

## 2019 ANNUAL REPORT

**Fostering Bright Futures for Children and Youth** 



## Report Overview

The Fiscal Year 2019 Annual Performance Report (APR) and (FY) 2020 Annual Performance Plan (APP) for Child Care and Youth Empowerment Foundation (CCAYEF), presents a description of how various Departments worked, assessed progress and results based on our Strategic Objectives, organizational Priority Goals (APG), and Performance Goals (PGs) as articulated in the FY 2019 – FY 2023 CCAYEF Strategic Plan.

2019 was the 1st year of implementation of our new strategic plan, all CCAYEF works rotated around four thematic areas i.e. Child Protection, WASH and Health, Economic Empowerment and Skilling, and Organizational Strengthening and Capacity Building where significant progress was made.

CCAYEF is consistently supporting and empowering its staff for efficiency and effectiveness through seminars, trainings, conferences, staff retreats, and support supervision. Our staff is presently very competent in areas of governance, programming and execution of the overall Organizational mandate.

It is therefore the details of all the above summarized highlights that are clearly and elaborately documented in this report.

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## Message from the Executive Director

Child Care And Youth Empowerment Foundation CCAYEF is a legally registered NGO in Uganda, Mukono District. It cherishes the proper growth and development of children; and empowers youth with knowledge and skills to become responsible adults and to realize their life goals and passionate about mothers of child bearing age.

Over 11 years of her existence, CCAYEF has made tremendous contribution towards the Uganda's children and youth economically supporting families to achieve the desired status, legally supporting children and youth realize social and legal justice as well as emphasizing the right to health, education, Water, Sanitation and Hygiene. This is attested by a cross-section of stakeholders across the board including Central and Local governments, other CSOs, the community, and development partners.

CCAYEF's biggest legacy is probably the impact it has had on children, their mothers, youth, and communities empowered to achieving social justice and peace within households and among the immediate neighbors. A good number youth heading projects in different reputable organizations are a product of our Fresher Empowerment Program. And over 6000 adolescent girls and young women are now employed and employable because of our Vocational Skilling Program.

As CCAYEF does business, she is continuously guided by her Vision, Mission and core values all of which are an inspiration to not only focus on her cause but also providing leading example of stewardship and accountability to her own stakeholders.

CCAYEF will continue to fulfill her mandate as we progress into the New Year, looking forward to achieving all planned activities under our new strategic plan. We look forward to working with you even come 2020. Wish you well.



**Executive Director** 



# Message from the Board Chairman

#### **Dear members**

2019 marked the beginning of the first year of our newly drawn strategic plan. In this strategic plan we intend to achieve a lot in areas of Child Protection, WASH and Health, Social economic strengthening and skilling for the Youth and women.

Let me take this opportunity to give you a list of my fellow Board Members including, Dr. Simon Peter Kayondo, Ms. Harriet Pulunyi, Ms. Elizabeth Nagawa, Ms. Rosemary-Bwire.

The year 2020 is yet another year for us to achieve tremendous goals among which is the need to advocate for the rights of girls and boys to be listened to by teachers, parents and other stakeholders on issues concerning their education, and health.

CCAYEF will roll out a new program, 'Let me be heard'. This will enable children's voices to be heard through use of the social media, and all other loud platforms. This program will reach the deepest hidden girls and boys whose views would never be heard and therefore not involved in decision making.

I wish you all the best and look forward to your usual support. Thank you!

**Dr. Simon Peter Kayondo** Chairman Board



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## **Board of Directors**



**Dr. Simon Peter Kayondo**Chairman Board



**Ms. Nalwadda Proscovia**General Secretary



Mrs. Rose Mary Bwire
Treasurer



Ms Harriet Pulunyi Publicity

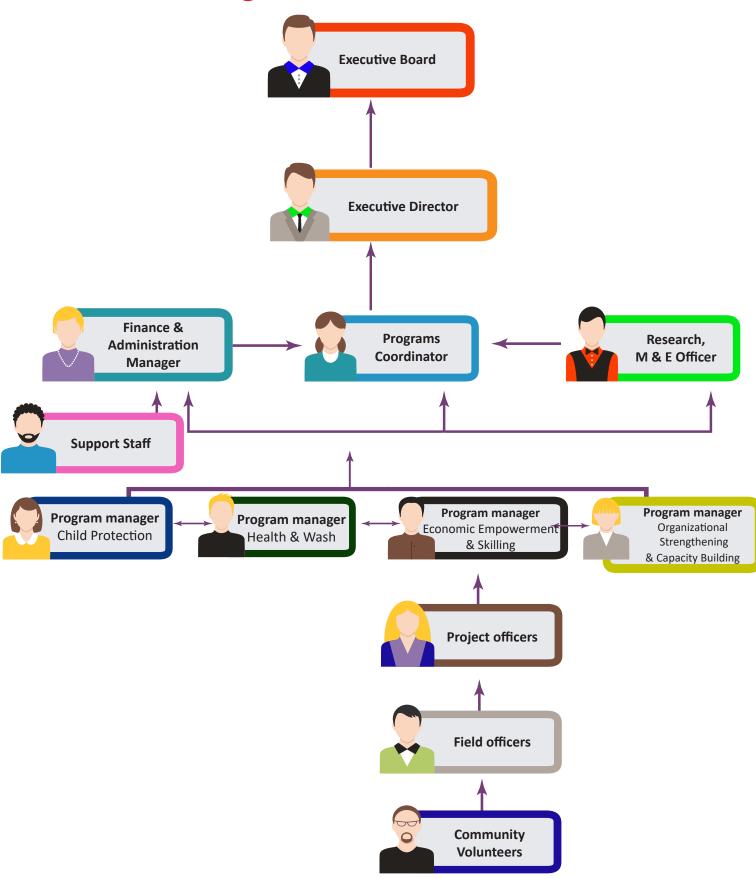


**Dr. Anthony Kkonde**Founder Member



Ms. Nagawa Elizabeth Member

# Governance Structure and Organizational Chart



### Introduction

Child Care and Youth Empowerment Foundation (CCAYEF) is an indigenous non-profit, non-governmental, community-based, charitable organization. It was founded in 2008 and is officially registered and recognized by Mukono, Buikwe and Kayunga Districts, Mukono Municipality and the Uganda

Ministry of Internal Affairs. It's located in Mukono district, Mukono Central Division, Kasangalabi Village. Its core activities are in the field of Health, WASH, and social work.



#### **Our Vision**

To be an Organization that prides in prevention of vulnerability of children, youth and women of child bearing age by cherishing their wellbeing, restoring hope and purpose of living.



#### **Our Mission**

To improve the wellbeing of children, youth and women of child bearing age, and mitigate the effects of the challenges they encounter through advocacy, rehabilitation, training, psychosocial & socio-economic support, primary health care, WASH and networking.



