Polyclinic of Hope Model
Scope

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A) Rwanda Women’s Network

- RWN came into being in 1997 taking over from its parent organization, the US-based Church World Service (CWS), which had initiated a two-year program (1994 – 1996) following the genocide in 1994.

- The Network caters for women survivors of sexual and gender-based violence and other vulnerable groups, including widows, orphans and vulnerable children and people living with HIV/Aids.

- RWN works with various local and international partners, and plays a facilitating role to a network of over 40 community-based organizations across the country.
Vision

- A healthy, empowered and peaceful Rwandan society

Mission

- To enhance the socio-economic and health status of women and their families.
The RWN adopts a holistic approach in its activities, which include:

- Provision of health care & support services through the Polyclinic of Hope,
- Socio-economic empowerment,
- Education and awareness activities on issues that affect women including human and legal rights training,
- Advocacy and Networking from community to international levels through promoting dialogue with local authorities and policy makers,
International Recognition

Through PoH replication at the Village of Hope, RWN is the recipient of:

- The UNDP and UNAIDS 2006 Red Ribbon Award titled "Celebrating Community Leadership and Action on Aids"

- The 2007 UN-Habitat Dubai International Award in "recognition of best practices to improve the living environment" for child-headed households and genocide widows and their families.
B) About the Polyclinic of Hope

- Established in 1995 in response to the plight of women victims of sexual gender-based violence to address their health and psychosocial needs.

- Currently the center caters for 1,200 clients including 608 PLWHAs with approximately 6,000 indirect beneficiaries.

- Centre provided space that proved an effective response to the women’s plight, which continues to manifest in psychosocial trauma and the effects of HIV and Aids.

- Beneficiaries include victims of GBV, widows, child headed households and people living with HIV and Aids.

The face of a woman after the 1994 genocide

Polyclinic of Hope women have become advocates for change
Adopting a holistic approach the PoH equips the women to live positive and productive lives by

- offering medical attention
- psychologically empowering them through counseling
- making them aware of their rights
- socio-economic assistance to make them self-dependent

This is complemented by the other services offered by the Rwanda Women Network
The mother center - Polyclinic of Hope at Nyamirambo, Nyarugenge District has currently been replicated in three centres in Rwanda. These are in:

- Bugeresera District
- Huye Districts
- Village of Hope, Kagugu, Gasabo District (Kigali)

The PoH currently caters for over 5,000 beneficiaries, who include both the HIV infected and affected. These include men where necessary, though the challenge remains to include more of them.
The PoH and Volunteerism

- The PoH emphasizes volunteerism and solidarity where beneficiaries look out for one another.

- The center has 20 community caregivers that provide home-based care for adults living with HIV/AIDS, 10 OVC caregivers that reach out to child-headed households, etc. This is a key strategy to ensure the beneficiaries’ involvement, positive health and social wellbeing individually and collectively.

- The volunteers, usually drawn from the groups of beneficiaries, play a crucial role as they live in the communities and are able to report on and care for their peers.
Communal involvement is encouraged as it socially entrenches the client through communal activities, for instance through the Rwandan concept of Umuganda (communal work), which requires every citizen to give some time once a month to the community for activities such as environmental cleaning and collective reflection on development issues.
Due to the different knowledge and skills provided at the PoH;

- Some of the women have been elected to be focal points and women councilors in their communities.

- Many of the women are leaders in the unique Rwandan Umudugudu localities (villages) which have between 50 and 150 homes, and in women’s groups in their communities.

- By promoting free sharing, advocacy and leadership skills has empowered the women to have a voice in the local governance structures as they play a crucial role of training and bringing women’s issues to the leadership structures.

OVG caregivers support session - presents given to the children who perform well at school
The PoH and Theater

- To promote healing for the PoH women, theater is used to communicate and advocate for change especially in relation to GBV, HIV/AIDS, women’s rights, gender, etc.

PoH drama group performing
The PoH Client Assistance Process

- When a client visits a PoH centre, he or she is taken through a well laid out process that is designed to establish and effectively attend to the client’s needs.

- A new client has to undergo a thorough investigation to establish her needs, which often are health related and tend to affect the socio-economic wellbeing of her family.

- The process to assist a client takes eleven stages as follows, taking the example of a new case.
STAGE ONE

- **Welcoming the Client:** Client warmly received and referred to social worker by receptionist

STAGE TWO

- **Client needs assessment:** Social worker assesses needs of the client and refers either to the nurse, doctor, counselor or other referral centres – or for other RWN services

STAGE THREE

- **Preliminary medical attention:** Nurse offers possible care and treatment, or refers the client to the doctor

STAGE FOUR

- **Determining health status:** Doctor gets client’s medical history and offers prescription or referral as required
STAGE FIVE
Counseling: Trained counselor counsels trauma victims of SGBV and HIV pre-test

STAGE SIX
Lab Tests: Tests client samples and submits results to doctor

STAGE SEVEN
Test Results: Doctor advises on test results for treatment or referral. HIV test results passed to counselor

STAGE EIGHT
Post-test counseling: Counselor prepares client to receive HIV test results and counsels on positive living

STAGE NINE
Dispensing medication: Pharmacist delivers doctor’s prescription and advices on medical adherence
STAGE TEN

- **Community & family Support:** Client urged to join the PoH group of beneficiaries and get involved in the different activities at the center. Networking and peer-learning is emphasized.

STAGE ELEVEN

- **Social services:** Social worker regularly follows up and monitors the communities and clients’ homes and families, assisted by community care givers and offers sensitization & training sessions on different issues, facilitates socio-economic empowerment activities, etc.

Skills training and development