

### PEACEBUILDING FUND

### ANNUAL PROGRAMME NARRATIVE PROGRESS REPORT

### **REPORTING PERIOD: 1 JANUARY - 31 DECEMBER 2011**

Programme Title & Number	Country, Locality(s), Thematic Areas
Programme Title: Peace building and enhancing protection systems	UGANDA
Programme Number: PBF JP2 PBF/UGA/A-2	UNPRAP Outcome 1: Strengthened human rights, accountability and good governance capacity of key government, civil society institutions and mechanisms including traditional structures contribute to improved security, protection, access to justice and reconciliation for all people in Northern Uganda
MDTF Office Atlas Number: ID00076965	

Participating Organization(s)	Implementing Partners
UNFPA	American Refugee Committee (ARC)
UNICEF	ANPPCAN
	CCF Pader
	Children as Peacebuilders
	Church of Uganda
	GUSCO
	KICWA
	Muslim Supreme Council
	UCRNN
	Uganda Catholic Secretariat
	UTL
	UWONET (Ugandan Women Network)
	War Child Holland

Programme/Project Cost (US \$)	Programme Duration (months)
MDTF Fund Contribution:	Overall Duration: 18 month(s)
•UNFPA: 1,300,000 •UNICEF: 1,200,000	
	Start Date: 01-Jan-2011

Agency Contribution:	
	End Date or Revised End Date:30-Jun-2012
Government Contribution:	
	Operation Closure Date: 30-Jun-2012
Other Contribution (donor):	
	Expected Financial Closure Date: 30-Jun-2012
TOTAL: 2,500,000	

Programme Assessments/Mid-Term Evaluation	Submitted By
Assessment Completed: Yes X No Date:	Name: Anna Mutawati Title: Senoir GBV Coordinator Participating Organization: UNFPA Email Address: mutavati@unfpa.org
Mid-Evaluation Report X Yes No Date: 16-Jan-2012	

### I. PURPOSE

### A. Objectives & Outcomes

JP Priority Area:	UNPRAP Outcome 1: Strengthened human rights, accountability and good governance capacity of key government, civil society institutions and mechanisms including traditional structures contribute to improved security, protection, access to justice and reconciliation for all people in Northern Uganda
Outcome 1:	Women and children are empowered to overcome specific post-conflict hardship (e.g. psychical and economic security, political participation) and to end gender-based violence and discrimination

### B. How the programme relates to the Strategic (UN) Planning Framework guiding the operations of the Fund/JP.

The implementing partners are working with local governments and CBOs to strengthen their capacities to deliver gender sensitive services to respond to and prevent GBV. In so doing the programme is contributing to the national development plan goal of increasing access to quality social services. This is being done through strengthening capacities of local governments to plan and budget for GBV. CBOs' capacities are being strengthened to play a role in preventing GBV.

The implementing partners are working with local government and CBOs to strenghten their capacities to mitigate triggers to conflict by ensuring that the most vulnerable children and families affected by conflict benefit from protection services.

### **II. RESOURCES**

### **A. Financial Resources**

Provide information on other funding resources available to the project, if applicable.

There are no other funding resources available to the project. UNICEF utilizes its own funding resources in other districts on similar project activities so as to achieve a wider national impact of the project interventions.

Provide details on any budget revisions approved by the appropriate decision-making body, if applicable.

There were no budget revisions.

Provide information on good practices and constraints in the mechanics of the financial process, times to get transfers, identification of potential bottlenecks, need for better coordination, etc.

The use of Implementing Partners to transfer funds to sub-contactees was a good practice in the transfer of funds.

#### **B. Human Resources**

Staff	Number	Туре
National Staff	1	Operation
	3	Programme
International Staff	0	Operation
	3	Programme

### **III. Implementation and Monitoring Arrangements**

## A. Summarize the implementation mechanisms primarily utilized and how they are adapted to achieve maximum impact given the operating context

The use of existing community based structures which are accessible, well versed with the context regarding GBV and can be used by other funders to continue with working on GBV. Such structures include Self Help Empowerment and Leadership groups (SHEL), district CSO groups and child protection committees.

