

Breaking the silence

Young people in Rwanda are discovering that HIV-positive status does not have to stand in their way.

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When a normal life no longer seems possible

In Rwanda, people living with HIV are socially stigmatised and ostracised. Very few know that all opportunities are still open to them despite their diagnosis.

While Rwanda has been successful in curbing the spread of HIV, the number of new infections among the young is not dropping. Young people are not very well informed and don't use contraceptives as often as adults. And they have to contend with social ostracism if they get infected with HIV. They are bullied and shut out, their chances of getting a job dwindle, and many drop out of school. This makes a life in poverty more likely – and also increases the risk that they will not share their HIV status and possibly infect others. Comprehensive sex education could help, but it is a social taboo in Rwanda: Neither families nor schools give children and young people enough information about how to protect themselves and others.

Young people claiming their sexual and reproductive rights

With the help of the "Empowering young people to claim their sexual and reproductive health and rights" project, young Rwandans have begun breaking the silence and educating each other about sexual health. Young people, especially teenage mothers, were empowered to demand their sexual and reproductive rights and the rights of their children. The project has also helped parents, teachers, health workers and representatives of local authorities better understand the legal situation and scope of the

problem. The project was one of the winners of the "Agents of Change – Child and Youth Rights in German Development Cooperation" competition and implemented by the Sector Programme Human Rights on behalf of the German Federal Ministry for Economic Cooperation and Development (BMZ) in partnership with the "Promoting a Rights-Based Approach in Civil Society Organisations" project from the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) in Rwanda.

"You can accomplish anything; don't let it get you down!"

Nadia*, 25, works with and coaches around 200 children and young people living with HIV on issues pertaining to their health and lives:

I didn't find out why I had been taking medication all my life until I was a teenager. But not from my family or doctors though: No, I heard rumours in the village that I might be infected with HIV. The news pulled the rug out from under me. I hardly knew anything about the disease, and the scant information I had learned in school was far too superficial for me to understand what this diagnosis meant. I only knew that it would be a disaster for my future.

As a person with HIV, you are worth nothing in Rwanda. Legally, of course, we are on an equal footing with healthy people, but there is tremendous social ostracism. If our status becomes known, we are sometimes threatened with dismissal, friends turn their back on us at school, and financially life often becomes harder. So many families prefer to keep the illness a secret. Children often drop out of school if their HIV status becomes known. They cannot see the point in continuing their education, because they believe they can no longer achieve anything in life anyway. Since most young people are

just as in the dark as I was back then, they may not seek proper medical treatment and might even spread the virus.

Today, I am studying financial accounting at the University of Kigali. I am one of the few HIV-positive people who have made it to univer-

sity. The

Rwandan Network for People Living With HIV/ Aids (RRP+) non-governmental organisation was particularly helpful in restoring my self-confidence: I first had to learn that I am worth something too and can determine the path I take in life. And that I can do anything and participate in everything despite my diagnosis. Today, I volunteer as a peer counsellor and pass this message on to more than 200 young people who have tested HIV positive. We started with discussion groups, but I also do home visits. We talk about access to antiretroviral drugs and getting care if they fall ill, about self-confidence, sexual education and HIV prevention. I encourage and motivate young people and let them know their disease is not a curse. That

they can achieve a lot if they put in the work. And that they can, of course, have contact with and work with people who are not infected.

This exchange changes almost everything for these young people. Talking openly with others about their situation is a completely new experience. Many participants knew next to nothing about their own state of health going in. They can now understand and deal with their illness in a completely different way. Above all, they see new perspectives and are taking control of their

lives. In one of my workshops, ten of the twenty participants were on the verge of dropping out of school. But the workshop – and the fact that I was attending university – changed their minds. They now want to graduate and are making plans for the future.

*Name changed

The situation in Rwanda

No condoms for minors

Adults have the power to make decisions about sexual health – at least that is how the law in Rwanda sees it: Anyone who wants to buy contraceptives or be tested for HIV must be at least 18 years old or have their parent's consent. This makes it difficult for young people to exercise their sexual and reproductive rights. It also exacerbates a problem that is already deeply rooted in a society where sex education is a taboo subject in most families. While sex education was added to the curriculum for all types of schools in 2016, there is little follow-up on implementation. So most teenagers do not use contraceptives and very few get tested for HIV, leading to a high rate of unwanted pregnancies and new HIV infections among young people.

