



The Republic of Uganda

DOKOLO DISTRICT LOCAL GOVERNMENT

**DISTRICT ACTION PLAN (DAP) TO ADDRESS
GENDER BASED VIOLENCE**

July 2012

Table of Contents

| | |
|---|-----------|
| Acknowledgement..... | 3 |
| Foreword..... | 4 |
| Acronyms and Abbreviations..... | 5 |
| Executive Summary..... | 7 |
| | |
| Chapter One: | |
| Introduction..... | 9 |
| Dokolo District Local Government..... | 9 |
| Background to the District Action Plan (DAP) on Gender Based Violence | 9 |
| | |
| Chapter Two: | |
| Contextual Analysis..... | 12 |
| District Response..... | 12 |
| Interventions by Partners..... | 13 |
| Key Challenges..... | 14 |
| | |
| Chapter Three: | |
| District Action Plan Against GBV..... | 16 |
| Specific Objectives..... | 16 |
| | |
| The District Action Plan Matrix..... | 22 |
| DAP Implementation Plan..... | 26 |
| DAP Implementation Budget..... | 28 |

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We want to appreciate in a special way, the financial contribution from ICCO kirk en Actie through CEWIGO without whom this initiative would not have been possible.

Foreword

Gender Based Violence (GBV) is violence that is directed against a person on the basis of gender or sex. GBV includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivation of liberty (CEDAW 1994). Physical, sexual and psychological violence occurring in the family including battering, sexual abuse of female children in the household, dowry-related violence, rape, defilement, early and forced marriage constitute forms of Gender Based Violence.

GBV is largely rooted in unequal power relations and abuse of power coupled with the low status accorded to women in general. Dokolo District Local Government has developed the GBV District Action Plan to respond to the challenges posed by Gender Based Violence in the district.

In every community, there are people who are always affected by acts of violence, brutality and abuses. Some of the abuses are committed behind closed doors in the confines of one's home and these often remain unreported, unnoticed and completely hidden, and sometimes they are accepted as a normal way of life. This kind of situation can not be allowed to continue.

Gender Based Violence is a violation of human rights as it perpetuates the stereotyping of gender roles that denies human dignity and hinders human development. GBV is most prevalent in an environment where there is general lack of respect for human rights and Dokolo District Local Government would like to correct such a situation.

Dokolo District Local Government with assistance and facilitation from the Centre for Women in Governance (CEWIGO) has developed this District action plan on GBV to respond to rampant cases of Gender Based Violence in the district.

The development of the district action plan began with the signing of memorandum of understanding (MoU) between CEWIGO and Dokolo District Local Government. This made way for a two day capacity building workshop which was conducted by CEWIGO and then identification and constitution of a District Task Force to formulate the District Action Plan (DAP).

This District Action Plan spells out the district objectives and strategies to tackle the problem of GBV, and reflects the District's commitment to achieve a society where respect for human rights of both men and women: boys and girls is taken seriously. Dokolo district will therefore ensure that GBV is addressed right from the homes.

