



**Primary Education and MHPSS  
in Adjumani, Obongi and Isingiro Districts**

**Joint Needs Assessment by JRS and Tutapona**

**October 2019**

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## **1. ACRONYMS**

<b>ARC:</b>	<b>American Refugee Council</b>
<b>EiE:</b>	<b>Education in Emergencies</b>
<b>FCA:</b>	<b>Finn Church Aid</b>
<b>FGDs:</b>	<b>Focus Group Discussions</b>
<b>IRC:</b>	<b>International Rescue Committee</b>
<b>JRS:</b>	<b>Jesuit Refugee Service</b>
<b>MHPSS:</b>	<b>Mental Health and Psychosocial Support</b>
<b>OPM:</b>	<b>Office of the Prime Minister</b>
<b>SCI:</b>	<b>Save the Children International</b>
<b>SGBV:</b>	<b>Sexual and Gender-Based Violence</b>
<b>TPO:</b>	<b>Transcultural Psychosocial Organization</b>
<b>UNHCR:</b>	<b>United Nations High Commissioner for Refugees</b>
<b>UNICEF:</b>	<b>United Nations Children's Fund</b>
<b>WCH:</b>	<b>War Child Holland</b>
<b>WIU:</b>	<b>Windle International Uganda</b>

## 2. INTRODUCTION AND BACKGROUND

According to recent UNHCR Refugee Statistics, Uganda hosts 1,362,269 refugees and asylum seekers. The majority of them are South Sudanese (854,859), followed by Congolese refugees (389,276). Other nationalities forming smaller percentages, but still very present in the country are: Burundi (44,611), Somalia (35,924), Rwanda (17,022), and others (20,577).

After Yumbe, Adjumani is the second largest refugee hosting District in Uganda, with a total number of 209,337 (15.4%) refugees and 234,300 (3.9%) host community population<sup>1</sup>. Obongi, a new District in the North, is now hosting a total of 121,473 refugees and 46,800 host community members. The refugees hosted in Northern Uganda have been coming from South Sudan. It is unlikely that the current situation in South Sudan will enable refugees to repatriate in large numbers in the next 3-5 years due to insecurity, generalized violence, and lack of political stability. Furthermore, Adjumani is no longer considered an emergency setting, going through the nexus between humanitarian aid and development. This new definition of the situation in Adjumani will increase the risk of current actors leaving the place due to lack of rapid funding to keep covering the necessities, and it will also imply a change in the strategy needed in the area.

On another hand, Isingiro is the fourth largest refugee hosting District in Uganda, after Yumbe, Adjumani, and Arua, with a total number of 127,889 (9.4%) refugees and 576,300 (9.7%) host community population. There are two settlements in Isingiro District: Oruchinga settlement, with a total number of 7,775 refugees, and Nakivale settlement with a total of 120,114 refugees. However, from January 2020 onwards, within Nakivale settlement, a new reception center will be opened, in Rubondo area, which will increase the number of refugees arriving to the settlement for the following years, increasing as well the challenges refugees face in this area.

In the Education sector, the increasing number of new refugees entering Uganda has put significant pressure and strain on the education response. School age children represent at least 50% of the refugee population and only 46% of them have access to formal and informal education, with an additional significant gender gap in enrolment, especially at secondary level and in upper primary levels, where fewer girls are in school compared to boys. Additionally, the high number of children in class, the distance they have to cover to go to school, the lack of food in the school, and other factors, increase the number of drop outs.

Experiences of forced displacement put significant psychological and social stress on individuals, families and communities. Refugees not only have to cope with the psychological aftermath of the events that happened in their countries of origin, but also they face important challenges and stressors in transit and in countries of asylum, including physical protection risks, limited access to basic services, restricted opportunities for employment and education, and the lack of hope for the future<sup>2</sup>.

These challenges children face, together with their personal and family traumas, increase the need of psychosocial support and counselling for the children in schools and out of school. However, this support doesn't exist in the school context, and support in the communities is mostly adult focused.

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<sup>1</sup> UNHCR Refugee Statistics, November 2019.

<sup>2</sup> Community-Based Protection & Mental Health & Psychosocial Support, UNHCR.

This joint needs assessment was done by Jesuit Refugee Service (JRS) Uganda and Tutapona, to collect information about the gaps in MHPSS and Primary Education in Adjumani, Obongi and Isingiro Districts.

