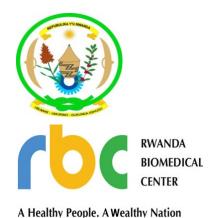




Institution	ASOFERWA (ASSOCIATION DE SOLIDARITE DES FEMMES RWANDAISES)
Reporting period	April to June 2022 (Q4 -FY 21_22)
Year	2021-2022
Project (Grant)	HIV/NSP

HIV/NSP PROJECT, GFMoH/ RBC HIV PREVENTION PROGRAM AMONG KEY POPULATION, QUARTERLY





July

2022

I. INTRODUCTION

ASSOCIATION DE SOLIDARITE DES FEMMES RWANDAISES (ASOFERWA) is non-governmental organization (NGO) created in 1994 just after the Genocide. Its mission is to encourage the socio-economic rehabilitation of vulnerable groups and to promote the national reconciliation. ASOFERWA's target groups are: Women in general, Orphans and Youth, Widows, Old people without family support, Women with low income, Female Commercial Sex Workers and people living with the HIV and AIDS.

HIV Prevention project was designed and is being supported by Global Fund via Government of Rwanda/Ministry of Health-RBC/SPIU, to serve as an opportunity to reach general population and key population with a comprehensive package of HIV Prevention programs with aim of reducing new HIV infections.

ASOFERWA as one of the implementing partners of MoH/RBC under this project namely HIV **Prevention Program** operates in **Huye, Nyanza and Karongi** Districts, whereby the target group is Key Population known as Female Sex Workers "FSW", Men Having Sex with Men (MSM) and Transgender Groups. The main objective of this HIV prevention program is to contribute on the reduction of new HIV infections by sexual contact.

II. THE PROJECT OBJECTIVES:

- Increase knowledge on KP 's rights, reduce stigma & discrimination among KPs, improve collaboration among stakeholders in the fight against HIV /AIDS and Tuberculosis and improve enabling environment and protection of KPs
- Increased knowledge of FSWs and MSM peer educators on HIV/AIDS & sexual health issues and Tuberculosis, and enhancing accurate data quality





- A Healthy People. A Wealthy Nation
 - Identify actual size of FSWs, MSMs and transgender
 - Increase services uptake among KPs, share knowledge on HIV/AIDS & sexual health issues and Tuberculosis to fellow peers, improve quality of referral system and data based advocacy,
 - Increase community awareness on HIV/STI prevention, OBBI, FP and SRH and Increase awareness on the IDU, and improve health services provision to IDU

III. DESCRIPTION OF THE PROJECT ACTIVITIES

- 1. **Conduct supervision of activities** carried out by NGOs its an occasion for field visits to the activities implementing areas and meet representatives of beneficiaries and other stakeholders to discuss envisaged activities among chosen groups such as Female Sex Workers (FSWs), MSM and Transgender and plan for quality of peer education and strengthen linkages for successful health services on benefit of target groups.
- 2. Conduct mapping or tracing of key population goes with to update selected hotspots and networks. The activity consists of mapping hotspots and networks for easy tracing key population groups such as FSWs, MSM and Transgender through their location whereby we meet representatives of target groups namely peer educators and discuss with health facilities workers on serving key population groups and referrals systems.
- 3. **Support MSM and Transgender Key informants and peer educators** in identification and enrollment of new group members; due to the complicity of tracing and enroll MSM and Transgender groups, this activity consist of motivating key informants of MSM and transgender so that they can help in identification and enrollment of new groups members from their hotspots and networks.
- **4. Conduct training of Peer educators for MSM and Transgenders** on HIV and AIDS and sexual health issues; this activity consist of training selected peer educators from targeted





key population groups especially MSM and Transgender to represent and train their peers after being trained and getting skills on HIV and TB Prevention Package and about health services.

- 5. Organize quarterly meeting with Peer educators of FSW and MSM/Trans for collecting data on HIV and STI, referral for HIV testing, promotion of condom use and STIs screening. This activity consist of data collection and collaboration mechanisms and it brings together ASOFERWA's staff, Health facility workers and Peer Educators such as Representatives of Female Sex Workers, MSM and Transgender, as key actors in HIV and TB prevention program and discuss how FSWs,MSM and Transgender are benefiting Health Services, discuss data collection process and use, reporting tools and discuss collaboration mechanisms towards expected results.
- 6. The quarterly coordination meeting which brings together different key stakeholders in HIV and TB Prevention program and representatives of beneficiaries to mention FSWs,MSM and Transgender. Discusses the progress of the HIV Prevention program, the achievements under the program and discuss collaboration mechanisms and actions to be taken to reach expected results especially at district level from three districts of Huye, Nyanza and Karongi. This activity was pending referring to the last quarter and was conducted in May 2022 and is being reported and was considered during quarter four (Q4) of the year 2021-2022.
- 7. **Produce and air radio series drama** this activity consist of producing Drama series to be aired on Radio; was also pending but was conducted at the end of April 2022 and is being reported during this quarter four (Q4) of the year 2021-2022.

