

# Scottish Government Rwanda Development Programme

## End of Year 1 Report

<b>1. General Project Information</b>			
1.1	<b>Project Reference Number:</b>	RWA2	
1.2	<b>Name of Organisation:</b>	WaterAid	
1.3	<b>Lead Partner(s):</b>	WaterAid Rwanda	
1.4	<b>Project Title:</b>	Improving health and sanitation in vulnerable communities and schools of the Southern Province of Rwanda by 2022. (Nyamagabe Alba Project)	
1.5	<b>Reporting Period:</b>	<b>From:</b> 01/10/2017 <b>To:</b> 31/03/2018	
1.6	<b>Reporting Year:</b>	Year 1 (first six months)	
1.7	<b>Project Start ate</b>	October 2017	
1.8	<b>Project End date</b>	March 2022	
1.9	<b>Total Project Budget*</b>	£1,384,096m	
1.10	<b>Total Funding from IDF*</b>	£1.08m	
1.11	Have you made any changes to your logframe? If so please outline proposed changes in the table below. Please note all changes require Scottish Government approval. If changes have already been approved please indicate this in the table.		
	<b>Outcome/Output</b>	<b>Proposed /Agreed Change</b>	<b>Reason for Change</b>
			<b>Date Approved and by whom</b>
	Impact Indicator 1	Milestones updated	Baseline study
	Impact Indicator 2	Milestones updated	Baseline study
	Output 1.2, 1.3 & 1.4	Milestones updated	Baseline study
1.12	<b>Supporting Documentation</b> Check box to confirm key documents have been submitted with this report	<b>Up to date Logical Framework, which reflects any changes detailed above.</b>	Y
		<b>Up to Date Budget Spreadsheet</b>	Y
		<b>Case Study</b>	Y
<b>Report Author:</b>		<b>Signature:</b>	
[REDACTED]		[REDACTED]	

## 2. Progress and Results

2.1 Please give an update on the progress your project has made during the reporting period. Please use this space to update us on what has gone well and any challenges you have experienced, detailing how you have overcome these. (Max 500 words)

The Nyamagabe Alba Project is WASH project focused on helping 330,000 people to meet basic & improved hygiene and sanitation needs.

In the first 6 months of the project;

- 1702 children (880 girls & 822 boys) gained access to improved, accessible latrines with menstrual hygiene facilities.
- 38 new school hygiene clubs were formed.
- 67 existing school hygiene clubs trained on school WASH standards,
- District Education Officials from both District and Sector level were involved in School WASH promotion.
- 300 Community hygiene clubs (CHCs) were formed
- 21,000 people reached through CHCs (10,920 women & 10,080 men)
- 300 hygiene toolkits were printed for CHCs.
- Business Development unit staff including 17 Managers of Saving and Credit Cooperatives (SACCO) are aware about Sanitation Marketing and working with Village Savings and Loans Associations (VSLAs) in household sanitation promotion.

COFORWA, our local partner, completed the construction of an inclusive school latrine at Nkumbure School, located in Tare sector of Nyamagabe District. Before construction was completed, there was one toilet stance per 86 girl pupils, now that figure has reduced to one toilet stance per 49 girl pupils.

The latrine also has an accessible toilet and a menstrual hygiene management room, with 3 separate areas: a resting room, store and a bathroom connected with a burn chamber. The official handover of the new latrines is planned on 28<sup>th</sup> May to coincide with Menstrual Hygiene Day.

In the community, 300 hygiene clubs were re-established with support from Kigeme and Kaduha Hospital and Health Centre Environmental Health Officers (EHOs).

CBEHPP<sup>i</sup> tools for 300 CHCs were printed and, following feedback an online reporting tool was also developed. All EHOs have been trained in the use of this tool. The Hospitals, District and WaterAid Rwanda will now receive a monthly report on data collected by these tools from the Health Centres.

