INTRODUCTION

Since the community health insurance policy, known as “Mutual Health Insurance” (MUSA) started in 2004, the population did not immediately understand this philosophy. Consequently, people did not adhere to this new approach in great numbers.

More particularly in Rusizi District, intense sensitisation and mobilisation were required to get the population to understand this policy. It is within this context that an approach consisting in collecting the Mutual Health Insurance contribution through Tontines (known as IBIMINA in Kinyarwanda) was initiated. The population of a same Village (Umudugudu), with a presiding Committee, collects contributions from the Village residents and takes them to the Mutual Health Insurance section. This new approach sped up the recovery of such fees through community participation in some Sectors of the District.

As there were some sections, which were proceeding at a snail’s pace, Rusizi District resorted to its community health partners among which Health, Development and Performance (HDP), which agreed to contribute to the increase in the rate of subscription to the Mutual Health Insurance Scheme.

The methodology used by HDP consists in motivating members of the Tontines’ Committee through the Performance-Based Funding (PBF) principle. In collaboration with the District, HDP established objectively verifiable indicators remunerated according to the results achieved by the Tontine.

Another objective behind this was to get these people to understand the importance of forming cooperatives as a way to get out of the vicious circle of poverty.

To begin with, HDP, in collaboration with Rusizi District, chose four (4) sections where the rate of subscription to mutual health insurance was low, namely:

- Nkanka Health Centre Section located in Nkanka Sector
- Nkombo Health Centre Section located in Nkombo Sector
- Mashesha Health Centre Section located in Gitambi Sector
- Nyabitimbo Health Centre Section located in Butare Sector

What is HDP’s exact role?
1. Sensitise the population about massive subscription to the mutual health insurance scheme by financially supporting Tontines’ Committees through sections.

2. Group members of Tontines’ Committees into cooperatives and motivate them according to the PBF principle to make the system sustainable.

3. Establish, by common consent with the District, performance indicators for these cooperatives to be remunerated after the assessment.

4. Provide technical assistance to members of Mutual Health Insurance sections Management Committees in pilot Sectors in order for them to safely manage funds collected, well maintain working tools at their disposal and organise regular meetings to monitor the Tontines and the functioning of the section.

5. Remunerate the section providing its customers with good quality services according to the results from client satisfaction surveys quarterly conducted by the Forum of Associations for the promotion of quality community health care (FASACO).

It should be pointed out that HDP is not directly involved in the motivation of cooperatives and tontines. HDP rather indirectly intervenes through the sections, which motivate tontines using its funds according to the number of the people sensitised and the contribution fees collected among the population.

**The following are some indicators remunerated for Tontines’ Committees:**

- Grouping together Tontines’ members into a cooperative having statutes and recognised by Sector local authorities. This indicator is given a remuneration of Rwf 100,000.

- Once established, the cooperative should open a bank account and regularly pay into it money from the cooperative members contributions. This indicator is remunerable to the tune of Rwf 100,000.

- The cooperative should also carry out income generating activities according to its financial capacity. The remuneration for this indicator amounts to Rwf 165,131.

Among the four (4) pilot sections located in Rusizi District, the first two indicators were achieved at 100%. As for income generating activities, some cooperatives initiated projects whose implementation is going smoothly as the table below shows:
<table>
<thead>
<tr>
<th>NO</th>
<th>MUTUAL HEALTH INSURANCE SECTION</th>
<th>INCOME GENERATING PROJECT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NYABITIMBO</td>
<td>Breeding of a dairy cow, which already has a calf</td>
</tr>
<tr>
<td>2</td>
<td>MASHESHA</td>
<td>Breeding of 12 pigs and soybean cultivation</td>
</tr>
<tr>
<td>3</td>
<td>NKANKA</td>
<td>Breeding of 5 pigs; others still have to be purchased.</td>
</tr>
<tr>
<td>4</td>
<td>NKOMBO</td>
<td>Breeding of 10 pigs; others still have to be purchased</td>
</tr>
</tbody>
</table>

The following photograph shows the cow breeding project initiated by Nyabitimbo section:

![Cow Breeding Project](image)

The Cooperative grouping together the members of Nyabitindo Tontine Committee possesses a cow, which recently had a calf.

**Assessment and recommendation by the District:**

Rusizi District hails its partnership with HDP in the betterment of its population health and wishes this partnership to be developed.

Considering the progress made by the four (4) sections as regards the subscription to Mutual Health Insurance, it is recommended that HDP should extent its activities to other remaining sections not only to increase subscription to the mutual health insurance scheme but also to sensitise Tontine Committee members about the formation of cooperatives with a view to sustainable development.

Done at Rusizi, on 10/05/2012

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