

2014



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Imbuto

**ONE UN – IMBUTO FOUNDATION JOINT
PROGRAMME**

**“SUPPORTING DEVELOPMENT IN
EDUCATION AND HEALTH FOR
COMMUNITIES, FAMILIES AND
VULNERABLE ADOLESCENTS AND
YOUTH”**



REVISED STANDARD JOINT PROGRAMME DOCUMENT

Country: RWANDA

Programme Title: "Supporting development in Education AND Health for Communities, Families and Vulnerable Adolescents AND Youth "

Joint Programme Outcome(s)

UNDAP RESULT AREA 1: Rwandans able to tap into and benefit from expanded international, regional and local markets, and improved agriculture value chain.

UNDAP RESULT AREA 2: Accountability and citizen participation in sustainable development and decision-making processes at all levels improved

UNDAP RESULT AREA 3: Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services.

Programme Duration: 9 Months
Anticipated start/end dates: October 2014-June 2018

Fund Management Option(s): Pooled and parallel

(Parallel, pooled, pass-through, combination)

Managing or Administrative Agent: **UNFPA**
Administrative Agent: **UNDP**
(if/as applicable)

Total estimated budget*: **US\$ 1,138,442**

Out of which:


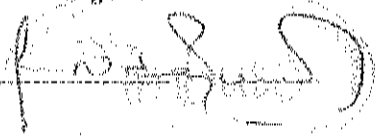
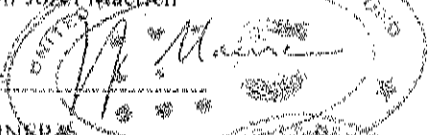

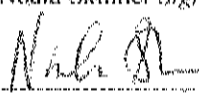
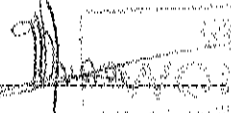
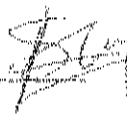

1. Regular resources: **US\$ 689,656**

2. Other resources (TBM): **US\$ 236,381**

3. Non cost Extension approved budget: **US \$ 212,405**

* Total estimated budget includes both programme costs and indirect support costs

Names and signatures of (sub-national counterparts) and participating UN organizations

UN Organizations	Main Implementing Partner
<p>Mr Lamin Mameh</p>  <p>United Nations Resident Coordinator</p>	<p>Mrs Radegonde NDEJURU</p>  <p>Imbuto Foundation Director General</p>
<p>Mr Jozef Muerien</p>  <p>UNRPA</p>	
<p>Mr Auke Lootsma</p>  <p>UNDP</p>	
<p>Ms Noala Skinner <i>Signal</i></p>  <p>UNICEF</p>	
<p>Ms Diana Ofwona</p>  <p>UN Women</p>	
<p>Dr Sibongile Dladlu</p>  <p>UNAIDS</p>	
<p>Dr Martins O. OGBEREGUN</p>  <p>WHO</p>	

1.1 PROJECT OVERVIEW

Proposal Name [Title]	Supporting development in Education and Health for Communities, Families and Vulnerable Adolescents and Youth.
Theme Group submitting	Directly submitted to RCO
Lead Agency/Coordinating Agency	UNFPA
Total budget in USD	\$ 1,138,442
Budget requested to the One Fund in USD	\$ 236,381
Participating agencies	UNFPA (Lead), UNICEF, UNDP, UN WOMEN, UNAIDS, WHO
Duration	9 Months from October 2014 to June 2015
UNDAP results, outcomes and outputs addressed	<p><u>UNDAP RESULT AREA 1: INCLUSIVE ECONOMIC TRANSFORMATION</u></p> <p>OUTCOME 1.2: Rwandans able to tap into and benefit from expanded international, regional and local markets, and improved agriculture value chain.</p> <p>Output 1.2.1. Strengthened agricultural innovation and value chain</p> <p><u>UNDAP RESULT AREA 2: ACCOUNTABLE GOVERNANCE</u></p> <p>OUTCOME 2.1: CITIZEN PARTICIPATION AND EMPOWERMENT: Accountability and citizen participation in sustainable development and decision-making processes at all levels improved</p> <p>Output 2.1.5 Citizens especially women, youth and vulnerable groups participate in decision making and democratic processes at all levels.</p> <p><u>UNDAP RESULT AREA 3: HUMAN DEVELOPMENT</u></p> <p>OUTCOME 3.1: Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services</p> <p>Output 3.1.1 Capacity of government institutions and communities to expand equitable access to quality integrated child and family services improved</p> <p>Output 3.1.3 Capacities of the education sector to deliver inclusive quality basic education strengthened</p> <p>Output 3.1.5 Quality integrated comprehensive HIV prevention knowledge and services for pregnant women, children and young people expanded</p>

**Proposal summary
and outputs**

Imbuto Foundation is successfully implementing the One UN project aimed at "Supporting Development in Education and Health for Communities, Families and Vulnerable Adolescents and Youth."

The project is technically and financially supported by UN agencies such as UNEPA, UNICEF, UNDP, UN Women, UNAIDS and WHO.

For the next 9 months, Imbuto Foundation will continue to strengthen the 4 components plus the economic empowerment (JMALI) which is the new thematic area in the Imbuto Foundation ONE UN Joint programme under this joint initiative. The five components with its own objectives will contribute to the overall Strategic Intent of Imbuto Foundation that states that "By 2020 children and young people, particularly girls, from disadvantaged environments have benefited equitably from development outcomes and contribute significantly to the building of the Rwanda knowledge- based economy".

The 5 components are:

I. Early Childhood Development and Families (ECD&F)

Output 1.1: 150 children between the ages of 0-6 and their families have access to quality community-based integrated ECD&F services in Kayonza District (Mukarange Sector / Nyagatovu Village).

Output 1.2: 1,800 children between the ages of 0-6 and their families accessing quality community-based integrated ECD&F services in the nine newly constructed ECD&F centres in Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamasheke, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts. **Total budget : 304,656 USD**

II. Education component

Output 2.1: Community awareness on girls' education issues is increased

Output 2.2: Rewarded girls are equipped with life skills, given a platform for excellence and inspired to be role models

Output 3: Increased listening skills and interest in reading among children
Total Budget: 229,246 USD

III. Family Package component

Output 3.1: A model using Community Health Workers (CHW) in the follow up of HIV+ families in the community to improve quality of Prevention of Mother to Child Transmission (PMTCT) services is implemented in 6 FP sites in MUSANZE district

Output 3.2: Quality PMTCT services are accessible to all HIV infected pregnant women and exposed infants in 21 FP sites.

Output 3.3: Access and utilization of HIV prevention and ASRH

	<p>information and services among 10-24 year olds in-and-out-of-schools improved</p> <p>Output 3.4. Coordination and M&E mechanisms strengthened.</p> <p>Total Budget: 280,954 USD</p> <p>IV. Youth Empowerment and Mentorship Programme</p> <p>Output 4.1: The existing platform for young people is adequately resourced and strengthened to include upstream support to enhance leadership and communication skills amongst university and secondary students.</p> <p>Output 4.2.: Young women are equipped with critical thinking, decision making and confidence building skills</p> <p>Output 4.3: A platform of excellence, innovation and entrepreneurship amongst Rwandan youth, especially young professionals, is established</p> <p>Total Budget: 263,586 USD</p> <p>V. IMALI Component: Rural Women's Economic Empowerment</p> <p>Output 1: Improved partnership between Imbuto Foundation, local authorities and beneficiaries.</p> <p>Output 2: Improved skills of new technology production and tomato transformation</p> <p>Output 3: Increased Tomato production</p> <p>Total Budget: 60,000 USD</p>
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BACKGROUND OF THE JOINT PROGRAM

Imbuto Foundation is a Rwandan NGO promoting the vision of a society with a prosperous, educated, and healthy population. The Imbuto Foundation's mission is *to support the development of a healthy, educated and prosperous society*. The main objectives of the organisation are: to contribute significantly to the efforts for the prevention, care and treatment of HIV and AIDS and other pandemics; promote socio-economic wellbeing of vulnerable groups; promote education for all children with a particular focus on young girls;

Imbuto Foundation has been successfully working in partnership with several UN agencies over the past years advocating and working for the rights of children and the youth to health and education and pioneering innovative programs in the areas of health, education, youth empowerment and economic empowerment of families.

Since January 2012, Imbuto Foundation continued to work with OneOne UN in Rwanda in the context of Delivering as One. Imbuto Foundation has a comprehensive and holistic joint initiative which contributed to the effectiveness of the partnership in the areas of education, HIV and AIDS and youth empowerment.

ACHIEVEMENTS MADE OVER A PERIOD OF 15 MONTHS UNDER THE KEY OUTCOMES

OUTCOME 2.1 Rwandans to tap into and benefit from expanded international, regional and local markets, and improved agriculture value-chains.

IMALI: RURAL WOMEN' ECONOMIC EMPOWERMENT'

- 260 beneficiaries were trained in greenhouse and cooperative Management.
- 9 Greenhouses were constructed and 1 mushroom shade.
- Total revenue from the last IGA was 17,082,722 Rwf RWF
- 210 of cooperatives members have health insurance from the revenues.

OUTCOME 2.1: CITIZEN PARTICIPATION AND EMPOWERMENT: Accountability and citizen participation in sustainable development and decision-making processes at all levels improved

YOUTH EMPOWERMENT AND MENTORSHIP PROGRAMME (YEMP):

- 100 young people increased capacity in CV development, job searching and interview techniques.
- 12 debate clubs established and fully functional (6 in school, 6 out of school).
- 40 emerging young leaders from the toastmasters club are now competitive youth on the job market.

6 youth forums conducted catering to over 2000 youth in various domains and 2 holiday camps for 2000 scholarship beneficiaries empowered with leadership, public speaking and other life skills.

OUTCOME 3.1: Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services

Early Child Development and families

- 34 children who turned 6 years old in December 2013 graduated from ECD Kayonza ready to begin school.
- 100 children between 0-6 years old are benefiting from a model community based ECD&F centre in KAYONZA district.
- Each child has a file that record his/her progress and learning at the Centre, based on the ECD components: health, nutrition, early learning, safety and protection.
- Children between 4 to 6 years attend morning sessions at ECD Kayonza four times a week and receive breakfast. Children between 0 and 3 years come twice a week in the afternoons with their parents.
- Every month, with the help of caregivers, all children are weighted.
- Every month, parents receive a cooking lesson, using ingredients grown by the parents themselves in the ECD garden.
- Expecting mothers are receiving lessons to prepare them to parenthood.
- Parents who have children at ECD Kayonza are visited once every quarter on a rotation basis.
- Parents make toys from banana fiber such as soccer balls and jumping ropes to replace existing damaged toys.

EDUCATION:

- During this period, 1 annual promotion of girl's education campaign was conducted: more than 5,000 people in the country including local and opinion leaders were mobilized and sensitized on girl's education and 433 girls were recognized for their achievement.
- 800 girls have been empowered with life skills (coaching, hygiene advice, empowering topics such as begin with end in mind, career guidance) through 20 established peer mentorship clubs in Secondary schools.
- 183 girls were empowered on time management, goal setting and communication skills through the "let us dream big and act" workshop.
- More than 1200 people including parents, teachers, local leaders and children were sensitized on the importance of reading. Children were encouraged to read in a more active process and parents and teachers were urged to allocate some free time for children to read at school and at home. Parents were also urged to read aloud for kids.

FAMILY PACKAGE:

- 32 ASRH&R clubs created in and out of schools.
- 200 young positives attended community support groups led by the 10 selected young positive at HC level.
- Young positives are becoming more confident and developing a sense of dignified life (joining others in the clubs, providing testimony ...)
- 14,950 young people received AYSR&R messages during different events.
- Young people are using youth corner and share their concerns and issues related to ASRH
- 2052 youth were tested of HIV and 4were HIV+ and are under follow up in respective health centers
5 health centers have youth corners well equipped and functional
- 5 ASRH clubs are established with 795 club members in 5 schools of RUBAVU District out of which 329 young female and 466 young men.
- 100/100 selected vulnerable youth were trained in entrepreneurship skills conducted by professional trainers from Business Development Services (BDS)
- Participants were equipped with knowledge on entrepreneurship concept and project cycle.
- 61 parents and students attended Parent-Adolescent communication forums: Parents and Adolescents are aware of the challenges and their responsibilities in PAC. They have set pledges to be put into actions in their respective families.
- The work of Peer Educators in the community has greatly contributed in supporting PMTCT services especially for retention of clients.
- The peer education approach in FP has been recognized as an effective way of addressing HIV in the community and it was recommended to continue advocating for how the work of PE can be done by community health workers for sustainability.

1.2 CHALLENGES AND LESSONS LEARNT OVER THE 15 MONTHS UNDER 2 KEY OUTCOMES

OUTCOME 2.1: CITIZEN PARTICIPATION AND EMPOWERMENT: Accountability and citizen participation in sustainable development and decision-making processes at all levels improved
Challenge
Evaluating Youth Forums has been difficult due to different audiences for each forum.
Lessons Learnt
Need to redesign existing tools and reinforce the analysis and interpretation of data collected to evaluate the program (e.g. Online survey for Youth Forums).
To strengthen empowerment of the youth we need a continuous involvement of the past youth forum participants and other Imbuto Foundation beneficiaries.
Creating a network of youth peers can be a strategy to increase self-confidence among youth especially girls.
Creation of debate clubs in schools and youth centres has been identified as a way to help in the sustainability of the program.
OUTCOME 3.1: Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services
Challenges
Continuous gender disparities in exam results especially in S3 Performance. <i>E.g. 2012 S3 level examinations results: 2,768 Girls (33.88%) passed and 5,402 Boys (66.12%) passed division 1</i>
Care givers turnover in ECD.
Delay in starting new ECD centres due to delay in completion of construction.
Auto stigma and disclosure is still a problem among young positives.
Lessons Learnt
Using Best Performing Girls as role models during the campaign is an effective way of motivating their peers by building self confidence and self-esteem amongst the girls and promoting positive attitudes towards girl's education.
<i>Using Inkubito z'icyeza Forum for Excellence clubs is a good strategy for proper monitoring and continuous empowerment of rewarded girls.</i>
Involving parents and teachers in Reading events has changed their perception on the importance of dedicating some hours for reading at home and at school.
Some health centres valued the peer educators interventions and started adopting their approaches especially in health education sessions at health centre.
There is a need of sensitizing the entire family on HIV testing
There is need to work with CHWs in order to strengthen the work of Peer Educators in the community for sustain
OUTCOME 2: Rwandans to tap into and benefit from expanded international, regional and local markets, and improved agriculture value-chains.
Challenge
Lack of ownership of the community
Natural disaster: Last year the winds destroyed 2 greenhouses.
Uncontrolled tomato diseases.
Lesson learnt
Changing the rotation system by using plastic reduced diseases inside green houses.