A technical advisory committee has been formed to monitor the implementation of the project. The committee will meet quarterly, combined with a field visit. The first meeting took place on 8<sup>th</sup> & 9<sup>th</sup> February 2018. The

	<p>second meeting is planned for May 2018, where the draft TOR will be signed. The committee is chaired by the Director General of Clinical Services and Public Health Directorate in the Ministry of Health, the Co-chair is from the National ECD<sup>ii</sup> Program based in MIGEPROF<sup>iii</sup>, and the secretariat is occupied by the Environmental Department of the Ministry on Health. WaterAid Rwanda and Nyamagabe District are also members.</p> <p>WaterAid Rwanda together with Nyamagabe District plan to carry out Formative Research which will inform on sanitation products demand and marketing strategy for the sanitation marketing element of the project.</p> <p>During the review of the project milestones and budget, we identified a challenge with the logic of Activity 1.6. We had originally planned to print the remaining hygiene toolkits across Years 3,4 &amp; 5, however we realised that if tools were not produced in Year 2 it would be difficult to carry out the planned training of CHC's in Year 2.</p> <p>To overcome this challenge, we propose to move costs linked to Output 6 (establishment of revolving funds) from Yr 2&amp;3 into Yr 3&amp;4 to allow us to move printing costs linked to Output 1 forward into Yr 2&amp;3.</p> <p>Moving activities related to outcome 6 will not have any negative impact on the planned milestones or the overall project.</p> <p>As CHCs become functional and are actively putting into action all of their assignments, CHC sessions will be linked with VSLAs activities, educating members on how to work with SACCOs.</p> <p>They will be able to identify their own sanitation needs that a SACCO loan might help them respond to. Also, research on hygiene and sanitation markets will be conducted during year 3, which will provide us more information on the real community needs related to sanitation. This will help us to define which products SACCOs would support.</p> <p>These changes have been requested for approval and detailed in Section 4 and have also been reflected in the budget report and updated budget spreadsheet</p>
2.2	<p>Have you completed all baselines for the project? If not please explain why and describe what plans are in place to ensure these are completed. If you have please ensure these have been added into your logframe. (Max 200 words)</p> <p>The baseline survey was completed on 21st December and the logframe has been updated accordingly.</p> <p>This baseline survey was delayed by the recruitment of the Project Manager and delayed Start Up Workshop.</p> <p>The report showed that 8.9 % of households do not have latrines, 38% have</p>

	<p>unimproved sanitation facilities; and poor toilet facilities are linked to low income as well as behaviour.</p>						
2.3	<p>Have you experienced any delays to planned activities? Please provide full details including what action is being taken to bring activities back on track. (Max 250 words)</p> <p>There were some delays in the first few months of the project, the Project Manager was not recruited until November delaying the Project Start Up Workshop until December. Baseline studies were therefore not completed until the end of December.</p> <p>These delays meant that it was not possible to measure impact at outcome and output level after such a short period of time from the baseline data being collected.</p> <p>We are pleased to report that despite these delays, we were able to deliver all planned activities in the first 6 months of the project, with the exception of printing of some monitoring tools and training of VSLA agents, which we are proposing to complete in Year 2.</p> <p><b>Activity 1.7 Printing of CBEHPP monitoring tool.</b> The Ministry of Health suggested integrating the CBEHPP monitoring tool with information related to nutrition and Early Childhood Development. This delayed the final design of the monitoring tool and has pushed printing into Yr2.</p> <p><b>4.2 Training of VSLA agents</b> We have delayed this activity as we need to ensure that the CHC's are well established, following the delay at the start of the project, before integrating them with VSLA agents.</p>						
2.4	<p><b>Project Outcomes</b> In the table below, please list each of your project Outcomes, and provide further detail on your progress and results over this reporting period. Describe any delays or other challenges that you have experienced and how these have been addressed and provide information about any unexpected results (for example where targets have been vastly exceeded). Progress should also be updated within the relevant fields of your logframe.</p> <p>Outcome: Improved hygiene promotion and behaviour-change practices for vulnerable communities and school children</p> <table border="1" data-bbox="263 1776 1406 2031"> <thead> <tr> <th data-bbox="263 1776 716 1854">Outcome Indicator</th> <th data-bbox="716 1776 1075 1854">Milestone / Achievement</th> <th data-bbox="1075 1776 1406 1854">Progress</th> </tr> </thead> <tbody> <tr> <td data-bbox="263 1854 716 2031">1.1 Proportion of schools with group handwashing facility with soap and water when observed</td> <td data-bbox="716 1854 1075 2031">Milestone 70% Achievement 64%</td> <td data-bbox="1075 1854 1406 2031">This milestone was set with planned project start date of October 2017. There</td> </tr> </tbody> </table>	Outcome Indicator	Milestone / Achievement	Progress	1.1 Proportion of schools with group handwashing facility with soap and water when observed	Milestone 70% Achievement 64%	This milestone was set with planned project start date of October 2017. There
Outcome Indicator	Milestone / Achievement	Progress					
1.1 Proportion of schools with group handwashing facility with soap and water when observed	Milestone 70% Achievement 64%	This milestone was set with planned project start date of October 2017. There					

