

BURERA DISTRICT COMMUNITY OUTREACH REPORT



University of Rwanda
Public Health
Students Association

KIGALI-RWANDA

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INTRODUCTION

The URPHSA, a student organization under the University of Rwanda, conducted Community outreach in two sectors of Burera district namely Cyeru and Nemba sectors from 11th to 13th January 2022. It contributed to improving maternal and children health by raising awareness on actions to fight against stunting among under 5 years children which is a major health burden faced by the community.

URPHSA with support of UR-CMHS organized a two days awareness campaign in different villages of Nemba and Cyeru sectors of Burera district. The outreach aimed to raise awareness and health related information in the community through nutrition sensitive (building kitchen garden and hygiene) and specific (feeding and teaching balance diet) like WASH and social security to prevent negative health impacts associated with maternal and child health and to fight against all forms of malnutrition in children under 5 years.

COMMUNITY OUTREACH AT BURERA DISTRICT

LOCATION AND WORKING AREA

DISTRICT	SECTOR	CELL	VILLAGE	DATE	DAY
BURERA	NEMBA	Nyamugali	Cyami	12 th Jan	Wednesday
		Rubona	Kanyaru	13 th Jan	Thursday
	CYERU	Butare	Nyaruyovu	12 th Jan	Wednesday
		Ndongozi	Nyamusanze	13 th Jan	Thursday



Photo of Sites of activities in Nemba and Cyeru Sector

ACKNOWLEDGMENT

We appreciate almighty God helping us to successfully conduct Burera community outreach effectively and as ourselves for units, friendships and commitment characterized by every member of the Association. But in generally we appreciate UR-CMHS Principal and Campus Administrator, the dean of school of public health and MWENDEZI Claude, Career guidance and employability for big love and contribution to UR-PHSA,

We also appreciate Head of environmental health sciences and human nutrition and dietetics departments and our mentors KORUKIRE Noel; GASANA Canisius and UMWUNGERI MWIZA Yves Didier for the knowledge, skills, love and commitment given to us when carrying out different activities.

MAIN GOAL

Raise awareness and health related information at the community through community nutrition action; WASH, Indoor Air Quality (IAQ), and social security to prevent adverse health impacts to maternal and child health to fight against all forms of malnutrition

OBJECTIVES:

- Building a kitchen garden (akarima k'igikoni), accompanied by nutrition education about preparation of balanced diet to the community under community nutrition action.
- Promoting hand washing using water and soap to promote personal and food hygiene and prevent food contamination and teaching the community the importance of hygiene and sanitation.
- Rising awareness among community members about zoonotic diseases by encouraging people not to live with domestic animals in the same house but have a separately shelter for animals.
- Rising awareness about Indoor Air Quality

ACTIVITIES CARRIED OUT

Anthropometric measurements among under five years children

Building kitchen gardens

Building hand washing facilities

Disseminating and repairs toilets with modernized Sato toilets

Cooking demonstration and feeding children as nutrition specific actions.

EDUCATION SESSIONS

Raising awareness on hand hygiene and sanitation

Raising Awareness on Zoonotic diseases and risks of sharing the house with domestic animals

Teaching the community the importance of good nutrition (balanced diet) and food selection

Teaching the community about Indoor Air Quality and associated health problems among pregnant women and community in general.

PROCESS

ACTIVITIES CARRIED OUT



a. Photo of URPHSA taking anthropometric measurement



b. Photo of URPISA student health educating the community about the importance of proper nutrition, Indoor Air Quality and zoonotic diseases



c. URPHSA student's health educating community members about WASH and Sato toilet use



d. Cooking demonstration of balanced diet one pot in one hour.



E. photo of URPHSA Feeding under five year's children, a balanced diet meal



F. Photo of URPHSA building hand washing stations (Kandagirukarabe)



G. Photo of URPHSA disseminating, building and repairs modernized Sato toilets



H. Photo of URPHSA Building kitchen garden to vulnerable families

ACHIEVEMENTS

Different activities contributed to the following achievements

- **Anthropometric measurement:** A total of 336 children under five years were assessed anthropometric measurements 236 children at Nemba sector and 150 children at Cyeru sector.
- **We trained and supported 519 people** including community health workers, youths volunteers and population in general, in two sectors about cooking one pot in one hour, building kitchen gardens, building hand washing stations and Sato toilets installation 236 at Nemba and 283 at Cyeru accompanied by nutrition and WASH education
- **Cooking demonstration:** A total of 15 pots were cooked, using an energy and time saving technique called **one-pot-one-hour**.
- **Kitchen gardens:** Four (4) double dug bed was constructed one kitchen garden at every cell

- **Hand washing stations:** A total of 21 hand washing stations (kandagira ukarabe) were built 11 and 10 hand washing stations at Nemba and Cyeru respectively
- **Modernized, hygiene and sanitation supporting toilets:** 4 SATO toilets were built, one Sato toilet at every cell

