



**act:onaid**

# Walk a Mile in Her Shoes! Women and Girls Struggle for Justice in Uganda



January 2012 - December 2015



**act:ionaid**



**MIFUMI**



**TERREWODE**  
*"Empowering Women and Girls"*



One of the many women in Uganda who have been helped by Amuru Women Protection Centre (WPC). After her husband violently attacked her, she now lives alone with her son and attends counselling at Amuru WPC.



Ariga Loy GBV Survivor, Katakwi

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## List of abbreviations

AAU	ActionAid Uganda
CSO	Civil Society Organization
CSP	Country Strategy Paper
DFID	Department for International Development of United Kingdom
GBV	Gender Based Violence
SGBV	Sexual Gender based violence
NGO	Non-Governmental Organization
SIDA	Swedish International Development Cooperation Agency
UN	United Nations
UNFPA	United Nations Population Fund
UWONET	Uganda Women's network
MIFUMI	Mifumi is a women's rights organisation based in Uganda
Acfode	Action for Development
TERREWODE	The Association for Rehabilitation and Re-orientation of Women for Development
WPC	Women Protection Centre

## Key Concepts

**Gender** refers to socially constructed identities of women and girls, men and boys in a cultural and social setting, as opposed to biologically determined identities. Gender is a dynamic concept and it is different in every society, culture and ethnic group.

**Violence** is intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results, in or has a high likelihood of resulting in injury, death, physical harm, mal-development or deprivation. The use of force-physical, sexual or psychological-against another person or group of persons, which can result in serious injury, death and emotional harm [World Health organization].

**Domestic Violence** is any act committed in the domestic sphere, which harms, injures, or endangers the health, safety, life, limb or well-being, whether mental or physical, of the victim. It includes sexual, emotional, verbal, psychological and economic abuse: harassment, harming, injury or endangering the victim with a view to coercing him or her [The Domestic Violence Act 2010]

**Gender Based Violence** refers to all forms of violence that happen to women, girls, men and boys because of the unequal power relations between them and the perpetrator of such violence.

**Violence Against Women** is an act that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of, coercion or arbitrary deprivation of liberty, whether occurring in public or in private. Such acts are supported by gender norms, values and beliefs in the superiority of males and subordination of women. Children learn that males are dominant and that violence is an acceptable means of asserting power and resolving conflicts [The UN declaration on Elimination of Violence Against Women [1993] and Beijing Platform for Action]

**Sexual Violence** refers to all forms of forced sexual acts including rape [systemic, date, gang and marital rape], defilement of girls and boys, incest, abduction, forced prostitution, forced dry sex, sodomy and bestiality. Such violence humiliates, degrades or otherwise violates the dignity of another person and may take place in private or public spaces.

**Defilement** means an unlawful sexual act with a person below the age of 18 years, and includes sexual intercourse and use of objects to perform a sexual act.

**Rape** is unlawful carnal knowledge of women or girls without consent, or if the consent is obtained by force.

**Economic violence** is deprivation of all or any economic or financial resources to which the victim is entitled under the laws or custom.

**Emotional/psychological violence** is anything that is said or done to the survivor that causes them to be afraid, lowers their self-esteem, or manipulates or controls the survivor's feelings or behavior.

**Physical violence** is any act or conduct which is of such a nature as to cause bodily pain, harm or danger to life, limb or health, or which impairs the health or development of the survivor, and includes assault, criminal intimidation and criminal offence.

**Survivor/Victim:** A person who has directly or indirectly suffered from gender based violence. Victim is used in the medical and legal sector, while survivor is generally preferred in the psychosocial support sector because it implies resilience.

**Perpetrator:** A person who commits an act of gender based violence.

**Referral:** Recommendation given to a survivor for further care to other service providers.

**Referral pathway:** The system by which transfer of care is done from one service provider to another on a timely basis.

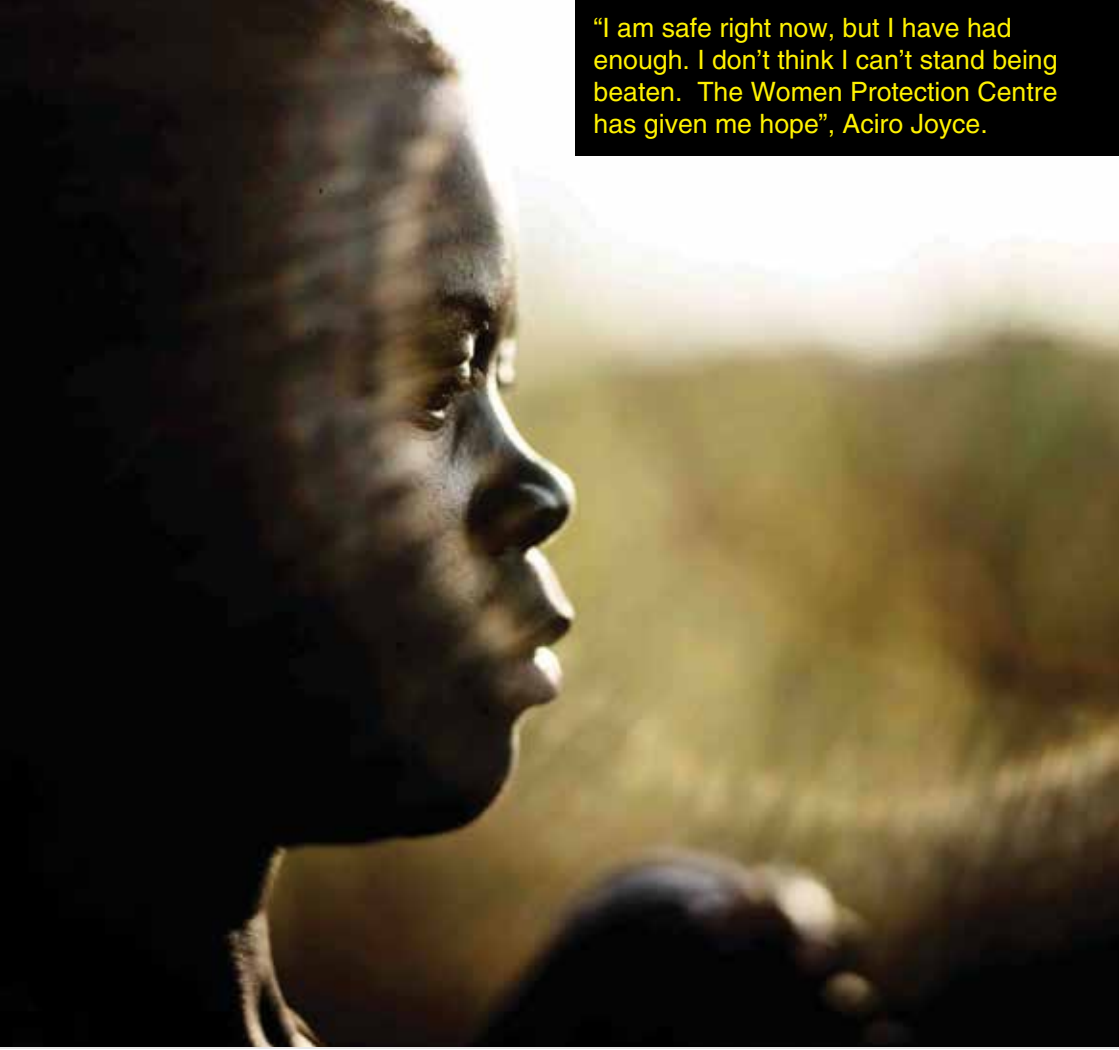
**Service Provider:** Refers to a public or private institution or company that provides essential services to the survivor of gender based violence, with the objective of protecting the rights of the survivor.

