



Endline Assessment for Multi-Sectoral Assistance to South Sudanese Refugees and Ugandan Host Communities in Bidibidi, Palorinya and Rhino Camp Settlements



Funded by
European Union
Civil Protection and
Humanitarian Aid



Consortium Partners

Table of Contents

Table of Contents.....	ii
List of Tables	iv
List of Figures.....	v
Acronyms.....	vii
Acknowledgements	ix
Executive Summary.....	x
1. Introduction	1
1.1 Background Context.....	1
1.2 Endline Scope.....	2
2. Approach and Methodology.....	2
2.1 Approach to the Assessment.....	2
2.2 Sampling and Survey Coverage.....	3
2.3 Data collection and analysis.....	5
2.4 Study Limitations.....	6
3. Review of Project Indicators	7
4. Relevance of the Action	9
5. General Protection Findings	11
5.1 Demographic Profiles of Respondent.....	11
5.2 Protection.....	12
Indicator G1.3: % of persons/target population in a given context reporting an improved feeling of safety and dignity by the end of the intervention compared to at the beginning.....	12
Indicator R1.4: # of girls, women/HH with increased/ appropriate knowledge of their rights.....	14
Indicator R1.3: Number of survivors who receive an appropriate response.....	19
Indicator R1.4.1: % of girls, women, men, boys with appropriate information on GBV prevention and response.....	20
Indicator R1.4.2: % of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months.....	21
Indicator R1.4.3: % of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the last 12 months.....	21
5.3. Child Protection.....	23
5.3.1 Demographic Characteristics of Surveyed Children.....	23
5.3.2. Category of vulnerable children and children at risk exist in the community.....	23
5.3.3. Knowledge about children’s rights.....	24
5.3.4. Children Safety and Dignity.....	24
R1.1: Number of boys and girls provided with psychosocial support on a daily basis, through attending recreational activities and structured play facilitated at CFS.....	25
R1.2 Number of boys and girls benefitting from case management, including referral to legal, medical, PSS, FTR or other services as required.....	26

5.3.5. Protective Education.....	28
G1.1 Number of conflict-affected children with access to protective education.....	29
R.3.4 Percent of children enrolled in AEP classes successfully complete Level 3.....	29
8. Water, Sanitation and Hygiene (WASH) Findings	32
8.1. Demographic Profiles.....	32
8.2. WASH Indicator Performance.....	34
Indicator G1.4: Percent of target population with adequate WASH services and hygiene practices.....	34
Indicator R2.1: Percentage of households having access to sufficient and safe water for domestic use.....	37
Indicator R2.2: Percent of people with access to dignified, safe, clean and functional excreta disposal facilities.....	39
Indicator R2.3: Percent of the households with access to hand washing facilities.....	40
Indicator R2.4: # of people reached with hygiene promotional messages.....	41
9. Livelihoods Survey Findings.....	48
Indicator R3.1: # of individuals with improved access to agricultural inputs and use of climate smart agricultural practices.....	54
Indicator R3.2: # of farmers and females at risk who receive cash grants for protection of livelihood assets or as part of the ALP.....	57
Indicator R3.3: # of individuals engaged in Income Generating Activities (IGAs).....	58
Indicator R4.1: # of beneficiaries actively saving (VSLA, SACCO, commercial bank).....	64
Indicator R4.2: # of market actors who are able to serve a wider customer base.....	67
Indicator R4.3: # of market structures and livelihood community infrastructure completed.....	68
Indicator R4.4: # of agencies benefitting from cash trainings and standardized tools/approaches.....	70
10. Project Efficiency and Sustainability	71
10.1. Synergy and collaboration with consortium partners and other stakeholders.....	71
10.2. Sustainability of project results.....	771
11 Lessons Learned	73
12 Recommendations	74
Appendices.....	75
<i>Appendix 1: List of people Interviewed</i>	<i>75</i>
<i>Appendix 2: Key Informants Guide</i>	<i>76</i>
<i>Appendix 3: Focus Group Discussion Guide</i>	<i>81</i>

List of Tables

Table 1: Key Results Areas of the Project.....	1
Table 2: Evaluation Coverage.....	3
Table 3: Sampling techniques for the categories of respondents at different levels.....	4
Table 4: Samples size allocation by settlement.....	5
Table 5: Summary of the Key Indicator Performance.....	7
Table 6: Demographic Information of Protection Respondents.....	11
Table 7: Percent of respondents that indicate safety concerns limits accesses to service points	13
Table 8: Specific human rights which respondents are aware of.....	14
Table 9: Percent of respondents sensitized on human rights.....	15
Table 10: Existence of harmful Behaviours & Violence.....	17
Table 11: Beneficiaries Confidence in seeking help form the GBV service providers	19
Table 12: Demographic Characteristics of the Surveyed Children	23
Table 13: Survey Results on Cash Grants to facilitate Children’s education through ALP	30
Table 14: Household Demographic profiles	33
Table 15: Water Source used by the respondents.....	35
Table 16: Percentage of households that have heard about Hygiene promotional messages	42
Table 17: Percentage of the households visited by the hygiene promoter/VHT	43
Table 18: Respondents' participation in hygiene promotion meetings/events	44
Table 19: Percent of the households having soap of washing & solid waste disposal.....	45
Table 20: Respondents' Menstrual Hygiene Knowledge, Attitudes and Practices.....	46
Table 21: Demographic Characteristics of Livelihood Respondents.....	48
Table 22: Severity weights adopted for each coping strategy.....	51
Table 23: Reduced Computed Coping Strategy Index (RCSI) – Endline vs Baseline	53
Table 24: Access to Vouchers to purchase agricultural inputs	55
Table 25: Change Caused by the Agricultural Practice (n=330).....	56
Table 26: Access to Agro-dealers.....	68

List of Figures

Figure 1: Percentage of the target population reporting an improved feeling of safety and dignity	13
Figure 2: Percentage of target beneficiaries with increased/appropriate knowledge of their rights	14
Figure 3: Percentage of respondents having knowledge of children’s rights	16
Figure 4: Percent of the respondents mentioning at least two or more sexual and gender based violence practices.....	17
Figure 5:Percent of girls, women, men, boys with appropriate information on GBV prevention and response	21
Figure 6: Percent of women and girls subjected to physical, sexual and psychological violence...22	
Figure 7: Average age women get married & whether it has changed.....22	
Figure 8: Respondents indicating the categories of vulnerable children and children at risk exist in the community	24
Figure 9: Children's perception about current status of their safety from danger and violence25	
Figure 10: Percentage of Children aware of their human rights	25
Figure 11: Percentage of respondents aware of the available Case Management Services	26
Figure 13: Percentage of children benefiting from the various programs.....	26
Figure 14: Knowledge about harmful practices against children.....	27
Figure 15: Respondents' knowledge of the harmful practices against children	28
Figure 16: Percentage of respondents enrolled in AEP	28
Figure 17: Percent of conflict-affected children with access to protective education.....	29
Figure 18: Percentage of beneficiaries with access to adequate WASH services and hygiene practices	34
Figure 19: Percentage of households accessing water for domestic use.....	37
Figure 20: Percent of households having sufficient water for domestic use (endline vs baseline) .38	
Figure 21: Respondents' rating of the quality of water sources established	39
Figure 22: Percentage of households with access to dignified, safe, clean and functional excreta disposal facilities.....	40
Figure 23: Percent of households with handwashing facilities	41
Figure 24: Percentage of households that have been reached with hygiene promotional messages and hand washing kit.....	42
Figure 25: Support provided by Mercy Corps/DCA according to respondents	51
Figure 26: Reduced Coping Strategy Index (RCSI): (Baseline Vs Endline)	54
Figure 27: Farmer practicing improved cultivation practices	56
Figure 28: Frequency at which cash grants for livelihood were received and amount received by targeted beneficiaries	58
Figure 29: Uses of the cash grants received for protection of livelihood assets.....	58
Figure 30: Percentage of Respondents engaged in Income Generating Activities.....	59

Figure 31: Percentage of respondents that received IGA training	60
Figure 32: Rating of the training received	61
Figure 33: Target Beneficiaries Level of engagement in Agriculture enterprise of Business (Endline Vs Baseline).....	62
Figure 34: Type of agricultural enterprise or business engaged in by the target beneficiaries.....	62
Figure 35: Target beneficiaries applying improved agricultural inputs	63
Figure 36: Percentage of Respondents trained in various business skills	64
Figure 37: Average amount saved	64
Figure 38: Where Beneficiaries keep their savings.....	65
Figure 39: Percent of respondents with a debt and form of debt.....	66
Figure 40: Percent of respondents that own a mobile phone.....	67
Figure 41: Major sources of information on market opportunities of agricultural produce	68
Figure 42: Average Amount Saved from previous harvest (Ushs.).....	69
Figure 43: Distance to the Nearest Market	70

Acronyms

AEP	Accelerated Education Program
ALP	Accelerated Learning Program
ASP	Assistant Superintendent of Police
CFS	Child Friendly Spaces
CSA	Climate Smart Agriculture
CSI	Coping Strategy Index
CTP	Cash Transfer Payments
DCA	DanChurchAid
DCDO	District Community Development Officer
DRC	Danish Refugee Council
ECHO	European Commission's Humanitarian Aid and Civil Protection department
EU	European Union
FGD	Focus Group Discussion
FTR	Family Tracing and Reunification
GADC	Gulu Agricultural Development Company
GBV	Gender Based Violence
GSI	Governance Systems International
HH	Household
IGA	Income Generating Activity
IRC	International Rescue Commission
KAP	Knowledge Attitudes and Practices
KIIs	Key Informants Interviews
KOI	Key Outcome Indicators
LC	Local Council
MC	Mercy Corps
MHM	Menstrual Hygiene Management
NFI	Non Food Item
NGO	Non-Governmental Organization
NRC	Norwegian Refugee Council
OC	Officer in Charge
ODK	Open Data Kit
OPM	Office of the Prime Minister
OXFAM	Oxford Committee for Famine Relief
PHH	Post-Harvest Handling
PLE	Primary Leaving Examinations
PSN	People with Special Needs
PSS	Psychosocial Support
PWD	Person with Disability
RCSI	Reduced Coping Strategy Index
RWC	Refugee Welfare Council

SACCO	Savings and Credit Cooperative Organization
SC	Save the Children
SCI	Save the Children International
SRH	Sexual Reproductive Health
SGBs	Super Grain Bags
UNHCR	United Nations High Commissioner for Refugees
VHT	Village Health Team
VSLA	Village Savings and Loans Association
WASH	Water, Sanitation and Hygiene
WFP	World Food Program
WUC	Water User Committee

Acknowledgements

GSI would like to express its appreciation to Mercy Corps Uganda for assigning us the opportunity to conduct the endline assessment of the **“Multi Sectoral Assistance to South Sudanese Refugees and Host Communities in West Nile (Bidibidi, Palorinya and Rhino Camp Settlements)”**. The company would also want to appreciate whoever participated in the exercise that provides the key milestones realized by the project.

Special appreciation goes to Mercy Corps West Nile Team Leader & Consortium Program Manager, Grace Becton, for her tireless efforts to ensure the final output is produced. Special thanks also goes to officials from Mercy Corps, CARE, Oxfam, Save the Children and DanChurchAid, who meticulously worked with us to improve the endline survey tools, provided background documents for review, assistance during training of enumerators, provision of guidance during data collection and review of the draft report.

To all the beneficiaries of the project and stakeholders, we are greatly indebted for your efforts in ensuring the success of the project and easing the work of the evaluators.

Governance Systems International (GSI)

Executive Summary

Background and Methodology

Uganda has been hosting refugees and asylum seekers since achieving its independence in 1962. The country has some of the most progressive and generous refugee laws and policies for refugee-hosting in the world.¹ According to the Office of the Prime Minister – United Nations High Commission for Refugees (OPM-UNHCR) verification exercise which concluded in October 2018, Uganda is estimated to host a total of 1.1 million refugees, of which 73% (801,555) come from South Sudan.²

Significant host country and international resources are required to provide protection and provision of services to such a huge refugee population with a number of financing mechanisms having been utilized to manage the refugee influx. Funding remains insufficient and local governments are forced to share their existing meager resources with refugee communities in often remote and geographically marginalized areas of the country already suffering from lack of infrastructure. The Government of Uganda, through the Office of the Prime Minister (OPM), allocates funds for refugee settlement and management in the national budget. However, these resources do not meet the humanitarian needs of refugees.

The Joint MultiSector Needs Assessment conducted by REACH with support from UNHCR, identified several humanitarian needs among refugee and host community populations in Uganda. In this report, the West Nile districts were identified to have the highest number of vulnerable refugee households. Specifically, Arua had the highest vulnerable refugee households (66%), followed by Yumbe (63%) and Moyo (48%).

Mercy Corps and its consortium partners Save the Children (SCI), CARE, Oxfam, and DanChurchAid (DCA) implemented the 21-month “**Multi Sectoral Assistance to South Sudanese Refugees and Host Communities in West Nile (Bidibidi, Palorinya and Rhino Camp Settlements)**” from May 2017 to February 2019, funded by European Union Civil Protection and Humanitarian Aid (ECHO). The project delivered life-saving and protection assistance to vulnerable South Sudanese refugees and host communities in Bidibidi (Yumbe), Palorinya (Moyo) and Rhino Camp (Arua) settlements through 1) General and child protection; 2) Water and sanitation infrastructure and hygiene promotion; 3) Livelihoods and cash-based interventions; and 4) Market development, financial services and enhanced coordination. Specifically, the project aimed to increase resilience of South Sudanese refugees and host communities while promoting peaceful coexistence between and among the target groups.

In 2017, the project conducted a baseline survey to establish initial benchmarks for project indicators. The project also tracked project results through activities such as Post Distribution Monitoring surveys, routine monitoring, and reflection sessions with consortium monitoring and evaluation focal points meeting monthly to update progress. To this end, the external evaluation at endline was undertaken to review project performance focused on: relevance, effectiveness,

¹ Uganda’s Contribution to Refugee Protection and Management, UNDP Program, 2017

² OPM – Uganda Refugee and Asylum seekers, Feb 2019

efficiency, impact, sustainability and documentation of lessons learnt for replication and future programming.

This evaluation was conducted in a consultative process with all stakeholders and consortium partners; and a combination of both qualitative and quantitative designs were employed. Both primary and secondary data was collected. Primary data was collected through surveys amongst the project beneficiaries, Focus Group Discussions (FGDs) and Key Informant Interviews (KIIs). The reduced coping strategy index (RCSI) was determined on the basis of a series of questions that were asked to the respondents about how frequently they utilized a list of five (5) possible consumption coping strategies in response to times when the household did not have food or enough money to buy food in reference to a 7-day recall. It was calculated using the WFP methodology (frequency x weight)³. The results were compared with the re-calculated RCSI for the baseline to understand the change. The RCSI was administered to a total of 1,004 respondents, statistically sampled from all the three project settlements of Bidibidi (549), Palorinya (157), and Rhino Camp (294).

Key Findings

General Protection Findings

G1.1: Number of conflict-affected children with access to protective education

Project monitoring documents indicate 8,639 conflict-affected children have access to protective education as a result of the Action, 187% of the target. Study results indicate 63% (75% male, 51% female) of conflict-affected children were accessing protective education at endline. This is significantly above the baseline value of 51% (54% male, 48% female). It should be noted that males (75%) were more likely to benefit than females (51%).

G1.3: 'Percent of persons/target population in a given context reporting an improved feeling of safety and dignity by the end of the intervention compared to at the beginning

90% of the respondents at endline reported an improved feeling of safety in the community they live and 55% reported having freedom of movement to access key services. Aggregating these measurements, the final calculation for this indicator is 73% of people reporting an improved feeling of safety and dignity compared to 51% at baseline. In both time frames, the respondents cited the police stations (42% at baseline, 27% at endline), medical services (33% at baseline, 32% at endline), schools (26% at baseline, 28% at endline), and Child Friendly Spaces (21% at baseline, 26% at endline) as the major services that are challenging to access due to safety concerns.

R1.1: Average number of boys and girls provided with psychosocial support on a daily basis, through attending recreational activities and structured play facilitated at CFS

According to project monitoring, CFS centers reached an average of 2,448 boys and girls a day through recreational activities and structured play, 116% of the target. When respondents were asked at endline if they benefitted from the various project services, 75% (78% males, 72% females) of the children interviewed indicated they benefitted from the CFS.

³ Coping Strategies Index: Field Methods Manual Second Edition, 2008

R1.2: Number boys and girls benefitting from case management, including referral to legal, medical, PSS, FTR or other services as required

According to project monitoring documents, 2,212 benefitted from case management services, achieving 205% of the target.

R1.3: Number of survivors who receive an appropriate response

Project monitoring indicates 458 survivors received an appropriate response, 172% of the target. The survey results indicate 85% (43% female, 42% male) have confidence in seeking support from health professionals whenever faced with violence, 86% (45% female, 41% male) have confidence in seeking help from psychosocial support services, 77% (42% female, 38% male) have confidence at staying in a survivor protection house, and 83% (42% female, 41% male) have confidence in seeking help from police. There was a reduction in the percentage of target beneficiaries of ever-partnered women and girls aged 15 years and older reporting being subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months from 55% at baseline to 45% at the endline. The percent of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the last 12 months also reduced from 54% to 46% at the endline.

R1.4: Number of girls, women with increased/appropriate knowledge of their rights

Project reporting indicates 132,477 (including 40,000 at baseline) women and girls have increased/appropriate knowledge of their rights. 80% of respondents at endline indicated they received sensitization on human rights. The survey identified that overall, there has been a slight increase in respondents' knowledge on human rights. At the endline, 40% demonstrated increased or appropriate knowledge of their rights (a 2% change from baseline). Also girls and women demonstrated an increase in appropriate knowledge of their rights with an increase from 30% at baseline to 40% at endline.

R3.4: Percent of children enrolled in AEP classes successfully complete Level 3

Project monitoring indicates 515 students, or 95% of the target, successfully completed level 3 by the end of the project.

Water Sanitation and Hygiene (WASH)

G1.4: Percent of target population with adequate WASH services and hygiene practices

Access to WASH services improved significantly from 43% of respondents at baseline to 74% at endline (no significant difference in host vs refugee). Achievement is slightly above the 70% target. 61% of endline respondents (30% refugees, 31% host community) were within 500m from the nearest water point. This is twice the figure at the baseline, hence an overall reduction in the distance to access water. However, close to 40% are still at a distance of more than a kilometer to the nearest water point.

R2.1: Number of people having access to sufficient and safe water for domestic use

Project monitoring indicates the Action increased the number of people having access to sufficient and safe water for domestic use by 35,040 individuals, 103% of the target.

The endline survey indicated that the percentage of respondents with access to sufficient and safe water for domestic use nearly doubled from baseline to endline (33% to 68%). Hosts' access to water for domestic use increased more (24% to 68%) than that of refugees (33% to 68%). The analysis also indicated that 22% (31% refugees, 14% host community) of the households don't have sufficient water for domestic use on a daily basis. Coping mechanisms included cleaning less clothes (43%), washing less (21%), rationing water use (19%), or buying water from elsewhere (14%).

R2.2: Number of people with access to dignified, safe, clean and functional excreta disposal facilities

Project monitoring documents indicated 5,530 individuals have access to dignified, safe, clean and functional excreta disposal facilities, 111% of the target. The endline survey indicated the percentage of households with a functional latrine complete with slab, walls, roof and door was at 53% (68% refugees, 39% host community) compared to 52% at baseline. The percentage of households with latrines within 50 meters from dwellings was at 87% (78% refugees, 95% host community) compared to 51% at baseline, and a proxy indicator 'the percentage of households satisfied with the latrine facility they use in terms of safety, cleanliness and functionality' to measure the percentage of households with latrines observed to be clean and located in a swept environment (in working order and properly maintained) was at 59% (66% refugees, 52% host community) compared to 50% at baseline. These measures were used to find the aggregate percentage of households with access to dignified, safe, clean and functional excreta disposal facilities at 66% (71% refugees, 62% host community). This is higher than the 51% (46% refugees, 60% host community) realized at the baseline with significant improvement seen in refugee settlements.

R2.3: Percent of households with access to hand washing facilities

39% (33% refugees, 35% host community) of households at endline had access to a handwashing facility with soap compared to 30% at baseline. This is below the target by 11%. Soap was not a priority for household purchasing given limited income and resources. A higher percentage (46%) of households have handwashing facility with water only.

R2.4: Number of people reached with hygiene promotional messages

83% of the households (84% refugees, 83% host community) at endline had been reached with hygiene promotional messages in the last 12 months compared to only 55% at baseline. Project monitoring indicates 146,842 individuals were reached by the Action overall.

Livelihoods

G1.2 Average Coping Strategy Index

At endline, the full CSI was re-calculated to the reduced CSI (RCSI) to facilitate comparison across the geographical locations of the settlements. The RSCI changed from 9.9 at baseline to 11.2 at the endline, demonstrating an increase in food insecurity since the baseline. Households are relying more on borrowing or seeking for help from friends and relatives than at baseline (3.2 endline, 2.3 baseline). This can be partly explained by the timing of the evaluation, which was conducted in late January/early February, a predominantly dry period when people have little or no harvest left and are struggling to meet basic household food needs. In contrast, the baseline was conducted in November, a predominantly rainy period when harvest season is in progress.

The results also indicate that at both endline and baseline, refugees have proved to be more food secure than host communities. Consistent food provisions from WFP contribute to food security at the household level in the refugee settlements. At settlement level, Palorinya was found to have a lower RCSI (10.3) than at baseline, realizing the best improvement (from 16.2 at baseline to 10.3 at endline). Both Bidibidi and Rhino had better RCSI at baseline (9.05 and 9.2 respectively) than Palorinya, however RCSI scores had increased at endline (11.2 and 12.1 respectively).

Indicator R3.1: Number of individuals with improved access to agricultural inputs and use of climate smart agricultural practices

Project monitoring indicates 99% of the target farmers have improved access to agricultural inputs via vouchers (11,439 individuals). 93% of these farmers indicated at endline they were practicing at least one climate smart agricultural practice. The majority (35%) of the farmers indicated practicing perma-gardening including kitchen gardening and/or sack molds. Others (26%) revealed that they practice soil health and management including mulching, organic fertilizer usage and soil water/moisture content management. Other cultivation practices included row planting (21%), irrigation practices (5%), and tillage practices (6%). At baseline, 89% of livelihood respondents reported having no access to agricultural inputs and no use of climate smart agricultural practices.

R3.2: Number of farmers who receive cash grants for protection of livelihood assets or as part of the ALP

The survey data indicates 28% of livelihood respondents received cash grants. 32% of respondents received cash grants as part of AEP and 60% of the targeted farmers received cash grants for protection of livelihood assets. This is far above the 5% respondents at the baseline who indicated having received cash grants. Project monitoring indicate 3,213, or 84% of the target, were reached with grants for asset protection or as a part of AEP. Project partners also noted a discrepancy in how the target for this indicator was calculated at proposal stage which is the reason for the seemingly low achievement: farmers were counted as direct beneficiaries while AEP households were calculated with indirect beneficiaries (multiplying by 5 for average HH size). Recognizing this is inconsistent within the same indicator, project reporting at endline counts only direct beneficiaries for both farmers and AEP. However, if indirect AEP beneficiaries were included as they were at proposal stage, the project overachieved the target by 129% reaching 4,917.

R3.3: Number of individuals engaged in Income Generating Activities (IGAs)

According to project documents, a total of 820 direct recipients benefited from cash transfers to rebuilt livelihood assets, 103% of the target. The endline survey showed 42% of the target households are engaged in IGAs, up from 17% of households at baseline. With 42% of HHs involved in some kind of IGA, this indicates spillover effects of business trainings and/or increased incomes in supporting business development outside of those that received cash grants.

The survey results also revealed that 74% (57% refugees, 90% host community) of the target households are engaged in an agricultural enterprises or business activity. This is a significant rise from only 21% of the target population (12% refugees, 58% host community) that engaged in agricultural activities or business in the 12 months prior to the baseline survey. The main agricultural enterprise or business activity engaged in by the project beneficiaries is crop farming by 83% (43% refugees, 40% host community), followed closely by vegetable growing at 80% (36% refugees,

44% host community), among others. The analysis also showed 61% of the target beneficiaries applied improved agricultural inputs in their agricultural enterprises (73% host communities, 43% refugees).

R4.1: Number of beneficiaries (host/community) actively saving (VSLA, SACCO, commercial bank)

The project was able to realize 85% of the project target according to savings data from the partners. The project targeted 3,450 beneficiaries to be saving and by the end of the project, 2,931 were actively saving in VSLAs. *Actively saving* was considered to be saving for at least three months. The percentage of respondents saving with VSLA's rose from 10% at baseline to 39% at the endline again indicating spillover impacts of trainings and sensitizations on the importance of savings. The endline also saw a significant reduction in the number of people keeping their savings at home from 71% at baseline to 39% at endline. When asked about the source of savings during the last saving session, majority noted that savings came from harvest of the previous season (39% refugees, 40% host communities); and money from business sources (21% refugees, 26% host communities).

While savings trends were generally positive, do no harm that concerns persist with 30% of respondents (33% refugees, 19% hosts) at endline indicating they had ever sold any of their belongings to raise money for a saving scheme.

R4.2: Number of market actors (agro-dealers, suppliers) who are able to serve a wider customer base due to this Action

Both MC and DCA were able to achieve 116% of the set target helping 22 agro-dealers/suppliers to expand their customer base as a result of engagement in seed and tool fairs as well as exchange visits with national level seed companies. The endline survey also revealed that 62% of the households have access to agro-dealers (61% refugees, 64% host communities); and out of these 47% (42% refugees, 52% host communities) revealed the number of agro-dealers or suppliers has increased since the project was launched.

R4.3: Number of market structures and livelihood community infrastructures completed

100% (5) of the market structures and livelihood community infrastructures were established by the end of the project. 59% (69% refugees, 49% host communities) of respondents at endline indicated the distance to markets has reduced in the last 21 months.

R4.4: Number of agencies benefitting from cash trainings and standardized tools / approaches

Information from DCA indicates 12 agencies benefitted from cash trainings and standardized tools/approaches, 100% achievement.

1. Introduction

1.1 Background Context

Mercy Corps and its consortium partners Save the Children (SCI), Care International (CARE), Oxfam International (OXFAM) and DanChurchAid (DCA) implemented the 21-month European Union Civil Protection and Humanitarian Aid (ECHO)-funded action from May 2017 to February 2019. Titled “Multi Sectoral Assistance to South Sudanese Refugees and Host Communities in West Nile (Bidibidi, Palorinya and Rhino Camp Settlements)”, the project delivered life-saving and protection assistance to vulnerable South Sudanese refugees and host communities in Bidibidi, Palorinya and Rhino Camp settlements through 1) General and child protection; 2) Water and sanitation infrastructure and hygiene promotion; 3) Livelihoods and cash-based interventions; and 4) Market development, financial services and enhanced coordination. Specifically, the project aimed to increase the resilience of South Sudanese refugees and host communities while promoting peaceful coexistence between and among the target groups.

The project included four key result areas with each consortium partner taking lead or co-implementing a specific key result:

Table 1: Key Results Areas of the Project

Key Result Area	Set Targets	Responsible Consortium Partners
Result 1: Reduced risk of abuse, exploitation and violence (GBV), and improved social cohesion through improved access to child and community-based protection services and community-based peace building dialogues	Provide 8,500 individuals with Protection (including GBV services);	CARE International
	Provide 100,000 beneficiaries with educational information and promotion through community events.	
	Provide 4,330 individuals (3,270 children and 1,060 adults) with Child Protection activities.	SCI
Result 2: Refugee and host communities have improved, sustained & adequate access to and use of safe water, sanitation facilities and adopted practice of safe hygiene principles	Provide 37,710 beneficiaries with safe water access, latrines and hygiene kits; Provide 146,300 beneficiaries with educational sensitizations.	Oxfam International
Result 3: Refugees and host communities have increased income through agriculture and income generating activities	Provide 13,376 farmers and entrepreneurs the knowledge and tools necessary for improving self-reliance.	Mercy Corps & DCA
Result 4: Improved market functions and coordination for improved access to financial services, linkages to the market and coordination of cash actors		

In November 2017, a baseline was conducted to establish the initial benchmarks for program indicators. The program tracked project results through activities such as Post Distribution Monitoring surveys, routine monitoring, and reflection sessions with consortium monitoring and evaluation focal points meeting monthly to update progress. This endline external evaluation undertakes a comprehensive review of program performance focused on: relevance, effectiveness, efficiency, impact, sustainability and documentation of lessons learnt/best practices for replication and future programming.

1.2 Endline Scope

The objectives of this evaluation were to:

- (a) Assess the achievements and impact of the various components of the program;
- (b) Identify and document best practices and lessons learnt over the period of the program;
- (c) Provide recommendations for future programming;
- (d) Assess the relevance of interventions to the needs of beneficiaries, priorities of the stakeholders and general refugee response strategy;
- (e) Assess the sustainability of interventions.

2. Approach and Methodology

2.1 Approach to the Assessment

In order to best integrate the perspectives of consortium partners, the evaluator utilized a consultative process and a combination of qualitative and quantitative designs. This evaluation report is based on primary beneficiary and stakeholder data as well as secondary data from consortium partners. The secondary data was triangulated to complement the primary data. Secondary data was collected mainly through document review and data sets generated by the consortium partners during implementation.

The primary data was collected through using both qualitative and quantitative data collection techniques in order to provide complementary findings and triangulate results. Techniques included surveys, Key Informant Interviews (KIIs) (Appendix 1: List of key informants) and Focus Group Discussions (FGDs). A total of 20 KIIs and 16 FGDs were conducted and 1,004 surveys responses were gathered, which is statistically significant at 95% confidence level and 5% confidence interval.

The reduced coping strategy index (RCSI) was determined on the basis of a series of questions that were asked to the respondents. They were asked about how frequently they utilized a list of five (5) possible consumption coping strategies in response to times when the household did not have food or enough money to buy food in reference to a 7-day recall. It was calculated using the WFP methodology (frequency x weight)⁴. The results were compared with the re-calculated RCSI for the baseline to understand the change across geographic locations.

⁴ Coping Strategies Index: Field Methods Manual Second Edition, 2008

The quantitative part of the study focused on changes in knowledge and practices in the three settlements as compared to baseline. To the extent possible, questions asked in the baseline survey were repeated at endline in order to compare baseline and endline values and measure the performance of the project. Data collection was coordinated by the consultant with support from MC and consortium partner M&E Officers. The survey questionnaires were administered by teams of Community Mobilizers that had worked with Mercy Corps during the project and who had multi-linguistic skills that reflect the varying languages spoken by nationals and refugees in the settlements.⁵ Electronic data collection using Kobo and android-based tablets was employed to ensure quality data collection.

2.2 Sampling and Survey Coverage

The evaluation was conducted in the refugee settlements in which program activities were implemented, particularly Bidibidi (Yumbe), Palorinya (Moyo) and Rhino Camp (Arua) settlements in the West Nile of North Western Uganda.

Table 2: Evaluation Coverage

Component	Settlement	Zones	Sub county	Villages
Livelihood	Bidibidi	Zone I, II, III, IV & V	Ariwa	Villages 19, 20, 21 & 24
			Kochi	Villages 3 & 4
			Kalulu	Villages 8, 9 & 10
			Ondravu	Villages 7 & 8
			Ramogi	Village 13
	Palorinya	Base Camp	Itula	Ibakwe, Itaya & Omwijo
Rhino Camp	Ofua 1, II & III	Uriama	Akino, Cinya	
WASH	Bidibidi	Zone IV & V	Ariwa, Drimbani, Odravu	Villages 19, 20, 22, 23, Gbiria, Okubani, Ariwa, Kagunde, Kiranga, Karunga, Ocinga, Osuma, Tokoro, Bolomuni, Kado, Kiranga, Village 9,10,19,20,21
	Rhino Camp	Ofua 1, II & III and Katiku 3 & 1	Uriama	Akino, Cinya, Katiku 1, Ofua 3, and Luruja
Protection	Bidibidi	Zone III	Kululu	Villages 12, 13, & 14
		Zone IV	Ondravu	Kado, Villages 6, 7, 8
	Rhino Camp	Ofua 5 & 6	Uriama	Akino, Cinya, Wanguru, Amuru
Child Protection	Palorinya	Zone III	Itula	Bele, Bongilo, Dongo East, Dongo West, Congo East, Congo West, Idiwa II
	Rhino Camp	Ocea	Katiku	Ocea C

⁵ Due to challenges in the settlements of tracking refugee household locations and the multiple languages spoken across communities, the evaluation employed Community Mobilizers familiar with project areas. Whereas, these enumerators worked as Community Mobilisers during the implementation of the project, the importance of their objectivity in data collection was highly emphasized.

(a) Sampling Techniques

In order to have a clear comparison and understanding of the successes realized since the inception of the project, during the evaluation process both qualitative and quantitative data collection approaches were employed. This provided an opportunity to carry out triangulation of the data collected through the various approaches. Table 3 below shows the various sampling techniques used at every level of data collection;

Table 3: Sampling techniques for the categories of respondents at different levels

Data Collection Approaches	Sampling frame	Selection technique	Remarks
Qualitative data collection approach	Key Informants	Purposively selected	Focus was on the officials responsible for the administration of Bidibidi, Palorinya and Rhino Camp settlements such as Settlement Commandants, field officers, local government officials, local leaders, consortium partners, project beneficiary leaders such as leaders of VSLAs, Water User Committees, etc.
	Focus Group Discussions	Randomly Selected	A simple random sampling technique was applied when selecting women, men and children from the targeted project beneficiaries to participate in the FGDs. They were mobilized by the project mobilisers and volunteers. FGDs were organized separately depending on sex of the participants.
Quantitative Data collection approach	Cluster	Pre-determined	Project focused refugee settlements (Bidibidi, Palorinya and Rhino camp settlements).
	Zones	Purposive sampling	Focus was mainly in zones that were considered during the baseline study.
	Selection of villages	Purposively sampled	Two stage sampling was conducted with the first to clustering the villages in which the project was implemented; and secondly randomly sample the representative village in which the evaluation was to be conducted.
	Selection of survey participants	Simple random sampling	Beneficiaries were identified and randomly sampled from database or register for the beneficiaries and thereafter traced them from their homesteads

(b) Sample Size Calculation & Allocation

During the sample calculation and allocation, the samples were calculated proportionate to the size of the beneficiaries per settlement. The number of project beneficiaries determined the sample size allocation each result area and the settlement. The table below shows sample allocations to settlement against the result areas. The samples were calculated using the following statistical formula developed by Fisher et al (1991):

$$n = \frac{z_{\alpha}^2 pq}{l^2} \quad \text{Where:}$$

- n = the desired sample size;
- Z = the standard normal deviation set at 1.96;
- l = the acceptance range of error (3.22%);
- p = participating rate (50%);
- q = Non-participating rate (50%);

In total, 1,004 target beneficiaries were sampled with a confidence level of 95% and confidence interval of 5% which is statistically significant.

