

The cover features a central white diamond shape with a dark blue border, set against a yellow background with diagonal stripes. The text is centered within the white diamond.

2018

UPHLS

ANNUAL REPORT



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



UPHLS NARRATIVE ANNUAL REPORT

(January - December 2018)

December 2018

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Abbreviations

- AKA: Akazi Kanoze
- AIDS: Acquired Immune Deficiency Syndrome
- ART: Anti-Retroviral Therapy;
- BYOB: Be Your Own Boss
- CDC: Centers for Disease Control and Prevention
- CHW: Community Health Worker
- CRPD : Convention on the rights of Persons with disabilities
- CWDs: Children with Disabilities
- DPOs: Organizations of Persons with Disabilities;
- DRF: Disability Rights Fund
- EDC: Education Development Center
- HC: Health Centre
- HBC: Home Based Care
- HIV: Human Immunodeficiency Virus
- HD: Huguka Dukore
- IEC: Information, Education and Communication
- LCI: Local Capacity Initiative
- L&S: Learning and Sharing
- MoH: Ministry of Health;
- M&E: Monitoring & Evaluation;
- NCPD: National Council of Persons with Disabilities;
- NGOs: Non-governmental Organizations
- NISR: National Institute of Statistics of Rwanda
- OI: Opportunistic infections
- PE: Peer Education / Peer Educator;
- PWDs: Persons with Disabilities;
- PMTCT: Prevention Mother To Child Transmission
- RHA: Rwanda Housing Authority
- RHCC: Rwanda Health Communication Center
- RBC: Rwanda Biomedical Centre;
- ToT: Training of Trainers
- UPHLS: Umbrella des Organisations des Personnes en Situation de Handicap
Luttant contre le VIH&SIDA et pour la promotion de la Santé
- USAID: United States Agency for International Development
- WHO : World Health Organization
- YWDs: Youth with Disabilities

BACKGROUND

Globally, it is estimated that 1 billion people have a disability. Of those aged over 15 years, approximately 110 - 190 million (2.2 - 3.8%) experience significant disabilities; Disability is increasing in prevalence due to ageing populations, trauma, accidents and the increase in chronic health conditions, including HIV (World report on disability, Geneva: WHO and World Bank; 2011). Persistent discrimination against and exclusion of PWDs, in particular women and girls with disabilities, increases their vulnerability, including their risk of HIV infection (Disability and HIV, UNAIDS 2017).

While the Millennium Development Goals were silent on disability, the new Sustainable Development Goals feature a strong will to “leave no one behind”, including people with disabilities (Transforming our world: the 2030 agenda for sustainable development. New York: United Nations; 2015). Similarly, the CRPD (Convention on the Rights of PWDs; New York: United Nations; 2008) calls on state parties to ensure the rights of people with disabilities to participate and be included in all spheres of life, including specific articles relating to the right to access health services, including sexual and reproductive health, and rehabilitation services.

CRPD also recognizes that “women and girls with disabilities are at greater risk” and need specific protection from negligence and violence (Disability and HIV, UNAIDS 2017). Considering the facts above mentioned, persons with disabilities shall begin to be included in all HIV&AIDS policy formulation, interventions planning, programming and implementation.

Despite many advances in HIV&AIDS response in Rwanda to date, there have been few interventions that have directly targeted (or indirectly included) persons with disabilities and almost none of these interventions have been systematically monitored or evaluated.

As a contribution towards the inclusion of Persons with disabilities in HIV response, health promotion, skills development and Employment; the Umbrella of organizations of Persons with Disabilities in the fight against HIV and AIDS and for Health Promotion (UPHLS) advances the rights of PWDs through policy making, programming and implementation.

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 , registered under final Registration No 048/NGO/2015 by RGB. The head office is located in Kacyiru sector, Gasabo District with 4 regional offices across the country and is composed by 10 member DPOs.

UPHLS's 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. UPHLS is recognized for its contributions to awareness raising on the rights of PWDs, inclusive governmental policies and implementation, in particular in the areas of HIV&AIDS and Health, and lately also in Employability. The organization has built up expertise in training service providers, setting up model disability inclusive health facilities and, recently developed experience in facilitating Multi-stakeholder processes.

In 2016, UPHLS developed a new Strategic Plan in close consultations with its member organizations and partners. A SWOT analysis showed that much has been achieved by the disability movement in Rwanda. Currently there is a broad awareness and acceptance of disability in society and among policy makers. However, gaps remain between governmental policies and implementation. Many PWDs continue to struggle with exclusion and poverty.

By confronting the opportunities and challenges with UPHLS strengths and weaknesses, a number of strategic issues were identified in the Strategic Planning process. UPHLS will deepen its central focus on HIV&AIDS, the reason why the umbrella was originally established. Access to appropriate Health Care for PWDs and improvement of their health, in all aspects, is crucial to prevent, treat and mitigate the effects of HIV&AIDS. Decent (self-) employment of PWD and/or their families/care givers, leading to improved livelihoods, is crucial to sustain improved health, enhance inclusion in society and break the vicious disability-poverty circle.

The present report presents a summary of achievements of 6 projects and other small projects for a period from January to December 2018 namely: Scaling up access to HIV and AIDS services , Strengthening HIV Clinical Services in the Republic of Rwanda ,Every Life Matters, WASH for All, EmployAble phase II and USAID Huguka Dukore Akazi Kanoze .

II. UPHLS ADMINISTRATION

1. The UPHLS Organs meetings and board members participation in the events

From January to Decembers 2018, different governing organs meetings were held as follows:

- ✓ One General Assembly composed by all Members organizations representatives held on 23 December 2017.
- ✓ Two Consultative meetings with Members organizations
- ✓ Five Board meetings a
- ✓ 8 Bureau meetings.
- ✓ Two audit committee meetings with audit exercises.
- ✓ Social events where Board members or members organizations Representatives participated on behalf of UPHLS.
- ✓ Participation in the implementation of activities by member's organizations.

2018 was characterized by a strong collaboration between UPHLS's organs which helped to achieve more from National Level to the Community Level where the organization is implementing different activities using its Volunteers and Regional Offices.

2. Management of staff and materials

From January to December 2018, UPHLS equipment and staffs were managed according to the UPHLS Administrative and financial manual and Rwandan laws. UPHLS has a total of 22 staff as well as many equipment and materials which are registered and managed in a database system.

The Staff meetings and management meetings were held and matters arising were solved accordingly and smoothly. Some changes happened in the staffing where one staff left the organization who is replaced by an International volunteer.

The Executive secretariat participated in national disability and/or HIV&AIDS, CCM, Different TWGs 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.

On 5th march 2018 UPHLS together with RNUD, UWEZO and AGHR participated in a training on project management an fundraising organised by CCM Rwanda at Marasa Umubano Hotel

3. Administration

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.

4. Fundraising and resource mobilization

UPHLS in collaboration with its partners developed a number of Proposals for sustaining the interventions. In this Period, a total of 16 Proposals were done with more than 1,2 Million USD and one new project has been funded with a continuation of all projects implemented by UPHLS .

The Projects continuation applications are done and revised yearly. From January 2019 UPHLS will implement 7 Projects.

UPHLS Board and executive secretariat in consultation with DPOs members developed different policies aiming at strengthening the organization namely:

- Child protection policy
- Whistle blowing policy/fraud/corruption
- Conflict of interest policy
- Risk management policy
- Code of ethics
- I.T policy
- Asset Management Policy
- Safeguarding policy
- Anti-bribery & corruption policy

UPHLS organs developed its Program Needs assessment and other researches which can be founded on UPHLS online library: <http://105.178.105.40:2600/>

5. The Social activities

UPHLS social fund is in place and is supporting social events as well as working as fund to support staff economically, 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 the genocide perpetrated against Tutsi in 1994 in collaboration with NCPD as well as other social events organized by DPOs members of UPHLS and its Partners.

III. UPHLS PROJECTS IMPLEMENTATION

1 Scaling up access to HIV and AIDS services with focus on prevention

UPHLS has been selected as one of the CSOs that implement HIV NSP Operational Plan 2018/2020 funded by GF and the Government of Rwanda through the Ministry of Health with focus on HIV&AIDS, SRH and Health Promotion among persons with disabilities.

a. Training of Youth with Disabilities on SRH and HIV (out and in school)

Sexual and reproductive health rights (SRHR) are fundamental human rights; however youth with disabilities are most of the time forgotten and hard to reach when it comes to initiatives targeting SRH and HIV prevention. Lack of recognition of the rights of Persons with Disabilities in sexual and reproductive health results in the violation of their rights (particularly girls and women with disabilities), including lack of access to sexual and reproductive health information and services, as well as physical, mental, and sexual violence. Hence, UPHLS organized training of 189 YWDs Youth including 93 boys and 96 girls (with 101 YWDs in schools and 88 out of schools).

The training took place from 20 to 27 May 2018 at Bethany Investment Group Ltd in Rubavu District for the participants of Northern and Western Province, Centre d'accueil AVEGA Agahozo in Rwamagana District for the participants coming from Eastern Province and Centre St. Andre Kabgayi in Muhanga District for the participants coming from Kigali and Southern Province.

Training helped participants to increase their knowledge on following areas: Disability and Rights, Sexual and Reproductive Health, Sexual and Reproductive Health Risks, Sexual transmitted diseases, HIV and AIDS, drug abuse, early pregnancies and associated consequences.

During the training we have realized that some of the youth have little information on SRH, HIV&AIDS while others have wrong information on SRH, HIV&AIDS. We tried to satisfy some of curious questions asked by youth who attended the training about the misconceptions of PWDs on the issue of sexuality.



Training of YWDs in Centre St. Andre Kabgayi



Training of YWDs in Bethany Investment Group Ltd

b. Training of Trainers on HIV and Disability needs

The main objective of this training was to equip the trainers with necessary knowledge on SRH, HIV&AIDS and Disability who in turn had to train Peer Educators.

The training of trainers took place in two venues namely Centre St. Andre Kabgayi for the trainees coming from Southern and Western Provinces and those coming from Kigali city while the participants coming from Eastern and Northern Provinces were in “Centre Pastoral Notre Dame de Fatima”.

The ToT was conducted in the period of 5 to 8th June 2018. In total 60 persons with disabilities (39 males and 21 females) have been trained as ToTs. To be trained as ToTs.



Training of Trainers (ToT)

c. Training of Peer Educators

The training reports summed up 311 persons with disabilities trained as peer educators including 149 Males and 162 Females. They are prepared to conduct disability friendly outreach campaigns within their self-help groups. This training helped the trainees to increase their knowledge on SRH, HIV & AIDS and disability rights. These sessions were conducted by ToTs under coordination of the Regional Officers.

The training took place from 11 to 16 June 2018 at Bethany Investment Group Ltd in Rubavu (for the participants of Northern and Western Province), Centre d'accueil AVEGA Agahozo in Rwamagana (for the participants coming from Eastern Province) and Centre St. Andre Kabgayi in Muhanga (for the participants coming from Kigali and Southern Province).