UNICEF implements its component through the Government and NGO partners. With the Government it has signed a 5 year Rolling Workplan which includes the interventions of the Peace Building project. With the NGOs it signs the Project Cooperation Agreements. All interventions are results based and time-bound. UNICEF approves quarterly plans of the partners and advances funds for implementation. Once funds are advanced the field level activities are implemented. Field activities are at times jointly monitored by UNICEF and the implementing partner. Besides routine monitoring, UNICEF has also developed a unique method called Programme Qualty Assurance (PQA) for monitoring the programme. UNICEF has so far conducted PQAs of all Government and NGO partners, and the feedback on gaps have been shared with the partners, and actions taken to address the gaps identified which hinder progress on implementation.

#### B. Provide details on the procurement procedures utilized and explain variances in standard procedures.

During the reporting period NGO partners were supported to procure equipment necessary for them to execute their roles effectively. These include motor vehicles, computers, printers and motor bikes among others. Having conducted a capacity assessment of the NGO partners, the UN satisfied itself that the selected partners had sound management systems and procedures, including procurement. Where gaps were identified, the partners were supported to strengthen their systems as condition for the partnership. The NGOs therefore used their procurement systems as reviewed by the UN. The UN used their established systems and procedures for the procurement of goods and services under this joint programme. There was therefore no variance in the standard procurement procedures.

The procurement of equipment for the project is done through regular UNICEF process and the equipment mostly computers, bicycles have been handed over to the implementing partners.

## C. Provide details on the monitoring system(s) that are being used and how you identify and incorporate lessons learned into the ongoing project.

Monitoring of project activities are done both by the partners and by the UN agencies. UNICEF and UNFPA provides funding support to partners for monitoring and support supervision to carry out monitoring and reporting.

IPs are required to submit activity schedules after development of workplans. The activity schedules are used to monitor timely and quality implementation of activities. Lessons learnt in one quarter used to inform the workplans of the subsequent quarters. UNFPA sub-office in Gulu and GBV coordinators of Kitgum and Pader routinely monitor activities of the implementing partners. The monitoring focuses on identification of challenges in programme implementation and how they can be addressed, possibilities of creating linkages with other partners doing similar work.

UNICEF also hold joint monitoring visits with the Government and NGO partners. UNICEF's own District Project Officers are regularly monitoring project implementation at the field level in all the 7 districts. UNICEF has developed a unique methodology for monitoring Government and NGO interventions through what is called "Programme Quality Assurance" (PQA). For this purpose specific monitoring tools have been developed for the Government and NGOs. This exercise is done every 6 months. It focuses on management, programme effectiveness and efficiency, monitoring and reviews and supply issues. PQAs have been conducted for all 7 districts and NGO partners. Through this exercise gaps and constraints which hinders progress on implementation are identified. These are incorporated as lessons learned and action points are drafted to overcome the bottlenecks. These are then communicated to the implementing partners, so that the constraints could be addressed and rectified, to ensure smooth implementation. Besides the PQA, tte Government and NGO partners provided quarterly progress reports which includes monitoring and review reports.

### D. Report on any assessments, evaluations, or studies undertaken.

A mid-term review of the PBF was undertaken in 2011 and results were used to strengthen strategies and M and E.

### **IV. RESULTS**

A. Provide a summary of Programme progress in relation to planned outcomes and outputs; explain any variance in achieved versus planned outputs during the reporting period

Cumulative Achievement Percentage for Outcome Indicators	87.5%
Cumulative Achievement Percentage for Output Indicators	123.4%

### **Reason for variance:**

Additional outputs to the planned ones were achieved.

**B.** Report on the key outputs achieved in the reporting period including # and nature of the activities (inputs), % of completion and beneficiaries.

ACTIVITY	STATUS	BENEFICIARIES
For Outcome 1		

Output 1:Psychosocial care and support services for women and children victims of GBV and abuse provided
in all target districts