**Actor:** A person, organization or institution providing GBV prevention and response services.



**Duty bearer:** A person or institution that has a duty to respect, protect and fulfill the rights of survivors of gender based violence.

**Women Protection Centre/GBV Shelter:** A privately or publicly operated residential facility providing survivors of gender based violence with temporary refuge, lodging, food, and other services including referral to legal, psychological and medical assistance, in line with national guidelines.



“I am safe right now, but I have had enough. I don’t think I can’t stand being beaten. The Women Protection Centre has given me hope”, Aciro Joyce.

## 1.0. Introduction

This book documents experiences of ActionAid Uganda and its development partners' interventions in combating Sexual Gender based Violence in Uganda. It focuses on the lessons learnt from establishment and implementation of the Women protection centers and GBV shelters.

These facilities were set up as “**one stop centres**” to serve as crisis management centres for abused women and their children in danger of further risk to take refuge. It provides information on existing integrated GBV services including: prevention, response and care, access to justice and improvement of legal and policy environment. This will facilitate the primary duty bearers, service providers and actors with lessons on how to respond to GBV cases and to guide the survivors of GBV where to seek assistance and what services are available in this country. It also gives recommendations for future GBV interventions.

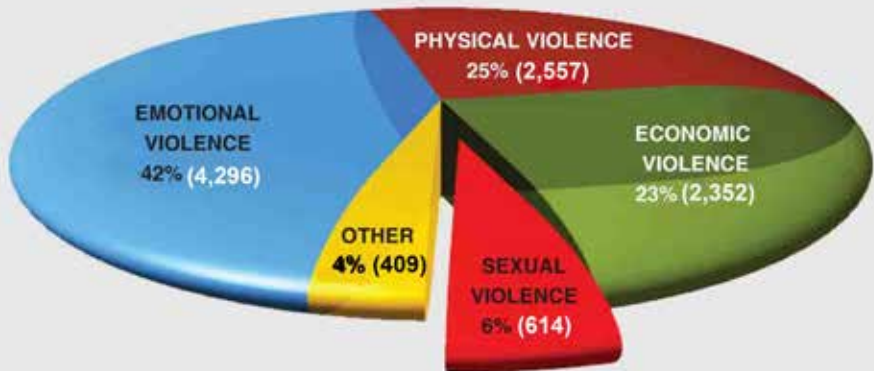


## 2.0. GBV Context in Uganda and Evolution of AAU GBV Programming

### 2.1 Magnitude of Gender Based Violence

Worldwide, Sexual Gender Based Violence (SGBV) is a serious human rights, health and social economic concern. In Uganda, various reports reveal that Gender based violence remains unacceptably high with Sexual violence, rape and defilement and frequent domestic conflict scoring highest (on average 70%). Evidence has shown that at least 60% of women aged 15-49 years who have experienced some form of violence are four times more likely to suffer its devastating effects than men. The impact ranges from physical harm and emotional stress to psychological dysfunction.

Statistics from a baseline survey conducted by ActionAid Uganda 2012 in indicate that up to 70% of the crimes against women surveyed were perpetrated by their partner. Furthermore, 60% of married women report having experienced some form of domestic violence during their marital life [Action- Aid Uganda data base]. This is further exemplified by the summary of cases reported to the Women Protection Centres/GBV shelters in the period 2012- 2015 in the figure below.



### Distribution of 6,262 GBV Cases by Category

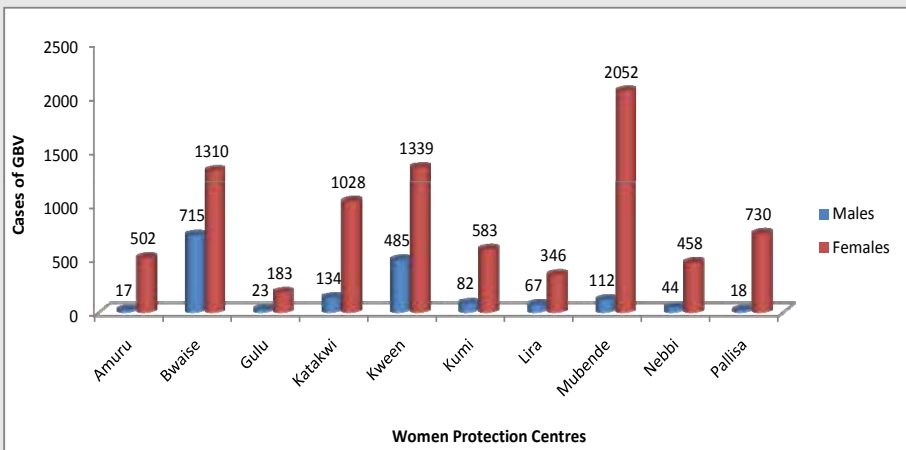
There is substantial evidence that GBV affects thousands more women and girls each day compared to men and boys because of strong social-cultural attitudes and practices. These abuses render women more vulnerable and marginalized and prevent them from claiming their rights and playing their part in socioeconomic development.

Women and girls are more disproportionately affected (89%) than men and boys, largely because they have less access to resources, opportunities and decision making power. The figure below shows the number of cases reported by women and men per location in the period 2012-2015.

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### Women Protection Center Received Cases: 2012 - 2015



Despite government efforts to address GBV in Uganda, systemic and structural challenges still contribute to low access to justice for women and girls. According to a police report from 2013, up to 360 deaths were due to domestic violence, with 9,598 defilement cases reported and only 4,931 defilement suspects arrested. Out of the 1,042 rape cases reported, only 365 rape suspects were arrested.

Although conviction rates have improved from average conviction rate of 30% in the early nineties to the current 55%; Attrition rate of cases reported to court is absurdly slow, as illustrated in the table below.

	2008	2009	2010	2011	2012	2013
DV death cases reported	137	165	159	181	154	315
Victims of DV deaths	156	-	276	251	277	360
Defilement cases registered	8,635	7,360	7,564	7,690	8,076	9,598
Defilement suspects arrested	4,124	4,423	3,401	3,836	4,357	4,931
Rape cases reported	1,536	619	709	520	530	1,042
Rape suspects arrested	239	240	252	269	301	365

## 2.2 The journey of AAU's GBV programming

In 2007, the campaign Women Won't Wait (WWW) was launched on the intersection of HIV and violence against women and girls. An overwhelming response to the WWW campaign was an influx of girls and women affected by different form of violence and HIV/AIDS across Uganda. We received cases of girls and women who were afraid to go home at night, for fear of further abuse. There was inadequate capacity within the police to respond to this need, with Child and Family Protection Unit Officers lacking safe accommodation for such clients beyond corridors and prison cells in the police stations.

An exposure visit to South Africa in 2008 inspired us to open the first 3 pilot Women Protection Centres, in Nebbi, Pallisa and Mubende districts. We documented lessons, tracked and demanded policy reforms in programming and funding streams of national governments and international agencies against HIV and AIDS, as well as Violence Against Women and Girls.