IV. SUMMARY OF ACCOMPLISHMENTS AS BY ACTIVITY

1. Supervision of activities as carried out by NGOs done and was an occasion for field visits to the activities implementing areas and





meeting representatives of beneficiaries and other stakeholders. Envisaged activities were discussed among chosen groups such as Female Sex Workers (FSWs), MSM and Transgender and planned for quality peer education and strengthening linkages for successful health services delivery on benefit of target groups.

- 2. Mapping and tracing of key population exercise was done to update selected hotspots and networks. Previous data have been updated through new mapping of hotspots and networks for easy tracing and serving key population groups such as FSWs, MSM and Transgender from their location. Representatives of target groups namely peer educators were met and discussed with health facilities workers on serving key population groups and how to reinforce referrals systems.
- **3. Supporting MSM and Transgender Key informants and peer educators** was done to **reinforce** the identification process and enrollment of new group members due to the complicity of tracing and enroll MSM and Transgender groups. The activity was done by motivating key informants of MSM and transgender with facilitation and transport fees so that they can play their role and help in identification and enrollment of new groups members from their hotspots and networks as was the target.
- 4. Training of Peer educators for MSM and Transgenders on HIV and AIDS and sexual health issues was essential and was done. Under this activity selected peer educators from targeted key population and groups especially MSM and Transgender were trained to represent and train their peers after being trained. After getting skills on HIV and TB Prevention Package and about health services promised to play their role.
- **5. Quarterly meeting with Peer educators of FSW and MSM** for collecting data on HIV and STI, referral for HIV testing, promotion of





condom use and STI diagnosis was done **as planned.The** activity concerns data collection and collaboration mechanisms and brings together ASOFERWA's staff, Health facility workers and Peer Educators (Representatives of Female Sex Workers, MSM and Transgender) as key actors in HIV Prevention and TB program. This served as an occasion to discuss how FSWs,MSM and Transgender are benefiting Health Services, discussed data collected and collection process and use, reporting tools and discussed collaboration mechanisms towards expected results.

- 6. Quarterly stakeholders coordination meeting brings together different key stakeholders in HIV and TB Prevention program and representatives of beneficiaries like FSWs,MSM and Transgender. Served to discuss the progress of the HIV Prevention program, the achievements under the program and discussed collaboration mechanisms and actions to be taken to reach expected results. This meeting was done at each district level among three districts of Huye, Nyanza and Karongi. The activity was conducted twice on different dtaes this quarter due to the one which was pending from quarter three and all sessions were successfully done.
- **7. Produce and air radio series drama: The** activity was conducted by organizing Radio talk-shows and was conducted in April and June 2022.Radio talk-shows were organized in collaboration with RC Huye Radio and participants to the radio talk-shows include ASOFERWA' staff, RBC staff and Radio staff. Dates of Radio talk-shows were scheduled and planned as follow: 22nd April 2022 and 20th June 2022. Those Radio talk-shows are supported by records on CDs as means of keeping records and for further use.

V. PROJECT ACTIVITIES AND RESULT/OUTPUTS:

1. Conduct supervision of activities was an occasion for field visits to the activities implementing areas and meet representatives of





beneficiaries and other stakeholders to discuss envisaged activities among chosen groups such as Female Sex Workers (FSWs), MSM and Transgender and plan for quality of peer education and strengthen linkages for successful health services on benefit of target group





From left to right was an interactive Field visits with PEs and HFW in



SUPERVISION RESULTS:

- Field visits are done accordingly and coverage zone under HIV and TB Prevention program was visited in Huye , Nyanza and Karongi Districts
- ◆ Health Facility Workers were met and linkage process and its results were discussed,
- Representatives of target groups (FSWs, MSM and Transgender) were met and collaboration mechanisms were discussed towards reaching fixed objectives.

This was done by ASOFERWA's staff with aim of having more information on coverage zone, about FSWs, MSM and Transgender by Hotspots, Sectors and Health Facility refereeing on data to be collected and identification results.