in all target districts		
1. Case management (War Child Holland)	Ongoing	Community People: By Age: 2,500 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 1,500 Female(s), 1,000 Male(s)
2. Case management through districts. Provide short & medium support to survivors of child abuse and GBV	Ongoing	Community People: By Age: 1,000 Children, 1,000 Youth, 1,000 Adult(s), 0 Senior(s) By Sex: 1,500 Female(s), 1,000 Male(s)
3. Case management and psychosocial support provision (Accord)	Ongoing	Community People: By Age: 2 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 385 Female(s), 0 Male(s)
4. Case management and psychosocial support provision and operation of hotline (ARC)	Ongoing	Community People: By Age: 154 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 172 Female(s), 3 Male(s)
5. Case management and psychosocial support provision (Food for the hungry)	Ongoing	Community People: By Age: 48 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 69 Female(s), 0 Male(s)
6. Psychosocial services for more serious cases and capacity building of partners to provide psychosocial support (Vivo)	Ongoing	Community People: By Age: 9 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 39 Female(s), 0 Male(s)
Output 2:Community dialogue target districts	es on GBV gender e	equality, non-discrimination and child protection conducted in
1. Conduct monthly mobilization and sensitization of members of laity groups of child rights and GBV (Church of Uganda)	Ongoing	Community People: By Age: 25,000 Children, 5,000 Youth, 0 Adult(s), 0 Senior(s) By Sex: 15,000 Female(s), 15,000 Male(s)
2. Conduct montly mobilization and sensitization of members of laity groups on child rights and GBV (Uganda Catholic Secretariat)	Ongoing	Community People: By Age: 23,000 Children, 2,000 Youth, 0 Adult(s), 0 Senior(s) By Sex: 13,000 Female(s), 12,000 Male(s)
3. Conduct montly mobilization and sensitization of members of laity groups on child rights and GBV (Uganda Muslim Supreme Council)	Ongoing	Community People: By Age: 18,000 Children, 2,000 Youth, 0 Adult(s), 0 Senior(s) By Sex: 10,000 Female(s), 10,000 Male(s)
4. Participation of DCDO/CDO in community dialogues of FBOs, War Child and CAP	Ongoing	Community People: By Age: 25,000 Children, 5,000 Youth, 0 Adult(s), 0 Senior(s) By Sex: 15,000 Female(s), 15,000 Male(s)
5. Community dialogues (Children as Peacebuilders)	Ongoing	Community People: By Age: 2,500 Children, 2,500 Youth, 2,500 Adult(s), 0 Senior(s) By Sex: 4,000 Female(s), 3,500 Male(s)
6. Community dialogues (War Child Holland)	Ongoing	Community People: By Age: 10,000 Children, 17,000 Youth, 17,000 Adult(s), 0 Senior(s) By Sex: 22,000 Female(s), 22,000 Male(s)
7. Community dialogues, sensitizations, drama activities on GBV, rights of childre, gender and land, and community obligations +	Ongoing	Community People: By Age: 3 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 170 Female(s), 217 Male(s)

Facilitation of social contract		
process and community micro peace projects + Production and disemmination of IEC materials (ACORD)		
8. Mobilization and outreach of community peace building champions through training, community dialogues and radio dialogues (ICON)	Ongoing	Community People: By Age: 0 Children, 0 Youth, 486 Adult(s), 0 Senior(s) By Sex: 400 Female(s), 86 Male(s)
9. Build capacity of media on gender responsive media programming and peacebuilding (ARC and ACORD)		Community People: By Age: 0 Children, 58 Youth, 0 Adult(s), 0 Senior(s) By Sex: 15 Female(s), 43 Male(s)
10. Community dialogues focusing on strengthening local protection mechanisms (ARC)	Postponed	Community People: By Age: 0 Children, 1,301 Youth, 1,301 Adult(s), 0 Senior(s) By Sex: 888 Female(s), 1,714 Male(s)
11. Community dialogues, dramas, film shows to promote women's participation in peace building (FH)	Ongoing	Community People: By Age: 0 Children, 0 Youth, 5,609 Adult(s), 0 Senior(s) By Sex: 2,878 Female(s), 2,731 Male(s)
Output 3:District mechanisms protection established and fun-		on and documentation of reported incidents of GBV and child
1. Map existing actors for GBV/CP in each district.Mapping of child protection services (UCRNN)	Completed	140 Local NGO(s)
2. Map existing actors for GBV/CP in each districtMapping of GBV actors	Ongoing	CDOs DCDOs District Councillors Technical officials Political officials government planning departement PSWOs Police Local Council Courts
3. Train identified actors on harmonized tool for collecting data on reported cases of GBV and child abuse, violence and exploitationHarmonize the tool	Cancelled	CDOs
4. Train identified actors on harmonized tool for collecting data on reported cases of GBV and child abuse, violence and exploitationTraining workshop	Cancelled	CDOs
5. Provide on job support to actors on the use of the tool (MoGLSD)	Cancelled	CDOs
6. Conduct quarterly review and analysis of the dataQuarterly review of data (UNICEF and UNFPA)	Ongoing	CDOs DCDOs
7. Conduct quarterly review	Ongoing	CDOs