In line with addressing the above challenges and using the lessons learnt as a strategy to improve results, the joint program seeks to extend the activities for an additional 9 months to attain results as per the logical framework so as to achieve Imbuto Foundations overall Strategic intent.

1.3 TOWARDS A HOLISTIC APPROACH IN THE IMPLEMENTATION OF THE JOINT PROGRAM

With the Foundation's aim of building a holistic approach, in the coming 9 months the joint program will continue to strengthen the comprehensive package by implementing the following activities within the 5 components:

- Supporting 5 family package cooperatives and women attending 5 ECD centres through IMALI component by introducing greenhouse farming as an income generating activity.
- Using the debates approach in YEMP to address ASRH&R and HIV issues in the youth centres working with Family Package in Rubavu
- Integrating ASRH&R and HIV as topics in youth empowerment programs (youth forum series, holiday camps, best performing girls peer mentorship clubs, debate clubs).
- Stimulating reading culture in children and parents attending ECD centres.

1.4 CONTRIBUTION OF THE JOINT PROGRAM TOWARDS UNDAF & EDPRS RESULTS AREAS

This Joint Programme between the UN and the Imbuto Foundation contributes to several result areas of the United Nations Development Assistance Plan (UNDAF 2013-2018). The UNDAF has been developed as the UN contribution to national results established in EDPRS II and to support the Government of Rwanda to realize the MDGs and the other international development goals. Specifically, this joint programme contributes directly to three UNDAF Result Areas and corresponding Outcomes and Outputs illustrated in the table on page 2.

The overall objective of the UNDAF Human Development/Foundation result area is: 'Health including HIV, nutritional status, care and protection, and learning outcomes improved for all Rwandans: children, youth, families, especially those from vulnerable groups'. It contributes mainly to the Foundational Issues of EDPRS II but also the Productivity and Youth Employment and Rural Development Thematic Areas of EDPRS II.

Human Development is a concept that goes beyond economic development and income levels, and includes other foundational elements which contribute to a long, healthy and prosperous life such as good health, quality education and proper nutrition. Without available and accessible social services, choices and opportunities for individuals are curtailed, thus limiting the human development of the population. This joint programme seeks to address several of these key foundational issues which build the potential and capabilities of the Rwandan population.

In developing the structure of the new EDPRS II, the government of Rwanda has recognized the importance of Human Development as a key pillar in supporting sustainable economic growth. The government has communicated that it sees the UN as the lead partner in achieving results under Human Development/Foundation Issues, and Imbuto Foundation is seen as a key partner by the UN in supporting the achievement of these results, in the following three areas.

The first outcome of Result Area 2 is 'Holistic Child, Youth and Family Development' which sees success as all children and youth living in Rwanda growing up healthy, well nourished, educated,

protected against disease and violence and able to develop to their full potential in a caring family environment.

In supporting the achievement of this result, the joint programme takes a life-cycle approach to development; from childhood, adolescence, youth and parenthood, with a strong focus on the early years from 0-6, as the foundation for all future development and learning. The programme components during the early-years of the life-cycle include: support to pregnant women, breastfeeding mothers and parents/family for care, protection and development of young children; prevention of mother to child transmission of HIV; integrated Early Childhood

Development services and school readiness programmes. The programme components during later stages in life include: age appropriate Sexual and Reproductive Health information and services given to adolescents and youth through schools, health centres and in communities; and empowerment and mentorship of the youth.

The joint programme is also focused on supporting the Government of Rwanda (GoR) to provide quality education and skills to all children, respond to disparities and inequalities in the education system as well as to empower the adolescents and youth, especially those most at risk to provide them with the services, knowledge and skills to make responsible and informed decisions related to sexuality and to empower the adolescents and youth to fully participate in Rwanda's society and economy.

Within the Accountable Governance Result Area, the UN will contribute to the processes of improving citizens' participation and accountability, and this joint programme will focus on youth participation in decision making and democratic processes at all levels, which includes providing young people with the opportunities and skills to contribute to the national development agenda.

Access to gainful employment is not only a fundamental right but one of the key factors for sustainable development. Rwanda recognizes this and has entered into reforms aiming at accelerating job creation leading to faster economic growth and poverty reduction. A major development challenge for the country is the high level of youth unemployment which is strongly linked to the high population growth, its youthful nature, skills mismatch and a job creation rate that lags behind that of new entries into the labour market. This joint programme will focus on youth empowerment to address some of these challenges.

The UN joint programme will contribute also to the Economic empowerment by improving the living standards of vulnerable groups, especially women. This will be achieved through partnering with selected members of the community in capacity building and income generating activities, particularly the intensification of tomato and mushroom growing.

The overall purpose is to strengthen the capacities that were created in the 10 cooperatives created in phase I and build additional skills in new ones to be created in phase II. The specific purpose is to provide increased and improved training to beneficiaries in horticulture techniques and productivity, greenhouse management and connectivity to food markets for economic profit.

UNDAF OUTPUTS

JOINT PROGRAMME COMPONENTS

Output 1.2.1 Strengthened agricultural innovation and value chain

• Economic Empowerment component

Output 2.1.5 Increased participation especially of women and youth in decision making and democratic processes at all levels

• Youth Empowerment and mentorship programme

Output 3.1.1 Improved capacity of government institutions and communities to expand equitable access to quality integrated child and family services

• Early Childhood Development and Family component

Output 3.1.3 Strengthened capacities of the education sector to deliver inclusive quality basic education

• Education component

Output 3.1.5 Expanded quality integrated comprehensive HIV Prevention knowledge and services for pregnant women, children and young people

• Family Package component

Overall Results

The results chain of the Imbuto Foundation, which was developed in partnership with the UN, has as the overall Strategic Intent: *“By 2020 children and young people, particularly girls, from disadvantaged environments have benefited equitably from development outcomes and contribute significantly to the building of the Rwanda knowledge-based economy”*.

This partnership agreement will continue to contribute to the two over-arching outcomes within the Imbuto Foundation Results Chain, which form the basis of Imbuto Foundation’s development programme.

Outcome 1: Family and Community: *All children from disadvantaged environments have benefited from adequate early stimulation, care, protection and schooling and all vulnerable families, particularly widows, live in dignity in their communities.*

Outcome 2: Vulnerable Youth: All youth from disadvantaged environments have completed at least basic education, participate in decision making for their own social-economic development and are less vulnerable to preventable diseases.

1.5 PROJECT DESCRIPTION

The project description has been broken down in 5 main components. These 5 components are:

- I. Economic empowerment: IMALI
- II. Youth Empowerment and Mentorship Programme
- III. Early Childhood Development and Family
- IV. Education
- V. Family Package

Each component is explained in detail further on in this joint proposal.

1.6 METHODOLOGY

This joint initiative will build upon the programmes and initiatives of Imbuto Foundation over the last 30 months. The UN agencies will continue to give technical oversight to each element of the programme through regular joint planning and review meetings with Imbuto Foundation team. Community involvement will be strengthened to achieve the results of the programme.

UNFPA has been nominated by the United Nations Country Team (UNCT) to lead this joint intervention and will provide leadership in terms of overall coordination, including joint monitoring and reporting.

To effectively implement the Joint Intervention, Imbuto Foundation, will employ 18 programme support staff. This will include 1 Joint Programme Director, 1 project officer for the Youth Empowerment and Mentorship Programme, 1 project officer for Education component, 3 project officers, 1 community mobilizer, 1 technical advisor for the ECD&F component, 2 project officers and 1 project officer for the Family Package component, 5 project officer for IMALI component, 1 communication officer and 1 M&E officer.

The Joint Programme Director will be responsible for delivering results through mentoring, coaching, planning, implementing and reporting processes aimed at building capacity within the institution and at the programme staff level. She/he will take on the following tasks: 1) ensure that activities set forth in the action plan are effectively implemented and completed by June 2015; 2) support the Youth Empowerment and Mentorship Programme officer in effectively implementing youth empowerment project and building on its achievements for a further scale-up; 3) offer support to the ECD project so that it is effectively implemented in an efficient and timely manner and; 4) share results and lessons learnt from the pilot ECD model with the relevant Ministries for a possible scale-up of this initiative.

With regard to the Youth Empowerment and Mentorship Programme, Imbuto Foundation will ensure that its component fits well within the National Framework of the National Youth Sector Strategic Plan of the Ministry of Youth and ICT (MY-ICT). 5) Support the comprehensive approach towards adolescents and youth through schools, youth centres and community activities.

The project officers will have overall responsibility for technical, programmatic and administration support to the different components. They will report directly to the project heads of units, under the guidance of Joint Programme Director and overall leadership of Director General. These coming 9 months, Imbuto Foundation will build upon the technical support provided by the One UN technical committee in the last 15 months to consolidate its institutional capacity.

1.7 SUSTAINABILITY AND EXIT STRATEGY

For One UN joint intervention project, Imbuto Foundation implements its components in partnership with local and national levels.

At national level, Imbuto Foundation works with Ministries, such as health, education, youth, agriculture, local government and gender and family promotion.

The interventions designed are in line with the respective sector policies and strategic plans. Imbuto Foundation is a member of strategic committees in all line ministries. It is through these committees that Imbuto Foundation strongly advocates for the integration of some of the models, such as Family Package, Early Childhood Development and Youth Empowerment, Economic Empowerment and Mentorship Programmes to be integrated into their plans and programmes.

At local level, Imbuto Foundation builds capacity of Health Centres, schools, youth centres and cooperatives through trainings, and in communities through outreach activities. It also involves local administrations to mobilise communities, create awareness on SRH, Girls education hence transfer capacities to the local administration.

Imbuto Foundation interventions are based on the partnership development, community mobilization, capacity building and sharing lessons learnt with partners to replicate and scaling up of its successful models in health, education and youth sectors.

Imbuto Foundation is working on a comprehensive resource mobilisation strategy to fund its strategic plan that ends in 2015. Imbuto foundation will continue to mobilise funds through writing proposals, sharing resources with other partners and raising resources through bilateral and

multilateral agreements. Imbuto Foundation will also mobilise funds from international donors and the private sector.

1.8 MONITORING, EVALUATION AND REPORTING

Imbuto Foundation has been working well with the various UN agencies over the last 30 months through joint planning and review meetings and this will continue over the next 9 months. As part of the monitoring of the program, joint field visits will be conducted to ensure programme quality, standardisation and checking whether activities are implemented as planned. Monitoring visits will be guided by a field visit objective plan, which will examine progress in the various indicators outlined in the logical framework. All monitoring visits will include the involvement of the relevant Government counterparts, either at the central or local level.

This joint proposal is a continuation of the past Joint intervention by the One UN with emphasis on key challenges and lessons learnt over the last 15 months of implementation.

As usual, this joint proposal has also been developed in a participatory manner, aligning Imbuto Foundation's priorities to national relevant sector strategic plans and the UNDAP results-framework and will be implemented in the same manner for the next 9 months.

Additional plans to strengthen joint implementation and monitoring include a schedule of joint field visits by all agencies involved in the joint initiative and a calendar will be developed once the funding has been approved. Concurrently, a multi-year funding proposal will be developed to ensure the alignment to UNDAP, EDPRS2 and Imbuto Foundation strategic plans up to 2018.

To build on inputs from M&E tools and strategies, Imbuto Foundation will continue to document achievements, opportunities, challenges and impacts in various programs. Imbuto Foundation shall also provide short updates or progress reports to the UN on a quarterly basis, reporting against the planned results and activities, as laid out in the programme logical framework.

Preparations for implementation, progress reports and other updates will be shared and discussed during the quarterly technical meetings as well as at the 6 monthly Steering Committee meetings.

A progress report covering the 9 months of implementation will be produced to document the key achievements, the challenges faced, lessons learned as well as success stories.

1.9 11. MANAGEMENT ARRANGEMENTS

UNFPA is the lead/ coordinating agency for this joint programme and will provide leadership in terms of overall coordination, including joint monitoring and reporting. Each agency will contribute to the achievement of the programme results through funding (own resources and funds secured through the One Fund) and through the support of agency technical staff. There is a clear breakdown within the budget of each agency-specific contribution to the joint initiative and this is matched in the logical framework in terms of indicators and targets, to which each agency is responsible for achieving, under the overall leadership of UNFPA.

The project management structure proposed for this programme is as follows:

Technical Committee:

The Technical Committee will consist of technical staff from from different agencies involved (UNFPA, UNICEF, UNDP, UN Women, WHO, UNAIDS) and relevant technical staff from Imbuto Foundation. The technical committee meetings will be co-chaired by Imbuto Foundation and UNFPA.

The Technical Committee members will be responsible for:

- * Assess progress on project implementation,
- * Propose budget changes of the Joint program to the Steering Committee as well as provide advice as required.

- Chair Imbuto Foundation and UNFPA
- The Technical Committee will meet on a quarterly basis to assess progress on project implementation, discuss bottlenecks and propose way forward, followed by the steering committee meeting. Additional meetings may be called as required.
- Regular financial and technical support to the Imbuto Foundation for implementation of activities will be given by UNFPA and other UN agencies to ensure compliance with UN rules and regulations.

