A Qualitative Micro-analysis of Underlying Drivers of Livelihoods Resilience in Selected Districts of Karamoja, Acholi, and South-Western Regions of Uganda

November 2017

Summary of findings

BACKGROUND
USAID/Uganda’s new Country Development Cooperation Strategy 2016-2021 departs from previous approaches by introducing an integrated approach to delivery of development interventions. It provides an opportunity for USAID’s Uganda Mission to build upon its past success and learning, by delivering integrated, cross-sectoral development initiatives. It demonstrates leadership among USAID Missions in leveraging science, technology, innovation and partnership approaches, and advancing the collaborating, learning and adaption (CLA) approach. The new CDCS articulates three Development Objectives (DOs): (1) Community and household resilience in select areas and target populations increased, (2) Demographic drivers affected to contribute to long term trend shift and (3) Key systems more accountable and responsive to Uganda’s development needs. To achieve these outcomes, there is need for a deeper understanding of the context specific drivers of risk and vulnerability and community validation of options for increasing livelihoods resilience. The ResilientAfrica Network (RAN) partnered with USAID/Uganda to perform a livelihoods micro-resilience analysis for Karamoja, Lamwo District and the South-Western region of Uganda. The micro-resilience analysis is aimed at further clarifying the underlying drivers of chronic risk and vulnerability to recurrent shocks and stresses in the target regions. It also serves as a platform through which stakeholders at the grassroots can be consulted so that their opinions and voices are included.

Rapid community consultations were conducted in Kaabong and Kotido districts (Karamoja), Rubanda and Kisoro districts (South Western) and Lamwo district (Northern), using the RAN’s micro-resilience analysis approach and tools. Data collection involved Focus Group Discussions with community members, In-depth Interviews with individuals affected by shocks and stresses, Key Informant Interviews with district leaders, and a desk review of literature on existing programs. A total of 9 FGDs (involving 128 people), 16 Key Informants, and 16 in-depth Interviews were conducted. The FGD composition included male and female youth, mothers and fathers of children affected by malnutrition, male and female Village Health Team members, male and female religious leaders, male and female teachers, male and female Local Council members, male and female opinion leaders, widows, and representatives of women and youth groups. The in-depth interviews included parents of children affected by malnutrition, in school and out of school 14 year old girls, people living with HIV, people in refugee hosting communities, refugees, and men and women households facing extreme poverty. Key informants included District Focal Points for nutrition, District Community Development Officers, District Production Coordinators, District Planners, and local managers of NGOs. In all, a total of 160 people were engaged, including 62 from Karamoja, 64 from South Western, and 34 from Lamwo.
KEY FINDINGS  
Karamoja Region (Kaabong and Kotido Districts)  
Development context and gap  
Home to 1.3 million people, Karamoja region has the country’s lowest human development indicators. 82% of its population live in absolute poverty (1) against the country’s rate of 37%. Itinerant pastoralism and low output subsistence agriculture are the main economic activities. Stunting among children stands at 35.2%, compared to a national rate of 29% (UBOS, 2017). Literacy levels stand at just 6% compared to Uganda’s level of 72%. Net enrolment rate (NER) for primary education stood at 54.9% in 2012/13 while that for secondary school stood at 3.5% compared to the country’s level of 20% (UNDP, 2015) and was much lower for girls. Challenges persist in attaining sustainable human development outcomes in the areas of food security, livelihoods, agriculture, land and environment, basic education, local capacity development, and security. Food insecurity is a persistent stress arising from perennial dry spells, underlied by poor methods of agricultural and livestock production and low access to water. Recurrent acute food shortages have led to dependency on food aid for some households. Although crop farming is increasingly the main focus of support from Government and development partners, it is vulnerable to climatic shocks and stresses while adoption of settled agriculture remains a deep socio-cultural challenge. Several development programmes have targeted livelihoods improvement at the household level. However, these initiatives have been faced several challenges arising from the socio-economic and cultural context. Despite disarmament, pockets of insecurity persist in some areas. Because cattle are still strongly viewed as an indicator of wealth and prestige, pastoralists still focus on numbers rather than quality. Despite its development challenges, Karamoja region is endowed with a large land resource.  

Findings from the micro-resilience assessment in the Karamoja region  
Livelihoods: Community members report inability to negotiate better produce prices in existing markets. Conversely, the middlemen argue that farmers and pastoralists do not pay attention to quality of produce, which affects earnings. Financial inclusion is affected by difficulty in accessing small loans and short repayment periods that lead borrowers to lose land and assets. Cash transfer programs are constrained by a large percentage being used to meet basic needs leaving little for investment. Despite efforts to expand crop farming, households still rely majorly on cattle. Livestock productivity is highly vulnerable to dry spells and numerous diseases amidst very low access to agricultural extension services. Agencies like Oxfam have invested in valley dams by access is still very low. Valley dam construction and maintenance also provides alternative employment for youth in a region with limited livelihoods alternatives. Mining and charcoal burning, the other existing alternatives, are associated with environmental degradation. Key informants highlighted the low utilization of family planning, attributed to socio-cultural factors. According to Key Informants, violence accounts for about 20% of cases reported to the local police stations, especially involving youth.  

