ambitions of the individuals' youth with disabilities. As result, the information on skills training providers and employers has been well collected.

III.1.1.4 Mobilization and identification of trainees with disabilities

As partners of NUDOR in the CBR Program are already operational in the districts are acquainted working with children and youth with disabilities, they can help in gathering the information for beneficiaries. Moreover they serve children aged between 0-25. Therefore, some children may have attained the age before doing a vocational training or never get another support to help them

sustain their life before quitting the program and this program would be beneficial for them. After collecting information of beneficiaries, the data sets were shared with the DMOs, NCPD coordinators and other POs in order to verify and complete any missing information before selection of beneficiaries for the first intake.

III.1.1.5 **Orientation session**

After the identification and selection, it was orientation session on available TVET trainings programs and apprenticeship, internship, entrepreneurship training schemes

After merging both projects, EmployAble and HG AKA Projects, we came up with the following statistics:

Technical skills training sites /EmployAble II

District	Sector	Cell	Site	Trade	# Trainees		
					YWDs	Vulnerable youth	Total
Rulindo	Base	Gitare	VTC Mushonyi	Tailoring	3	15	18
				Welding	1	15	16
	Masoro	Kigarama	VTC FCPMH	Leather works	6	0	6
				Tailoring	7	15	22
	Cyungo	Burehe	VTC Burehe	Hair dressing	3	15	18
				Knitting	7	15	22
				Hair dressing	5	7	12
				Tailoring	11	8	19
	Bushoki	Nyirangarama	VTC Nyirangarama	Leather works	5	0	5
				Auto Mechanics	2	6	8
				Hair dressing	2	7	9
	Mbogo	Bukoro	Kinini	Tailoring	3	10	13
				Tailoring & Knitting	12	0	12
	SUBTOTAL 1					67	113
Musanze	Cyuve	Mpenge	AFOC	Knitting	5	0	5
				Tailoring	5	0	5
	Gacaca	Karwasa	AFOC	Tailoring	4	16	20
				KIATO AFADHAL	12	9	21
	Muhoza		Centre St Vincent	Tailoring	8	13	21
				Saneza Saloon	13	9	22
				SHAGGY Star Garage	0	20	20
	Muko	Kivugiza	Menuiserie ISANGANO	Carpentry	9	0	9
Nyange	Kamwumba	COOTN Nyange	Tailoring	8	0	8	

			COOPAP Nyange	Knitting	10	0	10
				Handcraft	1	0	1
	SUBTOTAL 2				75	67	142
Rubavu	Kanama	Mahoko	VTC CEFOTEL	Tailoring	15	9	24
				Welding	2	1	3
			Mechan. Auto	6	8	14	
			Rubavu Polytechnics	Curinary Arts	3	0	3
	Rubavu	Rukoko	VTC Ndengera	Knitting	5	0	5
				Tailoring	6	17	23
				Auto Mechanics	7	8	15
	Kanzenze	Nyamikongi	VTC Kanzenze	Welding	8	0	8
	Mudende	Kabumba	Atelier de Couture	Tailoring	12	0	12
	Gisenyi	Mbugangari	Atelier de Couture	Knitting	5	0	5
	Nyamyumba	Munanira	Atel. Cout. Bras. Hand.	Tailoring	20	0	20
Munanira		Atelier de Soudure	Welding	5	0	5	
	SUBTOTAL 3				94	43	137
Muhanga	Nyamabuye	Gahogo	NGADEO Business Group LTD	Auto Mechanics	8	0	8
	Rugendabari	Nsanga	Smart Saloon	Hair dressing	9	0	9
			VTC Rugendabari	Carpentry	8	0	8
				Tailoring	11	0	11
	Nyamabuye	Gitarama	Atelier chez Frederic	Leather works	14	0	14
	SUBTOTAL 4				50	0	50
	GRAND TOTAL				286	223	509

III.1.1.6 EmployAble/M&E, L&A, L&S, Communication, Partnerships, Fundraising

M&E/Documentation

Within the EmployAble, different tools for Monitoring and Evaluation have been developed (e.g. Individual Assessment Form), as well as other tools used for USAID HD AKA project.