#### **Our Values**

Social Justice, Empowerment, love, intergrity and proffesionalism.

#### 1.3 Overall Goal of CCAYEF

To empower Adolescent Girls and Young Women, Children and Youth to realize their full growth and development potential.

#### 1.4 Organizational Strategic Objectives

**Objective 1:** To improve on the health and wellbeing of mothers and their children

**Objective 2:** To offer family psycho-social support in order to foster good parent child relations for the targeted communities.

**Objective 3:** To equip youths with skills and knowledge for proper handling of their day to life; and to improve their income levels.

**Objective 4:** Strengthening service delivery and develop institutional structure to support integrated programs.

#### CCAYEF implements its activities basing on four thematic areas namely:

Child Protection, Health, Socio-Economic empowerment and skilling for the youth and Organizational Strengthening and Capacity Building.

# Key Activities and Projects Carried Out 2019

#### STRATEGIC PRIORITY 1.0: CHILD PROTECTION

This component focuses on integrated early childhood development and legal protection interventions: Health, nutrition and access to civil registration services and creating safe spaces for children in school and at home: Teenage pregnancy/early marriages/un intended second pregnancies' prevention and awareness campaigns; Offering support to Orphans and other Vulnerable Children and prevention of vulnerability through promotion of retention and completion of schooling and access to sanitary materials and menstrual hygiene management facilities and strengthening social capital for adolescent girls in school.

#### STRATEGIC OBJECTIVE 1:

To promote and protect the rights of 30,000 children through prevention of all forms of abuse, advocacy, Nutrition, Education/ Psychosocial support, health and Economic empowerment. Under this thematic area, the following activities were set to be done;

Specific objective 1.1: Prevention and protection of children against all forms of abuse.

Provision of legal support to abused children: This activity involves identifying child abuse cases through OVC communities, police stations (Child and Family Protection Department) among others; provide the required support like treatment and also working with the caretakers to create a safe environment for the victims and ensure that the perpetuators are arrested and imprisoned and also referring cases that cannot be handled by CCAYEF to other service providers. In this year, twelve cases were fully supported.

#### • CASE ONE: Success story

An 8 year old child in Mukono Central Division who was living with her mother and her other siblings, was defiled on several occasions by a neighbor with whom her mother always left her to go and work at night. This child was discovered when CCAYEF field officers were mapping and recruiting OVC onto the program. Together with the caretaker and the victim, the case was reported to police; medical checkups were done discovering that she was defiled many times. The police traced the suspect and arrested him since the victim could identify him. The mother became cautious about her children's safety whom she relocated to her relatives until she finds a better job that can allow her to work during day in order to safeguard her children.

#### CASE TWO: Success story

Another 4 year old girl who was defiled on her way to the nearby shop to bring cooking oil at around 6:30pm stays with her parents in in Mukono municipality. The caretaker reported the case to police and the suspect was arrested because the victim could easily identify him from the several suspects that were brought. The case was referred to CCAYEF by MUWRP through Mukono police station, the household of the victim was enrolled onto CCAYEF psychosocial support.

Since the mother was only 24 years, she was also recruited into the Dreams Project and they would be supported to get an Income Generating Activity to boost on their household's income in the near Future.

#### Specific objective 1.2: Promotion of the Right to Health among children

#### 1.2.1 Monitoring adherence to HIV treatment to elicitviral load suppression:

This activity involves supporting all HIV positive children recruited onto the OVC program through their caretakers to ensure that they keep their appointment dates at the facilities, take their tablets, remain emotionally stable and have a balanced diet. 741 visits for HIV positive children/adolescents were made for comprehensive adherence support.



An ovc beneficiary receiving clothes during home visits

#### 1.2.2. Establishment and support to IECD Centers:

The ECD Centre was established to care for the babies of the Adolescent Girls and Young Women that come to the safe space to be trained in vocational skilling to aid them get safety, acquire early skills in reading/ talking/ behavior and nutrition. A total of 50 babies have been provided with a safe sleeping area, play materials and monitoring of their growth and development while at the center.

#### Specific objective 1.3: Promotion of WASH in schools and OVC Communities

#### 1.3.1 Promotion of WASH in schools

Under the USAID/USHA funded WASH in Schools community driven Project, CCAYEF has facilitated the adoption and increasing of adoption and expansion of key hygiene behaviors at home and in schoolsof Kangulumira Sub County, Kayunga District where 4 schools are facilitated to become WASH-friendly. This has been achieved through the successful implementation of the activities below:

#### Education on Menstrual Hygiene Management among in and out of school adolescents:

Under this activity adolescents are helped to understand menstruation; access to menstrual hygiene products to absorb or collect menstrual blood, privacy to change the materials and access to facilities to dispose-off used menstrual management materials. 201 School Health Club members (69 males and 132 females) were reached with information on menstruation who in turn reached out to the entire schools' body of pupils with the same information.

## Training of pre-menstrual and menstrual age girls and boys in making re-usable sanitary pads:

Teachers in charge of sanitation were engaged in preparatory meetings for positive hygiene behavior promotion and also supported the schools to form and strengthen WASH /Health clubs. Members of these clubs were supported to elected executive committee members in the 4 targeted schools; and training of 201 children-members of the School Health – both boys and girls; and 30 teachers (8 males and 22 females) teachers in liquid soap and Re-usable Sanitary Pads (RUMPS) making.

#### NO OF MALES AND FEMALES TRAINED IN EACH SCHOOL

No	School	Male	Female	Total	
1	Kamuli UMEA P/S	15	33	48	
2	Kimooli UMEA P/S	15	33	48	
3	Kangulumira R/C	19	37	56	
4	Kangulumira C/U	20	29	49	
	Total	69	132	201	



School Health club of Kangulumira R/c P/S School Healfh club of Kangulumira c/U



An ovc beneficiary Making Re - Usable Sanifary Pads

#### Promoting personal hygiene and sanitation in Schools:

School teachers, parents and pupils in schools are sensitized on how clean their bodies and surrounding including keeping finger nails short, washing uniforms and clothes regularly, bathing, trimming of their hair, brushing of teeth, cleaning their classrooms /latrines daily/ households' compounds, washing utensils, among others.

In the year under review, 195 pupils in the School Health Clubs of the 4 targeted schools of Kangulumira sub county, Kayunga District were trained in different topics concerning Water Hygiene and Sanitation like waste management, safe water for drinking, personal hygiene, classroom cleanliness/latrine cleanliness among others in order to pass on the information to their fellow pupils during their school health parades in a bid order to promote positive WASH behavior.

#### **SCHOOL HEALTH CLUBS TRAININGS ON WASH TOPICS**

No	School	Male	Female
1	KIMOOLI	15	32
2	KAMULI	14	32
3	KANGULUMIRA C/U	18	28
4	KANGULUMIRA R/C	19	37
	TOTAL	66	129

Advocacy for Gender friendly menstrual hygiene management facilities and structures in both schools and communities.

