The Inshuti z’Umuryango: the volunteers helping keep children safe in Rwanda
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tr>
<td>CHW</td>
<td>Community Health Worker</td>
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<td>CPWO</td>
<td>Child Protection and Welfare Officer</td>
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<td>GoR</td>
<td>Government of Rwanda</td>
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<td>ICRP</td>
<td>Integrated Child Rights Policy</td>
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<td>IZU</td>
<td>Inshuti z’Umuryango</td>
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<td>MIGEPROF</td>
<td>Ministry of Gender and Family Promotion</td>
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<td>NCDA</td>
<td>National Child Development Agency</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>USSD</td>
<td>Unstructured Supplementary Service Data (text message-based system for sending information using codes)</td>
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Introduction
The Government of Rwanda (GoR) is committed to ensuring that all children achieve their full potential while growing up in a safe and protective environment. The ‘Friends of the Family’ or ‘Inshuti z’Umuryango’ (IZU) initiative was introduced in 2016, as part of national child protection system strengthening and care reform efforts, led by the National Child Development Agency (NCD Agency; formally National Children’s Commission) who operates under the Ministry of Gender and Family Promotion (MIGEPROF). There are IZU in every district of Rwanda, with one female IZU and one male IZU selected per village. Mobilization of this frontline volunteer cadre was led by NCD Agency, with support from development partners including UNICEF, Save the Children, Hope and Homes for Children, and World Vision.

The IZU cadre was conceived as an innovative approach to decentralising the social workforce in Rwanda. However, in the early years the programme made slow progress due to relatively limited funding support. From 2017 to 2018, a joint initiative ‘Strengthening Child and Family Protection Systems for Better Care’ established by the NCD Agency and development partners supported the scale up of the IZU cadre, in addition to strengthening other elements of the child protection system. An ‘Operationalization Plan’ was developed in 2019 to expand and operationalise the IZU across all 30 districts in Rwanda and increase the skill levels of the volunteers. To date, 29,674 IZU (50% female, and 50% male) have been selected and recruited. One male IZU and one female IZU pair up within each village. The cadre now spans across all 30 districts of Rwanda to achieve national coverage. Details on the operationalization and scaling of the IZU cadre are outlined in the accompanying Programme Brief.

There has not yet been a formal evaluation of results achieved by IZU, measured against the Operationalisation Plan. However, there is ongoing monitoring of IZU activities, complemented by several assessments (largely conducted by development partners) between 2018 and 2020 including an end of service report, assessment of referral networks and coordination, rapid skills and gap analysis, and analysis of IZU job aid and material. The results below are extracted from these assessments.

Who the IZU are and what they do
The IZU are community-based child and family protection volunteers, active throughout Rwanda. Their mandate is to assist in the protection of all children and their families from violence, exploitation, and neglect, by being accessible and approachable ‘friends of the family’.

IZU are selected by their own communities, with two IZU per village – one male and one female. IZU’s strong presence in their communities sees them well placed to play an important role in the prevention of and response to protection issues within their communities. The IZU play a key role in the identification of children who are at risk of harm or being harmed, serving as their first point of contact and as entry point into the wider child protection system. The IZU comprise communities’ direct linkage to statutory child protection structures.

They have played a very significant role protecting children during COVID-19 lockdowns. Their support comprises the following:

The IZU provide support in five main areas:

- Promoting equal rights of children with disabilities,\(^5\)
- Protecting children from violence, neglect, and exploitation;
- Promoting positive behaviours and social change
- Curbing early pregnancies and school dropouts
- Supporting reunification of children separated from their families;

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\(^5\) Ministry of Gender and Family Promotion (2016). Imirongo Ngenderwaho Ijyanye n’Ishyirwaho n’Imikorere y’Inshuti Z’Umuryango.
Home visits to support families, including providing basic counselling to families in conflict who may be at heightened risk of violence, identifying children at risk of dropping out of school or early pregnancy, and promoting positive parenting principles to create more protective communities;

Identifying cases of violence against children (VAC) and other child protection concerns;

Referral of cases to the appropriate social welfare officers and other services, where necessary;

Community awareness raising, by engaging local leaders and communities to raise awareness of the rights of children and child protection.
Results achieved across key areas of responsibilities
Protecting children from violence, neglect, and exploitation

One of the most important aspects of IZUs’ mandate is to prevent and respond to VAC.