Food Security and Nutrition: Food insecurity and poor nutritional status are driven by both climatic and socio-cultural factors. Ideally, crop or animal yield from the one main season should be structured to take the household through the entire year. Yet high rates of crop failure from longer than expected dry spells, not storing food, excessive selling of food leaving little for the household, low savings from produce sales, wastage of savings on alcohol, low access to drought
resistant crops, and lack of potable water, lead to vicious cycles of hunger. Children, the elderly and pregnant and lactating women are the most vulnerable. Food distribution to households and referral to infant feeding centres form the main coping strategies at program level. Food production is left to women and girls. Not only is productivity reduced due to non-participation of men, but children are often leftuntended at home as the women go to the fields, while school attendance for younger girls is affected. A ‘dependency’ mentality was reported in some households that receive food aid, leading to recurrent vulnerability. Social functions (e.g. cultural dances and marriage ceremonies) and alcohol production compete for sorghum, the main staple food. To be able to buy food, some households send their children to engage in casual labour for part of the school hours. Conversely, households often send children to schools with ongoing feeding programs as a coping mechanism. The tendency for households to sell their livestock during times of stress when they are likely to earn the least is a serious impediment.

**Agriculture:** Communities in Karamoja are increasingly accepting crop farming. However, they face several challenges including: prolonged dry spells with inaccess to water, failure of ox-ploughs during severe dry seasons, poor seeds, and inaccess to drought tolerant crop varieties among others. Unpredictability of the rainy season affects planting and is a frequent cause of crop failure. Erratic increase in rain intensity causes flash floods that destroy crops. Communities called for more reliable weather forecasts. Although the erratic rainfall patterns are more likely due to climate variability, widespread deforestation is likely to exacerbate the situation. Crop and animal pests amidst widespread inaccess to agricultural extension services are a challenge. Communal grazing, sharing of the limited water points, proximity to wildlife areas, long distance pastoralism, and high prices of veterinary commodities are some of the factors that promote animal diseases. Communities reported lack of veterinary medicines and veterinarians and this makes them to entirely rely on Community Animal Health Workers who have limited capacity.

**Access to Information:** The few educated people in the communities act as knowledge brokers but they are insufficient to penetrate all the villages; their voice will hardly match the normatively established informal information hierarchies through the Manyata System. FM Radio Stations are inadequately structured to promote educative information. Kaabong lacks a local radio station while large sections of the districts are uncovered by telecommunications signals.

**Formal Education:** The main drivers of low education participation at primary level include ignorance about the benefits of education, children being viewed as a source of labour, hunger from lack of lunch packs, and disruption from lack of sanitary pads. At secondary level, lack of fees, long distances to schools and socio-cultural influences especially courtship rape, cultural dances and early marriage were key impediments. The 14 year old girl was especially vulnerable to these factors. The girls who drop out often end up in early pregnancies and hardly have a chance to re-enroll back into school. Families headed by widows were reported to be the most vulnerable to dropouts. Households hold on to their cattle, refusing to sell them to raise school fees. Poor performance of the children due to poor quality of teaching was also cited as a key stressor. The low teacher-pupil ratio, congestion, poor school infrastructure and aesthetics and lack of scholastic materials lead to chronically poor academic grades. A number of interventions have been undertaken to improve education services which have contributed to observable increases in enrollment and attitudes to girl child education but these programs need to be scaled.
Health and WASH: The health sector in Karamoja is constrained by poor infrastructure, long distances to facilities, understaffing, absenteeism, inadequate medicines, laboratories and equipment, distant referral hospitals, absence of an emergency ambulance system among others. Key Informants said that health facility buildings are too few to cater for the large numbers of patients, manifested in sharing of wards by men, women and children. Lack of privacy enhances self-stigma for people with HIV. Heavy rains often cut off road connections to health facilities. Equipment and sundries for health conditions common in the region (e.g. injuries and wounds) were reported to be in short supply. In several health facilities, patients have to fetch water from valley dams. The most frequent health shocks and stresses are malnutrition, WASH diseases, injuries, and infections, especially malaria, and diarrhoea. Others include HIV, Hepatitis B, syphilis, brucellosis, tuberculosis and typhoid. The most affected group is children below five years. Although communities received mosquito nets during campaigns, households are reluctant to sleep under them. Sinking of boreholes is hampered by the rocky nature of some areas and salty water. Inaccess to water, open defecation, and collapse of pit latrines are the key drivers for the poor sanitation situation. The spread of HIV/AIDS has been linked to poverty, food insecurity and socio-cultural practices like marriage ceremonies and courtship rape. There are reports of rape of young girls as they are sent out by their parents to gather green vegetables. Because of low utilization of VCT services, many men do not know their HIV status. Once diagnosed with HIV, youths tend to automatically drop out of school leading to further risky behaviours. The strong social misconceptions and beliefs in traditional medicine and witchcraft hinder people from seeking care from health facilities. For example, there is a wide held misconception that health workers do not attend to pregnant women who deliver along the way to hospital.