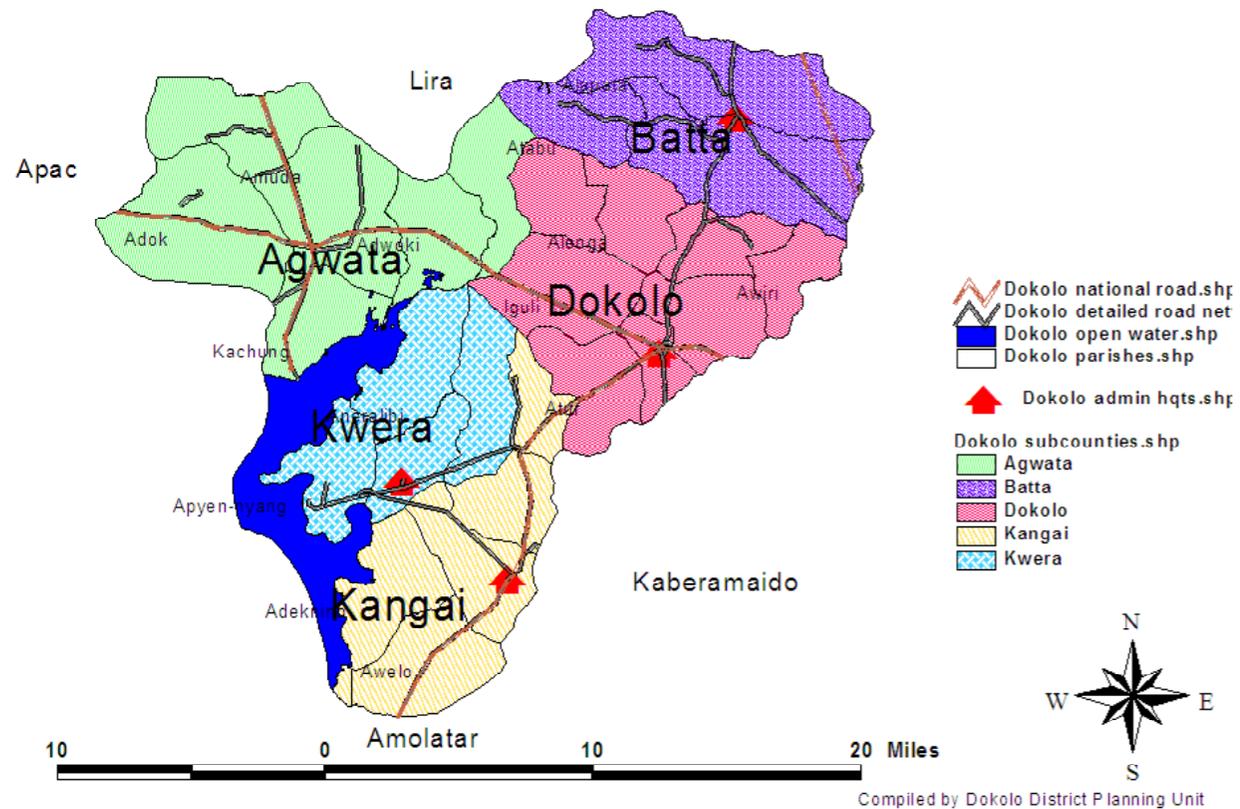


John Bosco Okello Okello
Dokolo District Chairperson

Acronyms and Abbreviations

| | |
|--------|--|
| ACDO | Assistant Community Development Officer |
| CAO | Chief Administrative Officer |
| CDO | Community Development Officer |
| CEDAW | Convention on Elimination of all forms of Discrimination Against Women |
| CEWIGO | Centre for Women in Governance |
| CPC | Child Protection Committee |
| CSO | Civil Society Organization |
| DAP | District Action Plan |
| GBV | Gender Based Violence |
| IEC | Information Education and Communication |
| MoGLSD | Ministry of Gender Labour and Social Development |
| MoU | Memorandum of Understanding |
| NGOs | Non Governmental Organizations |
| NUMAT | Northern Uganda Malaria AIDS, and Tuberculosis Programme |
| VHT | Village Health Teams |

The Map of Dokolo District



Executive Summary

This action plan has been developed with the aim of reducing Gender Based Violence which has become a serious problem in Dokolo district. It outlines objectives of the plan and strategies to achieve the intended objectives.

Chapter one presents the introduction and background to the District Action Plan (DAP) against GBV. It describes how the post conflict situation in Northern Uganda has led to high cases of Gender Based Violence in the region. It explains other major causes of GBV in the district as high patriarchal society values coupled with strong cultural practices which at the same time limit reporting and handling of GBV cases regardless of the health risks and social implications associated like deaths, disability and trauma.

Chapter two sums up the contextual analysis of GBV in Dokolo district. The plan presents GBV as perpetuating gender stereotyped roles that deny human dignity to individuals because of their sex. GBV constitutes a serious violation of Human Rights in form of physical, sexual, psychological and economic violence. Women and girls are the major victims of GBV in the district. According to the DAP, this situation has been as a result of unequal power relations and the subordinate position accorded to women and girls in the district. There is unequal access and limited control and ownership of productive resources like land. This also limits participation in decision making for women and girls.

The plan highlights major GBV interventions that have been undertaken by the district and Civil Society Organizations and challenges that the district is still battling with. The districts efforts to reduce incidences of GBV are mentioned in this plan namely ordinances on access to formal education, child protection and alcohol consumption that need to be strengthened. However, there is general lack of adequate technical capacity to handle GBV cases and equipment such as computers, transport, and stationery among others for service providers to respond to cases of GBV.

The Action Plan describes in detail strategies to be undertaken to achieve DAP objectives. The plan highlights resources (detailed budget) the district will need to translate the strategies into action

Chapter One

INTRODUCTION

Dokolo District Local Government

Dokolo district was carved out of Lira district in July 2006. The district is located in Northern Uganda and is bordered by the district of Lira to the North, Amolatar to the South, Kaberamaido to the East and Apac to the West. Dokolo lies between Latitude 10 21'; 242'N and Longitude 32051'E; 34015'E. The district is composed of the following Administrative units: 1 county, 10 sub counties, 1 Town Council, 60 parishes and 474 villages.

According to Community Information System (CIS) Interim report of April 2011, the projected population of Dokolo district is 154,779 comprising of 76,594 females and 76,361 males. Community information system findings revealed that Agwata had the highest population with 30,357 people, followed by Bata with 28,929, Kwera 24,418, Kangai 28,329, Dokolo Sub County 25,561 and Dokolo Town council 17,185. These data are based on original 5 sub counties of the district.