Steering Committee:

The Steering Committee will include Heads of Imbuto Foundation and participating UN Agencies or their representatives. The role of the Steering Committee will be to:

- * Oversee the overall implementation of the programme;
- * Provide strategic direction;
- * Review and decide on the recommendations made by the Technical Committee on changes with relation to project implementation or the project document;
- * Approve implementation reports, work plans & budgets;
- * The steering committee which will be convened on a semi-annual basis and will be chaired by Imbuto Foundation and co-chaired by UNFPA to endorse the recommendations of the technical committee. However, extra-ordinary meetings may be called whenever necessary.

Funds Management

To ensure smooth implementation of the programme, a pooled and parallel funding modality will be adopted. The lead agency will manage all pooled funds in conformity with UNFPA procedures and the National Execution guidelines.

I COMPONENT I: EARLY CHILDHOOD DEVELOPMENT AND FAMILY (ECD&F)

Component Name [Title]	Early Childhood Development & Family	
Total budget in USD	304,656USD	
Budget requested to the One Fund in USD	0	
Participating Agencies	Agencies (UNICEF)	Budget in USD
		304,656USD
UNDAP results addressed	<p><u>UNDAP Result Area 3: Human Development</u></p> <p>OUTCOME 3.1: Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services</p> <p>Output 3.1.1: Capacity of government institutions and communities to expend equitable access to quality integrated child and family services improved.</p>	
Component outputs	<p>Output 1.1: 150 children between the ages of 0-6 and their families have access to quality community-based integrated ECD&F services in Kayonza District (Mukarange Sector / Nyagatovu Village).</p> <p>Output 1.2: 1,800 children between the ages of 0-6 and their families accessing quality community-based integrated ECD&F services in the nine newly constructed ECD&F centres in Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamashoke, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts.</p>	

1.10 BACKGROUND

There is strong evidence that the early years of life play a major role in a child's development. Risk factors for poor development include poor maternal nutrition, lack of stimulation and learning opportunities, and exposure to violence, but protective factors such as breastfeeding and maternal education can reduce these negative effects. The Lancet Series have revealed that increasing investment in ECD programmes is a highly cost-effective strategy that could provide considerable returns, with the potential to promote long-term growth and significantly reduce inequality in low and middle income countries.

In Rwanda, only 13% of children between the ages of 3 and 6 have access to early childhood development (ECD) services or learning opportunities, and those that do generally reside in urban areas or come from wealthier backgrounds. As the vast majority of ECD centres are provided by the private sector and located in urban areas, children from poorer and rural backgrounds are generally excluded. Investments in ECD in Rwanda would be an effective means of ensuring all children are prepared to start school at the right age and to combat the current primary drop out (12.2%) and repetition rates (14%).

The Government of Rwanda (GoR) is committed to ensuring all Rwandan children achieve their potential, are healthy, well-nourished and safe, and their mothers, fathers and communities become nurturing caregivers through receiving an integrated ECD service. The ECD Policy and Strategic Plan (2011) envision achieving this goal through the provision of community-based integrated ECD services for children between 0 and 6 years and their families. This programme responds to these challenges and seeks to model integrated ECD and Family services in nine locations.

1.11 PROJECT DESCRIPTION

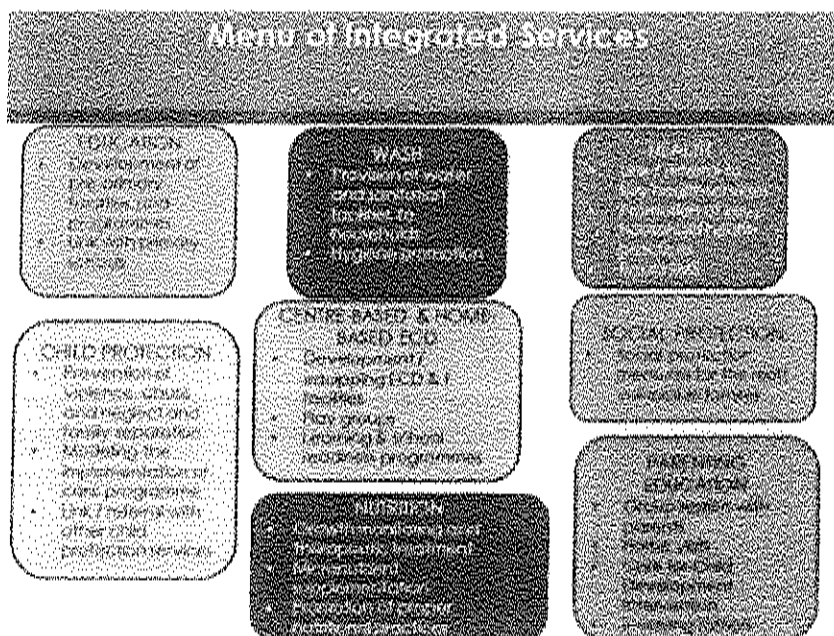
Output 1.1: 150 children between the ages of 0-6 and their families have access to quality community-based integrated ECD&F services in Kayonza District (Mukarange Sector / Nyagatovu Village).

As the centre was constructed and equipped, and its operation initiated under the One UN Joint Programme (2012-2013), the activities do not start from scratch but build on the achievements up to end June 2013. The centre in Kayonza is regarded as a prototype and testing ground for the package of ECD&F interventions (which is being developed in phases), and will serve as a basis for the 4 new ECD&F centres to be modelled in Nyarugenge, Gasabo, Gakenke and Nyabihu.

Output 1.2: 1,800 children between the ages of 0-6 and their families accessing quality community-based integrated ECD&F services in the nine newly constructed ECD&F centres in Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamashoke, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts.

Once the 9 new ECD&F centres have been constructed and equipped, Imbuto Foundation will model the package of interventions, using the model developed by UNICEF in 2013, whilst building on the package tested in the Kayonza prototype taking into account lessons learned and recommendations emanating from the prototype.

The packages of interventions for which capacities will be developed are represented in the diagram below:



- The programme is designed to transform children's lives by, first of all, changing the way their caregivers interact, nurture and care for their children. The transformation will be further strengthened by enabling community support and quality home and centre-based services that are available when families need them.

The essential package of high-impact services consist of:

- ✓ **Social Protection.** In integrating ECD & F into the design of "Vision 2020 Umurenge Programme" (VUP), a few options are currently being reviewed: (i) providing (soft) conditions cash transfer linked to behavioural change around ECD (ii) provide child-care facilities at/for public works. The options will be tested for feasibility and acceptability in 2014 and costed.
- ✓ **Child Protection.** In supporting child care reform the main intervention planned at the grass root level are: prevention of violence, child abuse and neglect; prevent family separation; modelling the implementation of care programme to the most marginalized; establishing strong child protection workforce at decentralized levels (community / district); ensure referral with other child protection services (birth registration, justice).
- ✓ **Water, Sanitation and Hygiene:** provision of water and sanitation facilities, including safe handling, usage and maintenance; establishing clean and protective play space for children; C4D hygiene promotion.
- ✓ **Nutrition:** micronutrient supplementation; growth monitoring and therapeutic treatment / referral of severe malnutrition, promotion of proper nutritional practices ("1000 days communication campaign").
- ✓ **Health:** health promotion and behaviour change communication, link with package of services provided by community health workers (immunization; deworming; antenatal care; maternal and new-born care: safe delivery, etc.); use of rapid SMS to support real time monitoring.
- ✓ **Education:** development of pre-primary facilities and programmes and link with primary schools (development / testing / implementation of pre-primary quality standards, curriculum, monitoring, supervision, professionalization of child care).

- ✓ Centre-based and home-based organized early learning and care of young children. Play-based learning & school readiness (reading, numeracy and writing); Early socialization and socio-emotional development; Physical/motoric development; Communication and language development; Imagination and creative expression; Hygiene; Cultural values.
- ✓ Parenting Education. Home visits and organized group sessions with parents to support adoption of key care and protection practices, including involvement of fathers in child rearing; facilitate income-generation activities; demonstrate proper cooking / feeding practices; roll-out Care for Child Development intervention to strengthen bonding and attachment.
- ✓ This component will build upon the achievements made over a period of 12 months in Kayonza, extending the programme to an additional 10 locations.
- ✓ In March 2014, UNICEF engaged a consultancy firm, Southern Hemisphere, to conduct a case study of UNICEF's ECD and Family programme in Kayonza. A summary of the findings include the following:
 - ✓ The ECD&F model is well aligned with the existing ECD policy and operational plan;
 - ✓ Coordination mechanisms at the community level are well established;
 - ✓ The current facilities and available learning and play material are adequate and supportive of child development;
 - ✓ A key enabler to scale-up the ECD&F model is that the centre is located within short walking distance to the village;
 - ✓ Children and parents regularly attend and participate in the centre programmes with some exceptions such as during the rainy season.
 - ✓ Several aspects of quality are in place (good child/caregiver ratio; provision of a multi-dimensional programme; good quality service). Other aspects of quality are still being developed.

Actual modelling of the delivery of the services will be restricted under a one year PCA, as much time will be consumed by construction and equipment as well as preparations and capacity development activities. A review in the 3rd quarter may establish whether more time is to be granted for continued modelling of actual service delivery.

PROJECTS EXPECTED RESULTS

Output 1.1: 150 children between the ages of 0-6 and their families have access to quality community-based integrated ECD services in Kayonza District (Mukurange Sector / Nyagatovu Village)

Activity 1: Model Service Delivery

The centre currently has 5 caregivers and 1 ECD professional, all of whom have very recently been provided with a starters' training package. The centre is managed by the ECD professional and a parents' committee who have received initial training on management. 2 guards and 2 cleaners have been employed on the premises.

The centre is currently providing services to 100 children and their parents (42 children between 0-3 years old and 58 children between 4-6 years old). It has embarked on the development and delivery of the following package of services, all of which now require further elaboration and testing:

(1) Awareness raising and communication ;(2) Parenting programme; (2) Play-based learning; (3) Key family and community health practices; (4) Good nutrition and cooking demonstration (with the support of community health workers).

These services will be delivered through both outreach (on weekday mornings and Fridays) and centre-based sessions with parents and children (four afternoons per week).

For the purpose of the sustainability of the services, Imbuto Foundation has signed a Memorandum of Understanding with Kayonza District to continue the technical and financial management of the centre from 1st July 2015.

Activity 2: Capacity Development

The 5 ECD caregivers and ECD professional as well as the management committee have been trained on the starters' package, which includes the following:

Facts for Life (MoH/UNICEF publication): this provided caregivers and professionals with basic knowledge regarding health, hygiene, nutrition and child safety, which they are expected to apply within the centre as well as transfer to parents;

ECD kit (UNICEF): this training enabled caregivers to engage in meaningful play with children visiting the centre and to demonstrate methods of early stimulation and play-based learning activities to their parents;

Care for Child Development module (developed by UNICEF Rwandan Country Office): this training enabled caregivers to hold multiple sessions with parents that will promote an early nurturing environment and positive child-parent relationships.

This was just a starters' package providing basic knowledge and skills to provide activities for the first quarter of operations only. To expand services and improve their quality and chances of sustainability, more capacity development of caregivers, management and local authorities is required as follows: (1) Caregivers (2) Programming and preparations for outreach and centre-based sessions, (3) Parenting (revised + additional modules), including Early stimulation and play-based learning (e.g. reading and story-telling, creative expression, development of low cost materials) (4) Key-household health and hygiene practices (linking with CHW and health providers), (5) Nutrition counselling and cooking demonstrations (linking with CBNP and CHW), (6) Child safety and child protection (linking with DSW, Police and CBCCV), (7) School readiness and transition to primary school (linking with nearby school), (8) Education on HIV prevention and treatment and referral mechanisms (9) Management (ECD professional + Management Committee) (10) Planning and Programming (10) Financial management (11) Human Resource management (12) Income-Generation Activities (13) Local authorities (Cell, Sector, District) (14) Planning and budgeting; (15) Monitoring and QA (16) Resource mobilization and IGA

Output 1.2: 1,800 children between the ages of 0-6 and their families accessing quality community-based integrated ECD&F services in the nine newly constructed ECD&F centres in Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamasheke, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts.

Activity 1: Preparations for implementation of services

(1) Mobilization of District and local authorities; (2) Community needs assessment and data collection for baseline; (3) Set up centre management committee; (4) Recruitment of caregivers.

Activity 2: Model Service Delivery

For each centre Imbuto Foundation is currently recruiting 5 caregivers and 1 ECD professional in partnership with the District authorities, who will, following initial training, be providing ECD

services. The centres will be managed by the ECD professional and a parents' committee who will also receive initial training on management.

The centres will provide the following package of services:

- (1) Awareness raising and communication ;(2) Parenting programme ;(3) Play-based learning.
- (4) Key family and community health practices, (5) Good nutrition and cooking demonstration (with the support of community health workers).

These services will be delivered through both outreach (on weekday mornings and Fridays) and centre-based sessions with parents and children (four afternoons per week), as well as through home based programmes.

For the purpose of the sustainability of the services, Imbuto Foundation has developed a Memorandum of Understanding with all District authorities to continue the technical and financial management of the centre from 1st July 2015.

Activity 3: Capacity development of caregivers, management and local authorities

Caregivers

- (1) Programming and preparations for outreach and centre-based sessions
- Parenting;(2) Early stimulation and play-based learning (3) Key-household health and hygiene practices (linking with CHW and health providers);(4) Nutrition counselling and cooking demonstrations (linking with CBNP and CHW);(5) Child safety and child protection (linking with DSW, Police and CBCCV); (6) School readiness and transition to primary school (linking with nearby school); (7) Education on HIV prevention and treatment and referral mechanisms (8) Management (ECD professional + Management Committee) ;(9) Planning and Programming ;(10) Financial management;(11) Human Resource management ;(12) Income-Generation Activities; (13) Local authorities (Cell, Sector, District); (14) Planning and budgeting ;(15) Monitoring and QA
- (16) Resource mobilization and IGA

Activity 4: Resource mobilization and income-generation activities

With a view of sustainability upon project phase-out after one year of operation, Imbuto Foundation will be working closely with UNICEF to help the centre generate its own resources to sustain its operational and staffing costs. A strategy will be developed based on the community's specific conditions and capacities (looking at potential parental contributions but also potential community-based IGA through e.g. women's NGOs, agricultural or handicraft production etc.) whilst tapping into regional and national potential support systems, such as the CHW cooperative-scheme and the VUP Public Works programme. This strategy will be piloted, monitored and evaluated. To do so, UNICEF will provide consultancy support to design IGA models for Kayonza as well as for the 4 new centres.