South Western (Kigezi) Region (Kisoro and Rubanda Districts)
Development context and gap
South Western Uganda faces a concentration of livelihoods stresses including food insecurity, high population growth rates, land fragmentation and exacerbations of climate variability leading to flash floods, and landslides and dry spells. The region also has higher than average rates of poverty, malnutrition and sanitation related diseases. Literacy levels are below the national average. The majority of households in South Western Uganda depend on subsistence agriculture for their livelihood which is predominantly rain fed. This, amidst exacerbations of climate variability and the lack of diversified incomes, creates vulnerability for the region. According to the 2016 UDHS, 29.3% of children under the age 5 in the region are stunted while 9.7% are severely stunted (UBOS, 2017). This pattern has persisted for several decades in the region and only a small proportion of it is attributed to income differences (UNICEF, 2015).

Findings from the micro-resilience assessment in the Kigezi region
Health, water, sanitation and hygiene: Communities expressed lack of access to safe water. Because of the hilly terrain, movement of water is very tedious especially for women and children who fetch the water. Water has to be used sparingly. An estimated 17% of households do not have latrines. The health sector is constrained by inadequate staffing, inaccess, hard-to-reach areas, frequent drug stockouts, lack of funds for PHC outreaches, and transport challenges. Local coping mechanisms include transport associations involving manual carrying of severely ill patients. Integration of outreach services is not visible beyond immunization and infant growth monitoring. The most common disease stressors are Respiratory Infections and diarrhoeal diseases, the most vulnerable being children. Although public health services are presumed to be
free, communities report incurring high indirect costs from transport, maintenance in distant facilities and buying medicines due to stock-outs. Those who fail to buy medicines fear to return to the health facilities. Diseases of extreme poverty like jiggers, lice and intestinal worms are very prevalent yet neglected. Disadvantaged populations such as orphans, the disabled, and elderly are the most vulnerable to neglected diseases. The fear of indirect costs affects early care seeking, ANC attendance, and delivery in health facilities. Key Informants said that the high rates of psychosocial stress has led to higher than expected suicide rates in this region. STDs, HIV/AIDS and teenage pregnancies were cited as key problems. Poverty is one of the drivers of STIs, HIV and early pregnancy. Due to non-affordability of sanitary pads, girls adapt by using old pieces of cloth. The underlying drivers for the high fertility in the region include cultural desire for many children, religious teachings against family planning, myths regarding FP, family planning side effects, and non-involvement of men. Community members complain that health workers do not explain clearly the side effects of FP methods and the support system for them.

**Education services:** Schools’ infrastructure is affected by floods and heavy rains, leading children to miss school days. The low school: pupil ratio results in long distances walked to school. Communities were particularly concerned about the low quality of teaching and learning due to poor scholastic materials. Girls do not have basic necessities like sanitary pads. Performance is affected by the failure to study at night due to lack of lighting. Dropping out from school is associated with an increase in antisocial behaviour e.g. theft. To obtain school fees, some women sell their reserve food, but sometimes heavy rains destroy the crop. While, the policy is that caretakers must lunch packs for the children, children often stay hungry at school. Inability by households to provide basic necessities forces children into casual labor during school hours, which eventually lures them to drop out of school. Within households, young girls report discrimination in the amount of scholastic materials provided to boys and girls. In the areas visited, there were hardly any organizations helping boys and girls who dropped out of school. Initiatives like the Muramba Child Development Center and a bursary scheme by Kisoro District tried to support young girls to stay in school. However, coverage was a challenge. Despite the many stresses and barriers, most parents have a positive desire to keep children in school as long as possible and view educated children as a form of investment for their future.

**Livelihoods:** Most of the roads in this hilly place are in the valleys where they often get washed away by floods. Communities report substantial losses of property from floods with occasional losses of life. Yet community agency to mitigate flooding (e.g. digging or desilting trenches) is limited. While subsistence agriculture is central to livelihoods, inaccess to land limits the potential for productivity. Inaccess to viable livelihood alternatives beyond subsistence agriculture has caused several people to migrate. Most women were unable to start independent businesses. They do all-day gardening and domestic work without support from their husbands, yet the men control the income. Women repeatedly said that they lacked access to meaningful income that can allow them to invest. Conversely, many men spend their days drinking alcohol. It was also reported that men sometimes sell the food produced by women while it is still in the gardens. There is a widespread misperception that women are responsible for taking care of children. Alcoholism is a key driver of family neglect by men, some drinking every day from morning to evening. Youth and children are also increasingly vulnerable to alcohol. Alcoholism is also a key driver for high fertility and domestic violence. Domestic violence is common in the region as a result of men not playing their part, infidelity by men, men controlling household income, and
HIV/AIDS. It is hard to find employment during the rainy season as farm-owners pause cultivation in fear of severe soil erosion. This seasonal scarcity of work leads community members to borrow food from the farm owners which they later pay for through work.

