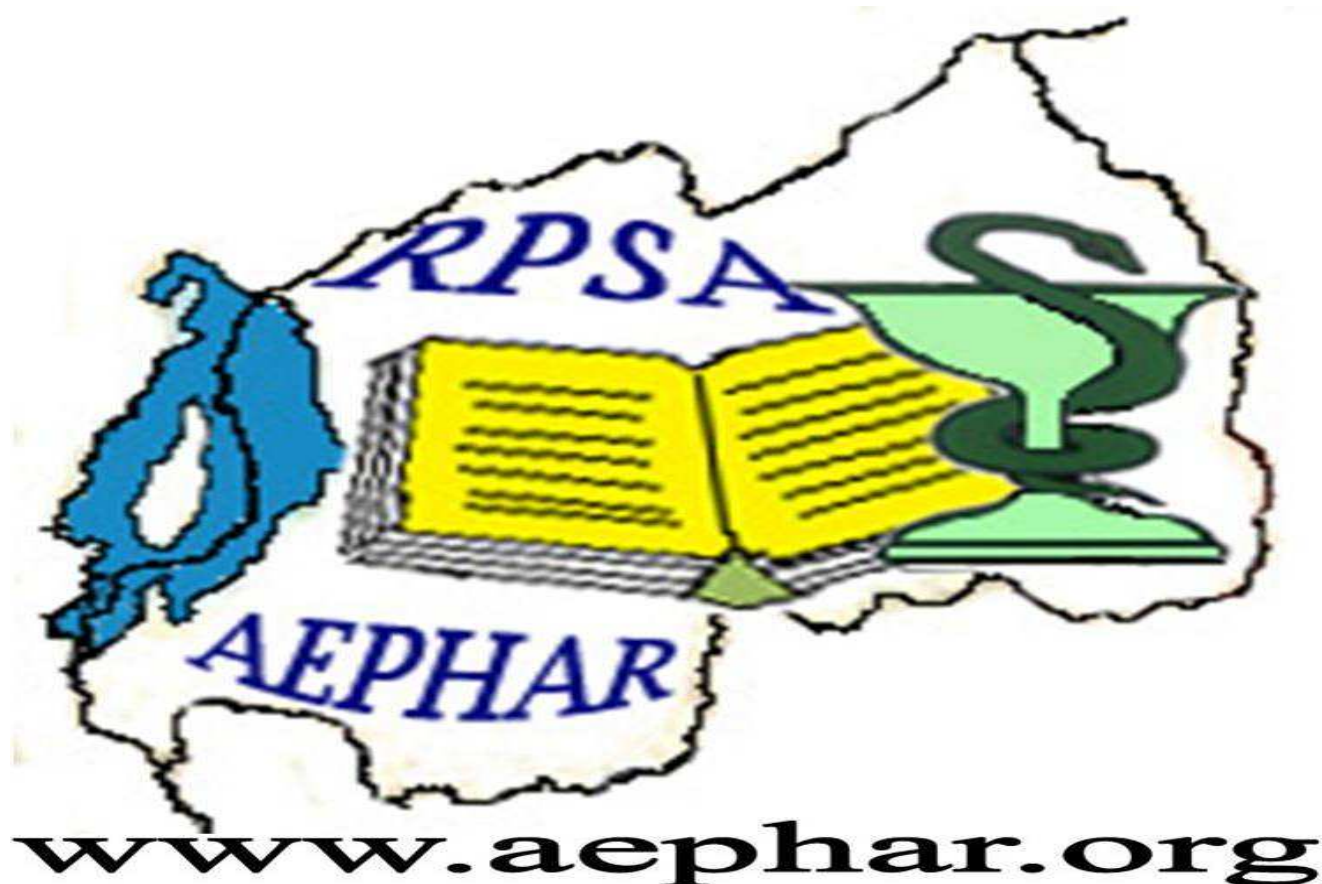


National
University of
Rwanda



www.aephar.org

Rwanda Pharmaceutical Students' Association

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I. Introduction

RPSA (Rwanda Pharmaceutical Students' Association) www.aephar.org , was founded in 1999, in Butare, at the National University of Rwanda (NUR). It regroups about 345 students of the Department of Pharmacy of NUR in Faculty of Medicine including National and International students. AEPHAR is the leading National advocacy organization for pharmacy students aiming at improving and promoting public health through provision of information, education, Research, networking with other organization nationally or internationally as well as the improvement and development of the skills and knowledge of participating students. AEPHAR is a non political, non-governmental, nonprofit making, non-religious and voluntary organization. It is linked to other Pharmaceutical Students' Associations worldwide through the International Pharmaceutical Students' Federation (IPSF) www.ipsf.org

The participation of the community is an essential aspect of the implementation of the project and, more generally, of basic health care. The key actors of the project are the people of the community. They are empowered to greater self-reliance and more active and responsible involvement in improving their own health. Thus, they are involved in all stages of Projects from the initial planning through to the evaluation.