This activity involves engaging various stakeholders to influence the provision of different MHM facilities and structures in schools and communities; construction of separate latrines for both girls and boys in schools, washrooms for girls/women, and provision of emergency knickers and uniforms for girls in schools, making of reusable sanitary pads and involving /strengthening various MHM School Structures like School Health Clubs, SWT/SMT, sanitary teachers club patron, SMC, PTA, foundation bodies, all teachers /pupils, CDO, Health Assistant among others.

In a bid to equip schools with the WASH facilities. In this process, schools and all stakeholders together drew new WASH Improvement Plans (SWIPS) for their schools which would be realized to have hem WASH friendly. All the school WASH Improvement Plans for the schools were approved and the schools are working towards addressing WASH gaps identified in their schools.



Sensifizing parents of Kimooli UMEA p/s on WASH activities and the need to have proper WASH facilities and practices in schools and households

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## The daily cleaning schedules for kimooli UMEA and kamuli UMEA P/S

National WASH policies and guidelines were disseminated to school stakeholders from Kamuli UMEA, Kangulumira R/C, Kangulumira C/U and Kimooli UMEA primary schools.

This was done to aid them become acquainted and institutionalize them hence, making their schools WASH friendly. These were based on implementing the three (3) star approach for WASH in schools, Training manual for WASH in schools, Gender policy, National Sanitation Guidelines and the readers for learners for Understanding and managing Menstruation.



Kangulumira RC, Kangulumira CU, Kimooli UMEA, and Kamuli UMEA P/S in Kangulumira RC

#### **The Joint Monitoring Visits:**

These comprised of the DEO or Inspector of schools and area Health Assistants and Community Development Officers to check on progress of School WASH Improvement Plans in each school. The team was interested in finding out whether there was availability and functionality of the hand washing facilities, the school cleanliness and the cleaning schedules; the functionality of the School Health Club, separate toilets of girls and boys, the talking compound among others.



District Inspector of schools meeting pupils of Kangulumira R/C primary school

#### 1.3.2 Promotion of WASH in Communities:

CCAYEF is implementing the Market Based Sanitation Implementation Approach (MBSIA) a community driven project aimed at mobilizing and triggering communities/ villages to increase household access to sanitation and water services, and adoption of key hygiene behaviors at home. The overall goal of the project is to contribute to increased access to improved and sustainable water, sanitation, and hygiene (WASH) services in Uganda. Specifically, the project aims to improve household sanitation and water services in 41 villages, with 1,495 households moving from unimproved to improved sanitation status in Kangulumira Sub County in Kayunga District.

The project targets approximately 29,901 people with access to a basic sanitation (improved toilet and hand washing with soap) facilities. This will be achieved by reaching 41 villages through MBSIA by 2020. All this was achieved through activities like village Pre-triggering and Triggering Meetings, follow up visits, Joint monitoring supervisions, Door to door outreaches to mention but a few.



A community triggering meeting in Kasambya Village

#### **Out-comes/Results**

No	Indicators	Indicator disaggregation	Results	Comments
1	Number of communities verified as open	Number of households that have completed latrine construction	913	Households that have completed new latrines
	defecation free (ODF).	Households have completed parts of the existing toilet/ latrine	466	79 installed SATOS
		Households that are in the process of constructing a new latrine (pit digging, started construction	802	Some households have started construction of latrines and 63 households dug pits
2	Number of schools facilitated- which become WASH-friendly	Number of schools supported to become wash friendly	4	These schools are in the process of becoming wash friendly.

#### Specific Objective 1.4. Promoting food security and improve nutrition intake

## **1.4.1 Educate OVCs and care-takers on Backyard Farming Methodology and food preparation**

OVC and their care givers are trained in Backyard gardening to address issues of malnutrition for their babies and to boost their family incomes when they sell off the surplus. During implementation, 2 demonstration gardens for OVC caretakers at Nabuti and Nakabago villages were established to aid them in starting up and maintaining their backyard gardens at home. They are well maintained and accessible to all OVC caretakers attached to it.

46 households received start up seedlings, trained in the establishment of gardens and their management and with the aid of the demonstration garden; they were able to set up their own backyard gardens. 94 caretakers were trained in food preparation demonstration in Kirangira, Nabuti and Kasangalabi villages aiming at improving the nutrition status of their children thus preventing malnutrition.

#### Success story for the backyard garden

Mukago Wasswaa resident of Kikubankima was identified, assessed by CCAYEF field officers and thereafter recruited onto CCAYEF-OVC program in September 2019. He was trained in making a backyard garden and with the skills learnt, he started up his own garden at home where he planted varieties of vegetables like Sukuma, eggplants, African eggplants and Nakati. In a period of 2 months, they were ready and he harvested them, ate some and sold others earning 100,000/. The money earned was spent on school fees payment and purchase of clothes for his children. This motivated him to join a VSLA group at his village and started saving and also provided his group members with seedlings to plant in their gardens.

"I did not know that I can earn money from selling vegetables not until CCAYEF helped me to realize it because before, I used to plant vegetables for only home consumption". Says Wasswa. Currently, there is constant supply of vegetables at Wasswa's home and his garden works as a demonstration for other people especially his village members. He is planning to utilize all his redundant land for growing vegetablest o get more produce to increase on his family income and also boost their nutrition.



A backyard garden for Mukago Wasswa

#### **Success story for food preparation demonstration**

Namakula Zaina a resident of kikubankima, an ovc beneficiary was among the caretakers that were trained in safe food preparation in november by ccayef field staff aiming at boosting the nutrition of the children. they were taught how to prepare nutritious porridge adding blue band, milk and sugar to make it tasty and also how to mix different food stuffs with proteins, minerals and carbohydrates that are highly nutritious and vital for the children's growth and development. "Before the training, my children used to fall sick very often especially the 2 who are under 5 years. After the training, I acquired the skills and started preparing porridge and I serve it to my children on a daily basis. they enjoy taking it, and basing on their appearance, they look healthy. I have spent a month now without visiting the hospital. thanks go to ccayef for training me and I will continue preparing the porridge and food in order to completely chase away food related sicknesses in my home." says zaina.





Food preparation demonstration at Kasangalabi Village

#### 1.4.2 Psychosocial support to OVC through Behavioral Change Communication

This activity involves providing parenting skills trainings to OVC households targeting OVC and their parents/caregivers using SINOVUYO model. In this year under review, 482 children received parenting skills training from 261 households. It is aimed at improving their parenting skills towards positive parenting.

#### **Success story**

A one named Jane (PSEUDO) of Ntawo village gave a testimony on how the training benefited her and her entire family.

