



KINGDOM OF BELGIUM
Federal Public Service
**Foreign Affairs,
Foreign Trade and
Development Cooperation**

**Directorate-general for Development
Cooperation – DGD**

Service D5.1 – Humanitarian Aid

SINGLE FORM FOR THE FUNDING OF HUMANITARIAN ACTION¹

(Legal basis: the law of 9/01/2014 modifying the law of 19/03/2013 on Development cooperation - Royal Decree of 19/04/2014, General expenditure budget, basic allocation 14 54 52 35.60.83).

1. GENERAL INFORMATION

1.1. Name of the humanitarian organisation/date of approval by the Minister for Development Cooperation (if required):

Name of the Humanitarian Organization: Plan International Belgium.

Date of Agreement by the Minister for Development Cooperation: 14/05/07, revised 20/05/16 for the period from 01/01/17 to 31/12/26

1.2. Title of the action

Building Resilience and Protection of Children, Adolescents and Youth living in Refugee Camps, Internally Displaced Settlements and Vulnerable Communities

1.3. Intervention area (country, region, locations):

Rwanda: Gihembe Camp (Gicumbi District, Northern Province), Nyabiheke Camp (Gatsibo District, Eastern Province), Kigeme Camp (Nyamagabe District, Southern Province), Mugombwa Camp (Gisagara District, Southern Province), Kiziba Camp (Karongi District, Western Province)

Uganda: Yumbe Camp (Zones 2 and 3)

Mali: Région de Ségou, Cercle de Macina, Communities of Kolongo, Saloba and Sana

1.4. Action start date:

October 14th, 2021

1.5. Duration of the action in months (cf. Art. 17, §2):

24 months: A No-cost Extension was granted bringing the total duration to 30 months.

1.6. Expenditure eligibility start date:

Signature date granting Ministerial Decree.

1.7 Proposal and reports (Concerning the specific timeframes, cf. RD of 19/04/2014):

Initial proposal	date: 15-07-2021
Revised proposal no.	date: dd-mm-yy
Date of the granting Ministerial Decree	date: 14-10-2021
Unilateral Act date	date: dd-mm-yy
Letter of acceptance date	date: dd-mm-yy
Interim report	date: 13-02-2023
Final report	date: 13-10-2024

¹ The specifications used in this form have largely been reworked on the basis of the "Single Form" in use, for the same type of actions, in the European Commission (ECHO).

For a good understanding of these specifications, refer to the guidelines issued by ECHO.

The specific points relating to Belgian legislation (Royal Decree of 19/04/2014) are indicated and underlined in the text, following the specific point concerned.

At the proposal stage, complete the numbered paragraphs, except for those that begin with [INT] (to be completed at the interim report stage) and [FIN] (to be completed at the final report stage). At the interim and final report stages, only amend (cross out) the main information in the numbered paragraphs.

2. NEEDS ASSESSMENT

2.1. **Assessment date(s); methodology and information sources used; organisation/person(s) responsible for the assessment**

All Protection Needs Assessments conducted (in Annexes) have been conducted between May and June 2021 and rely on a thorough desk review gathering Child protection, sexual and gender-based violence (SGBV) and livelihood related analyses of needs and constraints in the target areas (monthly reports from UN Agencies, documentary sources from networks of civil society organisations, documents and reports from technical working groups and clusters, documentary sources from Ministries). (1) **In Mali**, a qualitative primary data collection took place in June 2021, conducted by Plan Mali Child Protection staff in the targeted communities; (2) **In Rwanda**, a secondary data collection was favoured, based on an analysis of primary data from ongoing or closed projects over the past 6 months², as well as the recent protection needs assessment (December 2020) integrating the risks associated with COVID-19, were sufficiently rich not to be supplemented by a primary data collection. (3) **In Uganda**, a secondary data collection was favoured, relying on the baseline data from *Building Community Resilience for Protection of Refugees and Host Community Children and Adolescents in West Nile* project (funded by D5.1, implemented in Yumbe, Madi Okollo and Terego districts including Rhino Camp and Bidi-bidi Settlement) as well as the most recent protection needs assessment (December 2020) integrating the risks associated with COVID-19.

2.2. **Account of the problem and analysis of the stakeholders**

The Programme is based on an analysis of the vulnerabilities of children, adolescents and youth in all their diversity, considering existing stakeholders (duty-bearers, service providers). It focuses on communities affected by displacements: either internally displaced populations (IDPs) (Mali) or refugees (Uganda, Rwanda). Such displacements and the living conditions in camps or settlements has increased risks posed by the lack of access to resources and services, including protection, and violation of fundamental rights. For children, adolescents and youth, displacements and dire living conditions are likely to increase risk of exploitation, trauma, violence, including sexual and gender-based violence (SGBV), and separation from primary caregivers.

- **Mali**

Mali has been facing a complex humanitarian emergency since 2012, including a succession of food crises that weakened the livelihoods of the poorest households, increased malnutrition and exposed the population to multi-dimension shocks: political conflicts, all of which have given rise to inter-community conflicts, especially in the North and Center of the country. Populations have lived in situations of mass killings followed by cases of looting, burning of property and means of subsistence by unidentified armed individuals and groups. In the Ségou region, the Macina circle is at this stage one of the circles most affected by this situation with the presence of extremist armed groups and community self-defense groups. The security threats worsen already affected and deteriorated child protection situation and exposes children to recruitment by armed groups, separation and sexual violence. The Humanitarian Response Plan targets 4.7 million people, including 2.6 million children (50% girls and 50% boys). Among these people, 311,000 are internally displaced persons, 532,000 are returned or returnee IDPs. The protection sector is the one that aims at reaching the most people in need - 3.1 million people, including 811,100 children at risk of protection, and 1.1 million people at risk of SGBV.

While the humanitarian crisis, rooted in a regional displacement crisis in the Sahel and affected by deteriorated security context and tensions over access to resources, is widespread throughout the country, the needs are particularly important at the Center of Mali, with the regions of Mopti and Ségou are the most affected, with 1.7 million and 1.2 million people in need of humanitarian assistance, respectively, but important gaps in terms of response in Ségou.

COVID-19 pandemic has contributed to worsening this situation. In addition to the health and economic impacts, the pandemic has contributed to increasing protection risks while deteriorating access to basic and essential social services and delivery of humanitarian assistance.

The protection response is coordinated by the UNHCR, through three regional clusters in place

² The decision was based on a risk-benefit analysis of collecting data from beneficiaries on sensitive issues linked to traumatic experiences.

(Mopti, Gao, Timbuktu); Unicef and UNFPA are respectively leading the coordination for child protection and GBV actions. Stakeholders analysis at the level of the humanitarian response include MINUSMA, and the section Protection of Civilians, Ministries involved (especially *Ministère de la Promotion de la femme, de l'Enfant et de la Famille* through its decentralized and technical services). The assessment showed fragility and dysfunctionality of the child protection system, in fact: service providers along the referral pathway are scattered and information for access is not known by the population; there is a strong need for protection from sexual harassment, exploitation and abuse (PSHEA) towards local authorities; community-based child protection mechanisms are not in place, and caregivers show contradictory attitudes towards child protection and SGBV. While community members report attitudes as positive ("*Children at risk or in need of protection benefit from the support of the community*"), essential knowledge in terms of child protection and the behaviors reported at the community level differ. Almost all interviewed community members indicate that protection incidents are not reported, while caregivers seem to seasonally remove children from schooling system and push for forced marriage or send them to gold panning sites. It was also reported that kidnapping and forced recruitment in armed forces for both boys and girls showing remains important threats for girls and boys during their adolescence.

- **Rwanda**

As of end of February 2021, Rwanda hosted a total of 137,975 refugees and asylum seekers from the DRC and Burundi. As of February 2021, the DRC refugees represent 56.3% of the total refugee population in Rwanda. Durable solutions are guiding the refugee response, with a focus on voluntary repatriation. The Government of Rwanda, through MINEMA (Ministry in charge of Emergency Management), leads the refugee response in the country with the UNHCR and partners providing direct operational support, capacity development, and technical advice to the local authorities. The Ministry of Foreign Affairs and International Cooperation (MINAFFET), Directorate of Immigration/Emigration, National Identification Agency (NIDA), and National Refugee Committee (NRC) are also involved in the refugee response. The Government of Rwanda officially accepted the application of the Comprehensive Refugee Response Framework (CRRF) in February 2018 and contributes to the progressive implementation of the Global Compact on Refugees. All operational responses are in line with this inclusive protection and solutions approach³.

Generally, Rwanda offers a favorable protection environment for refugees. There is a *de facto* right to work, open borders, and access to durable solutions (resettlement, local integration and return) is unhindered. As the refugee response is based on a comprehensive approach to solutions, including socio-economic integration, highlighting that refugees can contribute to the local economy, as well as complementary pathways and resettlement, livelihoods and recovery activities are encouraged. However, despite the overall supportive environment, several challenges persist. Refugee children represent around 50% of the total population of concern and are also exposed to various types of risks, some of them specific to the displacement settings, including birth registration and documentation: 75,000 refugee children will need protection in 2021 in Rwanda.

Child protection case-management capacity are carried out by implementing partners in refugee camps (child protection officers, community mobilizers, who express important needs for increasing the capacity of case-management in terms of caseload, in order to support children and adolescents in need, including the UASC and adolescents). So far, the roll-out of protection information management systems (PIMS) are still ongoing, pending finalization and negotiations between UN lead agency, UNHCR, and national authorities. Adequate information management, systematic data collection and analysis, and reporting mechanisms need to be promoted and supported. UNHCR aims to roll out the CPIMS pending agreement with the Government and GBV Information Management System (GBVIMS) partners regarding data management to be codified in locally agreed information sharing protocols. Regarding community engagement in a broader sense, UNHCR and partners are working on the activation of the community centers in all the locations, camps, and host communities settings, to strengthen the community engagement, including promoting effective communication with the refugees, and supporting community-based child protection structures (CBCPSs). The focus of the community engagement is currently on youth engagement, making sure the youth is taking the lead in the organization of community activities. Finally, child and adolescent-centred SRHR and psychosocial support services are still a challenge

³ UNHCR Rwanda Fact sheet, March 2021

in both refugee camps and vulnerable host community settings in terms of access (distance). In particular, in refugee camps, none of the health services are adapted to children and adolescents.

- **Uganda**

Uganda hosts the largest refugee population in Africa. As of June 2021, Uganda hosts 1.48 million refugees, mostly from South Sudan and the Democratic Republic of the Congo⁴. Women and children comprise 82% of the overall refugee population in Uganda. Refugees are concentrated in 12 districts among which 6 districts—Adjumani, Arua, Koboko, Obongi, Yumbe, and Lamwo, Terego & Madi-Okollo—are located in the West Nile and Northern subregions. Uganda's open and progressive refugee policy is currently under pressure as refugee-hosting areas are among the poorest and least developed areas of Uganda, struggling with their own development challenges, including poverty and unemployment, deficits in human capital development, weak social service delivery, and limited access to basic infrastructure.

The influx of refugees into such areas has also increased pressure on already strained public services, natural resources, and local infrastructure; exacerbated existing vulnerabilities; and rendered the population in refugee-hosting areas less resilient to economic and environmental shocks. The impact of these challenges has increased due to this protracted crisis. Both host and refugee communities in Uganda face several types of protection risks. Households in both refugee and host communities report cases of children who had experienced violence. With a weak community child protection system, children are struggling to cope and to adapt to the new circumstances in the country of asylum.

The COVID-19 pandemic has further aggravated the refugees' situation, resulting in loss of livelihood opportunities. The situation has become particularly critical in recent months, with food security deteriorating in all refugee settlements coupled with WFP reduced food ratio. This fuels negative coping mechanisms, impacting children, adolescents and youth from both refugee camps and vulnerable host communities. Basic social services, such as health care, are also coming increasingly under pressure since the start of COVID-19. Schools' closures due to COVID-19 resulted in an increase of dropout rates, which are reaching 25% where primary school refugee children are concerned, and 86% for refugee children in secondary school⁵.

Main protection stakeholders include service providers and duty bearers, among which local councils (LC) and Office of the Prime Minister (OPM) representatives have important power in ensuring that children and adolescents are protected. Representatives of the OPM are in charge of refugee settlement management and members of the Refugee Welfare Council (RWC) – they are key partners, both enablers and promoters of any action related to protection. Medical care providers are the frontline staff most likely to care for children and adolescents who experience injury, trauma, illness or SGBV (health). They are essential stakeholders of a protection action, as organizations refer children and adolescents to these services. The Child and Family Protection Unit of the Uganda Police Force (CFPU) is the main actor for providing legal services. Case workers and para-social workers are central protection staff that identify, assess, refer cases to adequate services and provide psychosocial support. There is a limited knowledge on the nature and quality of existing services to address SGBV and VAC, including referral pathways, and a lack of coordination of SGBV service partners, child protection partners and service providers, in both refugee and host communities. According to the survey conducted by Plan Uganda, a big proportion of children, adolescents and youth is not aware of the existing services or how to access them.

2.3. Please summarise the results of the assessment (if necessary, append a comprehensive report) by establishing a link to the action)

Children and adolescents, especially girls, from targeted communities, are exposed to protection risks, including SGBV, and need immediate life-saving protection response that is gender and age responsive. While each context presents specificities, children and adolescents, and especially girls and adolescent girls, face very similar challenges across responses.

Risks and threats: Such protection challenges have been put under additional pressure with the COVID-19 pandemic, exacerbating already existing factors, such as schools' closures and displacements. The consequences of COVID-19 pandemic and associated restrictions, for children and adolescents in particular concern, translated into increased risk of physical and emotional

4 Refugees and Asylum-Seekers in Uganda, UNHCR, 30 April 2021

5 European Civil Protection and Humanitarian Aid Operations Factsheet, February 2021

violence, and significant psychosocial risks. Intra-family violence, and in particular between intimate partners, was scrutinized by the protection partners and the cluster; pre-existing positive coping strategies and protective environment have seen their access challenged (either in safe spaces, child and adolescent friendly spaces, schools, health centers), movement limitations and restrictions have a double negative effect on survivors' access to protective services. On the one hand, their access to care may be affected due to the distance to be traveled; on the other hand, health services critical to protection may be affected by the saturation of health services focused on managing the COVID crisis.

Protection of children and adolescents: major challenges: The three protection needs assessments converge towards the following exposures of children and adolescents. Many forms of violence against girls and boys are embedded in social and cultural norms and are further exacerbated by displacement and dire socio-economic living conditions.

- Child marriage is identified as a major protection risk in Mali and Uganda (e.g. 40% of women aged 20-24 were married before the age of 18 in West Nile, and 57% in Ségou). This is also closely linked with a high rate of teenage pregnancy (22% in West Nile, 28% in Ségou of women aged 15-19 have already started their procreative life). In Mali, this is clearly identified as a major protection concern from the respondents in targeted communities. This further aggravates maternal and under 5 mortality rates.
- School dropout and emotional abuse were identified as risk factors for higher proportions of girls than boys, as well as teenage pregnancy were also identified as particular risks for girls. As for boys, they were identified to be particularly affected by poverty. Higher proportions of boys than girls were also reported to suffer from physical abuse.
- Psychosocial support is needed across all three targeted areas as a major child protection concern, as triangulated by all sources of information. However, services that are adapted to needs of children and adolescents are still a challenge in both refugee camps and vulnerable host community settings in terms of access (distance) for Uganda and Rwanda. In Mali, children and adolescents who have experienced distress and trauma lack any access to psychosocial support
- Unaccompanied and separated children are particularly vulnerable to neglect, abuse, violence, increased poverty, and exposure to exploitation. The UASC often find themselves in a dire and stressful economic situation, and thus adopt negative coping strategies to meet their basic needs. Even when taken care of by foster parents, UASC report having to beg, fetch food and other sources of revenue in the nature, resulting in protection risks (harassment, assault, separation) as the distances are long. Domestic work is mentioned by UASC as a way to gain money, while this puts them at risk of neglect, abuse, exploitation and SGBV. In Uganda, UASC is a prevalent phenomenon affecting different age groups. As of September 2020, Uganda hosted 41.066 UASC and 14.011 children at risk. In Rwanda, UASC make up to 6,3% of overall population of refugee children and they face similar protection risks. In areas where Plan has a mandate to provide case-management services, 611 UASC are in need for support. In Mali, family separations, linked to multiple displacements, are on the rise, with 1,108 UASC identified by the Child Protection sub-cluster in 2020.
- Sexual and gender-based violence (SGBV) is one of the biggest threats to child protection in all three countries, and has been further exacerbated by the COVID-19 outbreak. In Ségou, 14% of women report having experience sexual violence, which is highly likely to be IPV as 90% of perpetrators are their current or past partner. In Rwanda, SGBV taking the form of IPV is widespread: with more than 1 woman in 3 having experienced physical and/or sexual intimate partner violence during their lifetime. In Uganda, 64% of women aged 15-49 have ever experienced physical, sexual, or emotional violence by their current or most recent spouse/partner compared with the national average of 51%. More than 43% had experienced intimate partner violence (IPV) in the 12 months preceding the survey. Data available shows that there is gender disparity in the experience of physical and sexual violence, with 14% of girls reporting having experienced sexual violence against 3% of boys aged 15 to 19, although reporting and prevalence are subject to cautious interpretation given the taboo and underreporting biases. In Mali, the prevalence of Female genital mutilation (FGM) is particularly high, with 73% of girls aged 0-14 having undergone FGM in Ségou. Respondents from the primary data collection mention FGM as a main concern.
- Service provision is weak and acts as an aggravating factor of protection vulnerability. The

high prevalence of violence against children including SGBV in the context of forced displacement has been generally linked to the breakdown of protective mechanisms and support networks, post-traumatic stress following experiences of violent events, changing gender roles, inadequate access to basic services, limited access to economic and livelihood opportunities, and pre-displacement prevailing harmful gender norms. Data across three targeted areas converge to show that harmful gender norms, stereotypes, including regarding women and girls reporting SGBV, support harmful practices and act as the main risk factor for violence against children and adolescents, especially girls', rights. Moreover, denial of resources such as food, household items, money, limited access to post-primary education and livelihood opportunities act as aggravating factors in the incidence of SGBV in refugee settings.