The Hygiene, water and sanitation Program was created in RPSA with the aim of constructing latrines in the village of Mpungwe in the district of Huye and Hygiene education in Primary schools and hygiene education house by house in village.

The Gisagara Community Development Project aims to empower economically the local most vulnerable people of Kigembe Sector of Gisagara District with hygiene and Sanitation skills and capacity as way of addressing rural poverty and general health issues.

That project is emerging in Rwanda as a successful hygiene and sanitation as well as health practice for local people in rural areas. The practice of hygiene and sanitation has intrinsic health benefits through the provision of good health of great hygienic body and skilled value which is lacking in the target community.

II. Problem Statement

RPSA has conducted a research on Hygiene and sanitation in Village located in GISAGARA District by designed questionnaires interviewing those people because they do not know to read and to write where results showed that a significant number of respondents have never had any proper education on Hygiene and sanitation, HIV AIDS, reproductive health and family planning especially their latrines are everywhere in the ground which cause them many diseases such as diarrhoea. An important number of respondent said that if a member of their family is always washing his or her body, will become weak and develop diseases. More than 40% people said that they should pass even two weeks without washing their body and about 97% family keep their animals in the same house where they are living. More than 95% cannot loudly state sex-related terms in the local language and 97% have never got any education on HIV AIDS,

Reproductive health and family Planning, 69% of people said that they eat once a day and 95% of people earn less than one 0.5USD per day, 75% of people said that they cannot build their own house and 86% do not know to read and to write.

III. Description of the Project

III.1. General Context of Target Group

Geography: The target group (Kigembe Village) is situated in Gisagara District of the Southern Province of Rwanda. The project locates in Kigembe village and provides hygiene and sanitation services to the surrounding rural population. The area is characterized by a mountainous, with extremely poor roads and a general lack of facilities in each village.

Demographic and socio-economic situation: The average income of most villagers is \$70-110 USD per year and 98% of the villagers are small-scale, subsistence agriculturalists. In many areas the number of persons of non-productive age (0-14 years and 64+ years) outnumbers the number of those of productive age (15-64 years), leading to a common inability to generate income amongst those in the community.

Diarrhea, AIDS and malaria: These diseases continue to place the greatest burden on the health system and the economy. Diarrhea is the main disease causing death to many people of that village because of lack of hygiene and the prevalence of HIV/AIDS amongst the adult population in rural zones is estimated at 3.1%. Malaria accounts for at least 40 percent of all consultations in health centre. The infant mortality rate in 2006 was found to be 107/1000 live births. The principal causes of these levels of mortality remain to be communicable diseases, which, for the majority, can be prevented through better hygiene and behavioral change.

III.2. Project Summary

It is proposed that, to ensure and promote the health status of the local population and hence raises their well-being that the construction of latrines for them, water accessibility, hygiene and sanitation education, body hygiene education and the promotion of the young people to school are the basics needs for them to survive even in unconditional situation of living.

The above mentioned project will help those people to solve some of their everyday activities related to hygiene and sanitation as well as to help them to fight against diseases related to the lack of hygiene and sanitation to the indigenous people of GISAGARA District, Kigembe Village and will contain three main parts:

1. Training of Rwanda Pharmaceutical Students' Association Volunteers who will facilitate the implementation of project
2. Education sessions on Hygiene and sanitation of indigenous people of GISAGARA District
3. Construction of Latrines where at the beginning two families will share one latrines

The population of Gisagara district have faced various difficulties in their lives. Their living conditions combined with the lack of means of income has left the majority of the population severely disadvantaged and underprivileged.

The Gisagara Community Development Project will contribute to the poverty alleviation in the target population, empower the beneficiaries, and contribute to the improvement of health conditions of the beneficiaries as well to the social-economic status in the target community with firstly educating them to take action to their own development by sending their children to schools, education on hygiene and sanitation, boiling water, cleaning their house, washing body every day, washing babies and children as well as constructing for them latrines house by house in village. After that pilot project we hope to target other needs such nutrition improvement, family planning, etc...

