

# UMBRELLA OF ORGANIZATIONS OF PERSONS WITH DISABILITIES IN THE FIGHT AGAINST HIV/AIDS AND FOR HEALTH PROMOTION "UPHLS"



# MAPPING OF HEALTH AND REHABILITATION SERVICES TO PERSONS WITH DISABILITIES IN RWANDA



**Report** 

Rwanda, September 22<sup>nd</sup>, 2014

Umbrella of Organizations of Persons with Disabilities in the Fight against HIV&AIDS and for Health Promotion

PO Box 1493 Kigali – Rwanda, Tel: +250 788344552/ +250 788344553, Website: <a href="www.uphls.org">www.uphls.org</a>, Email: <a href="mailto:infos@uphls.org">infos@uphls.org</a>,

# Disclaimer

This assessment was commissioned by UPHLS; but the findings, interpretations, and conclusions expressed in this paper are entirely those of the authors and should not be attributed in any manner to the affiliated organizations, Funders, or to any other entity.

## Contents

Disclaimer	i
Abbreviation and acronyms	
Acknowledgement	
Executive Summary	v
INTRODUCTION	1
METHODOLOGY	3
LITERATURE REVIEW	5
RESULTS	7
CONCLUSION	14
Recommendations	15
Appendix I: Questionnaire	i
Appendix II: Data set	v

## **Abbreviation and acronyms**

**AGHR** Association Générale des Handicapées au Rwanda

**COTVK** Coopérative pour Taxi Voitures de Kigali

**CWDs** Children with disabilities

**DPOs** Disabled people's organizations

HI Handicap International

**MoH** Ministry of Health

MUSA Mutuelle de Santé (Community Health Insurance Scheme)

NCPD National council of persons with disability

**NOUSPR** National Organization of Users and Survivors of Psychiatry of Rwanda

**PWDs** Persons with Disabilities

**RNUD** Rwandan National Union of the Deaf

**RUB** Rwandan Union of the Blind

THT Troupe des Personnes handicapées Twuzuzanye

**UNDEF** United Nations Democracy Fund

**UPHLS** Umbrella des Organisations des Personnes en situation de Handicap luttant

contre le VIH/SIDA et pour la promotion de la Santé (UPHLS)

**VSO** Voluntary Services Overseas

## Acknowledgement

It has been a pleasure to work with 5 District coordinators who vigorously set appointments with different associations and cooperatives at community level, namely, Mme MUKESHIMANA Claudine, Mme UWINGABIRE Alphonsine, Mr. NDAGIJIMANA Olivier, Mr. NTWALI Antoine and Mme MUNEZEREO Marie Médiatrice as well as volunteers MUGIRE KAGABA Jeannette and FURAHA Claudine,.

We greatly appreciate the support of CO.T.V.K drivers who braved long hours of driving through terrible terrain. Many thanks go to all staff from Health, social, specialized and rehabilitation centers who gave their time to welcome us and also to participate in interviews and respond to numerous queries.

We would like to express our gratitude to all UPHLS staff that supported administratively, logistically and technically this exercise. Successful and timely accomplishment of this study would have been very difficult without their assistance.

Finally, and most importantly, we thank the United Nations Democracy Fund (UNDEF) for their commitment for the cause of persons with disabilities and financial support without which this work was not possible.

Blaise SHYIRAMBERE (Main researcher)

## **Executive Summary**

The mapping of Health and rehabilitation centers was carried out in all 30 Districts of Rwanda, from April to July 2014, gathering information through interviews using semi - structured questionnaires and direct observation. The aim of the mapping exercise was to assess health and rehabilitation services provided to PWDs –in terms of quality and quantity of services provided, and the constraints they currently face. The results have been shared and discussed during the coordination meeting of the project steering committee after which the report has been published physically with project partners and online using the UPHLS website.

The focus of this assessment was: 1. to map all the health and rehabilitation services provided to PWDs, 2. to assess the services in terms of quantity and constraints made by service providers, 3. to orient & guide implementation of the project "Improving the access to social services for people with disabilities in Rwanda".

This mapping exercise will be considered as a first step to improving health and rehabilitation service provision and referral systems, where further assessment across the whole country will be conducted by the project staff into existing health and rehabilitation services for PWDs —in terms of quality and quantity of services provided, and the constraints they currently face to come up with a report of the mapping of health and rehabilitation services provided to PWDs in country. The results will be shared and disseminated during the coordination meeting of the project steering committee.

