



Uganda National Roads Authority
Connecting Uganda!



NERAMP LANGO CLUSTER END OF PROJECT CLOSURE

REPORT



MANAGING AND MITIGATING SOCIAL RISKS ASSOCIATED WITH GENDER-BASED VIOLENCE AND VIOLENCE AGAINST CHILDREN ALONG NORTH-EASTERN ROAD CORRIDOR ASSET MANAGEMENT PROJECT (NERAMP) – LOT 2-LANGO CLUSTER

Start 14th NOVEMBER 2019- end date 30th JUNE 2024

RFP No: UNRA/SRVCS/2017-18/00095.

JOY FOR CHILDREN UGANDA (Implementing Partner)

Plot 349 Nsimbiziwome, Bukoto.

P. O. Box 15383 Clock Tower, Kampala, Uganda.

E-mail : info@joyforchildren.org ; ntengam@joyforchildren.org;

<http://www.joyforchildren.org>

NOVEMBER 2024

Project Summary Sheet

Project Name	Consulting Services for managing social risks associated with Gender BASED Violence and violence against children UNDER NERAMP-Lango Cluster-Retender
Client	UGANDA NATIONAL ROAD AUTHORITY
Contract Manager	MR. PETER BAGWANA
Project ID	P125590
Implementer/ Service Provider	JOY FOR CHILDREN UGANDA
Contact Person	MR. MOSES NTENGA info@joyforchildren.org/ ntengam@joyforchildren.org Tel: +256758133963/0703653233,
Area/Districts of Operation	DOKOLO, LIRA, OYAM AND KOLE DISTRICTS
Region	NORTH –EASTERN
Project Title	MANAGING AND MITIGATING SOCIAL RISKS ASSOCIATED WITH GENDER –BASED VOILENCE (GBV) AND VOILENCE AGAINST CHILDREN (VAC) ALONG NORTH –EASTERN CORRIDOR AND ASSET MANAGEMENT PROJECT (NERAMP) – LANGO CLUSTER
Project Timeframe	NOVEMBER 2019-JUNE 2025
Reporting Period (this report covers)	NOVEMBER 2019-JUNE 2025
Approved Budget/ Contract Sum	Ug shs 744,949,000/=
Project Ref. Number	UNRA/SRVCS/2017-18/00095
Final number of beneficiaries / targeted groups	7695 PEOPLE OF THESE 3791(49.9%) BEING FEMALE

Acronyms

CBOs	Community Based Organizations
CFPU	Child and Family Protection Unit
CSO	Civil society Organization
DOVCCS	District Orphans and Vulnerable Children Committees
DPO	District Probation Officer
GBV	Gender Based Violence
GMC	Grievances Management Committees
GoU	Government of Uganda
HCT	HIV/AIDS Counselling and Testing
JFCU	Joy for Children Uganda
JLOS	Justice, Law and Order Sector
LC	Local Council
LG	Local Government
M.o.Us	Memorandum of Understanding
MGLSD	Ministry of Gender, Labour and Social Development
NERAMP	Northeastern Road Asset Management Project
NGOs	Non-Governmental Organizations
P/S	Primary School
SEA	Sexual Exploitation and Abuse
UNRA	Uganda National Road Authority
VAC	Violence Against Children
VAWG	Violence Against Women and Girls

Table of Contents

Acknowledgement.....	5
Background.....	6
Project Theory of Change.....	6
Project Goal and Objectives	6
Project Relevancy	6
1.0 INTRODUCTION	12
1.1 JFC Summary Scope of GBV/VAC Services - Managing Social risks associated with the NERAMP	12
1.1.1 Overall Project Goal.....	13
1.1.2 Project Objectives.....	13
1.1.3 Specific Functions / responsibilities of JFCU	13
1.1.4 Key Planned GBV/VAC Activities for Implementation	13
1.1.5 Key JFCU Delivery Approach of GBV/VAC on NERAMP /UNRA.....	15
2.0 PROJECT ACHIEVEMENTS.....	15
2.1 Summary Status of Implementation & Achievements against Agreed Deliverables and Activities.....	15
2.2 Detailed Narrative of Achievements Against Planned Results and Activities:	24
2.3 Coordination and collaboration with Actors in implementation of GBV and VAC from national to district to local community level structures	36
3.0 CHALLENGES ENCOUNTERED AND HOW MANAGED.....	37
4.0 PROJECT IMPACT	38
4.1 Overall objective of the impact study	38
4.1.1 Specific objectives.....	38
4.2 Methodology used to carry out the assessment.	38
4.3 Challenges during impact evaluation	39
4.4 Project Impact Findings	39
5.0 NEGATIVE IMPACTS OF THE PROJECT.....	52
6.0 LESSONS LEARNT	53
7.0 RECOMMENDATIONS FOR FUTURE SIMILAR PROJECTS	55
ANNEXES-.....	57
ANNEX : MAPPED HEALTH FACILITIES AND EDUCATION INSTITUTIONS ALONG DOKOLO- KAMDINI ROAD CORRIDOR.....	57
IEC materials developed by Primary school children.....	63

Acknowledgement

The Board, management and staff of JFCU would like to acknowledge the partnership between UNRA/GoU and JFCU for the support given to the organization to be part of the national infrastructure development process and contribute towards the UNRA goals and objectives in the UNRA strategic Plan.

The journey was not easy given the COVID 19 pandemic that affected the National development processes, but this did not last for too long and when the pandemic ended , the development work begun again.

JFCU would like to thank all the stakeholders that were part of this project and specifically the LGs (the Police , CDO, DEO) and NGOs, CBOs that provided enabling environment and technical support during project implementation. The partnerships were very crucial and provided a healthy working environment for the JFCU staff in different communities in the districts.

Lastly, the GoU is appreciated for the infrastructure development in place which contributes to national development.



Photo 1: A GMC Chairperson distributing IEC materials to community members during sensitization on GBV and VAC

Executive Summary

Background

The Uganda National Roads Authority (UNRA) is carrying out a maintenance of the road that runs from Soroti to Corner Kamdini running through the 4 districts of Dokolo, Lira, Kole and Oyam under the North Eastern Corridor and Asset Management Project (NERAMP) Lango cluster. The North Eastern Road corridor Asset Management Project (NERAMP) aims to reduce transport costs, enhance road safety, and improve services on the road through a cost-effective Output and Performance-based Road Contract (OPRC). The road under rehabilitation is of high importance to Uganda and the East African Community as it services besides of domestic purposes is a transit corridor between Northern and Eastern Uganda, South Sudan, North-eastern Democratic Republic of Congo (DRC) and the port of Mombasa in Kenya.

Joy for Children Uganda (JFCU) a local Non-Government Organization (NGO) was awarded a contract dated November 2019 by Uganda National Road Authority to manage and mitigate the social risks (Gender Based Violence (GBV) and Violence Against Children (VAC) under NERAMP (Lango Cluster) - RFP No: UNRA/SRVCS/2017-18/00095) that would result or associated to, as an outcome of the influx of workers in the project communities under the road rehabilitation project. This is being achieved through support to survivors of VAC and GBV, continuously sensitization and awareness of the communities on the risk associated with GBV and VAC by JFCU.

Project Theory of Change

That the PREVENTION OF GBV and VAC NERAMP interventions were implemented, they would:

- i. Reduce gender-based discrimination and violence in the contractor workforce and local community in project area through Gender Based Violence (GBV) and VAC awareness*
- ii. Promote gender and child protection awareness in the contractor's work force and local community in project area.*
- iii. Support survivors of GBV and VAC during the project implementation period*

Project Goal and Objectives

Overall Project Goal was to **“To avoid, reduce and mitigate incidences of Violence against Children, gender-based violence which may come in due to the influx of labor and offer support to the survivors”**.

The project objectives were :

- 1. Enhance mechanisms to mitigate risks of GBV and VAC due to the project*
- 2. Strengthen the community to help prevent GBV and VAC along the road corridor*
- 3. Strengthen coordination at all levels in the NERAMP Lango cluster districts.*

Project Relevancy

Overall, the project was found to be relevant to the critical issues affecting the districts and in particular teenage pregnancy and early marriages based on baseline findings that were carried out before the project. In the NERAMP project area, GBV was a big problem at the time of the project inception and the rates of sexual violence across the project area were about 22% (2016 Uganda Demographic and Health Survey). It was feared that with the influx of

labour, GBV and VAC might triple if mitigation measures were not put in place. Respondents were asked perceived knowledge of levels of incidence of VAC in the community and according to the results, 32% could not tell, and 20% said it was very high i.e. having heard of a case once in a week, 28% medium i.e. a case once in 3 months and 18% very low i.e. case once in 6 months. In 2019, a total of 284 GBV cases were recorded by Police in Dokolo District, CFPU and of these , more than half (57%) were domestic violence cases, 21% defilement and 15% child neglect

The survey indicated a high prevalence of GBV and VAC cases and the coming of the project was a blessing . There was a feeling of hope that the project would contribute towards prevention of increase of GBV and VAC in district due to the influx of workers. The project activities helped in averting what had been experienced in similar earlier projects that were carried out in the areas. According to the Police and Education department, there were no reported incidences of VAC registered during the road construction and this was directly associated to the sensitization that was carried out by JFCU.

Summary of Planned Activities and Target Groups

The following were the planned activities and included Stakeholder awareness programmes on code of conduct and relevant laws and worker led prevention programme on GBV and VAC; Community awareness programmes to safeguard against GBV and VAC; Promote Education to mapped out proximity schools along the road corridor to improve school going retention and reduce chances for VAC; Radio Talk shows; Targeted Outreaches in communities; Orientation meetings with the NERAMP project workers on GBV and VAC; Rapid assessment of proximity factors on GBV and VAC; Identification of population at Risk of GBV and VAC; Formation of 4 prevention centres and Vulnerable groups; Formation of 50 male action groups and Male champion groups outreach; Life skills development training and routine counselling; Economic empowerment training and start up provision; Provide Follow-ups and Market/enterprise Linkages; Carryout Quarterly Stakeholder meeting; Engagement with Grievances Management Committees (GMCs); Training and tools equipping of GMCs; Referrals of survivors to existing community or government service providers as per need such as legal pro bono services, psychosocial services, and Health; Identify and build capacity of existing Child Protection Structure such as SOVCCS and DOVCCS to identify and respond to GBV and VAC; Joint Monitoring and Evaluation; and Advocacy IEC materials for behavioural change and communications about GBV and VAC.

Project Implementation achievements

The project met its goal and set objectives based on qualitative and quantitative information collected from different cross section of key project stakeholders during the impact survey. The following is the findings of the achievements by objective:

(i) Enhance mechanisms to mitigate risks of GBV and VAC due to the project

Under this objective, enhancing mechanisms to mitigate the negative social risks of GBV and VAC were achieved through implementation of a cross-cutting set of activities carried out by JFCU that included sensitization and awareness creation about the social risks and how they can be prevented . The sensitization was carried out in communities and schools within the project corridor. The contractor's workforce was also sensitized as well. Radio Talk shows about the risks that were carried out to reach a wider community and have a multiplier effect beyond the project planned targeted areas. JFCU collaborated with the GMC structure and LC leaders to mobilize community members to attend the sensitization meetings. Out of the registered 7,695 sensitized community members, 439 were members of GMCs, 4,602 were school going children (62%) , 1,756 community members, 366 workers for Mota Engil

and 532 others that include district local government , NGO/CBOs stakeholders , and media. Some of the members were reached more than once since sensitization meetings were continuous throughout the project life.

Enhancement of the mechanisms to mitigate risks of GBV and VAC due to the project were supported by the creation of the GMC structures that were part of the referral systems for any reported VAC and GBV that would have occurred in the community. LCs chairpersons were sensitized on their roles especially referral and management of reported VAC and GBV cases in their community. The children were made aware of the social risks and their dangers and how to report and or avoid incidences of VAC.

(ii) Strengthen the community to help prevent GBV and VAC along the road corridor

Strengthening the community was achieved through the LC systems, GMS and religious leaders' structures being part of stakeholders during implementation. Community/Local Actors: These included the GMCs, LC1, the cultural leaders and religious leaders in the project districts of NERAMP.

Specific Objectives of collaboration and coordination with the district leadership

- ✓ Strengthen the coordination of child protection and transformational activities within the project area
- ✓ To increase participants understanding of the incidence of GBV and VAC in the project districts
- ✓ To seek support and project ownership from district officials, cultural and religious leaders

They played a very central role when it came to mobilization of communities and sensitizations among others. For instance, during the community meeting one of the cultural leaders who also attended the meeting had the opportunity to communicate certain things to the children and parents. GMC'S, LC 1 Chairpersons were engaged in community sensitization meeting with men and community members of different communities. A total of 46 meetings with GMCs members (439) involved LC members since they were also members of the GMCs. The meetings having the LC persons proved to be important in supporting the project and the mobilization of community members for other planned ones.

Activities during the coordination meetings were:

- ✓ Distribution of IEC materials
- ✓ Training stake holders with knowledge on the negative consequences of violence on children, women, and men in the project districts.
- ✓ Capacity building on reporting cases in relation to GBV/VAC -NERMAP
- ✓ Strengthening existing referral systems of cases of GBV and VAC, the gaps and the ways to bridge the gaps for improved reporting
- ✓ Encourage and engage stakeholders on reporting and documentation of cases of GBV and VAC, referral of survivors.

(iii) Strengthen coordination at all levels in the NERAMP Lango cluster districts

The project collaborated and strengthened local government stakeholders in the process of implementing project activities in their areas of operation. The project continued working closely with all stakeholders and also strengthening the established good working relations.

a) National Level Actors

At National level JFCU collaborated with the Ministry of Gender and Labour to get Policy guidance on issues to do with children and women in particular GBV and VAC policy guidelines. It also collaborated with the Ministry of Education to get policy guidelines on children in schools especially on issues to do with VAC.

b) District Level Leadership and Key Actors

During implementation, JFCU collaborated with Local government departments especially the CDO; the Education department; the Police particularly the Family and Child Protection unit; the local CBOs/NGOs involved in child protection issues in the districts; members of the GMCs and the social media especially local FM radio stations to air out GBV and VAC discussions held by different stakeholders.

The project sensitized 7,695 people of these 3,791(49.9%) being female. The number of persons especially in schools, were not captured in some cases and the actual number of persons reached is more than the one stated . For the recorded data, of these 7,695 sensitized, 439 were members of GMCs, 4,602 were school going children, 1,756 community members, 366 workers for Mota Engil and 532 others that include district local government , NGO/CBOs stakeholders, and media. Detailed achievements against planned activities are in the main body of the report.

Project implementation Challenges

1. The biggest challenge during implementation was the Covid 19 pandemic that globally affected communities. The total lock down and also the government guidelines to control the spread of Covid-19 literally halted some county outreaches. Schools were closed and no activity could be carried out in schools. Community meetings were also stopped, and no sensitization activities were done for a very long period, about 2 years. Some of the project staff resigned as a result and new project staff had to be recruited to continue implementation when the Covid 19 lockdown was removed. Consequently, the project run behind schedule and staff were redundant. However, UNRA provided an extension of the project implementation period to run to End of May 2024
2. The delay in project start (road construction) due to delayed submission of required documents and meeting certain procedures by the funding agency delayed also mobilization and recruitment of the contactors work force which is also the project impact group for JFCU. Consequently, planned activities with the contractor's workforce could not be carried out.
3. The delay and postponement of activities affected outputs, yet the project is based on a results-based funding approach. The delay significantly affected funds releases to JFCU and as a result, there has been a high staff turnover leaving Skelton staff on the ground to handle project activities.
4. The increased operational costs due to increased commodity prices and the global economic fuel crisis affected budget plans.
5. During the reporting period the project implementation continued to be experiencing few challenges that include busy schedules of the contractors work force who were not always available for JFCU sensitization activities. Meeting them required prior arrangements with management and at times the time when available was not appropriate with JFCU schedules and conflicted with other planned activities.
6. The school holidays for children meant that , school sensitization activities had only to be carried out when schools are open and more so, during the third term (end of the academic years) children would be engaged in exams and busy and not allowed to be engaged in non-school curriculum activities.
7. During agricultural seasons when community members are busy planting, weeding and harvesting the crops, it was not easy to mobilize them for community meetings. They could only come after their agricultural engagements to attend project sensitization activities planned by JFCU staff. Bad weather, especially during rainy periods, affected planned activities and given the poor logistics (motorcycle) available for project staff this delayed the implementation of some activities.
8. The project also faced the challenges of delayed fund disbursements which affected JFCU meeting its contractual obligations with service providers including salaries and wages of staff.

