



FINANCIAL YEAR 2025 ANNUAL REPORT & FINANCIAL YEAR 2026 ACTION PLAN AND BUDGET

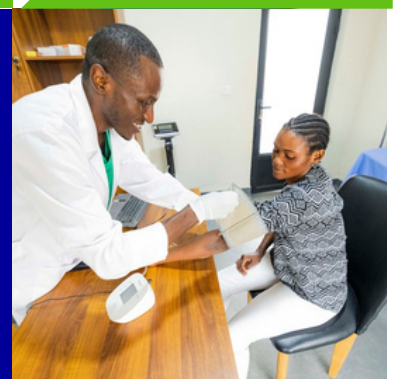
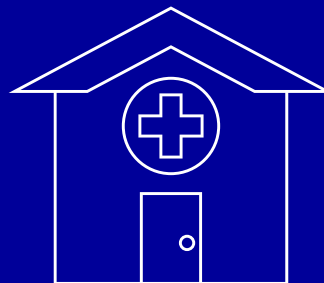


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ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
ANC	Antenatal Care
ASRH	Adolescent Sexual Reproductive health
BMC	BioMed Central
BP	Blood Pressure
CEMR	Community Electronic Medical Records
CHWs	Community Health Workers
CTP	Critical Threats Project
CYP	Couple Years of Protection
DCCs	Digital Community Champions
EDP	Energias de Portugal
ELMIS	Electronic Logistics Management Information System
EMR	Electronic Medical Record
EPI	Expanded Programme on Immunization
FGHPs	First Generation Health Posts
FP	Family Planning
FY	Financial Year
GoR	Government of Rwanda
GP	General Population
HIV	Human Immunodeficiency Virus

ACRONYMS

PI	Project Income
PPCP	Public Private Community Partnership
RAMA	Rwandaise d'Assurance Maladie
RBC	Rwanda Biomedical Centre
RFDA	Rwanda Food and Drug Administration
RMNCAH	Reproductive Maternal Newborn Child and escent Health
RMNCH	Reproductive Maternal Newborn and Child Health
RMS	Rwanda Medical Supply
RNEC	Rwanda National Ethics Committee
RSSB	Rwanda Social Security Board
RTSL	Resolve to Save Lives
RWF	Rwandan Francs
SCJ	Samuel Curtis Johnson
SEO	Search Engine Optimization
SFH	Society for Family Health
SGHPs	Second-generation” health posts
SIF	Strategic Investment Facility
SPIU	Single Project Implementation Unit
SRH	Sexual Reproductive Health

ACRONYMS

SRHR	Sexual Reproductive Health and Rights
SSO	Single Sign-On
STBF	Susan Thompson and Buffet Foundation
TCP	The Commons Project
TMA	Total Market Approach
ToT	Trainer of Trainees
TV	Television
TVET	Technical and Vocational Education and Training
TWGs	Technical Working Groups
UHC	Universal Health Coverage
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
USD	United States Dollars
WASH	Water and Sanitation
WHO	World Health Organization

FOREWORD

At SFH Rwanda, we remain dedicated to delivering impactful, sustainable, and data-driven health interventions. In 2024, our unwavering commitment to improving healthcare access, driving behavioral change, and strengthening health systems has yielded remarkable results. From increasing access to family planning and reproductive health services to leveraging artificial intelligence in predicting disease trends, our efforts have solidified SFH Rwanda as a key player in shaping Rwanda's healthcare landscape. As we look ahead, our vision remains clear: to continue providing innovative, scalable, and community-centered solutions that improve health outcomes for all.

HIV/AIDS prevention:

We expanded HIV prevention efforts, identifying and linking new positives to care and supporting adherence to treatment. This was completed by distributing branded condoms, self-testing kits and initiating PreP for key populations.

Systems strengthening :

Significant strides were made in establishing and operationalizing health posts in remote areas. Our digitization initiatives improved data accessibility and decision-making, ensuring quality healthcare delivery. To improve overall patient journey and user experience as well as operational efficiency, 100 HPs have now been digitized using eFiche.

Audience targeted social behavior change interventions further amplified these efforts.

ASRH/Family Planning :

Improving access to SRHR services especially adolescents with compounded vulnerabilities and addressing barriers to accessing family planning services remained a priority. Advocacy, Integrated community outreach campaigns and youth-friendly awareness programs enhanced the adoption of modern contraceptives, especially for those in hard-to-reach areas.

Malaria Prevention :

With a focus on community engagement and innovative solutions, we supported malaria prevention through SBC campaigns and piloted sustainable products like refillable mosquito repellents.

Collaboration and Partnerships :

Through strategic partnerships, innovative digital health solutions, and targeted social behavior campaigns, we have expanded our reach and deepened our engagement with communities. MOU's have been signed with new partners including Bill & Melinda Gates Foundation, Medwand & CGFNS, Global Fund, Wemos, UNFPA, among others.

Lastly, we thank our Board of Directors, Senior Management Team and all staff and our partners and our funders, like MOH, Mastercard Foundation, CDC, JPHIEGO, Elekta, GF, SCJ, Abbot, Sand Tech, BMGF, France Expertise, Global Fund, UNFPA and Takeda without whom, none of this would have been possible.

Manasseh Gihana Wandera
Executive Director



1.0. INTRODUCTION

SFH Rwanda, a leading Rwandan NGO since 2012, continues to be at the forefront of public health interventions, working to address the most pressing healthcare challenges through social marketing, behavior change communication, and health systems strengthening. Our approach is guided by the belief that sustainable health solutions must be community-driven, data-informed, and innovative.

We are committed to working in partnership with communities, Government, civil society, and the private sector around the country to bring about sustainable, impactful changes that improve the health and development of all Rwandan communities no matter where they live.

Vision, Mission, and Values

Our vision is to optimize access to equitable primary healthcare for Rwanda and beyond, and our mission is to transform healthcare with evidence-based, tech-enabled solutions that inspire healthier lives. Society for Family Health achieves her purpose through innovation, accountability, results focused, and Consumer-Centered

Priority Health Areas :

HIV/AIDS; Family Planning & Reproductive Health; Malaria; Maternal, Newborn & Child health, Water, Hygiene and Sanitation (WASH), Health Systems Strengthening and Primary Health Care .

Solution Areas :

- Behavior changes communication (Community awareness and engagement)
- Social marketing of health products through private sector distribution approaches
- Capacity Building of healthcare workers
- Health Systems' strengthening
- Digital health
- Policy and advocacy
- Measurement (Monitoring & Evaluation)



HQs Regional Offices)

5

Staff+ Volunteers

137

Projects in 2025

16

This FY 2025 Annual Program Narrative Report details activities implemented by Society for Family Health (SFH) Rwanda from October 2024 to September 2025 in collaboration with partners including the Ministry of Health, USAID, UNFPA, SC Johnson, KfW, Takeda, SAND Technologies, Resolve to Save Lives, Elekta Foundation , Abbott, France Expertise , and the Gates Foundation. SFH continues to leverage Social Marketing and Social Behavior Change Communication as key strategies for Health System Strengthening (HSS). Guided by the revised strategic plan 2024-2029, activities were implemented under four broad themes: 1) Equitable Primary Health Care covering disease domains including HIV/AIDS, Tuberculosis, Malaria, MNCH, Nutrition, FP/SRH, WASH, NCDs, and HSS; 2) Social Behavioral Change and Social Marketing; 3) Strategic Information, Research and Knowledge Management; and 4) Institutional Governance, Resilience and Sustainability focusing on SFH Governance, Talent Management, Operations Systems, and Strategic Partnerships.

