



Action of Evangelical Churches for the Promotion of Health and Development (AESD)

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ABOUT US

AESD is a non-governmental organization based in Rwanda. It was created in 1995 by Dr. Gahungu BUNINI in order to address the health and development needs of vulnerable Rwandans. AESD works through its network of evangelical associations and churches to support vulnerable groups at the community level. The mission of AESD is to promote sustainable holistic development with the community through Evangelical Associations in Churches.

AESD has the objectives of:

- ♦ Preparing Rwandan population for self-development and income-generating activities;
- ♦ Assisting churches and evangelical organizations to address the development needs of the population and to promote good health;
- ♦ Promoting peace and reconciliation initiatives at community level;
- ♦ Building the capacity of evangelical churches for effective service delivery;
- ♦ Training animators and trainers in development;
- ♦ Developing and promoting deaconia service in the growth and development of evangelical church in Rwanda.

GLOBAL FUND SINGLE STREAM FUNDING (SSF) - HIV

The SSF project targets whole communities in the districts of Kirehe, Kayanza and Rwamagana with the aim of raising awareness in communities about HIV prevention. Behavior change communication methods are used to this end. A second element of the project provides start-up capital and capacity building to start income generating activities for people living with HIV. This Global Fund project runs between 2011 and 2014 with total funding of US\$ 730,000.

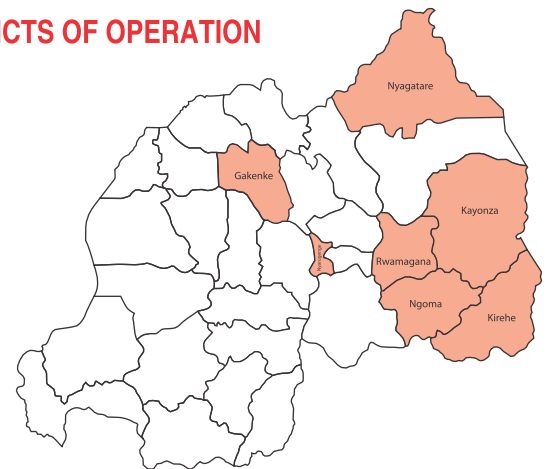
BEHAVIOR CHANGE AND SOCIAL MARKETING PROJECT (BCSM)

AESD is a Rwandan local partner of the USAID funded BCSM project. In particular, AESD's work contributes to achieving the project goal of: developing and implementing health communication activities that promote health seeking behaviors among Rwandans on issues related to HIV/AIDS, malaria, reproductive health and child survival. Strategies employed by AESD include: community dialogue, IPC, organization of special events and promoting voluntary counselling and testing (VCT). AESD works with 108 "Captains" and 96 Peer Educators, X religious leaders and x community health workers to deliver the message. The total funding between 2008 and 2012 is US\$ 621,000.

CHURCHES AND COMMUNITIES MOBILIZATION

This project seeks to bring together churches and communities to improve their own communities by working together. It operates in three main districts: Gakenke, Rwamagana and Nyarugenge. The objectives of the program include being a spokesperson for child protection; supporting community initiatives of people living with HIV/AIDS; and, organizing the dialogue on the role of the church. Activities include: training church leaders and facilitators to lead community work projects to improve local areas; helping people living with HIV to form self-help groups for support and provision of small animals to groups or individuals to start income generating projects; and, leading exchange visits and annual retreats with other partner faith based organizations. This project is funded by Tear Fund, UK with £60,000 over three years.

DISTRICTS OF OPERATION



"AESD has a clear purpose of furthering the development of Rwanda. We start by going into the community and helping people identify the health problems they face, in particular linked to family planning, safe water, HIV, malaria and other illnesses. Once the community has identified its problems, AESD works with the community to find solutions. Together we find the area where our work will have most impact in the promotion of good health. As a Christian organization, we believe man is made up of soul, body and spirit and therefore we always look for integral solutions."

Dr. Gahungu BUNINI, Director



"My husband used to violate me. He would hurt me to the point that I reported him to the police, but he would just run away and they could never find him. The Head of Umudugudu would tell me to go home to my family, away from my husband. I would take some of our kids, but not all of them, and I would hide to try to be safe. I wanted to leave my husband because I feared for my life and did not want to die. My children were always affected by the violence: they were visibly miserable. They'd even threaten their father and tell him they would leave forever if he beat me or them. Finally, the AESD community counsellors intervened. They told me that they would help me, our children and even my husband. They would come in small groups and talk to my husband. He realized that he was too old to behave this way and that he was a father and husband with responsibility to his family. With the help of our friends and the counsellors at the health center, we are a family again. Now I am at peace. I can sleep in my own house comfortably. My three children are discernibly happier."

Laurence Muhawenimana, Housewife and mother of three, Victim of GBV, Nyagatare

"I am very poor and have too many children to look after. We have five, aged between six months and 15 years. My wife tried family planning but it was not working for her. A community health worker explained to me that my wife is not the only one who can practice family planning and I could help. After he explained what a vasectomy was and I understood it would help, I elected to have the procedure in March 2012. We were counseled throughout the experience: before, during and after, to ensure understood everything. Doctors from Kigali came to our health center and performed the procedure, free of charge. After I had the vasectomy, my wife was ecstatic. She was finally able to rest from giving birth and from being pregnant all the time. Our family's economy will be stronger. Whenever my wife was pregnant, she could not work, she could not contribute to the family income; no matter how hard I'd work, we could never make ends meet. Now, with our current, permanent family planning arrangement, we are free to work all of the time and can see our family income rise exponentially. We no longer worry about if or when she will get pregnant. We now just have to generate income for our family!"

Epimaque TWIRINGIYIMANA, Rwigimiyaga Sector, Nyagatare District



WHY WE ARE DIFFERENT

1. AESD focuses on helping people identify their own problems and proposing their own solutions – this gives people ownership of their futures
2. The fact that AESD is a Christian organization (as opposed to a church) means focused goals with the specific aim of promoting health and development

ACHIEVEMENTS

- ◆ Encouraged 46 couples to use vasectomy for family planning between 2011 and 2012
- ◆ Work with 90 model couples to spread family planning and health messages to approximately 30,000 people
- ◆ After AESD training, communities came together to purchase 500 mattresses
- ◆ 40,000 peoples from 600 locals churches involved in community work.
- ◆ 18 self-groups received 54 cows for income-generating activities
- ◆ 12 clubs sent to Uganda for exchange visits
- ◆ As a result of AESD messages, real change can be seen in all communities in the ability of families to talk about sexual related issues