- Children associated with armed forces represent up to 43% of child protection violations reported in Mali. Armed groups' exploitation of children takes the form of direct involvement in combat in hostilities or are either forced to work for the armed group indirectly, acting as spies, messengers, porters, cooks, or responsible for cleaning camps, vehicles and weapons. Girls are often sexually abused. Many children, especially those who do not have access to school, perform essential community tasks (e.g. keeping animals), sometimes away from home, which leaves them vulnerable to abduction, especially in border areas. UASC are particularly at risk of enrolment.
- Children with disabilities are, across all settings, exposed to several types of protection-related risks. The major protection risks for CWDs are physical abuse, poverty, emotional abuse, school dropout, neglect, SGBV and limited access to social services.

Link to the action and response strategy: Through this Programme, Plan aims to prevent risks and address the needs of children, adolescents and youth affected by the humanitarian crises in Mali, Uganda and Rwanda, with a focus on CPiE and a strong attention to prevention and response to SGBV. The Programme, implemented directly by Plan in Uganda and Rwanda, and by Plan and the local partner Groupe d'Animation Action au Sahel (GAAS) in Mali, will adopt age and gender-responsive packages of protection services to ensure children, adolescents, youth and their communities living in refugee, IDPs settings or vulnerable host communities, receive relevant, timely, quality, empowering and inclusive humanitarian assistance. Plan's response strategy is holistic: it responds both to the immediate needs of children and adolescents, with life-saving services of protection, while also working with key target groups (primary duty-bearers, i.e. caregivers, secondary duty-bearers, i.e. community members, local authorities, and service providers). The approach ensures a nexus-oriented programme that promotes enabling and protective environments for children and adolescents affected by the humanitarian crises. Child protection services will be delivered by trained and skilled case-workers, to identify and provide quality and relevant protection support to children and adolescents most vulnerable (including children and adolescents survivors of SGBV, UASC, children at risk), material support to adolescents and / or caregivers.

Plan's material assistance strategy. Plan will implement a protection vulnerability-based material assistance throughout the three responses, that will be tailored to each context. It takes the form of two main channels, based on lessons learnt of past humanitarian programs.

(1) Plan will implement a mix assistance to children and adolescents' survivors and children and adolescents in need for immediate life-saving assistance and access to basic essential services, comprising in-kind support, cash or voucher support, as part of the case-management provided by Plan staff. This includes covering for access to cost services, transportation, medicines, essential NFIs or food. This assistance is contextualized to each response, in line with the sector's guidelines and coordination mechanism (R1A2).

(2) Plan will implement a cash-plus approach as a child protection flexible assistance to UASC and adolescents, through their caregivers or directly if they are of age and if the country legislation allows. Foster families need material support to provide quality care for children and adolescents, while Plan has to prevent protection risks and exploitation risks from foster families towards UASC and adolescents (pulling factors, incentive for separation to receive material assistance). As a result, the assistance modality envisioned by Plan is a package of services including a mix of cash and in-kind assistance, based on risks, feasibility, markets availability and functioning; foster families will receive instalments, specific to each response, to ensure that it is coordinated with other protection actors and agencies providing cash and voucher assistance. A light conditionality, acting like a nudge, will be part of the package, that is ensuring that foster families' members attend

parenting sessions. In addition, the close follow-up undertaken by case workers will pay attention to children and adolescents well-being within foster families. If case-workers identify breaches in the protection of children, the Best Interest Assessment (BIA) will be undertaken and the cash support will stop.

Cross-cuttingly, a strong attention to SGBV prevention, including SRHR components and empowerment strategies will be implemented, towards adolescents, especially adolescent girls. The response will emphasis support to adolescent girls and young women safe spaces, for dialogues, information and access to services is delivered, and leadership and empowerment programmes are implemented, as girls of all ages expressed the desire to gain life skills through mentor engagement, education on SRHR and to be part of savings groups.

[FINAL]

• Mali

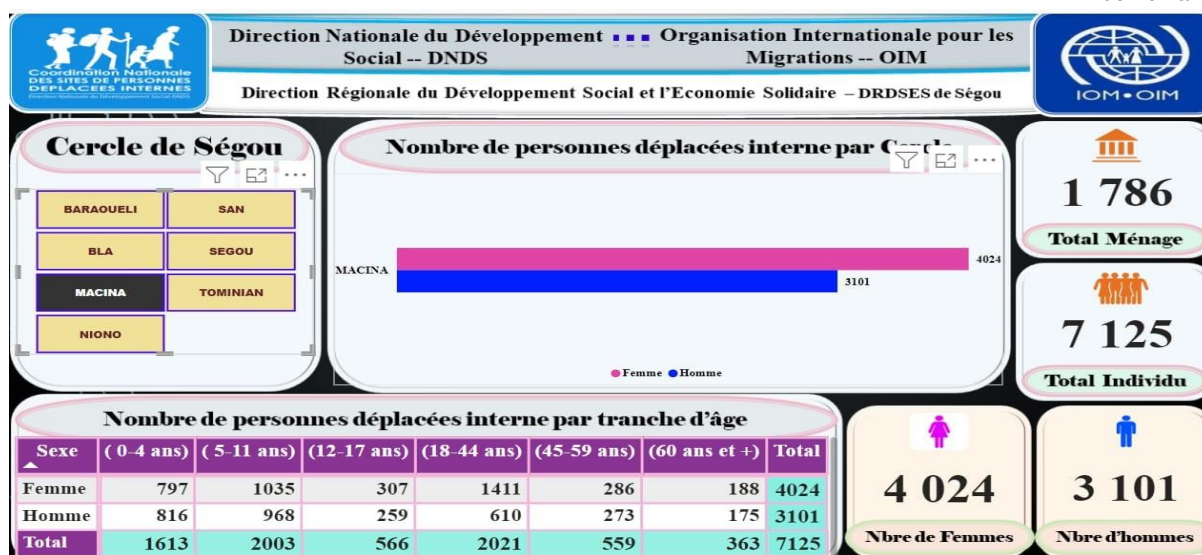
Depuis octobre 2021 le contexte humanitaire au Mali a continué de s'aggraver en raison de l'augmentation des conflits et de violence dans le pays, ainsi que dans la région. Les conflits inter et intracommunautaires, l'activisme des groupes armés non étatiques (GANE) toujours plus présents, les conséquences des opérations contre-insurrectionnelles, la criminalité, le banditisme, l'importante inflation renforçant la pauvreté structurelle, l'insécurité alimentaire et les périodes d'intenses sécheresses continuent de fragiliser le Mali. Dans ce contexte complexe, les civils, toutes communautés confondues, continuent d'être la cible d'attaques, en particulier dans le centre du Mali, zone d'implémentation du projet.

La situation sécuritaire s'est aussi considérablement détériorée dans les régions de Gao et de Ménaka en raison d'affrontements armés entre les éléments du Mouvement pour le salut de l'Azawad-Daoussahak/Groupe d'auto-défense Touareg Imghad et alliés (MSA-D/GATIA) et ceux de l'Etat Islamique au Grand Sahara (EIGS) et/ou d'attaques contre les populations civiles.

Les régions du centre ont aussi assisté à une forte dégradation (Bandiagara, Bankass, Djenne, Koro, Mopti, Ségou), et restent très affectées par les incidents en lien avec des IED/mines et toute autre action des groupes armés (surtout de braquages, attaques armées ou explosions de mines contre des convois militaires, avec de forts impacts contre les civils également). Le cercle de Macina est sujet à cette insécurité grandissante, avec la multiplication des incidents du côté de l'inter-fleuve⁶ et les affrontements réguliers entre les groupes armés (notamment les chasseurs) et les groupes radicaux. Cette situation a entraîné une perte partielle d'accès à la zone depuis décembre 2023, avec de nombreux villages qui ont été menacés, attaqués et contraints de se déplacer.

Concernant la **situation économique** du pays, elle reste très fragile, entre autres suite à l'insécurité et la dégradation des relations politiques entre le Mali et certains de ses anciens partenaires, comme la CEDEAO et la France. Le cercle de Macina reste une des localités les plus affectées par cette fragilité suite à l'exacerbation de l'insécurité dans la zone qui a favorisé le déplacement massif de la population au niveau du chef-lieu du cercle. En janvier 2024 IOM enregistrerait 1786 ménages déplacés, avec 7125 personnes dont 4024 femmes et 3101 hommes.

Répartition des PDIs selon les tranches d'âges



L'instabilité politique, les difficultés sécuritaires et de circulation de biens ont aussi contribué à la flambée des prix des denrées alimentaires, voire à l'absence de certains produits de première nécessité sur le marché. Par ailleurs, les opérations de ratissage ont aussi été un facteur contributeur à la fragilité de l'économie locale, car les foires peinent à se fournir en denrées alimentaires et en biens de première nécessité. En effet, certains commerçants, particulièrement les marchands de bétails, ne viennent plus aux foires hebdomadaires par peur d'être attaqués et/ou de se faire enlever leurs bétails.

Sur le plan politique, le pays fonctionne sous un régime transitionnel depuis plus de 2 ans, ce qui défavorise la relation diplomatique avec une frange de la communauté internationale. En plus, le Mali vit sous certaines restrictions de la Communauté Économique des États de l'Afrique de l'Ouest (CEDEAO) décrétées à la suite des changements de régime en 2020 et 2021. En outre, en février 2024 les états membres de l'Alliance des États du Sahel (AES), notamment le Mali, le Burkina Faso et le Niger, ont annoncé leur retrait de la CEDEAO avec effet immédiat, ce qui a eu des répercussions significatives en matière de :

Sécurité et renseignements : Le retrait aura des incidences sur la coopération en matière de sécurité, d'échange de renseignements et de participation aux initiatives régionales de lutte contre le terrorisme, notamment l'initiative d'Accra et les activités de la force multinationale mixte.

Politiques sécuritaires : La CEDEAO a souligné que le retrait des pays de l'Alliance des États du Sahel (AES) affectera la coopération sécuritaire et les efforts conjoints pour lutter contre le terrorisme dans la région.

De plus, le passage de 15 à 12 pays membres de la CEDEAO entraînera un manque à gagner supplémentaire pour l'organisation qui perdra 7% de son PIB et au moins 54% de sa superficie.

Les pays sortants ont justifié leur décision en affirmant que la CEDEAO s'était éloignée des idéaux de ses fondateurs et qu'elle était devenue une menace pour ses États membres. Ils ont également critiqué l'absence d'assistance dans leur lutte contre le terrorisme et les sanctions imposées par la CEDEAO.

Sur le plan sanitaire, en début d'année 2024 le Mali a été touché par une épidémie de dengue. Deux sérotypes (DENV-1 et DENV-3) circulent actuellement dans le pays. Depuis le début de l'épidémie en 2023 jusqu'à nos jours, le Mali a signalé un total de 8709 cas et 39 décès liés à la dengue selon le ministère de la santé. La situation dans la région est complexe, selon l'OMS. Le Mali, comme d'autres pays touchés, fait face à des contraintes de financement qui entravent la

préparation et la réponse à la dengue. Les tests de diagnostic rapides sont en pénurie, et la capacité de détection précoce est limitée. Une réponse intégrée aux arboviroses (dengue, Zika et chikungunya) est nécessaire pour améliorer la surveillance et la prise en charge.

D'autre part, le COVID n'est plus une menace pour la santé car les vaccins ont été produits et administrés afin de prévenir la maladie et l'organisation mondiale de la santé (OMS) a déclaré que le COVID n'est plus une priorité. En rappel, selon le bulletin d'information du Ministère de la Santé publié en février 2024, la situation COVID se présente comme suit :

Nombre total de cas : 32 775
 Nombre de malades actuels : 79
 Nombre de cas guéris : 31 953
 Nombre de décès : 743
 Population vaccinée : 3,3 millions

- **Rwanda**

As of end of September 2023, Rwanda hosted 135,733 refugees, asylum seekers, and other displaced populations. The majority, 84,867 (62.5%) come from the Democratic Republic of the Congo (DRC), 50,146 (36.9%) from Burundi, 587 (0.4%) are hosted at the Emergency Transit Mechanism (ETM) and 133 (0.1%) refugees and asylum seekers from other nationalities. Approximately, 94% of these individuals reside in camps, with the remaining 6% living in urban areas of Kigali and Huye.

Rwanda has also experienced an influx of new asylum seekers due to increased instability in the Eastern DRC since November 2022, with approximately 12,684 recorded as of the end of September 2023 with numbers anticipated to grow in the next year.

Refugees in all camps receive cash for food from the World Food Program (WFP) on a targeted basis. 87% of the refugee population are in the highly vulnerable category, 6% are moderate vulnerable, and 7% are least vulnerable. Over the course of the multi-year strategy, UNHCR will make efforts to strengthen the targeting criteria based on socio-economic data.

Plan International Rwanda is the lead child protection implementing partner for all DRC refugee camps including Nkamira transit Centre and is doing its best in partnership with National organizations, to provide child protection services that are up to the standards. However, there is a lot to be done given that the funding in Rwanda is critical.

With the funding gaps, challenges related to the protection of children and adolescents continue to increase as household income decreases. Families need income- activities to boost their economy for the support of their children. Children and adolescents are exposed to abuse, violence, exploitation and neglect, because of family conflicts.

Though Plan International Rwanda is really strained with funding for emergency response, we are not folding our hands. Through our response in Nkamira TC, we are making sure that our gender transformative approach is integrated because, from the above-mentioned statistics of asylum seekers, we realized that girls and boys, and women and men had been affected differently by the crisis. Children and young people, especially girls and young women in all their diversity, including unaccompanied and separated children, teen and single mothers, lactating girls and women, and those with disabilities, are more at risk of Child Protection (CP) & Gender Based Violence (GBV) abuse. Therefore, we are focusing on challenging gender norms leading to the culture of silence toward violence against girls and women, normalizing GBV, early marriage and limited participation in decision-making spaces, especially for girls, young people, and women; Increasing girls' agency on GBV-CP prevention and response.

We are also pulling efforts to work with boys and men to fight GBV-CP abuse and embrace gender.

We also provide supporting materials to most vulnerable children, adolescents and young people for improving their conditions. We will implement different activities such as Child Friendly Spaces, case management while considering sex, age and vulnerabilities, and working with other actors in the response for advocacy, referral of cases of CP-GBV abuse and advancing gender equality and inclusion. Also, gender liens are highly considered during the composition of community volunteers and staff (female and male) for meaningful participation of girls, boys, young women and men in CP and GBV prevention and response.

Additionally, Communities are not yet fully organized and ready to combat abuse, violence and neglect due to psychological distress and, in some instances, lack of awareness. Hence the required support from Plan International Rwanda as the lead in CP and GBV in all DRC refugee camps in Rwanda.

It is therefore critical to highlight the increased need for support to DRC refugees in Rwanda, especially children and women, as Plan International Rwanda intends to intervene in these key areas:

- Awareness raising of community members, including calling children, adolescents, Girls, young people and parents to challenge gender norms (culture of silence, normalizing violence against girls and women) that lead to CP and GBV.
 - Awareness raising focuses on preventing all forms of violence and available reporting and referral mechanisms in place.
 - Provision of protection services through case management
 - Organize child-friendly recreational activities to provide psychosocial support to distressed children
 - Organize community sensitization through the "sports for change approach."
 - Conduct home-based CFS (Child-friendly spaces) for children under 5 years to prevent emotional distress, danger and injuries.
 - Conduct focused reflection sessions for girls and young women for effective service delivery.
 - Support boys and young men to take the stand in fighting against GBV and child defilement and challenge harmful norms, behaviors, and attitudes that drive violence against girls.
 - Provide case management material support to received cases.
 - Strengthen community-based CP and GBV facilities.
 - Conduct outreach activities with the community
- **Uganda**

During the project implementation, there was a food re-prioritization by WFP which saw refugees being categorized in three categories. Category one saw them receiving 60% of their previous food ratio, category two (2) saw them receiving only 30% of their food ratio and category three saw them being cut off the food ratio. This posed more risk of abuse to children at risk as most of their caregivers fell under category three (0) who were scrapped off the food log. This included community volunteers working with partners and receiving in-kind support, stipends and payment such as CFS animators, ECD Caregivers, some CPCs, RWC etc. This led to an increase on the need for Psychosocial support needs and protection including parenting approaches and case management. PIU will continue to lobby for support of the community structures/leaders especially the CBCPM so as to strengthen their support to the children at risk.

The safety audit which was conducted by OPM, UNHCR, IRC and other partners, indicated key gaps under protection such as food reduction, high number of teenage pregnancies (1095 cares from Jan 2022 to Feb 2023 HMIS data), SEA by humanitarian workers, Refugee women are chased and threatened with violence and sometimes abused while collecting firewood, lack of lockable doors for PSN shelters, crowded homesteads and limited privacy, bushy walkways to service points

and rape cases.

In the West Nile region, key gaps that still prevail include insufficient access to clean water, inadequate sanitation facilities, limited health care facilities including mental health and psychosocial support services due to pressure exerted on the limited resources, overcrowded schools with high teacher to pupil/student ratio, limited livelihoods and economic opportunities, gender based violence and protection risks including child labour, child marriage, exploitation and food security. As a result of the funding gap, partners have withdrawn from the settlement as well staff leaving the available partners overwhelmed with the need.