2. COMPONENT II: EDUCATION

Component Name [Title]	EDUCATION
Total budget in USD	229,246 USD
Budget requested to the One Fund in USD	180,427 USD
Participating Agencies	UNICEF

	(One Fund balance from last year equivalent to 48.819 USD to be allocated)
UNDAP results addressed	<p>UNDAP Result Area 3: Human Development</p> <p>OUTCOME 3.1: Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services</p> <p>Output 3.1.3 Capacities of the education sector to deliver inclusive quality basic education strengthened.</p>
Component outputs	<p>Output 1: Community awareness on girls' education issues is increased</p> <p>Output 2: Rewarded girls are equipped with life skills, given a platform for excellence and inspired to be role models</p> <p>Output 3: Increased listening skills and interest in reading among children</p>

2.1 BACKGROUND

Rwanda has known a steady progress in ensuring that all children, girls and boys access education with the primary net enrollment rate for girls growing from 95.1% in 2008 to 98% in 2012 and the net enrollment rate for boys growing from 93.3% in 2008 to 95% in 2012 (statistics yearbook Rwanda 2013). Through the government's efforts to promote education, Rwanda is on track to achieve the education related Millennium Development Goals and the Education for All goals.

Sub component 1: Promotion of Girls' Education Campaign:

With the advances in the education sector in Rwanda, considerable progress was achieved in girls' education sub-sector. Through the implementation of the Girls' Education Policy, which is the driving engine in achieving the gender equity and equality in education, affirmative actions that increase girls' access, learning and participation in education are undertaken. This campaign contributes to the implementation of the education sector strategic plan by the ministry of education which encourages affirmative actions to ensure equal opportunities for girls as some of the strategic priorities to the progressive elimination of gender disparities in education and training. It is also an implementation of the girls' education policy as a strategy concerned with performance and retention/completion of girls in school.

Though the access to education for girls has improved, the performance of girls is not as good as for boys. The 2012 primary leaving examination results indicate that, under the first division, the percentage of girls was 41.12% against 58.88% for boys, and the 2013 results indicate that the percentage of girls is 42.01% against 57.99 for boys. At the secondary ordinary level, the 2012 examination results revealed that in the first division, only 33.88% were girls and 66.12% were boys. In 2013, 35.70% were girls and 64.30% were boys. (Source: Rwanda Education Board). These disparities in performance in national examinations indicate a need for initiatives that encourage girls to improve their performance.

Through this program, Imbuto Foundation aims at encouraging high academic performance and completion of girls in school, with a particular focus paid on science and technology and TVET courses. This is done through the annual awareness raising and promotional campaigns, where Imbuto Foundation engages the community, especially parents, teachers, local leaders, girls and boys in removing barriers that girls face in the course of their education.

The campaigns have been an effective way of driving a positive behavioural and perception changes on the importance of girls' education. The campaign's assessment conducted in 2011 indicated that 97% of the respondents revealed that the girl child is no longer suppressed; that she is now self-confident whether at school or in the community. Despite that achievement, there is still a need for the campaign to foster more the improvement of the performance and completion of girls in school, as well as the enrolment of girls in science, technology and TVET courses.

This year, Imbuto Foundation will convey its media and promotional messages to bring to the public's attention the importance of girls' education and engage them in finding sustainable solutions. To achieve that, Imbuto Foundation will conduct its annual outreaching Campaign, where the promotional messages will be conveyed through speeches by high level authorities and interactions with the role models and the community. During the campaign, Imbuto Foundation will also reward the Best Performing Girls in national examinations as a means to encourage high performance. Imbuto Foundation will also deliver the messages through printed media, radio, TV and online media. Social media will be used with a particular focus to engage the youth in this initiative. All these channels will spread thematic messages on issues related to girls' performance and dropout, increase awareness and identify sustainable solutions.

The IZIFE (Inkubito z'Icyiza Forums for Excellence) clubs, which are the peer mentorship forums for rewarded girls, will also be closely monitored this year to empower them further. The clubs serve as a means to increase learning and participation of girls in school, as keeping them together breeds competition and the clubs engage them in extracurricular activities as a team.

Sub component 2: Promotion of Reading Culture:

Rwanda has invested efforts in promoting the reading culture among children, parents and the communities at large. Under this regard, community libraries, mobile libraries and other literacy promotion initiatives were undertaken to inculcate reading habits to Rwandan communities. The Rwanda Reads! Initiative was started in 2012 and seeks to ensure promotion of reading across a variety of related areas and target groups, including primary students, out of school youth and adults and pre-school children. The promotion activities are coordinated around 3 pillars of the initiative:

1. Ensuring adequate supply of books and reading materials;
2. Creating a demand for reading among children, parents and teachers;
3. Building capacity of teachers, parents and librarians to engage children in reading.

In partnership with One UN and other stakeholders, Imbuto Foundation has contributed to the initiative, particularly through its second pillar – creating a demand for reading among children, parents and teachers, through communication and promotional events. This is done through the annual Reading Day campaign. The campaign promotes early literacy and numeracy by exposing children to self-learning mechanism while they read for fun. Reading for fun also stimulates language learning to the children.

This year, Imbuto Foundation will continue its Promotion of Reading Culture Campaign to pre-school children by encouraging parents to read aloud and tell stories for their children. Reading aloud for kids is a way of stimulating their interest in books by leading them by example, and storytelling to children develops imagination and cognitive capacities at an early stage as it stimulates thinking. This will help the children to fully achieve their development potential. During the campaigns, Imbuto Foundation will donate books to ECD centres which will increase the children's exposure to reading materials.

2.2 PROJECT DESCRIPTION

Output 1: Community awareness on girls' education issues is increased

Through the awareness-raising campaign events, using the role model approach, Imbuto Foundation will engage the community in a dialogue about the issues girls face in their education. This aims at stimulating key concerned community members, mainly parents, teachers, leaders and girls themselves with the support of their brothers in taking action towards progressive elimination of gender disparities in all aspects of the education. During the campaign, Imbuto Foundation will reward the Best Performing Girls to encourage high performance. Concurrently with the awareness-raising campaign, Imbuto Foundation will raise awareness through media and communication materials and social media.

In addition to the promotional and media campaigns, this year, Imbuto Foundation will celebrate the milestones achieved during the 10 years since the Promotion of Girls' Education Campaign began. Celebrating the achievements will look at the progress made in girls' access, participation and achievements in education, and the impact the campaign had on them. An impact assessment will be conducted as a means to evaluate the public's change in perception about the importance of girls' education and the results of the campaign in terms of behavioural change among others.

Output 2: Rewarded girls are equipped with life skills, given a platform for excellence and inspired to be role models

In order to further encourage girls to perform high, Imbuto Foundation will continue reward the Best Performing Girls in national examinations all over the country. The rewarded girls serve as role models for achievement, high performance and inspire their peers to be excellent. To fulfil these responsibilities, the young girls need to be equipped with life skills and have values worth to emulate. Imbuto Foundation will continuously empower the rewarded girls through IZIFE (Imkubito z'icyeza forums for excellence) clubs, which are secondary school clubs made by Best Performing Girls as peer mentorship groups. This will engage Best Performing Girls who are in universities and young professionals to play their role as role models to the younger girls, and the members of the clubs to be role models to their peers.

Through this partnership agreement, Imbuto Foundation will organize a peer support workshop for those high performing girls who were rewarded in 2013 under the theme "Let us dream big and act". This workshop will provide the girls with tools and a platform for continuous self-development and aspiration towards excellence. Imbuto Foundation has already witnessed through its campaigns that excellence inspires excellence, as rewarded girls act to inspire their peers in clubs and schools throughout the country to emulate their achievements.

Output 3: Increased listening skills and interest in reading among children

The Ministry of Education through Rwanda Education Board, promotes the reading culture for children at home and at school to improve learning outcomes. Imbuto Foundation has contributed to this effort by taking the lead in instilling a reading culture and engaging children to read in a more active way and as a fun activity. This is done through the Imbuto Foundation's Reading Day Campaign which raises awareness among teachers, parents, local leaders and the community at large on the importance of reading. This aims to inculcate reading habits to children at school and at home.

This year, the Reading Day Campaign will focus on pre-school children from poorer communities that have less access to reading materials. The prime target group is the children in ECD centers run Imbuto Foundation. Through this program Imbuto Foundation will encourage parents and caregivers to read out loud and tell stories to the children, as a means to instill in them a passion for books. This will help children to develop basic skills that provide a foundation for lifelong learning at an earliest age possible.

The parents' engagement approach is also expected to increase the responsibility of parents to the education of the children and ensure that education, reading and learning begin at home. The Reading Day Campaign will consist of promotional events in ECD centres and communities with a parallel media campaign that will ensure that parents in Rwanda are aware of the importance of reading for their children.

2.3. PROJECTS EXPECTED RESULTS

Output 1: Community awareness on girls' education issues is increased

Under this output, it is expected that 9,000 community members will be reached out by the awareness raising messages through the promotional campaign. As a result, it is expected that the messages will change the public's attitude towards the enrolment of girls in science, technology and TVET courses, and eventually an increase in the number of girls attending these courses.

Key activities

- To conduct the 2015 Promotion of Girls' Education campaign
- To produce and disseminate promotional materials nation-wide
- To celebrate 10 years of empowering girls

Output 2: Rewarded girls are equipped with life skills, given a platform for excellence and inspired to be role models

Under this output, 800 girls will be monitored and empowered through the IZIFE clubs. The program is expected to continuously produce role models to girls in school in high performance, excellence and positive values. 200 rewarded girls will be empowered through an empowerment workshop with life skills to go and empower others.

In addition to that, a network of Best Performing Girls who are at university and young professionals will be strengthened and act to support the promotion of girls' education initiatives.

Key activities:

- To monitor and facilitate 20 existing Ikubito z'Icyeza clubs in secondary schools

- To conduct one empowerment workshop "Let us Dream Big and Act"

Output 3: Increased listening skills and interest in reading among children

Under the reading promotion campaign, the program is expected to have 200 parents reading and telling stories to their children. These parents will be exemplary to others to promote that valuable habit. It is also expected to have 100 children between 4 and 6 years of age who are able to tell a story. Our campaign will reach poorer communities in 4 districts countrywide.

Key activities:

- To conduct the promotion of reading culture Campaign in 4 ECD centres
- To produce and disseminate promotional materials in the 4 ECD centres

3 COMPONENT III: FAMILY PACKAGE

Component Name [Title]	Family Package
Total budget in USD	280,954 USD
Budget requested to the One Fund in USD	55,954 USD
Participating Agencies	UNICEF (125,000) UNFPA (100,000), UNAIDS, WHO
UNDAP Results addressed	<u>UNDAP Result Area 3: Human Development</u> <u>OUTCOME 3.1:</u> Holistic child, youth and family development. All Rwandan children, youth and families, especially the most vulnerable access quality early childhood development, nutrition, education, protection and HIV prevention and treatment services. Output 3.1.5 Quality integrated comprehensive HIV prevention knowledge and services for pregnant women, children and young people expanded.
Component outputs	<u>Output 3.1:</u> A model using CHWs in the follow up of HIV+ families in the community is piloted and documented in 6 sites of MUSANZE district <u>Output 3.2:</u> Quality Prevention of Mother To Child Transmission (PMTCT) services are accessible to all HIV infected pregnant women and exposed infants in 21 Family Package (FP) sites. <u>Output 3.3:</u> Access and utilization of HIV prevention and ASRH information and services among 10-24 year olds in-and-out-of-schools improved <u>Output 3.4:</u> Coordination and M&E mechanisms strengthened

BACKGROUND

The Family Package project was initiated in 2002 as an addition to the standard clinical services of Prevention of Mother To Child Transmission of HIV by extending basic care and support to parents living with HIV/AIDS and their children. It is implemented through 27 Health Centres located in 6 districts with more than 13,000 beneficiaries.

This project acknowledges the effects of lack of knowledge, stigma and discrimination, gender inequality, food insecurity and poverty as key factors in the transmission and spread of HIV and AIDS that it is why it has got an objective of promoting the following: *sensitization of the community on PMTCT using peer educators, psychosocial support through peer community groups to reduce stigma and promote utilization of available services; socio-economic empowerment; support with health insurance membership for families; and nutritional promotion through income generating activities (IGAs).*

This project has also contributed to a more comprehensive approach to Elimination of Mother To Child Transmission as it is now tackling the primary prevention of HIV to reach adolescents and youth with comprehensive knowledge and services on HIV and Sexual Reproductive Health.

In the course of this proposal, the 420 family package peer educators in the 21 sites will continue to support health centres to reinforce linkages between PMTCT services at the health centers at community level. On another hand, a model using CHWs in the follow up of HIV+ families in the community will be piloted in 6 sites of MUSANZE district with the aim of informing policy makers on whether it is feasible for CHWs to follow up mother-infant pairs in need of HIV services. The focus will also be put on strengthening the access and utilization of HIV prevention and ASRH information and services among youth.

3.1 PROJECT DESCRIPTION

Output 1.A model using CHWs to follow up HIV+ families in the community to improve quality of PMTCT services is implemented in 6 FP sites in MUSANZE district

The approach of peer education programme has been the mainstay strategy for follow-up of HIV infected women and families in the family package programme. The approach is very popular due to the confidence HIV infected clients have in the peer educators in maintain confidentiality. Unfortunately, the approach is vertical in nature as it is not part of the national Health care system, is dependent on external funding and will not be sustainable in the long run. In view of that, UN, Imbuto, Rwanda Biomedical Center (RBC) and the Ministry of Health (MOH) community health desk plan to explore ways to enable community health care workers to support retention of HIV positive mothers and families in treatment and care. This initiative come as a recommendation of a consultative meeting held among stakeholders (developmental partners, IF and RBC) to explore possibilities of community health workers to address HIV/AIDS issues especially follow-up of mother and families at community level bearing in mind ethical issues and avoiding stigma and discrimination. As a way forward, RBC and stakeholders agreed to model, in a few facilities, the feasibility for community health care workers to support all women and children in retention in care without necessarily having to know their HIV status, the reason being that the needs of mothers and children are more than just HIV. In a follow-up meeting, UN, RBC, IF and community health desk

agreed to jointly implement and monitor the project with the aim of informing policy makers on the feasibility to follow up mother-infant pairs in need of HIV services using CHWS.