THE SUPERVISION PLAN /SCHEDULE WAS AS BY THE TABLE BELOW:

No	DISTRICT	CONCERNED	DATES OF	CONCERNED
	NAME	SECTORS	ACTION	HEALTH
				FACILITY
1	Huye	Huye	20-	CUSP HC
		Gishamvu	21/04/2022	Huye HC
		Ngoma	21-	Mbazi HC
		Tumba	23/04/2022	Rango HC
		Mbazi		Mbazi HC
		Mukura		Rango HC
2	Nyanza	Busasamana	21-	Nyanza HC
		Kigoma	22/04/2022	
		Rwabicuma	25-	Hanika HC
		Mukingo	27/04/2022	
3	Karongi	Bwishyura	22-	Kibuye
		Mubuga	23/04/2022	HC/Bwishyura HC
		Rubengera	27-	Rubengera HC
		Gitesi	29/04/2022	
		Gashari		Kirambo HC

2. Conduct mapping or tracing of key population to update selected hotspots and networks. The activity consists of mapping hotspots and networks for easy tracing key population groups such as FSWs, MSM and Transgender through their location whereby we meet representatives of target groups namely peer educators and discuss with health facilities workers on serving key population groups and referrals systems.

THE MAPPING AND TRACING RESULTS:

Hotspots and Key population's networks are known and traced;





◆ Key population's groups such as FSWs, MSM and Transgender are identified and will be reached by comprehensive HIV Prevention Program.

This was done by ASOFERWA's staff in closer collaboration with key informants from target groups and local leaders with aim of having more information on numbers of beneficiaries by type of group among FSWs, MSM and Transgender and Health Facilities to serve the groups under HIV and TB Prevention program.

THE MAPPING PLAN /SCHEDULE AND RESULTS AS BY THE TABLE BELOW:

Nº	DISTRICT NAME	DATES OF ACTION	COVERED ZONE BY	# OF BENEFICIARIES BY
			SECTORS	SECTORS
1	Huye	16-17/05/2022	Huye	230 FSWs and
			Ngoma	18MSM
			Tumba	1170 FSWs and
			Mbazi	28MSM
			Mukura	580 FSWs and 13
			Gishamvu	MSM
				139 FSWs and 8 MSM
				120 FSWs
				70 FSWs and 13
				MSM
2	Nyanza	18-19/05/2022	Busasamana	418 FSWs and 25
			Rwabicuma	MSM
			Mukingo	123 FSWs and 5 MSM
			Kigoma	15 FSWs and 7 MSM
				246 FSWs and
				11MSM
3	Karongi	20-21/05/2022	Bwishyura	788 FSWs and 74
			Mubuga	MSM 90 FSWs and 31
			Rubengera	MSM 360 FSWs and





	Gitesi	12 MSM	
	Gashari	50 FSWs	
		150	Ws

3. Support MSM and Transgender Key informants and peer educators in identification and enrollment of new group members:

due to the complicity of tracing and enroll MSM and Transgender groups, 30 Key informants from three districts of Huye ,Nyanza and Karongi were motivated and supported with communication and transport fees in order to help in identification and enrollment of new groups members among MSM and Transgender from their hotspots ,networks and from our coverage zone .The above mentioned figures of MSM including Transgender in previous paragraph are results of the contribution of key informants motivated.

4. Conduct training of Peer educators for MSM and Transgenders on HIV and AIDS and sexual health issues; this activity consist of training selected peer educators from targeted key population groups especially MSM and Transgender to represent and train their peers after being trained and getting skills on HIV and TB Prevention Package and about health services.

The aim of training of help peer educators to get and increase knowledge on HIV and TB Prevention among MSM and Transgender, and get to increased services uptake among KPs, through shared knowledge on HIV/AIDS & sexual health issues to their fellow peers as results.

Topics for the training were organized with aim of responding to the needed skills by Peer Educators of such groups in HIV/AIDS and TB prevention area and other related programs. The following are themes and topics developed and covered during this refresher training:

Peer education techniques and roles of PEs towards serving their peers;





- Use, demonstration and distribution of condom and lubricants;
- Basic knowledge on HIV/AIDS prevention and STIs;
- ➤ The importance and use of HIV Health Testing and Counseling and VCT;
- Basic knowledge on Sexual Reproductive Health;
- Combating Drugs abuse in the context of HIV contamination;
- Sexual and Gender Based Violence (SGBV);
- The use of PEs reporting tools, and referral forms.

The training of peer educators held at district level, from each of the three districts such as **Huye,Nyanza and Karongi**; and each session accommodated 14 Peer Educators selected from MSM and Transgender Groups per hotspots and their location.

