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Influencing programme plans, practices, actions, and investments in humanitarian settings: Case Study One

The Baobab Research Programme Consortium

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Case Study One

Outcome Description: Number of programme plans, practices, actions and/or investments of humanitarian actors influenced by, replicated, or scaled-up in humanitarian settings and informed by Baobab's Research Programme Consortium's evidence.

Influencing programme plans, practices, actions, and investments in humanitarian settings

Para-Social Worker-Driven Intervention in Kiryandongo Settlement implemented by the Baobab Research Programme Consortium and Uganda's Ministry of Gender, Labour and Social Development

April 2024





The Population Council leads the Baobab Research Program Consortium in close partnership with the Population Council Kenya and the African Population and Health Research Center. Situated in the East and Horn of Africa, this Africa-based and African-led consortium is filling critical evidence gaps to reduce inequities in sexual reproductive health and rights among vulnerable populations in humanitarian settings.

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Summary

The global refugee crisis has been described as ‘one of the defining challenges of the 21st century’. In the East and Horn of Africa (EHA), over 5.5 million people, the majority being women and children/adolescents, face long term displacement. Not enough is known about the Sexual and Reproductive Health and Rights (SRHR) of refugees and how to effectively deliver and/or expand access to SRHR services and programming to the most vulnerable. The [Baobab Research Programme Consortium](#) (RPC) seeks to address these gaps.

With the Office of the Prime Minister (OPM)’s Department of Refugees, UNHCR and UNHCR implementing partners, the Baobab RPC conducted the first-ever Violence Against Children and Youth Survey in a refugee context, covering all 13 refugee settlements in Uganda. At a Data to Action (D2A) workshop co-hosted with the OPM, the RPC shared the findings with close to 80 key stakeholders in Uganda. Together, participants identified priorities and activities for implementation in response to the Uganda Humanitarian Violence Against Children and Youth Survey (HVACS) data as well documented in a [‘Linking Research to Action for Children in Humanitarian Contexts’](#) report. This prioritisation process led to the identification and adaptation of a **sexual violence screening intervention in Kiryandongo Settlement, to be implemented by the Baobab RPC in partnership with the Ministry of Gender, Labour and Social Development (MGLSD) and OPM.**

Impacts

- Programme implementation plans influenced by evidence from the Baobab consortium.
- Strengthened relationships between OPM, MGLSD, UNHCR and implementing partners through joint priority setting and planning to better address SRHR of refugees.
- Conditions created for reaching vulnerable adolescent refugees with SRHR services more proactively, and at scale.
- Expansion of the MGLSD Para-Social Worker (PSW) programme into new refugee contexts.

Background

The overall expected outcome of the Baobab RPC is to reduce inequities in SRHR among vulnerable populations in humanitarian settings, through the development of better evidence to inform health policies and evidence-based ‘best practices’ in humanitarian settings. The basic inputs underpinning the programme’s theory of change are research, scientific expertise, influencing research uptake, and partnership activities.

The Study

The goal of the HVACS is to enhance the well-being of children/adolescents and youth in humanitarian settings by generating data that can be used to inform violence prevention and response efforts in these contexts and for these target groups. Conducted from March to April 2022, the Uganda HVACS was a representative household survey of 13 to 24-year-old females and males drawn from all 13 refugee settlements in the country. The survey employed the standard VACS methodology¹. Key findings include the following:

- A high prevalence of GBV is experienced in childhood in refugee contexts in Uganda.
- The majority of females and a considerable proportion of males in the 18-24-year-old age range experienced their first incident of sexual, physical, or emotional violence in childhood *after* arriving in a refugee settlement.
- Physical violence is the most common type of violence experienced during childhood.
- Girls experience twice the rate of sexual violence as boys over time.
- Intimate partners and peers are the most common perpetrators of the first incident of sexual violence experienced in childhood.
- The first incident of sexual violence in childhood largely occurs outdoors, as opposed to within homes.
- Boys experience high rates of injury as a result of physical violence.
- Certain sub-groups of refugee children/adolescents and youth are particularly vulnerable to experiencing violence compared to others, including those who witnessed violence in the home, those living with disabilities, and those who are married or cohabiting.
- Children/adolescents and youth in refugee settings in Uganda have relatively high knowledge of where to seek help for violence but are unlikely to disclose experiences of violence and to obtain help or care.
- Survivors of violence in childhood experience devastating consequences, including a greater likelihood to perpetrate violence, experience mental health problems, and engage in risk-taking behaviours compared to their peers who had not experienced violence.
- There are high levels of endorsement of retrogressive traditional norms among children/adolescents and youth in Uganda's refugee settings.