			<p>were some slight delays in the first three months of the project, with the recruitment of the project manager, who was not in post until the end of November. The impact of this was that the start-up workshops and baseline surveys did not take place until December.</p> <p>These delays meant that it was not possible to measure impact at outcome and output level after such a short period of time from the baseline data being collected.</p> <p>Although two hand washing stations were put into place at school latrines constructed at GS Nkumbure, this result is too small to have an impact on the milestones for this outcome.</p>
1.2	Proportion of households with presence of handwashing facilities along with soap and water (in kitchen and near toilet)	Milestone 70% Achievement 58.5%	<p>The milestone of 70% was set prior to the baseline survey.</p> <p>Upon completion of the baseline survey we recorded that 58.5% of households had handwashing facilities.</p> <p>Although Community</p>

			<p>Hygiene Clubs were established, it was not possible to have 3 touch points of behaviour change messages with the CHC's in just 3 months.</p> <p>The delays at the start of the project meant that it was not possible to measure impact at outcome and output level after such a short period of time from the baseline data being collected.</p> <p>It is expected that after series of trainings, a total number of 82,132 households of Nyamagabe district will have access to handwashing facilities.</p>
2.5	<p><b>Project Outputs</b> In the table below, please list each of your project Outputs, and provide further detail on your progress and results over this reporting period. Describe any delays or other challenges that you have experienced and how these have been addressed, and provide information about any unexpected results. Progress should also be updated within the logframe</p>		
	<p>Output 1: Safe hygiene practices in households and communities promoted using Community Hygiene Clubs (CHCs)</p>		
	<p><b>Output Indicator</b></p>	<p><b>Milestone / Achievement</b></p>	<p><b>Progress</b></p>
	<p>1.1 # of people reached through the CHC (at least 3 touchpoints per year)</p>	<p>Milestone: 45000 (23,400 women and 21,600 men)</p> <p>Achievement: 43,932 21,000 (re-established CHC's) 22932 (Baseline)</p>	<p>300 CHCs were re-established following the CBEHPP Guidelines (in 300 villages with a total membership of 21,000 (10,920 women &amp; 10,080 men)</p> <p>These guidelines</p>

			<p>state that there should be 3 touch points with CHC's over the course of a year.</p> <p>However, it was not possible to have those 3 touch points with the CHC's as there were some delays at the start of the project and we also experienced competing demands placed on local leaders.</p> <p>This activity requires the involvement of local leaders to mobilise the community.</p> <p>However, due to competing demands over last 6 months for these leaders (who have been involved in an intense national campaign on hygiene and sanitation), the planned target was not reached.</p> <p>The project will make an effort to achieve this target together with the number of people to be reached in the second year of implementation.</p>
Output 2: Schools with access to improved water, sanitation and hygiene.			
	<b>Output Indicator</b>	<b>Milestone / Achievement</b>	<b>Progress</b>
	2.1 # of schools with latrines that have menstrual hygiene facilities and are accessible for	Milestone 1 Achievement 1	An inclusive school latrine was constructed at one

teachers and children with disabilities		school. The toilet has 8 stances, menstrual hygiene facilities (resting room, store, bathroom, & burn chamber) an accessible toilet and 2 hand washing stations.
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### 3. Operational plans and partnerships

3.1 Are all staff required to deliver the project now in place? If not, please explain what action you are taking to ensure all essential roles as outlined in your application, are in place as you move into year two of the project. If plans for staffing has changed, please tell us about this. (Max 200 words)

Yes, all required staff are in place to deliver the project;

- **Scotland based Project Manager**  
leading on technical compliance
- **WaterAid Rwanda team**  
leading on technical and financial management oversight
- **COFORWA**  
technical implementer
- **Nyamagabe District**  
facilitator and regulator for the overall implementation of the project.

