



**VALIDATION SURVEY ON COMMUNITY NEEDS  
ASSESSMENT IN LUKWANGA PARISH**

**PROPOSED INTERVENTIONS**

**Submitted by Margaret Nsibirwa**

**2013**

## TABLE OF CONTENTS

<b>1.0</b>	<b>PROPOSED INTERVENTIONS .....</b>	<b>3</b>
1.1	WATER AND SANITATION.....	3
	<i>Access to improved sanitation .....</i>	<i>6</i>
	<i>Access to safe drinking water (i.e. supply and quality).....</i>	<i>7</i>
<b>LINKAGES .....</b>	<b>9</b>	
1.2	MATERNAL AND CHILD HEALTH.....	10
	<i>Programme 1 Reducing the mortality and morbidity rate for children under the age of five</i>	<i>10</i>
	<i>Programme 2 Improving access to essential medical services, trained community health leaders and health care providers for mothers and their children; .....</i>	<i>11</i>
	<i>Programme 3 Providing medical equipment to underserved clinics and hospital maternity wards, when provided in conjunction with prenatal care educational activities;.....</i>	<i>12</i>
<b>LINKAGES .....</b>	<b>13</b>	
1.3	BASIC EDUCATION AND LITERACY.....	15
	<i>Programme 1 Involving the community to support programs that strengthen the capacity of communities to provide basic education and literacy to all.....</i>	<i>15</i>
	<i>Programme 2 Working to reduce gender disparity in education .....</i>	<i>16</i>
	<i>Programme 3 Providing training in teaching literacy .....</i>	<i>17</i>
<b>LINKAGES .....</b>	<b>18</b>	
1.4	ECONOMIC AND COMMUNITY DEVELOPMENT.....	19
	<i>Programme 1 Reducing poverty in underserved communities.....</i>	<i>19</i>
	<i>Programme 2 Developing opportunities for productive work; .....</i>	<i>22</i>
	<i>Programme 3 Community infrastructure projects.....</i>	<i>23</i>
	<i>Programme 4 Building the capacity of entrepreneurs, community leaders, local organizations, and community networks to support economic development in impoverished communities; .....</i>	<i>23</i>
<b>LINKAGES .....</b>	<b>25</b>	
<b>2.0</b>	<b>ACTIVITY PLAN.....</b>	<b>27</b>
2.1	WATER AND SANITATION.....	27
2.2	MATERNAL AND CHILD HEALTH.....	29
2.3	BASIC EDUCATION .....	31
2.4	ECONOMIC AND COMMUNITY DEVELOPMENT.....	33
<b>3.0</b>	<b>TOTAL BUDGET.....</b>	<b>36</b>

## **1.0 PROPOSED INTERVENTIONS**

Based on the assessment done and consultation with the community of Lukwanga it was suggested that the core focus areas should be:

### Disease prevention and Treatment

- promoting disease prevention programs, with the goal of limiting the spread of communicable diseases and reducing the incidences of and complications from non-communicable diseases;

### Maternal and Child Health

- reducing the mortality and morbidity rate for children under the age of five;
- improving nutritional needs specifically for children under the age of five.
- improving access to essential medical services, trained community health leaders and health care providers for mothers and their children;

### Water and Sanitation

- providing equitable community access to safe water, improved sanitation and hygiene;
- and supporting programs that enhance communities' awareness of the benefits of safe water, sanitation and hygiene

### Basic Education and Literacy

- involving the community to support programs that strengthen the capacity of communities to provide basic education and literacy to all
- working to reduce gender disparity in education

### Economic and community development

- building the capacity of entrepreneurs, community leaders, local organizations, and community networks to support economic development in impoverished communities;
- developing opportunities for productive work;
- reducing poverty in underserved communities;

The total cost for the proposed intervention is estimated at Ushs 282,992,002 or USD 108,837. The breakdown of the costs is shown by each focus area.

## **1.1 WATER AND SANITATION**

About (47%) of the rural population in Uganda is estimated as having access to clean safe water according to UBOS. The scope eliminates a large percentage of the population mainly the poor who struggle to access safe water. Sanitation is a far cry and toilets are a privilege for a few. Whereas the government policy on treatment has been active, absent is an outreach programme for accessibility and disease prevention.

From the validation survey, a number of key issues and concerns spell the essence of the BCC assignment. Behavioural Change Communication (BCC) programme will create awareness, and prevent health related diseases that affect this community and improve the quality of the lives of the poor communities in Lukwanga Parish. In addition:

- Provision of easy access to safe water will drastically reduce on water bourne diseases and time taken to access water and serve 962 students in four villages.
- Access to basic sanitation and proper hygiene practices will significantly enhance the health and wellbeing of this community.
- By working with the district water officials, together with the community leaders the club will embark on improving the accessibility to safe water and basic sanitation and improved sustainable hygiene.

### **Programme 1: Supporting programs that enhance communities' awareness of the benefits of safe water, sanitation and hygiene**

The intention is to support programs that enhance communities' awareness of the benefits of safe water, sanitation and hygiene. This should prompt behavioural change where currently 30-40% of the population in Lukwanga suffers from poor hygienic practices.

- This programme targets all households, schools and other institutions in the approach it is effected.
- The information and educational materials translated into vernacular are distributed in all key areas where they can be read by the entire community.
- In addition the launch and community sensitisation programmes are part of the activities that target the entire community.

The Rotary Club will engage Wakiso local government on the modalities and implementation of the programme who have shown interest in collaborating with the rotary club.

#### **A The Behavioural Change Communication programme**

The Behavioural Change Communication programme is to raise awareness on environmental health issues such as excreta disposal, access to clean water, solid waste management, drainage, personal and environment hygiene and greening. The activities suggested will be i) launch of the programme in the eight villages ii) distribution of materials in key strategic places iii) mobilisation and sensitisation of the community iv) house to house sensitization. This entails monitoring all activities as they are undertaken to measure impact.

The Proposed activities will be phased in three stages: The first step will be to develop the materials for the communication program.

- **Posters:** to be developed to target the communities, with a purpose of providing information on the desired practices for behavior change. Each village will be allocated 10 posters estimated at US\$ 15,000 each.

- **Brochures:** to be developed to target the households, students, community leaders and RCCs. They provide in-depth information on the importance of desired practices for behavior change as well as examples for those practices. 200 brochures per village each at Ushs 1600 will be distributed.
- **Flip Charts:** to be developed to target the RCC trainers and community mobilisers to aide them during community behavior meetings and when conducting interpersonal dialogue sessions. This applies to both group and individual communication sessions. Two flip charts per village each at Ushs 150,000 including designing costs will be provided to the trainers.

The second step will be to orient the RCCs, and local leaders to effectively promote behavior change in their respective localities.

- **Orientation of RCCS and local leaders on communications skills:** this is basically targeting RCCs and community mobilisers and trainers to enhance their communication for behavior change. This is part of the exit strategy.
- **Mentoring and Coaching of RCCS and local leaders and community leaders:** this targets RCCs and community mobilisers and trainers as well as the community leaders to ensure they have a practical experience for promoting behavior change in their respective localities. This should take three days and cost Ushs 300,000

Thirdly commence on the exercise of behavioural change. The cost to the Rotary club will be Ushs 300,000 for the launch and Ushs 800,000 for mobilisation costs in all the eight villages.

- **Community sensitisation days;** this targets the population where the community is mobilised at an identified place for sensitisation
- **House to house home improvement through communication:** this targets the households at home by providing information on the desired practices for behavior change. It is effective as it provides opportunity for practical demonstration of the practices on site.
- **Community meetings:** these are held to target all community residents, workers in that community, community leaders and any significant other. They give an opportunity to the mobilisers to share information on the desired practices for behaviour change. They also give opportunity to the audience to give feedback in terms of sharing experience (testimonies) questions or raise issues for clarity or suggested recommendations

Lastly prepare to exit

- **Stakeholder's meetings:** these will include community leaders, RCC. It is intended to give feedback on the BCC campaign with issues raised, suggested recommendations for sustainability. This will be the last activity at the end of the campaign.