Table 1: Summary of projects implemented.
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Project Name	Start –End date	Funder	Intervention Area
Increasing Access to Primary Health in Rwanda Communities through construction of 20 Health Posts.	Jan 2025- Dec 2025	TAKEDA	Establishing 20 Second-Generation Health Posts (SGHPs) in the hard-to-reach communities in Rwanda.
Optimizing Rwanda Digital CHWs program for Scale & evidence Generation	Jan 2025-Dec 2025	Bill & Melinda Gates Foundation	Optimizing CHW program (Echis/CEMR in collaboration with MoH, Bill & Melinda Gates foundation & Resolve to Save Lives
Cancer awareness campaign in Nyabihu & Rubavu	Oct 2024 to Dec 2025	Elekta Foundation	End-to-end cervical cancer prevention and treatment
Umuko Project	March 2024 to April 2027	SAND technologies/Susan Thompson Buffet Foundation (STBF)	Technology-enabled Sexual Reproductive Health Operating Systems in Rwanda and South Sudan
Capacity Building of Healthcare Providers (UHC) at Health posts	November 2024 to Feb 2025	Abbott	Capacity Building of Healthcare Providers and screening for child malnutrition with Mid Upper Arm Circumference (MUAC z-score) Tape at several SGHP

Strategic Investment Facility funded project (2022–2025) on “Innovative Health Sector Investment Model for Health Posts to Achieve Universal Health Coverage in Rwanda”	2022 – 2025	UNFPA/SIF	Innovative health sector investment Model for health posts to achieve universal health Coverage in Rwanda.”
Malaria Prevention & Control/HIV prevention	July 2024 to June 2025	Global Fund– RBC SPIU	Malaria Prevention in the Eastern Province as well as HIV prevention in GP
Enhancing private sector investment – IFE through construction and equipping as well as management of Health posts	July 2022– July 2025	KfW	Construction of 80 HPs as a catalyst for job creation
PI/ Social Marketing	Oct 2024 – Sept 2025	SFH	Social marketing of health products
Digitization CHWs training materials		France Expertise	E-learning platform for CHWs health workers .
Malaria Prevention and Health System Strengthening	Jan to Dec 2025	SC Johnson	Malaria prevention through Mosquito repellents distribution and Health System Strengthening
Kora Link Program	April 2025 to Dec 2025	TCP/ Mastercard Foundation	Job creation through Digital Health Community Champions
Others	March 2025–March 2026	Harvard, Wemos, Resolve and MedWand	Malaria prevention and control
Total			

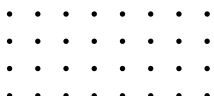
EXECUTIVE SUMMARY/IMPACT AT GLANCE

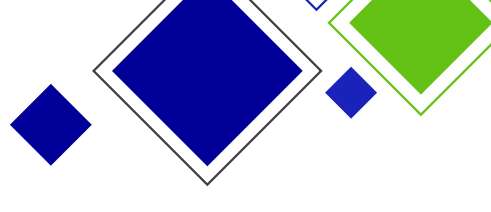
Society for Family Health (SFH) Rwanda implemented 22 projects in FY 2025 with a combined budget of USD 15.3 million, supported by partners such as USAID, UNFPA, SC Johnson, KfW, Takeda, and the Gates Foundation among others. The organization managed 146 health posts (against a target of 64), constructed 15 of 20 planned Second-Generation Health Posts (SGHPs), and upgraded 86 First-Generation Health Posts (FGHPs). Financial investment in health posts reached 16.8 billion RWF, more than double the anticipated 7.7 billion RWF, with construction and upgrades alone absorbing 7.4 billion RWF. To enhance sustainability, 307.7 million RWF was invested in solar systems, while 1,384 staff were trained in areas ranging from EMR/eFiche (529) to emergency obstetric care (111).

SFH Rwanda made significant strides in digital transformation during FY 2025. The organization digitized 136 health posts across the country, installing Starlink devices and providing internet connectivity to strengthen data management capabilities. The eBuzima Electronic Medical Record platform was successfully deployed across 18 health facilities in four districts, with 410 providers trained achieving 96% module completion. Through the Expertise France project, SFH developed and validated an AI-powered e-learning platform (eBumenyi) for Community Health Workers, with 150 CHWs onboarded and plans to scale to all 58,000 CHWs nationwide. With Gates Foundation support, SFH optimized Rwanda's Digital CHW program, completing Training of Trainers for 52 healthcare professionals in Muhanga District to lead district-wide rollout of a Community Electronic Medical Record (CEMR) system. Furthermore, SFH's internal Digital Transformation Roadmap yielded significant efficiency gains, including the full digitization of the Smart Warehouse and distribution system, which reduced stock reconciliation time from over 15 days to real-time, and the completion of a centralized Project Monitoring module.

Social marketing of health products showed strong performance in family planning pills (105% of target, 105,000 distributed), emergency pills (83%, 41,680 distributed), and injectables (80%, 40,020 distributed). Guardian mosquito repellent reached 16,991 units (85%), with 10,044 kits transferred to South Sudan. However, stockouts severely constrained condom distribution (Plaisir at 37%, Prudence at 0%) and Sur'eau water treatment solution (49%). The KoraLink project, in partnership with TCP, CTP Africa, and ICT Chamber with funding from Mastercard Foundation, established 291 active Digital Community Champions working to expand healthcare access while creating jobs for Rwandan youth, with a target of 600 agents by December 2025. The project focuses on gender inclusion with 80–90% of agents being women.

Malaria control efforts included 7,822 index case follow-ups, testing 22,011 household members with a 23.8% positivity rate (5,254 positives). Case investigations covered 1,880 cases, while 357 health facility staff and 12,606 CHWs were trained on Multiple First-Line Therapies. LLIN coverage exceeded 95% during ANC/EPI, though 10,283 household visits revealed recurring infections despite ownership.





Under Family planning and SRHR interventions, we renovated 5 TVET CARE Centers, recruited 6 health providers, and trained 32 service providers, resulting in more than a two-fold increase in adolescent FP adoption and first-trimester ANC bookings. Through the WEMOS Foundation-funded Make Way Project, we convened 2 national workshops on health equity, secured recognition for youth panels in national ASRH and FP Technical Working Groups and produced national TV and radio talk shows highlighting intersectionality gaps in SRHR services.

The Abbott collaboration significantly strengthened Maternal Neonatal and Child Health services, validating MUAC Z-score tape in 6 districts for improved child malnutrition screening and establishing 27 operational health posts with 36 new ones planned by January 2026. Three manuscripts documenting the impact of this 5-year collaboration on healthcare accessibility, quality, and sustainability have been submitted to BMC Health Sciences journal.

Non-communicable disease interventions achieved a 464% increase in high blood pressure detection (174 to 981 cases), with referrals completed rising 271% (101 to 375). Among 430 patients, 153 achieved controlled BP (35.6%), establishing a baseline toward the 90% target. Cancer screening across Nyabihu and Rubavu districts reached 63,746 women for cervical cancer screening, identifying 917 precancerous lesions (96 treated) and 15 cervical cancer cases. Breast cancer screening reached 49,531 women, identifying 267 abnormal findings and confirming 32 breast cancer cases, all referred for treatment.

Research outputs included the Sovrenta® 15WP Indoor Residual Spray study, which demonstrated strong residual efficacy against malaria vectors and supports Rwanda's insecticide resistance management strategies. The Total Market Assessment (TMA) of FP products was conducted in collaboration with RBC, MOH, and with funding from UNFPA was completed. Quantitative data collection and analysis was completed, while qualitative data collection is ongoing.

Communications achieved over 3.0 million organic impressions, 421 posts, and 25.6% follower growth (8,485 total), with engagement averaging 15%.

Overall, SFH Rwanda closed the year with over USD 15.2 million mobilized, hundreds of thousands of beneficiaries reached, and significant progress in scaling equitable PHC, despite challenges of commodity stock-outs, data inconsistencies, and sustainability gaps.



3. OCTOBER 2024- SEPTEMBER 2025 IMPLEMENTATION RESULTS

This report is presented under strategic themes and associated strategic objectives aligned with SFH's revised strategic plan 2024-2029.

Strategic Theme: Social Behavioral Change and Social Marketing

Strategic Objective – Social Marketing

To ensure access and availability of health products, SFH Rwanda during this reporting period, continued supporting private sector distributors through outlet supportive supervision visits, product replenishments and awareness through radio spots and talk shows. ,1000 outlets in all the 30 districts were supervised to ensure effective distribution of the health products.

Pills as FP products were at 105% by the end of the FY. Other FP products (Emergency contraceptives and injectables) performed well at 83% and 80% respectively. Guardian, as a mosquito repellent product, also performed well at 85%. We had stock-out of Condoms and Sur'eau hence the poor performance at 37% and 49% respectively.

Details of the distribution are provided on the table below.