Implementation of this initiative will involve review of the recent manual integrating HIV, AIDS and STIs in community health, train 180 CHWs in detection, management, and referral for HIV and STI's. The trained CHWs will be assigned in the catchment areas of 6 FP sites in Musanze District to implement the work that was usually performed by peer educators. On average we will have at least 1 CHW per village preferable the one in charge of maternal health.

An operational research approach will be used in the implementation, monitoring and evaluation of the model. This will require development of a protocol detailing a clear operational plan including additional tools for monitoring

Output 2: Quality PMTCT services are accessible to all HIV infected pregnant women and exposed infants in 21 FP sites.

The current HIV National Strategic Plan 2013-2018 (p.29) advises that more emphasis should be put in community engagement ranging from sensitization for service utilization to improved adherence of those enrolled in the programme for follow up visits. A sustainable linkage between facilities and the community should be established and correctly monitored.

The Family Package has demonstrated the importance of using the peer educators (PE) approach in supporting health centres to address HIV issues in the community. Imbuto Foundation will continue using these PEs to contribute to NSP targets.

The approach of Performance Based Financing will be applied to make sure peer educators are more involved /greatly contributing in the linkages of pregnant women and exposed infants from the community to the health centres. This will be done through mobilization and follow up of all pregnant women for ANC, ARV uptake, CD4 count, family planning, male partners involvement for ANC & Family Planning, follow up of exposed infants , couple and Family HIV testing.

At the health centre, a focal point will be identified and will be responsible of follow up and report on the indicators related to the work of PEs as far as the PBF is concerned.

The current national infant feeding initiatives promote breastfeeding for all women regardless of their HIV status. The recommended feeding methods for infants born to HIV positive women include:

- Exclusive breastfeeding up to six months.
- Introduction of appropriate complementary foods at six months and continuation of breastfeeding until 18 months while mother is still on ARVs
- After 17 months, progressive cessation of breastfeeding over one month when safe and adequate replacement food is available. (EMTCT strategic plan 2011-2015, p.42)

In order to support the national strategy for infant feeding counselling and nutrition, Imbuto Foundation will use peer educators to:

- Link HIV+ women and their infants to community networks that provide infant feeding counselling and support [District Plans for elimination of Malnutrition (DPFM)]; Igikoni cy'umudugudu).
- Follow up on exposed infants cases referred to the HC from the community based nutrition network

- Track breastfeeding mothers on ARV/ART who missed appointment or lost to follow up. By PE.

Output 3: Access and utilization of HIV prevention and ASRH information and services among 10-24 year olds in-and-out-of-schools improved

- In order to enhance primary prevention, youth sensitization will be reinforced and provided through youth centers, health centres and health clubs initiated in school and out of school using peer educators.

Working with Youth centres and youth council

- 4 Youth centres in RUBAVU district will be supported financially and technically to organize sensitization events on Adolescent Sexual and Reproductive Health (ASRH&R and HIV/AIDS and at the same time youth will be receiving voluntary Counselling and testing services.
- In order to create awareness in adults and parents on sexuality education, Rubavu Youth friendly centre will be supported to organize and conduct sector based Parent Adolescent Communication forums. This will be conducted in 2 cohorts of 120 participants (parents adolescent) throughout the year.
- Through the youth council, all the 32 existing community clubs will be provided with facilitation fees to continue HIV prevention and Adolescent and Youth Sexual and Reproductive Health and Rights (AYSRH&R related activities (drama, poems, cartoons, newsletters, and entertainment ...in the community.
- In Addition, an action focusing on adolescent girls has been thought. About 16 million adolescent girls aged between 15 and 19 give birth each year. For some of these young women, pregnancy and childbirth are planned and wanted, but for many others they are not. Childbirth at an early age is associated with greater health risks for the mother. In low- and middle-income countries, complications of pregnancy and childbirth are the leading cause of death in young women aged 15–19 years. The same scenario is observed in adolescent girls of Rwanda.

By ensuring that adolescent girls are equipped with knowledge and skills they will need, encouraging and supporting girls and young women to stay in school, preventing marriage and pregnancy in childhood, community based campaigns to fight teenage pregnancies and GBV will be organized in Rubavu District.

Male circumcision for youth (MC)

From the experience, it has been observed that the demand of youth for MC is high. And through this proposal, Imbuto foundation will support health centres to provide male circumcision to 3000

Youth aged 15-24 in Rubavu District. This will contribute in achieving the national targets of 66% by 2018. (NSP 2013-2018). However sensitization on MC will continue focusing on the message that MC alone cannot provide complete protection against HIV, people should continue to use other prevention methods such as male and female condoms, delaying sexual debut and reducing the number of sexual partners.

Working with Schools

Reinforcing Parent Adolescent communication initiatives will continue in 5 schools of Rubavu District and this year it will involve 2 cohorts of 60 participants each. These cohorts will be additional to 1 cohort of 60 parents and their adolescents in process of communication since beginning of this year. These PAC initiatives contribute to service demand creation and accessibility of ASRH&R services because participants especially parents understand the importance of sexuality education as well as facilitating adolescents to attend ASRH&R activities with their peers and access to services at health centres.

Every school club will be provided with facilitation fees to continue HIV prevention and AYSRH&R related activities (drama, poems, cartoons, newsletters, and entertainmentat school.

Among the challenges we observed in the project implementation last year, there are still issues of stigma and discrimination among youth especially in school. In this regard, for the coming year Imbuto Foundation will work with schools to organize school based campaigns to fight against HIV stigma among in and out of school youth. The campaign will be also an opportunity also to provide VCT to youth and organise for male circumcision during school holidays.

Working with health centres:

In order to reinforce HIV disclosure and support groups especially for adolescents, Imbuto Foundation will provide technical and financial support to the 5 health facilities of Rubavu District.

This will be done through regular meetings of 10 young positives at each of the health centres and nurses to share experiences and have information around *positive prevention, living positively, sexuality education, peer education on availability and use of condoms and family planning methods... adherence to HIV treatment.*

Youth corners at health centres will be equipped with communication materials on ASRH&R including posters and DVDs that will be played when youth are waiting for services at health centre.

In addition to that nurses will organize community outreaches with young positives who will be ready to share testimonies and experiences with the youth in the community. This will be done once a quarter.

Finally, in order to continue creation of service demand, youth friendly brochures containing ASRH&R minimum package of services will be produced and distributed to all young people who will be participating in ASRH&R sessions in youth centres, schools, health centres and community outreach activities.

Output 4 Coordination and M&E mechanisms strengthened

For sustainability and ownership purposes, Imbuto foundation will work with the network of people living with HIV as a community based structure that will help in close monitoring of activities of peer educators and the Rubavu Youth friendly center in monitoring of ASRH&R activities.

Imbuto Foundation has already requested for partnership in this regards, and the network agreed to mandate district coordinators to support these activities in the 21 family Package sites. He/she will be supervising peer educator's through regular monthly meeting or field visits where necessary. After the meetings, a monthly report will be compiled and sent by the coordinator to Imbuto Foundation.

Rubavu Youth friendly center will also play a role of monitoring entity in community based activities and to follow up ASRH&R activities done by health centers, school and out of school based clubs in Rubavu District (in school and in the community)

In order to share lessons learnt, challenges and solutions, Imbuto Foundation will be organizing quarterly meetings with RRP+ coordinators, nurse's focal points and presidents of PEs and Rubavu Youth centre in 5 Districts.

Finally, It is planned that Joint supervisions visits by IF staff and partners will be happening for a better coordination and experience sharing.

PROJECT EXPECTED RESULTS

Output 1: A model using CHWs in the follow up of HIV+ families in the community is piloted and documented in 6 sites of MUSANZE district

Key activities:

- Advocacy/orientation meeting with RBC and Community Health Desk to involve the heads of health facilities in supporting the model (DH, HC)
- Rapid assessment on attitudes of facility managers and services providers

- Capacity building of CHW's on integration of HIV/AIDS and STI's in community health: their tasks and jobs aids (tools)
- Training of nurses on the implementation of the model including M&E tools
- Reinforce linkages between PMTCT services at the health centres & at community level: Mobilize and follow up pregnant women for ANC, ARV uptake, CD4 count, FP, male partners involvement for ANC & FP, exposed infants born from HIV+ families, Family HIV test, infants follows up...).
- Conduct an Operational Research to monitor the model
-

Output 2: Quality PMTCT services are accessible to all HIV infected pregnant women and exposed infants in 27 FP sites.

Key activities:

1. Reinforce linkages between PMTCT services at the health centres & at community level: Mobilize and follow up pregnant women for ANC, ARV uptake, CD4 count, FP, male partners involvement for ANC & FP, exposed infants born from HIV+ families, Family HIV test, infants follows up...).
2. Provide financial and technical support to Health Centers to provide family VCT to all families with one or 2 parents living with HIV
3. Link HIV+ women and their infants to community networks that provide infant feeding counselling and support (District Plans for elimination of malnutrition -DPEM): Igikoni cy'umudugudu...) by Peer Educator.

4. Follow up on exposed infants cases referred to the HC from the community based nutrition network.
5. Track breastfeeding mothers on ARV/ART who missed appointment or lost to follow up.

Output 3: Access and utilization of HIV prevention and ASRH information and services among 10-24 year olds in-and-out-of-schools improved.

Key activities:

1. Support health centers to provide male circumcision (to adolescents 10- 18 years old) especially during school holidays.
2. Support youth centers on the provision VCT services and sensitization on ASRH&R.
3. Support health centers to provide male circumcision (to adolescents and youth 10- 24 years old especially during holidays).
4. Support technically & financially schools to conduct PAC at school (2 cohorts of 120 at the same time).
5. Support Rubavu Youth friendly center to conduct sector based PAC for out of school youth aged 10- 24 years old) (2 cohorts of 120 at the same time).
6. Support clubs in and out of schools in ASRH&R sensitization activities.
7. Organize community and school based campaign to fight teenage pregnancies, GBV and HIV stigma among in and out of school youth.
8. To support Health centres with communication materials including DVDs, posters, etc.
9. Production of brochures on minimum package.
10. Provide technical and financial support to health facilities to implement the minimum package of services for Adolescent Living With HIV (- Positive prevention, living positively, sexuality education, peer education on availability and use of condoms and family planning methods... adherence to HIV treatment...).
11. Conduct community sensitization on ASRH&R and HIV prevention by nurses and youth positives (once a quarter).

Output 3.4 Coordination and M&E mechanisms strengthened

Key activities:

1. Orientation meeting with stakeholders at district level (RRP+, Youth Friendly Centre Health centers , president of Peers Educators)
2. Support to RRP+ for M&E, supervisions of PEs activities
3. Support financially and technically the Rubavu Youth friendly center to conduct community based activities and to follow up ASRH&R activities done by HCs, school and out of school based clubs in Rubavu District (in school and in the community)
4. Joint supervisions visits by IF staff and partners

COMPONENT 4: YOUTH EMPOWERMENT AND MENTORSHIP PROGRAM	
Component Name (Title)	Youth Empowerment and Mentorship Programme
Total budget in USD	263,586 USD
Budget requested to the One Fund in USD	0
Participating Agencies	UN Women, UNDP (100,000), UNFPA
	One fund balance from last year equivalent to 163,586 USD to be allocated
UNDAP results addressed	<p><u>UNDAP Result Area 2: Accountable Governance</u></p> <p>Outcome 2.1: Citizen Participation and empowerment: Accountability and citizen participation in sustainable development and decision-making processes at all levels improved</p> <p>Output 2.1.5 Citizens especially women, youth and vulnerable groups participate in decision making and democratic processes at all levels.</p>
Component outputs	<p>Output 4.1: The existing platform for young people is adequately resourced and strengthened to include upstream support to enhance leadership and communication skills amongst university and secondary students.</p> <p>Output 4.2: Young women are equipped with critical thinking, decision making and confidence building skills</p> <p>Output 4.3: A platform of excellence, innovation and entrepreneurship amongst Rwandan youth, especially young professionals, is established.</p>

4.1 BACKGROUND

A country's future strongly depends on developing and retaining informed, educated and motivated youth as model citizens who embrace a sense of social cohesion and civic responsibility. However, the country's current opportunities for the youth to develop their skills and receive relevant employment experience remain severely constrained by inadequate and often inequitable options. As a result, this often leads to undesirable consequences such as unemployment, disenfranchisement, and greater vulnerability to crime, HIV/AIDS, and migration (skilled and unskilled).

In Rwanda, the youth represent the largest demographic group 62% are under 25% and 41 under 15 years (2014 National Household Survey) of the population. They are one of the key constituents and stakeholders in the national development process demonstrating considerable potential as development resources and as agents of social change. While youth have always been seen as an important beneficiary in terms of receiving developmental services, sufficient emphasis needs to be placed on strengthening the competencies and professional skills of youth and channel them towards development, particularly developing leadership and other skills to achieve Millennium Development Goals.

The increasing benefits of the country's growth for the past couple of years have been unevenly distributed within the different strata of the society, including youth. The Government of the Republic of Rwanda has realized this and moreover, in the EDPRS2 special attention is given to the challenges and opportunities young people face in order to strengthen their participation in the social, economic and civic development of Rwanda.

With support from the One UN, Imbuto Foundation, through its Youth Empowerment & Mentorship Program (YEMP) conducted a study on youth on the key components of YEMP, which are:

- Building leadership capacities amongst youth;
- Creating platforms for youth engagement with leaders;
- Building capacities of youth civil society organisations.
- Youth participation in decision that affect them,
- Young people's skills to make healthy choices.
- Youth livelihood and employment,
- Need of youth in terms of empowerment.