Table 4: Samples size allocation by settlement

	Bidibidi	Palorinya	Rhino Camp	Total Sample
Protection - GVB	90	-	104	194
Child Protection	-	112	33	145
WASH	214	-	61	275
Livelihoods	245	45	100	390
Total Sample	549	157	298	1,004

2.3 Data collection and analysis

Analysis of Quantitative data: Data was collected electronically using Kobo and android-based tablets. These helped to minimize time that would otherwise be used for data entry and also minimize data collection errors. Before analysis, data was cleaned and validated through conducting of mock-analysis like checking of range, structure and internal consistency of the data. Data was then analyzed using Excel depending on the complexity of the analysis to generate frequencies and regressions, were required.

Analysis of Qualitative data: Findings from the FGDs, KIs and other consultation were processed and analysed thematically. The consultant used thematic analysis to classify, sort and arrange information and examine relationships within the data.

Results of the findings from quantitative and qualitative data were then synthesized to provide in-depth understanding of key achievements of the project.

Data Quality Control: to ensure integrity of electronic data collection, the survey tool was programmed in Kobo built with a logical flow and electronic prompts. The data collectors were trained in electronic data collection and assigned unique identifiers. These helped to trace the data source and who collected it. The electronic tool was tested before final deployment. The data

collectors had no rights to make any changes in the questionnaire.

During data collection, all data collectors were encouraged to use the correct user names, enter correct zone/village details and abide by the protocol. At the end of each day of data collection, the field supervisors reviewed the data to check for completeness before uploading it to the server.

Data quality checks were completed on a daily basis to ensure that data was corrected from the field. All supervisors and the technical team received regular feedback on the uploaded data to help track the progress of data collection and follow up on any issues with teams or individuals.

2.4 Study Limitations

Data collection was limited or slowed by challenging conditions in the different settlements. These included incidents of insecurity which made the team cautious. In one of the zones, a fracas happened at night and one of the data collectors, who happened to stay in the same zone, was severely affected, and was admitted to a local health centre. Hence in the process, the team lost his services.

Other challenges included absenteeism of both the data collectors and the targeted respondents on the days of food distribution, and respondents absent from their homes because they had gone in search of water. At times of food distribution, it was not possible to visit the settlements which caused loss of time and resources in trying to trace the respondents.

3. Review of Project Indicators

The table 5 below provides a summarized performance of the program along the key indicators. The performance is measured against LoP targets.

Table 5: Summary of the Key Indicator Performance

Indicator	Baseline	Target	Endline	Variance	Percent Achieved	Color marker
G1.1: Number of conflict-affected children with access to protective education	0	4,624	8,639	4,015	187%	
G1.2: Average Reduced Coping Strategy Index	9.9	N/A	11.2 ⁶	1.3	N/A	
G1.3: 'Percent of persons/target population reporting an improved feeling of safety and dignity by the end of the intervention compared to at the beginning	51%	90%	83%	-7%	92%	
G1.4: Percent of target population with adequate WASH services and hygiene practices (ECHO KOI)	43%	70%	74%	4%	106%	
R1.1: Number of boys and girls provided with psychosocial support on a daily basis, through attending recreational activities and structured play facilitated at CFS	0	2,112	2,448	336	116%	
R1.2: Number boys and girls benefitting from case management, including referral to legal, medical, PSS, FTR or other services as required	0	1,080	2,212	1,132	205%	
R1.3: Number of survivors who receive an appropriate response	0	267	458	191	172%	
R1.4: Number of girls, women/HH with increased/appropriate knowledge of their rights	40,000	100,000	132,477	32,477	132%	

⁶ RCSI calculated to compare across geographies. The increase in RCSI may be partly explained by the timing of the baseline and endline surveys. Baseline was done in the midst of harvest season (November 2017) when HH food security tends to be more stable, whereas endline was conducted in late January/early February 2019 towards the end of the dry season when HHs struggle to meet basic food needs before the next planting season.

R1.5: % of persons/target population in Bidibidi and Rhino Camp reporting an improved feeling of safety and dignity	56%	90%	73%	-17%	81% ⁷	
R2.1: Number of people having access to sufficient and safe water for domestic use	62,700	94,700	97,740	3,040	103%	
R2.2: Number of people with access to dignified, safe, clean and functional excreta disposal facilities	0	5,000	5,530	530	111%	
R2.3: Percent of the households with access to hand washing facilities	20%	50%	39%	-11%	78% ⁸	
R2.4: Number of people reached with hygiene promotional messages and hand washing kit	0	146,300	146,842	542	100%	
R3.1: Number of individuals with improved access to agricultural inputs and use of climate smart agricultural practices	0	11,651	11,439	-212	98%	
R3.2: Number of farmers and females at risk who receive cash grants for protection of livelihood assets or as part of the ALP	0	3,824	3,213	-611	84% ⁹	
R3.3: Number of individuals engaged in Income Generating Activities (IGAs)	0	800	820	20	103%	
R3.4: Percent of children enrolled in ALP classes successfully complete Level 3	0	540	515	-25	95%	
R4.1: Number of beneficiaries (host/ community) actively saving (VSLA, SACCO, commercial bank)	0	3,450	2,931	519	85%	
R4.2: Number of market actors (agro-dealers, suppliers) who are able to serve a wider customer base due to this Action	0	19	22	3	116%	

⁷ 90% of individuals at endline reported a feeling of improved safety. When aggregated with those that reported improved access to services (55%) the final indicator calculation is 73%.

⁸ This includes those HHs at endline with handwashing stations including soap. A slightly higher percentage, 46% of HHs (or 92% of target), had handwashing facilities with water only.

⁹ Target included inconsistent calculation at baseline which was corrected at endline, resulting in the seemingly low achievement. However, if indicator was calculated the same as at baseline, partners would have over-achieved target by 117%.

R4.3: Number of market structures and livelihood community infrastructures completed	0	5	5	0	100%	
R4.4: Number of agencies benefitting from cash trainings and standardized tools / approaches.	0	12	12	0	100%	

4. Relevance of the Action

The program design was appropriate to the needs of the refugees and the host communities based on the gaps identified in a review of secondary literature. For example, the REACH Multi-Sector Needs Assessment identified key challenges related to protection, WASH, and livelihoods that were addressed by the Action.

Related to child protection, the assessment identified households with unaccompanied or separated children (62% in Bidibidi, 44% Palorinya, 61% in Rhino camp) in addition to households with at least one member suffering from psychological distress and unable to access care (34% in Rhino, 19% in Palorinya, and 50% in Rhino Camp). Child protection activities supporting case management services for unaccompanied or separated children in addition to recreational and structured play opportunities for children to engage in and access psychosocial support, were thus needed and appropriate.

According to the baseline report, the aggregate percentage of respondents who know what GBV was and its punitive actions was determined to be 37%. This indicated that the level of knowledge, attitudes and practices on GBV among target beneficiaries showed a number of gaps that required targeted interventions in order to improve the wellbeing of the girls and women across all the settlements. The implementation of general protection, GBV and child protection programs was timely to curb these challenges. These included management of cases, support to referral of cases, capacity building of the referral structures, awareness sessions, support to community structures such as GBV Preventers, Community Safety Action Groups, Peace Facilitators; Coordination mechanisms, PEP kits to Health Facilities, advocacy on ending GBV, conflict mitigation among others.

The REACH assessment report showed that in all settlements there was still a need for water to meet the household needs. In Bidibidi alone, 44% of the households reported not having enough water to cover the basic household needs, whereas in Palorinya it was 46% and 30% in Rhino Camp. In an FGD in Rhino Camp, Ofua 1, the host communities reported that they used to walk for over 12 kilometers for water for domestic use before this intervention. Latrine access was also identified as an issue in the multi-sectoral needs assessment with 31% of households in Rhino Camp lacking a functional latrine, 15% in Palorinya and 9% in Bidibidi. Thus, the Action’s efforts to increase access to safe water, promote appropriate hygiene practices, and increase the number of households with adequate latrines were well-placed.

Livelihoods is frequently cited in secondary literature as a key gap in response efforts and the REACH assessment report noted households were dependent on mainly agriculture as their source of income (35% in Bidibidi, and 37% in Rhino Camp) with a high percentage of households reporting that their land does not provide sufficient food for the entire household (86% in Palorinya, 77% in Rhino Camp, and 73% in Bidibidi). Interventions to support increased agricultural outputs are needed in addition to supporting diversification of income sources beyond agriculture and casual labor. These identified needs are in line with project design

The introduction of the savings group was also timely to encourage people to save together as a group. The REACH assessment report cited only 10% households in Bidibidi, 31% in Palorinya and 24% in Rhino Camp had at least one member participating in community-based savings/loan/insurance schemes. These figures indicate a significant gap in working towards financial inclusion in West Nile thus supporting group savings scheme was an appropriate intervention for partners to pursue.

The missing link

After considering the different components of the Action and the secondary literature, the authors of this report feel a key gap was the lack of a health component in the project. According to the REACH assessment conducted in the West Nile, Malaria is a key health issue in Rhino Camp (62%), Bidibidi (46%) and Palorinya (22%) yet few households are accessing insecticide-treated mosquito nets. The distribution of mosquito nets would have complemented the activities of the Action and met one of the most pertinent needs of both refugees and host communities.

The **timeframe** of the program was also a challenge: The length of humanitarian funding cycles makes it extremely difficult to support self-reliance and sustainability of interventions. Especially related to longer-term livelihood strategies and behavior change, 21-months is not long enough to see substantial and sustainable changes in income and market access.

5. General Protection Findings

5.1 Demographic Profiles of Respondents

The protection survey was conducted in Bidibidi, Zones 3 and 4 and Rhino Camp, Ofua 5 and 6. Respondents comprised 53% females and 47% males with an average age of 37 years. 53% of respondents indicated they reside in a household headed by a male and 45% by a female. Only 2% of respondents said a child headed their household.

With regard to education, 46% of respondents had at least graduated from primary school, 29% from secondary, 7% had a certificate and 17% never went to school and only 1% received a diploma. The majority (68%) of households engaged in the survey had been in Uganda for a period of 1 – 2 years, and 28% had been in Uganda for between 3 – 5 years.

The analysis also indicated 29% of households surveyed had members with difficulties in either walking/climbing steps, seeing, hearing or using the local languages. Within these households, only 20% are registered as PSNs.

Table 6: Demographic Information of Protection Respondents

Demographic Information	Bidibidi		Rhino Camp		Overall		Total
	Male	Female	Male	Female	Male	Female	
No. of Respondents	38	51	53	51	91	102	193
%age of Respondents	43%	57%	51%	49%	47%	53%	100%
Age of Respondents							
15 - 24 years	11%	7%	13%	13%	12%	10%	22%
25 - 34 years	19%	21%	17%	23%	18%	22%	40%
35 - 44 years	13%	8%	11%	6%	12%	7%	19%
45 - 54 years	8%	3%	7%	5%	7%	4%	11%
55 and above years	6%	3%	3%	2%	4%	3%	7%
Average Age of the Respondent	39	35	35	39	37	37	37
Household Headship							
Child HHH	0%	0%	0%	5%	0%	2%	2%
Female HHH	45%	6%	35%	5%	40%	5%	45%
Male HHH	12%	37%	14%	41%	13%	39%	53%
Education Level of Respondent							
Never been to school	17%	6%	10%	3%	13%	4%	17%
Primary Education	24%	17%	28%	23%	26%	20%	46%
Secondary Education	17%	16%	8%	17%	12%	17%	29%
Certificate	0%	2%	4%	8%	2%	5%	7%
Diploma	0%	2%	0%	0%	0%	1%	1%
Length of Stay in Uganda							
3 – 6 months	0%	0%	1%	0%	0%	0%	0%
6 – 12 months	1%	0%	0%	0%	1%	0%	1%
1 – 2 years	36%	40%	30%	31%	33%	36%	68%
3 – 5 years	6%	17%	16%	17%	11%	17%	28%
5 years and above	0%	0%	4%	1%	2%	0%	2%

Household Size							
Under 0 – 59 months	0.7	1.3	0.7	0.7	0.7	1.0	1.8
5 – 17 years	1.5	1.5	1.6	0.9	1.6	1.3	2.8
18 – 49 years	1.1	1.7	1.3	1.1	1.2	1.5	2.7
50+ years	0.1	0.3	0.2	0.2	0.2	0.3	0.4
Households with Disability							
Seeing, even if wearing glasses	4%	4%	4%	6%	4%	4%	8%
Hearing, even if using hearing aids	4%	4%	2%	0%	3%	3%	6%
Walking or climbing steps	6%	6%	3%	0%	4%	4%	9%
Remembering or concentrating	0%	0%	1%	1%	0%	0%	1%
Self-care such as dressing & washing all over	0%	4%	3%	0%	2%	1%	4%
Using local language	4%	6%	0%	2%	4%	2%	6%
HH members with Disability							
BELOW 18 years	1.4	1.4	1.6	1.6	1.5	1.5	3.0
ABOVE 18 years	1.6	1.6	1.9	1.4	1.8	1.5	3.3
Registered PSN Household	12%	12%	8%	8%	10%	10%	20%

5.2 Protection

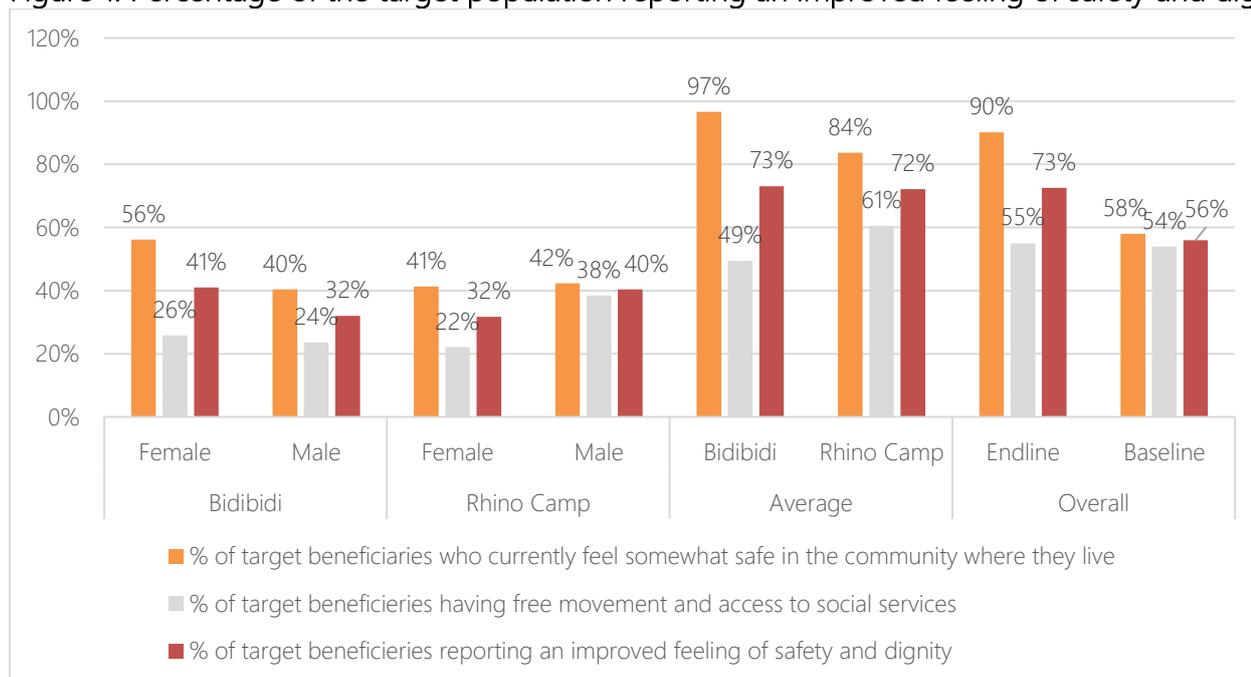
Indicator G1.3: % of persons/target population in a given context reporting an improved feeling of safety and dignity by the end of the intervention compared to at the beginning

At baseline, safety and dignity were calculated as the aggregate of: the percentage of target beneficiaries who feel safe in the community where they live, and the percentage of target beneficiaries confirming improved access to services and freedom of movement in the past 6 months. At endline, a likert scale from 1-5 scored respondents' feeling of safety from very unsafe to very safe with those reporting feeling somewhat safe, safe enough and very safe being considered in the final calculation. 90% of respondents indicated they feel at least somewhat safe while 83% of respondents indicated feeling safe enough or very safe. At baseline, only 48% of people indicated feeling safe in their communities.

Dignity was measured as respondents' ability to access services such as police stations, markets, CFS, schools, medical services, communal kitchens, latrines and showers, water points, food and NFI distributions. 55% of respondents at endline reported they are able to access and have freedom of movement to access services, which is just 1% higher than baseline.

As at baseline, these two measures are aggregated to calculate final progress against the indicator at 73% (compared to 56% at baseline).

Figure 1: Percentage of the target population reporting an improved feeling of safety and dignity



Despite the significant progress in improving people’s sense of safety throughout the duration of the project, 45% of respondents at endline indicated there are still safety concerns within Bidibidi and Rhino Camp settlements. However, the number of people citing safety as a key constraint to accessing services at endline compared to baseline was considerably lower for key services: police station (27% at endline vs 52% baseline), water points, (14% vs 26%), markets (10% vs 22%), latrines and showers (5% vs 14%), communal kitchens (3% vs 10%), food and NFI distributions (4% vs 11%), schools (28% vs 26%), and medical services (32% vs 33%). The reduction in citations of security as a barrier to accessing most services supports the finding that people’s safety and dignity improved over the course of the project. However, safety remains primarily a concern for accessing schools, medical services and CFS in both Bidibidi and Rhino Camp.

There was an increase in those citing safety as a concern for accessing child friendly spaces (26% at endline vs 21% at baseline). Respondents indicated long distances between their communities and the centers as a factor which may indicate safety on the roads deteriorated over the course of the project, making the journey to CFS centres riskier. It should also be noted CFS centers were not supported in Bidibidi under this project and were only in Palorinya and Rhino Camp. SCI works with UNHCR in Bidibidi on a project to end violence against children which was not covered in this evaluation.

Table 7: Percent of respondents that indicate safety concerns limits accesses to service points

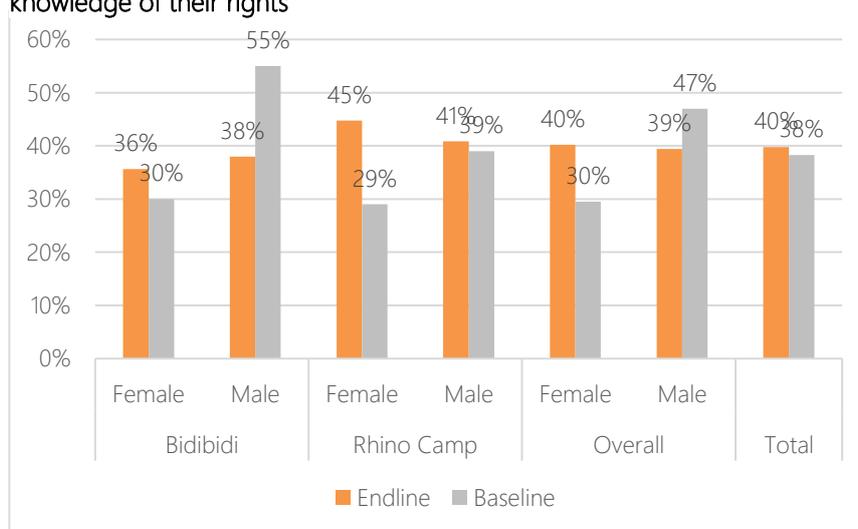
Service Points	Bidibidi		Rhino Camp		Total		Overall
	Female	Male	Female	Male	Bidibidi	Rhino Camp	
Police Station	8%	66%	6%	42%	8%	45%	27%
Markets	14%	8%	6%	13%	11%	10%	10%
Child-Friendly Spaces	24%	37%	24%	23%	27%	25%	26%
Schools	16%	47%	29%	26%	26%	31%	28%
Medical services	22%	53%	29%	32%	29%	36%	32%
Communal kitchens	0%	0%	4%	6%	2%	3%	3%

Latrines and showers	0%	13%	4%	8%	2%	9%	5%
Water points	8%	13%	18%	17%	15%	13%	14%
Food and NFI distributions	4%	0%	4%	6%	4%	3%	4%

Indicator R1.4: # of girls, women/HH with increased/ appropriate knowledge of their rights

In conjunction with the baseline methodology, the evaluation considered “appropriate knowledge” to include an understanding of respondents right to: health, information, food, life, ownership of property, protection and work. Project monitoring indicates 132,477 women and girls have increased/appropriate knowledge of their rights (132% of the target). According to the evaluation survey conducted, 80% of respondents indicated that they received sensitization on human rights while 40% demonstrated increased or appropriate knowledge of their rights (a 2% change from baseline). Women demonstrated an increase in understanding of their rights (30% at baseline to 40% at endline) but the number of males with an appropriate knowledge of their rights reduced over the course of the project (47% at baseline to 39% at endline).

Figure 2: Percentage of target beneficiaries with increased/appropriate knowledge of their rights



Respondents were most aware of their rights related to health (48%; 45% male, 51% female), food (44%; 41% male, 48% female), protection (37%; 35% male, 39% female), life (36%; 35% male, 37% female), information (36%; 35% male, 36% female), work (35%; 34% male, 37% female) and property ownership (34%; 35% male, 39% female).

Table 8: Specific human rights which respondents are aware of

Human Rights	Bidibidi		Rhino Camp		Overall		Total	
	Female	Male	Female	Male	Female	Male	Bidibidi	Rhino Camp
Right to health	53%	39%	49%	50%	51%	45%	92%	99%
Right to information	33%	25%	40%	45%	36%	35%	57%	86%
Right to food	47%	33%	49%	49%	48%	41%	80%	98%
Right to life	36%	27%	38%	43%	37%	35%	63%	82%
Right to ownership of property	34%	31%	34%	38%	34%	34%	65%	71%
Right to protection	36%	30%	41%	39%	39%	35%	66%	81%
Right to work	34%	28%	39%	40%	37%	34%	62%	80%
Average	39%	30%	42%	44%	40%	37%	69%	85%

When asked about the various rights on which they were sensitized respondents cited children’s rights (91%), women’s rights (80%), right to services (79%), refugee rights and the GBV survivors’

rights (76%). Respondents indicated that these sensitizations were conducted mainly by Community Safety Action Groups (groups created and trained by CARE) (76%), Role Model Men/Boys trained by CARE (83%) and Peace Facilitators trained by CARE (85%).

When asked if sensitizations were useful, 53% (50% female, 57% male) of respondents indicated that they were very useful while 40% (44% female, 36% male) indicated that they were was useful.

According to qualitative information, refugees continue to struggle to access health services given there are few facilities and limited money to pay for services. Enjoying the right to food is also still challenging. While refugees receive a food ration from WFP, respondents cited the food allocation is not enough to sustain their food requirements. Respondents reported struggling to meet basic domestic needs due to low incomes forcing them to sell food rations to make money. Refugee respondents also cited challenges in accessing employment, indicating most formal employers prefer nationals since they have the more preferred Ugandan academic qualifications.

Table 9: Percent of respondents sensitized on human rights

	Bidibidi		Rhino Camp		Overall		Total
	Female	Male	Female	Male	Female	Male	
Percentage of respondents that have received sensitisation on their rights	73%	79%	80%	89%	76%	84%	80%
Percentage of respondents that have never received any sensitisation	27%	21%	20%	11%	24%	16%	20%
Rights sensitized about (n)	37	30	41	47	67	88	155
Rights to services	84%	70%	83%	81%	83%	75%	79%
Women's rights	73%	73%	90%	85%	82%	79%	80%
Children's rights	92%	87%	98%	87%	95%	87%	91%
Refugee rights	57%	83%	88%	77%	73%	80%	76%
GBV survivor's rights	65%	80%	80%	79%	73%	79%	76%
Conducted by:							
Community Safety Action Group	70%	73%	78%	83%	74%	78%	76%
Role Model Men/Boy	43%	43%	63%	70%	53%	57%	55%
Peace Facilitator	51%	57%	61%	57%	56%	57%	57%
From another NGO/Agency	27%	23%	27%	21%	27%	45%	36%
Religious leaders	3%	0%	7%	6%	5%	6%	6%
Cultural leaders	5%	10%	12%	9%	9%	19%	14%
Refugee Welfare Committee	24%	27%	22%	17%	23%	44%	33%
Friends /family member	5%	7%	10%	6%	8%	13%	10%
Usefulness of the Sensitisation							
Somehow useful	11%	13%	2%	2%	7%	8%	7%
Useful	24%	20%	63%	51%	44%	36%	40%
Very useful	65%	67%	34%	47%	50%	57%	53%

Children' s Rights

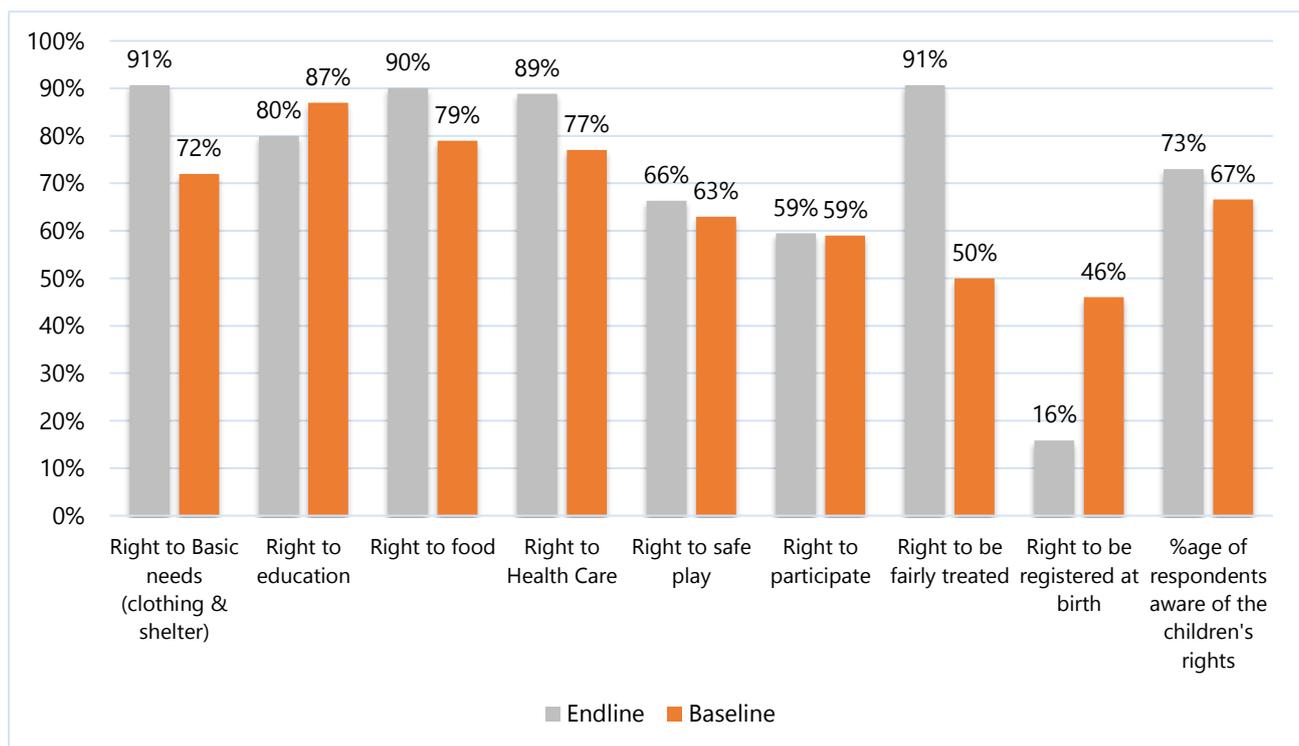
The evaluation also assessed the respondents' knowledge about children's rights and were asked whether they are aware of the right to basic needs (clothing & shelter), right to education, right to food, right to health care, right to safe play, right to participate, right to be fairly treated, right to be registered at birth. The results were compared with the baseline and indicate an increase in the

general knowledge about children’s rights from 63% at baseline to 73% at endline. Sizeable increases were realized in respondents’ knowledge on the fair treatment of children (from 50% at baseline to 91% at the endline), and the right to basic needs (shelter and clothing) from 72% at baseline to 91% at the endline. There was however a reduction in the knowledge about the right to education from 87% at baseline to 80% at the endline. There was however a reduction in the knowledge about the right to education from 87% at baseline to 80% at the endline.

The evaluation revealed low awareness levels of the children’s right to be registered at birth (16%) with significant reduction from baseline (46%). Information from in-depth interviews indicates that most organisations have not been emphasizing sensitization about this right, however, this does not explain the precipitous drop at endline.

According to respondents in one FGD, the introduction of CFS has provided an opportunity for children to enjoy the right to play and participate in activities. They however still have a challenge in accessing quality education and healthcare services. Even though there are some schools that have been established and provided with instructional materials, these are not enough to meet the demands of all learners.

Figure 3: Percentage of respondents having knowledge of children’s rights



Gender Based Violence (GBV)¹⁰

The evaluation assessed the respondents’ knowledge of sexual and gender violence by getting their responses on whether they consider any of the ten (10) activities as sexual and gender

¹⁰ GBV refers to any harmful act that is perpetrated against a person's will and is based on attitudes about women and men, girls and boys. It is related to power relationships. It can be physical, emotional, psychological or sexual in nature, and take the form of a denial of resources or access to services. It encompasses threats of violence and coercion. It inflicts harm on women, girls, men and boys.

violence. These included; using bad language beating/slapping, forced/unwanted kissing, forced/unwanted touching of buttocks or breasts, asking for sex in exchange for money, food, work, etc., forcing to have sex, sexual harassment i.e. someone making unwanted sexual advances (i.e. touching you) or making obscene remarks to you, kidnapping i.e. someone forcefully taking you away against your will in order to have sex, showing pornographic photos or videos when not wanted, talking about porn when not wanted, and showing genitals.

The analysis revealed that 84% of the targeted beneficiaries were able to identify at least two or more sexual and gender violence practices which is a significant improvement from 38% at baseline. In the same analysis 18% females and 10% males were able to identify one sexual and gender violence practice. These results indicate an improved awareness of sexual and gender violence practices.

The study further investigated the current existence of certain types of harmful behaviour and

violence in the community against girls, boys, women, and men. The respondents indicated which behaviours have reduced, increased, and or stayed the same in the past 12 months. Results of this analysis are indicated in the table below with physical violence identified as the most common harmful act (57%), followed by threats of physical violence and coercion (35%), emotional/physical abuse (31%), and denial of resources or access to services (23%), among others. When asked how these harmful acts have changed in the last 12 months, 43% indicated that physical violence has reduced, 30% indicated that threats of violence and coercion have reduced and 25% indicated that emotional/physical abuse has reduced, 17% indicated denial of resources or access to services had reduced, 20% indicated instances of early marriage had reduced, 17.9% indicated instances of rape had reduced and 27.4% indicated that economic violence had reduced. Overall this shows respondents are noticing an improvement in safety and a reduction in forms of violence.