### 3. METHODOLOGY

The assessment methodology ensured both quantitative and qualitative data collected using selected data sources - primary and secondary. The needs assessment accommodated interviews where components of education and MHPSS were present, in order to assess and better understand the psychological wellbeing of children, parents, and teachers of the targeted areas, and to as well gather information of the present challenges in the school contexts regarding Education, Child Protection and MHPSS. This has been done to better understand young people's lives in the settlements, the places, spaces, communities, and activities which are safe and unsafe.

The assessment was conducted with the following objectives:

- *To conduct stakeholder meetings in the Districts targeted, to better understand the services provided within primary education.*
- *To better understand children's challenges in primary education for both host and refugee community members, in and out of school.*
- *To understand the services provided in school and in the communities regarding counselling, children's, teacher's and parent's wellbeing, and the understanding of trauma behaviours of children in class.*

#### a. Primary Data

For a holistic perspective of the situation in the areas targeted, interviews and meetings were held with education and protection officers, coordinators, and managers of different organizations and institutions who are involved in primary education. The stakeholders met were UNHCR, SCI, FCA, ARC, and WIU among others. For in school children, interviews were made in the schools with students from different primary level, selected randomly and making sure both girls and boys were equally represented. Partners selected the proposed intervention areas, and from the selected locations, the villages were randomly selected for a more comprehensive perspective of the challenges faced from communities with different cultural backgrounds. To gain a deeper understanding of the areas and issues under the assessment, qualitative data was collected in the form of FGDs with parents and teachers, and interviews were made with different District Authorities.

#### b. Secondary Data

A school survey tool was used to observe the school environment in 12 primary schools across 6 settlements targeted. This tool included data on enrolment and attendance of students, number, gender and nationality of teachers, existing scholastic material, student/classroom and student/teacher's ratio, counselling support structures, school infrastructure. Additionally, some reports and gap analysis from some of the stakeholders were shared, giving a more comprehensive vision of the interventions done in the settlements by different partners, as well

as a clearer picture of the remaining gaps and the challenges<sup>3</sup>. A literature review of recent reports and assessments conducted in south-western and northern Uganda was previously conducted. These secondary data sources include: UNHCR Refugee Statistics and Verification (UNHCR Uganda), Community-Based Protection & Mental Health & Psychosocial Support (UNHCR), Needs Assessment Primary Education DRC Refugees (FCA, NRC, SCI and WCH), EiE Gender Analysis in Uganda (AAR Japan), RNA Child Protection (OPM, UNHCR, UNICEF, World Vision International, TPO, Plan International, IRC, Uganda Red Cross, Medical Teams International, ARC, WCH, and Concern World Wide).

#### **4. NEEDS ASSESSMENT FINDINGS**

##### **a. Introduction**

This section presents the findings from field interviews with children, as well as the FGDs with parents, teachers, and the meetings with the different stakeholders in Adjumani, Obongi and Isingiro Districts. The findings include references to secondary sources throughout.

##### **b. Adjumani and Obongi Districts**

##### **i. Stakeholders' meetings**

The team shared their interest in knowing the gaps and the interventions regarding primary education and MHPSS with the stakeholders in the area –including District Authorities-, from whom the following information was collected:

- There is no partner addressing Girl Education specifically in the settlements, and the information campaigns done by partners are not enough to keep and bring girl children to school.
- Gender inequality in the schools still remains a big gap as the different interventions and the lack of funding have not allowed partners to make a change in this area. There is more need of training and sensitization of students of the different levels on how to talk with girl mates who have the period, and behavioural change towards menstruation and support girls instead of stigmatizing them.
- MHM distribution of material covers only emergency situations, which is not enough material to support the girls in the schools. Trainings are done in a reduced scale, not providing a real sensitization and reduction of the stigma in schools. Additionally, there has been complaints about the quality of the Dignity Kits provided, both disposable and non-disposable, which are given to the schools on a quarterly basis.  
Usually the kits are handled by the senior woman in the school, who distributes the material inside the kits between the girls who are in need. This already shows that a pack of 3 pads will be distributed between the girls in the school, which is clear it is not enough to cover the needs of all the girls.
- Food Programs in schools are seen as a non-sustainable intervention from the partners and donors. However, the lack of food in school affects the learning of the children and is one of the main causes of drop out from school.

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<sup>3</sup> For reasons of confidentiality and data protection, the reports shared by the partners will not be addressed in this report. Only relevant information will be taken and included in the findings.