The total Area of the district is approximately 1352 kms². Historically the inhabitants of Dokolo District are Langi but there are also other ethnic tribes like the Kumum and Itesot.

About 90% of Dokolo's population derives its livelihood from peasantry agriculture. The common crops grown are mainly cassava, millet, beans, simsim, maize, cowpeas, sorghum

and vegetables among others. It is a common practice to find that during the period of weeding agricultural crops, men tend to go for drinking local brew while women toil in gardens alone sometimes assisted by their children. However, after harvesting men take control of the produce which sometimes causes domestic violence as both start struggling for the agricultural proceeds after sale.

Gender Based Violence constitutes a serious violation of Human Rights perpetuated in form of physical violence, psychological violence and sexual violence which are in most cases directed against women and children due to unequal power relations and the low status of women and children in general. Violence can also be social or economic violence like the need to maintain privileged power and control over others.

The unequal access and control of material resources between men and women and unequal participation in decision making by women and children is one major contributing factor to GBV. This Action Plan intends to reverse this situation through a number of activities outlined under each objective of the action plan. Alcoholism is one of the influencing factors to GBV incidences in the district.

Background to the District Action Plan on Gender Based Violence

Dokolo district experiences a high rate of Gender Based Violence as evidenced by the number of cases reported to the police and probation offices.

According to reports from the police department, from January to March 2012 alone, 51 cases of defilement were recorded, 20 cases of assault, 36 cases of domestic violence, 5 cases of rape, 3 cases of murder, 4 cases of arson and 47 cases of child neglect. These are just the few cases that were reported as many more cases remain unreported. Similar cases of child neglect are also handled by the Probation and Welfare Office in the district.

Having experienced civil war in Northern Uganda, the population of Dokolo is now experiencing high rates of domestic violence, defilement, physical violence, psychological violence, sexual abuse, especially against women and girls. Sexual and gender based violence is a violation of human rights. It perpetuates the stereotyping of gender roles that deny human dignity of individuals.

The Centre for Women in Governance (CEWIGO) a non-governmental organization that coordinates civil society monitoring of the implementation of

UNSCR 1325, 1820 and the Goma Declaration of the States of the Great Lakes Region signed a Memorandum of Understanding (MoU) with Dokolo District Local Government to develop and implement strategies aimed at ending Gender Based Violence in the district

The District Action Plan (DAP) on Gender Based Violence is therefore a result of the memorandum of understanding signed between CEWIGO and Dokolo District Local Government. The MoU is aimed at ending violence against women by implementing the provisions of the Uganda National Action Plan for UNSCR 1325, 1820 and the Goma Declaration.

The two parties aimed at implementing a pilot project between December 2011 and November 2012 geared towards developing a district action to combat plan in Dokolo District.

Chapter Two

CONTEXTUAL ANALYSIS

Gender Based Violence is still a major development challenge in Dokolo District. There are unequal power relations between women and men, endemic household poverty and negative attitudes towards the women. An unfavorable patriarchal culture promoting male dominance, early and forced marriages, violent initiation rites and practices such as wife battering, murder of wives/husbands, child labour, family neglect, burning with hot water or cooking oil, women cutting men's sex organs, insults and use of abusive languages, use of threatening words, threatening to divorce, denial of conjugal rights, rape, defilements, denial of properties and property grabbing from widows and orphans. The use of corporal punishments as acceptable means of instilling discipline in women and children also exacerbates the problem and limits the women and girl's competence to protect and defend themselves against the aggressors.

Some of the causes of GBV in Dokolo District include high alcohol consumption in the district, poverty and limited engagement of the youth in productive ventures. Community resilience mechanisms that protect women and children from GBV and promote the values of intolerance to GBV are still inadequate in many communities in Dokolo district. There is need to empower the women and the girl child economically and providing opportunity to attain education

Access to and up take of high quality and child-friendly GBV response services is still inadequate

in all communities. There is need to strengthen the local council system especially the secretary for children's affairs in every local council so that they are empowered to play their roles as per the Children's Act Cap 59. Child participation, child rights clubs in schools, youth friendly facilities in community centres where messages on reproductive health can be passed on to them need to be put in place and strengthened.

The efforts of civil society organizations Local Governments and other actors, are not adequately coordinated providing little room for learning, documenting and sharing viable and sustainable solutions to GBV prevention and response.

District Response:

The district has formulated 3 ordinances on access to formal education, child protection and alcohol consumption. The ordinance on child protection was submitted to the Attorney General for review and approval, and this has been successfully done. The ordinance on equal opportunities in education was approved by both the Attorney General and the District council and is now ready for implementation, while that on alcohol consumption is still with the Attorney General and is awaiting approval.