In Bidibidi, there are over 17,919 UASC, 3,322 children at risk and 1,095 children with specific legal and physical protection needs. 36 attempted suicide cases were reported, 5 deaths by suicide and 6 repeated suicides attempts in Bidibidi (HCR Dashboard, August 2023 <https://data.unhcr.org/en/documents/details/103430>). The prevalence of child early forced marriage in Bidibidi settlement is high, with almost a third of the study population experiencing teenage pregnancy and CEFM (Child Early Forced Marriage) (Loutet et al., Dec 2022). Yumbe district presents one of the highest adolescent pregnancy rates in West Nile sub region at 21.9% In Bidibidi, 86.4% of adolescents and young women involved in child early and forced marriages and had unintended pregnancies experienced physical and/or sexual violence compared to 50.0% of adolescent boys and young men of the same category. Child labour was found to be a dominant activity undertaken in Bidibidi settlement, with children most likely engaged in long hours of domestic work; farm work, gold mining, transporting people (bodaboda) and other forms of child labour include sexual exploitation and smuggling people at borders. Additionally, up to 41% of primary and secondary-school-age children are out of school and only 2% of learners with a disability are enrolled in schools. The results also revealed that 94.7% of women in a CEFMP missed school due to sexual violence compared to 60.0% of men (Loutet et al., Dec 2022).

3. HUMANITARIAN ORGANISATION IN THE INTERVENTION AREA

3.1. *Presence of the humanitarian organisation in the intervention area*

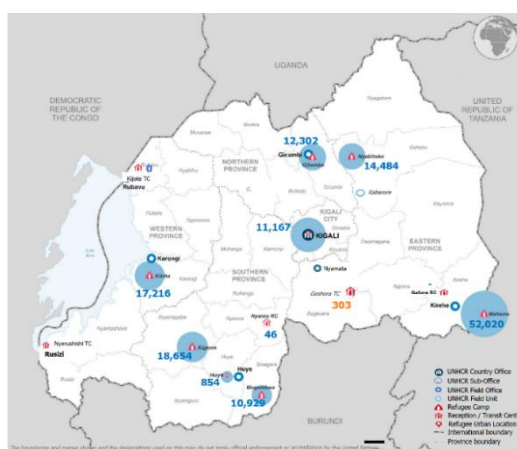
Plan is a global organization that strives for all children to have the opportunity to lead, learn, decide and thrive by following a rights-based and gender-transformative approach, working with communities to address immediate needs of children, adolescents and youth, especially girls and young women, influence negative gender and social norms, legal and policy frameworks that hinder children's full potential; in the three countries, Plan works with a dual mandate – humanitarian and development. **Rwanda:** Plan has been operating in Rwanda since 2007, on four intersecting thematic areas: early childhood development, child protection, sexual and reproductive health and rights (SRHR), as well as improving communities' resilience to disasters. Plan's refugee response program strategy focuses on Congolese refugees in Nyabiheke, Gihembe, Kizibe, Kigeme and Mugombwa camps and also includes programming for Burundian refugees in Mahama camp. Primary sectors include child protection and SGBV, SRHR, empowerment of adolescent girls and nutrition, and livelihoods support. Plan Rwanda has established camp-based offices in refugee camps. Plan is the assigned protection partner for UNHCR regarding CPiE and SGBV in Rwanda and has been working on protection in refugee camps since 2014. Regarding Livelihoods, Nutrition and Food Security, Plan has been jointly implementing nutrition with WFP since 2014, as well as education and counselling programs in all six refugee camps in Rwanda and the host communities surrounding the camps to improve the nutritional status of children under 5, adolescent girls and boys, and women. Plan also works on increasing the refugee communities' access to available sources of income and on food diversification. During the COVID-19 pandemic, Plan took a leading role in resilience, providing cash assistance to vulnerable households and setting-up awareness-raising campaigns in camps through its community-based activities. **Uganda:** Plan started working in Uganda in 1992, being registered with the Ministry of Internal Affairs and working since then alongside communities on advancing children's rights and gender equality. Plan has started working in West Nile region of Uganda in 2017, in Adjumani, Arua and Yumbe, with recent expansion in Nebbi, to support the response to the humanitarian crisis triggered by the influx of South Sudan refugees and provide nexus approaches in vulnerable host communities. Plan

oversees the implementation of actions from offices in Yumbe, Adjumani in Rhino Camp, in line with its *West Nile Refugee Response Programme Strategy* (July 2019 – June 2022) that prioritizes CPIE, EiE, SRHRiE and CVA. Regarding CPIE, Plan is a key partner of UNHCR in the provision of services to children and adolescents at risk, including through case-management. Given the shortage of humanitarian aid, Plan is increasingly taking-up a leading role and responsibility to increase child protection activities in refugee settlements as an operational partner. Plan also ensures that accountability to the affected population is prioritised including meaningful involvement of children. Regarding SGBV, Plan works through both prevention and response in collaboration with GBV partners, and tie links to the GBVIMS and referral. As part of its Youth Economic Empowerment programmes, Plan supports establishment of VSLAs, access to skills training and CVA to the most vulnerable families so they are able to support small-scale businesses. Plan is the only agency implementing SRHR strategies (including provision of knowledge and access to menstrual hygiene management in emergencies) and Adolescent Friendly SRHR services alongside training and sensitization of health workers. Finally, Plan has also been a leading agency working with the district task forces to respond to the COVID-19 outbreak in camps. **Mali:** Plan has been operating in Mali since 1976 and since 2013 holistic programs responding to the humanitarian strategy in country, with operational presence in the North and Center Mali. In addition to the National Office in Bamako, Plan Mali currently has two emergency offices, one in Mopti covering Mopti and Ségou, and one in Timbuktu covering Timbuktu and Gao. Plan's 2019 -2023 Country Strategic Plan in Mali focuses on the following three priority areas: Early Childhood Development, including attention to nutrition; sexual and reproductive health rights and the elimination of any form of gender-based violence (CPIE), including female genital mutilation, child marriage and child pregnancy, and Youth employment and entrepreneurship, with a special focus on young women.

3.2. Ongoing actions and requests for funding submitted to other donors, in the same intervention area

Rwanda: (1) "Social and Behaviour Change Communication for Nutrition (SBCC/N)" is a WFP and Plan Canada funded project covering six refugee camps and six hosting districts (ending December 2021), improving the nutritional status of women, adolescent boys and girls, refugee children under 5 in the targeted communities. The proposed action will complement the nutrition-oriented objectives of the project by rolling out Plan's Parenting Under Pressure (PUP) toolkit, will complement the WFP-funded action, during the overlapping period, and benefit from learning, identification of gaps of the WFP-funded action. (2) "Sustaining Child Protection Programs in 5 DRC Refugees Camps in Rwanda" is a UNHCR and Plan Belgium-funded action, covering five refugee camps (Kigeme, Gihembe, Kiziba, Mugombwa and Nyabiheke), of 12 months, running until December 31, 2021, strengthening child protection through community members' attitudes regarding child protection risks mitigation and coordination with SGBV Partners to prevent and respond to cases of child and adolescent survivors. The proposed interventions are designed based on the gaps within the protection sector and specific activities implemented through UNHCR-funding. Plan will ensure activities and a list of beneficiaries are shared every month to prevent any potential conflict/overlap with the project team both at Plan and UNHCR. No ongoing request. **Uganda:** (1) "Building Resilience for Protection of Refugees and Host community Children and Adolescents in West Nile", funded by DGD, is a CPIE and CVA action, that will be ending in June 2022. It will be complemented by the proposed action, by expanding the overall scope of the project geographically, in order to address the gaps in zones within Yumbe where the caseload is high and increasing, while only a few implementing agencies are active. (2) "It's my body: Preventing and responding to sexual violence against young people affected by the South Sudan conflict" funded by Radiohjälp (ending Dec. 2021), SRHR project providing age and gender responsive protection services and improving access to and quality of SRHR services. It will complement the case management services under the proposed project. "Emergency Education for Boys and Girls in Arua and Yumbe" funded by ECW, that will be ending in December 2021, covers both host communities and refugee settlements; the proposed action would complement this project with protection actions, and would target communities that are not targeted by ECW-funded project. (4) "Play Matters" is an EiE, Lego Foundation-funded action, ending in August 2021; the proposed action will complement parenting sessions and coordinate with existing ECD centres. Ongoing actions within West Nile, that the proposed action will benefit from in terms of toolkits rolled out, expertise and developed modules for training: (5) "Centre of Excellence Refugee Response and

Durable Solutions”, a CPiE and SRHRIE Australian Aid funded action, through Plan Regional Center of Excellence for Refugees piloting the Adolescents in Emergencies toolkit. (6) *“Girls’ Education in Crisis: Increasing access, retention and completion of quality and inclusive primary and secondary education for adolescent girls and boys in West Nile”* (Dubai Care-funded action (2020-2023)) and (7) *“Educate A Child – RISING”* (Qatar Foundation-funded action, ending in March 2023), are education in emergencies projects. The action will benefit from the complementary approaches between EiE and CPiE. No current funding request. **Mali:** (1) « *Education Cannot Wait* » (a 12-month project implemented) and (2) « *IMAGINE* » (46-month project funded by Global Affairs Canada), are EiE projects that will be complementary to the proposed action, by reinforcing the resilience of communities, by strengthening their capacity on the protection of children and adolescents, regarding school enrolment and retention, prevention of violence against children and adolescents, through both community and school-based interventions that complement and reinforce each other. **Current requests for funding:** Plan Mali and Plan Norway are currently setting-up a fundraising process through the Telethon programme in Norway. The designed programme will adopt a nexus approach and will focus on proposing an integrated set of education, child protection and SGBV services.



[FINAL]

• Mali

La présence opérationnelle de Plan International dans la région de Ségou n’a pas beaucoup évolué depuis la soumission du rapport intermédiaire. Les projets IMAGINE a pris fin en mars 2024 tandis que Sweed poursuit la mise en œuvre de ces activités.

• Rwanda

In October 2021, Plan International Rwanda was the lead implementing partner in 5 DRC refugee camps in Rwanda. However, due to landslides in one of the refugee camps (Gihembe), the refugee camp was relocated to Mahama refugee camp, leaving Plan’s implementation in 4 DRC refugee camps.

Furthermore, it's crucial to highlight that Plan International Rwanda faced a severe crisis during which all operations were suspended by the UN for over two months across all refugee camps. This suspension was prompted by reported cases or whistleblowing incidents brought to the agency's attention. As a result, the delivery of scheduled activities within the designated timeframe has been significantly hampered. Moreover, this situation has had adverse effects on the volunteers we engage with on a daily basis, who rely on Plan's interventions for their livelihoods.

After thorough assessment by the UN, and the support from the entire Plan family across the world,

we were able to have the suspension lifted because of our response to the mentioned cases, and the actions put in place. Additionally, Plan International Rwanda was assessed by UN Geneva for its commitment and implementation of the safeguarding and PSHEA policy, which we scored all 7 standards out of 8. As a result, Plan International Rwanda was awarded funding for the next year (Jan-Dec 2023), with an additional sector (GBV) previously held by another implementing partner.

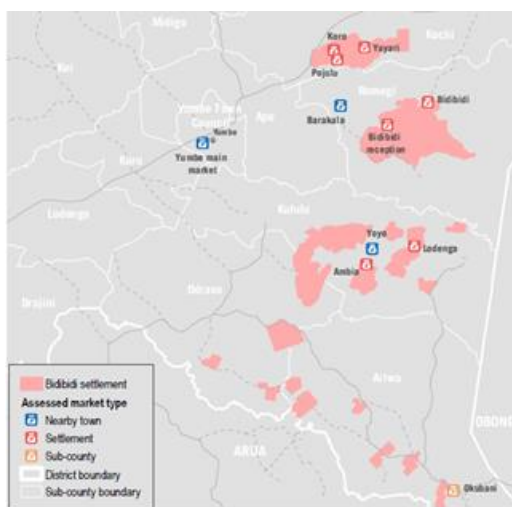
Since the submission of the proposal, emergency response projects funded by UNHCR and WFP ended in Dec 2021. However, the contracts were still awarded to Plan International Rwanda, both by UNHCR and WFP, under child protection, GBV (including adults) and Nutrition. As of January 2023, Plan International Rwanda is implementing projects under child protection and GBV sector, and Nutrition through funding from UNHCR, DGD through Plan International Belgium and WFP. Plan International Rwanda was also able to secure funding from Lego foundation through Plan International Germany, that educates children (0-9years) as well as parents and caregivers on how to learn through playing, using locally made materials available within household premises.

- **Uganda**

Plan International Uganda continues to lobby for funding from different donors including UNICEF, World Bank, Nelson Foundation and Education Can not wait (ECW). In this period, PIU successfully received 2 grants, 3 years grant from ECW that started in 2023 and ending in 2025 with a focus on gender responsive, education and child protection. The second grant is over 18 months with funding from Nelson Foundation. The project started in October 2023 and will end in March 2025 with focus on girls in displaced setting.

4. OPERATIONAL FRAMEWORK

4.1. Precise location of the action



Rwanda: The action will target all the 5 refugee camps for DRC refugees present in Rwanda: Gihembe Camp (Gicumbi District, Northern Province), Nyabiheke Camp (Gatsibo District, Eastern Province), Kigeme Camp (Nyamagabe District, Southern Province), Mugombwa Camp (Gisagara District, Southern Province), Kiziba Camp (Karongi District, Western Province). **Uganda:** The action will target the Yumbe area, and specifically the Bidibidi settlement. **Mali:** The action will target the Communities of Kolongo, Saloba, Sana, from the Cercle de Macina in the region of Ségou

[FINAL]

- **Mali**

Depuis le rapport intermédiaire, le projet a maintenu la même zone d'intervention : 30 villages distribués dans les communes de Saloba, Kolongo et Sana, 10 villages par commune. La ville de

Macina et le centre de santé de la commune rurale de Kokry ont aussi bénéficié de l'appui du projet.

- **Rwanda**

Originally, the project was planned for implementation in 5 DRC camps. However, due to environmental challenges such as landslides and erosion causing hazards in the Gihembe camp in the Northern Province, the Rwandan government decided to relocate refugees from Gihembe to the Mahama camp in the Eastern Province, which primarily hosts Burundian refugees. In Mahama camp, Child Protection activities are not carried out by Plan International Rwanda. As a result, the project was executed in the remaining four DRC camps—Kigeme, Kiziba, Mugombwa, and Nyabiheke. Despite the relocation, the target beneficiaries of the project remained unchanged.

- **Uganda**

There was no significant change in the location (settlement) of the project, however, Plan International Uganda through the Office of Prime Minister (OPM) and UNHCR lobbied for more space (villages) for implementing the action. The initial design was to implement the DGD project activities in Zones II (villages 6 & 7) and Zone III (villages 11-16), of the refugee settlements and it covers the 2 sub-counties of Lori and Kululu. An additional village in Zone II (village 1) was given to Plan International Uganda to implement the action.

4.2. Beneficiaries

4.2.1 Total number of direct beneficiaries:

60,250 beneficiaries are expected to benefit from the action – 16,110 members of vulnerable host communities and 1,790 IDPs from Macina Circle in Mali; 19,485 refugees and 2,505 members of vulnerable host communities in Rwanda; 10,000 refugees and 10,000 members of vulnerable host communities in Yumbe.

4.2.2 Specificities of the direct beneficiaries

The beneficiaries of child protection services will be children aged 0-18 years in both refugee, displacement and host community settings. Adolescent girls (10-14 and 15-18 years): In a humanitarian context, SGBV is mainly associated with violence against girls, adolescent girls and women and harmful acts. It is therefore a matter of targeting adolescent girls at risk of SGBV and other protection-related issues as a priority. As outlined in the need assessment reports, the protection needs of adolescents are strongly correlated with gender and age range. Child and Adolescent Survivors. As part of the project, children, adolescents and young survivors will have access to psychosocial support and will be referred to health structures and specialized medical services accordingly with the SoP and Caring for Child Survivors Guidelines. Unaccompanied and Separated Children (UASC) and adolescents. Children separated from their parents and other members of their families following population displacement, due to the effects of COVID-19 etc. are among the most vulnerable.

In addition, the following target groups, identified in the stakeholders analysis, will be involved in the implementation of the action, and targeted by dedicated activities, to ensure that as duty-bearers, they contribute to a more protective environment for children, adolescents and youth: Parents, foster parents and caregivers of children and adolescents, community actors (key community actors, such as members of the Community based child protection mechanisms and structures, Committees, refugee leaders, service providers dealing with child protection-related issues at different levels.

4.2.3 Mechanisms and criteria for the identification of the direct beneficiaries

The targeting strategy will rely on objective protection vulnerability criteria, set-up jointly with community-based protection committees. Preliminary targeting mechanisms consider the most acute vulnerabilities affecting children and adolescents, including prevention and response to separation and other life-saving protection services. UASC and other vulnerable children will benefit from case management support, and a package of services that correspond to their needs. All

children and adolescents aged 0-18 from targeted areas will benefit from recreational activities and psychosocial support provided in child and adolescent friendly spaces, including via mobile programming if movement constraints prevent beneficiaries from accessing the child and adolescent friendly spaces. Girls and adolescent girls will benefit from access to women and girls' safe spaces. Direct beneficiaries will also include children and adolescents from refugee, IDPs and host communities who will benefit from sensitization messages related to child protection and gender equality. Their caregivers, members of their household, members of the community will also be targeted by sensitization activities. Parents and caregivers targeted by parenting sessions and livelihoods-related support will also be selected based on clear vulnerability criteria. Support will in priority be provided to parents and caregivers caring for children presenting protection-related needs: children living with disabilities, UASC, child and adolescent survivors.

