

HDI NEWSLETTER

MAY 2026



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Dear Partner,

Welcome to our **May Newsletter!**

Every community deserves access to quality healthcare, accurate information, and services delivered with dignity and respect. Throughout May, this conviction continued to guide our work as we engaged communities, strengthened partnerships, amplified voices, and invested in the people and systems that make lasting health impact possible.

Across Rwanda, we worked alongside community health workers in Rubavu District to strengthen preparedness against Ebola and other public health threats, reinforcing the vital role that communities play as the first line of defence during health emergencies. We also supported healthcare providers in Rusizi District to confront abortion-related stigma through values clarification and reflection, helping create more compassionate and respectful care for women and girls.

Community engagement remained central to our work. Through dialogues with community-based organisations, youth outreach, mobile health services, and integrated SRHR campaigns across Kigali and Bugesera, we continued bringing essential health information and services closer to those who need them most. We also expanded our work with students at Kepler College and the African Leadership University, creating safe spaces for young people to discuss health, wellbeing, innovation, and their role in shaping healthier societies. Beyond direct service delivery, we strengthened collaboration at every level. Strategic engagements with national and international partners, participation in global conversations at ANSER 2026 in Brussels, and a South-to-South learning exchange with ABPF in Benin reaffirmed the value of partnerships, shared learning, and evidence-based action in advancing inclusive, rights-based healthcare.

We also continued investing in stronger public dialogue around health by equipping journalists and digital content creators with the knowledge and skills to report responsibly on drug use, addiction, and harm reduction, recognising the powerful role the media plays in reducing stigma and promoting informed public discourse. As you explore this edition, you will see a common thread running through each story: meaningful progress is built through collaboration. Whether strengthening health systems, supporting frontline providers, empowering communities, or engaging young people, sustainable change happens when people come together around a shared commitment to health, dignity, and human rights.

Thank you for walking this journey with us. We hope these stories inspire continued partnership as we work towards healthier, more inclusive, and more resilient communities for all.



ON THE FRONTLINE OF PREPAREDNESS: EQUIPPING RUBAVU COMMUNITIES AGAINST EBOLA

As regional Ebola risks persist, HDI worked with community health workers in Rubavu District to strengthen early detection, reporting, and community awareness, helping safeguard communities along one of Rwanda's busiest border regions.

In May, Health Development Initiative (HDI) intensified efforts to strengthen community preparedness against Ebola Virus

Disease (EVD) and other epidemic-prone diseases through a six-day training and engagement activity for Community Health Workers (CHWs) in Rubavu District. Held at HDI Clinic from May 25–30, the initiative brought together 50 CHWs from different sectors of the district to strengthen Community Event-Based Surveillance (CEBS) and Risk Communication and Community Engagement (RCCE), two critical pillars of effective outbreak preparedness and response.

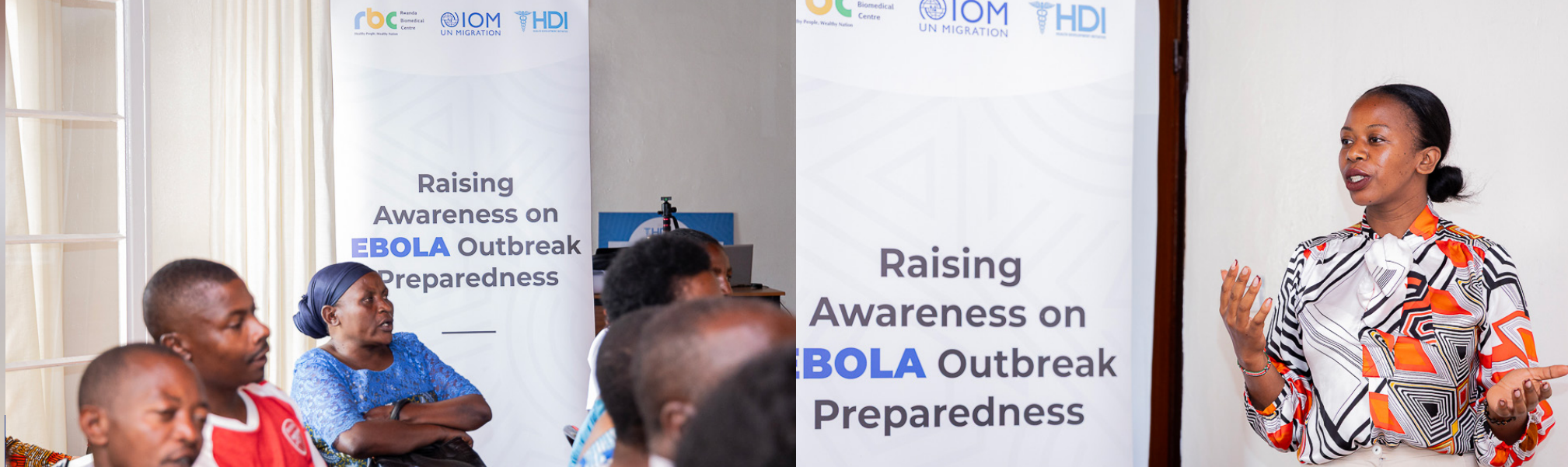


Rubavu District occupies a strategic position along Rwanda's border with the Democratic Republic of Congo (DRC), where high levels of cross-border movement, trade, and travel create increased vulnerability to infectious disease outbreaks. In such settings, community-based surveillance and timely reporting become essential tools for protecting public health.

Recognizing this reality, HDI's intervention focused on ensuring that community health workers, the first point of contact for many households, have the knowledge and skills needed to identify potential health threats early, communicate accurate information, and support rapid response efforts.

STRENGTHENING THE FIRST LINE OF DEFENSE

Throughout the six-day activity, participants received comprehensive training on Ebola preparedness, including disease transmission, signs and symptoms, prevention measures, referral pathways, and reporting procedures. Special attention was given to recognizing warning signs that may require immediate action, including sudden fever, severe weakness, vomiting, diarrhea, unexplained bleeding, unusual illness clusters, unexplained deaths, and relevant travel or contact history.



Participants also explored practical approaches for responding to rumors, misinformation, and fears that often emerge during public health emergencies. Sessions emphasized the importance of maintaining confidentiality, reducing stigma, and building trust within communities.