- Orphans and unaccompanied minors are targeted as one of the most vulnerable children as they don't receive support from foster families or caregivers and often are being left out. There is a compromised situation about orphans, as they usually benefit "extra" from the services and now parents have started to send their children alone to food distribution to get more benefits for their families.  
There is a need to support unaccompanied minors and orphans targeted by organizations already working in Child Protection and network with them for new cases in primary schools and communities in the settlements.
- Mental Health and Psychosocial support is not properly introduced and handled in schools. Children with trauma and/or in need of counselling are not being attended. Lack of training and sensitization of teachers about children's wellbeing and post-trauma behaviours makes it difficult for them to recognize and act on time to provide the needed service in that moment.
- There is a high need of sensitization of students and communities about girl pregnancy and child marriage to empower girls in their rights for education and human rights.  
In the Dinka culture, the households allocate a "white flag" in their homes when the girl is in her period for the first time, to indicate to the village that she is ready for marriage and pregnancy.

#### ii. School and communities' visits

The team went to some of the community and government schools and surrounding communities in the settlements where school data survey was done. Interviews with students of different levels, as well as FGDs with the teachers and parents were made. Some of the findings highlighted after the collection of data were:

- The type of counselling the children receive in the schools is directed to guidance on subject selection and future career paths, not on psychosocial counselling.
- Parents of the children in schools have asked the team to provide group therapy for children as they see their children suffering and in need of support.
- Children are stressed and it is hard for the parents to address these needs without external support.
- Unaccompanied minors living with caregivers or foster family members face also challenges of support from these adults, as they're not considered part of the family and they are the last priority in the house. These children have no one to address these challenges to and need an external, safe place to share their struggles and receive counselling.
- Some children are also child-headed family members (14-15 years), where they have to take care of the family themselves as they have no parents. These children usually don't go to school, which lead to major psychological distress.
- There is a big and increasing problem of the parents, which affect the children: alcohol abuse. Due to high consume of alcohol, parents don't support their children and they are violent against them.
- Children have also commented in the interviews that MHPSS services are also needed for parents urgently to help them manage their psychological distress so that they can parent better and drink less.
- Access to the schools affect students when deciding to go to school, mostly in rainy season and in the case of the youngest ones, who can't keep up with the distances every day.
- Without a feeding program in the schools, students are sent back home for lunch, and most of them don't come back and end up dropping out due to distance, exhaustion and hunger.

- Poverty levels are forcing girls to prostitute themselves to gain some money and pay the fees and to have some savings –either to pay food or to save money for secondary education-. These cases, highlighted by the teachers being many, end up in child marriages and early pregnancies.
- Lack of enough classrooms increase the chances of having overcrowded classes where the quality of the lesson and the basic attention to children don't exist.
- Children and parents have commented the frustration and loss of hope in education due to the lack of support to continue studying after Primary Education. Parents don't see the point of spending money in education when children won't have a future, and children can't change anything.

#### c. Isingiro District

##### i. Stakeholders' meeting

The team shared their interest in knowing the gaps and the interventions regarding Primary Education and MHPSS with the stakeholders in the settlements of Oruchinga and Nakivale – including District Authorities-, from whom the following information was collected:

- In December 2019, Kyaka II settlement will be closed for new arrivals, and Nakivale will be open for new arrivals in January 2020. Currently, Nakivale is receiving an average of 1,000 refugees per week. With the opening for new arrivals, Nakivale will face challenges of accommodating refugees and providing basic services.  
Regarding education, new arrivals will increase the risk of Child Protection issues in the settlement, and will increase also the drop outs and trauma cases of children.
- Provision of MHM materials and training is reduced to the emergency distribution of materials and to quarterly trainings, leaving a big gap on sensitization and support of girls with sanitary pads in the schools. Continuing to be a big gap, menstrual stigma is one of the main reasons girls drop out of school.  
There is a big gap regarding senior women training, as well as sensitization of students – both boys and girls- on menstrual and sexual health.
- In Oruchinga, some of the main challenges are inter-connected with Child Protection and MHPSS: there is need of community-based awareness related with sexual and gender-based violence (SGBV), community health, as well as increased support on mental health and psychosocial support (MHPSS).  
Cases of Child Protection are increasing in the settlement. Children are being raped and forced into early marriages, causing stigma and drop outs. There is a big challenge to keep children in schools and to track those who drop out and bring them back.
- Access to schools: distance to and from school is preventing a high number of children from going to school. In some villages in Nakivale settlement, children have to walk more than 8 kilometres every day to school.
- Out of school children are still not targeted –only some of them are being attended by Tutapona- when facing trauma challenges. Especially girls, who face early marriages and early pregnancies.
- School feeding program: although seen as not sustainable, it is a reality that children drop out of school because they don't have anything to eat in the entire day, and after walking many kilometres of distance to reach the school. Paying attention to the lessons becomes a challenge with the stomach empty the entire day and the effort of covering the distance to the school.