¹ Chiang, Laura F., Howard Kress, Steven A Sumner, Jessie Gleckel, Philbert Kawemama, and Rebecca N Gordon. 2016. "Violence Against Children Surveys (VACS): towards a global surveillance system." *BMJ Injury Prevention* 22 (Issue Suppl 1):1-16.

The Intervention/Investment

The intervention is being piloted in Kiryandongo Settlement within Kiryandongo District by Baobab in partnership with the MGLSD. Kiryandongo has not yet benefitted from the MGLSD's national Para-Social Worker (PSW) Programme. The findings from the HVACS created an opportunity for the MGLSD to address GBV in childhood/adolescence through community based PSWs. PSWs are 'first responders,' providing prevention and response services related to child and community-based protection. Their main roles and responsibilities revolve around the identification of cases, conducting home visits, providing counselling services, referral of cases to service points, and the provision of immediate, first-line response services. Once identified and carefully selected by Sub-County Child Wellbeing Committees, they take part in a 21-day training session, led by the MGLSD, drawing on the national training manual for PSWs. The training sessions focus on a variety of subject areas including case management; childcare and protection; GBV; mental health/psychosocial support; positive parenting; counselling; self-care; and assessment, interview and data collection skills and management.

As part of the intervention, nearly 100 PSWs were trained in Kiryandongo, with a composition of 75% refugee PSWs and 25% host community PSWs, in alignment with stipulations for refugee and host community engagement by the OPM. A subset of these PSWs were further trained (by Baobab in collaboration with the MGLSD and OPM) on additional modules designed to cover more detailed aspects of GBV case management, including the use of a screening tool to proactively and systematically identify child/adolescent survivors of sexual violence, and rigorous documentation of this process. This subset of PSWs will be assigned to selected primary schools to ensure that child/adolescent survivors identified through this process receive immediate, school-based psychosocial support, with acute cases being accompanied to one-stop GBV centres for comprehensive care. Parents will be sensitised to the planned intervention through parent dialogues held in collaboration with the schools. Feedback and recommendations from parents will inform the intervention design. Parents of child survivors identified through the screening process will also be offered psychosocial support, as needed, in addition to support for improving parent-child communication around sexual violence.

The Pathways to Change

There are a number of enablers that contributed to the selection and implementation of the school-based sexual violence screening intervention. Key amongst these were Baobab building strong, trusting partnerships with a broad range of stakeholders, including state departments and coordinating bodies, UNHCR and NGOs; strengthening credibility through (i) co-convening the Data to Action (D2A) workshop with the OPM, and (ii) the utilisation of internationally recognised tools and processes to collaboratively interpret findings and build consensus on priority strategies; and follow up discussions for intervention identification and development/adaptation.

Enabler One: Building strong, trusting partnerships

The Baobab RPC team invested time and effort into building partnerships with a range of stakeholders responsible for, and working in, the prevention of GBV against children/adolescents. These include the OPM, the MGLSD and UNHCR, alongside a number of UNHCR implementing partners (iNGOs, NGOs and CSOs). Key partnerships with the OPM and MGLSD created traction for influencing programme plans, practices, actions and/or investments of humanitarian actors. The tactics employed by the Baobab RPC team in building these partnerships are documented in further detail in a separate [Baobab Case Study 3: Cementing key partnerships to foster the use of evidence in humanitarian settings](#). In summary, a combination of formal and informal relationships with key government departments and officials have been developed and sustained over time. This has required persistence, diplomacy and a deep understanding of the systems and work cultures in the Ugandan setting. The Baobab RPC is rooted in the East and Horn of Africa, its personnel are all based in the region and the majority come from the region, which gives the RPC an embedded way of working that is appreciated by their government partners. As Lydia Wasula from the MGLSD shares:

“[Baobab] respects the government structures in Uganda. Working with government through the structures makes the work sustainable so that when Baobab is not there, the programme can continue. The PSWs are now trained, and they will be there whether [Baobab] is there is not. At national and district level, it is the faces of government, not [Baobab], that the community sees.”