SKILLS AND EXPERIENCE GAINED

I. Interpersonal skills

- ◆ Teamwork spirit
- ◆ Communication skills
- ◆ Leadership skills: students given their tasks were able to coordinate each activity autonomously.
- ◆ Students learned to solve community problems using locally available resources and it enhanced their decision-making skills
- ◆ Contingency learning: students learnt population's food choices and nutrition and its link with geographical location of Burera district.
- ◆ Adaptability: Students were able to adjust to changes in the new environment.
- ◆ Time management. Students were able to follow and accomplish tasks according to the schedule.
- ◆ Empathy is a skill needed during community outreach for your message to be effectively delivered. After reaching the community they didn't pride as people from urban area they tried to fit in the society and work like them to have effective interventions

II. Technical skills and experiences acquired

- ◆ Student's fears cracked due to some of our students they didn't get a chance and other fear to stand in front of many people which gave them good exposure and enable them to prepare and deliver education message which strengthened their capacity in communication and public speaking
- ◆ Collaborative and socialization skills: Adaptation and development of new team working spirit to leaders like potential and local leaders and health care practitioners to attain and sustain the activities accomplishment
- ◆ Planning earlier and frequently is important
- ◆ Practical and theoretical knowledge and skill shared among team members including:
 - Taking anthropometric measurements
 - Building double dug bed
 - Making hand washing facilities
 - Nutrition information on balanced diet using colors called "Uruziga rw'amabara ane" in Kinyarwanda
 - Preparing a balanced diet in one pot in just one hour.

- Importance of Sato toilets in water, hygiene and sanitation (WASH) to the community and even installation

CHALLENGES AND PROBLEMS FACED

1. While conducting community outreach activities, we recognized that **IGIKONI CY'UMUDUGUDU AND COMMUNITY TOILETS** were not meeting hygiene standards, there was low level of personal, food hygiene and general hygiene and sanitation, which are risk factors for poor hygiene related disease transmission. This is a risk factor of different infectious diseases which leads to malnutrition among under-five year's children.
2. We noticed that Burera district community members have enough food but they have inadequate knowledge and skills to prepare a balanced diet in a hygienic manner. Most of them base on questions asked about number of times eat per day and time likely to take food or feeding children, 95% replied that, they don't feed their children and even themselves during midday (lunch) due to long hours of working, this also, can be a route cause of malnutrition

RECOMMENDATIONS TO BURERA DISTRICT

1. We recommend Burera District to sensitize community members to improve standards of hygiene and sanitation of **IBIKONI BY'UMUDUGUDU and TOILETS** so that they can comply to acceptable standards of hygiene and sanitation for kitchen and toilets in order to prevent poor hygienic and unsanitary related diseases.
2. We recommend Burera district to set an effective intervention that will **lead to** behavior change for the population (community) to love themselves and be strict on time management by matching their long hours they spend at their farm without compromising maternal and child nutrition practices. This affects children's nutrition due to lack of time to comply with Infants and Young children Feeding Practices (IYFP).

RECOMMENDATIONS TO UNIVERSITY OF RWANDA

1. To make research on how local people (poor families) can keep food long hours and stay safe where local people can use this method as takeaway food that will be eaten at the farm or work. Or type of nutritious food that can be kept long hours to support vulnerable people that work long hours and jump meals due to limited time of food preparation
2. We recommend the University of Rwanda to carry out future impact evaluation of activities done in Nemba, and Cyeru sectors of Burera District.
3. University of Rwanda should plan and fund more community outreach activities which will enable students to acquire hands on skills and at the same time promoting community health

CONCLUSION

Community outreach in Burera district was very successful and fruitful in community health promotion as well as equipping students with various hands on skills related to working with the community and community engagement. In general majority of community members of Burera district have access to adequate food but they have inadequate knowledge and skills related to preparation of hygienic and healthy. University of Rwanda College of Medicine and Health Sciences and Burera district should continue collaboration in order to raise awareness; research and conduct community outreach activities in other sectors of Burera district were not covered during this community outreach.

Prepared by URPHSA COMMITTEE

Approved URPHSA Mentors

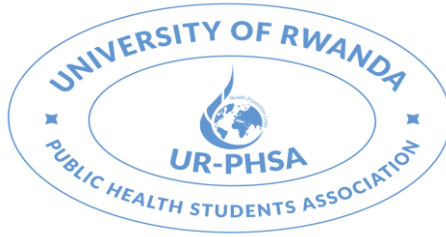
President of URPHSA

GASANA Canisius



NDAGIJIMANA Benoit

UMWUNGERI MWIZA Yves Didier



More photos on Burera community outreach please visit link below

<https://drive.google.com/drive/folders/1u5rw14wYm3JVxwAYk3jYZQbukXepe3my?usp=sharing>