

Quarterly Report for the Turengere Abana Program (Let us protect the children Project), FXB Rwanda Project funded by USAID



October 1, 2012 to December 30, 2012

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Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CBO	Community-Based Organization
CD4	Cluster of Differentiation 4
COP 2012	Country Operational Planning 2012
FY 2012	Fiscal Year 2012
FXB	François-Xavier Bagnoud
HIV	Human Immune Virus
IGA	Income Generating Activities
OVC	Orphans and Vulnerable Children
PLWA	People Living With AIDS
OVC	Orphans and Vulnerable Children
PEPFAR / NGI	President's Emergency Plan for AIDS Relief New Generation Indicators
SLA	Savings and Lending Associations/Groups
USAID	United States Agency for International Development

1. Executive summary

Through USAID/ PEPFAR, “**Turengere Abana Program “ let us protect the children Program; FXB Rwanda** received a grant to support vulnerable households permanently escape poverty by providing a comprehensive package of support, helping households and community / sector groups develop livelihood projects and lasting sources of income as well as building sustainable community/ sector social networks and referral mechanisms.

During the FY 2012, Turengere Abana Project is implemented in seven Districts countrywide: (1) Huye, (2) Nyanza, (3) Nyamagabe, (4) Muhanga Districts of the Southern Province, (5) Nyarugenge, (6) Kicukiro of Kigali City and (7) Rubavu District in the Western Province.

2. Project goal and specific objectives

The primary goal of this project will be to support OVC and caregivers from 1,120 households to escape poverty, educate and empower 85,000 individuals, generate access to and demand for local resources in 8 districts, and build or strengthen 250 sustainable community social support networks.

The specific objectives for Turengere Abana Project are the followings:

1. Support 1,120 households to launch and grow livelihood projects and earn sufficient income to meet their basic needs;
2. Foster 120 group livelihood and SLAs among caregivers of OVC and transition 12 new and existing SLAs as official cooperatives;
3. Provide care, training, and referrals so that 7,000 vulnerable children and adults have improved food security and health, including access to health insurance, HIV prevention and treatment, counseling and psychosocial support, and other resources;
4. Provide HIV prevention training and testing access to 70,000 individuals, including 360 youth peer educators and 120 youth HIV prevention groups;
5. Ensure that at least 3,700 vulnerable children attend and perform well in primary school, secondary school, and/or vocational training centers and train 600 caregivers to nurture their young children’s cognitive, emotional, and social development
6. Help 7,000 children and caregivers live in safe, hygienic homes, with access to appropriate water and sanitation;
7. Educate 70,000 individuals about child protection and reduce incidence of child abuse, child labor, domestic violence, and discrimination in 14 communities; and
8. Build the organizational and technical capacity of approximately 30 CBOs, advocate for improved social services in 14 project communities, and work