- **Monitoring and evaluation:** monitoring of the campaign will be an on-going activity. It will be climaxed by an evaluation exercise to determine the impact of the campaign.

**Table 1 Areas of Focus**

Area of focus	Expected Behaviour change	Outcome Indicator
Safe water	Collecting water from a trusted source rather than a well	No of people using water from the tanks
	Maintenance of the water facility	By observation is the facility clean and functional'
	Prompt payment	No. of pple paying
Sanitation: Solid waste disposal	People sorting garbage for recycling	No. of people sorting garbage for recycling
	People with a system of waste management	No. of people with a functional system of garbage collection and management
Sanitation: Toilet Hygiene	People using toilets	No. of pple using pit latrines
	People maintaining the toilets	No. of toilets in a good state/clean
Drainage systems	Regular maintenance of the drains	No. of pple who regularly maintain drains around their homesteads
	Not dumping solid waste in the drains	No. of clean drains
Watershed management	<ul style="list-style-type: none"> <li>•Reduced pollution and other wide-ranging environmental issues</li> <li>•Increased awareness and interest in their watershed</li> </ul>	No of clean water sheds

## **Programme 2 Providing equitable community access to safe water, improved sanitation and hygiene**

### **Access to improved sanitation**

This programme will aim to provide equitable community access to improved sanitation and hygiene. The aim will be to i) reduce on health related diseases from poor hygiene affecting approximately (40%) of households in Lukwanga Parish. ii) reduce on environment degradation from excreta disposal and plastic bags (buveeras).

The proposed intervention is to

- Construct (4) four fully complete pit latrines in each of the 15 schools within the parish to provide them with an opportunity for better healthful living conditions. As agreed in the focus group discussion the community will dig the pit latrines and construct the toilets. We expect the local leaders to persuade the community in participating in this activity. The estimated costs for each pit latrine is Ushs 100,000

- Provide a push to approximately (40%) 624 households that fall under the poorest of the poorest. There are an estimated 1952 households of which 80% are living below the poverty line. The community will be persuaded to dig and construct the pit latrines at a small cost as the rotary club provides the slabs We estimate the labour costs at Ushs 5,000 per pit latrine and materials at Ushs 50,000
- For the rest of the households organise demonstration of construction of a pit latrine with the intention of persuading the households to build their own pit latrines. We will ensure the availability of materials for purchasing by the households.

This should impact on 577 girls from at least four villages who may refrain from going to school because their schools lack private and decent sanitation facilities and reduce on the number of members of the households who fall sick.

### **Access to safe drinking water (i.e. supply and quality)**

We intend to provide equitable community access to safe water:

- targeting 5 schools i.e Nabukulu primary school, Gimbo primary school, Lubiri High school, Kanya Memorial primary school and Sofia Muslim primary school
- 1610 households in the six villages of the parish.
- and aim to impact on 7000 people.

In reality women and children spend one hour carrying water a disincentive to female education. Less time spent on obtaining water and more time doing more productive work should enhance the livelihoods of the community.

We propose to work with the district water officials who in most cases have carried out feasibility studies and are aware of the water source, water distribution system and water reservoirs in the different villages. However, all these require a detailed baseline needs assessment and analysis. For instance this should necessitate a comprehensive watershed plan to identify the characteristics of the watershed and inventory the watershed's natural resources. It is important to establish a baseline of the overall nature and quality of the watershed in order to plan properly for the improvement of the resources in the watershed and to actually measure those improvements.

We will therefore collaborate with the district water officials in determining the best modalities in the construction of water supply in the parish and implementation. We will put aside Ushs 1,000,000. The model to be adopted will be based on:

- Determining the operational cost for the households

- Deriving a combination of bore holes, water harvesting from an elevated position where an opportunity of water harvesting can maintain 100,000 litres of water and distribute piped water to households using gravity.
- We will determine the availability of land where the tanks will be installed. This will be done through the collaboration of the local leaders, the community and the water district official
- For schools we intend to construct water tanks with a capacity of 10,000 litres, each estimated at Ushs 3,600.000. There will be 5 tanks of the capacity of 10,000 litres.

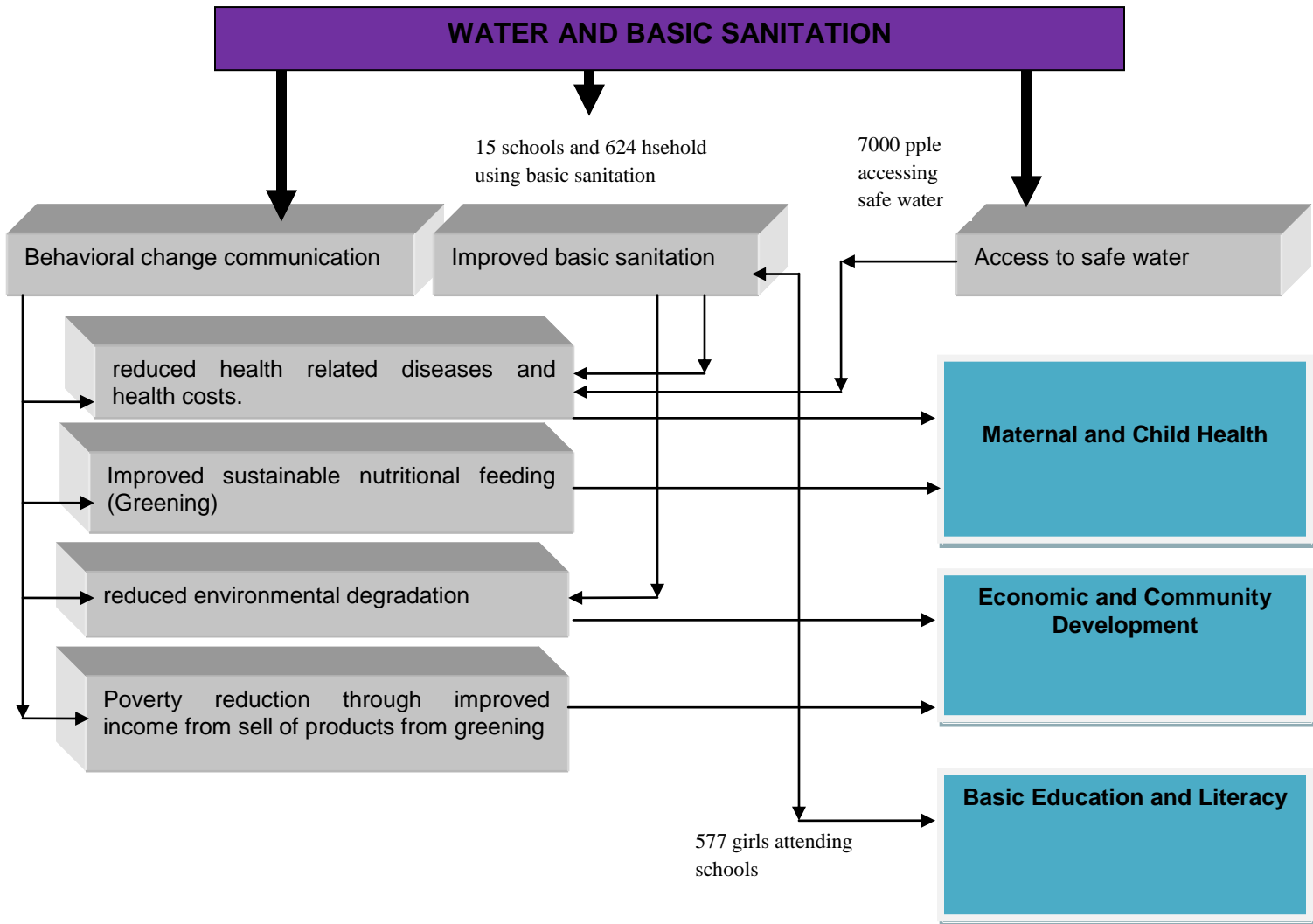
In addition install a biosand filter for each school as one of several water treatment technology options. The biosand filter is proven to remove the disease causing organisms found in water.