By the end of the training, CHWs demonstrated improved understanding of Ebola prevention and preparedness measures, as well as increased confidence in their ability to support disease surveillance and community awareness efforts.

IMPROVING COMMUNITY SURVEILLANCE AND EARLY WARNING SYSTEMS

A key component of the activity focused on Community Event-Based Surveillance, a system designed to identify unusual health events before they escalate into larger outbreaks.

Participants were trained to recognize and report suspected cases and other public health concerns using established reporting pathways. Through practical demonstrations and scenario-based exercises, they learned how to monitor symptoms within their communities, identify reporting triggers, and utilize multiple communication channels for timely alerts.



Building Business on Outbreak Readiness



The training also introduced simplified preparedness standard operating procedures that guide community-level reporting, feedback mechanisms, confidentiality practices, and stigma reduction measures.

Strengthening these systems helps ensure that potential threats can be identified and communicated quickly, supporting faster public health action when needed.

PROMOTING TRUST, PREVENTION, AND COMMUNITY ACTION

Beyond surveillance, the activity highlighted the importance of effective communication in outbreak preparedness. CHWs were equipped with tools to share accurate prevention messages, address misconceptions, and encourage community members to seek help and report symptoms without fear or discrimination.



The training also reinforced the role of Water, Sanitation and Hygiene (WASH) measures in preventing disease transmission. Participants discussed the importance of maintaining functional handwashing facilities, ensuring access to water and soap, and encouraging regular hygiene practices at household and community levels.

INVESTING IN RESILIENT COMMUNITIES

The activity trained and oriented 50 community health workers on Ebola preparedness, surveillance reporting, risk communication, and infection prevention measures.



As global and regional health threats continue to evolve, investing in community-based preparedness remains one of the most effective ways to protect vulnerable populations. By strengthening the capacity of frontline health workers, HDI is helping communities in Rubavu become better prepared to detect, report, and respond to potential outbreaks before they spread.

The initiative reflects HDI's continued commitment to supporting resilient health systems and empowering communities to play an active role in safeguarding public health.



CHANGING HEARTS, CHANGING CARE: HEALTHCARE PROVIDERS REFLECT ON ABORTION STIGMA IN RUSIZI

Through open dialogue, self-reflection, and values clarification, healthcare providers in Rusizi District are rethinking how they deliver abortion and post-abortion care, helping create a more respectful and stigma-free healthcare environment for women and girls. For many women and girls seeking reproductive healthcare, the greatest barrier is not always distance, cost, or availability of services. Sometimes, it is

the fear of being judged. In Rusizi District, where cross-border movement and diverse populations create unique healthcare challenges, Health Development Initiative (HDI), in partnership with AmplifyChange, brought together healthcare providers for a three-day Values Clarification and Attitude Transformation (VCAT) training aimed at addressing one of the most persistent barriers to safe abortion and post-abortion care: stigma.



Held from May 12 to 14, 2026, the training convened 46 healthcare providers from public health facilities, private clinics, district hospital structures, youth-friendly services, and community health systems across the district. Participants included 23 women and 23 men, reflecting a balanced representation of healthcare workers serving communities along Rwanda's western border.

The training came at a critical time. Although Rwanda's legal framework allows abortion under specific circumstances, many women and girls continue to face obstacles when seeking safe

abortion and post-abortion care services. Misunderstanding of the law, fear of legal consequences, social stigma, and personal beliefs can influence how healthcare providers respond to clients, sometimes resulting in delayed care, inappropriate referrals, or judgmental treatment.

Recognizing that improving access to care requires more than clinical knowledge, the training focused on helping participants examine the values, beliefs, and attitudes that influence their daily interactions with patients.



LOOKING BEYOND PERSONAL BELIEFS

Through guided discussions, practical exercises, and real-life case studies, participants explored how personal experiences, cultural norms, and religious beliefs can shape professional behaviour. The training encouraged healthcare providers to reflect on their responsibilities as healthcare professionals and the importance of separating personal beliefs from their obligation to provide respectful, rights-based care.

For many participants, the experience challenged long-held assumptions. “Before this training, I used to chase away women and young girls who came seeking abortion-related services,” said one healthcare provider from Nkanka Health Center. “I would tell them to go back to school or go and give birth because I never understood that abortion care is part of healthcare services. This training helped me reflect on my attitudes and understand my professional responsibility as a healthcare provider.

The provider added that they now better understand the importance of treating clients with dignity and ensuring timely referrals when services are unavailable at their facility. Another participant from Mount Rusizi Health Center reflected on the role of personal faith in healthcare delivery. “This training helped me understand that as healthcare providers, we must put our personal beliefs and faith aside when caring for patients,” the participant said. “Our religious beliefs should never influence us to delay, deny, or judge someone seeking healthcare services.”

UNDERSTANDING REALITIES BEHIND REPRODUCTIVE HEALTH DECISIONS

Throughout the workshop, participants examined the social, economic, and personal circumstances that influence women’s reproductive health decisions. Using the VCAT methodology, healthcare providers engaged in activities designed to build empathy and deepen understanding of the realities many women and girls face, including unintended pregnancies, sexual violence, lack of family support, economic hardship, and fear of social stigma.



One particularly powerful exercise explored how stigma, delayed care, poor referrals, and breaches of confidentiality can contribute to unsafe abortion and, ultimately, preventable maternal deaths.

Participants acknowledged that even seemingly small actions—such as judgmental language, negative attitudes, or unnecessary delays—can discourage women from seeking care and increase health risks.

“As healthcare providers in Rusizi District, we should not be the ones misleading women or chasing them away when they seek abortion or post-abortion care services,” one participant observed. “Every abortion-related case is unique and should be treated as a priority.”



CREATING SAFER AND MORE COMPASSIONATE HEALTHCARE ENVIRONMENTS

The training also strengthened participants' understanding of Rwanda's legal framework on abortion and post-abortion care, helping reduce uncertainty and misinformation that can affect service delivery. Pre- and post-training assessments showed improvements in participants' knowledge, confidence, and understanding of rights-based reproductive healthcare. The workshop also created a valuable platform for healthcare providers to openly discuss challenges they encounter while serving diverse and highly mobile populations in a border district setting.