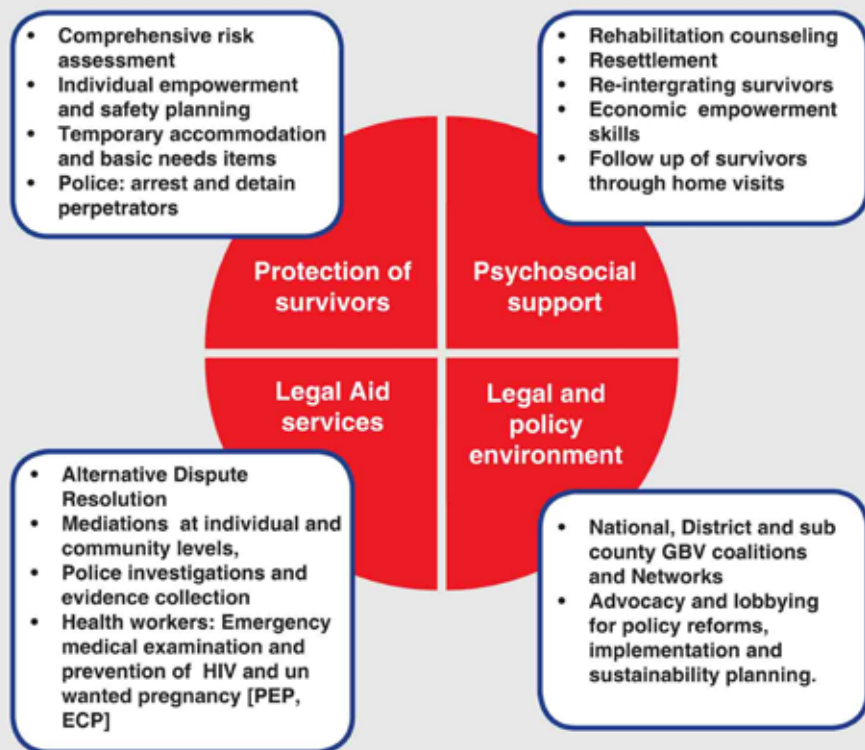
In 2012, with support from UKAid, these milestones provided key lessons which informed the roll out to 5 districts: Kween, Kumi, Katakwi, Amuru and Kampala. The experiences from these centres have also contributed to the design and establishment of the 5 government led GBV shelters in Moroto, Mbarara, Masaka, Gulu and Lira in partnership with UNFPA, MIFUMI and the respective local governments, and Irish Aid funded 2 shelters run by UWONET in Namutumba and Kamuli district.

Information from these centres has also informed government policy, planning, and programming, particularly the development of the national guidelines for establishment of GBV shelters, GBV psychosocial counselling protocols and the referral pathway. With a total of 16 such reception centers in Uganda, they are still very few to serve all the survivors of violence. There is high demand for expansion, replication and adoption by the government. If adopted and well resourced, these “one stop centres” will contribute to the provision of quality, state funded, nationwide GBV prevention, response, care and support services.

## 2.3 Major Achievements

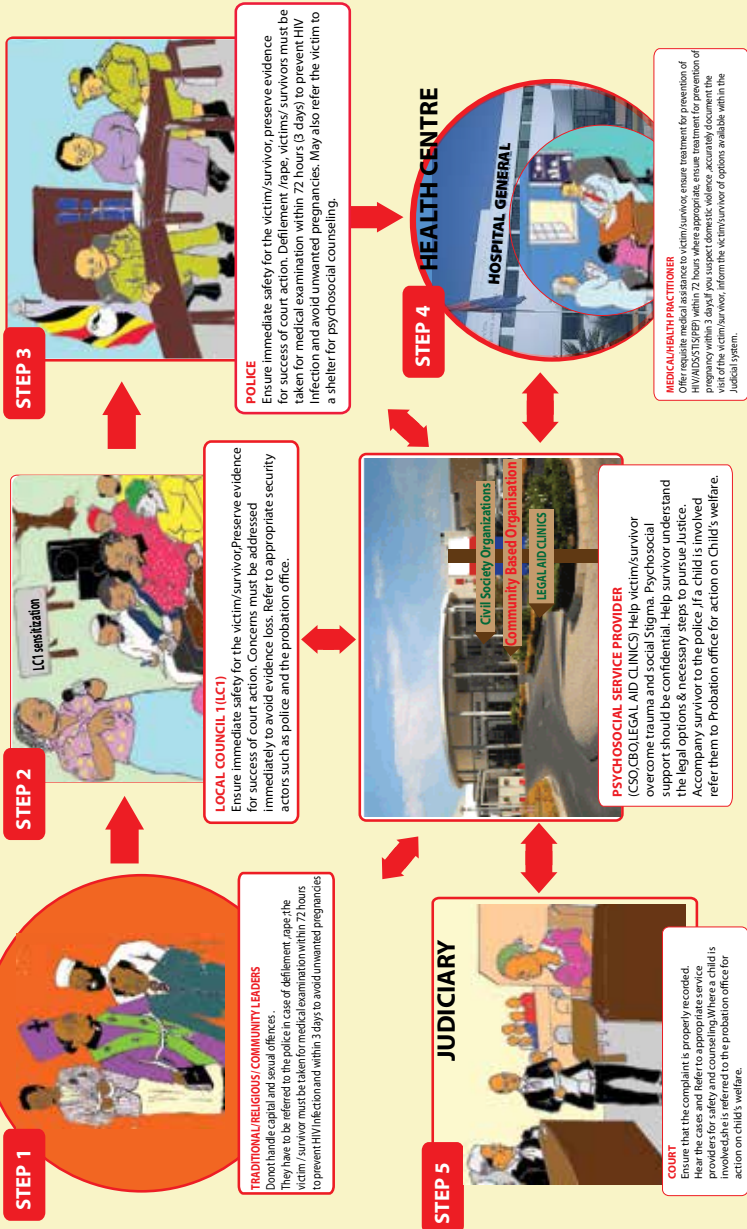
- Established and managed 10 Women Protection Centres/GBV shelters in Kumu, Katakwi, Kween, Pallisa, Bwaise, Mubende, Nebbi, Amuru, Gulu and Lira.
- Provision of: free legal aid, psychosocial, medical, referral, temporary accommodation, safety planning and alternative dispute mediations for peaceful families, rehabilitation and resettlement services to over 5913 survivors of violence.
- Facilitated police, medical and legal officer in evidence collection, follow up and case management in a bid to strengthen the referral pathway in provision of integrated services.
- Community mobilization and education in order to change attitudes, with a special focus on male engagement and empowering communities to prevent violence.
- Trainings and regular coordination meetings of national, district and sub county GBV coalitions of key actors and survivors; and forums for strengthening of existing community structures.
- Engagement meetings with policy makers for policy reforms and effective implementation of existing laws in order to bridge the gap between the supply and the demand sides of justice.

## 2.4 Illustration of the One Stop Centre model.



## 2.5 The Referral Pathway

# REFERRAL PATHWAY FOR GBV CASES



**actionaid**







## 3.0. Brave Women Seeking Justice

### 3.1 Child welfare

#### Husband supports wife after our intervention



After counselling at Pallisa WPC. Nambafu Besi is now able to earn money by selling vegetables in the market

Nambafu Besi (30 years) a mother of two children, works in Pallisa market as a food vendor. Nambafu was abandoned by her husband when she was three months pregnant with her second child leaving her with no support at all. Despite all that, she delivered by caesarian section but life becomes very difficult that, she decided to seek for help from Action Aid Uganda Pallisa WPC. She had heard about AAU services from the radio, during one of the radio programs.

*“At first my husband Kenneth claimed that the second child was not his and he stopped giving us support. He abandoned me for another woman and I had to give birth by caesarean”. However, after giving birth, I was helpless and unable to provide for my family before full recovery”, explains Nambafu.*

At the center Nambafu went through several psycho-social and counselling support sessions which enabled her open up and found solutions to her challenges. As a result of the mediation sessions facilitated by AAU counsellor, Nambafu and her husband were able to reconcile and her husband is supportive to his family.

*“The culture and perception of men in Pallisa district is still backwards. They consider themselves dominant over the women. Most of the time, men are not supporting their women. They claim that marriage means that women have the responsibility of taking care of the children and their husbands too,”says Loyce Kisakye, the Project Officer Pallisa WPC.*

Women like Nambafu continue to face challenges as a result of patriarchy which often leads to women being abused, undermined and oppressed. It is a long battle to change the attitude of men towards women issues in Pallisa. Joyce together with her colleagues are trying to change this attitude not only through counselling but also by creating awareness about the obligations and responsibilities of two parents of taking care of their children in accordance with the Constitution of the Republic of Uganda.