**Table 2**  
**Water and Sanitation costs**

Item	Quantity	Total Cost USHs	Total Cost USD
BCC Campaign		12,300,000	4,731
Water tanks	7	26,200,002	9,692
Other accessories		21,490,000	8,265
Construction of pit latrines	1,655	250,620,000	96,392
<b>Sub Total</b>		<b>310,610,002</b>	<b>119,081</b>



# LINKAGES



## 1.2 MATERNAL AND CHILD HEALTH

At the moment the club undertakes quarterly medical camps at Hope centre clinic. The community has benefitted from this service. The Rotary club of Kampala central is bringing health home to 3,000 rural poor women, children, youth and men in order to reduce incidences of maternal and child mortality, effects of HIV and Aids, malaria and other preventive diseases. The key problems facing this community are:

- Malnutrition of children under five years of age. Providing appropriate nutrition is still a battling struggle in Uganda as statistics show that Uganda has a high rate of child malnutrition almost two out of five children were stunted.
- Lack of access to essential medical services
- Early adolescent pregnancies
- and high incidences of malaria cases.

Yet through intervention the Rotary club can address the problems affecting 30% of children in the parish who fall sick in a year (330).

Relevant intervention areas will include:

- reducing the mortality and morbidity rate for children under the age of five
- improving access to essential medical services, trained community health leaders and health care providers for mothers and their children.
- disease prevention programs
- Supported activities that address food security and better nutrition for the children and the elderly and impact on at least 1103 children under five years of age in six villages.
- sensitization of nutritional awareness for children under five years of age

### **Programme 1 Reducing the mortality and morbidity rate for children under the age of five**

**Interventions to combat non-communicable diseases like malaria, for mothers and children under five and improve health status**

#### **Malaria Programmes**

Child death although rare is mostly attributed to malaria and diarrhea. Preventable but killer diseases associated with lack of primary health care, ignorance and poor hygiene. Although, (over 70%) of households in the parish use mosquito nets, there is still a large number of incidences of malaria cases reported.

- By scaling-up interventions through sensitisation and provision of mosquito nets to children under five, incidences of malaria cases should reduce for at least 1103 children under five and expectant mothers..
- We intend to purchase 1500 for nets at Ushs 5,000.

- The district health officials have malaria programmes that sensitise and distribute mosquito nets within the community. By working in collaboration with the district health officials, the Rotary club will incorporate the modalities used by the local government and lean on them for support in human resources.

### **Disease prevention programs**

- Sensitisation in disease prevention programs and nutritional campaign awareness to improve on child development.
- This will be specifically in behavioural change to promote a cleaner environment. This will be incorporated in the BCC campaign
- The disease prevention programs will aim to reduce on mosquitoes known to breed where there is stagnate water and in un-hygienic places. Reduce on health costs where households spend (Ushs 30,000) on treatment in a month and lose 7 days of productive work and reduce on the (30%) of people affected yearly.

## **Programme 2 Improving access to essential medical services, trained community health leaders and health care providers for mothers and their children;**

### **2.1 Medical camps**

In order to respond to the need for easy accessibility to health services continued support for the quarterly medical camps will be necessitated as capacity for trained personnel is built and necessary requirements in the short run are met.

A high percentage of the population still suffers from lack of access to medical services. The medical camps will be quarterly at an estimated cost of UShs 2,500,000 each quarter. The estimated number of people to target is 3000. We expect more people to be treated for Malaria and other general preventive treatments as records show that at least seven out of ten people attending the clinic are malaria cases.

**Table 3  
Medical Camp costs**

<b>Item</b>	<b>No</b>	<b>per unit</b>	<b>Total</b>
HIV/AIDS counseling and testing	500	2,500	1,250,000
Dentals	250	2,000	500,000
Maternal and Child Health	100	1,500	150,000
Malaria and other general preventive treatment	1000	5,000	5,000,000
Immunization campaign	250	1,500	375,000
Reproductive health	350	2000	700,000
Cancer screening	550	4000	2,200,000

<b>Total</b>	<b>3,000</b>	<b>10,175,000</b>
--------------	--------------	-------------------

**2.2 Support to St Francis Clinic as outlined in Programme 3.**

**2.3 Construction of a Health Centre IV**

The community has donated land measuring approximately four acres. The rotary intends to build a health centre IV and a vocational training school. Once the health centre has been constructed for purposes of sustainability we intend to partner with the government of Uganda. Our partnership will involve all operational and human resource costs to be borne by the government as a government Health centre. Other associated costs will be determined at a later stage.

**2.4 Training and/or “train the trainer” initiatives for maternal and child health professionals and leaders**

We intend to train 80 village health workers i.e 10 per village. By training 80 Village Health Workers (VHW) in the area of maternal and child health should drastically improve on out reach down to the grass root level. Many VHW are adults yet the larger population in Lukwanga is adolescent and therefore a selection of VHW will be drawn among the youth. The cost of training the health workers for 14 days is Ushs 1,400,000.

- We intend to work in close collaboration with the district hospital in the provision of support to St Francis Clinic and training of the village health workers.
- This will be specifically in the provision of education in prenatal activities and other related diseases;
- and support training initiatives for maternal and child health professionals and leaders.

**Programme 3 Providing medical equipment to underserved clinics and hospital maternity wards, when provided in conjunction with prenatal care educational activities;**

To sustain improved access to health services in the intermediary stage provisions will be established. The rotary club intends to draw up a MOU with St Francis

Clinic to provide subsidised treatment for this poor community. We will therefore:

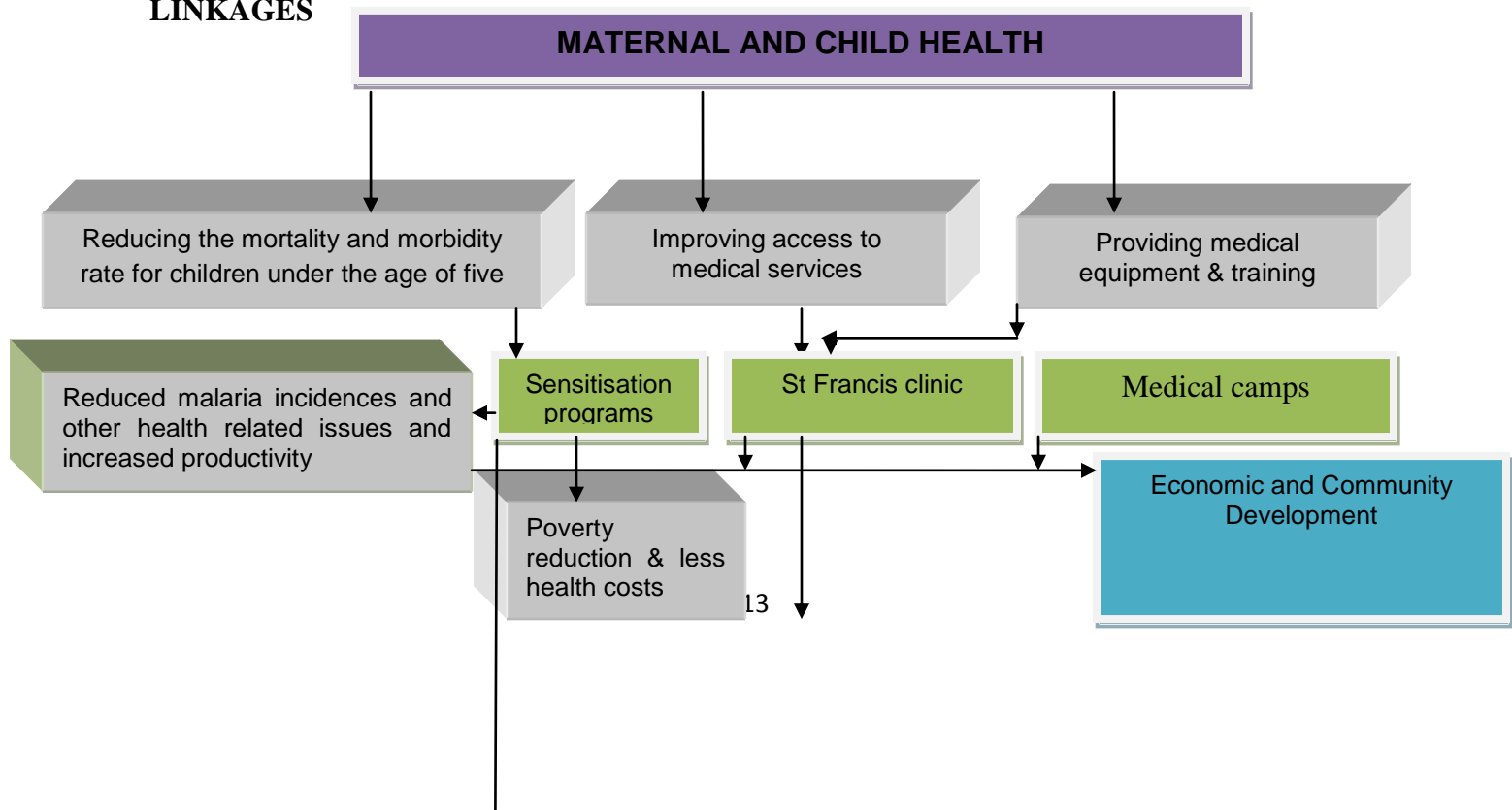
- train the mid wife in pre natal educational activities and support in the provision of equipment and other facilities.
- provision of malaria tablets, 20 mosquito nets at Ushs 2,500 each and RTB plastics.
- Supply of equipment specifically a Stethoscope examining blood machine, resuscitation equipment, Armaburg and a steriliser machine
- Facilities to accommodate more patients i. e beds, blankets and mattresses