Enabler Two: Co-convening the Data to Action (D2A) workshop with the OPM

VACS carried out to date have typically excluded humanitarian affected populations. The 2022 Uganda HVACS, implemented by the Baobab RPC, is the first-ever representative study to estimate the prevalence of sexual, physical, and emotional violence against children/adolescents in refugee settlements. A critical output of the survey was to use the findings to identify risk and protective factors for violence and abuse to develop effective prevention strategies in refugee settings in Uganda. From June 14-16, 2023, the Department of Refugees (OPM), Uganda and the Baobab RPC, co-convened a **Data-2-Action** (D2A) workshop in Kampala. The workshop brought together close to 80 humanitarian actors operating in the country’s refugee settlements, including the MGLSD, the UNHCR Regional Bureau for the East and Horn of Africa and the Great Lakes; UNHCR Uganda; member organisations of the Child Protection Sub-Working Group, and of the National Refugee Protection Working Group in Uganda; Together for Girls; the Centers for Disease Control and Prevention (CDC), and funders. The stakeholders were drawn from the Child Protection, Education, GBV, Health, and Legal sectors.

The partnership between the OPM and Baobab strengthened the RPC’s credibility with other key actors in the humanitarian sector in Uganda. In a field where organisations tend to come and go, and where initiatives are often linked to unpredictable external funding, a meeting co-convened with the OPM demonstrated Baobab’s focus on sustainability, and on fostering an approach that would endure beyond programme timelines. The design of

the stakeholder centred D2A workshop (described below) also fostered a sense of ownership and collective accountability for action among humanitarian stakeholders.

Enabler Three: Utilising internationally recognised tools and processes to collaboratively and systematically interpret HVACS data and identify next steps

The workshop provided a space to share and consider Baobab's formative findings on GBV against children/adolescents and collaboratively identify sector-specific violence prevention priorities for interventions and other actions. Participants used the **INSPIRE: Seven Strategies for Ending Violence Against Children** technical package and the **Minimum Standards for Child Protection in Humanitarian Action (CPMS)**. INSPIRE has been utilised to guide other D2A workshops, drawing on national VACS in different settings and with diverse groups. A key trigger for success was the selection of the most appropriate actors – specifically those who are actively delivering interventions and services in refugee settings. Another trigger was convening actors to agree to prioritise actions, directly informed by the HVACS data. Together, they translated findings into prioritised and actionable next steps. The workshop facilitators used the INSPIRE and CPMS tools and encouraged participants to think outside their individual mandates to discuss and agree on what is most needed. Asking them to then consider the role their sector could play created greater ownership of the process and actions.

“Some of the findings were alarming and the workshop gave us the time and space to interpret them and prioritise around violence against children and youth in refugee settings.” Lydia Wasula, MGLSD

The priorities will help complement existing policies and plans related to GBV prevention and response for children/adolescents in Uganda and help fill in gaps that exist with regard to humanitarian populations.

Enabler Four: Serendipity and knowledge of the evidence base

During the D2A workshop, humanitarian sector stakeholders identified interventions that could be carried out immediately to begin to address some of the VAC realities highlighted by the HVACS. The proposed intervention activities revolved around appropriate, targeted provider training in various sectors (e.g., education, social, health), with a particular focus on school personnel, community-based workers, parents, and psychosocial support personnel. In addition, awareness creation around children's rights and existing violence services, and the provision of survivor-centred, multisectoral response services were pinpointed as feasible immediate actions.

