

A Health-Based Approach to Peacebuilding in Rwanda

Project Site: Rwanda

Sponsoring College: Dartmouth College

Designated Project Leader: Sydney Kamen, United States, Dartmouth College

Summary of Project Objectives

The project's objective was to promote peace through health-oriented programming in a historically marginalized community with documented high rates of poverty, intercommunal conflict, and public health challenges. The project was strategically designed with community members to address a two-fold challenge: (menstrual) health and peace. The implemented program made the role of women in peacebuilding and conflict mitigation central, and was designed to unite and empower older women of divergent, historically marginalized ethnic groups in northwestern Rwanda through the promotion of menstrual hygiene management (MHM) and social entrepreneurship.

Fundraising

In addition to the generous \$10,000 grant from Davis Projects for Peace, the project was fortunate to receive significant external support and investment demonstrated through approximately \$9,200 of financial and in-kind donations including training space, materials, and instructional training and consulting. The additional partner organization and stakeholder financial contributions played a significant role towards ensuring program sustainability.

Project Inspiration and Development

This project was a collaboration of thoughts and ideas presented to me by women and community leaders at the host site. I have always been very passionate about public health projects, and was aware of the bidirectional relationship between health and peace. But the challenge of menstruation and menstrual health management in this community and the desire to address it was identified and shared with me by the host and beneficiary community.

Host Site Selection and Experience

A quarter-century after the Rwandan Genocide, dangerous tensions persist among ethnic groups in the northwest Musanze District, hindering development in the region and producing unequal sharing of resources. In 2015, a World Bank assessment reported the Musanze district as being afflicted by the most extreme poverty in the country. The evaluation cites "inadequate access to health care," "environmental degradation," and "intercommunity conflict" as major contributing factors. The Bank explicitly identifies the empowerment of women as a key mechanism for restoring regional stability. I chose to implement this project in this community due to the nature of the program's design and the community-specific challenges it was designed to address. Additionally, I have a long-standing relationship with this community that started when I was hosted as an exchange student, and then later through the implementation of hygiene programs implemented by my non-profit, So Others Are Protected. It has been an exciting and transformative journey for me to go from being embraced as an exchange student and visitor a few years ago to co-worker and colleague. I thoroughly enjoyed the challenge of implementing this project with my diverse team of invested, local change-makers.

Overcoming Possible Implementation and Communication Challenges

The initial stages of design and planning were done in-person at the host site before the proposal's submission. Communication among the local ground team and coordination with supporting entities went on through the application process after I left country seamlessly. While communication challenges were anticipated, largely due to language and connectivity barriers, actions and responsibilities were appropriately delegated allowing for effective and efficient organization, and ultimately implementation at the Ruhengeri and Muhingo sites with minimal and only temporary obstructions to project success.

Defining Peace

If peace is to be more than the absence of violence or war, it must be conceptualized holistically; socially, mentally, physically, and spiritually. If peace is to be more than a pause in the cycle of violence, then it must be built at the systematic *and* individual levels; internally, within the home, family, and community.

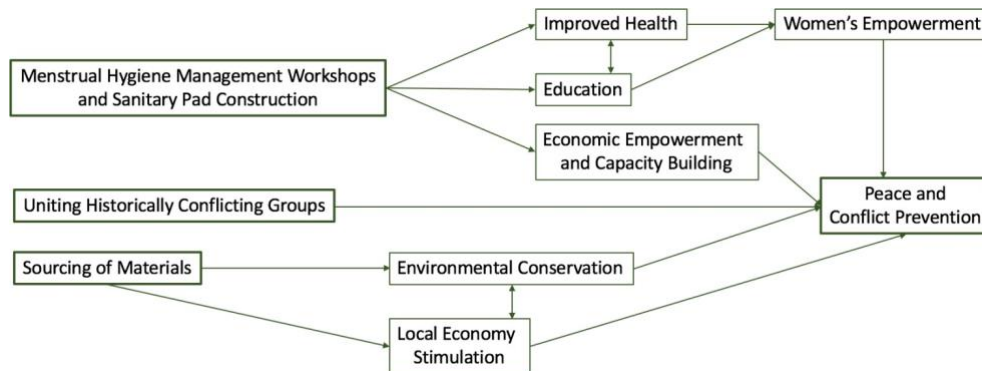
This project underscored the bedrock truth that peace is a determinant of health and health a determinant of peace, which is listed as a pre-requisite of health by the World Health Organization. Acknowledging that bi-directional relationship, this project was specifically designed to compliment the promotion of both components simultaneously.

Project Contributions to Peace

This project contributes to peace on multiple levels, through a variety of mechanisms: internal/ personal, within the family unit, at the village level, with the potential to contribute at higher levels as well, in the short and long term.

In the immediate short-term, the project guarantees access to MHM products, improved menstrual hygiene, and an employment opportunity with a designated women's cooperative. The project has already yielded developments of new relationships social connections across ethnic boundaries.

Most significantly, the project contributes to long-term peace through the successful fostering of understanding among participants and new social connections and relationships between members of historically conflicting communities. The project equips women with financial literacy and health training and a strong and marketable sewing skillset that can contribute to family income, welfare, savings and financial security, which, by definition, contribute to greater community health and stability.



Personal Reflections

From start to finish, this project has helped me deepen my understanding of, and engagement with, the bi-directional relationship between health and peace in a resource-limited and post-conflict context. This project powerfully demonstrated the significance of investing in human dignity and reiterated the importance and efficacy of local solutions to local problems.

To measure the project's sustainability, my colleagues and I conducted interviews with participants one month following their cohort's completion. One of the program participants shared with me: "After completing the program, I feel freer. I now know how to, and can manage my menstruation, which was not the case before. I have more control over my body now, and I no longer feel ashamed to leave my home. I feel empowered using the pads I made myself." Another participant shared with me, "I always told myself that someone with HIV at my age deserves to die... But now I have the chance to learn many things, to train to have a profession, to teach the younger girls things I never learned about. I feel graced by God to have new friends and knowledge to live my life with. I feel hopeful again."

I am deeply encouraged by the results of the program. It was inspiring to see women working together across ethnic bounds and humbling hear about some of the unexpected and positive side effects of the program. These further included overcoming challenges surrounding illiteracy and learning to read tape measures during sewing training, bridging and overcoming stigmas surrounding HIV, and older women basking in an investment in their skills development and education.

While many health, education, and even peacebuilding programs target school-aged girls, they commonly neglect populations beyond that age-group. This experience underscores the necessity for programs in these fields to engage the greater population of women throughout their childbearing years who produce a similarly competitive return on investment.

Personal Statements

"From the design phase through implementation and project completion, this experience powerfully demonstrated and reiterated the significance of local solutions to local problems, and the importance of community-based and participatory-designed programming." – Sydney Kamen

"Peace is, and continues, to be a globally sought after reality. While many strategic peacebuilding efforts are made at the systematic level, more need to be made at the individual level, and in communities often excluded from the peacebuilding process like this." – Sydney Kamen

