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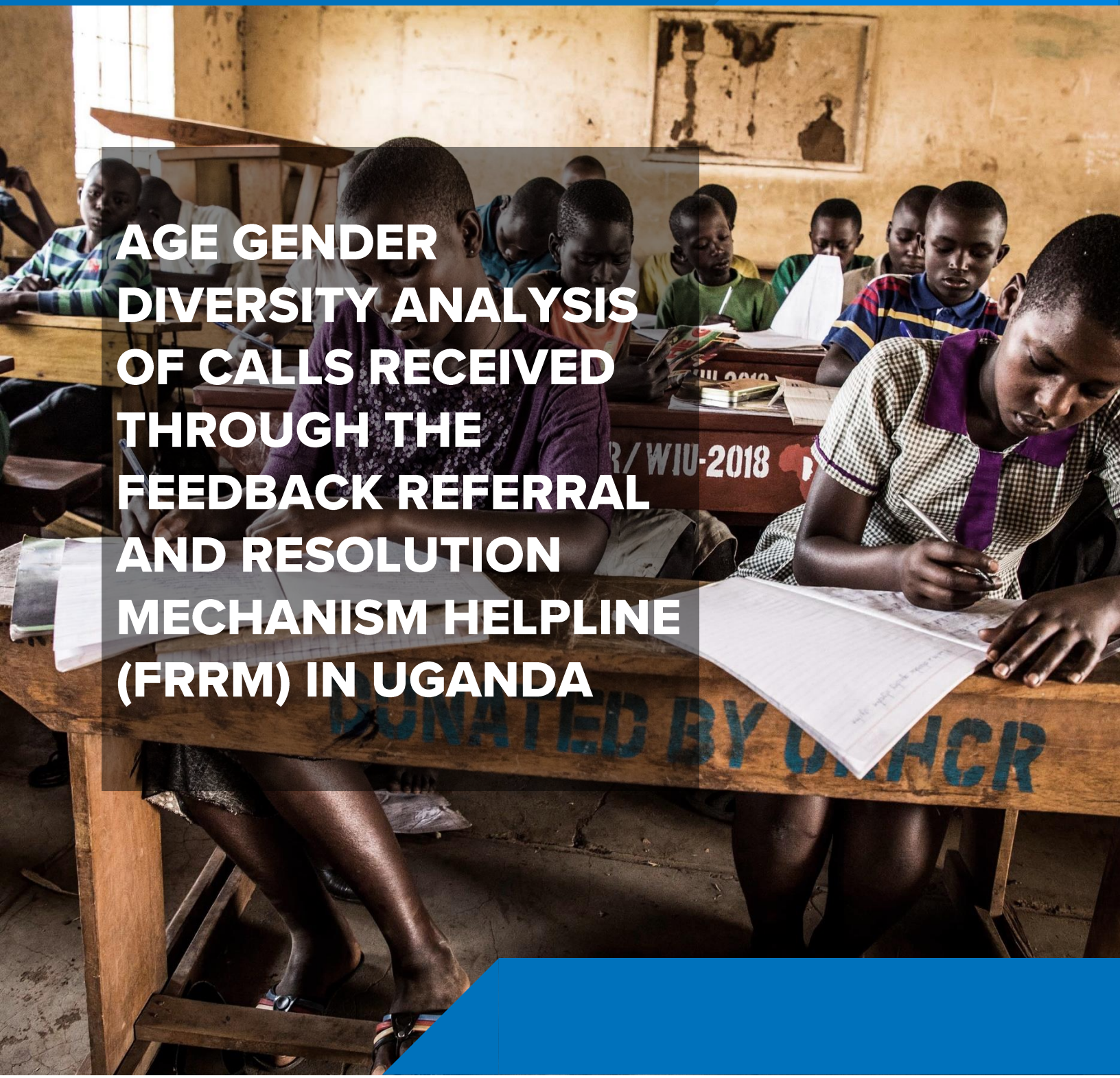

AGE GENDER DIVERSITY ANALYSIS OF CALLS RECEIVED THROUGH THE FEEDBACK REFERRAL AND RESOLUTION MECHANISM HELPLINE (FRRM) IN UGANDA

ACKNOWLEDGEMENTS

Many people were involved in developing and implementing the Feedback Referral and Resolution Mechanism (FRRM) who deserve sincere gratitude for how well it has run to date. Those people include: all FRRM partner agencies and their focal points for their commitment to providing feedback and assistance to people of concern (PoC) calling the helpline; our dedicated helpline team of 34 agents; all UNHCR sector leads for providing their inputs on the report and assisting with the coding frameworks; the FRRM steering committee who oversaw the design and development of the tool; the new inter-agency FRRM coordination group; and all other staff, partners and donors who have supported the project since the FRRM was launched in October 2018.

A special thanks is also given to all the women men, girls and boys, refugees and host community members alike, who called the helpline to provide feedback.

The views in this study are those of the author alone and do not necessarily represent those of UNHCR or its partners.

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ABBREVIATIONS

AAP	Accountability to Affected Population
AGD	Age, Gender, and Diversity
CP	Child Protection
FAQs	Frequently Asked Questions
FRRM	Feedback, Referral, and Resolution Mechanism
IGO	Inspector General's Office
IPV	Intimate Partner Violence
LGBTI	Lesbian, Gay, Bisexual and Transgender people, Intersex people
MHPSS	Mental Health and Psychosocial Support
NGO	Non-Governmental Organization
OPM	Office of the Prime Minister
PoC	Persons of Concern
PSN	Person with Special Needs
RSD	Refugee Status Determination
RST	Resettlement
RWC	Refugee Welfare Committee
GBV	Gender-Based Violence
SOP	Standard Operating Procedures
UNHCR	United Nations High Commission for Refugees
WASH	Water, Sanitation and Hygiene
WFP	World Food Program

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EXECUTIVE SUMMARY

What were the key issues, needs, and vulnerabilities identified through the call data. What cross-sectional concerns could be viewed across all of the thematic areas examined by this study?

BACKGROUND

The inter-agency Feedback, Referral, and Resolution Mechanism (FRRM) was launched in the Uganda operation in October 2018 to support the commitment of UNHCR and its partners to accountability to affected persons and to date has received over 180,000 calls from 50,000 individual callers. This data provides unique insight into the needs and concerns of the community. All calls received through the FRRM helpline are recorded in the system's interactive data portal which provides a sound summary of call statistics; however, it does not analyse the data to identify gaps in the programming of partners and UNHCR. As a result, this study was commissioned to analyze the helpline data through an age gender and diversity lens and to highlight specific issues and "programming blind spots" facing different populations.

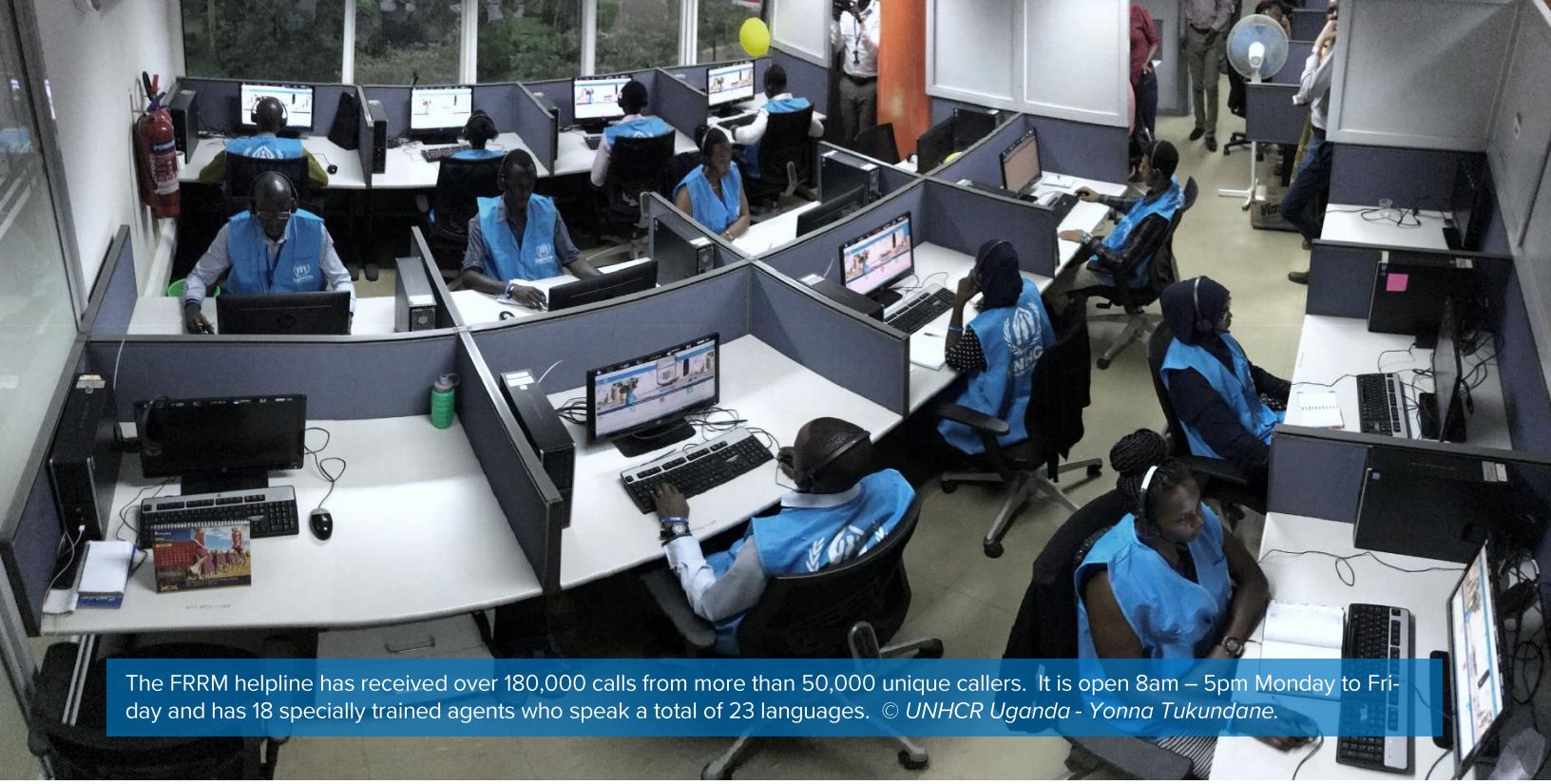
METHODOLOGY

A mixed methods approach was used to address the central objectives of the study. The quantitative analysis examined caller usage trends across key dimension including age, gender, nationality, and location, as well as over time, for the period of January 2019 to July 2020. The thematic analysis, on the other hand, was focused on identifying caller needs, issues, and vulnerabilities, as well as difficulties in accessing essential services and gaps in programming, through the application of coding frameworks to a smaller sample of the narrative data from 2020. Triangulation with recent participatory assessments produced in the same context was used to validate findings, together forming an updated image of the priorities and potential gaps in programming of refugees in Uganda.

CALLER PROFILING

AGD Trends: Despite representing 62% of the refugees in Uganda as of June 2020, South Sudanese PoC only made 13% of the calls. It was Congolese PoC who make the majority of the calls (56%). Women and girls also made a slightly lower percentage of the calls when compared to their actual proportion in the overall refugee population, with 40% and 52% respectively, a trend that can be seen across all nationalities with the exception of Somali PoC where women and girls made a majority of the calls. 80% of the total calls were made by PoC aged 25-59, and another 12% by PoC aged 18-24.

Thematic Area Trends: General Queries received the highest number of calls (30%), followed by Community-based Protection (12.6%); Resettlement, Local Integration, and Voluntary Repatriation (11.9%); Health and Nutrition (11.0%); and Food Assistance (7.1%). Congolese PoC made the majority of calls to all thematic areas other than to WASH, where the majority were made by South Sudanese PoC. Furthermore, the only thematic areas where women and girls made the majority of calls were to Child Protection and GBV. Children, conversely, made only 3% of the total calls, but did make a greater contribution to Education (10%) and Child Protection (20%). Similarly, the 18-24 age group, while only placing 12% of the overall calls, made 20% of the calls regarding Food Assistance.



The FRRM helpline has received over 180,000 calls from more than 50,000 unique callers. It is open 8am – 5pm Monday to Friday and has 18 specially trained agents who speak a total of 23 languages. © *UNHCR Uganda - Yonna Tukundane.*

Trends by settlement: The five locations with the highest number of calls were Kampala, Nakivale, Kyangwali, Kyaka II, and Bidibidi. 55% of the calls originated from settlements in the South West, corresponding almost exactly to the percentage of calls made by Congolese PoC (who are the principal inhabitants in those settlements). Conversely, only 12% were made from settlements in West Nile, corresponding exactly to the percentage of calls made by South Sudanese PoC. The remaining calls were made from Kampala, and 68% of those calls were placed in the post-pandemic period.

Impact of COVID-19 and other trends over time: Two notable trends over time can be seen in the data. The first was the prominent rise in calls in April, May, and June 2020 in Kampala as a result of the increase in calls to General Queries which were directly or indirectly related to COVID-19. Other than General Queries, the only other thematic areas that experienced an increase in the number of calls received during that period of time were Food Assistance and Shelter & NFIs. All other thematic areas experienced a decrease in number of calls which may signal that callers experienced a reduction in access to the FRRM as a consequence.

The second trend over time can be seen among the settlements in the South West which experienced an upward trend in monthly calls in the first half of 2019, followed by a significant drop in calls in July 2019. This was not apparent in either Kampala or the settlements in West Nile, which for the most part did not demonstrate any clear trend over time.

KEY FINDINGS BY SECTOR

Education: The greatest need communicated by callers regarded financial assistance for tuition and other fees required to access schooling. Issues relating to education quality, conversely, were rarely communicated. With respect to COVID-19, there was some evidence to indicate that children did not have sufficient supplies or support to study remotely.

Food Assistance: A variety of issues were highlighted relating to food assistance including the amount of food received, a lack of appreciation for certain items, challenges with

distribution management, and concerns when changing from food assistance to cash assistance. In the wake of the pandemic, the number of food insecure households likely increased as food assistance was cut by 30% (though the cuts were unrelated to the pandemic) and market food prices rose, exacerbating the situation of PoCs who were economically impacted by the lockdown, possibly leading to an increase in food assistance-related calls.

Health & Nutrition: With respect to health and nutrition, the helpline proved extremely useful in providing information to callers about where to go for their health concerns, as well as serving to strengthen health referral pathways. Callers also raised issues with cost of care particularly for prescribed drugs, medical tests, and surgeries. Other quality of care complaints related to insufficient medical supplies or stockouts at the health center, a lack of comprehensive care, long waiting times, and potential deficiencies in the referral system. Following the pandemic, calls highlighted some impacts to healthcare access including a lack of transportation to and from the health facilities and the deprioritization of care for non-COVID-19 conditions.

Livelihoods: Prior to the pandemic, the most frequent request was for livelihoods opportunities in the form of a job, start-up capital, equipment, or through the provision of vocation training. The helpline also appeared to fulfill a unique role providing callers with information on how to apply for a job, as well as labour conditions in Uganda. This proved important as callers expressed frustration over vague or biased eligibility criteria, as well as labour disputes with employers. Not surprisingly, the livelihoods of many callers were impacted by the restrictions imposed by the pandemic, including an inability to move and assemble. The financial impact to households could most acutely been seen by the increased requests for shelter and food assistance in Kampala which is normally not provided to urban refugees.

Protection: PoC most commonly called the helpline for protection or legal assistance for a variety of protection issues, most commonly for incidents of physical or verbal assault, theft, and disputes within the community or family unit. Conversely, community-based protection concerns most often involved support for persons living with a vulnerability, such as support for persons with special needs (PSNs). The main barrier to accessing protection assistance related by callers was insufficient response by police, partners, or community leaders, when being asked for assistance. With respect to COVID-19, it appeared that some callers had faced detention or mistreatment when suspected of having COVID-19 or when not respecting COVID-19 measures such as physical distancing or wearing a mask.

Child Protection: PoC regularly asked for financial assistance or family mediation to deal with issues of child neglect and abandonment. When children called about their own neglect, they frequently requested alternate care. Other callers requested protection assistance and psychosocial support for cases of sexual assault of a minor, but also for child marriage, and teenage pregnancy as well. Unsatisfactory responses from police and partners were the most commonly mentioned barriers to receiving a support for a child protection concern, as was seen with the other protection sectors. Some child protection concerns unique to the pandemic included the separation of caregivers from children due to movement restrictions, delays in the handling of protection cases, and an increased risk of gender-based violence, such as early marriage, due to school closures.

The FRRM helpline is a key accountability mechanism, creating the opportunity for UNHCR and partners to hear directly from PoCs, including children who often call regarding their own education and protection needs.

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Gender-Based Violence (GBV): Under GBV, callers requested an array of support including protection assistance, health or psychosocial support, and family mediation. The most frequently raised GBV issue was rape, followed by intimate partner violence and lesbian, gay, bisexual and transgender people, intersex people (LGBTI) discrimination, though GBV calls were complex and often raised multiple protection concerns. An increase in GBV was not detected post-pandemic, however, this was not a surprise due to the low number of calls received to this sector, in addition to being a serially underreported issue (the helpline is likely not the avenue where GBV concerns are most frequently reported).

Registration & RSD: The two most common requests raised under this thematic area were updates to family attestations and official transfers to other settlements, both of which are essential to receiving assistance. Secondary queries raised by callers related to wanting more information about the asylum and registration processes, as well as about the resettlement (RST) interview specifically. During the initial lockdown, processes were halted and there was evidence to support that some new arrivals went straight to the settlements without having initiated a registration process.

Resettlement, Local integration, and Voluntary return: PoC most often called to request an update on their RST cases, to initiate an RST process, or to request information about case rejection and ineligibility. Very few PoC showed interest for voluntary return. Callers often expressed confusion over the RST process due to its inherent length and unpredictability, while others mistakenly thought that they had begun an RST process, perhaps equating having conducted a protection interview with having an RST case. As with registration, call content indicates that processes were halted during the initial months of the lockdown, which particularly impacted people in the last phases of the resettlement process.

Shelter & Non-Food Items (NFIs): Before the COVID-19 pandemic, the single largest request presented to the helpline was for plastic sheeting and construction materials, followed by other NFIs, particular solar lamps. Post-pandemic, however, urban refugees, who are normally not eligible for shelter assistance, increased their requests for rental assistance to the helpline.

The helpline was established to strengthen protection and other referral pathways across the refugee response. It serves as an important conduit for information sharing and the systematic capturing of feedback, complaints and protection needs. © *UNHCR Uganda – Duniya Aslam Khan.*

Water, Sanitation and Hygiene (WASH): Water shortage was the most common issue raised issue by callers related to WASH, typically due to the poor maintenance of water systems, having few water sources in the community, or experiencing irregularities in water service delivery. The next most frequently mentioned request was for soap. It is important to note that the frequency of these requests did not increase post-pandemic; however, people were most likely to cite the pandemic in their calls regarding water and soap to justify their need.

CROSS-CUTTING ISSUES

Interpreting number of calls: The number of calls made to a thematic area likely demonstrates its relative importance, as well as the uptake and accessibility of the helpline. Simultaneously, this measure also provides an indication of the issues to which a particular group is responsible within the household. The act of making a call to the helpline, for example, indicates having knowledge of the helpline and having trust in the system, in addition to having a mobile phone and being in a settlement with sufficient mobile reception. However, it also signals that the caller feels that the issue for which they are communicating is their responsibility.

Access of women and girls to critical assistance: Through an examination of the percentage of female callers to each sector, it appears that women and girls mainly call about issues to do with their safety and the safety or wellbeing of their family (such as Child Protection, Education, Health & Nutrition), while men and boys mainly call for issues concerning providing for the family (Food Assistance, Livelihoods, WASH, Registration). It also bears underlying, that lower representation among these thematic areas may indicate access issues to critical assistance including food and cash assistance, individual registration, and legal and physical protection.

South Sudanese calls: Despite representing a majority of the refugees in Uganda, South Sudanese callers only made a fraction of the calls to the helpline. In particular, they very

rarely called regarding registration, resettlement, or for protection support. The only thematic area in which they placed a majority of the calls was to the WASH sector. It should also be noted that South Sudanese children and young adults made a higher percentage of calls than the children and young adults of any other nationality. The lower uptake of the FRRM helpline in West Nile settlements and among South Sudanese PoC is likely related to the poor mobile coverage in those settlements, along with a cultural preference for in-person reporting.

Communication and handovers by implementing partners

Perhaps the largest complaint that could be detected across all of the thematic areas was insufficient communication with PoC concerning assistance and gaps in the handover process when one implementing partner was replaced by another. The latter issue was especially evident with respect to protection and health cases.

The helpline is an important conduit of information and support for refugees: There was significant evidence that the call centre acts as important support for callers, particularly for health and protection issues where the resolution comments indicate that PoC were provided information on where to go and who to contact to best address their concerns. There was also sufficient proof of follow-up and provision of support for callers who required urgent assistance or referral, whether that be for transportation or medical treatment.

1 INTRODUCTION

What do we hope to accomplish through an examination of the Feedback, Referral, and Resolution Mechanism data? What unique insights do we hope to glean?

1.1 GENERAL BACKGROUND

Ensuring accountability to affected population (AAP) is a key principle in UNHCR's work, as reflected in UNHCR's Strategic Directions 2017-2021 and its Age, Gender, and Diversity (AGD) Policy of 2018. AAP requires that programmes be informed by the views of persons of concern (PoC) and adapted to their capacities and needs. Systems to receive feedback – including comments, suggestions, and complaints – are a key accountability mechanism, creating the opportunity for UNHCR and partners to hear directly from PoCs, to understand the protection risks they face, to gauge the effectiveness of established services, and to increase transparency, creating a more responsive and accountable refugee hosting environment.

As a part of overall efforts to achieve this, the inter-agency Feedback, Referral, and Resolution Mechanism (FRRM) was launched in the Uganda operation in October 2018. This mechanism seeks to enhance and improve two-way communication between PoCs and assistance organisations, creating a better informed and more accountable protection environment. The helpline was launched in October 2018 with country wide coverage being achieved in March 2019 and is accompanied by an online platform which records and tracks all referrals. The platform's referral network currently has some 520 individual focal points from over 40 partner organizations working across 30 settlements.