- **Experience sexual violence**
  - one in four girls
  - one in ten boys

- **Experience physical violence**
  - one in three girls
  - six in ten boys

- **Experience emotional violence from a parent or caregiver**
  - 12% of girls
  - 17% of boys

VAC is largely perpetrated at home and in the community, with neighbours the most commonly reported perpetrators of sexual violence and parents, adult relatives, and caregivers the most commonly reported perpetrators of physical and emotional violence.

- **Experience two or all three forms of sexual, physical, and emotional violence.**
  - two in five children

Levels of VAC were exacerbated by COVID-19 lockdown measures. Lockdowns saw a particular increase in gender-based violence cases as well as increasing barriers to report violence, as victims remained living in close contact to perpetrators, and typical reporting pathways were weakened, inactive, or overwhelmed.

**Prevention of violence, neglect, and exploitation**

A key component of IZU’s mandate is the prevention of VAC, neglect and exploitation, and the promotion of child rights. As part of this key responsibility, IZU conduct community-based awareness raising for child rights and protection in their respective communities. The IZU aim to equip communities with the knowledge they need to identify and appropriately respond to VAC, neglect and exploitation. IZU streamline child protection messages into existing community-level for which enable them to reach wide ranging target populations, for example during community service days (umuganda), community dialogue forums (inteko z’abaturage), and a forum called umugoroba w’imiryango (a gathering at a village level, in which residents deliberate on various community social-economic and cultural issues). Issues discussed include positive parenting techniques, awareness of child rights issues, avoiding family conflicts and how to report child protection issues. The effectiveness of IZU’s advocacy in community platforms was highlighted by a district official during a recent evaluation:

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7 Ibid
8 Ibid
Recently I participated in a training to those committees in charge of preventing and fighting child labour, and what I witnessed is that [IZU] have influence and are more trusted. The training they have received empowered them so that when they speak in a meeting, you see that people listen to them carefully. If there is message about child protection that we want to communicate, IZU are the ones we ask for help to do that and the message is well understood.

District Official

Respondents to interviews conducted during recent development partner-led evaluations revealed the effectiveness of IZUs’ prevention efforts:

IZU are good because sometimes they take initiative to come to you even when you haven’t invited them, for example if you have a child who doesn’t attend school, they come to see you and help you to resolve your child’s problem…,

Now IZU prevent issues before they happen. For example, if they hear that such family is in conflict they visit them before things get worse and spread around the village. They intervene on time.

A 2021 rapid skills and gap analysis of the IZU cadre’s VAC prevention and response capacity recommended that IZU allocate more time to their prevention work, as well as be supported to strengthen their ability to deliver prevention activities at community level.

Identification cases of violence against children, neglect and exploitation

IZU’s continual community presence means that they are best placed to identify children and families who may be at risk of child protection issues at an early stage (often allowing them to prevent possible violence from occurring), as well as to provide ongoing support to children and families after violence has occurred.

Respondents to the 2021 rapid skills and gap analysis of the IZU workforce noted that IZU are effective at identifying all forms of VAC, as well as neglect and exploitation. Respondents noted that IZU identified cases of sexual abuse cases and teenage pregnancy most frequently, as well as cases of physical violence, child labour, neglect, and school dropouts. IZU were also effective at identifying children with disabilities and recognised the importance of ensuring they are included in all spheres of community life.

IZU also frequently receive direct reports of cases of VAC and other child rights violations. A 2020 assessment found that most cases reported directly to IZU are reported by parents and caregivers (67%), followed by children (19%) and teachers or faith leaders (14%). This finding indicates that IZU are regarded by their communities as trusted ‘friends of family’.