Economic benefits: After getting improved living condition through the hygiene promotion, we will start the other activities with indigenous people which will generate the new incomes like agriculture and farming projects.

Environmental benefits: By constructing latrines and Hygiene promotion in the village and initiating the income generation projects to the indigenous people, we will change the environment pollution as they will not continue to have toilets everywhere in the ground and trees destruction by heating the pots.

Medical benefits: Some diseases such as Diarrhea will be reduced after the improvement of hygiene and sanitation.

IV. GOALS AND OBJECTIVES

The main objectives of the project is to contribute to the alleviation of poverty in rural areas of Kigembe Sector, contribute to the improvement of health and social-economic conditions in the vulnerable groups of the community as well to promote sustainable development initiatives, creativity, self-reliance and responsibility in the community.

- To construct 30 latrines for 60 householders
- Hygiene and sanitation Education to the local community members
- Accessibility of water in village and education of the use of boiled water
- To provide financial resources for the people living in the village of Kigembe in women leadership training, project management, to ensure the leadership skills to promote hygiene and sanitation as well to improve their living conditions, etc.
- To establish an innovative model of microeconomic enterprise.

V. METHODOLOGY

Interactive educational sessions will be conducted in the involved village and constructing the latrines by volunteers in the partnership with the target people living in the village of Kigembe. Groups, composed of volunteers from RPSA and the people of the village, will be created to discuss their own role to Kigembe development. Project facilitators will interact people of the

village on specific designed topics. At the end of the session, the evaluation will take place and this will be referred on during the next session plan.

SHORT-TERM IMPACTS OF THE PROJECT

- Create opportunities to discuss hygiene matters in an open, nonjudgmental environment.
- Promote individual self-esteem and empowerment.
- Encourage respect for personal beliefs and values.
- Facilitate informed decision-making regarding hygiene and sanitation.
- Ensure that young people have the skills to access sources of confidential advice.

LONG-TERM IMPACTS OF THE PROJECT

The long term impact of the project will be:

- More than 1000 people of the village will have access to up to date and trusted information about hygiene and sanitation.
- Latrines for up to 60 householders will constructed and reduce the risks related to the toilets in the grounds
- Hygiene and sanitation will be promoted and the related risks on lack of hygiene will be reduced and prevented
- Behavioral change will be promoted
- Every people of the village will have been answered about different questions on hygiene and sanitation
- University students will participate in MDGs

VI. Monitoring and Evaluation

- After the end of the each training session the participants will face tests and questionnaires.
- Also the trainers will be followed up and meet regularly to evaluate their achievements in order to continue to achieve their goal.
- Results will be evaluated for all target groups : weekly meeting with the leaders of the people of the village of Kigembe
- Purpose of evaluation: Accountability and Improvement
- Indicators of Achievement:
 - Number of trained students
 - Number of people in village who can freely engage a conversation about sexual issues with an educator, teacher or parent
 - Number of people who can pass the interview test because they do not know to read and to write
 - Number of householders involved

- At least 60 householders will have improved latrines
- Evaluation tools and techniques to be used:
 - Regular evaluations at the end of each activity
 - At the end of the project activities 2 questionnaires will be designed for a small sample of 200 people of the target village
- Time, money and people consideration :
 - Time – this will take about 2 weeks after the end of the project activities to complete the reporting activity
 - Money – needed money is for photocopies of the questionnaires
 - People – the project executive committee will be sufficient but we could also include a donor if available and the local administration of Kigembe sector
- Approach to the analysis of information: This will be done by the people in the evaluating team together. All the conclusions will be decided together.
- Reporting and Outcome communication: the final report will include the chronological narration of the activities, outcomes of the evaluation process, and pictures taken during the activities. Failures will be mentioned if present and explanation on their reasons and the way to prevent them. Recommendations will be provided as feedback of learnt lessons.

Detailed Budget

Budget line	Planned expenditure
Travel cost	200,000RWF
Training of RVCP members	300,000RWF
Education sessions of Indigenous people	150,000RWF
Latrines constructions	3,200,000RWF
Monitoring and Evaluation	95,000RWF
Administrative cost	60,000RWF
Total Cost in Rwf	4,005,000RWF
Total Cost in USD	7,027.00USD
Total Cost with money change 14%	983.78 USD
Total Cost	8010.78USD