Key Lessons from Project Implementation Of GBV/VAC in a Road Project

1. Existing structures to address VAC and GBV issues in the districts are lacking human resource and financial capacity to extensively address these issues.
2. Enactment of byelaws can reduce the risk of VAC and GBV in communities.
3. The main causes of GBV and VAC cases in the community are mainly poverty , alcohol /drug abuse and low literacy levels.
4. Non-school going children are most exposed to VAC due to lack of knowledge on GBV/VAC and protection from caregivers (parents and relatives).
5. Drug abuse is now rampant in schools and among school going children and fuels VAC and GBV in communities.
6. Child abuse is occurring but is not being reported or is under reported among the children in and out of school in the communities.

Recommendations

- a) Continuous engagement with cultural leaders, clan leaders LCs, school's heads, teachers and community members about GBV and VAC especially the referral mechanisms, reporting and levels of jurisdiction of GBV and VAC cases.
- b) Support the law enforcement structures with resources to enable them carry out speedy investigations and prosecution of the perpetrators of GBV and VAC in the communities.
- c) Support the IPs with appropriate logistics to make them able to carry out activity implementation to avoid the challenges of climate change and bad terrain.
- d) Funds disbursements to implementing partners should always be according to the agreement in the contract to reduce delays and affect implementation plans.
- e) Addressing VAC and GBV needs an integrated programmes addressing the key drivers of VAC and GBV (Drug and substance abuse, low literacy levels and poverty).
- f) Keeping children in school environment especially girls reduce the chances of experiencing VAC in particular teenage pregnancy that contribute to dropping of school.
- g) Continuous and regular community sensitization about GBV especially targeting men helps to reduce GBV incidences.
- h) Strengthening the human capacity and financial resources of LG stakeholders involved in the prevention and control of the GBV and VAC in communities, in particular the LCs community-based structures and law enforcers .

References :

1. <https://joyforchildren.org/wp-content/uploads/2024/06/VALIDATION-WORKSHOP-REPORT-MARCH-2021.pdf>
2. <https://joyforchildren.org/wp-content/uploads/2024/06/NERAMP-JULY-2023-TO-APRIL-2024.pdf>
3. <https://joyforchildren.org/wp-content/uploads/2024/06/JFCU-NERAMP-FY-JUNE-2022-TO-MAY-2023-ANNUAL-REPORT.pdf>
4. <https://joyforchildren.org/wp-content/uploads/2024/06/JFCU-AUG-2021-TO-MAY-2022.pdf>



Photo 2: : Community members in Corner Amach during sensitization on GBV and VAC displaying IEC messages

1.0 INTRODUCTION

The Uganda National Roads Authority (UNRA) is carrying out a maintenance of the road that runs from Soroti to Corner Kamdini running through the districts of Dokolo, Lira, Kole and Oyam under the Northeastern Corridor and Asset Management Project (NERAMP) Lango cluster. The North Eastern Road corridor Asset Management Project (NERAMP) aims to reduce transport costs, enhance road safety, and improve services on the road through a cost-effective Output and Performance-based Road Contract (OPRC). The road under rehabilitation is of high importance to Uganda and the East African Community as it services besides of domestic purposes is a transit corridor between Northern and Eastern Uganda, South Sudan, North-eastern Democratic Republic of Congo (DRC) and the port of Mombasa in Kenya.

This road (Soroti-Kamdini) is a 189.4 km stretch and is being rehabilitated by a contractor with a loan from the World Bank and funding by Government of Uganda. The road was contracted by UNRA to M/S Mota-Engil Engeharia E Construcao Africa SA to rehabilitate and maintain the NERAMP under an Output and Performance-based Roads Contracts (OPRC) and components therein (Works and Social risk management).

Map 1: NERAMP LANGO CLUSTER SECTION FROM DOKOLO TO KAMDINI



1.1 JFC Summary Scope of GBV/VAC Services - Managing Social risks associated with the NERAMP

The project was implemented in Lango cluster. The Lango cluster composes of 4 districts (Dokolo, Lira, Kole and Oyam) and the project was basically the rehabilitation of the existing trunk road connecting Soroti via the named districts up to Corner Kamdini which is being undertaken by a contractor hired by UNRA. Joy for Children used a wider, mix and integrated approaches to deliver its activities in a holistic manner. These include SASA methodology; Empowerment Model; and Promote Education to achieve the project objectives.

The report gives an outline of the project overall goal and objectives, summary of activities and achievements made in the financial years August 2021-April 2024, collaborations, key challenges faced in the years and actions taken, lessons learnt, some activities in pictures.

Methodology used during implementation

The projects had a face-to-face group meeting with community members, the contractor’s work force, school children and other stake holders during quarterly meetings at local government level. Posters were designed with VAC and

GBV prevention messages and distributed in schools' communities as a sensitization tool. JFCU staff distributed IEC materials to the people in the community meeting at various GMC s locations and encouraged them to pass the messages to fellow individuals in the community. The media, mainly the local radio FM stations were used for carrying out dialogue meetings and discussions about NERAMP project in relation to its social negative impacts in the community.

1.1.1 Overall Project Goal

“To avoid, reduce and mitigate incidences of Violence against Children, gender-based violence which may come in due to the influx of labor and offer support to the survivors”.

1.1.2 Project Objectives

- 4. *Enhance mechanisms to mitigate risks of GBV and VAC due to the project*
- 5. *Strengthen the community to help prevent GBV and VAC along the road corridor*
- 6. *Strengthen coordination at all levels in the NERMAP Lango cluster districts.*

1.1.3 Specific Functions / responsibilities of JFCU

- i. Sensitizing of NERAMP Project workforce/ road workers on GBV/VAC to prevent socio risks associated with the project.
- ii. Conducting community awareness programmes to safeguard against GBV and VAC.
- iii. Capacity building of child protection committees to improve coordination, reporting, and referral of GBV/VAC cases.
- iv. Referral of survivors to existing community or government service providers as per need such as legal pro bono services, psychosocial services, Health.
- v. Conducting Quarterly Stakeholders meeting at Regional, district and community levels.
- vi. Engaging with Grievances Management Committees (GMCs) in reporting and referral of survivors of GBV and VAC for management and services support.

1.1.4 Key Planned GBV/VAC Activities for Implementation

The following were the planned activities by objective.

Objective 1: Enhancing mechanisms to mitigate risks of GBV and VAC due the road project

Activities

1.1 Identifying and building capacity of existing Child Protection Structure such as SOVCCS and DOVCCS to identify and respond to GBV and VAC
1.2 Conducting 11 sensitization meetings with the NERAMP workers on GBV and VAC issues to reduce incidences of GBV and VAC in project districts
1.3 Forming 4 prevention centers and Vulnerable groups in the project districts
1.4 Conducting 6 project work force and Stakeholder sensitization and awareness on code of conduct and relevant laws and worker led prevention programme on GBV and VAC

1.5 Conducting 11 life skills development training and routine counselling for GBV and VAC survivors
1.6 Providing Economic empowerment training and start up provision for GBV and VAC survivors
1.7 Engaging in 6 meetings with Grievances Management Committees (GMCs) in reporting and referral of survivors of GBV and VAC for management and services support.
1.8 Carry out 6 Trainings and tools equipping of members of the GMCs
1.9 Building capacity of 40 Child Protection Committees Structure to report, refer survivors of VAC and GBV and sensitize community members about GBV and VAC
1.10 Conducting an end line survey to assess achievements and impact of the project
1.11 Trainings (4 trainings) of 40 peer educators' trainees (10 per district)

Objective 2: Strengthening the community to help prevent GBV and VAC along the road corridor

2.1 Conducting 8 community awareness programmes to safeguard against GBV and VAC
2.2 Carrying out 6 sensitization activities on VAC to promote education to pupils in proximity schools to improve school going retention and reduction of VAC incidences
2.3 Carry out 9 Radio Talk shows sensitizing communities about GBV and VAC prevention issues due to influx of NERAMP work force

Objective 3: Strengthening coordination with national and district authorities to monitor implementation of mitigation measures in areas trans versed by the road project

3.1 Carrying Baseline survey
3.2 Referring of survivors to existing community or government service providers as per need such as legal pro bono services, psychosocial services, Health.
3.3 Carrying out Quarterly Stakeholder meeting at Regional ,district and community levels
3.4 Conducting Joint Monitoring and Evaluation of the project implementation
3.5 Procuring and distributing Advocacy IEC materials for GBV and VAC for behavioural change and communications

1.1.5 Key JFCU Delivery Approach of GBV/VAC on NERAMP /UNRA

The main methodological approach used to achieve the project objectives were:

- A. Sensitization of NERAMP Project workforce through meetings, dialogues, using developed GBV and VAC IEC materials and media mainly radio about prevention of occurrence of the social risks of GBV and VAC.
- B. Sensitization of community members along the road in identified trading Centre's and social gathering places through the use of community Barraza, meetings with community, religious and cultural leaders, distribution of GBV, VAC IEC materials in local languages on GBV and VAC prevention , referral and reporting and through the use of media mainly radio, drama, dialogues, and sports.
- C. Sensitization of the school community in identified schools along the road through meetings with pupils' leaders, children, teachers, members of the Teachers and Parents Associations, and through distribution of GBV, VAC IEC materials on GBV and VAC that were developed by the children in schools and through the use of media mainly radio, drama, dialogues, and sports.
- D. Monitoring and reporting project activities during implementation
- E. Conducting workshops and seminars for the capacity building of project committees e.g. the GMCs, Child Protection Committees.

2.0 PROJECT ACHIEVEMENTS

2.1 Summary Status of Implementation & Achievements against Agreed Deliverables and Activities

The signing of contract between UNRA and JFCU on 14th November 2019 to implement the project to mitigate the social risks associated with the project marked an entry point and key mark stone. As a result of the signing, JFCU recruited staff and opened an operational office in Lira to coordinate the project activities within the 4 districts of Dokolo, Lira, Kole and Oyam.

JFCU also participated in the road construction groundbreaking in April 2022 which was commissioned by government



leaders in Lira district. JFCU held stakeholders' meetings with district local government staff in the 4 project districts to engage them in technical support during community sensitization meetings on issues of VAC and GBV. The departments involved include Community Development, Police, Family and Child Protection Unit, Education, C.A.O and Probation. This has greatly improved good working relationship and project support with local government staff.

Photo 3: Road construction groundbreaking in April 2022

The following activities were carried out.

Preparation and submission of the Inception report

A project inception report was written and submitted to UNRA in August 2021. The report was approved and marked the start of project implementation. It provided details of project implementation plans, strategies, methodology and indicator matrix.

Conducting a Baseline survey

JFCU commissioned a baseline survey about the GBV and VAC issues which was carried out by a consultant in 2021 and a validation dissemination workshop with stakeholders for the baseline survey results was carried out in February 2021. As a result, a project inception report was produced, and the final baseline report submitted and was approved by UNRA.

Objectives of the survey

- 1) Assess the knowledge and awareness of issues on Gender-Based Violence (GBV), Violence Against Children (VAC) and referral pathways (grievance management) as well as socio-economic status of individuals.
- 2) To conduct an analysis of stakeholders; mapping those involved and their roles in the GBV and VAC framework in the districts.
- 3) Establish the contributing factors (core drivers of violence against women and children) to the existence of GBV and VAC and referral pathways (case management and referral mechanism of survivors of GBV and VAC) for reporting and managing cases.
- 4) To identify the vulnerable/most at risk populations for GBV and VAC and map their locations
- 5) Establish the existence of Violence against Children Prevention Centre's and groups, vocational training centres for skills development and knowledge transfer and their functionality in addressing VAC and GBV.

The survey was conducted, and results were validated during workshops held with the stakeholders in the districts of Dokolo, Lira, Kole and Oyam between 23rd to 26th February 2021.

Validation of the Baseline report

The baseline report was validated during four workshops in February 2021 where the participants included UNRA, respective local government stakeholders (the CAO, representative of the RDC, the Police, the PAS, CDO, Probation Officer, District Chairperson, and staff from UNRA) and other stakeholders like NGOs and CBOs operating in the districts. The validation objective workshop was to share the data collected and also get information about the same data from the local government and other stakeholders.



Photo 4: Validation workshop with stakeholders in Lira District in February 2021.

During the validation workshops, the following recommendations were made.

- They recommended the perpetrators of GBV, and VAC be arrested and prosecuted through first reporting them to relevant authorities, especially to Police .
- Empowering the LCs also to help in arresting the perpetrators of VAC in the community.
- They strongly recommended the project in supporting the para social workers , the child protection committees, the Village Health Teams and sensitize them together with the community leaders about the referral pathways under child protection and GBV management .
- The need to involve the cultural leaders in the sensitization and also in the processes of ending the bad cultural practices that promote abuse of child rights.
- Strengthening informal and informal structures in the communities to address VAC and also the referral systems for VAC and GBV.
- The need to disseminate the Cap59-Children Act as amended to the community so that they understand very well the laws. Some people are not aware that what they are doing is against the laws and do it blindly and end up being caught by the long arm of the law.
- Involving the Ministry of ICT and other social media service providers like MTN and Airtel in messaging on GBV and VAC prevention using the media in local languages and controlling the use of the media for VAC and GBV messaging.
- To Promote the use of 116 toll free line for reporting VAC and GBV perpetrators so as to address the fear of reporting and repercussions .

All these recommendations formed part of the sensitization messages and the issues shared with stakeholders for addressing during their activities on GBV and VAC.

Printing and distribution of IEC materials



The JFCU staff also developed IEC BCC messages on GBV and VAC prevention , and the messages were used during sensitization in communities and construction workforce. Also, using a participatory approach, school children were also involved in developing VAC prevention messages including drawing of the common VAC issues that are in the communities . These messages and pictorials were also developed and put on posters for distribution in schools as IEC materials.

Photo 5: Children developing VAC prevention messages

Mapping of Schools and other institutions

Mapping was carried out from Kamdini area to Dokolo District. During the two-day exercise, the team interfaced with a large number of stakeholders including, among others; LC1 leaders, managers of trading centers and road users. They also met members of the community, school-going children, teachers, social workers, Police, LC3 chairpersons, Community Development Officers, members of

the GMCs, the in-charges of health centres and school directors who are the key stakeholders in the project.

JFCU staff carried out a mapping exercise of schools that were directly to be impacted by the project in the 4 districts. As a result, 93 primary schools, secondary schools and Early Child Development centres, 8 Health Centres III and 10 Police stations were identified. The project also has carried out sensitization meetings in primary and secondary schools and over 4,644 learners were sensitized about VAC and GBV prevention. They also identified which VAC issues were existing in the schools, how to prevent and report them to various authorities and also gave their inputs on how they wanted VAC to be prevented in the community outside the school environs.

