



CEWIGO
MAKING POLICIES
WORK *for* WOMEN

IMPLEMENTATION OF THE UGANDA ACTION PLAN ON UNITED NATION'S SECURITY COUNCIL RESOLUTION (UNSCR) 1325&1820 AND THE GOMA DECLARATION

Access to health facilities, medical treatment and psychosocial support services for GBV survivors

INTRODUCTION

This fact sheet presents key findings from the Monitoring Report (2015) on the implementation of the Uganda Action Plan (NAP) on United Nations Security Council Resolution 1325 & 1820 and the Goma Declaration by the Uganda UNSCR 1325 Coalition coordinated by the Centre for Women In Governance (CEWIGO). 15 indicators of the Uganda Action Plan (2011) were used to assess progress the government of Uganda and other actors are making in implementing the National Action Plan.

The study was conducted in a sample of 20 districts in Uganda and these were; Pader, Lira, Soroti, Dokolo, Moroto, Kotido, Luwero, Wakiso, Kasese, Rubirizi, Amuru, Kabale, Kanungu, Kapchorwa, Kamuli, Katakwi, Kitgum, Agago, Kamwenge and Kabarole and at national level from line ministries, departments, sectors and agencies.

KEY MONITORING FINDINGS:

1. There is sufficient technical capacity to address GBV at national and district levels. This is however not matched with resource allocation and staffing, making it difficult for duty bearers to play their roles effectively.
2. Of the 20 districts visited by the research team, only Agago, Amuru and Kotido had at least two health workers trained to manage GBV in each of their health units at or above HCIII level.
3. The proportion of health facilities with no stock-outs of essential medicines and health supplies increased from 35% to 70% by 2015.
4. The percentage of health facilities with basic and those with comprehensive emergency obstetric care increased from 10% to 50% by 2015.
5. The proportion of pregnant women accessing comprehensive Prevention of Mother to Child HIV Transmission (PMTCT) package increased from 25% to 80%.

RECOMMENDATIONS:

1. Advocate for integration of GBV management training into Health and Social Workers' training programs and curricula. This will guarantee the country a constant supply of health workers and social workers who are already equipped with the minimum skills for GBV management.

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Elimination of GBV Improving Coordination among different actors in Society

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KEY MONITORING FINDINGS:

1. Pader district trained 24 CDOs in GBV; child handling, reporting, and protection
2. Dokolo district trained 55 police officers, community-based services, and education officers; an unknown number of gender focal persons and 75 para-social workers on handling GBV related incidences.
3. Katakwi district trained a total of 30 professionals of whom 12 were women and 18 were men on GBV.
4. Luwero district conducted 13 trainings on how to mainstream Gender in lower Local Government Budgets for both technical and executive committee members benefiting 13 CDO's in Lower Local Governments, 18 women council members at district level, and Community leaders in Makulubita, Katikamu and Luwero sub-counties

RECOMMENDATIONS:

1. Institutionalize GBV data collection within government Ministries, Departments and Agencies (MDAs) and CSOs and ensure accountability through designing appropriate reward systems for compliance.
2. Develop a research agenda for GBV to ensure regular information flow, relevance and timeliness of GBV data for programming.
3. Harmonize the GBV indicators within the M/E systems of various MDAs to enable the monitoring and assessment of the GBV National Action Plan (NAP).

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Handling and Management of GBV at different Levels

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KEY MONITORING FINDINGS:

1. 10,163 cases of sex/GBV related offences were reported in 2015 compared to 10,769 cases in 2014 over the same period giving a decrease of 5.6%.
2. There is increased reporting of the incidences of GBV, but at the same time there is an overall downward trend in crime rates across the board.
3. There is a functional referral system in place in all the districts visited by the research team much as they are at different levels of performance quality.
4. GBV support to most survivors is provided by people not trained to give it!

RECOMMENDATIONS:

1. Continuous sensitization of the leadership and officers and men in these forces; tailor- made gender and GBV capacity-building training should be organized for key actors in these institutions; all training policies, curricula and guidelines (whether for lower cadres or officers) should mainstream gender.
2. GBV as a subject should be made compulsory, complemented by establishment of structures, procedures and forums that enhance institutionalization of Gender and GBV work in these institutions.



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Women's participation in leadership and decision making positions in Uganda

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KEY MONITORING FINDINGS:

1. Significant gender gaps still exist in leadership and decision making. Women have not yet broken through the barriers of competing with men especially for political positions and their participation in political party decision making remains low. This is mainly due to the patriarchal framework within which we operate but is also closely associated with the notion that the 30% threshold is ideal.
2. Gender issues cut across the wide spectrum and are not district or even regional context-specific
3. Women are more committed to political parties than their manifesto. They are less conversant with the women's agenda because the duty bearers have not handled this issue with the attention it deserves.
4. The ratio of women among Judges in the High Court has increased from 40% to 43% between 2013/14 and 2014/15.

RECOMMENDATIONS:

1. Advocate for the revision of the constitutional affirmative action threshold of women in political leadership at all levels to at least 50% representation in line with the Africa Charter on Democracy, Elections and Governance. Make this applicable to leadership within political parties and organizations as well.
2. Increase awareness of electoral processes and laws and target the increase of self esteem among women
3. Lobby and support political parties to adopt women friendly policies and manifestos. This will assure women MPs and Councilors of authentic support from their political parties when pushing for the women priorities/agenda in their forums.

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