"Before studying SINOVUYO, I used to be rough and harsh to my children and I could not also understand that they are still young and probably not in position to do some household chores neatly given their age but after attending all the SINOVUYO sessions, I came to realize that I need to teach my children chores depending on their age to allow them transition from one stage of development to another". Said Jane.



SINOVUYO fraining at Ntawo Primary School

## Specific Objective 1.5. Prevention of child marriages, early pregnancies and unwanted pregnancies for AGYW.

## 1.5.1:Conducting risk reduction sessions for pregnant girls and child brides.

Under this intervention, child mothers undergo stepping stone sessions; a prevention training program designed to improve sexual health through building stronger, more gender-equitable relationships and better communication between partners. 1166 girls underwent these sessions and they can testify how their behavior changed.

#### **Testimony**

Sharon is aged 20, staying in Kasangalabi village, was screened and became legible to join the project. She was recruited and underwent stepping stones training (behavioral change program), and on Completion, she had this to say.

"Before I studied stepping stones I used to be reckless with my life and had a group of girls who were my friends and I used to move with them in night clubsand could come back home at 1:00am in the morning or 6:00am. We had given up on life and had a slogan which says, OKULYA SSENTE SIKULYA MWANA (Eating money is not eating a child!). After attending the sessions I learnt that I can easily contract HIV/AIDS, thenstopped attending night clubs and even set goals for my future". Says Sharon. Thanks go to CCAYEF.

### 1.5.1 Promotion of safe motherhood among child mothers / brides.

Under this activity, child mothers are helped to understand pregnancy, importance of immunizing of their children, providing them with nutritious food stuffs. 23 child mothers were provided with pampers and also taught of the proper feeding of their babies. All the mothers understand the importance of immunizing their children as told by the health workers.

CCAYEF works with Mukono Health Centre IV and Mukono COU of Uganda to return lost pregnant mothers to facility interventions and in the year under review, a total of 32 lost mothers were tracked; 14 returned to the facility for treatment16 transferred to other health facilities outside Mukono Central Division and only 2 died.

## Specific Objective 1.6. Promoting economic empowerment of the OVC and OVC households.

## 1.6.1: Training OVCs and their Households in VSLA methodology and engaging them in purposive saving.

This intervention enables OVC caretakers to nurture their purposeful saving culture and have access to loan services to start-up Income Generating Activities (IGAs) to support their households financially. These groups comprise of 15 to 30 members, elect representatives, make constitutions to guide them and also contribute welfare fees on a weekly basis.

In this year under review; 27 OVC VSLA groups were trained in VSLA methodology which include; Mirembe, Muwanguzi, Kwagala, Sure deal, Twekulakulanye, Basookakwavula, Bivantuuyo, mukisa, Agaliawamu, Kisakyamaria, United family, Muwanguzi, Tusuubira, Twezimbe among others were trained and they are also taken through Financial literacy sessions to enable them manage their businesses well and also invest their saved money properly.

#### Success story

Mukisa OVC VSLA group is one of the groups that are in the second cycle (saving for the second time), the group consists of 30 members with an established management committee. They sit every Friday at the treasurer's home in Kyungu. The group went ahead and registered the association in November 2018.

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The chairperson Mrs. Nazziwa Esther puts it clear that the cooperation in the group has enabled them to complete their second cycle of saving. This group shared out their money on 22nd December 2019 and they had raised (twelve millions) 12,000,000/-. All the members invested their savings in their already existing small scale businesses. As result of steadiness and togetherness, 5 new members joined Makula group totaling to 35. The group plans to purchase rental chairs and start a business to earn profits and also increase on their capital base.



Sharing out ceremony for Makula group

#### 1.4.3 Providing food aid to critically malnourished and sick children

Under this activity, children who are sick and critically malnourished are referred for treatment. 3 children were referred for nutritional support and treatment to Goshen's Nutrition Health Initiatives. 10 OVC households with sick children were provided with food.

#### 1.4.4 Community mobilization against child marriages and early pregnancies

21 community meetings were held against child marriages and early pregnancies in Ntawo, Colline, Nsambwe, Ssaza, Agip, Kikooza, Lweza, kikubankima and kasangalabi villages. 315 community members attended the meetings and they were all committed to prevent their children from getting married off at an early age.

#### 1.5.6 Provision of livelihoods for very vulnerable child mothers

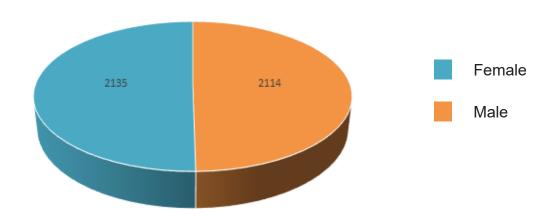
This activity helps the very poor children and young mothers to receive clothes and other items to use at home in order to improve on their wellbeing. 150 children received materials like clothes, shoes, pampers and bed sheets for improvement on their welfare.

#### 1.6.2 Educational support for OVC

Under this activity, CCAYEF offers educational support to all identified OVC in communities to enable them join and stay in schools to attain formal education. During this year, 300 OVC from 20 schools were provided with school fees and 1687 provided with scholastic materials. These children were monitored to track their attendance, progress and retention in school to ensure completion of their studies.

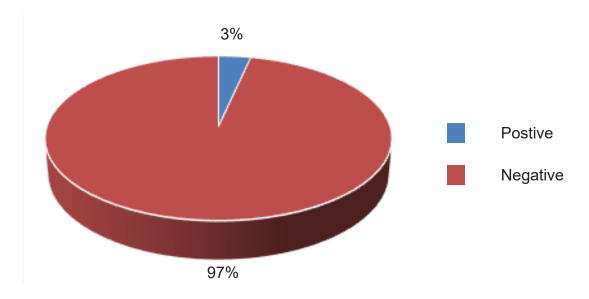
#### STATISTICAL REPRESENTATION OF WORK DONE AMONG THE OVC

#### Pie chart showing total ovc served this year

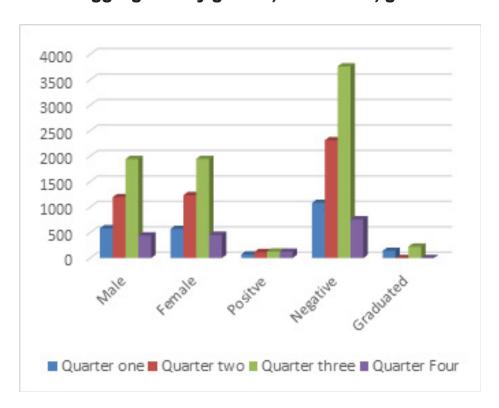


This year we have been able to reach 4249 OVC of which 50.2% (2135) were males and 49.8% (2114) were females.