The influx of refugees not only puts more pressure on the land but affects job opportunities for residents. As part of the coping mechanisms, communities have been encouraged by authorities to form saving and investment groups. However, pressure to pay back loans and interest often forces households to sell their crop harvests prematurely while some lose their assets. Some NGOs like TPO support households by paying school fees for children, vocational training and formation of farmer groups. The community’s aspirational goal is to be able to ‘educate their children for a brighter future’. Young girls who have dropped out of school lack skills to diversify their income and rely on casual labor to survive. Their aspiration is to learn some vocational skills. However, available programs to support them are not sufficient. Community members report that there is a degree of resilience to crop failure because households often persevere some seed and replant when earlier crops are destroyed by floods. Households often multi-task by working in their own small holdings and as casual laborers in larger holdings. Primary school children are obliged by their guardians to do casual labor over the weekends to raise money for necessities. Livelihoods strategies that have failed to work include tea and tobacco planting and rearing exotic livestock. Local communities seemed to have a fair understanding of resilience which they define as being able to cope with the shocks or find alternative solutions.

**Food Security and nutrition:** Despite having two rainy seasons, occasional dry spells affect productivity while heavy rains sometimes destroy the crop. Other community level drivers of food insecurity include: Influx of refugees, food theft, destruction of crops by animals near wildlife areas, unpredictable variations in onset of rains, and crop pests and diseases. However, there were important household level drivers of food insecurity including lack of knowledge about proper child feeding, limited dietary diversity due to mono-cropping, and inability to purchase protein food. The bulk of household food yield is sold, leaving little for consumption. Communities said that the little money that they generate from agriculture is spent on school fees and ill-health. Mono-cropping mainly involves Irish potatoes which are on high demand by traders. There is just not enough space to grow other foods. Households resort to buying maize-meal from the shops, becoming net food buyers. The economics of these transactions and whether households have a net benefit from ‘selling food to buy food’ are not clear. Children of young mothers, those in large polygamous families, those with disability, those cared for by men and elderly, and orphans are particularly prone to malnutrition. Children are initiated early on complementary feeding with a limited food diversification. While some health facilities have been supported by different programs to provide rehabilitation for acutely malnourished children, health workers say that the same children keep returning with recurrences, implying failure to address the household level root-cases. The need for employment forces mothers to leave their breastfeeding children with their grand-parents as they solicit for casual labour on distant farms. The growing practice by richer households of planting eucalyptus tree forests not only reduces casual labour opportunities but contributes to degradation of soil fertility. The exhaustion of soils due to over cultivation and surface run-off has made some communities to shift to tree planting. No crops can be inter-planted with Eucalyptus. Tobacco growing is another driver of food insecurity. Communities also expressed the need for better food storage, accessible saving mechanisms, approaches to increase productivity of small holdings, and more reliable climate
forecasts. Interventions from partners such as UNICEF and MSH involving food supplements and promotion of a balanced diet with the available foods have been effective where implemented. The reach of such programs should be expanded amidst promotion of dietary diversity.

**Agriculture and Markets:** Agriculture, the main source of livelihoods, is mostly practiced by women. In most communities, they plant the same crop (Irish potatoes) every season without crop rotation, which has led to soil degradation. Some women grow tobacco on part of their holdings which promotes further soil degradation and has no value as a food-crop. Others have allocated most of their limited land to growing onions and tea for money. In many cases, the money earned from these is insufficient for them to buy food. Because of this, some women have diversified to vegetables. Population pressure resulting from high fertility rates, polygamy, and unplanned families has reduced the available land. Some households have learned from others some new practices like the use of pesticides, fertilizers, composting, improved seeds and better farming methods like intercropping. However, communities are concerned about the cost of fertilizers and improved seeds. Fake seeds were reported to be widely sold on the market. These have led to poor yields and incomes. These seeds are normally acquired from nearby towns. Some participants said that some crops die immediately after sprouting. Participants noted that erosion and floods often wash away their crops. The high cost of transport to the trading centers diminishes their profit margins as middle men transfer the costs to farmers.

**Land and Environment:** There is limited land due to high population density in the area. This is a consequence of low utilization of family planning, early marriages, low levels of education and refugee influx. Limited land forces people to settle and cultivate on the steep slopes. This not only increases food insecurity but also makes them more prone to mud-slides. Communities have been sensitized to construct terraces, plant elephant grass along their gardens, and to dig and desilt drainage trenches to control run-off. However, due to the small and fragmented pieces of land, some people have refused to comply leaving the soil exposed to run-off. The land shortage makes people grow similar crops continuously on the same land leading to soil exhaustion and poor yields. People have encroached on high risk areas for floods like swamps.

**Governance:** Community members say they do not sufficiently ‘feel’ the reach of the district services. Many of them have never seen the agricultural extension staff. However, Village Health Teams are visible. Communities said that government should provide the services it is mandated to including teachers and teaching materials, health facility staffing and drugs, renovating schools and health facilities, motivating public servants and improving the road network. Communities demanded enactment and enforcement of by-laws regarding alcohol consumption hours, illicit packaging of alcohol and taxes on alcohol, as well as by-laws on land management and encroachment on wetlands. Although insecurity was reported in the border sub-county of Nyabwishenya, government effectively put it to an end by establishing and army unit in the area. Key informants underlined the need to operationalize the sub-county disaster response teams especially regarding floods, as well as leadership and accountability courses for local leaders.

