



*Walking Children to a Bright Future*



**ANNUAL REPORT**

**JULY 2020 – JUNE 2021**

## ACRONYMS

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*ASP - Area Strategic Plan*

*CBCPM-Community Based Child Protection Mechanism*

*CDF-Community Development Facilitator*

*CM-Community Mobilizer*

*CSO-Civil Society Organisation*

*CVS – Child Verification System*

*CYA-Children and Young Adolescents*

*DRR- Disaster Risk Reduction*

*ECD – Early childhood development*

*FY-Financial Year*

*HC – Health Centre*

*IEC: Information Education and Communication*

*JIACOFE – Jinja Area Communities Federation*

*LC-Local Councils*

*M&E- Monitoring and evaluation*

*MOMO-Mobile Money*

*NGO-Non-Governmental Organisation*

*PDD-Project Design Documents*

*SR - Sponsor Relations*

*TOT-Trainer of Trainees*

*VHTs-Village Health Teams*

*VSLA-Village Savings and Loans Association*

## MESSAGES FROM; MANAGER

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On behalf of the Children, Youth and Parents of Jinja Area Communities Federation, I wish to present a quarterly report for the period July 2020 -June 2021.

Numerous achievements have been registered under different programs through funding mainly from ChildFund International. We are most grateful to our partners, the political and technical heads of Mayuge, Kamuli and Jinja districts not forgetting implementing partners and all those who have extended support that has enabled us to register these commendable achievements amidst COVID-19 pandemic.

With funds from ChildFund International, JIACOFE has been able to deliver programs to supported children and their families under the four COVID 19 emergency response objectives of Stopping COVID-19 from infecting children and families, ensuring that children get food they need, keeping children safe from Violence: Physically and emotionally and Helping children continue to do their job: Learning.

This has increased awareness on COVID 19 preventive measures, coping skills as well as access necessities by the children, youth, and parents in the operation area.

As suggested by the Vision, Mission, Goals and Objectives of the organization laid out in this report, there is still a resource constraint to enable implementation of the planned activities in line with the persistent faces of child poverty, increasing COVID 19 infections and the capacity gaps identified among the different structures at the Federation and community levels. The resource base of the organization is still narrow. I do therefore call upon Donor Agencies and Non-Governmental Organizations (NGOs) to support us materially, financially, morally, and otherwise to achieve our objectives.

Lastly, I wish to record my appreciation to ChildFund International, JIACOFE staff, structures, Children, Youth, and the Parents in Jinja Area, District political and technical personnel and all other stakeholders who have contributed in one way or another towards implementation of the activities outlined in this report.

Stay safe.

Yours



HENRY BAZIBU

MANAGER

JIACOFE.

## **Broad Outline of Key Achievements not exceeding one page**

- 977 households' wellbeing status assessed and validated.
- 28 households provided Conditional cash transfers.
- 4 caregivers and youths groups provided micro-grants.
- 531 individual caregivers and youths provided with micro- grants for individual business.
- 2290 RPC/CWB curriculum, mobilization materials printed and distributed.
- 60 caregiver groups trained on MED skills.
- 165 caregivers and youths provided agric-production inputs.
- 165 caregiver and youth farmers provided extension services.
- 9 qualified ECD caregivers selected and trained to lead ECD learning program.
- 2 ECD Centres renovated.
- 12 ECD caregivers supported to deliver home based ECD activities.
- 16 CPC meetings conducted.
- 16 Staff trained in Advocacy.
- 52 VAC cases provided support to access justice.
- 26 TOTs and stakeholders' representatives trained on SBVP model.
- 18 VHT- HUMC and health workers' reflection meeting held.
- 21 children examined medically and referred for further support.
- 60 VHTs and CPCs members provided with IECs materials (Booklets Posters on COVID-19 prevention
- 11 health facilities equipped with medical supplies and equipment.
- 19 schools provided assessment and child education materials.
- 198 youths provided counselling and career guidance on choices in non-exploitative work.
- 170 youths trained on vocational skills (any type)
- 13 youths trained on vocational skills (any type), provided start-up.