The District Community Development Office, through its routine programs, continues to sensitize communities on issues of child abuse, child labour, and child neglect; family desertion & domestic violence.

The district conducts the coordination of all GBV actors in the district. However this needs to be

strengthened and where possible other actors on GBV programs should be attracted to the district to support the GBV initiatives.

Interventions by Partners:

NUMAT

Northern Uganda Malaria AIDS and Tuberculosis (NUMAT) programme is one the strong partners that unfortunately has wound up its programs in the district. NUMAT used to focus its interventions on GBV with emphasis on HIV/AIDS prevention and mitigation.

ChildFund International

During the last two years (2009–2010) ChildFund implemented a project to address GBV in three sub counties in Dokolo District (Agwata, Bata and Dokolo) under the UN funded Joint Programme. The objective of this project was to increase access to and utilization of GBV services through more functional, coordinated and sustainable prevention and response mechanisms by the end of 2010. The key achievements realized included the following: empowerment of the target population to seek services, reduced incidences of GBV in schools and communities, establishment and strengthening of existing community structures to coordinate GBV services and strengthening of the local government capacity to coordinate GBV actors.

Despite these achievements, the evaluation of the phase 1 project indicated that there was need for involvement of additional stakeholders like the traditional leaders, religious leaders, and improved coordination at district level. The

need to deepen these activities in the respective communities and to replicate the good practices of the phase 1 project to other sub counties of the district cannot be over emphasized.

The ChildFund approach is a unique approach given that it supports the idea of addressing children's attitudes towards GBV from a tender age. Introducing gender concepts, practices and values to children at a young age prepares them to live a life of integrity in future. Creating a generation that respects and values the rights of every individual will help in creating a generation of zero tolerance to GBV.

CEWIGO

Centre for Women in Governance has since 2008 developed the capacity of women leaders to effectively participate in politics both at District and sub county levels. CEWIGO had dialogues with women leaders who participated in the 2001 and 2006 general elections, trained women leaders and women candidates in readiness for 2011 general elections. Some women who benefited from their training successfully won the elections while some have gained confidence for women leadership in other sectors.

CEWIGO has also raised awareness through drama and dialogue on the provisions of the UNSCR 1325, 1820 and the Goma Declaration and Uganda National Action Plan (NAP) on the three protocols. CEWIGO has built the capacity of Dokolo district local authorities to fulfill their mandate in regard to the Uganda NAP.

Key Challenges:

Despite the fact that the District Community Development Office has technical staff (A/CDOs) in all the 11 sub-counties in the district (including Dokolo town council), they are still incapacitated in terms of response and management of GBV survivors, for example, in the areas of provision of sustainable psychosocial support to survivors of Gender Based Violence

There is general lack of capacity in terms of both technical skills and equipment such as computers, motorcycles etc on the part of service providers to respond to cases of GBV in the district. While the efforts by ChildFund are fully appreciated, their interventions (during phase 1 of the joint program) were limited to only 3 sub-counties and the town council. This created imbalance in terms of community awareness and effective use of the established district referral network.

There are still weaknesses in regular holding of protection sector meetings due to poor facilitation and limited number of actors in the district. There is need to limit the number of meetings and facilitate the members in terms of lunch and refreshments.

Given the fact that the district is dominated by a patriarchal society coupled with strong cultural practices, some GBV cases are either not reported to relevant authorities for action or are simply negotiated at community level regardless of the health risks and social implications associated with such incident. This negotiation is between parents or clan members of survivors who eventually refuse to cooperate with law enforcement agencies thereby frustrating investigations and “killing” reported cases.

There have been changes in the political leadership which will affect the level of involvement for some communities. After the 2011 elections, new leaders were elected and some of them did not have the GBV awareness that their predecessors had got. It means there is need for additional resources for capacity building of the community structures including training of the new leaders. Sensitization and capacity building of all stakeholders will help to mitigate this challenge.

This District Action Plan on GBV will try to respond to the above identified challenges by implementing the strategies highlighted in the DAP to reduce incidences of Gender Based Violence in Dokolo District.

Chapter Three

DISTRICT ACTION PLAN AGAINST GBV

The overall goal of this plan is to eliminate GBV in Dokolo district.

Specific Objectives

1. To strengthen the capacity of Dokolo district structures to effectively and efficiently respond to and prevent GBV by July 2015.
2. To improve access to and quality of GBV related services by 30% by the end of July 2015.
3. To reduce incidents of GBV in the Dokolo district by at least 30% by July 2015

Activity Description

Objective 1: To strengthen the capacity of Dokolo district structures to effectively and efficiently respond to and prevent GBV by July 2015.