The table below gives more information on how the training was planned and organized:

Nº	DISTRI CT	DATES OF ACTION	COVERED BY	# OF PEER EDUCATOR	HEALTH FACILITIES
	NAME		SECTORS	S TRAINED	SERVING MSM and TRANS.
1	Huye	27/05/2022	Huye	4	CUSP HC
			Ngoma	5	
			Tumba	3	Huye
			Gishamvu	1	HC/Police
			Mbazi	1	
				Total :14	
2	Nyanz	28/05/2022	Busasamana	9	Nyanza HC
	a		Rwabicuma	1	
			Mukingo	3	
			Kigoma	1	
				Total:14	
3	Karong	26/05/2022	Bwishyura	8	Kibuye/
	i		Mubuga	2	Bwishyura HC





	Rubengera	4	
		Total :14	Rubengera HC

5. Organize quarterly meeting with Peer educators of FSW and MSM for collecting data on HIV and STI, referral for HIV testing, promotion of condom use and STI diagnosis this activity consist on data collection and collaboration mechanisms and brings together ASOFERWA's staff, Health facility workers and Peer Educators (Representatives of Female Sex Workers, MSM and Transgender) as key actors in HIV Prevention and TB program, It's an occasion to discuss how FSWs,MSM and Transgender are benefiting Health Services, discuss data collection process and use, reporting tools and discuss collaboration mechanisms towards expected results.







Photo shows people met during data collection meeting with involvement



THE MEETING'S AGENDA:

- **a)** Sharing data collection tools, data collection flow chart and mechanisms,
- b) Discussing on quality of collected data and updating identification of key population,
- c) Discuss on Peer education sessions and engagement of other stakeholders in program.





THE MEETING RESULTS:

- 60 participants made by Representatives of targeted key population (FSWs,MSM and Transgender) and Health Care Providers per District from Huye,Nyanza and Karongi Districts were met and shared data collection tools and mechanisms, use of Data, available reporting tools and discussed quality of collected data.
- Strategies and collaboration mechanisms between Peer Educators and Healthcare Providers receiving and serving key population's groups such as FSWs, MSM and Transgender, IDU were discussed to maintain positive interventions and for results based management.
- ◆ Peer education sessions were discussed for a smooth and conducive environment and harmonization of referrals system.

The data collection meeting was held at District level from targeted health facilities in **Huye**, **Nyanza** and **Karongi** Districts. The table below gives more info on how the meeting was scheduled:

Nº	DISTRI CT	DATES OF	VENUES BY HEALTH	CATEGORY (PARTICPANTS	OF
	NAME	ACTION	FACILITIES		
1	Huye	24/05/2	CUSP HC	1.Peer educators of K	ey
		022	Huye HC	Population such	as
				FSWs,MSM and Transgende	r
				2. Health Facilities workers.	
2	Nyanza	25/05/2	Nyanza HC	The same as the on	es
		022	Hanika HC	above /ldem	
3	Karong	23/05/2	Kibuye HC /	The same as the on	es
	i	022	Bwishyura HC	above /ldem	
			Rubengera HC		

6. **The quarterly stakeholders coordination meeting** brings together different key stakeholders in HIV and TB Prevention program and representatives of beneficiaries to mention FSWs,MSM





and Transgender. Discusses the progress of the HIV Prevention program, the achievements under the program and discusses collaboration mechanisms and actions to be taken to reach expected results especially at district level from three districts of **Huye, Nyanza** and **Karongi.** This activity was conducted twice this quarter due to the one which was pending from quarter three and all sessions were successfully done on different dates.





From Left to right are Photos take during coordination meeting in Huye, Nyanza



THE MEETING AGENDA:

- ✓ Discuss the HIV and TB Prevention program among Key Population's (FSWs, MSM and Transgender) and their rights to Health.
- ✓ Sharing timely or periodic achievements under HIV and TB Prevention Program, feedback on service delivery and calling for actions and advocacy.
- ✓ Discussing on collaboration mechanisms among key actors towards reducing new HIV infections among key population.

THE MEETING RESULTS:

Forty (40) participants by district were met and the number includes local authorities, law enforcement agencies, religious leaders,





Healthcare providers and representatives of key population groups such as FSWs, MSM and Transgender were gathered and shared program progress and rights to health on benefit of Key Population Groups.

- Engagement by different key actors in fighting HIV/AIDS and Tuberculosis was highlighted and taken as key element for positive impact.
- Strategies and collaboration mechanisms were discussed to maintain positive interventions in the area of fighting HIV/AIDS and Tuberculosis.

