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| <b>NAME OF DOCUMENT</b>                           | <b>CICO END OF PROJECT EVALUATION REPORT</b>  |
| <b>PROJECT NAME</b>                               | Promotion Of Awareness and Mitigation Of HIV/AIDS On The Upgrading Of Selected Town Roads (20.2km) In Mbarara Municipality To Paved (Bituminous) Standard   |
| <b>DATE OF REPORT</b>                             | May 2021  |
| <b>DATE OF PROJECT IMPLEMENTATION</b>             | <b>Start:</b> 3 <sup>rd</sup> December 2019<br><b>End:</b> 31 <sup>st</sup> July 2021   |
| <b>SCOPE</b>                                      | End of Project Evaluation   |
| <b>BRIEF ABSTRACT</b><br>(description of project) | <p>Findings from global studies of HIV/AIDS prevalence and risks at work places recognize that migration, short-term or long-term, increases opportunities for sexual relationships with multiple partners, transforming transport routes into critical in the propagation of HIV/AIDS. There are a number of studies focusing on HIV/AIDS and transport and one of their findings suggests that long-haul truck drivers constitute a high-risk group in the road sector.</p> <p>In response to the ever-growing effects of HIV and AIDS, the Project focused on three Critical areas; HIV and AIDS, Violence against Children as well as Sexual and Gender Based Violence. These have been found to affect communities especially women and children in projects that involve road construction.</p> |
| <b>OBJECTIVES/OUTCOMES /OUTPUTS</b>               | <ol style="list-style-type: none"> <li>1. Reduce the risk of child exploitation in form of child labour, sexual abuse and other forms of abuse by construction workers, families and the local community in the project area</li> <li>2. Raise awareness and increase access to information among the local community on matters of the project</li> <li>3. Promote positive relations between contractor workforce and local community.</li> <li>4. Increase opportunities for face-to-face communication with communities, access and ease of communication of grievances from communities on matters related to the road project, and their resolution.</li> </ol>   |



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## ACRONYMS

|      |   |
|------|---|
| AIC  | AIDS Information Centre-Uganda          |
| ANC  | Antenatal Care                          |
| HIV  | Human Immune Deficiency Virus           |
| HCT  | HIV Counseling and Testing              |
| SGBV | Sexual and Gender Based Violence        |
| IEC  | Information Education and Communication |
| STIs | Sexually Transmitted Infections         |
| GMCs | Grievance Management Committees         |
| M&E  | Monitoring and Evaluation               |
| UNRA | Uganda National Roads Authority         |
| Rd   | Road                                    |
| VAC  | Violence Against Children               |



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## **1.0 INTRODUCTION/BACKGROUND:**

AIDS Information Centre Mbarara Region with funding from CICO is closely involved in promotion of awareness and mitigation of HIV/AIDS and sexual and Gender Based Violence among the communities along the construction roads of: Spencon (Nile Breweries) road , Ntare link Road, Nkokonjeru-Mubangizi Road, Mubangizi Road, Golf Course Road-Rwebikoona Market Road, Rwebikoona link (Bicepe Rd), All Saints Church Road, Kakiika Road, Kakiika - Kyamugorani road, Surveyor Rwebishuri road (Kidongo) section 1, Surveyor Rwebishuri road (Kidongo) section 2, Biharwe Division Headquarters road, Karama road, State link road, Kamukuzi road, Ruharo Church road section.

AIDS Information Centre is actively involved in mitigation of risks of GBV and VAC, as well as strengthening the community to help prevent GBV and VAC among the communities living along roads under construction and strengthen coordination and networking with National and District authorities to monitor the implementation of mitigation measures in the areas covered by the Project.

## **2.0 PURPOSE/ OBJECTIVES OF THE EVALUATION**

- ) To give feedback on the achievement of project objectives, and lessons for future programming
- ) To establish and document the impact and effectiveness of project interventions to render accountability to donors

## **3.0 EVALUATION METHODOLOGY**

During the project lifetime, the monthly reports have provided a comprehensive and evolving view of the project and consequently, the focus of the final evaluation is on project results and sustainability.

The evaluation will be drawn from both quantitative and qualitative information from a variety of resources including;

- a) Project documents (proposal, budget) and other records including monitoring data, registers, monthly reports, presentations and Quarterly review data prepared by project staff
- b) Field observations and Individual discussions/ interviews with beneficiaries including Community members, GMC members and road constructors



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The choice of specific methods and sampling procedures was determined by the Monitoring and Evaluation Officer in conjunction with project management team.