## **INTRODUCTION**

The progress towards disability mainstreaming into development policies is being driven by relentless efforts from different actors including public and private institutions. Still, PWDs are facing many challenges; they are overrepresented among the poor due to both the impairments coupled with discrimination and stigma. Since a decade now, PWDs have been organizing themselves at grassroots level to improve their livelihood and demand their rights; unfortunately DPOs currently lack funds and skills to carry out self-advocacy in the community they live in.

It is within this framework that the Umbrella of organizations of Persons with Disabilities in the Fight against HIV and AIDS and for Health Promotion (UPHLS) is organizing further assessment across the whole country to be conducted into existing health and rehabilitation services for PWDs –in terms of quality and quantity of services provided, and the constraints they currently face to come up with a report of the mapping of health and rehabilitation services provided to PWDs in country. This will be done as a first step to improving health and rehabilitation service provision and referral systems.

This exercise will provide to UPHLS and partners information and recommendations that can guide in program implementation to achieve higher levels of social inclusion for disabled people. In particular, the information gathered will contribute to the social inclusion of persons with disability into society.

This action is financed by the UN Democratic Fund (UNDEF) through the project "Improving the access to social services for people with disabilities in Rwanda".

## **Objective**

The main aim of the mapping exercise was to conduct further assessment into existing health and rehabilitation services for PWDs across the country –in terms of quality and quantity of

services provided, and the constraints they currently face to come up with a report highlighting the situation of health and rehabilitation services provided to PWDs.

## **Specific objectives**

As specific objectives, the mapping has to:

- Provide the quantity of health and rehabilitation services for PWDs;
- Provide the quality of health and rehabilitation services for PWDs;
- Identify constraints faced by health and rehabilitation services;
- Contribute to the information provided by the Baseline survey on social inclusion of Persons with Disabilities into Social services conducted in 2012

#### **METHODOLOGY**

The research team used exhaustive sampling for rehabilitation centers and purposive sampling for Health centers where any center that was closer to a rehabilitation center have been included and the responsible or staff who are present at the time of interviews were interviewed.

The data collection was carried out in different health and rehabilitation centers countrywide, consisting of interviews with responsible of health centers and rehabilitation centers and direct observations at site.

## Primary Data Sources

Two staff from the central office and UPHLS District coordinators have carried out the mapping exercise. The data have been collected using a questionnaire for interviews with key informant as well as observations made during the visits.

#### Secondary Data Sources

The desk review of policies, programs and reports of the relevant public and private organizations like the Ministry of Health, the National council of Persons with Disabilities, Local Government reports, development partners and Disabled People Organizations, etc.

## Data collection methods and tools

An initial review was carried out by the research team which was charged with creation of data collection tools based on desk review of the relevant literature and the situational analysis. The tool set for this exercise comprised observation, undertaken by the research team and different questionnaires. Questionnaires were administered by the research team.

The mapping comprised a desk review of documents, followed by field visits to collect data. The key research techniques included observations and semi-structured interviews with key informants.

## Targeted key informants

- 1. Care takers of PWDs
- 2. The service providers: They were divided into the following main groups:
  - a. The healthcare professionals
  - b. Rehabilitation service providers

## Data Entry

## Data entry comprises:

- Design and develop a database using Microsoft Access
- An orientation of the data entry team
- Receiving and systematically entering the data into the database

## Mitigating Interventions:

- ❖ The mapping team deeply explained the mapping objectives, activities and expected results and benefits. This helped to enlighten and improve greatly the participants' perception and attitude towards the exercise and its outcome;
- Probing and prompting of the respondents were employed when needed to enable the interviewees produce more correct information. The team assured key informants of the importance of information given for future UPHLS planning;
- ❖ Before interviews, the mapping team introduced the project and provided briefly its intended outcomes;
- ❖ After the discussions and drawing from the participants' own experiences, the mapping team took time to seek, promote and advocate for the community participation in the new project.