With over 180,000 calls received since its initiation, from 50,000 individual callers, this data provides UNHCR and partners with useful insight into the needs and lived experiences of refugees which contributes to informing programming and project design along with other sources of information, helping to ensure that resources are better prioritized according to needs.

1.2 FRRM HELPLINE DATA CAPTURE

The helpline is open 8am – 5pm Monday to Friday and has 18 specially trained agents who speak a total of 23 languages. Upon calling, refugees are greeted with an audio recording requesting them to choose their language before being directed to the appropriate agent.

The agent then proceeds to introduce themselves and to capture information about the caller, including: whether the caller is a refugee or asylum seeker; if the caller is a refugee, their Individual Refugee ID number; and caller location, age, and gender. After this information is gathered, the agent asks the caller how they can help them and proceeds to record the caller's feedback, information request, or complaint.

All calls are categorized from 1 to 5 according to the nature of the call. Categories 1 and 2 related to requests for information or feedback and are handled directly by the helpline agents, guided by an extensive database of standardized Frequently Asked Questions (FAQs). Category 3 represents more complex calls related to requests for assistance and they are automatically channeled through the

mechanism's referral system to preassigned focal points within partner organizations for resolution. Category 4 calls relate to cases alleging fraud and corruption. These calls are channeled directly through the system to the Risk Management Unit and the Inspector General's Office (IGO) for investigation. Category 5 calls are serious protection/life threatening cases which are channeled directly to the head of UNHCR field offices in the concerned location. The channels used to address Category 4 and 5 calls are UNHCR channels.

1.3 SCOPE OF THE ASSIGNMENT

All calls are received through the FRRM helpline and recorded in the system's interactive data portal which allows UNHCR and partners to track individual case status, referral response times, and quality of feedback given. The portal also includes a data visualization which disaggregates data by settlement, sector, call category, breakdown of age, and gender and diversity of callers. This dashboard provides a sound overview of the calls received; however, it does not analyse the data to identify gaps in the programming of partners and UNHCR. This study aims to uncover potential programmatic gaps not apparent in the current data summaries.

The overall objective of this study is **to analyze the helpline data through an AGD lens and to highlight specific issues and "programming blind spots" facing different populations**. The analysis will begin by examining the profile of callers, noting trends in the age, gender, and diversity of callers[1], as well as location. The study will further outline the needs, issues, and vulnerabilities of women, men, boys, and girls of diverse nationalities and backgrounds, in refugee settlements and in Kampala. Close attention will be paid to the accessibility of women and girls to different types of services including registration, protection, health, education, shelter, domestic items, food assistance, and water, sanitation, and hygiene (WASH). The report will conclude by underlining the key observations and insights gleaned through the analysis.

1.4 SCOPE LIMITATIONS

The needs, issues, and vulnerabilities outlined in this study represent the concerns reflected by callers and should not be read as representative of all the concerns experienced by refugees in Uganda. It should also be noted that access to the FRRM was not examined in this study meaning that the issues of certain groups may be over or underrepresented within the data. Finally, due to limitations in the time available for this study, only a small percentage of the narrative data was examined, specifically confined to the Jan-July 2020 time period. As a result, some seasonal concerns may not be captured within the analysis.

[1] Due to the limited available data on diversity characteristics, diversity for the purpose of this study is limited to nationality.

2 METHODOLOGY

A mixed-methods approach will not only allow us to spot key trends by age, gender, nationality, settlement, and thematic area but will also paint a rich picture of the needs, issues, and vulnerabilities expressed by refugees in Uganda.

2.1 GENERAL APPROACH

A mixed methods approach was used to address the central objectives of the study. While quantitative analyses help to examine caller profiling, qualitative analysis of the narrative call data provides a more fulsome picture of caller issues, needs, and vulnerabilities, helping in the identification of program gaps. Triangulation with recent participatory assessments produced in the same context was used to validate findings, together forming an updated image of the priorities and potential gaps in programming of refugees in Uganda. The subsections that follow expand upon the quantitative and qualitative methods that were used to address the study objectives.

To the extent possible, analyses were conducted using certain key dimensions: age, gender, diversity (nationality, as mentioned above), and call region. This means that analyses were computed along each dimension and every combination of dimensions. For instance, overall call numbers were computed, as were numbers for women, girls, men, and boys, but also with consideration to caller nationality, location, and of course, by call sector. This means that trends could be examined country wide, but also for South Sudanese girls calling with respect to an education issue. The dimensions and categories used to conduct the analyses are listed below:

- Gender: female, male
- Age: 0-17, 18-24, 25-59, >60
- Nationality: Burundian, Congolese, Rwandan, Somali, South Sudanese, and Other (all other nationalities apart from those listed above).
- Call region: Kampala, South West, West Nile (including Kiryandongo due to similarities in the makeup of persons living there with other settlements of West Nile).

Why an Age, Gender and Diversity Lens?

"Forced displacement and statelessness impact people differently, depending on age, gender, and diversity. Understanding and analysing the impact of intersecting personal characteristics on people's experiences of forced displacement or statelessness are necessary for an effective response."

-UNHCR Age, Gender, and Diversity Policy.

2.2 QUANTITATIVE METHODS

The quantitative analysis examined caller usage trends across key dimension including age, gender, nationality, and location, as well

as over time. This analysis provided an overview of the thematic areas which may be the most important to certain groups and in which locations. It also highlighted the uptake of the FRRM helpline over time.

QUANTITATIVE METHODOLOGY

The quantitative analysis followed two steps. First, frequency tables were generated to aggregate call numbers across each of the aforementioned key dimensions of analysis, by sector, and by month and year. Second, crosstabulations were computed to examine trends and differences between groups.

QUANTITATIVE SAMPLING

Calls from January 2019 to July 2020 were included in the analysis, specifically from categories 1-3. Figure 1 below provides a simple description of each call category along with an example call (refer to the FRRM Standard Operating Procedures for further details). Calls from the pilot period – Oct 2018-Jan 2019 – were not included due to updates made to the FRRM system after that initial period.

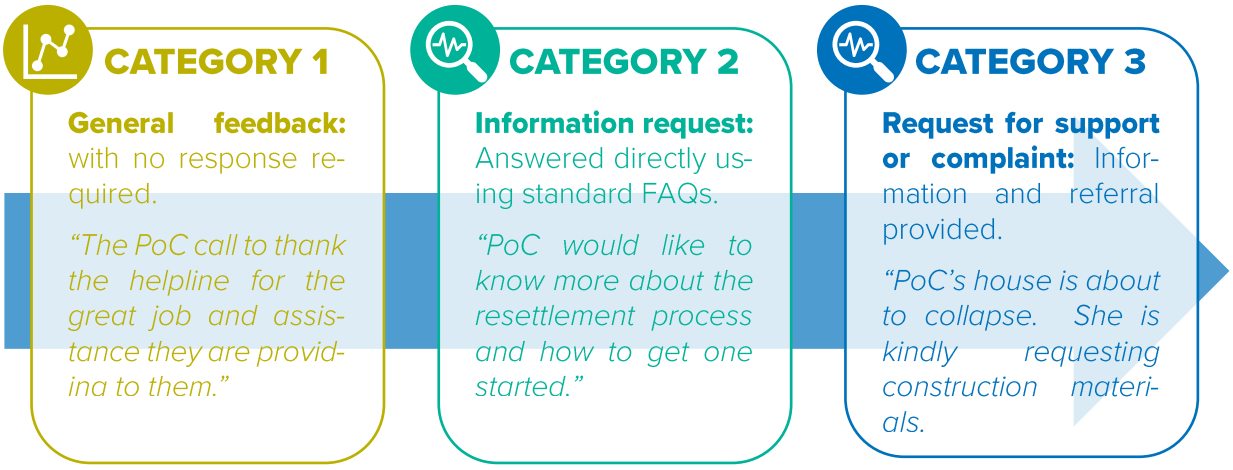
2.3 QUALITATIVE METHODS

Thematic analysis of the narrative call data was the key to understanding caller needs, issues, and vulnerabilities, and enabled the detection of difficulties in accessing essential services, as well as gaps in programming. Taking note of UNHCR's Updated Commitments to Women and Girls, close attention was given to any evidence that women and girls lack access to certain services or programmes (particularly issues with individual registration; equal access to and control over food, core relief items, and cash-based interventions; equal access to economic opportunities, decent work, and quality education and health services; and access to sexual and gender-based violence prevention and response services).

QUALITATIVE METHODOLOGY

The thematic analysis was comprised of four steps: framework development, codification, analysis, and concluding. Each step will be briefly examined followed by an example to further clarify the process.

Figure 1: Call category descriptions and examples.



Step 1: Framework Development

First, a broad system of categorization and subcategorization was developed for each sector. The overarching categories included: (1) broad categories to group sector-specific needs and issues; (2) *infrastructure/support* to group issues related to the broad structures of support, such as partner activities; (3) caller self-identified vulnerabilities; and (4) COVID-19, to group any issues specific to the pandemic. While the first category is sector-specific, the latter three are cross-cutting and can be applied to multiple sectors. Subcategorization, further identified the specific needs, issues, or vulnerabilities within the broader category that helped to reduce a call narrative into one or more specific and identifiable problems, forming the basis for further analysis. The coding frameworks were first drafted using the 2018 and 2019 participatory needs assessments, which were then reviewed by UNHCR Uganda sector leads. They were further refined once codification began to reflect the content found in the narrative texts.

Step 2: Codification

Following development of the coding framework, each narrative was read and assigned codes according to its content. A narrative could have been assigned one or multiple codes depending on the number of unique identifiable issues, which could also span multiple sectors. An example of this codification step is depicted in Figure 2 below.

Step 3: Analysis

Once codification was complete, an analysis was carried out following three steps. First, the overall frequency of codes was examined, with the theory being that the most important issues would be raised more frequently by callers. Second, the distribution of codes was examined by gender and location to see whether certain issues were location specific. Age and nationality were not included here due to the limited number of narratives examined, making comparisons extremely difficult across dimensions with more than two categories, as well as the acknowledgment that location and nationality are strongly linked in the Ugandan context. Third, the narrative text of the calls falling under each code was read and re-read to see whether any patterns or themes could be identified that might help to further flesh out the needs and issues faced by the callers. Impactful quotes were also identified at this stage for inclusion in the report that best highlighted the range of concerns found in the narratives.

Step 4: Conclusion

The last step provided a space to reflect upon the findings generated from the analyses steps and how they related to the central study questions, mainly regarding the identification of access issues and programming gaps.

QUALITATIVE SAMPLING

Sampling for qualitative analysis was conducted following the need to "reach saturation" meaning *a quantity whereby any additional observations would not lead to further insights*. An added requirement was to outline the most recent concerns expressed by helpline callers. To meet these two requirements the sampling frame was constructed by examining each of the following dimensions: filtering requirements; timeframe under examination; sectors; settlements; and data quality considerations.

Filtering requirements: In order to increase the diversity of needs, issues, and vulnerabilities captured by the thematic analysis, calls labelled as having been reported before

were excluded. Category 1 calls were also excluded as they primarily contain feedback, much of which is positive in nature, and therefore would not provide any insight into the issues faced by the callers.

Timeframe: The data from January to July 2020 was used in order to highlight the most recent priorities expressed by callers.

Thematic Areas: Thematic areas having fewer than 100 calls were excluded from the sampling frame as there would not be sufficient data to be able to detect key trends as required by the study objectives. These included Logistics and Transportation (97 calls); and Energy and Environment (63 calls). Furthermore, certain thematic areas were analysed together due to the similarities of their coding frameworks: Registration with Refugee Status Determination (RSD); and Community-based Protection with Legal and Physical Protection.

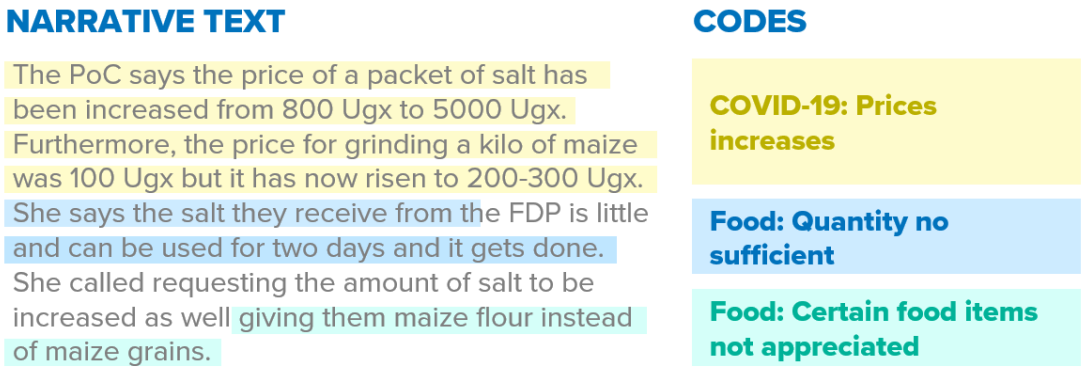
Location: Locations were chosen to express the broadest amount of diversity with consideration given to the type of settlement (urban versus rural), geography (South West versus West Nile), and to include the broadest diversity of callers (for example, callers of minority nationalities – PoC from countries other than Burundi, DRC, Rwanda, Somalia, and South Sudan – are typically based in Kampala or Nakivale). The final list of locations was as follows:

- Kampala
- West Nile: Bidibidi, Palorinya, Kiryandongo, Rhino Camp
- South West: Nakivale, Kyangwali, Kyaka II

Data quality considerations: Any calls that had been mis-categorized were excluded from the analysis.

Narrative texts can often be coded with multiple codes, including thematic area specific codes, and cross-sectional codes.

Figure 2: Illustration of the coding of one narrative text.



3 RESULTS

What do the calls tell us about the unique needs, issues, and vulnerabilities of refugees in Uganda who have called into the helpline. What programmatic gaps are highlighted? To answer these questions, a high-level analysis of the data will be conducted followed by an examination by thematic area.

3.1 AGE, GENDER, & DIVERSITY TRENDS

To begin examining the results, a brief profiling will be presented, investigating overall trends by caller age, gender, and diversity. This initial inquiry will provide a broad indication of FRRM uptake during the time period under examination (Jan 2019 – Jul 2020).

Figure 3 showcases the number of calls by nationality of the caller. It is clear that Congolese PoC made far more calls than other nationalities, having placed 56% of the total calls. Despite representing 62% of the refugees in Uganda as of June 2020, South Sudanese PoC only made 13% of the calls. As will be discussed below, this is related to the higher uptake of the FRRM tool in the South West.

Women and girls also made a lower percentage of the calls compared to their actual proportion in the overall refugee population, with 40% and 52% respectively. An even more nuanced picture emerges when examining the percentage of female callers by nationality. As illustrated in Figure 3, while female callers made fewer calls among Congolese, South Sudanese, Burundian, Rwandan, and other minority nationalities, they made the majority of calls placed by Somali callers. Of the 5,607 calls placed by Somali callers, remarkably 68% were made by females. To highlight this finding even further, women and girls only represent 45% of the Somali refugee population. It should also be noted that this higher rate of participation by female Somali callers can also be seen across all four age groups.

With respect to age, the overall trends indicate that a lower percentage of the calls were made by the 0-17 and above 60 age cohorts who represented 3% and 4% of calls, respectively. Refugees aged 0-17 represent 59% of the population, while refugees aged 60 and over are, conversely, only 3% of the population. The 18-24 age group placed a moderately higher percentage of the calls, at 12%, while the 25-59 age group made the majority of calls, with 81%. In the overall population, these two age groups only represent 39% together. This overall distribution does not change when disaggregating by gender. Disaggregating by nationality, however, does provide indications that younger cohorts are more strongly represented among South Sudanese callers; the 0-17 age bracket raises slightly to 7% and the 18-24 age group to 17%. Conversely, the above 60 group had a higher representation among Rwandan callers, at 11%, with a correspondingly lower representation among younger age groups. While these trends hold for female and male callers, they are slightly weaker among female callers. A more thorough examination of AGD dynamics will be conducted when examining each sector individually in the sections that follow.

While Congolese PoC placed the highest number of calls, it is Somali PoC who had the highest percentage of female callers.

Figure 3: Nb of calls and % of female callers by nationality.

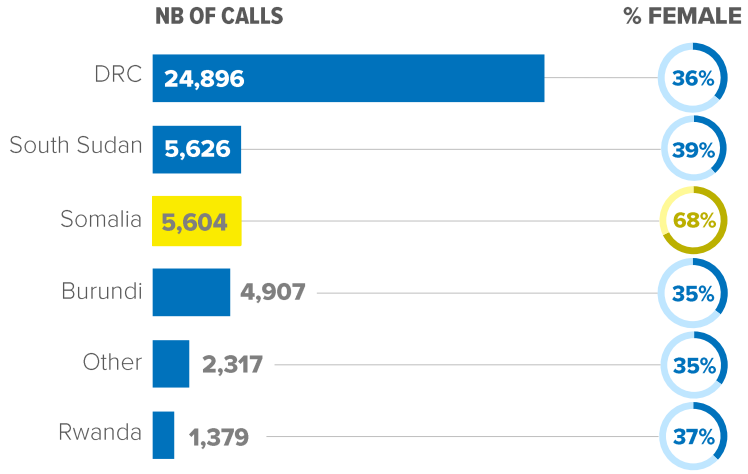
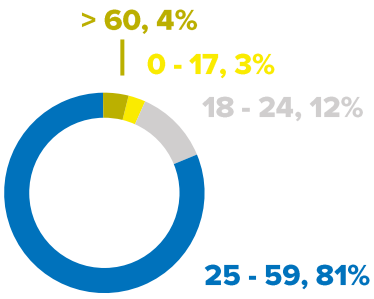


Figure 4: % calls by age range.

Refugees aged 0 – 17 are severely underrepresented as callers.



3.2 THEMATIC AREA TRENDS

General Queries received by far the highest number of calls (n=13,415), followed by Community-based Protection (n=5,624); Resettlement, Local Integration, and Voluntary Repatriation (n=5,304); Health and Nutrition (n=4,929); Food Assistance (n=3,171); Registration (n=2,782); and Legal and Physical Protection (n=2,506). The number of calls received per thematic area can be seen in Figure 5.

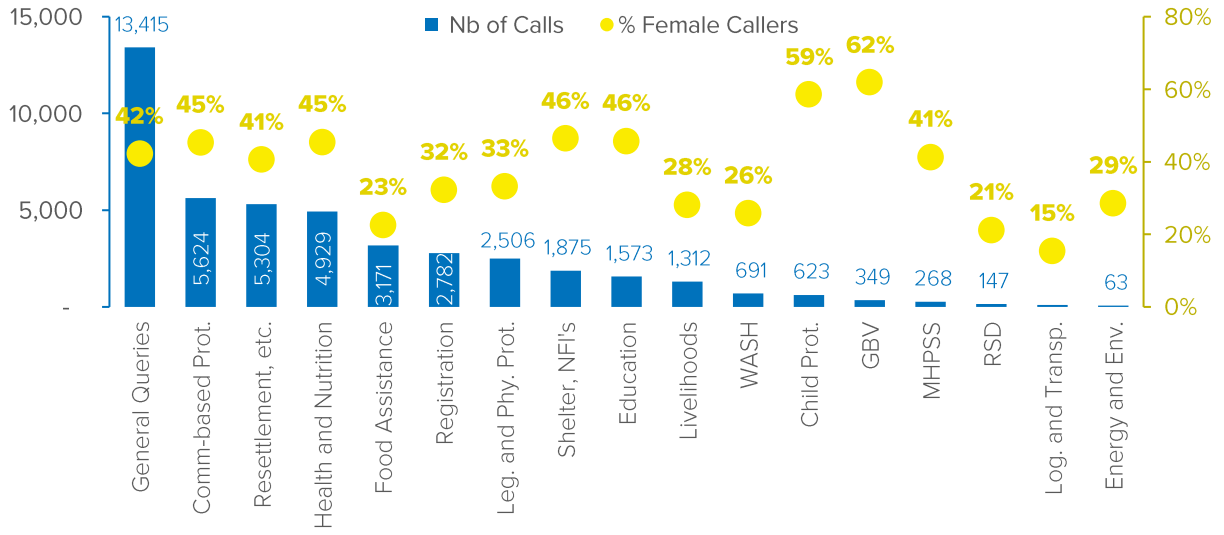
When applying an AGD lens to the number of calls per thematic area some surprising and not-so-surprising findings can be gleaned. With respect to gender, women and girls were only a majority of callers in two sectors: GBV (62%) and Child Protection (59%). Conversely, the five thematic areas in which they were most underrepresented were: Logistics and Transportation (15%); RSD (21%); Food Assistance (23%); WASH (26%); and Livelihoods (28%). When examining the number of calls by age and gender, it appears that girls and boys more frequently made calls regarding Education and Child Protection issues, while males aged 0-17 and 18-24 more frequently made calls regarding Food Assistance. The percentage of female callers per thematic area can also be seen in Figure 5.

Through the axis of nationality, a few deviations to note include that South Sudanese PoC made a lower percentage of the calls regarding Registration, Resettlement, and Protection (including Child Protection and GBV) than other nationalities, while inquiring more frequently for Education, Food Assistance, and Livelihoods support. Another interesting discovery is that the calls placed by minority nationalities were much more frequently catalogued under “General Inquiries” compared to other caller nationalities. While 68% of the calls made by minority nationalities were tagged under General Inquiries, the same is true for 34% of the calls made by Somalians, 33% by Burundians, 32% by Rwandans, and

only 16% of the calls made by South Sudanese callers. This is likely related to COVID-19, since the COVID-19 related calls were catalogued as "General Inquiries" (and not under health as may be assumed), especially since a large percentage of PoC of minority nationalities live in Kampala (to be examined in more detail in a later section).

Women and girls only represent a majority of callers in the thematic areas of GBV, and Child Protection.

Figure 5: Nb of calls and % of female callers per sector.