### 3.1 REVIEW OF DOCUMENTS

The evaluation has encompassed a thorough review of project documentation, including, but not limited to; Project design documents, Monitoring and Evaluation plans, interim narrative reports, project indicators, registers, CICO monthly reports, Quarterly review presentations and Audit data

### 3.2 FIELD OBSERVATIONS AND INDIVIDUAL DISCUSSIONS/ INTERVIEWS WITH BENEFICIARIES

Individual discussions were held with representatives of Community members (2), GMC members (3) and road constructors (3) to ascertain their understanding of HIV/AIDS, GBV and VAC; and the perceived impact of the project on these in the communities. Of these 2 were female while 6 were male respondents.

It was found that all 8 understood what HIV/AIDS is, 6 understood which populations are most at risk for HIV/AIDS and 5 aware what HIV prevention services are available and how and where to access them specifically which hospital, health center or church.

Furthermore, 7 interviewees had grasped the basics of GBV and Child abuse but only 5 were aware of any GBV and Child abuse cases in community. They had gained sufficient information on the channels available to receive care and support including legal help in the event of GBV or child abuse. These interviewees were committed to disseminate the information and act as focal persons to support GBV and child abuse survivors access necessary support after end of the project.

### 4.0 LIMITATIONS TO EVALUATION METHODOLOGY

The project has been regularly reviewed and evaluated during implementation and in accordance with CICO recommendation, the final evaluation has therefore concentrated on reviewing existing documents and project records, supported by a small amount of primary data gathering. Due to a limited budget however, we were only able to interview 8 beneficiaries.

### 5.0 PROJECT ACTIVITY RESULTS

Assesment of the achievement of the CICO project is preseneted in this section, the focus of the assessment is upon the degree which activity reslts, their indicators and targets have been achieved as shown in the tale below;

| <i>Activity</i> | <i>Target</i> | <i>Actual Activities</i> | <i>Comments</i> |
|-----------------|---------------|--------------------------|-----------------|
|-----------------|---------------|--------------------------|-----------------|



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AIDS INFORMATION CENTRE-UGANDA

|   |    | <i>done by<br/>end of<br/>Project</i> |  |
|---|----|---------------------------------------|--|
| 1.1) Conduct 01 Baseline Assessment   | 1  | 1                                     | This was conducted in May 2020 and report submitted  |
| 1.2) Support Contractor in Generating Workplace Policies and Code of Conducts   | 1  | 1                                     | This was done, policies shared in January 2020   |
| 1.3) Conduct 01 District Entry Meeting.   | 1  | 1                                     | It was conducted on 04/06/2020   |
| 1.4) Conduct 01 meeting to Develop a Monitoring Framework for the HIV & AIDS, Child Protection and Gender Based Violence (GBV) Programme.   | 1  | 1                                     | This was conducted on 05/06/2020   |
| 1.5) Identify and build the capacity of Grievance Committees.   | 1  | 1                                     | Training was carried out on 21/08/2020   |
| 1.6) Carry out 12 Monthly Integrated Dialogue sessions/Meetings on HIV & AIDS, GBV and VAC for 350 Road Constructors and Community members. | 12 | 12                                    | All were carried out and reports submitted to CICO   |
| 1.7) Support 12 Monthly Integrated Outreaches for service provision.  | 12 | 16                                    | 4 moonlights were converted into day HTS integrated outreaches due to COVID-19 guidelines and curfew at 9 PM                     |
| 1.8) Support GMCs to Organize 12 Monthly Integrated Community Sensitization Meetings.   | 12 | 12                                    | All were carried out and reports submitted to CICO   |
| 1.9) Support GMCs to conduct 12 Integrated Community Sensitization Meetings in Schools.   | 12 | 3                                     | Only 3 were carried out, 9 remained pending as schools were inaccessible due to the COVID19 lockdown and guidelines              |
| 1.10) Support Schools and Communities with IEC Materials.   |    | 64                                    | 64 ‘‘Talking compounds’’ carrying integrated messages of HIV & AIDS, GBV, VAC were distributed in mapped schools and communities |



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AIDS INFORMATION CENTRE-UGANDA

|  |   |   |  |
|--|---|---|--|
| 1.11) Conduct 03 integrated radio talk shows on HIV, GBV and VAC.              | 3 | 3 | These were conducted on Glory and Endigyito FM on 15/10/2020, 23/10/2020 and 20/7/2021 |
| 1.12) Hold 04 Quarterly Performance Review Meetings with Project Stakeholders. | 4 | 4 | 03/06/2020, 17/07/2021, 21/08/2020, 15/07/2021   |

### 5.1 BASELINE ASSESSMENT:

Baseline assessment was conducted in May 2020 and it helped in providing information on the situation the project aimed to change. It also helped the project implementers in having a critical reference point for assessing changes and impact, as it established a basis for comparing the situation before and after an intervention, and for making inferences as to the effectiveness of the project.