#### LITERATURE REVIEW

## **Defining disability**

The Rwandan community defines disability as impairment and vulnerability. On the other hand, disability is defined as poverty thus some PWDs who are wealthy do not consider themselves as disabled neither does the community. The community leaders are aware that PWDs have some limitations towards development but deplore that the community is not rich to support them enough. (Reference to the *Baseline survey on social inclusion of persons with disabilities into social services in Rwanda, 2012*)

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. (Article I of the *UN Convention on the rights of Persons with disabilities*)

## **Human rights and social exclusion**

Stigmatization and discrimination, lack of knowledge on how to handle disability cases are the major causes of discrimination and isolation within the community, PWDs are considered or seen as a problem in their families and communities. On the other hand, PWDs are not counted and ignored in the community. Despite the prevalent negative attitudes towards PWDs, slight changes were identified with the government and non government initiatives targeting PWDs but still some categories of PWDs are likely not enjoying the changes. (Reference to the *Baseline survey on social inclusion of persons with disabilities into social services in Rwanda*, 2012)

The purpose of the Convention on the rights of Persons with disabilities is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity. (Article I of the *UN Convention on the rights of Persons with disabilities*)

### Awareness and access to social, health and rehabilitation services

The rehabilitation services are very scarce and Rwanda has not got enough specialists in the domains. The geographical accessibility of the services remains a concern as they are only available from the district hospitals and that there is a rigid referral system for physiotherapy services from the health centers to District hospital. Occupational, speech and language therapy services are very new and found in a few number of specialized centers. Moreover, special centers are privately owned and their services are not paid through the community based Insurance thus very expensive. And, some hearing aids provided through charity organizations from abroad are not based on individual test results, not maintained or repaired. (Reference to the *Baseline survey on social inclusion of persons with disabilities into social services in Rwanda, 2012*)

States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health related rehabilitation. (Article 26 of the *UN Convention on the rights of Persons with disabilities*)

#### **RESULTS**

#### - General information

During the mapping exercise 14 rehabilitation centers, 9 specialized centers, 10 disability integrated schools, 48 health facilities (a small portion consisting of less than 10% of all health facilities in Rwanda) and 10 social centers have been reached out and participated in the research directly.

Based on data collected, 43% of rehabilitation centers, 44% of specialized centers, 40% of social centers and 33% of health facilities were physically accessible. On the other hand, 10% of social centers and 21% of health facilities were inaccessible to persons with physical disabilities.

Specialized centers are found to have many staff trained on disability issues and aware of disability rights (with an average of 46.6% of trained staff) in all facilities providing health services to persons with disabilities. Health facilities, social and rehabilitation centers are the ones with low personnel trained on disability issues and aware of disability rights (with an average of 10.4%, 20% and 17% of trained staff respectively).

The number of rehabilitation and specialized centers around the country is very limited; they are being used by persons with disabilities from all over the country who cover many kilometers to reach the services. Over than 50% of rehabilitation and specialized centers are serving the whole country

## - Rehabilitation, special and social services provided to PWDs per District

No	District	Type of center for persons with disabilities	Number of centers
1	Dugocoro	Rehabilitation center	2
1	Bugesera	Disability integrated school	1
2	Gakenke	Disability integrated school	1
3	Gasabo	Rehabilitation center	1
3	Gasabo	Specialized center	1
4	Gatsibo	Rehabilitation center	1
5	Gicumbi	Social center	1
	Cisagana	Specialized center	1
6	Gisagara	Social center	1

	1		1
		Specialized center	1
7	Huye	Disability integrated school	1
		Social center	1
8	Kamonyi	Disability integrated school	1
0	Kallioliyi	Social center	1
9	Kayonza	Social center	2
10	Kicukiro	Rehabilitation center	1
10	KICUKIIO	Specialized center	2
11	Muhanga	Specialized center	1
12	Musanze	Rehabilitation center	1
12	IVIUSalize	Specialized center	1
13	Ngoma	Social center	2
14	Ngororero	Disability integrated school	1
14	Ngororero	Social center	1
15	Nyabihu	Specialized center	1
16	Nyagatare	Disability integrated school	2
17	Nyamagabe	Rehabilitation center	1
18	Nyamasheke	Rehabilitation center	1
19	Nyarugenge	Disability integrated school	1
20	Myaruguru	Rehabilitation center	1
20	Nyaruguru	Disability integrated school	1
21	Rubavu	Rehabilitation center	2
22	Ruhango	Rehabilitation center	2
23	Rulindo	Disability integrated school	1
24	Rusizi	Rehabilitation center	1
24	NUSIZI	Specialized center	1
25	Rutsiro	Social center	1
26	Rwamagana	Specialized center	1
	Total		43

The mapping exercise has identified 14 rehabilitation centers, 9 specialized centers, 10 disability integrated schools and 10 social centers around the country.

