

**IMPACT OF ACTIONAID UGANDA GENDER BASED VIOLENCE SHELTERS  
PROGRAM ON PROMOTION OF WOMEN RIGHTS: A CASE OF KUMI  
MUNICIPALITY**

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**S22/MUC/BPAM/008**

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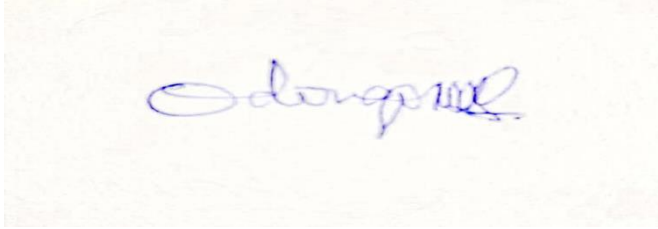


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### **SUPERVISOR'S APPROVAL**

This dissertation entitled 'Impact of Action Aid Uganda gender-based violence shelters on the promotion of women rights: a case study of Kumi Municipality' has been prepared by Elalu Stephen under my supervision and is now ready for submission to the faculty of social sciences



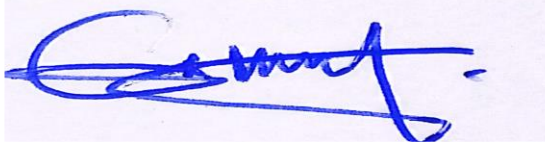
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## DECLARATION

I, **Elalu Stephen (S22/MUC/BPAM/008)**, do hereby declare that the work presented in this dissertation is my original piece and has never been presented to any institution of higher learning for any award.

A handwritten signature in blue ink, appearing to be 'Elalu Stephen', written on a light-colored background.

Signature:

Name: Elalu Stephen

Date: 30<sup>th</sup> April, 2024

## **DEDICATION**

I dedicate this piece of work to my loving wife Mebrine Nakhasaba who has always supported me in all my endeavors of life.

## **ACKNOWLEDGEMENT**

This study was made possible through the continuous support of the University Supervisor Mr. Joseph Odongo; his continued yet constructive critique and encouragement throughout the many stages of the study is well appreciated. I do thank my fellow students in the Public Administration class, my grandmother Ariokot Rose for the words of wisdom and guidance.

My sincere thanks also to all those who spared time for the interviews, the District Officials and respondents whose valuable contributions made the realization of this research possible.

## ABBREVIATIONS

ADR	Alternative Dispute Resolutions
AID	Acquired Immuno Deficiency- Syndrome
CDO	Community Development Officer
CEDOVIP	Center for Domestic Violence Prevention
CSOs	Civil Society Organizations
DFID	Department for International Development
DLG	District Local Government
FGD	Focused Group Discussions
FIDA	Federation of the women Lawyers
GBSS	Global Based School Survey
GBV	Gender Based Violence
HIV	Human Immuno Virus
KHC	Kumi Health Centre
LCs	Local Councils
MGLSD	Ministry of Gender Labor and Social Development
NAP	National Action Plan
ODPP	Office of the Director of Public Prosecution
OSC	One Stop Centre
SDGs	Sustainable Development Goals
SSA	Sub Saharan Africa
SURGE	Support to Uganda's Response to Gender Equality
UCU	Uganda Christian University
UDHS	Uganda Demographic Health Survey
UNFPA	United Nation's Population Fund
UNICEF	United Nations International Children's Education Fund
UWONET	Uganda Women's Network
VAW	Violence against Women
VAW/G	Violence against Women/Girls
WHO	World Health Organization

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## **ABSTRACT**

The study examined the impact of ActionAid Uganda GBV shelters on the promotion of women rights in Kumi Municipality. The study objectives were; to assess the situation of violence against women and girls, to find out the effectiveness of GBV shelter interventions in the promotion of women rights, and to identify the challenges in the implementation of the programs associated to GBV shelters in Kumi Municipality. The study adopted a mixed research approach ie both qualitative and quantitative approaches; Study Population, the entity comprises of 228 respondents from which a sample size of 120 respondents was drawn. The findings revealed that GBV is still rampant in Kumi Municipality, the study further revealed that there was overwhelming demand for shelter services and yet the shelter cannot take onboard more than 5 people for accommodation. Among the challenges affecting the shelter were continued threats from the perpetrators against survivors housed at the shelter and lack of financial support to the survivors of GBV who wish to start new life and lack continued sensitization. In conclusion, it was observed that GBV is still rampant in Kumi Municipality and the major perpetrators are men and its therefore the duty of individuals, community members, government institutions, NGOs and stakeholders involved in promotion of human rights to stand up and be counted as the champions of human rights. The challenge affecting the shelter is limited source of funding, short life span of the funding agencies. The study recommended that the LCs should be trained on handling GBV cases, local governments should plan to allocate funds towards shelter activities, Civil society Organizations should support victims of GBV, campaign channels should also be expanded and culprits of GBV against women should be apprehended through legal means.

## CHAPTER ONE

### 1.0 Introduction

This chapter presents a brief background of the Gender Based Violence situation giving the analysis right from the global, regional, county through to Kumi district. It describes the problem statement of the study, general objectives, specific objectives, and research questions, significance of the study, scope, geographical scope, content scope and time scope.

### 1.1 Background

Gender-based violence (GBV) is one of the most widespread human rights abuses in the world. This abuse takes place worldwide in homes, workplaces, schools and communities. Violence against women and girls is any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women and girls, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life (United Nations Report, 2013).

It encompasses many forms of violence, including violence by an intimate partner, rape, sexual assault and other forms of sexual violence perpetrated by someone other than a partner, child sexual abuse, forced prostitution, trafficking of women, as well as harmful traditional practices such as early forced marriage, female genital mutilation and honour killing (Garcia-Moreno *et al.*, 2015).

Gender-based discrimination against women and inequality of power and resources are the root causes of violence against women and girls (Fulu *et al.*, 2016). International agreements recognize that violence against women is characterized by the use and abuse of power and control in public and private spheres and is intrinsically linked with gender stereotypes that underlie and perpetuate such violence (United Nations Report, 2013).

Globally, GBV occurs in both developing and developed countries, regardless of culture, socio-economic class or religion and it varies in frequency, forms and extent from country to country (Abrahams et al., 2014; World bank, 2020). Overall, it is estimated that 30% of women have experienced at least one form of GBV in their lifetime since the age of 15 (García-Moreno & Pallitto, 2013). Evidence reveals that the problem is mostly prominent in developing countries where socio-economic status is low and education is limited, especially in sub-Saharan Africa (SSA) countries (Joanne Zellers, 2018).

In SSA countries, GBV that includes IPV and non-IPV against women is a prevalent and pertinent health challenge. More than two-fifths (44%) of women aged 15–49 years of age in SSA countries experienced some form of IPV and almost a fifth (14%) experienced non-IPV.

All types of IPV (physical, sexual and emotional violence) are common experiences among women in SSA countries, with emotional violence being the most prevalent. Women living in Eastern and Western African regions experience the highest levels of GBV (Mulunehet *et al.*, 2020).

The sub region analysis found that Eastern Africa (42%) including Ethiopia and Uganda were the most affected by all forms of IPV (Mootz et al., 2018; Fute *et al.*, 2015), followed by Western Africa (41.7%). In line with our findings, the two regions that experienced high prevalence rates of IPV in comparison to other African regions (Palermo *et al.*, 2014; Bleck & Palermo, 2015). In Eastern Africa, physical and sexual violence prevalence rates were worse and emotional violence prevalence rates were more common in Western Africa. This finding is consistent with findings of other studies (United Nations General Assembly, 2015; Greene *et al.*, 2017). This might be attributed to factors such as socio-economic class, women's disempowerment, community acceptance for wife beating and the type of community in which the study was conducted (World Bank, 2020; Greene *et al.*, 2017; Mootz *et al.*, 2018).

In Uganda, the National Action Plan on Elimination of GBV (2016-2020) frames the issue of GBV as an urgent development priority and factor to address in achieving Uganda's development goals for 2020. Similarly, the interconnected work on ending child marriage and teenage pregnancy is framed by the new dialogue on leveraging for development the demographic dividend of a large,

youthful population (National Action Plan, 2016). However, in a survey of 3,706 primary school children in the country, 24 per cent of 11 to 14 year-old girls with disabilities reported sexual violence at school, compared to 12 per cent of non-disabled girls (Devries *et al.*, 2014).

Based on Uganda Demographic Household Survey data (UDHS), Uganda has a high rate of reported GBV. The most recent data from the UDHS 2016 show that women are more than twice as likely to have experienced sexual violence at some point in their lives as men (one in five or 22% for women; one in 10 or 8% for men). The pattern holds for reports of recent sexual violence: 13% of women and 4% of men reported experiencing sexual violence in the 12 months preceding the survey.

Older women are more likely to report having experienced recent sexual violence than younger women aged 15 to 19. 13% to 16% of older women and 5% of younger women reported recent sexual violence. Women in urban areas (9%), women in Acholi sub-region (5%), and never married women (1%) are less likely than other women to report recent experience of sexual violence. Experience of sexual violence ever and in the past 12 months is lowest among women with more than secondary education (UDHS, 2016).

The central role played by Ministry of Gender, L Social Development (MGLSD) in advocacy and engagement for increased roll out of GBV interventions and financing has significantly improved over the year, however; the results of this is yet to be seen. The Minister for Gender recently (February 2020) submitted a statement to the Speaker of Parliament formally seeking government to fully take over the financing of the 15 GBV shelters (13 funded by DFID and 2 funded by Irish Aid). This is yet to be discussed by Parliament. The MGLSD has also proactively engaged with the NDPIII drafting process where GBV is highlighted as a core area for the social development sector. However overall financing of NDP set outcomes has historically fallen short (SURGE Annual Review, 2020).

Kumi District is among ten districts that benefit from GBV shelters supported by ActionAid Uganda. In 2019, Kumi District shelter received and supported 342 GBV (281 females and 61 males) survivors. Overall, 269 of these cases were concluded through Alternative Dispute

Resolution (ADR), 64 cases were referred to different referral points including clan leaderships, LCs and Police while 73 remained pending for further action at the shelter. These pending cases are among those not concluded because the perpetrators declined to cooperate and others stubbornly bridged the memoranda of understanding (Kumi GBV Shelter Annual Report, 2019). Understandably, these stubborn tendencies among the GBV perpetrators globally will enhance deep rooted practices and effects of GBV, a big threat to achieving the Sustainable Development Goal number 5.

SDG number 5 (gender inequality) among others targets elimination of all forms of violence against women and girls in all communities across all countries that should be free from IPV by the year 2030. This takes into account the deep rooted practices and effects of GBV. Therefore, all stakeholders in Uganda need to accelerate their effects towards decreasing the prevalence of IPV. Hence, there is a need for better understanding of the GBV prevalence in the communities. This will aid the government and non-government organizations to inform their policy reviews for appropriate and effective response (United Nations General Assembly, 2015).

The need for an integrated mitigation measure to reduce GBV needs to be considered as a top priority in line with the SDG target in 2030 to reduce all forms of violence in Uganda. Hence, government and private organizations such as Action Aid Uganda, should continue to understand and address the problem of GBV. This entails allocating resources and designing appropriate interventions such as women economic empowerment, strengthening GBV shelters and promoting law enforcement to ensure provision of social support to women and girls in the quest to eradicate GBV. This study therefore seeks to provide more information on the impact of GBV shelters and associated challenges of the GBV programs to women and girls in Kumi Municipality.

## **1.2 Problem Statement.**

In Uganda violence against women is on the increase despite the presence of laws and policies to protect victims and survivors. According to the Uganda Police Force's annual crime report, gender-based violence cases that were reported and investigated increased by 4% (from 38,651 to 40,258 cases) between 2017 and 2023.