The quarterly stakeholder's coordination meeting held at District level from each of three districts such as **Huye**, **Nyanza** and **Karongi**. The table below gives more info on how the meeting was scheduled:

Nº	DISTRI CT NAME	DATES OF ACTION	# OF PARTICIPANTS	CATEGORY OF PARTICPANTS
1	Huye	26/05/20 22 02/06/20 22	40 per session 40 per session	1.Local authorities /Leaders 2.Law enforcement institutions 3.Religious leaders 4.Health Care Providers 5.Representatives of Key Population or peer educators /FSWs, MSM and Transgender. 6.CSOs' Representatives.
2	Nyanza	27/05/20 22 03/06/20 22	40 per session 40 per session	The same as the ones mentioned above/Idem
3	Karongi	25/05/20	40 per session	The same as the ones





22	40 per session	mentioned above /ldem
01/06/20		
22		

7. **Produce and air radio series drama, this** activity was conducted by organizing Radio talk-shows and was conducted in April and June 2022.

Radio talk-shows were organized in collaboration with RC Huye Radio and participants to the radio talkshows include ASOFERWA' staff, RBC staff and Radio staff. Dates of Radio talk-shows were scheduled and planned as follow: 22nd April 2022 and 20th June 2022. Those Radio talkshows are supported by records on CDs as means of keeping records and for further use.

VI. Challenges:

In general project Implementation process was not easy due to Covid-19 outbreak and its preventive measures to comply with, but with closer collaboration with local leaders and key community actors we were able to do and manage planned activities.







VII. Budget execution

Periodical budget							Comme
Activity name	Total Budget Planned FY July 2020 to June 2021 (in detailed OP) (a)	quarter Quarte rly		Quarte rly varian ce (b)- (c)	Cumula tive budget utilized (d)	Gener al Varia nce (a)- (d)	nts
Conduct mapping/tracing of key population to update selected hotspots and networks	2,619,480	2,619,4 80	2,619,4 80	0	2,619,48 0	0	N/A
Conduct supervision of activities carried out by NGOs	950,531	950,53 1	950,53 1	0	950,531	0	N/A
Support MSM and Transgender Key informants and peer educators in identification and enrollment of new group members	l	150,000	150,000	0	150,000	0	N/A
Conduct training of Peer educators	1,702,740	1,702,7	1,702,7	0	1,702,74	0	N/A







for MSM and Transgenders on HIV and AIDS and sexual health issues		40	40		0		
Conduct quarterly stakeholders coordination meeting on key population issues at decentralized level	2,422,740	2,422,7 40	2,422,7 40	0	2,422,74 0	0	N/A
Organize quarterly meeting with Peer educators of FSW and MSM for collecting data on HIV and STI, referral for HIV testing, promotion of condom use and STI diagnosis	2,412,800	2,412,8 00	2,412,8 00	0	2,412,80 0	0	N/A
Produce and air radio series drama	600,000	600,00 0	524,50 0	75,500	524,500	75,50 0	





VIII. Conclusion.

We are happy that all the activities that were planned for Q4 FY 21-22 HAVE been achieved, despite time constraints and Covid-19 Outbreak with its preventive measures to comply with. Targeted groups and key actors including local leaders have been actively involved in the activities implementation process, and they promised their full involvement towards achieving defined goals and objectives.

IX. Recommendations and Responsible Institutions:

- 1. More Key populations Medical Files are to be produced by RBC according to the new numbers of key populations as reported from identification results.
- 2. Health facilities workers especially focal persons are to be trained by RBC on key populations' friendly services and on how to use KP Medical file and on how to provide the unique Identification code (UIC) to key populations.
- 3. MoH/RBC has to consider costs related to covid-19 Testing Costs and prevention measures for smooth implementation process.

Reported Approved by

by

NDAGIJIMANA Bernard Appolinaire **NSHIMIYIMANA**





Programs Manager/ASOFERWA Secretary /ASOFERWA

Executive

Annex1: Table summarizing data collected

X. DATA BASED QUARTERLY REPORT ON THE INTERVENTIONS IN FAVOR OF FSWs AND MSM:

Provinces: South and Western.

Districts:

Huye ,Nyanza ,Karongi.

Implementing Partner (IP): ASOFERWA

Fiscal Year (FY): 2021-2022

Quarter/Period: Q. IV. April to June 2022.

Date of reporting: 14th July 2022.