Figure 4: Percent of the respondents mentioning at least two or more sexual and gender based violence practices

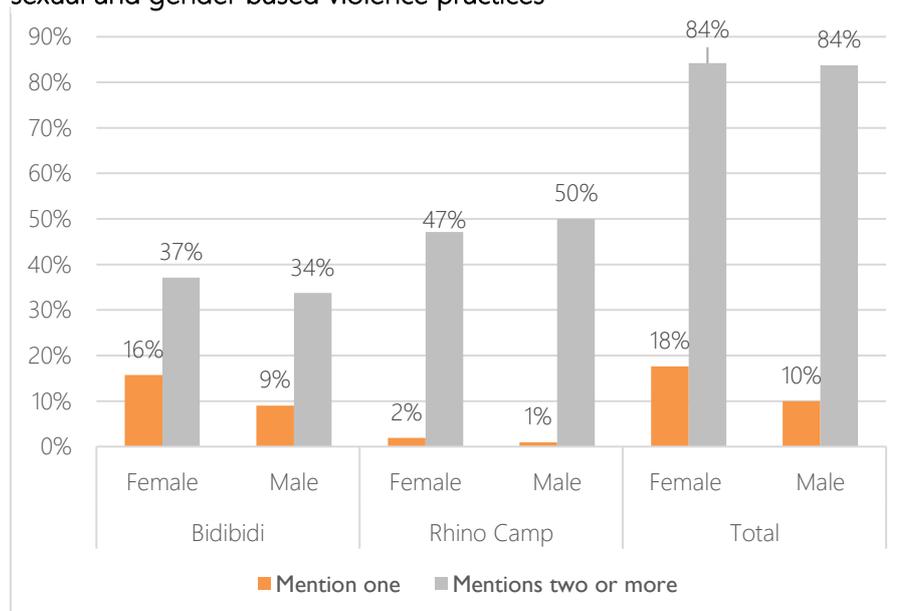


Table 10: Existence of harmful Behaviours & Violence

Harmful Behaviours & Violence	Bidibidi		Rhino Camp		Bidibidi	Rhino Camp	Overall
	Female	Male	Female	Male			
Threats of violence and coercion	16%	11%	59%	55%	13%	57%	35%
Physical violence	45%	55%	69%	60%	50%	65%	57%
Emotional/Psychological abuse	20%	11%	51%	42%	15%	46%	31%
Denial of resources or access to services	2%	11%	35%	43%	6%	39%	23%
Economic violence	8%	16%	29%	17%	12%	23%	18%

Transactional sex (Prostitution/survival sex)	4%	5%	10%	0%	5%	5%	5%
Sexual violence	16%	34%	8%	8%	25%	8%	16%
Sexual abuse by someone known	14%	18%	8%	2%	16%	5%	10%
Rape	20%	26%	20%	15%	23%	17%	20%
Domestic violence	16%	16%	18%	17%	16%	17%	17%
Early marriage	25%	32%	10%	13%	29%	12%	20%
Harmful cultural practices	0%	3%	10%	6%	1%	8%	5%
Alcohol and drugs abuse	6%	8%	6%	6%	7%	6%	6%
Ranking of selected sexual behaviour							
a) Threats of violence and coercion							
Reduced	4.5%	4.5%	25%	25%	9%	50%	29.5%
Increased	2.2%	0.0%	2.9%	1.9%	2.2%	4.8%	3.5%
Stayed Same	2.2%	0.0%	1.0%	0.0%	2.2%	1.0%	1.6%
b) Physical violence							
Reduced	18.0%	18%	26.9%	23%	36.0%	50%	43.0%
Increased	4.5%	3.4%	6.7%	4.8%	7.9%	11%	9.7%
Stayed Same	3.4%	1.1%	0.0%	1.9%	4.5%	1.9%	3.2%
Don't Know	0.0%	1.1%	0.0%	0.0%	1.1%	0.0%	0.6%
c) Emotional/Psychological abuse							
Reduced	9.0%	3.4%	22.1%	16%	12.4%	38%	25.4%
Increased	0.0%	0.0%	1.9%	2.9%	0.0%	4.8%	2.4%
Stayed Same	2.2%	1.1%	0.0%	1.0%	3.4%	1.0%	2.2%
Don't Know	0.0%	0.0%	1.0%	1.0%	0.0%	1.9%	1.0%
d) Denial of resources or access to services							
Reduced	1.1%	4.5%	15.4%	14%	5.6%	30%	17.7%
Increased	0.0%	0.0%	1.0%	3.8%	0.0%	4.8%	2.4%
Stayed Same	0.0%	0.0%	1.0%	1.9%	0.0%	2.9%	1.4%
Don't Know	0.0%	0.0%	2.0%	3.0%	0.0%	4.8%	2.4%
e) Early Marriage							
Reduced	15.7%	11%	4.8%	7.7%	27.0%	12.5%	19.7%
Increased	1.1%	1.1%	4.8%	1.0%	2.2%	5.8%	4.0%
Stayed Same	0.0%	2.2%	0.0%	0.0%	2.2%	0.0%	1.1%
Don't Know	0.0%	2.2%	0.0%	0.0%	2.2%	0.0%	1.1%
f) Rape							
Reduced	10.1%	11%	6.7%	7.7%	21.3%	14%	17.9%
Increased	2.2%	3.4%	2.9%	1.0%	5.6%	3.8%	4.7%
Stayed Same	0.0%	2.2%	3.8%	0.0%	2.2%	3.8%	3.0%
Don't Know	0.0%	2.2%	0.0%	0.0%	2.2%	0.0%	1.1%
g) Economic Violence							
Reduced	4.5%	5.6%	9.6%	7.7%	10.1%	17%	27.4%
Increased	1.1%	1.1%	5.8%	1.9%	2.2%	7.7%	9.9%
Stayed Same	1.1%	0.0%	1.0%	1.0%	1.1%	1.9%	3.0%
Don't Know	0.0%	0.0%	0.0%	1.0%	0.0%	1.0%	1.0%

To understand community perspectives on the use of violence as an acceptable way of dealing with disagreements at the end of the project, the evaluation asked whether respondents agreed

that violence is an acceptable way of dealing with disagreements. Overall, 31% (30% females, 31% males) strongly disagreed and 18% (20% male, 18% female) disagreed. 26% (31% females, 21% males) strongly agreed, and 21% (16% males, 26% females) agreed violence is an acceptable way of resolving disagreements. 3% were not sure and 1% did not know. At the settlement level, 40% of the respondents in Bidibidi strongly agreed as compared to 22% respondents from Rhino Camp indicating efforts to sensitise women and men were more successful in Rhino Camp. Comparisons between gender shows that more females (31%) justify acts of violence for solving misunderstandings between husbands and wives than males (21%).

Indicator R1.3: Number of survivors who receive an appropriate response

Information from intake forms, survivor reports, statistics from the GBV IMS, survivors who have accessed PEP, counselling sessions, women and community attending and visiting awareness sessions and support centers indicate the project managed to surpass the target by 181 beneficiaries ensuring 458 beneficiaries received an appropriate response, achieving a 172% of the target.

This evaluation sought to assess whether women or girls/men or boys' survivors of violence feel safe and are able to access services from health professionals, psychosocial support services, survivor protection houses, and police and, if not, why. The results indicate 85% (43% female, 42% male) have confidence in seeking support from health professionals whenever faced with violence challenges, 86% (45% female, 41% male) have confidence in seeking help from psychosocial support services, 77% (42% female, 38% male) have confidence to stay in a survivor protection house, and 83% (42% female, 41% male) have confidence in seeking help from police. Those beneficiaries that have less confidence in seeking help raised various reasons for not doing such as not having money to pay for transport, preferring use of traditional medicine or healer, not understanding the services and the fact that police are sometimes perpetrators as shown in the below table.

Table 11: Beneficiaries Confidence in seeking help form the GBV service providers

Freedom & Safety of women or girls/men or boys survivors of violence to seek help	Bidibidi		Rhino Camp		Total		Overall
	Female	Male	Female	Male	Bidibidi	Rhino Camp	
Access services from health professionals							
Don't know	11%	7%	0%	1%	18%	1%	9%
Yes	43%	35%	44%	48%	78%	92%	85%
No	3%	1%	5%	2%	4%	7%	6%
Reasons for not access services from health professionals							
No money to pay for transport	1%	0%	0%	1%	1%	1%	1%
People do not trust them	0%	0%	1%	0%	0%	1%	0%
Prefer to use traditional medicine	1%	0%	1%	0%	1%	1%	1%
Prefer to visit traditional healer	0%	0%	2%	1%	0%	3%	1%
Scared of health professionals	0%	0%	1%	0%	0%	1%	0%
Seek help from psychosocial support services							
Don't know	12%	8%	0%	1%	20%	1%	11%
Yes	42%	33%	48%	49%	74%	97%	86%
No	3%	2%	1%	1%	6%	2%	4%

Reasons for not seeking help from psychosocial support services							
People do not understand what it means	2%	1%	0%	0%	3%	0%	2%
People prefer to visit traditional healer	1%	0%	1%	0%	1%	1%	1%
They can be perpetrators	0%	0%	0%	1%	0%	1%	0%
Staying in a survivor protection house							
Don't know	17%	13%	1%	0%	30%	1%	16%
Yes	38%	25%	45%	50%	63%	95%	79%
No	2%	4%	3%	1%	7%	4%	5%
Reasons for not staying in a survivor protection house							
No money to pay for transport	1%	1%	0%	0%	2%	0%	1%
People do not trust them	0%	0%	1%	0%	0%	1%	0%
People do not understand what it means	0%	1%	1%	1%	1%	2%	2%
People prefer to visit traditional healer	0%	0%	1%	0%	0%	1%	0%
Worried people in the community will find out	1%	0%	0%	0%	1%	0%	1%
Seeking help from police							
Don't know	17%	10%	1%	0%	27%	1%	14%
Yes	37%	33%	46%	50%	70%	96%	83%
No	3%	0%	2%	1%	3%	3%	3%
Reasons for not seeking help from Police							
Perpetrators are rarely caught	0%	0%	1%	0%	0%	1%	0%
Police can be perpetrators	2%	0%	1%	1%	2%	2%	2%
Worried people in the community will find out	1%	0%	0%	0%	1%	0%	1%

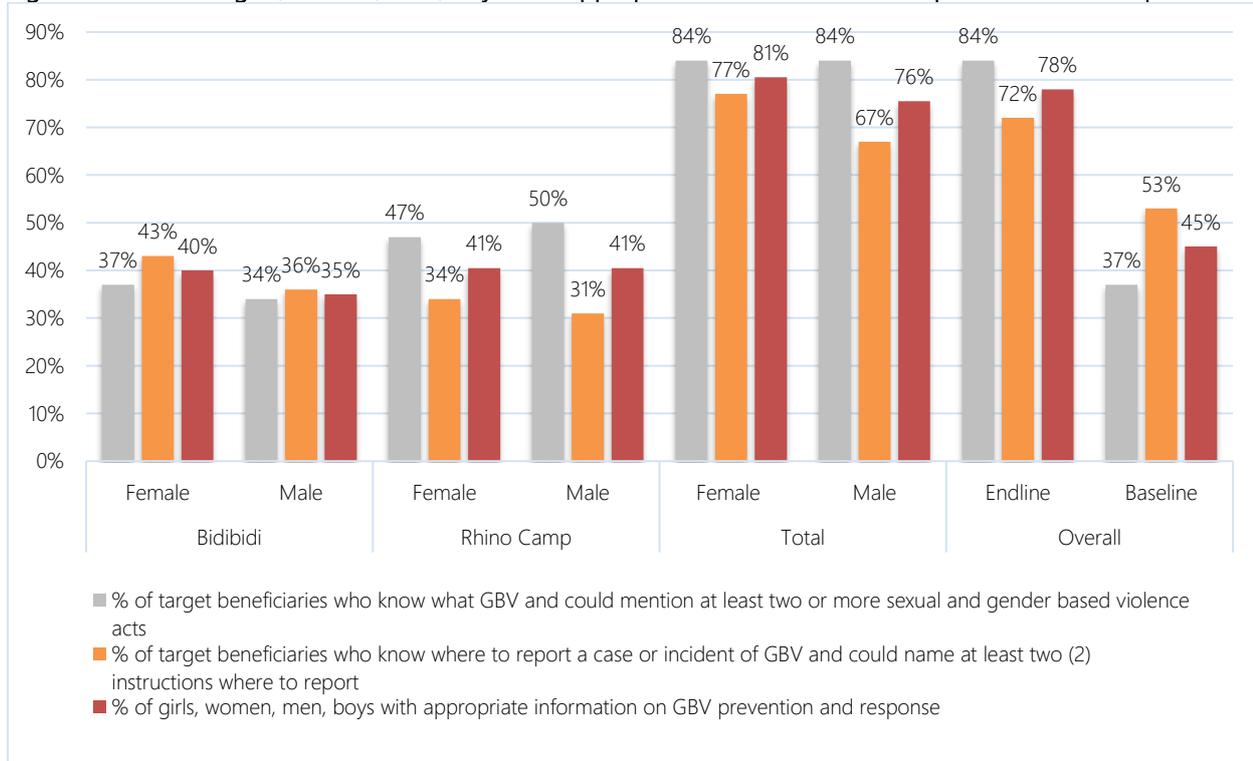
Indicator R1.4.1: % of girls, women, men, boys with appropriate information on GBV prevention and response

The percentage of girls, women, men, boys with appropriate information on GBV prevention and response was determined as the aggregate of; the percentage of target beneficiaries who know what GBV is and could mention at least two or more sexual and gender based violence acts, and the percentage of target beneficiaries who know where to report a case or incident of GBV and could name at least two (2) institutions they could report to. The results from the analysis reveals that 84% (84% female, 84% male) of the target beneficiaries knew what GBV is and could mention at least 2 sexual and gender-based violence acts while 72% (77% female, 67% males) of the target beneficiaries knew where to report a case or incident of GBV and could name at least two (2) institutions. When asked further, respondents mentioned various places where GBV incidents could be reported including family members, CARE GBV information & complaints desk/tent, health professional, police, legal professional, community leader, religious leader, refugee welfare committee, and GBV preventer trained by CARE.

When asked whether they knew these places before they came to the settlement, 28% revealed they never knew and 72% indicated they knew the places. In comparison with the baseline, there has been a significant improvement in the percentage of girls, women, men, boys with appropriate information on GBV prevention and response, from 45% to 78% at the endline. There has been also a tremendous improvement in the percentage of target beneficiaries who know what GBV is and could mention at least two or more sexual and gender-based violence acts, from 37% at baseline to 84% at the endline. Similarly, the percentage of target beneficiaries who know where

to report a case or incident of GBV and could name at least two (2) institutions they could report to has also increased from 53% at baseline to 72% at the endline.

Figure 5: Percent of girls, women, men, boys with appropriate information on GBV prevention and response



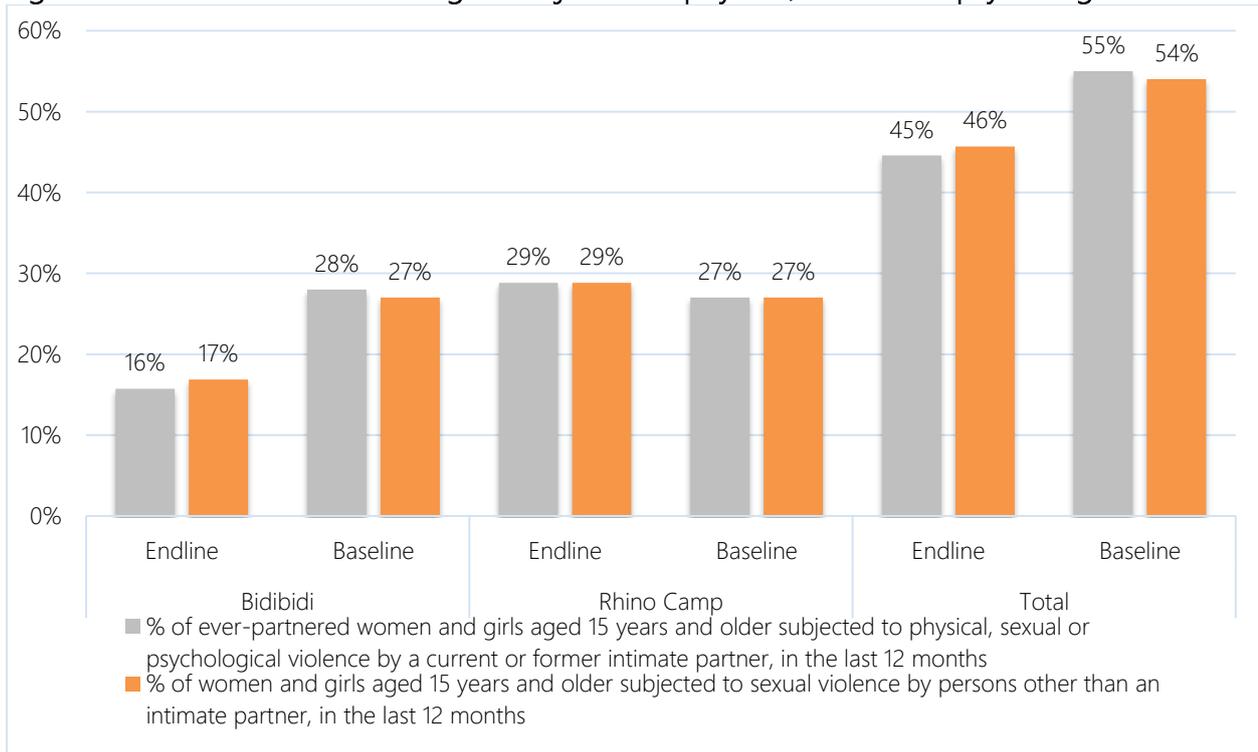
Indicator R1.4.2: % of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months

Indicator R1.4.3: % of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the last 12 months

The evaluation also assessed changes from baseline to endline on the percentage of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months and the percentage of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the last 12 months.

There has been a reduction in the percentage of target beneficiaries of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months from 55% at baseline to 45% at the endline. The percent of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the last 12 months has also reduced from 54% to 46% at the endline. This reduction in both indicators is however only exhibited in Bidibidi, from 28% at baseline to 16% at endline. In Rhino Camp, there was an increase in both indicators from 27% at baseline to 29% at endline. According to the FGD respondents in Zone III of Bidibidi, the significant change in sexual violence was attributed to rigorous community sensitisation, which helped to reduce trauma and encouraged people to settle, encouraged girls to stay in school rather than marry early, directions to close discos and all entertainment places early by the camp authorities, and supporting night patrols by community action groups and neighborhood watch initiatives.

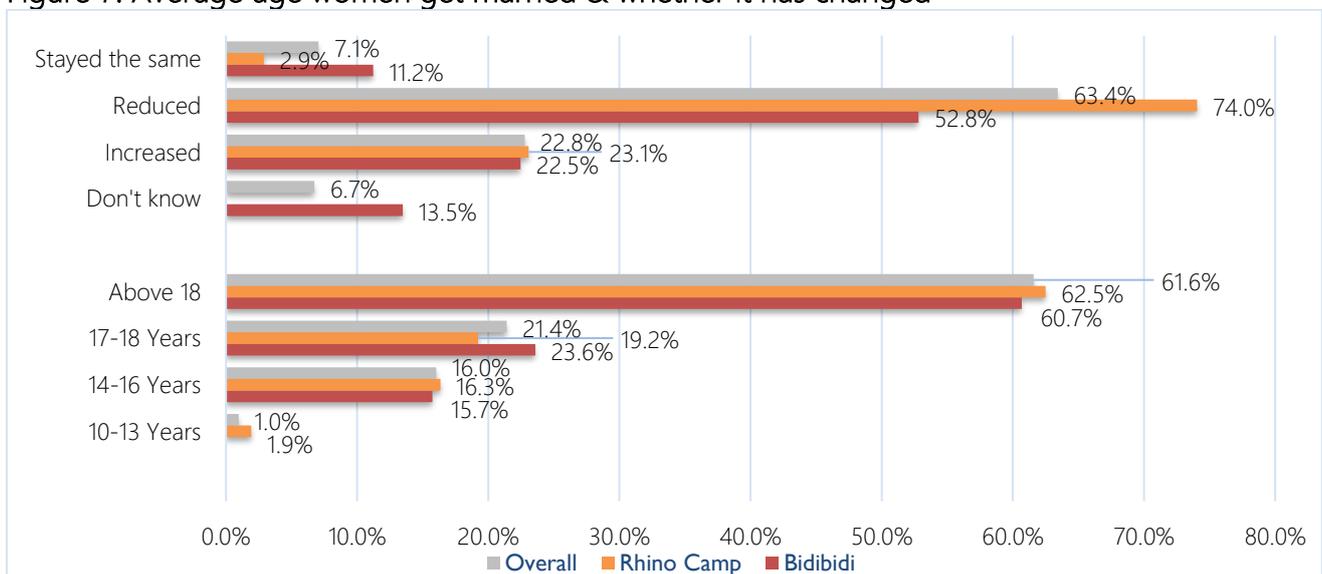
Figure 6: Percent of women and girls subjected to physical, sexual and psychological violence



Average age girls and women get married

The evaluation also assessed the practice of marrying girls at a young age. In doing so, it required the respondents to indicate the average age at which girls and women in the community get married. It also assessed whether there has been a change in this age since the arrival of the respondent in the country. Results indicated over 38% of the respondents cited early marriages (18 years and below) are still ongoing in the communities. However, 63% of the respondents indicated that early marriages have reduced since they came to the settlement, with the majority in Rhino Camp (74%) compared to Bidibidi (53%). In one FGD, this reduction in early marriages was attributed to the various education opportunities that are available in the settlement free of charge.

Figure 7: Average age women get married & whether it has changed



5.3 Child Protection

5.3.1 Demographic Characteristics of Surveyed Children

Data collection on child protection was conducted in Rhino Camp and Palorinya settlement. A total of 145 surveys and 4 FGDs of children aged between 9 – 17 years were completed. 56% of these respondents were male whereas 44% were female. Among these children, 35% (29% Palorinya, 39% Rhino Camp) were living with both their parents, whereas 33% were living with one parent and 27% living with other relatives. 64% had both their parents alive while 22% had the father dead or believed he was dead and 5% had no living parents. 76% were attending AEP classes, 24% had enrolled for formal education. By the time of the endline evaluation, the majority (52%) had been in Uganda for 3 – 5 years while 47% had stayed in Uganda for 1 – 2 years, and 1% had been in Uganda between 6 – 12 months.

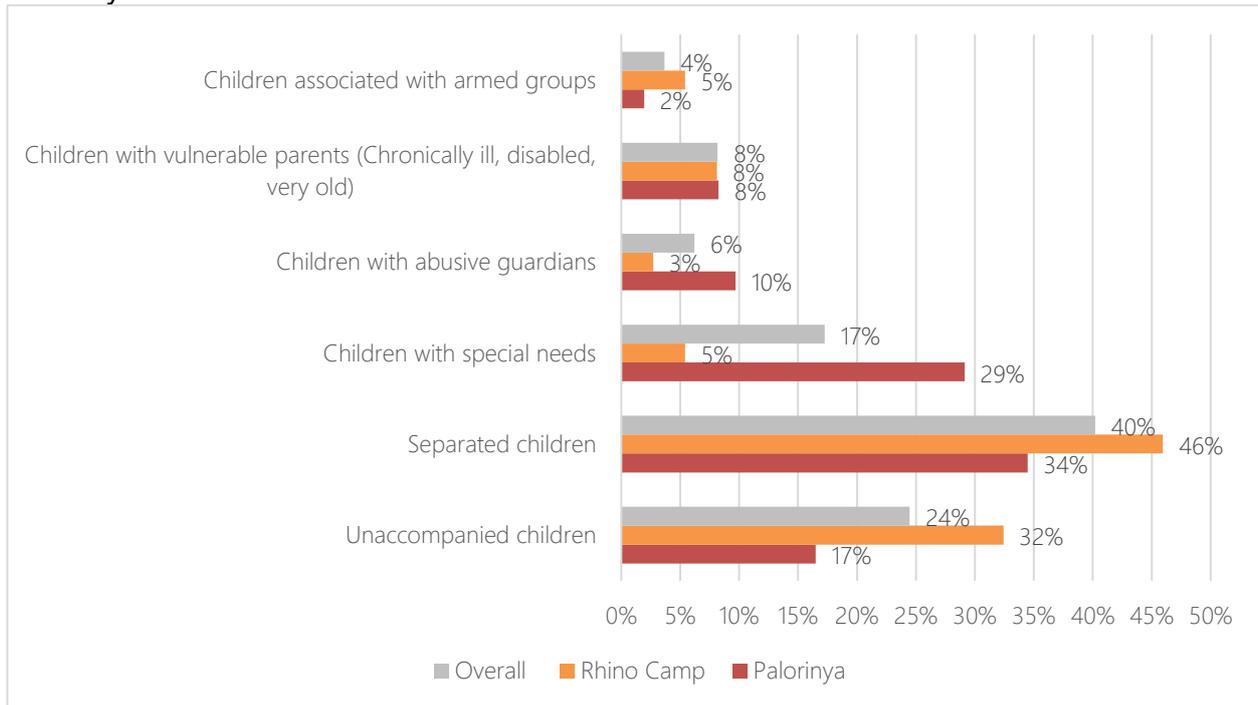
Table 12: Demographic Characteristics of the Surveyed Children

Demographic Information	Palorinya	Rhino Camp	Overall	Demographic Information	Palorinya	Rhino Camp	Overall
# of Respondents	112	33	145	Both parents dead	10%	0%	5%
Female	43%	45%	44%	Father dead/think dead	26%	18%	22%
Male	57%	55%	56%	Mother dead/think dead	8%	3%	6%
Type of Household Head				Don't know	8%	0%	4%
Child Headed	11%	0%	5%				
Female Headed	51%	48%	50%	Length of Stay in Uganda			
Male Headed	38%	52%	45%	6 – 12 months	1%	0%	1%
Person the child is living with				1 – 2 years	92%	3%	47%
Both parents	29%	39%	34%	3 – 5 years	8%	97%	52%
Non-relative	4%	0%	2%	Type of Disability			
One parent	39%	27%	33%	Seeing, even if wearing glasses	9%	15%	12%
Orphanage home	1%	0%	0%	Hearing, even if using aids	6%	6%	6%
Other relative	21%	33%	27%	Walking or climbing steps	6%	3%	5%
Sister/Brother	5%	0%	3%	Self-care	6%	3%	5%
Existence of biological parents				Using local language	9%	3%	6%
Both parents alive	48%	79%	64%	% of HHs registered as PSN	9%	6%	7%

5.3.2 Category of vulnerable children and children at risk exist in the community

The respondents identified the categories of vulnerable children that exist in the communities. The majority 40% (46% Rhino Camp, 34% Palorinya) identified separated children as the most vulnerable, unaccompanied children 24% (32% Rhino Camp, 17% Palorinya settlement) and children with special needs, 17%, (5% Rhino Camp, 29% in Palorinya).

Figure 8: Respondents indicating the categories of vulnerable children and children at risk exist in the community



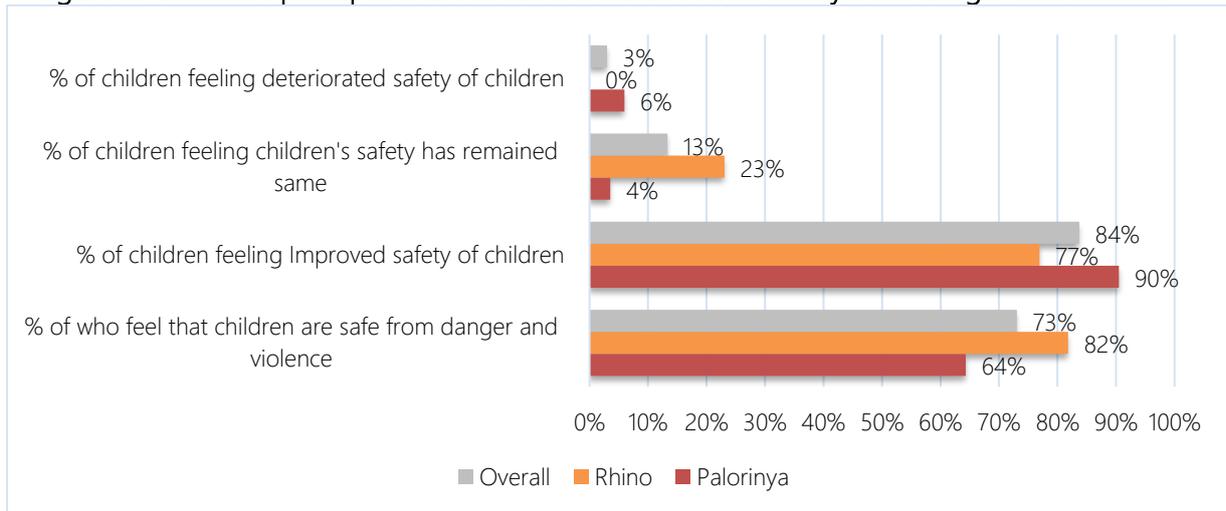
5.3.3 Knowledge about children’s rights

The evaluation assessed children’s knowledge about their fundamental rights. The most common right known was the right to education (18% in Palorinya, and 22% in Rhino Camp), followed by the right to food (16% in Palorinya and 18% in Rhino). There’s no sizeable difference between the rights known between settlements.

5.3.4 Children Safety and Dignity

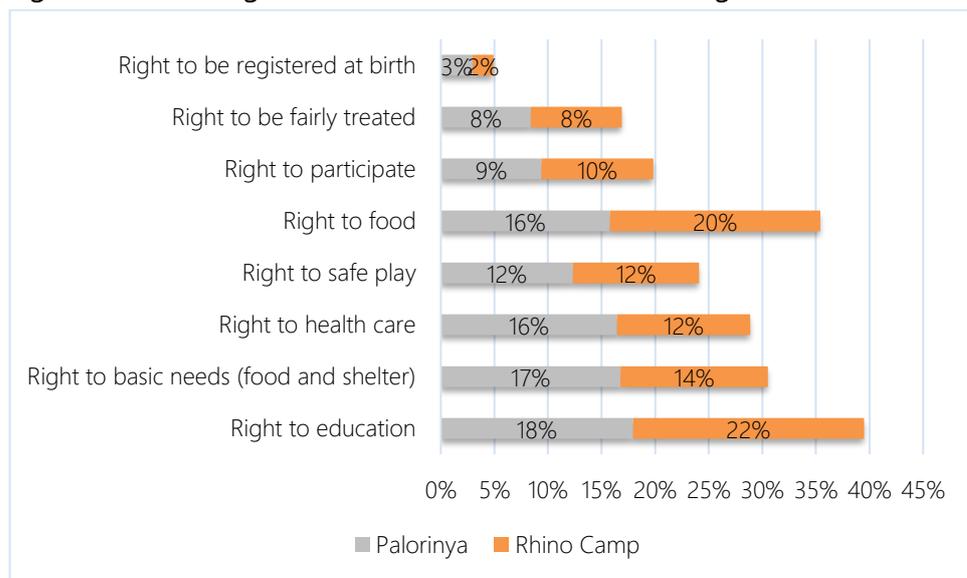
Children’s safety from violence is paramount for their growth and education. The implementation of AEP includes learnings on Sexual Reproductive Health (SRH) and menstrual hygiene management and the provision of Child Friendly Spaces supports recreation and other peer activities under supervision of a trained adult. These components are not only geared towards fast tracking children’s education but also to improving their sense safety and dignity. In this evaluation, children indicated whether they feel safe and free from violence, and if there has been a change in this feeling since the inception of the project.

Figure 9: Children's perception about current status of their safety from danger and violence



Overall, 73% of the children (82%, Rhino Camp, 64% in Palorinya) indicated that they feel safe from danger and violence. Among these, 77% indicated that they feel that there has been a change in children's safety since the project inception, out of which 84% (77%, Rhino Camp, 90% in Palorinya) feel improved safety. 3% revealed feeling a deteriorated sense of safety for children in the settlements. When asked whether there has been a change in the children's feeling of safety and dignity in the last one year or since they arrived in the settlement, 77% (75% Palorinya, 79% Rhino Camp) indicated there has been an improvement in the safety and dignity of children.

Figure 10: Percentage of Children aware of their human rights

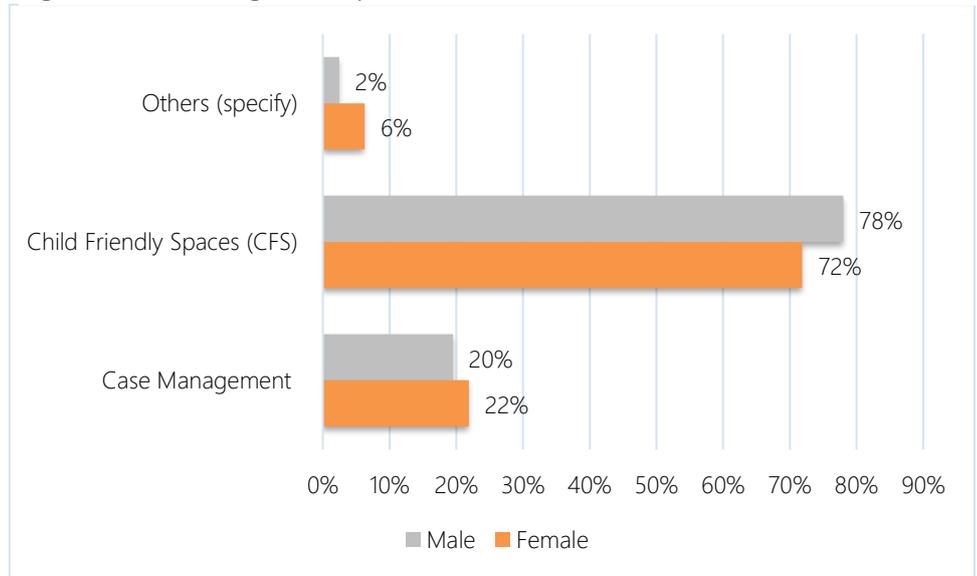


R1.1: Number of boys and girls provided with psychosocial support on a daily basis, through attending recreational activities and structured play facilitated at CFS

This indicator considered children benefiting from Child Friendly Spaces (CFS) and case management. CFS included provision of psychosocial support to children. According to project monitoring documents based on daily CFS attendance, centers supported an average of 2,448 boys and girls on a daily basis, a 116% achievement against the target. When respondents were

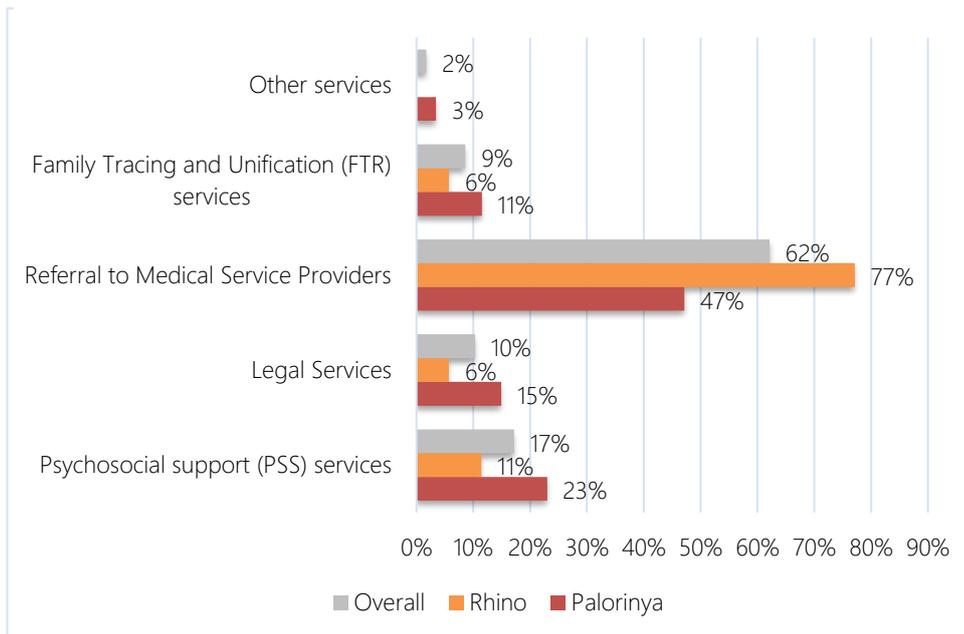
asked at endline if they benefitted from the various project services, 96% (47% female, 49% male) indicated they were benefiting from at least one. The analysis also indicates that over 75% (78% males, 72% females) of the children interviewed were benefiting from the Child Friendly Spaces (CFS). 21% (20% males, 22% females) also benefited from Case Management services.

Figure 11: Percentage of respondents aware of the available Case



Child Friendly Spaces are gazetted areas for children under 18 years for play, recreation and other peer activities under supervision of a trained adult. These are facilitated by SCI in various areas in Palorinya and Rhino Camp settlement. Under the CFS, both boys and girls were provided with psychosocial support on a daily basis, through attending recreational activities and structured play facilitated at CFS.