According to the UBOs report 2016, 56% of ever-married women (aged 15-49) experience spousal violence, one million Ugandan women (13%) experienced sexual violence in 2017, 49% of women and 41% of men believe a man is justified to beat his wife for specific reasons.

The Ministry of Gender, Labour and Social Development assessment of key impediments to elimination of GBV in Uganda 2022, identified a number of specific and cross-cutting challenges affecting GBV and other social risk interventions. These include among others: The general lack of awareness of existing laws especially those related to GBV and women rights thus, such laws and rights are not being implemented.

There is also inadequate and unpredictable funding, substantially GBV prevention and response initiatives are donor funded by bilateral and international agencies through local and International Civil Society Organizations, e.g. UWONET, Plan International, FIDA, ACTION AID etc. Funding of GBV programs is not holistic but unpredictable in nature and does not guarantee sustainability once the donors pull out when the project cycles end. There are no specific budgets for management of social risks and GBV prevention and response.

The government of Uganda has tried to come up with policies and laws against GBV. Perpetuators against GBV when apprehended are charged according to the stipulated laws. Sensitization of masses has been done on GBV. The donors and the Non-governmental Organizations have tried to support course towards elimination of GBV. Organizations like Action Aid Uganda, Care International, UNICEF and TPO have tried to raise funds to support programs aimed at eliminating GBV, conducted counseling services, opened up GBV Centres, offered free legal services to the victims and trained GBV ambassadors in the communities they are working in. Despite these interventions, violence against women and girls still persists. One wonders why gender-based violence continues to persist despite support from Action Aid GBV Shelters and other development partners promoting women's rights. It's against this background that this study seeks to generate data on the impact of GBV shelters in the promotion of women rights as well as investigate on what can be done to improve on the effectiveness of Action Aid Uganda GBV shelters in promoting women rights in Kumi Municipality.

### **1.3 General objective**

To examine the impact of Action Aid Uganda GBV shelters on the promotion of women rights in Kumi Municipality.

### **1.4 Specific Objectives**

2. To assess the situation of violence against women and girls in Kumi Municipality.
3. To find out the effectiveness of GBV shelter interventions in the promotion of women rights in Kumi Municipality.
4. To identify the challenges in the implementation of the programs associated to GBV shelters in Kumi Municipality.

### **1.5 Research Questions**

2. What is the situation of violence against women and girls in Kumi Municipality?
3. How effective are the GBV shelter interventions against women violence in Kumi Municipality?
4. What challenges does AAU face in the implementation of GBV shelters in Kumi Municipality?

### **1.6 Significance of the study**

The findings of this study will generate knowledge on the practice and impact of GBV in the community. Since the study seeks to identify effective prevention measures to be enforced by community leaders in the fight against GBV, these data will add into the existing literature in the similar field to enhance future research.

The study will also be useful to unveiling current information on GBV critical for enhancing policy engagement right from the community level to the District level. Such information will be

beneficial for aiding resource allocation and relocation during planning and budgeting processes. This could also be useful for efficient service delivery since it will provide necessary information for both government and intervening agencies.

The research findings can as well be helpful in mobilizing government and donor support for sustaining continuity of GBV shelters and implementation of their programs. This can lead to reduced GBV prevalence, promote harmonious families as well as improve quality of livelihood of GBV survivors and targeted communities in general.

The findings will be used for strengthening alternative dispute resolution methods such as reconciliation, mediation and arbitration for use when dealing with GBV cases in the community. The information from this study can also enhance increased awareness of the existing laws and rights that support women workers and school girls. This can lead to enhanced implementation of the laws and policies leading to improved work environment and increased efficiency in implementation.

Additionally, the knowledge generated from this research can also be important for reducing sexual violence, harassment and neglect especially among girls to boost girls' school enrolment and study cycle completion in Kumi municipality.

## **1.7 Scope of the study**

### **1.7.1 Geographical Scope**

Kumi Municipality where the study was carried out is located in Kumi District which is which is approximately 305 km northeast of Kampala Capital City along Soroti highway. The research was conducted in 8 wards within two Divisions in Kumi Municipality. These wards included Bazaar, Aterai, Aputon and Kelim in South Division and Kabata, Otaaba, Olungia and Okouba in North Division. In each ward, two villages/cells were considered that is to say Bazaar ward (Bazaar A and Bazaar B), Aterai (Osioda and Aterai A), Aputon ward (Aputon A and Aputon B), Kelim Ward (California and Agoria) all in Southern Division. In Northern division, the following villages were

considered; Kabata Ward (Kabata A and Kabata B), Otaaba Ward (Otaaba North and Otaaba South), Olungia Ward (Aputon and Amagoro) and in Okouba (Okouba Central and Okouba West). The total number of villages were therefore 16.

### **1.7.2 Content scope**

The study focused on information and data from different authors in the areas of women, girls and children rights. This enabled the use of press releases, reports and other relevant documents from government and non-government agencies such as Ministry of Gender, Labour and Social Development and Action Aid Uganda respectively. Overall, the study aimed at assessing the impact of GBV shelters amongst women and girls in Kumi Municipality. Structured questionnaires were used as the main data collection tool. Interview guides were also used for soliciting information from the key respondents.

### **1.7.3 Time Scope**

The study covered shelter activities from 2020 to 2024. This time frame was chosen because it was the period when SURGE (Support to Uganda's Response to Gender Equality), a four-year program supported by UKAID to the Government of Uganda.

## CHAPTER TWO

### LITERATURE REVIEW

#### 2.0 Introduction

This chapter presents the definitions of key terms used in the context and review of literature based on specific objectives of the topic. The aspects covered include; situation analysis of violence against women and girls, effectiveness of GBV shelters in the promotion of women rights and challenges in the implementation of shelter-based programs.

#### 2.1 Definition of key terms as per United Nations (UN)

The United Nations General Assembly of 1993 adopted key definitions associated with GBV as seen below;

**Gender:** refers to the social attributes and opportunities associated with being male and female and the relationships between women and men and girls and boys, as well as the relations between women and those between men.

**Gender-based violence:** Violence involving men and women, in which the female is usually the victim; and which is derived from unequal power relationships between men and women.

**Gender equality:** Equal treatment of women and men in laws and policies, and equal access to resources and services within families, communities, and society at large.

**Gender equity:** Fairness and justice in the distribution of benefits and responsibilities between women and men.

**Gender Violence:** any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life”.

**Intimate partner violence:** Any behavior by a man or a woman within an intimate relationship that causes physical, sexual or psychological harm to those in the relationship.

**Violence:** The use of physical force so as to injure, abuse, damage, or destroy.

**Violence against women:** Any public or private act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty.

## **2.2 The situation of violence against women and girls**

Violence against women and girls is one of the most prevalent human rights violations in the world. It knows no social, economic or national boundaries. Worldwide, an estimated one in three women will experience physical or sexual abuse in her lifetime. Gender-based violence undermines the health, dignity, security and autonomy of its victims, yet it remains shrouded in a culture of silence. Victims of violence can suffer sexual and reproductive health consequences, including forced and unwanted pregnancies, unsafe abortions, traumatic fistula, sexually transmitted infections including HIV, and even death (UNFPA report, 2016).

Similarly World Health Organization indicates that one in five women is sexually abused as a child. It further states that women who have been physically or sexually abused are 16 per cent more likely to have a low-birth-weight baby, and they are twice as likely to have an abortion. In some regions, they are 50 per cent more likely to acquire HIV. Despite the extensive work done by women’s organizations, governments and other partners, many women and girls who are subjected to violence still lack access to essential services that support their safety, health and access to justice (WHO Report 2018). It’s from this background that the study would like to find out find out what Action Aid Uganda has done in relation to the same.

In another study conducted by the World Health Organization 2017, it was estimated that the lifetime prevalence of intimate partner violence among female youths aged 15–19 was 29.4 and 31.6% for ages 20–24. The highest prevalence of intimate partner violence was reported in the African region, particularly in Sub-Saharan Africa (65.64%). Evidence from Sub-Saharan Africa (SSA) showed high rates of GBV in educational institutions. Results from the Global Based School Survey (GBSS 2017) revealed that the magnitude of current physical and sexual violence in five African countries ranged from 27–50% and 9–33%, respectively.

GBV is reported as a common practice in SSA and sexual violence prevalence is high in some countries such as Zambia (90%) and Ethiopia (711%). According to the Gender Equality Index Report, which includes data on reproductive health, employment, and empowerment, 27 of the 30 countries in the world that exhibit un-equitable gender indices, are in Africa. Most African cultural beliefs and traditions promote men’s hierarchical role in sexual relationships and especially in marriage. Almost two-thirds (63%) of the African population live in remote rural settings that increases the difficulty to access basic amenities and communities are disparate from the influence of central government or laws that prohibit GBV. Only 22 African countries have adopted laws that prohibit GBV

The research carried out in South Africa among adolescents aged 10–17 years by UNICEF 2015, it was estimated that the lifetime prevalence (incident) of physical abuse was 56.3% (18.2%), emotional abuse 35.5% (12.1%), and sexual abuse 9% (5.3%). Researchers revealed the prevalence of attempted rape (18.7%), actual rape (23.4%), physically violent harassment (8.7%), verbal harassment (24.2%), and forced sexual initiation (11.2%) among female students in Wolaita Sodo University.

Ineffective laws pose a big challenge to the fight against VAW. Laws such as the Penal Code (Amendment) Act 2007, the Domestic Violence Act 2010, the Sexual Offences Bill and the Marriage Bill do not address key aspects of VAW. None of these laws criminalize marital rape, for instance. The Domestic Violence Act does not cover cohabiting partners, while the 2004 amendment to the Land Act of 1998 requires spousal consent to sex, but does not recognize coownership of land between spouses.

The 2016 Uganda Demographic and Health Survey revealed that up to 22% of women aged 15 to 49 in the country had experienced some form of sexual violence. The report also revealed that annually, 13% of women aged 15 to 49 reported, experiencing sexual violence. This translates to more than 1 million women exposed to sexual violence every year in Uganda. Violence against women has recently taken new, more sophisticated forms. An increasing number of women are, for instance, reporting cyber-bullying and abuse through social media and smartphones.

The Land Act also fails to recognize customary land tenure systems to permit women to act as co-owners/managers of customary land, and creates weak protections for widows who seek to inherit their husband's land, says (Ms. Musiime Report 2016. She also points out that the Employment Act, 2006 restricts punitive action in sexual harassment cases at work to an employer or his representative, saying nothing of physical, sexual and verbal abuse by coworkers.

A look at the budgets for the sectors mandated to address VAW/G is worrying. While activities are listed in the budgets, there are no monetary allocations. Most of the work on VAW/G is donor funded and concentrated in project areas," says Diana Kagere Mugerwa, the media and national advocacy officer at the Center for Domestic Violence Prevention (CEDOVIP), a local civil society organization. In 2016 and 2017 the Ministry of Gender, Labour and Social Development budgeted to spend UGX 1.68 billion (\$450,000) on VAW programmes, a great deal of which has been coming from donors such as Irish Aid and the United Nations Population Fund. This, according to Ms. Mutavati, is not sustainable.

According to MGLSD's Ministerial Policy Statement for Financial Year 2017/2018, during that period the Directorate of Gender and Women Affairs had only 10 staff members, a fraction of the workforce required. The Child and Family Protection Unit of the Uganda Police Force has only 645 police officers to cover 112 districts. This makes it hard for the police to respond to the numerous reported cases. Police also lack the requisite skills and financial support to investigate VAW cases. Justice is frustrated by an inadequate number of critical facilities, like shelters where VAW victims can be accommodated and receive counseling and other support before returning home, as well as an absence of specialized courts where it is safe for women to report their cases. While there are specialized courts on corruption, environment, terrorism and other cases, there are no such courts for VAW cases.

A 2015 report by the International Justice Mission indicates that 40% of widows experience actual or attempted property grabbing in their lifetime. More than 30% of widows are victims of property grabbing. In many cases the widows spoke of perpetrators (usually relatives of their deceased husbands) threatening and physically assaulting them and sometimes making attempts on their lives and those of their children.