GMCs sensitizations

Overall, the project reached 7695 persons through sensitization activities as detailed below of category of people sensitized . Majority (60%) were school going children as illustrated in the pie chart

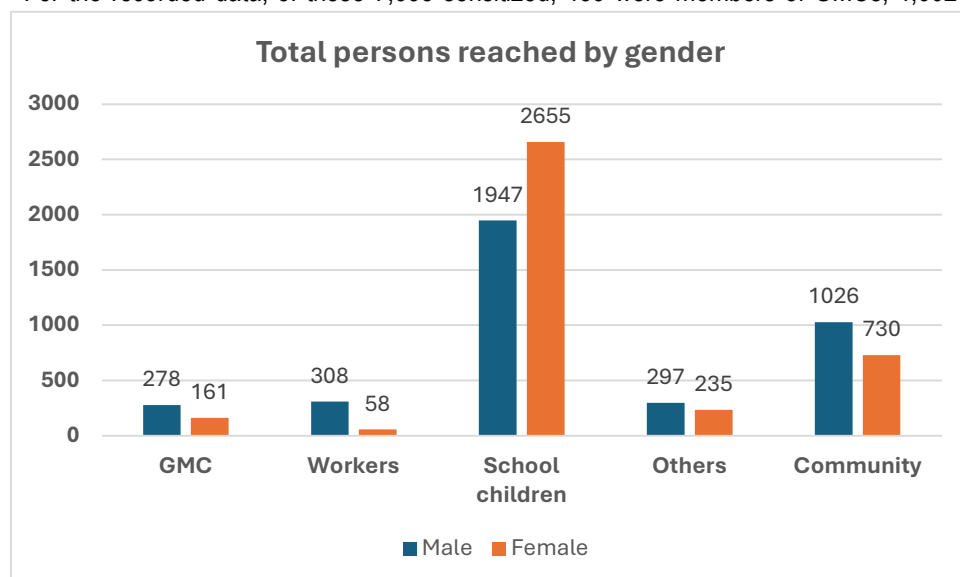
Table1: Persons reached by category and gender

	Male	Female	Totals
GMC	278	161	439
Workers	308	58	366
School children	1947	2655	4602
Others	297	235	532
Community	1026	730	1756
Totals	3856	3839	7695

The pie chart below shows the share in percentages of the persons reached by the categories .

.Chart 1:Annual number of recorded persons sensitized

For the recorded data, of these 7,695 sensitized, 439 were members of GMCs, 4,602 were school going children



(62%) , 1756 community members, 366 workers for Mota Engil and 532 others that include district local government , NGO/CBOs stakeholders , and media. Some of the members were reached more than once since sensitization meetings were continuous through the project life. As seen in the table 439 GMC members were reached and the number reflects

several meetings attended by the GMCs during sensitization were made. Registration of community members was not easy as the majority were not able to write their names on attendance lists and those who wrote their names in some cases wanted to be paid for having attended the meeting. Consequently, the project preferred to provide water or soft drinks during such meetings to avoid payments of cash to participants that would be a bad precedence under the project.

During the implementation period, JFCU staff mobilized and held several meetings with members of 11 GMCs and sensitized them on issues of VAC, GBV, referral and data collection using the incidence reporting tools developed by UNRA. The meetings were held in different communities in each district and details of the participants and meetings sites are included in the report.

Worker's sensitization

The staff of JFCU also held different sensitization meetings with the contractor's workforce (male and female workers) both in the camp site and workplaces sensitizing them about VAC and GBV including the legal issues associated with

them. The meetings have increased and created knowledge about children's rights issues and GBV among the workers.

Sensitization of the Religious and cultural leaders

The staff carried out sensitization meetings with the religious and cultural leaders discussing issues of VAC and GBV and how they were going to be involved in contributing to the reduction and or prevention of the occurrences of incidences of the cases. The religious and cultural leaders committed themselves to support the project through sensitization and during their cultural meetings with the community and other cultural leaders in order to not only end VAC, GBV but also ending child marriages in the communities.

Hotspots sensitizations

These were carried out among communities and included "drinking" joints["Malwa joints"] , boda-boda riders' stages some of whom were out of school youth , markets through the use of face-to-face meetings and mobile vans.

Sensitization using Radio

The project also carried out a sensitization meeting using the local FM Radio in Lira, with the support of the Community Development Officer. The listeners were informed that JFCU was basically to enhance the community capacity to mitigate, reduce and respond to social risks associated with gender-based violence and violence against children due to the project. Phone calls were made, and questions asked were responded to by the team of JFCU, CDO, Police Child and Family Protection Unit and UNRA.

Photo 6: JFCU staff explaining to pupils of Abutoadi Primary school about VAC issues



Table1: Gives an overview of achievements and targets realized by activity

Table 1: Summary End of Contract GBV/VAC Achievements against planned Key Output / Performance Indicators

Activity / Key Performance Indicator	Planned Life of Project (LOP) Target	Cumulative achievement as at end of Contract	Reasons for Variations (if any)
Objective 1: Enhancing mechanisms to mitigate risks of GBV and VAC due the road project.			
1: Output 1			
Key Activities			
1.1 Identifying and building capacity of existing Child Protection Structure such as SOVCCS and DOVCCS to identify and respond to GBV and VAC	7	0	No functional Child Protection Structure such as SOVCCS and DOVCCS were identified and the structures had been phased out by government and new structures were formed when the project was coming to a close.
1.2 Conducting 11 sensitization meetings with the NERAMP workers on GBV and VAC issues to reduce incidences of GBV and VAC in project districts	11	25	Overachieved .
1.3 Forming 4 prevention centers and Vulnerable groups in the project districts	na	0	Not formed because there were no GBV and VAC cases referred for keeping in prevention centers.
1.4 Conducting 6 project work force and Stakeholder sensitization and awareness on code of conduct and relevant laws and worker led prevention programme on GBV and VAC	6	4	The Code of conduct for NERAMP workers were carried out by the Mote Engil sociologist. However, during sensitization, JFCU staff reminded them about the laws of Uganda in relation to VAC and GBV especially defilement and rape .
1.5 Conducting 11 life skills development training and routine counselling for GBV and VAC survivors	11	0	There were no VAC survivors for counselling for life skills training.
1.6 Providing Economic empowerment training and start up provision for GBV and VAC survivors	na	0	There were no VAC survivors for economic empowerment.
1.7 Engaging in 6 meetings with Grievances Management Committees (GMCs) in reporting and referral of survivors of GBV and VAC for management and services support.	6	66	Achieved.
1.8 Carry out 6 Trainings and tools equipping of members of the GMCs	6	46	Achieved.
1.9 Building capacity of 40 Child Protection Committees Structure to report, refer survivors of VAC and GBV and sensitize community members about GBV and VAC	40	0	No functional Child Protection Structure such as SOVCCS and DOVCCS were identified and the structures had been phased out by government and

Activity / Key Performance Indicator	Planned Life of Project (LOP) Target	Cumulative achievement as at end of Contract	Reasons for Variations (if any)
			new structures were formed when the project was coming to a close.
1.10 Conducting an end line survey to assess achievements and impact of the project	1	1	Achieved.
1.11 Trainings (4 trainings) of 40 peer educators' trainees (10 per district)	4	0	Project implementation approach changed to use of the GMCs to report and refer cases of GBV and VAC. Members of GMCs were sensitized about GBV and VAC and equipped with tools to register cases,
Objective 2: Strengthening the community to help prevent GBV and VAC along the road corridor.			
1: Output 2			
Key Activities			
2.1 Conducting 8 community awareness programmes to safeguard against GBV and VAC	8	66	Achieved
2.2 Carrying out 6 sensitization activities on VAC to promote education to pupils in proximity schools to improve school going retention and reduction of VAC incidences	6	70	Achieved
2.3 Carry out 9 Radio Talk shows sensitizing communities about GBV and VAC prevention issues due to influx of NERAMP work force	9	6	Due to high-cost implication of radio , the balance of activities were not done.
Objective 3: Strengthening coordination with national and district authorities to monitor implementation of mitigation measures in areas trans versed by the road project			
3.1 Carrying Baseline survey	1	1	Completed and report submitted to UNRA . Report disseminated to stakeholders in each project district.
3.2 Referring of survivors to existing community or government service providers as per need such as legal pro bono services, psychosocial services, Health.	Unknown	5	Fortunately, there were few cases reported and this could be attributed to the good positive impact of the project interventions .
3.3 Carrying out Quarterly Stakeholder meeting at Regional ,district and community levels	20	22	Meetings were held with stake holders mainly at district level and stakeholders appreciated

Activity / Key Performance Indicator	Planned Life of Project (LOP) Target	Cumulative achievement as at end of Contract	Reasons for Variations (if any)
			the role of the project in contributing to the education 20of VAC and GBV in the district.
3.4 Conducting Joint Monitoring and Evaluation of the project implementation	6	5	Joint Monitoring and Evaluation of the project implementation were carried especially with contactors and other IPs for UNRA .
3.5 Procuring and distributing Advocacy IEC materials for GBV and VAC for behavioural change and communications			This was achieved and materials distributed to schools and community places.

Leaners of Akolodong Primary School during the outreach by JFCU staff on GBV and VAC issues under NERAMP Lango Cluster Project



2.2 Detailed Narrative of Achievements Against Planned Results and Activities:

Objective 1: Enhancing mechanisms to mitigate risks of GBV and VAC due the road project

1.1 Identifying and building capacity of existing Child Protection Structure such as SOVCCS and DOVCCS to identify and respond to GBV and VAC

Identifying and building capacity of existing Child Protection Structure such as SOVCCS and DOVCCS to identify and respond to GBV and VAC was not done since these committees were not functional.

1.2 Conducting 11 sensitization meetings with the NERAMP workers on GBV and VAC issues to reduce incidences of GBV and VAC in project districts

Objective of sensitizing in schools, community, and road workers.

- i. To promote awareness of social risks such as GBV/VAC that are most likely to come up in the project area during the road construction period and how they can be prevented and managed in the communities and vulnerable groups such as students and pupils.
- ii. To encourage the community and road workers to make use of GMC's in managing GBV/VAC cases.
- iii. To share and remind the road workers about the code of conduct and to take it seriously.
- iv. Get feedback from participants regarding road construction and GBV/VAC issues.

Methodology used during sensitization.

- Students and pupils were sensitized in their respective schools' face to face.
- Sensitization in all meetings was participatory and thus participants were always able to give their views through question-and-answer session.
- Students were asked to write stories/ issues regarding their experience on GBV/VAC for those who had confidential matters and were not able to speak publicly.
- Use of Banners, pulp stands and stickers to portray messages on GBV and VAC.
- Use of pull-up stands/ banners with the messages on GBV and VAC.

A total of 25 sensitization meetings of the planned 11 were carried out during the project implementation.

1.3 Forming 4 prevention centers and Vulnerable groups in the project districts

Prevention centers were to be formed for managing the survivors of GBV and VAC. By the project end, no survivors had been received and 5 cases were reported and were staying with parents, guardians and some in their homes and no need for taking them in prevention centers. Project therefore did not build prevention centers.

1.4 Conducting 6 project work force and Stakeholder sensitization and awareness on code of conduct and relevant laws and worker led prevention program on GBV and VAC

A total of 66 out of the planned 6 sensitization meetings were held in communities and as a result 1756 community members were sensitized on GBV and VAC prevention issues. At each session , community

members were allowed to have a question-and-answer moments and all questions asked were responded to and others were forwarded to relevant stake holders for follow up by the stakeholder.

1.5 Conducting 11 life skills development training and routine counselling for GBV and VAC survivors

JFCU staff conducted follow up of 3 GBV/VAC reported cases that occurred in GMC 79 (Angwetangwet), GMC 91 (Agurulude and GMC 94 (Loro Town council). A case in Angwetangwet was a domestic violence issue, case at Agurulude was trespass while case at Loro was defilement. All these cases were referred by GMC' to police posts in nearby area that is Angwetangwet police post and Loro police post. The survivors in these cases also received counselling from JFCU staff that went to conduct follow up. All the cases above were perpetrated by NERAMP project road workers (project related). The defilement case was by a staff of a sub-contractor of Mote Engil.

1.6 Providing Economic empowerment training and start up provision for GBV and VAC survivors

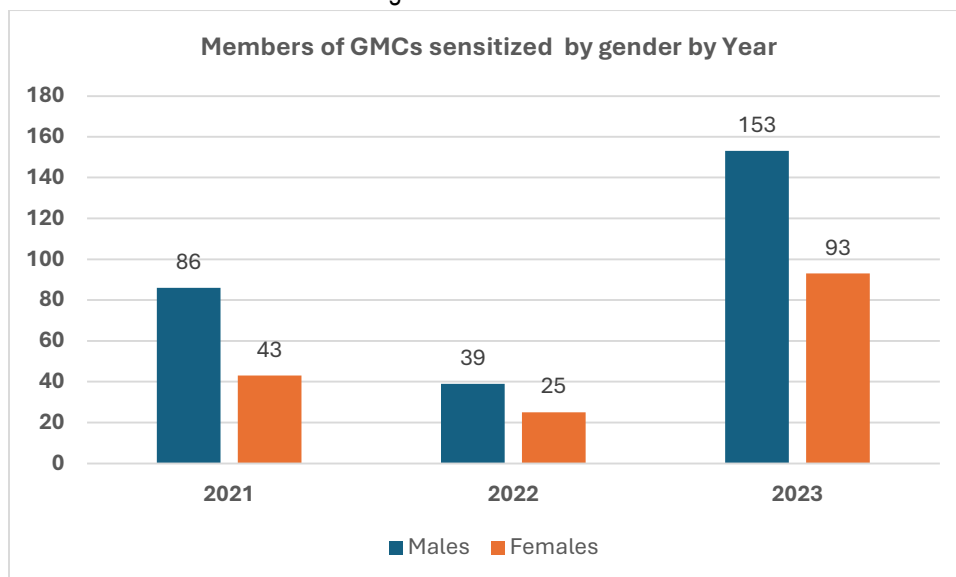
This activity was planned to benefit survivors of GBV. However, the 5 GBV survivors that were reported were during the last three months of the project implementation and their issues were still undergoing Police investigations. No economic empowerment training and start up provision were carried out.

1.7 Engaging in 6 meetings with Grievances Management Committees (GMCs) in reporting and referral of survivors of GBV and VAC for management and services support.

A total of 46 sensitization meetings out of the planned 6 were carried out during the project's life. As a result, a total of 439 members of the GMCs were sensitized as shown in the graph below.

Specifically, the engagement with the GMCS aimed at:

- Identifying the GMCs opinions and perceptions about specific causes of GBV and VAC in the community.
- To remind them of the existing Referral pathways where GBV and VAC can be reported.
- Improve participant's knowledge about the negative consequences of gender-based violence on children, women, and men.
- To explain the different forms of Violence against children.



During continuous engagement with the GMCs, it was found that women and girls face significant barriers to economic independence, and this continues to expose them to high rates of violence. The patriarchal system in Uganda upholds values, beliefs and practices that reinforce the privileges of men and superiority in society. In this context, GBV is accepted as an integral part of gender relations. Substance abuse, a culture of impunity for GBV and limited access to economic and livelihood opportunities for women and girls further compound this issue. Finding solutions to reduce and respond to GBV is a critical development imperative with implications for productivity agency and wellbeing of individuals and communities.



JFCU staff conducted trainings with Grievance Management Committees along the road corridor using the learning experience from the previous projects on mitigating cases of GBV and VAC in Kitgum district in the mining areas. In this training, the project team trained members of the GMCs in the following different areas.

Photo 7 : Ayat A&B GMC 90 during sensitization meeting

1) Training on the different but specific forms of GBV and VAC in communities. For example, the Gender officer highlighted the common inequitable gender norms in communities and their consequences for men, their partners and their families with regard to gender-based violence, risk for HIV and other adverse reproductive health outcomes. JFCU emphasized the need for GMCs to observe and promote Gender equality and gender equity as social conditions where men and women (and girls and boys) experience a balance of power, opportunities, and rewards.

NERAMP

1. Complainant's Name & Contact Information

Name of complainant: _____ Age of complainant: _____
 Gender: Male Female Other
 Please print your name in the space provided: Yes No
 Telephone: _____ Physical address (if any): _____
 Post (P.O. Box): _____
 Other contact information (if any): _____
 Languages (Specify all possible languages in which you can be contacted): _____

2. Description of grievance

Where: _____
 When: _____
 How: _____
 By whom: _____
 What was the impact/outcome: _____

3. Frequency of incident

One off Yes No
 If Yes describe: _____
 If No, specify: _____

4. What would you like to happen in order to resolve the grievance

Name and Signature of GMC Secretary: _____ Signature: _____ Date: _____
 Name and Signature/Thumb print of complainant: _____ Signature: _____ Date: _____

Grievance Resolution Status		
Issue Type	Issue Description	Action Taken

Resolution Signatures

Name of Complainant: _____ Signature: _____ Date: _____
 Second Party (UNRA/Contractor etc): _____ Signature: _____ Date: _____
 GMC Chairperson Name: _____ Signature: _____ Date: _____
 GMC Secretary Name: _____ Signature: _____ Date: _____

Photo 8: Copy of the GMC/NERAMP Tool used for data capture

2) Orientation on various forms of VAC and the safeguarding frameworks. The training highlighted the various children's rights which include, right to play, education, health, shelter and the right to be protected from exploitation that GMCs must strive promote in the project communities.