The training covered the following areas:

- ✚ Behavior change communication (Communication and how to the sessions on behavior change communication and Peer education)
- ✚ Strategies to be used while communicating with PWDs with various types of disability
- ✚ SRH AND HIV generalities (The difference between HIV and AIDS, How HIV and AIDS is transmitted, Risks factors surrounding persons with disabilities in relation to HIV and AIDS, Effective ways of preventing HIV/AIDS, Voluntary Counseling and Testing , STIs, PMTCT and Family planning)
- ✚ Disability Rights (UN Convention) with much focus on the articles related to health particularly those on SRH
- ✚ Understanding and challenging the stigma facing Persons with Disabilities with HIV and AIDS
- ✚ Leadership and Cooperative Management



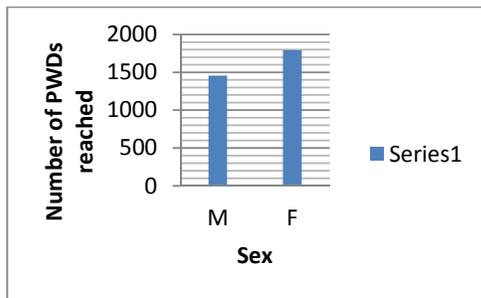
Training of Peer Educators at Centre St Andre Kabgayi

d. Disability-friendly outreach sessions on the prevention of HIV, STIs, SRH, VMMC

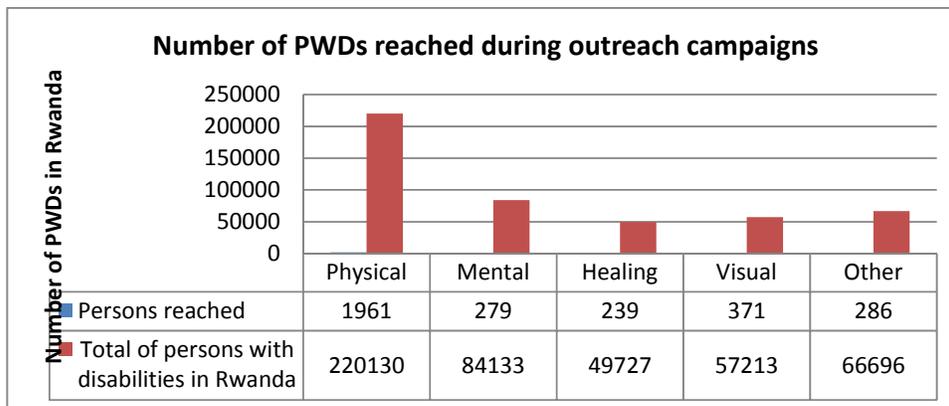
From January 2018 to December this year; 186 outreach campaigns have been carried out by Peer educators within their self-help groups that gathering mainly persons with disabilities. We have also reached out youth with disabilities in their centers/ special schools by using YWDs trained on SRH.

The current outreach campaigns differ from the previous ones because we focused on youth with disabilities whether they are in schools or within their self-help groups in the community and we will continue to increase the number of youth with disabilities that are attending the awareness campaigns by decreasing the number of elders as we found that there are YWDs who have little information on SRH education and are engaged in unsafe sex which lead some of them in early pregnancies and other sexual health risks. The report summed up 3,249 people including 1,455 males and 1,794 females that were reached out during outreach sessions (for more details see the table below).

e. Persons reached on outreach campaigns by sex



The above chart shows that during this year, the number of women is higher than the number of men who participated in Outreach campaigns.

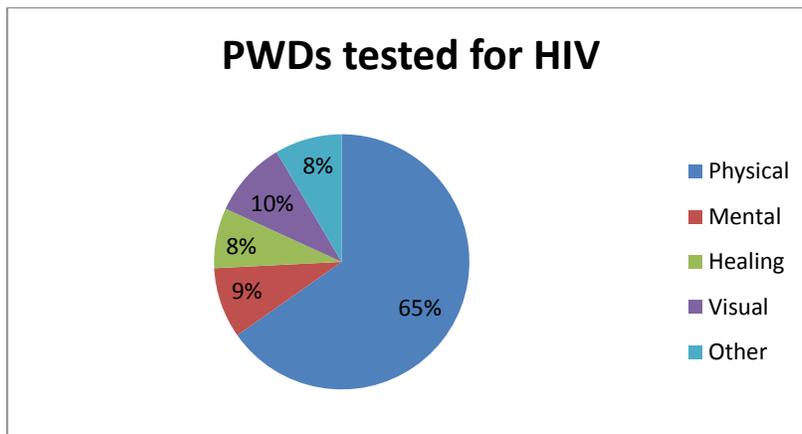


As it is mentioned on the above chart, persons with physical disability are predominantly participating in awareness campaigns compared to categories of disabilities.

f. VCT Sessions

During the outreach sessions, some of the participants voluntary wished to be tested to know their status. Hence we collaborated with the health centers to provide this service under the accompaniment of their peer educators. Therefore, some participants went voluntary to the health Centres but those who are far from the health facility or who have difficulties to reach there were reached at their places through mobile VCT. In total 3,036 PWDs were tested for HIV including 1,279 males and 1,757 females as the table below and pictures show.

g. Percentage of PWDs tested for HIV during disability friendly outreach campaigns



The chart above shows that the percentage of persons with physical impairment is higher than other categories. This is justified by their higher presence even in outreach sessions and in general, persons with physical impairment are predominating in national data on disability.



HIV Testing in Centre Komera (Rutsiro) and Ubumwe Community Center (Rubavu District)



VCT in Gikondo and Biryogo HC and Outreach in Maison d'Accueil d'Esperance (Rulindo)

h. Monitoring and evaluation

This year we have conducted many activities including trainings and outreach campaigns, so it was necessary to organize some supportive supervision / field visit to monitor the ongoing activities and to assess direct results of UPHLS interventions. We tried to monitor the adherence on ART for some PWDs found to be HIV positive through the awareness campaigns undertaken by the peer educators and Youth with disabilities in schools/ special centers”.

Those interventions were conducted in Muhanga, Nyaruguru, Gasabo, Nyarugenge, Gatsibo, Nyagatare, Musanze and Gakenke. In general we reached 13 self-help groups and three centers of persons with disabilities that have conducted outreach campaigns to see how the sessions have been organized, persons reached and to verify if people tested HIV positive are adhering on ARV therapy or if they have challenges that hampering there adherence. We worked with the peer educators to identify the problems met during outreach sessions and possible solutions were discussed for the problem identified.

That allowed us to identify challenges associated with outreach campaigns on HIV and AIDS and the guidance have been provided where necessary. We realized that most of the persons tested HIV positive are under ART except some cases of persons with mental issues. Among the challenges presented there is one presented by the staff of health centers which the communications barrier with the deaf people and other presented by YWDs in the centers which is the insufficient communication materials.

Another challenge is the lack of statistics about PWDs under ARV therapy because at health centers, there is no system to track them (no disaggregated data on disability). For these

challenges, we promised them that we are going to work on them where possible advocate for those beyond our control.



Field visit at Umutara deaf school (Nyagatare) and Busengo HC (Musanze District)

i. Participation in the Celebration of World AIDS Day

On November 30th, UPHLS is one of the partners that joined RBC/ MoH in the launch of World AIDS Day campaigns, the event that held at Ubworoherane Stadium in Musanze District. 2018 World AIDS Day theme is “*Stop HIV spread. Get tested and strive to remain healthy*”. UPHLS exhibits some of the IEC tools adapted to the needs of PWDs.



The celebration of World AIDS Day at Ubworoherane Stadium

j. Participation in the celebration of International Day of Persons with Disabilities

On December 3rd, 2018 UPHLS participated in the celebration of the International Day of Persons with Disabilities (IDPD) in all Provinces and the city of Kigali. The theme for 2018 IDPD is “*Empowering persons with disabilities and ensuring inclusiveness and equality*”.

The Day was celebrated at National level in Kicukiro District, Masaka sector. The celebration of International day of persons with disabilities was a good opportunity for UPHLS to convey the message on HIV and AIDS to people who participated in the event

particularly Persons with Disabilities and mobilize them about HIV testing as theme for year 2018 is “*Stop HIV spread. Get tested and strive to remain healthy*” which persuade people to get tested for HIV and have information on their status.

Therefore in collaboration with the Health Centers of Masaka & Kabuga in Kicukiro District and Munini health center in Nyaruguru District, UPHLS organized the VCT session for those who would want to know their status. For this purpose 256 people have been tested (including 180 people in Kicukiro with 87 females and 93 males and 76 people in Nyaruguru). 254 are got HIV- while 2 persons got HIV+ including a man of 39 years old and a girl of 18 years.



The state Minister in MINALOC and US Ambassador to UPHLS stand HIV Testing during IDPD celebration

2 Strengthening HIV Clinical Services in the Republic of Rwanda

This year, the project focused on strengthening structures to induce the change in the way HIV services are being provided to PWDs. It has been characterized by involvement of selected stakeholders from Nyaruguru, Nyamagabe, Rubavu, Nyabihu, Nyarugenge, Kicukiro, Kayonza, Nyagatare, Gicumbi and Rulindo Districts in mainstreaming disability into HIV/AIDS services provision. The project covered a number of activities as follows:

a. Induction workshop on disability mainstreaming with MoH and RBC with RHCC

To foster the inclusion of PWDs in HIV response in Rwanda, UPHLS has been contracted by the MoH to overseeing the inclusion of PWDs in HIV program at health facilities and communities' level through the partnership, mentoring and coaching of community structures and stakeholders; the ultimate goal being to mainstream disability into HIV response in Rwanda. In order to address this concern, UPHLS organized a 5 days induction workshop on disability mainstreaming with senior staff from MoH and RBC.

The training was conducted from 9 to 13 July 2018 at La Palme Hotel in Musanze District. The workshop focused on sharing the reality on disability through the quest for inclusive health services' game, disability models, laws / rights, disability inclusion auto-assessment, disability friendly planning, monitoring and evaluation mechanisms.

The first session was a game called “Quest for inclusive health services” which consisted of making participants experience the challenges that persons with different types of disabilities experience when accessing health care facilities.

During the process they had to think not only about short-term solutions but also long-term solutions to those challenges that they passed through. At the end, they had to review the process and share their experiences. This was a good opportunity for them to understand disability in the real context.

The training continued with presentations on historical background of disability in Rwanda, disability legal framework, models of disability and Disability Mainstreaming concepts. The training methodology consisted of the simultaneous use of case studies, learning games, reading materials, personal experiences, etc.



One of the results of the training was that the participants came out with strategies to include Persons with disabilities in their current and future initiatives. The participants appreciated the content of the training and came up with different commitments and strategies to include Persons with disabilities in their current and future initiatives.

b. Training of Healthcare providers from upgraded HC on specific needs of PWDs

Due to different actors highlighting the need to acquire knowledge on disability and inclusion of PWDs in HIV projects, UPHLS has organized training for health care providers including: Head of health facilities, ART, VCT, customer care and in charge of CHWs. This training

took place within two phases: one for 25 HCPs from proposed sites to be upgraded (Kibeheo HC in Nyaruguru district, Byahi HC in Rubavu district, Munyinya HC in Gicumbi district, Matimba health center in Nyagatare district and COR UNUM in Nyarugenge district) and phase two for 25 HCPs from the health facilities in which accessibility check was conducted (Kigeme HC in Nyamagabe district, Bigogwe HC in Nyabihu district, Kinihira HC in Rulindo district, Rukara HC in Kayonza district and Busanza HC in Kicukiro district).