- Orphans, child headed, and unaccompanied minors are a vulnerable group, prone to drop out from school. Most of them go by themselves to food distribution, having to lose one day or more of class.  
Additionally, this vulnerable group has become even more vulnerable due to the mistrust of organizations in charge of food distribution, as now many families send their children alone, pretending they are orphans, so that they can get “extra” benefits. This situation endangers orphans as they are not trusted by organizations and in the end they don’t benefit at all from the food distribution, losing their feeding source, as well as school days.
- There is no partner directly involved in MHPSS in schools.

## ii. Schools and communities’ visits

The team went to some of the community and government schools and surrounding communities in the settlements where school data survey was done, and interviews to students of different levels, as well as FGDs with the teachers and parents were made. Some of the findings highlighted after the collection of data were:

- Distance to schools put children in danger as sometimes they have to use the “bodas” as mothers don’t have the time to bring the children personally to school and do all the domestic work at the same time. The use of the “bodas” can cause accidents as the roads are not good and the drivers are not careful enough. Furthermore, “boda” drivers imply a bigger danger for girls, as they are an eligible target for rape.  
Additionally, the girls who foot to school are at a higher risk, as they can be kidnapped and raped in the bush.
- Disabled children are considered as too vulnerable and it is too much work for parents to bring them to school. They remain at home as no access nor facilities are in place. Most of the times mother can’t keep up with taking care of them in addition to all the domestic responsibilities and the responsibility of taking care of the rest of the family.
- The quality of the education is very low: children facing difficulties with language barriers are not supported by teachers, and the learning progress and system are very different from the one of the refugees’ country of origin. Teachers don’t have the training nor the capacity to support children with language barriers.  
Additionally, the lack of pedagogical skills of the teachers bring challenges to students, as they are not being treated properly in the schools. All the children interviewed in the schools confessed to experience corporal punishment done by the teachers when they don’t behave well, or when they come late to class, among other reasons.
- Girls are considered as the most vulnerable group. Parents, especially mothers who have experienced SGBV in their country of origin, in their transit to Uganda, or in the settlement, fear that their girls will go through the same experience and they chose to keep them at home. Furthermore, experiences from girls being raped on their way to school have reinforced their statement.
- The lack of counselling and group therapy support in the schools has driven children, especially boys, to become more violent with their peers, especially with girls, and with the teachers. This violence has the consequence of school drop outs, drug and alcohol abuse, and rape and sexual violence of girls.  
These situations end up in child marriage and early pregnancy, keeping both boys and girls out of school and with an additional trauma to carry with them.
- Activities occupying out of school and in school children: before and after school, children –especially girls- are obliged to comply with their responsibilities at home, as these tasks

are seen more important than going to school. Additionally, when the season for recollection arrives (generally between October and November), children are sent to the field to help their families instead of going to school, not allowing them to finish the last term of the school year.

- The lack of awareness of parents about the importance of education has been highlighted by most of the children interviewed.
- School feeding program: although seen as not sustainable, it is a reality that children drop out of school because they don't have anything to eat during the entire day, and after walking many kilometres of distance to reach the school. Paying attention to the lessons becomes a challenge with the stomach empty the entire day and the effort of covering the distance to the school.
- Group therapy for children and youth, as well as children counselling in the schools has been highlighted as a major need by all parts (children, parents, and teachers).
- Due to cultural differences, but mostly due to lack of money and resources, and the fear of girls being raped, families opt to send boys to school rather than girls. Additionally, in different tribes of Nakivale area, after reaching 9 years old age and/or having their first period, girls are sent into marriage, banding them to go to school, as well as increasing the chances of accumulating more trauma experiences.