Learning & Sharing

Each year of project implementation, the EmployAble implementing countries use to meet in one of the countries and share lessons and experience. This workshop was planned and will be held in Ethiopia next April.

Lobby & Advocacy

In terms of Lobby and Advocacy, the EmployAble-Rwanda has launched the Program on 19th October where Government and private institutions have been invited. About 80 participants from both institutions were invited. Presentation on both phases of the EmployAble has been done. The EmployAble Publication of the EmployAble I has been summarized and presented as well as the phase II activity plan.

The audience was very interested to the program and contacts have been shared. The main objective of launching the EmployAble phase II was to get the opportunity of sharing the results from phase I of the project as well as the challenges faced during implementation and some measures taken to avoid them in the second phase. It was also to brief the new partners about the project. The launching was again an opportunity to advocate for the project beneficiaries including graduates from phase I for employment.

External Communication

During the first phase of EmployAble I at the end of which we were able to reach substantial results, we learnt that it is very important to allocate resources for the program communication strategy in order to be able to communicate the stories of our beneficiaries to

the broader public and create impact for change. For this purpose we have hired a temporary communication resource person who would be responsible for the creation of photo and video materials of good quality and with the clear and touching communication message of EmployAble II – inclusion of youth with disabilities in skills development training and labor market. Mr. Gilbert Sibomana was selected for that.

Partnerships

Information on new partnerships developed within EmployAble II (meetings with different stakeholders, briefings, visits etc.). UPHLS has now signed two memorandums with new partners (Akazi Kanoze Access and EDC (Education Development Center)).

Two meetings with EDC have been held, one of 17th, between EDC and implementing partners on USAID HD AKA Project where each Implementing Partner has delegated three representatives (UPHLS Executive Director, Project Coordinator and M&E) to this orientation meeting to discuss on the USAI HD AKA project overview and technical approach, youth selection approach and HD pathway, WRN! Trainers selection and WRN! training supervision. This meeting has been followed by the individual meeting where EDC has invited separately each implementing partner to discuss on the HD project staffing plan and reporting system in general. This has taken place on 27th September. Tentative partnerships with other NGOs have been done, as with GIZ in progress.

Internal Communication

As usual, during this year we had monthly meetings UPHLS – NUDOR on the progress EmployAble implementation. We discussed on the way how the contracts with the training skills providers will be designed, the budget reallocation has been revised together, etc.

Employable LAB development/challenge (formulation)

In each EmployAble implementing country, a specific challenge related to the training of technical skills has been identified and analyzed. For the case of Rwanda, we have chosen the following challenge: “***How to train youth with hearing impairment who don’t know sign***

language?” a one week workshop was organized to get a good understanding of the problem and find solution together. For that a core team made up of persons from UPHLS, RNUD, NUDOR and three TVETs was put in place to discuss the problem.

A core process was followed to try finding solutions:

- ✓ Identification of four youth and four entrepreneurs for pilot
- ✓ Discuss the problem analysis and sharing the lessons and good examples.
- ✓ LAB Core team: The core team started formulating their ideas for solutions
- ✓ Selection of best ideas and development of prototypes
- ✓ Inviting 3 TVETs and youth parents to the workshop

This challenge has been put in the Annual Working Plan 2018 for execution.

III.1.1.7 **Work Ready Now! Training**

EDC’s *Work Ready Now!* (WRN!) delivers relevant and effective work readiness training to youth, giving them a second chance at economic success. WRN! participants develop the work readiness skills needed for economic success, such as communications, leadership, workplace safety, and financial literacy skills. It’s a 25 days’ training provided to the youth ready to start the technical training skills and now with the intake I that has started on 11th December, we have the number on the following sites:

No	District	WRN! Sites	Sector	Centre	Trainees
1	Rubavu	2	Kanama	VCT CEFOTEL	30
			Rubavu	VTC Ndengerera	30
2	Musanze	3	Muhoza	Soeurs de St Vincent de Paul	28
				Soeurs de St Vincent de Paul	28
			Gacaca	GS Gacaca	30
3	Rulindo	4	Masoro	VTC Fraternite (FCPMH)	30
			Kinihira	Centre Inshuti	31
			Bushoki	VTC Nyirangarama	30
			Base	VTC Bushonyi	30
TOTAL		8			267