### 5.2 GENERATING WORKPLACE POLICIES AND CODES OF CONDUCT:

AIC successfully supported CICO in generating workplace policies and codes of conduct that provided guidance to CICO in ethical decision making. These included the Contractors HIV/AIDS Workplace Policy, Child Protection and Gender Based Violence Policies, Code of Conduct Policy especially on worker's behaviour with the community.

### 5.3 DISTRICT ENTRY MEETING:

A district entry meeting was held on 4<sup>th</sup> June 2020, that involved different stakeholders including district key stakeholders in project implementation and this helped in providing a smooth platform for the project's success.

### 5.4 MEETING TO DEVELOP OF A MONITORING FRAMEWORK FOR THE HIV & AIDS, CHILD PROTECTION AND GENDER BASED VIOLENCE (GBV) PROGRAMME.

A Monitoring Framework for the HIV & AIDS, Child Protection and Gender Based Violence was developed by project staff and key stakeholders on 5<sup>th</sup> June 2020 to be used to provide the means for determining if CICO project was on course to achieve its aims. This informed the generation of project tools that were used in reporting and other documentation.

### 5.5 IDENTIFY AND BUILD THE CAPACITY OF GRIEVANCE MANAGEMENT COMMITTEES.



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Grievance Management Committees were identified, trained and these helped in sensitizing contractor workforce, communities and schools on measures of mitigating HIV, Gender based violence and Violence against Children.

20 community resource persons were identified from the areas of operation, however, 16 were available for training on management of HIV & AIDS, GBV and VAC, referral pathways, and integrated and collaborative learning. The training took place on 21<sup>st</sup> August 2020. They have been supported with a modest transport and lunch stipend to execute their activities including community sensitisations, HIV & AIDS Counselling, case identification and management and referrals of GBV survivors and linkage for HIV & AIDS services. The GMCs collaborated with technical district and municipality leads and other stakeholders like the Police, Courts of law and health workers/facilities.

#### **5.6 12 MONTHLY INTEGRATED DIALOGUE SESSIONS/ MEETINGS ON HIV & AIDS, GBV AND VAC FOR 350 ROAD CONSTRUCTORS AND COMMUNITY MEMBERS.**

12 Monthly Dialogue meetings with road constructors about HIV/AIDS, GBV and VAC were conducted to promote positive relations between contractor workforce and the local communities and control spread of HIV, GBV and VAC in communities. Assessment was done on the monthly reports backed with evidence of photos of the dialogue meetings.

#### **5.7 SUPPORT 12 MONTHLY INTEGRATED OUTREACHES FOR SERVICE PROVISION:**

A total of 16 integrated outreaches were conducted and 362 individuals from communities and road constructors received HIV Testing Services (HTS); of these 7 tested HIV positive and all were linked to care. 45 were given PrEP to prevent spread of HIV/AIDS.

4 moonlights were converted into day HTS integrated outreaches due to COVID-19 guidelines and the night curfew that began at 9PM.