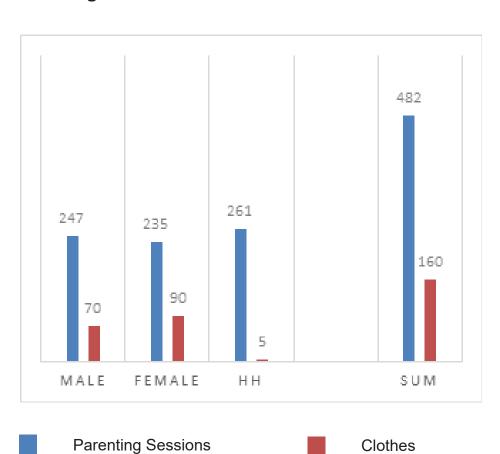
#### **Graph showing OVC served this year with HIV STAT**



#### OVC disaggregated by gender, HIV status, graduated and exited

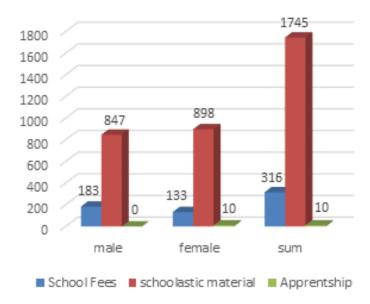


#### **Parenting**

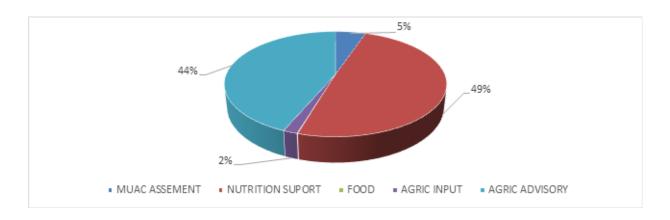


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#### **Education**

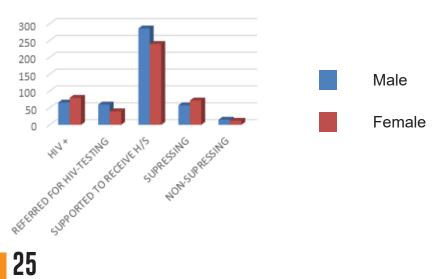


#### Food security and nutrition

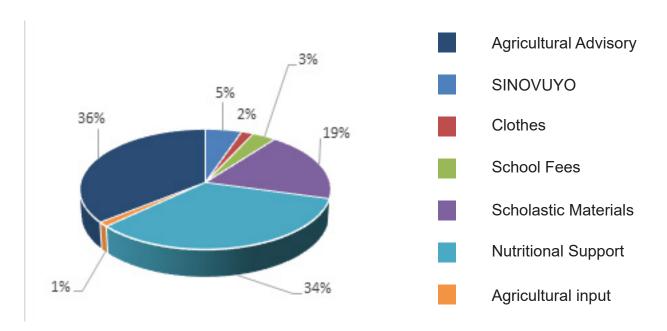


The graphs above show the number of OVC served per quarter in the reporting period segregated by gender, HIV status, number of OVC graduated and those who got lost/existed the program.

#### **HIV Support**



#### Overall OVC served per service



#### **GENERAL ACHIEVEMENTS**

4245 OVC were served with different services in this year; 2132 were males and 2113 were females.

#### **Lessons learnt**

Provision of services/trainings like school fees, backyard gardening, VSLA methodology improves the well being of the OVC households to ensure sustainability.

#### Recommendations

- Supporting OVC households to start up Income Generating Activities boosts economic status of the households hence empowering them to become self-reliant.
- There is need to provide school fees to OVC until completion of their studies to enable them to acquire certificates to get employment.
- Engaging all relevant stakeholders like CDO, Health Assistants, Head teachers, SW/SMTrs, Local council representatives, teachers in addressing WASH concerns in schools and communities is vital towards improvement of sanitation status in Kangulumira Sub county.
- Designing appropriate strategies for people in communities in a bid to ensure that they improve upon their sanitation status using minimum resources helps households reach the required WASH levels

#### **Challenges**

Due to limited funds, we were unable to implement the following activities;

- Support all the needy OVC with school fees and other scholastic materials to enable them progress well in school.
- Sensitize communities on the use of SAUTI 116 tool free line to report case of child abuse.
- 94 OVC exited from the program before graduating; 4 died, 60 relocated to other areas outside Mukono, 30 had higher expectations from the program (they were interested in school fees only)

## Program Area 2: Health

Health awareness and prevention of infections, promoting health seeking behaviors, improving nutrition, household and community hygiene. This is achieved through Life skills training, provision of SRHR information and linking to services, HIV/AIDS prevention services. Promotion of WASH interventions for better health among schools' households and fishing communities.

CCAYEF is implementing an HIV prevention Project in partnership with MUWRP geared towards reducing on the new HIV incidences among young girls 15-24 years due to the higher prevalence rates among that target group. The HIV prevalence rates among adults aged 15 to 64 years in Uganda is 6.2%; 7.6% among females and 4.7% among males. The HIV prevalence is almost four times higher among young women aged 15 to 24 years.

The project aims at socially and economically empowering AGYW (15-24years) and focusing on keeping negative AGYWs negative and linking identified HIV positive to care. This is done through various activities such as extensive HIV Counseling and Testing (HCT), behavioral change classes referred to as stepping stones, Parenting and care giver programs(SINOVUYO), GBV care, improved Contraception Mix, Peer to peer psycho-social support, PrEP promotion among AGYW, Condom Promotion & Provision and family planning services.

#### **Strategic Objective:**

To eliminate health disparities among children and youth by addressing social determinants of health in communities we serve.

#### **Specific Objective 1:**

To Prevent and reduce disease morbidity and mortality incidences among children and youth Under this objective the following activities were done:

## 1.1. Community sensitization on Primary Health Care, Malaria, HIV AIDs, and T.B prevention management conducted.

These clients are sensitized on the HIV prevention services and T.B prevention through community outreaches and organized groups of people that are at a higher risk of contracting HIV and given the nature of their work, it's always difficult for them to visit health facilities to seek Health services especially HIV/TB. In this year under review, sensitization was done among people under priority populations (uniformed men) and 17 groups; 709 uniformed men and 1166 Adolescent Girls and Young Women were sensitized ON HIV AND T.B prevention and management.

#### 1.2. Referrals of the sick to health facilities

This activity involves linking identified clients who are sick or in need of medical checkups and HIV testing from the communities to the health facilities. Below is the illustration of the referrals made.

No	Services	Referrals	Received a service/ treatment
1	PreP	3	1 Couple
2	T.B treatment	1	1
3	HIV testing	1166	1026

### Specific Objective 2: To promote and strengthen safe motherhood and child survival

## 2.1: Educate Adolescents on child management, early pregnancies and second un-wanted pregnancies:

Under this activity, adolescent girls are given information on family planning to prevent them from getting second unwanted pregnancies 537 were sensitized and 100 received family planning services.