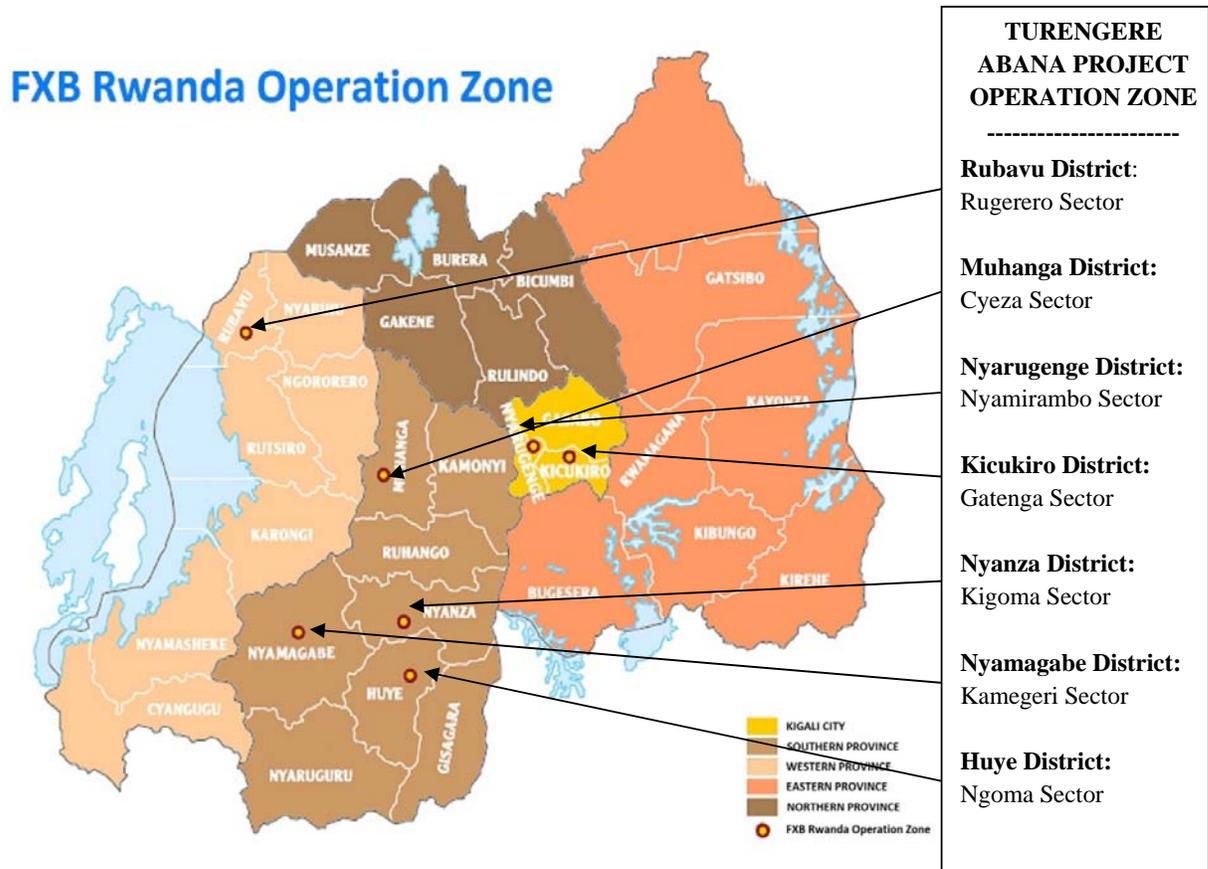
with local staff of the Ministry of Local Government to replicate project strategies in 8 districts

3. Beneficiaries

In seven Districts, the USAID funded project “TurengereAbana Project” reached in total **4627 beneficiaries: 1879 adults and 2748 children; all living in 680 families countrywide.** Among these 680 households: **363 are completed families** (two parents), **304 are headed by one parent**(widows, separated, single, etc.) and **13 are headed by orphans.**

4. Project Area

During the first year , FXB Rwanda TurengereAbana Project is being implemented in (1) Ngoma Sector in Huye District , (2) Kigoma Sector in Nyanza District, (3) Kamegeri Sector in NyamagabeDistrcit , (4) Cyeza Sector in Muhanga District, (5)Nyamirambo Sector of Nyarugenge District,(6) Gatenga Sector of Kicukiro District, (7) Rugerero Sector in Rubavu District.



5. Project implementation and main achievements during the period of October – December 2012

5.1 Introduction

This first quarter was dedicated to the implementation of the program's foundations. During that period, USAID conducted the pre award survey and FXB Rwanda is fixing the pre award survey findings and producing related progress report to USAID. Thanks to that, FXB Rwanda is always in process of reinforcing existing administrative, financial and managerial procedures to better comply with USAID requirements. In parallel, FXB prepared and submitted on time the work plan and Performance Monitoring Plan which wait for USAID approval. In the same period, FXB recruited the well qualified staff and conducted the first orientation training on new policies, code of conduct and the project itself: goals, objectives, targets, tools for data collection and evaluation.

In December 2012, FXB invited the key project stakeholders including USAID and officially launched TurengereAbana Project, in Nyanza and Huye in the Southern Province and in Nyarugenge, Kigali City respectively on December 17, 18 and 27.

In line with TurengereAbana Project, the following activities were simultaneously implemented during the first quarter as they jointly address the root causes of human insecurity among destitute families and the OVC in their care.