Both pose severe limitations on a young person's life: Underage mothers are stigmatized as immoral and often struggle financially. Along with health problems, young people living with HIV face social ostracism. Although they are entitled to medication and treatment – a young person who is HIV-positive can see a doctor without parental consent from the age of 12 - they often do not take advantage of this right. Almost 90 percent of adults living with HIV receive antiretroviral treatment, yet only 50 percent of those under 15 do. Ignorance about the disease and how it gets transmitted means that young people are not taking control of their lives and properly treating their disease, so they may be putting others at risk too.

The project

Protecting themselves and others

Although young Rwandans living with HIV have access to counselling and medical care, social stigma often keeps them from living full lives. This is where the "Empowering young people to claim their sexual and reproductive health and rights" project comes into play: It empowered underage mothers and HIV-infected youth to share their experiences, breaking the widespread silence about sexuality, reproductive health and family planning.

The project trained around 150 underage mothers and people living with HIV to be peer educators. They became confidants and role models for others impacted by the disease and together educated more than 3,000 teenagers in personal conversations and sexual health workshops. In these peer-to-peer trainings, children and adolescents learned about their reproductive rights, exchanged information, and accessed age-appropriate health services. Almost 4,000 men and women also participated in the project's public outreach activities. The project provided teenage mothers with legal assistance and support in registering their children.

It offered training workshops for government officials on birth registration and the rights of children, and for teachers on the importance of sex education and the situation young mothers and young people living with HIV face. This enabled them to offer better support to those affected, to help them stay in school and officially register their children. In some districts, teenage mothers can now register their new-borns at the registry office without providing proof of the father's identity. The project also promoted free access to contraceptives and HIV testing for under-18s. It contributed to a decrease in teenage pregnancies and improved the birth registration rate of children born to underage mothers.

After the project ended, the young mothers and people living with HIV who trained as peer educators continued their work in schools and villages. The educational clubs founded at various schools are still providing information about sexual and reproductive health with support from teachers.

Pilot projects

The GIZ Sector Programme Human Rights worked with international GIZ projects and local non-governmental organisations to roll out a number of pilot projects in 2018-2020 as part of the Human Rights Innovation Lab. Innovative approaches to mainstreaming the human rights-based approach (HRBA) emerged in a wide range of thematic areas, such as digitalisation, birth registration, and health. The pilot projects detailed in the "Human

Impact Stories" show how the "human rights, gender equality and disability inclusion" quality criteria can be anchored in various core and initiative areas in projects in partner countries and yield innovative solutions for current development policy challenges. Even in conflict situations and politically sensitive contexts, the HRBA promotes the development of new instruments and approaches, strengthening human rights on the ground.

The human rights-based approach

Every human being is born with inalienable human rights, and the dignity of every human being is inviolable. Human rights enable every human being to live a free and self-determined life in community with others. These rights are enshrined in international and regional human rights treaties signed by most of the world's states.

Human rights include the right to education, health, an adequate standard of living, and freedom of opinion and information, as well as protection from violence and respect for a person's private life. Violations of the rights of individuals or social groups impede the social, economic and political development of an entire country. Conversely, upholding human rights is an essential prerequisite for sustainable, inclusive development.

This is why human rights and the "leave no one behind" (LNOB) principle feature prominently in the United Nations' 2030 Agenda. LNOB focuses on people living in extreme poverty, as well as severely disadvantaged people and population groups, and is designed to

ensure that everyone can participate equally in development processes.

Human rights are a guiding principle of German development cooperation (DC) with all its partner countries. Human rights, gender equality and disability inclusion together comprise one of German DC's six cross-cutting quality criteria. The HRBA not only promotes the safeguarding of individual rights; it also helps to realise the human rights principles of participation, empowerment, non-discrimination and equal opportunity, as well as accountability and transparency in all thematic areas and fields where development cooperation is active.

DC projects that employ the HRBA address the structural causes of inequalities and discriminatory practices, such as the marginalization of women or ethnic minorities in educational systems. They support state institutions and stakeholders in protecting and guaranteeing their citizens' rights, educate civil society and citizens about their rights, and encourage them to demand them.

Empowering young people to claim their sexual and reproductive health and rights

Project duration	01/07/2018 - 31/08/2019
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Partner project	GIZ "Promoting a rights-based approach in civil society organizations" project
Partners	Rwandan Network for People Living with HIV/Aids (RRP+) HAGURUKA (Women and children's rights organisation) Great Lakes Initiatives for Human Rights and Development (GLIHD) Youth Association for Human Rights Promotion and Development (AJPRODHO) Health Development Initiative (HDI)
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Children's rights addressed

Right to health and health services (Art. 24, CRC) Right to birth registration, name, nationality (Art. 7, CRC)

SDGs addressed







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