3.3 IMPACT OF COVID-19 & OTHER TRENDS OVER TIME

Figure 6 illustrates the number of calls received by the FRRM per month (and by settlement region). Not surprisingly, the largest number of calls were made in May and June 2020 when 4,665 and 4,541 calls were received, respectively, due to the onset of the pandemic.

Trends over time appear to depend on the region in which the call was placed, whether from the South West, in West Nile, or in Kampala, with two notable trends that must be highlighted. The first was the prominent rise in calls in April, May, and June 2020 in Kampala as a result of the increase in calls to General Queries and linked to COVID-19. The second can be seen among the settlements in the South West which experienced an upward trend in monthly calls in the first half of 2019, followed by a drop in calls in July 2019, after which a more moderate level of calls was maintained. The settlements in West Nile, on the other hand, accounted for a much smaller percentage of the calls and did not demonstrate any kind of a significant trend.

COVID-19 related calls were likely concentrated in Kampala in the months of April to June of 2020. Conversely, calls in the South West peaked during May and June of the previous year.

Figure 6: Nb of monthly calls by call region from Jan 2019 to Jul 2020.

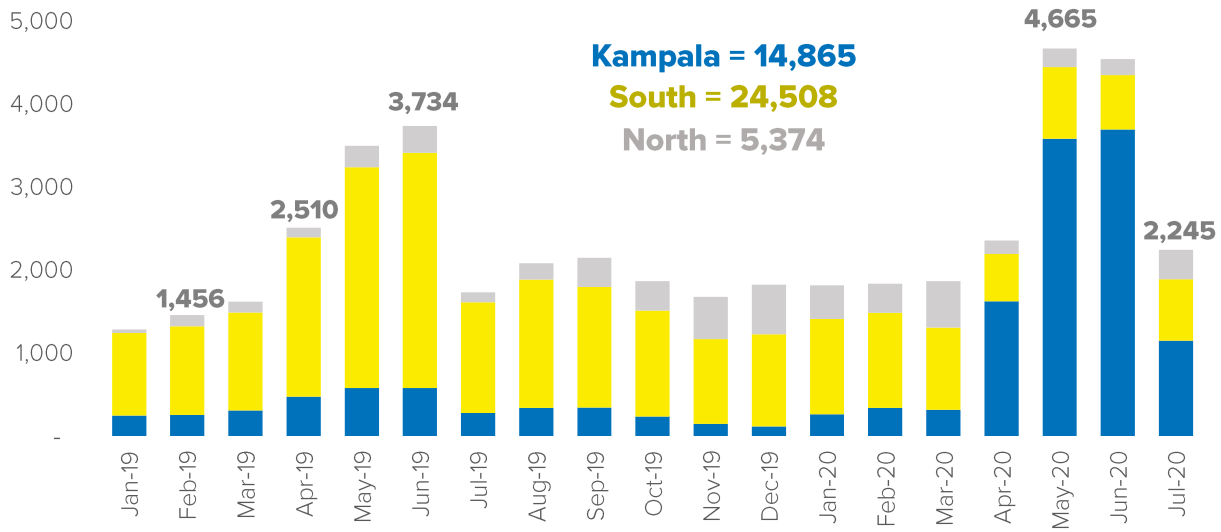


Figure 7 showcases the monthly average of calls received from January 2019 to March 2020 and from April to June 2020, along with the number of calls received in July 2020. The percentage change from period to period is also depicted. As clearly delineated in the figure, the number of calls placed to General Queries rose by 816% between April and June 2020, falling 83% in July 2020. Food Assistance and Shelter, Sites, and NFIs were the only other thematic areas that experienced an increase in the Apr-Jun 2020 time period, by 44% and 6% respectively.

All other thematic areas fell between 32% and 88%, but on average by 45%. This may indicate that the influx of calls directly or indirectly related to COVID-19 impacted access to the FRRM to communicate other sectoral concerns. The thematic area that experienced the largest reduction in calls was Resettlement, not surprising given the border closures and restrictions on travel imposed during that time period, in addition to the freezing of many official processes including resettlement for some period of time. Other thematic areas that faced large reductions in call numbers included Psychosocial Support (-76%) and Education (-69%).

When comparing Apr-Jun 2020 with the number of calls received in July 2020, General Queries, Food Assistance, and Shelter, Sites, and NFIs all dropped from their average in the previous period. Conversely, four thematic areas that had experienced a drop in Apr-Jun 2020 were able to recuperate back to their pre-COVID-19 levels: Child Protection; Community-based Protection; Legal and Physical Protection; and Health and Nutrition. While Resettlement did not recover to its pre-COVID-19 level, it did experience the largest recuperation from the Apr-Jun 2020 time period, rising 185%.

3.1.4 TRENDS BY LOCATION

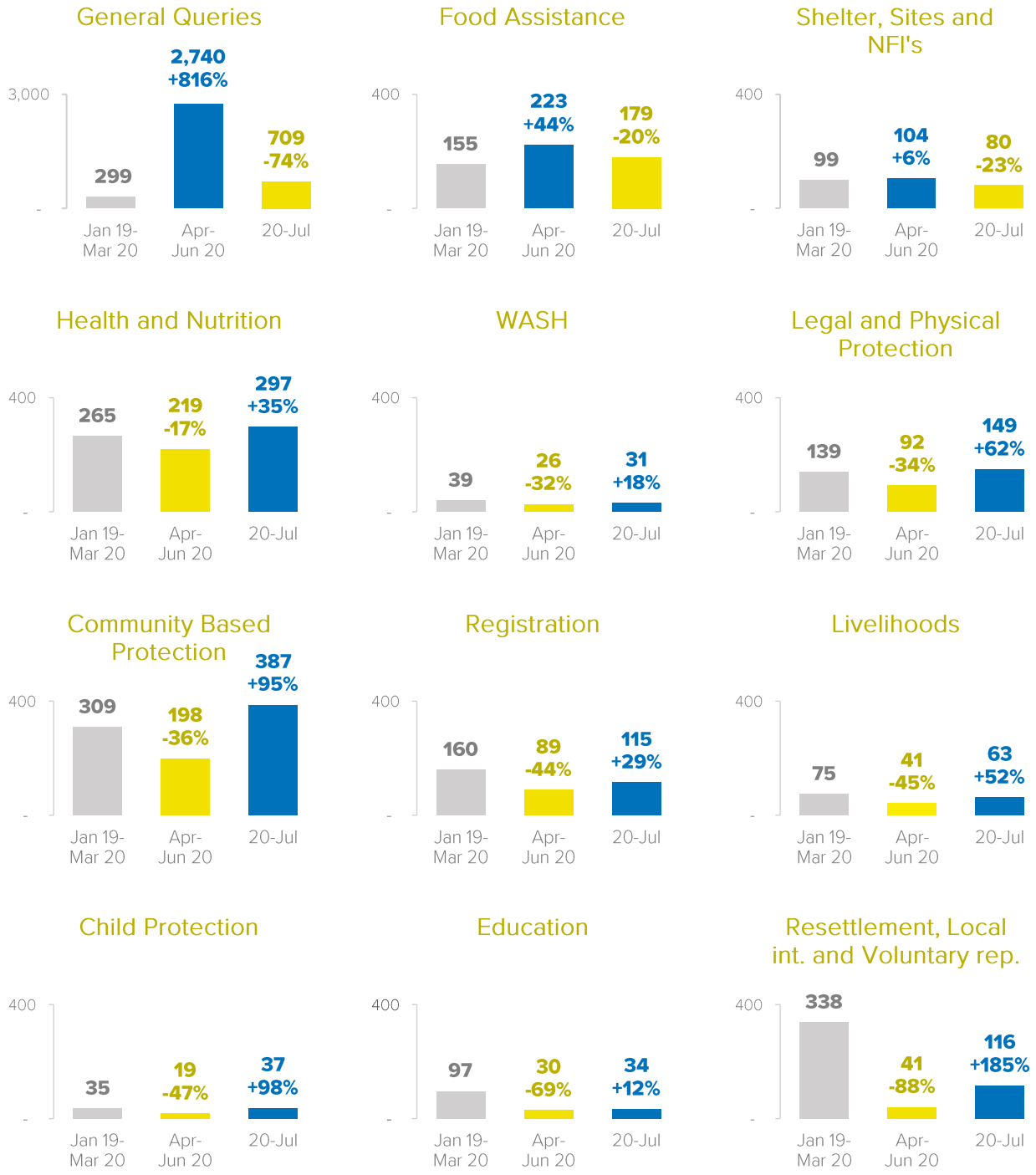
The five locations with the highest number of calls were Kampala, Nakivale, Kyangwali, Kyaka II, and Bidibidi. Furthermore, as can be seen from Figure 6 above, even when excluding Kampala, the PoC from the settlements of the South West made almost five times the number of calls as from settlements in West Nile (24,508 from South West settlements versus 5,374 from West Nile settlements). This aligns with the observation that 56% of the calls were made by PoC of Congolese nationality and only 13% by PoC of South Sudanese nationality.

When examining the percentage of female callers by settlement, it is apparent that most of the settlements, 9 out of 14, have percentages below the mean of 40%. However, the higher percentage of female callers in Kampala and Nakivale, the two settlements with the highest number of calls overall, skewed the overall percentage higher, with 46% and 49% female callers, respectively. It should be noted that Adjumani, Kiryandongo, and Palorinya also have higher than average percentages of female callers, with 55% 48%, and 43%, respectively, however their combined number of calls only amount to 5% compared to the 63% contributed by Kampala and Nakivale. Refer to Figure 8 to see the percentage of female callers per settlement.

Not surprisingly, when examining the nationality of callers by settlement, findings mirror known settlement compositions found within official population numbers. 88% of the calls made by South Sudanese PoC originated from settlements in West Nile, with an additional 8% from Kampala, and the remaining 4% from Nakivale and Kyangwali. Conversely, all of the calls made by Congolese PoC originated from settlement in the South West, including Kampala. Calls made by PoC from other nationalities were mostly distributed between Kampala, and Nakivale. This latter finding helps to explain the high percentage of General Inquiry calls made by minority nationalities between April and June 2020, given that 85% of calls in those month were made from Kampala, and to a lesser degree, from Nakivale.

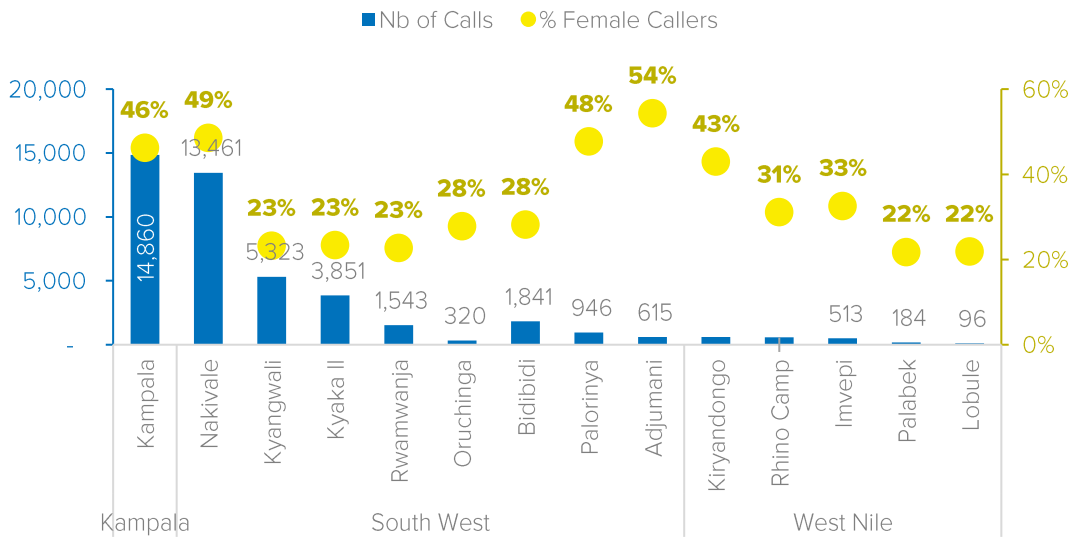
General Inquiries, Food Assistance, and Shelter, Sites, and NFIs were the only thematic areas that received an increase in the average number of calls during the period of April to June 2020.

Figure 7: Average number of calls per thematic area before and after COVID-19 ordered by % change. General Queries is on a different scale; also note that *blue represents an increase*, while *yellow represents a decrease*.



Kampala was the location having placed the most calls, followed by Nakivale and Kyangwali, when examining the entire dataset of calls.

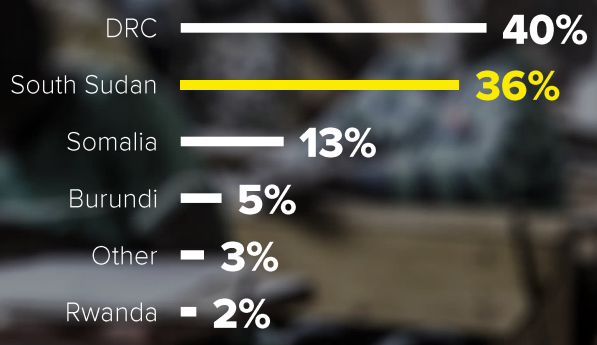
Figure 8: Nb of calls and % female callers by settlement.



EDUCATION

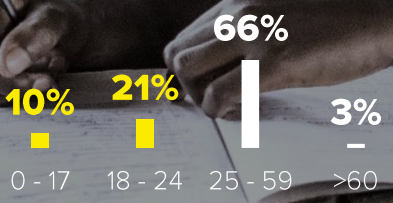
When compared to the overall trends, South Sudanese callers placed a higher percentage of calls regarding education as did the 0-17 and 18-24 age groups and female callers.

% OF CALLS BY NATIONALITY

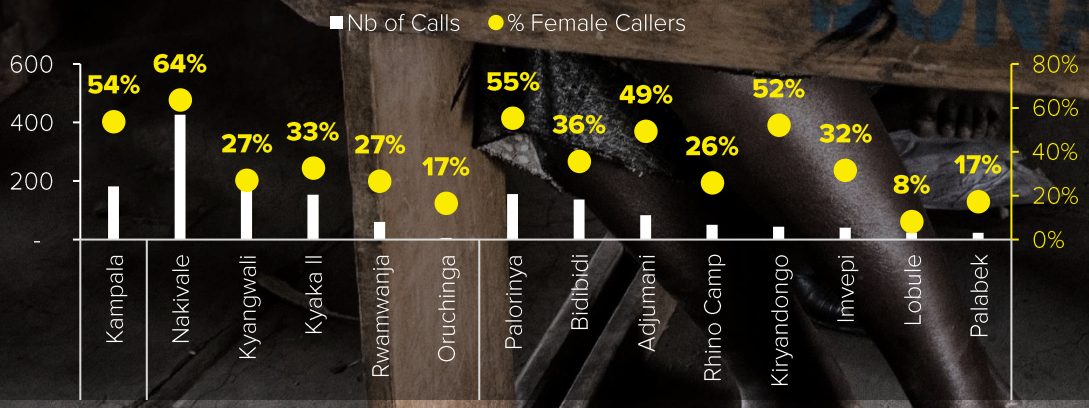


% OF FEMALE CALLERS

% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



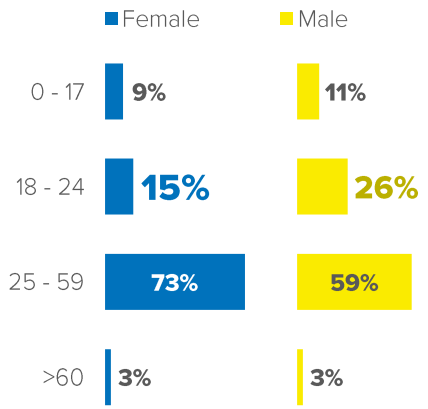
Anita Natupenda (13) and Janet Kansiime (13) study during class at Byabakoora primary school in Kyaka II refugee settlement, Uganda. © *UNHCR Uganda, Vincent Tremeau.*

OVERALL TRENDS

Education is often cited as **a priority thematic area** in the participatory assessments conducted by UNHCR. In relation to the call data, it ranked in 9th place, with 1,569 calls made since January 2019, representing 3.5% of the total calls.

Men aged 18-24 were more likely to place calls regarding education when compared to their female counterparts.

Figure 9: Age distribution of education calls by gender of caller.

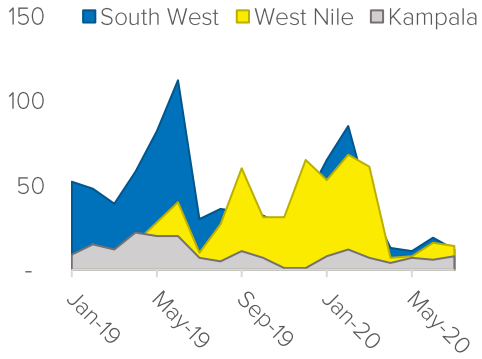


In terms of demographics, South Sudanese PoC made a greater proportion of the education calls when compared to their overall proportion, while the reverse is true for Congolese callers. While South Sudanese PoC only made 13% of all the calls received by the FRRM helpline, they made 36% of the education calls. Conversely, Congolese PoC made 56% of the overall calls to the helpline, but only 40% of the education calls. Furthermore, both female and male callers aged 0-17 and 18-24 were better represented among the calls placed by South Sudanese callers in relation to the average, accounting for 44% of the calls placed in comparison to the overall average of 31%. Unfortunately, females of these same age groups were underrepresented when compared with their male counterparts, particularly among Congolese, South Sudanese, Rwandan, and minority nationalities. Whereas males aged 0-17 and 18-24 made 20% of the education calls, females only made 11%.

Nevertheless, women and girls do account for 46% of the education calls, the thematic area in which they achieve their third highest representation (behind GBV and Child Protection). This is especially true among Somali callers, where women and girls placed 78% of the calls. Conversely, women and girls made far fewer calls among PoC from Rwanda (38%) or other minority nationalities (29%). Furthermore, there are four locations where women and girls made a majority of the education calls: Nakivale (64%), Kampala (54%), Palorinya (55%), and Kiryandongo (52%).

Trends in the number of monthly calls varied widely by call region.

Figure 10: Monthly education call numbers by call region.



When examining how call frequency changes over time, it appears to depend on call region.

Calls from settlements in the South West experienced increases from Jan – Jun 2019, and again from Nov 2019 – Feb 2020. Conversely, in West Nile settlements, a slow upward trend can be seen from Jan 2019 to Mar 2020. From April onwards, the number of calls plummeted. As was shown in Figure 7 above, Education was the thematic area with the third highest decrease in number of calls during the months of April – June 2020.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of 300 calls were examined to help shed light on the issues, needs, and vulnerabilities expressed by refugee callers with respect to education.

First, with respect to caller identity, 44% of the calls were placed by students regarding their own schooling. Male callers much more frequently identified as students (54% of calls made by male callers were from students), while female callers more frequently identified as caregivers (70%). Furthermore, of the calls placed, 41% regarded secondary school, 33% for primary school, and 16% for higher education. Vulnerabilities were also frequently mentioned in calls regarding education, with the most common being single parent households, fostering or being cared for by a non-parent family member, and having a caregiver who is a person with special needs (PSN. Vulnerabilities were mentioned in 72 calls.

> *We are meant to study from home, but I can't understand the materials. How can I get help?*
>
> *Female, South Sudanese, aged 12-17, Rhino Camp*

By far, the most frequent call topic regarded the inability to pay for school fees and supplies. In 192 of the calls, PoC expressed the need for financial assistance, while in another 44, they called to inquire why they had not been eligible for support. In a further 20 calls, PoC requested information relating to school costs (for example, inquiring about the purpose of development fees) or types of available support.

> *I have been supporting my children to go to school, but I don't know what I will do now. I haven't been able to work.*
>
> *Male, Burundian, aged 40-44, Kampala*

Among the calls sampled, only six regarded education quality, including few qualified teachers and overcrowded classrooms, while four related to physical accessibility and distance. More regular mentions were made regarding lack of infrastructure or support for education (21), such as delayed or late support from partners, inadequate communication about support from partners, or difficulties arising as a result of a change in local education partner.

IMPACTS OF COVID-19

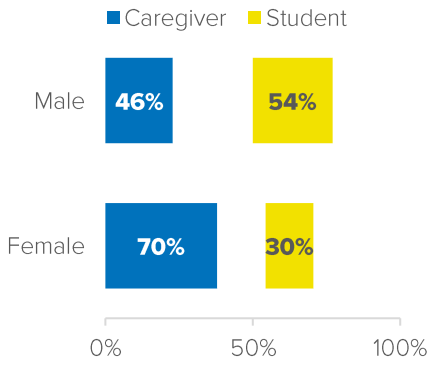
While limited calls were placed after the onset of the COVID-19 pandemic, they do help to provide an indication of the new barriers that students may be facing in accessing education. Not surprisingly, some financial challenges were recounted by households whose livelihoods had been impacted by the lockdown and who already anticipated not being able to meet the costs associated with schooling their children. Other calls related to the realities of having to study at home, such as not having received the *distance learning packages* prepared by schools. In other cases, schools had decided to transmit lessons through the radio and callers

requested support procuring this item. A few callers mentioned the difficulties that they were facing understanding the materials that they had received to support their distance learning, deprived of the instruction and structured schooling environment to which they were accustomed. Finally, a number of callers were concerned for the impact that the pandemic might have on their future educational plans, including potential scholarships that they were expecting to receive.

It is important to note that the calls relating concerns over the impact of the COVID-19 pandemic on education were not limited to Kampala but could be seen across the sampled settlements as well.

Male callers more often identified as students, whereas female callers more often identified as caregivers.

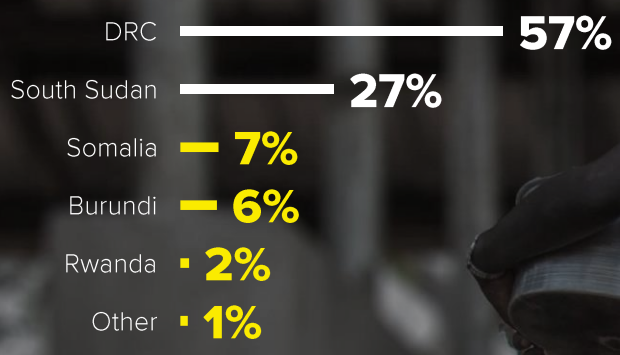
Figure 11: % of education calls made by students and caregivers by gender of caller.