Table 2 : Distribution of Socially Marketed Products

Social marketing products FY 2025								
Products	Annual Targets	Q1	Q2	Q3	Q4	Total Achieved (n)	Total Achieved (%)	Comments
Plaisir	6,000,000	1,060,560	965,270	172,800	4,420	2,203,050	37	Stock out
Prudence	11,000,000	0	0	0	6,944	6,944	0	Stock out but (We received a small quantity from RBC in July 2025)
Pills	100,000	0	66,630	16,510	21,860	105,000	105	on track
Injectables	42,000	8,080	9,750	11,960	10,230	40,020	95	on track
Emergency Pills	43,000	12,920	12,020	10,090	6,650	41,680	97	on track
Sur'eau	38,000	9,529	11,070	4,948	6,172	31,719	83	on track
Guardian	17,500	0	0	1,625	15,366	16,991	97	on track

- Data Source: Sales Reports
- Data Validity: Triangulation with CTL Reports

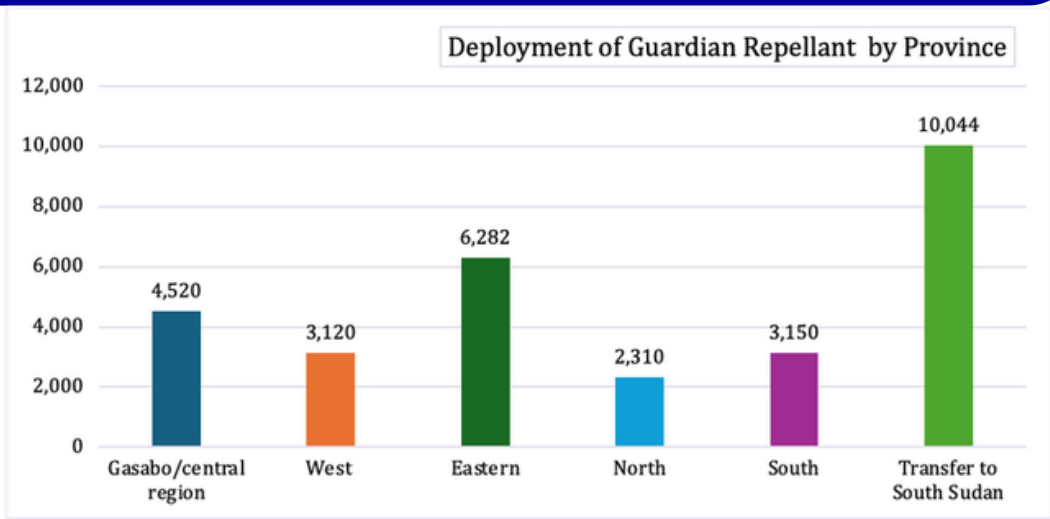


Note:The distribution of the FP products led to the provision of 2,222,892 couple years of protection (CYP) while sur'eau availed 31,719,000 litres of drinking water



Products were sponsored by various partners with Guardian coming in from the SC Johnson partnerships. Of the guardian kits received, **10,044** were transferred to South Sudan.

Figure 1:
Guardian
Repellant
distribution
summary



Koralink Project Initiative



The KoraLink project is a transformative initiative spearheaded by the Society for Family Health (SFH) Rwanda in partnership with the Commons Project Foundation (TCP), CTP Africa, and the ICT Chamber. Funded by the Mastercard Foundation, the program aims to create over 14,000 digital health and entrepreneurship jobs for Rwandan youth, with a significant focus on empowering young women.



The program operates through a network of Digital Community Champions who extend healthcare access via a digital marketplace while generating sustainable income. Following a successful pilot phase, KoraLink has transitioned into an accelerated scale-up across four new districts. The project is currently on track to meet its December 2025 targets. The table below provides a concise snapshot of key achievements, current agent status, and immediate priorities for the board's review.

Table 3 : HoraLink Project Summary

Category	Details
Program Overview	A 4-year program to create over 14,000 digital health and entrepreneurship jobs for Rwandan youth, with a strong focus on gender inclusion (80-90% women). The program uses Digital Community Champions (DCCs) to expand access to healthcare via a digital marketplace platform.
Strategic Targets	• 70% of agents are from rural areas. • 80-90% of agents are women. • 60% of agents from vulnerable categories (by program end).
Implementation Progress	The program officially launched in April 2025. Following a successful dry run in two districts, an accelerated scale-up phase is now underway in four additional districts.
Key Achievements & Current Status	• Total Active Agents: 291 agents are active and prepared. • Initial Cohort (Dry Run): 78 active agents in Nyagatare and Musanze. • Scale-Up Cohort: 213 newly trained agents in Karongi (117) and Huye (96) have received starter kits. • Onboarding Target: 600 agents total by December 2025.
Next Steps / Immediate Focus	• Complete onboarding and training in the districts of Rubavu and Kicukiro. • Recruit an additional 113 agents in the original districts (Musanze and Nyagatare). • Distribute remaining branded materials (jackets, banners) to support visibility.

Strategic Objective – Social Behavior Change



For improved and better adoption health services, SFH Rwanda during this reporting period organized and conducted social behavior change activities both at community and individual levels to increase knowledge on HIV, FP, Maternal child health, Malaria as well as Hygiene and sanitation. At individual level, SFH aimed at addressing knowledge, attitudes, and practices on better RMNCH/ Malaria services, while at community-level the focus was aimed at changing social and cultural norms including myths and misconceptions as well as spousal support regarding RMNCH. Mass media programs were also implemented to scale up reach of education and awareness. The details per health area are provided below.

Strategic Theme: Equitable Primary Health Care

Strategic Objective – Malaria

NSP-RBF- Malaria, Social and Behavior Change Communication project.

The NSP-RBF-Malaria Project has successfully established a formidable foundation for malaria elimination, achieving exceptional reach with >95% LLIN distribution and mobilizing a robust workforce of over 12,000 Community Health Workers. Our performance data provides clear direction for the project's next strategic phase. We are transitioning from our successful focus on building coverage to a strategic emphasis on enhancing quality, strengthening supply chain resilience, and using data to drive targeted interventions. This proactive pivot will accelerate our progress toward the 2027 elimination goals.

Table 4 : Malaria Strategic Performance Dashboard

Key Performance Area	Status	Strategic Focus & Next Steps
Surveillance & Case Management	● Key Focus Area	Enhanced surveillance has successfully identified active transmission pockets (23.8% positivity), allowing for a targeted, data-driven response to accelerate elimination in these zones.
Vector Control & LLIN Coverage	● Entering Optimization Phase	Building on >95% net distribution success, the focus is now on optimizing IRS coverage and driving behavior change to increase net utilization and maximize protection.
Community Case Management	● Scaling Impact	With a mobilized workforce of 12,606 CHWs, the next phase is strengthening clinical supervision and refining referral pathways to maximize their life-saving impact at the community level.
Supply Chain Resilience	● Priority for Action	Proactively strengthening the supply chain to fortify testing capacity and ensure service continuity, with an immediate action plan for the 99 identified facilities to secure buffer stocks.
Coordination & Accountability	● Enhancing Synergy	Formalizing coordination frameworks and data-sharing protocols to accelerate impact, ensuring all partners are aligned and accountable for our shared elimination targets.

SC-Johnson OFF SPRAY malaria repellent.

Under the partnership with SC Johnson, an OFF SPRAY malarial repellent was submitted to Rwanda Food and Drug Administration (RFDA) for approval. Once approved, this will be added to our current mix of socially marketed commodities.

Strategic Objective – Maternal Neonatal and Child Health

The SFH Rwanda/Abbott Collaborative

Introduction: Our partnership with Abbott has significantly strengthened Rwanda's primary healthcare system in 2025 through three core initiatives: MUAC Z-score tape implementation, health post digitization, and collaborative research. These efforts are improving healthcare delivery at the community level across Rwanda.

Key Outcomes & Strategic Impact: Second-generation health posts (SGHPs) have demonstrated improved access, equity, and efficiency in primary healthcare. While challenges remain including infrastructure limitations and supply chain issues, our interventions have created measurable improvements in service delivery and data management.

Table 5: Project Timeline & Performance Summary

Initiative	Timeline	Key Metrics
MUAC Z-Score Tape	Pilot completed 2025; National rollout Jan 2026	Validated in 6 districts; Implementation for 5+ years and school youth
Health Post Digitization	27 operational (2025); 36 new by Jan 2026	Scaling to 63 total posts; 9 SGHPs in Bugesera (8) and Nyaruguru (1)
Academic Research	Manuscripts submitted 2025; Publication early 2026	3 manuscripts submitted to BMC Health Sciences journal

Summary: This 5-year collaborative effort (2020–2025) between Abbott and SFH-Rwanda has focused on strengthening primary healthcare delivery at the health post level, with particular emphasis on maternal child health services. The research component documents our impact on healthcare accessibility, quality, and sustainability in Rwanda's healthcare system.