## INTRODUCTION

### ABOUT JIACOFE

#### WHO WE ARE:

Jinja Area Communities Federation (JIACOFE) is an umbrella association of Children, Youths and Parents who work for the development of the children and communities with an aim of facilitating communities to take a leading role in fighting against child poverty in Busoga Sub region.

#### BRIEF HISTORY:

JIACOFE started operation in 2003 with support from Christian Children’s Fund Inc – Uganda now called ChildFund International. JIACOFE operates in the following communities: Wanyange, and Buwenge (in Jinja District), Imanyiro, & Buwaaya (in Mayuge), Kamuli and Buwuda (in Kamuli District).

#### OUR PROGRAM APPROACH:

Programs are planned and implemented following a 3-year strategic planning cycle. We are currently implementing the sixth cycle which will be evaluated in June 2022.

JIACOFE programs are implemented according to the ChildFund life stage programming and theory of Change.

#### CORE PROGRAM AREAS (CPAs):

- Health, Water, and sanitation
- Early childhood development
- Basic Education
- Household economic strengthening
- Child protection
- Youth empowerment

## SUMMARY ACCOUNTABILITY PERFORMANCE

### BUDGET VARIANCE ANALYSIS (UGSH ‘000)

| <i>Life Stages</i> | <i>Annual Budget Current FY (A)</i> | <i>Cumulative Annual Expenditure To date (B)</i> | <i>Burn Rate on Annual Budget (E)<br/>E=B/A*100 %</i> | <i>Total Budget Current Quarter (C)</i> | <i>Total Expenditure Current Quarter (D)</i> | <i>Burn Rate on current Quarter Budget (F)<br/>E=D/C*100%</i> |
|--------------------|-------------------------------------|--|---|---|--|---|
|--------------------|-------------------------------------|--|---|---|--|---|

|                                      |           |         |      |         |         |      |
|--------------------------------------|-----------|---------|------|---------|---------|------|
| <b><i>Life Stage 1</i></b>           | 92,168    | 80,702  | 88%  | 28,276  | 20,541  | 73%  |
| <b><i>Life Stage 2</i></b>           | 337,711   | 251,929 | 75%  | 27,304  | 35,482  | 130% |
| <b><i>Life Stage 3</i></b>           | 320,936   | 318,477 | 99%  | 105,510 | 103,580 | 98%  |
| <b><i>Capacity Building</i></b>      | 177,219   | 173,062 | 98%  | 35,419  | 38,701  | 109% |
| <b><i>Sponsorship</i></b>            | 82,254    | 89,615  | 109% | 151,541 | 18,096  | 12%  |
| <b><i>Community Contribution</i></b> | 30,326    | 27,883  | 92%  | 8,738   | 0       | 0%   |
| <b><i>Total</i></b>                  | 1,040,614 | 941,668 | 90%  | 356,788 | 216,400 | 61%  |

*Sources: Annual Operation Plans and Budgets*

## SUMMARY OF PARTICIPANTS SERVED

| <b><i>Age Group</i></b>                                      | <b>Adults</b>             | <b>Girls</b>            |                          |                           | <b>Boys</b>             |                          |                           | <b><i>Total Counts</i></b> |
|--|---------------------------|-------------------------|--------------------------|---------------------------|-------------------------|--------------------------|---------------------------|----------------------------|
|  | <b><i>25 or older</i></b> | <b><i>0-5 years</i></b> | <b><i>6-14 years</i></b> | <b><i>15-24 years</i></b> | <b><i>0-5 years</i></b> | <b><i>6-14 years</i></b> | <b><i>15-24 years</i></b> |                            |
| <i>Grants / NSPs / Emergencies</i>                           |                           | 27                      | 75                       | 77                        | 18                      | 60                       | 57                        | 314                        |
| <i>Community wide; (non- enrolled families / children)</i>   | 594                       | 3,228                   | 591                      | 795                       | 3,180                   | 561                      | 684                       | <b>9,633</b>               |
| <i>Enrolled Children</i>                                     | 14                        | 266                     | 948                      | 941                       | 255                     | 870                      | 849                       | 4143                       |
| <i>Siblings of Enrolled Children</i>                         | 14                        | 2155                    |                          |                           | 1974                    |                          |                           | 4143                       |
| <i>Parents / Guardians / Caregivers of enrolled children</i> | 4143                      |                         |                          |                           |                         |                          |                           | 4143                       |
| <i>Government staff / structures</i>                         | 60                        |                         |                          |                           |                         |                          |                           | 60                         |
| <i>Partner Affiliate Staff and structures</i>                | 24                        |                         |                          |                           |                         |                          |                           | 24                         |
| <b><i>Sub Total by Gender and Life Stage</i></b>             | 4849                      | 3521                    | 1614                     | 1813                      | 3453                    | 1491                     | 1590                      | 22,460                     |