The findings indicate that the government has shown its commitment to bring young people on board both as a significant resource for the development process and key recipient of the latter process. Such commitment has been materialized through the setting up of a number of policies and laws that focus on youth among other development stakeholders. These include the Constitution of Rwanda, the Rwanda Vision 2020, EDPRS, the community development policy, the National Decentralization Policy, the National Employment Policy, to name but a few. While some Civil Society organisations (CSOs) and Faith Based Organisations (FBOs) focus on Youth, financial limitations and poor coordination stand as a major hindrance to the coverage of all youth in Rwanda. In addition, schools (especially secondary and tertiary ones), depending on what they teach, emerged as an important space for promotion of some leadership skills such as entrepreneurship and public speaking. The study indicated that majority (80% of the 600) of the youths who were interviewed in this study had not had any experience in leadership skills thus implying low level of youth participation.

Based on the above findings, Imbuto Foundation will for the next six months continue to work with the Ministry of Youth and ICT (MYICT) and ensure that activities conducted by Imbuto Foundation feed into the National Sector Strategic Plan for Youth. This will lead to an effective mechanism of coordinating youth empowerment initiatives for a better distribution of those initiatives both geographically and among all youth categories. Imbuto Foundation will put in place a mechanism aimed at following up and tracing Imbuto Foundation beneficiaries as well as Youth Forum participants after they have acquired skills from the Youth empowerment activities such as the Debates Programme, Mentorship Programme and Toastmasters programme. This will allow the Foundation to consistently document the changes/impacts their initiatives have yielded.

One of Imbuto Foundation's strengths lies in creating platforms in the form of Youth Forums to engage, educate and empower youth. Imbuto Foundation will continue to use this approach to address the issue of inadequate and unsustainable platforms for youth. During these Youth Forums, youth are informed on their rights in nation-building and democratic participation and are inspired and motivated to exercise their rights through role models (international & national) who share experiences and build knowledge. Importantly, the Youth Forum Series creates a platform for youth to engage with leaders and for issues amongst youth to be put on the national agenda.

Imbuto Foundation will also address the challenge of lack of sufficient leadership capacity through its current programs that focus on leadership, communication and mentorship amongst youth.

PROJECT DESCRIPTION

Imbuto Foundation employs an 'engage, educate and empower' approach to implement its activities based on Youth Empowerment. The details of the YEMP components and strategies are as follows.

Output 4.1: The existing platform for young people is adequately resourced and strengthened to include upstream support to enhance leadership and communication skills amongst university and secondary students

4.1.1 Rwanda speaks!

Rwanda Speaks! is Imbuto Foundation's most recent youth empowerment initiative. with the objective of enhancing skills in public speaking, leadership and mentorship *Rwanda Speaks!* was established in August 2010 by Imbuto Foundation in partnership with UN Women. This youth empowerment project aims at contributing to the development of Rwanda's future leaders, by equipping the Rwandan youth with confidence in public speaking and communication, which are hallmarks of leadership. A key characteristic of activities under the *Rwanda Speaks!* Project is self-development, carried out either through debate, mentorship and peer-coaching. The initial one-year phase of *Rwanda Speaks!*, considered a pilot phase, will be undertaken primarily in urban areas. Thereafter, *Rwanda Speaks!* Will be scaled-up to target youth in rural areas, thus providing the same opportunities for youth across the country.

4.1.2 Partnerships with universities to support youth to develop leadership and communication capacities

This activity builds on the existing *Rwanda Speaks!* Toastmaster Clubs Program. Toastmaster Clubs are designed to equip Rwandan university students with dynamic skills in the art of public speaking, analytical listening and building confidence, amongst other things. The university Toastmasters Clubs are affiliated to Toastmasters Club International, a non-profit educational organization that teaches public speaking and leadership skills through a worldwide network of meeting locations.

The Toastmasters Clubs targets university students, aged between 18 to 30, from all years of university i.e. 1st year to 4th year. They meet twice a month to discuss and polish their skills in communication through peer-evaluation and coaching, based on club manuals provided by Toastmasters International. Discussion topics are agreed upon by club members prior to each meeting, which include national and international issues, amongst other topics. All this is aimed at building confidence in public speaking; improving club members' oral expression and thought; promoting the habit of analytical listening; developing capacity for leadership amongst the club members, and fostering and encouraging "Better Listening, Thinking and Speaking". To date these clubs have produced about 50 emerging young leaders and is active in 2 of the main colleges of the University of Rwanda.

4.1.3 Enhance public speaking and communication skills, as key areas of leadership

What better way to illustrate public speaking than through formal public debates? This is what the *Rwanda Speaks!* TV & Radio Debate Show sets out to do, targeting Rwandan youth. Taking place

once a month, the *Rwanda Speaks!* Debate shows are organized between students in secondary schools or in universities and young professionals.

The *Rwanda Speaks!* Debate program will expand to all youth centres countrywide adding to the current 6 in 6 different districts. As a means to provide a comprehensive approach across components, we will incorporate topics on HIV and ASRH in order to educate and raise awareness on these issues in all debate clubs. In addition we will join a partnership with the Family Package supported youth center in Rubavu and included

4.2.1 Output 4.2: Young women are equipped with critical thinking, decision making and confidence building skills

To support the existing cohort of mentees and their respective mentors

The mentorship program aims to create a mentorship process whereby vulnerable girls are mentored by Rwandan leaders from different sectors; government, private sector or civil society. These mentors are selected based upon their display of leadership, mentorship and/or communication capabilities.

The mentors equip the young mentees with tools and skills to become responsible adults who are accountable for their actions – capable of confidently expressing themselves and communicating effectively with others, and adopting positive values. This activity aims to increase mentees' knowledge and awareness in areas such as citizen participation and engagement, HIV/AIDS and reproductive health; critical thinking and time management; trans-generational parent-child communication, all which enhance the mentees' confidence amongst peers and adults. Currently, there are 300 young but vulnerable girls from universities all over the country being mentored by about 100 mentors

Output 4.3: A platform for excellence, innovation and entrepreneurship amongst Rwandan youth, especially young professionals, is established

4.3.1 Youth Forum Series

Through the continuation and scale-up of this successful model, secondary and university students, and young professionals from private, public and civil society sectors will be mobilized, so as to engage them in learning different professional and entrepreneurship skills through Youth Forums and Youth Camps. Several cohorts will go through this empowerment programme for the next 9 months. Imbuto Foundation will put in place a mechanism aimed at following up and tracing Imbuto Foundation beneficiaries as well as Youth Forum participants after they have acquired skills from the Youth empowerment activities such as the Debates programme, Mentorship Programme and Toastmasters programme. Monitoring tools will be developed and used to monitor progress. This will allow the Foundation to consistently document the changes/impacts their initiatives have yielded.

4.3.2 Capacity Building Workshops

As a means to empower the youth through different skills, this program will see to the capacity building of youth led initiatives as a means of empowerment but also to encourage community based organizations to better deliver to the needs of the youth today. These workshops will see through a group cohort on a yearly basis to better monitor the impact and progress on their organizations and beneficiaries

4.2 PROJECTS EXPECTED RESULTS

Output 4.1: The existing platform for young people is adequately resourced and strengthened to include upstream support to enhance leadership and communication skills amongst university and secondary students

Key activities:

- Establish partnerships with universities to support youth to develop leadership and communication capacities
- Enhance public speaking and communication skills, as key areas of leadership

Output 4.2: Young women are equipped with critical thinking, decision making and confidence building skills

Key Activity

- To support the existing cohort of mentees and their respective mentors

Output 4.3: A platform for excellence, innovation and entrepreneurship amongst Rwandan youth, especially young professionals, is established

Key activities:

- Organize Youth Forum Series on youth empowerment
- Organize Capacity Building Workshops

VI. Economic Empowerment (IMALI)

COMPONENT 5. Economic Empowerment	
Component Name (Title)	IMALI
Total budget in USD	60,000USD
Budget requested to the One Fund in USD	60,000USD
Participating Agencies	UN Women (60,000 USD)
UNDAP results addressed	<u>UNDAP RESULT AREA 1: INCLUSIVE ECONOMIC TRANSFORMATION</u> OUTCOME 2: Diversified economic base allows Rwandans to tap into and benefit from expanded international, regional and local markets, and improved agriculture value-chains. Output 1.2.1. Strengthened agricultural innovation and value chain
Component outputs	Output 1: Improved partnership between imbuto foundation, local authorities and beneficiaries, Output 2: Improved skills of new technology production and tomato transformation Output 3: Tomato production increased

4.3 BACKGROUND

Women in rural areas have too much unpaid work that can hinder their development. Traditionally, Rwandan women do all household chores such as childcare, cooking, fetching water and firewood, among many others. This comes on top of their responsibilities in income-generating activities like agriculture. Over 80% of people involved in agriculture are women in rural areas, but it has been observed that those economic activities are not very successful because those women have to spend too much time taking care of their families and the majority of women in rural areas do not have a high level of education which also renders their agricultural work inefficient since they do not use fertilizers or selected seeds. The recent statistics show that women today account for about 54 per cent of the Rwandan population, and many households are headed by women and orphans.

Due to the above challenges affecting women's ability to develop themselves and their rural areas in general, top government officials, representatives from the UN and various non-governmental organizations met to discuss ways of improving the lives of women in rural area in Rwanda to boost economic prosperity. Various initiatives have been introduced to ensure an enabling environment for women to play their role and contribute to different development areas. This is achieved by partnering with selected members of the community in income generating activities, particularly the intensification of tomato and mushroom growing.

The objective of this project is to improve the living standards of vulnerable groups, especially women.

4.4 PROJECT DESCRIPTION

Output 1: Improved partnership between Imbuto foundation, local authorities and beneficiaries.

Imbuto Foundation will draw on partnerships developed with technical organizations such as the National Agriculture and Export Development Board, the Rwanda Agriculture Board and the Agriculture Technology Demonstration Centre. These institutions have already collaborated with Imbuto Foundation in Imali and other projects. Imbuto Foundation will continue to support 10 existing cooperatives and new cooperatives will be selected from family package and ECDs components to strengthen their income generating by training them in new technology, basic needs in business and procurement, and greenhouse management.

Output 2: Improved skills of new technology production and tomato transformation

The Imali project aims to enhance knowledge and skills of beneficiaries in high-productivity agriculture technologies (intensification of crop production, seed production), access to seed funding (purchase of inputs), greenhouse management and access to agricultural markets (value chains). The main strategies will involve:

Training in efficient horticulture techniques: intensify production of horticulture commodities through improved modern agricultural technologies. This involves the recruitment of an agricultural and value chain expert, who will provide beneficiaries with the opportunity to use alternative farming methods such as agricultural extension practices and integrated pest management, as well as effectively market products grown.

Training in effective greenhouse management processes: the production of vegetables and fruits in greenhouses can significantly contribute to the decrease of poverty in rural areas of Rwanda. Compared to open-field products, greenhouse crops such as tomatoes tend to have a higher yield, when grown properly. By increasing farmers' income, this new approach positively impacts their well-being through better access to health and education services. Economic opportunities can also expand through new job creation by small and medium-sized farmers who have done well. With potential markets to sell greenhouse products, these can readily become cash crops. Higher productivity in greenhouses is due to the fact they:

- Regulate environmental factors and overcome adverse environmental conditions that otherwise affect plant growth
- Allow the production of high valued crops because of a protected environment where plants pest and diseases are controlled
- Allow production of crops throughout the year.

Training in tomato transformation and basic business skills

Output 3: Tomato production increased

Beneficiaries will be offered start-up capital to buy farming inputs and cover related costs. To qualify for this funding, they will need to have completed a micro-project training designed to that effect. Imbuto Foundation will transfer funds to selected associations/cooperatives for management. However, Imbuto Foundation will still oversee implementation of activities and use of funds.

The main tomato markets in Rwanda are supermarkets, hotels/lodges, restaurants and individual consumers. The only tomato processing is by SORWATOM in Kigali town. The market does not have concerns over the varieties of tomatoes produced in Rwanda. Max/min prices are determined by seasonal supply patterns with a higher price paid for improved quality and Quantity. The clients/beneficiaries will be trained on how to penetrate/ get the market for their products and retain the market by satisfying the consumer's needs.

4.5 PROJECT EXPECTED RESULTS

Output 1: Improved partnership between Imbuto foundation, local authorities and beneficiaries.

Key activity:

- To identify CBOs

Output 2: Improved skills of new technology production and tomato transformation

Key activities:

- To organize a training for beneficiaries in new technology, Green House Management.
- To organize training in market value chain, mentorship of the clients and business skills.

Output 3: Tomato production increased

Key activities:

- To install the Green houses
- To construct the pond for irrigation
- To provide technical support
- To provide seed fund support to beneficiaries in installation of transformation unit.