According to statistics from the Office of the Director of Public Prosecution, out of 1,594 new rape and 7,618 defilement cases reported in 2015 and 2016, only 57% brought punishment to the perpetrator. Such a low number gives others a sense of impunity, and in so doing exacerbates VAW.

### **2.3 Effectiveness of GBV shelters in the promotion of women rights**

Violence against women (VAW) is associated with harmful health consequences and is a major public health concern. VAW is also a barrier to achieving Sustainable Development Goal 5 on gender equality and women's empowerment, and Sustainable Development Goal 3 on health. In this regard therefore One Stop Centres (OSC) or shelters was considered as one way of fighting against gender based violence. One Stop (OSC) Model is defined as an inter-professional, health-system based centre that provides survivor-centred health services alongside some combination of social, legal, police and/or shelter services to survivors of intimate partner violence (IPV) and/or sexual violence (SV).

When this model was established in Malaysia in 1994, the model was replicated throughout South East Asia and Western Pacific regions. It has now been widely implemented with donor support in several African countries and similar models are emerging in Latin America. The majority of OSCs are hospital-based, typically within tertiary care facilities, while others are stand-alone centres that provide basic health services.

The development of the OSC model was a response to numerous of issues identified by survivors and their advocates when seeking services in traditional (non-integrated) healthcare, police and legal systems. Survivors often need several multidisciplinary services that are scattered in different

locations. They frequently need to retell their stories of trauma each time they engage with a different service/sector which can contribute to secondary victimization. The intended results of the OSC model are to increase accessibility, acceptability, and quality and multi-sectoral coordination of care in order to reach the ultimate goal of reducing survivor re-traumatization when seeking care.

In countries where this model has been implemented, some barriers have been identified that are preventing it from its intended results. Implementation of the OSC model faces several barriers including insufficient staffing, basic equipment and sustainable funding which prevented many OSCs from enacting even low-level changes, such as adequate staff trainings on trauma-informed care.

With these constraints, the OSC model always faces significant barriers in producing higher-level changes, such as improved multi-sectoral coordination and accessibility of services. Multiple external factors often hindered implementation and achievement of intended results, such as lack of political will and government investment on issues of IPV. Many of the barriers identified in the OSC model are similar to those identified for services being provided in traditional (non-integrated) models for survivors of violence.

In Bosnia and Herzegovina women shelters are struggling to provide adequate protection to women survivors of violence and their children, as domestic violence is likely to be on the rise due to the COVID-19 crisis. As part of the response to the crisis, UN Women conducted a rapid assessment of the status of specialized services provided by eight shelters in the country to find out their immediate needs in order to sustain their activities. Because of the isolation measures and movement restrictions during the pandemic, women confined to their homes have little recourse if they experience violence at home. Although official statistics are not available, there has been an increase in calls to hotlines and requests for psychological counselling and legal aid. While all safe houses in the country remain open and functional to provide shelter, psychosocial support and other support services to survivors and their children, they lack capacities and unable to receive new beneficiaries due to high risk of infection and inability to provide space for self-isolation.

This is the case with the safe house “Foundation of Local Democracy” in Sarajevo, the capital, which cannot shelter new beneficiaries. “We have been forced to suspend admission of new beneficiaries, and women who report violence are now unable to receive protection of a safe house,” explains Mubera Hodžić Lemeš, the manager of the safe house. According to Lemeš, the situation is causing increased stress and anxiety for women who have already survived trauma.

One of the biggest issues that safe houses report is the lack of personal protective equipment for shelter staff due to a shortage of supplies on the market and the already limited financial resources of safe houses. Safe houses are in dire need of masks, gloves, hand sanitizers, disinfectants, and other protective equipment.

In Kenya, one programme that was housing LGBT refugees with protection concerns in low-profile private apartments around Nairobi, where they can live inconspicuously in the general community. However, they were safe only as long as they did not outwardly identify as LGBT. In Thailand it was noted that, given the gender norm that “men can protect themselves” and the stigma attached to men using safe shelters, an independent living arrangement model may be more accessible to and culturally appropriate for men and teenage boys.

In Uganda for now 20 years, Action Aid has gathered experience in prevention and response to Gender Based Violence. Action-Aid Uganda started by designing and implementing the Women Won't Wait (WWW) campaign aimed at addressing the Intersection of HIV Infection and Violence against Women and Girls. This resulted in the piloting of Women Protection Centre (WPC) model in three districts of Mubende, Pallisa and Nebbi. The results and experiences from the pilot deeply informed DFID's support in the establishment of seven additional Centres in Kumi, Katakwi, Mubende, Kween, Amuru, and Kampala (Bwaise). Two additional shelters of Lira and Gulu were later established with support from UNFPA under the Joint UN Programme on Gender Equality (2012-2014). The Gender Based Violence Shelters project contributes to SURGE (Strengthening Uganda's Response to Gender Equality), a four-year programme (June 2016 to May 2020), supported by DFID.

## **2.4 Challenges in the implementation of shelter-based programs**

The challenges faced by shelter-based programs vary from country to country or from location to location. However, the major challenges are socio-economic in nature as unfolded below.

Social norms and structures reduce women's access to support services. Despite well-established international, regional, and national commitments to women's equality and human rights, they continue to be violated in many states and social attitudes tolerate the persistence of women's lower status and abuse against them.

In some areas, women are at greater risk of violence if they seek shelter, such as through future retaliation by the abuser, family, or community members; or state prosecution, for example, where rape survivors can be charged with adultery. Women may face discrimination and stigmatization from the community for disclosing their experience of abuse, or risk losing custody of their children, in contexts where fathers are given preferential parental rights.

Lesbian, bi-sexual, transgender and queer women who are abused by partners may isolate themselves in an effort to keep their relationship secret or avoid social stigma. Marginalized women may face hostile attitudes from police, health and other service providers who condone acts of violence against them. In these and many other contexts, women tend not to seek shelter until they feel there is no other option (Alberta Council of Women's Shelters, 2015; Barrett & St. Pierre, 2016).

Women's unequal economic status and the financial burdens placed on those seeking shelter (e.g. related to finding new accommodation or leaving ones' community and employment) is a significant challenge for women to escape abuse. This is particularly challenging for those in low socio-economic situations or women who are financially dependent on their abuser. Women with disabilities and older women may also be dependent on abusive caregivers and avoid seeking help due to fear of loss of basic care, affection, and financial means. Economic control and abuse by partners or care givers may further hinder a woman from accessing support, through strategies which prevent or interfere with her education and employment; control her access to economic resources (Rees & Wilson, 2015).

Low awareness among women and girls about their rights; Shelter efforts to raise awareness about women's abuse, their rights, and options for leaving a violent situation may be challenge in settings where: women's status is considered secondary to men; there is greater acceptance that violence against women is justified (by both women and men); and in settings with high illiteracy or social isolation, which limit women's access to written advocacy or informational materials, including on services and initiatives addressing violence in their community.

For example, marginalized groups of women and girls (such as migrants, indigenous groups, adolescents, those in rural areas, with disabilities, etc.) may be uncertain of their legal rights or have limited access to information on their rights due to the multiple forms of discrimination they face and the limited capacity of shelter outreach efforts to fully engage the diversity of women in the community (UN-Habitat, 2010).

Limited availability and coverage of safe shelter spaces is also a challenge to many shelters. In many areas of the world, demand for shelter services often exceeds availability and, in some countries, shelter facilities may remain few (often limited to the capital city or urban areas) to none. For example, the 3<sup>rd</sup> Global Shelter Data Counting 2011 found that during a single day, 56,308 women and 39,130 children sought shelter from domestic violence in 36 countries across regions, while 12,342 women and children were turned away from services due to limited space and resources. Even in countries with shelter facilities, there are particular shortages of services in remote and rural areas, affecting women from smaller communities, including indigenous groups, who may already be isolated and marginalized from available assistance.

In addition to the lack of physical facilities, survivors in rural areas are challenged by a lack of anonymity and confidentiality when attempting to seek support, or may live miles from the nearest neighbour, friend or family member and have fewer means to access to child care, job opportunities, transportation and services. This context is perpetuated by the restricted legislative and policy environment and limited government commitment to such services. For example, funding for emergency shelter, but few resources for subsidized housing or transitional support, (Global Network of Women's Shelters, 2011).

There is narrow scope of services offered by the shelters. Many shelters globally remain in the early stages of development. Services are most often designed for survivors of domestic violence, who may comprise the majority of women seeking shelter in many settings. In general, there are few shelters able to meet the diverse needs of specific groups of women; from physical facilities and services accessible by those living with physical and cognitive disabilities; programming tailored to the needs of girls and adolescents

Inadequate budget support and related limitations on available services; Protection and services for women and girls escaping violence require sustainable funding, which should be allocated from dedicated state funds, as part of their due diligence obligations. Although shelters often receive funding from the state and donors, government funding has historically been inadequate and inconsistent over time.

Funding from donors is often equally project-driven and disconnected from the aspirations of the groups providing services. Insufficient or lack of consistent funding for shelters exacerbates the sustainability and capacity limitations of survivor support organizations. Many shelters do not have staff with expertise on resource mobilization and fundraising; often struggling with the process of applying for and securing funding for their services. Without sufficient funding, organizations are often unable to afford or sustain human and organizational resources, technical support and other assets, such as providing ongoing crisis and transitional accommodation or facilitating women's access to the full range of health, legal, security, psycho-social and outreach/community supports necessary to reduce their risk of future abuse.

Even with promising action plans, sound communications, and qualified employees, shelters often struggle to secure adequate funding to meet the demands and respond to the needs of all women seeking their assistance. This reduces the number of women who may be assisted, lowers retention of skilled employees and volunteers, and affects the overall quality of services provided (UN-Habitat, 2010)

In addition to the above, there is lack of long-term support to clients. Ensuring women and their children are able to access safe affordable housing options when leaving a shelter is a significant challenge in many settings. For example, women who are economically dependent on their partner or other family members are often faced with the options of staying in the abusive situation or becoming homeless. Lack of second-stage shelter facilities forces a significant backdrop.

## **2.5. Conclusion.**

From the literature reviewed, there is critical evidence that gender-based violence against women and girls does not only impact them, but affects the entire society in socio-economic and political spheres. It's not only a domesticated issue but global in nature. A number of approaches have been tried to alleviate the issue in the different parts in the world as seen in the literature but what works in one country may not necessarily work in another because of differences in cultures and commitments made by the different governments.

Promotion of shelter approach as a way of mitigating violence against women and girls is one approach that has been implemented in Uganda with support from development partners like DFID and Action Aid Uganda. From the literature that the researcher has reviewed, there is little mention of impact of gender violence-based shelters as a strategy for fighting against the vice. It's based on this background that the researcher developed interest in finding out the impact of these shelters in promoting human rights for women and girls in Kumi Municipality.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.0 Introduction**

This chapter presents the methodology that was employed to conduct the study. It describes the research design, area of study, study population, sampling procedures, sample size, sampling techniques, data collection methods and instruments, quality control methods, data management and processing, data analysis, ethical considerations limitations and of the study.

#### **3.1 Research design**

The study adopted a mixed research approach I.e. both qualitative and quantitative approaches. A case study and descriptive research design were used as research designs for this research. Quantitative technique of data collection with use of structured questionnaires was used for eliciting information from the women and girls' respondents who had ever sought for services against GBV and the GBV shelter in Kumi Municipality. Qualitative data collection techniques with the aid of interview guides were used for eliciting information from the key respondents who were purposively selected. This provided in-depth information on the subject matter from the people who handled GBV cases on their day-to-day work.