FOOD ASSISTANCE

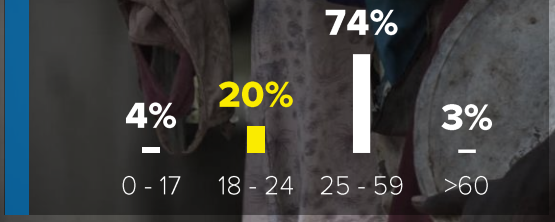
Male callers aged 18-24 made a higher percentage of calls regarding food assistance when compared to their overall percentage.

% OF CALLS BY NATIONALITY

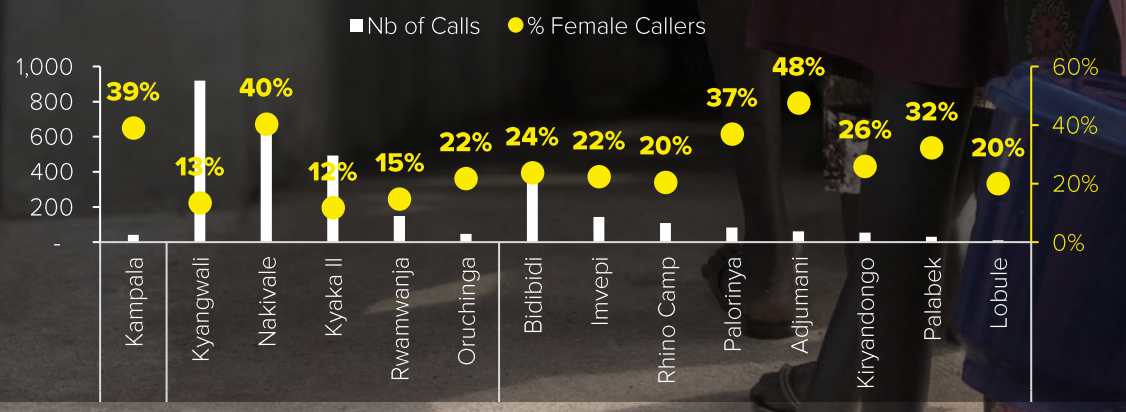


% OF FEMALE CALLERS

% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



Newly arrived refugees from South Sudan queue in line to receive their daily food ratio at Nyumanzi reception centre in the Northern district of Uganda, Adjumani. © *UNHCR Uganda, Isaac Kasamani.*

OVERALL TRENDS

Food Assistance received the fifth most number of calls, with 3,171 placed since January 2019 which represents 7% of the total calls.

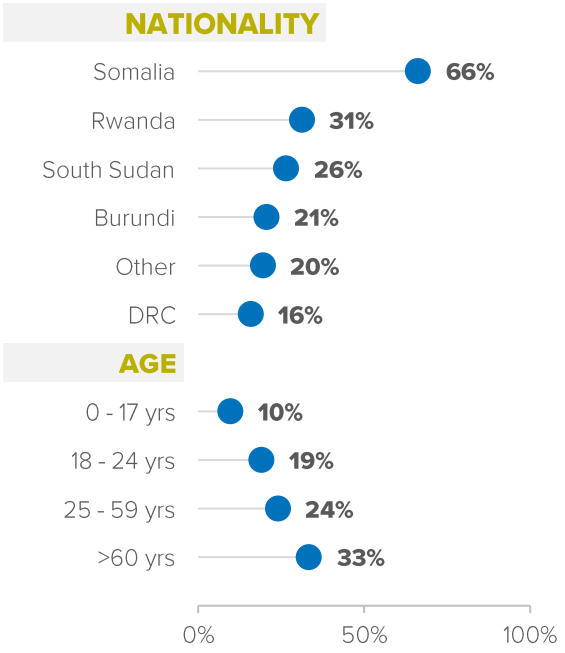
Similar to the education sector, South Sudanese PoC made a greater proportion of the food assistance calls when compared to their overall proportion, with 27% and 13% respectively. Not surprisingly, callers of Somali, Burundian, Rwandan, and minority nationalities, were less represented among callers. This makes sense due to their heavy concentration in Kampala which typically is not eligible for food assistance.

Food Assistance was also the thematic area with the third lowest ratio of female to male callers, with only 23% of calls regarding food assistance placed by female callers. The only exception to this was women and girls of Somali nationality who placed 66% of the calls made by Somali nationals. In contrast, while female participation among callers was generally very weak in this sector, they were particularly underrepresented among the callers of Congolese and Burundian nationality, having made only 16% and 21% of the calls (note: females from minority nationalities only made 20% of the calls, however the number of calls was too low to make a generalization with only 41 calls placed since January 2019 by this group).

Female representation among callers for food assistance issues was found to be strongly correlated to age. While females only placed 10% of the calls made by callers aged 0-17 years, they made 33% of the calls placed by callers aged 60+. Finally, it should be highlighted that only in three settlements was the percentage of female callers significantly greater than the overall average for the food assistance sector: Nakivale (40%), Palorinya (37%), and Adjumani (48%), though the latter two had very few calls, having placed 84 and 61 respectively.

Women and girls of Congolese nationality and among younger age groups made a lower percentage of the calls regarding food assistance.

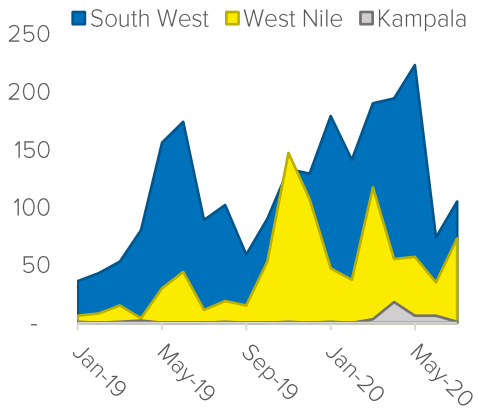
Figure 12: % of female callers by nationality and age group for food assistance.



Monthly call number trends varied by call region. Calls from the South West experienced two distinct increases, from Jan – Jun 2019, and again from Sept 2019 – May 2020. Conversely, higher call activity did not occur until Nov 2019 in West Nile. Unlike what was seen in education and other sectors, food assistance calls in the first months of the COVID-19 pandemic actually increased. It was one of the only three sectors, along with General Queries and Shelters, Sites, and NFIs, which experienced an increase in the average number of calls received in the period of Apr – Jun 2020. These trends over time by call region can be seen below.

Higher call volumes from West Nile region appeared to occur in distinct months.

Figure 13: Monthly food assistance call numbers by call region.



ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of 306 calls was examined to help shed light on the issues, needs, and vulnerabilities expressed by refugee callers with respect to food from Jan 2019 – Jul 2020.

Before the COVID-19 pandemic, the single largest complaint raised to the helpline concerned the amount of food assistance received, made by just over one fifth of the callers (62). These calls also helped to signal potential deficiencies in refugees livelihood capabilities, as some callers indicated having to sell food rations or use their cash assistance to help cover basic needs.

In terms of food quality, the one item which received the most numerous complaints was maize due to the additional cost required to grind it and a desire for more food diversity. Rice, conversely, was the most frequently requested alternative. In a few instances, callers indicated not having received all items, or that the quantities (especially of oil) had been reduced.

47 calls regarded the physical distribution of food and cash. The most common complaint was that they lacked orderly management, and all originated from Kyangwali. Other issues included the long distances to the distribution sites and waiting times at the sites, which increased fears among callers of arriving late and missing out on their food allocation for the month. Half of the distribution-related calls reported instances of insufficient communication about the distributions from partners, most often related to delays or changes in the distribution schedule, in addition to negative attitudes from the distribution staff.

Some callers requested changing to cash assistance from food as they felt that they would be able to buy more food, with greater diversity, for the amount of cash received. It should be noted that all of these calls occurred before the pandemic, which confirms observations from the field that since the pandemic onset, people have been requesting to be switched back to food assistance as market food prices have increased, which has created challenges for families to buy sufficient food with the cash assistance they receive. With respect to the process of transfer from food to cash, callers frequently shared issues with not receiving cash in the first few months following the transfer, or delays from the expected date of distribution. In rare instances, people also reported having

> *Those who receive cash are much better off; you can buy more food than what is given at the distributions.*
>
> *Male, Congolese, aged 30-34, Kyangwali*

received the wrong amount of cash with respect to their family size. Interestingly, most of the issues related to cash were reported from either Nakivale or Kyangwali.

Callers also frequently asked questions regarding eligibility for assistance, particularly with respect to cash assistance, inquiring why they were not eligible. Related concerns raised fears over loosing eligibility and ration card deactivation in the event of a missed distribution, often due to not living in the settlement in which they were registered. Still other calls inquired for registering as an alternate food collector, often in circumstances where the PoC was caring for a child or elderly family member.

IMPACTS OF COVID-19

> *We are receiving less food and I must buy more salt, but the cost of salt has increased. The cost to grind maize has also increased.*
>
> *Female, South Sudanese, aged 30-34, Palorinya*

Many impacts related to the COVID-19 pandemic can be gleaned in the calls made regarding food assistance. Generally, what can be seen is that some of the pre-existing concerns voiced by refugees were exacerbated by the unique circumstances brought about by the pandemic including the movement restrictions and need to maintain physical distance. In addition, a ration cut of 30% that had been planned by WFP prior to the pandemic happened to coincide with it, exacerbating the situation of PoCs who were economically impacted by the lockdown.

Of the 100 calls examined between April and July 2020, more than one third concerned complaints about the aforementioned cuts made to food and cash assistance, with the newly reduced amounts widely viewed as insufficient to cover a family's basic subsistence needs. These complaints most often came from Kyangwali, Kyaka II, and Nakivale, and Bidibidi. Potentially exacerbating the food security of many refugees were grievances of market food price increases, as well as an increase in the price of grinding maize. In the latter half of May 2020, confusion was also expressed by some callers over the promise of a double ration that they indicated was not in fact received. Overall, the changes made to the food and cash assistance appeared to generate a significant amount of confusion on the part of the recipients and it may be worth investigating whether these changes have impacted families' ability to plan out their resources.

> *My children had come to visit from a different settlement and are not able to return because of the lockdown. I am afraid that the little food I receive for myself will not be enough for the three of us.*
>
> *Male, Congolese, aged 45-49, Kyaka II*

The next most recurrent issue raised by callers involved the likelihood of missing distributions, due to having travelled outside of the settlement in which they were registered prior to the COVID-19 lockdown and being unable to return. Many, though registered in various settlement (most often Kyaka II, Nakivale, and Kyangwali), had travelled for work or school to Kampala and were caught there, while others had travelled to other settlements to visit family. The common fear shared by these callers was having their

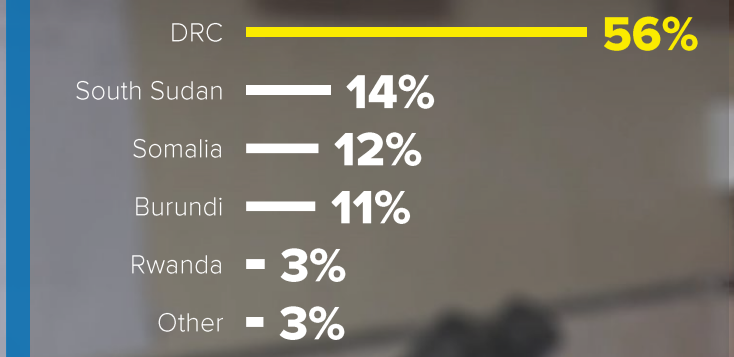
ration card deactivated (though in reality it takes three missed distributions for the ration card to be deactivated).

Finally, several calls were placed related to the distributions, again most often from Kyangwali. These calls indicated that distributions were more disorganized, with irregular schedules, and longer than normal waiting times. Others expressed concerns over crowding at the distribution sites particularly given the infectious nature of COVID-19.

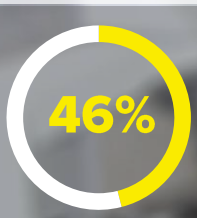
HEALTH & NUTRITION

Women and men aged 25-59 and 60+ account for 90% of the calls placed regarding health and nutrition issues.

% OF CALLS BY NATIONALITY

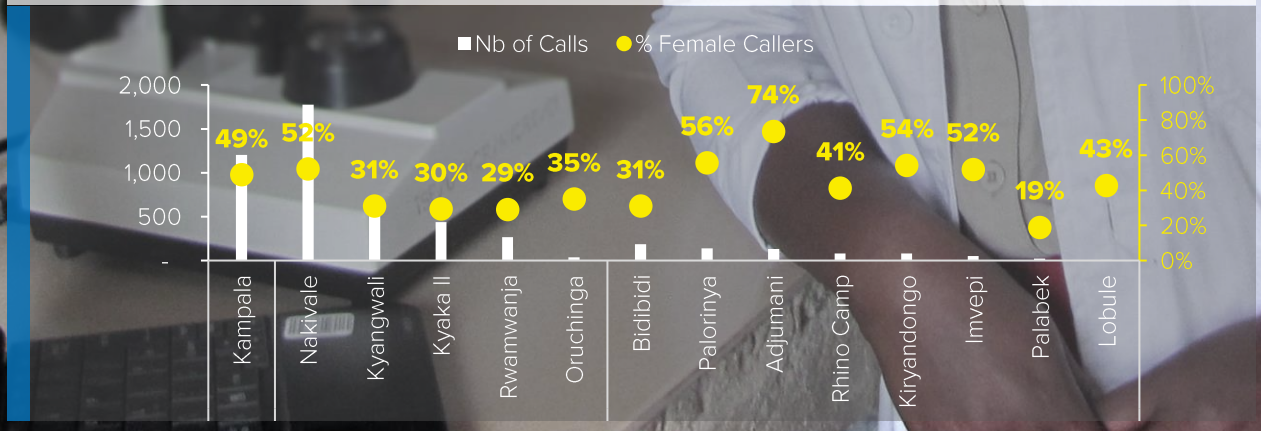


% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP

NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



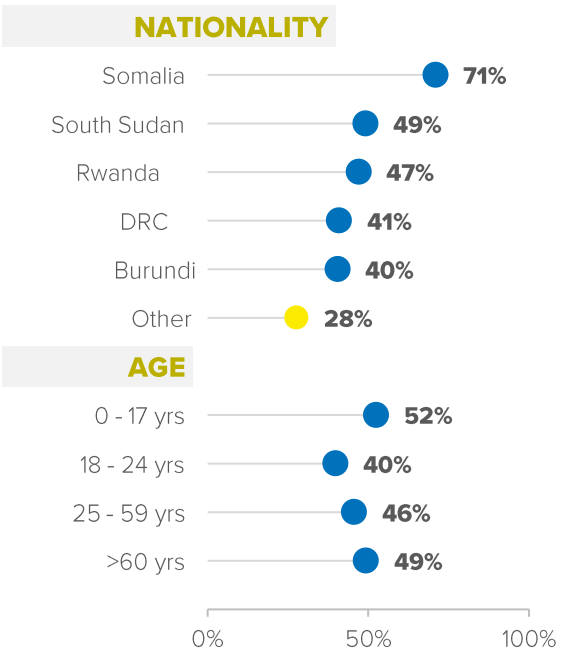
Lynda Nalumansi is a Lab Technologist and the Infection Prevention and Control focal person working in Kyaka II refugee settlement, working tirelessly amidst the threat of COVID-19. © *UNHCR Uganda, Stephanie Perham.*

OVERALL TRENDS

Health and nutrition received 4,931 calls since January 2019 which represents 11% of the total calls. Just as when examining the country-wide number of calls, Congolese callers placed more than half of the calls, with 56%, while the next closest group, South Sudanese callers, had made only 14% of the calls. Not surprisingly, only 14% of the calls came from the settlements in West Nile region.

Women and girls from minority nationalities made a far smaller percentage of health and nutrition calls when compared to PoC of other nationalities.

Figure 14: % female callers by nationality and age group of callers for health and nutrition.

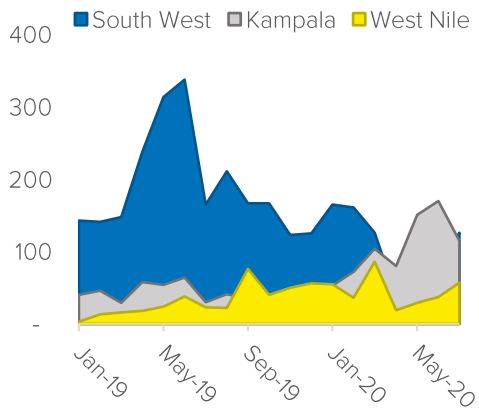


Women and girls represent 45% of callers, higher than the overall average of 40%. This differs by nationality of caller with a high of 70% among Somali callers, down to a mere 20% among callers of minority nationalities. Congolese, South Sudanese, Burundian, and Rwandan women and girls all had representations ranging from 40% to 49%. The percentage of female callers did not appear to vary strongly by age, with females having placed 52% of the calls made by callers aged 0-17 and having placed 49% of the calls made by callers aged 60 and above. The exception to this is the 18-24 age group in which females only placed 40% of the calls. Furthermore, women and girls made the majority of calls regarding health and nutrition in five settlements: Adjumani (74%), Palorinya (56%), Kiryandongo (54%), Impevi (52%), and Nakivale (52%)

84% of the calls were placed by PoC aged 25-59 which was equally true for female and male callers. Interestingly, Rwandan men aged 60 and over were overrepresented with respect to the average. While men aged 60 and over placed 3% of the calls, among Rwandan callers the percentage rose to 10%.

Trends in the number of calls varied widely by call region.

Figure 15: Monthly health and nutrition call numbers by call region.



> *The PoC was requested to take his father to the hospital to have his condition assessed, which will determine the best course of action. He was requested to call back to the helpline in case he is not assisted.*
>
> *Helpline Personnel*

Perhaps surprising given the global pandemic beginning in March 2020, the largest number of calls was received in May and June of the previous year, in 2019, largely from settlements in the South West. Just as with other sectors, the variance of calls with time depends greatly on call region. What is notable is that although calls from Kampala did have a notable upward tick from April to May, most likely related to the pandemic, the upward trend actually began much earlier in January. No real trend can be detected in the settlements of West Nile. It should be noted that lower calls in Kampala prior to the pandemic are related to the urban policy whereby PoC should be able to provide for their own healthcare.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of 357 calls was examined to help shed light on the general issues which callers raised to the helpline with respect to health and nutrition from Jan – Jul 2020. It should be noted that requests for mental health support appear to have been recorded under this thematic area and under the Psychosocial Support sector, while requests for nutritional support were most often recorded under the Community-based Protection sector.

Before the COVID-19 pandemic, the single largest topic raised to the helpline by callers was a request for an update on a health case, or for modifications to a treatment plan (140 calls), especially seen in calls originating from Kampala. This included selected instances of very serious medical conditions having been detected which doctors had determined would need to be treated out of country, with patients or family members calling the helpline to follow-up on whether their case had been sent to UNHCR. The helpline in these occasions acted to reinforce and strengthen the existing health referral pathways, encouraging callers to complete prescribed treatments, and flagging issues to partners when callers express that the treatments had not worked or when it is clear that they had been waiting too long for a follow-up or referral.

> *The doctors told me that I needed to buy nuts for the surgery to fix my back. They are now telling me to leave because I don't have what is needed for the operation. I don't know what to do now.*
>
> *Female, Burundian, aged 40-44, Kampala*

Furthermore, PoC also used the helpline to signal when they required medical assistance, occurring in 52 calls, again mainly from Kampala. In these cases, the helpline served as an important conduit of information regarding who the local health partner was and where callers could seek health assistance, at times signaling whether the caller should be going to a health center or to a hospital following the gravity of the described health condition. In many instances, the resolution comments within the FRRM data indicated that follow-up had occurred by the partner, helping to address callers' urgent needs, including care and transportation.

Various issues relating to health facility access and health facility quality were apparent in the calls. The most frequent access issue reported by callers was the cost of care (61), almost entirely originating from Kampala (44). Some of the specific medical treatments with costs reported by the callers were as follows: prescribed drugs (50,000 UGX), medical scans (50,000-500,000 UGX), a medical belt for a spinal issue (260,000 UGX), neck surgery (460,000 UGX), surgery for a broken leg (340,000 UGX), birth by c-section (1,200 000 UGX), physical therapy, and eye care. Following cost of care, the next most regular access issue mentioned by callers related to distance to health facilities and/or lack of transportation (18), also mostly from Kampala. From the resolution comments, it appears that transportation is consistently an area which received support from partners.

Concerns relating to health facility quality were also raised by callers. In 12 of the calls, PoC made reference to not being provided with medications from the health facility. It is hard to determine from the call narratives whether they represented instances of insufficient medical supplies and stock-outs, or whether the issue should be grouped under cost of care.

> *My wife is six months pregnant and needs antenatal care, but we are unable to move to the hospital due to movement restrictions.*
>
> *Male, Congolese, aged 30-34, Kampala*

Another facet of health facility quality raised by callers was not being provided with comprehensive care (16), whereby PoC were either sent away from a health facility due to an inability by the health facility to provide care for a particular condition or in instances where the PoC was examined, but not provided with any treatment. A few calls (10) signaled potential deficiencies in the referral system, whereby PoC had received a diagnosis requiring specialized support but were not helped to connect with the relevant specialists. Related were the difficulties that callers encountered during a change in partners (14) in which PoC reported having health cases with partners who were no longer functioning in the area and were not informed or instructed with whom to consult going forward. These complaints mostly originated from Kampala.

Finally, several mentions were made of long waiting times, whether in reference to waiting for a consultation at the health facility, to waiting for a diagnosis, or for a referral to be made.

IMPACTS OF COVID-19

A number of issues were raised by callers relating to the COVID-19 pandemic. Please note that while the majority of the calls originated from Kampala, calls were also made from all other locations sampled in the qualitative analysis.