By the end of the training, participants demonstrated stronger commitment to providing confidential, respectful, and non-judgmental care, regardless of their personal beliefs. For HDI, the initiative reflects a broader commitment to improving reproductive health outcomes by addressing not only clinical capacity but also the attitudes and social norms that influence access to care. As participants return to their facilities with new perspectives and renewed commitment, the training represents an important step toward ensuring that women and girls seeking reproductive healthcare in Rusizi District are met with compassion, dignity, and the quality care they deserve.



COMMUNITY VOICES, BETTER SERVICES: SHAPING MORE INCLUSIVE HEALTHCARE TOGETHER

Through dialogue with community-led organizations, HDI is strengthening efforts to ensure health services remain accessible, responsive, and stigma-free for the communities that need them most. Effective healthcare services are built not only in clinics and offices, but also through meaningful engagement with the communities they serve. In May, Health Development Initiative (HDI) brought together representatives from community-led organizations and healthcare professionals

for a joint learning workshop aimed at identifying service gaps, strengthening collaboration, and improving access to inclusive health services. The workshop, held in Kigali on May 12, convened 37 participants, including representatives from community-based organizations and HDI staff. The meeting formed part of HDI's broader efforts to strengthen community-led responses, improve service quality, and ensure that healthcare remains responsive to the



At the heart of the discussions was a simple but important question: How can health services better serve the communities they are intended to reach? Opening the workshop, HDI's Deputy Executive Director encouraged participants to share their experiences openly and contribute practical recommendations that would help strengthen services across HDI's centers. "This meeting is not only an opportunity to share the services we currently provide to the community, but also a platform for us to jointly shape how those services can be improved to better meet your needs," she said. "HDI does not exist to serve its staff; we exist to serve you." The workshop created space for participants to review existing services, reflect on their experiences, and identify areas where additional support, information, or improvements may be needed.

UNDERSTANDING COMMUNITY NEEDS

Participants assessed their awareness and use of services offered through HDI's centers, including HIV prevention and testing, sexual and reproductive health services, legal support, psychosocial services, and community outreach programs.

The discussions revealed strong awareness of services related to HIV prevention, human rights support, and inclusion initiatives. However, participants noted that some services, particularly mental health support, youth-focused programming, and harm reduction interventions, were less widely known within communities.

The findings highlighted the importance of strengthening communication and referral systems to ensure that community members are fully aware of the support available to them.

The workshop also provided an opportunity for participants to learn more about the comprehensive range of services available through HDI. “Sincerely speaking, I did not know that there were all these services available at HDI,

” said Germain Muhire, one of the participants. “I used to think about services such as HIV testing, counseling, and distribution of materials like condoms and lubricants, but learning about the wider range of services offered was really a surprise.” Similarly, Seth Ngendahimana from Rights for Us Community noted that many community members associate HDI primarily with HIV-related services.

“Learning about the availability of sexual and reproductive health services, psychosocial support, medical consultations, and other interventions showed us that HDI provides much more comprehensive care than we thought,” he said.



IMPROVING SERVICES THROUGH FEEDBACK

Beyond increasing awareness, the workshop provided a platform for honest conversations about the quality and accessibility of services. Participants highlighted the importance of ensuring that all communities can access appropriate healthcare services without fear of stigma or discrimination. Discussions also explored ways of strengthening referral pathways, improving outreach efforts, and ensuring services are responsive to diverse health needs.

Privacy and confidentiality emerged as key priorities. Participants emphasized that trust remains essential in healthcare settings, particularly when individuals seek support for sensitive health concerns. “Knowing that our information will remain confidential is just as important as receiving the treatment itself,” said Emmanuel Habarurema.

In response, HDI staff reaffirmed the organization's commitment to professional ethics and client confidentiality. “At HDI, confidentiality is not optional; it is a responsibility that every staff member must follow,” said Devota Wihogora, a registered nurse at HDI. “We are committed to providing services where everyone can seek care with confidence and dignity.”

TURNING DIALOGUE INTO ACTION

The recommendations generated during the workshop will help shape future capacity-building efforts, service improvements, and learning initiatives. They will also inform a planned learning exchange with community-led organizations in Benin, where participants will explore successful models of inclusive and community-centered service delivery.



For HDI, the workshop reaffirmed the value of listening to communities and involving them in decisions that affect their wellbeing. By creating opportunities for dialogue, reflection, and shared problem-solving, HDI continues to strengthen partnerships with community-led organizations while improving access to responsive, stigma-free, and people-centered healthcare services. Because when communities help shape services, those services become stronger, more relevant, and better equipped to meet the needs of the people they are designed to serve.



BREAKING THE SILENCE: TAKING THE FIGHT AGAINST GENDER-BASED VIOLENCE TO MAHAMA AND KIREHE COMMUNITIES

Through community dialogue, entertainment, and life-saving health services, HDI reached more than 800 refugees and host community members with critical information on preventing gender-based violence and accessing support services. In communities affected by displacement, economic hardship, and limited access to information, gender-based violence

(GBV) remains a serious threat to the wellbeing of women, girls, adolescents, and other vulnerable groups. Addressing the challenge requires more than awareness alone - it requires creating safe spaces for dialogue, bringing services closer to people, and ensuring communities know where to seek help.

On May 21, Health Development Initiative (HDI) brought that approach to Munini Cell in Mahama Sector, Kirehe District, through a large-scale outreach campaign aimed at preventing and responding to gender-based violence among both refugees and host communities.

Held near Mahama Refugee Camp, one of Rwanda's largest refugee settlements, the campaign attracted more than 800 participants, including adolescents, young people, women, refugees, and members of the surrounding host community. The event combined education, entertainment, and direct service provision to promote awareness of GBV prevention, reporting mechanisms, and sexual and reproductive health services.

TURNING AWARENESS INTO ACTION

The campaign sought to address the factors that continue to contribute to gender-based violence, including harmful social norms, substance abuse, economic vulnerability, and limited access to information and support services.



Through interactive discussions, public awareness sessions, and entertainment activities, participants learned about the different forms of gender-based violence, their consequences, prevention strategies, and available reporting channels.