A project Manager, reporting to WaterAid Rwanda Head of Programmes was recruited in November 2017 and is based in the District Health Unit Office of Nyamagabe District.

Technical and financial support is provided when needed respectively by Head of programs, WASH Program Manager, Finance Manager. Head of Policy, Research and Advocacy Manager also provides technical support in the implementation of activities related to policy research and advocacy.

In addition to this, a technical advisory committee has been formed by Nyamagabe District to monitor the implementation of the project.

3.2 Are all partnerships on the project now in place? Please update on how these partnerships are progressing, letting us know about any highlights, challenges or changes to roles and responsibilities. (Max 300 words)

Yes, all partnerships on the project are now in place.

WaterAid Rwanda has a signed MoU with all 3 partners:

- Nyamagabe District
- Kigeme & Kaduha Hospitals and
- COFORWA.



Behaviour changes activities are being implemented by Kigeme and Kaduha hospitals. The Health Unit and Business Development Department of Nyamagabe District are supporting the co-ordination of these activities.

Capital items like school latrines are constructed by our local partner COFORWA, with more than 35 years of experience in construction of water and sanitation facilities. The Water & Sanitation Department and Education Unit of Nyamagabe District are supporting these activities, in terms of site identification, works supervision and school's mobilisation.

The project interventions fall under the Ministry of Health which WaterAid has a partnership with.

To ensure co-ordination within these partnerships, it is important to note that a Technical Advisory Committee with clear Terms of Reference was put into place. It is made of Ministry of Health as chair and secretariat, ECD national coordinator as co-chair and WaterAid Rwanda, Nyamagabe District and Kigeme & Kaduha Hospitals as members.

This committee meets on quarterly basis to discuss the implementation progress, challenges and actions to be taken to address any challenge identified.

3.3 Have any visits to the project taken place in this period? Please give details including key activities and outputs of these visits.

Date of Visit	Key achievements / outputs of visit	Follow up actions
December 12-16, 2017	Start-up workshop held in Kigali & Official project launch in Uwinkingi sector / Nyamagabe District with representatives from WaterAid Rwanda, WaterAid Scotland, COFORWA, Kigeme & Kaduha Hospitals and Nyamagabe District.	Formative research on sanitation marketing.
January 22-24, 2018	WaterAid Rwanda hosted a visit of Scottish Government and Scottish Water which preceded by a one-day session on Scottish Government Grants Management.	To develop an online reporting tool which is now completed and EHOs have been trained in its use.

		<p>Content and case studies gathered to support promotion of and fundraising for Scottish Water's match funding.</p> <p>Introductory meeting between Scottish Water and WASAC (Water and Sanitation Corporation) to explore capacity building opportunities.</p> <p>The visit was also marked by laying of foundation stones at Nkumbure School in Tare sector.</p>	<p>Produce overview films for use at fundraising events and on Menstrual Hygiene Management Day.</p> <p>Continue dialogue and identify areas where Scottish Water can offer support.</p>
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**4. Financial Information**  
This section will be reviewed alongside your end of year financial report, which must be included with this report. Please ensure an explanation for any variance to planned expenditure is provided against each budget line in the space provided in the budget spreadsheet.

**4.1** If your spending is not on track as expected, please outline the reasons why, and detail what plans are in place to bring spending back on track. If you are requesting changes to your budget at this stage, please outline them below. (Max 350 words)

Overall, spending is on track, during this reporting period, the variance between the Grant Offered and the Grant Spent is -£3,172.

We were able to make some savings across activities, the most significant being £1,500 against international travel. This was due to planned International travel for the Scotland based Project Manager which did not take place. There was travel in January to accompany a Scottish Water visit, therefore there was no requirement to fund a further visit.