First, some PoC called into the helpline requesting more information about COVID-19, what the symptoms were, what preventative measures they should be taking, what to do if they thought that someone in the community was sick, clarifications on movement restrictions, and even asking when the pandemic will end. These calls mostly originated from Kampala. Relatedly, PoC inquired about the mandatory quarantine, in some instances, calling to signal when people had arrived in their communities after international travel and had not quarantined.

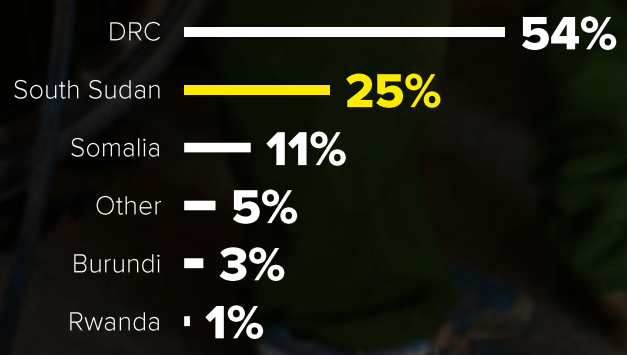
Calls were also made which provided some indication of the impact of the pandemic on access to health care for non-COVID-19

related conditions. For example, several callers recounted delays in receiving medical assistance that had been previously scheduled. Other callers reported experiencing new medical conditions and were unsure of how to access care due to movement restrictions. Still others, who had accessed care, inquired whether the helpline might support them to return to their settlements. These calls were most often placed by people who had gone to seek care in Kampala and were unable to return to their settlements.

LIVELIHOODS

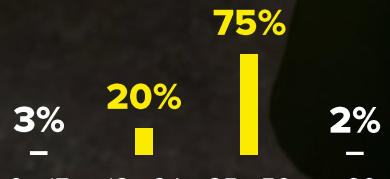
Not surprisingly, the 18-24 and 25-59 age groups made up 95% of all calls, while females were underrepresented.

% OF CALLS BY NATIONALITY

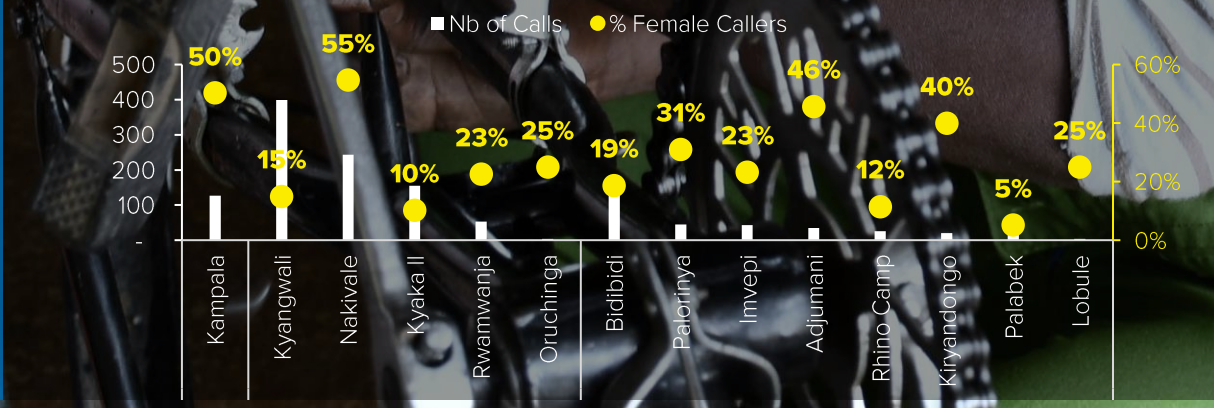


% OF FEMALE CALLERS

% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



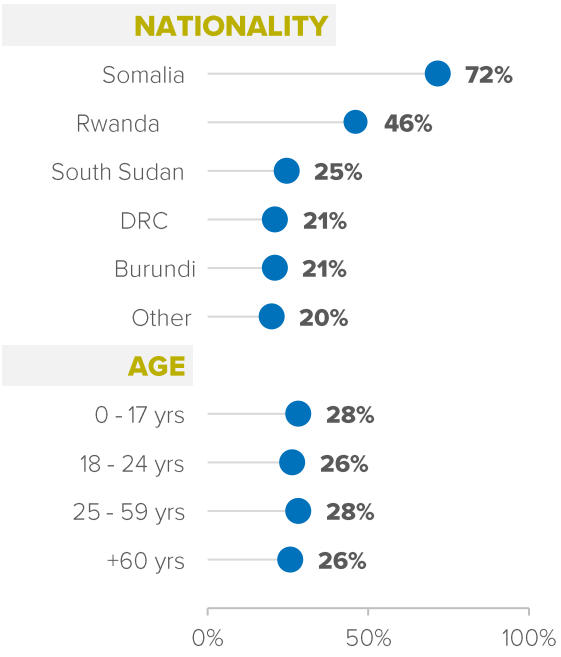
Eighteen-year-old Congolese refugee Mulondr attends a mechanics and bike repair workshop at the newly opened Sweswe vocational training centre in Kyaka II Refugee Settlement, Uganda. © *UNHCR Uganda.*

OVERALL TRENDS

Livelihoods received 1,312 calls since January 2019 representing 3% of the total calls. While Congolese callers placed more than half of the calls, with 56%, South Sudanese callers made 25% of the calls, which was greater than their overall percentage of 13% (as was see with education and food assistance). Conversely, Burundians made a much smaller percentage of the calls relating to livelihoods compared to their overall proportion, with 3% and 11% respectively.

% of female callers making livelihoods-related calls varies little by nationality and age.

Figure 16: % of female callers by nationality and age group of callers for livelihoods.

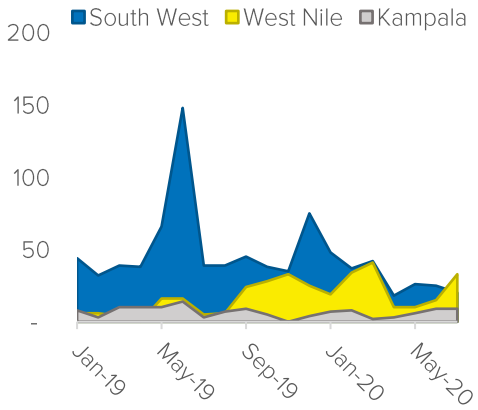


Similar to the Food Assistance sector, Livelihoods was another area where the ratio of female to male callers was especially low, with only 28% of calls regarding livelihoods placed by female callers. Very little variation in this ratio existed across caller age group and nationality, with the exception of Somali woman following the trend seen in other sectors. Note, though 46% of the calls made by Rwandans were made by female callers, the total number of calls made by this group was only 13, making it impossible to generalize. Interestingly, women and girls did make 50% of the calls from Kampala and 55% of the calls from Nakivale, while conversely making only 10% of the calls from Kyaka II, 15% of the calls form Kyangwali, and 19% of the calls from Bidibidi – the five settlements having the most calls related to livelihoods.

20% of the calls were made by the 18-24 age group, while 75% were made by the 25-59 age group. Few calls were placed by either the youngest or oldest age groups.

Of the 178 calls received in June 2019, 110 originated from Kyangwali.

Figure 17: Monthly livelihoods call numbers by call region.



Unlike with other sectors, no discernible trend over time could be seen in the calls placed concerning livelihoods; they remained relatively stable over the course of the two years. The outlier was June 2019 which received almost double the number of calls of any other month, most of which originated

from settlements in the South West, and specifically from Kyangwali. Furthermore, while a decrease can be noted during the COVID-19 period, call numbers have also steadily recovered since April.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of all 285 calls regarding livelihoods, received from Jan – Jul 2020 were examined to help understand the livelihoods-related issues experienced by refugees in Uganda.

Most of the calls received regarding livelihoods came from people who were requesting livelihoods opportunities (99), explaining that it was impossible to support themselves and their families on the assistance provided to refugees. Calls of this nature originated from the settlements prior to the pandemic but increased in frequency in Kampala as well after April 2020.

> *I was a graduate back in my country and have been looking for jobs in the settlement, but I only see nationals being hired. The lack of jobs for refugees is really affecting us.*
>
> *Male, South Sudanese, 35-39, Bidibidi*

Frequent requests were also made for grants or capital to start small businesses (40). While many callers did not expand upon how they sought to use the requested capital, the investments that were specified were quite varied: materials to make crafts, clothing, sound equipment for music production, a motorcycle for bodaboda, supplies for baking cakes and cookies, food produce, timber for making chairs, and supplies for a hairdressing studio, among others.

Callers also asked for equipment to help them create a livelihoods opportunity, most often requesting a sewing machine or farming equipment. In selected instances, callers asking for funding or equipment reported having had completed a vocational training, perhaps signalling a need to link training with additional support for generating a livelihoods opportunity. Finally, callers also requested access to vocational training (13), such as for mechanics, driving tractors, and tailoring.

> *I am a tailor, but I sold my sewing machine during lockdown to make ends meet for my family. The place where I worked is now open, however I don't know where to start from.*
>
> *Male, Congolese, aged 45-49, Kampala*

25 calls related to support for agricultural and livestock activities, with most callers asking for land (11), seeds (3), and livestock (3). Others requested support in dealing with pests and disease in their livestock (3) or crops (1). Three callers further complained that the land that they had been given for agricultural purposes was confiscated.

In very few but notable instances, callers requested for support from the helpline to aid efforts or associations geared to training refugees. One instance included an association in Kyangwali, created by refugees for refugees, teaching them skills such as poultry keeping, soap making, and even teaching English and Swahili. Also in Kyangwali, were nationals with workshops who hoped to teach refugees the skill of carpentry.

The helpline also appeared to fulfil a unique role providing information to callers on how to apply for a job, as well as regarding labour conditions in Uganda (for instance, common deductions taken from salaries and payment

schedules). Furthermore, PoC frequently call when they experienced labour disputes and needed advice on how to resolve them (17 were noted under Livelihoods and 19 under Legal and Physical Protection). These labour disputes frequently involved not being paid according to the schedule agreed by the two parties, contract terminations, or delays with respect to work start dates. Some evidence suggests that these disputes may have intensified due to the conditions imposed by the pandemic though further investigation is required to confirm this observation.

> *I was a graduate back in my country and have been looking for jobs in the settlement, but I only see nationals being hired. The lack of jobs for refugees is really affecting us.*
>
> *Male, South Sudanese, 35-39, Bidibidi*

Many challenges were raised regarding access to livelihoods opportunities. Most frequently, callers felt that employment eligibility criteria were vague or biased. For instance, callers recounted feeling that selection processes were opaque and could not understand why they had not been selected. In other occasions, PoC narrated that jobs were most often given to nationals. Relatedly, some PoC explained having been told that they would be receiving livelihoods assistance only to not be included in the final list of beneficiaries (8), such as with a job or through the provision of seeds. Finally, a few male callers felt that females were preferred for the livelihoods opportunities provided by implementing partners.

Very few calls made mention of other barriers to livelihoods such as language and distance to markets or livelihoods opportunities, though they are important to highlight and confirm the results found in other participatory assessments.

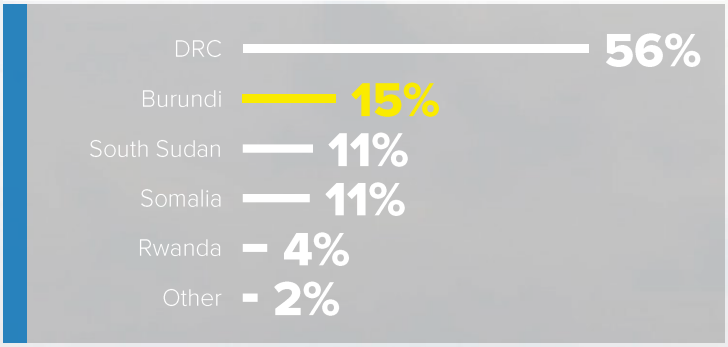
IMPACTS OF COVID-19

The gamut of COVID-19 related measures and restrictions placed to curb the spread of the virus had a significant impact on refugee livelihoods. This theme can be seen clearly in the calls made to multiple sectors. The impacts to refugee lives, however, can most plainly be seen by examining the narratives outlining the needs that have arisen due to the negative impact to their livelihoods as outlined under various thematic areas such as Food Assistance and Shelter, Sites, and NFIs.

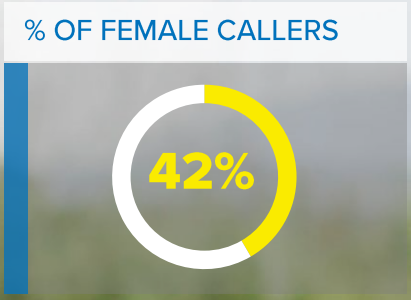
PROTECTION

Protection was one of the only thematic areas in which Burundian callers achieve second place in terms of number of calls made.

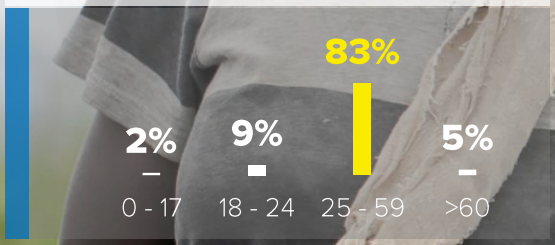
% OF CALLS BY NATIONALITY



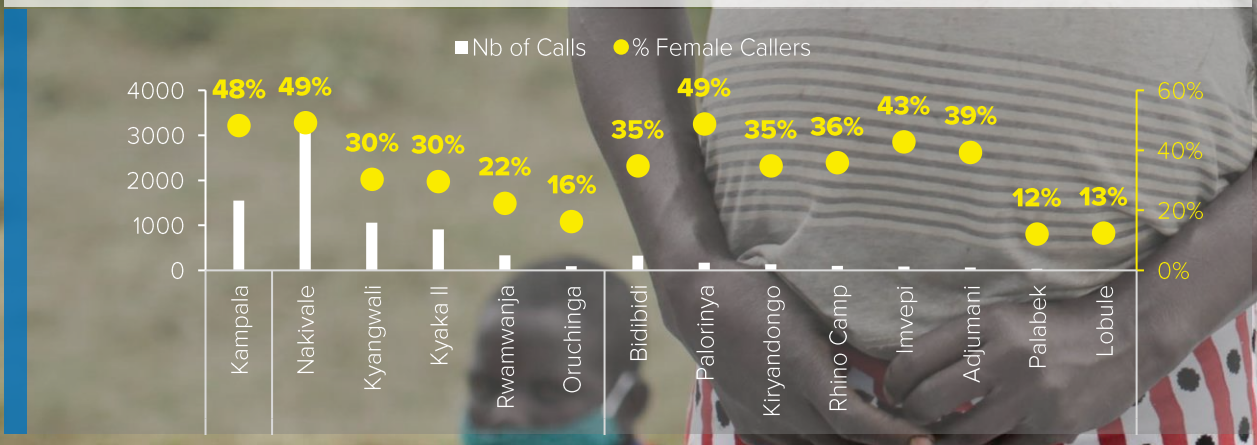
% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



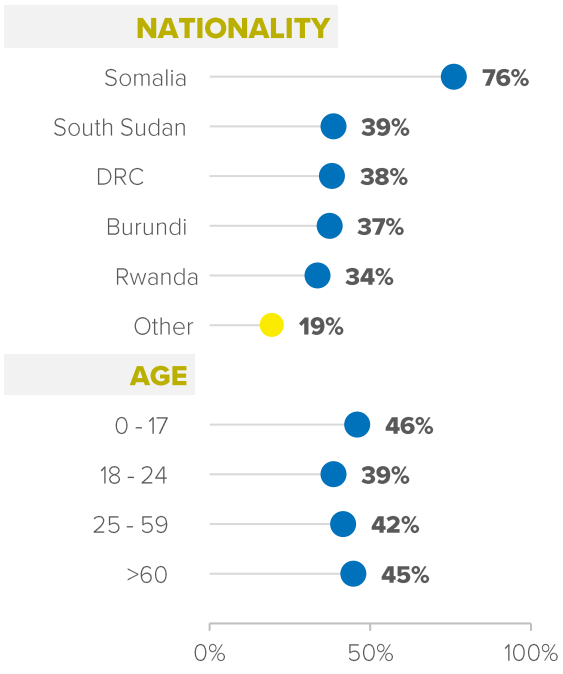
29 years old Anurith sit exhausted with her children after undergoing health screening at the Uganda-DRC borders in Zombo. © *UNHCR Uganda, Rocco Nuri.*

OVERALL TRENDS

Legal and physical and **community-based protection**[2] together received 8,131 calls since January 2019 which represents 18.2% of the total calls. Continuing the trend apparent in the overall set of calls, Congolese callers placed more than half of the calls, with 56%, while the next closest group, Burundian callers, had made 15% of the calls. This represents one of the few thematic areas in which Burundian callers placed the second highest number of calls.

The percentage of female callers is exceptionally low among PoC hailing from minority nationalities.

Figure 18: % female callers by nationality and age group of callers for protection.



Women and girls made 42% of the calls. This differs somewhat by nationality of caller with a representation of 76% among Somali PoC, and 19% among callers of minority nationalities. Congolese, Burundian, South Sudanese, and Rwandan women and girls made between 34% and 39% of the calls. No significant variation with respect to the percentage of female callers can be detected by age. Furthermore, women and girls were much more strongly represented among calls made from Kampala (48%), Nakivale (49%), and Palorinya (49%) than from other locations.

Calls made regarding legal and physical protection or community-based protection also mirrored the age distribution found when examining the entire dataset wherein the 25-59 age group made the overwhelming majority of calls (83%) with little variation in the age distribution of female and male callers. Nevertheless, following trends seen in other sectors, the 18-24 age group had placed a slightly higher percentage of calls among those made by South Sudanese callers. While the overall percentage of calls placed by this age group was 9%, this percentage rose to 16% among PoC of South Sudanese nationality.

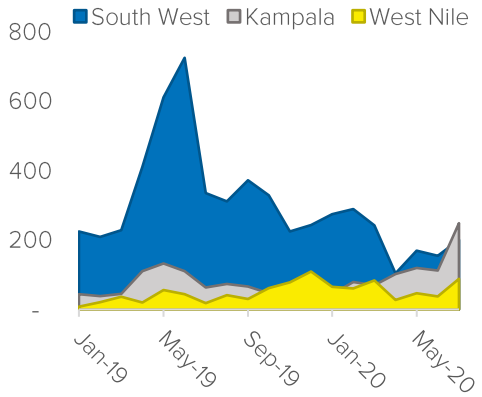
> *A man is threatening to kill me. He is accusing me of having killed 30 people back in our home country, but I have no idea what he is talking about. I have left my settlement because I don't feel safe.*
>
> *Female, Burundian, aged 30-34, Nakivale*

[2] Child protection and GBV have been examined separately due to notable differences in trends.

Trends over time for protection depend strongly on the call region. Settlements in the South West experienced an upward trend until June 2019, followed by a steady decline. Conversely, PoC based in both Kampala and the settlements in West Nile placed much fewer calls with no discernible trend over time. While both community-based protection and legal and physical protection experienced a notable decline in their monthly average number during the April to June period of 2020 when compared to the monthly average in the previous period (-36% for community-based protection and -34% for legal and physical protection), the number of calls in July have increased to pre-COVID levels.

The largest number of calls occurred in June 2019, mostly in Nakivale, followed by a steady decline.

Figure 19: Monthly protection call numbers by call region.



With respect to call distribution by call region, 69.5% of the calls originated from settlements in the South West, with Nakivale alone accounted for 40.1%. Conversely, all the settlements in West Nile combined only accounted for 11.4%. Kampala contributed 19.1% of the calls. This geographical distribution of calls is not surprising given the call distribution by nationality which was highlighted above.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of 504 calls regarding physical and legal protection and community-based protection received between Jan – Jul 2020 was examined. An attempt has been made below to examine the most common issues and requests identified within the calls, however, it is important to underline that protection calls often relate complex scenarios involving multiple types of protection concerns and assistance requests. Also note that child protection and GBV issues will be analysed separately.

> *My relative's goat has been taken by a neighbour. My relative has now been arrested because the neighbour reported to the police and the chairman that it was his goat.*
>
> *Male, Congolese, aged 30-34, Kyangwali*

The most frequent requests from callers involved seeking assistance for a range of protection issues, most commonly for incidences of physical assault (47), verbal threats or harassment (31), incidents related to persecution originating from the country of origin (20), family-related incidents (17), theft (16), disputes within the community (13), and a missing person (10). In 11 calls, PoC even requested settlement relocation due to the insecurity that they were experiencing, particularly by male callers. It is difficult to identify which AGD groups were most impacted by the different protection issues due to the low overall number of calls examined, however, issues such as persecution originating from

country of origin, conflict with the host community, rivalry between tribes, and discrimination due to the PoC characteristics appear to more frequently be reported by male callers, while female callers were more likely to call regarding child protection and GBV issues.

Legal assistance was also commonly asked for (64), particularly in instances in which callers felt that they had been falsely accused of a crime, but also frequently involved occurrences of family disagreements, or disputes regarding land or property. Relatedly, labour disputes were also brought to the helpline (19). Calls related to legal assistance or labour disputes were most often raised by male callers.

> *Congolese people are being attached in our camp. This happened last night to one of my neighbours. Unfortunately, when the police were called, none appeared to assist.*
>
> *Female, Congolese, 35-39, Rhino Camp*

The protection calls under community-based protection often appeared to be multi-sectoral in nature, regularly involving some type of sector response for persons living with a vulnerability. To illustrate this point, some of the most frequent requests involved: financial or material assistance requested by guardians in fostering situations (11); PSN assistance (11); PSN shelters (11); and requests for a safe shelter (4). Rental assistance was also commonly asked for (14), as was support with clothing (14), requests for sanitary pads and soap (11), and tuition fees (6).

Following up on existing protection cases was also a regular call topic (46), with frequent inquiries as to whether their case had been sent to UNHCR. Almost half of these calls also involved a change in partner and requests for who would be proceeding with their cases. This perhaps indicates some need to strengthen the handover process, taking into account the vast difficulties in doing so.