#### **3.3 Area of study**

The study was carried out in Teso sub-region which is found in Eastern Uganda. The study was specifically carried out in Kumi District-Kumi Municipality. Kumi Municipality has 2 divisions which are Northern and Southern with 4 wards in each. All the 8 wards were considered for this particular study and in each ward, 2 villages were selected making a total of 16 villages included in the study. This was done in the quest of having a representative sample. These wards include Bazaar, Aterai, Aputon and Kelim in Southern Division and Kabata, Olungia and Okouba in

Northern Division. Kumi District is approximately 305 km northeast of Kampala capital city along Soroti highway.

Kumi district has a population of approximately 239,268 people and it covers a total area of 1,055.8 sq.km (Uganda Bureau of Statistics, 2017). Majority of the inhabitants are Iteso.

### 3.4 Study population

The study population comprised of both male and female respondents, literate and illiterate (details shown in Table 1) from Kumi Municipality. Furthermore, the professionals that directly dealt with issues of gender inequality especially those affecting women and girls were included in the sample such as Community Development Officer (CDO), Probation Officer, Police, Local Councils, women and girls protection actors within the area of study.

**Table 1: The target population and the corresponding sample**

Category of respondents	Target Population	Sample Size	Sample technique
Technical/political leaders	18	10	Purposive sampling used to generate qualitative data
Beneficiaries- women	150	80	Stratified sampling method.
Beneficiaries- girls	60	30	Stratified sampling method
Totals	228	120	

**Source: Primary data January, 2024**

### 3.5 Sample Size

In determining the sample size, the researcher used Krejcie and Morgan table (1970) as cited by Amin (2005) (Appendix I). Since the population to be sampled for the study is 228, according to

the Krejcie and Morgan table (1970), the researcher took a sample size of 120 to be disproportionally distributed amongst the different strata of the population (Table 2)

**Table 2: The sample size of the study**

<b>Category of respondents</b>	<b>Location</b>	<b>Number</b>	<b>Data collection tool to be used</b>
Chief Administrative Officer	District	1	Interview guide
District Chairperson	District	1	Interview guide
Magistrate	District	1	Interview guide
District Community development Officer	District	1	Interview guide
Probation Officer	District	1	Interview guide
Community development Officers	Municipal Divisions	2	Interview guide
GBV Desk Officer	Action-Aid Kumi	1	Interview guide
Police gender desk (female)	Child and family protection unit	1	Interview guide
Representative for KUNEDO	KUNEDO	1	Interview guide
Women	Kumi Municipality	80	Structured questionnaire
Girls	Kumi Municipality	30	Structured questionnaires
Total		120	

**Source: Primary data January, 2024**

**N.B** 2 FGDs were held that is to say one in Northern Division and one in Southern Division and the category of participants were the opinion, cultural and natural leaders.

### **3.6 Sampling techniques**

Purposive and stratified sampling methods were used in this study. A purposive sampling technique to get the respondents to give technical information from informants (politicians and technical staff in order to generate qualitative data), while stratified random sampling technique was used to identify the actual respondents from the two strata's of women and girls. 30 girls and 80 women were identified and, using questionnaire tools. This part of the respondent gave quantitative data

### **3.7 Data collection techniques**

The researcher used both qualitative and quantitative research instruments for collecting the required data as discussed below.

#### **3.7.1 Questionnaire**

Quantitative data was collected using individual survey questionnaire, designed in English and administered to women both literate and illiterate women with the help of the research assistants. This questionnaire covered all the thematic areas of the research as revealed by the research objectives.

#### **3.7.2 Key Informant**

The key informants was to generate qualitative data from people who have understanding and experience on the issues surrounding GBV. An interview guide was used to collect qualitative data from key informants representing the different categories of the population. This included district technical staff and politicians

### **3.7.3 Document Review**

The use of document review as a method for data collection was used as secondary sources of data. Relevant documents from the district and NGO offices were reviewed to get related data to this study. The documents reviewed included monthly, biannual and annual reports, policy statements, press releases and related books and research works. The use of these documents enabled the researcher to make an informed comparison between interpretation of events and those recorded in the documents. Copies of relevant data from reviewed documents were obtained for further use in the study.

### **3.8 Data collection procedure**

First and foremost, the researcher obtained a letter of introduction from Uganda Christian University that was presented to the concerned authorities in the field. After clearance was obtained from the relevant authorities, the researcher presented the same letter to the various respondents before any interview was obtained. As stated above, a structured questionnaire was used for eliciting quantitative information from the respondents while interview guides were used for obtaining information from the key respondents. It also suffices noting that an interview was only conducted when the respondent had consented.

In order to collect information, the researcher identified and recruited three research assistants who were constituted into the research team. A preparatory meeting was organized to debrief them before conducting data collection.

### **3.9 Quality control**

**Validity;** Pre-testing of the research tools was done in bid to ensure that right information was collected. The pre-test was utilised for checking on the aspects of duration of interview, estimate possibility of fatigue, comprehension of questions and their applicability and examine the

procedures for conducting the interviews. To improve on the clarity of field questions, adjustments were done on the questionnaires based on the feedback from the pre-test

**Reliability;** to ensure reliability, the questionnaires were be administered in an interview session by the principal researcher and the trained research assistants. The researchers explained the purpose of the study to the respondents. Additionally, they also gave the assurance of confidentiality and anonymity and their consent to participate in this study was sought for. This was done to motivate them to freely and openly offer information on the subject matter.

The researchers probed to offer clarity for some questions to obtain a reliable response. All questions in the questionnaire were completed and further clarifications ensured before ending the interview session. Later, the researcher perused through the questionnaires to ensure their completeness, consistency and accuracy before data.

### **3.9 Data presentation and analysis**

For quantitative data, it was edited, coded and tabulated to ensure data accuracy, uniformity and completeness. Epi-Data software was used for controlled data entry and it was then exported to SPSS software version 20.0 for analysis. This information was presented using Frequency tables and descriptive statistics.

For qualitative data, analysis began right from the time of data collection. While in the field, notes were taken during the interviews and review of documents. The responses were organized in themes and structured as per the order of the objectives. Similar responses were therefore grouped together in order to generate meaningful information.

### **3.10 Ethical Considerations**

Once again, a letter of introduction from Uganda Christian University was obtained in order to introduce the researcher to the respondents.

Informed consent was sought from the respondents before interviews were conducted. Confidentiality of the respondent's information was ensured by the researcher by not including names of the respondents on the questionnaires. The researcher also ensured that the interviews were conducted in secure places, in Ugandan. The researcher avoided conducting interviews in crowded places.

### **Informed Consent**

All participants were informed about the purpose of the study prior to being asked to give written informed consent to participate. They were guided to know exactly what they would be asked to do, and what the risks would be before they agree to take part. An information sheet providing potential participants with information about the study was used. This information included who the researcher was, where the researcher came from, how and why the respondents were selected.

### **Voluntary Participation**

No incentives were provided to coerce the participants to take part in the study. The researcher solely relied on the consent of gatekeepers during the Focus Group Discussions. Their consent was mainly needed before the researcher can approach the community, NGO and the DLG staff, but individual potential participants were fully informed, with their option of not taking part. Where some of the key informants failed to complete and return a questionnaire as agreed, the researcher took effort to follow-up requests without necessarily provocation.

### **Respect Individual Autonomy**

The participant's freedom to decide what to do was perfectly respected. Even where someone had consented to study, they would be made aware that they are free to withdraw from the study at any time, without giving a reason.

### **Avoid Causing Harm**

The researcher would always do their best to minimize and avoid causing harm during the study. However, judgments' were made about what acceptable levels of harm are.

### **Maintain Anonymity and Confidentiality**

The researcher took more than this basic step to protect a participant's identity. Making data 'anonymous' (removing the contributor's name) was respected. Other information that helped to identify people, for example; job title, age, gender, length of service or group name was strongly expressed opinions. Where the aim of the researcher was specifically to access private feelings, stories, and concerns the issue of confidentiality of that data were highly guaranteed.

### **Objectivity**

Objectivity was maintained during data analysis and reporting. The data collected was never falsified or changed in any way beyond the necessary editing. All the meanings of the data was maintained in their original versions but only necessary grammar checks were ensured to ensure accuracy and communicability of the data presented.

In conclusion, research on violence against women and girls is a key component of any program designed to end the problem. Given the nature of the phenomenon, the standardization of concepts related to it becomes necessary, in order not only to reach a consensus on what to consider as violence against women, but also to reduce the heterogeneity in the methods to measure the problem and the associated factors.

Although in the past two decades the research literature on violence against women has greatly increased, it shows the existence of relevant research bias that could be determining our knowledge of the problem and, therefore, limiting the development of efficient interventions to end it.

## CHAPTER FOUR

### FINDINGS AND INTERPRETATIONS

#### 4.0 Introduction

This chapter presents the background characteristics of the respondents, situation analysis of violence against women and girls, effectiveness of GBV shelter interventions and challenges in the implementation of programs associated to GBV shelters in Kumi Municipality. Tables, graphs and charts shall be used for presenting information.

#### 4.1 Demographic characteristics of the respondents

The following variables were considered; age, sex, marital status level of education, religious affiliation and occupation. These were considered in order to give a general a background of the respondents that were involved in the study.

##### 4.2.1 Age of respondents

The age of 12 years and above was considered because nationally accepted age of consent in Uganda is 12 years.

*Table 3: Age of the respondents*

Age group	Frequency	Percentage
12-19	15	12.5
20-29	50	41.7
30-39	40	33.3
40+	15	12.5

<b>Total</b>	<b>120</b>	<b>100</b>
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**Source: Primary data, 2024**

Results in Table 1 show that, majority of the respondents were between 20-29 years of age as represented by 41.7% followed by those in the age group 30-39 as represented by 33.3%. Those above 40 years constituted 12.5% of the sample. These results therefore indicated that majority of the respondents were still within the reproductive and very productive population.

#### **4.2.2 Marital status**

Marital status was considered for this study because women and girls may experience gender-based violence differently due to their marital status.

**Table 4: Marital status of the respondents**

<b>Marital status</b>	<b>Frequency</b>	<b>Percentage</b>
Single	18	15
Married	73	61
Widowed	12	10
Divorced/Separated	17	14
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data, 2024**

From Table 2 above, results show that majority of the respondents were married as represented by 61%, followed by those divorced/separated represented by 14%. Those respondents who were single constituted 15% while the widowed constituted the least as represented by 10%.

#### **4.2.3 Level of education**

Level of education can influence one’s vulnerability to gender-based violence where the less educated are more vulnerable because of inability to comprehend what their rights are. Table 3 shows respondents’ level of education.

**Table 5: Respondents level of education**

<b>Level of education</b>	<b>Frequency</b>	<b>Percentage</b>
None	8	7
Primary	80	66
Secondary	24	20
Tertiary	8	7
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

From Table 3, majority of the respondents had only attained primary level of education as represented by 66%. Those with secondary education constituted 20%, while those with no education at all were 7% and those with tertiary education were also 7% of the sample. With Universal Primary Education (UPE) and Universal Secondary Education, more students are able to attain those 2 levels of education and eventually drop out.