3) Training in the collection, documentation and reporting of cases of GBV and VAC in communities. GMCs were trained in the use of the different reporting tools like incidental reporting and case management tools and confidentiality in data management.

- 4) Training of members on how to use the District based Referral system including existing community and government service providers like health facilities, Police and Judiciary for enforcement of law, case prosecution and District Community Based Services Department for psycho-social support and case management.

The GMCs on the other hand acknowledged the existence knowledge gap on some issues around GBV and VAC and also the referral mechanisms. They expressed their commitment to working with JFCU and other stakeholders to help in preventing GBV and VAC cases in the communities.

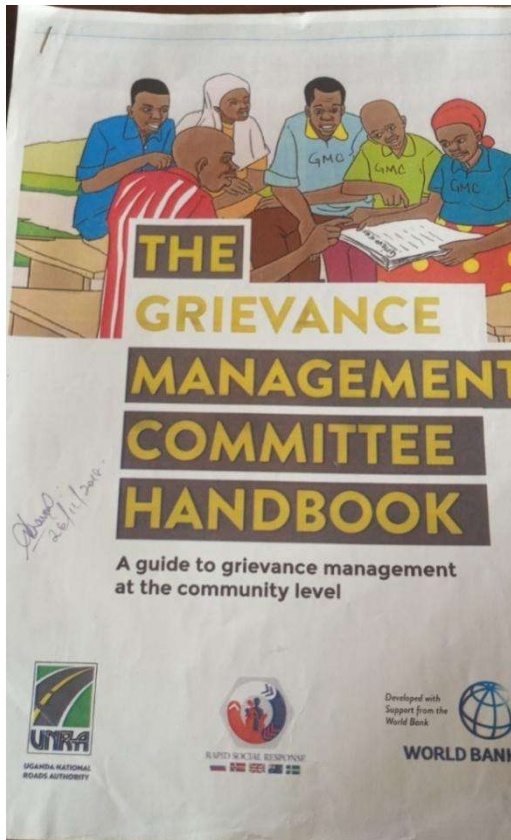
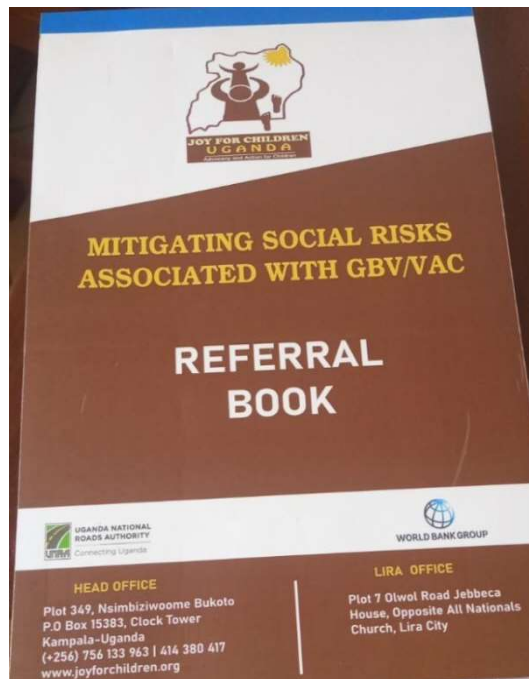


Photo 9: GMC Handbook Tool

Further, the GMCs highlighted the causes of GBV and VAC cases in their community including poverty, culture, early marriage, and illiteracy. They advised that any preventive measures must address the above-mentioned underlying causes.

Community sensitizations meetings were carried out and during such meetings community members were sensitized on prevention of GBV, VAC and referral pathways for incidences of GBV and VAC. Posters were also used to drive messages home and also for use in community for those who could have missed the sensitization trainings.

1.8 Carry out 6 Trainings and tools equipping of members of the GMCs



Members were trained on the tools to use during their work and in particular the Grievance handbooks provided by JFCU and UNRA. Tools used include the handbook on Grievance management Committee handbook. The GMCs were also trained on the use of referral and referral books, sharing experiences by each GMC on how they have been handling grievances and referral, referral pathway, explanation of technical terms used in the referral book such as “survivor, perpetrator etc.” use of role plays while practicing filling the referral book and finally handing over referral books to each GMC present.

Photo 10: Referrals Book for GMC

Building capacity of 40 Child Protection Committees Structure to report, refer survivors of VAC and GBV and sensitize community members about GBV and VAC

1.9 Conducting an end line survey to assess achievements and impact of the project

The endline survey is being carried out and the results of the survey will be used to improve on the project closure report, specifically the impact of the project.

1.10 Trainings (4 trainings) of 40 peer educators' trainees (10 per district)

Peer educators were not trained but the option of training GMCs was adopted since they were also performing similar functions of what the peers would do. It was seen not effective to create another structure that was to be doing the same functions as the existing one established by UNRA.

Progress towards Objective 2: Strengthening the community to help prevent GBV and VAC along the road corridor

2.1 Conducting 8 community awareness programmes to safeguard against GBV and VAC

A total of 66 community sensitization meetings in different communities were carried out and a total of 1756 community members reached the sensitization meetings on prevention of GBV and VAC issues. Other community sensitization meetings were held with the cultural and religious leaders on the prevention and response on GBV, child marriage, child labor, teenage pregnancy, child abuse and neglect were conducted to empower participants with knowledge in the fight against GBV and VAC along the road corridor in the communities. During the community outreach JFCU team also reminded the few parents who were there to take the education of their children seriously since it is every child's

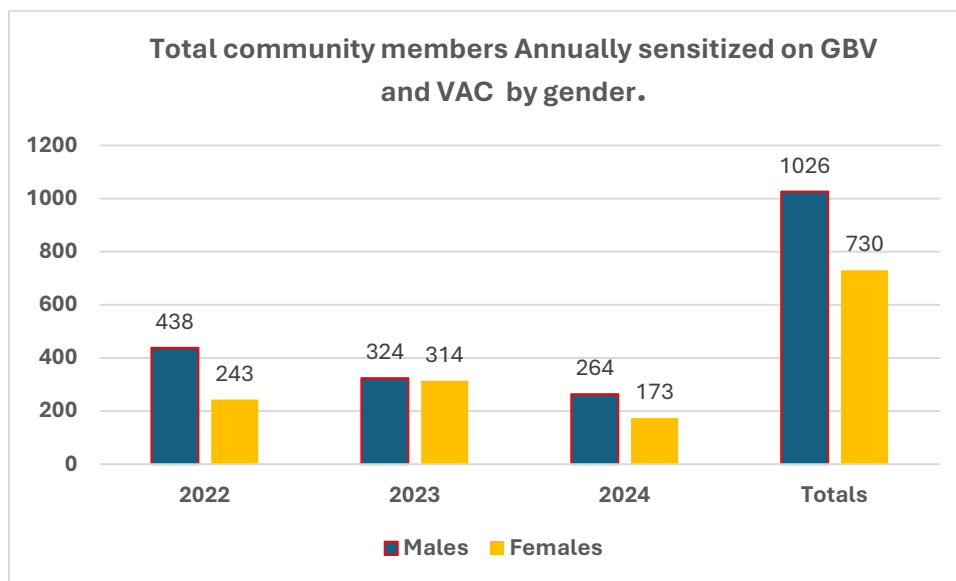
right to attend and complete school and the children present were also reminded on their responsibility as children since most of the parents /GMCS JFCU team met during their previous meetings informed us that their children were



listening to them

Photo 11: Community sensitization by JFCU staff

Chart: Total community members sensitized on GBV and VAC by gender.



2.2 Carrying out 6 sensitization activities on VAC to promote education to pupils in proximity schools to improve school going retention and reduction of VAC incidences

A total of 70 sensitization meetings mainly on VAC out of planned 6 were carried out by the project staff. Sensitization in schools was done and 4,602 (1947 female) children in schools that were registered during the sensitization meetings were reached on issues to do with prevention and reporting VAC whether it occurred in school, home or community .

Chart: Shows annual totals of children in schools sensitized on VAC under NERAMP

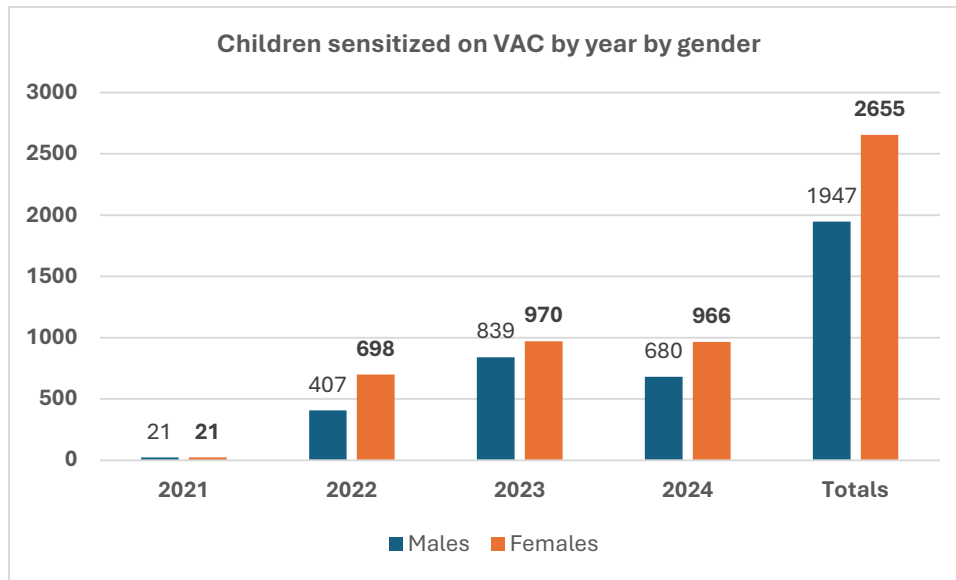


Photo 12: Students of Amuca SDA SS.

Posters were also used to sensitize about VAC and GBV and some of the posters were developed in a participatory way. The children were asked to draw about VAC issues they know that happen in the communities and these posters were used to sensitize children on how such VAC issues could be prevented, reported to different stakeholders .

The Project officers from JFCU shared the definition of violence, forms of violence and shared various examples of violence against children such as Teachers abusing pupils or students in class for example “you are

useless like your father”, which is improper and makes a child loose self-confidence and concentration in class. Bullying fellow student, bad touches, and sexual advances against will, child neglect like producing and abandoning your child, beating, and giving a child heavy work beyond their age is also violence.

2.3 Carry out 9 Radio Talk shows sensitizing communities about GBV and VAC prevention issues due to influx of NERAMP work force

JFCU staff conducted a radio talk-show on GBV and VAC in May 2023 on Voice of Lango FM. The talk-show hosted two participants from JFCU, 2 participants from District Community Development Department and a participant from AMACODE which is a local based NGO operating in Kole District. During the talk-show, listeners were briefed on the NERAMP activities, especially from Dokolo to Oyam road works. They were made to understand what roles are played by different stakeholders involved in the road project.

The project also carried out a sensitization meeting using the local FM Radio in Lira, with the support of the Community Development Officer. The listeners were informed that JFCU was basically to enhance the community capacity to



mitigate, reduce and respond to social risks associated with gender-based violence and violence against children due to the project. Phone calls were made and questions asked were responded to by the team of JFCU, CDO, Police Child and Family Protection Unit and UNRA.

During the talk show JFCU team discussed issues related to GBV and VAC where different stakeholders including prospective project beneficiaries who are listeners of Q FM got further understanding of where to report cases of GBV, VAC among other cases. They got to be reminded about the existing local structures near their villages which are willing to offer meaningful support to address some grievances.

Through the radio talk show, discussed issues focused at reducing and avoiding GBV and VAC during the construction of the road. The DCDO of Lira appreciated JFCU and NERAMP as project for inviting her for the talk, where she talked about the different forms of violence that affects women, girls, boys and men which may emerge because of the road construction. She further explained that the contractor would employ so many workers to work on the road, but they should not be allowed to defile girls and boys and she requested all parents to remain very keen when real construction road starts. The DCDO also advised the women to always protect themselves from these

workers since many of these women will be selling some of their products along the road.



Photo 13: DCO Lira during Radio messaging on GBV and VAC under NERAMP.

The DCO also talked about sexual violence as one of the many violence's which may happen because of the road construction. She strongly warned the Mota-Engil workers not to use their money to increase VAC and GBV in the communities. She also called upon the LC1, VHTS and the youth leaders on the ground to be useful in the prevention of GBV and VAC in their

communities and strongly advised the GMCS on the ground to work closely with the LCI, VHTS and Youth leaders when it comes to case management. Also called upon all community development officers in the NERAMP districts to be useful in the fight against VAC and GBV.

Besides the above, parents were encouraged to continuously take responsibility of children even if life is so hard because of the pandemic since child labour and exploitation is not allowed in Uganda and encouraged children to remain honest and respectful to their parents and guidance during this lockdown when schools are not functioning. She reminded the children to report all cases of violence to their parents, LCI, police, probation offices, teachers, and others.

After the discussion session, the listeners were given the opportunity to make phone in -calls to ask questions and share out their concerns. The table below highlights issues raised during the show by the listeners

Progress towards Objective 3: Strengthening coordination with national and district authorities to monitor implementation of mitigation measures in areas trans versed by the road project

Progress against Output

3.1 Carrying Baseline survey

JFCU commissioned a baseline survey about the GBV and VAC issues which was carried out by a consultant in 2021 and a validation dissemination workshop with stakeholders for the baseline survey results was carried out in February 2021. JFCU staff carried out a mapping exercise of schools that would be directly impacted by the project in the 4 districts. A total of 80 primary and secondary schools (including private and public schools) were identified and were involved in project activities during sensitization of the school communities about VAC and GBV prevention. Mapped schools are in the Annex of the report.

Objectives of the survey

- 1) Assess the knowledge and awareness of issues on Gender-Based Violence (GBV), Violence Against Children (VAC) and referral pathways (grievance management) as well as socio-economic status of individuals.
- 2) To conduct an analysis of stakeholders; mapping those involved and their roles in the GBV and VAC framework in the districts.
- 3) Establish the contributing factors (core drivers of violence against women and children) to the existence of GBV and VAC and referral pathways (case management and referral mechanism of survivors of GBV and VAC) for reporting and managing cases.
- 4) To identify the vulnerable/most at risk populations for GBV and VAC and map their locations
- 5) Establish the existence of Violence against Children Prevention Centre's and groups, vocational training centres for skills development and knowledge transfer and their functionality in addressing VAC and GBV

Consultative approaches were used and included key informant interviews, focus group discussions at community level in the project area, documents review and observations of the project area to capture still pictures of sites (Schools and other structures for project use) and interviewing activities.

Focus Group Discussions were held with small groups of less than 10 participants due to COVID restrictions with stakeholders.

Photo 14: FGD female with youths



This provided flexibility for in-depth exploration of the views, attitudes, and experiences of defined groups of stakeholders (Boda Boda riders, men, women, children in school and out of school, youths, Taxi Drivers,) about GBV and VAC . The groups also form the core impact group of the project design and implementation. Specific discussion guides tools used for different categories of stakeholders and appear as FGD Tools in the Annexes.

Key Informant Interviews (KIIs) – i.e. in-depth and semi-structured facilitated discussions – were conducted on one-to-one (face to face) with selected individuals with critical information by virtue of their positions.



The KIIs included Community leaders, Police/Family Protection unit and in charge of crime, LCI- V, local leaders in charge of women and children affairs, Health Workers in Health Centers in project area, the District Health Officer, District Probation officers, Head teachers for Primary and secondary schools in the project area transect i.e. a km away on each side of the road, and CBO/NGO leaders involved in providing GBV and VAC interventions within the study communities and districts.

