

12TH, September, 2011

Report Title: **STUDY TOUR OF THE RWANDAN VASECTOMY PROGRAMME (from 5th to 9th September, 2011)**

SUBMITTED TO: **DR.RAMON SUAREZ**

PRESIDENT

NON-SCALPEL VASECTOMY INTERNATIONAL (NSVI)



USA

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OBJECTIVES:



1. To establish ground and network for an NSVI mission to both Rwanda and Kenya.
2. To explore ways of replicating the Rwandan Intraluminal cauterization and Fascial Interposition NSV(IC&FI NSV) into the Kenyan health care system.

THE JOURNEY.


 <p>THE AKAMBA BUS COMPANY</p>	<p>Due to budgetary constraints I took a grueling 14 hours bus ride from Kisumu, Kenya to Kigali Rwanda with a 4 hours layover in Kampala, Uganda. The departure was scheduled for 1.00pm on 5th, sept but the bus delayed until 10.00pm and when it finally showed up it had a mechanical hitch that had to be fixed in the night! I almost gave up but the excitement of visiting Rwanda motivated me.</p>
 <p>THE IMMIGRATION</p>	<p>Uganda had the most user friendly immigration services. It is completely paperless. They simply scan the finger prints and match it with the passport biometrics. It is fast and efficient. These changes were implemented after terrorists bombed Kampala in July 2010 killing 74 world cup fans.</p>

	<p>OLEPOLOS GUEST HOUSE Picture with the manager Mr Richard Siongoh, a Kenyan. He was warm and friendly.</p>	<p>I arrived in Kigali at 9pm on the 6th, September. My contact, Mr. Alfred Nanjye was waiting for me at the bus park with a wine red car ready to chauffeur me to Olepolos guest house. Alfred is a 23 year old young man; he speaks both French and English fluently. He was 9 years old during the genocide; he miraculously escaped death narrowly by slipping through the window into the bush. He had the screams from his parents and two siblings until they went silent under the attacker's machetes and clubs. For one month he survived on raw sweet potatoes and sugar cane. He has never thought of vasectomy because he is still single. Most ladies he meets want money before Love. Kigali is an expensive town.</p>
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KIGALI CITY

	<p>ROUND ABOUT</p>	<p>The cleanliness of Kigali is legendary. There is no city in East Africa that is comparable to it. There is strict adherence to the city bi-laws. Littering the streets or stepping on the grass would land you into trouble instantly. They have "umuganda" a compulsory end of the month communal work that augments the city employees.</p>
	<p>THE GENOCIDE MEMORIAL CENTRE</p>	<p>Entrance fee:5USD It is a painful reflection to be at the centre. One will find it difficult to hold back the tears. There are pictures, videos, skeletons and other preserved personal items of the victims. The role each one played Negative or positive are clearly demonstrated. The deaths were long, painful and humiliating. There is electronic tour guides that gives a preview of what happened at each stop.</p>






THE LOGISTICS:

	<p>MINISTRY OF HEALTH(MOH) H/Qs</p>	<p>I met Dr Leonard Kagabo, the master trainer of NSV at his office on 7th; sept. He had been engaged previously with his supervisors. I had to write an official letter to the Permanent Secretary MOH requesting for permission to visit their vasectomy sites in the country side. I also shifted residence to Leo's place on the same day.</p>
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	<p>On Thursday, the 8th we were granted permission, given a brand new pick up 4x4 and a Driver too! And off we went with Leo. As we glided smoothly towards the Eastern Province we passed Lake Muhuzi along the way, it fills up the valleys at the bottom of the hills. Rwanda is truly a country of a thousand hills.</p>
	<p>The first stop was this Health Post called Kiziguro. There are many of these health posts strategically located near the Catholic hospitals which don't offer Family planning, Vasectomy inclusive. USAID has a huge presence in Rwanda and it assisted in its construction and furnishing.</p>
 	<p>I observed Leo do 3 Intraluminal cauterization and Fascial Interposition NSV. Him and two others were trained and mentored by Prof Michel Labrecque from Canada. Labrecque is regarded with high esteem in Rwanda because this is the first project of its kind in the African Continent. People expected the Rwandan government to slow down on Family Planning after the Genocide but instead it has even aligned it with its Economic plans, the Vision 2020. FHI gives both technical and budgetary support to the programme. They did 800 NSVs in 2010 and the demand is soaring! Two clients were turned away because of the mandatory spousal signature: the first man had 8 children with different women but none was available to append her signature. Two wives belonging to the second man signed but his first wife declined to sign because she only had one child with the man and wanted more, this man already had 4 children with the second wife and three with the third wife.</p>
 	<p>Charles and Dr. Joel Kapalanga at the entrance to Kiziguro Catholic hospital. He has to go like 1 km away to the Health post to do NSVs. He was trained by Leo. Joel is from the Democratic Republic of Congo (DRC). He is fluent in French with little English enough for communication. Congolese and Burundi Doctors make up for 18% of the health care work force in Rwanda.</p>
	<p>Vincent is a Health supervisor. He supervises 11 health posts and has a number of CHWs under his watch. The CHWs do home counseling and give clients the vasectomy forms to sign in the comfort of their homes without the hassle of looking for transport to the health post. Vincent has a motor</p>