*Sources: Coverage table*

## PROGRAM ACHIEVEMENTS

### Caregiver Empowerment Initiatives

With reference to HH assessment results of February 2020, JIACOFE conducted a verification exercise among 977 destitute households to determine their sources of income and the impact of COVID-19 on their livelihood. During the exercise, JIACOFE identified 575 households whose micro enterprises were greatly affected and needed urgent support to enhance their economic security. 28 extreme destitute household were also identified requiring immediate support to enable them access food and other basic needs. As a result, a total of 603 caregivers in Wanyange, Buwaaya, Buwenge, Kamuli, Buwuda and Imanyiro communities were supported with micro grants to revamp their business and cash transfer for basic needs to recover from the shock caused by COVID-19. Micro grant support has gradually strengthened household's enterprises as sources of income for their livelihoods. To some extent, supported families are now able to meet the basic needs of their families amidst COVID-19 pandemic. Cash transfers coupled with psychosocial support helped to stabilize destitute households' consumption and purchasing power hence enabling them start small daily micro sources of income to support their daily needs.

4 youth/caregiver groups of 80 members (41M, 39F) from Buwaaya, Imanyiro Buwenge and Kamuli communities received micro grants. Coupled with micro enterprise skills upgrading, the support has unlocked youth/caregiver entrepreneur potentials to attain their business growth plans in leather production, bakery, and confectionary. The youth groups attained competitive advantage due to improved quality of production, marketing, and customer care. The youth are earning some income for a living during amidst COVID 19 pandemic. *A skilled youth #310 said " I dropped out of school and thought I could not learn anything as my teachers always referred to me as the stupid one. With the shoe business, I have the skills and ready to explore the world.'*

### Entrepreneurship and Business Development Initiatives

In partnership with DASH Uganda, 60 VSLA groups comprising 1572 (333 M and 1239 F) caregivers across the six supported communities were mentored on practical market-based skills in micro enterprise development initiatives, utilization of self-financing potential for higher returns, collective enterprise selection, investment, value addition and marketing.

All the 60 groups improved their constitutions guiding them on savings, credit, and registration. The groups registered with their respective district/sub-counties. Continuous mentorship and encouragement are ongoing to support the groups explore the possibility of benefiting from government programs as well as starting group enterprises. During the reporting period, five groups have initiated group enterprises. *"The mentorship opened our minds to think of investing in individual and group businesses other than sharing at the end of the circle for consumption. We have started a mushroom project where we expect a good harvest this season.* Felistus the group leader of Agali awamu family group in Kamuli testified during a monitoring visit.

With support from district production officers, 165 farmers received on-site mentorship on best agronomy practices focusing on thinning, pest control, harvest, post-harvest handling and market opportunities. These farmers were then supported with improved planting varieties of beans, maize, and ground nuts. Farmers built on the acquired knowledge to apply recommended pesticides, timely spacing and stacking of beans for increased crop yield. The

yield supported households with food for home consumption and income from the sale of surplus produce amidst the raging COVID-19 pandemic. “

### **Early Childhood Development (ECD)**

In response to District Education department’s recommendation towards ensuring friendly learning spaces for children, two centers of Kamuli and Buwuda were renovated by painting, repair of play materials and enlarging the size of the rooms to create space for social distancing and proper aeration during lessons. With a conducive environment at the center, child learning and play will be enhanced and subsequently lead to increased child enrollment when schools open.

9 ECD caregivers of community model centres continued with in service training on ECD at Bishop Willis core PTC. They have so far completed four out of six face to face sessions. The skills attained in scheming, lesson planning, preparing daily routines and developing child friendly learning aids. This will improve quality of services rendered to children at the centres when schools open.