Figure 12: Percentage of children benefiting from the various programs



The respondents were also asked to identify the available case management services they are aware of. Services mentioned included referrals of children to other partners that offer medical services 62%, (47% Palorinya, 77% Rhino Camp), psychosocial support services (17%), legal services (10%), Family Tracing and Unification (FTR)

services (9%) and others.

R.1.2 Number of boys and girls benefitting from case management, including referral to legal, medical, PSS, FTR or other services as required

In order to understand and generate the percentage of children that have benefited from case management services, including referral to legal services, medical, PSS, FTR or other services, a proxy question 'Do you know anyone in your community that has ever accessed these services in

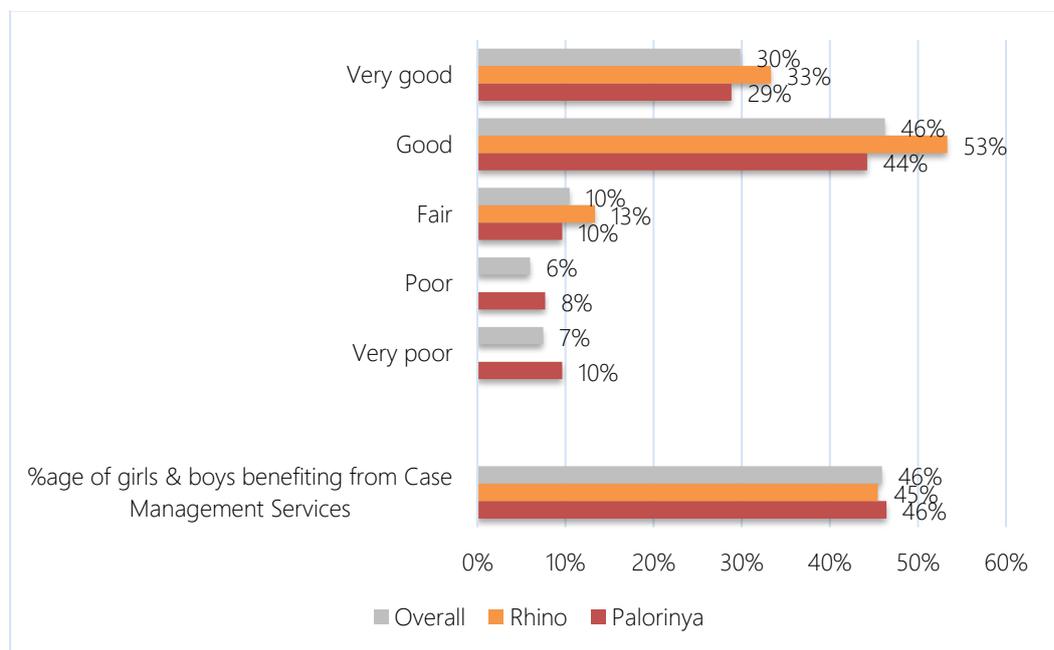
the last 12 months?’ was asked. Because of the sensitivity of the answer, this proxy question elicited a response from a third person singular, even if one was talking about him/herself or the person he/she knows that has accessed the services. The results generated with this question provided an equivalent of the percentage of children that have benefited from case management services. According to the monitoring data available that was generated from CPIMS Records/Database, Case Management (follow up forms) and Referral Pathway (Referral forms), the project registered a total of 2,212 beneficiaries of the services, more than doubling the target of 1,080 by 1,132; hence achieving 205%.

Results from the quantitative analysis indicated in figure 13, reveal that 46% (46% Palorinya, 45% Rhino Camp) of the respondents knew or had benefited from the case management services. They rated the quality of services, and majority indicated that the services were good (46%), very good (30%) and fair (10%). There were also some few that indicated that the services were poor (6%) and very poor (7%),

Figure 13: Knowledge about harmful practices against children

and these were from Palorinya settlement.

Because of the quality and trust in services, when asked whether they would report cases of physical or sexual violence inflicted on any child by anyone, 83% of the respondents

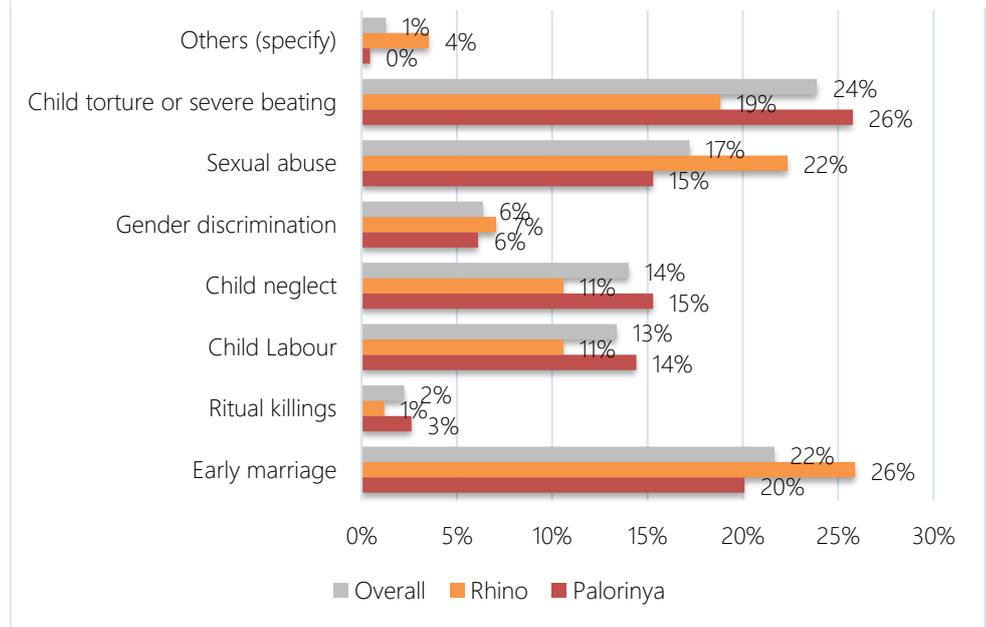


(78% Palorinya, 88% Rhino Camp) revealed that they would report. The most common place of reporting was cited as the RWCs or local council (26%), teachers (9%), child protection committee (13%) and police (12%). Further analysis indicates that 74% (85% Rhino, 63% Palorinya) believe that if they report any incident of violence against children to the authorities, appropriate corrective and or punitive action would be taken against perpetrators of child abuse. Thus, the case management services have been at the forefront of building trust and confidence of children in the services provided, which has promoted the feeling of safety among children in the refugee settlements.

The respondents were able to identify several harmful practices that children face in the communities including early marriage (23%, Rhino 26% and Palorinya 23%), child torture or severe beating (22%, Rhino 22% and Palorinya 26%), sexual abuse (19%, Rhino 22% and Palorinya 15%), child neglect (13%, Rhino 11% and 15% Palorinya), among others.

Overall, 59% of the respondents indicated that cases of such harmful practices have been reducing while 33% indicated that they are on the increase, and 8% were not sure. The respondents also indicated that girls are more affected by these harmful practices than boys (63%) and this is more in Rhino Camp (70%) than in Palorinya (56%); though 23% (36% Palorinya, 12% Rhino) of the respondents indicated that both boys and girls are affected in the same way.

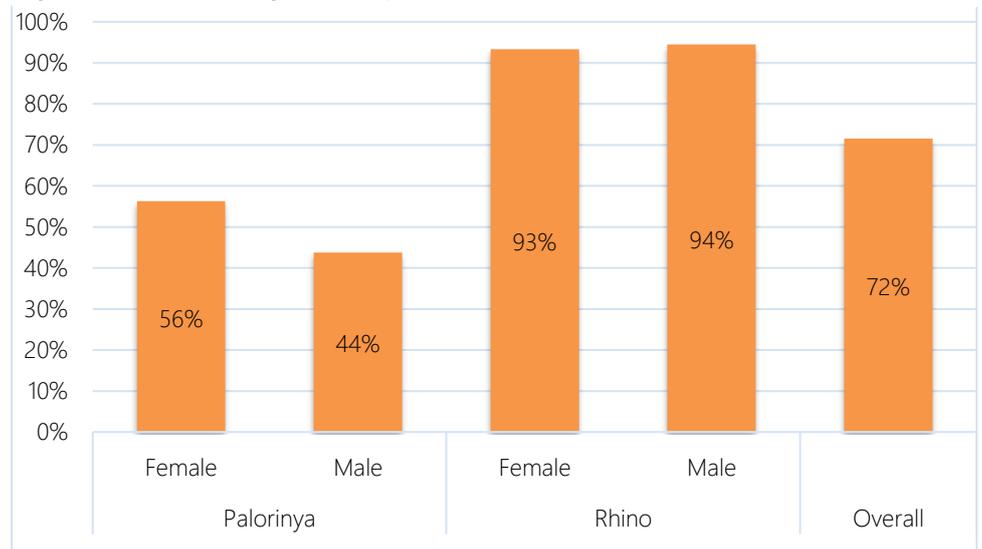
Figure 14: Respondents' knowledge of the harmful practices against children



5.3.5 Protective Education

Under this program, protective education comprised of two components (a) Accelerated Education Programs (AEP) for children aged 9-17 years in which they are given knowledge in literacy and numeracy in preparation to join the formal school system, undertake PLE, in addition to other life skills such as Sexual Reproductive Health (SRH) and menstrual hygiene; and, (b) Child Friendly Spaces (CFS) that act as gazetted areas for children under 18 years for play, recreation and other peer activities under supervision of a trained adult.

Figure 15: Percentage of respondents enrolled in AEP

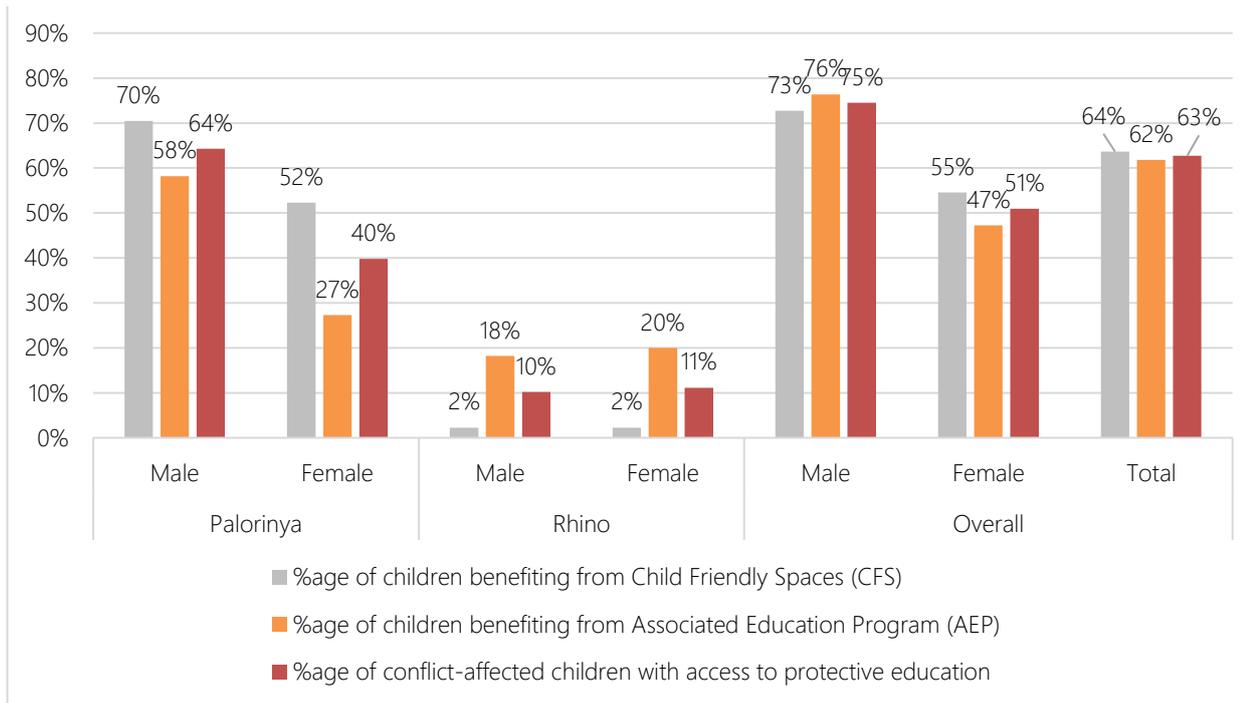


72% of respondents had enrolled in the AEP. Among these, 94% (93% females, 94% males) had enrolled from Rhino Camp and 50% (56% females 44% males) from Palorinya. In Rhino Camp, the evaluation was conducted at Hope Primary, Ocea C village. Prior to the coming of refugees in the area, the primary learners were studying from a nearby school. Hence, according to the school head teacher, 90% of the pupils in the school are refugees.

G1.1 Number of conflict-affected children with access to protective education

As at baseline, the percentage of conflict-affected children with access to protective education was determined as the aggregate of; the percentage of children attending AEP classes, and the percentage of children who participate in activities at the Child Friendly Spaces. Study results indicate 63% (75% male, 51% female) of conflict-affected children were accessing protective education. This is significantly above the baseline value of 51% (54% male, 48% female). It should be noted that males (75%) are more likely to benefit than females (51%). Project monitoring documents indicate 8,639 children, 187% of the target, accessed protective education.

Figure 16: Percent of conflict-affected children with access to protective education



R.3.4 Percent of children enrolled in AEP classes successfully complete Level 3

The evaluation results indicate 42% of the children interviewed had successfully completed Level 3. This shows a considerable improvement from the baseline where only 10% of the children interviewed (12% male, 8% female) had completed Level 3. It should be noted that this project supported only Level 3 while other SCI-run projects under the same donor targeted Levels 1 and 2.

Project monitoring, AEP Graduation Records and enrollment lists indicate that of the 540 beneficiaries targeted, 515 were able to successfully complete Level 3. Generally, fewer girls than boys complete AEP across all levels. According to the qualitative interviews conducted, girls are often compelled to drop out of school as a result of being married and having to attend to household and marital chores. Parents’ negligence was also mentioned as a barrier in girls getting an education. Qualitative interviews also noted that hosts perception of AEP tends to be negative, with hosts viewing it as a program for “failures”, which limited their participation.

When asked about the reasons why children do not join the AEP, FGD participants noted various challenges including early marriages, embarrassment (for studying in lower classes at an older age),

and lack of interest from the parents or guardians to take their children back to school. The AEP learners indicated that there are a lot of absentees in class and these are attributed to various reasons including lack of sanitary towels for girls to use during their menstrual periods (though it was provided under Cash Transfer Payments (CTP)), collection of food rations, supporting on household chores, lack of interest in learning and lack of scholastic materials (especially for children from Rhino Camp, who didn't receive cash grants for education). The ECHO INCLUDE project also provided sanitary towels to the girls and trained teachers and girls in making reusable sanitary towels.

Cash grants to facilitate children's education through AEP

AEPs are flexible, age-appropriate programs, run in an accelerated timeframe, which aim to provide access to education for disadvantaged, over-age, out-of-school children and youth – particularly those who missed out on, or had their education interrupted due to poverty, marginalisation, conflict and crisis. In order to ensure that parents or guardians stay committed to sending their children to AEP, a cash grant was provided to each household in Palorinya that sends a child to school. This money was provided by Mobile Money and was meant to cater for the learners' scholastic materials, such that parents have no excuse for not sending and supporting their child's education. 48% of children in Palorinya reported that their households received cash transfers; and the majority (25%) received between US\$50,000 and US\$150,000. The table below also provides details on how cash was utilized, adequacy of the cash provided, the reason for the continued absenteeism by the beneficiaries, among others. It should be noted that there were higher percentages of children that claimed to have been absent from school in Rhino Camp (88%) than in Palorinya (32%). The major reasons for absenteeism in Rhino Camp was stationery (64%) and school dues (42%).

The household heads were also asked if they had any child in the household that transitioned to formal education or vocational training. Table 13 also shows the percentage of respondents with households that had children that transitioned to formal education or vocational training from AEP. It reveals that 22% of households have had children that progressed to either secondary education or to vocational studies (29% Palorinya, 15% Rhino Camp).

Table 13: Survey Results on Cash Grants to facilitate Children's education through ALP

	Palorinya	Rhino	Overall
% of the households that received grants to facilitate commitment to children's education through AEP	46%	0%	46%
Frequency of receipt cash for education			
Don't know	50%	N/A	50%
Monthly	47%	N/A	47%
Quarterly	0%	N/A	0%
Received it Once	2%	N/A	2%
Twice a year	1%	N/A	1%
% of respondents reporting how much cash received			
150,001 – 300,000 Ushs	1%	N/A	1%
50,000 Ushs and below	3%	N/A	3%
50,001 – 150,000 Ushs	47%	N/A	47%
% of beneficiaries indicating how the used cash grants for child education			

Scholastic materials	48%	N/A	48%
Clothing	34%	N/A	34%
School uniform	30%	N/A	30%
Income generating activities	13%	N/A	13%
Buying household Food	28%	N/A	28%
Providing health services to household members	25%	N/A	25%
Buying of livestock	5%	N/A	5%
Others(specify)	43%	N/A	43%
% of beneficiaries reporting on adequacy of the cash grant for education			
No	64%	N/A	64%
Yes	36%	N/A	36%
% of beneficiaries that have been absent for more than 3 days due to failure to obtain scholastic materials	32%	88%	60%
Stationery	3%	64%	33%
School uniform	82%	6%	44%
Examination fees	82%	24%	53%
School dues	0%	42%	21%
Transport	82%	6%	44%
Others (specify)	3%	0%	2%
% of respondents reporting a change in the amount they are spending on child education			
No, it has remained the same	53%	24%	38%
Yes, it has increased	31%	58%	44%
Yes, it has reduced	16%	18%	17%
Causes of the Change			
Increased earnings	17%	6%	12%
Increased prices	17%	55%	36%
Others (specify)	1%	0%	0%
Reduced earnings	9%	12%	11%
Reduced prices	4%	3%	3%
% of households with children that have transited to formal education or vocational training	29%	15%	22%

8. Water, Sanitation and Hygiene (WASH) Findings

8.1 Demographic Profiles

Survey Coverage and Sample Size

The endline evaluation was conducted in WASH intervention areas in Bidibidi and Rhino Camp. In Bidibidi, the survey was conducted in Zone V, Ariwa sub county in the villages of Villages 19, 20, 22, 23, Gbiria, Okubani, Ariwa, Kagunde, Kiranga, Karunga, Ocinga, Osuma, Tokoro; while in Rhino Camp the survey was conducted in Ofua V and Katiku I & III, Uriama sub county in the villages of Akino, Cinya. A total of 275 households (225 refugees, 50 host community) were interviewed. In Bidibidi, 214 households (167 refugees, 47 host community) were sampled; whereas in Rhino Camp, 61 households (58 refugees, 3 host community) were sampled. The samples are statistically significant at 95% confidence level and 5% level of interval. The sampling was based on the proportion to the size of beneficiaries per settlement.

Gender and Age Distribution

During the survey, 52% of the respondents were female compared to 48% males. The average age for the respondents was 37 years, an indication that the survey respondents were in youthful age categories. In terms of household headship, 66% of the households were headed by males, while 33% headed by females and only 1% were child headed.

Level of Education

As regards the educational attainment, 44% of respondents had at least primary education (49% refugees and 39% from host communities); 34% had attained secondary education. There were more respondents who had attained secondary level education in host communities (45%) than in refugee settlements (24%). There were also more respondents who indicated that they have never been to school from the refugee settlements (24%) than in the host communities (13%), an indication of low levels of educational attainment within the refugee settlements. In all, only 3% had a certificate and 1% with a diploma level.

Length of Stay in Uganda and Household Size

In Bidibidi, majority (86%) of the respondents had been in Uganda for between 1 – 2 years while in Rhino Camp 60% of the respondents had been in Uganda for 3 – 5 years. In terms of household size, households in refugee settlements had more males and females between 5 – 17 years, 1.6 and 1.5 respectively; while in the host communities, households had more males and females 18 – 49 years (1.6 and 1.3 respectively).

Disability Status

The analysis indicates 16% of households had members with difficulties walking or climbing steps and using the local languages. It was also noted that 11% of the households had members with difficulties in seeing, even if wearing glasses. This is similar in both the refugee and host communities. Within these households, only 18% are registered as PSN.

Table 14: Household Demographic profiles

Demographic Information	BidiBidi		Rhino Camp		Overall		Total
	Refugee	Host	Refugee	Host	Refugee	Host	
No. of Respondents	167	47	58	3	225	50	275
Male (%)	38%	45%	41%	67%	40%	56%	48%
Female (%)	62%	55%	59%	33%	60%	44%	52%
Age of Respondents							
15 - 24 years	21%	30%	26%	33%	23%	32%	27%
25 - 34 years	34%	26%	26%	0%	30%	13%	21%
35 - 44 years	17%	21%	21%	33%	19%	27%	23%
45 - 54 years	17%	13%	17%	33%	17%	23%	20%
55 and above years	10%	11%	10%	0%	10%	5%	8%
Average age of the Respondent	39	35	35	39	37	37	37
Household Headship							
Male HHH	51%	62%	52%	100%	51%	81%	66%
Female HHH	49%	38%	45%	0%	47%	19%	33%
Child HHH	0%	0%	3%	0%	2%	0%	1%
Education Level of Respondent							
Never been to School	26%	26%	22%	0%	24%	13%	18%
Primary education	44%	45%	53%	33%	49%	39%	44%
Secondary education	29%	23%	19%	67%	24%	45%	34%
Certificate	0.6%	6%	3%	0%	2%	3%	3%
Diploma	0.6%	0%	2%	0%	1%	0%	1%
Length of Stay in Uganda							
Less than 3 months	0%	-	2%		1%		1%
3 - 6 months	2%	-	2%		2%		2%
6 - 12 months	2%		0%		1%		1%
1 - 2 years	86%		36%		61%		61%
3 - 5 years	10%		60%		35%		35%
Over 5 years	1%		0%		0%		0%
Household Size							
Under 0 – 59 months (MALE)	0.8	1.3	0.8	0.7	0.8	1.0	0.9
Under 0 – 59 months (FEMALE)	0.7	1.3	0.5	0.7	0.6	1.0	0.8
5 – 17 years (MALE)	1.5	1.5	1.7	1.0	1.6	1.3	1.4
5 – 17 years (FEMALE)	1.4	1.5	1.5	0.8	1.5	1.2	1.3
18 – 49 years (MALE)	1.1	1.7	1.3	1.5	1.2	1.6	1.4
18 – 49 years (FEMALE)	1.2	1.8	1.4	0.8	1.3	1.3	1.3
50+ years (MALE)	0.1	0.2	0.2	0.3	0.2	0.3	0.2
50+ years (FEMALE)	0.2	0.4	0.2	0.0	0.2	0.2	0.2
Households with Disability							
Seeing, even if wearing glasses	13%	21%	9%	0%	11%	11%	11%
Hearing, even if using hearing aids	6%	17%	12%	0%	9%	9%	9%
Walking or climbing steps	5%	17%	10%	33%	8%	25%	16%
Remembering or concentrating	5%	2%	5%	0%	5%	1%	3%

Self-care such as dressing & washing all over	2%	2%	3%	0%	3%	1%	2%
Using local language	27%	34%	2%	0%	14%	17%	16%
HH members with Disability							
BELOW 18 years	1.4	1.4	1.6	1.6	1.5	1.5	1.5
ABOVE 18 years	1.6	1.6	1.9	1.4	1.8	1.5	1.6
Registered PSN Household	19%		17%		18%		

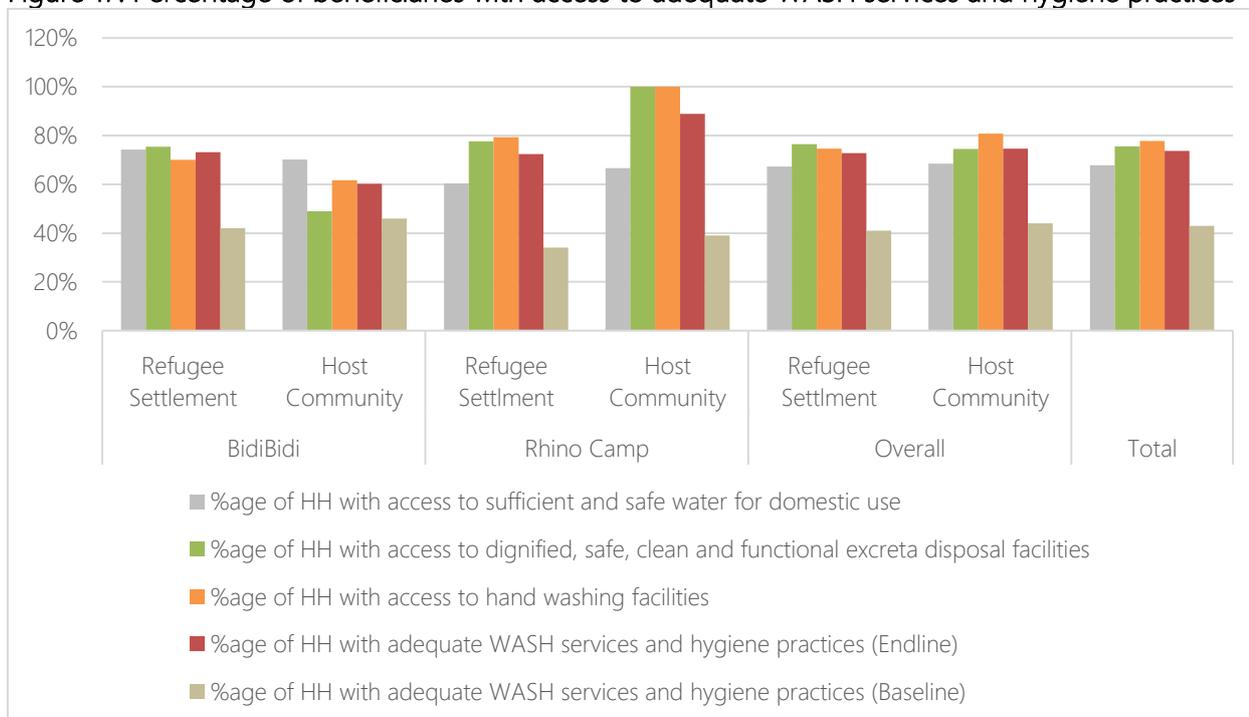
8.2 WASH Indicator Performance

Indicator G1.4: Percent of target population with adequate WASH services and hygiene practices

To calculate the percent of the target population with adequate to WASH services and hygiene practices, the evaluation adopted the approach used at the baseline and considered the “% of target population with adequate WASH services and hygiene practices” as a composite of; percentage of households with a latrine for safe human excreta disposal, percentage of households with access to sufficient and safe water for domestic use, and percentage of households having access to appropriate hand washing facility, a tippy tap with water and soap.

The analysis indicated a significant improvement from the baseline as far accessing WASH services. From a baseline of 43% to and endline of 74%, with specific improvement from 41% to 73% in refugee settlement and 44% to 75% in host communities. This achievement is slightly above the 70% set target.

Figure 17: Percentage of beneficiaries with access to adequate WASH services and hygiene practices



Sources of Water for Domestic Use

The assessment established that taps/stand pumps are the most used sources of water for domestic use (43%; 57% refugees, 29% host community) followed closely by boreholes/hand pumps (37%;

14% refugees, 60% host community). Unlike at the baseline where people were using mainly the tanker trucks (60%), only 4% at the endline indicated drawing water from the tanker trucks. Boreholes/Hand pumps are the most common sources of water in the host communities (60%) while public taps/stand pipes are commonly used in refugee settlements (57%). Areas like Katiku III and Ofua V depend purely on stand pipes.

Table 15: Water Source used by the respondents

Water Source for domestic use	BidiBidi		Rhino Camp		Overall		Total
	Refugee	Host	Refugee	Host	Refugee	Host	
Borehole/Hand pumps	15%	19%	12%	100%	14%	60%	37%
Piped Water	30%	13%	10%	0%	20%	6%	13%
Public Taps/Stand pipes	54%	59%	59%	0%	57%	29%	43%
Rivers/Lakes/streams	1%	0%	0%	0%	1%	0%	1%
Protected springs/wells	0%	2%	7%	0%	3%	1%	2%
Tanker Trucks	0%	7%	12%	0%	5%	4%	4%
Water Source for drinking							
Borehole/Hand pumps	23%	21%	10%	65%	16%	43%	29%
Piped Water	40%	11%	22%	0%	31%	5%	18%
Public Taps/Stand pipes	36%	49%	55%	35%	45%	42%	43%
Rivers/Lakes/streams	1%	17%	0%	0%	0%	8%	4%
Protected springs/wells	0%	2%	5%	0%	3%	1%	2%
Tanker Trucks	0%	0%	8%	0%	8%	0%	4%
Distance to improved water source							
0.0 – 0.25 km	33%	17%	21%	33%	27%	25%	26%
0.251 – 0.5 km	32%	40%	34%	33%	33%	37%	35%
0.51 – 1 km	18%	19%	12%	33%	15%	26%	21%
1.01 – 1.5 km	11%	11%	12%	0%	11%	5%	8%
1.51 – 3.0 km	5%	11%	17%	0%	11%	5%	8%
Above 3 km	1%	2%	3%	0%	2%	1%	2%
Change in distance in last 21 months							
Reduced	40%	40%	60%	0%	50%	20%	35%
Increased	23%	9%	17%	33%	20%	21%	20%
The Same	34%	49%	22%	67%	28%	58%	43%
Don't Know	2%	2%	0%	0%	1%	1%	1%
Queuing time at the water points							
0 – 5 min	15%	11%	3%	33%	9%	22%	16%
5 – 10 min	32%	26%	10%	33%	21%	29%	25%
10 – 15 min	9%	19%	16%	0%	12%	10%	11%
15 – 20 min	5%	17%	17%	0%	11%	9%	10%
20 – 25 min	5%	11%	7%	0%	6%	5%	6%
25 – 30 min	7%	6%	14%	0%	10%	3%	7%
Above 30 min	26%	11%	33%	33%	29%	22%	26%
Change in queuing time							
Reduced	46%	45%	55%	33%	51%	39%	45%
Increased	20%	13%	24%	67%	22%	40%	31%

The Same	31%	40%	21%	0%	26%	20%	23%
Don't Know	2%	2%	2%	0%	2%	1%	2%

Sources of Water for Drinking

There is no significant difference between sources of water for domestic use and drinking according to statistical analysis in both refugee and host communities. Public taps/stand pipes are the most common water sources for drinking (43%; 45% refugees, 42% host community) followed by boreholes/hand pumps (29%; 16% refugees, 43% host community). The analysis also indicated that piped water is another emerging source, especially in Bidibidi settlement, where it was cited by 40% of the respondents. Oxfam constructed one piped water system in Bidibidi and two in Rhino Camp. During the baseline, it was cited by only 1% of the respondents. Engagement with OXFAM's Team Leader for Public Health Engineering, revealed that the organization installed water pipes to the host communities in Zone 5, which had not previously been planned. Communities that had no water sources nearby are now the benefiting from the extensions that made into the host communities, hence increasing access to safe water coverage in the area.

Access to Water

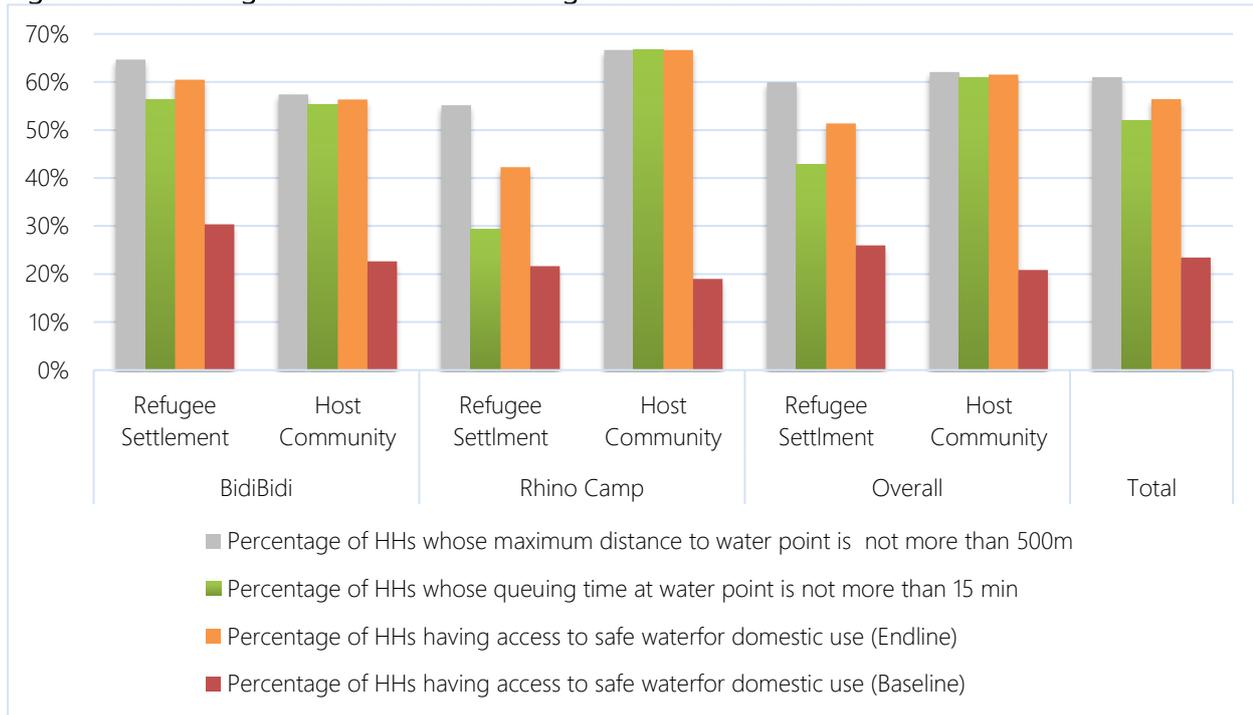
As at baseline, the assessment considered the percentage of respondents within a maximum distance of 500m from the nearest water point, and a queuing time of less than 15min. The aggregated percentage of both provided the percentage of people having access to sufficient and safe water for domestic use.

Overall there has been a significant increase in the percentage of households having access to safe water for domestic use from 23% at baseline to 56% at endline. The increase has generally been reflected in the host communities in Bidibidi. In Rhino Camp, Ofua 5 and Katiku III, water systems are entirely supplying water to refugees with little support to hosts given the geography of the area.