Strategic Objective – Family Planning/Sexual and Reproductive Health

KuraNawe Program

With funding from UNFPA for the KuraNawe program that aims to close the gap between education and health by integrating Sexual and Reproductive Health and Rights (SRHR) and mental health services into TVET schools, five (5) TVET CARE Centers (2 in Kirehe, 2 in Goma and 1 in Gasabo district) were renovated, Six (6) qualified health providers recruited and deployed to strengthen service delivery within the renovated centers, and 32 service providers including head teachers, counselors, and health professionals trained in youth-friendly service provision to ensure high-quality and sustainable support services.



Figure 1: TVET care center site refurbishment and Training of TVET service providers

Make Way Project (January 2025 – August 2025)

Project Description: The Make Way program, which concluded its 2025 implementation phase in August, was a strategic initiative aimed at dismantling systemic barriers to sexual and reproductive health and rights (SRHR) for Rwanda's most marginalized youth. The program applied an intersectional lens to address the unique challenges faced by young people with disabilities and other compounded vulnerabilities. As a key strategic partner, SFH Rwanda focused on amplifying youth voices in national policy forums and ensuring the delivery of inclusive, youth-friendly health services. This work was made possible through the support and collaboration of WEMOS and the broader consortium.

Key Achievements & Quantifiable Impact: During this reporting period, SFH successfully drove forward the program's advocacy and engagement objectives, leading to significant national-level influence.

Make Way Project (January 2025 – August 2025)

Table 6 : Project Timeline & Performance Summary

Area of Impact	Key Quantifiable Result
National Policy Dialogue	Convened 2 national workshops to assess health equity; youth insights were formally submitted to the Rwanda Biomedical Centre (RBC) for integration into the RMNCAH policy and strategic plan.
Youth Representation	Secured official recognition for Make Way partners and youth panels as members of the national ASRH and FP Technical Working Groups (TWGs), ensuring their direct input into program design.
Public Awareness & Advocacy	Produced and aired 1 national live TV and radio talk show, broadcast nationwide, to highlight intersectionality gaps and challenges in accessing SRHR services.
Inclusive Service Delivery	Ensured all SFH-supported health posts provided inclusive and youth-friendly SRHR services, serving as practical models for equitable healthcare.

Challenges and Lessons Learned: A key challenge encountered was the slow pace of policy adoption, as the RMNCAH policy and strategic plan review process extended beyond the project's implementation period. Key lessons learned from the project's implementation include the critical importance of placing youth representatives directly within technical platforms to strengthen advocacy, and the proven effectiveness of media engagement in bringing intersectionality issues to a national audience.

Conclusion and Legacy: In conclusion, the Make Way program successfully concluded its 2025 phase, having made significant strides in positioning intersectionality at the core of national SRHR advocacy in Rwanda. The program's legacy includes the amplified voices of vulnerable youth in policy dialogue, the establishment of youth representation within key national technical groups, and the proven delivery of inclusive SRHR services. SFH Rwanda extends its sincere gratitude to WEMOS and all consortium partners for their invaluable collaboration, which was instrumental to the project's achievements.

Strategic Objective – Non-Communicable Diseases

Enhanced Cancer Screening and Surveillance

During the reporting period, SFH, with support from UNFPA and Elekta Foundation, enhanced cancer screening and surveillance services in Nyabihu and Rubavu districts, strengthening early detection, referral, and treatment of cervical and breast cancer. The intervention combined health workforce capacity building with large-scale community screening, contributing to improved identification of precancerous lesions and cancer cases and timely linkage to care.

Table 7 : Malaria Strategic Performance Dashboard

Results Area	Summary of Key Outputs
Coverage and capacity	Implemented in Nyabihu and Rubavu districts; 1,852 CHWs and 97 nurses, midwives, and doctors trained in cervical cancer prevention, detection, and treatment
Cervical cancer screening and treatment	17,269 women screened; 917 (5%) identified with precancerous lesions and referred; 96 received treatment using LEEP and cryotherapy; 9 cervical cancer cases diagnosed and linked to care
Breast cancer screening and diagnosis	15,547 women screened; 267 (2%) with abnormal findings; 101 ultrasounds and 15 biopsies conducted; 16 breast cancer cases confirmed and referred
Community mobilization	46,477 women mobilized for HPV screening (including 1,746 aged 50–65 years); 33,984 women mobilized for breast cancer examinations

Strengthening Non-Communicable Diseases (NCDs) Management at PHC level.

During the reporting period, SFH Rwanda, in partnership with Resolve to Save Lives (RTSL), significantly strengthened community-level primary healthcare delivery across Rwanda's health post network. The initiative focused on improving early detection and management of non-communicable diseases—particularly hypertension and diabetes—while simultaneously enhancing maternal health and family planning services. By integrating digital tools into routine service delivery, the project strengthened clinical protocols, improved continuity of care, and generated timely, high-quality data to support evidence-based decision-making and scale-up.

Table 8 : Key Outputs from the SFH Rwanda and RTSL Collaborative

Results Area	Summary of Key Outputs
Service delivery and systems strengthening	Systematic, facility-based screening was implemented at health posts, resulting in a six-fold increase in high blood pressure detection; diagnostic protocols were strengthened and clear treatment initiation pathways established
Hypertension screening and diagnosis	OPD screening increased from 36,378 to 38,816 (+7%); high BP detection increased from 174 to 981 cases (+464%); suspected hypertension referrals increased from 94 to 375 (+299%), with 375 referrals completed
Hypertension treatment and follow-up	BP monitoring conducted for 1,082 patients (with baseline methodology differences noted); 430 patients enrolled and followed as a newly established hypertension cohort
Hypertension control	Among the documented cohort, 153 of 430 patients (35.6%) achieved controlled blood pressure, establishing a strong baseline toward the >90% control target
Maternal health and family planning	Adoption of modern family planning among adolescents more than doubled due to improved follow-up and retention; first-trimester ANC bookings increased more than two-fold, strengthening early detection of high-risk pregnancies

Strategic Objective – Health Systems Strengthening

MoH Partnership for HPs

The Government of Rwanda and Society for Family Health (SFH) Rwanda entered into an agreement to manage and Operate Health Posts in Rwanda with the aim of ensuring their quality service delivery, harmonized governance structure and financial sustainability. This was announced in the cabinet meeting held on December 14th, 2021. The purpose of this agreement is to give SFH a mandate to streamline the management of 193 health posts selected in 15 districts of Rwanda. This agreement will be implemented in three phases as summarized in the table below:

Table 9 : Summary of Key Milestones of the SFH Rwanda/GOR Concession Agreement

Phase I (Y1-Y5)	Phase II (Y6-10)	Phase III (Y11-15)
Streamline functionality and sustainability of 64 existing HPs	Upgrade 144 FGHPs to SGHPs	Sustain functionality of 193 HPs
Construct 20 new SGHPs	Streamline functionality and sustainability of 64 existing HPs	Transition of management 7 Operationalization of HPs to the GoR
Upgrade 10 FGHPs to SGHPs		

So far SFH Rwanda is managing 146 of the expected 64 HPs, has constructed 15 of the expected 20 Second Generation Health Posts (SGHPs) in phase 1, and 50 new SGHPs in phase 2 (10 by TAKEDA and 40 by KfW-IFE), upgraded to SGHPs eight (8) of the expected 10 phase one First Generation Health Posts (FGHPs) and 78 of the expected 144 phase two FGHPs.

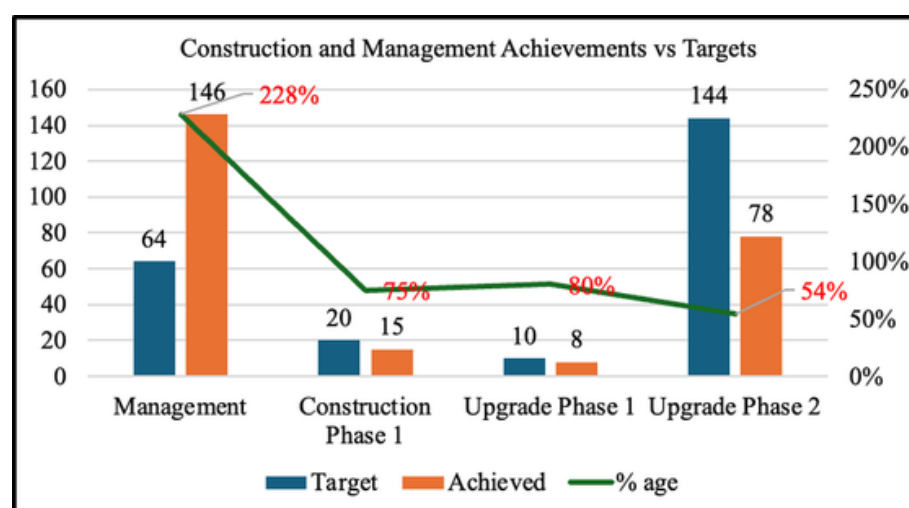


Figure 3 : Progress on the Construction, Upgrade and Management of Health Posts

The management of the 146 HPs are supported by various donors including TAKEDA, SC-Johnson, KfW-IFE, UNFPA. For example, the KfW-IFE project supported recruitment of 171 SGHPs personnel distributed across 40 SGHPs (Phase 1). Similarly, SC-Johnson, continued to provide personnel and other support services to enable functionality of 76 HPs of which 35 are SGHPs.