4.2.4 Describe the scope of and the arrangements for the involvement of the direct beneficiaries in the development of the action

During the assessments conducted in targeted communities, Plan staff, through its protection teams, consulted with potential beneficiaries to understand their specific needs and constraints, and to discuss the preferred modalities of assistance, to ensure that they meet their priorities and preferences. In **Rwanda**, Plan conducted assessments with potential beneficiaries in 2020 and 2021 to ensure that the specific needs of beneficiaries are identified, analyzed and addressed in the response Plan coordinates in the refugee camps. In **Uganda**, Plan relied on the desk review and the latest data from 2021 baseline assessment and the current implementations during which children, adolescents, youth and their communities have been consulted to understand their needs, constraints, capacities, and the extent to which activities and results are currently implemented. In **Mali**, a consultation with potential beneficiaries took place in June 2021, to involve children, adolescents, youth, their caregivers and key informants of their communities, in assessing the needs, risks and constraints regarding protection, in the three communities targeted. Cross-cuttingly, and complementary to these assessments, Plan teams will continuously engage with beneficiaries through the programs implemented in the different refugee camps and in the IDP sites, involving beneficiaries in the establishment of vulnerability criteria that are transparent and approved by community members and post-distribution monitoring surveys, supporting community-level initiatives and establishing complaints and feedback mechanism.

4.2.5 Other potential beneficiaries (indirect, catchment, etc.)

Other potential beneficiaries include all members of communities where the action is implemented. Considering catchment areas, the programme can impact 415,146 indirect beneficiaries – 101,332 in Mali (catchment area of Kolongo, Sana and Saloba), 239,148 in Uganda (Bidi Bidi settlement) and 74,666 in Rwanda (population of 5 DRC refugees camps).

4.2.6 Direct beneficiaries by sector

Sector	Number of beneficiaries
Protection	60,250

Beneficiaries	Number (#)	Women	Men
Infants and young children (0-59m)	9.454	51%	49%
Children (5-17y)	27.251	53%	47%
Adults (18-49y)	17.975	51%	49%
Elderly (>= 50y)	5.570	56%	44%

[FINAL]

- **Mali**

Tableau récapitulatif des personnes touchées par le projet à travers l'ensemble des activités

BENEFICIAIRES	CIBLE	# total atteints	#femmes	#hommes	VULNERABILITES	
					# PDIs	

	Initial					# Pers.en situation de handicap
Enfants de 0 à 5 ans	9454	17 158	8 253	8905	97	3
Enfants de 6 à 17 ans	27251	20 118	11 027	9091	689	22
Adultes de 18 à 49 ans	17975	24 376	12 375	12001	400	28
PERSONNES DE + 50ans	5570	21 113	7510	13603	149	9
TOTAL	60250	82 765	39165	43600	1335	62

Pour assurer l'acceptation du projet par les communautés et afin de renforcer les aspects de cohésion sociale, le ciblage des bénéficiaires de chaque activité a été réalisé de manière participative en concertation avec les communautés (*représentants des comités communautaires de protection, représentants des organisations féminines, représentants des organisations des jeunes, représentants des populations déplacées internes, etc*). Le projet a donc réussi à toucher 82 725 personnes courant la mise en œuvre du projet. De façon générale, les cibles totales ont été atteintes.

Cependant, le Mali a connu des challenges qui ont retardé le démarrage (se référer aux communications officielles à ce sujet) et qui expliquent partiellement la faible atteinte de certains groupes de bénéficiaires.

Notamment, les cibles relatives aux enfants de 6 à 17 ans sont plus bas qu'initialement prévu, 20118 au lieu que 27 251. Cela peut s'expliquer partiellement par le retard dans la mise en œuvre de certaines activités, ainsi que par la spécificité du contexte : la tranche d'âge 6-17 ans est normalement un groupe se trouvant à l'école, et le projet avait prévu de mettre en place des programmes en collaboration avec le système scolaires pour toucher beaucoup plus de jeunes. Ensuite, la quasi-totalité des écoles de la localité a dû en réalité fermer afin de servir comme abris pour l'arrivée massive des PDIs, ce qui a partiellement perturbé le travail. La mise en place d'espaces mobiles a néanmoins réussi à apporter une réponse à ce problème.

- **Rwanda**

Age category	Direct beneficiaries			Indirect beneficiaries		
	Number	Male	Female	Number	Male	Female
Infants and young children (0-59m)	3,277	48.5%	51.4%	N/A	N/A	N/A
Children (5-17y)	17,741	47.8%	52.1%	11,108	48.1%	51.8%
Adults (18-49y) & Elderly (>= 50y)	1850	12.8%	87.1%	10,663	40.8%	59.1%
Total	22,868	45.5%	54.4%	21,771	44.5%	55.4%
Total Direct & Indirect beneficiaries	44,639	45%	55%			

The table above provides a breakdown of the total number of beneficiaries and the percentage reached, per age group and disaggregated by sex, during the project implementation period running from October 2021 to October 2023. Based on the project data as of October 2023 when the project ended, the DGD Project has successfully engaged with 44,639 individuals through various programs. These programs include the Bloom program which has been implemented by 80 young females. The main purpose is to bring together ideas and activities to help adolescent girls shape their own lives and create their options. They have worked with girls ages 12-17. Girls were actively

involved in creating solutions to situations they faced in their daily lives. The total number of Participants was 700 Girls direct beneficiaries. Apart from the training received, they have received motivation materials as well as Dignity Kits. Moreover, the Champion of Change (CoC) program was implemented by 100 Champions of Change mentors. The main activity was about strengthening gender equality, Sexual reproductive health and rights among adolescent boys aged 12-17, and championing change toward gender equality in their families, communities, and society. They have engaged 700 Adolescent boys as direct beneficiaries and they graduated in September 2023.

The Parenting under Pressure (PUP) Program has been implemented by 20 trained parent-to-parent leaders. It aims to empower parents/caregivers of children (ages 0-8) in Humanitarian emergencies to provide nurturing care that supports their children's health development and well-being. It was a curriculum of 17 Sessions to be delivered to Groups of Parents. These sessions focused on teaching parents and caregivers about healthy child development and positive parent/caregiver-child interactions. The total number of participants was 1478 parents and caregivers as direct participants. In addition to the skills, each person has received Cash voucher assistance of 372,000 RWF.

Mass outreach campaigns were also organized. Out of the total number of people reached by the DGD project in the two years of implementation, 22,686 (51%) were direct participants and 21,771 (49%) were indirect participants. Of this population, 55% were female and 45% were male.

- **Uganda**

Total Participant reached through Project activities

Age \ Sex	Total	F	M	F	M
Infants	182	103	79	57%	43%
Children (5-17y)	4618	2401	2217	52%	48%
Adults (18-49y)	4508	2430	2078	54%	46%
Elderly (>= 50y)	310	173	137	56%	44%

4.3. Objectives, outcomes and activities

4.3.1. Operational overview of the action: logical framework⁶ (3 pages maximum)

Title of the action: Building Resilience and Protection of Children, Adolescents and Youth living in Refugee Camps, Internally Displaced Settlements and Vulnerable Communities				
Main objective: Contribute to building protective environments for refugee and IDP communities in which children and adolescents thrive, safe from all forms of violence, including SGBV, in communities affected by the humanitarian crises in Mali, Rwanda and Uganda				
	Intervention logic	Objectively verifiable indicators	Verification sources	Risks and assumptions
Specific objective	Children and adolescents affected by the humanitarian crisis, in refugee and IDP settlements, and vulnerable host communities, thrive in a protective environment and receive quality age and gender responsive protection services	% of children, adolescents, parents and caregivers reporting that child protection in emergency services are safe, accessible, accessible and participatory. Baseline ⁷ : 0%. Target: 80%.	Baseline and endline (surveys, FGD); consolidated reports from child-centred feedback mechanisms	Risks - Engagement with children, adolescents, youth and adult beneficiaries, their communities and other stakeholders can expose them to risks of abuse and other safeguarding issues; - Distribution of cash and voucher, food and NFIs, and provision of direct services to beneficiaries comes to similar PSHEA and safeguarding issues
		% of reported cases of violence against children, adolescents and youth that receive appropriate and timely services. Baseline: 0%. Target: 50%.	Consolidated extracts from case management database for individual case files and referral forms	
Outcome 1	Vulnerable children and adolescents, including UASC, are empowered to understand protection risks and behaviours, and have access to effective, safe, timely and age-friendly protection services	% of CAY that report changes to their wellbeing as a result of structured psychosocial support. Baseline: 0%. Target: 60%.	Baseline and endline (surveys, FGD)	COVID-related risks Border closures, import/export and port restrictions, fuel and commodity price fluctuations, and reduced commercial aviation and shipping operations affect the ability of partners to contract
		% of CAY who report that they are confident to report a protection violation to a reporting structure. Baseline: 0%. Target: 80%.	Baseline and endline (surveys, FGD)	
		% of CAY who demonstrate knowledge of child protection risks and behaviours. Baseline: 0%. Target: 80%.	Baseline and endline (surveys, FGD)	
Outcome 2	Parents and caregivers respect children's rights to protection and engage positive parenting skills to improve quality of care and reduce child neglect	% of parents and caregivers who report using positive parenting practices Baseline: 4%. Target: 60%.	Baseline and endline (surveys, FGD), using standard child protection and nutrition tools	
		% of children aged 8–17 who report a positive change in their interactions with their caregivers following their caregivers' participation in a	Baseline and endline (survey, FGD with CAY, using age	

⁶ This table must provide a comprehensive general overview of the different elements of the action. It will contain only concise information on the results and the activities. Any changes made to the logical framework at the interim or final report stage will be communicated.

⁷ Baseline surveys will be conducted in Mali and Rwanda to assess the baseline values of the indicators; in Uganda, a complementary assessment to the one conducted in 2020 for the Project "Building Community Resilience" will be implemented. Baseline values are set at 0 when unknown yet.

		family strengthening programme. Baseline: 0%. Target: 80%.	and gender responsive (child friendly) assessment tools)	commercial service providers.
Outcome 3	Community members and leaders support and respect protective gender and social norms, adopt practices that support non-violent behaviour in communities and actively engage to protect children, adolescents and youth against neglect, violence, exploitation and abuse	% of community members who can identify common types of violence and abuse in their communities. Baseline: 0%. Target: 85%.	Baseline and endline (FGD with community members, using standard child protection tools)	• Travel restrictions, lack of transport options, and access impediments lead to slow or no response by humanitarian organizations. <u>Assumptions</u> • The Ugandan and Rwandan asylum policy remains protective and inclusive; • Conflict being exacerbated by the crisis; new conflicts/internal violence and criminality may arise; it acts as a push factors for forced displacements in Sahel affecting Mali; • Beneficiaries and target groups are willing to participate to the activities and are not targeted • Key stakeholders in the refugee settlements, IDP sites and host communities support the project; • Markets are functioning • Governments not effect changes in policy in relation to participation of CSOs in humanitarian affairs
		% of community-based child and family protection mechanisms which meet minimum quality standards. Baseline: 0%. Target: 60%.	Baseline and endline (FGD with checklist of quality standards and criteria)	
		% of community members and leaders who report that it is acceptable for a man to hit or beat his wife (partner) under certain circumstances. Baseline: 62% ⁸ . Target: 20%.	Baseline and endline (FGD with community members)	
Outcome 4	Child protection service providers have the required capacity to manage and respond to cases of violence against children at the community level in cooperation with and with the support of civil society and community-based actors	% of trained social service workers who demonstrate key competencies required to identify and respond to cases violence of against children and SGBV . Baseline: 0%. Target: 80%.	Bi-annual assessment (Questionnaire and competency assessment)	
		% of trained community volunteers who have adequate knowledge and skills to provide PSS and animation of recreational activities in CFS, AFS, AGSS. Baseline: 0%. Target: 80%.	Attendance lists; training pre- and post-tests; CFS/AGSS observation check lists; consolidated extracts from feedback mechanisms	
Activities	R1A1	Set-up of child, adolescent-friendly spaces, including girls only spaces, in both refugee camps, IDP sites and vulnerable host communities, with a specific attention to safety and security.		
	R1A2	Provision of case management services to children and adolescents.		
	R1A3	Provision of support to unaccompanied and separated children (UASC) and adolescents.		
	R1A4	Roll out and set-up of the Champions of Change methodology with adolescents and youth to strengthen peer influencing over youth empowerment and gender equality.		
	R1A5	Building the life and economic skills of adolescents and youth by creating youth saving groups.		
	R2A1	Contextualization and roll-out of the Parenting Under Pressure (PUP) toolkit		
	R2A2	Set-up of parenting sessions using the PUP toolkit		
	R2A3	Community sensitizations on nutritional practices		
	R2A4	Livelihood / Foster care activities		
	R3A1	Establishment and strengthening of community-based child protection mechanisms and structures		

⁸ Computed based on latest available data from Demographic and Health Surveys (Ségou: 78%; West Nile: 78%; poorest quintile in Rwanda: 44%)

	R3A2	Mapping of protection-related risks in the communities	• Collaboration and coordination with humanitarian actors, international donors, local authorities and technical services remain positive • International humanitarian actors are well accepted by local communities • The security context remains stable to allow unhindered humanitarian access and project implementation • The influx of refugees remains stable in the targeted area
	R3A3	Community-level awareness-raising and sensitization on child protection and SGBV prevention and response	
	R3A4	Strengthening child and adolescent-friendly community feedback mechanism	
	R4A1	Capacity-building for project staff	
	R4A2	Capacity-building of service providers on quality, confidential and safe gender and age responsive case-management services and material support	
	R4A3	Training of government officials and partners from various sectors on children and adolescents' protection, safeguarding, gender equality and harmful practices	
	R4A4	Referral pathway strengthening and information dissemination by Plan and key stakeholders	
	R4A5	Protection-related advocacy targeting key duty-bearers	

[FINAL]

Title of the action: Building Resilience and Protection of Children, Adolescents and Youth living in Refugee Camps, Internally Displaced Settlements and Vulnerable Communities					
Main objective: Contribute to building protective environments for refugee and IDP communities in which children and adolescents thrive, safe from all forms of violence, including SGBV, in communities affected by the humanitarian crises in Mali, Rwanda and Uganda					
	Intervention logic	Objectively verifiable indicators	Mali	Rwanda	Uganda
Specific objective	Children and adolescents affected by the humanitarian crisis, in refugee and IDP settlements, and vulnerable host communities,	% of children, adolescents, parents and caregivers reporting that child protection in emergency services are safe, accessible, accessible and participatory. Target: 80%.	Baseline (September 2023): 67%	Baseline: N/A	Baseline: 0%
			Endline (April 2024): 69,12% Enfants et adolescents : 64,41% Parents et responsables d'enfants : 78,49%	Endline: N/A	Endline: 95%
			Baseline: N/A	Baseline: N/A	Baseline: 61,7%

	thrive in a protective environment and receive quality age and gender responsive protection services	% of reported cases of violence against children, adolescents and youth that receive appropriate and timely services. Target: 50%.	Endline (April 2024): 100% des cas ont eu accès à des services approprié dans les 72h suivant le signalement du cas à nos services.	Endline: N/A	Endline: 83%
Outcome 1	Vulnerable children and adolescents, including UASC, are empowered to understand protection risks and behaviours, and have access to effective, safe, timely and age-friendly protection services	% of CAY that report changes to their wellbeing as a result of structured psychosocial support. Target: 60%.	Baseline: N/A	Baseline: N/A	Baseline: 13.37%
			Endline (April 2024): 100% Filles : 100% Garçons : 100%	Endline: 83% Female: 82% Male: 85%	Endline: 31.24%
		% of CAY who report that they are confident to report a protection violation to a reporting structure. Target: 80%.	Baseline (September 2023): 27.48% Filles : 28.57% Garçons : 26.39%	Baseline: 72% Female: 76% Male: 67%	Baseline: 67.8%
			Endline (April 2024): 75,02% Filles : 74,00% Garçons : 76,19%	Endline: 98% Female: 98% Male: 99%	Endline: 75.90%
		% of CAY who demonstrate knowledge of child protection risks and behaviours. Target: 80%.	Baseline (September 2023): 25,23% Filles : 24,71% Garçon : 25,65%	Baseline: 58% Female: 59% Male: 56%	Baseline: 30.7%
			Endline (April 2024): 60,00% Section A : Compréhension de la violence Score moyen : 45,80% Filles : 48,00% Garçons : 42,86%	Endline: 82% Female: 81% Male: 83%	Endline: 49.50%

			Sections B et C : Connaissance de l'autoprotection Score moyen : 74,20% Filles : 82,00% Garçons : 61,90%		
Outcome 2	Parents and caregivers respect children's rights to protection and engage positive parenting skills to improve quality of care and reduce child neglect	% of parents and caregivers who report using positive parenting practices Target: 60%.	Baseline (September 2023): 49.05% Hommes : 40,68% Femmes : 57,41%	Baseline: 73% Female: 70% Male: 77%	Baseline: 55.2%
			Endline (April 2024): 85,49% Section A : pratiques parentales positives dans le cadre du déroulement de la vie quotidienne en famille Score moyen Section A : 91,67% Hommes : 91,30% Femmes : 92,31% Section B : ressenti en tant que parent capable d'élever ses enfants Score moyen Section B: 79,31% Hommes : 69,57% Femmes : 92,31%	Endline: 98% Female: 98% Male: 100%	Endline: 82%
		% of children aged 8–17 who report a positive change in their interactions with their caregivers following their caregivers' participation in a family strengthening programme.	Baseline: N/A	Baseline: 41% Female: 41% Male: 42%	Baseline: N/A
			Endline (April 2024): 100% Filles : 100%	Endline: 95% Female: 95%	Endline: 94.1%