The results show 61% of the respondents (30% refugees, 31% host community) were within 500m from the nearest water point. This is twice the figure at the baseline, hence a reduction in the distance covered to access. Close to 40% are a distance of more than a kilometer to the nearest water point. When asked further, 35% (50% refugees, 20% host community) acknowledged a reduction in the distance. The respondents indicated that this reduction in distance has been due to a number of factors including the construction of more stand taps in the area (45%), and the establishment of more hand pumps/boreholes (27%).

The analysis also indicated 52% (43% refugees, 61% host community) of households reported a queuing time of 15 minutes at water points, which is much higher than the baseline figure of 21%. When asked about a change in the queuing time in the last 21 months, 45% indicated that the queuing time has reduced (51% refugees, 39% host community), 31% (22% refugees, 40% host community) indicated that it has increased whereas 23% (26% refugees, 20% host community) indicated that it has remained the same. According to those who indicated that there has been a reduction in the queuing time, they revealed that this has been caused by the establishment of more stand taps in the area (53%), hand pumps/boreholes (20%), and the provision of trucked water especially in Rhino Camp (19%).

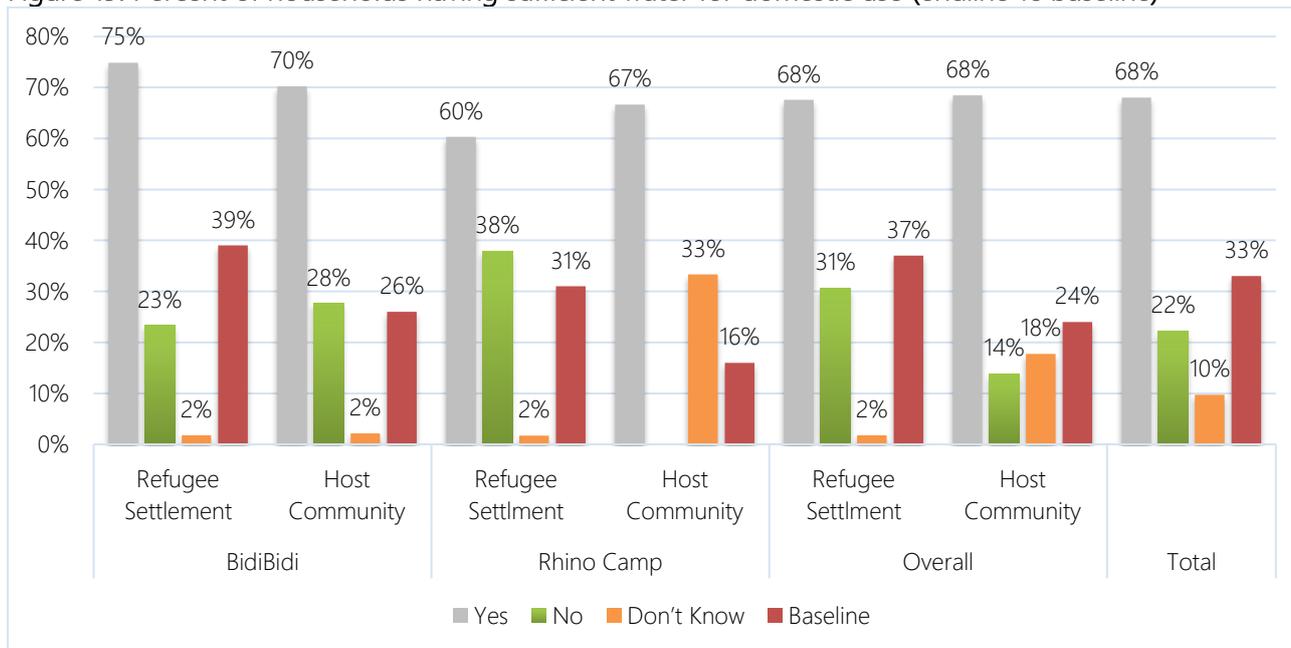
Figure 18: Percentage of households accessing water for domestic use



Indicator R2.1: Number of people having access to sufficient and safe water for domestic use

According to project monitoring reports, the program was able to achieve 103% of the target by reaching 97,740 with water. The figure below compares the survey results on the percentage of households having access to sufficient and safe water for domestic use at baseline and at the endline. The comparison shows a more than double increase in access to sufficient water for domestic use from 33% to 68% during the endline. Comparing the refugee and the host community, even though more tap stands were established in the refugee settlements than in the host community, the percentage change in access to sufficient water has been higher in host community (61%) than in refugee settlement (51%). This is because the population in host community is lower than in the refugee settlement, and therefore a single tap stand serves fewer households in host community than in refugee settlements. From baseline, hosts’ access to sufficient water was at 24% and it has moved to 68% at endline, while for refugees, access to sufficient water was at 33% and it has moved up to 68%. However, access to sufficient water has been realized in both Bidibidi and Rhino Camp operational areas for both hosts and refugees. However, water trucking still exists within Rhino Camp settlement.

Figure 19: Percent of households having sufficient water for domestic use (endline vs baseline)



The analysis also indicated 22% (31% refugees, 14% host community) of households don't have sufficient water for domestic use on a daily basis. Their coping mechanisms include clean less clothes (43%), wash less (21%), ration water use (19%), or buy water from elsewhere (14%).

However, access to sufficient water for domestic use may be affected by the Operation and Maintenance (O&M) of the water sources. According to the Water Use Committee (WUC) members, Oxfam established Water User Committees, consisting of a Chairperson, Vice Chairperson, Secretary, Treasurer, and Caretaker. They were trained and instructed on how to manage the water sources and their roles and responsibilities. However, the challenge remains with generating resources to meet the O&M demands. In the refugee settlements, unlike in the host committees, the WUC aren't allowed to levy charges for every households so as to raise money for O&M, since the refugees are deemed to be vulnerable and unable to raise any money. With UNHCR and OPM focusing now on self-sustenance and resilience of the refugees, contribution of minimal fees to the O&M of the water sources would be a way to ensure they have access to sufficient water in their households on a daily basis.

Through the qualitative analysis, it was also noted that water loss is very high in the refugee settlements. Water is lost either at the water collection point or used in non-basic domestic needs. According to Oxfam, it only generates enough water for domestic use in both the host and refugee settlements. It was however noted that water was used for other livelihood purposes such as brick making and small-scale irrigation. This is reflected in the average amount of water consumed per day. According to the KAP survey conducted in August 2018 by Oxfam, 46% of the households interviewed indicated an individual household member consumes more than 20 litres per day, 32% represented household members who consume between 15 to 20 liters per day, whereas 22% represented those who consume less than 15 liters per day.

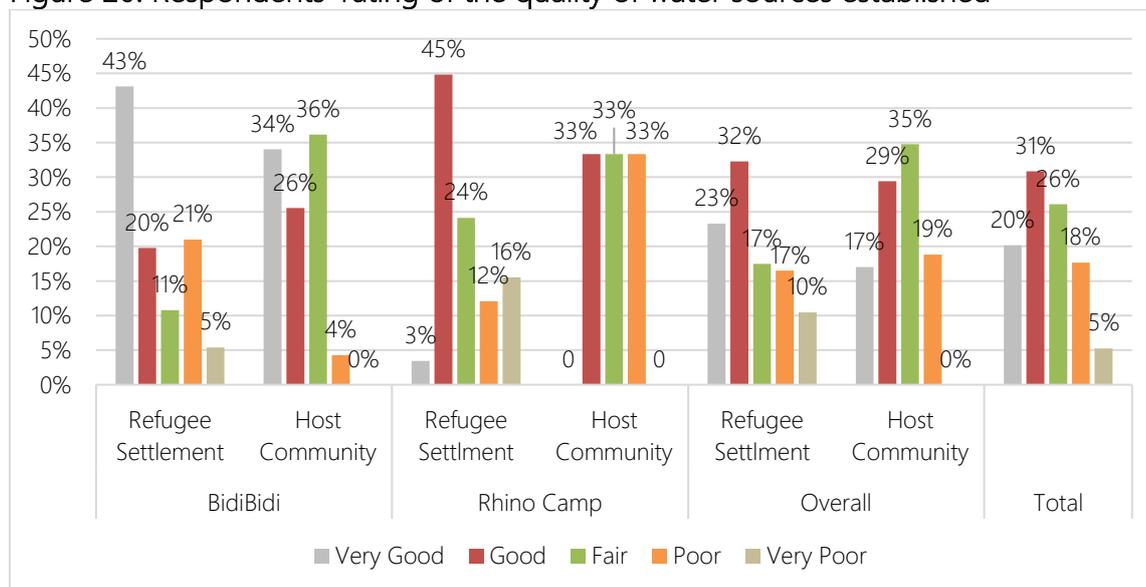
This issue raises a critical point for consideration going forward in regard to water use for livelihood purposes and design of a multi-sectoral assistance project. Agriculture requires a water source yet

water for production is not currently provided for. There is a likelihood that at one-point water won't be enough to meet all the water needs of the communities. Further soil degradation and deforestation exacerbate this challenge which will need to be addressed on a larger scale going forward.

Quality of Water Sources

The figure below shows respondents' rating of the water sources within the settlements. Over 30% of the respondents (32 refugees, 29 host community) indicated that the water sources are good while 20% (23 refugees, 17 host community) indicated that the water sources are very good and 26% (17 refugees, 35 host community) indicated that water sources are fair.

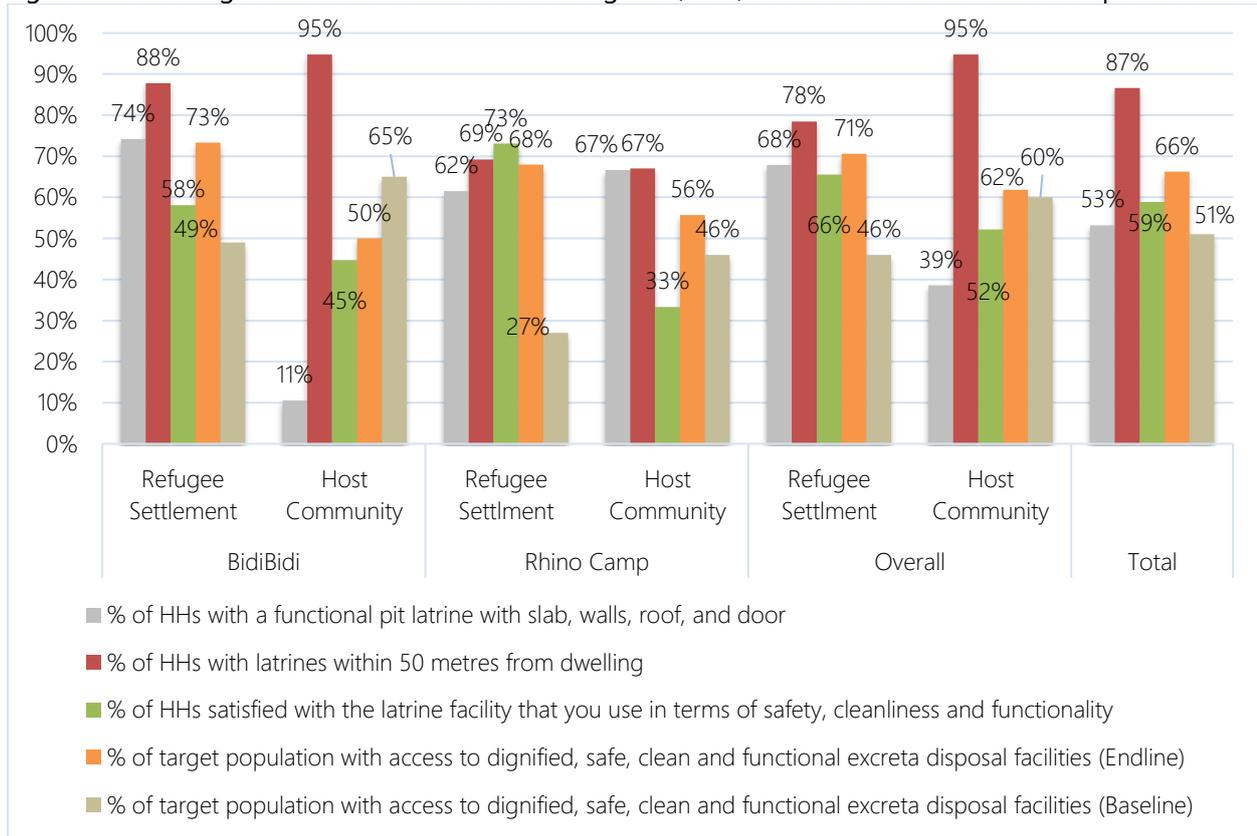
Figure 20: Respondents' rating of the quality of water sources established



Indicator R2.2: Number of people with access to dignified, safe, clean and functional excreta disposal facilities

According to project monitoring data, Oxfam was able to reach 5,530 individuals, 111% of the target. In order to determine the percent of people with access to dignified, safe, clean and functional excreta disposal facilities, the evaluation followed a similar approach used at the baseline and established; the percentage of households with a functional latrine complete with slab, walls, roof and door at 53% (68% refugees, 39% host community), the percentage of households with latrines within 50 meters from dwellings at 87% (78% refugees, 95% host community), and a proxy indicator 'the percentage of households satisfied with the latrine facility they use in terms of safety, cleanliness and functionality' to measure the percentage of households with latrines observed to be clean and located in a swept environment (in working order and properly maintained) at 59% (66% refugees, 52% host community). This was used in order to determine the aggregate percentage of households with access to dignified, safe, clean and functional excreta disposal facilities at 66% (71% refugees, 62% host community). This is higher than the 51% (46% refugees, 60% host community) realized at the baseline.

Figure 21: Percentage of households with access to dignified, safe, clean and functional excreta disposal facilities



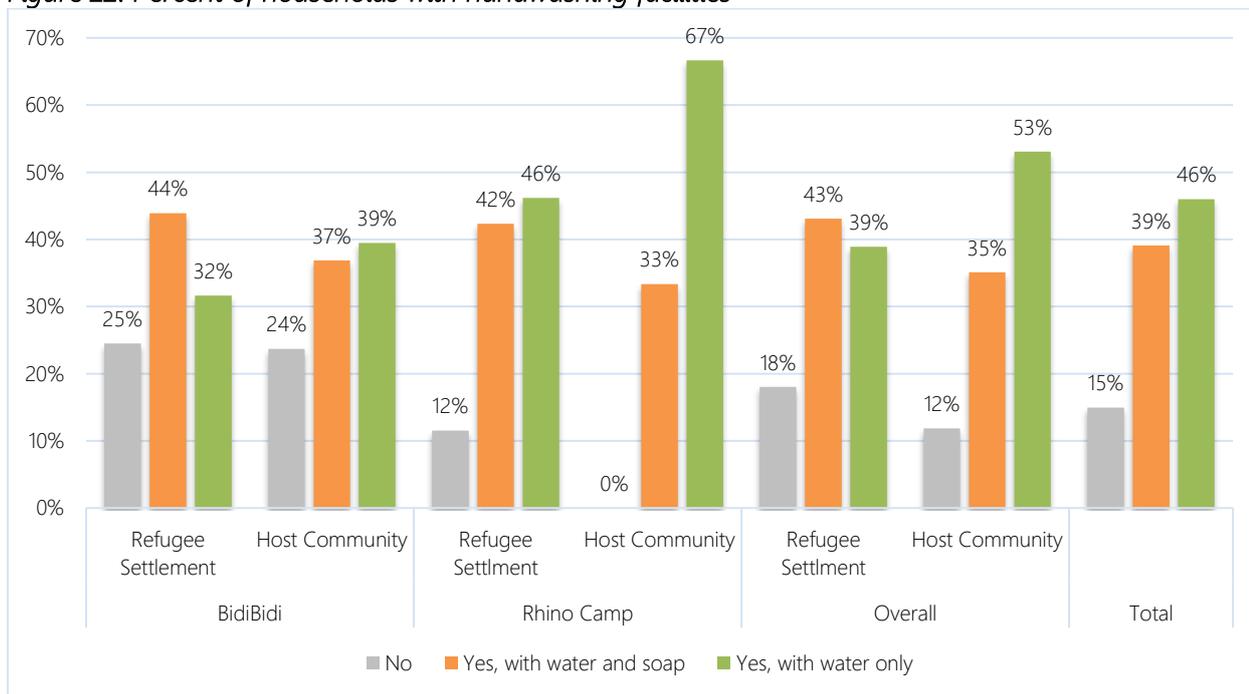
Further analysis indicated that over 90% (90% refugees, 91% host community) of the households have latrines. It was also noted that 58% (48% refugees, 69% host community) share their latrines with less than 10 people. This is still within global standards: 1 stance of a latrine is used by not more than 20 people at household level a day. Over 19% (26% refugees, 13% host community) use the latrines with between 10 - 20 people and only 17% use it with just their families each day. It was also noted that the majority (32%) of the households constructed their latrines 12 – 18 months prior to the evaluation (31% refugees, 32% host community). Other households indicated that their latrines were constructed 6 – 12 months ago (35% refugees, 24% host community). This indicates that the majority of the latrines are relatively new and constructed within the period of program implementation. There are however 21% of the households (3% refugees, 39% host community) indicating that the latrines were constructed 24 months or more prior to the survey, indicating these were not supported by Oxfam under this project. It was noted that OXFAM provided tools to the refugee households to construct latrines. These were shared among various households. However, with the existence of many female-headed households, most of which are vulnerable, the FGD members noted that such households are sometimes unable to dig a pit latrine and end up sharing with neighboring households.

Indicator R2.3: Percent of the households with access to hand washing facilities

At endline evaluation, at least 85% of the targeted beneficiaries had access to hand washing facility, with 39% (33% refugees, 35% host community) of households accessing a handwashing facility with soap and 46% (39% refugee, 53% host community) have access to hand washing facility with water only. At baseline, only 30% of the target population (23% refugees, 43% host community) had a proper hand washing facility, a designated place for hand washing or tippy tap with water

and soap/ash available. Hence a sizeable increase in accessibility to handwashing facilities; and above the program target of 50% of the households.

Figure 22: Percent of households with handwashing facilities



Discussion with the women in FGDs indicated that given the high poverty levels, it's very difficult to come across a household that can have spare soap for purposes of handwashing. It was also difficult to come across hand washing station or tippy tap, with households having handwashing facilities using small jerry-cans. Information from the key informants and FGDs indicated that households were provided with tippy taps by Oxfam. The tippy taps were accompanied by 450gm of soap to initiate hand washing practice after latrine use and this was a one off except were tippy taps were broken and needed replacement.

Indicator R2.4: # of people reached with hygiene promotional messages

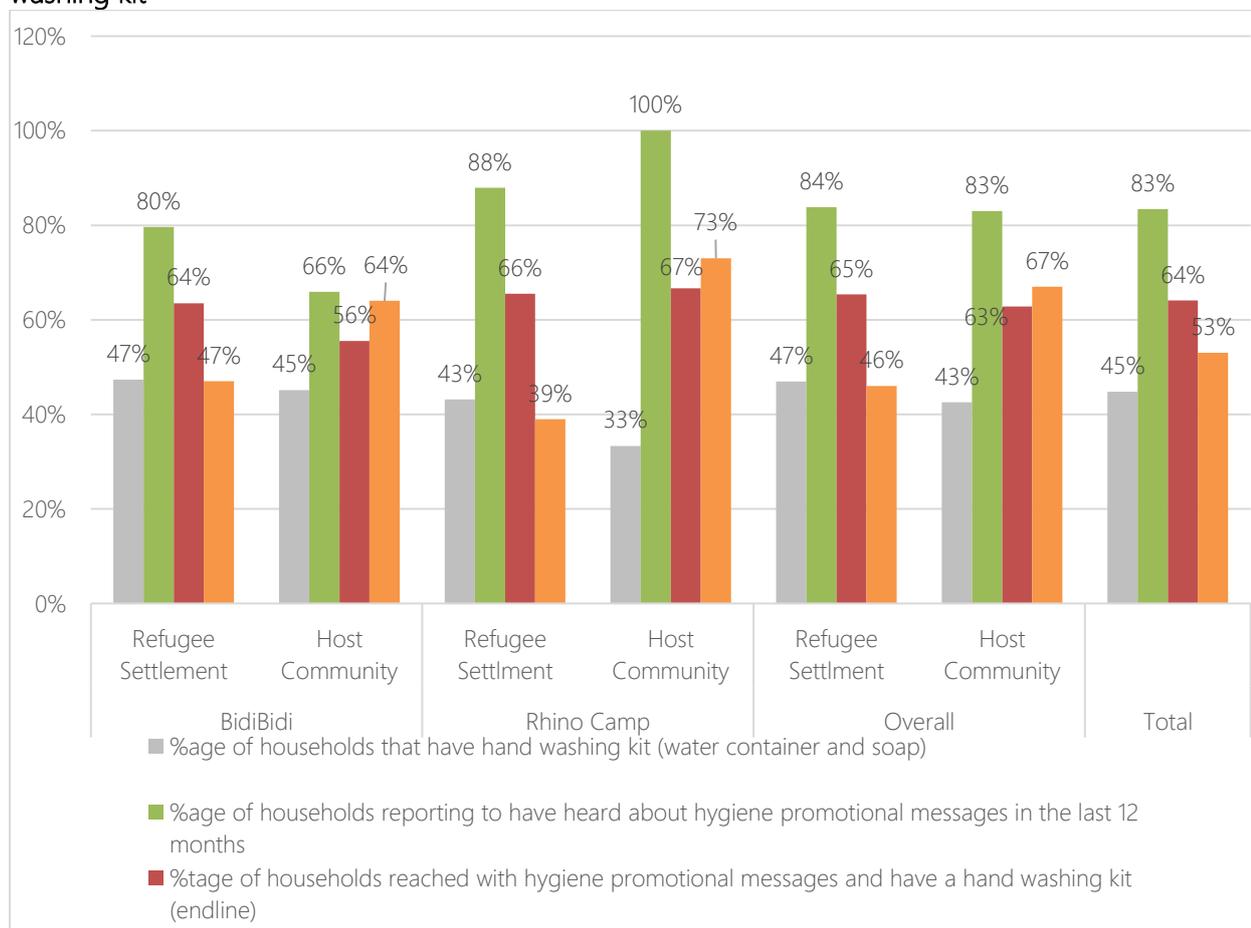
Under this indicator, the program targeted to reach out to 146,300 people with promotional messages and at endline project monitoring documents indicated 146,842 individuals, 100% of the target had been reached.

To generate the percentage of households that have been reached with hygiene promotional messages and hand washing kit, a regression analysis on two indicators was conducted; 'percentage of households that have handwashing kit (water container and soap) and the percentage of households that have heard about hygiene promotional messages in the last 12 months, prior to the evaluation. The results provided the measure for this indicator and they were compared with the baseline study results, to understand the change that has been created by the interventions.

64% (65% refugees, 64% host community) of the households have been reached with promotional messages and have hand washing facilities (water container and soap). This is an improvement from the baseline, which stood at 53%. There has been a significant improvement in those reached

with promotional messages and having handwashing facilities in the refugee settlements compared to the host communities, from 46% at baseline to 65% at the endline. In the host communities, the analysis indicates that there's a slight reduction in the percentage from 67% at baseline to 63% at endline. This indicates that considerable efforts under this intervention were placed in the refugee settlements with not so much emphasis placed on messaging for host communities.

Figure 23: Percentage of households that have been reached with hygiene promotional messages and hand washing kit



The evaluation survey considered a number of promotional messages that are indicated in the table below. Based on survey results, 83% of the households (84% refugees, 83% host community) had been reached with hygiene promotional messages in the last 12 months. Out of those that had reached with hygiene promotional messages, 54% (77% refugees, 31% host community) indicated to having heard messages on hand washing with soap messages, 28% (4% refugees, 52% host community) on Jerrycan cleaning, among others (see table below).

Table 16: Percentage of households that have heard about Hygiene promotional messages

Heard about hygiene promotional messages	BidiBidi		Rhino Camp		Overall		Total
	Refugee	Host	Refugee	Host	Refugee	Host	
Heard about any hygiene promotional messages							
No	20%	34%	12%	0%	16%	17%	17%
Yes	80%	66%	88%	100%	84%	83%	83%
Hygiene promotional messages heard							

Hand washing at critical times	11%	0%	2%	0%	6%	0%	3%
Cleaning compound	0%	0%	2%	0%	1%	0%	0%
Hand washing with soap messages	68%	61%	86%	0%	77%	31%	54%
Jerrycan cleaning	2%	3%	6%	100%	4%	52%	28%
Safe disposal of faeces	2%	3%	0%	0%	1%	2%	1%
Safe storage of water	5%	6%	0%	0%	3%	3%	3%
Safe water chain (collection, transportation, storage, & consumption)	0%	3%	0%	0%	0%	2%	1%
Solid waste management-rubbish pits	8%	10%	0%	0%	4%	5%	4%
Using a toilet	2%	6%	4%	0%	3%	3%	3%
Washing/drying of kitchen utensils	2%	0%	0%	0%	1%	0%	0%
Usefulness of the Messages							
Not useful at all	1%	0%	0%	0%	0%	0%	0%
Somehow useful	7%	6%	10%	67%	8%	37%	22%
Useful	26%	26%	63%	0%	44%	13%	29%
Very useful	67%	68%	27%	33%	47%	51%	49%

When asked to rate the messages received, 49% (47% refugees, 51% host community) indicated that messages were very useful, 29% (44% refugees, 13% host community) indicated that the messages were useful and 22% (8% refugees, 37% host community) indicated that the messages were somehow useful. None of the respondents indicated that the messages were not useful at all.

Hygiene Promotion by Hygiene Promoters/VHT

In order to promote hygiene in the settlements, Oxfam created community structures to support mobilization and sensitization. These were meant to ensure that all households in the communities had the basic requirements for proper hygiene at the household level and the community in general. Hygiene promoters visited every household to inspect the level of hygiene and provide advice to the household. In the refugee settlements, they are known as hygiene promoters whereas in the host communities they are known as Village Health Teams (VHT). Respondents were required to reveal whether they were ever visited by the hygiene promoters/VHT and if yes, how useful was the visit. The responses are indicated in the table below.

Table 17: Percentage of the households visited by the hygiene promoter/VHT

Visited by Hygiene Promoter/VHT	BidiBidi		Rhino Camp		Overall		Total
	Refugee Settlement	Host Community	Refugee Settlement	Host Community	Refugee Settlement	Host Community	
Visited by Hygiene Promoter/VHT							
No	16%	43%	9%	0%	12%	21%	17%
Yes, Within last 3 months	31%	11%	34%	67%	33%	39%	36%
Yes, Within last month	23%	40%	52%	0%	37%	20%	29%
Yes, Within last one year	31%	6%	5%	33%	18%	20%	19%
Usefulness of the visit							
Not useful at all	2%	0%	0%	0%	1%	0%	1%
Not very useful	1%	4%	2%	33%	2%	19%	10%

Somehow useful	10%	7%	21%	33%	15%	20%	18%
Useful	28%	11%	21%	33%	24%	22%	23%
Very useful	59%	78%	19%	0%	39%	39%	39%

The results indicate that 36% (33% refugees, 39% host community) were visited within the last 3 months prior to the evaluation, 29% (37% refugees, 20% host community) were visited within the last one month and 19% (18% refugees, 20% host community) visited within the last one year. There was however 10% of the respondents that indicated that they were not visited at all. Amongst those that were visited by hygiene promoters/VHTs, 39% (39% refugees, 39% host community) revealed that the visits were very useful; 23% (24% refugees, 22% host community) indicated that the visit was useful and only 1% indicated that the visit wasn't useful at all.

Participation in Meetings or Events Promoting Hygiene

In order to promote hygiene at the village level, Oxfam through its village promoters organized meetings or events on various themes about hygiene. The respondents were required to reveal whether they ever participated in such events and the results indicated that 77% (77% refugees, 78% host community) participated in meetings or events to discuss hygiene or sanitation. Among all that participated in these events, 97% indicated that the events were at least useful; while only 3% indicated that the promotional messages were somewhat useful. From the qualitative interviews, it was noted that it is from these events that the households got the basic information on hygiene. By the time hygiene promoters came for inspection at one's household, the beneficiaries were already implementing what they learnt from the events.

Table 18: Respondents' participation in hygiene promotion meetings/events

Participation in meetings /Events				BidiBidi	Rhino Camp	Overall	Total
Refugee Settlement	Host Community	Refugee Settlement	Host Community	Refugee Settlement	Host Community		
No	20%	45%	26%	0%	23%	22%	23%
Yes	80%	55%	74%	100%	77%	78%	77%
Useful of the meeting/event							
Not useful at all	2%	0%	0%	0%	1%	0%	0%
Not very useful	1%	0%	0%	0%	0%	0%	0%
Somehow useful	5%	0%	7%	0%	6%	0%	3%
Useful	26%	19%	77%	100%	52%	60%	56%
Very useful	66%	81%	16%	0%	41%	40%	41%

Availability of Soap at Household Level for Washing

When respondents were asked whether they ever received soap from the project, 39% agreed to have received soap while 45% indicated that they didn't receive and 16% don't know. 60% (53% refugees, 66% host community) currently indicated that they don't have soap in their households. In an FGD in Ofua Zone, Rhino Camp, the members revealed challenges associated with accessing soap in the area. On top of high levels of poverty that they can hardly have money to buy soap, organizations are no longer providing them with soap as they used to do. It was reported that AMREF and OXFAM once provided soap and chlorine for water treatment and this was used up. Some people have now resorted to selling food rations to access to basics like soap and others.

According to the quantitative analysis, some other households have resorted to coping mechanism which includes using water and ash (40%), using water only (33%) or not washing and bathing (17%).

Table 19: Percent of the households having soap of washing & solid waste disposal

	BidiBidi		Rhino Camp		Overall		Total
	Refugee	Host	Refugee	Host	Refugee	Host	
Receive soap from Oxfam or Ceford							
Yes	16%	11%	64%	67%	40%	39%	39%
No	78%	66%	36%	0%	57%	33%	45%
Don't Know	5%	23%	0%	33%	3%	28%	16%
Currently have soap in your household for washing							
Yes	43%	68%	50%	0%	47%	34%	40%
No	57%	32%	50%	100%	53%	66%	60%
Coping Mechanisms for households with no soap							
I don't wash	1%	33%			1%	33%	17%
Use water and ash	45%	22%	81%	33%	63%	17%	40%
Use water only	41%	44%	19%	33%	30%	17%	23%
Wash less frequently	8%	0%	0%	33%	4%	17%	10%
Dispose solid waste							
Bury	4%	4%	17%	0%	10%	2%	6%
Collect and burnt	11%	9%	34%	67%	23%	38%	30%
Throw it away	6%	17%	2%	0%	4%	9%	6%
Waste rubbish pit	78%	68%	41%	33%	60%	51%	55%

Solid Waste Disposal

One of the roles of the hygiene promoters was to sensitize people on how to dispose of waste at home. The analysis revealed that the majority (55%) dispose rubbish on a waste rubbish pit (60% refugees, 51% host community). Others collect and burn the waste (30%); and a few revealed that they either bury or throw away the waste (6%).

Menstrual Hygiene

The respondents were engaged to understand the change in their menstrual knowledge, attitude and practices since the baseline. There has been a slight increase in the knowledge, attitudes and practices. However, these changes are relatively insignificant and it is difficult to attribute them to the program intervention.

The average number of women in reproductive age per household have remained relatively the same at 1.8 per household. There was however an increase in the percent of women that used disposable pads during their previous monthly period from 60% at baseline to 70% at the endline. The most common type of disposable pads used are the re-usable pads by 64% of the respondents (73% refugees, 56% host community). It was also noted that most females dispose their Menstrual Hygiene Management (MHM) products in the latrines (68%). It was a similar trend during the

baseline where 65% were disposing in latrines. Similarly, a slightly higher percentage of respondents (76%) indicated that they still dispose MHM products in latrines.

Table 20: Respondents' Menstrual Hygiene Knowledge, Attitudes and Practices

MHM Management Practice	Bidibidi		Rhino Camp		Overall		Total	
	Refugees	Host	Refugees	Host	Refugees	Host	Endline	Baseline
Average No of Women in reproductive age per households	1.6	2.1	1.6	1.7	1.6	1.9	1.8	1.8
Materials used during the previous monthly periods								
Cotton	0%	4%	0%	0%	0%	2%	1%	4%
Disposable pads	74%	62%	52%	100%	63%	81%	72%	60%
Layers of underwear	4%	2%	0%	0%	2%	1%	1%	2%
Nothing/bleeding into clothes	1%	15%	3%	0%	2%	7%	5%	10%
Piece of cloth	10%	17%	38%	0%	24%	9%	16%	16%
Others (specify)	12%	0%	7%	0%	9%	0%	5%	
Type of disposable pads women use (n = 185)								
Cotton	1%	3%	17%	0%	9%	2%	5%	9%
Layers of underwear	5%	0%	0%	0%	2%	0%	1%	6%
Menstrual cap	2%	0%	0%	0%	1%	0%	1%	-
Reusable cloth	7%	17%	10%	67%	8%	42%	25%	3%
Reusable pads	78%	79%	67%	33%	72%	56%	64%	42%
Tampon	7%	0%	7%	0%	7%	0%	3%	-
Place of change of MHM products								
Bathroom	11%	49%	26%	0%	18%	24%	21%	7%
House	4%	4%	12%	0%	8%	2%	5%	28%
Latrine	76%	43%	55%	100%	66%	71%	68%	65%
Others (specify)	9%	4%	7%	0%	8%	2%	5%	-
Availability of toilet paper or cleansing water in places where MHM products are changed	70%	60%	55%	100%	63%	80%	71%	31%
MHM disposal methods								
Burn them	5%	19%	0%	0%	2%	10%	6%	5%
In the open	1%	9%	0%	0%	0%	4%	2%	2%
Latrine	85%	66%	88%	67%	86%	66%	76%	86%
Trash	2%	2%	10%	33%	6%	18%	12%	8%
Others (specify)	8%	4%	2%	0%	5%	2%	3%	
Received Training on MHM	59%	100%	81%	67%	70%	83%	77%	
Usefulness of Training								
Not useful at all	23%	15%	3%	0%	13%	7%	10%	
Not very useful	10%	15%	3%	0%	7%	7%	7%	
Useful	17%	19%	53%	33%	35%	26%	31%	
Very useful	49%	51%	40%	67%	44%	59%	52%	

In an FGD with women in Ofua 3, Rhino Camp, women resorted using blankets to make pads, which they then wash and re-use. They noted that the training on making re-usable pads has been laid down from generations and learning from each other in community groups. However, as a result of women and girls not having access to MHM products or materials to make local re-usable pads, girls have been left with no option but to absent themselves from school during their menstrual periods in order to avoid embarrassment. School girls also noted the lack of materials and safe places for changing pads at school. In Bidibidi Zone 4, Oxfam intervened with 500 kits & 250 kits of MHM products at schools and community level respectively.