5.2 Education Support

Following the identification of beneficiary household, FXB proceeded in establishing a list of all school-aged OVC in all enrolled households. This listing provided insights on schools attended, levels of education and former grades. On the basis of this information, FXB staff contacted school administrations to ensure the timely reintegration of children in appropriate grades. During the first quarter, **1736 primary school children, 561 secondary school students and 56 youth in vocational / training centers were enrolled and received schools materials, uniforms and tuition fees for those attending secondary schools and vocational centers.**

5.3 Medical support

During the beneficiaries' identification process, we realized that 100% of new beneficiaries were unable to pay medical insurance fees. Soon after the identification in December, FXB enrolled all participants in the national health insurance. As a result, **4627 individuals (2748 children and 1879 adults, all living in 680 families)** were provided with medical insurance cards and have access to basic health care

services. This medical insurance enabled all patients to access public health centers and hospitals to treat all existing ailments

In parallel, FXB also provided weekly health education sessions that concentrated on disease prevention, early diagnosis and adherence to treatment. During weekly beneficiaries' general meetings regrouping all beneficiaries, nurse counselors provide information on prevalent diseases especially on how they are transmitted and emphasized the need to respect hygienic principles including the use of potable water to preserve good health.

In parallel, to support this process, **360 new registered families (80 in Nyarugenge, 80 in Kicukiro, 100 in Nyanza and 100 in Huye District) were provided with mosquito nets, containers to preserve water, blankets as well as basins to facilitate washing their bodies and clothes.**

5.4 Food Security and Nutrition Support

FXB provided all enrolled OVC and their 360 families (**80 in Nyarugenge, 80 in Kicukiro, 100 in Nyanza and 100 in Huye District**) received food assistance as part of cost share to help beneficiaries meet their nutritional needs. Composed of flour, beans, dried fish, and vegetable oil, food support is provided monthly in proportion to the number of people in the household. Prior to each distribution, information sessions on nutrition were organized to help beneficiaries prepare balanced meals, using local foodstuffs. These sessions also encouraged heads of households to create small kitchen gardens, thereby ensuring sustainable access to vegetables. **In total 349 families (51%)** have kitchen gardens and have enough vegetables to improve their daily food diet.

In parallel, malnourished children and HIV positive people with low CD 4 received additional food support, usually fortified food, dairy products, and fruit to assure good health. **In total 152 people received food supplement including 100 malnourished children.** In the same regard, FXB collaborates and refers some serious cases to nearest Health / Nutrition centers for further services provision.

To ensure that nutritional principles are well integrated and respected at household level and assess each member's nutritional status, and provide household-specific advice and guidance, weekly home-visits were carried out. These home-visits particularly enable nurse counselors to monitor the nutritional well-being of HIV infected children as well as that of those suffering from Kwashiorkor. **During this reporting period, 1460 home visits (at least two times per family) were carried out by FXB Rwanda field based staff.**

5.5 Child rights

To ensure that the basic human rights of all children, no matter their circumstances, are honored, FXB works closely with beneficiaries to educate them on children's rights and protection. FXB staff held monthly awareness-building sessions for all caregivers to discuss child abuse, exploitation, and domestic violence as well as parental rights and obligations. As a result, **536 caregivers** were trained in caring for OVC. Moreover, in parallel, FXB encouraged child participation to help children understand their rights and responsibilities, thereby empowering them to make decisions and implement them. Through age-specific awareness sessions, FXB helped children share their experiences, their ideas and provide insight on their needs. Using debates and role play, this consultative process enabled children and youth to partake in addressing issues affecting their lives.

5.6 Psychosocial Support

Nurse counselors organized weekly collective psychosocial support sessions, for groups of ten caregivers at a time, during which various “case studies” were considered. Examples of psychosocial problems such as grief and trauma, social problems such as discrimination and family problems such as domestic conflicts were examined to help beneficiaries understand their situation was neither unique nor irreversible. In parallel, confidential individual counseling sessions were carried out daily at the community drop-in center or weekly during home-visits. **During the first quarter, 107 collective sessions and 296 individual sessions were carried out.**

5.6 Income Generating Activity (IGA) and Livelihood Training for Caregivers of OVC

5.6.1 Individual Income Generating Activities

During the reporting period, an intensive training session was organized to **help 360 new registered caregivers** modify their economic behaviors and transit from subsistence activities to sustainable ones. Promoting diversification, constant optimization and the creation of a financial safety net through savings, these sessions used IGA case studies to enable beneficiaries better understand what constitutes a viable IGA. Thanks to this, beneficiaries started having an idea on how to design their own individual IGA projects: an analysis of the economic environment coupled with an analysis of individual capacities – including criteria such as physical strength, professional experience and competencies.

5.6.2 Beneficiary groups

In addition to training beneficiaries on individual IGA, FXB staff encouraged households living in the same neighborhood to organize themselves into groups of eight to ten households.