The participants got information on Disability and specific needs, Models of Disability, disability terminologies, Principles of communication with Persons who are deaf, Introduction to basic Rwandan sign language, Rwandan Alphabet in sign Language and basic numbers, Rwandan sign language and the terminology in health, Sign language and HIV&AIDS, Applying the basic of sign language in communication with Persons who are deaf, Fundamentals of mobility and orientation, Basic of Braille, Guiding techniques both indoor and outdoor settings. The targeted number of health care providers has been doubled (200%) due to the reallocation done in September 2018.

c. Coaching and mentoring for trained health professionals and involved partners

The overall objective of this activity was to conduct coaching and mentorship visits to trained health professionals and partners in disability friendly HIV services provision around HC being upgraded.

d. Train local partners and local authorities

The training of local partners (NGOs, DPOs and FBOs), and local authorities (JADF officers, Health promotion and Disease prevention and Social protection officer) aimed at providing knowledge on disability, specific needs and disability inclusive planning to partners operating in HIV/AIDS response, health promotion and local authorities.



The trainings have been conducted in two sessions one at La Palme hotel which brought together 24 participants from Nyarugenge, Nyaruguru, Gicumbi, Nyagatare and Rubavu districts at Hotel Saint Andre Kabgayi in Muhanga District, the second phase brought together 23 participants from Nyamagabe, Nyabihu, Rulindo, Kayonza and Kicukiro districts. The workshop focused on sharing the reality on disability through the quest for inclusive health services' game, Historical background of disability in Rwanda, Disability Mainstreaming concepts, Disability Models, Planning and running disability inclusive services.

e. Conduct quarterly coordination meeting

To foster the inclusion of persons with disabilities in HIV response in Rwanda, UPHLS has been contracted by the Ministry of Health to overseeing the inclusion of PWDs in HIV program at health facilities and communities' level through the partnership, mentoring and coaching of community structures and stakeholders; the ultimate goal being to mainstream disability into HIV response in Rwanda.

In order to address this concern, and among other interventions, UPHLS organized quarterly coordination meeting with selected Health Center, MoH, RBC, NCPD, DPOs, local authorities and partners in Nyarugenge, Nyagatare, Nyaruguru, Rubavu and Gicumbi Districts respectively.

The overall objective is to bring together key stakeholders to discuss on critical issues in HIV services provision to PWDs, share progress of the implementation of developed Disability friendly plans to make existing HIV&AIDS services disability friendly and agree on the way forward.

The following are some critical issues in HIV services provision to PWDs:

- ✓ Limited knowledge of HIV services providers on disability;
- ✓ Limited knowledge of Persons with disabilities and their families on their rights;
- ✓ Negative attitude of community towards PWDs : Stigma and Discrimination (families of PWDs, community in general, local authorities, decision makers);
- ✓ Limited budget allocation to the inclusion of Persons with disabilities in HIV response and health initiatives at decentralized level;
- ✓ Lack of disaggregated data on disability and HIV;
- ✓ Communication barriers with for persons with deafness and deaf blindness disability;
- ✓ Infrastructures and other health facilities that are not disability friendly

Recommendations have been formulated as follows:

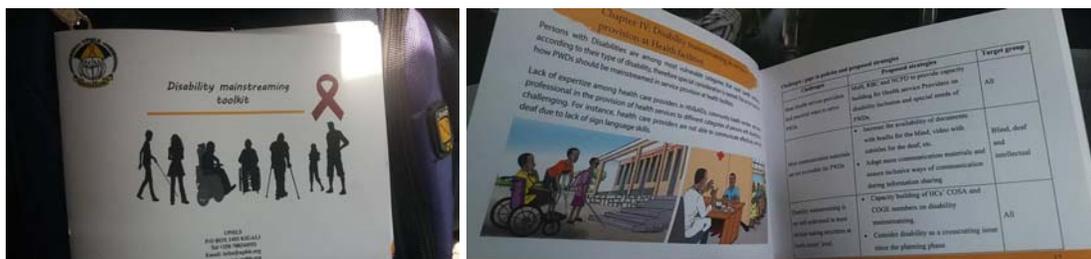
- Conduct sensitization and mobilization of family members of PWDs and community through Umuganda, public meetings, churches and media on the rights of PWDs;
- Identification of PWDs that are in extreme poverty and their specific needs;
- Build the capacity of all health service provider on disability;
- Include Sign language interpreters when planning activities to facilitate communication with deaf community;
- Ensuring accessibility of infrastructures from the starting of construction (including planning phase), supervision and provision of occupation permits to make sure accessibility standards for PWDs are met.
- Health facilities have to avail disability friendly equipment;
- Updating monitoring and reporting tools to capture disaggregated data on disability;
- Advocate for budget allocation to disability mainstreaming in health services

f. Develop and reproduce a disability mainstreaming toolkit/guide

UPHLS conducted a workshop to develop a disability mainstreaming toolkit/guide (with topics / references to CRPD, Law protecting PWDs of 2007, appropriate disability terminology, accessibility check and basic sign language poster) that will help health services providers in the provision of disability friendly HIV services

The Disability Mainstreaming tool kit/Guide was designed to equip the trained health care providers with disability mainstreaming skills that will enable them to engage in transformative disability mainstreaming work.

It has been a pleasure to work with different personnel from the National Council of Persons with disabilities, WE-ACTx for Hope, UWEZO Youth Empowerment, Rwanda Union of the Deaf; Rwanda Union of the Blind and others who provided a lot of information and expertise in disability mainstreaming, and participated in the whole process of developing this important document.



g. Conduct accessibility check for health facilities among which 5 will be upgraded

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

The accessibility check was carried out within two phase for Byahi, Bigogwe, Kinihira, Munyinya, Rukara, Matimba, Cor Unum, Busanza, Kigeme and Kibeho Health Centers in April 2018 for phase one and Butamwa, Gikondo, Rukumberi, Kamabuye, Nyarusange, Cyahinda, Kamonyi, Mushubati, Bungwe and Rukozo health centers in November and December for phase two. Together with the Head of the Health Center or their representatives when the other was not available, the targeted components were: Location of Health facility and directions, Health facility entrance and directions, movement inside the health facility, Services, equipment and, other items such as the awareness on disability and involvement of PWDs, etc.

The accessibility check examined the location, accessibility of main entrance, parking, signage, walkways, ramps, lighting, doors, reception, restrooms, 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.

h. Reproduce adapted IEC materials on VCT, ART and OI

Over four thousand copies of adapted IEC tools on general information on HIV, ART, OI and PMTCT and 100 copies of disability mainstreaming toolkit have been reproduced and disseminated to health facilities and surrounding communities of PWDs. Samples of reproduced IEC materials are provided below:





i. Training of health care providers on Disability inclusive HIV&AIDS

In strengthening the capacity on inclusive HIV&AIDS services among Health Care providers from Different Health Facilities in Kigali City UPHLS has organized training for 40 health care providers from twenty health facilities on Disability and specific needs, sign language. This training has taken place from 15th to 17th October 2018 (phase one) and 17th to 19th October 2018 (phase two) at hotel St Andre Kabgayi and it further contributed to increase knowledge on disability and utilization of HIV&AIDS tools trough Sign language.

3 Every life Matters Project (ELM)

The present part aims at presenting the summary of ELM project achievements from February 2018 to December 2018. Thus, the following are the main activities conducted during the year:

- ✓ Trainings: Focal Person, Senior managers, Local authorities, Health care providers, Training of PWDs, Training of communities and, Training of community health workers
- ✓ Monitoring and Evaluation: Routine monitoring visit, Joint visit with partners, Data collection
- ✓ Meeting & conference: TWG on SRH and Eye care, Learning and sharing conference

a. Training of Focal person

The training of focal persons from health/youth centers and implementing partners has taken place at La Palme hotel in Musanze district from 19th to 22th March 2018 and it brought together 8 focal persons from health/youth centers and the following implementing partners: (Kinyinya health center in Gasabo district, Biryogo health center in Nyarugenge district, Nyundo health center, Vision Jeunesse Nouvelle, and Rubavu Youth Friendly center in Rubavu district, and two IPs Vision for a Nation Foundation and Kabgayi eye unit) with the objective of equipping Disability Focal Persons from health and Youth centers with skills and knowledge in providing disability friendly eye care and SRH services to PWDs as well as

developing disability inclusive action plans in Sexual Reproductive Health and Eye Care services provision.

Those all 8 disability focal persons have been trained on Basics of Disability mainstreaming, Quest for inclusive services, open discussion and experience sharing, roles and responsibilities of disability focal persons and development of friendly action plan.

b. Training of senior managers on disability inclusion

The training was conducted in April 2018 from 16th to 19th at la Palme hotel and brought together 13 participants from health and youth centers including : Biryogo health center in Nyarugenge, Kinyinya Health center in Gasabo district, Nyundo Health center in Rubavu district, Vision jeunesse Nouvelle and Rubavu Youth friendly center in Rubavu district and three IPs vision for a nation Foundation, Kabgayi eye unit and Imbuto foundation with the objective of equipping Senior Managers from health/youth and IPs with skills and knowledge on Disability inclusion for the full and effective inclusion of PWDs in eye care and SRHR services as well as developing action plans in Sexual Reproductive Health and eye care service provision.

All of them have been trained on Basic of disability mainstreaming, Quest for inclusive services, open discussion and experience sharing, roles and development of disability friendly action plan.



c. Training of local authorities on respectful attitudes to PWDs

The training was carried out from 19th to 21th June 2018 at Kabgayi st Andre hotel which brought together 19 participants coming from 4 District like Gasabo, Nyarugenge, Muhanga and Rubavu all are the implementation project areas with the objective of equipping local authorities with skills and knowledge on Disability inclusion for the full and effective inclusion of PWDs in health services. This will have an impact on the consideration made by

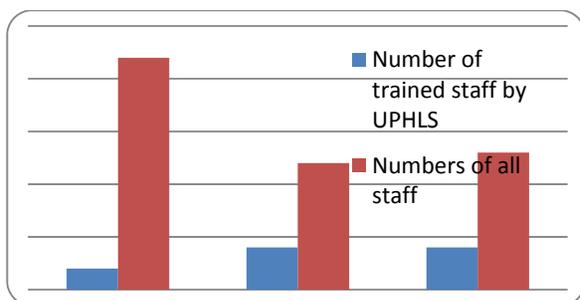
local authorities to persons with disability in social support which has a direct link with their access to health services.

All them have been trained on: Definitions of disability and its types, Quest for inclusive health, Major barriers faced by PWDs in accessing health services, Link between social



d. Training of health care providers on sign language, mobility and Orientation

The training was carried out from 30th July to 3rd August 2018 at Kabgayi st Andre hotel and brought together 20 participants coming from 6 health/youth centers(Nyundo, SHyogwe, Biryogo, Kinyinya, Vision jeunesse Nouvelle and Rubavu youth centers and IPs(Kabgayi eye unit and Vision for a nation foundation) with the objective of equipping healthcare providers with skills on Sign Language, mobility and orientation for facilitating PWDs to access health services, especially Eye care and SRH services. The next following table shows us the numbers.



e. Training of PWDs on their rights and responsibilities in accessing SRH and eye care services provision

This training was conducted in May from 2-4th 2018 at Kabgayi St Andre Hotel and brought together 19 participants coming from disability people Organization like RUB, RNUD, NOUPR, NPC, AGHR, UWEZO, THT and COLLECTIF TUBAKUNDE with the objective of knowing their rights and their responsibilities on eye care and sexual reproductive health services offered in health and youth centers and advocate for making them more disability

friendly. They have been trained on the following topic introduction to disability and disability models, Disability rights including the UN Convention on the Rights of Persons with Disabilities, sexual and reproductive health, sexually transmitted infections (STIs), HIV&AID, Disability and inclusive SRH and Eye care services.

f. Training of communities on respectful attitude to PWDs

The training was carried out from 23th to 26th April 2018 at Kabgayi St Andre hotel and brought together 17 participants coming from churches, civil society organization, private representative of community health workers with the objective of sharing with them the knowledge and skills on disability but also the challenges faced by PWDs to access on health services especially eye care and SRH.