Output 4: Monitoring and Evaluation Improved

Key activities:

- To conduct meeting regularly with authorities
- To collect and analyze data
- To design the brochures and booklet
- To produce a documentary film

PROJECT LOGICAL FRAMEWORK:

I. Result Hierarchy	Early Child Development	Indicator	Baseline	Target	Means of verification	Geographical coverage
UNDAF Output 3.1.1 Capacity of government institutions and communities to expand equitable access to quality integrated child and family services improved						
Output 1.1: 150 children between the ages of 0-6 and their families have access to quality community-based integrated ECD services in Kayonza District (Mukaranga Sector / Nyagatoru Village)	Act. 1.1.1 Model Service Delivery (Package of interventions: awareness raising and communication, parenting programme, play-based learning, key family and community health practices, nutrition counselling and cooking demonstration, and home based visits.)	Number of children and their families accessing quality integrated ECD services	100	150	Field Visits	Kayonza District
		<ul style="list-style-type: none"> Number of home visits conducted per quarter Number of centre-based sessions conducted per quarter Number of families supported by the home based programme 	Baseline: 0 Baseline: 4 Baseline: 0	Target: 36 Target: 48 Target: 40	Monitoring visits Quarterly report Calendar of activities Centre records of home visits and sessions	Kayonza Mukaranga Sector / Nyagatoru Village Rural Areas to be decided National
Act. 1.1.2 Capacity Development of caregivers, community members, management and local authorities		<ul style="list-style-type: none"> Number of caregivers with increased capacity Number of local authorities with increased capacity to support ECD services Number of community members with increased capacity to contribute to the management of the 	Baseline: 6 Baseline: 0 Baseline: 5	Target: 6 Target: 6 Target: 9	Monitoring visits Quarterly report Training plans and reports	

i. Result hierarchy Early Child Development	Indicator	Baseline	Target	Means of verification	Geographical coverage
	<ul style="list-style-type: none"> • Number of parents provided with parenting education and support. • Number of days of training for caregivers per year • Number of days of training of management per year • Number of sessions with local authorities 	Baseline: 100 Baseline: 5 Baseline: 5 Baseline: 5	Target: 100 Target: 10 Target: 10 Target: 10		
Act. 1.1.3 Resource Mobilization and IGA	Number of parents trained and involved in income generating activities Number of activities generating income	Baseline: 0 Baseline: 0	Target: 40 Target: 2	Monitoring visits Quarterly report Centre records of IGA	
Output 1.2: 1,800 children between the ages of 0-6 and their families accessing quality community-based integrated ECD&F services in the nine newly constructed ECD&F centres in Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamashoke, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts.	Number of children and their families accessing quality integrated ECD services	0	1,800	Field Visits	Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamashoke, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts.

I. Result Hierarchy Early Child Development	Indicator	Baseline	Target	Means of verification	Geographical coverage
Act. 1.2.1 Preparations for implementations of services at Kayouza	<ul style="list-style-type: none"> Number of caregivers recruited per centre in Q3 	Baseline: 0	Target: 54	Quarterly report List of management committee Staffing list	Nyarugenge, Gasabo, Gakenke, Nyabihu, Nyamagabe, Nyamagabe, Ngoma, Rwamagana and Gicumbi Districts.
Act. 1.2.1 Model Service Delivery (Package of Interventions: awareness raising and communication, parenting programme, play-based learning, key family and community health practices, nutrition counselling and cooking demonstration, and home based visits.)	<ul style="list-style-type: none"> Number of home visits conducted per quarter Number of centre-based sessions conducted per quarter <p>Number of families supported by the home based programme</p>	Baseline: 0 Baseline: 4 Baseline: 0	Target: 36 Target: 48 Target: 360	Monitoring visits Quarterly report Calendar of activities Centre records of home visits and sessions	
Act. 1.2.3 Capacity Development of caregivers, community members, management and local authorities	<ul style="list-style-type: none"> Number of caregivers with increased capacity Number of local authorities with increased capacity to support ECD services Number of community members with increased capacity to contribute to the management of the ECD centre. 	Baseline: 0 Baseline: 0 Baseline: 0	Target: 54 Target: 54 Target: 45 Target: 900 Target: 10 Target: 10 Target: 10	Monitoring visits Quarterly report Training plans and reports	

I. Result Hierarchy Early Child Development	Indicator	Baseline	Target	Means of verification	Geographical coverage
	<ul style="list-style-type: none"> * Number of parents provided with parenting education and support. * Number of days of training for caregivers per year * Number of days of training of management per year * Number of sessions with local authorities 				
Act. 1.2.3 Resource Mobilization and IGA	Number of parents trained and involved in income generating activities Number of activities generating income	Baseline: 0 Baseline: 0	Target: 360 Target: 2 per visits centre	Monitoring report Quarterly Centre records of IGA	
Activity 1.2.1: Training on how to replicate the content of the ECD kit with local materials	Number of training sessions held Number of teachers trained	Target 16	Target 960	Training reports Monitoring visits	

II. Result hierarchy	EDUCATION	Indicator	Baseline	Target	Means of verification	Geographical coverage
Output 3.1.3	Capacities of the education sector will deliver inclusive quality basic education throughout					
Output 2.1:	<i>Community awareness on girls' education issues is increased</i>	Number of people reached	53,836	59,367	Reports	Countrywide
Act 2.1.1.	To conduct the 2015 Promotion of Girls' Education campaign	Number of people reached Number of primary school girls, senior three girls, and senior six girls rewarded	50,000 3836	55,000 4367	Programme documents, monitoring.	Nationwide
Act 2.1.2.	To produce and disseminate promotional materials nation-wide	Number of people reached	50,000	55,000	Media articles Reports	Nationwide
Act 2.1.3.	To celebrate 10 years of empowering girls	Number of people reached	0	4000	Programme documents, monitoring.	Kigali
Output 2.2.	<i>Rewarded girls are equipped with life skills, given a platform for excellence and inspired to be role models</i>	Number of platforms equipped	0	5	Reports	Countrywide
Act 2.2.1.	To monitor and facilitate 20 existing Inkubito z'iteza clubs in secondary schools	Number of clubs facilitated	0	20	Programme documents, monitoring.	All provinces and Kigali city
Act 2.2.2.	To conduct one empowerment workshop "Let us Dream Big and Act"	Number of girls empowered to act as role-models for achievement.	483	683	Programme documents, monitoring.	Kigali city

II. Result hierarchy EDUCATION		Indicator	Baseline	Target	Means of verification	Geographical coverage
Output 2.3. <i>Increased listening skills and interest in reading among children</i>		Number of reading & storytelling platforms established	12	21	Reports	Countrywide
Act 2.3.1. To conduct the promotion of reading culture Campaign		Number of reading events organised	12	16	Programme documents, monitoring	4 districts
Act 2.3.2. To produce and disseminate promotional materials		Number of districts reached	8	12	Media articles reports	Nationwide

YOUTH EMPOWERMENT AND INDICATOR	Indicator	Baseline	Target	Means of verification	Geographical coverage
MENTORSHIP PROGRAMME					
UNDAP Output 2.1.5: Citizens especially women, youth and vulnerable groups participate in decision making and democratic processes at all levels.					
Output 4.1. Existing platforms (universities & youth centres) for young people is adequately resourced to enhance leadership and communication skills	# of platforms resourced	14	38	Reports	Countrywide
ACT 4.1.1.To enhance the functionality of the 2 existing toastmasters Clubs	# of toastmasters facilitated	89	144	Reports	Kigali & Huye
Act 4.1.2.To establish 24 new debate clubs in youth centres	# of debates club facilitated	6	30	Reports	Country wide
Act 4.1.3.To coordinate, shoot & air of debates with youth centres	# of debates shows aired	13	19	Reports	Country wide
Output 4.2.: Young women are equipped with critical thinking, decision making and confidence building skills	# functional mentorship mechanism established	1	2	Reports	Countrywide
4.2.1. To support existing cohort of mentees and liaison with mentors	# mentees empowered	0	300 young girls	Reports	Countrywide
Output 4.3 A platform for excellence, innovation and entrepreneurship amongst Rwandan youth, especially young professionals, is established	# of platforms established	20	24	Reports	Countrywide
Act 4.3.1. To organize youth forum series by leaders in private sector & other sectors	# of participants attended	6,000	6,700 young professionals	Reports	Countrywide
Act 4.3.3.To organize scholarship beneficiaries camp	# of youth forum organized	4724	5724	Reports	Countrywide

YOUTH EMPOWERMENT AND INDICATOR	Geographical coverage	Means of verification	Target	Baseline
MENTORSHIP PROGRAMME				
Output 4.4. Strengthened coordination with government and youth stakeholders	Countrywide	Reports	1	0
Act 4.4.1.To organize capacity building workshop	Countrywide	Reports	50	0
Output 4.5. Improved monitoring & evaluation	Countrywide	Reports	YES	NO
Act 4.5.1.Redesign M&E tools for beneficiaries for the M&E unit	Countrywide	Progress reports	4 4 tools	0
				# of M&E tools designed and used

IV. Economic Empowerment (IM/ALI)	Indicator	Baseline	Target	Means of verification	Geographical coverage
UNDAP Output 1.2.1. Strengthened agricultural innovation and value chain					
Output 5.1 Improved partnership between Imbano Foundation, local authorities and beneficiaries.					
Act 5.1.1.Site identification/ base line study	# of partnerships established	10	12	MoUs signed	Country wide
Act 5.1.2 Introduction of the project:	# of site identified	10	12	Monitoring	Country wide
Output 5.2. Improved skills of new technology production and tomato transformation	# of sites visited	10	12	Media articles reports	In all the 5 provinces
Act 5.2.1. To organize a training for beneficiaries in new technology. Green House Management	# of trainings conducted	1	3	Reports	Countrywide
	# of beneficiaries trained	200	260	Programme documents. monitoring.	Kigali city

IV. Economic Empowerment (VWAL)	Indicator	Baseline	Target	Means of verification	Geographical coverages
Output 5.3: Tomato production increased	Amount of tomatoes harvested	1.5 tons	2.5 tons	Reports	Countrywide
Act 5.3.1. To install the Green houses	# of Green House constructed	10	12	Programme documents, monitoring	Country wide
Act 5.3.2. To construct the pond for irrigation	# of Pond system for irrigation	0	2	Programme documents, monitoring	All province
Act 5.3.3. To provide technical support	# of field visit done	0	25	Programme documents, monitoring	Kayonza, Huye, Rubavu, Gasabo and Kicukiro...

IV, Economic Empowerment (IV.A1)	Indicator	Baseline	Target	Means of verification	Geographical coverage
<i>Output 5.4. Monitoring and Evaluation Improved</i>	Number of meetings organized	1	2	Reports	Countrywide
	Number of tools produced	1	3		
Act 5.4.1. To conduct meeting regularly with authorities	# of meeting conducted	1	3	Programme documents, monitoring.	Kigali city
Act 5.4.2. To collect and analyse data	# of data collect and reports shared	0	2	Programme documents, monitoring.	Country wide
Act 5.4.3. To design and publish the brochures and booklet	# of Project documents available	0	100	Media articles reports	Kigali city
Act 5.4.4. To produce a documentary film	# of Film documentary available	2	3	Media articles Reports	Kigali city

V. Result hierarchy : FAMILY PACKAGE	Indicator	Baseline	Target	Means of verification	Geographical coverage
UNDAP Output 3.1.5 Quality integrated comprehensive HIV prevention knowledge and services for pregnant women, children and young people expanded					
Output 1: A model using CHWs to follow up HIV+ families in the community to improve quality of PMTCT services is implemented in 6 FP sites in MUSANZE district	A final report with tangible evidences to inform decision making is available % pregnant women and exposed infants in the 6 facilities retained in the program and on ART	0 TBD	1 90% of lost to follow ups 25	Operational research report	Musanze
Act 1.1. Organize an advocacy/orientation meeting with RBC and Community Health Desk to involve the heads of health facilities in supporting the model (DH, HC)	# of participants	-	25	Report	Musanze
Act 1.2. Train CHW on integration of HIV/AIDS and STI s in community health: their tasks and jobs aids (tools)	# of CHWs trained	-	180	Report	Musanze
Act 1.3. Train of nurses on the implementation of the model including M&E tools	# of nurses trained	-	18	Report	Musanze
Act 1.4. Conduct a rapid assessment on attitudes of facility managers and services providers	Report available	-	1	Report	Musanze
Act 1.5. Reinforce linkages between PMTCT services at the health centres & at community level: Mobilize and follow up pregnant women for ANC, ARV uptake, CD4 count, FP, male partners involvement for ANC & FP, exposed infants born from HIV+ families, Family HIV test, infants follows up...).	% pregnant women and exposed infants received full package of services	-	95		Musanze
Act 1.6. Conduct an operational Research to monitor the model	Report available		1	Report	Musanze

Result hierarchy: FAMILY PACKAGE	Indicator	Baseline	Target	Means of verification	Geographic coverage
UNDAP Output 3.1.5: Quality integrated comprehensive HIV prevention knowledge and services for pregnant women, children and young people expanded					
Output 1: A model using CHWs to follow up HIV+ families in the community to improve quality of PMTCT services is implemented in 6 FP sites in MUSANZE district	A final report with tangible evidences to inform decision making is available % pregnant women and exposed infants in the 6 facilities retained in the program and on ART in life	0 TBD	1 90% of lost to follow ups	Operational research report	Musanze
Organize an Advocacy/orientation meeting with RBC and Community Health Desk to involve the heads of health facilities in supporting the model (DH, HC)	# of participants	-	25	Report	Musanze
Train CHW on integration of HIV/AIDS and STI's in community health: their tasks and jobs aids (tools)	# of CHWs trained	-	180	Report	Musanze
Train of nurses on the implementation of the model including M&E tools	# of nurses trained	-	18	Report	Musanze
Conduct a rapid assessment on attitudes of facility managers and services providers	Report available	-	1	Report	Musanze
Reinforce linkages between PMTCT services at the health centres& at community level: Mobilize and follow up pregnant women for ANC, ARV uptake, CD4 count, FP, male partners involvement for ANC & FP, exposed infants born from HIV+ families, Family HIV test, infants follows up...	% pregnant women and exposed infants received full package of services	-	95	Reports	Musanze
Conduct an operational Research to monitor the model	Report available	1	Report		Musanze

Output 2: Quality PMTCT services are accessible to all HIV infected pregnant women and exposed infants in 21 FP sites.		% pregnant women and exposed infants retained in the program and on ART	TBC	90% of lost to follow ups	Report	Gasabo, Gatsibo, Bugesera, Huye and Rubavu
Act 2.1 Reinforce linkages between PMTCT services at the health centres & at community level. Mobilize and follow up pregnant women for ANC, ARV uptake, CD4 count, FP, male partners involvement for ANC & FP, exposed infants born from HIV+ families. Family HIV test, infants follows up...)	% of pregnant women and exposed infants received full package of services	-	95	Reports	Gasabo, Gatsibo, Bugesera, Huye and Rubavu	
Act 2.2 Provide financial and technical support to Health Centers to provide family VCT to all families with one or 2 parents living with HIV	# of families received VCT services	-	1.350	Reports	Gasabo, Gatsibo, Bugesera, Huye and Rubavu	
Act 2.3 Link HIV+ women and their infants to community networks that provide infant feeding counseling and support (District Plans for elimination of malnutrition DPEM) : Igikoni cy'amudugudu....) by PE	% of HIV+ women and exposed infants who received infant feeding counseling & nutrition support	-	100	Reports	Gasabo, Gatsibo, Bugesera, Huye and Rubavu	
Act 2.4 Follow up on exposed infants cases referred to the HC from the community based nutrition network	# of infants referred to the HC	-	100	Reports	Gasabo, Gatsibo, Bugesera, Huye and Rubavu	
Act 2.5 Track breastfeeding mothers on ARV/ART who missed appointments or lost to follow up.	# of breastfeeding mothers on ARV/ART tracked	-	100	Reports	Gasabo, Gatsibo, Bugesera, Huye and Rubavu	