HDI staff used the platform to introduce services and reporting mechanisms available to survivors and community members, including the HDI hotline, the HDI USSD chatbot, Isange One Stop Centre, the Rwanda Investigation Bureau, and the Rwanda National Police.

To encourage participation, audience members took part in quizzes and discussions, with winners receiving items such as umbrellas, T-shirts, menstrual pads, and prevention materials. The approach helped transform what could have been a traditional awareness campaign into an engaging community event that encouraged learning and open conversation.

The campaign was further energized by musician Eric Senderi, whose presence attracted large crowds and helped amplify key messages on preventing sexual and gender-based violence.

BRINGING ESSENTIAL SERVICES CLOSER TO COMMUNITIES

Alongside awareness activities, HDI provided confidential sexual and reproductive health services in dedicated tents where participants could access care privately and safely. During the campaign, 198 people received HIV testing services, with seven individuals identified and linked to appropriate follow-up care. Family planning services were provided to 23 women, while 50 emergency contraceptive pills were distributed.



The outreach also reached approximately 800 people with sexual and reproductive health information and distributed more than 10,000 condoms as part of broader efforts to promote safer sexual practices and prevent unintended pregnancies and sexually transmitted infections.

For many participants, the availability of services within their community was just as important as the awareness messages themselves.



“We really thank you for coming here,” said Sandrine, a refugee living in Mahama Refugee Camp. “There are many challenges in our community, including alcohol abuse and behaviors that can lead to sexual and gender-based violence. We really needed these teachings and we hope you come back again.”

Adella, another refugee participant, emphasized the importance of continued access to health services. “Those testing services and family planning services are very important. We need them because of the life we live. Please come often,” she said.

A SHARED RESPONSIBILITY

The campaign also highlighted the role communities must play in preventing and reporting gender-based violence. Closing the event, Kirehe District Director of Health, Théogène Ntirenganya, commended HDI for bringing services and information directly to community members while calling for collective action against GBV.



"Gender-based violence is one of the problems that our country faces, but Kirehe District faces it as well," he said. "GBV is a non-tolerable thing; we should have zero tolerance towards GBV."

He expressed concern about cases involving adolescent girls who experience abuse and early pregnancy, stressing the need for stronger community efforts to protect children and prevent violence before it occurs. His remarks reinforced a key message echoed throughout the day: preventing gender-based violence cannot be left to institutions alone. It requires

active participation from families, community leaders, service providers, refugees, host communities, and young people themselves.

By combining awareness, community engagement, and direct service delivery, the outreach campaign demonstrated how bringing information and healthcare closer to vulnerable populations can strengthen prevention efforts and help create safer, healthier communities for all.



ENGAGING UNIVERSITY STUDENTS ON SRHR, HEALTH INNOVATION, AND YOUTH WELLBEING

In May 2026, we engaged university students and emerging professionals through two learning and dialogue sessions held at Kepler College and the African Leadership University (ALU). The engagements focused on sexual and reproductive health and rights (SRHR), youth wellbeing, health literacy, and the role of young people in shaping innovation within Africa's evolving health

systems. Across both platforms, the conversations reinforced a central message: meaningful youth engagement begins with access to accurate information, practical life skills, and inclusive spaces that connect young people to services, knowledge, and opportunities.



PRACTICAL HEALTH EDUCATION AND LIFE SKILLS AT KEPLER COLLEGE

On 13 May 2026, during Kepler Success Week, we engaged 244 students at Kepler College in interactive sessions on everyday health and wellbeing. The discussions created an open and safe learning environment where students were encouraged to explore health issues often surrounded by stigma, misinformation, or silence. The sessions covered a wide range of practical health topics, including personal hygiene for both

men and women, skincare, and understanding the human body, with a focus on menstrual health. These discussions helped strengthen students' confidence in self-care and encouraged the application of basic health knowledge in their daily routines. Key SRHR topics were also addressed, including contraception, prevention of unintended pregnancies, sexually transmitted infections (STIs), HIV, and cervical cancer.

The sessions provided space for open questions and clarification, enabling students to challenge misconceptions and strengthen their understanding of sexual and reproductive health.

A focused dialogue on consent, sexuality myths, and healthy relationships further deepened awareness around respect, boundaries, and personal safety. Breakout discussions encouraged peer learning, reflection, and open exchange, reinforcing understanding through shared experiences.

Alongside the discussions, HIV screening and counselling services were offered. A total of 51 individuals were screened (32 females and 19 males), with no positive cases identified. The activity also included the distribution of 1,008 condoms, 2 emergency contraceptive pills, and 2 HIV self-test kits, strengthening access to preventive health services alongside education.

YOUTH INNOVATION AND HEALTH FUTURES AT ALU HEALTHX 2026

On 29 May 2026, we participated in HealthX 2026: Explore What's Next!, hosted at the African Leadership University (ALU). The event brought together students, innovators, and health sector partners to explore the future of health employment, innovation, and youth engagement across Africa's health ecosystem.



Through an interactive exhibition booth, we engaged young people on SRHR, access to youth-friendly health services, and pathways for meaningful participation in community health outcomes. The conversations revealed strong interest among students in health innovation, advocacy, and impact-driven careers within the health sector.

Broader event discussions, including keynote presentations and fireside conversations, created space for reflection on health workforce challenges, innovation gaps, and the growing role of young professionals in strengthening responsive and resilient health systems across the continent.



STRENGTHENING YOUTH-CENTRED HEALTH ENGAGEMENT

Across both engagements, the importance of placing young people at the centre of health programming was consistently reinforced. The sessions demonstrated that effective youth engagement goes beyond information-sharing; it requires safe, inclusive spaces, practical and relatable learning, and meaningful exposure to opportunities in health and innovation.

From structured classroom-based learning at Kepler College to innovation-focused dialogue at ALU, the engagements reflected a shared commitment to equipping young people with accurate knowledge, practical skills, and confidence to actively contribute to healthier communities and stronger health systems.



BUILDING PARTNERSHIPS FOR RESILIENT, PEOPLE-CENTRED HEALTH SYSTEMS

In May 2026, we engaged a series of strategic partners through high-level exchanges and field visits aimed at strengthening collaboration, advancing innovation, and deepening joint action in sexual and reproductive health and rights (SRHR), health systems strengthening, and community-centered service delivery.