A number of challenges were identified during the baseline survey which contribute to continuous existence and increase of GBV and VAC incidences in the communities.

Photo 15: KI interview in Lira district.

- Effective GBV and VAC case management continues to be undermined by the lack of accessible, integrated services and reporting mechanisms; weak institutional capacity across sectors (justice, health, education, and social welfare); and the absence of effective coordination of services in all districts. Second, the humanitarian response to the protection of survivors tends to generate parallel structures for provision of services which are not always aligned nor integrated with the national systems.
- Interference by parents in the management of cases, especially defilement: Parents tend to agree and settle the matter out of court. Logistics -Transport is a challenge when handling cases by the police force. Corruption in the legal system-The Perpetrators often bribe the people in the legal system and so cases are dismissed. The cost of following VAC cases by authorities and even parents and relatives of the survivors is prohibitive in addressing the legal process to prosecute the perpetrators. LCs and clan leaders managing cases beyond their jurisdiction like defilements denies justice to the survivors. The perpetrators end up getting weak punishments and walk away scot free.
- Some perpetrators are violent; they threaten survivors who need protection. The districts and Police lack shelters for survivors of Gender based and Violence against children. Many cases are not prosecuted as couples tend to cover up GBV cases, by the time a case of GBV is identified it is in the worst condition and in some cases medical evidence cannot be got in case of defilement.

These challenges formed the basis of messaging's during sensitization among the communities . These are issues that the communities were being advised on in order to prevent GBV and VAC.

3.2 Referring of survivors to existing community or government service providers as per need such as legal pro bono services, psychosocial and health services

In May 2024, JFCU staff conducted follow up of 3 GBV/VAC reported cases that occurred in GMC 79 (Angwetangwet), GMC 91 (Agurulude and GMC 94 (Loro Town council). A case in Angwetangwet was a domestic violence issue, case at Agurulude was trespass while case at Loro was defilement. All these cases were referred by GMC' to police posts in nearby area that is Angwetangwet police post and Loro police post. The survivors in these cases also received counselling from JFCU staff that went to conduct follow up.

All the cases above were perpetrated by NERAMP project road workers (project related). The defilement case was by a staff of a sub-contractor of Mote Engil.

A total of 5 GBV and VAC cases were handled by JFCU . These cases were reported by the members of the GMCs.

3.3 Conducting Joint Monitoring and Evaluation of the project implementation

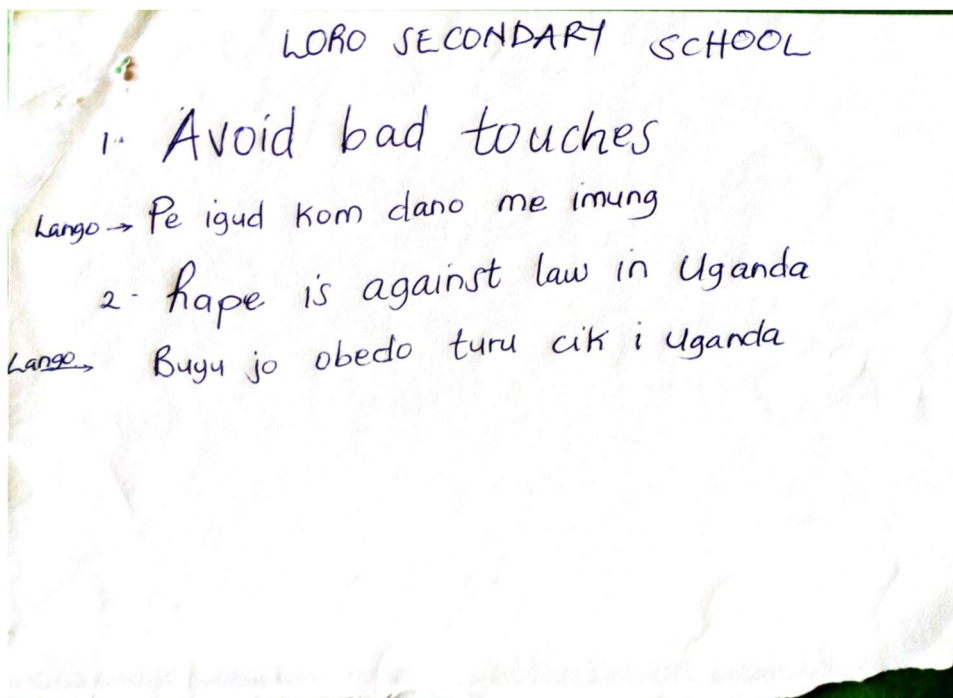
JFCU conducted review meetings with stakeholders, the District Community Development Officer, at district and sub county level to keep abreast of the project progress and performance. JFCU had meeting with the deputy town clerk of LIRA CITY WEST DIVISION and during the meeting, JFCU shared with the district officials the progress of project implementation and also gave recommendations to help improve execution of the project activities.

Photo 16 : Project staff meeting Mr. Okello Robert Ayo, (middle) Deputy Town Clerk of West Division Lira City on Managing GBV and VAC



Some of the meetings comprised of GMC'S of the areas, Mota Engil staff, TNM Kagga, PMMC and community members. Mota Engil Engineer updated the community about the up-coming road construction works in the area, the road designs and also advised those who are conducting businesses to extend a bit so as to create room for construction works. The community was excited since they were informed that they are allowed to keep operating their businesses as long as they extended off from construction area.

Mota Engil sociologist also encouraged the community to mind about their HIV status and ensure to use protection measures to avoid spreading the virus. She also encouraged those who are already on ARV'S to keep taking them responsibly. The safety officer of TNM Kagga also taught the community on how to use road signs and the meaning of the use of the red and green flags in the construction area by the road construction workers. He advised parents not



to allow children to cross the road by themselves so as to prevent accidents in the construction area.

3.4 Procuring and distributing Advocacy IEC materials for GBV and VAC for behavioral change and communications

The JFCU staff also developed IEC BCC messages on GBV and

VAC prevention , and the messages were to be used during sensitization in communities and construction workforce. Also, using a participatory approach, school children were also involved in developing VAC prevention messages including drawing of the common VAC issues that are in the communities . These messages and pictorials were also developed and put on posters for distribution in schools as IEC materials. Copies of the posters are in the Annexes of this report.

2.3 Coordination and collaboration with Actors in implementation of GBV and VAC from national to district to local community level structures

The project collaborated with local government stakeholders in the process of implementing project activities in their areas of operation. The project continued working closely with all stakeholders and also strengthening the established good working relations.

c) National Level Actors

At National level JFCU collaborated with the Ministry of Gender and Labour to get Policy guidance on issues to do with children and women in particular GBV and VAC policy guidelines. It also collaborated with the Ministry of Education to get policy guidelines on children in schools especially on issues to do with VAC.



d) District Level Leadership and Key Actors

During implementation, JFCU collaborated with Local government departments especially the CDO; the Education department; the Police particularly the Family and Child Protection unit; the local CBOs/NGOs

involved in child protection issues in the districts; members of the GMCs and the social media especially local FM radio stations to air out GBV and VAC discussions held by different stakeholders.

Photo 17: The Probation and Social Welfare Officer Lira District Local Government speaking to Mota-Engil workers

e) NERAMP –UNRA Teams

JFCU participated in joint community sensitization meetings at Aboke in preparation of up-coming road construction in this trading center. Participants included JFCU staff, Mota Engil, PMMC, TNM Kagga. These joint supervision and meetings provided fertile ground to responding to different issues raised by the communities at once since all stakeholders under the project were available .

f) NERAMP PMMC

JFCU attended monthly meetings organized by UNRA and during the meetings shared the project progress implementation and challenges . The meetings were important to addressing issues that were identified by JFCU for address. Some issues were beyond the terms of reference for JFCU such as compensation for affected properties

during road construction and in some cases, these were even cases of earlier contractors, HIV and AIDS, environmental, employment, and workforce grievances.

g) NERAMP Contractor

NERAMP contractor provided supervision roles for JFCU activities and also participated jointly during some project activities carried out by JFU.

h) Local / Community Leadership and Structures

Community/Local Actors: These included the GMCs, LC1, the cultural leaders and religious leaders in the project districts of NERAMP.

Specific Objectives of collaboration and coordination with the district leadership

- ✓ Strengthen the coordination of child protection and transformational activities within the project area
- ✓ To increase participants understanding of the incidence of GBV and VAC in the project districts
- ✓ To seek support and project ownership from district officials, cultural and religious leaders

They played a very central role when it came to mobilization of communities and sensitizations among others. For instance, during the community meeting one of the cultural leaders who also attended the meeting had the opportunity to communicate certain things to the children and parents. GMC'S, LC 1 Chairpersons were engaged in community sensitization meeting with men and community members of different communities. A total of 46 meetings with GMCs members (439) involved LC members since they were also members of the GMCs. The meetings having the LC persons proved to be important in supporting the project and the mobilization of community members for other planned ones.

Activities during the coordination meetings were:

- ✓ Distribution of IEC materials
- ✓ Power point Presentation of the progress report on previous activities and achievements.
- ✓ Training stake holders with knowledge on the negative consequences of violence on children, women, and men in the project districts.
- ✓ Capacity building on reporting cases in relation to GBV/VAC -NERMAP
- ✓ Strengthening existing referral systems of cases of GBV and VAC, the gaps and the ways to bridge the gaps for improved reporting
- ✓ Encourage and engage stakeholders on reporting and documentation of cases of GBV and VAC, referral of survivors.

3.0 CHALLENGES ENCOUNTERED AND HOW MANAGED

1. The biggest challenge during implementation was the Covid 19 pandemic that globally affected communities. The total lock down and also the government guidelines to control the spread of Covid-19 literally halted some county outreaches. Schools were closed and no activity could be carried out in schools. Community meetings were also stopped, and no sensitization activities were done for a very long period, about 2 years. Some of the project staff resigned as a result and new project staff had to be recruited to continue implementation when the Covid 19 lockdown was removed. Consequently, project run behind schedule and staff were redundant. However, UNRA provided an extension of the project implementation period to run to End of May 2024
2. The delay in project start (road construction) due to delayed submission of required documents and meeting certain procedures by the funding agency delayed also mobilization and recruitment of the contractors work force which is also the project impact group for JFCU. Consequently, planned activities with the contractor's workforce could not be carried out.

3. The delay and postponement of activities affected outputs, yet the project is based on a results-based funding approach. The delay significantly affected funds releases to JFCU and as a result, there has been a high staff turnover leaving Skelton staff on the ground to handle project activities.
4. The increased operational costs due to increased commodity prices due to the global economic fuel crisis affected budget plans.
5. During the reporting period the project implementation continued to be experiencing few challenges that include busy schedules of the contractors work force who were not always available for JFCU sensitization activities. Meeting them required prior arrangements with management and at times the time when available was not appropriate with JFCU schedules and conflicted with other planned activities.
6. The school holidays for children meant that , school sensitization activities had only to be carried out when schools are open and more so, during the third term (end of the academic years) children would be engaged in exams and busy and not allowed to be engaged in non-school curriculum activities.
7. During agricultural seasons when community members are busy planting, weeding and harvesting the crops, it was not easy to mobilize them for community meetings. They could only come after their agricultural engagements to attend project sensitization activities planned by JFCU staff. Bad weather, especially during rainy periods, affected planned activities and given the poor logistics (motorcycle) available for project staff this delayed the implementation of some activities.
8. The project also faced the challenges of delayed fund disbursements which affected JFCU meeting its contractual obligations with service providers including salaries and wages of staff.

4.0 PROJECT IMPACT

4.1 Overall objective of the impact study

To determine to what extent the project achieved its goal of preventing the occurrence of , reducing and mitigating incidences of Violence against Children, Gender-Based Violence which may have come in the project area due to the influx of labor and offer support to the survivors.

4.1.1 Specific objectives

1. To find out how the targeted participants were engaged in NERAMP project especially while mitigating GBV/VAC along the road corridor in Lot 2 B.
2. To determine the relevancy of integrating socio safeguard measures such as GBV/VAC sensitization in the NERAMP project area.
3. To determine any changes that could have occurred due to engagement of schools, communities and road workers in GBV/VAC sensitization meetings.
4. To find out whether there were other implementers of GBV/VAC in the same communities and schools where JFCU was implementing its activities on mitigating GBV/VAC that could have contributed to the outcomes that the NERAMP project was seeking to achieve.

4.2 Methodology used to carry out the assessment.

A mixed method methodology was used to investigate the impact of the project. Interviews of Key project stakeholders, FGDs with school children and community members, reviews of the project related documents were done to get the information about the project impact. Selection of the participants for interviews were purposively carried out to interface with those who were directly involved in the project implementation to tease out the changes they saw that could have been due to the project interventions in their respective communities.

The impact assessment was participatory and involved interviews with key stakeholder under the project to provide in depth information about the impact of JFCU activities in the communities about VAC and GNBV. The stakeholders include Local government mainly Education, and Community Development; Police (Child and Family Protection Unit), Schools, contractor Mota Engil, LCs, Grievance Management Committees, and CAOs. Interviews were carried out with key staff in the departments to assess their views on the impact of the activities carried out by JFCU. Focus Group discussions were held with schools' children including holding KI with the teachers in the school.

The Police Child and Family protection unit staff were also interviewed. The project staff also conducted key informant interviews with 6 GMC committee members in 3 districts of Dokolo, Kole and Lira. 2 GMC'S committee members were randomly selected from each district. JFCU staff engaged Secretary of GMC 70 (Alanyi), Chairperson of GMC 73 (Akaidebe) in Dokolo; Secretary of GMC 79 (Angwetangwet), Secretary GMC 82 (Anywalo Nino) in Lira City; Chairperson of GMC 86 (Amola), GMC 89 (Corner Molem) in Kole district during the impact evaluation interviews. Conducted key informant interviews with teachers or head Teachers who had ever participated in sensitization meetings on GBV/VAC associated with NERAMP. One teacher from each of the 6 schools reached was engaged. However, in some cases where some of the staff had been transferred from one school to another, JFCU staff could not engage them in interviews since they missed out on NERAMP programs.

The project staff conducted focus group discussions in 6 primary schools among school children who had participated in the sensitization meetings on GBV/VAC conducted by JFCU staff since 2021 in three districts of Lira, Kole, Dokolo. JFCU targeted 10 members per focus Group discussion i.e. 5 boys and 5 girls. JFCU team also conducted 2 focus group discussions with pupils/ teachers in 2 secondary schools. Pupils who had participated in JFCU sensitization meetings were randomly selected by the help of their teachers in order to assess relevancy of the VAC sensitization engagements. Children were asked questions and their responses were noted by JFCU staff.

4.3 Challenges during impact evaluation

In some of the schools and local governments, the staff who had been involved in the project were found during the impact evaluation to had been transferred to other schools and districts. For example, the CAOs of Dokolo and Kole were new while the CAO of Lira has been suspended due to internal administrative issues. Even the headteacher of the schools visited, some were new and had not been aware of the project activities. However, in order to address the gaps, other relevant (Education, Probation and Health) heads of departments who were involved during project implementation in Local governments were interviewed

4.4 Project Impact Findings

- (i) ***How the targeted participants were engaged in NERAMP project especially while mitigating GBV/VAC along the road corridor .***

The engagements were through sensitization activities of the target groups.

"JFCU staff talked about defilement, child abuse, dangers of HIV, child marriage, effects of early sex, preventing early sex. No pregnancy reported no girl got married since then in the school. No road worker was reported to have defiled a schoolgirl. However, a girl was raped in Kwania district. I knew her as a neighbor. The girl was in P.7 and the perpetrator was arrested and taken to police. No reported case in this school. Its only JFCU that talked about the issues of child marriage and teenage pregnancy prevention to the pupils in this school". [Head Teacher Agwata Primary school]

Overall, the project sensitized a recorded 7,536 people of these 3791(50.3%) being female. The number of persons especially in schools, was not captured in some cases and the actual number of persons reached is more than the

one stated . For example, the media, the radio was used for sensitization about GBV and VAC and it's not possible to determine the number of listeners that benefited from this method of sensitization use. For the recorded data, of these 7,695 sensitized , 439 were members of GMCs, 4,602 were school going children (62%) , 1,756 community members, 366 workers for Mota Engil and 532 others that include district local government , NGO/CBOs stakeholders , and media. Some of the members were reached more than once since sensitization meetings were continuous throughout the project life. As seen in table 1 below, 439 GMC members were reached, and the number reflects several meetings attended by the GMCs during sensitization were made. Registration of community members was not easy as the majority were not able to write their names on attendance lists and those who wrote their names in some cases wanted to be paid for having attended the meeting. Consequently, the project preferred to provide water or soft drinks during such meetings to avoid payments of cash to participants that would be a bad precedence under the project.