## - Accessibility of Rehabilitation centers

Accessibility	Physical accessibility	Indication signs and posts
Not accessible	0%	22%
Partially accessible	57%	64%
Accessible	43%	14%

Most rehabilitation centers are partially physically accessible. A small portion of them don't have any kind of indications to orient clients which make it a little bit difficult for persons with hearing impairments to know where to go for services.

## Accessibility of specialized centers

Accessibility	Physical accessibility	Signs and posts
Not accessible	0%	23%
Partially accessible	56%	44%
Accessible	44%	33%

## - Accessibility of social centers

Accessibility	Physical accessibility	Signs and posts
Not accessible	10%	50%
Partially accessible	50%	50%
Accessible	40%	0%

Social centers are partially accessible physically. On the other hand, they are not accessible in terms of information (indication signs and posts). This is caused mainly by the fact that many social centers are initiatives of local benefactors with very limited means and knowledge on disability issues.

## Accessibility of health centers

Accessibility	Physical accessibility	Signs and posts
Not accessible	21%	23%
Partially accessible	46%	58%
Accessible	33%	19%

Almost a quarter of visited Health centers are not accessible. Even if efforts targeting the awareness of disability issues among health services providers are increasing, most health facilities are facing financial challenges, knowledge on disability and low commitment from decision makers to make their institutions accessible to persons with disabilities.

## - Average of trained staff on disability issues and rights

Province	Facility	Average of staff trained on disability rights
	Health facility	10%
Kigali City	Specialized center	20%
	Disability integrated school	33%
	Specialized center	10%
Eastern Province	Disability integrated school	47%
	Social center	60%
	Health facility	23%
Southern Province	Rehabilitation center	30%
	Specialized center	73%
	Disability integrated school	36%
	Health facility	14%
	Rehabilitation center	55%
Western Province	Specialized center	50%
	Disability integrated school	40%
	Social center	40%
	Health facility	5%
Northern Province	Specialized center	80%
	Disability integrated school	23%

**Note**: For health facilities, a sample of health centers has been selected conveniently.

Specialized centers are found to have many staff trained on disability issues and aware of disability rights in all facilities providing health services to persons with disabilities. Health facilities, social and rehabilitation centers are the ones with low personnel trained on disability issues and aware of disability rights.

# <u>Trainings on disabilities received by rehabilitation, social, specialized center & school and health</u> <u>service providers</u>

- Occupational therapy
- Mental health
- Basics on sign language
- Rights of PWDs (Rwandan legal framework on disability)
- Care for CWDs and support to PWDs
- Physiotherapy

- Eye care services
- Inclusive education
- Special needs of PWDs in Health services, Disability and HIV

Most of trained Health service providers have received a 1 or 2 day training on one of the topics above.

## - Geographical coverage of rehabilitations services

Geographical coverage of rehabilitations services		%
Rehabilitation centers serving a District	4	29%
Rehabilitation centers serving more than a District	3	21%
Rehabilitation centers serving country wide	7	50%
Total	14	100%

More than the half of rehabilitation centers are serving persons with disabilities from different parts of the country, this is due to the fact that there are very few rehabilitation centers in the country.

## Geographical coverage of specialized centers

Geographical coverage of specialized centers	Qty	%
Specialized centers serving a District	2	22%
Specialized centers serving more than a District	1	11%
Specialized centers serving country wide	6	67%
Total	9	100%

Specialized centers serve persons with disabilities from all over the country; this is also due to the fact that there are very few specialized centers in the country.

## - Geographical coverage of social centers

Geographical coverage of social centers	Qty	%
Social centers serving a District	4	40%
Social centers serving more than a District	4	40%
Social centers serving country wide	2	20%
Total	10	100%

Social centers serve a small portion of the community as they are initiatives of benefactors with limited means. Most of them are initiatives of religious institutions.

## Challenges faced by Rehabilitation, social and Health service providers

## <u>Challenges faced by Rehabilitation services</u>

- Delay in accessing rehabilitation services sometimes caused by stigma, auto-stigma,
   violence and discrimination faced by PWDs,
- Parents or PWDs family members attitude, behaviors, ignorance towards the health of their CWDs and lack of awareness about rights of PWDs,
- Limited equipments to support and rehabilitate PWDs,
- Lack of means to pay for received services as PWDs are facing extreme poverty and some children with malnutrition which delays their recovery when rehabilitated

## Challenges faced by Social services

- Some children do not like to leave the center when they have finished their programs due to the fact that they fear to face again stigma and discrimination at village,
- Mentally disabled persons who broke some materials,
- Lack or limited capacity to repair assistive devices,
- Parents or PWDs family members attitude, behaviors, ignorance towards the health of their CWDs and lack of awareness about rights of PWDs,
- Limited budget to support PWDs and limited support from development partners,
- Difficulties to care for persons with multiple disabilities