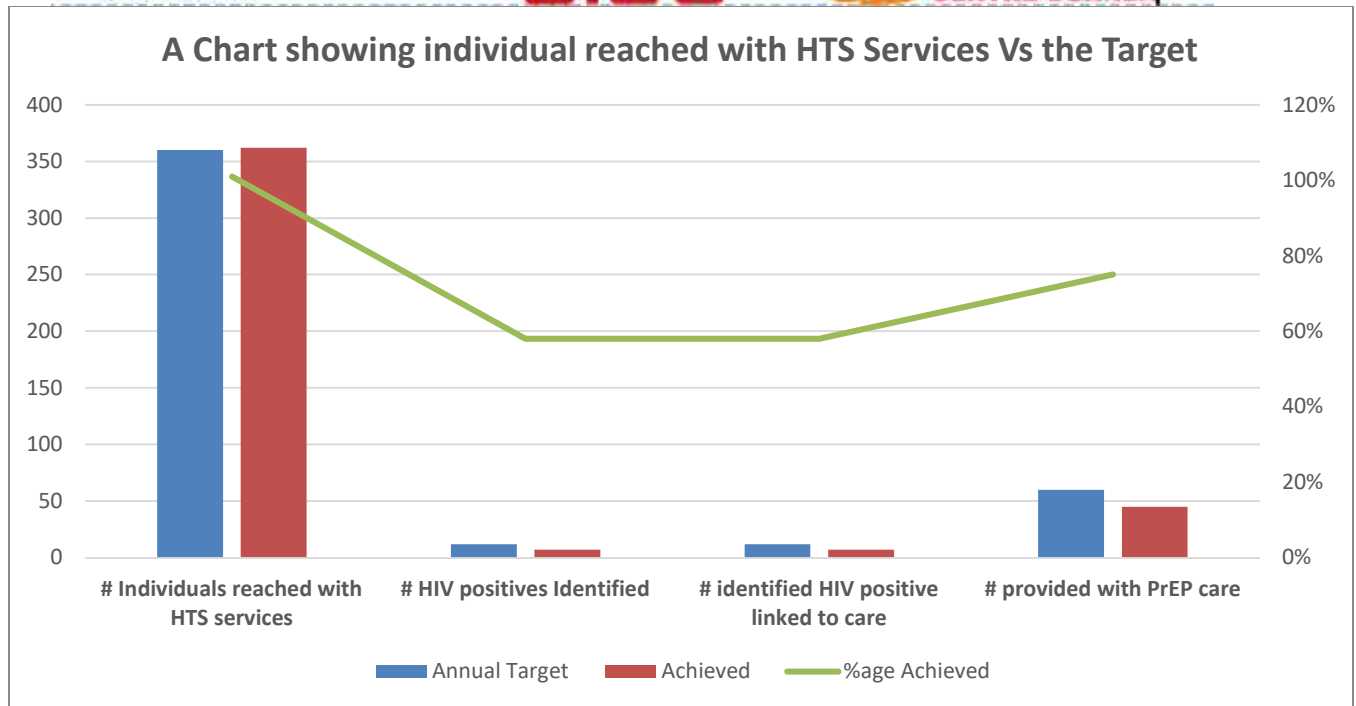
52,505 male condoms were distributed using condom dispensers in communities to prevent spread of HIV/AIDS. This was verified from the monthly reports and the condom distribution book.

250 self-testing kits were distributed to communities.





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**5.8 SUPPORT GMCS TO ORGANISE 12 MONTHLY INTEGRATED COMMUNITY SENSITISATION MEETINGS:**

AIC collaborated with GMCs, community development officers and patrons/teachers of schools to share information on HIV prevention, child and women rights and GBV; conducted 10 community sensitization meetings. AIC also empowered communities and schools on the appropriate case referral and management mechanisms. All the assigned 12 meetings were conducted.

**5.9 SUPPORT GMCS TO CONDUCT 12 INTEGRATED COMMUNITY SENSITISATION MEETINGS IN SCHOOLS:**

AIC collaborated with GMCs, community development officers and patrons/teachers of schools to share information on HIV prevention, child and women rights and GBV conducted 6 integrated community sensitisation meetings in schools. AIC also empowered communities and schools on the appropriate case referral and management mechanisms. Approved IEC materials were shared in both schools and communities to help improve knowledge on HIV, GBV and VAC. However, only 3 meetings were conducted in schools as schools were in accessible due to COVID 19 lockdown.

**5.10 SUPPORT SCHOOLS AND COMMUNITIES WITH IEC MATERIALS:**

AIC did a mapping of schools and communities to identify visual aid communication gaps. Schools in particular were supported with “Talking compounds” carrying integrated messages of HIV &



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AIDS, GBV, VAC and other relevant thematic areas. These schools include St Elizabeth Girls Secondary, Ntare School, Booma Primary, Mbarara Junior Primary, Ruharo, Booma Primary School, St Elizabeth Academy Primary School, Rwebishuri, Mbarara Training Institute, and Pentecostal Primary School. 20 Talking Compounds were put in schools while 44 Talking Compounds were planted in communities within the catchment areas of Spencon (Nile Breweries) Road, Ntare link Road, Nkokonjeru-Mubangizi Road, Mubangizi Road, Golf Course Road, Rwebikoona market Road, Rwebikoona link (Bicepe Rd), All Saints church Road, Kakiika Road, Kakiika-Kyamugorani Road, Surveyor Rwebishuri road (Kajongo) section 1, Surveyor, Rwebishuri road (Kajongo) section 2, Biharwe Division Headquarters Road, Karama Road, State, link Road, Kamukuzi Road and Ruharo Church Road section. A total of 64 Talking Compounds and 1 Sign Post were planted in communities and schools. Fliers and posters solicited from other implementing partners like TASO and EGPAF were also distributed in schools and communities.