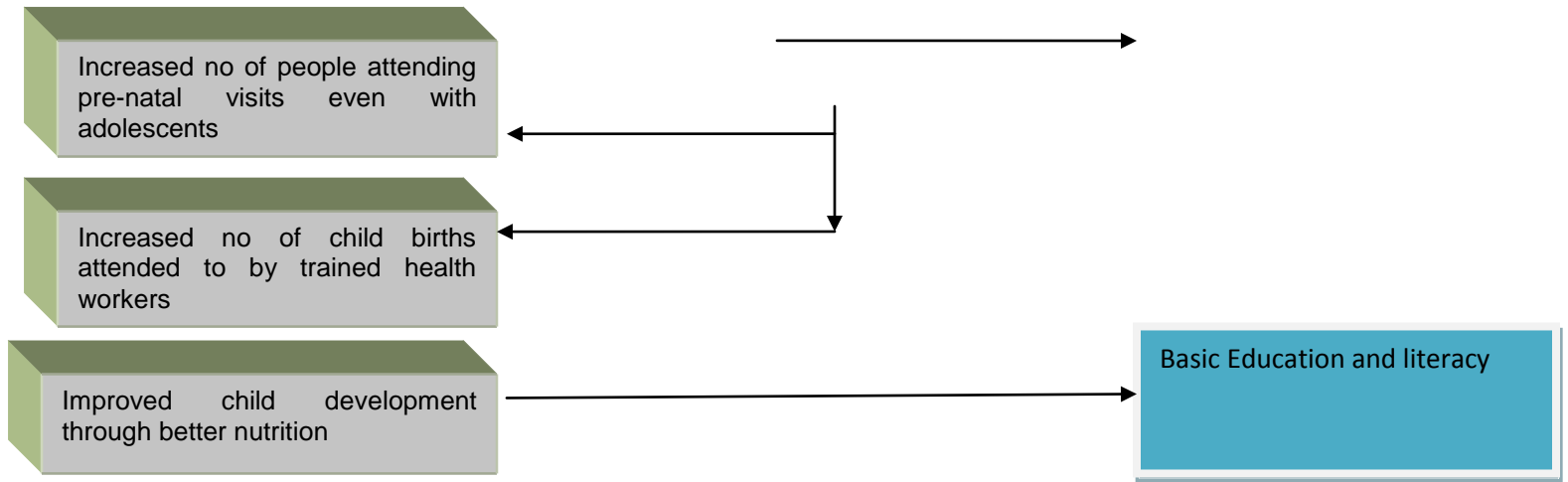
The aim is to equip the clinic to take up services currently being supported by the Rotary club. The equipment will cost Ushs 30,000,000

**Table 4 Maternal and Child Health costs**

Item	Sub Items	Qty	Total Cost USHs	Total Cost USD
<b>Reducing the mortality and morbidity rate for children under the age of five</b>			7,900,000	3,038
<b>Access to essential medical services</b>			11,400,000	4,378
	Construction of Health Centre	1		
	Medical camps	4		
	Training of health workers	40		
<b>Providing medical equipment</b>			16,500,000	6,346
<b>Sub Total</b>			<b>35,800,000</b>	<b>13,763</b>

**LINKAGES**





### 1.3 BASIC EDUCATION AND LITERACY

The policy for free primary and secondary education in Uganda provides for an opportunity for all children to attend school but it has its many challenges. However, absent is an outreach programme that spreads out to the poor and marginalised women, children and men (approx 80%) of the population to present them with opportunities to move out of poverty.

The proposed interventions will involve the community to support programs that strengthen the capacity of communities to provide basic education and literacy, work to reduce gender disparity in education and provide training in teaching literacy.

The following will be our partners for collaboration in the implementation of this project:

- We propose to partner with Shimoni Primary Teachers' Training College, which was relocated from Kampala city centre four years ago to upgrade the teacher's skills.
- Girls, Women and Men who have succeeded in graduating from University will be our peer motivators.
- Service provider's i.e Artistoc book shop in the provision of text books and scholastic materials and other selected providers for the additional items.

#### **Programme 1 Involving the community to support programs that strengthen the capacity of communities to provide basic education and literacy to all**

By strengthening educational experience through improved materials and facilities the beneficiaries estimated 1088 students from 10 schools will be able to access improved quality education.

- in reality every 3 students in Lukwanga parish share one desk
- 95% of the students do not have text books and scholastic materials
- schools are normally confronted with children involved in some sort of accidents and are not able to provide treatment
- education for the girls is uncertain with early pregnancies and missing out of school during period
- there is lack of form of recreational activities in Lukwanga schools

We propose to:

- i) Provide desks and chairs to the schools that although are dedicated to providing quality education to their students are finding difficulties in meeting certain standards. There are on average at least 30 students per class. The intention is to provide schools with desks and chairs for the primary six and seven classes or senior five and six for the secondary schools. to Nabukalu primary school, Kamyia memorial school, Lubiri high school, Good hope primary school and Gimbo primary school. This should elevate the performance of the students in preparation for their exams. We intend to provide 280 desks and chairs at Ushs 50,000 and Ushs 20,000 respectively

and create an opportunity for the students to study in a more conducive environment.

- ii) Supply first aid boxes to ten schools with an estimated 1289 children at Ushs 150,000 each.
- iii) Encourage recreational activities through the provision of 10 football gears at Ushs 750,000, volley ball at Ushs 450,000 and net ball equipments at Ushs 500,000 to ten schools that should effectively promote team work and a sense of direction for the children that lacks within the poor communities. The estimated cost is Ushs 17,000,000.
- iv) Construction of blocks of classrooms  
Good Hope, Kanya memorial school, Gimbo and Nabukalu schools are still struggling to provide a respectable education for their students. Two additional blocks of classrooms should uplift the dire situation faced by at least 140 students presently studying under a tree. The community will contribute towards stones etc and the rotary club will top up and purchase 15,000 block at Ushs 220, 28 bags of cement at Ushs 30,000, 28 Iron sheets at Ushs 28,000, 28 timber at Ushs 150,000 and 8 windows at Ushs 120,000.
- v) Finishing of classroom floors  
If we can prevent jiggers from spreading to 603 children at Good hope and Nabukalu primary school and offer a clean environment for the children to prosper this should not only inspire the children to progress but prevent diseases that will otherwise keep them from school. We will purchase 4 bags of cement at UShs 30,000 and four lorries of sand at Ushs 50,000.
- vi) Supply Text books and Scholastic materials  
In pursuit of increased literacy and reduction of school dropout levels, the project will equip Good Hope primary School, Kanya memorial school, Nabukalu primary school, Gimbo primary school with, 400 books and other scholastic materials at Ushs 5000 per book. If we can supply text books and scholastic materials to four schools the teachers and students will benefit from improved teaching materials; teaching will becoming more relevant to the students; students will be able to read more.