#### **4.2.4 Religious affiliation**

**Table 6: Religious affiliation**

<b>Religious affiliation</b>	<b>Frequency</b>	<b>Percentage</b>
Catholic	51	42
Protestant	38	32
Pentecostal	24	20
Muslim	7	6
<b>Total</b>	<b>120</b>	<b>100</b>

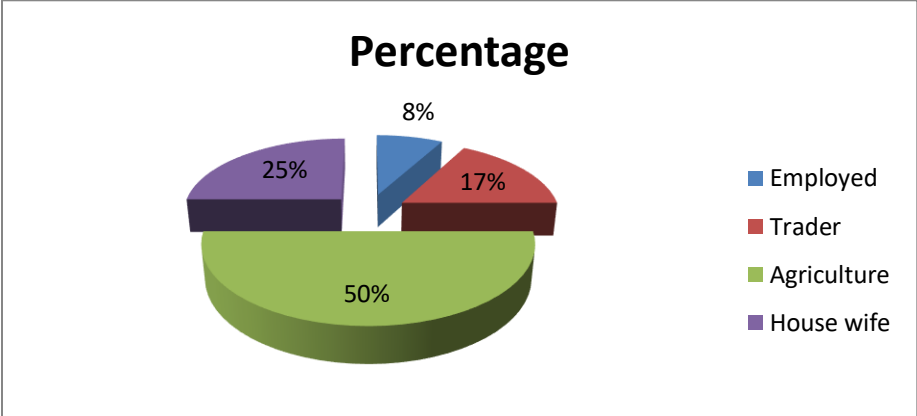
**Source: Primary data 2024**

In regards to religious affiliations of the respondents, majority were Catholics as represented by 42%, followed by Anglicans at 32%, Pentecostals at 20% while Muslims constituted only 6%. This relates to the national statistics that places Catholic religion to be the dominant in Uganda. In the Arab world which is predominantly Muslims, cases of gender-based violence were common as reported by UNICEF survey in Oman and other countries 2017. However, in Uganda, such studies haven't been taken thus its quite hard to attach religious affiliations to domestic violence.

#### 4.2.5 Occupation of the respondents

Occupation of respondent is likely to influence GBV against women, in that women in gainful employment to a greater extent are economically empowered as compared to their counter parts who are unemployed. They are able to make decisions and can stand alone when need arises thus they cannot tolerate harassments from men. Figure 1 below shows occupation of respondents.

**Figure 1: Pie chart showing occupation of the respondents**



As shown in pie-chart 1, majority of the respondents derived their livelihoods from agriculture as represented by 50%. Despite the fact that the respondents were staying in town, they still had strong attachments to their villages where they practiced agriculture. Another 25% of the

respondents said they were housewives thus they derived their living from their spouses while 17% were involved in petty trade and only 8% were employed.

### **4.3 To assess the situation of violence against women and girls in Kumi Municipality**

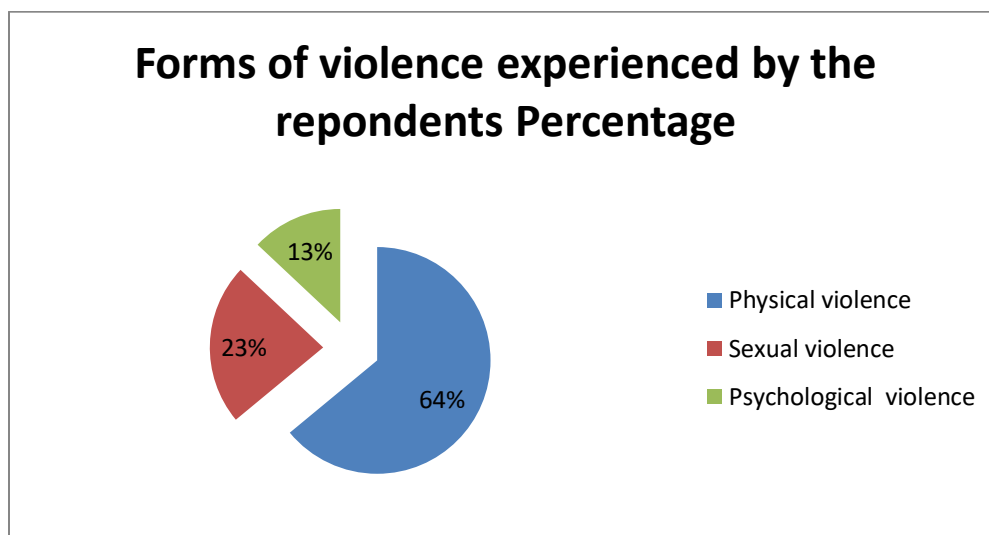
#### **4.3.1 Ever experienced any form of GBV**

Respondents were asked whether they had ever experienced any form of gender-based violence and all of them (100%) said they had ever experienced. It's also important to note that with the exception of the key informants and those included in the focused group discussions, all the other respondents had ever experienced GBV in their localities.

#### **4.3.2 Forms of gender based violence experienced by the respondents**

Respondents were asked to state what kind of GBV they had ever experienced and the results are shown in the pie chart below.

**Figure 2: Forms of gender-based violence experienced by the respondents**



As indicated in the pie chart 2 above, the most common type of GBV in Kumi Municipality is physical violence and represented by 64% of the respondents who had ever experienced it. The key informants said physical violence was mostly perpetuated because of struggle for economic resources in the families. One respondent said

“Men are supreme over economic resources in the family thus women neither have rights of ownership nor control of those resources. They can only access those resources through their spouses”. (Olupot Sam pseudo name. Personal communication, March, 12<sup>th</sup> 2024).

It's this kind of struggle that has resulted in to numerous cases of physical violence between men and women. The laws governing ownership are also sometimes weak or not easily applied for example the Land Act fails to recognize customary land tenure systems to permit women to act as co-owners/managers of customary land, and creates weak protections for widows who seek to inherit their husband's land. This was also identified in Missimes report 2016. One police officer revealed that cases of assault related to domestic gender violence were on the rise in Kumi municipality simply because men have deprived off women even what belongs to them.

Another 23% of the respondents said they had ever experienced sexual violence in their lives. Sexual violence manifested in many forms like sexual assault, rape and sexual abuse. This correlates with UDHS 2016 that revealed that up to 22% of women aged 15 to 49 in the country had experienced some form of sexual violence. The report also revealed that annually, 13% of women aged 15 to 49 reported, experiencing sexual violence. This translates to more than 1 million women exposed to sexual violence every year in Uganda.

One key informant said

“When a man has paid dowry, he feels he is in control over his wife and he can have sex at any time. Any kind of resistance will result into use of force thus sexual violence”. (Asio Lucy pseudo name. personal communication, March, 12<sup>th</sup> 2024).

It's therefore not a surprise that many women and girls have fallen into this kind of 'disrespect' because of man's ego to dominate the other sex. The other factor exacerbating this vice is alcohol and drug abuse among men and boys as pointed out by the key respondents that it's on the rise in the Municipality.

The least form of GBV that the respondents had ever experienced was the psychological violence which was identified by 13% of the respondents.

### 4.3.3 Where respondents sought for support

Respondents were asked where they sought for support against the perpetrators of gender-based violence and the responses are shown in Table below.

**Table 7: Where respondents sought for support**

<b>Where respondents sought for support</b>	<b>Frequency</b>	<b>Percentage</b>
Family/clan leaders	16	13
LC Courts	53	44
Police	42	35
NGOs	9	8
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

As indicated in Table 5 above, majority of the respondents sought for support in the police institution as represented by 44%, those who sought for support in the LC courts constituted 35% of the sample while those who sought for support from the family/clan leaders constituted 13%. Only 8% of the respondents sought for support from the NGOs.

One police officer said they have always urged the populace to report cases of gender-based violence to police because it's beyond the capacity of LC courts to make judgments. However, from the focused group discussions the respondents pointed out the laxity of the police to follow

with cases of the perpetrators and this explains why a significant number of the respondents reported GBV cases to LC courts and community leaders.

Respondents were further asked whether any action was taken against the perpetrators of GBV when they reported to the various authorities. From the sample, 93% of the respondents said some action was taken while 7% indicated that no action was taken against offenders of GBV against women and girls.

#### 4.3.4 Action taken against perpetrators of GBV2

The researcher sought to know the actions taken against the perpetrators by authorities that make the necessary actions and table 6 below shows the Responses.

**Table 8: Actions against the perpetrators**

<b>Actions taken against perpetrators of GBV</b>	<b>Frequency</b>	<b>Percentage</b>
Reprimanded	25	21
Counseled	55	46
Fined	40	33
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

As indicated in Table 6 above, majority of the respondents 46% said the perpetrators of GBV were simply counseled and no further deterrent action was taken. Another 33% of the respondents said the perpetrators of GBV were fined while only 21% of the respondents said the perpetrators of GBV were reprimanded. According to the key informants and respondents in the focused group discussions, they said those reprimanded also find their way out after a short while because of the flawed judicial system.

One key informant said

“Because of less punitive actions taken by the police and courts of law against perpetrators of GBV against women and girls, the vice will keep rising since the perpetrators know that they get out of it with ease”. (Akol Sarah pseudo name, personal communication, March 2024).

Uganda as a country is said to have good laws and policies but the biggest challenge has been in implementation. The authorities that are charged with the responsibility of implementing these policies are either so weak or are easily compromised. This was echoed by the key informants.

#### 4.3.5 Common perpetrators of GBV against women and girls

**Table 9: Common perpetrators of GBV against women and girls**

<b>Common Perpetrators of GBV</b>	<b>Frequency</b>	<b>Percentage</b>
Parents	24	20
Teachers	10	8
Spouses	62	42
Drug addicts	18	15
Others	6	5
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

The common perpetrators of GBV in Kumi Municipality are spouses as represented by 42%. Since majority of the respondents indicated that they were married, it’s possible that their husbands were the perpetrators of GBV in their respective homes. Parents came second to spouses as the common perpetrators of GBV as represented by 20%. The respondents were quick to say that parents in bid to discipline their ‘girl children’ end up abusing them. Drug/alcohol addicts were the other category of perpetrators against GBV and their constituted 15% while teachers and other groups constituted 8% and 5% respectively. It’s also important to note that respondents most especially the key informants voiced out that GBV was common in the municipality as a manifestation of who owns and controls resources besides other underlying causes.

#### **4.3.6 Places in which GBV against women commonly occurs**

Respondents were asked where GBV against women and girls commonly occurs, 83% of the respondents said it commonly occurs in homes. This was confirmed by the key respondents who said majority of cases occur in people's homes. Another 10% of the respondents said it normally happens in dark places. The police key informants said the perpetrators of GBV against women and girls in dark places are always criminal who way lay their culprits in dark places. That in most cases they are either intoxicated with drugs or alcohol. The respondents in the focused group discussions even identified the notorious dark spots in the Municipality being station quarters, Ngora road and Wiggins. The police confirmed these places as being notorious for way laying of people during the dark.

Further still 3% of the respondents said GBV happens in schools, 2% said it happens at schools while only 2% said it happens during functions.

In relation to the above, respondents were asked whether there were any community structures that advocated against GBV. Majority of the respondents 96% acknowledged there were community structures most especially the women forum groups established by Action Aid. Other structures that were respondents identified included; the Local Council structures and the police institution. Only 4% of the respondents were not aware of the community structures that advocated against GBV in Kumi Municipality.

#### **4.3.7 Channels of campaigns against GBV against women and girls**

Respondents were asked whether there were any forms of campaigns against GBV against women and girls. Majority of respondents 94% acknowledged that there various forms of campaigns against GBV in their communities while only 6% of the respondents were not aware of any form of campaign against GBV in their localities. In order to ascertain where the various forms were channeled from, the respondents identified the channels listed in the table below.

**Table 10: Channels of campaigns against GBV**

<b>Channels of campaigns against GBV</b>	<b>Frequency</b>	<b>Percentage</b>
Radio Campaigns	62	52
Television campaigns	12	10
Posters	38	32
Music/drama	8	6
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

As indicated in Table 8% above, the most common channel used for campaigns against GBV against women and girls was the radio as represented by 52%. This was confirmed by the official from Action-Aid who said radio has been the easiest way they reach to the communities and that the messages passed to the community members are in the local language which is understood by 80% of the population in the Kumi Municipality. The community members too acknowledged that Action Aid Uganda had organized radio talk shows more often advocating against GBV in the communities.

Another channel of campaign identified by 32% of the respondents was the use of posters. The posters were mainly placed in public places like schools, offices, churches, police posts/stations and health institutions. The researcher was able to see some of these posters and they were written in Ateso and English to cater for those who do not know the local language. Television as channel of communication against GBV was identified by 10% of the respondents. This was attributed to low numbers of people with Television sets. The list media used was music dance and drama as represented by 6% of the respondents. An official from Action Aid said they have used drama shows in communities where the problem is acute within the Municipality.