Functionality of Health Posts: SFH Rwanda has invested enormous amounts in construction/upgrade, in equipment purchases, in human resource development, and in facilitating HPs to acquire drugs. The highest amount of funds has gone into construction of HPs as depicted below. Thus far, the financial expenditure on HP is more than double what was anticipated by this phase – most likely because we have already started implementing phase 2.

During the performance period, 135 newly established health posts facing financial challenges were supported with catalytic start-up capital. This included salaries for nurses and midwives for three months, essential drugs and medical consumables, IT equipment (computers, internet routers, and printers), as well as medical and non-medical equipment

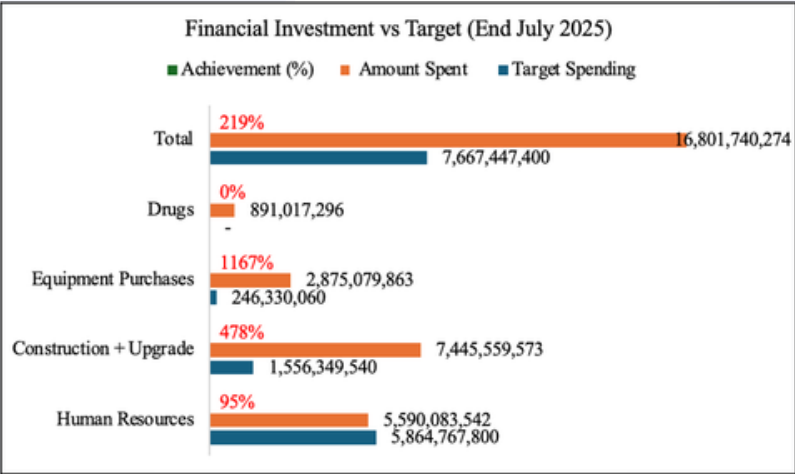


Figure 4 : Progress on Financial Investment since 2022.

By tracking key health indicators like child mortality, immunization coverage, and the incidence of preventable illnesses, we can see the significant impact of the Health Post. The figure below presents this data, demonstrating a strong correlation between the facility's presence and a marked improvement in the community's overall health and well-being.

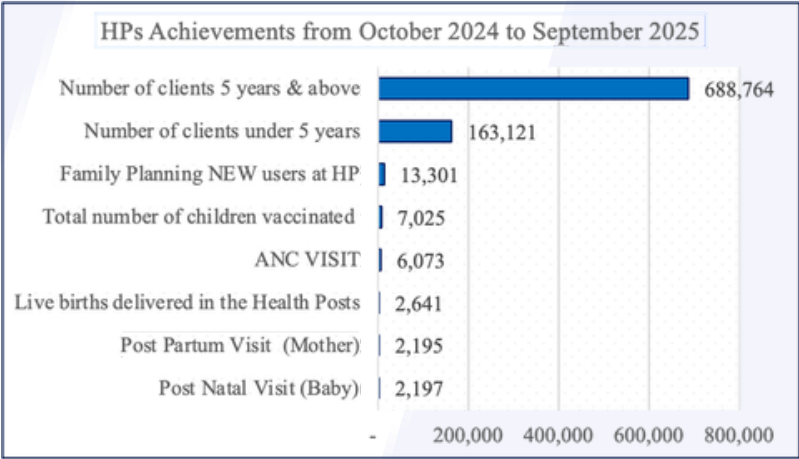


Figure 5 : Health Impact Summary of HPs

Enhancing the sustainability of HPs: SFH Rwanda has embarked on enhancing the capacity of health posts to ensure their sustainability in the long term. Several strategies are being implemented, which include improving the systems, infrastructure, and personnel. 20 SGHPs were integrated into the MMI system with support from UNFPA. In addition, 14 SGHPs have secured contracts with RSSB/RAMA.

Some health posts do not yet have a grid power supply line. Others are in areas endemic with power outages. To mitigate this challenge, SFH Rwanda has embarked on installation of solar as an alternative source of power. A total of >307 million has already been invested to connect these solar power systems, with almost half of the cost going on SFH-EDP Solar System. However, it also has a higher Average Cost, along with Off-Grid Box Solar System, compared to others.

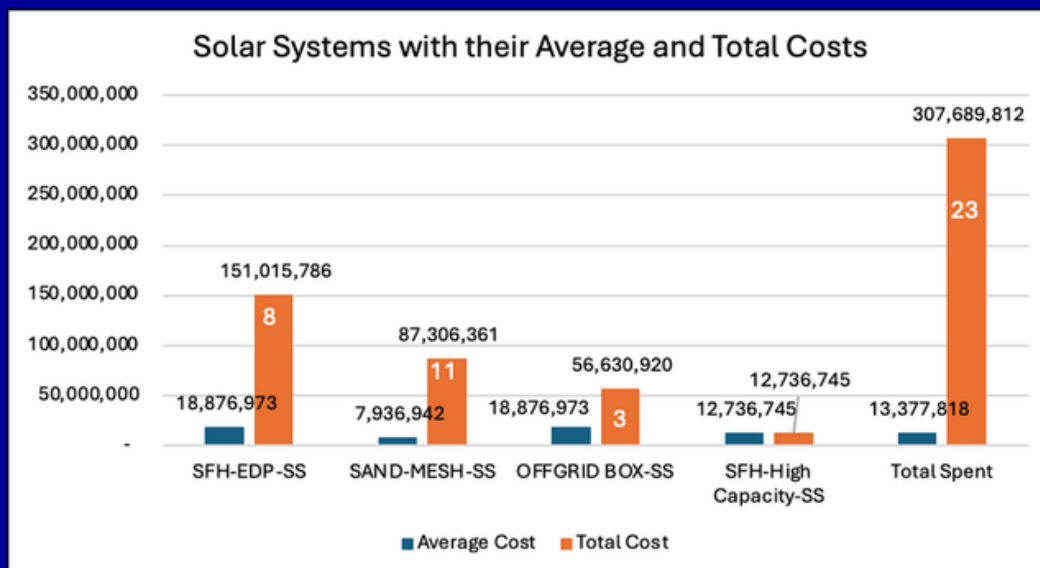


Figure 6 : Solar Systems with their Average and Total Costs

Capacity Building of Health Posts' Staff:

SFH in collaboration with RBC, Abbott & UNFPA- SIF continued to strengthen the capacity of health providers from health posts to deliver quality primary healthcare while supporting the continuous professional development of health post staff. Subsequently, a procurement process is in place for a firm that will optimize the MOH's Moodle Learning Management System to ensure broad accessibility for the health post workforce nationwide. Overall, a total of 1,384 have been trained, as follows:

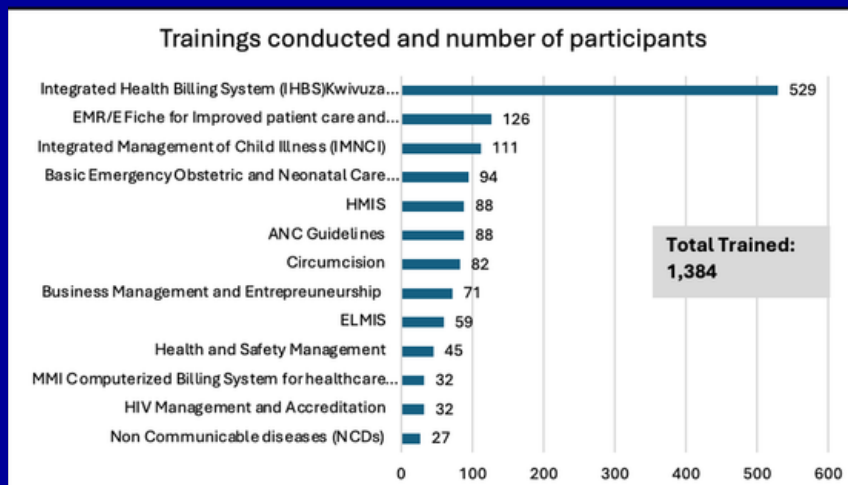
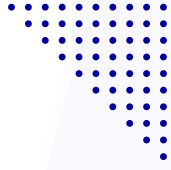


Figure 7: Trainings conducted since 2022 and number of participants.