III.1.1.8 **Disability Equity Training for technical skills providers**

The main objective for this activity is to equip the Employable partners both technical training providers from formal and non-formal TVTs, other partner from selected District the knowledge of disability mainstreaming. It has taken place in Musanze District, bringing together the up mentioned partners (25 participants). The specific objectives are:

1. To reach a social, as opposed to an individual, (medical), model of disability through all training exercises and teachings.
2. To challenge some of the common myths and false distinctions that relegates disabled people to the status of a discriminated-against minority (Increase understanding of the discrimination faced by PWDs).
3. Mobility orientation for persons with visual impairment as well for persons with hearing impairment
4. Examine the barriers that PWDs experience from a social as opposed to medical model of disability
5. To demonstrate the practical application of equal opportunities policies for disabled people within the immediate area of work of course participants

IV FINANCIAL UTILIZATION

IV.2. Bankers

The following are the bankers for the current year:

BANK	ACCOUNT NUMBER	ACCOUNT NAME	RELATED PROJECTS
I&M Bank (Rwanda) LTD	0010-5034654-01-39/RWF	UPHLS	Organizational Main Account
	010-5034654-09-15/RWF	UPHLS/UNDEF (RWF)	UDF-RWA-12-495/UNDEF
	010-5034654-10-12/RWF	UPHLS/LFW-EmployAble programme	Light for the World/Netherlands
	010-5034654-11-09/USD	UPHLS/CDC (USD)	USG/CDC Atlanta (FAIN: U2GGH001239)
	010-5034654-12-06/USD	UPHLS/UNDEF (USD)	UDF-RWA-12-495/UNDEF
	010-5034654-13-03/RWF	UPHLS/CDC (RWF)	USG/CDC Atlanta (FAIN: U2GGH001239)
	010-5034654-15-94/RWF	UPHLS/ELM (RWF)	Light for the World/Netherlands
	010-5034654-16-91/RWF	UPHLS/HD-EDC (RWF)	USAID through EDC
EQUITY Bank (Rwanda) LTD	4012200446915/RWF	UPHLS	UPHLS
	4012200446917/RWF	UPHLS/RBF NSP-HIV	The Global Fund (GF)

Budget execution Follow up

No	DESCRIPTION/SOURCE OF FUNDS	Financial Year 2017	Financial Year 2017	Financial Year 2017	Performance	Comments
		As at Month of November 2017	As at Month of November 2017	As at Month of November 2017		
		RECEIVED	EXPENSED	VARIANCE		
	FUNDED PROJECTS	545,254,251	496,796,649	48,457,602	91%	
1	The Global Fund (GF)/RBF funded project	125,807,727	116,985,188	8,822,539	93%	The remaining balance is due for December 2017
2	USG/CDC Atlanta (FAIN: U2GGH001239)	305,930,088	325,882,728	- 19,952,640	107%	The slight overexpending on this project is covered by the previous year as it norins in October instead of January. No negative balance in general
3	EmployAble/ Light for the World/Netherlands	40,011,722	36,578,173	3,433,549	91%	The remaining balance is due for December 2017.
4	Every Life Matters/ Light for the World/Netherlands	47,961,884	8,024,638	39,937,246	17%	This project began in July 2017. The balance will be brought forward to the following year as agreed with the donor.
5	Huguka Dukore/USAID-EDC-AKA	15,556,800	-	15,556,800	0%	A project that began in November 2017 and funds released in early December 17
6	UPHLS/ST projects /NCPD, UNFPA, UNAIDS, LFW	9,986,030	9,325,922	660,108	93%	Sign language in schools, IDPD Celebration, Forums on HIV/AIDS and Disability/short term projects almost closed. Remaining the GF/CCM
	OTHER SOURCES	64,526,911	65,492,558	- 965,647	101%	
7	*UPHLS/Other revenues	64,526,911	65,492,558	- 965,647		(Bid selling, braille printing, VAT refund by RRA, local support, etc.)
	TOTAL	609,781,16	562,289,207	47,491,955	92%	8%



V RECOMMENDATIONS

Disability issues have to be mainstreamed in all services/ sectors where we need a strong collaboration for all.