### **3.2 Promises’ welfare prioritized**

Promise’s father abandoned her mother with no source of livelihood or income. The desperate mum went and dropped Promise at her sister-in laws’ home (Promises’ auntie) and never returned. Left sick and malnourished at her aunt’s house, eight month old Promise Katusiime needed immediate medical attention. The aunt went to the police station that referred her to ActionAid Uganda.

*“We took her to the hospital, where they assessed the child and recommended immediate blood transfusion,” says Irene Ahimbisibwe, AAU Counsellor.*

After 3 days, Promise’s father appeared but upon realizing that the hospital bill was high, he thanked AAU for the support and pledged to AAU counsel or that he was going to his homestead to sell some of his assets to clear the bills. He never came back to hospital and Promise was abandoned again.



**Promise was malnourished when first admitted to the hospital**

While she was recovering, the WPC team secured a special diet while closely monitoring her. They visited Promise twice a day, while providing meals for her aunt and her family. ActionAid Uganda working closely with the Uganda Police had to find Promise a home to stay. Someone known to her relatives directed the team to her grand parents' home in Kibaale and she was taken there. She was entrusted in the care of her grand parents and follow up visits revealed that she was greatly improving.

During this period Mubende WPC received and acted on over sixty nine (69) cases involving child rights abuses since its inception. These cases range from failure to provide maintenance, child neglect, child custody, and defilement. The cases have been handled jointly with other stake holder for example the Uganda Police, through the Family Protection Unit, Probation Office and the Magistrate's.



With support from Mubende WPC, promise got the necessary hospital treatment. Today she is healthy.

### 3.3 Aleyo returned to her mother

Christine Asekeye (aged 32) lived with Oumo William for one year in Omerei village, Mukongoro sub-county Kumi District and she got pregnant. Instead of supporting her, Ouma abandoned them but eventually Asekenye gave birth to Alenyo Racheal. The father refused to support his child. She later remarried and moved to Mukongoro. Racheal made 12 years and her father kidnapped her and denied Christine access rights to her.

When asked how she felt, Racheal revealed that *“She was too emotional, tears dropping and speechless, but said that she did not want to stay with her father because she does a lot of house work. She also said that her father*

doesn't buy her clothes," Jane Apolot continued.

Racheal further explained that *"I love my father, but that he drinks too much alcohol and never takes care of me. He left me with his relatives who made me stop going to school, I work hard, long hours often cooking for the whole homestead, comprised of the grandfathers, uncles, aunts, and their families"*.

Having been frustrated, Christine worked with the Kumi WPC centre and Uganda Police to ensure

mediation with Racheal's father to have her back. Unfortunately most times Ouma was adamant and never responded to the issued summons. In 2014 ActionAid Uganda provided counselling services and supported Asekeye a single mother and she regained her parental rights. Through mediation, the team raised his awareness on the existing laws on the welfare and rights of the child Racheal was handed over to Christine.

When you ask Asekenye Christine about her daughter, she beams with a lovely smile saying: *"Thank you ActionAid Uganda for giving Racheal back to me, I could not live without her"* says Jane Apolot the Legal Officer Kumi WPC.

Racheal continued with her education at Omere primary school in primary six. The last follow up action by AAU team at her school, with her teacher informed them that she was progressing well and interested in her studies. Further, Racheal revealed that *"I now have time to read my books, and my mother bought me some clothes, which I didn't have."*

### **Apoko stands on her feet to end poverty**

Apoko Nightya resident in Amuru district attests to beating all odds from violent men who didn't take care of her but instead took her hard earned money and spent it on other things. She narrated her experience *"I lost my husband and decided to remarry. Shortly after I had remarried, my husband married a second wife and he became violent, but I silently accepted the beatings because the family was doing well. He later neglected the children for his second wife and became a burden"*.



Asekenye had to seek legal action to get her daughter back.

*“I did the sowing, planting, and ploughing my garden and when it was time to harvest, he was suddenly there to collect the fruits of my work. He took the harvests to the market, sold everything and disappeared, leaving his family with absolutely nothing. It was tough to deal with the emotional breakup and struggling to provide for my family” narrates Apoko.*

Apoko finally went to AAU WPC in Amuru. She presents that counselling and support from the WPC centre is what saved her to realize herself.

*“Counselling from the Women Protection Centre (WPC) and training in new farming techniques are two things that I will always be grateful for from ActionAid. What they gave me was exactly what I needed to stand on my own two legs,” Apoko said.*

Action Aid supported Apoko with training skill in sustainable agriculture and provided her with seeds. She stated that her yields are high that she can use half of it to feed her family while she sells the rest to pay

for school fees, medical bills, clothes and other necessities for her family. ActionAid also helped her start up a small business selling fish. “I am not depending on one business only. This means we now have food security in the family,” Apoko concluded.

AAU receives many cases like Apoko’s and the team always undertakes an individual assessment to provide lasting solutions. In Apokos’ case her husband showed absolutely no desire or willingness to take responsibility, so separation of both parties was recommended and she was supported with psychosocial support.

### **3.2. Woman granted custody to her children**

Kikongo Asiah (32-years) married for fifteen(15 years) with four children. Her marriage was antagonized in 2004, and opted for a separation.

Having separated for four years, her husband returned abused and sexually assaulted her. She underwent through marital rape and gave birth to a child. To make matters worse her husband stole her money and was left stranded.



**Asekenye had to seek legal action to get her daughter back.**

“He called me a cheap prostitute, denied paternity of my child, and never contributed anything to the family. She sought help from religious leaders, local councillors (LC1s), police and friends, but this didn’t help her until she went to Bwaise WPC. To make matters worse, her husband kidnapped two of their children before Asia sought support from Bwaise WPC, to obtain custody of her children.



Aisha Kigongo during counselling session at ActionAid offices in Bwaise.

Kigongo narrating her ordeal “I discovered that my husband had multiple sexual partners. I tried to express my fear and worries of HIV/AIDS by calmly talking

to him. He replied by battering me, and locked me out of my bedroom for several nights. The last blow to my silence was when he defiled my maid. The whole village got to know. He, however, managed to escape,” provided counselling to help her become self-reliant.

On several occasions WPC staff summoned her husband for mediation but he never showed up. He was arrested and detained by police five times, but refused to cooperate. But working with the legal office a court order was successfully obtained for the children to be given to their mother since one was still breast feeding,” said Ambrose Atusasire Adison, Project Officer at Bwaise WPC.

Kigongo Asia is one of them any women in Kawempe Division, who have been exposed to gender based violence. Although she went through an abusive marriage, accompanied by verbal threats from her husband she was not willing to return to her matrimonial home. “AAU has since supported Kigongo with economic empowerment skills. She obtained entrepreneurship skills and a startup capital of one million shillings (1,000,000/), so that she could start up a small business to provide for her children. Kigongo has since started a new life with a business (beauty salon)”

### **Justice should never be denied to GBV survivor**

In October 2014, Apio Mercy (4 years) was defiled by a 20 year old man named Kenneth in Gulu district. Mercy screaming’s from a hut behind the hotel which was Kenneth’s hut, for rescue. Without thinking twice, her guardian went to the hut and pushed the door open and found Kenneth naked, and sexually abusing the young girl. Blood was coming out of Mercy’s private parts and

she was screaming in pain for help. Her father, Ojok Christopher who is a motor cycle (boda boda) driver wanted to kill the rapist on the fatal day, but neighbours managed to calm him down.