10 Ibid.
12 Ibid.
Response to violence against children, neglect, and exploitation

Once they have identified cases of VAC, IZU are responsible for the provision of basic psychosocial first aid, referring cases to the appropriate statutory actors and relevant service providers, and providing ongoing monitoring of the child and family’s wellbeing.

Respondents to interviews conducted during recent development partner-led evaluations revealed the effectiveness of IZUs’ response efforts:

IZU when they meet an issue that they cannot solve like child abuse, they explain the process to follow, if it is to go to police or any other people who can solve your problem. And they keep following how things are going on during the process.”

“I would say that [IZU] are people who are near the community, they are advisers of people, when you have a problem you go to find them and they help you to resolve it without going far. They stay with you until your situation improves.15

Parent

IZU’s actions depend on the level of risk identified. Lower risk cases can be managed with ongoing home visits from IZU, in collaboration with other community-based volunteers, local leaders, abunzi (community mediators), and referrals to multisectoral service providers (e.g. legal, education, health, etc.).

Medium and higher risk cases requiring immediate action from statutory actors (for example, cases where the child is at imminent risk of harm or already experiencing harm) are reported via a 24-hour toll-free hotline (117). Once the immediate response has taken place, IZU use the unstructured supplementary service data (USSD)16 system for follow-up monitoring.

We conduct home visits, and when a case of violence happens, we take time and discuss with them, often the problem is not solved immediately, we go there many times, it’s a process, it requires many visits until when the problem is resolved, and if it was a child who is abused, we go there until the issue is resolved, or when their rights are respected.

IZU respondent


Despite good use of the USSD system, IZU noted during a 2018 evaluation that communities tend to underreport child protection issues and that this created challenges in identifying and reporting VAC. It was noted that when a perpetrator is either a parent, a primary caregiver, a family member, or a close friend of a victim’s family, the case is often not reported; families fear reputational repercussions and creating conflict with family. Child protection issues which occur within families are often handled informally, with parents using alternative arrangements to settle the issue. Social norms condoning VAC, budgetary limitations and the absence of standardised reporting tools have been mentioned in a range of assessments as additional challenges face by IZU when responding to VAC.

15 Ibid.

16 This is a digital code network that does not require phone network or credit and uses simple numerical codes to access a menu for reporting.
IZU are well positioned to identify children who are at risk of dropping out of school or becoming pregnant, as well as supporting those who already have. Respondents to a 2021 rapid skills and gap analysis of the IZU workforce noted that IZU are very effective at identifying cases of adolescent pregnancy and school dropouts, where these are connected.

IZU also support adolescent girls who are at risk of or are pregnant as a result of sexual violence, and facilitate referrals to either the police and/or social workers, whilst also providing ongoing basic psychosocial support to the adolescent and, where appropriate, to their families:

During the COVID-19 pandemic, the IZU cadre proved especially effective at identifying children who did not return to schools upon the reopening of schools, and at supporting parents and caregivers to reenrol these children. To address barriers to school attendance, IZU advocated to sector officials for support for uniforms and school materials for returning students, especially on behalf of families who had felt the economic effects of the pandemic:

When adolescents have been out of school for longer periods and are unwilling or unable to return, IZU refer them to vocational trainings, to equip them with skills and knowledge that will support them in finding stable employment or to start their own business in the future. IZU often advocate to sector government and local NGOs for seed capital support where the young person wishes to start a business.

School dropouts are often the entry point for IZU to discuss other issues. IZU describe discussions about school dropout that have led to addressing issues of family neglect or violence, once they have entered the family.
[Cases of VAC that I deal with are when parents] “ban [children] from going to school, rather they send them to perform household activities. When in a home there is always a quarrel, their children are abandoned, the children are not comfortable with the parents, and as a result they cannot share their problems with parents.”

There is a time we are approached by a child, and the child would tell us that they are barred from going to school by parents. Then when we get in such a household and find there is no peace, you may find that the father is a drunkard, he doesn’t care about the importance of children, he abuses children by saying that learning is useless. So, it may require a long or less time because we may not find the man, or find him drunk again, so when we find him, it’s an opportunity to discuss it with him.