Strategy 1: Strengthen working groups and coordination mechanisms for effective response to GBV cases

This strategy involves coordination of all GBV actors in the district to create synergy for effective response to GBV. The following activities will be implemented:

Activity 1.1: Hold one day stakeholder sensitization workshop on DAP.

This activity aims at making different stakeholders appreciate the negative consequences of Gender Based Violence in the lives of communities they serve, and to motivate them to begin planning and including GBV activities in their regular district and sub county plans. During this meeting, project expectations will be outlined to all the stakeholders. Based on these expectations and key roles will be identified and assigned to specific stakeholders to ensure the success of the DAP/GBV intervention. Participants will be drawn from all district departments, sub-county administration and civil society organizations totaling to 50 participants.

Activity 1.2: Hold GBV coordination meetings at district and sub county levels.

Addressing Gender Based Violence requires close coordination and collaboration among GBV actors. co-ordination meetings will be conducted quarterly at district and sub-county level. At district level, they will be chaired by the District Community Development Officer assisted by the District Gender Officer. 50 participants will be expected to attend drawn from all district departments, members of the civil society organization and members of the Uganda police force. At sub-county level, at least 30 participants drawn from the Sub-county local government, police unit, Child protection Committees and NGOs will be expected to take part in these meetings chaired by the sub-county Community Development Officer. GBV issues generated

from these meetings will feed into the district coordination meetings for appropriate actions.

Activity 1.3: Strengthen Child Protection Committees (CPCs) and LC III courts through training and IEC materials

This activity will aim at building the capacities of different stake holders in prevention and response to GBV. Dokolo district has 11 sub-counties out of which each has at least 30 members of the CPCs. Such community structures need to be strengthened to effectively respond to incidents of GBV. It is planned that a days' training workshop will be conducted at each sub-county where participants will be trained on GBV concepts, prevention and response mechanisms to GBV.

Secondly, despite the fact that the government established LC courts at LC 3 level to handle issues of child abuse for example, it is sad to note that they have sometimes taken out cases of capital nature for which they are not mandated to do so. This creates gaps in the provision of justice to survivors of GBV. This activity, therefore, is aimed at equipping LC3 courts (consisting of 9 members each) in all the 11 sub-counties with relevant knowledge and skills on legal services at their level. A legal person will be hired to conduct this training. In order to support both CPC and LC3 Courts in their work, Dokolo district Local Government will print posters on GBV and will disseminate them during meetings and through the GBV working groups.

Activity 1. 4: Conduct stakeholders quarterly review meetings.

Stakeholders' review meetings will be conducted on a quarterly basis share the progress of the implementation of the DAP and to agree on action points on issues that may need follow up. At least 50 participants will be expected to participate in these meetings drawn from all district departments, Civil Society organizations and political leaders in the district. A total of 12 quarterly review meetings will be held

Activity 1. 5: Hold one day pre-budget workshop to explore strategies to incorporate the DAP into annual district plan and budget

Using information generated from district monthly coordination meetings, joint monitoring reports and quarterly review meetings, a one day workshop preceding district budget preparation will be organized for key district departments and other stakeholders to explore strategies of including GBV issues in their regular district development plans. The purpose is to ensure that the initiated interventions will still continue even after CEWIGO's support ends. The workshop will comprise of district technical staff, political leaders and civil society actors in the district. This will be done annually and CEWIGO staff will participate in the meetings.

Objective 2: To improve access to and quality of GBV related services by 30% by the end of July 2015.

Strategy 2: Monitoring and Documentation of GBV cases

This strategy will begin with a GBV baseline survey in the district to establish benchmarks against which progress in the implementation of DAP can be measured. It will also involve monitoring of DAP activities and support to service providers to ensure effective service delivery.

Activity 2.1: Conduct a GBV baseline survey in Dokolo district

Dokolo District Local Government will hire a consultant to conduct a GBV baseline survey. Findings from the survey will provide benchmarks upon which the progress of the project will be measured.

Activity 2.2: Monitoring, technical supervision and documentation of all GBV cases

It is imperative that stakeholders jointly monitor and document the progress of the project to provide opportunities for learning. The team will comprise of five people made up of technical officers both from Dokolo district local government and civil society organizations

including some political leaders. This activity is aimed at promoting transparency, effective use of resources and accountability and will be done monthly throughout the project period.

Strategy 3: Capacity building

The capacity building strategy will be employed to build the knowledge of service providers on GBV issues, case management, interviewing skills, basic elementary counseling skills among others to facilitate successful prosecution of GBV cases.

Activity 2.3: Train GBV service providers (Police, health workers, senior women teachers & social workers on psychosocial support services to survivors

There are always complaints about police, health workers, senior teachers and social workers attitude towards survivors of Gender Based Violence. The complaints arise from the negative comments and actions they take towards GBV survivors which traumatizes and stigmatizes survivors even more. It is for this reason that this activity is planned to positively change service providers' attitude towards survivors so that they are prepared to receive and provide the psychosocial needs of the survivors. The training will target 33 Police Officers, 33 health workers, 15 social workers and 60 senior women teachers covering the entire district. The training will be last for 5 days.