#### **4.4 To find out the effectiveness of GBV shelter interventions in the promotion of women rights in Kumi Municipality**

Shelter interventions were established by Action Aid in Kumi Municipality to serve as one Stop Centre (OSC) where victims of GBV could easily get support like health services alongside some combination of social, legal, police and/or shelter services. The researcher therefore wanted to establish the most sought-after services in the shelter and the table below shows the results.

#### 4.4.1 Type of support sought by clients at the shelters

**Table 11: Type of support sought by the clients**

Type of support sought by clients	Frequency	Percentage
Psychological support	34	28
Economic support	16	13
Support against sexual abuse	20	17
Support against physical abuse	50	42
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data, 2024**

As indicated in Table 9 above, the most sought for support in the shelter was support against physical abuse as represented by 42%. The key informants informed the researcher that whenever women and girls are threatened or abused, they run to the shelter to seek for protection. An official from Action Aid had this to say;

“Whenever women or girls run to the shelter for protection against physical violence or abuse, they don’t feel like going back to their home because they feel the shelter offers them more protection than being out of it”. (Ikeng Christine pseudo name personal communication, March, 12<sup>th</sup> 2024).

It’s because of assured security that the shelter provides, that support against physical abuse ranks number one service sought by the clients. However, it’s also important to note that, clients stay at the shelter is temporal that is limited to not more than 7 days as the problem is being sorted out with the relevant authorities.

Another type of support sought by the clients was the psychological support as represented by 28%. Because of the trauma caused by perpetrators of GBV against girls and women in the community, there is high rise for psycho-social support amongst the victims and the only place they see is the shelter.

This was remarked by one of the key respondents. Support against sexual violence was sought by 17% of the respondents while 13% sought for economic support. Some of the clients lack money to meet the legal costs demanded by the courts of law thus they run to the shelter to seek for support. Some of the clients have been abandoned by their spouses thus face difficulties in providing for their families thus run to the shelters.

Related to the above the respondents were asked whether they got services they sought for and 88% acknowledged to have gotten the service while only 12% said they did not get what they expected. Amongst those who got the service, 90% said they were satisfied with the service while only 10% were not satisfied with the services offered by the shelter.

#### **4.4.2 Staff adequacy and services offered**

Respondents were asked whether number of staffs were adequate at the shelter, 66% of the respondents acknowledged that the number of staffs were inadequate at the shelter while 34% of respondents said the staffs at the shelter were adequate. During the focused group discussion one respondent remarked;

“Due to inadequate number of staffs, there are long queues of people who need services at the shelter. This also degenerates to another form of GBV most especially when clients return to their homes late; they are always physically harassed by their spouses”. (Akello Florence pseudo name personal communication, March, 15<sup>th</sup> 2024).

The key informants also re-echoed the same message of inadequate staffing at the shelter. They said the demand for services overwhelms the number of existing staffs. There are only 2 key staffs at the shelter who are so engaged due to multiple clients. On whether the clients were satisfied with services dispensed at the shelter, 88% of respondents affirmed their satisfaction with the services while only 12% of the respondents were not satisfied with the services offered at the center.

It was also observed by 88% of the respondents that the staffs at the shelter were friendly while dispensing their services while only 12% said the staffs were rude at times. That it discouraged them from seeking for further services at the shelter. Customer care is very important while dispensing a service because it either attracts more clients or discourages those who would be potential clients from accessing the service.

#### 4.4.3 Circumstances for referral of clients

Much as shelters are expected to be one stop point for all services needed by clients of GBV, there are circumstances under which clients are referred to other institutions for help and the respondents identified as shown in the Table below.

**Table 12: Circumstances for referral of clients**

<b>Circumstances for referral</b>	<b>Frequency</b>	<b>Percentage</b>
When the services are not available at the shelter	58	48
When the case is beyond the capacity of the shelter	42	36
when the shelter is overwhelmed with clients	20	16
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

From Table 10 above, 48% of the respondents said one can be referred to another institution when services are not available at the Centre. Key respondents identified services like those that need

advanced medical attention can be sought in hospitals, those services that need investigation from police and clients that are brought in poor health conditions can also be first attended in hospitals. Another 36% of the respondents said that clients can be referred when the case is beyond the capacity of the shelter and 16% of the respondents said clients could be referred when the shelter is overwhelmed with clients. The key informants affirmed that sometimes the shelter gets overwhelmed with clients that need protection and yet the shelter can only accommodate a few people thus to avoid overcrowding, clients can be referred to other places that can provide the much-needed help.

For referral cases, the respondents were asked whether shelter staffs make follow ups to ascertain whether the clients were helped, 78% of the clients acknowledged that shelter staffs do make follow ups while 12% of the respondents were not sure and 10% said shelter staffs do not make follow ups of clients. The key informants informed the researcher that in cases where the shelter staffs are overwhelmed, it proves very difficult to follow up with other clients so they echoed that sometimes the clients are not followed up.

#### **4.4.4 Legal and Medical services**

For cases that need legal representation in courts of law, respondents were asked whether the shelter meets the legal fees, 62% of the respondents said the shelter meets the legal fees while 38% of the respondents said the shelter was not meeting their legal fees. From the key informants the said that the shelter only helps those who are not able to afford legal representation. The official from Action Aid confirmed that legal services are hired for those clients who are not able to afford them and the Organization meets the costs.

For medical costs 66% of the respondents said the shelter met their medical costs while 34% said the shelter did not meet their medical costs. The information obtained from the key respondent from Action Aid indicated that clients, who fall sick while in the shelter, are taken to the nearby Health Centre 4 which is a government facility. The Organization meets the small costs but complicated cases are referred and the clients have to meet their expenses.

Overall 88% of the respondents were satisfied with the services offered by the shelters and only 12% were not satisfied. The police representative said;

“The shelter had eased their work as police in that they offer a variety of services like counseling of clients, mediation between the perpetrators and victims for lighter abuses and also reconciled families because of the expertise they possess”. (Anyait Rose pseudo name personal communication, March, 15<sup>th</sup> 2024).

Similar messages were reechoed during the focused group discussions and key informant interviews where respondents said that the shelter had made a very big change to the vulnerable groups of GBV in Kumi Municipality. The staffs are willing to guide the clients on what to do.

#### **4.5 To identify the challenges in the implementation of the programs associated to GBV shelters in Kumi Municipality**

The challenges faced by shelter-based programs vary from country to country or from location to location. However, the major challenges are socio-economic in nature as unfolded below.

##### **4.5.1 Means of accessing information about shelter programs**

Low awareness among women and girls about their rights; Shelter efforts to raise awareness about women’s abuse, their rights, and options for leaving a violent situation may be challenge in settings where: women’s status is considered secondary to men; there is greater acceptance that violence against women is justified (by both women and men); and in settings with high illiteracy or social isolation, which limit women’s access to written advocacy or informational materials, including on services and initiatives addressing violence in their community. Based on this background, respondents were asked how they got to know about the services offered by the GBV shelter and the results are indicated in Table 11 below.

#### **Table 13: Means of accessing information about services offered by the shelter**

<b>Channels of campaigns against GBV</b>	<b>Frequency</b>	<b>Percentage</b>
Radio Campaigns	54	45
Television campaigns	8	7
Posters	10	8
Friends/relatives	48	40
<b>Total</b>	<b>120</b>	<b>100</b>

**Source: Primary data 2024**

As indicated in table 11 above, majority of the respondents (45%) got to know about the services offered by the GBV shelter in Kumi Municipality through radio. Kumi Municipality has a community radio called Continental where Action Aid Uganda more often runs programs advocating against GBV. This information was confirmed by the key respondent from action Aid. Another 40% of the respondents said they learnt about services from friends and relatives, while 8% learnt through the posters displayed in public places and only 7% of the respondents learnt about the services offered by the shelter through Television.

Since radio has remained the common means through which the local populaces get information, the key respondents emphasized the concerned authorities to use more of the community radio stations that available in the locality so that many people can access the information. They also urged the Shelter management to intensify on community sensitizations while involving local leaders so that the information can reach further in the communities.

Further still, from the respondents interviewed, 80% said community members were aware of the shelter programs though a lot more needs to be done so that everyone in the community is aware of the programs offered by the facility.

#### **4.5.2 Distance from shelter**

Respondents were asked how far they stayed from the facility and the results are shown in Table 12 below;

**Table 14: Distance from the shelter**

<b>Distance</b>	<b>Frequency</b>	<b>Percentage</b>
Less than 1Km	20	17
2-4Km	70	58
5Km and above	30	25
Total	120	100

**Source: Primary data 2024**

Majority of the respondents 58% were staying within the radius of 2-4 Km from the facility, 25% were staying 5Km and above from the facility while only 17% were staying within the radius of 1Km from the facility. The facility is situated within the proximity of town dwellers. It's can therefore be said that distance was not a problem to many of the people who sought for services within the Municipality. This was also reechoed during the focused group discussions. One key respondent said;

For clients within the Municipality, distance to the shelter is not a problem. It is only a problem to those so many clients outside the Municipality who desperately need these services and the GBV against women and girls is more acute as you move further from town because of low access to information coupled with high illiteracy rates. (Aisu Grace pseudo name, personal communication, March, 15<sup>th</sup> 2024).

This therefore confirmed that distance to the facility for residents within the Municipality was not a problem but it only affected those in the rural communities and living far from the municipality.

#### **4.5.3 Competence of the staff to handle clients**

Respondents were asked whether the staffs at the shelter were competent enough to handle their issues, 88% of the respondents affirmed that the staffs were competent and only 12% said they

were not. The key informants said the staffs were competent but the only problem is that sometimes they are overwhelmed by the number of clients besides other schedules of work outside the shelter for example making follow ups. It can therefore be affirmed that the quality of staffs at the Centre are competent enough to handle the client's issues.

Relatedly 84% of the respondents said they were attended to immediately they reached the shelter and only 16% said they waited for longer hours before being attended too. This was attributed to the busy schedule of the staffs. It's also important to note that there are only 2 staffs at the shelter.

#### **4.5.4 Adequacy of space to accommodate clients**

Respondents were asked whether the space at the shelter was adequate to accommodate clients who are in dire need of the services and 65% of the respondents said the space was inadequate while only 35% said the space was adequate.

According to the Officer from Action Aid Uganda, she said the shelter could only accommodate not more than 5 clients with observance of client's privacy that the shelter was still limited with accommodation space. This information was corroborated by other key informants who had observed the challenge of limited space in the facility.

This finding also relates to the 3<sup>rd</sup> Global data Counting that found out that demand for shelter services often exceeds availability and in some countries, shelter facilities may remain few (often limited to the capital city or urban areas) to none. For example, the 3<sup>rd</sup> Global Shelter Data Counting 2011 found that during a single day, 56,308 women and 39,130 children sought shelter from domestic violence in 36 countries across regions, while 12,342 women and children were turned away from services due to limited space and resources. Even in countries with shelter facilities, there are particular shortages of services affecting those who are seeking for the service.

#### **4.5.5 Other structures in the community that address GBV**

Respondents were asked whether there are other structures in the community that address issues of GBV against women and girls and 60% of the respondents acknowledged that community structures existed while 40% of the respondents said the structures were nonexistent. The community structures the respondents identified were; LC, Police and Action Aid community structures. However the key respondents said despite the existence of community structures most especially those established by government, they were too corrupt and often mishandled the cases forwarded to them. Community members had lost trust in them resulting to some clients shying away from reporting cases.