## <u>Challenges faced by Health services</u>

- PWDs requesting services without health insurance,
- Communication barriers between Health service providers and PWDs,
- Limited physical accessibility faced by PWDs and lack or old indication signs / posts,
- Lack of trainings and capacity to serve PWDs,
- Inability to provide assistive devices at Health center level (which are also expensive),

- Some service providers are confused between disability and chronic diseases (lack or limited knowledge about disability itself),
- Limited number of Health practitioners specialized in Disability

#### CONCLUSION

The mapping exercise gathered information on health and rehabilitation services provided to PWDs – in terms of quality and quantity of services provided, and the constraints they currently face. It focused on the mapping of all the health and rehabilitation services provided to PWDs and assessment of the services in terms of quantity and constraints made by service providers.

Despite efforts in disability mainstreaming, persons with disabilities are still facing accessibility challenges in service provision. The results have shown that a small portion (around 40%) of rehabilitation centers, specialized centers, social centers and health facilities were physically accessible. On the other hand, around 15% of social centers and health facilities were inaccessible to persons with physical disabilities. This comes worse on the accessibility of information (especially signage and indication posts in health facilities).

Specialized centers are found to have many staff trained on disability issues and aware of disability rights in all facilities providing health services to persons with disabilities. Health facilities, social and rehabilitation centers are the ones with low personnel trained on disability issues and aware of disability rights.

The mapping exercise has provided an opportunity for additional assessments in disability to assess further on disability issues; it will help researchers in generating research hypothesis for further studies in the area of disability in Rwanda.

#### Recommendations

- Train service providers (including Doctors and nurses) on disability issues, PWDs rights and basic sign language;
- Avail and distribute IEC tools to health facilities so PWDs get more information on different issues in health,
- Advocate for PWDs to have cards with information on their disabilities,
- Establish a MUSA supported referral system between rehabilitation services and health services to make wheelchairs, prosthesis, and other assistive devices accessible to PWDs from Health facilities at decentralized level,
- Advocate for the decentralization of disability services from Hospital to Health centers to make them accessible to PWDs,
- Advocate for renovation of health facilities to make them physical accessible to PWDs,
- Conduct outreach campaigns to fight stigma, discrimination and promotion of PWDs rights,
- Develop a system to channel updated information in disability,
- Train PWDs about their rights,
- To advocate for PWDs special consideration when selecting UBUDEHE categories (similar to household economic categories) for people,
- Advocate for social support to persons with severe disabilities,
- All initiatives targeting PWDs to work in close collaboration with Local authorities and build their capacity towards disability issues,
- Advocate for Disability mainstreaming in all social and health services,
- Set out Model Health Facilities (Disability friendly health facilities),
- Establish a special fund to support PWDs in extreme poverty,
- Advocate for the development of Health curriculum for PWDs in Health services

# Appendix I: Questionnaire

## **CHECKLIST FOR THE MAPPING EXERCISE**

Project title :	Improving the access to social services for people with disabilities in Rwanda
Activity:	Mapping exercise
Responsible organization :	UPHLS
<b>Place</b> (Province, District, Sector, Cell, Village if applicable):	
Date or period/Session/Mission (Day/Month/Year):	
Person (s) who made the visit (Name/Position) :	

Items to check	Sub item	Comments
Details about the visited institution		
Name of Institution		
Website		
Email and phone contacts		
	Hospital	
Recognized Status of the institution	Health Center	
	Rehabilitation Center	

Items to check	Sub item	Com	ments
	Specialized center/ School		
	Other		
Name and position of the interviewee			
	Physiotherapy		
	Eye care services		
	Audiology		
Available services	Speech and Language therapy		
	Occupational therapy		
	Other		
	Physiotherapy		
	Eye care services		
Average number of clients per day	Audiology		
	Speech and Language therapy		
	Occupational therapy		
	Services	For those with health	For those without
Average cost per service	Services	insurance	health insurance
	Physiotherapy		

Items to check	Sub it	em	Comments
	Eye care services	5	
	Audiology		
	Speech and Lang	guage therapy	
	Occupational the	erapy	
Working hours for the above mentioned services	Full time 24/24h	ours - 7 days	
	Other		
Outreach services to raise awareness on offered service			
	Sector		
Geographical coverage of your interventions	District		
	Other		
	Clients		
Any source of funds (apart from the government's funding)	Other		
	Other		
Is there anybody trained on disability issues and rights	Yes		
among the staff? (If yes, how many? In which domains?)	No		
Any challenge met in providing services to persons with			
disabilities?			