They have been trained on disability mainstreaming, legal framework, models of disability, Types of disability, and developed disability inclusive action plan



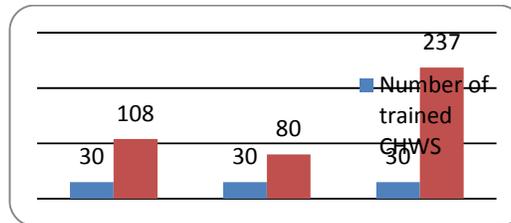
g. Training of community health workers and PWDs representative

This training was conducted in three sessions depending on health centers. We have trained 30 CHWs and 4 PWDs representatives in Muhanga District from the catchment area of Shyogwe health center, 30 CHWS and 8 PWDs representatives coming from in the catchment area of Nyundo health center and 29 CHWs and 11 PWDs representative in the catchment area of Rubavu youth center and Vision Jeunesse nouvelle with the objective of equipping them on basic skills on disability issues and specific needs for them to mobilize PWDs to access and use SRH and Eye care services.

They have been trained on Disability and its types, disability mainstreaming, disability legal framework and develop a simplified action plan to follow in mobilization of PWDs and Washington Group Questions to know how their will identify PWDs in their region



The table below shows us the situation of trained CHWs at Biryogo, Nyundo and Shyogwe health centers compared to total number of CHWs:



h. Routine monitoring visit

This activity was conducted by UPHLS in order to make a supervision support to the health/youth center for accompaniment and look on the progress of the well implementation of the project, discuss with them on the challenges, take together the recommendation.

The first one was carried out in June to 7 health/youth center and Kabgayi eye unit with the objective to discuss with them on the collection of disaggregated data of PWDs accessing health/youth center, allocation of budget in mainstreaming disability at health/youth center, the involvement of DPOs, listing the existing IEC tools to be adapted including protocols like the prioritization of persons with disabilities or any necessary adaptation for persons with disabilities, outreach, Discuss on monitoring strategy and the progress in general.

The second one was carried out in September from 11th to 14th September 2018 at six health / youth centers from Rubavu, Gasabo, Nyarugenge and Muhanga Districts with the objective of providing support and guidance to the health/youth centers as well as discussing with them on progress of disability inclusion in SRH and Eye care, sharing experience, best practice, challenges and recommendations.

i. Joint visit with Partners

The joint visit with different partners working on ELM like AGHR, RNUD,UWEZO, RUB,KEU and VFNF conducted in october 2018 at Nyundo and Shyogwe health centers with the objective of discussion with them on the Progress of disability inclusion in SRH and

Eye care sharing experience, best practice, and challenges faced in order to formulate recommendations to redress them.



j. Data collection

The effort was made for facilitating PWDs to access on health services especially SRH and eye care services and it why a database was created and explained to partners to fill in all the data of PWDs using the services at health/youth center. Every month, each health center try to do a compilation of all data and send it to UPHLS for data collection but also to look on the progress of the inclusion of PWDs on SRH and eye care services .

k. Technical working group

UPHLS has conducted the two meeting in this year one is for SRH and the second is for Eye care. SRH is composed by RNUD, AGHR, UWEZO, Nyundo and Biryogo health centers, MoH, NCPD and Rubavu District represented by the in charge of health at District level for discuss together how PWDs can use SRH services easily, what is the challenges and what is their roles as different institutions which works in health system to facilitate PWDs and make an action plan for following a supervision and advocacy of all challenges identified by themselves together with PWDs representative.

For Eye care TWG is composed by RUB, Abadahigwa Bling veterans, Kinyinya health center, Kabgayi eye unit, VFNF, NCPD, MOH and Muhanga District represented by the in charge of health with the objective of doing an advocacy for PWDs to access on health services especially Eye care services

l. Learning and sharing conference

This meeting was conducted in November 2018 from 05th to 09th at Rubavu District with 3 countries like Rwanda as first organizer in collaboration with LFTW, Mozambique and Ethiopia. It was supported and facilitated by the LFTW thought county coordinator. The

purpose of this Learning & Sharing session was to let all country teams share their experiences in piloting Every Life Matters (ELM) in their contexts, reflect on the steps taken, identify challenges and related actors in implementation of those steps throughout the year 2018, and define approach for 2019. At the end of the conference each country has a draft of the next year action plan.



4 Water, Sanitation and Hygiene for All

UPHLS under the financial support of Disability Right Fund (**DRF**) is implementing a pilot project entitled “*Water, Sanitation and Hygiene for All, Removing accessibility limitation for Persons with disabilities*”. The project is aiming at empowering WASH actors and persons with disabilities in Rwanda by improving their access to water, sanitation and hygiene services.

The project is carried out in Kigali city and is targeting a range of stakeholders including those concerned with WASH services like the Ministry of Health, Ministry of Infrastructures, public Institutions, and National Council for Persons with Disabilities, Private Sector as well as Disabled people Organizations.

a. Launching of the project

On 6th April 2018, UPHLS organized a launching event to its organizations members, NCPD and MoH with 15 participants include 10 DPOs representative, District officials, MoH representative and UPHLS staff. The event began with the self- presentation of each of the participants and the brief introduction of the pilot project on WASH.

UPHLS Legal Representative, Mr. NIYOMUGABO Romalis, welcomed participants and thanked everyone for his attendance. After that, he reviewed the background of persons with disabilities and access to WASH services, where he explained the challenges faced persons with disabilities in accessing existing WASH services. He highlighted, for example, the long

distance traveled to water taps, especially in rural areas, taps in remote areas, inaccessible water and sanitation facilities which are not friendly and do not favor persons with disabilities. That's why UPHLS, with funding from the DRF, has launched a pilot project called " Water, Sanitation and Hygiene for All ", which aims to empower WASH actors and persons with disabilities in Rwanda to improve access. With the presentation made by Ms. UWINGABIRE Alphonsine, UPHLS Project Assistant explained the objectives of this project as well as the appropriate activities. She explained that the purpose of disability mainstreaming in WASH services is to improve the understanding of WASH actors on the barriers and opportunities for PWDs in the country, identify gaps in WASH inclusive services, Develop a creative disability inclusive to influence policy and programmes for contribute to knowledge generation. Participants had the opportunity to explain the seriousness of the difficulties faced by PWDs in their different categories.

We talked about the efforts of the Ministry of Health in particular and the governments in general in the provision of WASH services for all but persons with disabilities still have varied difficulties especially about the physical accessibility of toilets and water services. Participants thanked UPHLS for taking the first step to ensure that PWDs could have opportunity to access WASH services. Even if WASH FOR ALL Project does not solve all the problems, it is the advocacy departure on the inclusion of WASH policies and services.

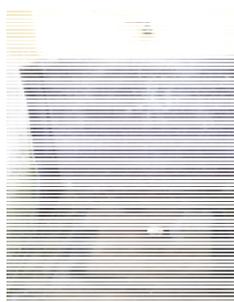


b. Conduct a desk review to assess gaps in WASH related policies, programs and strategies which are not disability friendly

The general objective was to carry out a comprehensive review of meta-analysis of policies, programs, guidelines and equipment in a facility, distribution and use of water, sanitation and hygiene services, and assessment of their disability, concerned institutions in making services disability friendly. The best bidder Mr. Murenzi Vincent has been chosen to do this consultancy to conduct a review to assess disability inclusive of WASH related policies and strategies. The consultant went through the literature review and the available findings. He spoke about the definition of disability, which is a complex, dynamic and multidimensional concept. To show barriers that hinder PWDs to access social services compared with other

persons without disabilities. He explained the difference between medical model (in which a person with disabilities is defined through the provision of medical care and rehabilitation services etc) and the social model (where the disability is viewed in the society where they are affected by PWDs in their communities). He showed the need for water, sanitation and hygiene in our life, but despite the efforts made by governments, PWDs still have difficulties in accessing services already established due to these challenges.

- Long distance in general to reach water facilities,
- Discrimination done to PWDs for the society in general ,
- Access to physical environment, transport, information and communication.
- Lack of awareness on disability specific needs



(Hand washing facility in hotel) (Shower and public toilet include them for health centers)

In conclusion, to do the inclusion, WASH actors could understand and well justify the following terms: **Availability:** functioning services, **Accessibility:** a non-discriminatory approach; **Affordability:** economic accessibility, **Acceptability:** services are culturally, appropriate (sensitive to issues of confidentiality, gender and type of disability); **Accountability:** services are designed and implemented to respond to PWDs' needs.

For the inclusion to be possible there is a need of support services, specialized services and mainstream services.

c. Develop a policy brief on the inclusion of PWDs in WASH policies, programs and strategies

Rwanda has adopted the objectives of Sustainable development Goals in 2016. Goal 6, 12 and 17 of the SDGs provides for guarantee for everyone to access water and sanitation and ensure sustainable management of resources water. The consultant presented the Rwanda's commitment on the inclusion of PWDs. On the scope of the policy brief, the consultant told that is for to help discussion actions needed to increase the participation of PWDs in WASH policies, programs and strategies for to ensure that they have access to WASH services that are tailored to their specific needs and that they benefit available services like others in the

community. This guidance note is intended to guide the UPHLS's engagement in the policy dialogue and programming related to water supply, sanitation and hygiene promotion (WASH) and contributes to strengthen the capacity of its human resources, to ensure better social development and foster the working environment.

The Policy Brief illustrates gaps and possible recommendations to concerned institutions in making disability friendly services and serves in the reduction of remarkable gaps that PWDs face in using the available WASH services as the following:

- *Lack of physical accessibility:* Inadequate services cause pushes people with disabilities to crawl on the floor to go to the toilet or to their needs in the open area but also have to travel long distances to get to the proper facilities. This has disadvantages for health, safety and negatively affects their self-esteem,
- *Lack of accessible information on options and services available for PWDs:* This leads to a loss of motivation and an inability or unwillingness to express their needs,
- *Inadequate Policies and Standards:* Policies and standards are often not implemented or do not include the needs of persons with disabilities,
- *Negative Attitudes:* a lack of information about the cause of disability which leads to stigma and discrimination that limit the ability of persons with disabilities to participate fully in the society,
- *Lack of consultation and involvement of persons with disabilities:* They are often excluded from decision-making processes that can directly affect their lives.

The inclusion of persons with disabilities in WASH services is very important for improving outcomes in health, in education for a better life, reducing the burden of a whole range of activities that families do in taking care of their members with disabilities. The lack of WASH services in the daily life of a human being causes enormous consequences including the increase of rate of spread of diseases caused by dirt.

To end this, the CRPD emphasizes the importance of improving the quality of life in accessing of PWDs to the environment, including buildings, transport, information and communication. That's why WASH services could be accessible to everyone include vulnerable people, persons with disabilities.

d. Organize a workshop for WASH actors to present and validate the WASH Inclusion guide, discuss recommendations in the policy brief as well as sharing ideas on possible areas of partnership

On 05th July 2018 with 18 participants include wash actors, DPOs and UPHLS staff, the consultant Mr MURENZI Vincent, presented the documents developed about the gaps assessed by persons with disabilities in WASH and the policy brief. In the beginning, he spoke about the background of PWDs in their everyday life according to the World disability report (2011) that disability is complex, dynamic and multidimensional concept. Over recent decades, the disabled people's movement together with numerous researchers from the social and health sciences have identified the role of social and physical barriers in disability.