### **Support Transition Management**

12 Female caregivers (teachers) across the 6 communities conducted home based ECD support reaching out to 286 (236 F 50 M) parents. Use of local play materials, engaging children in age-appropriate house chores, knowledge of child friendly environment, hygiene and sanitation practices were enhanced among parents during this period when schools are suspended. *“I feel good because I have learnt how to communicate to my children, teach them how play with peers, counting numbers and giving them simple tasks at home to clean the house and compound. I have also made dolls from banana fibers for my children”* Nantabo a Parent from Buwaaya community asserted.

### **Child Protection**

16 Child protection committee meetings were conducted across the six supported communities. The meetings brought together community stakeholders who noted escalating child abuse cases due to lockdown of schools. As a result, 51VAC cases were reported (47 teenage pregnancy and 4 child labour cases were reported).

The SOVCCs members, staff and VHTs are continuously extending psychosocial support to the victims and their families. Plans are under way to enrol the girls for skills development at community centres under artisan model next financial year when the lockdown is eased.

### **Community Health Initiatives**

In a bid to improve health service delivery, 18 review and planning meetings with 60 VHTs and 12 health workers were conducted across the six communities to review reporting tools, reorienting themselves on effective counselling, client follow up and referrals to health facilities during COVID 19 pandemic. The experience sharing meetings led to improved reporting and referral of cases to health facilities.



60 VHTs were supported with megaphones, bags, sanitizers, and masks for their safety as they mobilized communities on COVID 19 prevention, promotion of family health practices, awareness raising on childhood illness and barriers against health seeking behaviours. The support extended to VHTs and their regular engagement with households yielded some positive results as explained below.

116 pregnant mothers and 1956 (976 M 980 F) children below 2 years were reached. ANC adherence and new-born care and recognition of danger signs improved from 85% to 89%, child survival practices were recorded high with immunization at 97%, latrine use from 71 to 83%, hand washing from 68 to 75%. Family planning also improved from 65% to 74% while drinking of treated/boiled water remain low at 65%. 81 caregivers and 296 children with unmet needs for immunization, malaria, nutrition, ANC, HTS and family planning were referred and supported to access the necessary care at different partner health facilities. The team will step up follow up efforts with the different referral units especially health units to track access and utilization of health services by the referred clients. *“I had reservation going for ANC and delivering from a health facility due to the many cases of caesarean birth I used to hear about. My VHT talked to me, and I started going to the health unit for ANC. I had a normal birth to a baby boy from Kamuli general hospital. I will ensure my child gets fully immunized for his proper safety and protection from illnesses.* Namudope a mother from Kamuli community remarked during a monitoring visit.

### **Support Literacy and Numeracy Development**

42 teachers in Jinja, Kamuli and Mayuge were engaged in delivery of face-to-face study sessions to 1605 learners at village and household level focusing on basic concepts, learning competencies and skills. Learners acquired some competences and knowledge on how to utilize the home study materials.

In the same line, 1241 (584 male and 657 female) school going children of primary 4, 5, 6 and senior 1, 2, 3 and 5 were supported with annual sets of home study materials to keep them abreast with key competencies, knowledge of their grades and general life skills during COVID-19 period when schools are suspended. The materials were distributed to children by volunteers and staff using home to home approach. Children were encouraged to utilize their time for learning, knowledge building and participation in home chores. The children became more focused on learning and less involved in risky behaviours that came with extreme redundancy.

In addition, 6 schools were supported with seven copies of the new curriculum teacher’s resource books covering Mathematics, science, social studies, art and craft, English, IRE, and religious education. Teachers in the supported schools had guidance on lesson planning and developing schemes of work within the context of the new curriculum during the phased opening of schools.

### **Youth-Livelihood, Sexual Reproductive Health, and life skills**

In partnership with market-based actors, 198 youth across the six supported communities were reached with counselling and guidance on skilling in agribusiness, bakery, building and construction, life skills and general vocational skills. Youth were supported to evaluate their aptitudes, capabilities, and unique interests. They were further familiarized with different types

of vocations, their educational and skill requirements, and the prospects for career long term growth. Youth were inspired to draw career plans, mapping out career path with specific objectives reflecting on advantages and disadvantages. The guidance helped youth to make informed decision when applying for vocational courses.