Items to check	Sub item	Comments
Any recommendation for mainstreaming disability into		
health services?		

# Appendix II: Data set

ID	Province	District	Sector	Institution name	Institution Status	Physical accessib ility	Indicatio n signs and Posters	Geographic al coverage	Staff trained on disabilit y rights
1	Eastern	RWAMAGANA	KIGABIRO	HVP Gatagara	Specialized center	Partial	Yes	Country wide	1
2	Kigali City	GASABO	JABANA	Jyamubandi mwana	Specialized center	Partial	Not at all	Country wide	4
3	Kigali City	KICUKIRO	Masaka	Masaka Resource center for the Blind	Specialized center	Yes	Not at all	Country wide	1
4	Kigali City	KICUKIRO	KANOMBE	IZERE MUBYEYI	Specialized center	Partial	Partial	2 Districts	1
5	North	MUSANZE	NYANGE	Fair Children Youth Foundation	Specialized center	Partial	Partial	Country wide	8
6	South	MUHANGA	NYAMABUYE	HRD	Specialized center	Partial	Partial	Country wide	13
7	South	HUYE	NGOMA	CENTRE DE JEUNE SOURDS-MUETS	Specialized center	Yes	Yes	countrywid e	5
8	South	GISAGARA	KIBILIZI	AMIZERO Y'UBUZIMA (Centre for mentally challenged children)	Specialized center	Yes	Yes	1 District	4
9	West	RUSIZI	NKANKA	Centre URUGWIRO	Specialized center	Yes	Partial	1 District	5
10	West	NYABIHU	MUKAMIRA	NDSD (Nyabihu Demonstration Center for the Deaf)	Specialized center	Partial	Not at all	Country wide	1
11	Eastern	NGOMA	KIBUNGO	ABIZERAMARIYA	Social Center	Yes	Not at all	1 District	0
12	Eastern	NGOMA	MUTENDERI	URUGO RW'AMAHORO/ Bare Parish	Social Center	Yes	Not at all	Province	1
13	Eastern	KAYONZA	MUKARANGE	URUGO RW'AMAHORO	Social Center	Partial	Not at all	2 Districts	0
14	Eastern	KAYONZA	KABARONDO	URUGO RW'AMAHORO KABARONDO/ Kabarondo Parish	Social Center	Yes	Partial	Diocese	0
15	Eastern	RUTSIRO	MUSHUBATI	CENTRE KOMERA	Social Center	Partial	Partial	Country	35

								wide	
16	North	GICUMBI	NYAMIYAGA	IZERE Center	Social Center	Partial	Partial	East Province	5
17	South	GISAGARA	Mugombwa	Centre Handicap de Mugombwa	Social Center	Partial	Partial	1 District	3
18	South	KAMONYI	GACURABWENGE	CEFAPEK/Bernardines Sisters	Social Center	Partial	Partial	1 District	12
19	South	HUYE	TUMBA	ADAR TUBAHOZE	Social Center	Yes	Not at all	country wide	2
20	West	NGORORERO	GATUMBA	CENTRE WIBABARA	Social Center	Not at all	Not at all	5 Sectors	2
21	East	Bugesera	Nyamata	AVH UMURERWA	Rehabilitation center	Yes	Not at all	Country wide	4
22	East	GATSIBO	NGARAMA	Wikwiheba mwana	Rehabilitation center	Partial	Partial	Country wide	0
23	Eastern	Bugesera	Rilima	Centre de chirurgie orthopedique et de rehabilitation St Marie de Rilima	Rehabilitation center	Yes	Yes	Country wide	0
24	Kigali City	Kicukiro	Gikondo	HVP Gatagara Gikondo	Rehabilitation center	Partial	Partial	Country wide	0
25	Kigali City	GASABO	NDERA	Centre de jour Humura-Ndera	Rehabilitation center	Yes	Not at all	2 Districts	0
26	North	MUSANZE	MUHOZA	CENTRE SAINT VINCENT	Rehabilitation center	Yes	Partial	Country wide	0
27	South	NYAMAGABE	Kitabi	Centre des Handicapes Saint François D'assise Kitabi	Rehabilitation center	Partial	Partial	Country wide	0
28	South	NYARUGURU	MUGANZA	Amis de Saint François D'assise (ASFA)	Rehabilitation center	Partial	Partial	1 District	0
29	South	RUHANGO	RUHANGO	Centre du Jour de Gatagara (RBC) / ABIZERAMARIYA Sisters	Rehabilitation center	Partial	Partial	1 District	4
30	South	RUHANGO	KABAGARI	Centre de Handicapées St François d'Assise/Karambi	Rehabilitation center	Yes	Partial	Country wide	2
31	West	Rusizi	Gihundwe	Centre des Handicapes Sant François D'Assise / Gihundwe	Rehabilitation center	Partial	Partial	2 Districts	1
32	West	Nyamasheke	Ruharambuga	Ngwino nawe Village	Rehabilitation	Partial	Partial	3 Sectors	0