Public-Private-Community Partnerships Model Implementation: With funding from UNFPA, 111 HPs received support in different forms ranging from equipment donations, salaries for key staff, and purchase of pharmaceuticals supplies. Sixteen (16) of these were near/within refugee settings. In addition, a firm has been procured that will support in the maintenance of HP equipment to prolong their service life by reducing tear and wear. Quarterly coordination meetings were conducted in 7 districts targeting 271 head of health facilities and other stakeholders from RSSB, RMS, and district leadership. Joint support supervisions targeting over 50 HPs were also conducted.

Strategic Theme: Strategic Information, Research and Knowledge Management

Under this theme we report on research-related activities as well as activities related to communications functions of the institution. Strategic information/M&E activities are incorporated under each activity theme.



Strategic Objective – Research:

TMA assessment for family planning study.

With funding from UNFPA and in collaboration with RBC and MOH, we prepared, submitted, and secured approval from Rwanda National Ethics Committee (RNEC) to conduct a Total Market Assessment (TMA) of FP products in Rwanda. Data collection for the quantitative component of the study was done in October 2025, analyzed, and summary report provided. Data collection for the qualitative component will end this week and report provided before the end of the year. Given the period of data collection, results shall be reported in the 1st Semi-annual performance period next year.

Sovrenta® 15WP Indoor residual Spray study.

An evaluation to assess Sovrenta® 15WP, a new indoor residual spraying (IRS) insecticide developed to strengthen malaria vector control in Rwanda, was conducted between February 2024 and March-2025, final results being made available in June 2025. The study took place at the Ruhuha experimental hut station in Bugesera district, where six standardized huts were refurbished, prepared, and randomly assigned to Sovrenta, a positive control insecticide (Fludora® Fusion), or a non-treated control. The application of Sovrenta® 15WP followed WHO-recommended procedures for IRS product testing.

Following the application, WHO cone bioassays were performed using susceptible *Anopheles gambiae* mosquitoes to measure bio-efficacy and residual activity on both cement and mud walls. In addition to laboratory-based assessments, entomological monitoring was carried out using trained volunteer sleepers who facilitated the collection of wild mosquitoes entering the huts. This enabled the team to evaluate mosquito entry patterns, mortality outcomes, and behavioral responses under semi-field conditions.

Across all assessments, Sovrenta® 15WP demonstrated strong insecticidal performance. Although immediate knockdown was low, the product consistently produced high mortality and maintained effective residual activity on both surface types. Treated huts recorded noticeably fewer mosquito entries than untreated control huts, and wild mosquitoes collected from Sovrenta-treated huts exhibited significantly higher mortality rates.

Overall, the evaluation showed that Sovrenta® 15WP is a promising IRS insecticide for malaria vector control. Its long-lasting activity and strong performance relative to an established IRS product support its potential role in Rwanda's insecticide resistance management strategies and efforts to maintain progress in reducing malaria transmission

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Strategic Objective – Knowledge Management:

In 2025, SFH Rwanda's communications team delivered a high-impact, zero-paid-budget social media strategy, achieving exceptional results despite severe resource constraints.

Table 10 : Key Performance Metrics under the Communications department

Key Metric	2025 Result	Key Insight
Total Organic Impressions	≈3.0 million	Strong organic reach, 2X the initially verified impression count.
Total Posts Published	421	Consistent posting rhythm of ≈8.1 posts per week across all channels.
Total Follower Growth	+25.6% (8,485 total followers)	Robust audience expansion, driven primarily by LinkedIn's +42.4% growth.
Average Engagement Rate	≈15%	Healthy engagement, significantly exceeding industry benchmarks for the sector.

LinkedIn became the dominant channel for partner engagement, posting high-value content on the Public-Private-Community Partnership (PPCP) model and Digital Health, leading to the highest follower growth. The team secured strong topical leadership in Malaria Prevention and Maternal/Child Health, which consistently drove the highest engagement across all platforms, particularly Instagram's 19% Engagement Rate.

Furthermore, the communications team successfully executed a critical, foundational overhaul of SFH Rwanda's brand and digital infrastructure highlighted by 1) securing successful approval and implementation of new brand guidelines, including an updated logo, new typography fonts, a defined color spectrum, and standardized application templates; and 2) Completing the establishment of the new website structure, including a comprehensive homepage, navigation depth, and optimized Search Engine Optimization (SEO) for better discoverability.

In 2026, the communications team will build on these gains and seek the hire of two additional content creators to increase core capacity, acquire Canva Pro + CapCut Pro licenses (2 users) for faster and high-quality video editing, and conduct Mandatory training for comms staff on advanced digital marketing, SEO, and new platform formats to achieve engagement uplift of posts.

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Strategic Objective – Talent Management

SFH Rwanda is undertaking a pivotal Learning and Training initiative with the overarching purpose of cultivating a strong, agile, and future-ready workforce across Rwanda, regional offices, and continental operations. This program is designed to equip staff with the essential skills, behaviors, competencies, and leadership capabilities necessary to deliver high-impact results. Inspired by the vision to create a high-performing, mission-driven SFH workforce empowered through continuous, inclusive, and data-driven learning, staff shall be equipped to drive continental health impact thus securing SFH's long-term strategic growth. The strategic focus is on three key areas: 1) building staff technical capacity across all levels and regions; 2) strengthening managerial, leadership, and strategic thinking through mentorship and leadership pipelines; and 3) institutionalizing a culture of continuous learning embedded in daily practice, ensuring equitable access to learning resources for all staff.

To successfully implement this vision, the initiative will utilize a data-driven approach by establishing competency frameworks, conducting organizational assessments to identify specific skill gaps, and leveraging dashboards to measure skills development. Implementation steps include developing tailored learning modules for both in-person workshops and digital self-paced learning, establishing a leadership pipeline, and cultivating safe, supportive environments to Drive Innovation, Experimentation & Learning from Practice.

The anticipated impact of this capacity building initiative is significant. It will result in a highly skilled, empowered, and mission-driven workforce with strengthened technical and managerial capabilities. Furthermore, it is expected to lead to harmonized competency standards and measurable improvement in staff performance. Crucially, this initiative is shaping the Learning & Training function into a formal Learning & Development department that will robustly support SFH's strategy and long-term success

Strategic Objective – Operations Systems and Capabilities

Digitization of HPs In collaboration with Sand Technologies

In line with strengthening the capacity of these health posts to manage their clinical and operational activities, SFH Rwanda has digitized 136 health posts across the country. Under this initiative, SFH Rwanda installs a Starlink device, supplies them with computers and pays a monthly internet subscription. We also trained them in the different data management systems to ensure timely reception of data for quick decision-making.

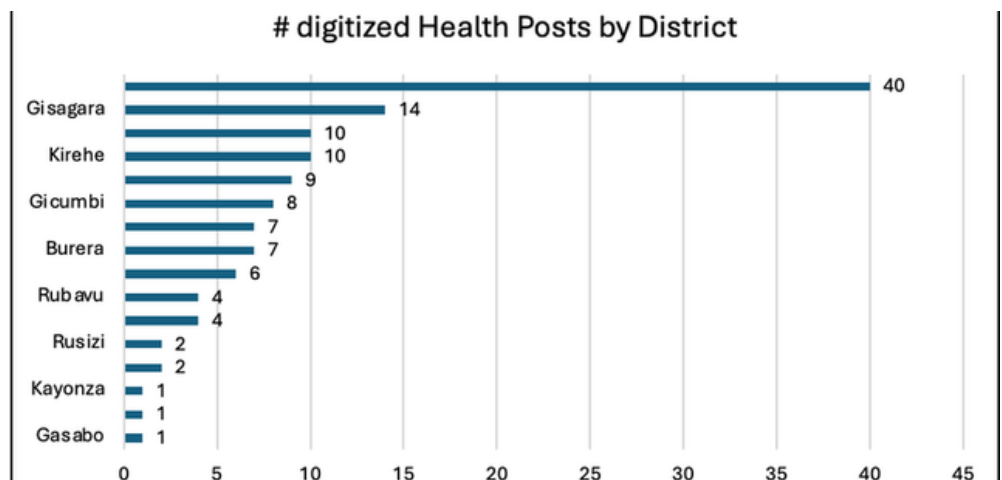


Figure 8 : Digitized health posts by District.