		Target: 80%.	Garçons : 100%	Male:96%	
Outcome 3	Community members and leaders support and respect protective gender and social norms, adopt practices that support non-violent behaviour in communities and actively engage to protect children, adolescents and youth against neglect, violence, exploitation and abuse	% of community members who can identify common types of violence and abuse in their communities. Target: 85%.	Baseline (September 2023): 36.95% Hommes : 56,25% Femmes : 17,65%	Baseline: 87% Female: 100% Male: 75%	Baseline: 33.5%
			Endline (April 2024): 66,96% Hommes : 62,50% Femmes : 71,43%	Endline: 88% Female: 86% Male: 91%	Endline: 45.4%
		% of community-based child and family protection mechanisms which meet minimum quality standards. Target: 60%.	Baseline (September 2023): 92,16%	Baseline: N/A	Baseline: 0%
			Endline (April 2024): 100%	Endline: 82%	Endline: N/A
		% of community members and leaders who report that it is acceptable for a man to hit or beat his wife (partner) under certain circumstances. Target: 20%.	Baseline (September 2023): 50.0% Hommes : 48,48% Femmes : 51,52%	Baseline: 100% Female: 100% Male: 100%	Baseline: 69,4%
			Endline (April 2024): 48,21% Hommes : 12,50% Femmes : 57,14%	Endline: 22% Female: 34% Male: 7%	Endline: 41%
Outcome 4	Child protection service providers have the required capacity to manage and respond to cases of violence against children at the community level in cooperation with	% of trained social service workers who demonstrate key competencies required to identify and respond to cases violence of against children and SGBV. Target: 80%.	Baseline: N/A	Baseline: 39% Female: 39% Male: 39%	Baseline: 21%
			Endline (April 2024): 100% Hommes : N/A Femmes : 100%	Endline: 47% Female: 30% Male: 62%	Endline: 75%
		% of trained community volunteers who have adequate knowledge and skills to provide PSS and animation of	Baseline: N/A	Baseline: 47% Female: 44% Male: 50%	Baseline: 53%

	and with the support of civil society and community-based actors	recreational activities in CFS, AFS, AGSS. Target: 80%.			
			Endline (April 2024): 85,71% Hommes : 100% Femmes : 57,14%	Endline: 59% Female: 57% Male: 61%	Endline: 75%

4.3.2. More detailed information per outcome

4.3.2.1. Outcome 1: Vulnerable children and adolescents, including UASC, understand protection risks and behaviours, and have access to effective, safe, timely and age-friendly protection services

4.3.2.1.1. At the proposal stage

- **Sector:** Protection
- **Related sub-sector:** Prevention and response to violence, Support to separated and unaccompanied children, Gender based violence (Prevention, response, other)
- **Beneficiaries (status + number):** 22,850, among which 18,110 refugees, 410 IDPs and 4,330 vulnerable host communities
- **Indicators for this outcome:** Plan's outcome indicators level of Protection from violence results framework

Activity 1. Set-up of child, adolescent-friendly spaces, including girls only spaces, in both refugee camps, IDP sites and vulnerable host communities, with a specific attention to safety and security. The provision of age and gender responsive psychosocial support and life skills through recreational and structured activities in child, adolescent friendly spaces (CFS/AFS) and adolescent girls' safe spaces (AGSS), will enable children, adolescents and their caregivers to have increased knowledge, awareness and capacity regarding self-protection, resilience and self-reliance. It will be enhanced by providing critical information on protection risks, available services, as well as life skills training. A special focus is on adolescents, especially adolescent girls, in the activities proposed at the spaces in AGSS. The action will ensure that they have access to life skills training, including leadership, negotiation and conflict management. Following Plan Mobile Unit Guidelines and international CPIE Standards, in case of specific contextual restrictions, the CFS/AGSS will be converted in Mobile Unit; this will support the prevention of forms of isolation, will ensure that vulnerabilities are still identified and that case management will still be undertaken by the case workers. (1) **In Mali**, 3 new spaces will be established, and the equipment for 3 mobile units will be set-up. The age and gender-responsive activities will be implemented by 24 animators, supervised by 6 supervisors, who will be trained (alongside with 20 staff members), receive a monthly stipend and organize recreational activities and psychosocial support. It is expected that 2,250 children and adolescents (50% boys and girls) will receive quality child protection support within the spaces over the course of the action. In addition, as part of the AGSS activities, 30 groups of 40 vulnerable adolescent girls (1,200 adolescent girls in total), will be created to foster girls' leadership, with animators facilitating discussions about SGBV, girls' SRHR; they will be targeted to receive dignity kits. (2) **In Rwanda**, 5 spaces will be set-up and furnished with recreational material and adolescent girls' specific targeted material, including menstrual hygiene management kits. The action will support equipment, stationaries, recreational material. The activities will be implemented by 75 animators, i.e. 15 per camp, 10 mentors, i.e. 2 per camp, and 15 staff members (100 targets in total), who will be trained; animators will receive a monthly stipend. Over the course of the project, it is expected that 15,000 children and adolescents will receive PSS quality support. In addition, 3,000 girls and adolescent girls will be targeted by specific adolescent girls in crises activities, open to all. In close link with other agencies and with UNHCR, 300 girls in each camp are targeted each camp, targeting 1,500 girls in total, will receive a dignity kit. (3) **In Uganda**, the action will support the establishment of 2 CFS/AFS, and will upscale 2 existing CFS into AGSS/AFS. Depending on the evolution of the pandemic, it is also foreseen that some of the recreational activities and psychosocial support can be delivered in the form of mobile units delivering activities. Spaces will be equipped with recreational material and stationaries. 110 animators and 24 staff members including case-workers and 6 youth leaders (140 targets), will be trained regularly to lead activities; animators will receive monthly stipends; they will work closely with the team of case-workers so that the dedicated spaces are an entry point for identification of cases. It is expected over the course of the project that 800 children and adolescents (400

girls and 400 boys) will actively participate to the recreational activities over the course of the action, and benefit from psychosocial support; in addition, 100 adolescent girls will be targeted to participate to training into technical skills activities; start-up kits will be distributed to targeting adolescent girls, based on objective vulnerability criteria.

Activity 2: Provision of case management services to children and adolescents. Plan and partner's case workers and community volunteers will provide urgently needed, quality child and adolescent-centered and gender-responsive case management services for. Plan will prioritize identification, assessment, establishment of case plan and close follow-up of children and adolescents at risk or presenting protection-related needs until case closure, aligned with CPMS guidelines for the case management steps (Standard 18) and country SoPs. Based on the individual vulnerability assessment and the case plan, accordingly with the referral SoPs Plan will implement a package of protection services as part of the case-management, comprising: mixed assistance, composed of both cash and in-kind assistance, on the basis of identification by case-workers, direct psychosocial support during monitoring visits and dedicated family and individual meetings. As each case is unique specific in-kind and cash support can only be estimated based on previous assessment, on-going practices and child protection projects and on sector and country-specific guidelines, to provide fees, transportation and potential meals and medical accommodation to access basic life-saving services. Case workers will use friendly communication to support the family and the child to access services. If necessary, upon the family consent and considering the best interests of the child, Plan case workers will ensure case referral to appropriate age and gender responsive services. To ensure a coordinated discussion over the case management approach the case workers and the case supervisors will meet in case conferences to share information about cases (which will remain anonymous), about services, constraints and define the way forward. (1) **In Mali**, Plan and GAAS Mali NGO's 6 caseworkers will support the case-management of 300 cases over the course of the project, including through cash-based support or in-kind support to access life-saving services or to respond to essential needs (planning for a 30€ mixed modality per case to cover access to services). Plan will also provide medium to long-term solutions to girls at risk, by creating 3 *fonds d'appui* per community (30 communities targeted in total, 90 adolescent girls and young women, benefitting from a 121€ endowment to respond to essential needs), that will enable adolescent girls and young women to develop income-generating activities; the target will be defined through an accurate risk-analysis that will prevent and mitigate the risk-amplification. (2) **In Rwanda**, case-management will be undertaken by 5 child protection officers in support of 75 Community-Based Protection members, named Community Mobilisers, who will help in daily follow-up of child protection cases at community level in refugee camps. CVA and material assistance in-kind will comprise an estimated 8,5€ on average per beneficiary. It is estimated that 720 children and adolescents in total need of protection services will be supported via case-management. This activity will be undertaken in camps only, as case-management in vulnerable host communities does not fall under the mandate of Plan. (3) **In Uganda**, a team of 14 caseworkers will identify and closely follow-up 1,800 cases over the course of the project; Plan will cover for the 1,800 cases the access to relevant services (including transportation, meals) with a flexible modality. In addition, they will receive cash assistance (36€, two instalments), either through their caregiver or directly for adolescents, based on BIA.

Activity 3: Provision of support to unaccompanied and separated children (UASC) and adolescents. Through the case management process (BIA and BID), Plan case workers will ensure the holistic care of UASC through identification, documentation, family tracing and support to family reunification in coordination with the key stakeholders involved in family tracing and reunification at national level, and psychosocial support. Plan, in coordination with the local authorities and the UNHCR and other child protection and GBV partners, will support the selection, training and monitoring of transitional foster families, will provide psychosocial support and material support. Foster families will be enrolled in Parenting Under Pressure

activities (R2A4) and will receive material support, depending on risks and market assessment (R2A4) as they will be identified as protection-related vulnerable families. (1) **In Mali**, Plan and GAAS Mali NGO will support a total of 50 UASC to be identified and referred to dedicated services, while Plan caseworkers closely follow-up on the UASC and their foster families. (2) **In Rwanda**, currently 661 UASC are identified by Plan and partners. 100 foster families will be identified and accompanied by Plan staff. At community level, an emergency fund to provide immediate support to foster families (essential NFIs and food items) will be set-up and managed by Plan staff. (1) **In Uganda**, 40 UASC will be identified and supported, and 40 foster families will be identified, accompanied and trained by the project staff.

Activity 4: Roll out and set-up of the Champions of Change methodology with adolescents and youth to strengthen peer influencing over youth empowerment and gender equality. Plan will roll-out the [Champions of Change \(CoC\) methodology](#), which is an empowerment flagship approach that has been successfully piloted and adapted in Rwanda refugee camps (cf. Rwanda Needs Assessment Annexed). Adolescents and youth are trained to become peer influencers within their communities on sensitive subjects such as gender equality, SGBV, girls' rights, positive masculinities, via a ToT strategy, with trained facilitators guiding adolescents participants through the modules. Once modules are covered, CoC set-up an action plan to design outreach activities within the communities, and influence their peers and members of the community. In humanitarian contexts, the approach is well-suited to empower beneficiaries and target groups who are usually vulnerable in terms of protection criteria and overlooked by the humanitarian responses, as benefitting indirectly from services targeted towards households while promoting social cohesion projects within communities. (1) **In Mali**, Plan will build the capacities of GAAS Mali NGO to implement the methodology. 30 groups of CoC (1 per community) will be set-up, closely linked with AGSS and AFS/CFS, targeting a total of 120 CoC; each group will be trained by the animators within the AFS, choosing which modules they wish to focus on. At the end of the modules' trainings, CoC groups will be provided with an endowment to implement community outreach activities. (2) **In Rwanda**, 25 adolescents per camp (125 in total) will be trained over sessions, by 15 facilitators in total. CoC will then embark on peer-to-peer exchanges with children and adolescents, in both refugee and host communities, with the action supporting with material provision their action plan implementation. The CoC will not only reach out to youth and adolescents in their communities, but will also set-up adolescents groups reaching 625 adolescents and youth (125 per camp, organized in clubs). (3) **In Uganda**, 25 facilitators of CoC (mentors) and project staff will be trained on the approach; they will implement trainings towards an expected 100 CoC. Twice during the course of the action, the CoC will support peer-to-peer exchange visits with other groups, while also benefitting from capacity-building to lead and facilitate peer support groups. Finally, Plan will identify 50 adolescent girls and young women mentors, among the CoC, in the provision of psychological first aid within their communities, while building at the same time their leadership, advocacy and influencing skills.

Activity 5: Building the life and economic skills of adolescents and youth by creating youth saving groups. To complement the social empowerment dimension of CoC and recreational activities in AGSS and AFS, Plan will deploy life skills and economic empowerment activities targeting adolescents and youth. Economic empowerment will achieve positive outcomes regarding the capacities of the adolescents and youth, as well as ensuring economic capacities on the medium-term. Life skills (financial literacy, entrepreneurship skills, personal self-esteem and decision-making skills) will be reinforced. As part of a nexus approach, ensuring sound economic opportunities for youth in displacement settings, and in conflict settings (Mali) is important to foster social cohesion and peacebuilding promotion. (1) **In Mali**, Plan staff will set-up the YSLAs in each of the 30 communities, targeting 10 youth per community. (2) **In Rwanda**, Plan will build upon the achievements of the previous projects ("*Girls Take The Lead*", "*Empowering Girls for Equality*") implemented in the refugee camps of Rwanda which aimed building the above-mentioned skills. This activity will focus on delivering BLOOM/CAF! life skills curriculum (cf. Rwanda Needs Assessment Annexed) to

adolescents through a mentor model approach. A group of 225 adolescents and youth will be enrolled (125 Champions of Change and 100 adolescent girl volunteers), relying first on a training of 15 trainers (3 per camp) organized in 15 groups. (3) **In Uganda**, 100 adolescents and youth will benefit from the life skills training as well as leadership and group cohesion skills, as part of 4 groups of 25 beneficiaries.

4.3.2.1.2. At final report

[FINAL] Beneficiaries (status + number):

- **Mali**

Bénéficiaires (statut + nombre) atteints dans le cadre du Résultat 1 : **26 589 enfants**

Enfants des EAF	11 934
Enfants survivants touchés hors EAE	51
ESNA	50
Cascade Compétence de vie 1200	1 200
AGR	253
Actes de naissance/Jugements Supplétifs	600
Enfants sensibilisés sur les tendances des violences hors espaces	12 501
TOTAL	26 589

- **Rwanda**

6579 people, including 9592 females and 6887 males, were reached under the result 1.

- **Uganda**

Beneficiaries for Outcome 1:

Age \ Sex	Total	F	M	F	M
Infants	182	103	79	57%	43%
Children (5-17y)	4618	2401	2217	52%	48%
Adults (18-49y)	398	266	132	67%	33%
Elderly (>= 50y)	7	0	7	0%	100%

% of CAY that report changes to their wellbeing as a result of structured psychosocial support. Baseline: 13.37%0%. Target: 60%. End-line 31.24%

% of CAY who report that they are confident to report a protection violation to a reporting structure. Baseline: 67.8%. Target: 80%. End-line 75.9%

The project demonstrated positive results especially in building the confidence of the children, adolescents and young people in reporting violence against them to relevant authorities such as police, child protection committees, Refugee Welfare Committees, local council leaders, teachers, among others. The End-line results show 75.9% of the CAY interviewed from 67.8% at baseline reporting being confident enough to report a threats, sexual abuse, physical violence, emotional torture, and others. The level of confidence varied according to age with children scoring 65%, adolescents 73% and 85% for young people respectively. Though the action registered great success compared to the baseline result, the set target of 80% was not attained and therefore needs to be strengthened in future interventions.

% of adolescents and youth who demonstrate knowledge of child protection risks and behaviors Baseline: 30.7%0%. Target: 80%. End-line 49.50%

Overall, of the 5 forms of violence asked about, 41% of the CAY demonstrated knowledge in key protection risks at end-line compared 30.7% at baseline. The participants were able to identify protection risks such as physical violence, sexual violence, child neglect, among others. The result is lower than the expected target of 80%.

of child, adolescent-friendly spaces established and rehabilitated. Baseline:4 Target:

4. Result 5

The project established and rehabilitated 5 child, adolescent friendly spaces in Zone II and III. Out of the 5 CFS, 1 was constructed, 3 rehabilitated and 1 more CFS was equipped with age and gender appropriate play materials.

of CFS animators trained in case management. Baseline 0: Target: 110. Result t 68.

During the design of the project, it was planned to have 110 animators to reach out to a total of 800 children in 4 CFSs. However, during the implementation, it was realized that the target was low compared to the number of animators to be hired, for instance, it was supposed to be 27 animators to the ratio of 7 children which was very low number. Therefore, there change, the project recruited 63 animators 12 per CFS, and 7 security guards to reach out to 800 children in 5 CFS. 12 animator to reach out to 200 children per CFS. Hence ratio of 1 animator per 16 children.

63 CFS animators, and 7 CFS security guards. 70(29 Female, 41 Male) from the refugee settlement and Host community were recruited and trained on child protection concepts, qualities of a good CFS, child-friendly communication, psychological first aid, and the PIU safeguarding policy.

of Project team trained on case management Baseline 0: Target: 20. Result 20.

In addition, 20 (13 female, 7 male) project staff were trained on child protection case management and best interest procedures.

of children and adolescents participating in child and adolescent-friendly spaces activities and services: Baseline: 0 Target: 800. Result 4618

4618 children (2401 Girls, 2217 Boys) out of this 2818 were refugees (1601 girls, 1217 boys) and 1800 from the host community (800 girls, 1,000 boys) reached through static and mobile CFS activities facilitated by trained animators in Zone II and III. (70% / 30%). This is above the project target of 800. The mobile CFS was being implemented awaiting the completion of the new CFS at Limu village.

of Adolescent girls trained on skills activities and benefit from start-up kits: Baseline: 0 Target: 100. Result 100

100 Adolescent girls were trained on informal vocational skills in tailoring and hair dressing for 3 months. 25 of these trained in hair dressing and 75 in tailoring skills respectively. After the training the girls were grouped in 5 and supported with start up kits such as tailoring machines and hair dressing equipment.

of children and adolescents at risk identified with child protection cases or concerns that have received appropriate case management services. Baseline: 0 Target: 1800 Result 1570.

1,570 (807 girls, 763 Boys) children were identified, assessed and supported with case management services. Out of these 857 (425 girls, 432 boys) unaccompanied/separated children and 713 (382 girls, 331 boys) children at risk. The children above are inclusive of the newly identified and the transferred cases from the previous project funded by DGD, It's my Body project and World Vision Uganda. In addition, 837 (411 girls, 426 boys) children were supported with case-by-case items based on the individual needs assessed by the case

management workers.

683 (342girls 341boys) separated children are directly followed up by the case management workers through following the individual case plans. Activities in the case plan include, case follow-up and ongoing monitoring, material support and referral for other services based on the best interest assessments.

of vulnerable children under case management who benefit from cash & Voucher assistance. Baseline: 0 Target: 1250. Result: 1250

1250 (668girls, 582boys) children were verified and supported with cash and voucher assistance of 320,000/= split in three cohorts and given in form of cash in envelope and mobile money. 95%of participants that recieved the cash and voucher support reported that the it was a good innitiative hat helped them to access basic needs. (PDM Report, January 2023).