It is through these meetings that FXB teams encouraged beneficiaries to help each other. This social solidarity was particularly developed through psychosocial discussions where beneficiaries could openly speak about their problems, counsel each other, fight stigmatization and promote their rights collectively. Beneficiaries groups are becoming a valuable and lasting source of social and emotional support for members. Moreover, these meetings enabled beneficiaries to be initiated to the management of internal credit systems.

5.7 HIV Prevention

During the first quarter, FXB organized information sessions targeting program beneficiaries and community leaders to raise awareness about HIV and its prevention. Indeed, 4 sessions – each lasting a day – were organized for **757 caregivers**.

The 196 beneficiaries who are already HIV-positive were referred to nearest health centers and regularly receive anti-retroviral drugs and prophylaxis. FXB nurses regularly visit them at their homes and ensure that their CD4 counts are checked and that they receive appropriate treatment. **By December 2012, 181 people were under antiretroviral treatment and 156 people were under prophylactic treatment.**

Nurse counselors ensured that PLWHA under treatment are adhering to treatment regimens, especially through the provision of targeted counseling and weekly home visits. In families with HIV positive adults and/or children, the nurse also pays special attention to hygiene practices, water access, and nutrition – asking family members during each visit about adherence, daily diet, and hygienic behaviors.

6. Summary Table for PEPFAR/NGI and Program level indicators

Indicator Description	Type of Indicator	Targets COP 12	Target for the reporting period	Achieved in the reporting Period	Life of the Project Targets	Achieved to date
Number of adults and children provided with a minimum of one care service. **	PEPFAR/NGI	30000	6000	4627	85000	4627
Number of OVC served by OVC programs. **	PEPFAR/NGI	3000	3000	2748	7000	2748

Number of providers/ caretakers trained in caring for OVC. *	PEPFAR/NGI	680	680	680	1120	680
Number of community volunteers who complete pre-service training. *	Program - level	250	0	0	480	0
Number of households reached with a minimum of one care service.	Program - level	680	680	680	1120	680
Number of eligible children and adults provided with Mutuelle coverage. *	Program	4200	4200	4627	7000	4627
Number of the targeted population reached with individual and/or small group level HIV preventive interventions that are based on evidence and/or meet the minimum standards required. **	PEPFAR/NGI	30000	6000	757	85000	757**
Number of the targeted population reached with individual and/or small group level HIV prevention interventions that are primarily focused on abstinence and/or being faithful, and are based on evidence and/or meet the minimum standards required. *	PEPFAR/NGI	30000	6000	757	70000	757**
Number of households reached with a minimum of two care and support services. *	Program-level	680	680	680	1120	680
Number of Districts with an updated service directory for program support. *	Program-level	7	7	7	8	7
Number of caregivers accessing early learning programs. *	Program-level	400	200	310	600	310
Number of groups trained/ supported in savings group methodology. *	Program-level	60	60	68	120	68
Number of children provided with education and/or vocational training. *	PEPFAR-NGI	3700	2000	2353	3700	2353

* Cumulative target.

** We plan to reach more people in next quarters. The first quarter was mainly dedicated to staff recruitment and orientation, beneficiaries' identification, conducting the baseline survey and education support for children who start new school year in January.

7. Monitoring and Evaluation

Soon after the signature of the agreement, FXB prepared and submitted to USAID the Performance Monitoring Plan document and waits for its approval.

Simultaneously, during the same period, FXB staff conducted the baseline survey for the newly identified beneficiaries. In line with other humanitarian organizations, FXBR implements a Household Questionnaire whereby the beneficiaries themselves are asked for their assessment of their own wellbeing.

The questionnaire takes the form of an interview with primary caregivers and is implemented by trained data collectors. Questions are carefully worded to encourage the respondents to give open and truthful answers and cover every component of the FXBR Project, including: General Health; Nutrition; HIV/AIDS; Water, Sanitation and Environment; Education; Children’s rights and legal protection; Psychosocial support; Income generation and savings; Participant groups. For the baseline and final assessments, the questionnaire is implemented in all beneficiary households to obtain a thorough and comprehensive snapshot of beneficiary status at the beginning and end of the project. We completed the data collection and started the data entering process and the report on the baseline survey will be produced and included in the second quarter report.

In addition to that, FXB developed the appropriate tools to monitor progress at field level. FXB will always utilize this data to support a comprehensive learning agenda, and to facilitate strategic decision making.