Output 3. Access and utilization of HIV prevention and ASRH information and services among 10-24 year olds in-and-out-of-schools improved	# of youth aged 10-24 who have accessed ASRH information and services at health centers	0	15,300	Report	countrywide
Act 3.1. Support youth centers on the provision VCT services and sensitization on ASRH&R	# of youth tested for HIV, and # of youth received ASRH&R messages	-	800 and 3000	Reports	Rubavu
Act 3.2. Support health centers to provide male circumcision (to youth 10- 24 years old)	# of young people circumcised and go back with prevention messages	-	1,000	Reports	Rubavu
Act 3.3. Support technically & financially schools to conduct PAC at school (2 cohorts of 120 at the same time)	# family members who attended PAC forums	-	600	Reports	Rubavu
Act 3.4. Support Rubavu Youth friendly center to conduct sector based PAC for out of school youth aged 10- 24 years old) (2 cohorts of 120 at the same time)	# family members who attended PAC forums	-	600	Reports	Rubavu
Act 3.5. Support clubs in and out of schools in ASRH&R sensitization activities	# clubs supported in sensitization	0	32	Reports	Rubavu
Act 3.6. Organize a school based campaign to fight against HIV stigma among in and out of school youth	# of young people reached	-	2,500	Reports	Rubavu
Act 3.7. Organize community based campaign to fight teenage pregnancies and GBV	# of young people reached especially girls	-	2,500	Reports	Rubavu
Act 3.8. To support Health centers with communication materials including DVDs, posters	# of communication material produced	-	2,500	Reports	Rubavu
Act 3.9. Provide technical and financial support to health facilities to strengthen support groups for young positives (-: Positive prevention, living positively, sexuality education, peer education on availability and use of condoms and family planning methods... adherence to HIV treatment...)	# of young positives attended support groups	-	50	Reports	Rubavu
Act 3.10. Conduct community sensitization on ASRH&R and HIV prevention by nurses and youth positives (once a quarter)	# of youth attended	-	450	Reports	Rubavu

PROGRAMME BUDGET:

Result Hierarchy	Key implementing Partner	Responsible Agency	Planned Budget in USD		Timeframe			
			Total Budget	Requested to the One Fund	Q1	Q2	Q3	Q4
UNDAP Output 3.1.1 Capacity of government institutions and communities to expand equitable access to quality integrated child and family services improved								
Output 1.1: 150 children between the ages of 4-6 and their families have access to quality community-based integrated ECD services in Kinyasa District (Mukaranga Sector / Nyagatwa Village)	IF, NIGEP ROP	UNICEF						
Activity 1.1.1. To train care givers and to ensure the management of the ECD	IF		10,936		X	-	X	X
Activity 1.1.2. To train community in income generating activities	IF		4,235		-	X	-	-
Activity 1.1.3. To support implementation of ECD services	IF		118,044		X	X	X	X
Activity 1.1.4 Monitoring and evaluation	IF		125,574		X	X	X	X

Result Hierarchy	Key Implementing Partners	Responsible Agency	Planned Budget in USD		Timeframe	Q1	Q2	Q3	Q4
			Total Budget	Requested to the One Fund					
Output 1.1.3. Coverage of the curriculum in the delay of inclusive quality basic education non-should									
Output 2.1: Community awareness on girls' education issues is increased									
	IF, MINEDUC	UNICEF							
Act 2.1.1. To conduct the 2015 Promotion of Girls' Education campaign	IF		57,086	57,086				X	
Act 2.1.2. To produce and disseminate promotional materials nation-wide	IF		10,123				X	X	
Act 2.1.3. To celebrate 10 years of empowering girls.	IF		91,687	91,687				X	
				78,006					

Output 2.2. Rewarded girls are equipped with life skills, given a platform for excellence and inspired to be role models							
Act 2.2.1 To monitor and facilitate 20 existing Inkubho & Keyza clubs in secondary schools	IF			1,462	1,462		X
Act 2.2.2 To conduct one empowerment workshop "Let us Dream Big and Act"	IF		4,108			X	
Act 2.2.3 To conduct a program assessment	IF		14,636	14,636		X	
Act 2.2.4 Monitoring and evaluation	IF		5,132			X	X
Act 2.2.5 Project implementation and management	IF		26,819	22,414		X	X
Output 2.3. Increased listening skills and interest in reading among children							
Act 2.3.1 To conduct the promotion of reading culture Campaign	IF		10,626			X	X
Act 2.3.2 To produce and disseminate promotional materials	IF		7,567	6,823		X	X
Total Education				229,246	180,427		

Result hierarchy	Key implementation	Responsible Agency	Planned Budget in USD	Requeste d to the Fund	Timeframe			
III. Family Package	Partners	Agency	Total Budget	Requeste d to the Fund	Q1	Q2	Q3	Q4
UNDP Output 3.1.5 Quality integrated comprehensive HIV prevention knowledge and services for pregnant women, children and young people expanded								
Output 1: A model using CHWs to follow up HIV+ families in the community to improve quality of PMTCT services is implemented in 6 FP sites in MUISANZE districts	IF	UNICEF UNFPA	12,030			X		
Act. 1.1. Organize an Advocacy/orientation meeting with RBC and Community Health Desk to involve the heads of health facilities in supporting the model (DH, HC)	TF and Health facility					X		
Act. 1.2. Train CHW on integration of HIV/AIDS and STIs in community health: their tasks and jobs aids (tools)	IF and Health facility	UNFPA, UNICEF, UNAIDS, WHO	1,558			X		
Act. 1.3. Train of nurses on the implementation of the model including M&E tools	IF and Health facility	UNFPA, UNICEF, UNAIDS, WHO	562			X		
Act. 1.4. Conduct a rapid assessment on attitudes of facility managers and services providers	IF and Health facility	UNFPA, UNICEF, UNAIDS, WHO	-			X		
Act. 1.5. Conduct an operational archi to monitor the model	IF and Health	UNFPA, UNICEF,	3,906				X	X

Output 2: Quality PMTCT services are accessible to all HIV infected pregnant women and exposed infants in 21 FP sites.		UNICEF UNFPA							
Act 2.1. Reinforce linkages between PMTCT services at the health centres & at community level: Mobilize and follow up pregnant women for ANC, ARV uptake, CD4 count, FP, male partners involvement for ANC & FP, exposed infants born from HIV+ families, Family HIV test, infants follows up...	IF, RRP+ and Health facility								
Act 2.2. Provide financial and technical support to Health Centers to provide family VCT to all families with one or 2 parents living with HIV			23,252	19,737					
Act 2.3. Link HIV+ women and their infants to community networks that provide infant feeding counseling and support (District Plans for elimination of malnutrition DPEM): Igikoni cy'amudugudu....) by PE			26,842	26,842					
Act 2.4. Follow up on exposed infants cases referred to the HC from the community based nutrition network									
Act 2.5. Track breastfeeding mothers on ARV/ART who missed appointment or lost to follow up.									

Output 3. Access and utilization of HIV prevention and ASRH information and services among 10-24 year olds in-and-out-of-schools improved	IP, HF, Youth Centre, Schools	UNFPA						
Act. 3.1 Support youth centres on the provision VCT services and sensitization on ASRH&R			8,772			X	X	X
Act. 3.2 Support health centres (to provide male circumcision) to youth 10-24 years old)			39,474	9,375		X	X	X
Act. 3.3 Support technically & financially schools to conduct PAC at school (2 cohorts of 120 at the same time)			6,725			X	X	X
Act. 3.4 Support Rubavu Youth friendly centre to conduct sector based PAC for out of school youth aged 10-24 years old) (2 cohorts of 120 at the same time)			6,725			X	X	X
Act. 3.5 Support clubs in and out of schools in ASRH&R sensitization activities			14,035			X	X	X
Act. 3.6 Organize a school based campaign to fight against HIV stigma among in and out of school youth			8,546			X	X	X
Act. 3.7 Organize community based campaign to fight teenage pregnancies and GBV			5,826			X	X	X
Act. 3.8 To support Health centres with communication materials including DVDs, posters and posters			7,232			X	X	X

Act. 3.9. Provide technical and financial support to health facilities to strengthen support groups for young positives (- Positive prevention, living positively, sexuality education, peer education on availability and use of condoms and family planning methods... adherence to HIV treatment...)				3,618				X	X	X
Act. 3.10 Conduct community sensitization on ASRH&R and HIV prevention by nurses and youth positives (once a quarter)				329				X	X	X
Output 4. Project continuation and M&E mechanisms strengthened	IF, RRP+ and Rubavu youth centre	UNEPA, UNICEF, UNAIDS, WHO								
Act. 4.1. Orientation meeting with stakeholders at district level (RRP+, YFC, HC, president of Pes)				3,863				X	X	X
Act. 4.2 Support to RRP+ for M&E, supervisions of PES activities				20,658				X	X	X
Act. 4.3. Support financially and technically the Rubavu Youth friendly center to conduct community based activities and to follow up ASRH&R activities done by HCs, school and out of school based clubs in Rubavu District (in school and in the community)				5,746				X	X	X
ACT 4.4. Joint supervisions visits by IF staff and partners				13,416				X	X	X
Total of FP component				213,135						
MANAGEMENT COST				67,819						
TOTAL BUDGET				280,954		55,954				

4.1 Table 2: PROGRAMME BUDGET:

Result hierarchy	Key implementation	Responsible	Planned Budget in USD	Infrastructure	Q1	Q2	Q3	Q4
IV. YOUTH EMPOWERMENT AND MENTORSHIP PROGRAMME	Partners	Agency	Total Budget	Requested to the One Fund				
UNDP Output 2.1.5 Citizens especially women, youth and vulnerable groups participate in decision making and democratic processes at all levels								
Output 4.1. Existing playgroups (universities & youth centres) for young people is adequately resourced to enhance leadership and communication skills	IF	UNPPA, UN WOMEN, UNDP						
Act 4.1.1 To enhance the functionality of the 2 existing townsmasters Clubs			4,982		X	X	X	
Act 4.1.2 To establish 24 new debate clubs in youth centres			12,526		X	X	X	
Act 4.1.3 To coordinate, support & air of debates with youth centres			17,544		X	X	X	
Output 4.2.: Young women are equipped with critical thinking, decision making and confidence building skills		UNPPA, UN WOMEN, UNDP						
Act 4.2.1. To support existing cohort of mentees and liaison with mentors			17,542		X	X	X	

Output 4.3 A platform for excellence, innovation and entrepreneurship amongst Rwandan youth, especially young professionals, is established	IF & MYICT	UNFPA, UN WOMEN, UNDP		82,979		X	X	X	
Act 4.3.1. To organize youth forum series by leaders in private sector & other sectors						X			
Act 4.3.2. To organize scholarship beneficiaries camp				56,023		X	X	X	
Output 4.4. Strengthened coordination with government and youth stakeholders	IF & MYICT	UNFPA, UN WOMEN, UNDP							
Act 4.4.1. To organize capacity building workshops				11,082			X	X	
Output 4.5. Improved monitoring & evaluation	IF & MYICT	UNFPA, UN WOMEN, UNDP							
Act 4.5.1. Redesign M&E tools for beneficiaries for the M&E unit				2,939		X	X	X	
<i>Total Youth Empowerment</i>				205,017					
MANAGEMENT COSTS				57,969					
TOTAL BUDGET				263,586					

Result hierarchy	Key Implementing Partners	Responsible Agency	Planned Budget in USD		Timely				
			Total Budget	Requested to the One Fund	Q1	Q2	Q3	Q4	
VI. ECONOMIC EMPOWERMENT									
UNDP Output 1.2.1. Strengthened agricultural innovation and value chain									
Output 5.1 Improved partnership between Imbuto Foundation, local authorities and beneficiaries									
Act 5.1.1. Site identification/ base line study	IF	UNWOMEN	240		X				
Act 5.1.2. Introduction of the project	IF	UNWOMEN	120		X				
Output 5.2 Improved skills of new technology production and tourism transformation									
Act 5.2.1. To organize a training for beneficiaries in new technology. Green House Management	IF	UNWOMEN	6,675		X		X		

Output 5.3: Tomato production increased		MINAGRI	UNWOMEN						
Act 5.3.1. To install the Green houses	IF		UNWOMEN	24,854		X	X		
Act 5.3.2. To construct the pond for irrigation	IF		UNWOMEN	5,029		X	X		
Act 5.3.3. To provide technical support	IF		UNWOMEN	2,035		X	X	X	
Output 5.4. Monitoring and Evaluation Improved		MINAGRI	UNWOMEN						
Act 5.4.1. To conduct meeting regularly with authorities	IF		UNWOMEN	1,462		X	X	X	
Act 5.4.2. To collect and analyse data	IF		UNWOMEN	731		X	X	X	
Act 5.4.3. To design the brochures and booklet	IF		UNWOMEN	731		X	X	X	
Act 5.4.4. To produce a documentary film	IF		UNWOMEN	2,193		X	X	X	
Total IMAIL Component				44,070					
MANAGEMENT COST				15,930					
Total IMAIL Component				60,000					

SUMMARY OF THE BUDGET BY COMPONENT		
No	Component	Amount (USD)
1	ECD	304,656
2	EDUCATION	229,246
3	FAMILY PACKAGE	280,954
4	YEMP	263,586
5	IMALI	60,000
	Total	51138,442
	No cost extension Balance	211,408