Selection of participants or project beneficiaries

JFCU staff carried out a mapping exercise of schools that were directly to be impacted by the project in the 4 districts. A total of 80 primary and secondary schools (including private and public schools) were identified and will be involved in project activities during sensitization of the school communities about VAC and GBV prevention.

Another key stakeholder under the project was the GMCs that were formed by UNRA . These GMCs were key in mobilization of community members during sensitization and were also responsible for recording any reported project



related GBV and VAC and would refer the cases to the relevant authorities based on the referral mechanisms.

The project collaborated with other stakeholders that included the Local government especially the DCO, the Police, the DEO, the news media, Local council chairman in the relevant villages the project transversed. The main contractor is the social development specialist and UNRA supervision regional team. Other service providers engaged by UNRA were also collaborators with JFCU.

How the targeted participants were engaged in NERAMP

Joy for Children used a wider, mix and integrated approaches to deliver its activities in a holistic manner. These include SASA methodology; Empowerment Model; Promote Education, and an integrated Disaster Risk Reduction and

Management (DRR/M). These four (4) approaches are effective in mitigating social dilemma related to GBV, VAC and for creation of a sustainable outcome.

JFCU carried out the following activities during implementation of the project which activities contributed towards prevention of occurrences of VAC and GBV as a result of the influx of the NERAMP workers.

- i. Sensitizing of NERAMP Project workforce/ road workers on GBV/VAC to prevent socio risks associated with the project.
- ii. Conducting community awareness programmes to safeguard against GBV and VAC.
- iii. Capacity building of child protection committees to improve coordination, reporting, and referral of GBV/VAC cases.
- iv. Referral of survivors to existing community or government service providers as per need such as legal pro bono services, psychosocial services, Health.
- v. Conducting Quarterly Stakeholders meeting at district and community levels.
- vi. Engaging with Grievances Management Committees (GMCs) in reporting and referral of survivors of GBV and VAC for management and services support.

During the implementation period, JFCU staff mobilized and held several meetings with members of 11 GMCs and sensitized them on issues of VAC, GBV, referral and data collection using the incidence reporting tools developed by UNRA. The meetings were held in different communities in each district and details of the participants and meetings sites are included in the report.

The JFCU staff also developed IEC BCC messages on GBV and VAC prevention , and the messages were used during sensitization in communities and construction workforce. Also, using a participatory approach, school children were also involved in developing VAC prevention messages including drawing of the common VAC issues that are in the communities . These messages and pictorials were also developed and put on posters for distribution in schools



as IEC materials. The staff carried out sensitization meetings with the religious and cultural leaders discussing issues of VAC and GBV and how they were going to be involved in contributing to the reduction and or prevention of the occurrences of incidences of the cases. The religious and cultural leaders committed themselves to support the project through sensitization and during their cultural meetings with the community and other cultural leaders in order to not only end VAC, GBV but also ending child marriages in the communities.

The project also carried out a sensitization meeting using the local FM Radio in Lira, with the support of the Community Development Officer. The listeners were informed that JFCU was basically to enhance the community capacity to mitigate, reduce and respond to social risks associated with gender-based violence and violence against children due to the project. Phone calls were made, and questions asked were responded to by the team of JFCU, CDO, Police Child and Family Protection Unit and UNRA.

The project also has carried out sensitization meetings in primary and secondary schools and over 4,644 learners were sensitized about VAC and GBV prevention. They also identified which VAC issues were existing in the schools, how to prevent and report them to various authorities and also gave their inputs on how they wanted VAC to be prevented in the community outside the school environs.

Posters were also used to sensitize about VAC and GBV and some of the posters were developed in a participatory way. The children were asked to draw about VAC issues they know that happen in the communities and these posters were used to sensitize children on how such VAC issues could be prevented, reported to different stakeholders .

The staff of JFCU also held different sensitization meetings with the contractor's workforce (male and female workers) both in the camp site and workplaces sensitizing them about VAC and GBV including the legal issues associated with them. The meetings have increased and created knowledge about children's rights issues and GBV among the workers.

JFCU built the capacity of school management committees, senior women and men teachers on warning signs, identification and response of GBV and VAC in schools. This was done through conducting workshops and annual review meetings with the committees

Grievance management meetings were also held during the implementation for reported cases of GBV and VAC that occurred in the community . The meetings involved the community members, the GMC members, Police and the parties



that were involved in GBV. The meetings were held to find a practical resolve to the survivors so that the survivor received fair justice according to the established laws.

Photo: JFCU staff during a grievance meeting in up on GBV allegation at Agurulude

A total of 5 GBV/VAC that were reported related to the workers and of these, one was defilement; child neglect; two on trespass and another

case on alleged sex by a worker with a married wife.

During implementation, JFCU collaborated with Local government departments especially the CDO; the Education department; the Police particularly the Family and Child Protection unit; the local CBOs/NGOs involved in child protection issues in the districts; members of the GMCs and the social media especially local FM radio stations to air out GBV and VAC discussions held by different stakeholders.

- (ii) Relevancy of integrating socio safeguard measures such as GBV/VAC sensitization in the NERAMP project area.**

The project relevancy was based on different research findings and reports from National surveys that revealed the high presence of VAC and GBV in the community. The 2016 UDHS shows that the rates of sexual violence in the Lango Sub-region constituting districts like Dokolo, Lira, Kole and Oyam shows that the rates of sexual violence were high. The major causes of GBV were mentioned to be due to rigid cultural norms, weak law enforcement systems and traditions, low incomes and family disputes and misunderstandings among others.

In the NERAMP project area, GBV was a big problem at the time of the project inception and the rates of sexual violence across the project area were about 22% (2016 Uganda Demographic and Health Survey). It was feared that with the influx of labour, GBV and VAC might triple if mitigation measures were not put in place.

A baseline was carried out to assess the VAC and GBV situation in the project area and the results showed a high reported incidences of the VAC and GBV cases which demonstrate the relevancy and importance of the project to address the negative social issues identified .

The extent of GBV and VAC in the districts is exceedingly high based on qualitative and quantitative data obtained from Police , Probation officers, and key informant interviews. The ongoing interventions are inadequate to address the current scale of GBV and VAC existing in the community. The common GBV cases reported are domestic violence, rape, common assault, denial of women to access to family assets, and abuse. The main leading causes of this were mentioned to be poverty , alcoholism , polygamous marriages and diseases like HIV and AIDS. Respondents were asked perceived knowledge of levels of incidence of VAC in the community and according to the results, 32% could not tell, and 20% said it was very high i.e. having heard of a case once in a week, 28% medium i.e. a case once in 3 months and 18% very low i.e. case once in 6 months. In 2019, a total of 284 GBV cases were recorded by Police in Dokolo District, CFPU and of these , more than half (57%) were domestic violence cases, 21% defilement and 15% child neglect. Of these 112 GBV, a total of 50 GBV (44.6%) cases had been taken to court. Between January 2019 to June 2020, 178 domestic violence cases were reported in Dokolo Police and of these 38% were counselled and resolved at the unit by staff [JFCU/UNRA/NERAMP Baseline Report, 2021]

Another basis for relevancy is the World Bank studies on similar projects that have been carried out that show that such big projects that have influx of workers contribute towards increase in the negative social impacts in the community the projects operate. Identifying and mitigating sexual exploitation and abuse and GBV risks in the World Bank projects, requires development of robust risk assessment methodology with a rating of 'high risk' of sexual exploitation and abuse/GBV triggering actions in the project design and supervision. It was deemed critical in High-Risk environments to educate and raise awareness of women, adolescents and children about the risks of SEA and their legal rights. Service providers for survivors to be identified in accordance with international standards that articulate a minimum basic package of services, ideally including case management support, health services, psychosocial support, police support and security, access to legal services, and shelter, if needed. In Uganda, UNRA adopted the international accepted standards in the road sector. JFCU was equally serious and willingly partnered with UNRA/WB/Local governments to ensure that the project did not have the chance of contributing towards increased GBV and VAC incidence in the project area.

There were common responses about the relevancy of the project. Most of the Key Informants mentioned that the project was very relevant based on the VAC and GBV situation in their local environments in the communities.

"The project interventions of VAC and GBV were very relevant . The road project helped to transportation of communities. JFCU shared benefits of the road, the dos and don'ts. Even parents, teachers, communities benefited. Some workers were foreign beyond the district boundaries. The trend of VAC has reduced drastically. JFCU project interventions helped and contributed to this. In the project the local content was involved. The Flag girls were all locals. The communities

were transformed greatly. Project holistically transformed the beneficiaries. Project empowered knowledge, risk factors, Level of engagement was high, Radio programming involved. The rights of children were emphasized and the community understand the concept. [District Community Development Officer , Kole District Local Government.]

(iii) To determine any changes that could have occurred due to engagement of schools, communities and road workers in GBV/VAC sensitization meetings.

During the impact assessment on VAC, the JFCU staff carried out Key informant interview with Head Teachers of sampled primary and secondary schools, FGD s with pupils in the sampled schools and also Key informant interviews with the District Education officers, the Police Child and Family protection unit to get project impact views. This was done to determine the Project benefits or any changes that could have occurred due to engagement of schools, communities and road workers in GBV/VAC sensitization meetings towards impact on prevention and or Reduction Violence Against Children.

Findings reveal that the project increased knowledge and awareness about prevention of GBV and VAC related issues in the communities that were reached by the JFCU OfficeTeam physically or through the Radio FM media. As a result of the project intervention, there has been only two cases reported, mainly GBV cases in the project area during the NERAMP implementation period.

Impact on Prevention and or Reduction in Violence Against Children

A number of respondents interviewed indicated that the project especially in schools had a very good positive impact through increased awareness on the prevention of VAC among the children. As a result, there were no reported cases of VAC among the children in all the schools the project reached by the NERAMP workers not even any reported cases of VAC by other community members.

The Head Teacher of Adwila Primary School said that JFCU had been engaging their school through sensitization meetings on VAC and children have been able to learn about their rights. Through that, a children rights club was formed where children learn songs, poems, drama on children's rights and prevention of violence against children in school and communities. He stressed that the school management has now adopted alternative methods of disciplining children without causing them violence such as putting emphasis on guidance and counselling. Over beating of children and corporal punishments have been stopped by school administration. The school administration has also added a rule to do away with bullying as school rule number 5 so as to protect children who were facing violence from their fellow pupils. The administration had also engaged PTA to attend the activities of children's rights club so as to encourage parents to also be aware on how to prevent this violence against children once they are back home and in community because children may be safe at school but not in the community.

"Sensitization of the children by JFCU was important. This is a boarding school and I have not heard about children being violated not even by the contractors. The sensitization made parents alert. Children can't hide anything. If you want information to go and spread very fast, use children. The majority of the workers were residing in the place. They have not been involved in VAC or GBV. Sensitization did a very good thing for the children. The school is situated in an environment where there is a market and disco Hall. If sensitization had not been done you were going to hear Chaos" [Head teacher APII Primary School]

The general information reported was that road workers of NERAMP were well disciplined compared to the construction projects that have been implemented in the area. The DEO reported that there is a reduction of VAC issues in Dokolo as a result of awareness programs carried out by JFCU activities. When asked about benefits of VAC sensitization to them, the pupils gave the following responses that they learnt to walk in groups

to avoid attacks from strangers, they learnt to avoid bad peer groups, avoid playing on the road, respecting of elders, and avoid gifts from strangers. When asked about the situation before the sensitization about VAC by JFCU and the changes that have occurred after the VAC sensitizations, the children gave responses as shared below.

Before sensitization on VAC was introduced in the school, children were facing over beating from teachers, being over worked by teachers in the school such as digging, bad languages / use of abusive words among pupils, theft, child neglect from parents, bad touches and some girls were receiving gifts from strangers.

After the pupils were introduced to VAC sensitization, they testified that pupils stopped fighting among themselves in the school, use of bad languages were stopped, teachers stopped over beating pupils, over working of pupils by teachers in the school was stopped such as digging, bullying was stopped among pupils, nicknaming of their fellow friends stopped and theft among pupils also stopped.

Children were also asked about relevancy and how they benefited from JFCU VAC sensitization and responses were as shared below.

- *I used not to mind receiving gifts from strangers but now I refuse.*
- *I was counselled by JFCU staff and from then, I stopped joining bad peer groups.*
- *I learnt how to cross the road.*
- *Teachers stopped overbeating us.*
- *Bullying in the school stopped, it was very common.*
- *We are no longer nicknaming our friends and we respect each other.*
- *We stopped using bad languages and use of abusive words.*

When asked about any challenges, one of the pupils complained about the issue of road accidents such as bicycle accidents. Concerning VAC, pupils reported that they have not faced any issue of sexual abuse such as defilement in the school or from community.

There was credible evidence from the impact of the project among the pupils interviewed as they showed increased knowledge on issues to do with VAC like issues to do with referral and reporting incidences of VAC Pupils were also asked what they can do in case of violence such as defilement and they responded that they report to police, teachers or elders, LC1.

"...I was involved during the sensitization of the pupils. P3 to P7 children were sensitized and this was done two times in the school by JFCU staff. They talked about, How children should stay away from the road constructors; Tell parents if any constructor disturbs them; Road signs be followed to avoid accidents; Follow the right or left on the road depending where one is coming from; Stop playing on the road and explained on forms violence to children". [Director of studies; APII P/S]

The GMC Chairperson said that community members had now learnt that violence issues would lead to being penalized by the law and could face imprisonment in case they were involved in VAC activities.

[.....Before our community was introduced to sensitization on GBV/VAC prevention, you could find relatives impregnating their own children. and they used to rape. Rape was very common particularly in this area (Amola) on this road right from Amin's time. But after sensitization meetings that involved the religious and cultural leaders,

religious leaders started quoting scriptures to discourage such behaviors and we have noticed a change and a reduction in such behaviors.[Chairperson GMC 86].

[....JFCU helped us when we had a defilement case when a child of 10 years was defiled by a man of 24 years. I have been following up the case and the perpetrator is in prison. He was handled by Dokolo CPS.”[GMC secretary of Alanyi (GMC 70).

Children behaviors in the community was reported to had changed to a better level as a result of sensitization.

After the engagement of religious and cultural leaders on GBV/VAC associated with NERAMP, we noticed a slight change on behavior of community members especially the issue of relatives having sexual relationships with their children and rape in the community. [Chairperson GMC 86.]

The effective methodology used included physical interaction with schools, physically with pupils they had an opportunity to ask and respond to their concerns. The posters were also used to drive prevention messages for VAC.

“No reported case of VAC in schools. Mechanisms for reporting VAC exist and there is no way a case can happen and is not reported. We have WhatsApp group called the childcare group. Lira district child wellbeing committee group has NGO, Police, NGOs, Local Government, EYEN”. [Senior Education Officer, Lira District]



During a focus group discussion meeting with students of Amuca SDA SS, the students shared their situation in the schools before sensitization meetings on VAC were introduced in the school.

The students shared a number of challenges which were portraying violence against children in the school such as over beating, tribalism, indiscipline, fighting, bad touches, bullying, denial of food by the cooks, and high school dropout rate of girls due to pregnancy. The issue of bad touches was dealt with and there is now respect for one another.