and analysis of the data.Coordination mechanism and supervision strengthened at district level (districts/ sub-counties)		DCDOs
8. Conduct quarterly review and analysis of the data. Montly police reports on VAC submitted to the districts (CFPU)	Cancelled	District Councillors
9. Facilitate use of data to inform planning programmes and budgeting at all levels Data input in computer (districts)	Ongoing	District Councillors government planning departement
10. Development of the software for a 24 hours Call Centre for the Help line and training of 200 people on the use of the new system (UTL)	Ongoing	<i>Community People:</i> By Age: 60,000 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 40,000 Female(s), 20,000 Male(s)
Output 4:Increased capacity of human rights violations	f district authorit	ies to plan and budget for addressing GVB, child protection and
1. Support inclusion of gender planning from grassroots level (ARC)	Ongoing	District Councillors Technical officials government planning departement
2. Advocacy activities with district leadership to support gender budgeting and mainstreaming (UWONET)	Ongoing	District Councillors
3. Peace building, leadership, advocacy and entrepreneurship seminars for elected women leaders, targeted men and young women (ICON)	Ongoing	Community People: By Age: 0 Children, 50 Youth, 50 Adult(s), 0 Senior(s) By Sex: 75 Female(s), 5 Male(s)
4. Bi-annual meetings to linke district GBV concerns to national level dialogue (ACORD)	Ongoing	
5. Train local tech and pol officials on child protection(ANPPCAN)	Ongoing	Technical officials Political officials
6. Orientation to the district Council on VAC/ District Budget Plans	Ongoing	District Councillors
7. Advocacy activities with district leadership to support gender budgeting and mainstreaming (UWONET)		
8. Bi-annual meetings to link district GBV concerns to national level dialogue (ACORD)		CDOs District Councillors
Output 5:Case management an districts	nd referral pathw	ay for children and GBV survivors enhanced in all target
1. Renew and revise the referral	Ongoing	Community People:

pathway (War Child Holland)		By Age: 10,000 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 6,000 Female(s), 4,000 Male(s)
2. Media sensitization on referral pathways, quarterly review meetings, and sub-county coordination meetings (ACORD)	Ongoing	CDOs DCDOs District Councillors Technical officials government planning departement PSWOs
3. Update referral pathways at sub-county level with partners and community members and follow up with service providers including health workers and police on use of referral pathway (ARC)	Ongoing	Police Health workers
4. Production and dissemination of referral pathway (FHI)	Ongoing	Community People: By Age: 0 Children, 0 Youth, 931 Adult(s), 0 Senior(s) By Sex: 509 Female(s), 432 Male(s)
5. Conduct training of identified stakeholders on referal pathways for CP and GBV (War Child Holland)	Postponed	20 Local NGO(s) PSWOs Police
6. Printing and dissemination of the referral pathway (War Child Holland)	No Update/Action	140 Local NGO(s) PSWOs Police
7. Conduct quarter review of functionality of the referral pathway and adjust as necessary Workshop (UNICEF)	Postponed	20 Local NGO(s) PSWOs Police
		ed groups and other children affected by conflict are reunification with families/communities of origin (UNICEF)
1. Children, mothers with children and pregnant women returning from the LRA benefited from interim care, counselling, family tracing, reunification (FTR) and psychosocial support (GUSCO)	Ongoing	Community People: By Age: 200 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 150 Female(s), 50 Male(s)
2. follow up and psychosocial support to returnees and families (KICWA)	Ongoing	Community People: By Age: 150 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 100 Female(s), 50 Male(s)
3. Support children formerly associated with armed groups and other children affected by conflict (CCF Pader)	Ongoing	Community People: By Age: 150 Children, 0 Youth, 0 Adult(s), 0 Senior(s) By Sex: 100 Female(s), 50 Male(s)

# C. Explain, if relevant, delays in programme implementation, the nature of the constraints, actions taken to mitigate future delays and lessons learned in the process.

The following are lessons learned:

(i) The need to develop a strategy to follow up district councilors who have made commitments to plan and budget for GBV in the district development plans.

(ii) In the provision of pscyho-economic support, the importance of targeting men as well to avoid violence in the home relating to men wanting to take all the income earned by the women for this support.

(iii) The importance of involving both men and women in community dialogues so that both parties can agree and implement the action plans agreed upon on stopping violence in their homes.

(iv) In conducting the community dialogues, the importance in involving local leaders, i.e. LC officials, district officials, e.g. the Community Development Officers (CDOs) and Representatives of the Police Force so that they can be involved in monitoring the commitments that the community make in addressing the causes and eliminating violence within their homes.