## 5. RECOMMENDATIONS

After the discussions held with the different stakeholders in the three Districts, and after the interviews and FGDs with children, teachers, parents and community members, the team concluded with some recommendations for future and comprehensive interventions in both, very different areas. As a general overview, in all the Districts there is a need of including MHPSS in the schools, not only for children, but also for the communities where they live; additionally, Child Protection, gender mainstreaming, infrastructure, feeding program and quality of education have been the main topics highlighted in the three targeted Districts.

### a. Recommendations for Adjumani and Obongi Districts:

- Different approaches and interventions regarding girl education need to be addressed. Sensitization needs to be done inside and outside the schools, as not only parents should be aware about the importance of sending girls to school, but also to teachers and peer students.
- Gender mainstreaming needs to be approached in a different way. It has been clear that the distribution of MHM materials in the schools is not sufficient, neither strong enough to keep girls in school. Different cultural-based factors are keeping girls outside school.
- Early pregnancies and child marriage are still highly rooted in all the ethnical groups present in the settlements. Continuous and more consistent approaches need to be taken to gradually change communities' perception about these issues and allow girls to go back to school.
- Unaccompanied minors and orphans need to be more protected. Interventions focused on the support of caregivers, foster families and child-headed families are crucial for these vulnerable groups to have a basic and safe support. Coordination and cooperation with Child Protection partners should be present.
- Feeding programs in school have been mentioned as one of the factors affecting the most the students' learning capacity, as in all the schools visited, they don't receive food in the entire day. Additionally, it has been highlighted as one of the main reasons for students to drop out, together with the distance: as they're being sent back home at lunch time, most of them they don't come back due to the long distance and the starvation at home and in school.
- Mental Health and Psychosocial support is not adequately introduced and implemented in the schools. Community members have requested targeted group therapy for children in and out of schools in the refugee settlements to support them to overcome their significant challenges and trauma. Group therapy serves to reduce the stigma often associated with mental health interventions. Such programming has also been shown to be very effective at reducing trauma symptomology and increasing positive coping skills and attributes.
- To address the expressed lack of specialised mental health services, there is a significant need for Clinical Therapists to provide individual therapy to support children (in and out of school).
- Mental Health and Psychosocial support services are also highly needed for adults. Alcohol abuse has been increasing in the area, increasing the risk of child abuse and

protection issues at home, which affects as well to the wellbeing of the children and their learning capacity in school.

- Lack of infrastructures is still a challenge that shouldn't be forgotten and/or replaced by other interventions. The number of students per classroom and per teacher reduces the quality of the learning, as well as the capacity of the teachers to target the problems each student face.
- Lack of Secondary Education access, quality, and overall support increases the number of dropouts in higher Primary levels, as the chances to go to a Secondary School are much reduced. Although Primary Education is still very important, more efforts should be put in access to Secondary Education and the nexus between Primary and Secondary.

**b. Recommendations for Isingiro District:**

- Community awareness and sensitization should connect education, child protection and mental health and psychosocial support in and outside the schools, and provide opportunities for community members to participate in the interventions to build a greater connection between the school and the families and for greater impact and sustainability of the interventions.
- To address gender mainstreaming through all the actions and activities of all the stakeholders. Additional gender equality sensitization for parents, teachers, students, and other stakeholders should be addressed in a continuous way.
- Teachers should receive trainings and be provided with coaching and mentoring in pedagogical skills, in how to use multi-lingual approaches to teaching, along with child protection, positive discipline, and inclusive education strategies. These trainings should be school-based in order to develop school-based strategies and solutions.
- Community members have requested targeted group therapy for children in and out of schools in the refugee settlements to support them to overcome their significant challenges and trauma. Group therapy serves to reduce the stigma often associated with mental health interventions. Such programming has also been shown to be very effective at reducing trauma symptomology and increasing positive coping skills and attributes.
- To address the expressed lack of specialised mental health services, there is a significant need for Clinical Therapists to provide individual therapy to support children (in and out of school).
- There is a need for specialised mental health services including group therapy and individual therapy for the adult care-givers of the refugee and host community children. Healthy, stable care-givers are a critical factor in helping children to overcome their challenges and to stay in school. In support of this, this needs assessment uncovered substance abuse, neglect and family and gender-based violence as common-practice by care-givers.
- Many of the challenges expressed in this needs assessment pertain to material needs including food, NFIs, shelter and medical support. Actors in the Education and MHPSS spaces working with children in these settings need to be connected to general Protection partners to allow for an effective referral pathway system. If these needs remain unmet, they will hinder school attendance, educational achievement and the ability for people to meaningfully engage with mental health support services.