Health Promotion revitalized program continues to do great in Bukiriro ward (Ngara district) by increasing 70% of the total family planning tablets and condoms users in the area. The chart on the right shows numbers of people who received tablets and condoms from the facility and CBDs in 2015 and 2016. Out of 1284 people that got tablets for the past two years, 900 (70%) people were CBDs’ clients; while 138 clients who received condoms 105 (76%) were served by CBDs.

In 2010, a group of community service providers was recruited by Ngara District Health Department and trained in the provision of oral pills and condoms. At the design, donor support was to last for one year, and the facility would consider some incentives to ensure sustainability. However, after the donor support ended, the programme faltered and the CBDs started to withdraw one by one until only 3 remained.

After being dormant for four years, Community Based Distributors program in Bukiriro was then revitalized by HDT in 2014 following agreement meetings by CBDs, Village and Bukiriro Health Committees. After the revitalization of the program, CBDs resumed their responsibilities of supporting the Bukiriro health facility by distributing family planning tablets and condoms to the community members around their areas.

However, CBD’s performance has dropped if you compare between 541 users in 2015 with 464 users in 2016. This is because one CBD has stopped working and the other one is inactive following two years outstanding payments which CBDs are entitled. “We wish to be considered for payments, two members have stopped working, but I cannot stop. Villagers come home for the services; even if I am not around to help, my husband helps out sometimes” says Matilda Pianus one among the Community Based Distributors at Bukiriro village in Ngara.

Community Based Distribution is recognized as one of the most effective strategies for increasing contraceptive use, aimed at reaching populations with inadequate health facility-based distribution, and hence with limited access to family planning services. It is a strategy for strengthening primary health care provision of family planning services using community structures that include home visits by trained agents with the aim of promoting the use of safe contraceptive methods.