Across all engagements, a consistent theme emerged: the importance of building strong, cross-sector partnerships that connect research, legal advocacy, philanthropy, and community-based service delivery to achieve sustainable impact.

STRENGTHENING GLOBAL HEALTH AND INNOVATION COLLABORATION

We started the month by hosting a delegation from the Swiss Tropical and Public Health Institute, comprising Dr Cornelia Speich, Dr Alex Schulz, and Ms Jocelyne Ingabire.

Discussions focused on potential collaboration in pandemic preparedness, health systems strengthening, and the integration of artificial intelligence in clinical services.

The delegation also toured HDI facilities, including the clinic, call centre, and mobile clinic, gaining insight into community-based and integrated service delivery models.

The exchange highlighted shared interest in advancing innovative, resilient, and people-centred health systems that respond effectively to emerging global health challenges.



ADVANCING RIGHTS-BASED AND LEGAL COLLABORATION

We also hosted a delegation from the Center for Reproductive Rights (Africa office) to explore deeper collaboration on advancing SRHR across the region.

The discussions focused on strengthening the link between legal advocacy, policy reform, and community-driven health programming. In a shifting funding and policy environment, both organisations emphasized the importance of being proactive, adaptive, and collaborative in protecting and advancing health rights.



The engagement identified opportunities to strengthen systems, amplify community voices, and reinforce rights-based approaches to SRHR across different contexts.

ENGAGING PHILANTHROPY AND COMMUNITY IMPACT

Later in the month, we hosted Crystal Callahan, Co-Trustee of the Callahan-Palmer Charitable Trust, alongside her children Tess and Blake, during their visit to Rwanda. The delegation

visited HDI offices and community programmes across Kigali, including Nyamirambo, Nyabugogo, and Cyaruzinge in Ndera Sector, Gasabo District.

They engaged with staff and community members, gaining insight into programmes supporting adolescent mothers, young women, sex workers, and other vulnerable groups through integrated health services, education, skills development, and empowerment initiatives. Reflecting on the visit, Crystal Callahan noted reiterated the importance of the work HDI is



“What stands out most is the depth of community connection and the way support is translated into dignity, opportunity, and long-term change. It is not only about meeting immediate needs, but about helping people rebuild confidence and possibility for their futures.” The visit underscored the value of philanthropy that is grounded in proximity to communities and focused on long-term, transformative impact.

A SHARED COMMITMENT TO PARTNERSHIP FOR IMPACT

Across all engagements, May 2026 reflected a strong emphasis on collaboration as a foundation for impact. Whether through

global research institutions, rights-based organisations, or philanthropic partners, discussions consistently pointed to the need for shared responsibility in strengthening health systems and advancing health rights.

These partnerships continue to reinforce the importance of integrating evidence, advocacy, innovation, and community engagement to address complex health and social challenges.

As we expand our collaboration footprint, we remain committed to partnerships that are purposeful, trust-based, and focused on delivering sustainable, people-centred health impact.



BRINGING SRHR SERVICES CLOSER: COMMUNITY OUTREACH AND YOUTH ENGAGEMENT ACROSS KIGALI AND BUGESERA

In May 2026, we advanced a series of community advocacy and outreach initiatives aimed at bringing sexual and reproductive health and rights (SRHR) services directly closer to citizens. These engagements reflect a core priority within our work: ensuring that essential health information and services reach communities where they are most needed, particularly adolescents, young people, and other vulnerable groups. Across Bugesera District

and selected sites in Kigali, including Kicukiro, Kimisagara Youth Centre, and Nyabugogo, we conducted integrated outreach activities combining service delivery, awareness creation, and youth engagement. These interventions included HIV testing, family planning services, distribution of sanitary products, non-communicable disease screening, and targeted health education sessions.

EXPANDING ACCESS THROUGH COMMUNITY OUTREACH IN BUGESERA

On 8 May 2026, in partnership with Plan International Rwanda, we conducted a community outreach in Bugesera District, reaching residents of Ngeruka and Kamabuye sectors.

The activity focused on bringing SRHR services closer to communities that often face geographic and financial barriers in accessing healthcare.

Community members received a range of services, including family planning methods, HIV testing, non-communicable disease screening, and SRHR awareness sessions. The outreach also provided information on healthy decision-making, prevention, and available support services.

Residents highlighted the importance of such initiatives, particularly the opportunity to access free services without the burden of transport costs or long travel distances.



One beneficiary, Marie Mukandayisenga, said:

"Being brought services for family planning and HIV testing has helped us a lot, especially those who have challenges reaching health facilities. We are happy to receive these services near us and free of charge."

A community health worker, Justin Nyandwi, added:

"This activity helped people access HIV testing and family planning services without having to travel long distances or spend transport money. It makes access to healthcare easier and increases the number of people using these services."



These testimonies highlight how outreach activities play a critical role in increasing early uptake of services and reducing delays in seeking care. The initiative reinforced the importance of decentralised service delivery as a practical approach to improving equity in access to health services.

YOUTH-CENTRED ENGAGEMENT AT KICUKIRO HDI CENTRE AND KIMISAGARA YOUTH CENTRE

We also conducted targeted youth-focused sessions at the Kicukiro HDI Centre on 18 May 2026 and at Kimisagara Youth

Centre on 19 May 2026. These sessions focused on sexual and gender-based violence (SGBV), patient rights, mental wellbeing, and access to youth-friendly health services.

The discussions created safe and open spaces for young people to engage on issues affecting their health and wellbeing. Participants explored prevention strategies, risk awareness, and available support systems, while also learning about reporting mechanisms and referral pathways.

The sessions placed strong emphasis on empowerment, equipping young people with practical knowledge to make informed decisions, seek help when needed, and support their peers in navigating health and social challenges. These engagements reaffirmed the importance of youth-centred approaches that combine information sharing with access to services and supportive referral systems.