8. Collaboration with Government and Local Partners

During the same reporting period, in each District, FXB updated the partners’ directory. During the project implementation FXB Rwanda closely works with the Government of Rwanda via the District AIDS Control Committee, national health centers and hospitals. FXB also collaborates with NGO and other partners. FXB plans to strengthen their capacity in doing effective referral so that the target beneficiaries receive appropriately and on time the services needed provided by above mentioned service providers. The following table gives more information on key partners:

Partner	District	Partnership
Hospitals, Health Centers	FXB operation zone	Referrals for voluntarily Test for HIV; HIV prevention campaigns, Medical insurance, sanitation, hygiene, and nutrition curricula

Primary, secondary and vocational schools administration	FXB operation zone	Education and training for children in the program
Maison d'Assistance en Justice (MAJ)	FXB operation zone	Referral for legal aid support, Human and child rights training and curricula
Umurenge SACCO (Sector Savings & Credit Cooperatives)	FXB operation zone	Economic strengthening, savings, loans, trainings for beneficiaries
Joint Action Forum	FXB operation zone	Regular meetings at district, sector, and cell level, regular monitoring and evaluation
AFRICARE	Nyamagabe	Referral for VCT
Community Health Workers	FXB operation zone	Community mobilization; trainings; referrals
World Relief	Nyamagabe	HIV Prevention activities
Forum des ONG de lutte contre le Sida	FXB operation zone	Coordination of activities related to HIV / AIDS by different partners

9. Budget (estimated budget and actual expenditure)

The estimated budget for the first year of the project (October 2012- September 2013) was estimated to \$ **916,142** including the cost share. Actual expenditures on the project during the reporting period were \$ **191'748**. The table below gives more details:

Budget Oct 12 - Sept 13		Expenses Oct - Dec 12		End of reporting Period Balance	
USAID	FXB Rwanda	USAID	FXB Rwanda	USAID	FXB Rwanda

500,000	416,142	58,258	130,490	441,742	285,652
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10. Joseph's Story: "FXB Helped Me Regain My Dignity"

Caption: Mr. Joseph is FXB Rwanda beneficiary, 62 years old man, living in Nyanza District.



In Rwanda society, the experience shows that some families are facing problems related to infidelity. One of the beneficiaries, Mr. Joseph, tells us his true story.

My name is Joseph; I am 62 years old, married to Rose and have together with her five children. Back to my young life, I don't know neither my origin nor my family background as, I got to Nyanza, when I was almost 8 years, stayed there and worked as cow keeper. Since I was born, I lived in misery throughout years. Later on, I got married, hoping to improve my miserable life to good life. During that new life, I couldn't get enough money to satisfy our family's needs. Consequently, my wife disrespected me and since then was adopted so bad behaviors and attitudes but the worse was to be involved in prostitution. Seeing that, I was obliged to take my own bed" body separation" for more than 10 years. As a quick result, my two daughters adopted the same behaviors as their mother and had unintended pregnancies and became grand father of two additional children. In that situation, I hardly worked alone to satisfy the needs of my big family but always in vain.

The salvation of our family problems came along with "FXB Rwanda, TurengeAbana Project" funded by USAID. In fact, my family was blessed to be part of the project beneficiaries. Soon as after the beneficiaries' identification, one of the first sessions was about HIV prevention. Together with my wife, thanks to the good counseling from very well experienced staff, we took good decision of voluntarily doing the HIV test. The first results surprised me too much and decided to go to the second voluntarily test and always had the same results: we were safe from HIV. I did not yet understand how my wife who was involved in prostitution for many years was safe!

The posttest counseling convinced us to change direction from separation to reunification, ask for forgiveness and forgive to one another, tolerate the past, work hard and recover the mislaid time!

"FXB staff visit my family at least three times a month; thanks to their good ideas, we live now together with my wife, my children slowly change their attitude, respect me as their father" said Mr. Joseph. "We thank FXB who made our family to be reunited; we are committed to change our life from the sadness to joyful life, from the poor to satisfaction of our needs within the project life towards the future!" concluded Mr. Joseph.

For over 20 years, FXB has been supporting people living in extreme poverty like Joseph. In Rwanda, within next three years, TurengeAbana project will support more

than 30,000 people reclaim their lives by providing access to health care, education, nutrition, and micro-enterprise training.

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