It is also important that service providers are grounded in the knowledge of gender and rights, documentation and skills as well as case management to ensure effective delivery of services to GBV survivors. This workshop will try to address these and other issues that affect effective service delivery to GBV survivors in the district. At least 48 participants will be targeted for each workshop.

Activity 2.4: Support GBV duty bearers (police, health, social workers, senior women teachers) in providing quality GBV services to survivors of GBV.

Given the irregular supply of medical supplies to health units and the bureaucratic processes in government structures/institutions, GBV survivors are sometimes not attended to within 72 hours as recommended for rape and defilement cases. Medical units usually experience shortage of gloves, anti-biotics, waste management logistics, disinfectants and protective gears. They need to be supported. The police needs PF3, stationery, and fuel. Sub-county level CDOs on the other hand lack transport to support their monitoring activities in their respective areas of jurisdiction. They too need to be supported with motor cycles, fuel and stationery. Senior women teachers will be supported with sanitary materials like pads, soap, towels, jerricans, basins and petroleum jelly for girls in their periods to ensure that they are not lured into sex by both their peers and teachers. Fourteen Primary schools and 6 Secondary schools will be identified and supported over the next three years. This should contribute to the retention of girls in school.

Activity 2.5: Provide direct support to GBV survivors in dire medical need.

This activity is meant to provide direct support to GBV survivors to address their medical treatment failure of which may lead to permanent physical damage or even death. Some of the proposed activities include: repair of women and girls suffering from fistula cases in the district, provision of food items, sanitary items, medical treatment and clothing to GBV survivors at the regional survivors shelter in Lira, provision of a hot line (telephone services) to facilitate coordination among service providers in responding to GBV cases. Also some money in cash form to facilitate transportation of distant GBV survivors in accessing services within the 72 hours.

Activity 2.6: Provide legal support for survivors of GBV.

It is hoped that Dokolo district will partner with some of the legal organizations in region to provide free legal services to GBV survivors. Some of these organizations include War Child Canada, Justice Centers among others. However, they need to be facilitated in form of fuel, stationery and safari day allowances while on duty. On average at least 3 cases per month will be handled through this arrangement.

Objective 3: To reduce incidents of GBV in the Dokolo district by at least 30% by July 2015

Strategy 4: Community mobilization and sensitization to reduce incidences of GBV

This strategy will aim at educating communities on the existing laws, policies, bye-laws and ordinances so that they are aware and knowledgeable and can use them to demand for their rights and accountability from duty bearers. This will involve translation of the GBV laws into Lango for easy understanding of the provisions

Activity 3.1 Translated and Disseminate existing GBV related laws, policies, bye-laws, ordinances

This activity is aimed at empowering communities with basic knowledge on the existing laws that address GBV and their inadequate participation in development activities in the district. The activity will involve translation conducted at sub-county levels targeting local councils II and III. The aim is to strengthen community responses to GBV issues and other development needs in the district. Three formulated ordinances on access to formal education, child protection and alcohol consumption among others will be translated into Lango and disseminated widely to ensure that communities are aware/ mindful of them. This activity will run throughout the DAP period given the large number of targeted community members.

Activity 3.2: Community sensitization workshops on DAP and GBV response.

Community sensitization on the DAP will be conducted through a radio program on a monthly basis for the first year of DAP implementation. During the preceding years, one radio talk show will be held every other month. At least three guest speakers will be hosted per talk show in the beginning, but community members like child protection committees, teachers and children will also be involved to share their experiences on GBV. During the radio talk shows, attempts to strengthen the referral path way and available GBV services will be highlighted to the public aimed at creating community appropriate responses to GBV occurrences. Also, the radio talk shows will be used to disseminate information on existing GBV laws, policies, bye-laws and ordinances

Apart from regular radio programs meant to talk about GBV issues in general, bi-annual reports on DAP will be published in the local media (Rupiny news paper) to inform the public about the progress of the DAP.

Activity 3.3: Conduct community based drama sensitizations on GBV.

Two Community drama groups will be identified, oriented and equipped with costumes to enhance their performance. Two day's orientation training for each group of 25 members will be conducted and costumes per group purchased from local markets. The drama will then be performed once in each of the 60 parishes in the district

Activity 3.4: Hold community dialogues on GBV

Community dialogues will be conducted targeting 60-80 participants in each sub-county. Participants will comprise of clan, religious and opinion leaders, local council members from 1- 3 and women leaders and general communities. The purpose of this activity is to engage community members on continued discrimination against women and girls and what they can do to avert the situation. At the end of each dialogue an action plan will be developed in which participants show what actions they will take against issues that affect women and girls in their communities. It is also aimed at strengthening local leaders' participation in GBV issues as well as sustaining the initiated interventions. Follow up meetings will then be held in the subsequent years.