Condom education has been provided to discuss methods of contraception, how such methods are used and the effectiveness of each in preventing pregnancy, sexually transmitted infections and HIV/AIDS. People among Priority Populations have been encouraged to choose usage of contraceptives in case they cannot abstain to avoid being victims.

## 2.2. Condom dissemination and distribution: CCAYEF has distributed over 33233 pieces of male and 700 female condoms Priority Populations.

#### Pieces of condoms distributed through the four quarters

No	Pieces	Qtr 1	Qtr 2	Qtr 3	Qtr 4	TOTAL
1	MALE	6825	8204	13600	7225	332333
2	FEMALE	0	300	300	100	700

## Specific Objective 3: To eliminate Health service gaps that hinder uptake of health services by the youths:

Activities undertaken under this objective include;

#### 3.1: Integrated and optimized HIV testing:

In this year, clients are tested through integrated community outreaches among truck drivers, police/army officers 'security guards and relatives of HIV positive clients in order for them to know their HIV status (Index testing). 1735 clients tested for HIV; 9 tested HIV positive and 5 were known HIV positive (already on ART).

#### 3.2: Training community volunteers and peer mentors on ASRH:

This activity aims at empowering peer mentors with skills to reach their fellow peers with health information. In this year under review, 179 peer mentors were trained to reach their fellow peers with HIV prevention information and services like condom usage and distribution, benefits of HIV testing, ganders of early sex debut, family planning information, Village saving and loans association trainings among others.

## 3.4. Community mobilization for uptake of integrated Health promotion and prevention services focusing on VMMC

The identified 17 male peers from different hotspots (groups of uniformed men) two male peers successfully referred 6 clients for HIV testing at the Health Centre IV testing and they all tested HIV negative.

Most known positive clients do get lost after being initiated on ART in the health facilities. A total of 125 clients were tracked back to care: 41 returned, 3 transferred, 58 had no contact information, 18 had wrong contact information and 5 died. This activity is carried out in collaboration with Mukono health Centre IV and Mukono COU hospital, lost HIV clients were tracked and returned to facilities to receive HIV services.

#### Success story

During one of the community outreaches carried out together with Mukono Church of Uganda Hospital, there was an identified new positive client (police officer) who had lived not knowing his status for unspecified period of time because he had taken long without testing. The client informed us about his life experience throughout the past ten years.

He informed us that he had slept with many women and could not even figure out the real number. "I have slept with many, both off and during working hours". Says the client. When the health workers tested him, the results confirmed that he was HIV positive. He accepted the results because he confessed to us that he was reckless, not minding about his life and using condoms wasn't his priority because he preferred having unprotected sex. Counseling was done and the client accepted to start ARVs and immediately was initiated on ART at Mukono Church of Uganda. Health workers told him to bring his family for HIV testing too, which he accepted.

From his life experience, he promised to inform young children, youth and elders to always go for testing and get to know their HIV status and to warn them not to live a reckless life like him and for those who cannot abstain to always use condoms and if found positive, they should to accept their current HIV status, start ARVs and support those who do not know their HIV status to test. After all he was happy and accepted to live a happy and extra careful life by not infecting others but support and advise them to test their new partners before sexual intercourse.





Testing the uniformed man HIV of Blue Light Security-Kikooza

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increase uptake on Prep, this can be done

can support some activities under the program.

Continue applying for smaller grants that

through extending the Prep service to AGYW.

#### **Key challenges** Training of the peer mentors (MEN) to help the implementation of various activities in the hotspots and the community. Despite of most activities being implemented, the program is still hampered with some challenges some of which are highlighted Extension of other services like cancer below: tests, pressure and asthma medication than only being strict on only HIV testing this may also foster a transformed community and Most peer volunteers especially uninformed personels are not cooperative and prolonged life expectancy. others are unwilling to refer their workers for health services. Most of them tend to be busy Extension of HIV testing services, with all the time and they do not delegate to others linkage to prevention, treatment and care in charges and this have caused low perforaccessible to all adolescents. mance failing us to reach the target. Suggest that the adolescents to be Other PP clients do always doubt the counseled about the potential benefits and testing kits tending to prefer testing from the risks of disclosure of their HIV status, empower and support them to determine if, when, how health facilities than in such an outreach and to whom to disclose to. considering it as fun and wastage of time. Most hotspots have few workers and Testing in conjunction with other others do not parade with them but meet them risk-reduction services can increase the benefit at their work place so this has made it difficult of HIV testing. Such services include STI, TB to reach the streamline target. and viral hepatitis screening and provision of sterile injection equipment and opioid therapy. Most clients prefer testing for cancer, pressure, asthma than HIV because they see Having More thorough screening and such diseases being more dangerous and they pre-testing counseling to the clients in order to need immediate attention than HIV. avoid escapes. **Lessons learnt Recommendations** Identifying strategic partnerships to Most of the priority populations group are already aware of their HIV status and hence mobilize for the highly needed resources both financial and equipment. conscious about getting the updates on health issues Forging for a possible strategy to П

Educational tours tend to help PP get to

protective measures to curb down the spread

know other causes of HIV and the

of HIV amongst PPs.

# Program area 3: Socio-Economic empowerment and skilling for the youth / Women

To equip the youth and young people with functional skills and income generating activities delivered through vocational training, supporting backyard farming and small scale open field agriculture, facilitating employment opportunities and supporting Village Saving and Loan Association/Scheme (VSLA) activities. This component works to provide knowledge and skills necessary for economic productivity and self-reliance.

Specific objective 3:1. Promoting youth employability and entrepreneurship skills for self-sustenance.

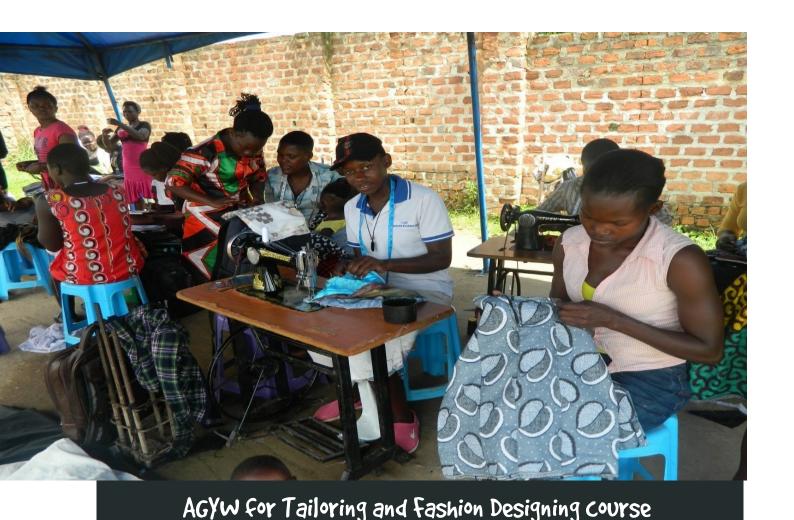
Under this objective, the following activities were set out to be done; Vocational skills training among the youth, provision of startup kits to the youths, community sensitization on socio-economic gender roles and responsibilities (Marriage Registration and Certificate Acquisition), Provision of entrepreneurship and leadership trainings.