**Infrastructure:** Flooding and run-off water from hill tops deposits silt and stones which affects physical infrastructure including schools, markets, roads and health centres. Communities complained that school infrastructure is poor with very old buildings. Classes are interrupted by storms during the rainy season. Not only was infrastructure an encumbrance to movement of
agricultural produce but it has hampered the exploitation of natural resources like sand and precious stones that could provide employment opportunities for the region.

Acholi Region (Lamwo District)
Development context and gap
Northern Uganda was devastated by a 20-year armed civil conflict from 1986 to 2006. Over 2 million people were internally displaced. Lamwo District of Northern Uganda was cut out of Kitgum District. The district has an area of 5,588.3 km², of which 90% is arable. The district is sparsely populated with a population density of 24.5 people per sq. km. Subsistence farming is the main source of livelihood with sunflower, simsim, rice, millet, sorghum, ground nuts, cotton and beans all grown there. The insurgency in Northern Uganda left a foot-print of impacts. The region has some of the highest poverty rates. Many youths have a negative attitude towards work, amidst limited livelihood opportunities. Some attempts at income diversification have resulted into negative adaptation, notably the rampant use of alcohol. The region has one of the highest rates of gender-based violence and HIV in Uganda. An earlier micro-resilience analysis identified poor social services, corruption and frequent land disputes as key vulnerability factors. Recently, Lamwo district took on the resettlement of refugees from South Sudan’s civil war. The refugees are registered in a reception center, allocated plots of land and supported to build homes, establish gardens and initiate income generating activities. This effort is in line with Uganda's transformational approach of making refugees self-reliant and locally integrated with the host communities. Since conflict in South Sudan flared in June 2016, there has been an unprecedented influx of refugees leading Uganda into one of the World's largest refugee crises, and placing enormous strain on public services and livelihoods infrastructure. With more than one million refugees, Uganda is now the top-ranking refugee-hosting country in Africa. To date Lamwo district has received over 30,000 refugees, mainly resettled in Palabek Settlement.

Findings from the micro-resilience assessment in the Acholi region
Governance and leadership: There are tensions between the host communities and the refugees. Concerns range from cultural unease, to land, perceived privileges by refugees and unmet expectations. Cultural concerns by host communities include religious norms, dressing, intermarriages, and perceptions that refugees have hostile behaviours. Why host communities feel that refugees should give up their norms is not clear but points to cultural stigma. Conversely, refugees held no grudges with the host communities. Host communities feel that refugees are given better services than them. They are also jittery about aid distribution which they feel entitled to. There was concern about transparency in acquisition of land for refugee settlement. They say that government promised to compensate them but did not. Others were concerned that their land will never be returned. Local communities said that while they were all required to have a national ID card, entry and exit of refugees was not regulated. They were concerned about refugees buying land, starting competing businesses, and competing for casual labour outside the camps. However, community members did not cite any evidence to indicate that the refugees were hostile. In general, there appears to be a mismatch in expectations between the host communities, their leaders and refugee management, without adequate dialogue. Some community members even think that their local leaders received compensation on their behalf but did not share with them which local leaders vehemently deny.
**Agriculture, food security and markets:** Host communities' main source of income is the sale of food items produced through subsistence methods. They cite 'school fees for children' and 'treatment of household members' as the main needs for which they spend their income. However, agriculture is faced with several challenges including inaccess to accurate weather forecasts to optimize planting, inaccessible extension services, and poor-quality seeds. Additionally, land in the region is communally owned which limits investment. Inability to produce in larger quantities than their usual subsistence holdings makes communities vulnerable to food and financial insecurity. Communities appealed for ox-ploughs and associated implements to facilitate mechanization of their agriculture. Food shortages resulting from unpredictable climate especially prolonged dry spells was mentioned as a major stress. In the recent dry spell, some households required food aid. Communities said that local leaders were involved in mobilizing the food assistance, meaning that the community is conscious about connectedness in crisis. Some community members expected to receive food as compensation for giving land for refugee settlement. Camp management also said that land related negations are a major challenge as most landlords are no longer willing to offer free land to resettle refugees. Access to markets was identified as a stresses. Host communities cite the domination of middlemen in the market who give low prices and counterfeit money to farmers. On a positive note however, the communities said that refugees brought some opportunities including new food markets in which refugees buy at a higher price. On the other hand, communities said that refugees are also selling the relief food and other non-food relief items to the host communities at cheaper prices to raise money to buy commodities that are not provided to them. Communities said that low incomes are demotivating young people from engaging in agriculture. Communities are hesitant to engage in the cultivation of cash crops due to lack of access to market information. There are limitations in the capacity of farmers to add value to their produce before selling it.