Item or Description	Numbe r	# per District	# per Sector	Comment s
A. Services to FSWs:				
Number of FSWs identified	4,549	Huye : 2,309 Nyanza:802	Huye 230 Ngoma 1170 Tumba 580 Mbazi 139 Mukura 120 Gishamvu 70 Busasamana 418	The figures are results of new mapping exercise and identificati on. Numbers





		T	T -	1
		Karongi:143 8	Kigoma 246 Rwabicuma 123 Mukingo 15 Bwishyura 788 Mubuga 90 Rubengera 360 Gitesi 50 Gashari 150	are updated each quarter for effective and targeted interventio ns
The number of FSWs enrolled in the program	2,445	Huye: 1,187	Huye 198 Ngoma 542 Tumba 272 Mbazi 72 Mukura 71 Gishamvu 32	The ones enrolled are 54. % of the total number of so far identified
		Nyanza :52 2	Busasamana 238 Kigoma 186 Rwabicuma 88 Mukingo 10	FSWs. And enrollment exercise continues.
		Karongi:736	Bwishyura 418 Mubuga 47 Rubengera 172 Gitesi 23 Gashari 76	
Number of IEC sessions conducted	208	Huye :101	Gishamvu 12 Huye 9 Ngoma 26 Tumba 24 Mbazi 12 Mukura 18	The IEC sessions were increased five times to the ones





		Nyanza :50 Karongi:57	Busasamana 22 Kigoma 12 Rwabicuma 8 Mukingo 8 Bwishyura 22 Mubuga 16 Rubengera 14 Gitesi 3	of last quarter; Because small groups for Peer Education are already getting established
Number of IEC sessions conducted by peer educators	208	Huye :101	Gashari 2 Gishamvu 12 Huye 9 Ngoma 26 Tumba 24 Mbazi 12 Mukura 18	
		Nyanza :50	Busasamana 22 Kigoma 12 Rwabicuma 8 Mukingo 8	
		Karongi:57	Bwishyura 22 Mubuga 16 Rubengera 14 Gitesi 3 Gashari 2	
Number of HIV positive FSWs participated regularly in IEC Sessions during the quarter (Monthly Sessions)	774	Huye: 409	Huye 85 Ngoma 192 Tumba 46 Mbazi 31 Mukura 45 Gishamvu 10	FSWs who are HIV Positive represent 31,6 % of total FSWs enrolled in
		Nyanza: 121	Busasamana 72	Program.





		Karongi:244	Kigoma 35 Rwabicuma 12 Mukingo 2 Bwishyura 183 Mubuga 20 Rubengera 34 Gitesi 2 Gashari 5	
Number of HIV Negative FSWs participated regularly in IEC Sessions during the quarter.	1,671	Huye 778	Huye 113 Ngoma 350 Tumba 226 Mbazi 41 Mukura 26 Gishamvu 22	FSWs who are HIV Negative represent 68,3% of total FSWs
		Nyanza :40 1	Busasamana 166 Kigoma 151 Rwabicuma 76 Mukingo 8	enrolled in Program so far.
		Karongi:492	Bwishyura 235 Mubuga 27 Rubengera 138 Gitesi 21 Gashari 71	
Number of condoms distributed for a quarter from different services	136,600	Huye: 62,400	Gishamvu 9200 Huye 8800 Ngoma 22000 Tumba 6800 Mbazi 9000 Mukura 6600	Condoms distributed have increased more than three times comparing





		Nyanza: 35,000 Karongi: 39,200	Busasamana 12000 Kigoma 7200 Rwabicuma 9000 Mukingo 6800 Bwishyura 14600 Mubuga 9200 Rubengera 7800 Gitesi 2800 Gashari 4800	to the ones distributed last quarter. PEs are coping with distribution channels.
Number of FSWs referred to health facilities	2,445	Huye: 1,187	Huye 198 Ngoma 542 Tumba 272 Mbazi 72 Mukura 71 Gishamvu 32	Peer educators are the ones leading the referral system in
		Nyanza :52 2 Karongi:736	Busasamana 238 Kigoma 186 Rwabicuma 88 Mukingo 10	closer collaborati on with Health Facilities workers.
		1.a. 5g., 7.56	Bwishyura 418 Mubuga 47 Rubengera 172 Gitesi 23 Gashari 76	
How many FSWs not received referral forms by their peer educators	0	0	0	