#### **Vocational skills training among the youth / Young Women:**

This activity enables Adolescent Girls and Young Women (AGYW) out of school to get an opportunity to learn vocational skilling. They are given a chance to choose the vocational skills of their choice and these include; Tailoring and fashion designing, Hair dressing and salon, jewelry making, making of bags and crafts and soap making (liquid soap), cookery, and flower arrangement and decoration.

This component has enabled girls to become economically empowered to earn a living thus reducing on the risks of getting unwanted pregnancies, being forced into marriages and getting HIV. During this year, 1184 girls received vocational skills training and 300 are done with the training and they are waiting for their graduation.

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#### **Provision of entrepreneurship and leadership trainings:**

This component helps AGYW; 15-24 years to learn the Village Saving and Loan Association methodology in groups of 25 to 30 members, such that they can nurture their saving culture and have access to loan services to start-up Income Generating Activities (IGAs) after acquiring Vocational skills. A total of 43 groups; (1066 AGYW) were trained in VSLA methodology and 28 groups (432 AGYW) received Financial Literacy sessions to enable them manage their businesses well. When the girls grasp this concept, they are almost financially independent hence having bargaining power over their financial and sexual rights. These groups are self-managed and have a constitution to which they abide by.

Specific objective 3.2: Enhancing life skills and knowledge for self-reliance and sustainable development. The activities are as below:

Supporting AGYW to attain both formal and informal Education (Adult Literacy), Facilitating school based career guidance and life skills training for the AGYW, Support to referral pathway for GBV survivors and organizing youth camps.

#### Facilitating school based career guidance and life skills training for the AGYW

Out of school AGYW are trained in life skills like; self awareness, empathy, creative thinking, problem solving, effective communication, decision making and interpersonal relationship in order to cope with daily challenges. These girls are also equipped with parenting skills in order for them to take care of their babies. Inthis year under review, 24 groups (378 AGYW) were trained in parenting skills.

#### **Key Challenges**

	te earlier mentioned successes, the program is still hampered with some challenges some of are highlighted below;
	Limited funding AGYW dislike theory exams especially tailoring
	The Fire distinct the expectanty tamering
Gene	ral recommendations
	Lobbying for more training materials to ensure that more girls learn vocational skills.
	Forging for a possible strategy to increase intake/enrollment on Prep, this can be done through extending the Prep service to AGYW.
	Resource mobilization
	Introduction of sports Gala with the different safe space.
	Improve on documentation and information sharing.
Gene	ral lessons learnt:
	Educational tours tend to help girls get exposed to other skills related to their course.

#### Sustainability plan

of should spend less than what you earn.

The project has been built on community existing structures like, health facilities, and community leadership; this has been built through strengthening their capacities in managing and handling various project activities. For sustainability of the project, AGYW peer mentors trained shall stay passing on various behavioral change massage to their peers with minimal supervision from CCAYEF, these will in line be supported by the established community volunteers, and local leaders.

AGYW are now aware of the importance of saving, making personal budget and the aspect

Through continuous referrals CCAYEF has been in position to popularize the youth corner at the Mukono health center IV and community project beneficiaries can now voluntary at own will move in and seek health attention.

# Program Area 4: Organizational Strengthening And Capacity Building

Strategic Objective 1: Strengthening Organizational capacity and competences in governance, programming and execution of its mandate.

1.1. To strengthen local, National and International partnerships and networks.

#### **ACHIEVEMENTS**

**Partnerships And Networking** 

- CCAYEF secured a working partnership with Uganda Sanitation for Health Activity (USHA) and MUWRP in implementation of USHA and HIV prevention projects respectively.
- CCAYEF renewed its registration with the National NGO bureau and is now confirmed as a countrywide NGO.
- CCAYEF attended the 6th East Africa Philanthropy Conference that was held in Arusha Tanzania.
- CCAYEF is a member of UWASNET, MUDINFO and NNGOF.
- CCAYEF staff attended the 2nd National Girls Summit organized by Girls Not Brides
  Uganda, the Ugandan Partnership to End Child Marriage from 26th 27th 2019 at Hotel
  Africana with the theme, securing Uganda's future: Support the Girl child to live her full
  potential. From the Summit, CCAYEF learnt to design practical and workable solutions to
  end child marriages and teenage pregnancies in addition to becoming a session convener
  in the 3rd National Girls Summit in order to gain visibility.



A CCAYEF staff in the 2nd National Girls' Summit at Hotel

Africana

CCAYEF attended a World Toilet Day organized by USHA working together with Kaliro Local Government in Kasokwe Sub-county with the theme; "Toilets for All: leaving no one behind". CCAYEF was given a platform to explain the baseline survey findings in Kangulumira Sub County by displaying the pictures showing how the toilets/latrine used to look like. She also informed members that some households did not have latrines but encouraged members construct and also improve their toilets for those who had outdated toilets.



CCAYEF staff explaining the survey findings done on toilet by USHA and what a good toilet/latrine should like

#### 1.2. Tooling and re-tooling CCAYEF.

#### In the year under review, the following assets were purchased;

A data tablet, 2 cameras, 3 office cabins, a plastic water tank, a printer, two office chairs, two laptops, two helmets and two office tables. One camera and one office cabin and one data tablet are at Kasangalabi offices and the rest are in Kangulumira offices. Three data tablets to help in data collection, two motorcycles were delivered to help in transport during implementation of USHA project activities in Kayunga.

**Installing security Cameras and communication Systems:** We kept on loading data on the modem and tablet, in addition to loading monthly airtime bundles on the office phone, all to ease communication within and outside the organization.

#### 1.3. To operationalize all the organizational structures.

#### Staff recruitment:

Nine staffs were recruited to give a hand in the HIV Prevention project, USHA project and Administration. These included one internee and two volunteers to help out in the Finance and Administration department, one ICT officer, one security guard, a volunteer in Child Protection Department, two DREAMS officers and one HIV Prevention Project and USHA project manager.

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#### TRAINING AND CAPACITY BUILDING

- CCAYEF OVC program officer and the data person attended training for 3 days on OVC MIS system and OVC data tools at Mukono MUWRP offices.
- CCAYEF attended women's day celebrations that was organized and held at Mukono District
  Headquarter grounds. It was based on the theme" Empowering Women through Innovative
  Approaches to Social Protection, a pre-requisite for inclusive and Sustainable Development.
  CCAYEF was represented by two people who gave out brochures to some invited guests in
  addition to displaying craft items that were made by Adolescent Girls and Young Women in
  the vocational program for sale as shown in the pictures below:



## AGYW together with CCAYEF staff displaying their craft items

Six staffs attended an USHA orientation workshop at Esella Country Hotel that aimed at
introducing the project and defining roles of the project staffs involved in addition to other
trainings including TOT for sanitation promoters training, Masons training, MEL system
training and others.