**Livelihoods:** There is dependency on perennial crops (simsim, beans, cassava, maize, millet and sorghum) for both consumption and sale. Communities also said that they receive government support in form of seeds. However, they were concerned that the seedlings are often supplied out of season leading to crop failure. Due to low market leverage and small holdings, they said that their earnings from these perennial crops are too low to meet daily demands given the large family sizes. Alcohol brewing is one of the alternative sources of livelihoods in the region. This economic activity has however resulted into many livelihoods challenges at the household level especially the high rates of alcoholism among the men. Consumption of alcohol among men seemed to have risen sharply during the civil war. There are some gender connotations from the alcohol situation in this region: While most consumers are men, the proprietors of most of the small bars that sell the alcohol are women. The business is attractive because it generates quick money from a target group that controls household resources. However, it has led to negative adaptation in the region as it hinders men and young people from engaging in productive work, increases domestic violence, depletes household savings and promotes spread of HIV. Some women discussants feel helpless on how to tackle the alcohol problem among men. They attribute the growing problem to idleness and frustration among youth after dropping out of school. While there have been some livelihoods support initiatives targeting the region, the community feels that they are not involved in their design. They describe current approaches as selective and non-consultative. Although communities express interest in village SACCOs, they report frequent failure to pay back their loans which they attribute to inadequate knowledge about profitable businesses. Others noted that borrowed money is often used to settle pressing family issues like
school fees, leading to loss of household assets like livestock to recover the money. Interest rates on the small loans from SACCOs are very high. The youth lacked information on how to access microloans and skills on how to manage businesses. Despite these challenges, some NGOs like Mercy Corps are supporting households to start successful small businesses. Communities said that some refugees set up businesses in their settlements, creating competition.

Environment: Host communities report high levels of environmental degradation from the influx of refugees especially cutting of trees for firewood, home construction and charcoal making. However, even before the refugee situation charcoal making was rampant, feeding the high demand in Gulu, Hoima and even Kampala. Because trees in the region are mainly short shrubs, they are being depleted at a fast rate. Communities blamed the environmental degradation on poor leadership who watch without taking action.

Education services: Communities were concerned about limited secondary schools to serve both the host communities and the refugees. They cited high school drop outs at secondary school level. Secondary schools are located at long distances. Other reported issues include the lack of scholastic materials, high enrollments per school, and inadequate sanitary services like latrines and sanitary pads for girls. One of the local adaptive strategies was mobilizing relatives and friends to contribute towards raising school fees for secondary school going children. The region has had several interventions to try and improve education infrastructure and services, including from agencies like AVSI, UNHCR and government programs like NUSAF. The shortfall in such programs is the level of need which exceeds the supply.

Health and WASH: Most of the health concerns were related to WASH and lack of medicines in the health facilities. Communities attribute this to poor leadership, noting that 'leaders neither mind about the quality of services nor listen to the community but prefer corruption'. The influx of refugees worsened the sanitation issues including contamination of surface wells. Clean water is inaccessible. People share wells with animals. Communities also noted low latrine coverage, indiscriminate disposal of human waste, and poor hygiene in the camps, raising fear of cholera outbreaks. Other issues included a high burden of disease and poor the quality of health services. Malaria, HIV/AIDS, respiratory infections, Hepatitis B, diarrhoeal diseases, and intestinal worms were mentioned as key stressors. However, communities observed that programs targeting malaria reduction (e.g. mass distribution of bed nets) have resulted into a felt reduction in the frequency of malaria. They requested that the coverage of such programs is scaled to all households. HIV/AIDS was noted to be a problem. However, communities expressed optimism because all those that are found to have HIV are routinely initiated on treatment and the drugs are free. People living with HIV said that it was easy for them to access treatments. However, they expressed concern over occasional stockouts of HIV drugs. On exploring this issue further, stockouts for first-line commodities were uncommon – the main problem was with the second-line drugs, attributed to delays in procurement due to country level changes in the regimen. HIV affected households were burdened by expenditures on transport to health facilities. Communities reported a widespread problem of individuals fearing to know their HIV status through routine screening. Some people shun public health facilities for fear of being offered a HIV test. This was mainly attributed to self-stigma as stigma from other community members has reduced. Young people do not test for HIV because they fear losing relationships with their partners. They said that even those that test positive do not want to initiate ARVs despite the
current policy to initiate treatment within 14 days. Some of the drivers of HIV spread include alcoholism, rampant extramarital affairs, and poverty which drives some women and youth to engage in sex for money. Youth participants said that they were well informed about HIV treatment. Such messages were mainly received from radio campaigns. Communities said that the HIV has led to an increase in orphans, and reduced productivity. Communities are positive about circumcision and about people living with HIV/AIDS taking their medications. The quality of health services provided in public health facilities was described as poor with several participants citing frequent stock-outs of drugs, understaffing, and absenteeism, dual practice by health workers, inaccess to health information including family planning, rudeness among health workers and pilferage of drugs as key concerns. Communities were concerned about the poor living conditions of health workers, some of whom are forced to stay far from the facilities. They cited poorly funded health facilities, some with run-down buildings, drug stockouts and attitude of health workers as the most important factors affecting health care seeking in public health facilities. One part of the district has very few health facilities. Referral over long distances was also a major issue of concern. Boda boda, the main form of transport for referrals was costly.