CoC Facilitators and staff trained on CoC methodology. Baseline: 0 Target: 50 Result: 10

There was also change in the number of COC facilitators, the initial proposal was to have 25 COC facilitators trained and were expected to reach out to 100 COC members. The project managed to identify and train 10 (6F, 04M) COC facilitators based on the guideline. For example, the COC Curriculum allows 02 facilitators to handle one group. Each group consists of 20 members. Therefore 5 groups (3 groups of girls and 02 groups of boys) only required 10 facilitators. Therefore, 10 (6F, 4M) Champions of change facilitators and 20 (13F, 07M) project Staff were trained as TOT on the Champion of Change methodology. This represents 60% of the planned target, however by design each COC group was meant to be supported by 2 facilitators and 10 were adequate for the 5 COC groups and there was no need to train more facilitators.

of adolescents enrolled in the CoC activity who actively participate in the CoC Sessions. Baseline: 0 Target: 100 Result: 100

100 (60girls, 40boys) adolescents were enrolled and participated in COC sessions. The adolescents were engaged in 05 groups of which, 3 for girls and 2 for boys respectively in Zone II and III of Bidi Bidi Settlement. Additionally, 29 community leaders (21 female, 8 male) participated in awaress sessions during formation of COC groups. The participants attended sessions on gender equality, roles and responsibilities, violence, sexuality and confidence and skills.

of peer-to-peer exchange visits supported targeting youth Led initiatives with the participants of CoC Activities. Baseline:0 Target: 2 Result: 96

96 (62Female, 34Male) Champions of Change (COC) members were reached during learning and exchange visits among the group members.

of youth saving groups Created and supported. Baseline: 0 Target: 4 Result 4

Formed and supported 4 youth savings groups with a total of 100 (58F, 42M) participants of 25 members in each group. Out of the 4 groups, 3 are in Zone III and 01 in Zone II. The groups were supported with Village Savings and Loan Association (VSLA) kits to effectively conduct their savings activities. The VSLA kit included metallic saving box with padlocks, bowls, counter books, pens, rulers, calculators, record books.

of adolescent groups trained on group dynamics, leadership & Cohesion. Target: 5 Result: 5

98(36F,62M) adolescents and youths trained on group dynamics and leadership cohesion from five COC groups (3 groups for girls and 2 groups for boys).

[FINAL] Indicators for this outcome: please refer to the table 4.3.1 [FINAL]

[FINAL] Activities related to this result:

- Mali

R1.A1. Création d'espaces adaptés aux enfants et aux adolescents, y compris des espaces réservés aux filles, dans les camps de réfugiés, les sites de personnes déplacées et les communautés d'accueil vulnérables, en accordant une attention particulière à la sûreté et à la sécurité.

Indicateurs :

de EAE / EAJ / ESF créés ou réhabilités : 03 espaces fixes et 20 EAE mobiles mis en places.
 # de membres de l'équipe, d'animateurs.trices, de travailleurs.euses sociaux et de bénévoles bénéficiant du renforcement des capacités : 44
 # d'enfants bénéficiant des activités EAE / EAJ : 11 834
 # d'adolescentes bénéficiant de kits de dignité et de sensibilisation aux VSBG, SSR et GHM. : 3557 filles ont participé aux activités de sensibilisation et 1200 kits ont été distribués.

Stratégies :

Recrutement de l'ONG partenaire de mise en œuvre : Dans le cadre de la mise en œuvre des activités Plan a recruté l'ONG ALPHALOG comme partenaire de mise en œuvre. Le partenaire a à son tour a mis en place une équipe mixte constituée d'un coordinateur, d'un superviseur, d'un M&E, de 05 animateurs et de 5 gestionnaires de cas.

Formation de l'équipe Plan + Partenaire : l'équipe projet ainsi constituée a bénéficié d'une série complète de formations sur la protection des enfants en situation d'urgence, l'appui psychosocial, la communication avec les enfants l'identification et le référencement des enfants en besoin de protection, la gestion des cas de protection des enfants, la gestion et la mise en place et le suivi des EAE/EAA, les kits de dignité et autres.

Élaboration et mise en œuvre d'un plan de formation par le CPiE specialist du CO et l'équipe du projet : Les besoins en formation ont été identifiés et les formations ont été réalisées. Le CPiE a facilité la protection des enfants en situation d'urgence, la gestion et la mise en place et le suivi des EAE/EAA, les kits de dignité. Le chef de Projet a facilité la formation des staffs sur la gestion des cas. Plan Belgique a facilité la formation sur le mariage des enfants et sur la mise en place des mécanismes de retour d'information.

Identification des animateurs/trices EAE : 18 animateurs pour les Espaces Amis des Enfants/Espaces Amis des Adolescentes ont été identifiés dans la communauté (équipe mixte) suivi de leur formation par Plan et le partenaire sur la PE, les VSBG, la SSR, sur les premiers secours psychologiques, sur la communication avec les enfants et les adolescent.es en situation de crise ainsi que [la boîte à outil "Rire & Jouer"](#) de Plan pour les activités avec les enfants. La formation a été donné par les staffs du projet appuyé par le CPiE.

La réalisation des travaux de 03 espaces EAE : Au niveau des 03 chefs lieu des communes, des endroits ont été identifiés en concertation communautaire. Un bureau d'études et 30 entreprises ont été recrutés pour la réalisation de travaux de qualités

Mise en place de 20 EAF/EAE de types mobiles : Le projet a mis en place 20 unités mobiles. Ces unités mobiles ont été mises en place à cause de l'évolution du contexte sécuritaire de plus en plus dégradant de la zone.

Planification des activités éducationnelles avec les enfants et les adolescent.e.s. : Les animateurs EAE ont organisé les enfants en groupes et planifiés des activités de groupe. Il y a eu aussi des activités spécifiques avec des adolescentes sur la SRHER, les adolescentes en situation de crise et l'appui psychosocial.

Distribution des kits de dignité aux adolescentes : en groupe de discussion, des stratégies ont été élaborées pour non seulement identifier 1200 bénéficiaires des Kits de dignité, le contenu des kits mais aussi et surtout la stratégie de disponibilité continue de serviette hygiénique.

Réalisation d'émission radiophoniques sur les VSBG : Six contrats ont été établis avec 6 radio communautaire qui animent des émissions sur les services de lutte contre la VBG

R1.A1.1 : Mise en place de trois (03) espaces fixes et 20 espaces mobiles :

Afin d'offrir aux enfants un cadre sécurisé dans lequel ils peuvent participer à des activités organisées pour se divertir et se socialiser, mais aussi apprendre et s'exprimer librement tout en se sentant en sécurité malgré la période de crise dans laquelle ils vivent, le projet a mis en place et équipés **trois (03) espaces amis des enfants** protecteurs pour les enfants et adolescents. Pour la mise en œuvre de ces activités, en plus des modèles fixes, **vingt (20) espaces** de types mobiles ont également été mis en place. La prise en compte de cette stratégie dans la réponse fait suite à la nécessité de s'adapter au contexte actuel de la zone d'intervention du projet, en proie au déplacement massif de façon continue des populations. Le recours à la stratégie mobile a permis de fournir des services de protection à plus d'enfants affectés. Les modes de fonctionnement des Espaces mobiles sont similaires à ceux fixes, à l'exception du fait que les EAE mobiles n'ont pas un espace aménagé et les activités ludiques et récréatives sont réduites car les animateurs ne pouvaient pas transporter autant de matériels et équipements pour se déplacer.

Si au niveau des espaces fixes on a atteint 2 283 enfants, grâce aux espaces mobiles, on a pu atteindre un total de 11 834 bénéficiaires. Le fait de leur offrir un espace sûr dans lequel enfants des PDIs et des familles d'accueil peuvent s'exprimer, parler de leurs pensées et de leurs peurs avec des personnes formées, leur permet de retrouver un sentiment de sécurité et de confiance envers les autres. Ceci est fondamental pour les aider à se relever et s'adapter au contexte.

Pour la conduite des activités récréatives et de prise en charge holistique des enfants survivant-e-s de protection et VSBG, une (01) Officier Réponse Protection chargée de la supervision au compte de Plan International, 5 Gestionnaires, toutes des femmes, chargées d'offre de service de réponse et 18 animateurs/trices communautaires chargé-e-s d'animer les EAF, travaillent ensemble.

Dans chaque Espace fixe, les enfants ont été répartis en 3 groupes selon les tranches d'âge (3 à 5 ans, 6 à 12 ans et de 13 à 18 ans). Ils bénéficient des activités adaptées à leur âge avec des agendas différents.

Nous avons également des:

- Groupes mixtes de 0 à 8 ans (avec des jeux, et les activités du module "Rire & Jouer")
- Groupe d'adolescents de 10 à 14 ans et 15 à 19 ans pour les modules sur les compétences de vie.

Les adolescents et jeunes femmes de 14 à 24 ans bénéficieront des séances adaptées

à leur féminité (VSBG, la SSR, l'hygiène menstruelle).

Les EAE ont offerts aux enfants touchés par les activités d'énormes opportunités d'apprendre, de jouer et de "rire" tout en développant/renforçant leur résilience à la suite de la situation d'urgence prolongée qui se vit dans le cercle de Macina. Ils ont également permis d'identifier 262 enfants survivants et de les référer à la gestion de cas afin de trouver des moyens de répondre aux problèmes spécifiques les menaçant (plus d'information à ce sujet à l'activité R1A2).

Tableau récapitulatif des enfants qui ont fréquentés les EAE selon l'âge, le sexe et leur statut de vulnérabilité

Tranches d'âges	Espace s fixes	Espace s Mobiles	TOTAL (Fixes + Mobile)	En handicap	PDI	Enfant s stables	Enfants temporaire s
Filles de 6 à 9ans	252	1 008	1 260	0	118	370	1 126
Garçons de 6 à 9ans	301	1 117	1 418	2	102	403	1 219
Filles de 10 à 14 ans	384	1 557	1 941	1	116	500	1 673
Garçons de 10 à 14ans	398	1 425	1 823	2	118	516	1 543
Filles de 15 à 17 ans	276	1 282	1 558	2	104	380	1 386
Garçons de 15 à 17 ans	239	1 352	1 591	3	114	353	1 466
Femmes de 18 à 24 ans	225	816	1 041	1	56	281	872
Hommes de 18 à 24 ans	208	994	1 202	2	28	236	1 022
TOTAL	2 283	9 551	11 834	13	756	3 039	10 307



Photo d'un espace en activité mixtes dans le village de Kolongo



Photo de rencontre d'information avec les enfants dans le cadre de la mise en place des EAE mobiles



Quelques images des enfants en activités ludiques dans les EAE

Actes de Naissance

Une évaluation des besoins en matière de protection a aussi permis de constater que, dans la zone d'intervention du projet, les populations exposées aux situations d'urgence ne sont souvent plus en possession de certificats de naissance et de décès des membres de la famille, ainsi que d'autres pièces d'identité, notamment leurs cartes nationales d'identité, perdus ou détruits pendant une crise. Il ressort ainsi que dans les communautés plus de 12 000 enfants des ménages PDIs et hôtes n'ont de d'extraît d'acte de naissance (chiffre confirmés par le rapport RRM de mai 2023 de la région de Ségou (DRDSES, ALPHALO et CRS). Le projet a pris soins de doter 600 extraits d'actes de naissance dont 400 aux enfants des familles hôtes et 200 aux enfants PDIs.

Santé Sexuelle et Reproductive

Remise de kits de dignité aux adolescentes après la séance de sensibilisation à Saye



L'équipe a aussi distribué 1200 kits de dignité à de jeunes adolescentes et jeunes femmes de la tranche d'âge 14 - 24 ans (le contenu a été défini en concertation avec les groupes bénéficiaires, notamment des foulards, pagnes, chaussures, coton hygiéniques, pâte dentifrice, brosses à dents, torches, sifflets, couvertures...).

La distribution a été accompagnée par des activités de sensibilisation à l'endroit de 3557 filles et adolescentes sur les questions de la santé sexuelle et reproductive. Une des formations données a été celle sur la fabrication des serviettes hygiéniques réutilisables :

Formation sur la confection des serviettes hygiéniques réutilisables

Plan International Mali à travers son projet DGD et son partenaire de mise en œuvre Alphalog ont initié une session de formation de trente (30) filles et cinq gestionnaires de cas sur la fabrication de serviettes hygiéniques réutilisables. L'atelier a été facilité par une personne ressource de Plan International chargée de ce domaine.

La formation a été initiée à l'endroit des adolescentes des trois (03) communes d'intervention Kolongo, Saloba et Sana, tenue du 06 au 07 octobre 2023 dans la salle de conférence du Conseil de Cercle de Macina.

Les personnes vivant dans des contextes d'urgence sont confrontées à des défis encore plus importants, avec un accès moindre aux produits menstruels et aux installations de base et des obstacles plus importants à leur participation aux activités quotidiennes en comparaison au reste de la population.

Presque chaque fille et femme a des règles en moyenne tous les 28 jours, 5 jours sur 5 de la ménarche à la ménopause, comme un processus biologique normal. Pourtant, la menstruation est entourée de silence, de mythes et de tabous, et fait même l'objet d'une stigmatisation. Les femmes et les filles font face à de nombreux défis pour gérer leurs menstruations. Les normes et les pratiques rendent difficile le maintien d'une bonne hygiène. L'achat du matériel de protection coûte cher et n'est plus considéré comme prioritaire. Il est opportun alors que la fille apprenne à fabriquer du matériel de protection pour le flux menstruel, lavable et réutilisable pendant de nombreuses années.

Pour rendre disponible le matériel d'absorption du flux menstruel et en permettre l'accès à toutes les filles, un prestataire a été sollicité pour faire la formation sur la fabrication et l'utilisation de serviettes hygiéniques réutilisables.



Quelques images de la formation sur la confection des serviettes hygiéniques

Témoignage

Aissata Diarra, une fille âgée de 24 ans, membre du comité communautaire de protection des enfants de son village, donne ses impressions sur la formation en ces termes : « j'ai beaucoup appris sur la formation de confection des serviettes hygiéniques réutilisables organisée par Plan et son partenaire de mise en œuvre ALPHALOG. Cette formation a été pour moi, très intéressante et importante car désormais je sais comment confectionner une serviette hygiénique et je peux aussi apprendre à d'autres filles de ma communauté à le faire. C'est plus bénéfique car je peux utiliser un tissu tout une année voire plus. En plus je peux également en faire une activité génératrice de revenus. Je remercie Plan et son partenaire pour l'initiative ».

Fatoumata Séréta, une jeune fille de 18 ans, a pris part à la formation sur la confection des serviettes hygiéniques réutilisable remercie Plan International pour cette initiative en ces mots : « *Je suis très heureuse d'avoir pris part à cette importante formation de deux jours et je remercie plan et son partenaire pour cette occasion qui nous a été offerte. Je trouve que les serviettes hygiéniques réutilisables sont meilleures et bénéfiques. Dès mon retour je pourrais aider mes sœurs et les autres filles de mon village en apprenant comment les confectionner. Merci* »

R1.A2. Fourniture de services de gestion de cas aux enfants et aux adolescents.

d'enfants soutenus pour la gestion de cas : 262

En prélude à la fourniture des services de gestion de cas, l'équipe projet dont cinq (05) gestionnaires de cas, cinq (05) animateurs, trois (03) Officers Protection, un coordinateur, un Superviseur Protection, un M&E et le chef du projet ont été formés à la gestion des cas, le Premier Secours Psychologique et la protection de l'enfant pendant 05 jours. Pour ce faire l'équipe a mis en place les outils harmonisés nécessaires à la gestion de cas. Ces outils proviennent de Plan International adaptés à ceux du groupe de travail "Gestion de cas" du Sous-Cluster de Protection de l'enfance au Mali. Cette formation visait à travailler sur l'attitude des gestionnaires de cas face aux enfants et adolescent.e.s survivant.e.s de protection et de VSBG afin d'adopter une attitude non-discriminatoire, non-stigmatisant, bienveillante et

respectueuse. Le premier secours psychologiques a également été appris. Les techniques de communication avec des enfants en situation de traumatisme ont également été dispensées. Les étapes techniques de la gestion de cas ont été revues (identification, analyse des besoins, élaboration du plan de gestion de cas et référencement aux services, suivi et révision du plan de gestion de cas et clôture du cas).

Les EAE mis en place ont été dotés de bureaux pour que la gestion de cas puisse se faire dans le respect des principes de confidentialité et de calme.

Nombre de cas d'incidents de protection de l'enfant rapportés courant la période :

Les informations sur les incidents qui ont été récoltées sur la base de GBVIMS et CPIMS présentent une analyse consolidée des incidents de protection et de violences y compris les VSBG signalés courant la mise en œuvre du projet par les gestionnaires de cas et leurs collaborateurs (membres des CCPs et animateurs/trices des EAE). Les gestionnaires de cas prennent en charge chaque survivant.e et établissent un plan de gestion de cas qui les mets en relation avec d'autres acteurs pouvant leur fournir des services de soutien variés (médicaux, psychosociaux, juridiques, judiciaires, réinsertion socio-économique et scolaire). Durant la mise en œuvre du projet, 262 incidents de VBG ont été documentés.

L'identification des victimes est un processus crucial. Les membres des CCPs et les animateurs EAE y ont joué un rôle essentiel dans la prise en charge des victimes surtout en matière de meilleure identification et l'accompagnement des survivant-e-s vers les gestionnaires de cas.

Typologie des cas rapportés :

La violence contre les enfants dans le contexte de Macina est complexe et liée à des normes, valeurs, pratiques, relations de pouvoir et structures socioculturelles à multiples facettes, qui sont sous-tendues par des croyances et des principes traditionnels solides et de longue date. Cette pratique peut avoir un impact immédiat avec des conséquences à long terme.