					center				
33	West	RUBAVU	GISENYI	Ubumwe Community Center	Rehabilitation center	Yes	Yes	Province	6
34	West	RUBAVU	NYUNDO	Vision Jeunesse Nouvelle	Rehabilitation center	Partial	Not at all	4 Sectors	4
35	East	KAYONZA	GAHINI	GAHINI Hospiral	Hospital	Yes	Partial	country wide	2
36	Kigali City	Gasabo	Ndera	Hopital Neuropsychiatrique (HNP) - CARAES Ndera	Hospital	Yes	Partial	Country wide	0
37	South	KAMONYI	RUKOMA	Hopital Remera Rukoma	Hospital	Partial	Partial	1 District	2
38	South	RUHANGO	BWERAMANA	GITWE Hospital	Hospital	Partial	Partial	1 District	2
39	South	NYANZA	BUSASAMANA	NYAZA Hospital	Hospital	Partial	Partial	1 District	2
40	South	HUYE	NGOMA	HOPITAL KABUTARE	Hospital	Not at all	Partial	4 district	1
41	West	NGOMA	KIBUNGO	KIBUNGO HOSPITAL	Hospital	Partial	Not at all	1 District	1
42	West	RUBAVU	GISENYI	RUBAVU Hospital	Hospital	Partial	Partial	4 Districts	0
43	West	NYABIHU	SHYIRA	Hopital Shyira	Hospital	Not at all	Partial	4 Districts	2
44	West	KARONGI	MURAMBI	HOPITAL KIRINDA	Hospital	Yes	Partial	5 Sectors	2
45	West	NGORORERO	KABAYA	HOPITAL KABAYA	Hospital	Yes	Partial	2 Districts	2
46	West	KARONGI	KARONGI	Hopital KARONGI	Hospital	Not at all	Not at all	5 Sectors	0
47	West	RUTSIRO	MURUNDA	MURUNDA HOSPITAL	Hospital	Not at all	Not at all	1 District	0
48	East	NYAGATARE	MATIMBA	Kagitumba Health Center	Health center	Not at all	Partial	sector	0
49	East	NGOMA	SAKE	Rukoma-Sake Health center	Health center	Partial	Partial	3 sectors	6
50	East	KIREHE	NYAMUGALI	RUSUMO HEALTH CENTER	Health center	Partial	Partial	3 Sectors	1
51	East	GATSIBO	KABARORE	KABARORE HEALTH CENTER	Health center	Not at all	Not at all	1 Sector	0
52	East	KIREHE	NYARUBUYE	Nyarubuye Health Center	Health center	Yes	Partial	2 Sectors	1
53	East	KIREHE	KIREHE	Kirehe health center	Health center	Yes	Partial	3 sectors	0