PROGRAMMATIC RECOMMENDATIONS

Karamoja Region
1. Access to markets: Innovations are needed to increase direct access to produce markets by crop farmers and to empower them to negotiate for better prices. Farmers should be empowered with the basic skills to improve the quality of their produce. Development agencies should invest in more community radio programs for knowledge dissemination.
2. Financial Inclusion: Organizations providing small loans to farmer groups should be engaged to revise the repayment terms. Cash transfers to very vulnerable households should be unconditional and large enough to meet both critical basic needs and a reserve for investments. There is need for an evaluation of how households use the cash provided.
3. Livestock: Households should be sensitized to focus on the quality rather than quantity of cattle herds. More so, households need to be advised on when best to sell some of their livestock to get the best price, and how to save the cash earned. This requires innovations on accessible saving platforms. Development agencies should explore a business model around valley dam construction and maintenance as a livelihoods alternative for youth.
4. Agriculture: Intensified promotion of drought resistant crop varieties should be undertaken. Development organizations should also explore diversification to other non-traditional drought tolerant cereals and starches like sweet potatoes and cassava in this region, as an alternative to sorghum. Farmers should be supported to mitigate crop and animal diseases by increasing access to extension services, affordable medicines and sensitization on disease prevention. Being the most vulnerable, households that receive food aid should be continually supported to develop food security plans to break the cycles of recurrence.
5. Education: There is need for a multi-faceted strategy to promote enrollment, but more importantly retention, in schools. In the most vulnerable communities, development programs should support school feeding programs for Primary Schools. Community co-creation on how to support these SFPs should be conducted. Not only should more secondary schools be built and the infrastructure of existing ones improved, but improvement of quality of teaching should be supported by providing scholastic materials. Where possible, secondary school teachers in the region should receive incentives. Resources available, access to free secondary education should be prioritized for all capable students. Community radio
shows should repeatedly emphasize the benefits of education. Provision of sanitary pads and mass awareness creation on menstrual hygiene alternatives using local technologies should be implemented. By-laws against casual labour for school children should be enforced.

6 **Health:** Regarding family planning, messages that take a livelihoods approach and bring out the link between household size and livelihood vulnerability are necessary. Promotion of FP should employ a household approach in which men are included. There is urgent need to co-create social, regulatory and gender-based approaches to reducing alcohol consumption. They should incorporate community dialogues on how to control this emerging public health challenge. Cultural night dances should be targeted for education on safe sex. A community approach to health promotion should be used to target socio-cultural drivers of HIV/AIDS, diarrhoeal diseases, Hepatitis B and malaria. Measures to address the high levels of violence should be instituted, including community dialogues, conflict mitigation trainings, and arbitration mechanisms and counselling measures at health facilities.

**South Western Region**

1 **Water, sanitation and hygiene:** Innovations to improve rain water harvesting and transmission of water should be explored, including gravity flow schemes, household level rain water harvesting and fallow rain water tanks. Locally affordable technologies for these approaches should be developed. Promotion of latrine construction should be prioritized.

2 **Health:** Interventions to improve essential drug forecasting should be put in place to mitigate stockouts. Within districts, optimization through redistribution of drugs between health facilities may help mitigate acute shortages. Drug supplies to the region should be marked up to adjust for the influx of refugees. Adolescent girls should be educated on how to improvise for menstrual hygiene using appropriate local technologies. Development agencies should target setting up local production facilities for low cost sanitary pads. Family planning messages should address the misconceptions regarding side effects of FP methods. Longer term methods of family planning should be promoted. Innovative approaches to reach men with family planning messages should be co-created together with the communities.

3 **Financial inclusion, markets and livelihoods diversification:** Regarding village saving groups, mechanisms to improve loan repayment and to reduce interest rates should be explored. Mechanisms and platforms to promote local value addition and produce bulking by farmers should be explored so as to increase their leverage in the markets. Innovations to link rural farmers directly to produce buyers should be co-created.

4 **Education:** There is need to improve physical infrastructure and teaching materials for schools. Extensive consultative community dialogues to get buy-in from parents to provide lunch packs for their children should be undertaken. This should be integrated into the food security strategy for community and household outreaches across programs. In the hardest-to-reach areas, development agencies may consider direct support to school feeding programs. Those in communities with the highest school dropout rates should be identified and supported with free sanitary pads. Programs to identify school drop-outs and support them to acquire additional livelihood skills should be expanded.

5 **Environmental degradation:** Given the high proneness of the local terrain to soil erosion, local mechanisms to reduce destruction of infrastructure from storm water run-off should be put in place including maintenance of water drains and farm terraces and the planting of protective plants to reduce soil erosion. Promotion of agro-forestry should be conducted. By-laws to protect swamps from encroachment need to be enforced.
6 Gender gap: Interventions to change the gender disparities in production roles and responsibility for looking after the family should be instituted. This requires close engagement with households to discuss their interpretations of gender roles so as to guide them to identify and act on the inequities. Both men and women must be involved. The region needs a wide reaching campaign targeting the reduction of alcohol consumption especially among men, as well as increasing male participation in taking care of their households. Local by-laws to regulate alcohol consumption hours should be enforced.