Les formes rencontrées se présentent comme suit :

TYPOLOGIE	TOTAL	Pourcentage
Agression physique	24	9
Agression sexuelle	24	9
Déni de ressources, d'opportunités ou de services	62	24
Mariage forcé	7	3
Viol / Pénétration	4	2
Violence psychologique / Émotionnelle	140	53
Grand Total	262	100%

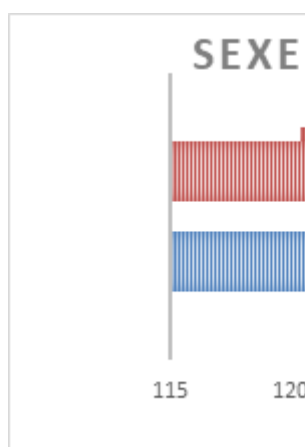
Courant la période, le projet a identifié 140 cas de violences psychologiques soit 53%. Ils constituent les incidents les plus fréquemment documentés. Ils sont suivis respectivement des dénis de ressources, d'opportunité ou de services avec 62 cas soit 24 % (déscolarisation, travail d'enfants, exploitation ...). 28 cas de violences sexuelles dont 4 cas de viol sur mineur avec pénétration soit 11%, 24 cas d'agression physique soit 9% (coups et blessures, brulures, châtiment corporel à l'école...), 7 cas de mariages d'enfants et forcés.

En raison de la crainte de la stigmatisation et du manque de connaissance des services disponibles, notamment pour les Personnes Déplacées Internes (PDI), il est évident que les cas rapportés ne reflètent en aucun cas la réalité totale des violences et de protection.

Profils des survivants :

Malgré qu'il soit évident que la crise humanitaire au Mali, exacerbée par des changements climatiques, ait produit des impacts significatifs sur l'exposition aux risques de protection et Violences Sexuelles et Basées sur le Genre (VSBG) pour les cibles du projet, il est bon de souligner que bien avant cette crise, les femmes et les filles dans cette localité étaient déjà confrontées aux défis de la protection. En effet, 60% des cas rapportés sont essentiellement des filles. La dénonciation des incidents demeure un défi important.

STATISTIQUES SUR LES SURVIVANTS				
Sexe des Survivants				
Femmes			124	
Hommes			138	
Age des Survivants				
Enfants	17 ans & moins		238	
	0 - 11 ans		158	
	12 - 17 ans		80	
Adultes	18 ans & plus		23	
Personne âgée (50 ans & plus)			0	
Adolescent (10-19)			125	
Etat civil des survivants				
Célibataire			254	
Mariée / En concubinage			7	
Divorcée / Séparée			1	
Veuf			0	
Statut de déplacement au moment de la déclaration				
Résidents	135	Ressortissants étrangers	0	
Rapatriés / Retournés	0	Demandeurs d'asile	0	
PDIP	126	Apatrides	0	
Réfugiés	1			
Phase de déplacement au moment de l'incident				
Non déplacé / Communauté d'origine		130	En période de refuge	8
Pré-déplacement		3	En cours de rapatriement / En transit	0
En cours de fuite		121	Post- déplacement	0
Populations vulnérables				
Incidents déclarés par des survivants handicapés			6	
Enfants non accompagnés ou séparés			224	
Incidents déclarés par des survivants ayant subi de cas de VBG antérieurs			1	



La crise a entraîné des déplacements importants de population, touchant plus de 7 125 personnes déplacées internes, dont 59% sont des enfants, 4024 femmes et 3101 hommes. Ces déplacements exposent les femmes et les enfants dans une situation de vulnérabilité très croissante, à des risques accrus de protection en particulier lorsqu'elles sont déracinées de leur communauté d'origine et contraintes à vivre dans des conditions précaires. Les enfants constituent un nombre important des personnes survivantes, soit 6%, et ils sont issus de ménages de Personnes Déplacées Internes (PDI) résidant dans des sites de déplacés, tandis que les personnes en situation de handicap représentent moins de 1%. Quant aux filles mères vulnérables, elles sont au nombre de 47. (voir la partie contexte)

Cependant, il est bon de noter aussi que les garçons n'ont pas été exclus de la liste des survivants identifiés. Ils sont également victimes de tous les risques de protection, bien que cela soit parfois moins visible ou reconnu dans le discours public. Les stéréotypes de genre et les normes socioculturelles rendent difficile la reconnaissance et la dénonciation des cas de VBG impliquant des hommes ou des garçons.

Les enfants vivant et/ou travaillant dans la rue :

Les rues de Macina sont devenues le lieu où les enfants passent leur journée, travaillent ou dorment, et souvent ils rencontrent des dangers et des dérives qui leurs exposent aux risques de protection. C'est ainsi que 50 ENAs touchés par les intempéries, les privations, le dénuement, les maladies, les accidents et l'indifférence, ont été identifiés et intégrés dans le programme des FAT. À les entendre parler, ces derniers ont vécu la précarité, la violence, les violences sexuelles, la loi du plus fort qui les expose aux rencontres et influences les plus nuisibles. Plus d'information sur le FAT sont disponibles dans le R1A3.

La violence contre les enfants dans des circonstances particulièrement vulnérables

Au total, 11 talibés, tous des garçons, ont été assistés. Dans le cercle de Macina, les enfants, et surtout les talibés sont très souvent victimes de plusieurs formes de violence, à savoir physique, psychologique, sexuelle et négligence. Ils sont remplis d'amertume, de craintes, de frustrations, d'angoisses et de déception, ce qui les empêchent de se construire. La satisfaction des besoins alimentaires ne suffit pas et ils ont besoins d'une réelle prise en charge pour se reconstruire et être capables de confiance, empathie et compassion. À leur égard, le projet apporte un appui psychosocial et les intègre au sein des espaces, mobiles comme fixes, bénéficiant des activités de sensibilisation.

La négligence de la violence sexuelle croissante à l'égard des garçons :

Les petites filles sont sollicitées sexuellement dès leur plus jeune âge et finissent par se prostituer. La pédophilie existe dans la zone de Macina et elle a tendance à être banalisée, constituant une source de revenus pour les enfants et certains parents. Le projet n'a pas mis ces derniers en marge de ses préoccupations. En réunion de concertation, le projet a responsabilisé le SLPFEF⁸ et le SLDSES⁹ de la mise en œuvre des activités planifiées en faveur de ces couches.

Accès aux services :

Les interventions du projet ont contribué à améliorer l'accès au système de protection pour les enfants touchés par le conflit, y compris les soins appropriés.

Causeries des animateurs du projet sur les questions de prévention aux récidives des violences :

La collecte des données sur la gestion des cas a permis au projet d'orienter ses activités de sensibilisation sur les violences les plus rencontrées. L'outil de collecte de données a permis d'identifier les différentes tendances en matière de protection, ce qui a permis de planifier, orienter et mettre en œuvre des activités alternatives. Les enfants touchés par cette activité se présentent comme suit :

BENEFICIAIRES	# total	#femmes	#hommes	VULNERABILITES	
				# PDIs	# Personnes.en situation de handicap
Enfants de 0 à 5 ans	4457	1912	2545	11	3
Enfants de 6 à 17 ans	8 044	4229	3 815	75	9
TOTAL	12501	6141	6360	86	12

R1.A3. Fourniture d'un soutien aux enfants et adolescents non accompagnés et séparés (ENAS).

Indicateurs :

d'ENAS soutenus par le projet et bénéficiant d'un placement transitoire, de services de soutien psycho-sociaux de réinsertion familiale : **50 ENAS**

A cause de l'insécurité grandissante dans la localité, plusieurs familles se sont déplacées de leurs milieux habituels pour chercher un abri dans d'autres zones moins dangereuses et beaucoup d'enfants ont fini par être séparés de leurs parents et se sont retrouvés avec d'autres familles ou avec des groupes d'enfants.

Du 15 au 20 Novembre 2022, l'équipe de projet a donc procédé à identifier les ENAS dans le besoin, initialement estimés au nombre de 90, et aussi les familles d'accueil temporaires (FAT) disponibles à s'en charger. A Macina, il y avait moins de FAT, il fallait donc adjoindre les communes où il y'avait une forte densité d'ENAS notamment Kokry. Une fois le processus d'identification terminé, le projet présentait donc 90 ENAS et 90 FAT.

Les 90 FAT ont ensuite été orientées en sauvegarde et protection en situation d'urgence, ainsi que dotées d'un montant de 57 570 f CFA (pour un total de 5 181 300 FCFA) pour améliorer les conditions de vie des enfants dont ils se faisaient charge et répondre aux premiers besoins. Plus d'information sur cette activité se trouvent dans le chapitre R.2A.4.

Tableau de kits distribués au FAT

Désignation	Quantité
Un matelas 2 places	90
Un drap 2 places	90
Une couverture 2 places	90
Une moustiquaire 2 places	90
Un seau	90
Une casserole, assiette et couverts	90
savon koulikoro en carton	90
Jerrycan pour aller chercher l'eau	90
balaie traditionnelle	90
Brosse à dent	90
Dentifrice	90
Sac à dos pour les enfants	90
Claquettes pour les enfants de (5à 8 ans)	90
Claquettes pour les enfants de (10 à 8 ans)	90
Eau de javel 1 L en flacon	90



Photo de remise des kits aux FAT



Photo de remise des Kits NFI par les FAT à Macina

R1.A4. Déploiement et mise en place de la méthodologie des champions du changement avec les adolescents et les jeunes pour renforcer l'influence des pairs sur l'autonomisation des jeunes et l'égalité des genres.

Indicateur :

#d'adolescents & jeunes leaders formés sur les compétences de vie dans les EAE : 120 adolescent-e-s et jeunes

La méthodologie de *Champions du Changement*, initialement prévue, requière au moins 24 mois d'activités. Le Mali, ayant pris du retard dans le lancement du projet, a décidé de changer de méthodologie pour les activités au sein des espaces amis des adolescents intégrés au sein des espaces amis des enfants. La méthodologie qui a donc été utilisée au Mali est celle de "Compétence de vie des adolescents".

Le programme de compétences de vie et de parentalité a été développé pour les équipes humanitaires de la Fédération de Plan et vise à équiper les adolescent.e.s âgé.e.s de 10-19 ans d'informations essentielles, de compétences et de ressources pour soutenir leur santé, sécurité et de bien-être dans les périodes de crise. Pour ce faire, une formation a été initiée à l'endroit des animateurs des trois EAE, des Gestionnaires des cas et des animateurs du projet du 15 au 17 septembre 2023. Les séances développées sont les suivantes :

- Séance 2 : Mon réseau de soutien ;
- Séance 3 : Comprendre nos émotions ;
- Séance 4 : Prendre soin de nous-mêmes dans les périodes stressantes ;
- Séance 5 : Relations avec les pairs ;
- Séance 11 : Réagir à la violence ;
- Séance 12 : Le mariage.

En décembre 2023, au total 28 participants dont 14 hommes et 14 femmes ont pris part à cette formation. Les animateurs/trices ont après cascadié ladite formation à l'endroit de 120

jeunes et adolescent-es de la communauté qui ont acquis des compétences sociales, émotionnelles et relationnelles leur permettant de construire des relations, de faire face aux difficultés et de satisfaire les besoins de la vie quotidienne.

Tableau de répartition des jeunes et adolescents participants à la formation

Hommes			Femmes		
10 - 14ans	15 - 19ans	Total Hommes	10 - 14ans	15 - 19ans	Total femmes
30	30	60	30	30	60

Compte tenu du retard accusé dans la mise en œuvre de cette activité, l'outil de feedback n'a pas pu être utilisé. Cependant, les visites de suivi rapproché des agents du projet et de l'officier M&E ont permis de remarquer auprès des cibles que :

L'approche a permis de développer davantage leurs connaissances et leurs aptitudes ;
Les participants ont une capacité de promotion de leur autonomisation et de leur résilience ;

Leurs compétences et capacités cognitives, personnelles et interpersonnelles qui peuvent aider les adolescents, filles et garçons, à s'adapter au changement et à affronter les exigences et les défis de manière constructive dans des situations humanitaires ont été renforcées ;

Leurs compétences pour prendre des décisions éclairées ont été renforcées ;

Leurs capacités de communiquer efficacement sur les questions de leur vie ont été améliorées.



Photo de famille des participants à la formation sur la compétence de vie

R1.A5. Renforcer les compétences de vie et économiques des adolescents et des jeunes en créant des groupes d'épargne pour les jeunes

Indicateurs :

#d'AGR à destination des adolescents et jeunes : 253

Puisque les activités des groupes d'épargne n'ont pas été retenues lors de la réadaptation du projet, il a été décidé au Mali de les remplacer par des activités génératrices de revenus. Cette décision a été prise sur la base des résultats de l'évaluation rapide des besoins faite par Plan

en août 2023. L'insécurité alimentaire se répand dans la zone d'intervention du projet. Les jeunes femmes vivent principalement de "petits commerces" afin de contribuer aux charges des ménages. La mise en place de groupes d'épargne est difficile dans une zone à haut défi sécuritaire où les ressources pour l'épargne sont rares et que les membres des groupements féminins subissent des déplacements forcés de peur de représailles des groupes armés.

Il a donc été considéré qu'il était plus pertinent de répondre aux besoins de sécurité alimentaire par la mise en place d'AGRs. Cette activité s'est déroulée en 6 étapes :

1. L'identification des filières a eu lieu en février 2023 par consultation communautaire.

Les corps de métiers identifiés et retenus sur la base des consultations communautaires sont les suivants : (coupe-couture, installation parabolique, coiffure, maçonnerie, menuiserie), le petit commerce, l'embouche (ovines et caprins), la réparation de moto et la vulcanisation.

2. L'identification des bénéficiaires a eu lieu sur la base des critères de vulnérabilité suivants :

- Etre âgé de 15 à 24 ans;
- Adolescents (filles et garçons) non scolarisés et déscolarisés mais pour lesquels une réinsertion scolaire n'est pas possible;
- Filles et garçons en situation de handicap ;
- Adolescentes divorcées ou cheffes de ménage ;
- Jeunes femmes survivantes de VBG ;
- Adolescents (filles et garçons) dont les parents sont démunis.

Au total **300** bénéficiaires ont été pre-identifiés par le projet dont **150** filles et **150** garçons.

3. Un atelier de concertation sur les filières porteuses/proposition budget par AGR s'est tenu du 13 au 19 Février 2023.

Cette étape a permis de définir le nombre de bénéficiaires à toucher selon le budget disponible. Cette budgétisation s'est faite de concert avec les services techniques de l'Etat sur la base des propositions retenues lors des différentes rencontres.

Par conséquent, parmi les 300 bénéficiaires pre-identifié, seulement 253 bénéficiaires, dont **133** filles et **120** garçons, ont été retenus lors de l'atelier de concertation. Au total 102 personnes ont reçu des ovins, 10 des caprins, 112 bénéficiaires en petits commerces, 9 personnes en réparations des engins de deux à 3 roues , 6 personnes en vulcanisation (collage).

4. L'atelier de formation des bénéficiaires s'est déroulé en juin 2023, dans le but de renforcer les capacités pour l'autonomisation économique et la réduction de la vulnérabilité des adolescents/ adolescentes et jeunes à travers les activités génératrices de revenus (AGR). La formation a porté sur la création et la gestion d'AGR.

5. Il y a eu une remise des fonds pour le petit commerce et des kits aux bénéficiaires pour leur installation respectivement en juin et en novembre 2023, à travers une cérémonie. Cette remise officielle a regroupé l'ensemble des bénéficiaires, les autorités administratives, locales, les collectivités, les services techniques de l'Etat, les organisations de la société civile (OSC). Les matériels remis, au-delà du bétail mentionné ci-dessus, sont :

07 Machines à coudre de marque Zuku simple ou Singer avec pied,
 07 Fer à repasser charbon,
 14 Paires de ciseaux,
 6 Armoires 3 portières vitrées en Bois,
 1 Table H 1 m, L 1,80 m, Épaisseur 1 m en Bois
 Compresseurs à air
 9 Caisses à outil mécanique complet pour réparation des engins
 1 Brouette
 2 Truelles avec manche en bois
 2 Pelles avec manche en bois
 1 Corde de construction ,
 1 Plomb pour la maçonnerie
 1 Taloche en bois ou plastique
 12 Bois d'œuvre 3X4 mètres
 Sergions en acier
 9 Tondeuse professionnelle rechargeable
 3 Miroir à coiffure Largeur 45 cm et longueur 1 m
 3 Batterie 12 V-200 Ah
 3 Panneau 100 watt
 3 Convertisseur 100 watt
 3 Table à coiffure H 1m, L 1,20 m et l 50 cm en bois
 3 Ventilateur rechargeable sur trépied
 Rallonges avec 6 bords de prise
 6 Tabouret avec assise bourré en bois
 Ampoules rechargeable 5 Watt
 2 Rabots marque français
 1 Scie de 70 cm avec manche en bois
 Scie de 1 m avec manche en bois
 Equerre de maçon en acier
 Tenailles en acier
 Mètres de 5M
 Marteaux 5 Kg avec manche en bois
 1 Décodeur stars trac chargeable
 Table à coiffure H 1m, L 1,20 m et l 50 cm en bois
 Ventilateur rechargeable sur trépied
 Rallonges avec 6 bords de prise
 Tabouret avec assise bourré en bois
 Ampoules rechargeable 5 Watt
 2 Rabots marque français
 1 Scie de 70 cm avec manche en bois
 1 Scie de 1 m avec manche en bois
 1 Equerre de maçon en acier
 2 Tenailles en acier
 2 Mètres de 5M
 2 Marteaux 5 Kg avec manche en bois
 1 Décodeur stars trac chargeable
 1 Trousseau de clé mécanique
 1 batterie holandia

1 convertisseur



Photo de remise officielle d'une machine compresseur à un jeune bénéficiaire d'AGR

6. Les Suivis des AGRs.

Les différentes AGRs ont fait l'objet de suivi par rapport à leur fonctionnalité. Il ressort ainsi que la plupart des activités se poursuivent normalement.

