

Role of Rwanda's Parliament in Promoting Voluntary Family Planning: Achievements in Improving Legislation & Accountability

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Introduction

- Rwanda is among many African countries to have endorsed treaties, conventions and declarations that include family planning (FP).
- High-level parliamentary involvement in legislation and accountability is key to operationalise these international commitments.
- For instance, Rwanda increased its modern contraceptive prevalence rate among married women from 10 % in 2005 to 48% in 2014-15. However, little is known about the extent of parliamentarians' role in improving FP.
- To advocate for a conducive legal framework and accountability to family planning and reproductive health (FP/RH) commitments, the Parliament of Rwanda created the Rwandan Parliamentarians' Network on Population and Development (RPRPD) in 2003.
- RPRPD is an all-party parliamentary group composed of 82 senators and deputies, of whom 60 % are women. This parliamentary network leveraged political support at the highest levels, including all social ministries incorporating FP as an integral part of their work.
- The RPRPD model could guide other parliaments to advocate for FP/RH in ways that support their ministry's objectives.

Advocacy Interventions

- Capacity building of Members of Parliament (MPs) to advocate for population and development including family planning.
- Ensuring the legal framework of family planning interventions, oversight of government programmes related to family planning,
- Advocacy for more resources to FP programs and mobilisation of the general public to engage with FP programmes
- Bringing together high level decision makers, development partners (DPs), Civil Society Organizations (CSOs), Non-Governmental Organizations (NGOs), religious leaders and opinion leaders to strategically reposition FP in Rwanda as well as share experience with other parliaments.

RPRPD Advocacy Methodology

- Parliamentary oversight field visits for family planning programs in all 30 Districts of Rwanda, carried out by current MPs serving a 2013-2018 mandate,
- Local leaders, health service providers, in and out of school/university young people, women of reproductive age and the general public participate in meetings and raise issues with MPs in both rural and urban settings. These meetings define what actions can be taken locally and what MPs should advocate for at national level.
- RPRPD approaches various actors, e.g., other MPs, Rwandan social cluster Ministries (Health, Education, Finance, Local Government, Gender and Family Welfare and Youth), other government agencies, and decentralised entities, DPs, NGOs, CSOs and religious leaders, through hearings and consultative meetings.

Key findings

- Rwanda gazetted its Reproductive Health Law on June 4th, 2016, and
- Provisions on spouses' equality in the law governing persons and family on September 12th, 2016 guaranteed both spouses' choice on which contraceptive method to use.
- Following the school health policy and strategies instituted in 2014, reproductive health education, with clear age-appropriate components, to be taught to pupils at all levels of primary and secondary education, were incorporated into School Curricula and began implementation in the 2017 academic year.
- The most comprehensive Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) Policy and its FP/RH costed implementation strategies were approved earlier this year 2018.
- FP/RH indicators are part of the annual Districts Performance Contracts and District Development Plans assessment;
- The voted annual national budgets include domestic funds to fill the gap of FP/RH funding from DPs and other stakeholders.
- The Rwandan parliamentary advocacy model, through RPRPD activities, is one to be shared with other Parliaments.

Implications for policies and programs

- Multi-sectoral collaboration and RPRPD involvement in FP advocacy spurred many achievements in legislation, policy formulation and new strategy development and implementation to improve access to voluntary FP
- Because of their varied backgrounds, MPs need capacity building around the benefits of FP in order to advocate effectively
- On the other hand, the same diversity within the MPs allowed them to effectively reach out to a wider network of stakeholders and contributed to bringing in new supporters of FP
- More resources and coordination mechanisms are needed to facilitate RPRPD parliamentarians' field visits and to speed up change in policies and strategies related to FP
- MPs, as the people's representatives, contributed to changes in the public's mind-set about FP/RH, through mobilisation and consultations at different levels



Family planning and reproductive health campaign event, November 2015



Senator Dr. Celestin Sebuoro (left), a member of the Inter-Parliamentary Union Advisory Group on Health, pictured during a visit to a community health worker home, reviewing the FP register.