9. Livelihoods Survey Findings

9.1 Demographic Profiles

Sample Size

A total of 390 respondents were sampled and interviewed under result areas 3 and 4, with 245 respondents sampled in Bidibidi, 45 respondents in Palorinya and 100 respondents in Rhino Camp. The sample was statistically significant at 95% confidence and 5% level of interval. The samples are proportionally representing the target beneficiaries in the project. The study was conducted in Bidibidi, Zone 1 – 5, Palorinya Base Camp Zone and Rhino Camp in Ofua I, II and III (see Table below for details).

Gender and Age Distribution

Primary data was collected amongst both refugee and host communities of Bidibidi (Yumbe), Palorinya (Moyo) and Rhino Camp (Arua). Over 84% of the respondents were from the refugee settlements as compared to 16% from the host communities. Amongst the respondents, the majority were female (43% female vs 53% male). In terms of age, the majority of the respondents were between 25 – 34 years 31% (24% from refugee settlements and 7% from host communities). This indicates that the majority of the respondents were youths.

Household Headship by Gender

In this evaluation, the majority of household heads were males (56% male vs. 43% female) while 1% were child headed families. No child headed families were sampled from the host communities.

Level of Education

The majority of the respondents had attended primary education 51% (38% refugees, 12% host communities).

Length of Stay in Uganda

The majority (76%) of the refugee respondents had stayed in Uganda for 1 – 2 years and 24% had spent between 3 – 5 years.

Table 21: Demographic Characteristics of Livelihood Respondents

Demographic Information	BidiBidi		Palorinya		Rhino Camp		Overall		Total
	Refugee	Host	Refugee	Host	Refugee	Host	Refugee	Host	
	245		45		100		390		390
No. of Respondents	212	33	23	22	94	6	329	61	
Male (%)	53%	5%	20%	27%	51%	4%	41%	12%	53%

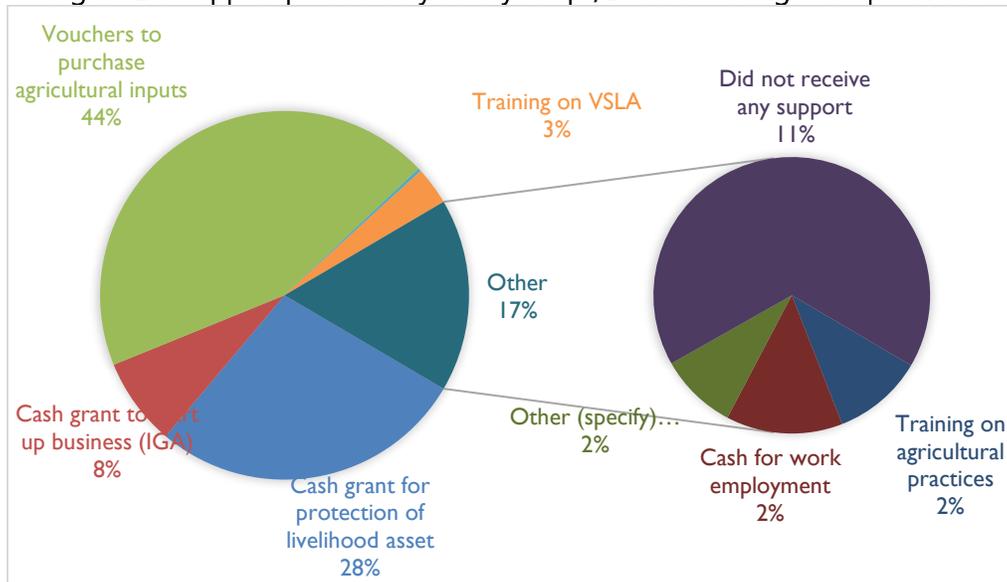
Female (%)	33%	8%	31%	22%	43%	2%	36%	11%	47%
Age of Respondents									
15 - 24 years	16%	1%	9%	9%	19%	1%	15%	4%	18%
25 - 34 years	22%	5%	20%	13%	30%	1%	24%	7%	31%
35 - 44 years	20%	2%	11%	9%	16%	1%	16%	4%	20%
45 - 54 years	13%	1%	9%	7%	23%	3%	15%	4%	18%
55 and above years	15%	4%	2%	11%	6%	0%	8%	5%	13%
Household Headship									
Male HHH	38%	12%	27%	31%	53%	6%	39%	16%	56%
Female HHH	48%	1%	24%	18%	38%	0%	37%	6%	43%
Child HHH	0.4%	0%	0%	0%	3%	0%	1%	0%	1%
Education Level of Respondent									
Never been to School	24%	6%	16%	7%	7%	0%	15%	4%	20%
Primary education	42%	4%	27%	29%	47%	4%	38%	12%	51%
Secondary education	20%	2%	7%	11%	31%	2%	19%	5%	25%
Certificate	0.4%	0%	0%	2%	6%	0%	2%	1%	3%
Diploma	0.5%	0%	2%	0%	3%	0%	2%	0%	2%
Length of Stay in Uganda									
1 - 2 years	85%	0%	100%	0%	44%	0%	76%	0%	76%
3 - 5 years	15%	0%	0%	0%	56%	0%	24%	0%	24%
Household Category									
Elderly above 65 years and heading household	8%	0%	9%	0%	0%	0%	5%	0%	5%
Foster parents or care taker	13%	0%	4%	0%	33%	0%	17%	0%	17%
Single parents HHH	36%	0%	30%	0%	30%	0%	32%	0%	32%
Persons with disability (PWD)	3%	0%	0%	0%	5%	0%	3%	0%	3%
Pregnant/Lactating mothers who are heading household.	12%	0%	4%	0%	6%	0%	8%	0%	8%
Women at risk household	10%	0%	4%	0%	0%	0%	5%	0%	5%
None of the above	18%	0%	48%	0%	26%	0%	30%	0%	30%
Household Size									
Under 0 – 59 months (MALE)	0.8	1.6	0.7	0.4	0.8	0.7	0.8	0.9	1.7
Under 0 – 59 months (FEMALE)	0.6	1.4	0.8	0.5	0.7	0.7	0.7	0.9	1.6

5 – 17 years (MALE)	1.6	2.4	0.9	1.0	1.9	1.0	1.5	1.5	2.9
5 – 17 years (FEMALE)	1.5	2.1	1.2	1.4	1.8	0.8	1.5	1.4	2.9
18 – 49 years (MALE)	1.1	1.9	0.8	1.4	1.4	1.5	1.1	1.6	2.7
18 – 49 years (FEMALE)	1.3	1.5	1.0	1.2	1.4	0.8	1.2	1.2	2.4
50+ years (MALE)	0.2	0.6	0.1	0.2	0.2	0.3	0.2	0.4	0.5
50+ years (FEMALE)	0.3	0.5	0.1	0.4	0.2	0.00	0.2	0.3	0.5
Households with Disability									
a. Seeing, even if wearing glasses	15%	21%	13%	36%	20%	17%	16%	25%	41%
b. Hearing, even if using hearing aids	10%	21%	9%	18%	6%	0%	8%	13%	22%
c. Walking or climbing steps	9%	27%	13%	14%	7%	0%	10%	14%	24%
d. Remembering or concentrating	21%	3%	0%	9%	6%	0%	9%	4%	13%
e. Self-care such as dressing & washing all over	4%	6%	9%	0%	3%	0%	5%	2%	7%
f. Using local language	47%	36%	35%	5%	6%	0%	29%	14%	43%
HH members with Disability									
BELOW 18 years	1.9	1.1	1.6	0.8	0.7	0.0	1.4	0.6	2.03
ABOVE 18 years	1.9	1.1	1.7	1.0	0.5	1.0	1.4	1.0	2.40
Registered PSN Household	25%		9%		20%		18%		18%

Type of Support Received

The most common type of support identified was the distribution of vouchers to purchase agricultural inputs (44%), followed by cash grant for protection of livelihood assets (28%). Others mentioned included the cash grants to start-up businesses (IGA) (8%), cash for work employment (2%) training on VSLA (3%), training on modern agricultural practices (2%), among others. 11% of the respondents indicated not having received any form of support from MC/DCA.

Figure 24: Support provided by Mercy Corps/DCA according to respondents



9.2 Coping Strategy Index (CSI)

Indicator G1.2: Average Coping Strategy Index

This indicator was measured using the household food security Reduced Coping Strategy Index (RCSI), which is often used as a proxy indicator of household food insecurity. The RCSI is based on a list of behaviors (coping strategies) that a household engages in during times of food scarcity. RCSI combines: (i) the frequency of each strategy; and (ii) their severity for households reporting food consumption problems.

For comparison purposes, the baseline CSI was re-calculated using the RCSI. In the RCSI, five standardized behaviours that are recommended by WFP were applied, within a standardized set of severity weightings for each strategy. Respondents were asked how many times during the past seven days prior to the evaluation they had employed specific types of coping strategies, in order to cope with a lack of food or insufficient money to purchase food.

Table 22: Severity weights adopted for each coping strategy

Strategy	Severity Weight
1. Rely on less preferred and less expensive foods	1
2. Borrow food, or rely on help from a friend or relative	2
3. Limit portion size at mealtimes	1
4. Restrict consumption by adults in order for small children to eat	3
5. Reduce number of meals per day	1

During the in the endline evaluation, the coded frequency response for each strategy was weighted by the severity of each strategy. Using the following formula: $RCSI = \sum frequency\ category\ i * severity\ weight$ where $i = 1$ to 5. The RCSI was administered to a total of 1,004 respondents, statistically sampled from all the three project settlements of Bidibidi (549), Palorinya (157), and Rhino Camp (294).

The analysis below indicates there has been an increase in the RCSI from 9.9 at baseline to 11.2 at the endline. This implies that there has been an increase food scarcity in the settlement since the endline was conducted. Households are relying more on borrowing or seeking for help from friends and relatives than at baseline (3.2 endline, 2.3 baseline); and are restricting consumption by adults in order for small children to eat (3.2 endline, 1.9 baseline).

According to the respondents in an FGD in Ofua 1, Rhino Camp, even though several livelihood programs have been supportive, they have been affected by the adverse weather conditions (long droughts) and failure to find space to grow crops.

At both endline (10.8 refugees, 11.6 host communities) and baseline (8.7 refugees, 11.1 baseline) refugees have proved to be more food secure than the host communities. This is attributed to food provisions provided by WFP.

At the settlement level, Palorinya was found to have a better RCSI (10.3) than at baseline (from 16.2 at baseline to 10.3 at endline whereas Bidibidi and Rhino Camp's RCSI increased (baseline 9.05 and 9.2 respectively to 11.2 and 12.1 at endline).

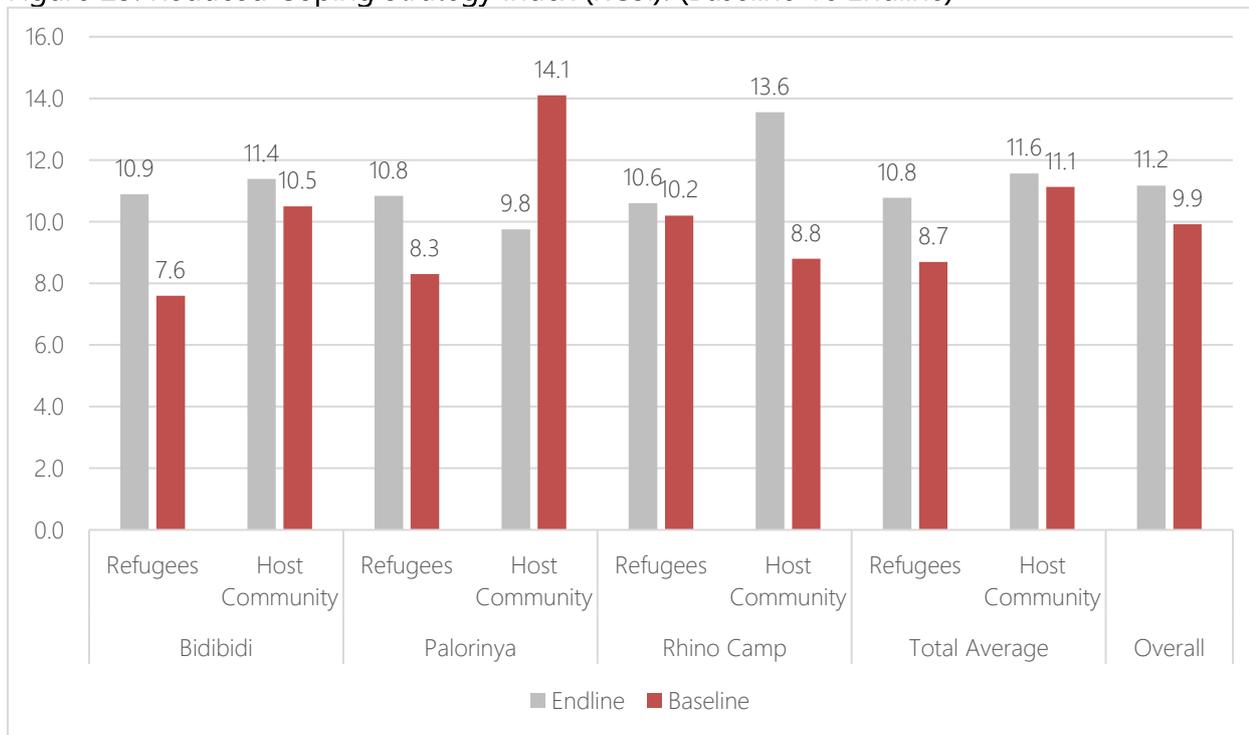
Table 23: Reduced Computed Coping Strategy Index (RCSI) – Endline vs Baseline

Coping Behaviour	Weight	Bidibidi				Palorinya				Rhino Camp				Total Average				Overall	
		Refugees		Host		Refugees		Host		Refugees		Host		Refugees		Host		F	W
		F	W	F	W	F	W	F	W	F	W	F	W	F	W				
1. Rely on less preferred and less expensive foods	1	2.0	2.0	1.9	1.9	1.6	1.6	1.5	1.5	2.1	2.1	2.5	2.5	1.9	1.9	2.0	2.0	2.0	2.0
2. Borrow food, or rely on help from a friend or relative	2	1.5	3.1	1.7	3.3	1.8	3.5	1.7	3.4	1.2	2.4	1.8	3.5	1.5	3.0	1.7	3.4	1.6	3.2
3. Limit portion size at mealtimes	1	1.3	1.3	1.2	1.2	1.3	1.3	0.6	0.6	1.3	1.3	1.5	1.5	1.3	1.3	1.1	1.1	1.2	1.2
4. Restrict consumption by adults in order for small children to eat	3	1.0	2.9	1.2	3.6	0.8	2.3	1.0	3.0	1.1	3.2	1.3	4.0	0.9	2.8	1.2	3.5	1.1	3.2
5. Reduce number of meals per day	1	1.5	1.5	1.4	1.4	2.1	2.1	1.2	1.2	1.6	1.6	2.0	2.0	1.7	1.7	1.5	1.5	1.6	1.6
Household RCSI (Endline)		10.9		11.4		10.8		9.8		10.6		13.6		10.8		11.6		11.2	
Baseline																			
1. Rely on less preferred and less expensive foods	1	1.3	1.3	1.5	1.5	2.4	2.4	3.0	3.0	2.4	2.4	2.5	2.5	2.0	2.0	2.3	2.3	2.2	2.2
2. Borrow food, or rely on help from a friend or relative	2	1.2	2.4	1.7	3.4	0.6	1.2	1.2	2.4	1.3	2.6	0.9	1.8	1.0	2.1	1.3	2.5	1.2	2.3
3. Limit portion size at mealtimes	1	1.3	1.3	2.2	2.2	1.2	1.2	2.6	2.6	2.0	2.0	1.3	1.3	1.5	1.5	2.0	2.0	1.8	1.8
4. Restrict consumption by adults in order for small children to eat	3	0.5	1.5	0.5	1.5	0.6	1.8	1.2	3.6	0.5	1.5	0.5	1.5	0.5	1.6	0.7	2.2	0.6	1.9
5. Reduce number of meals per day	1	1.1	1.1	1.9	1.9	1.7	1.7	2.5	2.5	1.7	1.7	1.7	1.7	1.5	1.5	2.0	2.0	1.8	1.8
Household RCSI (Baseline)		7.6		10.5		8.3		14.1		10.2		8.8		8.7		11.1		9.9	

F* = Frequency in days W** = Weighted CS

This disparity in the endline and baseline CSI could partly be explained by the difference in the periods (seasons) when the two assessments were conducted. The baseline was conducted in October and November, which are mainly rainy seasons and crops are blossoming, while the endline was conducted in January/February, which are typically characterized with dry spells and nothing to harvest.

Figure 25: Reduced Coping Strategy Index (RCSI): (Baseline Vs Endline)



9.3 Livelihood Indicator Performance

Indicator R3.1: # of individuals with improved access to agricultural inputs and use of climate smart agricultural practices

Project monitoring reports indicate 11,518 farmers were provided with increased access to agricultural inputs through vouchers and seed fairs, 99% of the target. A modification of the project included a shift in this indicator from 8,020 to 11,651. Endline survey results indicate that 93% of the target beneficiaries use at least one of the climate smart agriculture practices. These practices include perma-gardening practices, soil health and management, row planting, irrigation, and tillage practices.

The results also indicate that majority (44%) of the respondents received vouchers to purchase agricultural inputs (84% refugees and 16% host communities). Out of these (60%) indicated that they got these vouchers twice a year (57% refugees and 63% host communities) and 33% indicated that they received the vouchers once (37% refugees and 30% host communities). When asked about the amount received, the majority (78%) indicated to having received vouchers worth between Ushs. 50,000 – 150,000 (60 refugees and 96 hosts). Mercy Corps farmers received individual vouchers and then had the option of grouping their vouchers with other members of their group to purchase larger quantities of inputs. For the DCA farmers, each individual farmer received a voucher for improved seeds and tools such as Cow-peas, ground nuts, Okra, Egg-pants,

Onions, Tomatoes and Cabbages, sacks and forked hoe while for each farmer group received vouchers for seeds and group vouchers (which included wheel barrows, spray pumps, watering cans and pangas).

Table 24: Access to Vouchers to purchase agricultural inputs

Vouchers to purchase agricultural inputs	Refugee		Host Community	
Total	145	84%	27	16%
Period of receipt				
Received it Once	54	37%	8	30%
Monthly	3	2%	0	0%
Quarterly	5	3%	2	7%
Twice a year	83	57%	17	63%
Amount Received				
50,000 Ushs and below;	19	13%	0	0%
50,001 – 150,000 Ushs	87	60%	26	96%
150,001 – 300,000 Ushs	12	8%	1	4%
300,001 – 500,000 Ushs	0	0%	0	0%
500,001 – 700,000 Ushs	1	1%	0	0%
700,001 – 1000,000 Ushs	22	15%	0	0%
Don't Know	4	3%	0	0%
Used Grant for buying				
Improved seeds	133	31%	25	30%
Vegetable seeds	116	27%	24	29%
Fertilizers	5	1%	1	1%
Oxen/ Ox ploughs Hoes Water cans	109	25%	16	20%
Super grain bags (SGBs)	57	13%	16	20%
Tarpaulins	3	1%	0	0%
Non-agricultural items	7	2%	0	0%

According to the survey results, the beneficiaries used the vouchers to access a variety of the agricultural inputs. At least 31% of the respondents used the voucher to buy improved seeds, 28% used the voucher to buy vegetable seeds, 22% used them to buy Oxen/ Ox ploughs, Hoes, watering cans and 16% used them to buy super grain bags (SGBs). In some FGDs, farmers cited that particular seeds were of poor quality, especially Okra. Some FGD participants also raised that Mercy Corps' seed fairs occurred late. When cross-referenced with Mercy Corps team members, it was confirmed that the first season of the project seed fairs occurred in August as the project team rushed to hire team members and get organized after the award signing.

In 75% of the FGDs conducted on livelihoods, farmers indicated that the price at which seeds were redeemed was comparably higher than the usual market price of the seeds, yet vouchers were only redeemable for inputs and not cash. MC/DCA brought agro dealers into the settlements to provide inputs on multiple days in each location. Vouchers could only be redeemed on those days given agro dealers do not have a consistent presence in the settlements. MC/DCA did do market price assessments which informed how prices were negotiated with agro dealers. However, the

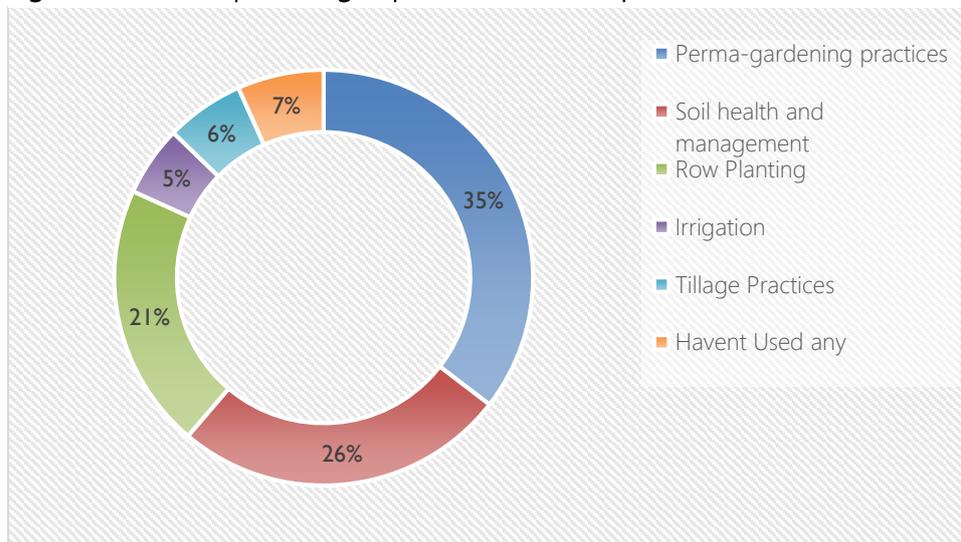
inputs were slightly more expensive than the market prices due to transportation costs into the settlements.

Practicing of Improved Cultivation Practices (Climate Smart Agriculture)

Respondents indicated whether they applied improved agricultural practices and which exact practices they applied.

Respondents could choose multiple methods. Majority (35%) of the farmers indicated practicing perma-gardening including kitchen gardening and/or sack molds. Others (26%) revealed that they practice soil health and management

Figure 26: Farmer practicing improved cultivation practices



including mulching, organic fertilizer usage and soil water/moisture content management. Other cultivation practices included row planting (21%), Irrigation practices (5%), Tillage practices (6%).

The study also looked at changes (positive or negative) caused by the varying identified farming practices. 72% of those applying perma-gardening indicated positive change related to an increase in farm yields. This was attributed to use of agricultural inputs (31%), improved inputs (21%) and weather/climate (40%). 24% of the respondents indicated that they have noticed a decrease in yields and this they attributed mainly to weather changes (93%). On the adoption and use of soil health and management including mulching, organic fertilizer usage and soil water/moisture content management, 86% indicated that it has positively impacted their yields and only 9% indicated that they have noticed a decrease. The positive results are attributed to weather (42%) and use of improved agricultural inputs including seeds and equipment (74%). The decrease in yields is attributed mainly to changes in weather patterns.

Table 25: Change Caused by the Agricultural Practice (n=330)

Practice	Changes		Attribution	
	Change Description	Percentage	Attribution	Percentage
Perma-gardening practices including kitchen gardening and/or sack molds	Negative (noticed yields decreased)	24%	Weather	93%
			Use of Agriculture inputs	7%
	Positive (noticed yields increased)	72%	Use of Agriculture inputs	31%
			Use of Improved Inputs	29%
Neutral (yields stayed the same)	4%	Weather/Climate	40%	
Soil health and management including mulching, organic fertilizer	Negative (noticed yields decreased)	9%	Weather	63%
			Use of improved Agriculture inputs	38%

usage and soil water/moisture content management	Positive (noticed yields increased)	86%	Weather	42%
		4%	Use of improved Agriculture inputs	34%
			Use of Improved Inputs	40%
	Neutral (yields stayed the same)	4%		
Don't Know	1%			

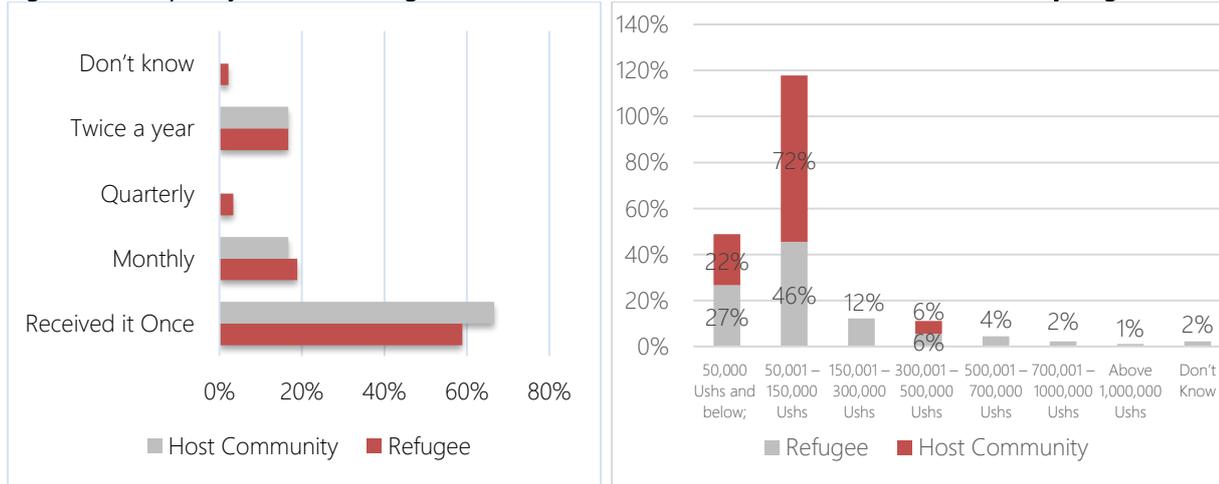
Indicator R3.2: # of farmers and females at risk who receive cash grants for protection of livelihood assets or as part of the ALP

According to the analysis from the survey data, 28% of the livelihood respondents revealed to have received cash grants. This includes 32% AEP participants and 60% of the targeted farmers. This is far above the 5% respondents at the baseline who indicated to have received cash grants for protection of livelihood assets. Project monitoring indicates the project has been able to realize 84% of its targets reaching 3,213 beneficiaries. Partners noted a discrepancy in how the target for this indicator was calculated at proposal stage, with direct farmers and indirect households being counted to reach 3,824. At endline, partners have reported only direct beneficiaries (individual farmers, females at risk and ALP guardians that received cash grants). If the same calculation was used at endline that was used at proposal stage, indirect HH beneficiaries for ALP transfers would be counted in addition to females at risk and farmers to equal a total reach of 4,491 or 117% of target.

280 ALP students were included in the representative sample of livelihood activities as they received business skills training and cash grants to support livelihood activities. In terms of assessing the viability of transitioning AEP graduates to livelihood activities, AEP graduation occurred late in the program due to the curriculum cycle therefore it is difficult to ascertain the success of such transitions. The 280 AEP students received cash grants to support livelihood activities as well as business skills training and the opportunity to participate in an internship with a local business. Mercy Corps indicated it had also secured funding to provide follow-on mentorship to cash grant recipients for the coming ten months.

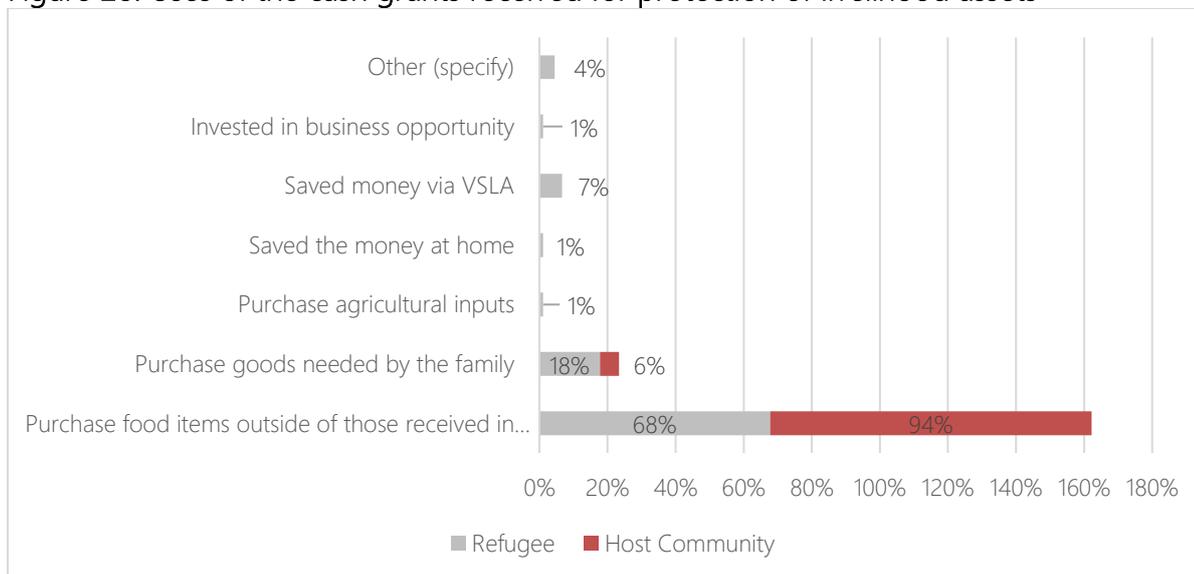
A one-off cash grants of Ushs. 400,000 was given to the 280 AEP learners to support the process of establishing IGA's in December 2018. Many learners had already started a business using the monthly cash grants thus the one-off cash grant provided an opportunity for scaling and expansion. They invested in various IGA's including agricultural enterprises, bakery, tailoring, retail sale etc. For those that opted for vocational skill training, further training is required and supporting them with necessary resources and capital to engage into IGAs once they graduate.

Figure 27: Frequency at which cash grants for livelihood were received and amount received by targeted beneficiaries



The survey results revealed that 59% of the refugees and 67% of the respondents from the host communities received cash grants for protection of livelihood assets once. In both the host (94%) and refugee (68%) communities, cash grants have been mainly used to purchase food items to compliment those received in food distribution. 18% of refugees and 6% hosts used these cash grants to purchase goods needed by the family. Only 7% indicated to have saved money with a VSLA. Results indicate grants were used by recipients in line with their purpose, which was to supplement family food and basic needs as crops matured so as to prevent the selling off of assets.

Figure 28: Uses of the cash grants received for protection of livelihood assets



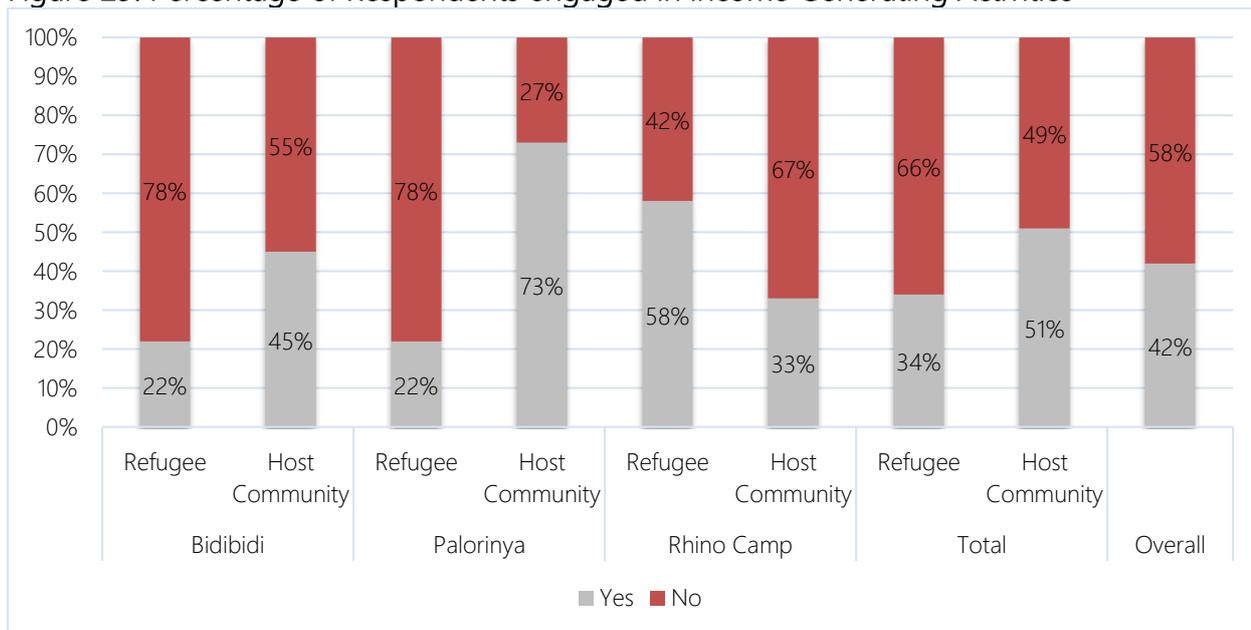
Indicator R3.3: # of individuals engaged in Income Generating Activities (IGAs)

MC and DCA provided targeted beneficiaries with resources to protect and start rebuilding livelihood assets through establishing IGA's. DCA supported 305 and MC supported 515, hence a total of 820 recipients of cash transfer, 103% of the target. Before cash was distributed, entrepreneurs were first trained on 8 modules of basic business skills and savings including a module on gender & household decision making. They were also trained in making business proposals.

The endline assessment indicated 42% of respondents were engaged in income generating activities. This reveals a significant rise from 17% of the households engaged in IGA's at the baseline. This indicates that overall livelihood interventions have contributed to individuals' ability to engage in IGAs beyond just the issuance of capital grants for business start-up and expansion. Spillover effects supporting engagement in IGAs were likely a result of increased income through improved yields, and ability to save in a VSLAs. At the residence level, 34% of refugees and 51% of the hosts were engaged in IGA's. This also shows a significant movement from 10% of the refugee households and 46% of host households engaging in IGAs at the baseline. There has also been significant shift in the percent of households engaged in IGA's at the settlement level: at baseline 9% refugees in Bidibidi engaged and at endline this rose to 22%, Rhino Camp 6% at baseline to 58% at endline, and Palorinya 10% at baseline to 22% at endline.