*"I rushed to ActionAid, and we alerted the Police and Gulu referral hospital for support," said Ojok Christopher, who lives as a single father to Apio Mercy.*

*"I wanted to get an axe and hack this man. Watching my daughter bleed and cry with pain made my blood boil. The crowd contained my anger"* said Ojok Christopher. He had heard about ActionAid on the radio and therefore contacted the WPC, where a counsellor established that Mercy needed immediate medical attention. Mercy was rushed to Gulu referral hospital and diagnosed with a ruptured uterus. She was treated and initiated on PEP (HIV Post-exposure Prophylaxis), as the HIV status of the perpetrator was still in question. However, an HIV test was performed on Kenneth and he was found to be negative. ActionAid continued to provide legal support to the family and eventually, court found Kenneth guilty of aggravated defilement and sentenced him to Gulu prison. Mercy has now started primary one.

### **Mediation supports a family end GBV**

Kween AAU WPC registered nine hundred and sixty two GBV (962). In most cases, it was meted by their husbands. Eunice Chemoges (29 year old) underwent an abusive marriage with a drunken husband who was unable to provide for his family or pay school fees for the children. In April 2014 Eunice walked into the WPC too heart broken.



**Eunice Chemoges and her son lives a happy life after her husband took responsibility and stopped beating her**

*"My husband beats me up as if I am a drum. To make matters worse, he does not even pay school fees for the children. I am tired of all this," Sharing with the counsellor.*

Efforts were made to ensure mediation between both parties by the Kween WPC team. During the mediation, awareness on women's and children's rights together existing laws were shared to both parties.



Mr. Chemonges, was remorseful and apologies to his wife and sought for forgiveness with an excuse of being intoxicated with alcohol (“komeck” a local brew). To ensure commitment Mr. Chemonges signed a Memorandum of Understanding with his wife where he committed himself to stop drinking, end wife battery, and to ensure payment of their children’s school fees. A follow up visit to the family by Ndege William a male champion was made which revealed that Chemonges reformed and they are living a happy life. Sisco Cherut narrated

### Supporting the healing process to GBV survivors

In April 2014 Rebecca Akullo and her two children were attacked and burnt with boiling cooking oil, by her co-wife. Since she knew about our shelter she contacted Lira WPC staff who supported her by taking her to Ogur Health Centre for first aid and after 3 days was taken to Lira Medical Centre and later provided her with counselling and legal services.

Rebecca and her son sustained third degree burns that saw most of the skin on their upper bodies damaged. The neighbours apprehended Rebecca’s co-wife and the police arrested her.

“I’m grateful for all the support ActionAid rendered to me and my children when we got burnt. They took us to hospital and continued to visit and support us in different ways. (They provided us with meals, paid our medical bills and even after we were discharged they have not stopped following up our case at police,” Rebecca narrates.

AAU staffs have provided psycho-social support, counselling and legal services for the ongoing court case to ensure that justice prevails to end impunity.



Rebecca Akullo’s son was severely burned by cooking oil.



Rebecca and her son who is recovering well after the burns.

## Woman defies all odds to be a leader

After twenty years in marriage for Beatrice Ringe her husband threw her out of her matrimonial home for her husband to bring in a younger wife. She didn't know what to do but sought shelter at WPC office in Nebbi.



*“A church member had told me about ActionAid, I thought all the property in a home belonged to the man, but I'm grateful that I took her advice and went to the WPC for help,” she said.*

**Beatrice Ringe went through a lot of hardship, but came out stronger.**

Beatrice is one of the four hundred and seventy (470) women that, Nebbi WPC has supported since 2012. ActionAid in Nebbi has helped Beatrice Ringe with mediation, legal counselling, and entrepreneurship skills. The counsellor built her trust and confidence in herself to remain focused and supportive to her children. Her husband had begun selling off some of the properties and wanted to divorce her but also didn't want her to have a share in family properties.

Having won custody over the children, Beatrice was still struggling to make ends meet, but that changed when she joined ActionAid entrepreneurship training. However through mediation by the WPC counsellor they reached a consensus and shared in the best interest of the children. Beatrice beat all odds and was appointed a chairperson of Munguriek Women's group which was supported by ActionAid through a financial boost of four million shillings (4,000,000/=)

*She attests that; “I am committed to this group and I can not let it collapse, because it brought an array of hope in my life; my business has grown tremendously. I have a reason to smile, because my children are now in good schools and I can afford their fees”.*

### 3.3 Land and property rights of women

Widow claims her right to late husband's land

Ariga Loy lived as a happily married woman until her husband died in 1999. Due to the Karamojong cattle rustling at the time she spent many years in the IDP until 2010 when relative peace returned that she went back to her marital home.



Ariga Loy was able to return to her house after interventions from Katakwi WPC.

The neighbours trespassed on her land destroyed her crops and later accused her of trespassing on his land to the Local Council Court, but a judgment was passed in her favour and the land boundaries were demarcated.

In revenge Opuwa then demolished her hut and chased her away from her own land with numerous threats. She therefore moved to a rented house for personal safety.

*“The Women’s Protection Centre came to my rescue, visiting and demarcating the land. The entire village including his own wife stood by my side, and he agreed to give me back my land, with an agreement signed between us in the presence of Local Councils, clan leaders, the community and the staff of AA Katakwi.”*

*“She sought help from the Assistant Community Development Officer (ACDO) and the Sub-County Chief and they both recognized that the land belongs to her. However, they could not enforce the verdict, because the trespasser was adamant. Katakwi Women’s Protection Centre counsellor,” narrates Akello Angela Teddy.*

AAU organized village meeting with over 50 people which confirmed that the land belongs to her. Eventually signing a Memorandum of Understanding stopping the trespassers on her land. Three follow up visits have been organized by WPC which revealed that had been settled on her land and she is growing cassava and simsim and can take good care of herself and her six children.

## **4.0. Gains, Lessons and Recommendations**

### **4.1 Major achievements for ActionAid Uganda and FIDA Uganda**

- The Women Protection Centres and GBV shelters have contributed to achievement of objectives of the government's Domestic Violence Act 2010 and bridged the gaps in the current institutional framework by promoting collaboration and coordination between all key factors such as the police, formal and informal courts, medical units, district probation office and the community.
- Breaking the silence about GBV being a private matter: women have realized that there are organizations and institutions that provide protection thus they don't have to suffer or die in silence. More women now walk to the protection centres and GBV shelters opening up to report cases and speak out without fearing what their community members will say.
- Taking legal aid services closer to the 5,900 rural women who have accessed justice and some regained control over their land from perpetrators who had grabbed it. Improved legal and policy environment: our interventions have succeeded in breaking cultural barriers: cultural leaders understand GBV and take preventive actions with Alur Kindom, Ker Kwaro Acholi, Iteso Cultural Union and Bugwere Cultural union making pronouncements and by-laws on harmful traditional practices.

### **4.2 Lessons from ActionAid Uganda and FIDA Uganda's interventions**

- GBV occurs in a cycle, the duration of the cycle varies from case to case thus regular follow up of survivors for further support is extremely powerful in breaking the cycle of violence.
- Psychological healing is critical to achieve complete empowerment of the GBV survivors and must be provided through key institutions in the referral pathway.
- Women need economic empowerment and extra financial support in the form of pro bono services to meet the cost of surveying the land recovered and getting either traditional certificates of ownership or registration of titles in line with the Land Act.

- Gender Based Violence should never be treated as a private matter; a moment of laxity in the referral pathway of access to services could lead to unimaginable consequences.
- In order to deliver speedy justice to GBV survivors, all institutions in the referral pathway should be well facilitated and their capacity built to prevent and respond quickly.
- Male involvement in the campaign against GBV breaks the attitudes and beliefs that men have ultimate power, thus cultural and traditional norms should never be ignored for the success of any intervention

### **4.3 Achievements, lessons from other actors and partners:**

#### **UWONET**



Established in 1993, UWONET is an advocacy and lobbying Non-Governmental Organisation currently comprised of sixteen national Women's NGOs and institutions and 10 individual members who collectively work together to amplify the women's voices and enhance women's empowerment. Its mission is to coordinate collective action among members and other stakeholders through networking, capacity building, resource mobilization, policy, research and advocacy and the attainment of gender equality in Uganda.