SFH/ThinkMD Collaboration

With funding from SAND Technologies, SFH Rwanda and ThinkMD deployed the ThinkMD Clinical Decision Support Tool across 15 health posts to strengthen diagnostic accuracy and clinical decision-making. The pilot phase was in Aug-Dec 2024 followed by co-design engagements to correct workflow friction, lengthy assessments, and gaps in clinical coverage. The redesigned tool is due to be piloted in FY 2026.

eBuzima EMR deployment in the Health centers.

The eBuzima Electronic Medical Record (EMR) platform was successfully deployed across 48 health facilities in the districts of Musanze, Kamonyi, Muhanga, and Nyanza. 26 additional facilities from Huye and Gakenke are planned for during phase 3, which aims to have a total of 92 health facilities by its conclusion. Through a strong collaboration with the Ministry of Health (MoH) and SAND Tech, SFH Rwanda has achieved a major milestone by transitioning all targeted facilities to the Go-Live phase within a three-week period. The success of this rollout highlights the effectiveness of the national capacity-building strategy, leveraging a network of over 100 Master Trainers to ensure a standardized and scalable implementation.

The following table provides a comprehensive overview of the project's objectives and achievements during the reporting period, including the phased weekly progression.

Table 11 : Summary of eBuzima deployment progress

Area of Focus	Objective & Target	Achievement & Status
Overall Deployment	Transition all 48 health facilities in 4 districts to the eBuzima platform.	100% Success. All 48 facilities in Musanze, Kamonyi, Muhanga, and Nyanza are now in the Go-Live phase.
Training & Capacity Building	Train providers on core modules and build national capacity.	410 providers trained across all facilities. Achieved 96% module completion. Utilized a network of 100+ Master Trainers and 47 focal-point trainers for onsite support.
Technical Readiness	Establish robust infrastructure for Go-Live.	100% LAN installation completed. Internet connectivity was validated and technical issues (e.g., damaged cables, power instability) were resolved.
Digital Adoption & Transition	Drive high adoption of digital workflows and transition from paper-based systems.	All facilities have successfully transitioned, with digital adoption increasing daily as provider confidence and proficiency grow.
Implementation Timeline	Execute a rapid, phased rollout over three weeks.	Week 1: Completed intensive training on all major modules. Week 2: Finalized technical preparations and completed training for remaining staff, reaching 85% readiness. Week 3: Achieved full Go-Live activation across all 48 facilities.

Service adoption rates differed across facilities, but our master trainers are doing their best to support facilities reach 100% adoption.

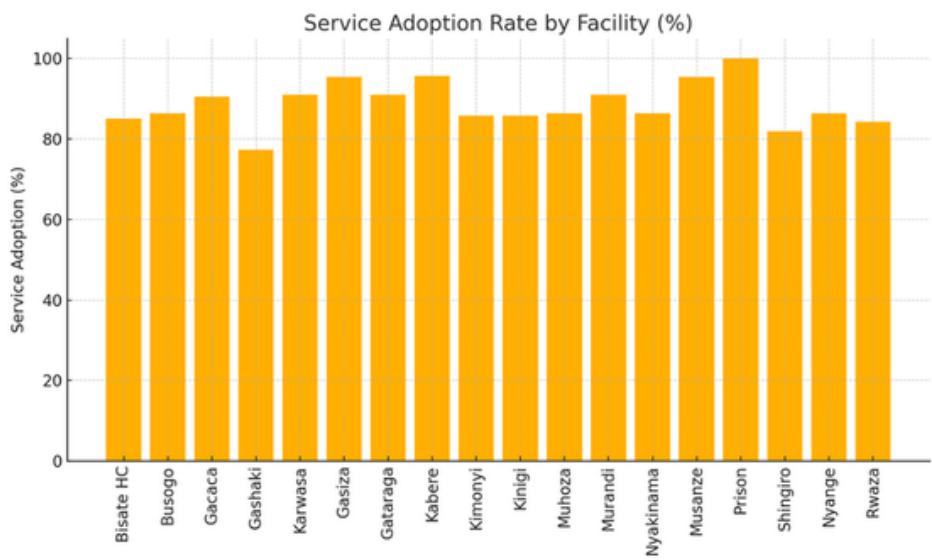


Figure 9 : Service Adoption Rate Chart in Musanze district.

Empowering Community Health Workers Under the Expertise France Project.

The "AI-Powered Digital Health Project" in Rwanda, a partnership led by SFH Rwanda with the Rwanda Biomedical Centre (RBC), CIIC-HIN, WeTel, and support from Expertise France, is advancing the nation's goal of universal health coverage. The project deploys an AI-powered digital platform to enhance the performance of Community Health Workers (CHWs), promote gender equity, and expand access to quality care.

To date, key milestones include:

- **Platform Validation:** The AI-powered e-learning platform, eBumenyi, was successfully validated with CHWs familiar with the community electronic medical records (cEMR) system. Structured feedback from hands-on demonstrations was used to refine its functionality and user experience.
- **Deployment Progress:** The first two phases of deployment are complete, successfully onboarding 150 CHWs (50 in Phase 1 and 100 in Phase 2).

The project is now moving into Phase 3, which will onboard an additional 200 CHWs. This will be followed by final validation, Single Sign-On (SSO) integration with the cEMR, and preparations for a nationwide scale-up to all 58,000 CHWs in Rwanda.

Summary: SFH Rwanda successfully rollout the Gates Foundation project to optimize Rwanda's Digital Community Health Worker (CHW) program. A successful Training of Trainers (ToT) has been completed, equipping 52 healthcare professionals in Muhanga District to lead the district-wide rollout of a Community Electronic Medical Record (cEMR) system. This initiative is pivotal for scaling digital health capabilities and enabling data-driven healthcare delivery, ultimately improving community health outcomes.

Key Accomplishments & Progress: The project has successfully established the foundation for scaling the digital CHW program through a targeted training initiative. The core activity and its outcomes are summarized below.

Table 12 : Status Summary of the cEMR project

Activity	Details & Scope	Strategic Outcome & Impact
Training of Trainers (ToT)	• Location: Muhanga District Participants: 52 individuals trained, including staff from 16 health centers, CHW supervisors, and IT officers.	• Created a core team of trainers ("digital champions") fully prepared to conduct cascade training for all CHWs in the district. • Positions Muhanga District as a model for digitally driven health promotion.
Core Training Competencies	The curriculum was designed to build capacity in two critical areas: 1. System Proficiency: EMR fundamentals, data management, and security. 2. Data-Driven Decision Making: Data analysis to identify health trends, monitor indicators, and evaluate program effectiveness.	• Ensures sustainable local capacity for system implementation and ongoing support. • Empowers supervisors to leverage cEMR data for improved clinical practice and health program management.

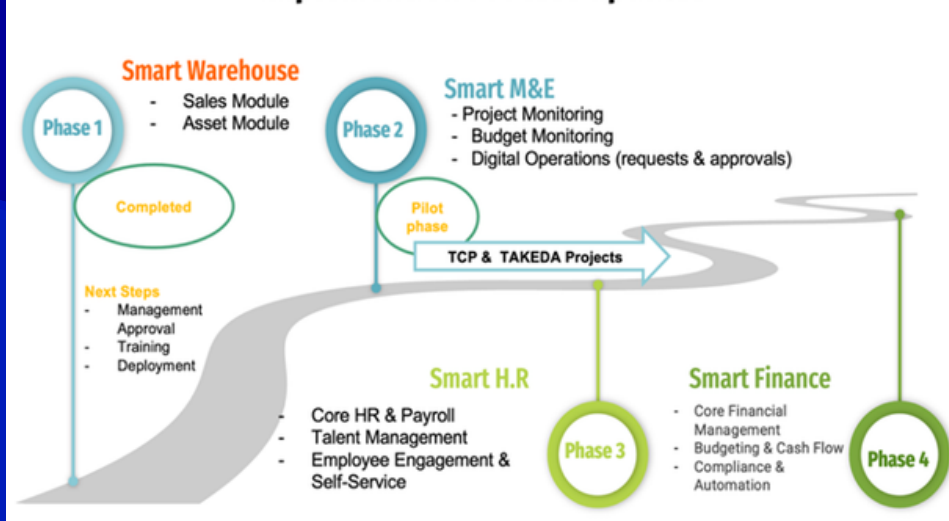
Strategic Outlook & Next Steps:

The immediate priority is the deployment of this cascade training to frontline CHWs across Muhanga District. This will operationalize the cEMR system at the community level, generating crucial evidence on the scalability and impact of digital CHW programs. This phase is critical to achieving the project's core objective of evidence generation and informing the national scale-up strategy.