### **Programme 2 Working to reduce gender disparity in education**

In order to reduce on gender disparity we intend to support school girls to ensure their continued attendance of class throughout the year.

- i) distribute 500 packets of sanitary pads at Ushs 2000 for the adolescent girls that should abet in absenteeism of the girls from schools who make up roughly 1 in every 10 girls in Lukwanga parish.



- ii) support girls education through counseling of parents. Girls education starts at home. Approximately 321 children in four of the villages do not go to school roughly 20% are girls. Counseling of parents on the importance of education and poverty alleviation should be addressed through counseling session programmes. A team of RCCs will be trained for seven days at Ushs 300,000. mobilise and carry out this exercise. Other costs are estimated at Ushs 700,000. This programme should aim to empower 80 households and provide an opportunity for education to girls.
- iii) Sensitise children on the importance of education specifically girls. Girls without the privilege for exposure and guidance are more vulnerable to early pregnancy or marriage. Early pregnancy is becoming more rampant as more than 40% of girls are victims to early pregnancy in Lukwanga. We recommend 10 Student exchange programs at Ushs 100,000 with other advanced schools for exposure

We propose to work with Girls, Women and Men who have succeeded in graduating from University to be the peer motivators. Through inspiration talks we hope to provide alternative opportunities to encourage youth to pursue better careers as their progress away from poverty.

### Programme 3 Providing training in teaching literacy

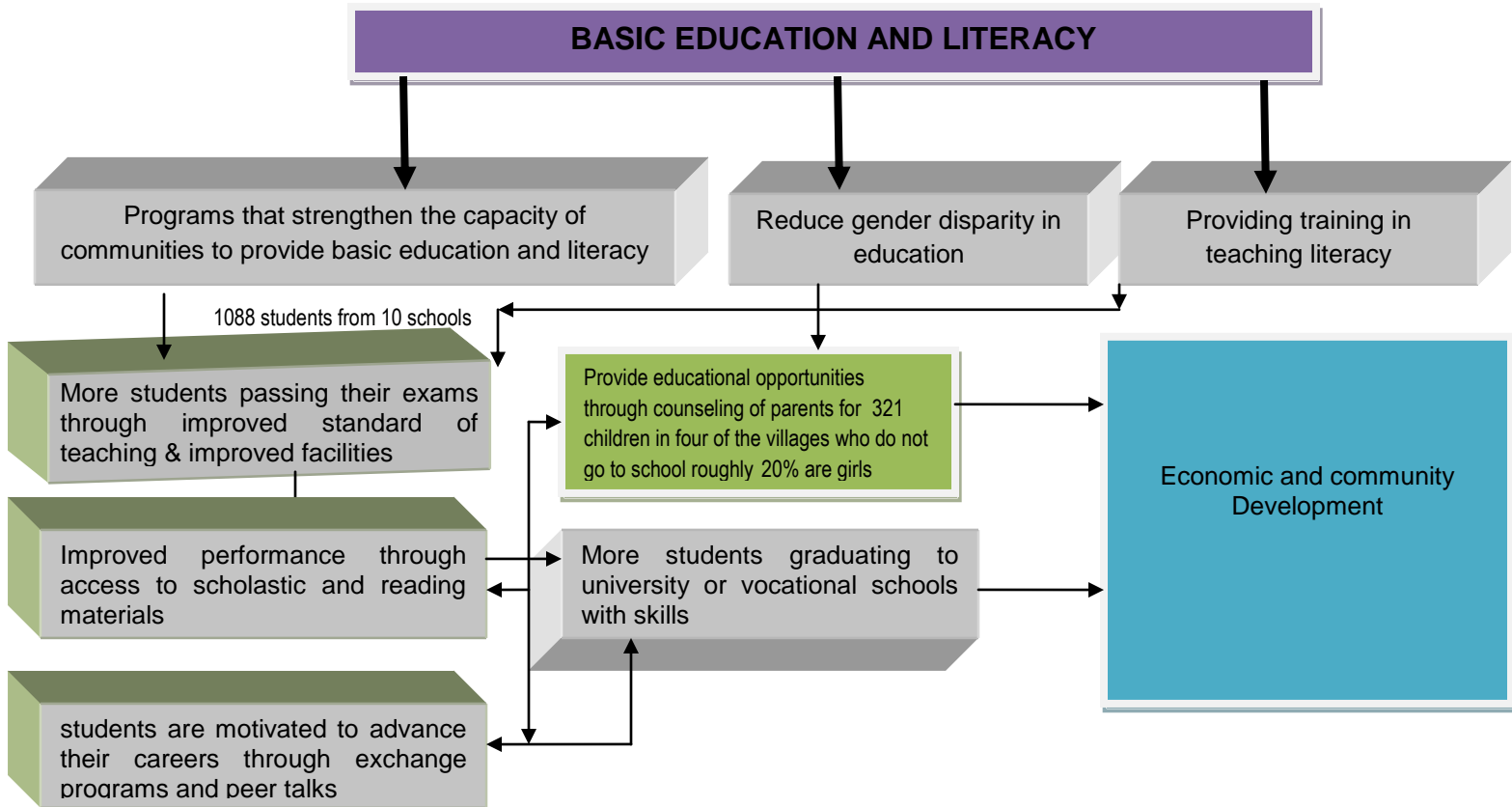
The competence of teachers is crucial in educating of our children. In practice the poor communities are not privileged to source and afford qualified teachers. Through improved and upgrading of skills of teachers should we expect more students to progress to advanced levels with more opportunities of moving out of poverty. We propose to train 56 teachers at Ushs 300,000 during the vacation for a period of two months in basic teaching skills.

**Table 5 Basic Education and Literacy**

Item	Sub items	Qty	Total Cost USHs	Total Cost USD
Programs that strengthen the capacity of communities to provide basic education and literacy to all				
<b>School Supplies</b>			39,800,000	15,308
	Desks and chairs	280		
	First Aid Boxes	10		
	Recreational gears	30		
	Text books	400		
<b>Construction of block of classrooms</b>		3	30,342,000	11,670
<b>Finishing of classrooms floors</b>		8	2,240,000	862
<b>Upgrading of Teachers skills</b>		56	24,000,000	9,231
<b>Reduce gender disparity in education</b>			24,000,000	9,231
	Sanitary Pads	500		

<b>Student exchange program</b>		10	1,000,000	385
<b>Trainig of trainers (Counseling)</b>		10	2,800,000	1,077
<b>Sub Total</b>			<b>124,182,000</b>	<b>47,762</b>

## LINKAGES



## 1.4 ECONOMIC AND COMMUNITY DEVELOPMENT

There has been a positive move towards poverty alleviation by the government of Uganda through its many policies e.g PEAP. Notably, lacking are community outreach programmes to equip the poor and marginalised groups with basic skills. Yet, if we can reach out and provide them and their children with hope for a brighter future for an estimated 755 students who fail to progress to secondary schools in at least four villages (70% of students) will be equipped with basic skills drastically improving the welfare of 200 households.

### Programme 1 Reducing poverty in underserved communities

This programme aims to demonstrate sustainable agricultural development for subsistence farmers, provide access to financing for women groups and other businesses, encourage growth of businesses, support income generating activities and use of alternative energy sources.