#### **Our Work on GBV**

#### **GoU-Irish Aid Joint Programme to address GBV in Busoga region**

#### **FY2010/11- FY 2014/15**

The GoU-Irish Aid joint programme which focuses on Busoga region was based on the UBOS, 2006 UDHS findings which registered the highest incidence of sexual violence in the country. The programme is a collaborative effort of the Government of Uganda (GoU) through the Ministry of Gender, Labour and Social Development (MoGLSD) in partnership with Uganda Women's Network (UWONET), Centre for Domestic Violence and Prevention (CEDOVIP) and 8 local governments (Bugiri, Buyende Jinja, Iganga, Kaliro, Kamuli, Mayuge, and Namutumba) each playing a unique but complimentary role. The role of UWONET is to build capacity in local governments in Busoga sub region to prevent & respond to GBV and provide a holistic approach to responding to GBV in Busoga.

## **Establishment of two GBV shelters in Busoga Region**

Cognizant of the limited access to post-trauma care which includes free medical and psychosocial support among others to survivors of GBV, UWONET with support from Irish Aid piloted two GBV shelters in the districts of Kamuli and Namutumba. GBV shelters are part of a referral system in the management and handling of Gender Based Violence, but not a one-stop centre for GBV response and management services. The shelters enable victims/survivors to cope with the after effects of violence through life skills and capacity building programmes; provide community outreach activities including case follow up, family reconciliation, security planning, resettlement, and building support networks; facilitate the reintegration in school and in safe family environment of the child victim/survivor of GBV and facilitate access to education/learning for children at the shelter.

## **Establishment of district GBV alliances**

### **UWONET coordinates 3 partners under output 5 of the 7th GoU/ UNFPA**

Country Programme, which focuses on strengthening public and civil society sectors, capacity for GBV prevention and management and advancement of rights. This is in accordance to the aligned 7th GOU/UNFPA Country Programme Action Plan (CPAP).

The overall goal of the 7th GoU/UNFPA Country Programme is delivered by addressing selected priority issues in three components, namely Reproductive Health (RH), Population and Development (PD) and Gender. The Gender component focuses on GBV and its management, and reproductive rights and women's empowerment. UWONET has advocated for the formation of GBV alliances to lead and champion advocacy on GBV prevention and response and advance reproductive rights in their districts and communities. The GBV alliances comprise of local CBOs and NGOs.

## **Major achievements**

- Increased reporting of cases of GBV by both women and men as a result of increased awareness.
- Increased knowledge levels and understanding on GBV case management by police and other duty bearers.
- Establishment of two shelters in Namutumba and Kamuli providing post-trauma care which includes free medical, psychosocial support among others to survivors of GBV.
- Strengthening of the referral pathway.

## CARE INTERNATIONAL

### Gender Based Violence interventions: A case of CARE International.



CARE International in Uganda is a non-governmental organization that has been working in Uganda since 1969. CARE has been implementing a varied portfolio of programs all over Uganda responding to emergencies, natural resource governance, effects of armed conflicts, economic and social marginalization of the vulnerable population. The impact group is vulnerable women, girls and youth. Since 2007, CARE International in Uganda has been implementing Gender Based Violence response and prevention intervention under their Northern

Uganda Women Empowerment Program with financial support from Austrian Development Agency (ADA) and Norwegian Development Agency (NORAD) through CARE Austria and CARE Norway respectively. Northern Uganda Women Empowerment Programme (NUWEP) is a multi-year post war recovery and development programme comprising a coherent set of initiatives for sustainable positive change and social justice in the lives of women and girls of reproductive age affected by armed conflict - the candidate 'impact group to save lives and remedy suffering under armed conflict.

### Major activities

- Identification and training of advocacy activists to conduct evidence based advocacy.
- Data collection and analysis on Gender Based Violence (GBV) cases for evidence-based advocacy at different levels.
- Establishment of referral pathways for GBV survivors and linking them to village saving and loans associations (VSLAs) for economic empowerment as well as social support networks for many women and girls.
- Awareness creation on existing laws, policies and GBV related services through community dialogues, print and electronic media.
- Monitoring and analysis of GBV policies and frameworks.
- Identification of coalitions, networks and strategic partners at regional levels to link grassroots' CSOs to national and regional level
- Identification and participation in national, regional and international advocacy forum events such as International Women's Day, UN CSW 57.
- Linked grassroots women to national, district CSOs and advocacy forums.

## Major achievements

1. Ability of activists and CSO staff to carry out evidence based advocacy on GBV and conflict: Through identification of more activists, training, mentoring and coaching activists on basics of advocacy and practical ways of engaging leaders and service providers. By 2013, a total of 574 activists who are members of local advocacy forums at the village level and 124 case managers had been trained. Most of the trained activists/advocacy forum members<sup>1</sup> were seen and reported to have engaged various leaders at different levels especially at community levels on zero tolerance of GBV, peace building and conflict resolution. This was attributed to increased confidence, commitment, passion to respond to GBV, practice, reflective sessions and ability to participate in public speaking, self-trust to challenge and/or successfully dialogue with community leaders. It is important to note that more women advocacy forum members were found to readily advocate and call for behavioural change in response to and prevention of GBV.
2. Improvement in knowledge of the root causes of GBV, for example, awareness of existence of laws that prohibit traditional and customary practices that are harmful to women increased from 64% to 74%. In the endline survey, 70% of activists/advocacy forum members indicated increased self-esteem, confidence and ability to speak in public, and 82% of the activists demonstrated ability to carry out GBV advocacy at community level by using collected data as evidence to lobby for improved services to GBV survivors and to engage in social change campaigns.
3. Increased awareness of the existing international and national legal frameworks and guidelines on gender and women's empowerment: CARE and partners distributed copies of the UN1325/1820, Domestic Violence Act (2010), Domestic Violence Act regulations (2011), Heads of State ICGLR Kampala declaration (2011) and the police form 3. This





was done concurrently with sensitization and creation of awareness on the use and application of these legal frameworks.

4. Facilitated the passing of a bylaw on education for the girl child in Nwoya district.

5. Increased meaningful participation of women and girls in relevant policy and decision-making bodies: For the last 5 years, women leaders in our project areas were provided with public speaking, advocacy and lobbying skills to enhance their participation during council meetings. Over 200 Local Council I-III leaders were trained in democracy, governance and human rights as well as participation and representation. Post



training assessment indicated that all the women leaders appreciated the training and felt that they are now in a better position to participate in council meetings. One woman leader informally remarked with a smile.

I did not know that one needed to have evidence when presenting in council. I would just contribute but now I am trained and understand the importance of information before participating in a meeting. I will be able to challenge other councillors.'

6. Ability of Civil Society Organizations (CSOs) to engage in national and regional GBV advocacy: Through our work as members of different networks and coalitions, namely the International Conference of Great Lakes Region (ICGLR) coordinating committee, the domestic

Violence Act coalition, PEP coalition, gender reference working group, marriage and divorce bill coalition, and National Peace building and conflict resolution platform, we were able, together with other members of Civil Society Organizations to engage in national, regional and even international GBV advocacy. At national and regional level, the resolute

collaboration with the International Conference of the Great Lakes (ICGLR) illustrates how civil society actors can play crucial roles of bridge-builder with regional, national and local authorities, facilitator of policy development and watchdog for women's rights. At international level, the participation of local CSOs in the CSW, New York in March 2013 was an indication of their important role in responding and preventing GBV, and implementation of UN1325/1820.

