

#### Name:

Bright Futures/Imbere Heza project

#### Location:

Nyagatere district, Rwanda

### Funded by:

FCDO, UK Government

#### Dates:

FCDO, UK Government

## **Background**

Lack of inclusive sexual and reproductive health services (SRH) for deaf adolescents and pregnant teenagers remain a significant public health problem in developing countries. According to WHO (World Health Organization) approximately 466 million people worldwide have disabling hearing loss, 34 million of whom are children. In Rwanda, the prevalence rate for hearing loss is 0.4%. Despite the Sustainable Development Goals (SDGs) focus on leaving no one behind, people with hearing impairments often lack access to healthcare because of lack of communication with health service providers and access to disability friendly information. Teenage pregnancy rates are on the rise and data from NISR indicate that in 2007/2008 to 2014/2015 teenage pregnancy increased from 5.7% to 7.3%. For many adolescents, pregnancy and childbirth are neither planned, nor wanted. Teenage pregnancy is

associated with health risks that may result in maternal death and negative socio-economic consequences. VSO (Voluntary Service Overseas) is supporting vulnerable groups in the Rwandan district of Nyagatare to reduce teenage pregnancy through public awareness and education on SRH, advocacy for GBV (Gender-Based Violence) prevention and supporting teen mothers to return to formal education. VSO initiated sign language courses for nurses and CHWs (community health workers) to ease communication between service providers and deaf clients seeking SRH services.

# **Objectives**

The objective was to promote access to SRH services by deaf youth including teen mothers and reduce communication barriers between service providers and deaf youth. The following principal objectives were identified:

- Improve access to comprehensive inclusive quality SRH services for deaf youth, teen mothers, girls, and women with disabilities through training nurses and CHWs in sign language, strengthening the referral system and refresher trainings on sign language.
- Conduct community engagement to address harmful social norms and practices.
- Promote a **protective legal and policy environment for inclusive SRH** for deaf youth and teen mothers.
- Equip youth with SRH information and skills.

# Key approaches used

- Training and mentorship: The programme was delivered through the support of volunteers who trained and mentored deaf adolescents and youth as peer educators, facilitators and Community Health workers.
- Community and family engagements to address harmful social norms and practices.
- Community-based radio for communication and awareness raising on SRH services and GBV prevention.
- Capacity building and strengthening of health workers to provide inclusive, quality, and accountable sexual health services.
- Establishment of learning spaces for SRH information exchanges with support from VSO trained deaf peers who organized sessions.

## **Key results**

# Increased capacity of the health workforce to deliver on inclusive health (SRMNCAHR) services

- Teachers from Umutara School for Deaf People and the Rwandan National Union of Deaf People trained 87 nurses, 700 Community Health Workers and deaf parents were trained in basic sign language and refresher trainings were also offered.
- 2. Due to improved communication between deaf clients and service providers, deaf clients could choose a FP (Family Planning) method of their choice after receiving information from CHWs and nurses.
- 3. Amidst the COVID-19 pandemic, VSO Rwanda continued to deliver integrated sexual reproductive health information, COVID-19 actions and strengthened linkages and referral of essential SRHR services to reach the most marginalized adolescents, youth and adults including those with disability. VSO and partners reached 144,991 people among which 7,425 were people with disabilities with COVID-19 messages.
- 4. The twinning project between Nyagatare District Hospital and Lewisham and Greenwich Trust has supported improvements in case management, lab capacity, increased the knowledge and awareness of young people about SRHR and increased dialogue between young people and their parents on SRHR. It has also to a lesser extent improved screening and detection of STIs and improved patient outcomes.

# Improved community attitudes, knowledge, practice, and behavior change

- 1. A total of **98 parents of deaf youth** were reached with information on SRHR thus mobilizing support for increased access of SRH and GBV services for deaf youth and women.
- 2. Approximately **6,000 parents and community members** were engaged through dialogues to break the silence on young people's SRH.
- 3. VSOR with partnership with the Rwandan Organization of Women with Disabilities piloted the Living with Dignity Project applying a family-centric approach. In total the project engaged **547 primary actors** (310 females, 237 males and 357 PwDs (People living with Disability)). The pilot project was aiming at empowering people with disabilities alongside their immediate family members with the knowledge, skills, and confidence to address their SRHR needs. The family centric approach resulted in improved knowledge among community/family members in addressing harmful social norms and practices which affect marginalized groups.
- 4. Improved SRH knowledge among deaf parents resulted in awareness of FP needs among young people in their care.

# Adolescents and Youth able to demand for their (SMNRCAHR) health rights

- A total of 50 deaf youth were trained as peer educators and they reached approximately 1,029 adolescents and youth with disabilities with SRH information generating demand and uptake of SRH services.
- This resulted in improved confidence among the deaf youth in seeking SRH services with 300 deaf youth accessing services. Service users stated they felt more confident of the quality of services they would receive.
- 3. A total of **300 vulnerable teen mothers** received Sexually Transmitted Infections (STIs) screening and training on SRH.
- 4. Increased interaction between deaf youth/ NYC members with the District Disability Mainstreaming Unit increased the consideration of priorities for people with disabilities in the district planning.





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