“.....Before JFCU came to this school, bullying was a lot. Some of us still even have wounds/ scars but now the school is conducive and safe to stay in. We can no longer be denied food in the kitchen because we now know our rights. Many girls would drop out of school due to pregnancy, very many of them even more than 10 girls in a term. But now, students have gotten to value education and avoid situations that lead to early pregnancy. This time only one girl dropped out due to pregnancy and so if JFCU can keep coming, this situation will be completely eliminated. The IEC materials/ stickers which were given to us have encouraging words that help us not to mess up our lives in men. We hang JFCU stickers in our suitcases and the messages on them keeps encouraging us not to go astray or ask for help in case of any challenge.[FGD-Pupils-Amuca SDA]

During the discussions, students contributed more ways of how they have benefited from sensitization on VAC and they are shared as directly transcribed below.

- Your coming helped us to know the development in our country in terms of the road.
- Some of us benefited from guidance and counselling that was started by JFCU team in our school.

- *Knowing our rights has promoted leadership in us. We now try to practice leadership by becoming the voice of the vulnerable members in the school and back home in the communities. For example, I was able to give guidance to my friends back home who were on the verge of messing up their lives.*
- *I used to fear speaking in front of people but after sensitization on our rights, I got freedom of speech and in case of any violence, I now know where to report. JFCU also gave us a number to call in case of any emergency.*
- *Sensitization on VAC helped us to know dangers of violence Against Children and this helped us to be open and transparent so as to be able to convey our problems for help.*
- *Your coming gave us courage to fight for our rights and we now have good mental health and a safe environment is helping us in achieving our goals.*
- *We can confidently fight for rights for our fellows in case any of them faces violence even back home in our communities because we know where to report.*
- *Sensitization on VAC made us realize that we have a chance to deal with things that make our life harder at school and in communities.*
- *After JFCU engaged our school in VAC teachings, teachers stopped the habit of overbeating and overworking us because they recognized themselves guilty and stopped it.*
- *I am very happy about your coming here because we are free to tell you what we fear to tell our parents and teachers because it's easy for you to help us than us going direct to them.*

Through continuous engagement of pupils in clubs, drama and poems on VAC, even teachers are aware of their roles in protecting children now and the discipline of children has improved. Among the challenges, children reported that there is a challenge of corruption/ bribery once a case is reported which makes students lose moral of reporting.

During the evaluation, success stories were mentioned as a result of the JFCU activities in the schools. A teacher at Amuca SDA Secondary School informed JFCU staff during impact evaluation that after the sensitization meetings on VAC by JFCU staff that were held in their school, he decided to introduce weekly counselling sessions for each class in order to encourage students to get opportunities to speak up in case they have any challenge. The approach which they use is introducing a topic for example of early pregnancy, academics or STI'S and children participate and those who have any issue were always given a chance to reach out to him or any teacher they are free with. He informed JFCU staff that he counselled 2 students who were struggling with psychological torture. Her parents were drunkards and not providing for her needs. She was already fed up with borrowing from friends and planning to quit school, but after the counselling, she improved in performance and now settled in school. He also reported that before sensitization on VAC was introduced, the school was faced with high rate of school dropout due to pregnancy. He said, "...but after the sensitization meetings, we almost had no case. we got only one case of pregnancy and if this program was to continue, it would have been completely eliminated." He was happy with the sensitization engagements on VAC which he found to be very important in improving awareness on what can affect the studies of a child.

According to the CFPU of Lira Central Police Station, she suspects that they were not going to record foreign children in the districts as a result of NERAMP as compared to the last similar project that were implemented in the district where very many children born from the workers of the projects were left and are now living without fathers. This was attributed to the inputs of the JFCU sensitization activities carried out in the project areas and in the communities. This statement was corroborated well with the DEO of Dokolo who also mentioned children that were left by the workers when the earlier projects in the area ended.

“ .during 2007 – 2009, the Chinese left many Chinese children in this area – traumatized families. I’m happy that JFCU made the interventions by sensitizing the communities and the children were made to be aware and how to address the challenges . We pray JFCU maintains the interventions. VAC is declining, definitely yes. Survivors in the area became examples of others . They do not want to be like them. They know the negative impact of bringing up children who have no fathers.[D.E.O Dokolo district]

The DCDO of Kole reported that the integration of socio-safe guards was very relevant because they have not registered any cases of GBV/VAC as a result of road workers. No teenage pregnancy was registered as a result of road workers in the district.

“Compliment. We have not registered cases of VAC and GBV during the road construction. It helped us to address issues in the corridor of road construction. Not heard of any case! “[District Community Development Officer , Kole District Local Government]

However, JFCU was handling a small portion of the district yet the entire district is affected in one way or the other. He named partners that supported in mitigating GBV/VAC such as Redeem, CBO’S under plan, Youth Alive.

Pupils in Agwata primary school were asked to mention the benefits they got from sensitization activities that were carried out by the project and the following benefits were mentioned which demonstrate the project impact on them.

- JFCU taught us to handle cases and report to our leaders.
- It helped me to handle the adolescent stage.
- I learnt to protect myself from rapists.
- I now know how to protect myself from teenage pregnancy.
- I learnt that if a person is raped, we have to rush her to the hospital for checkup and also report to police.
- We learnt that it is bad to fight at school.
- We learnt to always share with elders in case we get any challenges.

The same pupils were asked to say what changes have taken place either in school or among the pupils after sensitization by JFCU was carried out in the school. The pupils mentioned the following impacts as a result of the project.



- Bad touches from fellow pupils were very common in the school but they have reduced.
- Fighting among pupils was also reduced.
- Use of abusive words was reduced.
- Teachers stopped overloading pupils with work.
- There was a high level of beating by teachers which has been reduced.

- Bullying has also reduced among pupils.

Some teachers could use abusive language on pupils which could affect us psychologically but this has reduced. The pupils mentioned the challenge they experienced in reporting VAC cases and those mentioned was corruption when they are asked money when reporting VAC cases for prosecution of the perpetrators.

“Corruption. During COVID 19, my sister was raped and we reported to LC1 and Police. And we were asked to pay 50,000shs which we didn’t have[Pupil-Female-Agwata PS].

Others mentioned that they were being threatened by the elders and perpetrators that they would be beaten in case they reported the VAC incidences to any person. These threats continue to affect the reporting of VAC cases in the community. She further said that the general reported VAC cases are now very low. The DCDO of Dokolo further reported most of the cases of GBV and VAC do take place during harvesting season which is due to misuse and abuse of the sales from agricultural produce by mainly the men. These same cases also were reported mainly during the begging of the academic terms when children are reporting back to school. The lack of money in the household to meet the school fees contribute to GBV among the married couples.

The involvement and collaboration between JFCU and local government contributed towards increased support from local government especially during mobilization and sensitization of the communities. According to the DCDO of Dokolo district, the district had gotten engaged in a number of meetings concerning road construction and NERAMPs consideration to put in place socio-safe guards in the project attributed towards the discipline/ good behavior of the road workers on the current road construction. No known cases of teenage pregnancy due to road workers were recorded or reported in the district.

“At least we have not received cases of teenage pregnancy as a result of this road construction in Dokolo. I have not heard much concerning VAC/GBV as a result of this road construction and I believe we may hardly get white children as a result of the project compared to the past road construction projects where we got neglected Chinese children in the area. [DCDO - Dokolo district]

Despite the unknown VAC cases due to the project workers reported, it was still reported that there were still reports of high levels of defilement cases in the communities which go unreported in the districts due to a number of challenges experienced by the law enforcement machinery.

“...So many cases of defilement still exist. There is a backlog of GBV and VAC cases still many and this is because of cultural aspects. Teenage mothers due to forceful Child marriage is still on. If a girl of 14-16 yrs, dropped out of school, the only option is to get her away through marrying her off by the parents. Poor parenting and how to bring up a child is a challenge. There are very many street kids on the street due to domestic violence. Violence is still there and Covid 19 escalated the situation. There is no mechanism for reporting of VACs and implementation of policies is low. The “LUK”(local fine after getting you with someone’s daughter) is a challenge to prosecution of perpetrators of defilement in the community. It compromises legal access to the defilement case and VAC”.[District Community Development Officer, Kole District Local Government]

During an interview with DCDO of Kole District Local Government, he reported that they have not received any case



of violence Against children resulting from the road workers on this current road construction (NERAMP) and he attributed this to the sensitization activities on GBV/VAC in the areas at a risk.

Photo: Consultant meeting DCDO of Kole District during impact assessment

He also said that the general trend of VAC has reduced. He gave credit to the awareness programs as

prevention measures which helped in transformation of community members to know the dos and don'ts to prevent them from falling victims of the current construction project.

"the Information shared by JFCU helped and prepared the community to learn how to behave with new people in the community"[DCDO-Kole DLG].

Impact on Prevention and or Reduction in Gender Based Violence

The project had a positive impact on preventing the occurrence of project related GBV in the communities under the project. Information about projects impact on prevention of and or GBV reduction was obtained mainly through FGDs with community members, KI with GMCs , CDOs, LCs chairperson in the community and the Police, Family and Child protection unit. The project impact on GBV in the project area was that during the project life, only one case of project related GBV was reported and according to the investigations the person who was allegedly involved was not a direct contractor worker but a new staff recruited by the sub-contractor and the sub-contractor workers had not undergone sensitization by JFCU staff. The project , based on this only one reported case, shows that there was a positive impact by the project especially in prevention of the GBV incidents by project workers in the project sites.

".. Grievances not received directly from them in the office. No reports of GBV/VAC to the office about VAC and GBU. The Conflicts reduced. Not many challenges seen. We have noticed a reduction in conflicts such as women and men fighting in the community. Compared to experiences from past construction projects in the area, conflicts of men and women as a result of engagements with road workers have been minimized. If they ("JFCU")were not doing what they did , we would be hearing a lot about teenage pregnancy. Violence Against Children declining in district. Be at Sub county level, they are still low. Violence is common during post-harvest period and during children going back to school period".[District Community Development Officer-Dokolo]

It was reported that since the interventions of JFCU in the project sites, changes were noticed especially at family level where men started being responsible for home issues like paying of school fees. Although this was not the projects' objective, it was an impact that was unforeseen.

"...Before, men were not responsible, failing to pay school fees for the children and taking care of the family but these days, men are taking responsibility and this has reduced GBV in families as domestic violence has reduced. These days, there is cooperation among couples, you find a man says to his wife that "I am going

to take care of fees and the wife takes care of food in the family. The cases which we get now are from those who are new in the area who come to rent and get into relationships and get a romantic partner to pass time. But among the married residents who have engaged in sensitization meeting by JFCU on GBV/VAC, GBV has reduced. [District Community Development Officer-Dokolo

There was increased awareness about GBV in the community as a result of the interventions Community are already aware of the consequence that may occur to them in case they mess up with workers, ladies now are aware that they will end up being dumped and so they are now very careful not to engage in relationships with road construction workers.

“Before you project interventions, GBV/VAC was so rampant and the cases registered at LC1 were so high but now, people are understanding and improving on taking responsibility in their homes. Your project has been covering both men, women and children compared to other projects that have ever been implemented and it has been a good approach compared to other projects that we have received. For example, USAID once implemented a project here of family planning and HIV, it was covering only women and this project promoted to the rise of GBV since they could introduce women to ARV’S, family planning without the knowledge of their husbands which led to increase of conflicts and family break ups. [District Community Development Officer-Dokolo]

The project contributed to increased awareness on referral for GBV cases . This was attested by the DCO of Dokolo who reported having received aa self-referral case due to the awareness and knowledge about referral of GBV cases.

One of the survivors that I handled with an issue of child neglect reported that she was handled very well after giving her the referral to the probation officer and she was served very fast and she was very happy for the services and appreciated that she wished to have known long ago about the support of JFCU in the community. [District Community Development Officer-Dokolo]

One of the challenges mentioned by GMCs was that community members had a lot of expectations of receiving handouts from them.



According to the GMC member interviewed, the community members were now empowered and are able to easily report and or refer cases of GBV happening in the community even in their own households.

The secretary of GMC 70 for example mentioned during the interview that he always closely worked with JFCU and always supported in linking the community to the contractor and other contracted teams by UNRA for GBV/VAC issues handled by JFCU and other NERAMP related issues. JFCU helped in sensitizing the community and children to help them prevent

issues that can come up with the road and now community members are empowered to report. It was reported that

there was no report or record of any road worker being involved in GBV/VAC in his area and one case that was registered was perpetrated by a community member who was now taken to jail for his wrongs.

The sustainability of services of the GMCs members was noted as some of the members promised to continue referring and managing reported GBV cases to them because they have been equipped with adequate knowledge to handle cases in case they occur. The reduction of GBV cases was highly attributed to the project interventions in the area. Currently GBV cases were not being heard of as they used to be before the project in their GMC Zone 70. In addition to that, he said that the situation of GBV/VAC had reduced in this community compared to how it used to be in the past before awareness programs were introduced.

(iv) Other implementers of GBV/VAC in the same communities and schools where JFCU was implementing its activities on mitigating GBV/VAC that could have contributed to the outcomes that the NERAMP project was seeking to achieve.

There were other existing organizations in the region including the DLG departments that were involved in sensitizing communities about GBV and VAC. However, JFCU was specifically on the GBV and VAC related to the NERAMP workers and along a specific stretch of the road corridor between Dokolo and Corner Kamdini. JFCU was reported to have handled a small portion of the districts yet the entire region is affected in one way or the other by the GBV and VAC incidences in the communities. Partners that supported in mitigating GBV/VAC in Kole district that were mentioned include Redeem, CBO'S in partnership with Plan Uganda, and Youth Alive. Other NGO'S who were engaging the district on GBV/VAC mentioned were LACODEF, CHILD HUG and World Vision but to a greater extent JFCU contributed a lot to GBV/VAC prevention along the road corridors according to monthly reports from Town council and sub-county CDO'S of Kole district such as Ayer Town council.

5.0 NEGATIVE IMPACTS OF THE PROJECT

There were no reported negative impacts of the project activities except that the road construction has led to an increased number of road accidents as motorists have started driving badly along the road. There was a reported increased risk of accidents to the children while crossing the road going to school and they requested for humps to control the speed mainly around the schools. Other reported that even the humps were causing a lot of noise pollution when vehicles especially rollies are running past them.

“The project also had negative impacts on the school community. Two balls for football for the children have so far been destroyed by vehicles; We live and are worried about children crossing the road but so far, no children have been knocked but a parent was knocked by a speeding vehicle and died. Another one was also knocked but didn't die. The good thing is that humps have been installed and vehicles slow. However, the noise from the lorries and car caused by the humps is very high and affects children especially in class during day” [Head Teacher Apii Primary school]

6.0 LESSONS LEARNT

A number of lessons were learnt from the implementation of the project.

- I. *Existing structures to address VAC and GBV issues in the districts are lacking human resource and financial capacity to extensively address these issues.*

Existing structures that handle GBV and VAC cases include the Police, courts of law, CDOs, Local council chairpersons, the Clan and cultural leaders in the community. Due to lack of resources, for example the Police is not able to follow up the perpetrators for arrests and even logistics to bring the witnesses to court. As a result, the legal processes to prosecute the perpetrators aborts. In some cases, the clan and cultural leaders tend to handle cases beyond their jurisdiction and as a result the perpetrators escape custodial sentences which is a negative to society. Even when defilement cases are reported to Police, they are not handled to logical conclusions because parents negotiate, and the cases are dropped because of failure to take off. There are no witnesses and even the complainants disappear and are not seen for court proceedings. Other cases are mismanaged by LCs and clan leaders.

- II. *Enactment of byelaws can reduce the risk of VAC and GBV in communities.*

Byelaws were by example found to be effective in controlling the VAC s in communities. A case of a successful byelaw was noted in Dokolo district which contributed to reduced reported and occurrences of VAC in the district.

- III. *The main causes of GBV and VAC cases in the community are mainly poverty, alcohol /drug abuse and low literacy levels.*

The Baseline survey indicated that there were several causes of and contributing factors to child violence which include domestic violence in homes which leads to child neglect and defilement, separation and or divorce of parents leaving the child in the hands of a single parent who may be irresponsible, polygamy where step mothers usually mistreat children born from a different woman, or many wives, many children not being provided for by the parents and in some cases families have as many as 15 children and lack of career guidance.