IZU, Gicumbi District

Supporting reunification of children separated from their families

Given IZUs’ continuing presence at community level, they are well placed to provide ongoing monitoring and support to children who were separated from their families and have been reunified, or placed in alternative family-based care (e.g. kinship care, foster care, or child-headed households) within their communities.

IZU play a key role in helping identify the root cause of separation and address it through either direct support, or referrals to local government and non-government services. When guided by the CPWO, IZU can also support family tracing efforts, linking with other IZU to help identify and locate families. Children and families who benefited from IZUs’ support during preparation for reunification and during post-placement monitoring, mentioned that the counselling (for both caregivers and children), family mediation, bonding visits supervision (under the guidance of the CPWO), advocacy for reunification support packages (e.g. clothes, uniform, shoes and school materials to ensure school reenrollment) and referrals that IZU provided had helped to ensure that the transition went smoothly:

We all live in good harmony. [My family] love and support my child in many ways, we are well fed, and they take care of my child when I have to go out and work.

Adolescent mother, who was reunified with her family, and received follow-up home visits from IZU

Reunified children also noted the comfort they felt knowing they had someone in the community who they could contact at any time if they had a problem.

IZU also play a key role in supporting child-headed households. In 2019 and 2020, 18,705 such households received IZU support, including monitoring visits, basic psychosocial support (counseling), and referrals
When IZU introduced us to [the NGO], that’s when we felt like there is light at the end of the tunnel. They started providing us with food as it was one of the main challenges we faced. We now have clothes, medical insurance. We have a new house now, which in fact could be the best house in the whole of this area. I have never been happier in my life than I am today.

Child head of household, caring for three younger siblings

### Promoting equal rights of children with disabilities

During the 2021 rapid skills and gap analysis, IZU mentioned that the most challenging type of cases include “Children with disabilities, (who are) mostly kept indoors.” Despite highlighting this challenge, other actors interviewed noted that IZU were very effective at identifying children with disabilities and recognised the importance of ensuring they are included in all spheres of community life.17

During a recent evaluation, parent respondents also noted how IZU had improved their understanding of their own children with disabilities, and how they had changed their behaviour as a result:

I used to close my child inside the house because I didn’t want him/her to go out. But when IZU visited us, they explained how bad it is to do that to my child and since then I have changed, and I am no longer doing it. Now I respect the rights of my child because of IZU.18

IZU equally support adolescents and young adults with disabilities to live independently, including those who were reunified with communities under national care reform efforts. IZU monitor adolescents with disabilities who are living independently and help equip them with basic life skills (for example, grocery shopping, cooking and budget management), ensure they are included in community life, and refer them for income generating support (for example, social protection cash transfers and small business startup).

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18 Ibid.
Protecting children during COVID-19 lockdowns

During COVID-19 containment measures, many actors within the child protection system had their mobility restricted by efforts to prevent the spread of the virus. The IZU cadre became all the more important during this period, as they were based within communities, thus making it easier to reach vulnerable children and families. For example, many children separated from their caregivers faced challenges when trying to return to their families during lockdown. IZU collaborated with CPWOs to support safe reunifications. IZU also closely monitored vulnerable households (especially child-headed households and those with elderly caregivers) to ensure they had food and hygiene materials and were aware of COVID-19 prevention protocols, and to register them for Mutuelle de Sante (medical insurance).

More than ever, IZU were the ‘eyes and ears’ on the ground for child protection actors at higher levels. The IZU cadre proved a mainstay throughout the various COVID-19 containment regulations and was able to reach a large proportion of their communities. For example, in the eight months from January to August 2021 alone, despite significant movement restrictions, IZU managed to reach 489,789 children, including 18,705 child-headed households, with 153,086 children being provided with some form of psychosocial support. These figures demonstrate the value and wide-reaching quality of the frontline IZU cadre.

In addition, the cases they responded to throughout the pandemic were wide ranging. Figure 1 below shows that the most common issues reported by IZU through the USSD system were family conflict, sexual violence against children, and physical violence against children.