231 (126M, 105F) youths across the six communities were trained in soft skills to interest them engage in market oriented small business such as chalk, bar soap, liquid soap, cake, shoe, candle and how to package their products. 8 youths from Buwenge and Kamuli communities picked interest and started micro business enterprises in liquid soap, daddies, cake, candle, and chalk making. This was geared towards exploring options of young engagement. However, this initiative was affected by the lockdown.

The 97 (29M, 68F) youths 20 in tertiary institutions and 77 at community centres under artisan model who were undergoing training in various trades were affected by the lockdown.

75 youth completed their skilling courses at Nile vocational institute-Jinja as planned, tested by directorate of industrial training, and attached to community practicing artisan to acquaint them with real work learning environment. The support gave youth a new perspective about their lives and hopes for the future. After the lockdown, they will be guided and supported with start-up tools to practice their trades for a living in the subsequent financial years. Voices from caregivers indicate that the intervention has reduced on youth dependency, redundancy, and engagement in risky behaviours as most of them are now engaged and earning some income. ***“After my training, my uncle supported me to get attached to a local garage where I practice my skill. I am happy that I earn some income out of my skill. The feedback I get from clients appreciating my work has inspired me to work so hard.*** Remarked Muzafalu from Buwaaya community testified.

13 youth from Buwaaya, Imanyiro and Buwenge communities who had completed their training in tailoring and hair dressing last financial year were equipped with start-up tools. They are now practicing their trades, hence earning a living. The youth now have the capacity to meet their immediate needs. ***“With the skill and support from JIACOFE I now have a tailoring workshop which earns me 40000/= a week. I save 10000/= in a saving group for my expansion. I am also training 2 youth in tailoring as a way of giving back to my community which trained me”.*** Esther from Imanyiro remarked. Deliberate effort will be put in place to guide and support youth when the lockdown is eased, and institutions open.

### **Child sponsorship**

Identified and supported 21 children with critical health conditions to undergo medical screening and treatment to improve their general health. These were mostly children with unique health needs requiring specialised treatment which the health system around supported communities could not offer. The 21 cases are doing well. ***“Because of the support I can now sit for long hours. This helped me to get a part time job of a receptionist at a local private clinic. Without such support, all my hopes would be in shatters”.*** Namugosa, from Buwaaya testified.

### **Family visits**

4143 enrolled families were visited to verify the physical presence of the children, education, and health status. Family dialogue meetings focused on COVID 19 preventive measures, positive parenting, family income, food security and sanitation improvement. Behaviour

change was noted in some families. Continuous engagements with families on phone are still ongoing.

## ADVOCACY

During implementation of child protection dialogues across the 6 communities, key child protection advocacy issues were identified and presented to the duty bearers for their action. Key issues included child pregnancies, child labour and school dropout. Duty bearers who included district probation and community development officers made commitments to work with existing child protection structures to have children's concerns addressed. Children and youth from the 6 communities identified child/youth advocacy champions that would be empowered by staff to follow up duty bearer commitments as they pursue their advocacy agenda. Voice now strategy will enhance youth advocacy and child participation in issues that affect their wellbeing.

## BUDGET VERSES DIRECT PROGRAM EXPENDITURE SUMMARY (UGSH '000)

|  |           |
|--|-----------|
| JIACOFE program has registered a steady expansion in resources portfolio over the past years |           |
|  |           |
| Grants   | 59,447    |
| Sponsorship  | 1,857,420 |
| Non- Sponsorship Funding   | 83,129    |
| Emergency Cash Transfer  | -         |
| Other Sources  | 42,439    |
|  |           |
| Livelihood /Micro Enterprise Development Initiatives   | 333,006   |
| Early Childhood Development  | 28,735    |
| Child Protection   | 16,421    |
| Health and Nutrition   | 273,413   |
| Basic Education  | 125,840   |
| Emergency Response   | 95,043    |
|  |           |
| JINJA  | 1,592,460 |
| KAMULI   | 162,070   |
| MAYUGE   | 287,905   |