#### **4.5.6 Threats from the perpetrators**

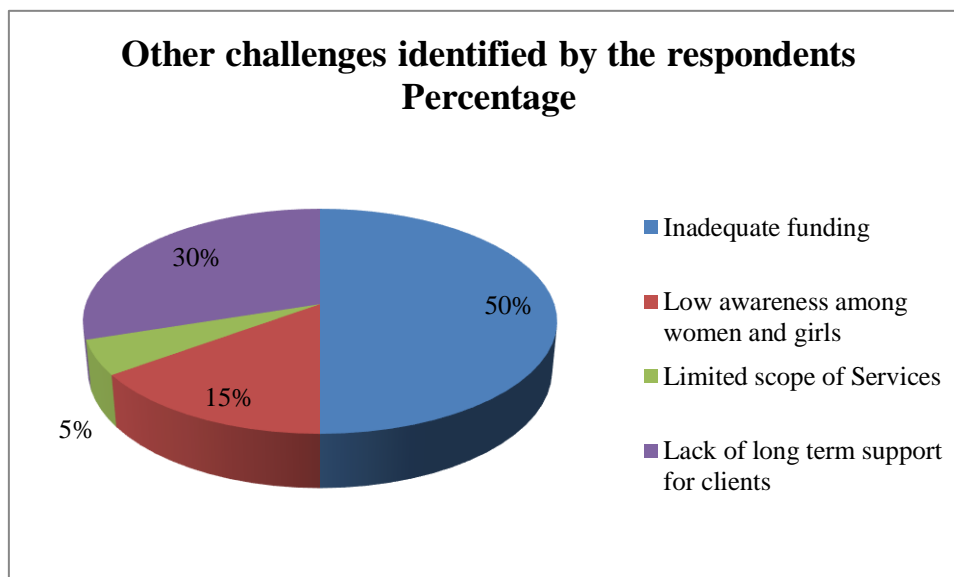
The 3<sup>rd</sup> Global Data Counting studies conducted in Indonesia 2017 found out that the perpetrators of GBV always issued numerous threats to their victims in case they reported them to the concerned authorities. In this study therefore, 90% of the respondents said they were threatened by the perpetrators with some promising death while only 10% of the respondents said they were never threatened.

The key respondents also said that women were at greater risk of violence if they seek shelter, such as through future retaliation by the abuser, family, or community members; or state prosecution, for example, where rape survivors can be charged with adultery. Women may face discrimination and stigmatization from the community for disclosing their experience of abuse, or risk losing custody of their children, in contexts where fathers are given preferential parental rights.

#### **4.5.7 Other challenges faced by the shelter**

Besides the above-mentioned challenges facing the shelters, respondents were further to state any other challenges they thought were affecting the normal operations of the shelter and the following challenges were identified.

**Figure 3: Other challenges faced by the shelter.**



The major challenge identified by the respondents was that of inadequate funding to the shelter as identified by 50% of the respondents. According to the respondent from Action Aid, the funding to the shelter was purely from the donors. Kumi DLG had promised to co-fund shelter activities but 5 years down the road, they have failed to fulfill their pledge. She further informed the study that the shelter project funding from Action aid Uganda was coming to the end 2020 thus government specifically Kumi DLG was expected to take over the management of the facility.

Other key informants corroborated with this finding and they were quick to say that despite the good services from the shelter to the vulnerable women and girls, there is a likelihood of the facility being closed due to lack of funding when Kumi DLG takes over the affairs of the facility.

It's therefore noted that protection and services for women and girls escaping violence require sustainable funding, which should be allocated from dedicated state funds, as part of their due diligence obligations. Although shelters often receive funding from the donors, government funding has historically been inadequate and inconsistent over time.

Funding from donors is often equally project-driven and disconnected from the aspirations of the groups providing services. Insufficient or lack of consistent funding for shelters exacerbates the sustainability and capacity limitations of survivor support organizations.

Lack of long-term support for clients was another challenge identified by 30% of the clients. Ensuring women and girls are able to access safe affordable housing options when leaving a shelter is a significant challenge in many settings. For example, women who are economically dependent on their partner or other family members are often faced with the options of staying in the abusive situation or becoming homeless. Lack of second-stage shelter facilities forces a significant backdrop. Action Aid representatives in the interview said that its true after the client has left the shelter, there is little they can offer other than advice is a client sought to start a new life that is often the case. Other key respondents also echoed this sentiment urging that there should be startup capital for the clients to start a new life if they so wish other than going back to live like a slave.

Low awareness of shelter programs by potential clients was another challenge identified by 15% of the respondents. They urged that there are still many people in vulnerable situations that need the services but they do not know where to go. The key respondents therefore urged that to make the shelter programs very popular, community campaigns are very essential in addition to the print and audio media. Only 5% of the respondents said the services offered at the shelters were still wanting thus scope of services should be expanded for example the shelter should have its own clinic in order to attend to the clients.

## **CHAPTER FIVE**

### **SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS**

#### **5.0 Introduction**

This chapter presents the summary of findings, conclusions and the recommendations.

#### **5.1 Summary of the findings**

The findings revealed that GBV is still rampant in Kumi Municipality, and the common form of GBV against women and girls is physical violence as identified by 64% of the respondents and the major perpetrators are men and parents. The study also revealed that physical violence commonly happens in home setting and most of the cases were being settled under the LC system with few forwarded to courts of law.

Majority of the respondents, 88% were satisfied with the services offered by GBV shelter in Kumi Municipality. The key shortfalls affecting the GBV shelter included; inadequate staffing which always causes delays for people seeking for services, limited services for example it does not have its own medical facilities thus clients with chronic illnesses cannot be admitted.

The study also revealed that there was overwhelming demand for shelter services and yet the shelter cannot take on board more than 5 people for admission/accommodation thus excess numbers would always be referred to places that the clients were not comfortable with. This often led clients to shy away from seeking for support to access justice.

Among other challenges affecting the shelter were continued threats from the perpetrators against their survivors housed/ admitted at the shelter, reliance on donor funds which affects continuity of

services offered by the shelter once the donor pullout. Relatedly lack of financial support to survivors of GBV who wish to start new life and lack of continued sensitization.

### **5.3 Conclusions**

#### **Situation of GBV in Kumi Municipality**

The study confirms information in chapter two on the fact that GBV is still rampant. It knows no social, economic or national boundaries.

It was observed that GBV is still rampant in Kumi municipality and the major perpetrators are men and it mostly happens in home settings. This confirms the study by UNFPA report (2016) which presents that violence against women and girls is one of the most prevalent human rights violations in the world. It knows no social, economic or national boundaries. Worldwide, an estimated one in three women will experience physical or sexual abuse in her lifetime. Gender-based violence undermines the health, dignity, security and autonomy of its victims, yet it remains shrouded in a culture of silence. Victims of violence can suffer sexual and reproductive health consequences, including forced and unwanted pregnancies, unsafe abortions, traumatic fistula, sexually transmitted infections including HIV, and even death.

It's therefore the duty of all individuals, community members, government institutions, Non-governmental Organizations and all other stakeholders involved in the promotion of human rights to stand up and be counted as the champions of human rights. It's the responsibility of every one to see it that every person deserves a decent living where human rights are respected. All government institutions charged with the responsibility of upholding human rights must play their role without any biases.

#### **Effectiveness of GBV shelters in promoting the rights of women and girls**

Shelters are a good means of promoting rights for women and girls who are more often a vulnerable group in the community, however a lot more is desired in terms of expanding the scope of services

in order to meet the client's expectations. This resonates what Rees & Wilson (2015) presented. They noted that women's unequal economic status and the financial burdens placed on those seeking shelter (e.g. related to finding new accommodation or leaving ones' community and employment) is a significant challenge for women to escape abuse. This is particularly challenging for those in low socio-economic situations or women who are financially dependent on their abuser... Economic control and abuse by partners or care givers may further hinder a woman from accessing support, through strategies which prevent or interfere with her education and employment; control her access to economic resources.

There is need to have a sustained plan of the shelters with a clear cut out source of funding. Most shelters have been set up by the Non-Governmental organizations but more often their programs are time bound. Hardly do they go beyond the life span of five years. Sustainable mechanism should therefore be put in place between the implementer and the local authorities or Government.

### **Challenges affecting shelter activities**

The shelters are challenged by limited sources of funding, short life span of the funding agencies in that they come for only a specified period of time and leave without a proper sustainable mechanism. This therefore relates to the findings from the UN-Habitat, (2010) which disclosed that "even with promising action plans, sound communications, and qualified employees, shelters often struggle to secure adequate funding to meet the demands and respond to the needs of all women seeking their assistance. This reduces the number of women who may be assisted, lowers retention of skilled employees and volunteers, and affects the overall quality of services provided". The Local governments more often have their own priorities and funds received by them are earmarked for specific activities thus allocation of funds to shelter activities becomes a very big problem. Shelters are also challenged by inadequate staffing levels that cannot handle all cases, limited services and yet they are expected to be one stop center for all services. Lasting funding mechanism should there for be adopted by the interested parties.

## **5.4 Recommendations**

The following recommendations are based on the findings here in the study;

The LCs should be trained on handling GBV cases since majority of the cases pass through them. Action Aid Uganda and any other interested parties should prioritize this capacity development of LCs if justice is to prevail.

For continuity of shelter activities, Local Governments (Kumi District and Kumi Municipal Council) should plan and allocate funds towards shelter activities since Action Aid has phased out its funding and yet these services are still very important. Funds should be allocated for expansion of services and for the development of other shelters. Local Governments should also design long term solutions towards funding shelter activities.

Civil society Organizations, should support victims of GBV through skilling programs in order to make them economically self-reliant and also provide startup capital for small scale business. It's also important to note that victims of GBV would wish to start a new life from their perpetual abusers but they are economically handicapped.

Campaign channels against GBV should also be expanded. Religious institutions should be brought on board since they reach to a greater percentage of the population. Training of religious leaders on GBV issues should be done by the CSOs, Local governments or any other willing partners so that they can supplement other avenues of reaching the population.

Culprits of GBV against women and girls should be apprehended through legal means as opposed to settling cases at community level that leaves suspects at large. The culprits should serve their sentences as prescribed in the law and this would serve as a deterrent factor.

### **5.4. Areas for further research**

- Impact of GBV on women and girls child's social economic life.
- Influence of religion on violence against women and girls in Kumi Municipality.

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## APPENDICES

### APPENDIX A: STRUCTURED QUESTIONNAIRE FOR WOMEN AND GIRLS

I am Elalu Stephen a student at Uganda Christian University (UCU) pursuing a bachelor of Public Administration and Management . I am carrying out an academic research on the Challenges Encountered by Action-Aid Uganda Addressing Violence against Women and Girls (VAW/G) in Kumi district as part of the requirements for the award of a degree of Public Administration and Management of Uganda Christian University.

I am so glad that you accepted to take part in this study. Please feel free to tell me how you feel about the Violence against Women and Girls (VAW/G). Your responses shall be kept with utmost confidentiality while your participation will be highly appreciated. Thank you very much for your time and cooperation.

DIVISION..... WARD.....  
Start Time ..... End .....

<b>SECTION A: BACKGROUND INFORMATION</b>		
<b>Sno</b>	<b>Question</b>	<b>Response</b>
1.	Sex	1. Male
		2. Female
2.	Age	1. 12-20
		2. 21-29
		3. 30-39
		4. 40+
3.	Marital status	1. Single
		2. Married
		3. Widowed
		4. Divorced/Separated

4	What is your level of education?	1. None
		2. Primary
		3. Secondary
		4. Tertiary
		5. University
5.	Religion	1. Catholic
		2. Protestant
		3. Muslim
		4. Pentecostal
		5. Others specify.....
6	Occupation (means of livelihood)	1. Employed
		2. Trader
		3. Agriculture
		4. House wife
<b>SECTION B: SITUATION OF GENDER BASED VIOLENCE AGAINST WOMEN AND GIRLS IN KUMI MUNICIPLALITY</b>		
7.	Have you ever experienced any form of gender based violence?	1. Yes
		2. No
8.	What form of gender based violence did you experience?	1. Physical violence
		2. Sexual violence
		3. Psychological violence
		4. Economic violence
9.	Where did you go to seek for help against the perpetrator?	1. Family/Clan
		2. LC Courts
		3. Community Leaders
		4. Police
		5. NGOs (Specify).....