Activity 3.5: Organize a tour to one model districts to share best practices and learning

At least 10 people (women, men, politicians and technical staff will be selected and taken out to another district to share experiences and learn how others are fighting GBV. These experiences will be replicated whenever found to be useful. One visit will be organized per year.

Activity 3.6: Participate in the celebration of National and International historical days

Dokolo District Local Government will be involved in celebrating important national and international historical days namely International

Women's Day, World Population Day, the Day of African Child, the 16 days of activism and International Human Rights Day. These days will be used to highlight women's achievements, challenges and future plans to improve their socio-economic conditions. These celebrations will be organized at district level.

Monitoring and Evaluation Frame Work

The District Action Plan will be implemented by Dokolo District Local Government. The office of the Chief Administrative Officer will be responsible for its implementation while that of the District Chairperson will monitor its implementation. On a regular basis, CEWIGO will make field visits to Dokolo District to monitor progress, provide support and guidance to the implementing team. Each year, there will be a stakeholders' meeting to review progress, capture lessons learnt, any challenges and propose strategies to address them as well as documenting best practices. The review will assess results at goal level, objective level, activity level and results level.

At the end of the three years an external evaluation will be carried to inform a new DAP.

The District Action Plan Matrix

| Objective 1: To strengthen the capacity of Dokolo district structures to effectively and efficiently respond to and prevent GBV by July 2015. | | | | |
|---|--|---|---|---|
| Strategy | Activities | Expected Results | Indicator | Means of Verification |
| Strengthen working group and coordination mechanism for effective and efficient response to GBV cases | Stakeholder sensitization workshop on DAP | DAP supported by all district sectors | Level of response by stakeholders from different sectors to the DAP | Reports from sectors, minutes and attendance lists |
| | Hold GBV coordination meetings at district and sub county level | GBV responses streamlined | Appreciate action planned at district level as a result of issues from the various meetings | Minutes of coordination meetings |
| | Strengthen child protection committees and other structures such as LC court | Number of CPCs, LC courts knowledgeable on GBV issues and existing laws | The quality of responses by the CPCs and LC courts to GBV incidences after the training | Reports from trained CPCs and LC courts and the community quarterly reports |
| | Conduct stakeholders quarterly review meetings. | Progress on the implementation of the DAP shared and relevant action plans taken and followed | The number and quality of issues that will be shared and the reports that will be given at the respective meetings | Quarterly reports |
| | Hold one day pre-budget workshop to explore strategies to incorporate the DAP into annual district plan and budget | DAP implemented | The number of action plans on GBV highlighted of action plans on GBV highlighted in the annual district development plans | District reports |
| | Objective 2: To improve access to and quality of GBV related services by 30% by the end of July 2015. | | | |
| Strategy | Activities | Expected Results | Indicator | Means of Verification |
| Monitoring and cumentation of GBV cases | Conduct a GBV baseline survey in Dokolo district | Data on GBV in place | The quality of issues identified from data collection | GBV baseline survey report |
| | Monitoring, technical supervision and documentation of all GBV cases | The level of the progress made in the implementation of the DAP | Number of people accessing services and the quality of stakeholder action plans | Monitoring reports |

| | | | | |
|-------------------|---|---|--|---|
| Capacity building | Train GBV service providers (Police, health workers & social workers on psychosocial support services to survivors | Service providers given quality psychosocial support services to the survivors | Reports from community members about the quality of the psychosocial support received | District annual reports Police reports Monitoring reports |
| | Support GBV service providers (police, health, social workers, teachers) in providing quality GBV services to GBV survivors | Relevant equipment and materials given or procured by the relevant service providers and quality of services provided to survivors. | Positive reports from GBV survivors about the quality of service received | District annual reports Police reports Monitoring reports |
| | Direct support to GBV survivors including fistula cases. | Quality of services provided to GBV survivors including fistula cases | Number of GBV survivors supported and their responses on the quality of service received | District annual reports Police reports |
| | Provide legal support for survivors of GBV in dire medical need | Survivors easily access legal services | Number of survivors accessing free legal services | Magistrates court records District reports Monitoring reports |
| | | | | |