I think this was possible thanks to the operational child protection system at a community level. Even during total lockdown, IZU have identified, reported, and dealt with many child protection issues and this has helped us to assist children appropriately.

Child Protection and Welfare Officer

19 NCDA data IZU report 2021 (not published)
Recent evaluations and assessments of the IZU cadre revealed their success in referring economically vulnerable families for economic support. IZU successfully linked families to both short-term emergency support (for example, in instances of drought and during lockdowns related to the COVID-19 pandemic) and longer-term economic empowerment initiatives. Noted examples included advocating on behalf of vulnerable families to local government and NGOs for:

- Livestock
- Bicycles
- Short-term food support
- Plots of land to live on or cultivate
- Enrollment in technical and vocational education and training schools and provision of relevant toolkit for use during and after the training
- Seed capital for small business startups that are appropriate to the local context (for example, advocating for capital to purchase a water tank for a vulnerable family in a community where there is a market for rainwater)
- Enrollment into the monthly social protection cash transfer (Vision Umurenge Programme)

Rwanda categorises households into categories 1-4: category 1 is extremely poor and 4 is wealthy. Category 1 is comprised of mostly labour constrained households e.g. the elderly above 65 years, child headed households and persons with disability. Such households receive a monthly social cash transfer.

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20 There were 1,183 cases formally reported by the IZU cadre through the USSD system from April 2020 to August 2021.
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How IZU’s role and mandate contribute to results
IZU’s ability to carry out their mandate is inextricably dependent upon their visibility within their communities, and their recognition by community members. A 2021 rapid skills and gaps analysis of the IZU cadre’s capacity to prevent and respond to VAC found that IZU have a well-established presence within their community. They are overall well-known, well-respected, and perceived as making positive contributions to their communities. This positive feedback is reflected by a wide and diverse range of actors, including community mediation committees (abunzi – similar to IZU, committee members are elected by communities on the basis of their personal integrity, and asked to intervene in the event of conflict), police, Child Protection and Welfare Officers (CPWO), health providers, and others.23

IZU are consistently visible in a range of community-, sector- and district-level coordination meetings. These meetings are important platforms to ensure multisectoral coordinated services and activities, and are typically attended by village leadership, local authorities, police, faith leaders and multisectoral service providers (e.g. education, health, legal, etc.). IZU’s routine inclusion in these meetings reflects that they are viewed by the professional workforce as an integral part of the child protection system.

Community members bring a range of issues to IZU, and generally perceive that they have a broad mandate, according to the same rapid skills and gap analysis. For example, community-based protection actors noted that IZU “work together with community health workers to ensure good health of the children” “play a big role providing / sharing information and follow-up in cases where child rights have been violated, ensuring victims go to the hospital and suspects are apprehended” and are “essential in day to day living harmony of families.” 25 This is a positive reflection of the acceptance and support for IZU at community level, however it does also pose challenges to IZUs’ workload and the expectations on IZU to work beyond their mandate.

Conclusion
Since 2016, the IZU cadre has been mobilized as child- and family-focused frontline responders to support national care reform and child protection system strengthening efforts. It has played a critical role in preventing, identifying and responding to a wide range of child protection and welfare issues in their communities. As a result, IZU are recognised, respected, and appreciated by children, families, other community-based volunteers and a range of professional child protection actors. They are truly seen as ‘friends of the family’.

While the results achieved by the IZU cadre have been wide reaching and varied, those have not been systematically captured, meaning they provide only a partial picture of the real impact the cadre has had, and continues to have, on children, families, and the child protection system as a whole. Going forward, efforts should be made to develop a framework to systematically and holistically monitor, evaluate and support the important work that they conduct on an everyday basis.
The establishment and ongoing strengthening of the Inshuti z’Umuryango’ (IZU) or ‘Friends of the Family’ programme was made possible thanks to the support of USAID’s Displaced Children and Orphans Fund (DCOF), the IKEA Foundation, the United Kingdom and the Swedish Committee for UNICEF