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#### Improve staff welfare:

A better kitchen was provided. More plates and cups were bought to cater for all staff, self-service was introduced, which enabled staff satisfaction and saved the cook the burden of carrying plates of food to and from the kitchen. Staff transport was catered for by allowing staff to use a school van to and from home. Additional staff leave was introduced every Friday afternoon.

#### 1.4. Carrying out resource mobilization

**Project proposal developments:** CCAYEF, In the year under review, developed and submitted seven funding proposals to individual donors, and two of them; one from USAID and Blood Water went through and were accepted for funding, which boosted the resource envelop of the organization.

#### 1.5. Formulation and review policy documents and guiding Manuals.

The 2019 work plan was developed and disseminated to several stakeholder. The CCAYEF constitution is also under review, reports have also been shared with all stakeholders. All this was done by the Board and staff representatives. CCAYEF renewed her registration with the NGO Bureau and can now operate countrywide.

#### 1.6. Annual audits

#### **FINANCE AND ADMINISTRATION**

Name of program head: Judith Katongole

Reporting period: From 1ST January to 31st December 2019

Number of working days: 264

Number of days spent at work: 256

#### Comments

As per CCAYEF HR Policy, staff leave is taken once in a year during December. It was the same for 2019. Staffs also work up to 3:30pm every Friday, to leave them with one and a half hours of rest. The public holidays included Women's day, Labor Day, Independence Day, IDD day, Easter break and Martyrs Day.

#### **Report Overview and Discussion:**

- We ran short of funds in the process of implementing the HIV PREVENTION PROJECT due to delayed release of funds yet we had timelines for activity implementation.
- This time round, we had run two projects concurrently and opened up a second office in Kangulumira Sub County, Kayunga District.

#### **CCAYEF AUDITED ACCOUNTS SUMMARY**

#### Schedule 1: Report Summary

Total Projection	Total Revenue	Total Expenditure
459,500,000	447,178,128	447,359,147

#### Schedule 2: Revenue Summary

Source	AMOUNT (shs)
Vocational income	8,632,000
HIV prevention Project	332,572,238
Donations and fundraising	13,293,200
Self-generated income and other incomes	150,000
USHA Project	92,530,690
TOTAL	447,178,128

#### Schedule 3: Expenditure Summary

Department	Budget	Actual Expenditure
Finance and Administration	274,571,041	190,424,074
Organizational Strengthening and Capacity Building	9,680,000	8,850,930
Economic Strengthening	16,260,000	17,350,300
Child Protection	115,084,000	228,261,143
Health	7,500,000	2,472,700

#### **Pending activities**

- Construction at CCAYEF land at the district was not fulfilled because land wrangles were sorted late in the year and even funds for that could not be secured.
- Streamlining of the private vocational section. We lacked focus on it to push it forward.

#### **Challenges**

- Fire gutted our newly constructed offices pushing us miles backward.
- Staff welfare has been poor especially the meals section.
- Streamlining and developing the private vocational section has not been a success.
- Funds are still lacking for organizational development.

#### **Recommendations**

- Resource mobilization should be given priority as it's the blood of the organization.
- Installation of centralized printing system to avoid use of flashes.

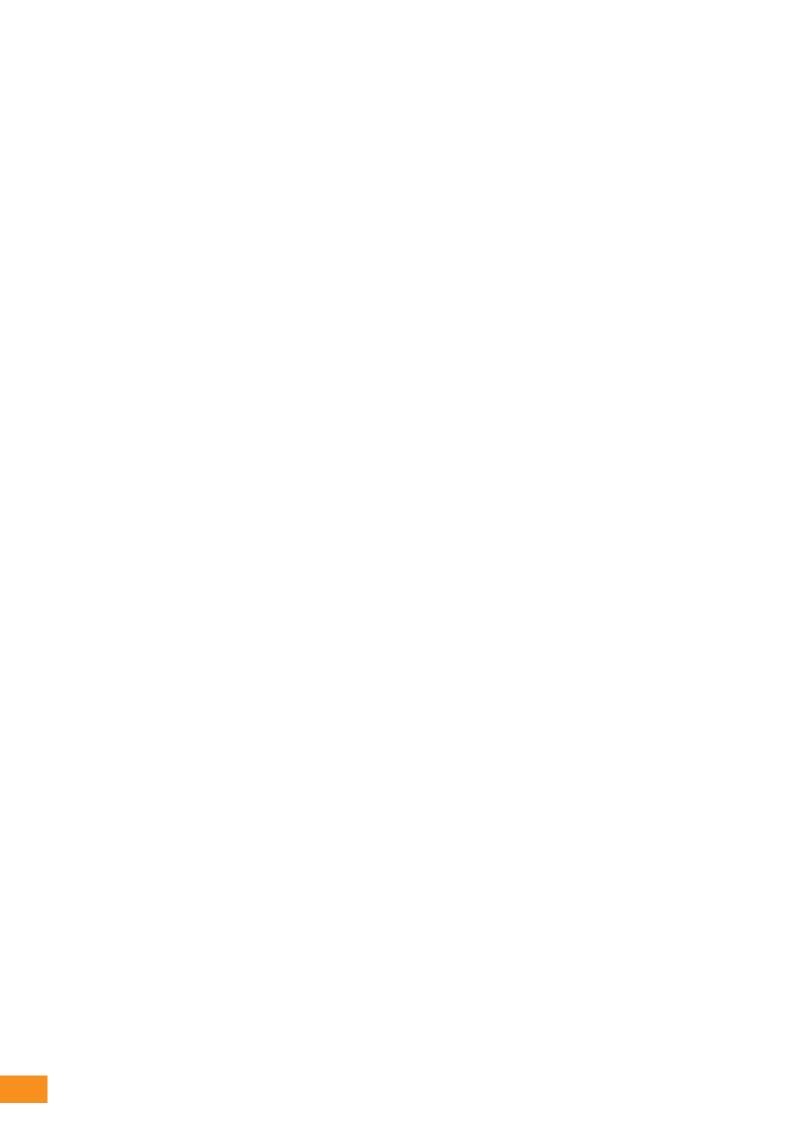
#### **Milestones/success stories**

- CCAYEF pushed its way through being one of the winners of USHA grant.
- CCAYEF managed to enter and start operating from our new premises at Kasangalabi.
- CCAYEF can now operate countrywide.

#### Plans for next year

- Construction on CCAYEF land at the district.
- Continue to solicit for more funds.
- Streamlining the private vocational section.

NOTES



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## CCAYEF





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