- (80%) of farmers are suffering from low income and low yields in Lukwanga parish;
- Women groups are constrained due to lack of financing and leadership skills.
- Few businesses are available with little hope of alternative income generating activities.
- Where trade is a productive sector lack of business development skills by the business community hampers its growth.
- Accessing energy sources is a constraint

### 1.1 Improving nutritional needs specifically for children under the age of five. (Sustainable agricultural development)

- Farmers will be exposed to different farming activities. Our proposal is to utilise the local government specifically NAADS to demonstrate to the farmers on agricultural practices in rearing and farming.
- This will also include **Training in soil and water management**; The type and fertility of soil determines the crops to be grown. Farmers persistently grow types of crops known to them. This has not been successful in Lukwanga. There are other crops that can be grown if introduced to the farmers and should benefit them in terms of income.
- **Value addition**; To address the issue of food security the farmers should be trained in areas of value addition. During a good harvest the food is spoilt or disposed off at low prices. Converting food e.g bananas into a dried product and stored should benefit (70%) of the children e.g in Nabukulu and Lukwanga village currently going without a proper nutritional meal.

The modalities of priority for agro enterprises will be on ownership of land and availability of at least one acre of land. The training will take 14 days spread out and the club will contribute towards seeds and other inputs at Ushs 300,000. The community will provide the necessary tools and inputs. NAADS will carry out the demonstration exercise at Ushs 50,000 per day.

Households suffer more to feed their families during dry spells. By introducing access to water irrigation during the dry season should respectively improve on yields.

- The proposed intervention on demonstration plots will require training the community in constructing trap ponds. The club will procure 2 bags of cement at Ushs 30,000, the community will contribute towards stones and sand
- The community will provide the necessary tools and inputs
- NAADS will carry out the demonstration exercise for 14 days at Ushs 50,000 per day
- The Rotary club will procure 6 portable triddle pumps at least one pump per village at Ushs 3,000,000.
- The community will select a committee to be in charge of the pumps and a system put in place where the community can access the pump for a fee. This should ideally ensure continuous supply of food to the poor households

## **1.2 Business development**

Our focus will be on mixed farming to support its growth through market and quality development as it is the most economic or productive activity by the community in terms of the amounts and by gender. A study on business assessment and business development strategies for business growth will be done to assess the needs for this sector. The budget is US\$ 2,000,000

In the area of business development Rotary club of Kampala Central will work with Enterprise Uganda. Enterprise Uganda Foundation Limited (EUg) is public-private institution designed to support the government in realizing its objective of promoting the development of Small and Medium Scale Enterprises (SMEs) to become the main vehicle for expanding production, providing sustainable jobs and enhancing economic growth. A team of trainers will be trained for 10 days at Ushs 100,000.

## **1.3 Access to financial services for the poor**

The Rotary club Kampala Central has a partner Rotary District 1040 that provides micro loans varying from €50 to €250. There is no interest charged, no security taken and no legal redress in the event of default. The loans help promote economic development. In order to facilitate the beneficiaries the Rotary club will educate the RCCs in the terms and conditions for accessibility of this loan. The RCCs will then

- Mobilise women, women groups and micro businesses
- Present this opportunity to the community
- Provide support in the application process

#### **1.4 Income generating activities for the poor**

This activity intends to target schools where financial needs have impacted on the delivery of access to basic education. Good Hope School, Gimbo primary school, Nabukalu and Syllabus school, will be supported in tailoring of school uniforms for their students and poultry as an income generating activity to respond to i) improved nutrition for the children ii) provision of scholastic materials and text books iii) improved infrastructure iv) sustainability of activities.

- Construction of the pens will be done by the community with material support from Rotary Club. There will be five pens for five schools. Construction of each pen is estimated at Ushs 1,200,000. Each school will be provided with 500 chicks each at Ushs 2,500 and 10 bags of chicken bags at Ushs 50,000
- Teaching of chicken rearing will be done by NAADS and supported by farmers within the community
- Training in tailoring will be done by selected individuals within the district. The club will procure 4 sewing machines each at Ushs 1,000,000.

#### **1.5 Greening**

We will promote greening through tree planting and to attain environmental health and well-being in the project areas. This should

- improve on soil erosion
- improve on the markedly absence of trees in the community
- provide access to fuel wood
- reduce on climate change
- protect the homesteads from relentless winds
- provide resources for establishments of homes
- provide financial resources and medicinal herbs among others.

A day will be allocated for this. There will be 400 tree seedlings procured at Ushs 10,000.

In order to attain environmental health and well-being in the project areas, we will carry out demonstration plots to provide examples of simple backyard agriculture in space limited setting, the benefits and how this can be done. Over 60-80% percent of this community depend on agriculture for their livelihood but suffer from poverty and low yields. Impact intervention areas focused on improving nutrition through introduction of modern methods of cultivation even on smaller plots, where land fragmentation is now common. It should be remembered that

sustainable agricultural development is about utilisng minimal land with emphasis on high yields.

## **1.6 Promoting alternative energy sources**

Promoting alternative energy sources within the community that is dependent on biomass through sensitisation of the use of briquettes and supporting the introduction of briquettes production and clean cooking stoves in the parish. Facilitation of the provision of briquettes and clean cooking stoves is estimated at Ushs 50,000 for 10 days. Mobilisation costs are estimated at Ushs 100,000 per village.

The local government has been instrumental in this area and the Rotary club will work in association with them. The district headquarters where the district has similar programmes the Rotary club will work in collaboration to integrate efforts for implementation of the proposed interventions. Key among them will be tree planting in Lukwanga, solid waste management, alternative energy resources and clean cooking stoves and sustainable agricultural development.

## **Programme 2 Developing opportunities for productive work;**

The club will scale up interventions through training, related to economic and community development. Vocational training will provide new ways of generating income away from agriculture for this community and do away with youth redundancy. Based on the survey carried out in July 2013, a large percentage of the community supports programs that will strengthen the capacity of communities in basic skills.

The proposed interventions include:

### **2.1 Formation of special groups**

We intend to support the formation of youth, women and farmers groups, for purposes of collective marketing, providing the members with skills and capacity building. By encouraging social group formation a sense of team work and togetherness will be created as they work for a common agenda.

### **2.2 Provide vocational training.**

Vocational training has the ability to uplift the welfare of the community by providing basic skills. We intend to do this in two ways:

- Firstly provide basic skills to primary school students where (70%) of the children fail to progress to secondary school.
- introduce vocational training in Nabukulu primary school, Good Hope primary school, Gimbo primary school, Lubiri High school, Kamyia Memorial primary school and Sofia Muslim primary school
- select teachers for training purposely to conduct vocational training in their respective schools in areas of candle making, sculpturing, clay

products, handicrafts items that are considered essential with a potential market outlet

- Secondly provide training of youth groups i) in book keeping ii) re-cycling and reusing of waste with a view of creating wealth from waste e.g making bags or baskets from maize or matokee (bananas) peels, beads etc
- Other envisaged areas include carpentry, handicrafts, weaving, tailoring, and brick production using environmentally friendly methods
- In the area of vocational training we will engage with (Uganda small and medium enterprise association a non governmental organization that supports vocational and entrepreneur development. We intend to work with them to enhance basic skills of the community and develop opportunities for productive work.

**Table 6 Vocational training costs**

Item	No	Unit cost (UShs)	Unit cost (USD)	Total Cost (USHS)	Total Cost USD
Sewing machines	10	1,000,000	385	10,000,000	3,846
Carpentry items		1,000,000	385	1,000,000	385
Brick machine	1	1,500,000	577	1,500,000	577
Cloth, knitting wool and rubber		1,500,000	577	1,500,000	577
Other accessories		500,000	192	500,000	192
Trainers	5	300,000	115	4,200,000	1,615
<b>Sub Total</b>				<b>18,700,000</b>	<b>7,192</b>

### **Programme 3 Community infrastructure projects**

#### **Installation of Solar Power at the community centre**

The community centre was set up to gather and disseminate information to the community, enlighten and empower the community in computer literacy, act as a networking centre and to solicit income for income generating activities. The centre is headed by a focal group. With the installation of solar power at Ushs 6,500,000 to the centre i) 1153 students from five villages will become computer literate, ii) ably address information needs specifically for the entrepreneurs and iii) encourage students to train in computer skills

### **Programme 4 Building the capacity of entrepreneurs, community leaders, local organizations, and community networks to support economic development in impoverished communities;**

#### **4.1 Training of Local Leaders and RCC members**

The local leaders and RCC members expressed the need to be trained and exposed in leadership skills and the awareness of the Rotary clubs objectives, roles and responsibilities. Exchange programs for local leaders and RCCs in two areas at Ushs 100,000 where the Rotarians are active will be implemented and beneficial during implementation of this project. Awareness of the objectives and roles of the Rotary club will empower the leaders in implementing of the projects.