Other common issues encountered when seeking protection assistance involved receiving unsatisfactory responses from police (10), partners (8), or from community leaders (7). Less regularly were reports of perpetrators being released without punishment, lack of police presence, and lack of knowledge related to refugee-specific laws, mirroring some of the issues outlined in the most recent participatory assessments.

IMPACTS OF COVID-19

As mentioned previously, calls recorded under community-based protection often related to other sectors. Not surprisingly then, the most frequently described COVID-19 impacts were an inability to pay rent (49), negative impacts to livelihoods (19), and a request for food assistance (14). These issues are covered in more depth under the relevant sectors.

> *I worked in one of the bars here in Kampala and the police came to where I was staying with a cousin. They were fearing that I had coronavirus and jailed me so that I would not infect others.*
>
> *Female, Burundian, aged 18-24, Kampala*

Unique to protection were the few instances in which callers described being detained or mistreated due to newly imposed COVID-19 prevention measures. While not frequent, they are important to highlight. These few incidents involved being detained by authorities as a suspected case of COVID-19 or

being jailed or mistreated for not respecting COVID-19 measures such as physical distancing or wearing a mask. It is important to underline that these cases were not isolated to Kampala, but also included Nakivale and Kyaka II.

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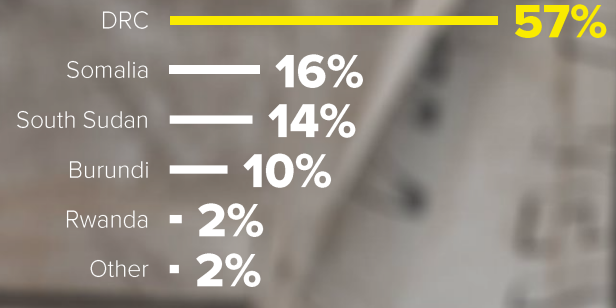
CHILD PROTECTION

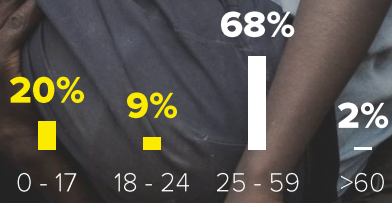
When compared to the overall trends, women and girls make a higher percentage of child protection calls, as do callers in the 0-17 and 18-24 age groups.

% OF CALLS BY NATIONALITY

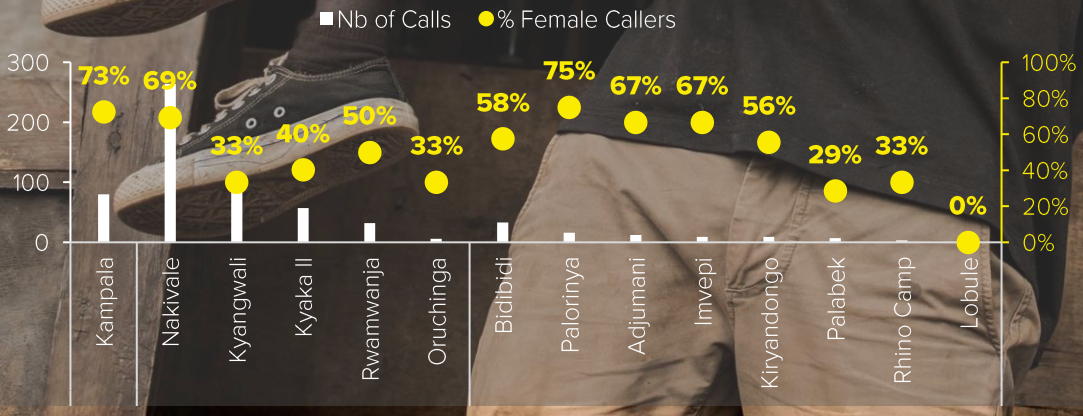


% OF FEMALE CALLERS

% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



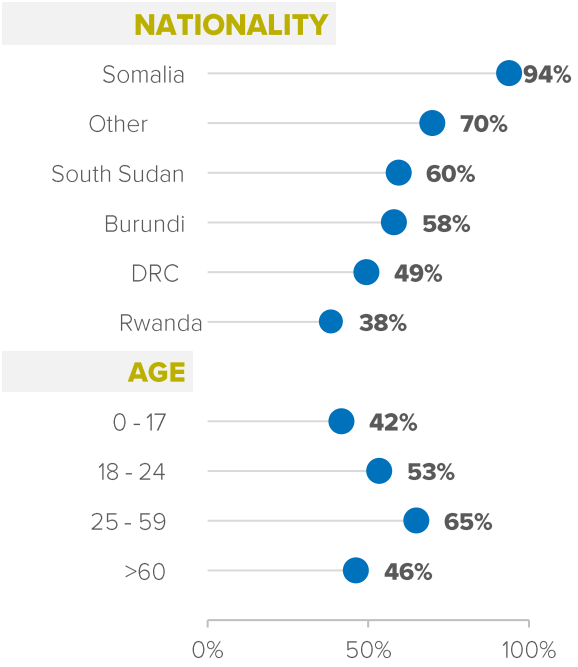
Valens plays with his son in front of his shop in Rwamwanja refugee settlement, Uganda. He and his family fled Northern Kivu province of DRC in 2012 and have been living in Uganda ever since. *© UNHCR Uganda, Vincent Tremeau.*

OVERALL TRENDS

Child protection received 623 calls since January 2019 which represents 1.4% of the total calls. The distribution of calls by nationality of the caller was almost identical to the distribution apparent overall, wherein Congolese callers placed the majority of calls. On the other end of the spectrum, Rwandan and minority nationalities only placed 13 and 10 calls respectively[3].

The percentage of female callers appeared to increase with age.

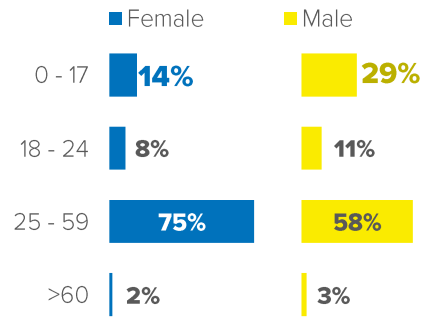
Figure 20: % of female callers by nationality and age group of callers for child protection.



What was more noteworthy was that female callers placed 56% of the calls, one of the two thematic areas in which they represented a majority (the other is GBV). The percentage of female callers was particularly high among Somali and South Sudanese PoC and appeared to increase with age.

Boys were more likely to place calls regarding child protection when compared to their female counterparts.

Figure 21: Age distribution of child protection calls by gender of caller.



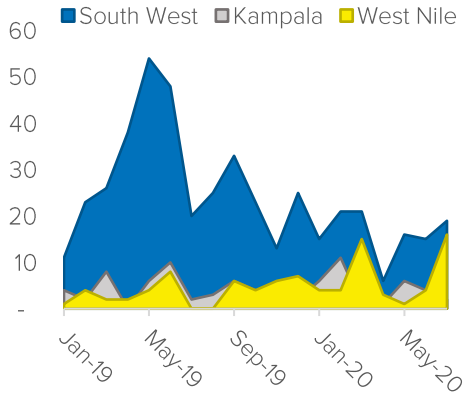
Another notable difference is highlighted when examining the distribution of calls by age and sex. The figure above illustrates the relatively higher percentage of boys among the calls made by male callers in comparison to the percentage of girls among the calls made by female callers, with 29% and 14% respectively. Child protection is the only thematic area other than education in which the 0-17 age group contributed a higher than average percentage of the calls. In the overall dataset, the percentage of calls placed by the 0-17 age group was only 3% compared to

[3] Values based on these groups, as well as the 18-24 and >60 age groups are not representative due to the low frequency of calls placed.

20% in Child Protection. This trend was especially strong among South Sudanese callers where callers aged 0-17 placed 38% of the calls. Notably, the 0-17 and 18-24 age groups combined made 55% of the calls placed by South Sudanese callers.

The largest number of calls occurred in June 2019 from the South West followed by a steady decline.

Figure 22: Monthly child protection call numbers by call region.



The trends over time for the Child Protection thematic area appear similar to what was shown among the protection thematic areas examined in the previous section, wherein the settlements of the South West experienced an increase in the number of calls in the beginning of 2019, followed by a downward trend. Conversely, PoC based in both Kampala and West Nile settlements placed much fewer calls with no discernible trend over time. Child protection experienced a decrease of 47% in the average monthly calls in the April to June 2020 period, followed by an increase of 98% back to pre-COVID-19 numbers in July.

The call distribution by settlement was almost identical to what was seen above in the other protection sectors, with 72.6% of the calls originating from settlements in the South West, and with Nakivale specifically contributing the majority (42.4%). Also similar to what was see above, all West Nile settlements combined only accounted for 14.6%. Kampala contributed 12.8% of the calls.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of all 110 calls regarding Child Protection, received between Jan – Jul 2020, were examined. An attempt has been made below to examine the most common issues and requests identified within the calls, however, as with Legal and Physical Protection and Community-based Protection, Child Protection calls are often complex, involving multiple types of protection concerns and assistance requests.

> *I am registered under by grandmother's family attestation, but when she gets food and other kinds of assistance, she doesn't give me any. I would like to be removed from her card and given my own.*
>
> *Male, Congolese, aged 12-17, Kyangwali*

First, with respect to caller identity, 72% of the calls were placed by caregivers, 24% were placed by children regarding their own protection needs, and 2% by members of the community. Just as was found in the education sector, male callers were much more likely to be calling about their own protection needs (37% of the calls made by male callers were from the children themselves compared to only 13% by female callers), while female callers more frequently identified as caregivers (86%).

The most numerous child protection issue raised by callers was child neglect or abandonment (21), which often involved family disputes, children with health issues, removal of children from schooling, and children not receiving the food assistance allocated to them. Instances of missing children or threats of child removal (17) were also frequent and commonly featured disputes between divorced parents or between widows and other family members who threatened to take away her children.

> *My child is albino and was beaten by a woman the other day. I reported my problem to the chairman and to the police, but they did not help, instead asking me to forgive the woman. My child has to put up with so much abuse.*
>
> *Female, Burundian, aged 45-49, Nakivale*

Given that child neglect and abandonment was the most commonly mentioned protection concern, it should not be surprising that callers most often asked for material or financial assistance (32) to care for said children or asked for some type of family mediation (8). In seven cases, children who had called regarding their own neglect or abandonment requested to be provided with alternate care. It should be noted that material or financial assistance was also frequently requested by foster parents or other caregivers to help them care for the children under their responsibility.

The next most widespread protection concern recounted by callers was child abuse, violence, or exploitation (14), most often regarding the sexual assault of female children. Related, were five calls regarding child/forced marriage and two concerning teenage pregnancy. Based on the narratives under examination, it appears that girls are at risk of sexual and gender-based violence, including abduction, by neighbours, other community members, and in selected instances, by family members as well. In cases of child abuse, violence, and exploitation, child/forced marriage, and teenage pregnancy, callers requested protection assistance (28), psychosocial support (10), and maternal assistance (1).

Some other issues which received less frequent mentions were adolescent delinquency and alcohol or drug abuse (6), risk of child labour (1), discrimination against children with special needs or disabilities (2), and nutritional support for a newborn whose mother had died in childbirth (1).

Commonly reported issues to accessing protection assistance were the same as those mentioned under the other protection thematic areas including receiving unsatisfactory responses from police (4) and from partners (5). Less regular was one mention of limited or inadequate services for children with special needs or disabilities. No mentions, however, were made regarding partner handover issues that had been seen in other sectors.

> *My 15-year-old daughter has given birth this past week and the father is unknown. She cries a lot and is in a lot of pain, which makes it hard for her to breastfeed. With COVID-19 things are so hard. Support is much needed.*
>
> *Female, Congolese, aged 40-44, Kampala*

IMPACTS OF COVID-19

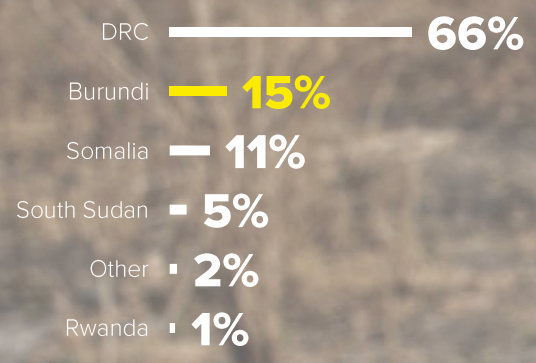
Very few mentions were made of child protection issues related to COVID-19 other than the impacts to livelihoods and associated

risks seen in other sectors. However, a few issues were noted within the sample of calls and are worth mentioning. The first includes instances in which a caregiver had gone to collect assistance and had been prevented from returning to the settlement in which they were based with their kids, due to movement restrictions. Another concern involved delays or the halting of protection cases by the police, including one regarding a missing child. Finally, one community member called expressing her concern that early and forced marriage would increase as girls were dropping out of school as a result of school closures.

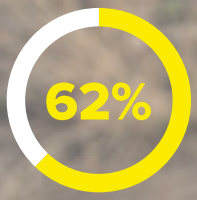
GBV

Not surprisingly women and girls represented the majority of callers, having made 62% of the calls regarding GBV.

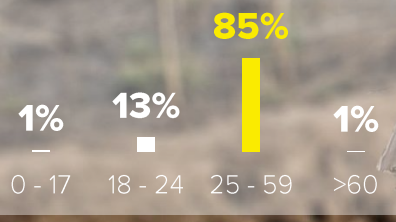
% OF CALLS BY NATIONALITY



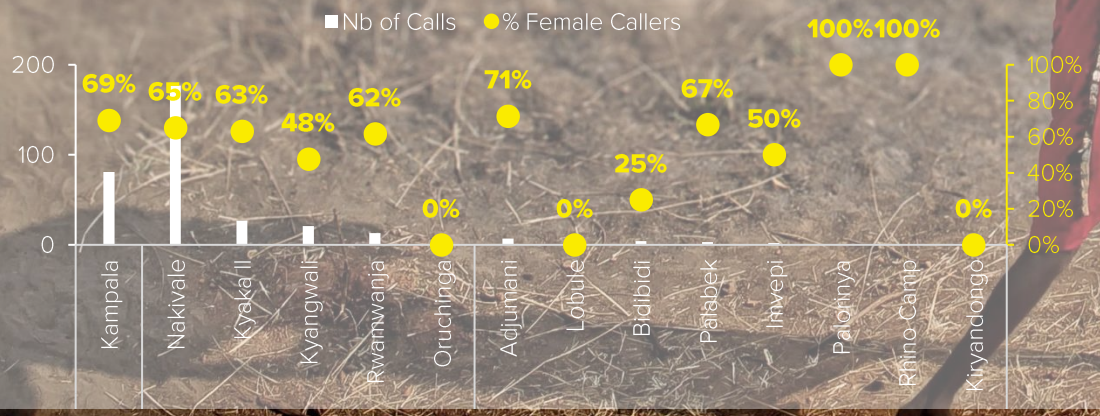
% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



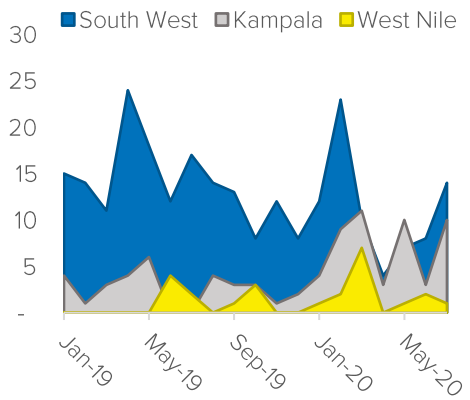
A young refugee goes back to her family spot, carrying NFI on her head. © *UNHCR Uganda, Frederic Noy.*

OVERALL TRENDS

GBV received 691[4] calls since January 2019, representing 1.5% of the total calls. Whereas Congolese callers typically made the majority of calls, they were even more overrepresented among calls placed concerning GBV, having placed 66% of the total (compared to their average of 56%). As with the protection sectors, South Sudanese callers were, conversely, even more underrepresented when compared to the average, having made only 5% of the calls. Also similar to the other protection thematic areas was that Burundians ranked second in number of calls.

No clear trends over time existed for GBV calls received by the helpine.

Figure 23: Monthly GBV call numbers by call region.



Following trends seen in the Child Protection sector, women and girls placed the majority of calls, having made 62%. Most of the calls (85%) were made by the 25-59 age group, with little variation in the age distribution by gender.

Notably, 51% of these calls came from Nakivale and 23% from Kampala. Rounding out the top five, though contributing considerably less, were Kyaka II (7.7%), Kyangwali (6.0%), and Rwanwanja (3.7%). All of the settlements in West Nile combined only placed 24 calls since January 2019, representing 6.9% of the total number of calls.

Examining the trends over time yields little new information, confirming the relative dominance of settlements from the South West and the paucity of calls from settlements from West Nile.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of all 84 calls regarding GBV, received between Jan – Jul 2020, was examined. An attempt has been made below to examine the most common issues and requests identified within the calls, however, as with the previous protection thematic areas that were examined, GBV calls are often complex, involving multiple types of protection concerns and assistance requests.

> *My husband changed me from the house after beating me and the children. He confiscated all of my refugee documents. I don't know where to stay with my children, I sometimes sleep on the roadside.*
>
> *Female, Congolese, aged 18-24, Kyangwali*

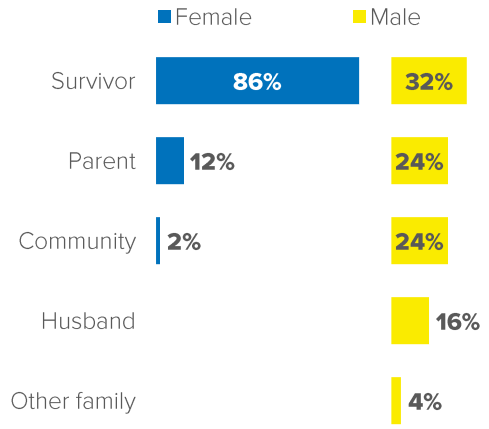
First, with respect to caller identities, 70% of the calls were placed by the survivor, 15% of the calls by a parent, 8% by a concerned

[4] Limited between group comparisons can be made due to the limited number of calls.

community member, 5% by a husband, and 1% by other family members. Not surprisingly, female callers most often identified as the survivor compared to male callers, with 86% and 32% respectively. As can be seen in the figure below, male callers were more likely than female callers to be a parent, a community member, a spouse, or a non-parent family member calling about an GBV case.

Women and girls were much more likely to identified as the survivor of GBV when compared to men and boys during calls to the helpline.

Figure 24: Percentage of male and female callers by GBV caller type.



The most frequent GBV issues raised by callers was rape (71) and being abandoned by their husband or partner (14), with frequent mentions of being abandoned due to having been raped (14). Intimate partner violence (IPV) was also habitually mentioned by callers (12), as well as incidences of the partner confiscating identity documents, shared living spaces, and other resources from the caller (6). These latter six calls were particularly complicated, involving IPV and child abuse, as well as the withholding of food and other assistance. The final GBV issue related by callers was LGBTI discrimination, also the only issue in which more men than women had been affected.

Callers recounted many physical and psychological affects as a result of the GBV traumas and likewise requested varied assistance. While callers most commonly requested protection assistance (30), the second most asked for assistance was for health or psychosocial support (22) and some type of family mediation (5). This finding really underlines the complex impacts experienced as a consequence of GBV trauma, and the holistic care approach required for treatment. Other less regularly requested types of assistance included safe shelter, modifications to the family attestation, cash assistance, voluntary return, resettlement to a third country, and maternal assistance.

> *I left my camp after my family and friends found out that I am Gay. Even my wife and children did not know before. I am calling because I am desperate about the situation and would like counselling with my family.*
>
> *Male, Djiboutian, aged 30-34, Nakivale*

By far the most commonly reported issue to accessing protection assistance for GBV included a lack of response from protection organizations (9), as well as difficulties with case follow-up due to a change in protection partner (4). Other challenges included lack of response from the police (3), and the accidental release of the perpetrator (1). In addition, three calls narrated incidents of negative interference by the chairmen or people within

the community preventing the survivor of GBV from going to the police. All of these access issues save for two were reported from either Kampala or Nakivale. As a counterpoint, however, in six instances callers recounted having went to the police and being assisted to go to the hospital, including in Kampala.

IMPACTS OF COVID-19

Though an increase in GBV and domestic violence has been reported in other places, the data from the FRRM cannot be used to support this observation. On the contrary, as noted above, no upward trend can be detected from April 2020 and onward. This is not surprising as the number of calls made to GBV has been low over the entire time period under investigation, in addition to being a commonly underreported issue.

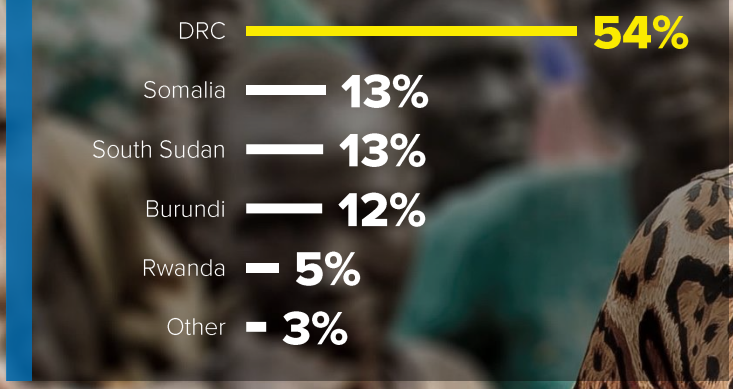
Only three calls mentioned impacts directly attributed to COVID-19 on the management of GBV cases. The first caller expressed concerns over the safety of a certain protection house due its close association with a hospital and a high volume of PoC arriving for assistance. Two more calls related not being able to receive protection assistance, including medical support, due to the restricted movement in Kampala for which they requested a solution.