Stigma still a challenge and we need community mobilization including local leaders, the families of PWDs and the community members in large about disability and the specific need to address it.

Reinforce the capacity of Disabled People Organizations, associations and cooperatives of PWDs on monitoring and evaluation especially data collection and reporting.

UPHLS need to use its 5 strategic Plan as an opportunity to resolve challenges and put in place in lacking documents.

VI CHALLENGES

UPHLS is using external funding with a global economic crisis which is impacting the development of organization.

Fund transfer delays which is effecting the well implementation and cutting of the budget planned for some donors.

Non Prioritisation and few partners in disability and HIV while UPHLS is known as an organizations specialized in HIV and Disability.

Lack of startup tool kits for the graduate students from EmployAble program and lack of involvement of YWDs in Huguka Dukore Program

VII CONCLUSION

We are proud of what we achieved during this year and it was due to the commitment and hardworking of the project team and our community volunteers/ peer educators who work tearlessly for the project to be successful.

We express our gratitude to the Ministry of health, Rwanda Biomedical Centre, GIZ and Global Fund for continuous collaboration and financial support for the activities related to HIV prevention among PWDs.

Last but not least, we thank the Health facilities for their collaboration in the organization of mobile VCT to reach PWDs in their localities.

Finally we acknowledge UPHLS organs and Partners for the strong collaboration during this period, without them UPHLS will not be able to make this achievement.

VIII ABBREVIATIONS :

AGHR:	Association Générale des Personnes Handicapées au Rwanda
AIDS:	Acquired Immune Deficiency Syndrome
ALSAR:	Association of Landmine Survivors and Amputees of Rwanda
CBO	Capacity Building Officer
CCM:	Country Coordination mechanism
CDC:	Centers of Disease Control and Prevention
CDLS	Committee de District de lutte contre le SIDA
CNLS :	Commission Nationale de Lutte contre le SIDA
CSO:	Civil Society Organizations
CWD:	Children with Disability
DMO:	Disability Mainstreaming Officer
DOT	Digital Opportunity Trust
DPOs:	Disabled People Organizations
GF:	Global Fund
HIV:	Human Immunodeficiency Virus
IDPD	International Day of Persons with Disabilities
IEC:	Information, Education and Communication
IGAs:	Income Generating Activities
JADF	Joint action development Forum
LCI:	Local Capacity Initiative
M&E:	Monitoring and Evaluation
MoH:	Ministry of Health
MOs:	Member Organizations
MoU:	Memorandum of Understanding
MT:	Management Team
NCPD:	National Council of Persons with Disabilities
NGOs:	Non-government Organizations
NOUSPR:	National Organization of Users and Survivors of Psychiatry in Rwanda
NPC:	National Paralympic Committee
PE:	Peer Educator
PEPFAR:	The U.S President's Emergency Plan for AIDS Relief
PWDs:	Persons with Disabilities

RBC:	Rwanda Bio Medical Center
RBF:	Results Based Financing
RNUD:	Rwanda National Union of the Deaf
RUB:	Rwanda Union of the Blind
RwF:	Rwandan Francs
SACCO:	Savings and commercial Cooperatives
SRH:	Sexual reproductive health
SSF:	Single Source of Funding
STIs:	Sexually Transmissible Infections
TA:	Technical Assistance
THT:	Troup of Handicapped Persons “Twuzuzanye”
TVET:	Technical Vocational and Education Training
TWG:	Technical Working Group
UNAIDS:	United Nations on AIDS
UNDEF:	United Nations Democracy Fund
UNFPA:	United Nations fund for population agency
UPHLS:	Umbrella of Organizations of Persons with Disabilities in the fight against HIV&AIDS and for health promotion
USAID:	United States Agency for International Development
VCT:	Voluntary counseling and Testing
WHO :	World Health Organization

IX ANNEX

1. Financial Report
2. Internal Audit Report
3. External Audit reports
4. Best practices stories