Further analysis indicated that 54% (40% refugees, 14% host communities) of those engaged in the IGA were already operating even before the project support came in and out of which 76% have received project support for the expansion and growth of their businesses. Out of those that have received project support, 87% indicated an increase in profit levels, 7% indicated that profits have remained the same while 4% indicated a decrease in profit levels. Comparing the average amount of profits that the household gets per month from the IGA or income source, it was revealed that households in the host communities earn much more (US\$ 175,758) than the refugees (US\$ 55,088), with host communities having more income sources. However, these average profits among the households engaged in IGA's in host communities follow a non-normal profit distribution and thus they are more scattered than in refugee settlements, an indication that there are some households at the extremes, some earning either too much or too little. In the refugee settlements, there's a normal distribution of profits among the households engaged in IGA's and the standard deviation is very low. This implies that most of these households earn averagely the same profits.

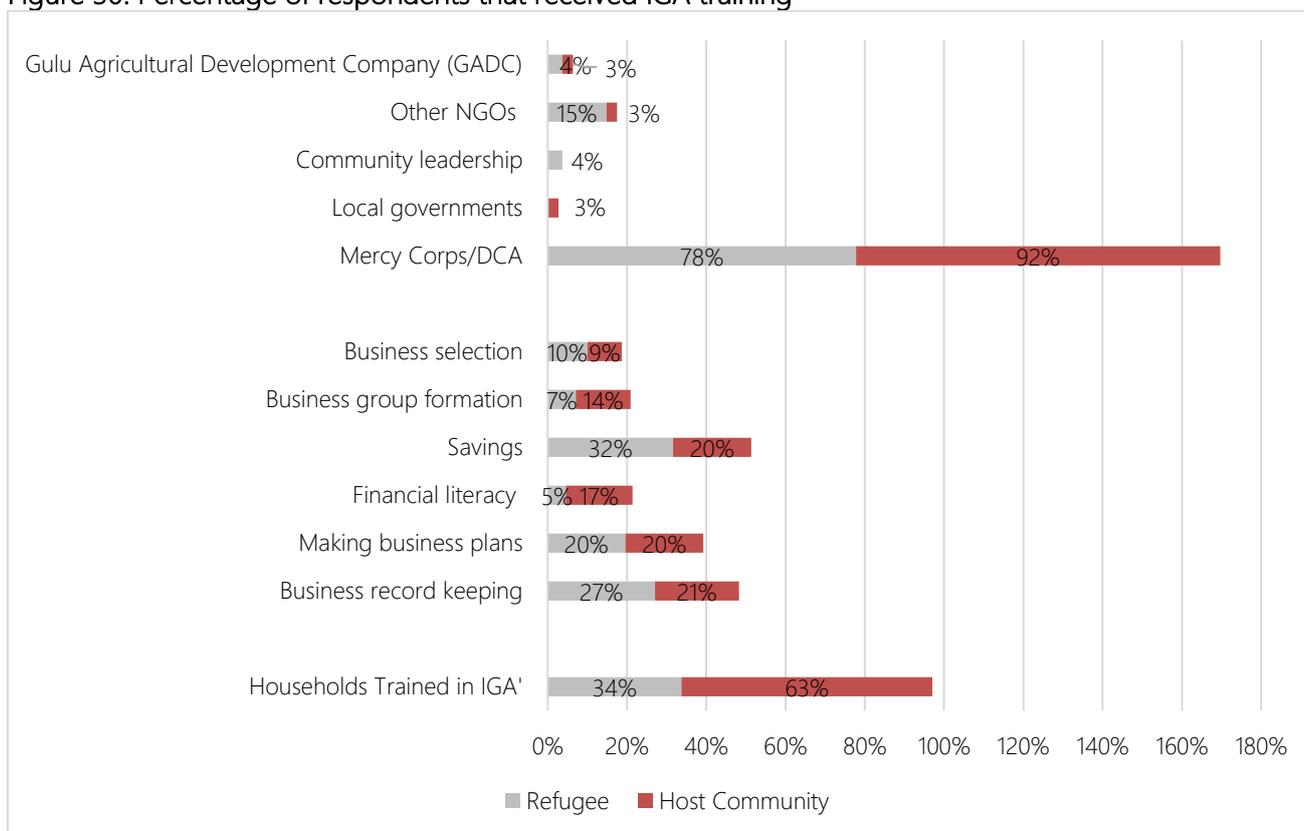
Figure 29: Percentage of Respondents engaged in Income Generating Activities



Further analysis revealed the types of business or income generating activity (IGA) that households are involved in includes market vending (clothes, household goods, etc.) (26% refugees, 21% host community), casual labor (19% refugees, 25% host communities), crop farming (8% refugees, 46% host community), agricultural produce selling (food items, fish, etc.) (19% refugees), and building and construction (6% refugees, 4% host communities).

Analysis of the evaluation data also indicated that 49% of the respondents (34% refugees, 63% host communities) have ever received training in IGA's in the past 21 months, prior to the survey. They received training in various areas including business record keeping (27% refugees, 21% host communities), making business plans (20% refugees, 20% host communities), savings (32% refugees, 20% host communities), among others. Majority (85%) of the respondents that received training indicated that training was facilitated by Mercy Corps/DCA (78% refugees, 92% host communities) and other NGO's in the area (15% refugees, 3% host communities). The analysis also revealed another private company, Gulu Agricultural Development Company (GADC) that was providing training to both the refugees and communities through a sub-award with Mercy Corps to further support farmers ability to engage in farming as a business. Over 50% of the FGD and Key Informants mentioned that this company would provide training, follow on the application of the trained skills, encourage people to grow crops and thereafter provides the market for the harvest.

Figure 30: Percentage of respondents that received IGA training

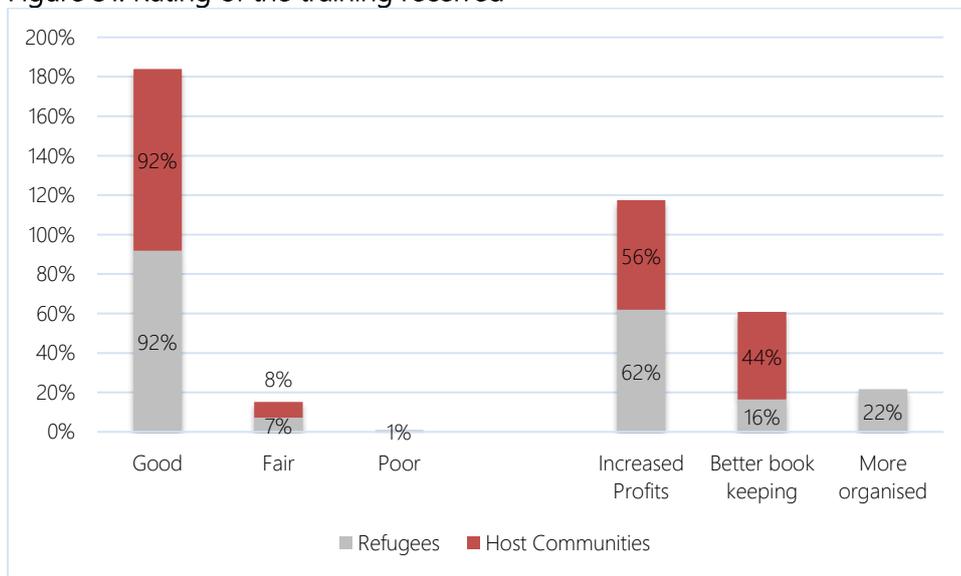


32% of refugees and 15% of the hosts that received IGA training indicated that they have been able to apply the skills in their IGAs. Those who have received the trained and applied it revealed that the skills have enabled them to increase profits (65% refugees, 56% host communities) and better book keeping (16% refugees, 44% host communities). However, the few that haven't applied

the skills they received had several reasons such as lack of follow up guidance by the trainers, while another noted the training wasn't enough and was conducted hurriedly.

The respondents were required to rate the quality of training they received and 92% from both the refugees and the host communities rated the training having been good and only 1% rated it as being poor (figure 31).

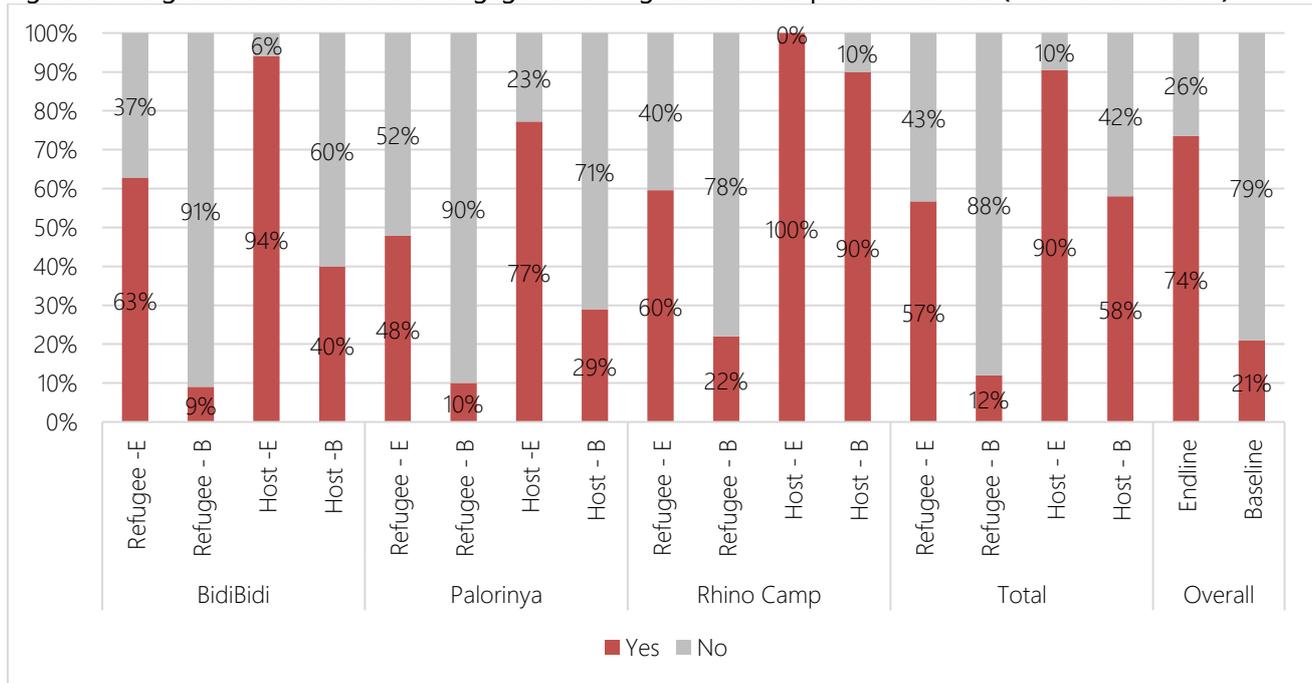
Figure 31: Rating of the training received



Engagement in Agricultural Enterprise or Business

The evaluation assessed the respondents' engagement in agricultural enterprises or businesses in the past 12 months comparing the results against the baseline. The results revealed that 74% (57% refugees, 90% host community) of the target population are engaged in agricultural enterprise or business activity. This is a significant rise from the only 21% of the target population (12% refugees, 58% host community) that engaged in agricultural activities or business in the 12 months prior to the baseline survey. This is exhibited in all the three settlements with host community more likely (90%) to engage than refugees (57%). This likely at least partially a result of hosts access to land compared to refugees.

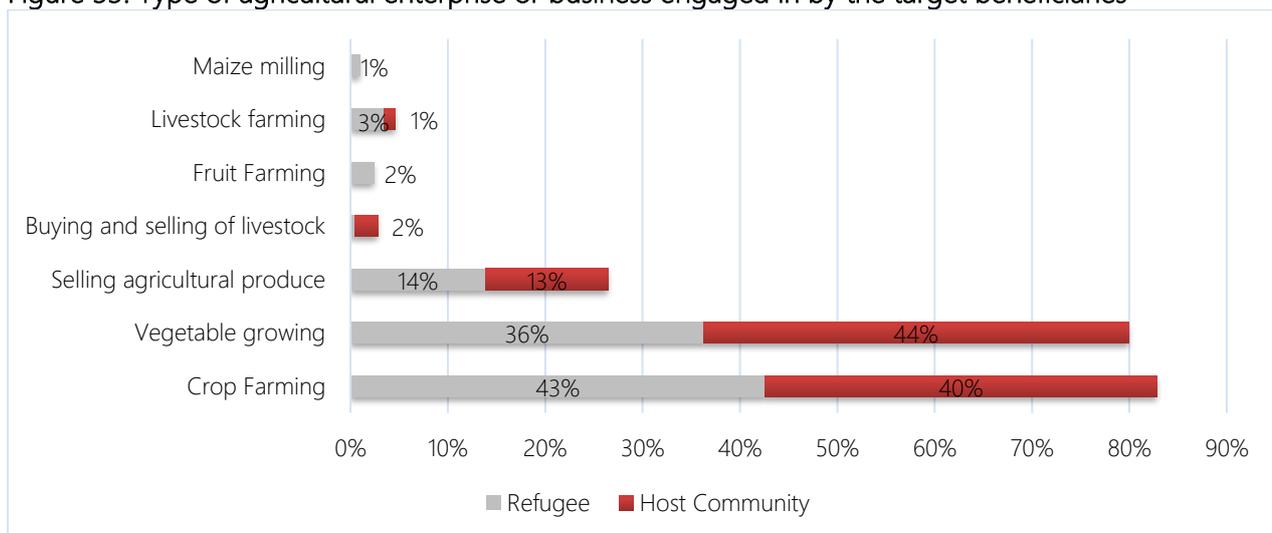
Figure 32: Target Beneficiaries Level of engagement in Agriculture enterprise of Business (Endline Vs Baseline)



E = Endline
B = Baseline

The main agricultural enterprise or business activity engaged in was crop farming by 83% (43% refugees, 40% host community), followed closely by vegetable growing at 80% (36% refugees, 44% host community), among others. Respondents were also engaged in other enterprises such as agricultural produce selling, buying and selling of livestock, and livestock farming. It should be noted that households engaged in more than one enterprise and were largely carried out on a subsistence scale, mainly for home consumption and selling a small portion that may have remained after one season’s harvest.

Figure 33: Type of agricultural enterprise or business engaged in by the target beneficiaries

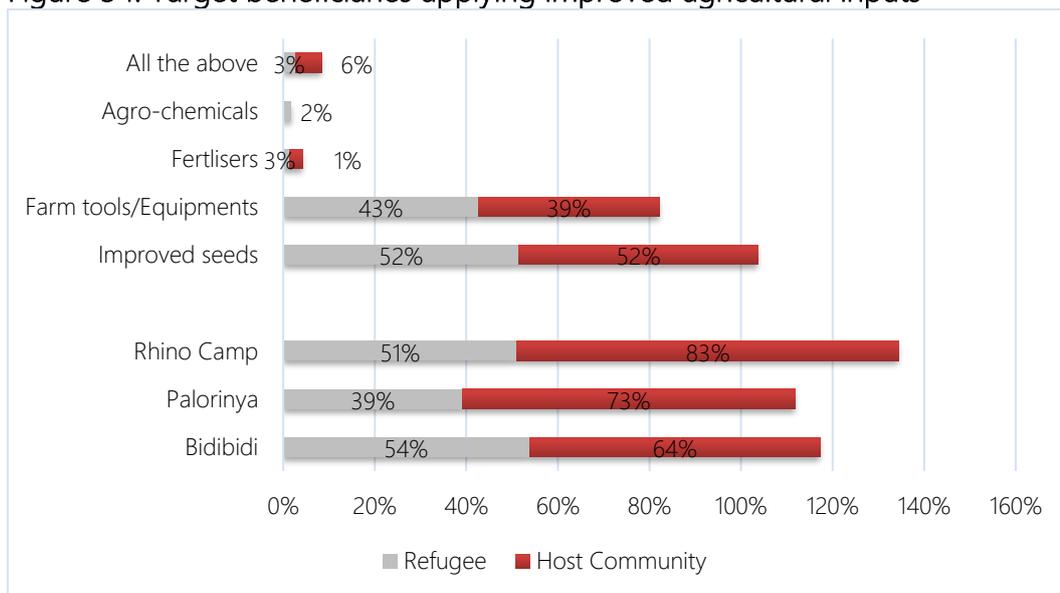


Applying improved inputs on agricultural enterprises

The evaluation analysis shows 61% of the target beneficiaries applied improved agricultural inputs in their agricultural enterprises (73% host communities, 43% refugees). In Rhino Camp alone, 83%

of the host community and 51% of the refugees use improved agricultural inputs, while in Bidibidi settlement 54% refugees and 64% of the host community used improved inputs. In Palorinya, 39% refugees and 73% of host communities also used improved agricultural inputs. In both the refugees and the host communities, the most common improved agricultural inputs used were improved seeds, (52% refugees, 52% host communities) and farm tools/ equipment (gum boots, water cans, hoes, grain bags, etc.) (43% refugees, 39% host communities). In Rhino Camp, more target beneficiaries are using improved agricultural inputs compared to other settlements. This could be partially attributed to the time they have spent in Uganda as compared to those residing in other settlements.

Figure 34: Target beneficiaries applying improved agricultural inputs



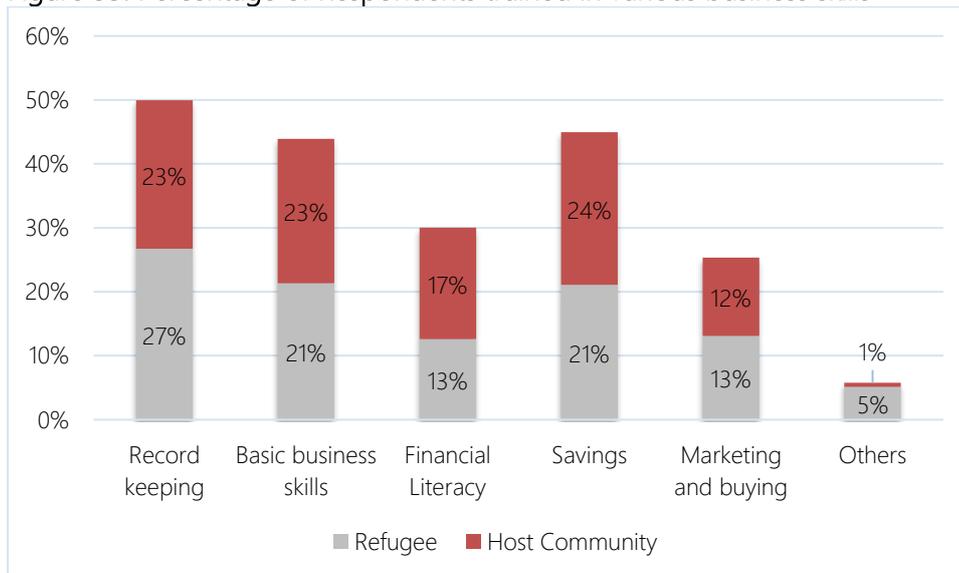
Respondents were also asked how their access to agricultural inputs (seeds, fertilizers, etc.) changed over the last three (3) growing seasons. The analysis revealed that 64% of the respondents indicated increased access and 22% indicated that there has been no change in the accessibility to improved agricultural inputs. Only 12% indicated that accessibility to agricultural inputs has decreased over the past three seasons.

Training in Agribusiness Skills

Both MC and DCA provided agribusiness training to targeted farmers. Respondents were asked whether they were exposed to any form of training in the last 21 months; and at least 50% of the respondents had been exposed to some form of agribusiness training. They were trained in various agribusiness skills such as record keeping (27% refugees, 23% host community), savings (21% refugees, 24% host community), basic business skills (21% refugees, 23% host community), among others.

It was however revealed in two FGDs in Palorinya and Rhino Camp, that even though the target beneficiaries were trained in agribusiness skills, the application of the knowledge is very low. This was attributed to lack of follow up and proper guidance to the beneficiaries. The participants also revealed that the trainings were hurriedly conducted and the target beneficiaries couldn't grasp and perfectly implement what was trained.

Figure 35: Percentage of Respondents trained in various business skills



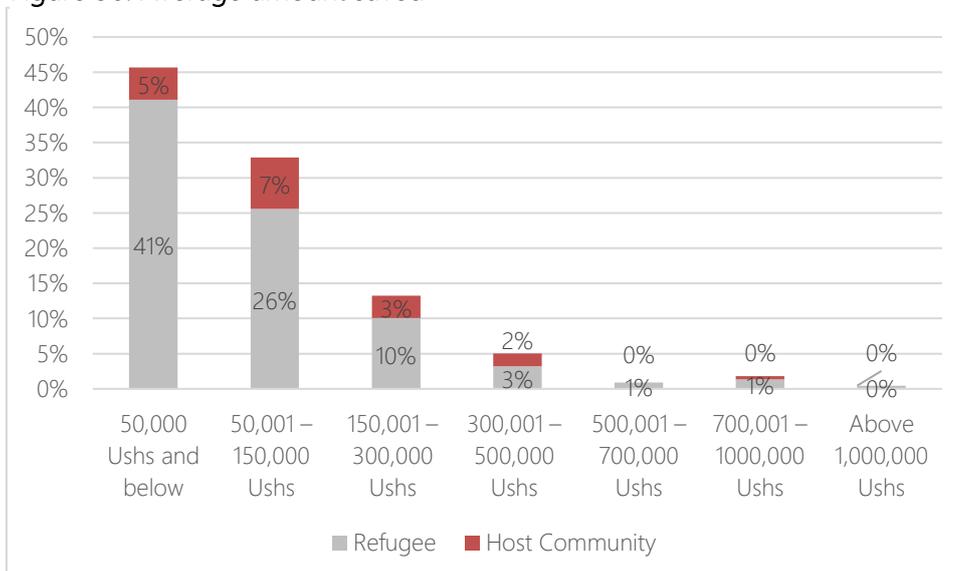
Indicator R4.1: # of beneficiaries actively saving (VSLA, SACCO, commercial bank)

Under this indicator, the project has been able to realize 85% of the project target according to the savings data provided by Mercy Corps and DCA. The project targeted 3,450 beneficiaries with VSLA activities, and by the end of the project, 2,931 were actively saving. Actively saving was considered saving for at least three months. Partners indicated VSLA groups self-selected membership which was often lower than the 30 members assumed at proposal stage.

The survey results indicate that by the end of the project, the majority (46%) of the respondents indicated that they are saving below UShs. 50,000; followed by 33% which save between UShs. 50,000 – 150,000. Data from MC/DCA indicates that average savings have increased from UShs. 46,906 at baseline to UShs. 70,447 at endline. Comparison amongst the settlements, Rhino Camp VSLA’s have had the highest average savings (Ushs. 124,238), followed by VSLA’a in Bidibidi (Ushs. 60,195) and Palorinya VSLA’s (Ushs. 26,906).

It was noted that the percentage of respondents keeping their savings at home has dropped from 71% at baseline to 39% of respondents at endline; while the percentage of respondents saving with VSLA’s has risen from 10% at baseline to 39% at the endline. However, less people are using SACCO’s (5% baseline,

Figure 36: Average amount saved

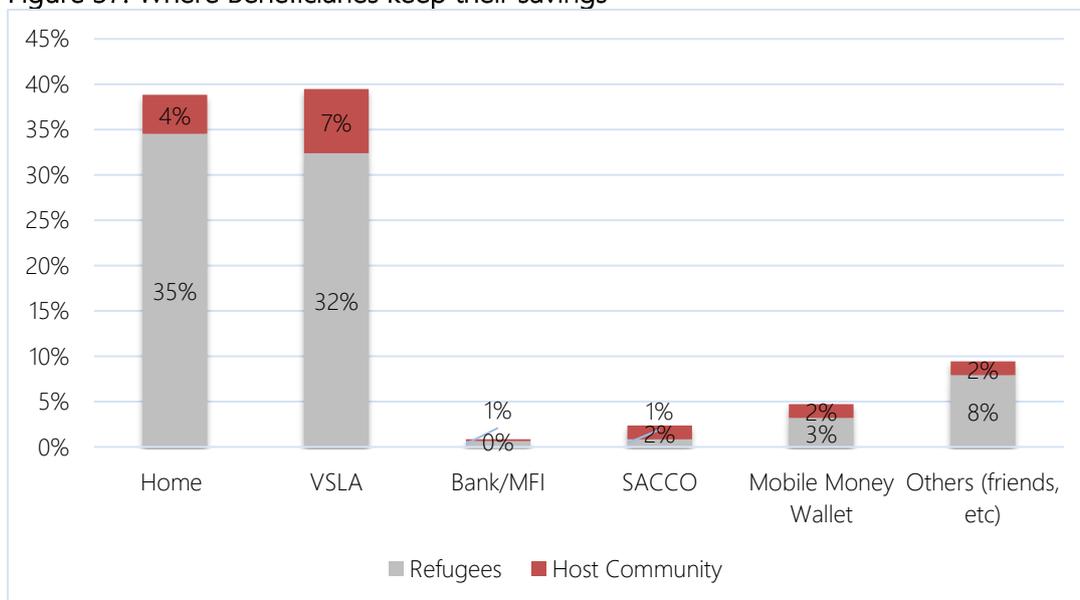


3% endline), Banks/MFIs (4% baseline, 1% endline).

Comparison of refugee with host community further reveals that overall, there has been a reduction in percentage of refugees (from 78% to 35%) keeping their savings at home, while 32% rely on VSLAs, 2% on SACCOs and no use of Banks/MFIs. In the host community, there has also been a reduction in the percentage of respondents keeping their savings at home from 48% at baseline to only 4% at endline. However, there is still low usage of other financial services with only 7% using VSLAs, and 2% using mobile wallet in host communities.

Respondents in the refugee settlements indicated that the major reasons for saving include; emergencies (20%), education (20%), facing seasonal hunger (18%), and purchasing productive assets or for business inventory (13%). In the host communities, the major reasons for saving are; preparation for emergencies (21%), education (15%) and healthcare/medicine (12%). These are more or less the same reasons for saving in both the refugee and host communities during the baseline.

Figure 37: Where Beneficiaries keep their savings



The analysis also indicated 55% of the respondents are members of VSLA's (48% refugees, 8% host communities). Bidibidi has the highest (31%) percentage of respondents indicating that they belong to VSLA, followed by Rhino Camp (17%) and then Palorinya with 8%. These percentages are higher than the percentage of livelihood beneficiaries supported with VSLA. This implies that more people have embraced the idea of VSLA activities and hence potential spillover impacts of this support.

When asked about the source of savings during the last saving session, majority noted that savings came from harvest of the previous season (39% refugees, 40% host communities); and money from business sources (21% refugees, 26% host communities). Other sources of savings included; selling food aid (18% refugees), cash transfers (5% refugees, 8% host communities), and others (14% refugees, 19% host communities). When asked whether they have ever sold any of their belongings (assets/food items/NFIs) to raise money for a saving scheme, 30% (33% refugees, 26%

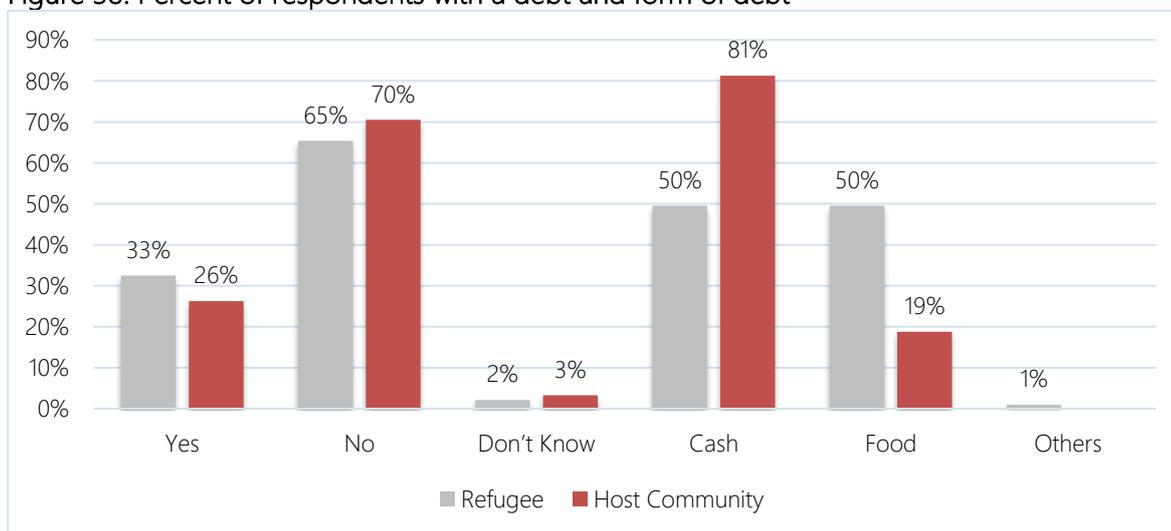
host communities) assented to having done so. This shows some households continue to struggle to meet basic needs.

Engagement with the VSLA leaders and the key informants revealed that majority of the VSLA members are women. Respondents also indicate that savings groups are not only used for savings and borrowing to fix quick financial needs, but they are also used as a tool to mobilize community members to undertake communal activities such as supporting the grief-stricken families, social gatherings, among others.

Borrowing

Quantitative analysis revealed that 29% (33% refugees, 26% host communities) of the respondents had incurred a debt in the last 30 days prior to the survey. This is slightly higher than the 24% (9% refugees, 39% host community) that confirmed to have incurred debt in the last one month prior to the baseline assessment. This increase in the borrowing rate may be attributed to the timing of the survey, which was done in the dry season, compared to the baseline that was conducted during the rainy season. During the rainy season, households have various sources of livelihoods and may be more likely to be able to meet basic household needs. During the evaluation, the debt incurred mainly in the form of cash (33% refugees, 26% host communities) or food (50% refugees, 19% host communities). The majority (70% refugees and 50% host communities) of the borrowers have a debt below Ushs 50,000 and Ushs. 50,000 – 150,000 (20% refugees, and 19% host communities). There are however some few individuals especially from the host communities that have debts with higher amounts compared to the refugees. This partly because people in host communities have more collateral and access to financial institutions than the refugees.

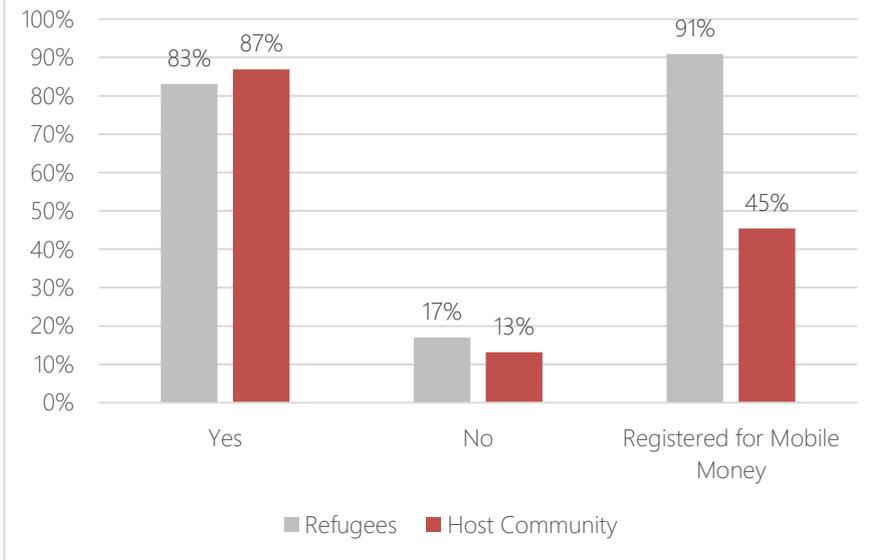
Figure 38: Percent of respondents with a debt and form of debt



Ownership of a Mobile Phone

Owning a phone is an essential good for communication and facilitates income generation amongst the refugees and the host communities. There was an increase in the percentage of targeted respondents owning a mobile since the baseline was conducted. Over 85% (83% refugees, 87% host communities) of the

Figure 39: Percent of respondents that own a mobile phone



respondents indicated owning a mobile phone during the endline survey, a rise from 41% at baseline (37% refugees, 63% host community). This is likely partially a result of subsidised basic mobile phone sales conducted by Mercy Corps and DCA under a separate funding source during the same timeframe. Of those that owned a mobile phone at endline, the majority (68%) had their numbers registered for mobile money services (91% refugees, 45% hosts). This is a significant rise from baseline when only 29% of refugees were registered for mobile money.

Despite the relatively high registration rate for mobile money services, the use of mobile money for payment is still minimal. According to the quantitative analysis, only 1% of the respondents in the refugee settlements indicated that they use mobile money for payment. Majority of the respondents still use cash to make payments for daily transactions. In the host communities, 100% of the respondents indicated that they use cash and 74% in refugees. Apart from cash transaction, there are also a small percentage of respondents that indicated that they with the exchange of household items (11%) and sell of food aid (8%).

Indicator R4.2: # of market actors (agro-dealers, suppliers) who are able to serve a wider customer base

The project supported 22 agro-dealers/suppliers to serve a wider customer base through engaging these businesses in supplying refugees and hosts with improved inputs through the seed fairs as well as linking them with national level seed companies. This achievement represents 116% of the target.

When asked about access to agro-dealers, 62% of the respondents (61% refugees, 64% hosts) acknowledged they have access to market actors; and out of these 47% (42% refugees, 52% host communities) revealed the number of agro-dealers or suppliers has increased since the project was launched. This is a significant improvement from baseline when 13% of refugees, and 20% of hosts confirmed to have access to agro-dealers or suppliers of agricultural inputs. 47% (42% refugees, 52% host communities) of these revealed to have gained connections with these market actors. 72% (70% refugees, 74% host communities) indicated that they are now aware of where to access the agricultural inputs such as improved seeds, farm tools and equipment, PHH materials.

This indicates that the MC/DCA alliance has been effective in mobilizing and linking the farmers to agro-dealers to enable them have access to improved agricultural inputs.