The consultant, in his presentation showed the need of water, sanitation and hygiene in life of human being, but despite the efforts made by governments, PWDs still have difficulties in accessing services already established. He insisted on these main ideas:

- In the Sub-Saharan Africa, the environment is largely inaccessible to people with disabilities.
- Access to infrastructure is not yet improved because of the physical barriers,
- This situation creates dependency and exclusion for PWDs,
- It is time for the world to change its way of marginalizing PWDs.

For the policy brief on the inclusion of PWDs, he talked about Rwanda's commitment and success made but challenges are still noted like funding gaps; human resource constraints, particularly at the decentralized levels; limited regulation of private water operators; lack of a comprehensive sector management information system, poor hygiene and lack of innovative solutions to integrate waste management.

As recommendations, participants asked UPHLS and disability organization to put efforts in advocacy starting by policymakers level so that the inclusion of PWDs does not come from the technicians only, to UPHLS for not focus WASH activities in Kigali only but focus activities outside of Kigali because that there problems and challenges are still so many: no WASH equipment and those that exist are remote from users and are not sufficient and their toilets are not covered and users do not know how to clean them. Disability organizations should commit to work with key government agencies to improve communication with PWDs and contribute to risk reduction so that clients do not become victims of services mismanagement.



(Consultant Murenzi Vicent in his presentation)



(Participants for the validation workshop)

e. Mapping National level WASH actors based in Kigali

By using the designed checklist, UPHLS staff conducted semi-structured interviews and in-depth interviews with key informants from Government Institutions, International Organizations, Local NGOs and Private Companies, UN agencies.

The mapping exercise was conducted to National level WASH actors based in Kigali city. Some institutions visited have interventions in other Districts outside of Kigali. This activity was comprised by the collection of information on WASH actors which was followed by field visits for data collection. On the other hand, we have sent the questionnaire to the respondents by email and after filling they returned them to us. The results of the mapping exercise conducted from April to June, 2018 allow not only an evaluation of the size of WASH services and disability in the country but also contribute to the examination of opportunities offered to PWDs.

The 23 visited Organizations are: Water for People, Rwanda Red Cross Society, World Vision Rwanda, World Relief, FXB Rwanda, Moucecore, Catholic Relief Services, SNV (Netherlands Development Organization), Compassion International Rwanda, Living Water International Rwanda, WATER AID, Roto Ltd, The Water and Sanitation Corporation (WASAC), AVEGA AGAHOZO, WASH Nyarugenge, Gasabo and Kicukiro District, JICA, Aquasan, UNICE, AEE and MININFRA. These organizations are facing challenges during the implementation of their activities and during the provision of their services. The highlighted challenges are: No specific data on disability by each category, No skills on disability specific needs, need of capacity building, the high cost of modification of exist WASH services to be disability friendly, lack of appropriate techniques to include PWDs, lack of special materials to accommodate PWDs in WASH services and Lack of expertise in disability inclusion, communication barriers, stigma and discrimination done by the society to PWDs, Rwanda geographical challenge (Country of hills) , policy not specify PWDs needs and no participation of PWDs in community WASH activities.

During the mapping exercise some recommendations are given to facilitate the inclusion of PWDs in WASH policies, programs and services; reinforce capacity building of staff on disability inclusion principles, ensure the collaboration between Disability Organizations and WASH actors, ensure the technical assistance for WASH actors to provide disability friendly WASH services, avoid discrimination and stigma to PWDs, advocacy for policies review and raise awareness campaigns to tackle the challenges faced by PWDs, get inclusive WASH services models, assess feedback on the utilization of existing facilities using client satisfaction, utilization of all channels of communication to PWDs for use exist WASH services.

f. Develop a disability mainstreaming guide for WASH actor to foster PWDs' inclusion

The workshop to develop disability mainstreaming guide was carried out in 3 working days conducted over 31th July 2018 to 02nd August 2018 at Kabgayi St Andre Muhanga District in South Province of Rwanda.

The guide was developed by WASH actors, Governmental institution, DPOs and UPHLS staff.

Methodologies used in the workshop are: Organize participants in two groups according to areas of expertise:

- 1) World Vision, RUB, UPHLS staff,
- 2) NCPD, Water for People, AGHR, and UPHLS staff,

Agree on elements of the disability inclusion guide in wash policies programs and services, Literature review and sharing of experiences related to WASH and Disability; Ensure reference to: CRPD, Protecting Persons with Disabilities Act, 2007; National water supply policy, implementation strategy in Rwanda, National sanitation policy implementation strategy, Desk review to assess gaps in WASH related policies, programs and strategies which are not disability friendly and policy brief on the inclusion of PWDs in WASH policies, programs and strategies developed by UPHLS consultant, Discussion for understanding Rwandan WASH policies, Group work, presentations, plenary sessions ,Consolidation and agreement on the final product to be validated.

The draft document was developed by the participation of every one.



(Discussion in groups)

g. Validation workshop for disability mainstreaming guide in WASH

On 27th November 2018 at Great season Hotel, the draft practical guide for disability mainstreaming in WASH was validated by partners in WASH, Disability Organizations and NCPD.

The main objective of this validation workshop was to present to invitees the content of the draft practical guide for disability mainstreaming in WASH in order to make their contributions, comments and recommendations for make it more useful for the inclusion of PWDs in WASH policies, programs, strategies and services.

The welcome remarks was done by UPHLS Legal Representative Mr NIYOMUGABO Romalis who spoke about the importance of WASH services in the life of every human being and barriers faced by persons with disabilities in accessing WASH services. Additional to that, he appreciated the efforts envisaged by our government so that no body stays behind available WASH services but still PWDs have are not enough mainstreamed in the implementation of services.

After a brief presentation of the draft document related to the purpose, targeted audience and users, methodology used, participants worked in two groups. Each group went through the documents in order to provide their inputs and comments. Participants validated the document after the consideration of the given inputs.

Participants gave general Recommendations to consider for active participation of PWDs in WASH services:

- UPHLS and NCPD could collaborate to organize advocacy meeting with big /strong Partners (NGO, DPOs and PSF) working in WASH,
- UPHLS has to design and share the prototypes of WASH facilities for the WASH actors to have an idea on what to do in making disability standards in WASH program,
- Make advocacy for some policies amendment to consider the needs of PWDs,
- Dissemination of all tools on the disability mainstreaming to all partners,

- All partners who participated in validation workshop to start the implementation of the guide without waiting as they are understanding the challenges that PWDs are facing in WASH programs,
- Establish and Organize Technical Working Groups on WASH and Disability,
- Organize annual monitoring and evaluation for disability inclusion in WASH programs,
- UPHLS could talk with MININFRA to own this guide in order to serve as National reference and it can be interested by the actors once it is owned by the government.



(Participants of the validation workshop)

h. Round II Request for Proposals

UPHLS participated in the process of 2018 round 2 request Mid-level request for proposals. The proposed project aim to advocate for budget allocation to address gaps identified in WASH programs and ensure the inclusion of PWDs in line with CRPD article 9 and 25 SDGs 3 and 6. The project is also for establish partnership with WASH actors, disseminate and advocate for use of the mainstream guide for WASH actors developed by UPHLS under DRF support. The coalition in this project include key actors in WASH programs operating in the country are WATER AID and PAX PRESS the civil society organization active in the promotion of Human rights in Rwanda. The proposed working area of this project is 6 Districts namely Bugesera, Nyagatare, Nyamagabe , Gisagara, Rusizi and Ngororero.

i. Discussion between DRF and UPHLS on WASH Project

On 03/07/2018, Mr Jorge Manhique (Program Officer for Africa / Malawi & Rwanda) from DRF visited UPHLS to monitor the implementation of the WASH for all project, discuss on the challenges faced and agree on the way forward.

Participants of the small meeting done with the visitor were Uwingabire Alphonsine, Shyirambere Blaise, Mukagatare Perpetue and Karangwa François Xavier who discussed on activities carried out, those that are pending and the period of realization.

For this session, participants discussed on activities to be planned in the future as Accessibility check, WASH models facilities, advocate to the Governmental (in charge of capacity building) to train WASH actors on disability issues and Monitoring and evaluation. It is for this opportunity that the visitor informed us that DRF priorities are based on advocacy and lobbying to the government and other organizations for disability inclusion and that their budget is very minimal to install the water facilities.

In closing, the visitor appreciated the activities already achieved and the strategies for pending activities and asked UPHLS to give reports each time so that he could give comments on time.

j. Visit of the team coming from ISUKU IWACU project to UPHLS

On 11/10/2018 the team from Isuku iwacu Project represented by Niishimwe Pius the Water for People WASH specialist came to visit UPHLS at its office for make contact and talk about the challenges faced by persons with disabilities. During the visit, Niishimwe Pius presented the ISUKU IWACU project funded by USAID in four year rural sanitation awarded in 2016 to improve access to and support correct, consistent use of household sanitation and hygiene facilities to decrease childhood stunting and support the government of Rwanda's sanitation work.

The project is implemented by 3 constructive organizations (SNV, WATER FOR PEOPLE and WORLD VISION) and activities are implemented in 8 Districts of the country (Nyabihu, Kayonza, Kicukiro, Rwamagana, Ngoma, Ruhango, Nyanza and Nyarugenge).

UPHLS Director thanked visitors for good collaboration which is started during the activities of UPHLS "WASH for all" funded by DRF (Disability Rights Fund) especially in Mapping exercise for National level WASH actors based in Kigali, their attendance in the validation workshop of the desk review and the policy brief related policies, programs and on the inclusion of PWDs as well as the collaboration in the development of disability mainstreaming guide.

Isuku iwacu considered the lack of toilette the one of life service according to the demand of users, that's why Water for People consulted Tomaco Builders LTD, an innovative manufacturer of precast concrete products of superior quality in the construction industry since 2013 to design a chair which will be put on ordinary toilet at household level for being used by PWDs and others in need. This chair, once fabricated in wood material could be more

expensive and difficult to clean and better they could get another one in plastic material. This one could be cheap and affordable by a lot of customers. For this fact, Tomaco Builders needs to go to China and buy one plastic at low price.

After presenting this chair, UPHLS appreciated this initiative and give all advice and recommendations necessary.

In conclusion, participants recommend that all WASH actors have to collaborate and organize sessions for behavior change of local authorities towards PWDs on different facilities already available and improve awareness on WASH technologies.



Participants

k. Partnership and collaboration

-During the validation for Desk review assessing gaps faced PWDs in WASH policies, programs, strategies and services with the policy brief on the inclusion of PWDs, after understanding all challenges faced by PWDs, WASH actors requested to make partnership with UPHLS to plan services disability friendly. It is for this opportunity that Water Aid came to UPHLS in the mid-level coalition project.

Now Water Aid and UPHLS are collaborating to have some illustrations (photos) explaining challenges faced by children with disabilities in accessing WASH services but also those that show solutions to undertake and preparing the way to disseminate the UPHLS tools related to WASH. For the same opportunity, Living Water asked UPHLS to make it aware on the inclusion of persons with disabilities in its project related to WASH inclusion. That's why Living Water organized a training of its partners and requested two UPHLS staffs to train them on disability mainstreaming and did a field visit to some beneficiaries with disabilities in their families to check the accessibility of their toilets.