- IV. *Non-school going children are most exposed to VAC due to lack of knowledge on GBV/VAC and protection from caregivers (parents and relatives).*

Effective GBV and VAC case management continues to be undermined by the lack of accessible, integrated services and reporting mechanisms; weak institutional capacity across sectors (justice, health, education, and social welfare); and the absence of effective coordination of services in all districts. Second, the humanitarian response to the protection of survivors tends to generate parallel structures for provision of services which are not always aligned nor integrated with the national systems. Baseline Survey results indicated that 5.6% of respondents knew about community-based service providers that are currently providing services to survivors of child abuses in the community

- V. *Drug abuse is now rampant in schools and among school going children and fuels VAC and GBV in communities.*

Drug abuse was identified to be very rampant in out of school children and this abuse contributes towards VAC incidences among the girls in the communities. Those out of school experience violence in form of child labour, defilement, beating by fellow children mainly among street children, drug abuses, denial of food, denial of education and health services due to lack of financial support to access basic services. Many of these children were involved in hawking and selling goods on the streets and in small towns. Most of the children experiencing violence were identified

to be orphans, children of single mothers, children from polygamous marriages and abandoned children who do not know their parents or relatives

VI. Child abuse is occurring but is not being reported or is under reported among the children in and out of school in the communities.

A number of VAC incidences were not reported according to baseline findings. Interference by parents in the management of cases, especially defilement: Parents tend to agree and settle the matter out of court. Logistics - Transport is a challenge when handling cases by the police force. Corruption in the legal system-The Perpetrators often bribe the people in the legal system and so cases are dismissed. The cost of following VAC cases by authorities and even parents and relatives of the survivors is prohibitive in addressing the legal process to prosecute the perpetrators. LCs and clan leaders managing cases beyond their jurisdiction like defilements denies justice to the survivors. The perpetrators end up getting weak punishments and walk away scot free.

The project was praised by key stakeholders to have had a significant input in the non-occurrence of project related GBV and VAC mainly caused by the workers of the contractor that was hired under NERAMP. No project related VAC was reported and one case of GBV was reported and reviewed and could not be concluded to be a GBV since there was no violence reported in the case. The project was therefore successful and met its objectives substantially.

The identified limitations of the project based on the stakeholders' views is that the project confined itself to the communities along the road corridor and a distance of not more than one km . This meant that schools for example that were beyond this distance were not included under the project and the children in these schools did not directly benefit from the VAC messages of prevention from the project interventions. It was therefore recommended that such future projects need to expand beyond the one KM range to at least 5 km and or the entire district

The limited funding for actual implementation underestimated what should have been done. The VAC and GBV issues remain severe in the districts and limited funds constrained deeper continuous service delivery. Given that the children leave the schools to go to other schools and the local government staff are also always in transfers, this meant that the chain of communication about VAC and GBV issues was broken. For example, during the assessment, some of the CAOs that were in the district at the start of the project had been transferred by the time the impact evaluation was carried out. Consequently, the history and impact of the project was missed from such stakeholders.

The role of the GMCs was found to be very critical in mobilization of communities for the project activities , reporting and referral of cases of VAC and GBV in the communities. It is recommended that future projects should role out the GMC's structure to other areas beyond the project and the GMCs be restricted to each village to reduce walking distances for reporting and referral. GMCs are most likely to remain as structures to manage by reporting and referring GBV and VAC cases as these the members had been established by the community members .

Issues of children are multi-sectoral and the project prioritized prevention more than response to V.A.C. and future projects should include other activities benefiting children beyond mere messages on VAC. School needs include infrastructures and the projects could assess the schools and as a corporate responsibility , some of them after verification could benefit from the project based on the outcomes of the needs assessment and availed funds.

Resources for case management were found to be challenging for referral and management of VAC and GBV cases by the Police and DCOs. The project did not consider putting some budget resources for managing such cases if they occurred under the project. The districts lack the resources to manage the overwhelming GBV and VAC cases and therefore supporting the departments with a small budget under the project would be a strategic approach towards

project implementation. The luck the project has is that no cases were reported to DCO s for VAC that were project related.

It was observed that child protection partners in the district were not well sensitized about the project and child issues and the need to incorporate parenting in child protection programs was emphasized by the stakeholders. JFCU organized sensitization meetings but due to limited funds, not many of the partners were invited to participate in the meetings. The radio programs were the only effective means of reaching the majority of them but due to lack of time, the listeners were not given adequate time to ask questions of the moderators about GBV and VAC and as such information was missed out.

Another recommendation was that empowerment of the parents is critical to raise the child according to the constitution and policy. Provide and protect the child by utilizing the community structures informal and formal ones e.g. child wellbeing committees to ensure that children's rights are protected at family and community level where most of the child abuses happen. SRH rights issues are exposed to them from Primary 5 and beyond because the body reacts to behaviors naturally as the age increase.

Issues of GBV in the community are widespread and there is a need for more partners and more resources to address them in the districts. The project mainly concentrated on children in schools and those out of school did not benefit as much yet the children not in school have more issues that could have driven them out of school and need to be counseled to avoid being involved in VAC and end up being imprisoned . They need to be sensitized about VAC and its consequences on them as boy and girl child.

Future project design needs to consider the following areas for interventions; Area of mindset change of community and parents; Increased awareness about VAC and GBV; Case management of VAC; Resources to manage cases; Referral pathways awareness and Logistics to carry out activities; Educational Materials, and community engagement activities.

7.0 RECOMMENDATIONS FOR FUTURE SIMILAR PROJECTS

1. Funds disbursements to implementing partners should always be according to the agreement in the contract to reduce delays and affect implementation plans.
2. VAC and GBV are deep rooted issues in the community and the causes are mainly poverty, low levels of literacy and drug abuses. Addressing VAC and GBV need an integrated programmes addressing the key mentioned causes.
7. Keeping children especially girls, reduces the chances of experiencing VAC in particular teenage pregnancy that led to dropping of school. Programs supporting girl education should be part and integral of programs that are intended to prevent VAC and GBV. Need to extend GBV/VAC sensitization to non-school going children as well in the communities. .
3. Continuous and regular community sensitization about GBV especially targeting men helps to reduce GBV incidences.
4. Strengthening the capacity of other LG stakeholders involved in the prevention and control of the GBV and VAC in communities .
5. Continuous engagement with cultural leaders, clan leaders LCs, school's heads and teachers and community members about GBV and VAC and especially the referral mechanisms and levels of jurisdiction of GBV and VAC cases.

6. Support the law enforcement structures with resources to enable them carry out speedy investigations and prosecution of the perpetrators of GBV and VAC in the communities. In this case the Police being a key element for support.
7. Support the IPs with appropriate logistics to make them able to carry out activity implementation to avoid the challenges of climate and bad terrain.



ANNEXES-

ANNEX : MAPPED HEALTH FACILITIES AND EDUCATION INSTITUTIONS ALONG DOKOLO- KAMDINI ROAD CORRIDOR

	SCHOOLS	Sub-county	District
1.	Alyec Primary School	Acaba	Oyam
2.	Fr Oryang Memorial Primary School	Acaba	Oyam
3.	Atapara Senior Secondary School	Loro	Oyam
4.	Odiike SDA Nursery and Boarding Primary School	Loro	Oyam
5.	St Pete's Senior Secondary School	Loro	Oyam
6.	Loro Parent's Nursery and Primary School	Loro	Oyam
7.	Oyam Progressive Nursery Day and Boarding Primary School	Loro	Oyam
8.	Loro Junior Nursery and Primary School	Loro	Oyam
9.	The Golden Gift Nursery Teacher's College	Loro	Oyam
10.	Charlie & Maggie Foundation Nursery and Primary School	Loro	Oyam
11.	Union Vision Mission Christian Mixed Day & Boarding Nursery and Primary School	Loro	Oyam
12.	Everest High School	Loro	Oyam

13.	Iyangi Primary School	Loro	Oyam
14.	Alidi Primary School	Loro	Oyam
15.	Agulurude Primary School	Loro	Oyam
16.	Alyat Primary School	Aboke	Kole
17.	Union Vision Mission Christian Mixed Day & Boarding Nursery and Primary School	Aboke	Kole
18.	St Luke Alaga	Aboke	Kole
19.	City high school	Aboke	Kole
20.	Baramindyang Primary school	Ayer	Kole
21.	King Solomon Nursery & Primary school	Ayer	Kole
22.	Otino wa primary school	Ayer	Kole
23.	Apii Primary school	Ayer	Kole
24.	Ilera Primary school	Ayer	Kole
25.	St Mary's institute of health sciences	Ayer	Kole
26.	Light Vocational Secondary school	Lira Sub county	Lira
27.	Lira University	Lira Sub county	Lira
28.	Saving Grace Primary & Nursery school	Lira Sub county	Lira
29.	Amuca Primary school	Lira Sub county	Lira

30.	Lira Secondary school	Lira Sub county	Lira
31.	Fountain institute of science and Technology	Lira Sub county	Lira
32.	Amuca SDA secondary school	Lira Sub county	Lira
33.	Amuca SDA Primary school	Lira Sub county	Lira
34.	Asili Girls vocational secondary school	Lira Sub county	Lira
35.	Hill side Annex mixed day and Boarding primary school	Ojwina Division	Lira
36.	Fountain Boarding and primary school	Ojwina Division	Lira
37.	Ober Primary school	Ojwina Division	Lira
38.	St James senior secondary school	Ojwina Division	Lira
39.	Bishop kami primary and Nursery school	Ojwina Division	Lira
40.	Lira Primary school	Ojwina Division	Lira
41.	Lira Town College	Lira Central Division	Lira
42.	V.H Public school	Lira Central Division	Lira
43.	Uganda Technical college-Lira	Lira Central Division	Lira
44.	Elia Olet Primary school	Lira Central Division	Lira
45.	Obanga pew any PAG Technical college	Lira Central Division	Lira
46.	Faith Secondary school	Lira Central Division	Lira

47.	Rapah Girls secondary school	Lira Central Division	Lira
48.	Jerusalem school of Nursing	Lira Central Division	Lira
49.	Ave Maria vocational training institute	Adekokwok	Lira
50.	Acwikot Primary school	Adekokwok	Lira
51.	Rima Primary school	Adekokwok	Lira
52.	Probel primary school	Adekokwok	Lira
53.	Mentor annex primary school	Adekokwok	Lira
54.	Uganda Christian institute of professional development	Adekokwok	Lira
55.	Dr. Obote College	Adekokwok	Lira
56.	St Katherine Secondary school	Adekokwok	Lira
57.	Canon Lawrence Primary teachers college	Adekokwok	Lira
58.	Canon Lawrence Demonstration Primary school	Adekokwok	Lira
59.	Brother Conrad Technical school	Adekokwok	Lira
60.	Adwila Primary school	Adekokwok	Lira
61.	Alpha Christian High school	Amac	Lira
62.	Amac Modern Secondary school	Amac	Lira
63.	Wiodyek primary school	Wiodyek	Lira

64.	Bufa Day and Boarding primary school	Wiodyek	Lira
65.	Abutadi Primary school	Wiodyek	Lira
66.	Abutadi SS	Wiodyek	Lira
67.	Amex Vocational & Training institute	Wiodyek	Lira
68.	Redeemer Vocational, Nursery & Primary school	Wiodyek	Lira
69.	St Maria Nursery and Primary school	Wiodyek	Lira
70.	Abur primary school	Dokolo Town council	Dokolo
71.	St .Francis Vocational training school	Dokolo Town council	Dokolo
72.	St .john Bosco secondary school	Dokolo town council	Dokolo
73.	Angwechibange community Nursery school	Dokolo Town council	Dokolo
74.	Angwechibange Primary school	Dokolo Town council	Dokolo
75.	Dokolo primary school	Dokolo Town council	Dokolo
76.	St.Marys Nursery and primary school	Dokolo Town council	Dokolo
77.	Alpha and Omega comprehensive school	Dokolo Town council	Dokolo
78.	Dokolo central primary	Dokolo town council	Dokolo
79.	Dokolo Progressive school	Dokolo Town council	Dokolo
80.	Iguli primary	Amwoma	Dokolo

81.	Iguli Girls	Amwoma	Dokolo
82.	Akolodong primary school	Amwoma	Dokolo
83.	St Peters Nursery school	Adwoki	Dokolo
84.	Adwoki Primary School	Agwata	Dokolo
85.	Adwoki senior school	Agwata	Dokolo
86.	Adwoki Technical Training Institute	Agwata	Dokolo
87.	Agwata primary school	Agwata	Dokolo
88.	Agwata secondary school	Agwata	Dokolo
89.	Amuda primary school	Agwata	Dokolo
90.	St Barnabas nursery school	Agwata	Dokolo
91.	Gilgal Junior school	Agwata	Dokolo
92.	Adok seed secondary school	Agwata	Dokolo
93.	Hassa Memorial primary school	Agwata	Dokolo
94.	HEALTH FACILITIES		
95.	Agulurude Health Centre III	Loro	Oyam
96.	Amuca SDA Health Centre III	Lira Sub county	Lira
97.	Ober Health Centre III	Ojwina Division	Lira

98.	Lira Pentecostal Health center III	Lira Central Division	Lira
99.	Boroboro Health Centre III	Adekokwok	Lira
100.	Dokolo Health Centre IV	Dokolo Town council	Dokolo
101.	Agwata Health Centre III	Agwata	Dokolo
102.	Amuda Health Centre II	Agwata	Dokolo
103.	POLICE STATION		
104.	Loro Police Station	Loro	Oyam
105.	Corner Aboke police Post	Aboke	Kole
106.	Apii Police post	Ayer	Kole
107.	Amuca Police post	Lira Sub county	Lira
108.	Ojwina Police Post	Ojwina	Lira
109.	Te Olam Police post	Ojwina	Lira
110.	Lira Police Station	Lira central	Lira
111.	Angwetangwet police post	Adekokwok	Lira
112.	Dokolo Police Station	Dokolo Town Council	Dokolo
113.	RegoregoM Police post	Amwoma	Dokolo

IEC materials developed by Primary school children

END GENDER BASED VIOLENCE AND VIOLENCE AGAINST CHILDREN

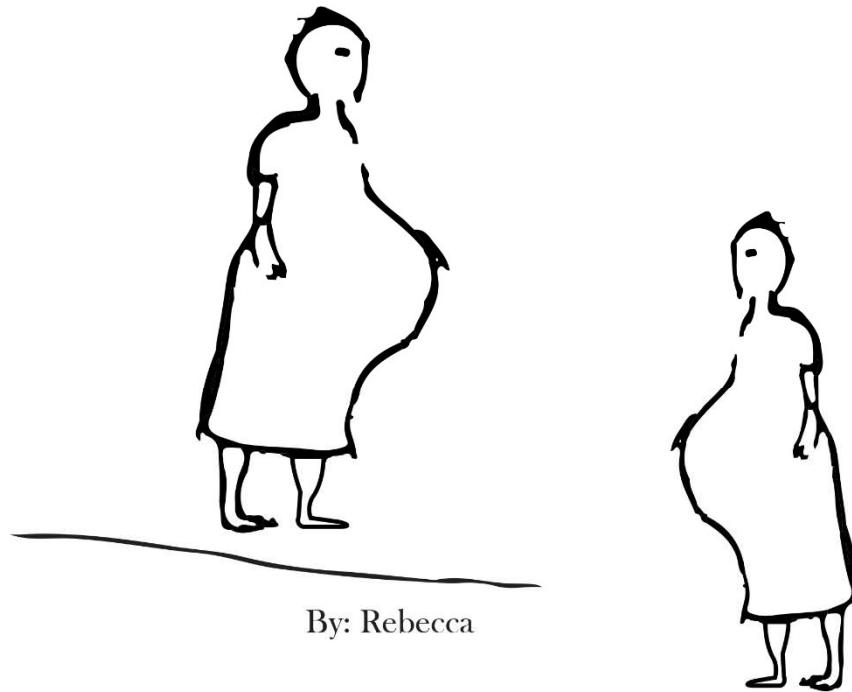
STOP
VIOLENCE AGAINST
CHILDREN



By: Ayo & Aparad Joan Mercy

END GENDER BASED VIOLENCE AND VIOLENCE AGAINST CHILDREN

AVOID
TEENAGE PREGNANCY



By: Rebecca