Table 26: Access to Agro-dealers

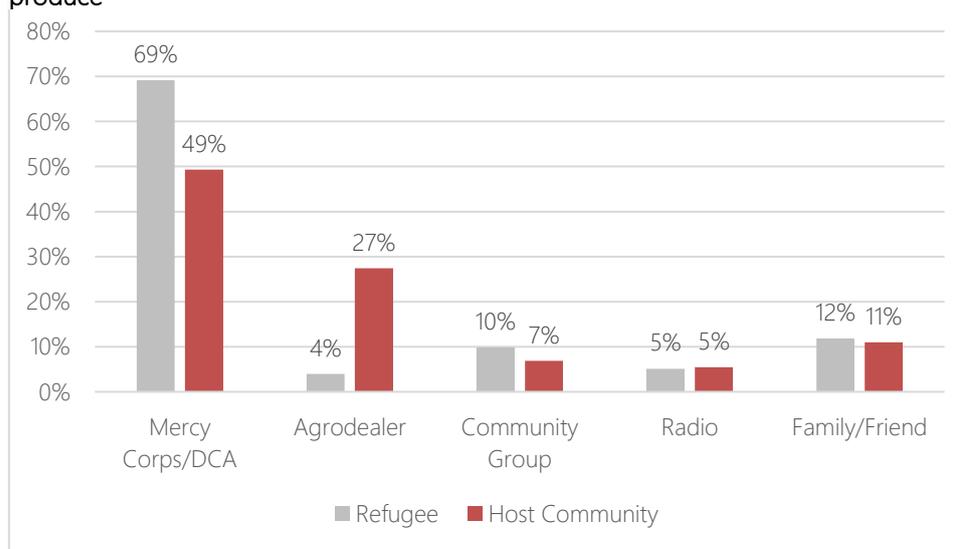
Accessibility to Agro-Dealers	Refugees	Host Community
Percentage of farmer accessing agro-dealers	61%	64%
Has the number of agro-dealers or suppliers changed		
Yes, it has reduced	47%	4%
No, it has not changed	4%	41%
Yes, it has increased	42%	52%
Not sure	7%	4%
Percentage of farmers that have gained connections to agro dealers or input suppliers	74%	56%
Percentage of farmers that are aware of where to access the agricultural inputs	70%	74%

Indicator R4.3: # of market structures and livelihood community infrastructure completed

Monitoring information available indicates that 5 market structures /livelihood community infrastructures were established by the end of the project, meeting 100% of the target. When asked

about sources of information on available markets, 69% and 49% of respondents from both refugee and host communities respectively indicated that they get information about the available markets of their produce from MC/DCA. Agro-dealers were also identified within the host community, with 27% indicating these individuals as the source of market information on harvests.

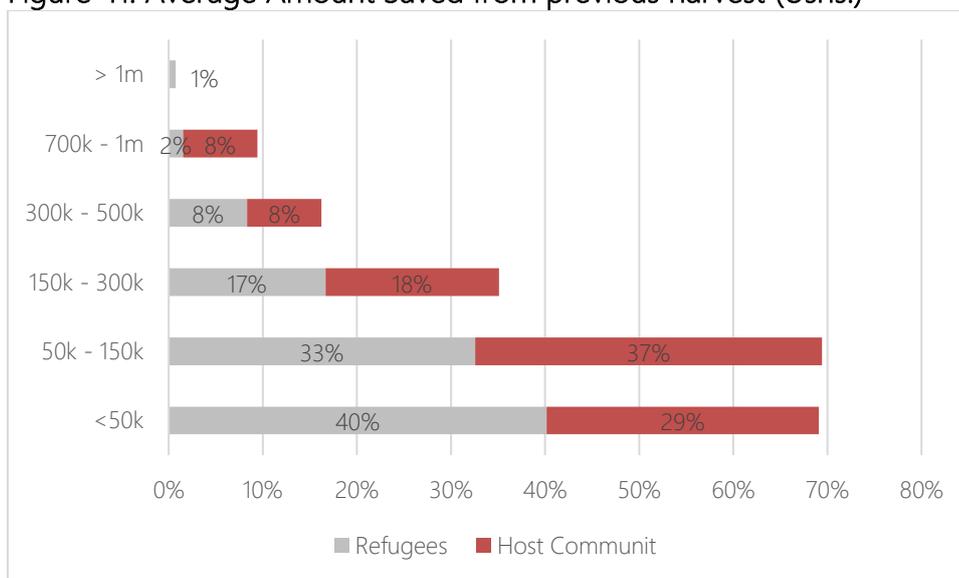
Figure 40: Major sources of information on market opportunities of agricultural produce



Community groups, family and radios were also identified as sources of information. The evaluation analysis indicated that 52% of the beneficiaries have sold their agricultural harvests during the last 21 months. 34% (28% refugees, 40% host community) sold their produce in local markets; while 32% (31 refugees, 33 host communities) sold to community buying agents. It was also revealed that a private company, Gulu Agricultural Development Company (GADC) is also prominent in buying agricultural produce and was contracted by Mercy Corps to provide a market for farmers supported by the Action. The company was also identified in the FGDs for its efforts in encouraging the farmers to grow crops, and later buy it from them. In this evaluation, 13% and 12% of the host community and refugees respectively indicated having sold their agricultural harvests to GADC.

The project beneficiaries were asked whether they managed to save money from the sale of last seasons' harvest and 63% (41% refugees, 86% host community) indicated they were able to save with the majority (35%) able to save between Ushs. 50,000 and Ushs. 150,000 (33% refugees, 37% host community). It should be noted that the majority (40%) from the refugee settlements were able to save less than Ushs. 50,000 while the majority (37%) in the host communities saved between Ushs. 50,000 – 150,000. Over 60% of the respondents indicated that there has been an increase in amount saved (74% refugees, 100% host communities). Only 17% of refugees revealed a decrease in the amount saved and 9% indicated that they saved from the agricultural harvests since the beginning of the project with over 87% indicating savings haven't changed.

Figure 41: Average Amount Saved from previous harvest (Ushs.)

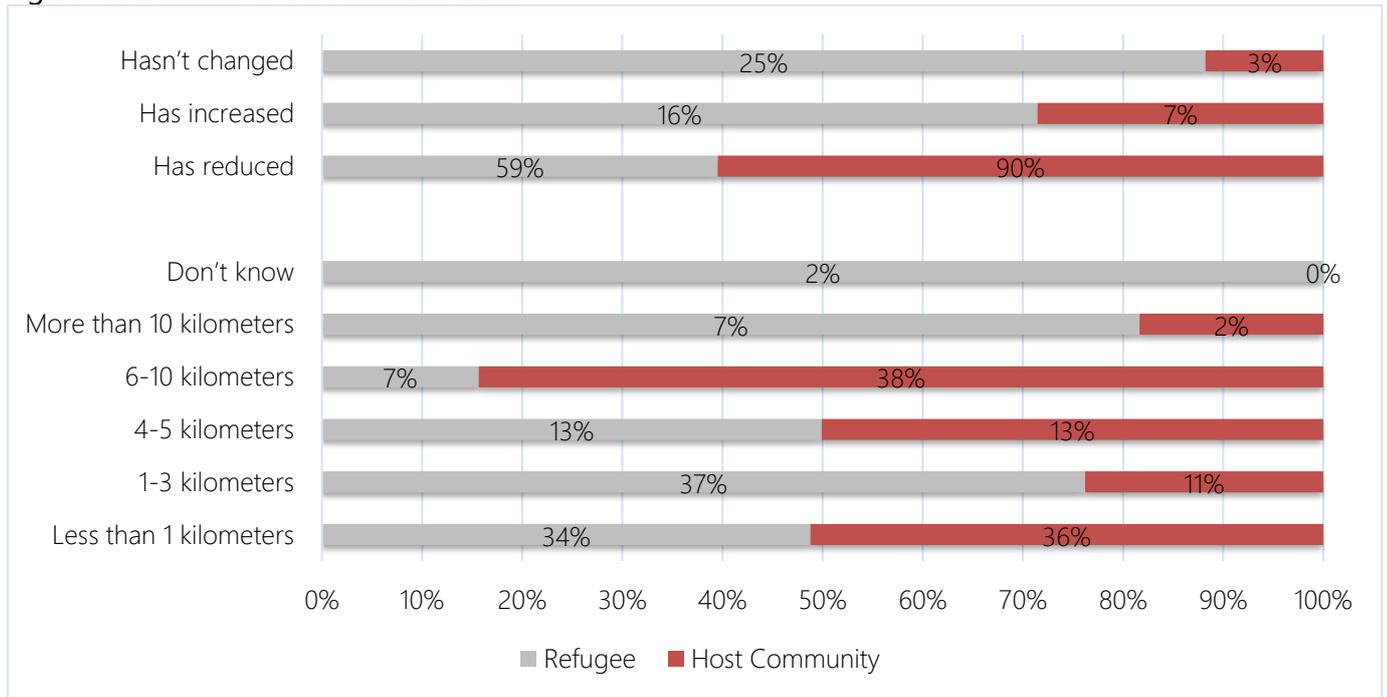


Distance to the Nearest Market Centers

Information from the key informants and FGDs indicated most of the goods supplied to the camps and the host communities are sourced as far as Yumbe, Adjumani, Koboko, Mbale, Kampala, and Arua. Some few commodities were acquired from the host communities such as vegetables, charcoal, among others. The traders and IGA owners are faced with long distances coupled with a poor road network and resulting in high costs of transport. This has resulted in scarcity of some of the basic commodities such as soap, salt, sugar, etc., making it difficult for most refugee households to have easy access to basic domestic goods.

When asked about the average distance (in kilometers) to the nearest market for food, clothes and household goods, 35% (34% refugees, 36 host communities) of the respondents indicated that the market is within 1 kilometer radius from their households, and 24% revealed that its within 1 – 3km, while 22% indicated that its within 6 – 10km. When asked if the distance has changed, 75% (59% refugees, 59% host communities) indicated that the distance has reduced while 14% (25% refugees, 3% host communities) revealed that there has been no change in the distance in the last 21 months. There are a number of markets that are growing up in different centres, and these have helped reduce the distances to market centres along with the construction of structures by the project.

Figure 42: Distance to the Nearest Market



Indicator R4.4: # of agencies benefitting from cash trainings and standardized tools/approaches

Information from DCA indicates that 12 agencies benefited from cash trainings and standardized tools/approaches. This represents 100% of the target.

10. Project Efficiency and Sustainability

10.1 Synergy and collaboration with consortium partners and other stakeholders

Delivering a multisectoral program requires the collaboration and synergy of partners with various expertise in different sectors. The choice of Mercy Corps (MC), Save the Children (SC), DanChurchAid (DCA), Oxfam and CARE provided a framework for management and implementation of the program that could leverage the organizations expertise across sectors. An efficient working framework was established to enable each consortium partner to deliver efficiently on its roles and responsibilities. Each of the consortium partners was responsible for specific activities and thus reporting on specific indicators. A reporting framework managed by the consortium leader (MC) was established and supported the consolidation of information from partners and reporting on the performance of the project. In addition to the monthly meetings where partner M&E focal points convened, consortium partners were responsible for submitting quarterly reports to the lead, and quarterly meetings were held to discuss the progress made so far, the challenges along the way and collective measures taken.

Efficiency in delivering on each partners' mandate is manifested in the way the indicator targets were realized. The evaluation revealed that there has been an average indicator achievement of over 112%, with the use of same resources that were otherwise meant to achieve 100% of the targets. This shows efficiency in the use of the provided resources.

Engagement and collaboration with OPM, UNHCR and local governments was also critical to the success of the Action. OPM and UNHCR supported in identifying vulnerable groups and ensuring feedback and quality control as well as coordination via interagency meetings and working groups. The project also worked closely with the Production Office, Education Office, and Probation Office in the Arua, Yumbe and Moyo districts. The good working relationship that existed ensured that these offices were involved from project inception. For instance, in livelihoods, the production officer was involved in identification and selection of agro-dealers, preparation of the seed fairs, among other activities. OPM was involved in the identification and securing of land for the farmer groups from the host communities, among others. UNHCR was also involved in identification and allocation of zones for the consortium partners to operate from. The project would also regularly report to these stakeholders on the progress made and engage them in quarterly monitoring visits.

10.2 Sustainability of project results

The short timeframe of the project presented challenges to ensuring sustainability especially given the broad spectrum of response efforts from meeting basic needs to supporting a foundation for self-reliance. However, key groundwork and activities in each sector should support refugees and hosts going forward.

Under general protection, interventions that informed communities about their rights as well as the appropriate pathway for reporting will encourage reporting of GBV cases in the future as well as appropriate handling by service providers. While it is unclear the degree to which community structures supported by the project will persist without additional support and training, this has created a strong basis for new partner interventions and an increased understanding of GBV issues within the settlements.

Young people supported under AEP that successfully completed level 3 will transition to formal schools and Save the Children secured follow-up funding from ECHO to continue supporting AEP. In addition, the AEP students provided with business skills training and cash grants will be mentored by Mercy Corps under separate follow-on funding to support their livelihood opportunities. The physical infrastructure built for educational purposes have been transitioned to the ECHO INCLUDE project, and Education Cannot Wait project run by Save the Children. The project intends to handover other infrastructures for schools in host communities to the local governments. The teachers trained in AEP have also been integrated into the ECHO INCLUDE project. The case management centers will continue to operate under different funding.

Related to WASH, the project put in place Water User Committees (WUCs) to ensure the sustainability of the water sources. The WUCs are mandated to maintain the cleanliness the water sources and rehabilitation of the broken parts. The WUCs are also meant to mobilize the beneficiaries to contribute financially towards the operation and maintenance (O&M) of the water sources. However, by the time of the evaluation, with the exception of the WUCs in the host communities, those in the refugee settlements had not started mobilizing the beneficiaries to contribute towards O&M.

Based on the number of people receiving hygiene promotional messages in the past year in addition to the increase in households with adequate hand washing and functional excreta disposal facilities, it is likely improved hygiene practices will continue.

Livelihoods is perhaps the most difficult sector to observe changes in over such a limited period of time, and agricultural seasons. Evaluation findings revealed 93% of target beneficiaries use at least one of the climate smart agriculture practices they were trained in which implies a high percentage of uptake. It was also noted that 61% of the target beneficiaries applied improved agricultural inputs in their agricultural enterprises. This shows that at least some target beneficiaries have embraced the use of the practices and improved agricultural inputs albeit it is difficult to understand how this will persist after the intervention is complete. An encouraging sign, however, is that 62% of respondents at endline indicated they have access to and know where to find agro-dealers indicating access to inputs should theoretically be easier going forward. 42% of respondents at endline were engaged in IGAs, a significant rise from baseline indicating spillover effects of business skills training and potentially from increased incomes from harvests supporting investment in businesses.

11 Lessons Learned

Documenting lessons learnt is crucial in informing the future design and implementation of similar projects in such conditions. Some of the lessons learnt include, but are not limited to;

- (a) The designing of programs of this nature should be participatory and informed by the conditions of the targeted community presented in various reports and the baseline survey report. This helps to meet the needs and requirements of the targeted population such that the project is relevant and appropriate to the beneficiaries. It also helps to create ownership of the program amongst the various stakeholders and hence eases sustainability. It was noted that available literature from the various sources greatly informed the design of the project, and that indicates to how relevant it has been to the beneficiaries.
- (b) The evaluation also noted that the choice of the implementing or consortium partners is very key in designing of such multisectoral programs. No single organization is competent in implementing such a multisectoral project. Thus creating the synergy amongst different partners that have diverse expertise in their areas operation helps to add value and expertise to the project, which facilitates the realization of projects targets. This program managed to achieve immense results in a short time because every results area was handled by a partner with expertise in that particular area.
- (c) From various key informants' interviews, it was acknowledged that short term (less than two years) projects can hardly cause a major impact or influence the resilience and self-reliance of the refugees. As soon as the beneficiaries are starting to appreciate and understand the project, it is phased out. In such circumstances, all the efforts, if not well managed can easily be lost. In such a situation, it's also very difficult to measure the impact caused by the project, only a few outcomes can be traced. Its thus important that donors encourage the implementation of long-term projects, from which the impact can easily be traced.
- (d) It's important that components of the program are implemented with sufficient time to monitor and mentor beneficiaries within the period of the project. This is particularly relevant for IGA activities which require sufficient training and mentoring after the distribution of business grants. While the majority of IGA cash transfer recipients received cash early enough to ensure proper mentoring, about 200 of those support by Mercy Corps received cash late in the project making follow up difficult. While Mercy Corps indicated it secured funding to ensure proper mentorship of these individuals going forward, this should have occurred within the original project timeline.
- (e) It's worth noting that the model used in identifying the IGAs to support is something which could be copied and replicated. Making the beneficiaries compete for the funds through writing proposals encourages innovation and competitiveness. Selection of the best using local leaders also helped to ensure that unqualified business ideas were eliminated.
- (f) Use of community mobilisers in mobilization is very important for success of such programs. The community mobilisers are members of the community and know the ins-and-outs of that particular area. However, caution must be taken when identifying them

such that 'wrong' characters aren't entrusted with the project. Once identified, these mobilisers should be equipped with all the information about the project. Failure to articulate the program objective may lead to misinformation and misrepresentation. Each partner in this consortium identified several representatives in the communities to work as project volunteers/mobilisers. These have been very crucial in realization of the success of the project.

12 Recommendations

The program should make all the necessary arrangements to ensure proper handover from project close out and transition to appropriate partners and authorities. This will help to ensure that the infrastructure and structures established are not lost but built on. For instance, under the VSLA and livelihood component, farmer groups and VSLAs have been formed and are functioning. Partners should ensure such information is provided to incoming partners, OPM and UNHCR to support the continued functioning of these groups, rather than the starting of new groups.

Before phasing out, the community mobilisers that have been supporting the program should be recognized with certificates of performance. This document can be used in future job searching and support refugees and hosts to use the knowledge gained and help influence their livelihoods. Where needed, those that have performed well can be recruited for future programs by the consortium partners.

Engagement of all the stakeholders and beneficiaries on the way forward. It was noted that when the program ended not all stakeholders were aware of the exit strategy. Engagement with UNHCR and OPM in Moyo district for example revealed that they were not aware about the exit strategy of the project (although it should be noted they were informed by partners during the last joint monitoring visit). It would be prudent to increase efforts to bring such stakeholders on board for what will happen next.

Appendices

Appendix 1: List of people Interviewed

S/N	NAME	LOCATION	DESIGNATION
1	Swalleh Ondoma	Yumbe District, Bidibidi Zone 4 Drimbeni Village (Host Community)	LC 1 Chairperson
2	Jackson Amule	Yumbe District, Bidibidi Zone 4 Village24, (Refugee Settlement)	Refugee Welfare Chairperson
3	Juma Nickson Jack	Moyo District, Palorinya Zone 5 (Refugee Settlement)	Water User Committee Chairperson
4	Moga Jackson	Moyo District, Palorinya Zone 5 Village 23, (Refugee Settlement)	Refugee Welfare Chairperson
5	Nyago Ernest	Moyo District Local Government	Community Development Officer
6	Mr Lemeriga	Moyo District Local Government	District Planner
7	Ms Badaru Gertrude	Arua District Local Government	District Agricultural Officer
8	Frank Akampa	Office of the Prime Minister (Palorinya camp)	Settlement Commandant, Palorinya
9	Jimmy Okello	UNHCR (Moyo, Palorinya)	Livelihood Assistant
10	Antonias Kamerika	UNHCR (Moyo, Palorinya)	Programme Officer
11	Godfrey Torit	UNHCR (Moyo, Palorinya)	Program Assistant
12	Innocent Rubangakene	Mercy Corps	Monitoring and Evaluation and Learning Assistant
13	Patrick Eriga	DCA Yumbe District Zone 2	Data Management and M&E Assistant
14	Jimmy Omoro	SCI	Program data Management officer
15	Carolyne Judith Amollo	OXFAM Zone 5 Bidibidi Carolyne.Amollo@oxfam.org	Team Leader, Public Health Engineering, OXFAM
16	Thomas Lumuli	Village 19 Zone 5, Aringa I, Bidibidi	Secretary, JUJUBETA VSLA
17	Ladu Joseph	Village 22, Zone 5, Bidibidi	Chairperson
18	Laku Felix	Village 22, Zone 5, Bidibidi	Chairman, Water User Committee
19	Lwala Emmanuel	Village 22, Zone 5, Bidibidi	Local Leader
20	Beda Ladu	Village 22, Zone 5, Bidibidi	Care Taker, Water User Committee

Appendix 2: Key Informants Guide

#	Organisation	Designation	Key Questions
#01	OPM	Settlement Commandants, Field Officers,	(i) Do you feel that the design of the project addressed the challenges faced by refugees and host communities?
#02	UNHCR	Focal Point Persons, Child Protection Officers, livelihood focal points, Field officers	(ii) In your engagements with the communities, do you feel the challenges faced by the refugees were adequately addressed by the project? (iii) What are some of the issues that aren't addressed by the project? (iv) What are the strengths and weaknesses have you came across in your engagement with the consortium partners? How were the weaknesses handled? (v) How would you recommend this project to be improved? (vi) What general achievements do you think have been realized by the project since its inception? (vii) Has the project been able to contribute to self-reliance of the refugees? (viii) Do you see anyway the government agencies can continue providing some services that have provided by the different consortium partners in the project? (ix) Are there other NGO's in the settlements to carry forward the project activities, when it ceases operating?
#03	Mercy Corps	Programs Manager, Consortium Manager, Field Managers/officers	(i) In planning process, was a situation analysis conducted first, and did it address all the possible issues faced by the refugees and the host communities? What are some of the issues that weren't addressed? (ii) What are the implementation arrangements of the project, and what strengths and weaknesses have you came across in implementing the project? For the weaknesses, how have you handled them? What issues have emerged during the implementation process and were not envisioned in the programming? How have you managed to handle them?
#04	DCA	Programs Manager, Field Managers/officers/Coordinators	
#05	SCI	Programs Manager, Field Managers/officers/Coordinators	(iii) What was the basis for choosing the consortium and implementing partners? Have they had a varied influence and capacity in implementing the project?
#06	OXFAM	Programs Manager, Field Managers/officers/Coordinators	

#07	CARE	Programs Manager, Field Managers/officers/Coordinators	<ul style="list-style-type: none"> (iv) How did the project handle the issues of equality, human rights, gender, democracy and environment at planning and implementation? (v) How effective is the monitoring and evaluation system in tracking and reporting on these achievements? Is the M&E system able to track the performance of all the consortium partners in their respective project component areas? (vi) How have the project strategies helped to ensure that the project objectives are realized? What have been their challenges and how have managed to overcome them? (vii) What are some of the unintended results that have been realized by the project? (viii) How sure are you that the achievements realized by the project are a direct result of the program activities? Could there be other influencing factors, and if yes, what are those? How have they influence? (ix) What were the challenges met in implementing this project (logistical, financial and human resource, etc.) how have you managed to overcome these challenges? Did the project have adequate and qualified staff to implement the activities? (x) What strategies are in place to ensure that the beneficiaries continue receiving the services provided by the project even when the project comes to an end? Is there commitment from the government agencies (relevant MDA's & local governments) to take up and provide these services? Are there other NGO's in the settlements to carry forward the project activities? (xi) Are the program achievements and challenges being documented and disseminated so that lessons can be drawn for replication and future programming? What challenges would impede the sustainability of the project achievements? (xii) Were the beneficiaries and local governments involved all stages; from planning, trainings, implementation to phasing out of program activities? (xiii) What national policies and programs influenced the project activities (xiv) What is the level of influence of development partners include UNHCR, on who/what is funded, etc.?
-----	------	--------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

			(xv) What Lessons learnt from implementing the project and recommendations for replication and re-designing of the project
#08	Local Governments	District Community Development Officers (DCDO), District Health Officers (DHO), District Agricultural Officers (DAO), District Production Officer (DPO), District Water Office	<ul style="list-style-type: none"> (i) Did the program involve the local governments in all stages; from planning, trainings, implementation to phasing out of program activities? And if yes, how did the project support the host communities? (ii) What are some of the issues that aren't addressed by the project? (iii) How would you rate the working arrangement between the local governments and the project? (iv) What general achievements have been realized by the project since its inception? (<i>in livelihoods, water & sanitation, health, agriculture, children education, SGBV, etc</i>) (v) Is there commitment from the local government to ensure that the host communities will continue benefiting from the services provided by the project, even when it comes to an end? Are these activities included into the local governments' plans and budgets? (vi) What challenges would impede the continued provision of these services? What ways do you suggest would be done to curtail these challenges? (vii) Provide recommendations for replication & re-design this project in the future.
#09	Police	OC stations, Family & Child Protection Unit (stations within the settlements), Medical Officers, Legal Officers, Community Safety Group Members	<ul style="list-style-type: none"> (i) How have you been involved in activities by the project to curb GBV in the refugee settlements by the project? (ii) What has been done by the project to curb GBV in the refugee communities? What achievements have been realized so far? (iii) What efforts have been established by the project to protect children from violence? What impact have they had on children's wellbeing? (iv) What challenges have you met in implementing in trying to curb SGBV and violence against children; and how has the project helped? What lessons have you learnt in the process? (v) Please provide recommendations for replication of the project in future? (vi) What efforts are in place to ensure that the achievements realized are maintained, even after the project funding ceases?
#10	Agro – dealers	Agro dealers	<ul style="list-style-type: none"> (i) How have been involved by MC/DCA to ensure availability of quality seeds/or buying produce at fair prices?

			<ul style="list-style-type: none"> (ii) What achievements have you realized in ensuring that quality seeds are available or fair prices are provided? Will you be able to maintain these achievements even when the project comes to an end? (iii) What challenges have you met and how have you managed to overcome them? (iv) What recommendations would you provide to improve on the project in future?
#11	VSLA	VSLA Leaders	<ul style="list-style-type: none"> (i) What is the name of the VSLA and how was it established? (ii) What support have you received from MC/DCA in establishing and strengthening of the VSLA? (iii) What services do you provide to group members? Are members of the refugee community saving with the VSLA, how have you encouraged them to save? (iv) What achievements have been realized by the VSLA since its inception? Are these achievements attributed to the activities of Mercy Corps/DCA? (v) What challenges have you met in this VSLA and how have you managed to overcome them? (vi) What shows that this VSLA will continue operating even after the closure of the project?
#12	Zones/Villages	Zones/Village Council Leaders	<ul style="list-style-type: none"> (i) How have you been involved in activities by the project to curb GBV in the refugee settlements by the project? (ii) What has been done by the project to curb GBV in the refugee communities? What achievements have been realized so far? (iii) What efforts have been established by the project to protect children from violence? What impact have they had on children's wellbeing? (iv) What challenges have you met in implementing in trying to curb SGBV and violence against children; and how has the project helped? What lessons have you learnt in the process? (v) Please provide recommendations for replication of the project in future? (vi) What efforts are in place to ensure that the achievements realized are maintained, even after the project funding ceases?

#13	Water	Water User Committee members	<ul style="list-style-type: none"> (i) What was the process of establishing the water user committee? (ii) Are the user committee members well aware of their roles and responsibilities? (iii) What have been the achievements of the committee since its inception? (iv) What challenges has the committee met and how have you managed to overcome them? (v) What shows that the water user committee and source will remain operational after the project comes to an end?
#14	Education (AEP)	Head teachers, SMC	<ul style="list-style-type: none"> (i) How has this school benefited from the Save the Children AEP Program? (ii) What challenges have you, as the school met with the program? How have you managed to overcome these challenges? (iii) What are the best ways you can suggest to improve increased enrollment and regular attendance in AEP? (iv) Do you think Save the Children's AEP is a good education opportunity for children with disabilities? If yes, please explain. If no, please explain. (v) What arrangements are in place to ensure that the learners continue benefiting from AEP services when the project comes to an end?

Appendix 3: Focus Group Discussion Guide

1) Men/Women

a) Livelihoods

- (i) What are the major sources of income for refugees in this settlement?
- (ii) How do households in this settlement cope with the issues of food scarcity?
- (iii) For households engaged in agricultural production, how do they get access to agricultural inputs? Have they been introduced to climate smart agriculture and agribusiness; and has it had an effect on their outputs and sales? Who introduced them to climate smart agriculture? Do you use these practices after being introduced to them and how?
- (iv) Apart from agriculture, what are other sources of livelihoods for households in this community? (*Probe for cash transfers*).
- (v) If cash transfers or IGA are brought up, probe for impact. How did recipients use their transfers? How did IGA recipients of cash invest the money and what changes have they seen?
- (vi) Are community members able to save from their earnings and where do they save from mainly? For members of the VSLA, how have the VSLA helped to improve on their livelihoods? Any challenges they face with VSLA's? Where do VSLA members get the money to save? Probe to see if people are saving based on livelihood activities, cash grants or if they are selling food aid to save.
- (vii) What other income generating activities (IGAs) are practiced in the settlements apart from agriculture? Have they received any skills training on managing these IGA's and who provided the trainings? What challenges do those practicing IGA's facing? And how has Mercy Corps/DCA helped you to overcome them? What successes have they experienced as a result of receiving IGA cash grants and how does this impact them now and in the future?
- (viii) What are recommendations for MC/DCA going forward? What feedback would you give these organizations?

b) WASH

- (i) What are the main sources of water for domestic use in the community?
- (ii) How has OXFAM helped in improving access to water by the households in this community? What challenges do households still face with water access?
- (iii) What are the main types of toilets used by households in the community? How has OXFAM helped to improve access and use of clean and safe toilets in the community?
- (iv) How do households dispose of waste materials?
- (v) Do women in this community have access to menstrual materials during their monthly periods? What types and how do they dispose them off? (*specifically for women*)

- (vi) Have the hygienic promotional messages helped to improve hygienic practices at the household level and in the community?
- (vii) What hygienic challenges do still exist in the community?

c) Protection

1. FIRST, I WOULD LIKE TO ASK YOU SOME GENERAL QUESTIONS ABOUT YOUR COMMUNITY:

- a. How did men spend time on arrival to this settlement? How do they spend their time now?
- b. How did women spend time on arrival to this settlement? How do they spend their time now? What are their daily chores?
- c. What are their social activities? Do you think women are busier now or before? Why?
- d. Who is responsible for making decisions for this community? Who is responsible for making decisions in the family? Who controls the resources in the community? In the family?
- e. What people or groups in this community are involved in helping those most in need?
- f. How do men get information about what is happening in the community?
- g. Who do men go to for help when they have problems?
- h. How do women get information about what is happening in the community?
- i. Who do women go to for help when they have problems?

2. NOW I'D LIKE TO ASK YOU SOME QUESTIONS ABOUT THE SAFETY AND SECURITY OF WOMEN/MEN AND GIRLS/BOYS:

- 3. Are you aware of problems with the safety and security of women/men and girls/boys in this community? *(Ask for examples. If no one speaks specifically about GBV, evaluate the group to decide whether you want to bring up the issue now or wait until the group has developed more comfort talking about these issues.)*
- 4. What are the circumstances that cause problems of safety and security for women/men and girls/boys in this community? *(Ask for examples.)* Have there been changes in safety and security? Explain reasons for the changes?
- 5. What has been done by CARE, MC, OXFAM, SCI and DCA Partners here to improve the safety of women/men and girls/boys?
- 6. Without mentioning names or indicating anyone specific, who are the perpetrators of GBV? What happens to the perpetrators of GBV? *(Different consequences if the perpetrator is known/unknown)?* Have there been changes? Explain reasons for the changes?
- 7. Without mentioning names or indicating anyone specific, which groups of women/men do you think feel the least safe, or feel at most risk for violence? Which groups of women/men do you think feel the safest? Have there been changes? Explain reasons for the changes?

8. Has the problem of GBV gotten worse, better, or stayed the same in the last year? What particular types of GBV? If there has been a change, what has caused it?
9. Do women/men look for help when they experience GBV? Do they tell anyone (family members, other women/men, health worker, community leader, police/security people/authorities, someone else)? Have there been changes? Explain reasons for the changes?
10. How do women/men cope with violence against their family members or friends?
11. How have women/men not been able to cope?
12. What are community responses when violence occurs? What is done to prevent violence? What is done to help survivors? Have there been changes? Explain reasons for the changes? How could these efforts be improved?
13. What social and legal services exist to help address problems associated with violence (e.g., health, police, legal counseling, and social counseling)? Who provides these services? Have there been changes? Explain reasons for the changes? How could these efforts be improved?

2) Children

- (i) What vulnerable children and children at risk exist in this settlement?
- (ii) What major challenges are faced by children in this settlement?
- (iii) What measures are in place to ensure that the safety of children in the community? And which organization is responsible for these measures?
- (iv) If there's a case of violating a child's life in this community, where do you seek redress? And how do you rate the quality of services provided by the police, health services, local leaders, and organisations that work on the issues of children?
- (v) What activities have been done by SCI and how have you benefited from them as children from this community? What challenges have you found with these services?
- (vi) What would you recommend to ensure the rights of children are upheld in the settlements?

This tool is to administered through a focus group discussion of the community where the AEP programme is being implemented.

SAVE THE CHILDREN – MOYO AND ARUA

- I. Are there children aged 9 to 17 years within this community that are not enrolled in school? If so, what are the reasons they are not enrolled in school?
- II. Are there children aged 9 to 17 within this community that are enrolled in school but not regularly attending? If so, what are the reasons they are not regularly attending school?
- III. What are the barriers to enrollment and attendance that girls in this community face?
- IV. What are the barriers to enrollment and attendance that boys in this community face?

- V. Tell me what you know about AEPs? What has been the impact of AEP in this community? Has it supported older, out of school children to enroll back into school? If yes, in what ways has it supported them? If no, in what ways could it support them better?
- VI. Are there children between 9-17 years who choose not to enroll in AEP even though they are eligible? What are the reasons for them not enrolling?
- VII. How do you think Save the Children could enroll more children into AEPs?
- VIII. Are there children who have enrolled in AEP but do not regularly attend AEP classes? What are the reasons for them not attending?
- IX. How do you think Save the Children could ensure regular attendance in AEPs?
- X. How has the AEP addressed the reasons why children ages 9 – 17 were not regularly attending school despite being enrolled (frequent absenteeism, etc.)?
- XI. Are there children ages 9-17 years with disabilities in this community? How are they treated within the community? Are these children enrolled in and regularly attending formal primary school?
- XII. Are there children ages 9-17 years with disabilities who are enrolled in and regularly attending AEP?
- XIII. Do you think AEP is a good option for children with disabilities? If yes, please explain. If no, please explain.
- XIV. How will the achievements attained by AEP be sustained even after the program comes to an end?

Consortium



Save the Children®



Funding
Agency



Funded by
European Union
Civil Protection and
Humanitarian Aid