SFH’s Digital Transformation Roadmap

SFH is implementing a comprehensive Digital Transformation Roadmap to modernize operations, strengthen accountability, and improve the efficiency of its primary healthcare programs. The initiative is centered on an integrated digital platform designed to transition the organization into a paperless model with centralized, real-time data.

Implementation Process updates



Significant progress has already been made in several key areas. The Smart Warehouse and distribution system has been fully digitized, providing real-time visibility of stock levels and streamlining product requests from regional offices. This has dramatically improved efficiency, as demonstrated by the CTL reconciliation process, which has been reduced from over 15 days to real-time completion.

Figure 10 : Summary of SFH Digital Transformation Roadmap

Additionally, the Project Monitoring module is now complete, centralizing the management of all projects, budgets, and approvals. This allows for real-time tracking of budget utilization. Furthermore, the Asset Registry system is also in its final stages and will soon eliminate manual paperwork by enabling end-to-end digital tracking of assets and supplies.

The next phase of the roadmap will focus on digitizing HR and Finance processes and integrating them into a unified platform. A mobile SFH Smart App is also planned to provide staff with remote access to systems and data, supporting timely decision-making from any location.

Table 13 : Progress Status of the SFH Digital Transformation roadmap

Digital Initiative	Current Status	Key Outcomes & Future Plans
Warehouse & Sales System	Completed	Real-time tracking of products, sales, and payments. CTL reconciliation reduced from 15+ days to real-time. Improved planning and stock management.
Project Monitoring Module	Completed (TCP), In Progress (Others)	Centralized management of projects, activities, and budgets. Real-time visibility of budget consumption prevents overspending. Enhanced activity tracking and support.
Asset Registry System	Finalization Phase	Will enable digital monitoring of all assets, eliminating paperwork. Online requests, approvals, and automatic depreciation tracking.
HR & Finance Integration	Planning Phase	To be integrated into the unified platform with single sign-on, streamlining all HR and Finance processes for a cohesive user experience.
SFH Smart App (Mobile Access)	Development Phase	Will provide smartphone access to all system data, ensuring staff have convenient, anytime, anywhere access to critical information.

Strategic Objective – Strategic Partnerships:

Harvard Partnership

Through a bid process, SFH was successfully selected to serve as the in-country partner for Harvard University to coordinate and execute y in-country meetings in January and June 2025 as follows.

Table 14 : Summary of Hey Initiatives with Harvard University

#	ITEM	TIMELINE	STATUS
1	Strengthening Public Health Analytics	3-5/02/2025	Successfully Completed
2	Applied Health Analytics for Delivery and Innovation	7-9/04/2025	Upcoming
3	Science of Defeating Malaria	15-20/06/2025	Upcoming

All the planned meetings took place, the February meeting attracting 21 participants from 9 countries, April meeting attracting 22 participants from 10 countries, and the June meeting attracting 85 participants from 27 countries. The data analytics and prediction around Malaria. Through these partnerships, SFH Rwanda does not only generate income but also serve as platforms for networking and showcasing our work.

4. MAJOR CHALLENGES

Despite the efforts we are putting in to ensure quality and interrupted service delivery, there are challenges that hinder effective management and operations. The major ones include:

- 1.A critical shortage of specialized technical staff like nurses and therapists significantly hampers effective service delivery at HPs.
- 2.The current service tariff fails to cover operational costs, threatening the long-term financial sustainability of HPs.
- 3.Unreliable power infrastructure and inconsistent data systems challenge service quality, increase costs, and hinder effective monitoring at HPs.
- 4.Significant financial constraints and uncertainty now threaten key projects following the global dissolution of a major funding partner, USAID.
- 5.Persistent stockouts of essential commodities like condoms and water treatment solutions severely disrupt the delivery of critical public health services.

5. SFH 12-Month Workplan and Budget

This 12-Month Workplan and Budget is our strategic roadmap for transforming donor support into measurable impact. It outlines key initiatives and financial stewardship essential to retaining current donors and attracting new partners, ensuring sustainable growth.

Table 15 : Summary of Confirmed and Prospective SFH Project for FY2025/26

Project Name	Funder	Intervention Area
Increasing Access to Primary Health in Rwanda Communities through construction of 20 Health Posts.	TAKEDA	All 20 SGHPs fully operational and social behavioral change communication in the catchment area of health posts on mental , nutrition and health education in general.
Optimizing Rwanda Digital CHW program for Scale & evidence Generation	Bill & Melinda Gates Foundation	The project will strengthen the workforce capacity by training health center staff through Training of Trainers sessions and cascading CHW trainings across four districts, including a hybrid ToT in Kamonyi. It also supports effective deployment and use of eCHIS through detailed implementation plans, digital self-learning materials, and decentralized technical support. Ongoing mentorship, system troubleshooting, and monthly PMU meetings ensure smooth implementation and consistent progress monitoring. In addition, periodic performance reviews and usability assessments are conducted to evaluate improvements and guide continuous refinement. and compare results against baseline data.
Digital Jobs for youth in health-KoraLink	TCP/ Mastercard Foundation	Access to Market for Koralink Agents (Enabled by a Marketplace Technology Solution) , Access to Sustainable Dignified Work , Ecosystem engagement and Monitoring and Evaluation.

Piloting the WHO HEARTS Technical Package in Rwanda	Resolve to save lives	Integration of NCD into the eFiche , launch and start of implementation of the WHO HEARTS pilot project in Ngoma and Nyagatare districts . Upcoming activities include :- • Baseline Assessment & Planning • Standardized Hypertension Care Package Adapted & Approved • Diagnostics, Equipment & Digital Tools Procured and Functional.
Umuko Project and E-Buzima	SAND Technologies	Focused on Maintaining 126 HPs for 12 months on Umuko and deployment of E-buzima system and training for all health centres in Gakenke District (20) and Huye District (15).
Capacity Building of Healthcare Providers (UHC) at Health posts	Abbott	MUAC z-score tape validation and deployment across HPs including training of providers on its use
Strategic Investment Facility funded project on “Innovative Health Sector Investment Model for Health Posts to Achieve Universal Health Coverage in Rwanda”	UNFPA/SIF	Provide catalytic start-up grants to health posts in refugee camps and surrounding communities during the critical early operational phase.Support the operationalization of light-touch TVET centers
Malaria Prevention & Control/HIV prevention	Global Fund- RBC SPIU	Malaria Prevention in the Eastern Province as well as HIV prevention in GP
Enhancing private sector investment – IFE through construction and equipping as well as management of Health posts	KFW	Equipping 40 SGHPS Procure of 7 ambulances
Capacity Building project(ENE	Eni- Foundation	Capacity building of healthcare providers- Hospitals to CHWs
Empower	France- Expertise	Empowering and training 200 Community Health Workers, and supervisors with digital platform, while piloting and optimizing an AI model in selected sites and integrating it into e-CHIS. A digital training model will be deployed to support CHWs and supervisors with ongoing content improvements. A stepped-wedge trial across
Digitization of Health Posts	Fionet	The program will digitize 20 health posts by deploying the Fionet EMR along with essential equipment such as printers, tables, and Starlink internet, while training health post staff through a blended approach supported by SFH Master Trainers. Continuous technical support, troubleshooting, and system maintenance will ensure reliable functionality, complemented by strong data governance, compliance, and alignment with MoH priorities. Ongoing supportive supervision and quality monitoring will enhance digital service delivery, and close collaboration with MoH and Fionet will facilitate a smooth rollout and sustained system access

Guardian Deployment in South Sudan, Central Africa and Burkinafaso	SCJ	Malaria prevention through Guardian Deployment in South Sudan, Central Africa and Burkinafaso
STOP-AMDR	JPHIEGO	Scaling the Optimal Use of Multiple ACTs to Prevent Antimalarial Drug Resistance (STOP-AMDR)
SFH- Managed Health Post Income	SFH- HP	Expand access and equitable primary healthcare services, especially in underserved and remote areas in Rwanda.
Science of defeating Malaria	HAVARD	Supporting countries on “Subnational Tailoring of Malaria Interventions” as countries update their national strategic plans.
PI/ Social Marketing	SFH	· Implement product sales through Koralink agents. · Implementation of e-sales & distribution Management System · Promote and sales of SFH Health products ie Supernet , Guardian , sur;aeu , family planning products and condoms. · Strengthen partnership with UNFPA , MoH and RBC to continue provision of condoms and family planning products.