(v) The need to involve the media in reducing stereotyping in the way they report on gender issues in general and GBV cases in particular.

(vi) The importance of educating the community about the referral pathway as well as having a functional referral pathway and most importantly the community is aware of the importance of ensuring that GBV survivors access Post-Exposure Prophylaxis (PEP) within 72 hours.

(vii) The community alerted about the dangers of delaying to assist a survivor obtaining medical and psychosocial support immediately.

(viii) Girls and women especially those who have been affected by armed conflict are yet to receive full support for their recovery and reintegration. Therefore UNICEF will target more specifically girls and young mothers who have returned from the LRA and provide them with psycho-social support focused on their reintegration.

(ix) The community members lack information on the referral pathways. Therefore we have to include information on the referral pathway in the community dialogues.

(x) Delays were experienced due to signing of contract with implementing partners; and then delays were experienced due to first building the capacity of the Faith Based Organizations in developing understanding for child protection and peace building. When their trainers/priests were trained, then they could fully implement in the communities the child protection interventions.

(xi) Delays were experienced in providing training to district councillors on inclusion of child protection in the district planning budgets. UNICEF should follow-up closely with the districts to ensure that this is materialized in the first quarter of 2012.

(xii) Fewer children are returning from the LRA since 2010 than expected. Therefore UNICEF will extend support for integration also for children who have returned before 2011 and who are already reunified with family and community in order to achieve the planned target.

(xiii) The coordination between local government and NGOs is still a challenge. It seems difficult for both parties to share information. UNICEF should play a more active role in sharing information between local government and NGOs.

(xiv)

The October 2011 Mid-Term Review (MTR) of the PBF found that overall the design and strategy of the PBF was relevant to the peacebuilding needs in Northern Uganda addressing risk factors for stability on the local level.

The MTR further noted that in general the PBF had been appreciated by the stakeholders and many beneficial effects had been realized from the interventions during the first half of the project period from January to September 2011. The achievements were attributed to the regular programmes of the UN agencies, which were continued under PBF. These comprised of the areas of service provision for victims, among them the most vulnerable such as women and children, economic development and access to justice. The MTR also attributed new approaches, which were added and specifically tailored to the peacebuilding needs. These approaches consist of relevant background research, transitional justice, community based conflict resolution, capacity building for youth centers and training on peacebuilding.

### D. List the key partnerships and collaborations, and explain how such relationships impact on the achievement of results.

1) It is too soon to report on the results of the collaboration on gender and equity budgeting, since the joint training was only undertaken in December 2011. The results will be reported on after the district development plans and budgets for Financial Year (FY) 2012/13 have been approved in June 2012. It is hoped that these plans and budgets will incorporate activities and provide resources for gender prevention and response activities.

2) Referral of survivors from one Implementing Partner to another, e.g. ARC referred survivors to VIVO, while VIVO referred survivors to ACORD, ensured that the survivors received appropriate and holistic psychosocial support.

3) Collaboration between ARC and NUMEC on the on hand and ACORD and NUMEC on the other ensured more district coverage as well the number of media personnel targeted in the media related activities.

UNICEF is closely collaborating with the local government officials in charge of child protection and coordinates its implementation with UNFPA. A Joint-Monitoring field visit with UNFPA, OHCHR and UNDP was conducted in December 2011. The findings of the visits will be used to fine-tune the implementation of the last 5 months of the projects.

The district authorities showed more ownership for the programme implementation. The Government District Budget

Plans have incorporated Child Protection in all the 7 districts. This was achieved as a consequence of technical support provided by UNICEF through ANPCANN to train all the Councillors and concerned Government officials in the Districts to plan and budget for child protection in the District Budget Plans. These are being reflected in the District Budget Plans 2012-2013 Fiscal Year.