7 Malnutrition: To break the cycle of chronic malnutrition, a multi-faceted approach that targets the underlying drivers at household level rather than the facility based nutritional centres is needed. There is need to scale up awareness creation on appropriate infant feeding. Interventions should consider a community and household dialogue approach in addition to the facility-based treatment centres. Interventions should involve households in assessing their current nutritional practices to identify gaps. Children who return to treatment centres with acute malnutrition should as routine be followed up to their homes.

8 Agriculture: There is need to improve climate services to enable more climate-ready agricultural practices. To restore local soil fertility, households should consider composting and diversifying to limited animal husbandry. Innovations to increase access of rural farmers to agricultural extension services should be explored, as should interventions to increase access to chemicals to tackle crop diseases. Production Officers should learn from the health sector on how the reach of VHTs has been sustained amidst resource constraints. Approaches and innovations to increase productivity from small holdings should be explored. Although crop specialization should be supported to promote farmer excellence, there is need to promote some local food diversification for dietary diversity in the homes. Government and development partners should increase access to improved seeds, as well as support the regulatory environment to curb fake seeds and chemicals.

9 Food security: Development programs need to develop models for the minimum amount of food or money that households need to save to enable them go through the dry seasons. Innovations to make saving more accessible should be explored. Households should receive advice on which foods to buy when they consider buying food, for optimum dietary diversity. Models to wean off households from growing tobacco and other crops that reduce their resilience to food related shocks and stresses should be explored.

10 Infrastructure: Given the harsh terrain, local authorities should be supported to increase feeder road maintenance to facilitate transportation of agricultural produce.

Acholi Region

1 Relations between refugees and host communities: There is need for more dialogue with host communities as well as dissemination of the international humanitarian law to facilitate co-existence with the refugees. Cultural and opinion leaders should be involved.

2 Access to social services: Public services given to the refugees should be made accessible to the host populations and vice versa. Host communities should be sensitized to remove the misconception that they are entitled receive emergency aid items. Basic service delivery and infrastructure in host communities should be improved.

3 Land rights and access: Because land is communally owned in family and clan lines, decisions taken on acquisition, usage and development of land require a community approach. Innovations that can improve land relations and custodial safety without stifling modernization should be explored. There is need for dialogue with the clan leaders and representatives of
communities who provided land for the resettlement so as to address expectations. There is need for innovations around farmer collaboration for mechanization of agriculture.

4 **Agricultural services:** Innovations to improve agricultural extension services for rural farmers should be explored as should mechanisms for improved access to mechanized farming. Mechanisms to improve climate information support should be put in place. Farmers should be facilitated to form production-based cooperatives.

5 **Food security:** Given that the range of foods that can grow there is wide, achieving adequate dietary diversity is possible through guiding households on appropriate food combinations. The region also needs promotion of better nutritional practices at household level.

6 **Markets and value enterprise:** There is need for new and disruptive approaches to small farmer networking to multiply capacity for produce bulking, supply stabilization and price leverage in markets. There is also need for innovative platforms or approaches to linking multiple farmer networks to create stronger farmer led supply networks, and support to farmers to undertake value addition to their produce for better prices in the markets.

7 **Youth entrepreneurship:** For young people to be gainfully employed in agriculture there is need for targeted support to youth groups. Youth need skills and capital to invest in high-value agricultural enterprises like coffee. Interventions to skill youth who dropped out of school should be supported. Models to tap into local university students to provide extension services should be explored and supported. Alternative livelihood programs that support non-climate dependent enterprise at household level should be co-created.

8 **Alcohol and gender:** A comprehensive strategy to reduce alcohol consumption should be co-created and rolled out, especially targeting men. It should be multi-faceted, including community dialogues, enforcement of local by-laws restricting opening hours for bars, and dissemination of messages on how alcohol affects household incomes.

9 **Health services:** Interventions to improve the quality of health services should be co-created and rolled out. Such programs should improve staffing, health facility infrastructure, drug forecasting, stock management, and client service delivery. Health care workers should receive training in quality improvement while those in hard-to-reach health facilities should receive incentives where possible. The importance of scaling access to appropriate basic sanitation cannot be overemphasized. To sustain the reduction in Malaria burden, programs like bed-net distribution and indoor residual spraying should be maintained at scale. With regard to HIV commodities, efforts at improving forecast efficiency for second-line drugs and provision for sufficient buffer stocks before regimen switches should be emphasized at national level. The high levels of self-stigma that drive fear to test for HIV and early initiation of ART needs to be addressed through counselling and health promotional activities that target self-stigma. Addressing the high burden of other health conditions like epidemics should be tagged to the improvement of sanitation programs and Hepatitis B immunization.

(This report was produced by ResilientAfrica Network, Makerere University, with support from USAID/Uganda Mission)