### **5.11 CONDUCT 03 INTEGRATED RADIO TALK SHOWS ON HIV, GBV AND VAC:**

AIC held 3 Radio talk shows on local based radio stations of Glory and Endigyito FM with the aim to increase community knowledge of HIV and AIDS, Gender Based Violence and Violence against Children. The shows were also used to sensitize the public, contract workers, women, men, adolescents, young people and caregivers on the appropriate referral pathways, reporting and management mechanisms for cases. AIC worked with DHOs, DCDOs and Gender Officers to develop talking points using GBV Service Delivery Referral and Linkage Directories. These were held together with the CICO Sociologist on 15/10/2020, 23/10/2020 and 20/7/2021.

### **5.12 PROVISION OF FACILITY BASED STATIC CLINICAL SERVICES TO CONSTRUCTION WORKERS AND SURROUNDING CASES.**

AIC with support from the contractor set up a static clinic at the contractor's camp which was well stocked to handle first aid for common illnesses as well as injuries to the project workers. The static clinic was well equipped, had a regular supply of medical supplies, and had a day full time nurse.

Priority was given to prevention and provision of first aid for injuries of construction workers, road users and community members; additionally, treatment was provided for common illnesses such as malaria, diarrhoea, respiratory tract infections, sexually transmitted Infections as well as ANC and Family planning. Health education was provided for common non-communicable diseases and laboratory services for Malaria and HIV testing. Over 2,358 cases were managed during the course of the project of which 210 were work-related injuries and 2148 common illnesses and 880 lab tests (281 for malaria, 599 for HIV testing).



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### **5.13 HOLD 04 QUARTERLY PERFORMANCE REVIEW MEETINGS WITH PROJECT STAKEHOLDERS:**

Project performance was reviewed from time to time, Performance review meetings were held with UNRA and CICO stakeholders, which helped in identifying gaps, and improving performance.

## **6.0 IMPACT**

In line with the project's objectives, project documents and project data collected on monthly basis indicate that the project has contributed to improvements in addressing child exploitation in form of child labor because no child was employed on the road construction project or any other form of child labor. Sexual abuse and other forms of abuses were mitigated through integrated community sensitization meetings in schools and communities by GMCs.

In summary, Communities, GMCs and road constructors gained knowledge and understanding about HIV/AIDS, GBV and VAC. They have learnt how to prevent, mitigate and refer cases of the same to appropriate service providers. Road constructors (3) benefited from the HIV/AIDS work place policy. These were living with HIV and they were always allowed time off to seek for treatment.

IEC materials distributed in communities and schools will continue to provide awareness and increase access to information among the local community on matters of HIV/AIDS, GBV & VAC. The 64 Talking compounds will continue to disseminate information to schools and communities.



*Pictures of Talking Compounds taken from Booma PS, St Elizabeth Girls SSS, Ntare School, Golf Corse road, All Saints link and Mubangizi road*

A total of 12 monthly Integrated Dialogue sessions /Meetings on HIV & AIDS, GBV and VAC for 350 Road Constructors and Community members were conducted and this promoted positive relations between contractor workforce and the local communities.

16 Integrated Day HTS Outreaches for contractor work force and communities were done to identify new positives, a total of 362 clients were tested for HIV and 7 positives were identified and linked to care (1 was linked at DIC, 2 at MRRH, 4 at MMC) to mitigate HIV/AIDS spread,



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more so 45 individuals who were at a risk of contracting HIV virus were initiated on PrEP as a measure to mitigate and control new HIV infections.

362 individuals were screened for GBV and 11 GBV cases were identified, these were all linked for post GBV care, and 139 students were screened for VAC and no one was identified

## **7.0 SUSTAINABILITY**

20 GMCs were identified and 16 members trained; these have conducted HIV/AIDS, GBV and VAC sensitization meetings in schools and communities. The GMCs should continue sensitizing the schools and communities at every given opportunity even after the end of project since they were equipped with knowledge.

IEC materials, talking compounds: IEC and talking compounds will continue to sensitize school children about VAC and GBV.

Condom dispensers: These will stay in communities even after the project has ended as a preventive mechanism and reducing HIV prevalence in communities. The GMCs should be in position to keep refilling them.

## **7.1 CHALLENGES AND WAY FOWARD**

The COVID 19 pandemic greatly affected community field activities, however with MoH HTS screening guidelines, we were able to reach out to small groups of individuals through targeted testing and small group dialogues.

Delayed payment from the contractor affected project implementation, however, UNRA was very supportive in that even beyond the project period, we were allowed to continue with a mop up exercise to catch up with the remaining few activities.

## **8.0 CONCLUSION**

The project objectives were attained with support from CICO, UNRA, the District and other stakeholders despite a few challenges that were majorly COVID related during implementation.



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