7. Improved household income through VSLA: By March 2014 a total of 22,722 VSLA groups had been established and have been found to be social support networks critical in psycho-social support.
8. Male engagement as partners in preventing and responding to GBV. Over timer role model men have been identified in the communities and have effectively assisted in positive behavioural change in the communities of Northern Uganda.

### **Lessons learnt by Care International**

1. Participation in GBV forums and linking to the referral system:

Activists and representatives of the implementing partner organizations (IPO) participated in forums on a regular basis that joined other stakeholders / institutions addressing GBV, such as the police, the judiciary, civil society and health service providers. By linking to a referral system, they understood the procedures for helping GBV survivors and the roles of different institutions, and could thus assist victims more effectively.

2. Influence upon local and national decision making processes: The presence of case managers and activists has added value to broader response efforts, as this link to other forums has motivated, mobilized, and evoked greater responsiveness. Their connection to the grassroots realities has carried a lot of weight. For both IPOs and activists, this is evident in their ability to influence local and national decision-making processes through actions to address impunity for

GBV perpetrators, GBV in schools, the pervasive problem of alcoholism as a factor contributing to GBV.

3. The added value of case managers and activists to communities: GLAI has demonstrated success in making information on key policies and legislation more widely available, for example the new version of the Police Form for reporting rape and the fee for the required medical examination, in ways adapted to target audiences and with the aid of IEC materials. The very presence of activists and case managers has made it

possible to create a space for dialogue on GBV within their communities and have contributed to changes in attitudes and behaviours.

### Who are we?



MIFUMI is a women's rights organisation based in Uganda. Our work, spanning the districts of Tororo, Kampala, Bukedea, Masaka, Moroto and Mbarara, revolves around protection of women and children experiencing violence and other forms of abuse. We believe that if women were empowered and are rise above many cultural traditions that hold them back, they would be the greatest contributors to development

**Mission: To End Violence against Women.**

**Vision: MIFUMI envisions a world where women are free from violence and oppression and where every woman can realise her full potential**

### How we work

- **Policy/Advocacy:** MIFUMI initiates reforms through advocacy and policy reform. Our core policy and advocacy work involves influencing and reforming cultural practices like bride price that entrench the subordination of women and are causes of domestic violence
- **Empowerment:** We believe in building agency and capacity of our beneficiaries. Empowerment involves working on skills, awareness and knowledge that will enable the survivor to take control of her own life so that she can lead a self-determined life that is free from violence. Through the Village Savings and Loans Association, women are economically empowered by encouraging them to save and engage in economic activities that better their lives. Empowerment also extends to education through Mifumi Primary School which advocates for the education of the girl child, and the Sure Start program which seeks to break the cycle of violence by building the leadership potential of young girls and engaging them in gender issues.
- **Support:** Our support structures encompass advice centres which are one of the first points of entry for survivors to access Gender Based Violence (GBV) services. At these centres, 21 of them in Tororo, and one in each of the other four districts, survivors receive counselling, medical and legal support. Support for survivors is also supplemented by shelters which offer temporary refuge to survivors in imminent danger. We also offer primary and reproductive healthcare support through Mifumi Health Centre.

## Achievements

Since 2007, we have offered gender based violence services to nearly

45,000 women and children! We have made great strides in exposing social-cultural practices harmful to women and girls by generating debate and pushing for policy change to combat them. Our strengths have been tested and have prevailed in the campaign for bride price reform and the eradication of domestic violence. Victories in policy reform include the Tororo and Butaleja bridal gifts ordinances which regulate the demand for bride price and make it an offence to demand for bride price for a dead woman and protect children from early and forced marriage, among other things. Mbarara district also registered success with the passage of two ordinances geared at promoting child education and protection of children's rights.

## Lessons Learnt

- Engaging people who are passionate about women's issues to do community GBV work is more effective than paying people to do it. MIFUMI engages Independent Domestic Violence Advisers who resolve cases at the community level and are key in referring survivors to other institutions to access GBV services.
- Sustained GBV work with young people is very effective in preventing violence. Young people are more likely to adopt new ideas and change behavior accordingly making this an effective tool for changing attitudes in the long run.
- Engaging in community dialogues that facilitate critical reflection on bad cultural norms, practices & GBV reaps more benefits than if the community is lectured on why they should stop the practices, which are usually part of their cultural identity.

## TERREWODE

“Empowering Women and Girls”

The Association for Rehabilitation and Re-orientation of Women for Development (TERREWODE) has for the last 14 years worked with women and girls affected by Gender Based Violence (GBV) especially those affected by sexual and economic violence, including women and girls affected by obstetric fistula that form the bulk of the cases. Obstetric fistula is both a cause and a result of GBV.



Over 200,000 women and girls are affected by fistula in Uganda. This is not to mention the 1,900 new fistula cases that occur annually, yet the capacity of our Government to treat only stands at 2,000 affected women annually.

We are all aware that women who end up with fistula are only lucky to have survived death during child birth which claims 16 women in Uganda daily. However, obstetric fistula is thriving on practices such as child marriages, rape and defilement resulting into teenage and unwanted pregnancies. We have directly interacted, supported and socially reintegrated over 1,000 women and girls affected by GBV. Currently, every two weeks, we train 25 women and girls affected by GBV at the Women's Economic Empowerment and Self-Reliance center in Soroti. In 2012, TERREWODE began MDD as a pilot program designed to meet two objectives: support the reintegration needs of GBV survivors and raise awareness and advocacy on the issue using a culturally accepted medium. Currently, there are 5 women-led strong MDD solidarity groups in Teso educating communities through their experiences of GBV.

### **Justice Centres Uganda**



Justice Centres Uganda (JCU) is a government of Uganda Programme under the Justice

Law and Order Sector established in 2010 under Chief Justice Circular number 1 of 2010 to provide free legal services to the poor, vulnerable, and marginalized persons in Uganda. With a National Coordination office at the High Court in Kampala; Centres at the Chief Magistrates Courts in Mmengo, Lira, Tororo, and Hoima; and service points at the High Courts in Jinja, Masaka and Fort Portal, and staffed with Paralegals, Lawyers, Social workers, and accountants, JCU provides the following services to her clients across criminal and civil law;

### **Major activities**

1. Legal advice and counselling.
2. Awareness creation on human rights to communities, women, children, and Persons with disabilities.
3. Alternative dispute resolution through mediation.
4. Legal representation in Court.
5. Psychosocial support.

6. Advocacy for reform of laws, policies, and practices.
7. Toll free telephone services at all centres and service points.

### Major achievements

1. Establishing and successfully piloting the first ever state funded one stop centres for legal aid service delivery in Uganda.
2. Contributing to the debate and offering lessons for the enactment of a National legal aid policy and law for Uganda which has now reached cabinet level.
3. Bridging the gap between the demand and supply sides of Justice by offering quality legal advice and representation to poor persons in Uganda. A feat hitherto viewed as a preserve of the wealthy.
4. Contributing to increased awareness on legal rights especially among vulnerable groups such as women and children in communities in Lira, Kampala, Tororo, Hoima and surrounding areas which has led to increased activism and demand for respect for human rights.



### Lessons learnt

1. The realization of the full package of access to justice for all is not a one man show. It requires concerted efforts from all stakeholders working in a deliberately organized and systematic fashion.
2. The poor and most vulnerable groups, especially women and persons with disabilities, have very little capacity to organize themselves into formally registered groups. As a result, any government programmes that require them to be formed into groups to access services and resources may well be marginalizing them more.
3. The one stop centre approach to delivery of services lessens the burden of clients in moving from one place to another to receive services. The integration of psychosocial support into legal aid service provision has particularly worked well for JCU in ensuring that JCU clients get a holistic service

## ACFODE

### Inspired to end child marriage and support girl-child education

Brenda was very excited to see her mother's women group members gathered for their weekly meeting in her home since the meeting came with a delicious meal. She was dressed in a blue uniform and had just returned from school. As she dropped her bag inside her mum's hut, her mother asked her how the exams were and a jolly Brenda replied: 'They have been okay and we are finishing school next week.' Little did Brenda know that her mother, Beatrice, had never been accorded the same opportunity while still young. Instead she was married off by her father so that he could get bride price, in the form of cows.