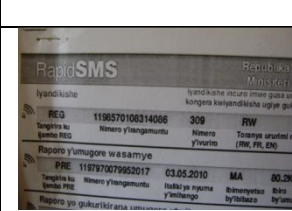


Kiziguro ruins after genocide.

VINCENT MUSANGADE

		<p>bike and Mobile phone fully serviced by the MOH. He is smartly dressed with a clearly labeled name tag. He was elected by his community and so he has to conduct himself with the dignity that befits his office.</p>
		<p>Client relaxing with wife outside post procedure.</p>
		<p>At lunch hour, the team had to break for Bitochi (bananas) and roasted goat's meat at the local restaurant.</p>
	<p>GAKENKE HEALTH CENTRE</p>	<p>On our way back to Kigali we had to confirm 27 vasectomy bookings for Wednesday, the 14th, September unfortunately I shall have gone back to Kenya where Vasectomy has not been popularized yet.</p>

FINAL DAY

		<p>On Friday the 9th we had a two hours drive to Cheseguro Health centre, we went through Rice fields and Banana plantations and sometimes the ride was a little bumpy but when we arrived the scene was worth the effort. The place had 20 vasectomy clients waiting patiently. Some with spouses others not.</p>
		<p>The CHW was already going on with the counseling session with the aid of diagrams and flip charts. Some were young others not so young.</p>
		<p>The Hospital Administration was kind enough to hire an extra car to carry Dr Joel and Vincent from Kiziguro to lend a hand here on this busy day.</p>

	<p>These men were a bit disappointed the 2.5USD transport reimbursement they had been promised was not forthcoming. I assisted Leo in 3 cases and had to leave hurriedly to catch my Bus back to Kisumu. Joel later wrote to me an Email indicating he did 8 more cases that day.</p>
 <p>The Rapid SMS</p> <p>MATERNAL MORTALITY IN RWANDA DROPS</p>	<p>Rwanda has the unique Rapid SMS system. Each time a pregnant woman goes into labor in the community, The CHW (Animateurs de santé') sends a message on the MOH's mobile phone which is postpaid to MTN network. The nearby Hospital and the MOH HQ's are the recipients of the message, complete with the client's identity, ID number and all the demographics. The message is made public and action to transfer the lady to the hospital is executed immediately. Unnecessary delays not tolerated. Widespread vasectomies, competent CHWs and Rapid SMS have led to a sharp decline of maternal deaths.</p>
	<p>Kigali Bus Park in the Evening.</p>
	<p>LAKE MUHUZI EASTERN RWANDA</p>

CONCLUSION/RECOMMENDATION:

- ❖ An NSVI mission to Rwanda is possible and feasible. Rwanda has all the infrastructure for Vasectomy Services which is coordinated from the ministry of Health headquarters (MOH).It has a strong back up from the Government and International partners e.g. FHI, Intrahealth, UNFPA and USAID. Parliament gets periodic updates from the Minister for Health on how the programme is fairing on. Leading Vasectomy Experts e.g. Prof. Labrecque and David Sokal gives the programme the much needed technical support and research updates.NSVI only needs to write a letter to the Permanent Secretary MOH expressing intent to conduct a mission into the country and I am sure permission will be granted.
- ❖ The Kenyan situation is still rudimentary as compared to the Rwandan one despite the fact that we are both in East Africa. We can organize one mission in Kenya to test the waters. I guess we

just need to identify the venue and alert the Ministry of Health. The beauracracies can be a challenge but where' there is a will, there is a way'.

THANK YOU

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