Following the D2A workshop, Baobab continued discussions with the MGLSD and OPM to identify an efficient response model that would attend to several of the proposed intervention ideas above, while also addressing several of the INSPIRE strategies recommended by humanitarian stakeholders at the D2A workshop. Baobab's knowledge of the evidence on what works to enhance child/adolescent survivors' access to care in

low-resource, non-refugee settings helped to pinpoint an intervention that would meet the demands of stakeholders, while also addressing striking HVACS results on issues such as low levels of disclosure by child/adolescent survivors, and even lower levels of service-seeking for violence. The school-based intervention entails having trained psychosocial support personnel systematically and proactively screen children/adolescents for violence and provide immediate psychosocial support, coupled with referrals to comprehensive care, where necessary, for severe cases of abuse. The screening exercise is preceded by parental engagement activities to garner home-based support for child/adolescent survivors, and to help shift negative community norms around violence. This intervention brings together the top 5 INSPIRE strategies recommended by humanitarian stakeholders during the D2A workshop, as outlined in the Table below:

INSPIRE Strategies Recommended by Humanitarian Stakeholders	Relation to Screening Intervention
Education and life skills	The screening intervention will be school based, given that over 90% of children in Uganda's refugee settlements are enrolled in primary school.
Implementation of laws	Child survivors who report experiencing acute forms of sexual violence (e.g., rape) will be linked to comprehensive care at one-stop centres, which offer a multi-sectoral response to violence, including linkage to the police/justice sector.
Norms and values	The intervention involves multiple activities to shift negative norms that provoke and sustain violence against children. These include promoting open dialogue about sexual violence across the community by sensitising students, dialoguing with parents (community leaders and school personnel are included in these dialogues), screening students to provide a platform for disclosure and counselling child survivors who disclose (short- and long-term counselling, as needed).
Parent and caregiver support	The intervention involves fostering the support of parents/caregivers for child survivors through school-based parent dialogues and psychosocial support for parents of child survivors. Parents of child survivors are also provided with support to cope with the situation, strengthen parent-child communication, and to be advocates/champions for their children.
Response and support services	Children who disclose experiences of sexual violence during the screening process are immediately counselled and provided with further care through accompanied referrals to one-stop centres, if needed.

Given the MGLSD's interest in expanding its PSW model, screening and first-line psychosocial support in schools will be provided by trained PSWs. In the words of a senior official from the MGLSD:

“One of the recommendations from the D2A workshop was to strengthen structures for prevention of GBV and support to adolescent and youth survivors of GBV. We looked at whose capacities we could strengthen. The Para-Social Workers are community-owned

resource people. We wanted locally entrenched people, and we have strengthened the links between the PSWs and our officers at the local level, so they have clear reporting lines and performance indicators for their work around GBV against children and youth.”

There is a recognition from the government body responsible for refugees in Uganda that there may be further opportunities for the PSW model as Darlson Kusasira, Senior Community Services Officer, OPM, shares:

“As part of the programme, we are developing more partnerships. [Through these], more PSWs can be trained in more areas to support communities to address the problems they face.”

Furthermore, given findings from the Uganda HVACS that highlighted children/adolescents (particularly, girls) with disabilities as being significantly more likely to experience various violence forms than their peers without disabilities, stakeholders involved in the budding intervention also agreed to incorporate screening questions on disability into the sexual violence screening tool. This programme action, influenced by Baobab’s evidence, will help to ensure that the most vulnerable are proactively identified and reached with services.

As is often the case with influencing processes, serendipity has played a role in enabling some of Baobab’s intended outcomes: stakeholders just happened to select priorities that aligned with the MGLSD’s wish to expand its PSW model, and Baobab’s knowledge of the evidence base helped to pull multiple stakeholders’ wishes into a coherent, evidence-based intervention. However, strong evidence (such as that emanating from the Uganda HVACS) is necessary for serendipity to occur.

Lessons Learnt

- **Baobab’s strong, trusting partnerships**, built up over the first two years with a broad range of stakeholders, including state departments and coordinating bodies, UNHCR and NGOs, has given it a solid platform to influence programme plans, practices, actions and investments.
- **Collective action**, co-convening the Data to Action (D2A) workshop with the OPM, inviting key actors in humanitarian settings, to collaboratively interpret the Uganda HVACS findings, using internationally recognised processes to build consensus on priority strategies, **strengthened the likelihood of research uptake**.
- **Baobab can play a catalytic role** by putting the building blocks in place so that **preparation meets opportunity**. In this case, the Baobab RPC generating the evidence was the preparation. The ideas that stakeholders came up with for addressing violence at the D2A workshop provided the opportunity. From there, Baobab played a key role in making sense of all of these moving pieces to collaboratively plan a robust and appropriate intervention to address GBV against children/adolescents and youth.