-UPHLS meet disability organizations (RUB, AGHR) and NCPD with WASH actors Water for people and World Vision in the development of Disability mainstreaming guide. During this activity, participants had exchange their knowledge on disability and WASH. For this opportunity everyone is ready to advocate so that challenges faced by persons with disabilities could be solved.

5 Employable Project Phase II

EmployAble II is the multi-country program, implemented in Ethiopia, Rwanda and Kenya, that aims at inclusion of youth with disabilities in labor market through facilitation of their technical and business skills development. EmployAble II is implemented during the years 2017-2019 and is designed as a continuation program of EmployAble I (2014-2016).

The program focuses on three types of beneficiaries: main beneficiaries – youth with disabilities, secondary beneficiaries – vocational training institutions (formal and non-formal) where YWDs pursue their studies and employers who employ YWDs. During the first phase of EmployAble I at the end of which we were able to reach substantial results (129 YWDs were enrolled in skills development programs), we learnt that it is very important to allocate resources for startup toolkits/capital to the youth graduates to minimize risks of unemployment to the youth self-employed. EmployAble phase II (2017-2019) in Rwanda is being implemented in partnership between UPHLS and NUDOR.

With phase II of the program, we have reached in total **467 YWDs** where 147 YWDs of intake 2 are graduating with end December 2018, 227 YWDs from intake 1 of 2017 have already graduated, gained relevant technical and soft skills, and 93 YWDs graduated others from EDC support under USAI HDAK project.

The last quarter (October-December 2018), has been characterized by the job placement and provision of the startup toolkits for youth graduated from intake one enrolled in 2017 (227 YWDs) supported by EmployAble and 93 YWD supported under HD Project) and supervision of the training process of the youth enrolled in 2018/intake 2 (147 YWDs) and lastly the Innovation LAB monitoring activities have been done. The EmployAble AWP 2019 has been done and submitted to L4W as well.

Briefly, following activities have been implanted based on 2018 AWP:

1. Identification of the new YWDs intake 2 (around 163) to reach the target of 400 youth.
2. Vetting venues, technical skills training providers to receive the new youth
3. Reasonable accommodations made to accommodate the needs of PWDs to ensure they have access to the skills training and workplace on an equal footing with their counterparts without disabilities (assistive devices provided).
4. Selection and assessment the new enrolled 150 YWDs against 147 YWDs graduated.
5. Organize, assess youth with intellectual disabilities for technical training skills.

6. Field visit to technical skills training providers (midterm evaluation) to assess progress and meeting with the youth group trainees.
7. Training the technical skills providers on disability mainstreaming (Disability Equity Training (DET), Basic on Sign Language, Mobility and orientation, models of disability, etc.).
8. Reporting to JADF in the respective Districts of implementation
9. Preparation and participation in Open Day in Muhanga and Musanze Districts
10. Project Steering Committee Meetings at District levels
11. Monitoring LAB challenge implementation: The youth on both sites of LAB implementation have been visited together with UPHLS and RNUD. The posters in Sign Language done by RNUD are now available at each site to facilitate communication between trainers and deaf trainees
12. Monthly Partnership Meetings between UPHLS and NUDOR.
13. Provision of start-up tool kits/ materials to the youth graduates (intake 1): receiving and analyse the project proposals from the youth graduates and meetings with local authorities at Sectorial level to discuss and sign a partnership agreement on how to monitor the youth groups soon to receive start-up tools to start their business. The event for official provision of start-up toolkits to the youth graduates/intake 1 has been launched in Rulindo District.
14. Following up the youth on technical skills training/intake 2.
15. The online database has been created

The three following tables are showing respectively the number of the youth enrolled in intake 1 of 2017, number of the youth enrolled in intake 2 of 2018 under USAID HDAK and EmployAble projects.

District	Sector	Site	Trade	M	F	Tot.
Rulindo	Base	VTC Mushongi	Tailoring	0	3	3
			Welding	1	0	1
		Twitezimbere	Leather works	4	0	4
	Masoro	VTC FCPMH	Tailoring	3	5	8
	Cyungo	VTC Burehe	Knitting	2	5	7
			Hair dressing	4	1	5
			Tailoring	0	11	11
Mbogo	Kinini	Tailoring & Knitting	5	4	9	
Musanze	Cyuve	AFOC	Knitting	0	5	5
			Tailoring	0	1	1
	Gacaca	AFOC	Tailoring	0	1	1
		KIATO AFADHAL	Leather works	6	3	9
	Muhoza	Ubwiza Saloon	Hair dressing	0	5	5
Muko	Menuiserie	Carpentry	8	1	9	

		ISANGANO				
	Nyange	COOTN Nyange	Tailoring	3	5	8
		COOPAP Nyange	Knitting	4	6	10
			Handcraft	1	0	1
Rubavu	Kanama	VTC CEFOTEL	Welding	1	0	1
			Mechan. Auto	1	0	1
		EMAKA	Tailoring	0	5	5
	Rubavu	VTC Ndengera	Knitting	1	5	6
			Tailoring	9	3	12
			Mechan. Auto	1	0	1
	Kanzenze	VTC Kanzenze	Welding	5	1	6
			Welding	5	1	6
	Bugeshi	Atelier de Couture	Tailoring	3	7	10
	Gisenyi	Atelier de Reparation	Electronic	1	0	1
	Nyamyumba	Atel. Cout. Bras. Hand.	Tailoring	2	11	13
Knitting			2	3	5	
Atelier de Soudure			Welding	8	0	8
Muhanga	Nyamabuye	NGADEO Business Group LTD	Auto Mechanics	7	0	7
	Rugendabari	Smart Saloon	Hair dressing	6	3	9
		VTC Rugendabari	Carpentry	7	0	7
			Tailoring	0	10	10
	Nyamabuye	Atelier chez Frederic	Leather works	10	3	13
Kigali City	Remera	VTC Bon Pasteur	Tailoring	2	2	4
		VTC Makines	Massage	2	3	5
GRAND TOTAL				114	113	227

Table 1: Number of YWDs enrolled in 2017/Intake 1 under EmployAble Project

District	# Youth Groups	# Youth Without Disabilities		# YWDs		Total	Type of Training
		M	F	M	F		
Rulindo	5	29	44	11	22	106	WRN! and BYOB and TST
	3	12	66	1	0	79	WRN! and BYOB
	8	41	110	12	22	185	
Musanze	6	17	49	7	11	84	WRN! and BYOB and TST
	3	13	43	8	8	72	WRN! and BYOB
	9	30	92	15	19	156	
Rubavu	4	12	22	10	6	46	WRN! and BYOB and TST
	3	21	41	4	5	75	WRN! and BYOB
	7	33	63	14	11	121	

Grand Tot.	24	104	265	41	52	462
		369		93		
		462				
		80% Others		20% YWDs		

Table 2: Number of vulnerable youth enrolled in 2018/Intake 2 under this Project

District	Sector	Site	Trade	M	F	Total
Rulindo	Cyungo	VTC Burehe	Knitting	9	5	14
			Tailoring	1	2	3
	Kinihira	Centre Inshuti	Welding	2	0	2
			Tailoring Knitting	1	3	4
Musanze	Remera	CSR D	Tailoring	3	9	12
Rubavu	Kanzenze	Atelier de Metiers Kanzenze	Carpentry	3	5	8
	Busasamana	Atelier de couture Dusabane	Tailoring	2	4	6
	Nyamyumba	Atelier de couture Brasserie	Knitting	0	9	9
Muhanga	Nyarusange	Ambaruberwe Atelier de couture	Tailoring	4	10	14
			Carpentry	3	0	3
			Welding	7	0	7
	Mushishiro	Atelier de soudure et menuiserie Mushishiro	Carpentry	7	0	7
			Mukamabano Judith Butique	Tailoring	1	5
Shyogwe	MRTC	Leather works	13	0	13	
Kigali City	Kimironko	APAFORM	Culinary arts	3	2	5
			Auto mechanics	5	0	5
			Hairdressing	6	4	10
			Tailoring	0	4	4
	Kimisagara	LITO Training and General Supply	Tailoring	7	8	15
GRAND TOTAL				77	70	147

Table 3: Number of the YWDs enrolled in 2018/Intake 2 under EmployAble 2

a. Mobilization, selection of YWDs and group formation

The youth have been mobilized in the four Districts (Muhanga, Rulindo, Musanze and Rubavu Districts as well as Kigali City) of the EmployAble Project implementation. The EmployAble 2 target was about 300 YWDs. The USAID HDAK Project came up to support EmployAble with 100 YWDs and the target became **400 YWDs**. For that, more than 600 YWDs have been identified for selection and then groups formed after training. The groups

are formed because the EmployAble 2 approach is to support the youth into groups not individually. The USAID HDAK Project has only been implemented in three following Districts: Rulindo, Musanze and Rubavu District.

b. Achievements:

As results from the mobilization, selection and YWDs group formation, we have achieved in total **467 YWDs** as showing the up tables and about 30 youth groups created. The rate of employed youth supported is at 75%.

The following table is detailing specific support provided to the reached youth:

Targets reached 2017-2018:

N. of YWDs mobilized and assessed	Over 600 YWDs
N. of YWDs enrolled in training models	79 YWDs
N. of YWDs placed in apprenticeship and internships (after the training)	397 YWDs
Type of pre-placement intervention provided	Only 93 YWDs under USAID HDAK Project had a chance to benefit from soft skills courses related to pre-placement intervention [Work Ready Now! (WRN!) and Be Your Own Boss (BYOB)] and certificates issued.
Type of financial support provided	Startup capital/tool-kits provided
N. YWDs participating in work integrated soft skills and employment training	67 YWDs only have received soft skills and technical skills training at the same time.
N. of YWDs participating in business development training	Only 93 YWDs under USAID HDAK Project
Which start-up capital (other support) was provided to YWDs (self-employment)?	Startup tool-kits provided to the YWDs (self) employed groups

Note: Concerning the Type of pre-placement intervention provided, the applicant's ability to respond or express himself in interviews, his performance in trade and mental ability tests, and even in the manner of writing application letter and preparing his bio-data may be taken as indices of quality of the training that the applicant had gone through in TVETs or in companies of this previous employment. However, job requirements vary from company to

company for it has its own set of criteria in human resource procurement and development. It is not easy therefore to look for jobs especially. It is therefore the concern of every training center to provide its trainees with pre-employment preparations to getting jobs. Such preparations are soft skills training (WRN! and BYOB) provided to the trainees to prepare them for employment not only in the local labor market, but more importantly, in national labor markets.

c. Inclusive TVET Development

A difference between EmployAble 2 EmployAble 1 is that in the EmployAble 2 we are not giving importance on making accessible TVETs or training centers. This was the objective of the phase one of the project to make the selected TVETs accessible and models to accommodate YWD trainees.

The main activity under this outcome 2 was only to facilitate the technical training skills providers to be able to train the youth with different types of disabilities by training them on disability mainstreaming (Disability Equity Training, Braille, basics on sign language, mobility and orientation, etc.)

d. Targets TVETs (training centers) reached in 2017-2018

N. of disability audits done for TVETs and result of it (which interventions take place?)	During EmployAble 2 we had only 7 formal TVETs that have provided technical skills to YWDs.
N. and type of trainings provided (which training to which staff: management, teaching staff, HR?)	The training on disability mainstreaming (mainstreaming (Disability Equity Training, Braille, basics on sign language, mobility and orientation, etc.) has been provided to the training providers.
How many TVETs ensured curriculum adaptations/guidelines for disability inclusion?	None
Which exchange and learning visits took place among TVETs themselves, and among TVETs and employers?	None

d. *Inclusive Employment Development*

In this section, we highlight that the youth graduates are in three categories of employment: - Self-employed youth groups – employed youth groups (retained by the training companies) and a very few number of the graduates who are looking for wage employment or temporally employed.

e. Focus on wage – employment:

• *Activities:*

- On wage employment, those are youth who have been trained by the companies (on the-job-training) who lastly have been retained by those companies.
- A tripartite contract between the UPHLS/NUDOR, companies and youth and local authorities has been signed for agreeing the youth integration.
- The start-up toolkits have been provided, through a grant, to the youth in companies employing the youth.