54	East	RWAMAGANA	MUHAZI	Centre de Sante Avega Rwamagana	Health center	Partial	Partial	3 Sectors	2
55	East	Rwamagana	Musha	Centre de sante Musha	Health center	Partial	Partial	3 Sectors	0
56	Eastern	Bugesera	Musenyi	Health center Musenyi	Health center	Yes	Partial	1 Sector	0
57	Kigali City	NYARUGENGE	Kanyinya	Kanyinya Health Center	Health center	Partial	Partial	3 Sectors	2
58	Kigali City	NYARUGENGE	Nyakabanda	Centre de Sante Kabusunzu	Health center	Partial	Partial	4 sectors	1
59	North	MUSANZE	GATARAGA	GATARAGA HEALTH CENTER	Health center	Yes	Yes	3 sectors	1
60	North	BURERA	GAHUNGA	GAHUNGA HEALTH CENTER	Health center	Yes	Yes	2 sectors	1
61	North	BURERA	CYANIKA	CYANIKA HEALTH CENTER	Health center	Partial	Yes	1 Sector	0
62	North	BURERA	KAGOGO	GITARE HEALTH CENTER	Health center	Partial	Yes	1 Sector	2
63	North	BURERA	BUTARO	BUTARO HEALTH CENTER	Health center	Yes	Partial	1 Sector	0
64	North	GAKENKE	CYABINGO	CYABINGO HEALTH CENTER	Health center	Not at all	Partial	2 sectors	0
65	North	GAKENKE	MUGUNGA	GATONDE HEALTH CENTER	Health center	Partial	Partial	1 Sector	0
66	North	GAKENKE	JANJA	JANJA HEALTH CENTER	Health center	Yes	Yes	1 Sector	0
67	North	RULINDO	TUMBA	TUMBA HEALTH CENTER	Health center	Yes	Yes	1 Sector	0
68	North	RULINDO	BUSHOKI	TARE HEALTH CENTER	Health center	Not at all	Yes	2 Sectors	3
69	North	RULINDO	RUSIGA	KININI HEALTH CENTER	Health center	Yes	Yes	3 Sectors	0
70	North	GICUMBI	BYUMBA	Health Center of Byumba	Health center	Partial	Not at all	sector	0
71	North	GICUMBI	SHANGASHA	Centre de sante Munyinya	Health center	Partial	Not at all	2 sectors	0
72	South	KAMONYI	GACURABWENGE	Centre de Sante de Kamonyi	Health center	Partial	Partial	1 Sector	2
73	South	MUHANGA	NYARUSANGE	Centre de Cente de Nyarusange	Health center	Partial	Partial	1 District	5
74	West	Rusizi	Musahaka	Centre de Sante Mushaka	Health center	Partial	Partial	1 sector	2
75	West	Rusizi	Bugarama	Centre de sante Islamic de Bugarama	Health center	Partial	Partial	1 Sector	1
76	West	RUBAVU	GISENYI	Gisenyi Health center	Health center	Not at all	Not at all	1 sector	0
77	West	NYABIHU	RUGERA	Centre de sante Nyakigezi	Health center	Partial	Not at all	2 sectors	2
78	West	RUTSIRO	MUSHUBATI	CENTRE DE SANTE MUSHUBATI	Health center	Yes	Not at all	1 Sector	4
79	West	KARONGI	RUBENGERA	RUBENGERA HEALTH CENTER	Health center	Not at all	Not at all	5 Sectors.	2
80	West	KARONGI	GASHARI	BIRAMBO HEALTH CENTER	Health center	Yes	Not at all	5 Sectors	3

81	West	NYAMASHEKE	KANJONGO	Centre de Sante Tyazo/ Kibogora	Health center	Yes	Partial	1 Sector	0
82	West	NYAMASHEKE	MACUBA	CS HANIKA	Health center	Partial	Yes	1 Sector	1
83	East	NYAGATARE	GATUNDA	Friends of Handicap: Umutara Deaf School	Disability integrated school	Partial	Yes	Country wide	0
84	East	NYAGATARE	MATIMBA	ASSOCIATION AGAHOZO NYABWISHONGEZI	Disability integrated school	Partial	Not at all	3 Sectors	0
85	Eastern	Bugesera	Nyamata	Centre Filipo SMALDONE	Disability integrated school	Partial	Not at all	Country wide	7
86	Kigali City	NYARUGENGE	Nyamirambo	Institut Filippo Smaldone pour Sourds- Muets	Disability integrated school	Partial	Not at all	Country wide	5
87	North	GAKENKE	JANJA	APAX JANJA	Disability integrated school	Yes	Not at all	Country wide	7
88	North	RULINDO	RUSIGA	MAISON D'ACCUEIL D'ESPERENCE	Disability integrated school	Yes	Not at all	Country wide	0
89	South	NYARUGURU	KIBEHO	Fransiscan Selvant of the Cross	Disability integrated school	Yes	Yes	Country wide	0
90	South	KAMONYI	NGAMBA	GS St Jean de la Croix-Ngamba	Disability integrated school	Yes	Partial	1 District	16
91	South	HUYE	NGOMA	GS GATAGARA (HUYE)	Disability integrated school	Yes	Yes	countrywid e	0
92	West	NGORORERO	MATYAZO	Centre APAX	Disability integrated school	Not at all	Not at all	3 Provinces	6