> *I am a victim of rape and have an appointment at the hospital to have my womb scanned. I have all of my medical documents but am unable to reach the hospital because of the lock down situation. Please help.*
>
> *Female, Congolese, aged 45-49, Kampala*

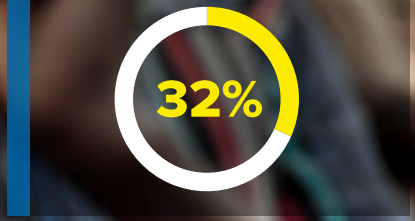
REGISTRATION & RSD

The majority of calls regarding registration and RSD were mostly placed by adults and by PoC of Congolese nationality.

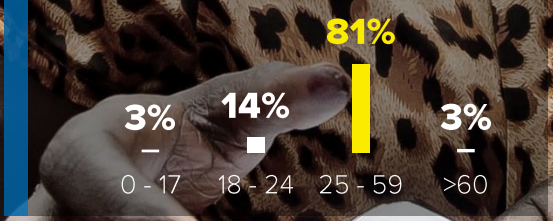
% OF CALLS BY NATIONALITY



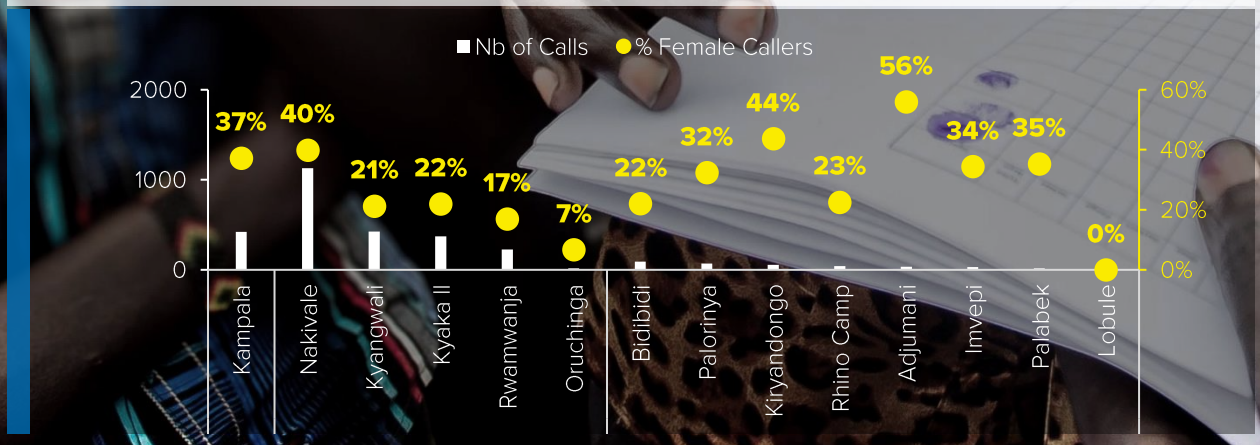
% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



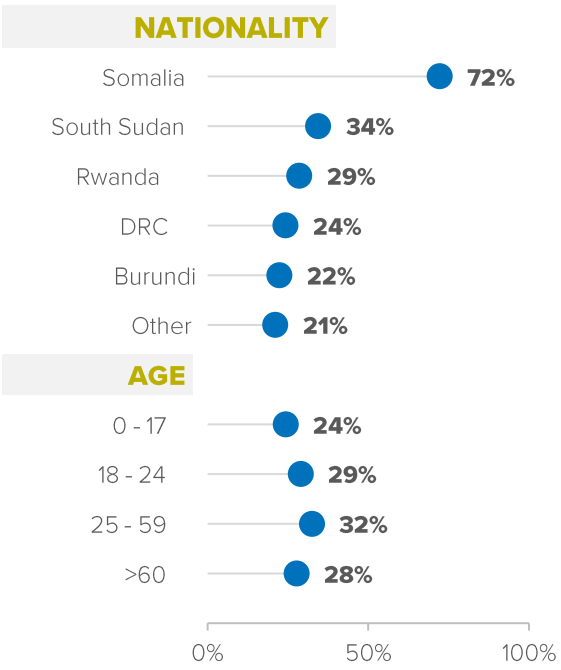
Holding a paper, a staff from the Uganda Office of the Prime Minister called people to to collect NFIs, further down the road. As a signature, they leave a fingerprint in a box on the list. © *UNHCR Uganda, Frederic Noy.*

OVERALL TRENDS

Registration and **RSD** together received 2,928 calls since January 2019 which represented 6.5% of the total calls. Congolese callers again placed more than half of the calls, with 54%, while the next closest group, Somali callers, made only 13% of the calls. Just as when examining the protection-related calls, South Sudanese callers were extremely underrepresented among calls regarding registration/RSD, having placed only 5% of the calls.

The percentage of female callers is universally low, with the exception of calls placed by Somali PoC.

Figure 25: % female callers by nationality and age group of callers for registration or RSD.

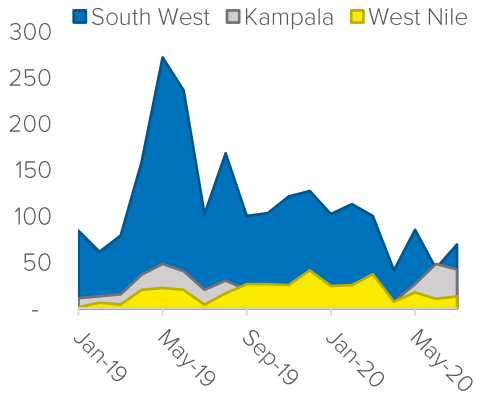


Women represented 32% of the callers, slightly lower than their overall percentage of 40%. This differs somewhat by nationality of caller with a representation of 72% for Somali women and girls, down to 21% among callers of minority nationalities. Furthermore, the figure above showcases a slight increase in the percentage of female callers by age. Among the calls made by the 0-17 age group, only 24% were made by female callers, whereas among the calls made by the 25-59 age group, the percentage of female callers increased to 32%.

Following the overall trends, the 25-59 age group made the majority of calls (81%) with little variation in the age distribution between female and male callers. Nevertheless, the 18-24 age group had placed a slightly higher percentage of calls among those made by South Sudanese callers. While the overall percentage of calls placed by this age group was 14%, the percentage jumped to 23% among PoC of South Sudanese nationality.

The largest number of calls occurred in May 2019 followed by a steady decline.

Figure 26: Monthly registration and RSD call numbers by call region.



The trend over time for the settlements of the South West mimicked the same trend seen in other thematic areas in which the number of calls increased upward until mid-2019,

followed by a steady decline. Conversely, both Kampala and the settlements of West Nile seemed to register a low and steady number of calls related to registration and RSD, representing 14.3% and 11.8%% of the calls, respectively. They both experienced a notable decline during the April to June period of 2020 when compared to the monthly average in the previous period (-44% for registration and -34% for RSD), not surprising given that the OPM office had closed for some time.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of all 300 calls regarding registration and RSD received from Jan – Jul 2020 was examined to help understand the needs and issues experienced by refugees in Uganda with respect to these areas of work.

> *I came to Uganda with another woman and we were registered on the same family attestation. But now it looks like she no longer wants me to stay with her; when she collects food, she doesn't give me my portion.*
>
> *Female, Congolese, 12-17, Kyaka II*

Before the pandemic, the most frequent call topic regarded wanting to obtain or modify a family attestation (71). While this most often involved making changes as a result of marriage, childbirth, or arrival of family members to Uganda, there were also a few instances of family attestations not reflecting the correct family composition which impacted upon the aid that PoC were eligible to receive. Other callers requested modifications to the family attestation explaining that they or other family members were not been shared the assistance provided to the head of household under whose family attestation they were placed. A few PoC also claimed that their children had arrived with non-family members and had initially been registered on their family attestations, with the PoC requesting the children to be transferred.

> *I am finding it hard to add my child to the family attestation. When I go to the OPM, the place is congested, and I never get the chance to talk with an officer about my needs.*
>
> *Male, Congolese, aged 35-39, Kyaka II*

The next most frequent request recorded under the registration/RSD thematic areas included instances where PoC wanted to transfer settlements, either to reunite with family (29), or due to dissatisfaction with their current location (21). The frequency with which PoC call regarding their family attestations and official settlement transfers seems very much linked to their ability to receive assistance, the latter of which became an issue of greater importance as pandemic-related movement restrictions prevented them from receiving assistance.

Callers also regularly called for information on how to obtain a refugee identification or travel documents (31), how to undergo refugee registration (27), asylum registration or update (26), and the process for obtaining a REC interview (11). It should also be noted that issues related to food assistance and ration cards were regularly recorded under the Registration sector, with 57 calls falling into this category. Concerns regarding refugee or asylum registration were almost entirely placed from Kampala.

> *There is a lady newly arrived in the settlement who didn't pass via the reception centres because they were already closed due to COVID-19. Now she has nowhere to dwell and doesn't know where to start the process from.*
>
> *Male, Congolese, 25-29, Kyangwali*

One of the greatest issues related by PoC regarded delays at the OPM office or perceptions of not being helped (21), such as in instances of wanting to add a newborn child to the family attestation. A couple of calls cited how previously separate OPM and UNHCR systems resulted in duplicate refugee identifications, which posed problems for the PoC when seeking their assistance.

Less frequent access issues regarded Rwandans being denied access to registration services, being told that they were no longer eligible to register, as well as the prioritization of new arrivals at the OPM office resulting in delays.

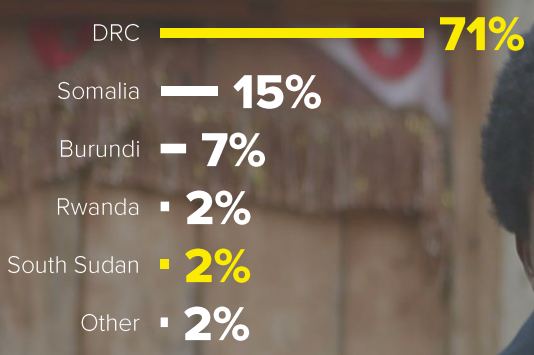
IMPACTS OF COVID-19

The largest impact related to the COVID-19 pandemic not surprisingly regarded the disruptions to registration and other processes. This might be particularly devastating for new arrivals who claimed the reception centres were closed, proceeding directly to the settlements with no infrastructure of support.

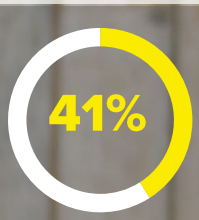
RESETTLEMENT

Congolese callers made the overwhelming majority of calls related to resettlement. Conversely, South Sudanese PoC were underrepresented among calls regarding this sector.

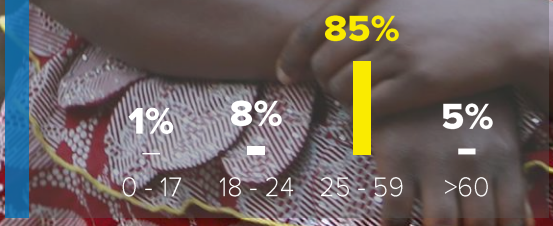
% OF CALLS BY NATIONALITY



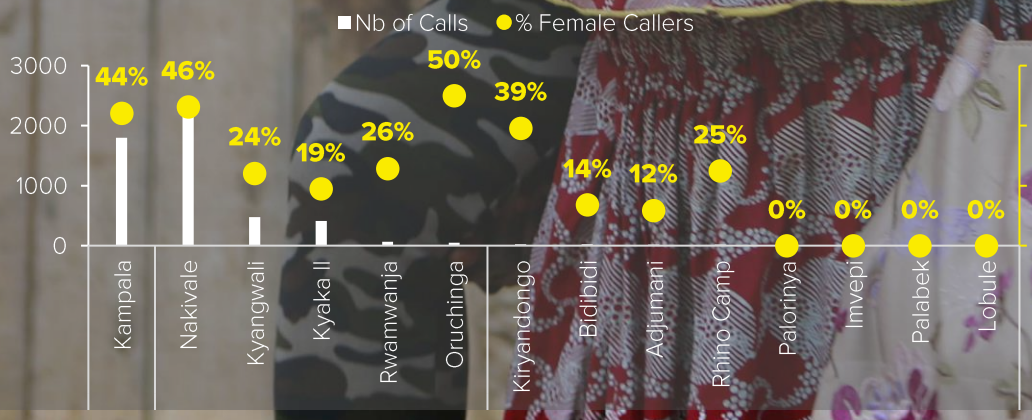
% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



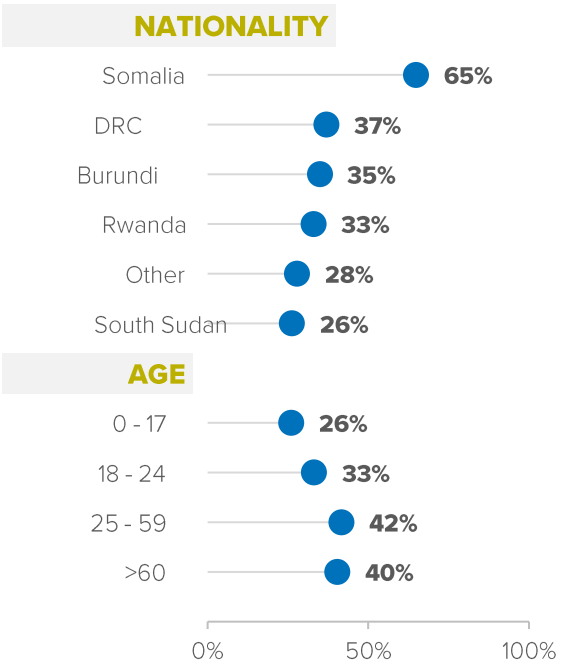
Congolese refugee Francoise Mukundu, and her foster daughter Paola Fatuma, in Nakivale Refugee Settlement.
© *UNHCR Uganda, Caroline Irby.*

OVERALL TRENDS

Resettlement, Local integration, and Voluntary return received 5,306 calls since January 2019 which represented 11.9% of the total calls, receiving the third highest number. Similar to the protection thematic areas and registration/RSD sectors, South Sudanese callers were extremely underrepresented among calls regarding resettlement, having placed only 2% of the calls, and represented their lowest across all thematic areas examined by this study. Conversely, Congolese callers were overrepresented, having placed 71% of the calls. This finding may be because of a large-scale resettlement programme for Congolese PoC which ran until 2019.

The percentage of female callers was lower among the younger age cohorts and callers of South Sudanese nationality.

Figure 27: % female callers by nationality and age group of callers for resettlement.

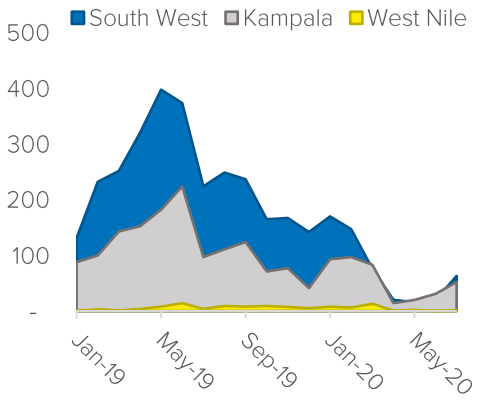


Women represented 41% of the callers. This differs by nationality of caller with a representation of 65% for Somali women, down to 26% among South Sudanese callers. Furthermore, the percentage of female callers also varied with age. Among the calls made by the 0-17 age group, only 26% were made by female callers, whereas among calls made by the 25-59 age group, 43% were made by female callers. These trends are not surprising given that very few girls have their own RST cases, while many female-headed households are currently in the RST pipeline.

85% of the calls were placed by PoC aged 25-59 which was equally true for female and male callers. Interestingly, Rwandan men aged 60 and above were overrepresented with respect to the average. While the average rate of calling of men aged 60 and over was 3%, among Rwandan callers the percentage rose to 10%. This exact trend can also be found in the health and nutrition sector.

Calls regarding resettlement steadily declined since May 2019.

Figure 28: Monthly resettlement call numbers by call region.



Overall trends over time for the settlements in the South West and Kampala seem to indicate an upward trend in calls until May or

June of 2019 followed by a decrease until December of the same year. This is the thematic area that experienced the greatest decrease in average calls during the April to June period of 2020 when compared to the monthly average in the previous period (-88%), not surprising given the border closures and halting of many official processes. This stark decrease may also indicate that communication on the halting of RST processing through other channels had been successful.

> *I am calling to request to be resettled in Europe because I am suffering here in Uganda and facing a lot of issues. I am also an orphan.*
>
> *Female, Congolese, aged 12-17, Kyangwali*

The graph above also clearly demonstrates the dearth of calls received from settlements of West Nile which follows the observation that South Sudanese PoC had only placed 2% of the calls. In fact, Nakivale, Kampala, Kyangwali, and Kyaka II accounted for 95% of the calls, having place 45%, 34%, 9%, and 7% respectively.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of all 256 calls regarding Resettlement, Local integration, and Voluntary return, received from Jan – Jul 2020 were examined to help understand the needs and issues communicated by refugees to the helpline. First, it should be noted that only 7 calls were made requesting the initiation of voluntary return. These requests were placed for a range of reasons from believing that they would receive better health care and education, to wanting to be reunited with family. The remaining calls all related to resettlement. Most frequently, PoC called to request an update on their cases (136), to initiate the resettlement process (71), or to request information about case rejection or ineligibility (22).

With respect to existing RST cases, most of the calls reflected the length and unpredictability inherent in the RST process. Other calls were made by PoC who mistakenly thought that they had begun an RST process when in fact they had not, perhaps equating having conducted a protection interview with having an RST case. Still others called requesting modifications to their files, most often to add family members in the event of a marriage or a birth, or to subtract family members in the event of a family conflict. The former two observations may signal a need to strengthen counseling lines on the RST process, in addition to clearing up cases and issuing rejection letters.

When asking to begin a process, callers frequently mention family reunification (25), protection issues (11), or medical challenges (10) that they were facing which they believe made them eligible for resettlement. In many of these calls, however, a specific issue was not identified, but rather the general feeling that things were not going well for them in Uganda.

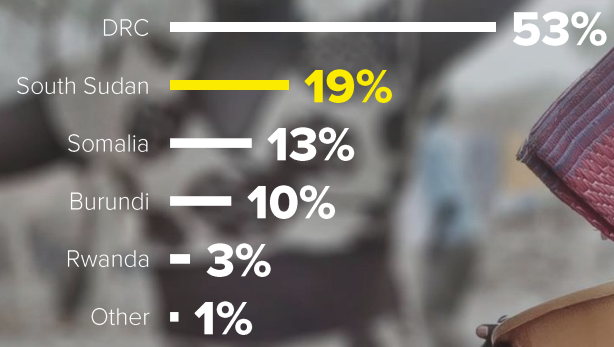
IMPACTS OF COVID-19

As was noted previously, this sector experienced the largest decrease in the average number of monthly calls made during the April to June 2020 time period. Also mentioned above, this may also be the result of successful communication through other channels regarding delays in RST processing as a result of the pandemic.

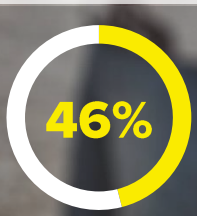
SHELTER & NFIs

Women and girls placed almost half of the calls regarding shelter, one of the few thematic areas in which they were most strongly represented.

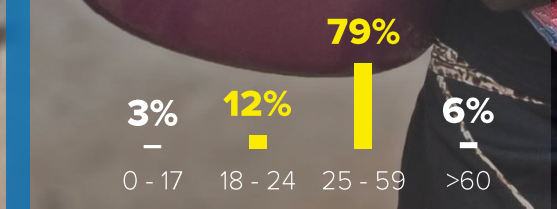
% OF CALLS BY NATIONALITY



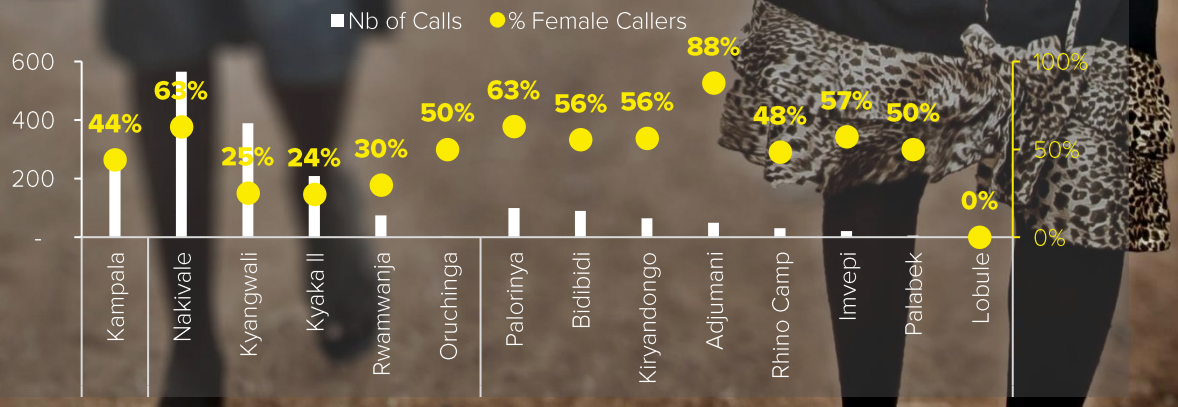
% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



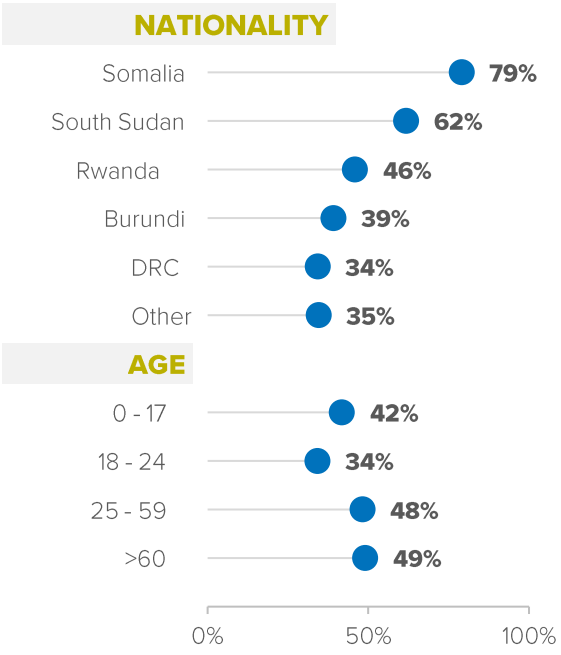
Three young refugees go back to their spot under the trees with the NFI kits that they just received.
© UNHCR, Frederic Noy.