◆ *Achievements:*

All Youth Groups visited; Collection of project proposals from the Youth Groups; Sign a partnership agreement between Sector local authorities, Youth Groups and UPHLS&NUDOR; Integration of the YWDs within the companies that have accepted to receive them and signing of the contracts

f. Focus on self – employment:

For the case of self-employed groups, those are the youth who have developed their plan and their respective project plans have been submitted to UPHLS/NUDOR for fund.

• *Activities:*

- Proposed plans from different youth self-employed groups have been received and revised by UPHLS/NUDOR;
- A tripartite contract between the UPHLS/NUDR, youth self-employed groups and local authorities has been signed;
- The grant for start-up toolkits purchase has been transferred to the respective youth groups accounts;
- The start-up toolkits have been purchased under supervision of UPHLS/NUDOR

➤ *Challenge:*

- A certain number of youth who are not part of any group and are looking for wage-employment and or are temporally employed! There was any start-up toolkits provided to those youth as the project is not supporting the youth individually but in groups. Monitoring of this category of youth is not easy as to track them it's a constraint.

g. Targets employers / companies reached

For how many employers (both: formal and informal) the workplace assessment was done? What is the result? (which interventions take place?)	6 companies have been assessed and accepted to integrate/employ YWDs
N. and type of trainings provided to employers (formal and informal) on disability inclusion?	The training on disability mainstreaming (mainstreaming (Disability Equity Training, Braille, basics on sign language, mobility and orientation, etc.) has been provided to the training providers.
In which way were other stakeholders (financial institutions etc.) involved and/or sensitized on disability inclusion (through trainings, meetings, and exchange sessions)?	Only the local authority meetings held. These are quarterly steering committee meetings. Other stakeholders to be involved, but in 2019, are Financial Institutions (SACCOs).
How the relationship between TVETs and employers/private sector is strengthened (through meetings, visits, events, fairs?)	Partnerships and invited in different meetings and events.



Graduation ceremonies Bishop of Byumba , Visitors from Germany and YWDs

h. EmployAble LAB development/Challenge (formulation)

Sprint 1:

- **Activities** (taking place):

A 30 days intensive Sign Language

◆ **Achievements:**

The youth have been trained on Sign Language by RNUD. And during that time of SL training, accompanied by RNUD instructors, they have been visiting self-employed on

shoemaking and hairdressing saloons in Kigali City to start getting the idea on how to sign different materials used in the respective domain (hairdressing and saloon).

➤ **Challenge:**

There was really any challenge during this phase. Only, as other languages, Sign Language cannot be learned in one week. It's a progress, but as there is coaching during the technical skills period, this challenge will be solved with time.

➤ **Learning process** (what is documented):

Those are the young who have ever been at school, are illiterate young. This a part of RNUD methodology on how they train the youth who don't know how to read and write.

Solution 1: As youth who don't know SL, the first solution was to train them on Sign Language.

Sprint 2:

Activities: Starting of a six months technical skills training at companies, divided into different steps depending on trade (shoemaking and hairdressing and aesthetics). Trainers have adopted their methodology to facilitate deaf trainees in training, starting by dolls for hairdressers and cartons for shoemakers.

◆ **Achievements:**

- Regular visits have been carried out (once per week) to assess progress and have a time to discuss with trainers and trainees. We have realized that the training is going smoothly.
- Technical skills training finished
- Train the companies' staff/employees on disability mainstreaming
- A three months Sign Language coaching
- Sign Language posters designed.

Learning process:

The process methodology by technical skills providers, visiting the sites we have been impressed by how the trainees have started by practice using the dolls for hairdressers and cartons for shoemakers. And at one month and half the hairdressers were already started the real practice and shoemakers using the true leather. Now it's a time for photojournalist to capture photographs and shorts video for this phase.

Solution 2:

Activities: Training of employers on basic Sign Language

Achievements: Posters based on Sign Language are available at the training venues

Challenge: Employers have still challenges in communication with the deaf trainees

Learning process: Sign Language coaching

Note: The partnership with Masaka Creamery has been considered as part of LAB challenge, where we have three deaf young employed there in the factory. It's an on-the-job training where the youth employed there don't know Sign Language and in collaboration with RNUD we have planned sessions on Sign Language training. After assessment by RNUD it has been noticed that the deaf on-the-job training at Masaka Creamery still needed more sessions on Sign Language training and two months were added (according to 4 sessions/week).

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

- **M&E/Documentation: (information on tools, resources updated, created, improved etc.)**

No M&E has been done throughout the year. Documentation and success stories have been done through the photojournalist hired by Light for The World, Mr. Gilbert Sibomana.

- **Learning & Sharing: (participation in conferences, workshops, events related to EmployAble II)**

During 2018, about three EmployAble learning and sharing conferences have been held.

- **Lobby & Advocacy: (which lobby & advocacy (awareness raising) activities took place, specifically with the government and private sector? What is the result/follow-up of those activities?)**

Lobby And advocacy have been done at the District and Sector levels where we had meeting with local authorities and advocated for integration of the YWDs graduates within the companies/cooperatives for job placement.

- **External Communication: (information on the events that were/are to be covered by the Communication Recourse Person and the results which were produced: photos/videos/interviews)**

The Communication Resource Person, Mr. Gilbert, as usual has taken photos and stories collection from the selected EmployAble 2 trainees to assess the progress. The report was sent to the EmployAble Regional Coordinator.

- **Partnerships: (information on new partnerships developed within EmployAble II (meetings with different stakeholders, briefings, visits etc.)**

During the EmployAble 2 we had two main partners, one is Education Development Centre (EDC) under USAID HDAK Project that has supported 93 YWDs and another one is Masaka Creamery under LAB challenge. This company is employing about 16 youth with hearing impairment.

- **Fundraising: (information on the steps taking for the fundraising purposes: research on local grants, other fundraising sources, raising private sector contributions etc.)**

Fundraising is one of the EmployAble strategies to bring other stakeholders on board. For this case, EDC was involved.

j. **Internal Communication**

The internal communication has been done through monthly meetings between UPHLS and NUDOR; Steering Committee Meetings with local authorities.

6 USAID Huguka Dukore Akazi Kanoze

The project is funded by Education Development Center and it pursues the goal of facilitating the (self)-employment of YWDs ensuring their enrolment to relevant skills training programmes accompanied by soft skills training and business development courses WRN! And BYOB; The big focus of project falls on developing strong linkages with employers/business developers engaging them in collaboration with technical skills providers, supporting them in developing more sustainable employment and disability inclusive recruitment approach, and in securing job placement for YWDs through thorough monitoring and improvement strategy.

The project has to be implemented in the above mentioned 3 Districts where at least 500 vulnerable youth were identified, mobilized, selected, and supported in enrolment for technical skills trainings, one part, and WRN!/ BYOB other part for the youth SILC groups.

In order to reach this goal the following objectives were set:

- Comprehensive and inclusive skills development trainings
- Market-oriented and need-based tutoring at technical skills providers
- Career counselling and business development services
- Internship and apprenticeship opportunities that provide youth with valuable experiences, and professional role models
- Employers/business owners invest more in improving youth access to and retention at work

In order to ensure the comprehensive approach to the development of youth vocational skills, the project intended to complement the technical courses with soft skills development, career counselling and business development training (WRN! and BYOB). Besides, all YWDs were assessed and provided with the reasonable accommodation to be able to participate in the courses and later in internships/ apprenticeships at the job site.

In order to ensure youth effective transition to the labour market, the project has involved employers/business owners at the early stage during WRN! /BYOB building up on their

partnerships with technical skills providers, and through involvement of role models who can inspire youth to set up their own career goals.

a. The provision of startup kits to the graduates

The provision of startup kits to the graduates was one of the key activities of the project. It is in this framework that UPHLS started officially this activity in Rulindo District, Bushoki Sector on 29 November 2018 to be continued in other Districts.

This ceremony has brought together different government institutions including NCPD and WDA; district officials from Rulindo, Rubavu and Musanze; development partners, head teachers of training centers that have trained youth; Youth graduates from technical skills of Rulindo District and EDC and USAID guests of honor.

Mr. Potter William the representative of EDC HDAK Project came back on the role of EDC and UPHLS within this program in helping the youth to achieve their dreams through USAID HDAK Project. He said that the graduates acquired the skills to help them in job creation and mention that they used to work in few districts and they plan to extend the program to more districts in order to reach a great number of youth in 2019-2021, he ended his speech requesting the graduates to use the acquired skills to have jobs and job creation and have a role in their economic development and the country in general.



Concluding, he thanked UPHLS in disability inclusion and promising them to work hand in hand within this program to have a great number of beneficiaries especially the ones with disabilities.

As guest of Honor, Mr. Kevin Armstrong, A/Deputy Mission Director has appreciated this event and was happy of being together with youth trained in partnership with EDC and UPHLS. He appreciated the role of partners as mentioned in supporting Rwandan youth to

get the skills they need to get job through entrepreneurship and have hope that Rwanda is achieving its objective. In his remarks he expressed that USAID is discouraging discrimination and they don't want that any one is left behind. *“These dedicated young men and women have proven their entrepreneurial potential, and are a testament to the fundamental truth that people with disabilities hold just as much promise & potential as those without! We are proud of you!”* Kevin Armstrong, A/Deputy Mission Director said.



During the event, certificates were given to the graduates qualifying them for completing soft skills training (WRN! and BYOB). The following table is showing number of the youth graduates in the District.



IV. UPHLS OTHER ACHIEVEMENTS

During 2018, UPHLS participated in different events organized in the area of health mainly HIV and disability, including conferences, meetings and open days (exhibitions) and initiatives organized together with its Partners.

1. Participation in key workshops and international conferences

Three staff including the ED represented UPHLS in 12th Interest Conference (known as the ‘African CROI’) took place from 29 May – 1 June 2018 in Kigali Convention Center. The Conference brought together scientists involved in HIV treatment, pathogenesis, and prevention research in Africa to share pivotal findings, promote collaboration, and transfer experiences across several fields and many continents. UPHLS exhibited tools used in HIV response and the key achievements.

Participation in a workshop of alignment of HIV national strategic plan with fourth health sector strategic plan 2018-2024

UPHLS participated “Free to Shine Campaign which is a continental initiative seeking to end paediatric AIDS by 2030 and keep infected mothers healthy. This event was launched on 10 September 2018 at Remera Stadium.

These workshop are very important to UPHLS, they provided opportunities for advocacy for the inclusion of persons with disabilities in HIV Response and to share our expertise in disability to different partners in order to include disability in their services.

UPHLS Participated in the international conference on HIV held in Amsterdam from 21 to 27 July 2018 where UPHLS and other international organizations were coordinating Disability networking Zone. The Executive Director shared the experience of Rwanda on best practices from LCI Project.

UPHLS participated in the Rwanda disability summit where it presented on Stigma and discrimination for the preparation of London disability summit.