Beatrice Opio narrated:

*'I did not go to school because my parents believed that in the Lango cultural tradition, the girl child is not supposed to go to school but only groomed to be a good housewife.' As such, her parents married her off to her husband Patrick Opolo in 1974. They were blessed with seven daughters and two sons.*

*'In 2005, we also married off our first daughter at the age of 13 years,' she adds, 'because we could not raise her school fees and also wanted to get bride price. During that time, girls would just elope with their suitors and that would be a big shame to the family. When my first daughter got married, my husband and in-laws went into a week-long party frenzy, drinking alcohol and eating special dishes so that by the time the party ended we had no money left from the bride price.'*

*'Before we could settle down my other daughter ran away with a young man. We could not believe it since she was too young to elope. We searched almost everywhere for months and finally gave up. All the time I wondered what had gone through her mind. Then it hit me that maybe after witnessing her sister's marriage she had decided to shape her own destiny before we could choose a husband for her.'*

*'One evening in April 2013, I was listening to the radio on Divine FM Apac. It was then that the ACFODE programme started. The panellists discussed girl-child education and how educated girls can help their parents and inspire development in the whole community. The panellists also informed about the different local leaders that were trained by ACFODE. I decided to invite them to my home. Luckily enough, there were some male role models in our Awili parish. Fortunately, my husband welcomed them to our home and we were both very excited to witness men talk about gender and cultural issues.' This visit marked the beginning of a positive transformation for Beatrice and her family.*

*'A year later, I was lucky to be invited for a community meeting. I discovered that there were very many community leaders, amongst them women, who were freely expressing themselves on issues related to negative socio-cultural practices within our community. After that meeting, we, the women who attended, formed a self-help group. Since then my husband and I have never been the same. He was enrolled as one of the male role models.'*

*As a result, we resolved to take our two daughters back to school since their marriages had failed and they were with us at home. They will be sitting the Primary Leaving Examination this year, 2014. With God's grace I know they will also go to university. To achieve our dream my husband and I have started saving money we earn from selling our farm produce, and joined a savings group. All these are efforts to ensure that our children attain an education.'*

*'I am so grateful for this intervention,' Beatrice concluded, 'because after the ACFODE talk show we realised our negative attitudes towards girl-child education and mistakes that were the reasons our own daughters suffered domestic violence.'*

## ACFODE



Action for Development (ACFODE) is a non-governmental women's organization that was established to provide an organized platform for effective debate

and action on issues related to the advancement of women in Uganda. As ACFODE celebrates her 30th anniversary in 2015, the organisation is committed to her vision "A just society where gender equality is a reality".

## Strategic Plan & Objectives

ACFODE's work is guided by her mission "To empower women and influence legislation and policy for gender equality in Uganda" and a strategic plan (2012/13-2016/17) with namely four objectives:

- 1) To influence the formulation / review of policy and legislation that effectively promotes gender equality.
- 2) To contribute to effective implementation of gender responsive laws and policies.
- 3) To contribute to the reduction of socio-cultural practices that cause gender inequalities.
- 4) To enhance the capacity of ACFODE for efficient and effective implementation of her mandate.

## Harmful Cultural Practices



Harmful traditional, socio-cultural and religious practices are considered a form of gender based violence. One such practice is child marriage, whereby a child, boy or girl, enters into a formal marriage or informal union before the age of legal consent (age of 18 years). Other harmful practices include female genital mutilation, denial of education or certain foods for girls or women, marital rape and widow inheritance among others.

### **Statistics**

- One in five girls (15-19 years) is in a union compared with two in 100 boys.
- Women living in urban areas marry about two years later than rural women.
- Girls with no education marry about 4 years earlier than those who attained secondary education.
- Child brides have twice the pregnancy death rate of women in their twenties.
- An extra year in primary school increases girls' eventual income by 10-20%.

Approaches to promote positive cultural practices ACFODE piloted and applies strategic male engagement approaches throughout her work:

**Male Role Models:** 180 men, by virtue of their position within their communities were profiled and commissioned as Male Role Models. They were orientated on gender issues and harmful practices, and now utilize their platforms as clan, religious or political leaders to empower their communities to promote positive practices and gender equality. **Model Couples:** In order to equally empower women and men, 30 couples were identified who formerly exhibited negative cultural practices like domestic violence. After they were sensitized on gender issues and harmful practices, they started to transform their own homes and have also sensitized others, offered basic counselling services and referred cases of violence. **Community Agents of Change:** 180 female and male social actors, who were orientated on existing gender responsive legislations and referral points, formed groups at parish level to jointly combat all forms of gender based violence in their homes and communities.

Sources: ACFODE: True Life Stories (2014), IRIN: Gender Based Violence (2014), The Girl Effect: World for Girls (2014), UBOS: UDHS (2011).

## 4.4 Recommendations for future interventions

- i. Focus on changing attitudes and mindsets of communities to prevent GBV, cultural institutions should put in place by-laws.
- ii. Much more should be invested in the prevention of GBV because women and girls are a strong pillar in this country. Sensitization should begin with young children and youth for an attitude change from what seems to be the norm—“to kill the virus before it grows”.
- iii. Government should implement the Domestic Violence Act 2010, allocate more funding to prevention, response; care and rehabilitation of GBV survivors and strengthen the police, health, shelters and courts systems by providing more facilitation to handle GBV cases.
- iv. Increasing male engagement in the prevention and response processes: training and empowering paralegals to handle referrals.
- v. Put emphasis on the economic empowerment of women to prevent dependence and reliance on men for survival through a women’s fund.
- vi. Creation of new, and strengthening of existing, social movements with the capacity to meaningfully and tangibly advocate for the rights of vulnerable and marginalized persons , by bringing on board policy influencers and critical decision makers within the cabinet, legislature, and the executive.
- viii. Building of strong referral pathways among partners with timely feedback on services offered to the referred client.
- ix. Government needs to allocate more funds and step up efforts to protect women and girls because a strong political commitment to the right of women and girls to live a violence-free life is the only way to protect them against the evils of GBV
- x. Partners should continue to work with local governments to build the capacity of existing local structures (e.g. the sub-county and Parish Development Committees) and service providers for addressing GBV by expanding the coverage of training provided to those institutions.
- xi. Local government authorities need to ensure strengthened coordination of the GBV working groups, with district Gender Officers playing a lead role in the meetings of those working groups.
- xii. Local government authorities also need to ensure the mainstreaming of activities to address GBV into their budgeting and planning processes at sub-county, parish, county and district levels (in line with the national policy for gender-responsive budgeting).
- xiii. Establish an independent court or facilitate separate court sessions to handle GBV cases faster.

## 5.0. Conclusion and the Journey Ahead...

### Our forward looking vision...

A violence-free society is possible if everyone plays their role explicitly. As ActionAid Uganda and development partners, we have touched the lives of women, girls, children and men, contributing to peaceful families. These stories of triumph documented are testimonies that social change, institutional growth and policy reforms are possible. We look into the future, with a focus on achieving our vision of a world without poverty and injustice in which every person enjoys their right to a life with dignity. This calls for all actors to work together to fulfill their mandate and ensure that women in this country enjoy freedom from violence until a time when we no longer need GBV shelters in this country. This will only happen when the government takes full responsibility as a primary duty bearer.