#### E. Other highlights and cross-cutting issues pertinent to the results being reported on.

Key cross cutting issues that pertain to more than one Implementing Partners that UNFPA are collaborating with are the following: (i) provision of psychosocial and psycho-economic support. American Refugee Committee (ARC), Food for the (FH), and Victims Voice (VIVO) provided psychosocial support, while ACORD provided psycho-economic support. ARC referred clients who required Narrative Exposure Therapy to VIVO. While VIVO referred clients to ACORD who needed psycho-economic support so as to get out of an violent home environment. (ii) ACORD, ARC and FH disseminated the referral pathway and kept it updated. (iii) Whilst ARC operated the GBV hotline, the IPs operating in the areas that GBV was reported provided support to the survivors. (iv) ACORD, ARC, and FH carried out community dialogues and followed up of the action plans agreed upon by the communities. In 2012 these IPs will continue to carry out community dialogues and follow up on the ones carried out in 2011. (v) Collaborating with the media: ARC collaborated with Northern Uganda Media Club (NUMEC) in building gender and media campaigns. ARC trained journalists in advocacy strategies and agreed on tools for monitoring both quantity and quality of media reporting on GBV. ACORD also collaborated with NUMEC in training of media personnel from Kitgum, Lamwo and Pader on GBV and peacebuilding. (vi) ACORD and UWONET collaborated in the preparatory activities for the training of targeted district officials and elected women councilors in gender and equity budgeting. The training was aimed at building the capacity of the aforementioned target group to plan and allocate resources for GBV prevention and response activities in the sub-county and district development plans.

UNICEF has noted that it is very important that health facilities level 3 and above have the capacity for providing quality and timely post-rape care services to children and adolescents, according to international standards (if clinics have sexual violence management guidelines; a trained staff member trained to use the guidelines; a confidential examaniation room, provide free examination and emergency post-rape care kit/equivalent). The initial assessment suggests that such comprehensive services are not readily available. There is need for provision of the SGBV management guidelines and training of the medical staff in those guidelines.

	Performance Indicators	Indicator Baselines	Planned Indicator Targets	Achieved Indicator Targets	Reasons for Variance (if any)	Source of Verification	Comments (if any)
Outcome 1: Women a gender-based violence			o overcome spe	ecific post-conflict hardship (e.g. psychical an	d economic security, p	oolitical particip	ation) and to end
Output 1: Psychosocial care	Indicator 1.1. % increase in number of child survivors receiving psychosocial care and support in all target districts	Children = 400 cases per month in five districts	30% for all cases	<ol> <li>1. 181 chlid survivors received psychosocial support in the 7 districts from April to June 2011 Percentage Achievement: 35.0% as of 2nd Quarter</li> <li>2. 704 child survivors received psychosocial care and support in all target districts. Percentage Achievement: 59.0% as of 3rd Quarter</li> <li>3. 3634 child survivors received psychosocial support in all target districts Percentage Achievement: 17.0% as of 4th Quarter</li> <li>Total Percentage Achievement for this Indicator: 111.0% as of 4th Quarter 2011</li> </ol>	Additional outputs were achieved.	Cost-effective methods and sources to quantify or assess indicators	
	Indicator 1.2. % increase in number of GBV survivors receiving psychosocial care and support in all target districts	GBV= 227 cases per month in five districts.	30% for all cases	<ol> <li>A total of 123 survivors of various forms of gender based violence were attended to in the Gulu, Amuru, Nwoya, Pader amd Agago in the 2 months of April and May 2011. They were supported with psychosocial support <i>Percentage Achievement: 10.0% as of 2nd Quarter</i></li> <li>A total of 179 GBV survivors received psychosocial care and support. <i>Percentage Achievement: 15.0% as of 3rd Quarter</i></li> <li>3,018 GBV survivors received psychosocial care and support</li> </ol>	Additional outputs were achieved.	Cost-effective methods and sources to quantify or assess indicators	

				Percentage Achievement: 98.0% as of 4th Quarter Total Percentage Achievement for this Indicator: 123.0% as of 4th Quarter 2011			
Output 2: Community dialogues on GBV gender equality, non-discrimination and child protection conducted in target districts	Indicator 2.1. % of communities in target district with agreed community norms on child protection	Child protection = 3 subcounties each in 4 districts	50% increase	<ol> <li>Community dialogues have taken place in the different districts <i>Percentage Achievement: 10.0% as of 2nd</i> <i>Quarter</i></li> <li>Community dialogues have taken place in the different districts <i>Percentage Achievement: 40.0% as of 3rd</i> <i>Quarter</i></li> <li>58 communities have agreed community norms on child protection in Gulu and Amuru <i>Percentage Achievement: 50.0% as of 4th</i> <i>Quarter</i></li> <li>Total Percentage Achievement for this Indicator: 100.0% as of 4th Quarter 2011</li> </ol>	Fully achieved target no variance exists.	Monitoring of community practices	
	Indicator 2.2. % of 7 districts with community dialogues held on GBV, gender equality and non-discrimin ation	GBV, Gender and non-discrimin ation =3 subcounties each in 7 districts -	50% increase	<ol> <li>14 community dialogue sessions took place during the reporting period, in 6 out of the seven districts. A total of 340 adults were engaged in the dialogue which focused on understanding the post conflict priorities of the communities. The dialogue sessions were appreciated by the community members, who saw them as an opportunity to be engaged in the development discussions of their communities, an opportunity that they rarely get. Percentage Achievement: 66.0% as of 2nd Quarter</li> <li>44 community dialogues took place in all 7 districts. 1423 adults participated in the</li> </ol>	More participation of community members in the dialogues and more community dialogues were held.	NGO reports	