How many referred from community	FSWs the	2,445	Huye: 1,187	Huye 198 Ngoma 542 Tumba 272 Mbazi 72 Mukura 71 Gishamvu 32	Peer educators are the ones leading the referral system in
			Nyanza :52 2	Busasamana 238 Kigoma 186 Rwabicuma 88 Mukingo 10	closer collaborati on with Health Facilities workers.
			Karongi:736	_	
				Bwishyura 418	
				Mubuga 47	
				Rubengera 172	
				Gitesi 23	
				Gashari 76	
How many referred for VCT	FSWs	1,612	Huye :782	Huye 146 Ngoma 310 Tumba 201 Mbazi 43 Mukura 54 Gishamvu 28	
			Nyanza :30 2	Busasamana 102 Kigoma 120 Rwabicuma 72	
				Mukingo 8	
			Karongi:	_	
			528	Bwishyura 350	
				Mubuga 32	
				Rubengera 88	





				Gitesi 15	
		2.4		Gashari 43	
How many	FSWs	24	Huye :11	Huye 3	
referred for ANC				Ngoma 4	
				Tumba 2	
				Mbazi 1	
				Gishamvu 1	
				Busasamana	
			Nyanza: 8	3	
				Kigoma 1	
				Rwabicuma 2	
				Mukingo 2	
			Karongi: 5		
				Bwishyura 3	
				Rubengera 1	
				Gitesi 1	
How many	FSWs	300	Huye :110	Huye 22	
referred for	STIs			Ngoma 26	
Screening				Tumba 30	
				Mbazi 14	
				Mukura 10	
				Gishamvu 8	
			Nyanza :47	Busasamana	
				23	
				Kigoma 6	
				Rwabicuma	
				10	
			Karongi:143	Mukingo 8	
				Bwishyura 82	
				Mubuga 22	
				Rubengera 31	
				Gitesi 3	
				Gashari 5	
How many	FSWs	130	Huye: 35	Gishamvu 5	
referred for FP			,	Huye 5	
				Ngoma 12	





			Tumba 3 Mbazi 4 Mukura 6	
		Nyanza :30	Busasamana 10 Kigoma 6 Rwabicuma 9	
		Karongi:65	Mukingo 5	
			Bwishyura 22 Mubuga 12 Rubengera 14 Gitesi 5 Gashari 12	
How many FSWs referred for TB Screening	100	Huye :30	Huye 5 Ngoma 4 Tumba 12 Mbazi 3 Mukura 5 Gishamvu 1	
		Nyanza :28	Busasamana 15 Kigoma 6 Rwabicuma 4 Mukingo 3	
		Karongi:42	Bwishyura 20 Mubuga 12 Rubengera 24 Gitesi 3 Gashari 5	
How many FSWs referred for Care and Treatment	774	Huye: 409	Huye 85 Ngoma 192 Tumba 46 Mbazi 31 Mukura 45 Gishamvu 10	





	1	t		
		Nyanza: 121 Karongi:244	Busasamana 72 Kigoma 35 Rwabicuma 12 Mukingo 2	
		Rai origin2 i i	Bwishyura 183 Mubuga 20 Rubengera 34 Gitesi 2 Gashari 5	
How many FSWs referred for SGBV Services		0	0	
Number of FSWs referred for condoms reasons	216	Huye :40	Gishamvu 6 Huye 4 Ngoma 12 Tumba 8 Mbazi 10	
		Nyanza :25	Busasamana 10 Kigoma 6 Rwabicuma 5 Mukingo 4	
		Karongi:42	Bwishyura 21 Mubuga 8 Rubengera 10 Gitesi 3	
Number of FSWs referred for lubricants reasons		0	0	
How many condoms distributed during a quarter	136,600	Huye: 62,400	Huye: 62,400	





Others with specifications		Nyanza: 35,000 Karongi: 39,200	Nyanza: 35,000 Karongi: 39,200	
Item or Description	Numbe r	# per District	# per Sector	Commen ts
A. Services to MSM and Transgender Group				
Number of MSM and Transgender identified	241	Huye :76	Huye 18 (2T) Ngoma 24 (2T) Tumba 13 (2T) Mbazi 8 Gishamvu 13	# of MSM are results of mapping exercise and
		Nyanza :48	Busasamana 25(9T) Rwabicuma 5 Mukingo 7 Kigoma 11	identifica tion being done quarterly.
		Karongi :11 7	Bwishyura 74 (7T) Mubuga 31 Rubengera 12 (5T)	
The number of MSM and Transgender enrolled in the program	173	Huye:44	Huye 16 Ngoma 20 Tumba 8	
		Nyanza:36	Busasamana 25 Rwabicuma 5 Mukingo 6	