UPHLS participated in International Family Planning where UPHLS, Light For the World and Amplifychange in collaboration with University of Washington presented on Disability Inclusive Sexual reproductive Health and Rights.

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. Mainly UPHLS make:

- Consultation Meetings of UPHLS constituencies,

- Sensitization of other CSOs not member of UPHLS,
 - Participation at the National CSOs' Advocacy meeting
- 3. UNAIDS capacity building of Health Care Providers from Kigali City on Disability inclusive Services**

UPHLS in collaboration with RNUD and UNAIDS developed an initiative related to strengthen capacity building of Health Care Providers from Kigali City on Disability inclusive Services , mainly key activities are:

- To build the capacity of 40 Health care providers from 20 Health Centers.
- To advocate for Sustainability of this program by the Ministry of Health.
- Documentation of lessons learnt from the program to be done to inform further planning of strengthening the capacity of Health Care providers in HIV &AIDS response.

The program will further contribute to increase knowledge on disability and utilization of HIV&AIDS tools trough Sign language.



Rwanda disability summit

International conference on HIV

I C Family Planning KCC

V. FINANCIAL UTILIZATION

Source of funds	Amount received (Previous year/2017)/RWF	Amount received (Current year/2018)/RWF	Following year/2019/RW (Funding Commitments/ Estimation)*	Comments
UPHLS/Short term projects from different partners (Sign language in schools, IDPD Celebration, Forums and campaigns on HIV/AIDS and Disability, etc)		1,923,990	1,548,000	CCM&GIZ budget for capacity building of constituencies. The estimated budget for 2019 covers up to June 2019
		4,615,250	-	UNAIDS-RBC&IMBUTO Foundation (Free to shine campaign=RWF 3,500,000); Training of HCPs of Kigali City on SL&MO: RWF 5,730,500. There is a remaining
		1,317,102	-	2018 Saving interests for the smart saver account opened in I&M bank Ltd. The interests were very low compared to the previous years because we made
	9,986,030	9,949,639	5,500,000	Other funds: From external support for the loan payment. Other funds are related to movement between accounts for the common basket salaries and other few running costs
UPHLS/Other revenues (Bid selling, braille printing, VAT refund, etc)	64,526,911	18,084,393	-	VAT refund for the second semester of 2017 up to February 2018
		11,191,500	-	Products from Braille printing service rendered to the Election commission in Aug 2018; And different training documents for people with visual impairments
		2,936,480	-	Funds coming from projects closing (CDC, etc)
The Global Fund (GF)Funded by the Global Fund through the MoH/RBC Aiming at HIV/AIDS prevention among PWDs : coordinate, monitor and evaluate all activities of fighting against HIV&AIDS	125,807,727	170,607,318	79,803,885	During 2018, in addition to the budget we received from the RBC, RRA refunded back the VAT of RWF4,673,710 that was totally returned to MINECOFIN. The estimated budget for 2019 ends with June 2019 (their AWP is July-June)
USG/CDC Atlanta (FAIN: EmployAble/ Light for the World/Netherlands (Funded by Light for the World and INGO from Netherlands. Aiming at quality vocational training and decent (self)	327,502,957	12,863,475	-	The project was closed in January 2018.
	40,011,722	76,070,416	54,573,072	In addition to the AWP 2018 budget of RWF 55,767,380; We received extra budget funds as follows: RWF 2,589,426 for the Lab of 2017/RWF 4,950,040 for Lab 2018; and The film crew activity of RWF 9,893,971 and the the I&S conference of RWF 2,869,600 held in
Every Life Matters/ Light for the World/Netherlands	47,961,884	70,002,254	52,216,244	During the closing year, in addition to transferred amount within the AWP, we received an extra budget of RWF19,722,940 for the Learning and Sharing conference held in Nov 18 at Rubavu Serena Hotel
Huguka Dukore/USAID-EDC-AKA	15,556,800	60,518,000	133,540,547	During the closing year, in addition to approved MOU Budget of RWF77,784,000; they added an extra budget of RWF 2,725,000 for the LLMA. We have not yet received the M8 (Rwf 3,889,200 and the LLMA reporting budget of 545,000). For 2019, the budget is prepared in two phases of 5 and 7 months
Disability Rights Funds project	-	17,380,000	41,764,252	The average exchange rate applied is RWF 878.175115/1\$
UPHLS/MOH CoAg	-	155,148,525	95,502,800	The AWP 2018 comprises a part of AWP 2019 that begins in October 2018
UPHLS/AMPLIFYCHANGE	-	-	99,833,960	To begin in January 2019
TOTAL	631,354,031	612,608,342	564,282,760	

VI. CHALLENGES

- **The Delay of funds disbursement** from some Donors which disturb the implementation of activities. Due to some long delays, we failed to implement the activities like designing the training manuals and other related activities that were planned in the period of April – June 2018 from RBF Project.
- **The barrier of communication and Limited knowledge** of services providers and Community health workers on disability;
- **Lack of disaggregated data** on disability in all visited health centers and **Lack of reporting templates** with component of monitoring disability inclusion
- **Limited budget allocation** to the inclusion of Persons with disabilities and Limited budget during this current year to involve more DPOs through sub-grants for them to participate more in the implementation.
- **Delay in the installation of facilities** for persons with disabilities at selected health centers by the Ministry of Health ;
- Most of beneficiaries (**PWDs living with HIV**) are living in **extreme poverty** that is affecting their nutrition status which in turn has direct impact on positive living;
- **Low commitment of partners** in allocating budget to disability issues due to different reasons
- **Lacking of some key budget line** ,WASH actors who request to UPHLS to strengthen their capacities on the inclusion of PWDs and to give models of services disability friendly when the pilot project does not have this budget.
- **UPHLS lost two disabled trainees** at the same training site , UWIMANA Eric and MUKANDEKEZI Emerance
- USAID HDAK Project has **recruitment requirements** that have limited a number of YWDs to benefit the program
- Some PWDs **lack categoriID card** and consequently **no MUSA cards**; Lack of rehabilitation to many PWDs (like many blinds without white canes and knowledge to use them)

VII. CONCLUSION

This year has been characterized by a change in structure used to implement projects where different regional offices were given more responsibilities and central level focusing on strategic direction and coordination combined with efforts in learning from the trajectory.

Different actors from Health institutions, Educational institutions, Civil Society Organizations, Centers and the community have benefited from capacity building initiatives to make them able to provide quality services to persons with disabilities.

The success has been reached through a joint effort of UPHLS and other stakeholders whom we want to express our gratitude to. We want to express our gratitude to the MoH, Global Fund, LFW, EDC and DRF to include and sponsor the inclusion of persons with disabilities in health and development programs. We hope other programs may learn from them to foster the development for all.

The project implementation is an interesting and exciting learning trajectory for UPHLS, partners, local authorities, institutions and Persons with disabilities we interacted to. We are confident enough these projects will change the views and programming of stakeholders towards the provision of disability inclusive health and development programs in Rwanda.

VIII. LESSON LEARNT, SUCCESS STORIES AND BEST PRACTICES

1. Lessons learnt

- Two schools of the deaf, one in Musanze and another in Nyagatare after the training of YWDs have taken initiatives to add in their every day program one hour every week to discuss on SRH and HIV where the youth who have been trained are the ones who facilitate these sessions.
- We have learnt that joint planning can contribute more to the inclusion of Persons with disabilities because most of our partner local authorities and civil society organizations have got some information on disability rights but they lack the know-how and models to learn from
- After training of communities on respectful attitudes towards PWDs, some of the participants like AEE committed that they will include PWDs in their activities. Later on, they shared with us some photo showing young people with disabilities participating in their training, meeting and social programs. Others like the Rwanda Muslim community at Nyarugenge District are in process to start radio program (talk show) on PWDs and SRH

- Nyundo has committed to allocate one million for disability inclusion especially on accessibility (renovation of the toilet for accessible Toilet)
- During the identification of focal person, Kabyayi eye unit requested UPHLS to conduct an accessibility audit identifying gaps and provide recommendations to have the image of their hospital in terms physical accessibility, and service provision in order to mobilize funds to upgrade the health facility; and now they have started construction of the new accessible building according to the report provided by UPHLS after accessibility check.
- After participating in the training of communities, Rwanda Muslim community at Nyarugenge District promised to start changing the terminologies used for PWDs in their mosque or other events and; currently it uses the correct terminologies to designate or call PWDs
- Through the training of the communities on the respectful attitudes to PWDs, some of them like AEE have appreciated this initiative and have committed that they will include PWDs in their activities and after the training they share with us some photo showing the young with disabilities participating in their programs.
- We have realized that the mind-set of healthcare providers was changed from the training and the routine visits made by UPHLS team to health/youth partner to discuss on the progress bring them on good way to include PWDs in their health services

2. Success stories

- Nyundo has committed to allocate one million for disability inclusion especially on accessibility (renovation of the toilet for accessible Toilet)
- During the identification of focal person, Kabyayi eye unit requested UPHLS to conduct an accessibility audit identifying gaps and provide recommendations to have the image of their hospital in terms physical accessibility, and service provision in order to mobilize funds to upgrade the health facility, and Now they have started the new accessible building according to the report provided by UPHLS.
- During this year, 3,292 PWDs have been tested for HIV to know their HIV status and those found HIV positive are now enrolled on Antiretroviral therapy(Trait all)
- Comparing to the previous outreach campaigns, this time we have focused on Youth with disabilities mainly through the special centers/ Schools where most of the youth reached confess that before they had false information about SRH, HIV and AIDS but now they have clear information and they are ready to fight against people who want

to mislead them in the risky behavior, said by the students in deaf school in Musanze District.

Story 1



- My name is BAYISENGE Christian, 25 years old, and physically disabled. Before joining HUGUKA DUKORE Program my expectation was to become self (employed) but I didn't know how, I'm from a poor family and none of them has studied and couldn't support me to continue my studies . So, after being selected to join the HUGUKA DUKORE Program I was so happy to attend WRN! Training

- After completing WRN! Training, I immediately started vocational training in" LEATHER WORKS". This

was a six months on-the-job training in one company named TWITEZIMBERE located in Base Sector/Rulindo District. During the training period I successfully attended the training and I did everything for the purpose of gaining enough skills and knowledge as a one who had an objective of creating a business. And then, after completing the on-the-job training I did a one month internship in the same company and my trainer provided me a chance of selling some of products (shoes) and gained a small amount. I had a chance to be retained and employed by the same Company. After these two months of employment, saving RWF 15,000/Month, I am very happy and regained the confidence in my ability and in my future, I also thankful to the HUGUKA DUKORE Program for their continuous support to youth with disabilities. I can assure you that **this amazing training has changed my life.**

Story 2



- My name is DUSHIMIMANA Ephrem, living in poor family, after dropping out I thought that I didn't able to help myself and my family as well. One day I went to the church and I got information about the Project that is providing support to the vulnerable youth about job creation. The selection came after Two weeks after communication and I was so happy to be selected from many youth. The first training that I have attended was WRN! training before being engaged in vocational training and I am happy to graduate in BAKERY from VTC Kinyihira.

- At the end of my studies I have started a one month internship and I continue to think about my future after both training and internship. After one month of internship, I was very surprised to get a job at the same VTC. One thing that the school Manager told me, is that I have performed well during the internship period the why I was selected from my colleague and retained. I am monthly paid RWF 15,000/Month and daily lunch provided. Today I'm proud of myself and I'm very thankful to HUGUKA DUKORE program, thanks a lot for what you are doing for the youth.