				<ul> <li>dialogues. Actions emerging from the dialogues were: identification of response to GBV for inclusion in the parish and sub-county development plans; involvement of cultural leaders and elders in the resolving land boundaries disputes because they are knowledgeable on land boundaries; capacity building of land conflict resolution structures such as land committees, local council courts, and the Rwot Kweri in conflict resolution. <i>Percentage Achievement: 100.0% as of 3rd Quarter</i></li> <li>3. 193 community dialogues were held. Emerging issues from the dialogues focused on land disputes, dispossession of widows and women solely bearing the responsibility of looking after children. The dialogues also were aimed at generating a lasting solution to GBV. <i>Percentage Achievement: 81.0% as of 4th Quarter</i></li> <li><i>Total Percentage Achievement for this Indicator: 247.0% as of 4th Quarter 2011</i></li> </ul>			
Output 3: District mechanisms for regular collection and documentation of reported incidents of GBV and child protection established and functional	Indicator 3.1. % of participating districts with functional mechanisms for regular collection and documentatio n of reported incidents of child protection	Children =4/7	100%	<ol> <li>the 7 districts have a mechanism for collection and documentation of reported incidents of Child Protection <i>Percentage Achievement: 50.0% as of 2nd</i> <i>Quarter</i></li> <li>3 IMS reports were collected and reviewed. <i>Percentage Achievement: 0.0% as of 3rd</i> <i>Quarter</i></li> <li>the 7 districts use the mechanism for collection and documentation of reported incidents of child protection</li> </ol>	On track	System for data collection in place	

				<ul> <li>Percentage Achievement: 20.0% as of 3rd Quarter</li> <li>4. All 7 districts have the basic system for collecting and reporting on child protection issues.</li> <li>Percentage Achievement: 20.0% as of 4th Quarter</li> <li>Total Percentage Achievement for this Indicator: 90.0% as of 4th Quarter 2011</li> </ul>		
	Indicator 3.2. % of participating districts with functional mechanisms for regular collection and documentatio n of reported incidents of GBV	GBV =4/7	100%	<ul> <li>1. 5 out of the seven districts have established and functional systems for collecting, analysing and disseminating data on GBV reported incidents <i>Percentage Achievement: 71.0% as of 2nd</i> <i>Quarter</i></li> <li><i>Total Percentage Achievement for this</i> <i>Indicator: 71.0% as of 4th Quarter 2011</i></li> </ul>	On track	GBV IMS
Output 4: Increased capacity of district authorities to plan and budget for addressing GVB, child protection and human rights violations	Indicator 4.1. % of Districts with trained officials on child protection and human rights	Children = 4/7	100%	<ol> <li>60 Councillors and District officials in Gulu and Nowya were trained in development of District Plans and Budget integrating child protection concerns. <i>Percentage Achievement: 30.0% as of 4th</i> <i>Quarter</i></li> <li>Total Percentage Achievement for this Indicator: 30.0% as of 4th Quarter 2011</li> </ol>	Late start of the activity	Training reports
	Indicator 4.2. % of Districts trained on GBV and gender and	GBV = 4/7	100%	1. There is no progress to report on this output <i>Percentage Achievement: 0.0% as of 2nd Quarter</i>	Late NGO reporting	NGO reports