10	Was there any action taken against the perpetrator?	1. Yes
		2. No
11.	If yes what kind of action was taken against the perpetrator?	1. Reprimanded
		2. Counseled
		3. Fined
		4. Others specify.....
12	Who are the common perpetrators of gender based violence against women and girls in your community?	1. Parents
		2. Teachers
		3. Spouses
		4. Women and girls
		5. Drug addicts
		6. Others (specify)
13	In which places does gender based violence against women and girls commonly occur in your community?	1. In homes
		2. In bars
		3. in dark places
		4. During functions
		5. At school
		6. Others specify
14.	Are there any community structures that advocate against violence on women and girls in your community?	1. Yes
		2. No
15.	If yes in (Qn 14 above), name those community structures?	1. Women forum leaders
		2. LC structures
		3. Trained cultural/traditional leaders
		4. Religious structures
		5. Others specify.....
16.		1. Yes

	Are there any forms of campaign against violence of women and girls in your community?	2. No
17.	If yes name them?	1. Radio campaigns
		2. Television campaigns
		3. Posters
		4. Music/drama
		5. Others specify...
<b>SECTION C: EFFECTIVENESS OF GENDER BASED VIOLENCE SHELTER INTERVENTIONS IN THE PROMOTION OF WOWNEN RIGHTS</b>		
18.	The last time you visited GBV shelter in Kumi, what type of service did you seek for?	1. Psychological support
		2. Economic support
		3. Support against sexual abuse
		4. Support against physical abuse
19.	Was that service available at the shelter?	1. Yes
		2. No
20	Were you satisfied with service provided?	1. Yes
		2. No
21	In your opinion are the staffs at the shelter adequate to handle cases	1. Yes
		2. No
22	Are you satisfied with the services dispensed by the staff at the shelter?	1. Yes
		2. No
23	How friendly are the staff at the shelter (very friendly, quite friendly, unfriendly, very unfriendly)	1. Very friendly
		2. Quite Friendly
		3. unfriendly
		4. Very unfriendly

24	In what circumstances are referrals made from the shelter to other points of support	1. When the services are not available at the shelter
		2. When the case is beyond the capacity of the shelter
		3. when the shelter is overwhelmed with clients
25	For referral cases, does the staff at the shelter make follow ups to the respective support institutions?	1. Yes
		2. No
26	For cases that need legal representation, does the shelter help you meet legal fees?	1. Yes
		2. No
27	For cases that need medical attention, does the shelter meet the medical costs associated	1. Yes
		2. No
28	In general are you satisfied with the services offered at the shelter	1. Yes
		2. No
<b>D. CHALLENGES FACED BY GBV SHELTER IN THE IMPLEMENTATION OF PROGRAMMES IN KUMI MUNICIPALITY?</b>		
29.	How did you come to know of services offered at the shelter?	1. Radio
		2. Television
		3. Print Media
		4. Others specify
30	Are community members aware of services offered at the shelter?	1. Yes
		2. No
31	How far is your place of abode from the shelter?	1. Less than 1Km
		2. 2-3 Km
		3. 4Km and above
32		1. Yes

	Has the distance from your home hindered you in any way from accessing services offered at the shelter?	2. No
33.	From the last time you visited the shelter, were you attended to immediately?	1. Yes
		2. No
34.	In your opinion are the staffs at the shelter competent enough to handle your issues?	1. Yes
		2. No
35.	Are there situations where the shelter gets crowded by clients seeking for services?	1. Yes
		2. No
36	Besides this shelter, are there any other structures in the community that address problems associated with GBV?	1. Yes
		2. No
37.	If Yes, can you name those structures	1. Police
		2. LC structures
		3. Structures established by action Aid
		4. Others Specify
38.	Are there situations where by you were threatened after visiting the shelter by the GBV perpetrators?	1. Yes
		2. No
39.	For the services you sought for in the shelter, was confidentiality guaranteed by the shelter staff.	1. Yes
		2. No
40	What other challenges, do you think the shelter is facing	

*Once again, thank you very much for your time and participation.*

*END*

**APPENDIX B: INTEVIEW SCHEDULE FOR THE TECHNICAL AND POLITICAL LEADERS**

I am Elalu Stephen a student at Uganda Christian University (UCU) pursuing a bachelor of Public Administration and Management . I am carrying out an academic research on the Challenges Encountered by Action-Aid Uganda Addressing Violence against Women and Girls (VAW/G) in Kumi district as part of the requirements for the award of a degree of Public Administration and Management of Uganda Christian University.

I am so glad that you accepted to take part in this study. Please feel free to tell me how you feel about the Violence against Women and Girls (VAW/G). Your responses shall be kept with utmost confidentiality while your participation will be highly appreciated. Thank you very much for your time and cooperation.

DIVISION..... WARD.....  
Start Time ..... End .....

**SECTION A: BACKGROUND INFORMATION**

- 1. How old are you?.....(*Age in completed years*)
- 2. Sex.....M.....F (*please tick*)
- 3. Marital status.....(*state*)
- 4. What is your level of education?.....
- 5. Religious affiliation.....
- 6. Occupation.....

**SECTION B: SITUATION OF GENDER BASED VIOLENCE AGAINST WOMEN AND GIRLS IN KUMI MUNICIPLALITY**

- 7. What are the common forms of gender based violence against women and girls in Kumi Municipality?
- 8. Who are the common perpetrators of gender based violence against women and girls in Kumi Municipality?

9. In which places does gender based violence against women and girls commonly occur in Kumi Municipality?
10. What community structures exist that advocate against violence on women and girls in Kumi Municipality?
11. What forms of campaigns are commonly used to advocate against violence of women and girls in your community?

### **SECTION C: EFFECTIVENESS OF GENDER BASED VIOLENCE SHELTER INTERVENTIONS IN THE PROMOTION OF WOVEN RIGHTS**

12. What are the major types of services offered in gender based violence shelter located in Kumi Municipality?
13. What other services do you deem relevant but they are not provided in the shelter?
14. For cases that the shelter cannot handle, where are the clients normally referred to?
15. What form of support does the shelter render to clients that are referred to other institutions?
16. For the services dispensed at the shelter, are they provided with utmost sincerity and satisfaction to clients?

### **CHALLENGES FACED BY GBV SHELTER IN THE IMPLEMENTATION OF PROGRAMMES IN KUMI MUNICIPALITY?**

17. What are some of the challenges faced by the shelter in dispensing its mandate of advocating for women's rights?
18. How does the shelter relate with other institutions advocating for the rights of women and girls?
19. Besides support got from Action-Aid Uganda, what are other sources of support for the shelter and are they sufficient?
20. What mechanisms are in place to ensure that the shelter continues to dispense its mandate?
21. For clients who visit the shelter, how is there protection guaranteed?

*Once again, thank you very much for your time and participation.*

*END*

**APPENDIX C: INTERVIEW GUIDE FOR FOCUSED GROUPS (OPINION LEADERS)**

Number of members in the FGD.....

Venue of FGD.....

Date ..... Start Time..... End Time .....

**SITUATION OF GENDER BASED VIOLENCE AGAINST WOMEN AND GIRLS IN KUMI MUNICIPLALITY**

1. What are the common forms of gender based violence against women and girls in Kumi Municipality?
2. Who are the common perpetrators of gender based violence against women and girls in Kumi Municipality?
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**EFFECTIVENESS OF GENDER BASED VIOLENCE SHELTER INTERVENTIONS IN THE PROMOTION OF WOWEN RIGHTS**

6. What are the major types of services offered in gender based violence shelter located in Kumi Municipality?
7. What other services do you deem relevant but they are not provided in the shelter?
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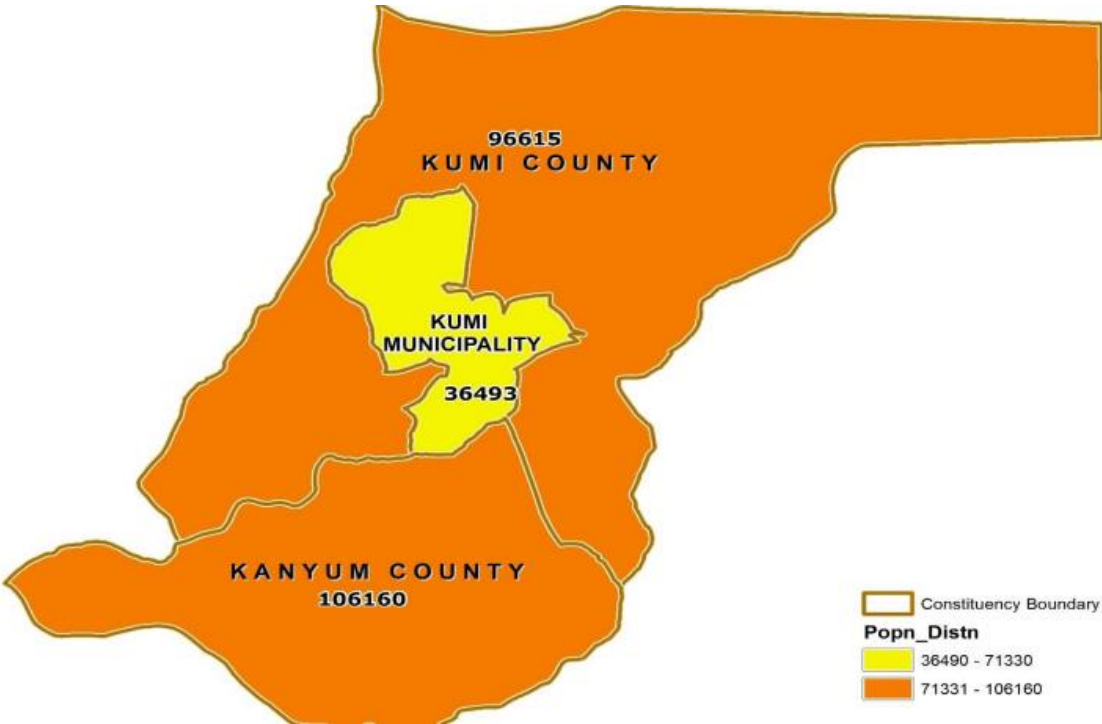
**CHALLENGES FACED BY GBV SHELTER IN THE IMPLEMENTATION OF PROGRAMMES IN KUMI MUNICIPALITY?**

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15. For clients who visit the shelter, how is there protection guaranteed

*Once again, thank you very much for your time and participation.*

*END*

**APPENDIX D: MAP OF KUMI DISTRICT SHOWING KUMI MUNICIPALITY**



APPENDIX E: RESEARCH LETTER



UGANDA CHRISTIAN UNIVERSITY

A Centre of Excellence in the Heart of Africa  
MBALE UNIVERSITY COLLEGE.

Office of the Academic Registrar

To Coordinator Action Aid Kumi

Dear Sir/Madam,

Re: Academic Research

Christian greetings!

We are honored to introduce to you Mr. Mrs./Miss Elalu Stephen  
Of Registration Number 221MUC/BA/MT/008 pursuing a Masters'  
Degree/Postgraduate Diploma / Bachelor's Degree ✓

He/ she is required to carry out academic research on the topic  
Impact of Action Aid Uganda Gender based Violence  
Shelters Program on promotion of women's rights. Kumi  
and thereafter produce a well bound hard cover research report (MAROON) in color for  
undergraduate and three (BLACK) copies for Postgraduate students as a university  
requirement for the award of a degree/diploma in the academic discipline that he /  
she is pursuing.

We shall be grateful for the help you may offer to him or her accordingly.  
Thank you.

Yours faithfully,

Mr. Akampurira Timothy  
Academic Registrar



A Complete Education for a Complete Person

P.O Box, Mbale, Uganda, email: [academicregistrar@mbale.ucu.ac.ug](mailto:academicregistrar@mbale.ucu.ac.ug)