The most significant overspend was £3,176 on the Baseline Survey. As, the Baseline Survey was delayed it took place in December, during a short rainy season. This meant that some households could not be reached and multiple journeys were required to collect the data.

There is also some delayed spend on Activity 1.7 & Activity 4.2.

Activity 1.7 was delayed as the Ministry of Health suggested integrating the CBEHPP monitoring tool with information related to nutrition and Early Childhood Development. This delayed the final design of the tool and has pushed printing into Yr2.

Activity 4.2 was delayed as the Community Hygiene Clubs need more time to develop before introducing VSLA agents.

We are proposing that in Year 2, £3,012 of the underspend is allocated to these delayed activities.

- £1,512 allocated to Activity 1.7.
- £1,500 allocated to Activity 4.2.

With the remaining £160 saving from currency gains ring fenced.  
(Total underspend £3172 - £160 currency gains = £3,012).

Output 3 & 4 are not reported on within the logframe but as there is expenditure against these items in the budget, these activities are detailed below;

### **Output 3**

#### **Mobilize all WASH stakeholder to develop joint plan to provide water to all schools through Joint Action Development Forum (JADF)**

1 mobilisation meeting took place with WASH stakeholders, using the District Wide Approach (DWA) to advocate for safely managed water services in schools

### **Output 4, Activity 4.1**

#### **Facilitate formation of VSLAs among Community Hygiene Clubs**

Village Savings and Loans Association (VSLAs) integrated into Community Hygiene Clubs.

Business Development unit staff including 17 Managers of Saving and Credit Cooperatives (SACCO) are aware about Sanitation Marketing and working with Village Savings and Loans Associations (VSLAs) in household sanitation promotion.

### **Budget change request linked to Output 1 & 6**

During a review of planned activities, we identified an issue with the planned printing of the toolkits for Community Hygiene Clubs, Activity 1.6.

These were originally planned to be printed in Year 3, Year 4 & Year 5 with a total expenditure of £93,781.

- Yr3 £30,128
- Yr4 £32,128
- Yr5 £31,525
- **Total £93,781**

We have agreed that the spend allocated to Activity 1.6 will be moved forward into Year 2 &3, to ensure the toolkits are available to CHCs in Yr2 when the supervision and coaching of the clubs commences. This will give the CHCs time to develop and use the toolkits over the duration of the project.

- Yr 2 £56,756
- Yr 3 £37,025
- **Total £93,781**

WaterAid will fund the costs of this spend in advance. These costs will then be recovered as planned in the original budget grant claims.

## 5. Any other Information

Please use this section to tell us any other relevant information regarding your project. (Max 350 words)

Scottish Water employee fundraising is providing the match fund for this project. In Year 1, the match fund, as planned was used to construct improved, accessible latrines at Nkumbure School.

In January 2018, Scottish Water representatives visited Nyamagabe District to gather case studies and content which will be used to raise awareness of and funds for Year 2 of the project.

They visited each of the main partners in the project and the school which they were directly supporting the construction of latrines in Year 1. They joined Scottish Government representatives at Nkumbure School and participated in the laying of the foundations for the new latrines. They were able to see first-hand the challenges that the school faced with the limited number of latrines they had and the poor menstrual hygiene facilities.

In February 2018, Scottish Water hosted the annual WaterAid Scotland Ball and raised almost £100,000, funds from this event will be used for their match fund contribution for Yr2, raising awareness of this project to over 400 attendees.

On Menstrual Hygiene Day, 28<sup>th</sup> May, Scottish Water and WaterAid Scotland are planning to share content from this visit internally to their 3,400 employees and externally on social media channels. There are also plans to hold an awareness raising event with a school in Scotland, to coincide with the official handover of the latrines at Nkumbure School.

During the visit, WaterAid Rwanda facilitated an introductory meeting between Scottish Water and WASAC (Water and Sanitation Corporation) in Kigali and both parties are continuing that dialogue to explore, along with WaterAid, opportunities to establish a capacity building relationship between the two utilities.

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- i CBEHPP: Community Based Environmental Health Promotion Programme
  - ii ECD: Early Child Development
  - iii MIGEPROF: Ministry of Gender and Family Promotion