OVERALL TRENDS

Shelter received 1,875 calls since January 2019 which represented 4.2% of the total calls. Congolese callers placed more than half of the calls, with 53%, while the next closest group, South Sudanese callers, had made only 19% of the calls. Despite their low representation, South Sudanese PoC made a slightly greater proportion of the calls to this thematic area when compared to their overall proportion, with 19% and 13% respectively.

Higher percentages of female callers can be seen among calls placed by Somali and South Sudanese PoC and generally increased with age.

Figure 29: % of female callers by nationality and age group of callers for shelter.

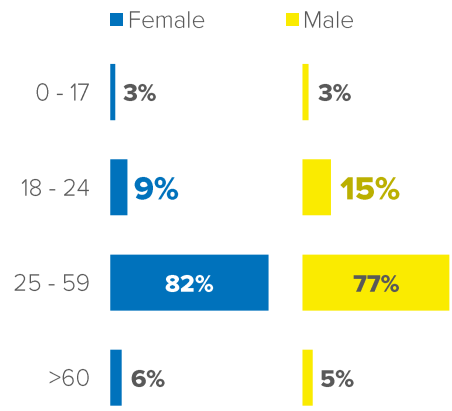


The overall percentage of female callers was 46%, but also depended strongly on the age and nationality of the caller group. The percentage of female callers was much higher in the calls placed by Somali and South Sudanese PoC, increasing slightly with age. The % of female callers by nationality and age group can be seen in the figure above.

When examining the distribution of calls by age and sex, it is apparent that the 18-24 age group made a higher percentage of the calls among male PoC than among female PoC with 15% and 9% respectively as can be seen in the figure below.

Men aged 18-24 were more likely to place calls regarding shelter when compared to their female counterparts.

Figure 30: Age distribution of shelter calls by gender of caller.

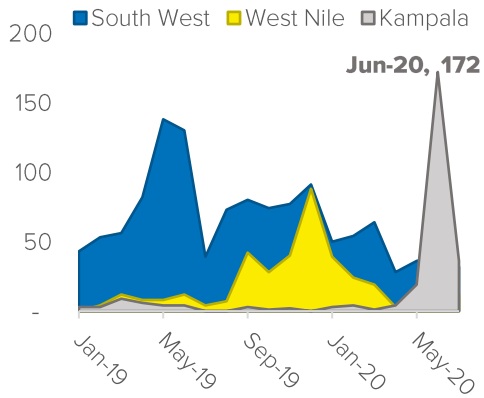


With respect to how call frequency changed over time, as with other sectors, trends seem to be entirely dependent on call region. Calls in the settlements of the South West experienced a much higher volume in May and June of 2019. Conversely, in West Nile settlements, an upward trend occurred from July to December of 2019. Finally, urban refugees normally do not receive shelter support, and this is apparent in the non-existent number of calls prior to the COVID-19 crisis, with a sharp increase apparent during the pandemic.

Interestingly, they do not shoot up until June 2020 which may indicate some kind of rental freeze, whereby landlords were encouraged beforehand to not pressure their tenants during the first few months.

Urban refugees who were normally not eligible for assistance dramatically increased the number of calls they made to the helpline in June 2020.

Figure 31: Monthly shelter call numbers by call region.



With respect to location, 62% of the calls came from Nakivale, Kyangwali, and Kyaka II. All of the calls combined from West Nile settlements contributed 19% with the largest number coming from Palorinya which contributed 5%. As was just shown, the calls made from Kampala, representing 14% of the total, were related to the pandemic.

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of 302 calls were examined to help shed light on the issues, needs, and vulnerabilities expressed by refugee callers with respect to shelter, sites, and NFIs from Jan – Jul 2020.

Before the COVID-19 pandemic, the single largest request presented to the helpline was for plastic sheeting (42) and other construction materials (20), mostly from Kyangwali. Construction materials were most often requested by PoC who had recently been given land, while requests for plastic sheeting were more often due to existing sheeting being worn out and complaints of leaking when it rained. Furthermore, in 26 instances, callers requested a shelter for themselves, most often in scenarios in which the PoC had recently arrived or had previously been renting or staying with friends and relatives, now finding themselves needing their own accommodation. These calls most frequently came from Nakivale. Finally, in the case of 14 calls, PoC requested support for constructing or renovating homes. All 14 calls were made by adolescents, PSNs, single mothers, and other people in varying situations of vulnerability who indicated having limited ability to construct or renovate by themselves.

> *My father died and I am living with my mother and siblings. We are in need of shelter because the house is worn out and we don't have money to buy building materials. Please contact me.*
>
> *Male, South Sudanese, aged 12-17, Palorinya*

> *The implementing partner had promised to distribute trees for building shelters in this village, but they were sold instead. I would like to know if they were meant to be sold or for refugees.*
>
> *Male, Congolese, aged 18-24, Kyaka II*

> *I am a widow. When I arrived, I was given all NFIs except for the solar lamps which were missing at the time. We were promised lamps, but it has now been two weeks. I feel the darkness is too much.*
>
> *Female, Congolese, 30-34, Kyaka II*

Several issues relating to shelter support were also recounted by callers. The most frequent involved disputes over land that had been allocated to them (12), most frequently from Kyaka II. In these narrative accounts, a lack of support was attributed to the OPM and community leaders by the callers. In another ten occasions, PoC described significant delays in land provision following registration and being forced to remain in the reception center. In other cases (3), callers requested a change in plot location due to being to far from essential services which they required (such as healthcare). Limited evidence could also be gleaned for difficulties arising due to a change in partner, being promised assistance and not receiving any, and experiencing the theft of their construction materials.

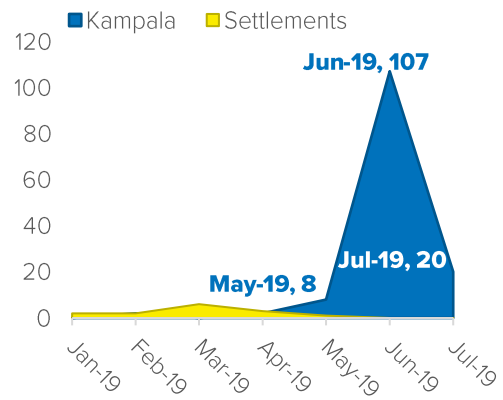
45 requests were made for NFIs. The most frequently cited reasons for needing NFIs were not being provided all the items upon arrival (25), receiving poor quality items which could not longer be used (10), and having items confiscated or stolen (3). Complaints of not having received all items on arrival most frequently came from Kyangwali. Solar lamps were by far the most requested item, followed by mattresses, cooking supplies, jerry cans, simple farming equipment, and mosquito nets.

IMPACTS OF COVID-19

Not surprisingly, the largest COVID-19-related impact recorded under the Shelter, Sites, and NFIs thematic area was an inability to pay rent and requests for rental assistance. Though only based on the random sample of 302 calls, the following graph underlines the shelter insecurity suddenly faced by refugees in Kampala.

Evidence suggests that shelter insecurity was largely an issue experienced during the month of June 2020 in Kampala.

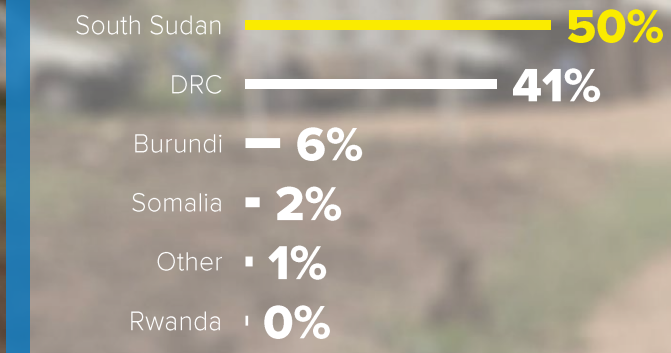
Figure 32: Monthly call numbers regarding rental assistance by settlement region.



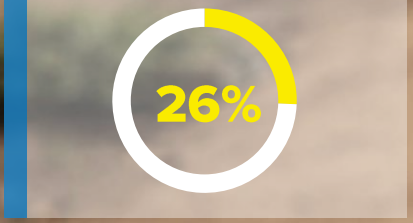
WASH

Contrary to other sectors, South Sudanese PoC represented the majority of callers and a higher percentage of calls were placed from settlements in West Nile region.

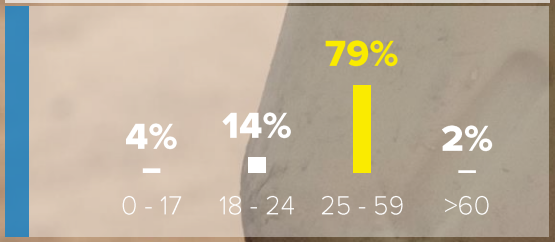
% OF CALLS BY NATIONALITY



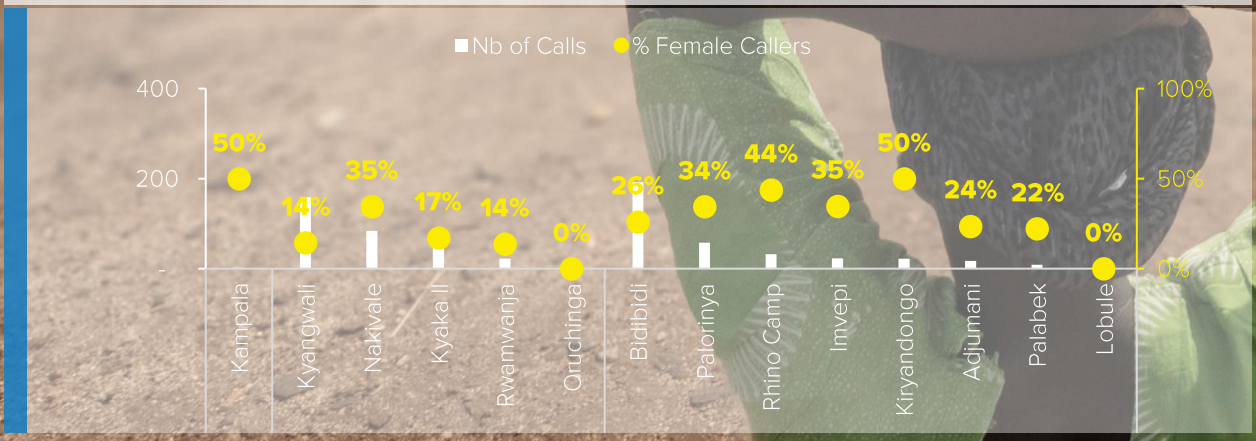
% OF FEMALE CALLERS



% OF CALLS BY AGE GROUP



NB OF CALLS AND % OF FEMALE CALLERS BY LOCATION



Asha Rose Sillah, 30 years old, is carrying a jerrycan of water on her head while walking form the water point to her home. © *UNHCR Uganda, Michele Siblioni.*

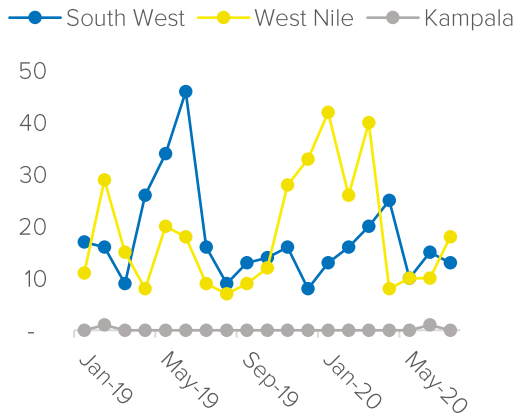
OVERALL TRENDS

WASH received 691 calls since January 2019, representing 1.5% of the total calls. Contrary to all the other sectors, WASH was the one where South Sudanese PoC made the largest percent of calls, at 50%, significantly greater than their percentage within the overall calls (13%). Other than Congolese PoC, all other groups placed less than 40 calls making comparisons by age, gender, and nationality impossible.

The percentage of calls made by women and girls was only 26% with little difference apparent by age. Following country wide call trends, 80% of the calls were made by the 25-59 age group, also with little variation in the age distribution by gender.

Trends in the number of calls varied widely for settlements in the South West and in West Nile.

Figure 33: Monthly WASH call numbers by call region.



The distribution of calls by call region was notable in that the majority of calls were made from West Nile settlements (51%), which is also contrary to the trends apparent in all the other thematic areas wherein the settlements of the South West typically placed the majority of calls. The settlements with the most calls were Bidibidi (23.0%), Kyangwali (23.0%), Nakivale (12.2%), Kyaka II (10.1%), and Palorinya (8.4%). Not surprisingly, Kampala only registered two WASH-related calls.

Following other thematic areas such as livelihoods and food assistance, settlements in the South West experienced higher call volumes much earlier, in June 2019, while the settlements in West Nile had their highest call numbers in January 2020.

> *We don't have clean water in the village and people have started to go to the river which is also not clean. We have reported to the chairman, but he gave no feedback.*
>
> *Male, Congolese, aged 18-24, Kyangwali*

ISSUES, NEEDS, AND VULNERABILITIES

The narrative data of all 137 calls received regarding WASH in 2020 were analysed to help shed light on the issues, needs, and vulnerabilities expressed by refugee callers with respect to the WASH sector.

Water shortage was by far the most frequent issue raised by callers to the helpline (62), with the most common reasons being poor maintenance of community water systems (15), few water sources in the community (10), and irregular water services (8). Less frequently, were mentions of lack of fuel to run water pumps and water source contamination.

Soap was the next most requested WASH item (44), followed by materials for building latrines (16), sanitary materials (10), water cans for handwashing (2), and assistance with waste removal (1). While issues related to water availability and hygiene appear to be split

evenly between settlements of the West and of the South West, 15 of the 16 cases citing a lack of latrines were raised from settlements in the South West (and 11 from Kyangwali specifically).

> *The water defence is requesting us to pay 1,000 UGX to access the water. We are also told we can fetch 25L. But the usage of water with this COVID-19 pandemic has increased and sometimes 25L is not sufficient. But we are denied fetching more.*
>
> *Female, Congolese, 30-34, Nakivale*

The main barrier to accessing WASH services raised by callers was a lack of sufficient communication on the part of the partners, community leaders, and water committees with respect to issues with community water sources or changes to a distribution (42). Callers frequently reported approaching the Refugee Welfare Committees (RWCs) and community chairman for WASH related challenges but not receiving responses. Payment for access to the community water supplies was another issue raised by callers (12). Ten of these calls originated in settlements in the South West, which may reflect the recent introduction of fees for the operation and maintenance of water points in that region. Finally, a few mentions were made with respect to the long distances to water sources (7) and the risk of assault to women and girls.

Very few mentions were made by callers regarding eligibility for receiving WASH assistance, however, a couple will be noted. One complaint was that neighbouring villages had received distributions, but not the village of the caller. Another underlined that assistance efforts at times overlooked the more rural villages. Lastly, one complaint was received by a male caller who believed that women benefitted from soap distributions more than men.

IMPACTS OF COVID-19

Following the onset of the COVID-19 pandemic, callers more often referenced the pandemic when relating their troubles with water availability or soap distributions, however, no increase in the number of calls regarding either can be noted. In fact, the average number of WASH calls per month decreased from 39 to 26 in the period of April to June of 2020. Limited references were made to fears overcrowding at the water sources given the infectious nature of the virus. A final difficulty recounted by a few individuals concerned not being able to go to more distant water sources when the community water source was not functioning due to movement restrictions.

> *We are constantly being told to wash our hands as a preventative measure against COVID-19, but there is no water. The borehole broke down two weeks ago.*
>
> *Male, Congolese, aged 18-24, Kyangwali*

4 DISCUSSION

While the main purpose of the report was to identify programmatic gaps, the quantitative and qualitative analyses also underlined some important topics and issues that cut across all thematic areas which are worth examining.

While many sectoral issues were outlined in the sector-specific narrative analyses, as well as the impact of COVID-19, it is worthwhile to look at some of the overall themes detected through the quantitative and qualitative analyses, which apply to many or all of the sectors. They are detailed below in no particular order.

Interpreting the number of calls

Referring back to the nomenclature of calls, we know that Category 1 calls are for feedback, Category 2 calls for information, and Category 3 calls for requests for support through a referral or to make a complaint. So what is the best way to interpret the number of calls by a certain group? There is probably no easy way to interpret the numeric value of calls without reference to call purpose and main topic, but is there anything that this number can tell us?

The closest answer is likely that the number of calls provides an indication of an issue for which the caller/group is responsible within their household, while simultaneously providing an indication of access to the helpline. The act of calling the helpline, for example, indicates having a mobile phone and being in a settlement with sufficient mobile reception. However, it also signals that the caller feels that the issue for which they are communicating is their responsibility. Furthermore, it may provide an indication of knowledge of the helpline and trust in the system or, conversely, a lack of other avenues to which they are able to take their concerns and complaints.

Access of women and girls to critical assistance

Following this discussion on interpreting the number of calls, it may be useful to examine the thematic areas for which the percentage of female callers is particularly low, the argument being that it is these thematic areas where women and girls have the least amount of responsibility and control in the household. The thematic areas having the lowest percentage of female callers include: RSD (21%), Food Assistance (23%), WASH (26%), Livelihoods (28%), Registration (32%), and Legal and Physical Protection (33%). Conversely, the percentage of female callers is higher with respect to Resettlement (41%), Community-based Protection (45%), Shelter (46%), and Education (46%). Women and girls are, not surprisingly, a majority among issues relating to Child Protection (59%) and GBV (62%). What does this tell us?

First, the thematic areas in which women and girls are underrepresented offer some of the most important types of assistance including food and cash assistance and individual registration. While this evidence is not conclusive, it is sufficient to indicate that further investigation is required.

Second, the small percentage of women and girls calling regarding Legal and Physical Protection may provide an indication that their access to protection and legal pathways and support are weak. As a counterpoint, women and girls have better representation with

respect to Community-based Protection, which makes sense given that many of the analysed calls under this thematic area related to support for persons in situations of vulnerability, for example, PSNs and single mothers. Relatedly, women and girls make a higher percentage of the calls with respect to issues regarding children, such as child protection and education. One interesting finding which provides support for this observation, was that female callers for education most often identified as caregivers, while male callers most often identified as students. One could perhaps conclude that it appears that women and girls mainly call about issues to do with their safety and the safety of well-being of their family, while men and boys mainly call for issues concerning providing for the family.

Finally, it may be fruitful to examine the factors that contribute to Somali women and girls placing the majority of calls across all thematic areas and whether there are learning that can be applied to other groups. The same can be said for the few locations were women and girls are close to making the majority of the calls and inquiring whether there are important differences between those settlements and others where the participation of women and girls are particularly weak. As a reminder, those locations are Kampala (46%), Nakivale (49%), Palorinya (48%), and Adjumani (54%).

Trends over time and by call region

It is interesting to note that even excluding Kampala, the settlements in the South West account for 54.8% of the calls. Furthermore, through an examination of the entire dataset of calls, as well as the data by sector, a trend in the settlements in the South West becomes apparent: an increase in the number of calls in the first half of 2019, followed by a dramatic decrease in July of the same year. This particular trend can be seen to some degree in every thematic area other than food assistance. Conversely, in the settlement of West Nile, an increase in calls in late 2019 / early 2020 can be noted by examining particular thematic areas such as: Education, Food Assistance, Livelihoods, Shelter, and WASH. In other thematic areas call numbers were negligible with limited visible trends. In Kampala, all trends related to the COVID-19 pandemic, and specifically relating to the impacts to livelihoods and shelter insecurity. This is not surprising as urban refugees are typically not eligible for various types of support.

What may be valuable is to reflect upon what contributed to the rise in call number in the first half of 2019 and what contributes to the differing trends between settlements in the South West and in West Nile. Was there more outreach to the settlements in the South West and can this approach be replicated elsewhere?

South Sudanese calls for Registration, Resettlement, and Protection

More than other groups, South Sudanese PoC are underrepresented with respect to certain sectors, mainly Resettlement, Registration and RSD, and all Protection sectors. Conversely, they are more likely to make calls regarding for Education, Food Assistance, Livelihoods, and WASH support. This lower uptake of the FRRM helpline among South Sudanese PoC is likely related to the poor mobile coverage in those settlements, along with a cultural preference for in-person reporting.

With respect to this same group, it bears noting that the 0-17 and 18-24 age group made a higher percentage of the calls than among PoC of other nationalities. Other recent studies have noted that South Sudanese

adolescents seem to be well equipped with phone or have had better/ easier access to phones. In addition, South Sudanese adolescents form a significant part of the overall case load of unaccompanied children with a strong perception on accessing their rights, assistance and reaching out for help. This group are seen to have a strong level of self-advocacy which might lead explain the previously mentioned finding.

Communication and handovers by implementing partners

Perhaps the largest complaint that could be detected across all of the thematic areas examined in this study was insufficient communication with PoC concerning assistance and gaps in the handover process when one implementing partner is replaced by another. Communication deficiencies on the part of the partners could be noted in the calls by the frequent confusion regarding the assistance to be received, eligibility for assistance, and distribution schedules. With respect to the second issue, it was evident that some protection and health cases had experienced delays as a result of a change in implementing partners. It might be good to consider whether these issues require further investigation and follow-up, though taking into account the enormous efforts already undertaken by partners during a handover.

The helpline is an important conduit of information and support for refugees

There is significant evidence that the call centre acts as important support for callers, particularly in the health thematic area where the resolution comments indicate that PoC were provided information on where to go and who to contact to best address their health issues. There is also sufficient proof of follow-up and provision of support for callers who require urgent assistance or referral, whether that be for transportation or medical treatment.

Interestingly, frequent calls were also made relating labour disputes, specifically when PoC had been employed by other NGOs.

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