	supported to implement gender budgeting			<ol> <li>ICON has trained women leaders and identified male champions from seven districts</li> <li>Percentage Achievement: 10.0% as of 3rd Quarter</li> <li>District officials from 4 out of 7 districts were trained on gender and equity budgeting, gender mainstreaming and GBV. Key agreed actions to be taken to support districts to implement gender and equity budgeting are regular refresher trainings on gender budgeting and strengthening capacity of women councillors to effectively participate in council proceedings to ensure that identified gender concerns are allocated resources.</li> <li>Percentage Achievement: 57.0% as of 4th Quarter</li> <li>Total Percentage Achievement for this Indicator: 67.0% as of 4th Quarter 2011</li> </ol>			
Output 5: Case management and referral pathway for children and GBV survivors enhanced in all target districts	Indicator 5.1. Number of districts with integrated and updated GBV and Child Protection referral pathways	GBV = 4/7	7/7 or 100%	1. 4 out of 7 districts have established referral mechanisms in place for managing GBV and CP cases. There was no movement on this output during this reporting period <i>Percentage Achievement: 57.0% as of 2nd</i> <i>Quarter</i> <i>Total Percentage Achievement for this</i> <i>Indicator: 57.0% as of 4th Quarter 2011</i>	Activity is on target and on-going. Full completion will be achieved by 2nd Quarter of 2012	District GBV/CP referral documents for each district	
	Indicator 5.2. % increase in number of cases of children with complete information	Children = 4/7	7/7 or 100%	1. 831 child cases responded to including referral and followup activities.98 legal protection actors equipped with knowledge and skills to prevent and respond to violenceManual on Child Child/ Marriage Counselling, and on Violence against children developed by FBO.	On track	District referral documents for each district	

	on case management, including referral and follow-up activities, and case outcomes			Percentage Achievement: 70.0% as of 4th Quarter Total Percentage Achievement for this Indicator: 70.0% as of 4th Quarter 2011			
Output 6: Children formerly associated with armed groups and other children affected by conflict are supported through reception, interim care and/or reunification with families/communitie s of origin (UNICEF)	Indicator 6.1. Number of children formerly associated with armed groups and other children affected by conflict provided with support	100	500	<ol> <li>30 children who have previosuly returned from the LRA received support for their reintegration into the community and follow-up by the social workers from Gusco Centre <i>Percentage Achievement: 6.0% as of 2nd</i> <i>Quarter</i></li> <li>32 children got follow-up support <i>Percentage Achievement: 7.0% as of 3rd</i> <i>Quarter</i></li> <li>-9 (7 females, 2 males) of whom 6 were children were received and reunified in the districts of Amuru, Kitgum and Pader2 community dialogues were conducted in Bobi and Bungatira subcounties for acceptance by the communities of women and children returning from the LRA. Another 16 communities in 10 subcounties were empowered for supporting the reintegration of children formerly associated with armed conflict, to reduce stigmatization, increase social acceptance for peaceful harmonious living100 Formerly Abducted children were supported with scholastic materials and provided access to education15 Formerly Abducted Children were enrolled in vocational skills and apprenticeship trainings <i>Percentage Achievement: 60.0% as of 4th</i> <i>Quarter</i></li> </ol>	Limited number of children returned than what was planned. However the support has been re-programmed for integration of children and women returning from the LRA.	NGO reports	

		<i>Total Percentage Achievement for this</i> <i>Indicator: 73.0% as of 4th Quarter 2011</i>		

### V. FUTURE WORK PLAN

## A. Summarize the projected activities and expenditures for the following reporting period (1 January-31 December 2011), using the lessons learned during the previous reporting period.

(i) From the outset, the Implementing Partners will include an element of peacebuilding as they plan, implement and monitor their activities (UNFPA & UNICEF)

(ii) A monitoring strategy will be developed to monitor district councilors to follow up on their commitments on planning and budgeting for GBV and CP (UNFPA & UNICEF)

(iii) In the districts of Agago and Pader where Food for the Hungry (FH) have found that the community delayed to report GBV cases because they wanted to first negotiate with the perpetrators; FH will continue to use representatives of the police force in the community dialogues to educate them about how not report cases is a felony.

(iv) An impressive number of community dialogues were carried out in 2011, the Implementing Partners will devise monitoring strategies to monitor if the communities are implementing the action plans that they have agreed upon.

(v) UNICEF will advocate with the NGOs and the Local Governments to share information between local government and NGOs.

(vi) UNICEF will extend support for integration also for children who have returned before 2011 and who are already reunified with family and community in order to achieve the planned target.

vii) UNICEF will submit another proposal to the Peace Builidng Support Office, this time targeting the adult women who were once abducted girls for reintegration support and community acceptance through community support mechanisms.

#### B. Indicate any major adjustments in strategies, targets or key outcomes and outputs planned.

No major adjustments are anticipated.

Strategies to accelerate implementation of activities have been devised in partnership with the IPs. Quarterly review meetings will be held to monitor timely and quality implementation of activities.

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