MOBILE CLINIC OUTREACH AND REACHING UNDERSERVED COMMUNITIES

On 20 May 2026, we conducted a mobile clinic outreach in Nyabugogo, extending integrated SRHR services to one of Kigali's high-traffic urban communities. The outreach was supported by the HDI mobile clinic, which plays a key role in expanding service delivery beyond fixed facilities. Services provided included HIV testing, family planning, and SRHR awareness, alongside distribution of essential commodities such as condoms and sanitary pads. The mobile clinic model continues to demonstrate its value in reaching populations that may not easily access health facilities due to time constraints, mobility challenges, or stigma.



The outreach also provided an opportunity for visiting partners, including members of the Callahan-Palmer Charitable Trust, to observe community-based service delivery in action. Their engagement offered additional perspective on the importance of bringing services directly to people where they are.

STRENGTHENING COMMUNITY-BASED HEALTH AND RIGHTS ACCESS

Across all outreach sites, a consistent message emerged: proximity matters. Whether in rural Bugesera, urban Kicukiro, or high-density areas like Nyabugogo, bringing services closer to communities significantly improves access, uptake, and trust in health services.



These activities also reflect a deliberate emphasis on integrated service delivery, combining SRHR services, prevention, education, and commodity distribution in a single community-focused approach. As we continue to strengthen our outreach

work, we remain committed to expanding access to essential health services, empowering young people with accurate information, and ensuring that no one is left behind in accessing quality, rights-based healthcare.



ANSER 2026: SHAPING GLOBAL SRHR RESEARCH AND CLIMATE JUSTICE CONVERSATIONS IN BRUSSELS

In May 2026, we participated in the Annual Network for Sexual and Reproductive Health and Rights Conference 2026, held in Brussels, Belgium. The convening brought together researchers, policymakers, civil society actors, healthcare providers, and development partners working to advance sexual and reproductive health and rights (SRHR) globally through evidence, collaboration, and policy engagement.

The conference focused on key emerging issues shaping the future of SRHR, including climate change, humanitarian crises, health system strengthening, workforce innovation, misinformation, equity, and rights-based care. It provided a critical platform for exchanging evidence and strengthening global dialogue on inclusive and resilient health systems.

We were represented by Dr Aflodis Kagaba, Executive Director, and Ms. Odile Habimana, Research Associate, reflecting a strong institutional commitment to grounding programming in research, evidence generation, and global learning.

ADVANCING CLIMATE CHANGE AND SRHR EVIDENCE

Dr Kagaba moderated a high-level panel discussion on climate change and SRHR, which explored how climate-related shocks are increasingly affecting sexual and reproductive health outcomes, particularly among women, young people, and other vulnerable populations.

The panel brought together experts from the Population Institute, the International Confederation of Midwives, the London School of Hygiene & Tropical Medicine, and members of the Brussels Parliament and Belgian Senate.

Discussions highlighted how climate change is not only an environmental issue, but also a growing driver of inequality in access to essential health services.



Reflecting on the session, Dr Kagaba noted:

“A key takeaway from the session was clear: climate change is not only an environmental crisis, but also a health, rights & gender equality crisis. Climate responses must stop treating SRHR as optional, and recognize it as essential to resilience, dignity, and justice.”

A key consensus from the discussion was the urgent need for more equitable, resilient, and rights-based SRHR systems capable of responding to climate-related disruptions.

STRENGTHENING EVIDENCE FROM HUMANITARIAN CONTEXTS

Ms. Odile Habimana presented research on adolescent access to SRHR services in humanitarian settings, drawing evidence from refugee camps. The presentation highlighted persistent barriers such as stigma, limited youth-friendly services, and social constraints that continue to affect adolescents' ability to access care, even where services are available. The findings reinforced the importance of peer-led approaches and adolescent-responsive service delivery models in improving access in crisis-affected settings. The discussion contributed to broader conference debates on strengthening inclusive and evidence-based SRHR programming in fragile contexts.

GLOBAL DIALOGUE ON THE FUTURE OF SRHR

Across the three-day convening, the Annual Network for Sexual and Reproductive Health and Rights Conference 2026 served as a key platform for global reflection on the future of SRHR. Participants exchanged evidence, shared innovations, and explored strategies to strengthen health systems in an increasingly complex global environment.



Our participation reaffirmed the importance of engaging in global research platforms to contribute Rwanda's experiences, learn from global evidence, and strengthen evidence-based programming.

The engagement in Brussels underscored a clear message: as global challenges such as climate change and humanitarian crises intensify, SRHR must remain central to health and development agendas, anchored in evidence and designed to ensure that no one is left behind.



STRENGTHENING RESPONSIBLE REPORTING ON DRUG USE, ADDICTION AND HARM REDUCTION

In May 2026, we brought together 15 journalists and social media influencers for a two-day training under the Tubiteho Project aimed at strengthening evidence-based reporting on drug use, addiction, harm reduction, and public health. The training provided media practitioners and digital content creators with practical knowledge and tools to better understand the realities faced by people who use drugs, the health risks associated

with drug use, and the role of the media in shaping public perceptions. Participants explored issues including stigma and discrimination, HIV, tuberculosis, viral hepatitis, mental health challenges, overdose prevention, human rights, and Rwanda's growing harm reduction services, including Opioid Agonist Therapy (OAT).

The engagement reflected a growing recognition that media narratives can either reinforce harmful stereotypes or contribute to prevention efforts, public awareness, and improved access to support services.

UNDERSTANDING ADDICTION AS A HEALTH CONDITION

A key message throughout the training was that addiction should be understood as a health condition rather than a moral failing or criminal issue.

Speaking during the workshop, Antoine Hagenimana, Senior Officer in charge of Management of Alcohol and Drug Use Disorders at Rwanda Biomedical Centre (RBC), emphasized the need for a health-centred response.

“Drug addiction is a chronic condition, much like hypertension or diabetes.

Once dependence develops, many people cannot overcome it on their own. They require continuous medical, psychological and social support to recover.” Experts noted that stigma and fear of judgment often prevent people from seeking treatment and support until serious health and social consequences emerge.



Participants learned how stigma contributes to delayed care, social exclusion, and increased vulnerability to HIV, tuberculosis, viral hepatitis, mental health complications, and overdose.

Dynamo Ndacyayisenga, Director General of Kigali Mental Health Referral Centre, highlighted the importance of supportive communities in recovery.