		Karongi:93		
		Karongi.93	Bwishyura 55 Mubuga 28 Rubengera 10	
Number of IEC sessions conducted	38	Huye :15	Huye 4 Ngoma 6 Tumba 5	
		Nyanza :8	Busasamana 3 Rwabicuma 2 Mukingo 3	
		Karongi :15	Bwishyura 6 Mubuga 4 Rubengera 5	
Number of IEC sessions conducted by peer educators	38	Huye :15	Huye 4 Ngoma 6 Tumba 5	
		Nyanza :8	Busasamana 3 Rwabicuma 2 Mukingo 3	
		Karongi :15	Bwishyura 6 Mubuga 4 Rubengera 5	
Number of HIV positive MSM and Transgender participated regularly in IEC Sessions during	32	Huye :4	Huye 2 Ngoma 1 Tumba 1	
the quarter (Monthly Sessions)		Nyanza :5	Busasamana 3 Rwabicuma 1 Mukingo 1	
		Karongi :23	Bwishyura 20 Mubuga 3 Rubengera 0	
Number of HIV Negative MSM and	141	Huye :40	Huye 14 Ngoma 19	





Transgender participated regularly in IEC Sessions during the quarter.		Nyanza: 31 Karongi 70	Tumba 7 Busasamana 22 Rwabicuma 4 Mukingo 5 Bwishyura 35 Mubuga 25	
Number of condoms distributed for a quarter from different services	22,400	Huye :7000 Nyanza :52 00 Karongi :10 200	Rubengera 10 Huye 3000 Ngoma 2800 Tumba 1200 Busasamana 2600 Rwabicuma 1000 Mukingo 1600 Bwishyura 6400 Mubuga 1800 Rubengera 2000	
Number of MSM and Trans referred to health facilities How many MSM and	173	Huye:44 Nyanza:36 Karongi:93	Huye 16 Ngoma 20 Tumba 8 Busasamana 25 Rwabicuma 5 Mukingo 6 Bwishyura 55 Mubuga 28 Rubengera 10 0	
Lieu many mon and				





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Trans not received referral forms by their peer educators				
How many MSM and Trans referred from the community	173	Huye:44	Huye 16 Ngoma 20 Tumba 8	
		Nyanza:36	Busasamana 25 Rwabicuma 5 Mukingo 6	
		Karongi:93		
			Bwishyura 55 Mubuga 28 Rubengera 10	
How many MSM and Trans referred for VCT	88	Huye :32	Huye 12 Ngoma 14 Tumba 6	
		Nyanza :27	Busasamana 22 Rwabicuma 4	
			Mukingo 1	
		Karongi :29		
			Bwishyura 18 Mubuga 6 Rubengera 5	
How many MSM and	41	Huye :8	Huye 2	
Trans referred for STIs Screening			Ngoma 3 Tumba 3	
		Nyanza :15	Busasamana 9 Rwabicuma 2 Mukingo 4	
		Karongi :21	Bwishyura 14 Mubuga 5 Rubengera 2	
How many MSM and	30	Huye :4	Huye 2	





Trans referred for TB Screening		Nyanza :7	Ngoma 1 Tumba 1 Busasamana 2 Rwabicuma 3 Mukingo 2
		Karongi :19	Bwishyura 10 Mubuga 5 Rubengera 4
How many MSM and Trans referred for Care and Treatment	32	Huye :4	Huye 2 Ngoma 1 Tumba 1
		Nyanza :5	Busasamana 3 Rwabicuma 1 Mukingo 1
		Karongi :23	Bwishyura 20 Mubuga 3 Rubengera 0
How many MSM and Trans referred for SGBV Services	0	0	0
Number of MSM and Trans referred for	22,400	Huye :7000	Huye :7000
condoms reasons		Nyanza :52	Nyanza :5200
		Karongi :10 200	Karongi :10200
Number of MSM and Trans referred for Iubricants reasons	47	Huye :13	Huye 5 Ngoma 6 Tumba 2
		Nyanza :14	Busasamana 10 Rwabicuma 2 Mukingo 2





		Karongi :20	Bwishyura10 Mubuga 8 Rubengera 2
How many condoms distributed during a	9,300	Huye :3800	Huye :3800
quarter		Nyanza :20 00	Nyanza :2000
			Karongi :3500
		Karongi :35 00	
Others with specifications			

Done at Kigali, on 14th July 2022

Reported by:
Approved by:

NDAGIJIMANA Bernard NSHIMIYIMANA Appolinaire

Project Manager Executive Secretary /ASOFERWA