#### 4.2 Training of trainers

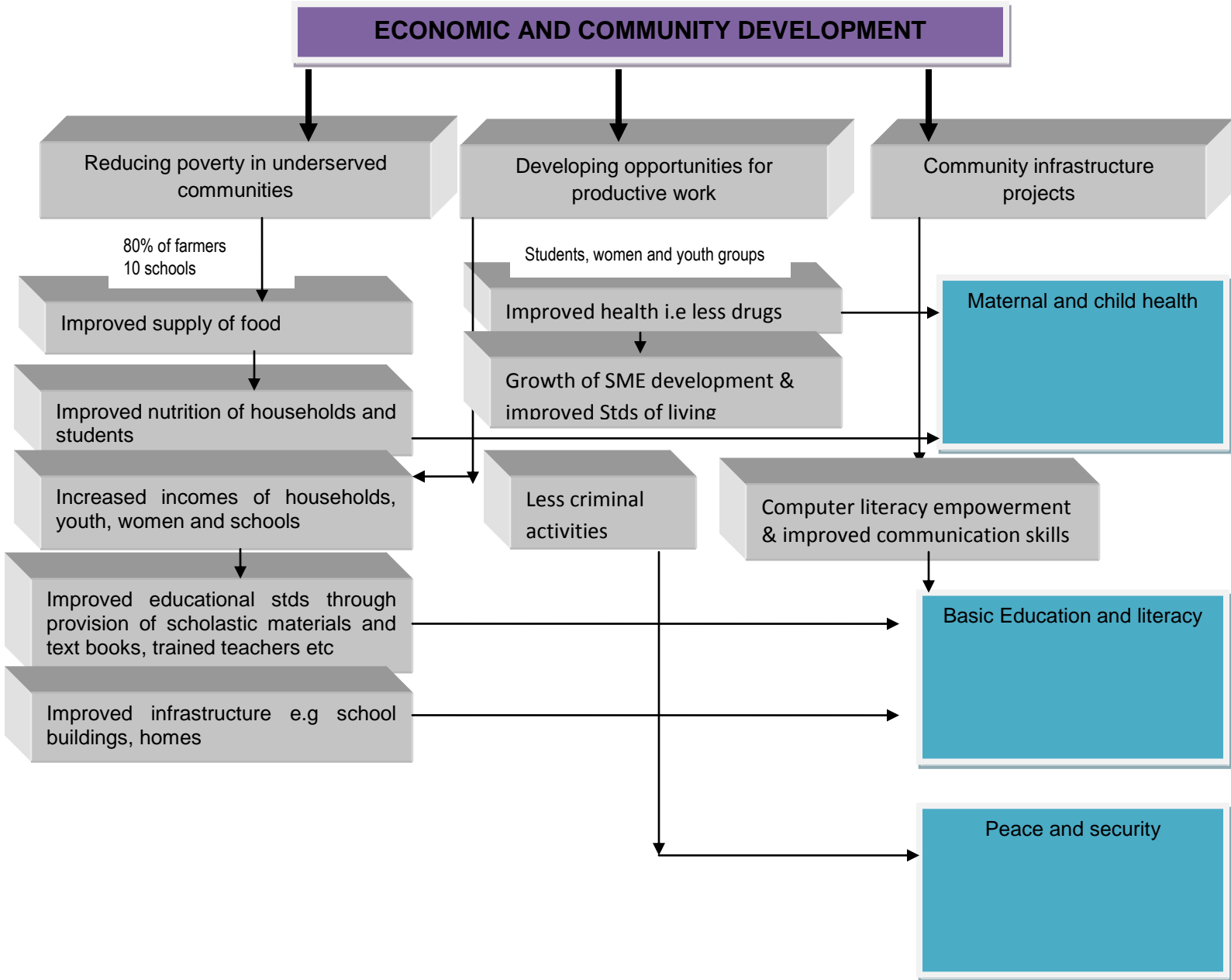
To sustain the economic and community development of Lukwanga parish we intend to train 20 entrepreneurs in different areas of activities for 7 days. The trainer will be paid Ushs 50,000 per day. They will be selected from each of the villages in the parish.

**Table 7 Economic and Community Development**

Item	Sub Items	Qty	Total Cost USHs	Total Cost USD
<b>Reducing poverty in underserved communities</b>			19,910,000	7,658
Sustainable Agricultural development				
	Procurement of pumps			
	Training and other inputs			
Business Development			3,100,000	1,192
Income Generating activities			12,450,000	4,788
	Sewing machines	4		
	Training costs			
	Construction of pens	5		
	Chicks and feed			
Greening			5,000,000	1,923
Alternative energy sources			1,300,000	500
	Facilitation for the provision of briquettes			
<b>Developing opportunities for productive work;</b>	Mobilisation		18,700,000	7,192
	Vocational training			
<b>Community infrastructure projects</b>			6,500,000	2,500
<b>Training of local leaders and RCCs</b>			550,000	212
<b>Sub Total</b>			<b>47,600,000</b>	<b>18,308</b>



# LINKAGES





## 2.0 ACTIVITY PLAN

### 2.1 WATER AND SANITATION

							Months												
No	Task	Activity	Duration	Person responsible	Key Performance indicators	Means of verification	1	2	3	4	5	6	7	8	9	10	11	12	
<b>Improved hygiene</b>																			
1	Production of IEC materials Posters Flip Charts Brochures	Develop messages Thematic areas; • Maintenance of water facilities. • Maintenance of drainage systems • Promoting greening • Sanitation improvement; fecal disposal • Sanitation improvement; solid waste disposal. • Safe water use promotion	Four months	Rotary Club	No. of thematic areas addressed	Direct observation													
2	Launch of the Activities	Identification of launch areas	One month	RCCs and Local leaders															
		Mobilisation of the communities	One month	RCCs and Local leaders															
		Launch of the programme in each village	Eight Days	RCCs, CBOs and Local leaders	Launch conducted	Direct observation													
3	Orientation	Orientation of CBOs and	Three	Rotary Club	No of pple	records													



## 2.2 MATERNAL AND CHILD HEALTH

Months								1	2	3	4	5	6	7	8	9	10	11	12
No	Task	Activity	Action	Duration	Person responsible	Key Performance indicators	Means of verification												
<b>Reducing the mortality and morbidity rate for children under the age of five</b>																			
1	Malaria Prevention	Register households with children under five	RCCs and local leaders register households in the village	One month	RCCs and local leaders	No of households registered													
		Procurement of mosquito nets		One month	Rotary Club	No of mosquito nets procured													
		Sensitisation of cleanliness and prevention of malaria	<ul style="list-style-type: none"> <li>Orientation of RCCs and VHT</li> </ul>	One month	Trainer RCCs and local leaders	No of CBOs, VHT and RCCs trained	Direct observation												
			<ul style="list-style-type: none"> <li>Village meetings and house to house sensitisation</li> </ul>	Two months	RCCs and local leaders	No of children under age 5 receiving medical treatment No of recipients of disease prevention intervention	survey												
		Distribution of nets		Two months	RCCs and local leaders	No of mosquito nets distributed													
2	To address the issue of mal nutrition	Provision of advisory services	<ul style="list-style-type: none"> <li>Contact NAADS</li> <li>Awareness meetings and training of advisors</li> </ul>	One week	Rotary Club	Acceptance of NAADS s No of farmers reporting improved income No of committee	Survey/FGD												

						members active													
		Water Harvesting	<ul style="list-style-type: none"> <li>Identify demonstration plots</li> <li>Construct trap ponds</li> <li>Procure triddle pumps</li> </ul>	One Month	RCCs and local leaders	No of plots identified in the villages Trap pond constructed 8 pumps procured	No of trap ponds Constructed												
		Awareness meetings	<ul style="list-style-type: none"> <li>Empowering mothers</li> </ul>	Two Months	Agriculture Committees VHT	No of mothers reporting improved health of children	survey												
<b>Improving access to essential medical services, trained community health leaders and health care providers for mothers and their children</b>																			
3	Medical outreach programme	Provision of general treatment	Informing the community Medical Camps			Number of communities reporting decrease in cases of disease(s) targeted	Survey												
	Provision of equipment	Procurement of equipment	Procurement and supply of equipment			<ul style="list-style-type: none"> <li>No of equipment supplied</li> <li>No of people treated</li> </ul>	Records/survey/FGD												
	Training		Training of health workers			<ul style="list-style-type: none"> <li>No of individuals reporting better quality of health care services</li> </ul>													