“If we support people without stigmatising them, they become more willing to seek help and remain committed to treatment. Recovery requires both professional intervention and a supportive environment.”



He added: “It is time to stop pushing them further to the margins of society. We should see them as people who deserve professional assistance, not simply as offenders or individuals lacking moral values.”

THE ROLE OF MEDIA IN REDUCING STIGMA

The training placed particular emphasis on the responsibility of journalists and influencers to communicate public health issues accurately and ethically.



Participants examined how sensational reporting can reinforce stigma and discourage people from seeking help, while evidence-based and human rights-centred reporting can contribute to prevention, awareness, and recovery.

Elvis Benimana, Tubiteho Project Lead at HDI, explained that harm reduction complements prevention and rehabilitation efforts by ensuring that people remain connected to health services and support systems.

"Harm reduction is about reducing the risks and negative consequences associated with drug use. It goes beyond prevention by ensuring that people who are already using drugs remain connected to health services and opportunities for recovery."

The training also challenged participants to rethink common assumptions about addiction and recovery.

Reflecting on the sessions, Jean Paul Kayitare of Imvaho Nshya said emphasised the importance of the media understanding the subject.

"I was impressed by the training. Most times the media becomes part of the problem but now we understand the role we have to play, educating the society."

Similarly, Franco Kabano, founder and Chief Executive Officer of Franco Models, emphasized the importance of increasing public awareness about available support services.

"Many people suffer in silence because they fear judgment. Knowing that there are organisations and professionals ready to help can encourage more people to seek assistance before the situation worsens."



Journalist Emelyne Mbabazi of Radio/TV10 also said the workshop transformed her understanding of addiction and recovery.

"I learned that harm reduction can give people an opportunity to begin their recovery journey without fear or pressure. Recovery happens step by step, and with the right support people can return to school, regain employment, support their families and rebuild their lives."



BUILDING A MORE INFORMED PUBLIC CONVERSATION

As the training concluded, participants committed to applying the lessons learned in their reporting and digital content creation. By strengthening the capacity of journalists and influencers, the initiative contributes to a more informed public conversation

on drug use, recovery, and harm reduction. Through the Tubiteho Project, we remain committed to advancing evidence-based approaches that reduce stigma, improve access to services, and support healthier communities. The engagement also reaffirmed the critical role of media and digital platforms in ensuring that public health issues are reported accurately, responsibly, and with dignity for those affected.



HDI LEARNS FROM ABPF'S INCLUSIVE SRHR MODEL IN BENIN

From 25 to 29 May 2026, Health Development Initiative (HDI) conducted a five-day South-to-South learning visit to the Association Béninoise pour la Promotion de la Famille (ABPF) in Cotonou, Benin, as part of efforts to strengthen inclusive, rights-based sexual and reproductive health and rights (SRHR) programming for key populations and community-based organisations (CBOs) in Rwanda.

The delegation comprised Ariane Dusenge, Deputy Executive Director of HDI, Gustave Muhire, SOGIESC Program Officer, and Ernestine Mukeshimana, Laboratory Technician at HDI. They were joined by Madine Mukandayisenga, Executive Director of Rights for All (RIFA), a trans-led community-based organisation working to advance the rights, wellbeing, and inclusion of LGBTQ+ communities in Rwanda, particularly lesbians, trans

The learning exchange aimed to draw practical lessons from ABPF's long-standing experience in delivering stigma-free, community-centered healthcare services for key populations, including sex workers, young people, and other underserved groups.

LEARNING FROM A MATURE INCLUSIVE HEALTH SYSTEM

With more than 40 years of experience, ABPF has developed a comprehensive model that integrates clinical SRHR services, community outreach, and peer-led engagement into a unified system of care. The organisation presented how non-discrimination, confidentiality, and respect are institutionalised across all service delivery points.

At Clinique de Vedoko, the delegation observed an integrated service delivery model offering a full package of services, including sexual and reproductive health services, gynecology, ultrasound, HIV testing and treatment, family planning, antenatal care, laboratory services, pharmacy, and safe abortion care.



A key learning was the facility's well-structured patient flow system, which ensures privacy at every stage of service delivery. The separation of service points reduces unnecessary client interaction, strengthens confidentiality, and improves trust—particularly for clients from key populations who are often affected by stigma in conventional health settings.

COMMUNITY-LED PROGRAMMING AND PEER EDUCATOR SYSTEMS

The delegation also engaged with ABPF's strong community engagement model, which is anchored in trained peer educators drawn from the communities they serve. These peer educators play a central role in health education, referrals, follow-up, and community mobilisation.



Visits to Benin Synergy Plus (BESYP), a key populations-led coalition working in partnership with ABPF, and Solidarité, a community-based organisation supporting female sex workers, highlighted the importance of structured partnerships between health providers and CBOs in expanding access and improving service uptake.

ABPF's structured progression model, from youth engagement initiatives to peer educator, was particularly noted as a sustainable pathway for building community leadership and ownership in health programming.

INTEGRATED OUTREACH AND SUSTAINABILITY APPROACHES

Beyond facility-based care, ABPF demonstrated a strong decentralized service delivery system through multiple health centres and mobile outreach initiatives, including innovative models such as a boat clinic. These approaches ensure services reach both urban and hard-to-reach populations. The delegation also examined ABPF's cost-recovery model, which balances affordability for vulnerable groups with institutional sustainability. This provided an important learning point for HDI as it continues to explore sustainable financing models while maintaining free or low-cost services for key populations.

KEY REFLECTIONS FOR HDI

Across all engagements, confidentiality, dignity, and non-discrimination emerged as the strongest pillars of ABPF's service delivery model. The delegation observed that inclusion is not achieved through policy alone, but through consistent systems, staff practice, and accountability mechanisms embedded across the organisation.

Despite minor challenges, including scheduling constraints, public holidays, and language barriers, the learning objectives of the visit were successfully achieved.

DELEGATION REFLECTION

Reflecting on the visit, Ariane Dusenge, Deputy Executive Director of HDI, noted:

“What we have observed in Benin is a fully institutionalised system of inclusion. It is not dependent on individual goodwill, but on structures, standards, and consistent practice.



This reinforces our understanding that quality, dignity, and confidentiality must be deliberately designed into every level of service delivery.”