| Objective 3: To reduce incidents of GBV in the Dokolo district by at least 30% by June2015 | | | | |
|--|--|---|---|---|
| Strategy | Activities | Expected Results | Indicator | Means of Verification |
| Community mobilization and sensitization to reduce incidences of GBV | Disseminate the existing GBV laws, policies, bye-laws, ordinances | Community awareness of the existing laws, policies, bye-laws and ordinances | Number of communities sensitized on the existing laws and policies and ordinances | Monitoring reports District reports |
| | Community sensitization workshops on DAP and GBV response in general. | Level of awareness of GBV issues | The quality of the community's responses during the radio talk shows | Radio talk shows reports, monitoring reports District reports |
| | Conduct community based drama sensitizations on GBV | Action plans to reduce GBV from communities | The quality of the community's responses during and after the drama shows | Monitoring reports Dialogue reports District reports |
| | Hold annual community dialogues on GBV | Action plans to reduce GBV from communities | Number of dialogues held | Monitoring reports District reports |
| | Organize a tour to one model district to share best practices and learning | Best practices from Dokolo shared with other districts and lessons learnt | Number of the best practices and lessons highlighted | Tour reports Monitoring reports |
| | Participate in the celebration of National and International historical days | Achievements made by women celebrated and challenges reflected on | The number of women that will be recognized and the number of challenges acted upon | Recordings of the celebrations Monitoring reports |
| | Monitoring implementation of DAP by CEWIGO | Data on implementation of DAP obtained | Quality of data collected | Monitoring report |

Implementation Plan

DAP Implementation Budget

| No. | Particulars | Total(UGX) | YEAR I | YEAR II | YEAR III |
|---|--|--------------------|--------------------|--------------------|--------------------|
| | | | UGX | UGX | UGX |
| Obj. 1: Strengthen the capacity of Dokolo district structures to effectively and efficiently respond to and prevent GBV by July 2015 | | | | | |
| 1 | Stakeholder sensitization workshop on DAP | 2,075,000 | 2,075,000 | - | - |
| 2 | GBV coordination meetings at district and sub county | 42,840,000 | 14,280,000 | 14,280,000 | 14,280,000 |
| 3 | Training child protection committees and LC III courts | 25,045,000 | 25,045,000 | - | - |
| 4 | Conducting stakeholders quarterly review meetings | 23,400,000 | 7,800,000 | 7,800,000 | 7,800,000 |
| 5 | One day pre-budget workshop to explore strategies to incorporate the DAP in annual district plan and budget | 8,322,000 | 2,774,000 | 2,774,000 | 2,774,000 |
| OBJECTIVE ONE TOTAL | | 101,682,000 | 51,974,000 | 24,854,000 | 24,854,000 |
| Obj. 2 Improve access to and quality of GBV related services by 30% by the end of July 2015. | | | | | |
| 6 | Conduct a GBV baseline survey in Dokolo district (to be contracted out) | 6,000,000 | 6,000,000 | - | - |
| 7 | Monitoring, technical supervision and documentation of all GBV cases | 48,708,000 | 16,236,000 | 16,236,000 | 16,236,000 |
| 8 | Three Training workshops for GBV service providers in Psychosocial support | 35,880,000 | 35,880,000 | - | - |
| 9 | Support GBV service providers (police, health, social workers, senior women teachers) in providing quality services to survivors of GBV. | 396,970,000 | 162,410,000 | 117,280,000 | 117,280,000 |
| 10 | Providing legal support for survivors of GBV who may opt for legal redress | 8,910,000 | 2,970,000 | 2,970,000 | 2,970,000 |
| OBJECTIVE TWO TOTAL | | 496,468,000 | 223,496,000 | 136,486,000 | 136,486,000 |
| Obj. 3 To reduce incidents of GBV in the Dokolo district by at least 30% by July 2015 | | | | | |
| 11 | Half day Dissemination workshops of the existing laws, policies, byelaws, ordinances | 35,420,000 | - | 35,420,000 | - |
| 12 | Community sensitization workshops on DAP and GBV response in general. | 60,300,000 | 20,100,000 | 20,100,000 | 20,100,000 |
| 13 | Conducting community based drama sensitizations on GBV at Parish level | 63,600,000 | - | 63,600,000 | - |
| 14 | Holding annual community dialogues on GBV at subcounty level | 25,327,500 | 8,442,500 | 8,442,500 | 8,442,500 |
| 15 | Organizing tour to GBV response model districts for learning purposes | 11,250,000 | 3,750,000 | 3,750,000 | 3,750,000 |
| 16 | Participating in the celebration of National and International celebrations | 30,000,000 | 10,000,000 | 10,000,000 | 10,000,000 |
| 17 | Monitoring and Evaluation Frame work | 41,901,000 | 13,967,000 | 13,967,000 | 13,967,000 |
| OBJECTIVE THREE | | 496,468,000 | 223,496,000 | 136,486,000 | 136,486,000 |
| GRAND TOTAL | | 865,948,500 | 331,729,500 | 316,619,500 | 217,599,500 |

Dokolo District Local Government
P.O BOX 540, Dokolo - Uganda

With support from