## 2.3 BASIC EDUCATION

Months								1	2	3	4	5	6	7	8	9	10	11	12
No	Task	Item	Activity	Duration	Person responsible	Key Performance indicators	Means of verification												
<b>Involving the community to support programs</b>																			
1	Improved materials and facilities	Procurement and distribution	<ul style="list-style-type: none"> <li>ten first aid boxes</li> <li>280 desks and chairs</li> <li>? sanitary pads</li> <li>11 Football, net ball and volley balls</li> <li>Text books and scholastic materials</li> </ul>	Three months	Rotary Club	No of students passing in first grade	Survey/FGD												
2	Student exchange programs and peer talks	organizational program	<ul style="list-style-type: none"> <li>Select students from five schools Good hope, Gimbo school, Syllabus high school, Lubiri and Sophia</li> <li>Awareness meeting with parents of the intended program</li> <li>Identification and communication with selected schools</li> </ul>	Two months	RCCs and head teachers	No of girls benefiting from the program	FGD												
		Implement exchange program	<ul style="list-style-type: none"> <li>Mobilisation of transportation from the community</li> <li>2 Exchange programs</li> </ul>	Two months	RCCs and head teachers	No of schools visited No of students in he program	Records/survey												
4	Counseling	Counselling sessions	<ul style="list-style-type: none"> <li>Sourcing and Identifying trainer</li> <li>Training of trainers meeting for 10 RCC members for extension awareness</li> </ul>	One month	Trainers	No of RCC active in counseling sessions No of households	Survey/FGD												

Months								1	2	3	4	5	6	7	8	9	10	11	12
No	Task	Item	Activity	Duration	Person responsible	Key Performance indicators	Means of verification												
						reached													
			<ul style="list-style-type: none"> <li>Mobilisation of parents and Sensitisation sessions with</li> </ul>		RCCs and head teachers	No of parents counseled	survey												
		Arrange peer talks	<ul style="list-style-type: none"> <li>Identify peer leaders</li> <li>Conduct peer talks in schools</li> </ul>	Two months	RCCs and head teachers	<ul style="list-style-type: none"> <li>No of peer talks</li> <li>No of students reporting career interest</li> </ul>	survey												
5	Construction of blocks of classrooms and finishing of floors	Procurement of materials	<ul style="list-style-type: none"> <li>Contribution from the c</li> <li>Community</li> <li>Materials purchased</li> </ul>	Two Months	Schools Rotary Club	No of students performing in first grade													
		Construction	<ul style="list-style-type: none"> <li>Construction of three blocks of classroom</li> <li>Finishing of floors of other classroom</li> </ul>	Eight months	Schools Parents Rotary Club	<ul style="list-style-type: none"> <li>No of blocks constructed</li> <li>No of students with improved grades</li> </ul>	Direct observation/records												
<b>To improve the teachers qualification through the provision of training in teaching literacy</b>																			
7			Meeting with heads of schools		Teacher training institution Headmasters	Meeting carried out													
			Teachers Needs assessment			Needs assessment done													
			Sourcing and Identifying trainer			Trainer obtained													
			Providing training in teaching literacy			<ul style="list-style-type: none"> <li>No of teachers trained</li> <li>No of students with improved grades</li> </ul>	Records/F GD												



## 2.4 ECONOMIC AND COMMUNITY DEVELOPMENT

Months							1	2	3	4	5	6	7	8	9		
No	Task	Activity	Duration	Person responsible	Key Performance indicators	Means of verification											
<b>Reducing poverty in underserved communities</b>																	
1	<b>Sustainable agricultural development</b>	Identification of plots for demonstration	One month	RCCs and Local leaders	No of plots with demonstration activities	Direct observation											
		Visit to Wakiso agricultural institution															
		Contact NAADS	One week	Rotary Club	NAADS contacted												
		Demonstration training	Two months	NAADS	No of farmers trained	Survey											
		Mobilisation for tree planting day	Two weeks	RCCs and Local leaders													
		Procurement of tree seedlings for tree planting	One month	Rotary Club													
	Tree planting day	One day	Community	No of trees planted													
2	<b>Business development</b>	Study and assessment of business needs Training	Three months	Consultant Trainer	No of entrepreneurs supported	Survey											
3	<b>Access to financial services</b>	Registration of groups Awareness meetings with groups	One month	Financial inst partner Rotary RCCs	No registered No accessing finances	survey											
4	<b>Income generating activities</b>	Procurement of 10 sewing machines Construction of pens Procurement of chicks	Seven months	Trainer Staff Rotary club	No of trained teachers No of uniforms sewn No of chickens sold	Survey FGD											
<b>Developing opportunities for productive work</b>																	
5	<b>Vocational Training</b>	Identify training teams	One month	Rotary Club	Team identified												

Months							1	2	3	4	5	6	7	8	9	
No	Task	Activity	Duration	Person responsible	Key Performance indicators	Means of verification										
		Procurement of supplies and tools • 10 sewing machines • Knitting wools Cutters	One month	Rotary Club	No of supplies procured	Direct observation										
		• Training of trainers and Training of students	Three months	Trainer	No of trainers and students trained	Survey										
		Group formation	One month	RCCs and Local leaders	No of groups formed	FGD										
		Sensitisation and training of groups	Two weeks	Trainer												
		Identify training place	One Month	RCCs and Local leaders	Training place identified											
		Procurement of machinery	One month		Brick making machinery procured	Direct observation										
		Notification of training and awareness meetings with youth	One week	RCCs and Local leaders	Notification done											
		Training of trainers programme	Two weeks	Trainers	No of training programmes	Records										
		Training of youth and trainers	Two weeks	Trainers	No of youth supported No of productive youth	Survey										
<b>Community infrastructure projects</b>																
6	<b>Construction of a hall and installation of Solar Power</b>	Identification of Land	One month	Focal group RCCs and Local leaders	Plot identified											
		Mobilisation of materials from the community	One month	Focal group RCCs and Local leaders	Materials procured											
		Construction of the hall	Seven months	Focal group	Hall constructed											

Months							1	2	3	4	5	6	7	8	9	
No	Task	Activity	Duration	Person responsible	Key Performance indicators	Means of verification										
		Procurement of solar power	Two weeks	Rotary club	No of pple accessing centre	Records/FGD										
<b>Building the capacity of entrepreneurs, community leaders, local organizations</b>																
7	<b>Training of local leaders and RCCs</b>	RCC members study exchange programs Training in the Rotary clubs objectives	One Month	Rotary Club	No of students in exchange program	Records/survey										
8	<b>Training of trainers</b>	Selection of trainers Training of trainers course	Three months	Trainers	No of entrepreneurs supported	Survey										

### 3.0 TOTAL BUDGET

The total budget is estimated at Ushs 518,192,002 or USD 198,914

**Table 8**  
**Total budget**

<b>Focus area</b>	<b>Ushs</b>	<b>USD</b>
Water and Sanitation	310,610,002	119,081
Maternal and Child Health	35,800,000	13,763
Basic Education and literacy	124,182,000	47,762
Economic and Community Development	47,600,000	18,308
<b>Total</b>	<b>518,192,002</b>	<b>198,914</b>