TAKING COLLABORATION FORWARD

The lessons from ABPF will directly inform HDI's development of a Minimum Service Package for inclusive SRHR services and contribute to strengthening its broader institutional goal of becoming a regional centre of excellence on inclusive, rights-based healthcare for key populations and CBO-led responses.

IN OTHER NEWS

This May **we hosted the following radio shows:**



2 MAY 2026

VASECTOMY AS A FAMILY PLANNING METHOD: SCIENTIFIC FACTS, PUBLIC PERCEPTIONS, AND FAMILY IMPLICATIONS

9 MAY 2026

HOW DOES KNOWLEDGE ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS INFLUENCE INFORMED DECISION MAKING?

16 MAY 2026:

THE IMPACT OF NON-COMMUNICABLE DISEASES ON MENTAL HEALTH

23 MAY 2026:

UNDERSTANDING GENITAL TUBERCULOSIS



3 MAY 2026

HOW TO MAINTAIN PERSONAL HYGIENE DURING PUBERTY AND ADOLESCENCE

10 MAY 2026

UNDERSTANDING PREGNANCY: SIGNS, PREVENTION AND SUPPORT

17 MAY 2026

WHAT ARE THE DIFFERENT METHODS OF PREVENTING HIV?

24 MAY 2026

TIPS ON MENSTRUAL HYGIENE

STAKEHOLDERS SPEAK:

My Right Initiative organization @MRIOrganization · May 22
MRIO is participating in 3 days capacity building training of CBOs and NGOs organizations organizing by @HDIRwanda on leadership, conflict resolution, and financial management.



DUSENGIMANA Leo Jean baptiste @DusengimanaLeo · May 24
Today we join the team as @RMSAoffici7cc @Rwandamidwives at KCC @CityofKigali in promoting maternal health and well being for positive pregnancy experiences. Sport increases the chance of #SVD. Thank you @HDIRwanda @cyso.org @Iacroidusudh @ncdalliance @RBCRWanda



CHILDREN AND YOUTH SPORTS ACADEMY @cyso.org · May 25
Today, 24 May 2026, the Children and Youth Sports Academy (CYSA), together with partners, successfully organized the 3rd edition of Mass Sports for Pregnant Women during Car Free Day, promoting maternal health and wellness. @Rwanda_Sports @CityofKigali @RwandaMoD @HDIRwanda



iAccelerator @iacceleratorRw · May 25
A big thank you to all the innovators participating in #iAccelerator/ for the inspiring ideas and impactful pitches.

A special appreciation as well to our judges for facilitating today's session. We now await the deliberation results as they review the 30 projects presented to
[Show more](#)



Strive Foundation Rwanda @Sfrwanda1 · May 22
Today, SFR, concluded a 2days national training for journalists on Substance Use Disorders and Harm Reduction, aimed at strengthening stigma-free reporting, public awareness, and evidence-based mental health advocacy in Rwanda. @RBCRWanda @expertisefrance



You and 9 others

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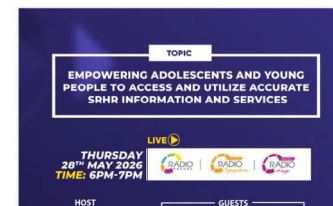
BWIZA Initiative @Rwiza_initiatiw · May 28
This Menstrual Hygiene Day, we stand for dignity, health, and equal opportunities for every girl and woman. let's promote menstrual health education access to sanitary products, Menstruation is natural stigma, shame, and lack of access should never hold anyone back.



NMSA-Rwanda @NMSAR_Rwanda · May 29
#NMSAR extends sincere appreciation to @HDIRwanda for the impactful #SRHR session. Your transformative #HealthEducation continues to generate meaningful impact across #Rwanda while immensely empowering the youth with life changing knowledge. #YouthEmpowerment

HDI Rwanda @HDIRwanda · May 28

COMING UP!
Tune in to @RadioRwanda_RBA shortly from 18h00 for a live radio discussion on empowering adolescents and young people to access accurate #SRHR information and services. Join our panelists from @RBCRWanda and HDI as they discuss youth-friendly services, ...



UMWALI INITIATIVE @umwaliinitiative · May 26
On Menstrual Hygiene Day 2026, we stand for dignity, education, and menstrual health for every girl and young woman.

Together, we can end stigma, promote confidence& create a period-friendly future where no girl is left behind.

#PeriodFriendlyWorld #EveryGirlDeserveVoice



HDI WISHES TO THANK OUR PARTNERS AND SUPPORTERS

- Abbott
- Action Pour le Droits Solidaires (ADS)
- AIDS Healthcare Foundation (AHF)
- African Coalition for Research and Communication on Abortion (ACORCA)
- African Population and Health Research Center (APHRC)
- AmplifyChange
- Angel Family Fund
- Association Burundaise pour le Bien-Être Familial (ABUBEF)
- Catholics for Choice
- Danish Family Planning Association
- Delegation of the European Union to Rwanda
- Equipundo
- Expertise France
- FEMNET
- GIZ
- Guttmacher Institute
- Imbuto Foundation
- International Organization for Migration (IOM)
- IPPF
- Isango Star
- Jhpiego/MCGL
- KISS FM
- MAMA Network
- Medical Doctors for Choice
- Medical Students' Association of Rwanda (MEDSAR)
- Médecins du Monde
- Ministry of Emergency Management
- Ministry of Gender and Family Promotion
- Ministry of Health
- Ministry of Justice
- Ministry of Local Government
- Ministry of Youth and Arts
- Norwegian People's Aid
- Parliament of Rwanda
- Plan International Rwanda
- PSA
- Reproductive Health Network Kenya (RHNK)
- Robert Angel and Family Foundation
- Rwanda Biomedical Center (RBC)
- Rwanda Broadcasting Agency (RBA)
- Rwanda Civil Society Platform
- Rwanda Governance Board (RGB)
- Rwanda Society of Obstetricians and Gynecologists (RSOG)
- The Center for Reproductive Rights
- The David and Lucile Packard Foundation
- The Embassy of Sweden
- The Global Fund
- The New Times
- UHAI-EASHRI
- UNFPA
- UNICEF
- WHO
- Women's Link Worldwide