Tableau de répartition de la fonctionnalité des bénéficiaires par commune :

Nombre de jeunes suivis	Communes	Bien fonctionnel	Fonctionnel	Pas fonctionnel
10	SALOBA	9	1	0
11	KOLONGO	8	2	1
19	SANA	10	6	3
TOTAL		27	9	4

De façon générale, on constate, à la suite des suivis, que les AGR ont été un moyen efficace d'autonomiser les bénéficiaires, favorisant leur développement économique et social. Elles ont contribué à réduire la pauvreté et à renforcer les moyens d'existence même si (04) bénéficiaires parmi eux tardent à faire marcher leur AGR pour des raisons d'ordre structurelles (situation sécuritaire instable, présence d'acteurs créant de la concurrence).

Témoignage :

L'histoire de AB ressemble à celle de nombreux jeunes entrepreneurs appuyés par le projet DGD. Pensant trouver un emploi convenable et un salaire correct après avoir abandonné l'école, la native de Sellen, un village enclavé dans la commune de Saloba dans le cercle de Macina au Mali, a très vite déchanté avant de se lancer pour son propre compte aujourd'hui grâce aux AGR fournies aux adolescents dans le cadre de la mise en œuvre du projet (formation sur la création et la gestion d'AGR puis installation en matière de transformation et de vente de produits agricoles locaux). AB a été installé en petit commerce des produits locaux transformés par elle-même, pour un appui financier de 150 000 FCFA du projet DGD. Aujourd'hui, elle s'en sort bien. Elle travaille dans son AGR en associant deux (02) de ses sœurs et chacune y trouve son compte. Avant elle n'arrivait pas à s'occuper de ses frères et sœurs et de son enfant mais maintenant qu'elle a un fonds de roulement à travers le projet pour développer son AGR, elle peut se voir fière puisque sa famille a

une entreprise et mange à leur faim, ils sont soignés quand ils sont malades et ils sont aussi scolarisés.

- Rwanda

R1.A1 Set-up of child, adolescent-friendly spaces, including girls only spaces, in both refugee camps, IDP sites and vulnerable host communities, with a specific attention to safety and security

Indicators

of Adolescent Girls Safe Spaces (AGSS) have been established: 4

of Staff, animators, case workers and volunteers have been identified and trained: 100(64 Females and 36 Males)

of Children and adolescents have been benefiting from Child, Adolescent Friendly Spaces (CFS/AFS) activities: 15725(5 295 Girls and 10430 Boys) Children

of Girls have been benefiting from Adolescent Girls' Safe Spaces (AGSS) activities: 1237girls

of Girls were supported with dignity kits: 1325

In line with the expected deliverables, Plan International Rwanda in collaboration with our line Ministry (MINEMA) and UNHCR have been able to identify sites for Adolescent Girls Safe Spaces construction and rehabilitation. In total, four adolescents and girls' safe spaces have been set up and furnished with specific adolescent girls' material, including menstrual hygiene management kits. Three spaces were constructed in the camps of Kigeme, Kiziba and Nyabiheke and one has been rehabilitated in the camp of Mugombwa.

A suitable engineer was hired to do the site visits and provide the drawings and Bills of Quantity to inform the tender process. To ensure the quality of the work, Plan International Rwanda worked in close collaboration with UNHCR site engineers in charge of shelter in the refugee camps who ensured supervision at the field level. This activity encountered some delay due to the long duration of the procurement process. Indeed, a reassessment of the budget had to be made first after an engineer noted a budget gap between what had been initially planned and what was needed. As a result, some budget adjustments had to be made in guidance and collaboration with Belgium National office, to meet the real costs of the construction.

Moreover, due to the suspension of the activities by the UN from August to September 2022, the project team decided to put on hold the procurement process. It was found impossible to provide an entrepreneur with a contract while the duration of the project interruption was still unknown. However, all the recreational and adolescent girl's specific material were already purchased in advance and stocked in each camp ready to be used as soon as the construction process was finalized.

All 4 Adolescent Girls Safe Spaces (AGSS) in the four locations were successfully constructed and completed. The provision handover took place in April 2023 in the 4 camps, and they were handed over to Plan International Rwanda in the presence of MINEMA, UNHCR, the refugee representatives, and the local authorities. These spaces are now operational.



Kiziba AGSS



Mogombwa Rehabilitated AGSS



Nyabiheke AGSS



Kigeme AGSS

Girls and adolescents have been informed about the services available in these spaces through community sensitization spread by the community volunteers, the BLOOM and CoC mentors, as well as by the PTP leaders. Since the handover in April, a total of 987 girls have directly benefited from AGSS activities.

Adolescent Girls Safe Spaces (AGSS) are designed to provide a secure and supportive environment specifically tailored to the needs of adolescent girls, particularly in contexts where they may face various risks such as gender-based violence, early marriage, teenager pregnancy, exploitation, or limited access to education, psychological first aid and reproductive Health. These spaces aim to empower adolescent girls, build their resilience, and provide them with opportunities for education, skill-building, and social support. Here are some activities typically held in Adolescent Girls Safe Spaces:

- Sessions on reproductive health, menstruation management, and sexual and reproductive rights to promote healthy behaviours
- Personal hygiene practices to improve overall well-being
- Psychological first aid
- Counselling session provided by trained person
- Peer support groups where girls can share experiences, provide encouragement, and build friendships.
- Recreation activities such as Modern Dance and traditional dances

- Advocacy campaigns on issues affecting adolescent girls' rights, such as child early pregnancy, education access, or gender equality

In addition, selecting mentors for Adolescent Girls Safe Spaces (AGSS) were based on testimonies from camp members, academic performance, positive behaviors within the community, and abstaining from risky behaviors such as drug abuse and transactional sex. This is a strategic approach to ensuring that mentors serve as positive role models and sources of inspiration for adolescent girls. Participants also were selected through various channels, with some individuals choosing to join independently after hearing about the valuable information available at AGSS regarding Sexual and Reproductive Health and Rights (SRHR), as well as Psychological First Aid. Additionally, others were identified and selected by Bloom mentors or staff during the case management process.



Figure 1 Cp Coordinator in KZB while conducting group discussion on GBV issues



AGSS Mentor while conducting a group session with Adolescents Girls

In close contact with other agencies and with UNHCR, 1,325 girls received the kits, including participants from Bloom and Girls from AGSS as well as referrals from other agencies. The targeted number was not reached due to the delay of AGSS construction activities. The remaining stock is ongoing distributed within the AGSS.

Additionally, to AGSS, Child Friendly Spaces (CFS), which are safe, supportive, and inclusive were used to meet the unique needs of children affected by emergencies or crises. These spaces aim to provide children with psychosocial support, education, recreation, and protection.

Here are some common activities typically held in Child Friendly Spaces:

Education and Learning Activities

Informal education programs focusing on literacy, numeracy, and life skills.
 Storytelling sessions to promote imagination, creativity, and language development
 Basic hygiene and health education to raise awareness about sanitation and disease prevention.

Recreational and Play Activities

Sports and games to promote physical activity, teamwork, and social interaction
 Craft workshops where children can engage in hands-on activities such as pottery
 Music and dance sessions to encourage self-expression and cultural exchange

All these activities were done in collaboration with trained community mobilizers but in close monitoring with community engagement officer.





CFS Activities in different location

In addition, Project staff increased their knowledge on compliance, reporting requirements, case management processes, Community engagement approach, safeguarding children and Program participants, and PSHEA policy. Indeed, during a 3-day workshop. In total, **100 people, including 75 community mobilizers, 10 girls' mentors and 15 project staff**, have been trained on Child protection, psychological first aid, case management, and adolescent's SRHR by Plan Technical leads in Child protection and SRHR programs. 2 girls' mentors per camp have facilitated the activities and provided assistance to the girls in the AGSS daily basis. The animators received a monthly stipend.

R1.A2 Provision of case management services to children and adolescents

Indicator

of CAY benefitting from case management assistance (a file was opened for them by CP case worker): 354 reported cases (153 boys and 201 girls)

In order to equip the project staff with the required capacity to manage and respond to cases of violence against children in the camps and host communities, a refresher training on case management processes/steps and community engagement approach was conducted. This was attended by 14 (8 females and 6 males) Child Protection in Emergency project staff including Community Engagement Officers, Child Protection Officers and Child Protection Coordinators. During this session, in depth discussions and knowledge sharing on key terms of case management such as child at risk, children of concern to UNHCR, children who fall under the UNHCR mandate, stateless children, consent, ascent, orphans, separated children, and unaccompanied children among others, were discussed for better understanding. The team also had time to go through the guiding principles for case management such as Do no

harm, the best interest of the child, nondiscrimination, seek informed consent or assent, participation and respect confidentiality.

The case-management is being undertaken by 5 child protection officers across all refugee camps. 2 case workers have been allocated for Kiziba due to the highest population in this camp. The case workers work with the support of 72 Community-Based Protection members (18 per camp), named Community Mobilisers, who help in the daily follow-up of child protection cases in refugee camps. They have been trained by Plan international staff to report and to identify cases. This activity is undertaken in camps only, as case management in vulnerable host communities does not fall under the mandate of Plan but rather of the government. However, in the situation of identified cases within the host community, the staff and the community at large are aware of national referral and reporting pathways in place, as they support refugees on a day-to-day basis. During the project implementation period, Plan International Rwanda has provided safe, timely, and age-appropriate protection services through case management for 354 children and adolescents, including 297 child protection cases (153 boys and 144 girls) and 57 GBV cases for children in which 300 were closed cases at the end of the project (176 girls and 124 boys) whereby all cases received appropriate support including counseling, home visits, and material support.

The details of categories of CP per camp are as follow:

Type of category	Kigeme camp			Kiziba camp			Mugombwa camp			Nyabiheke camp			Total		
	# Of Boys	# of Girls	Total	# of Boys	# of Girls	Total	# Of Boys	# of Girls	Total	# of Boys	# of Girls	Total	# of Boys	# of Girls	Total
Neglect	46	26	72	11	30	41	26	41	66	34	19	53	117	116	233
Physical Abuse	2	0	2	2	1	3	7	3	10	4	4	8	15	8	23
Psychological/ Emotional Abuse	4	2	6	3	12	15	3	1	4	10	5	15	20	20	40
Child Labor	0	0	0	0	0	0	1	0	1	0	0	0	1	0	1
Child Delinquent	0	9	9	0	17	17	0	21	21	0	10	10	0	57	57
Total	52	37	89	16	60	76	37	66	102	48	38	86	153	201	354

CP Closed cases since 2021-2023:

Location	Girls	Boys	Total
MG	58	36	94
KG	41	41	82
NHY	28	25	53
KZ	49	22	71
Total	176	124	300

At the proposal stage, it was decided that the cases would be supported with CVA upon deep assessment. However, the project team made the choice to replace CVA-support with NFIs and FIs assistance to ensure families are not exposed to further harm. The reason behind this decision is that the project team assessed a high risk of child neglect in case parents and

caregivers are aware of the assistance being provided. Indeed, giving money directly to parents would have created an opportunity to neglect and increased the risks of conflict among parents and caregivers.

Through the case management process all children received material assistance depending on the nature of the case. Most of them are assisted with FIs and NFIs including (porridge, maize flower, rice, beans, shoes, washing soaps, body jelly). In the case where the material in the stock of the camps is not sufficient to meet the needs of the child, Plan International staff from the field has the responsibility of requesting the necessary for adequate support to children at risk and those identified through case management.

The field team encountered some challenges in implementing this activity as during the suspension of the activities, the UNHCR staff was mandated to follow-up on the open cases. However, due to their understaffing, some cases were left without proper assistance. Therefore, the project staff faced a high volume of cases when the activities resumed. To respond to this challenge, community engagement officers were asked to help the case workers to conduct the pending BIAs (Best interest assessment of the child) and they have managed to catch up with the workload.



Child protection coordinators facilitating case management processes and tools session

R1. A3 Provision of support to unaccompanied and separated children (UASC) and adolescents

Indicators

Of foster families have been trained on Child Protection (CP) and Village, Savings and Loan Associations (VSLA) and provided with in-kind support: 100

of Unaccompanied and Separated Children (UASC) who have been supported: 1072 (539 boys and 533 girls)

In Rwanda, 100 out of 100 foster families have been identified by Plan staff. The foster families have been supported through the PUP program and, where necessary, have also received material assistance, including mattresses, hygienic material, and FIs.

The foster families have been selected by community volunteers with help from the Plan staff. This process is guided by specific criteria, such as the age of foster parents, the age difference between parents and children. (The foster parent must be 21 years old and above, at least 7 years older than the child), willingness to volunteer, ability to raise children without expecting benefits, residing in the same camp, and being recognized by the community as role models. After the identification phase, they have been trained in alternative care arrangements for children and automatically enrolled in the PUP program. This has enabled them to acquire knowledge and skills on positive parenting and prevention of abuse, violence and neglect for the best interest of their children.

Furthermore, unaccompanied minors have been supported by community mobilizers as well as Plan case workers through home visits to assess their living conditions and report back on any issue they might be facing that needs immediate assistance

They have been trained also in Village, Savings, and Loan Associations (VSLA) and provided with in-kind support. More so, 416 including 75 girls, 178 women, 83 boys, and 80 males, composed by the Camp executive committee, Opinions leaders, and Voice of Children (VoC). This community-based protection structure ensures that children are safe and protected as well as the information and knowledge are cascaded to the rest of the community, including parents and caregivers, for their responsibility in preventing violence, abuse, and neglect against children in the community, especially in the community. Children also got psychosocial support through recreational activities at both home and in Child-friendly spaces, allowing them to cope with stress and develop psychological resilience they have committed to fully working closely with Plan International staff and volunteers in protecting children in camps by reporting any case related children.

In line with this outcome, 1072 unaccompanied and Separated minors (UASC) including 539 boys and 533 girls, received assistance. Some of them have received assistance more than one time through materials support based on their needs. The materials included Rice, vegetable oil, Plastic shoes, beans and mattress. They are supported by community mobilizers as well as Plan case workers through home visits to assess their living conditions and report back on any issue they might be facing that needs immediate assistance.

For more clarification the table below indicates UASC per camp. As said above, the number shown below is less than the number supported as some of them were supported more than one time in a different period.

The table below shows the number of UASC

Location	Categories	Girls	Boys	Total
MG	UAC	1	5	6
	SC	54	44	98
KG	UAC	1	2	3
	SC	51	44	95
NHY	UAC	29	14	43
	SC	66	59	125
KZ	UAC	27	26	53
	SC	104	107	211
Total		333	301	634

R1.A4 Roll out and set-up of the Champions of Change methodology with adolescents and youth to strengthen peer influencing over youth empowerment and gender equality

Indicators

of boy mentors who have been trained on Champions of Change (CoC): 125 Boys Mentors

Of Peer-to-peer groups created and supported: 25

of Children and adolescents who are active members of peer-to-peer groups: 5344

In Rwanda, 125 adolescents (25 adolescents per camp; and 25 adolescents on the reserve list distributed as follows: 6 per camp and 7 in Kiziba camp because of its highest population) have been trained to become CoC mentors by 15 Plan International staff for 5 days however 100 of Coc mentors were receiving incentives on monthly basis. The training aimed to strengthen their knowledge of gender equality and Sexual reproductive health and rights among adolescent boys, in order to be drivers of change and challenge negative social and gender norms that drive violence against children and in particular girls.

The aim of the trainings was mainly to strengthen their knowledge on gender equality and Sexual reproductive health, and rights among adolescent girls and boys aged 12-17, to be drivers of change and challenge negative social and gender norms that drive violence against children and in particular girls. As a result of the knowledge gained, the mentors are facilitating the same training to 700 adolescent boys (175 per camp). Apart from teaching the children, they also conduct home visits to the children' families, monitor the children' school performance and refer any cases identified to Plan staff for assessments and response.

Moreover, 25 peer-to-peer exchange groups have also been formed and organized. 5344 Boys were participating in these groupings. The creation of these groups was the result of the training that Champion of Change mentors provided for Champion of Change participants. These people took the initiative to share knowledge acquired with their peers, and classmates after being impressed by how successful the sessions were. Champion of Change participants oversee these groups with the support of Champion of Change mentors. The main topics shared to their peer were Being a champion of change committed to Gender equality, being a young man, and working as a team.

In addition, COC mentors receive a monthly stipend of 24,600 Rwandan Francs, acknowledging their commitment and contribution to the program.

Their Work Schedule is as follows:

- On Mondays and Tuesdays, they meet to prepare the sessions they will teach during the weekend.
- On Wednesdays and Thursdays, they conduct home visits to meet with the parents and caregivers of COC participants and assess the “evolution” of each adolescent, monitor the changes, progress as well as the children's school performance.
- On Fridays, they meet with Bloom mentors to exchange information about their own teaching experience.
- On Sundays, COC Mentors meet with COC participants to cascade the training

As the learning sessions were completed, COC mentors followed the children, on how they put into practice what they had learned, and how they supported their peers through what they gained from the program session as of October 2023, 25 groups of peer-to-peer learning sessions were established.



Boys mentors during CoC training at the field



COC Mentors giving Children and adolescent Energizers





Peer to peer group session

R1.A.5. Building the life and economic skills of adolescents and youth by creating youth saving groups.

Indicators

of Adolescents and young people have been trained on skills: 1580(780 Females and 800 Males)

of Youth Saving Groups which have been established: 50

of Adolescents and young people have been enrolled in Youth Saving Groups:1290 (566 Males and 724 Females)

of Girl mentors, volunteers, caseworkers who have been trained on Psychosocial First Aid (PFA): 89 Females

of girls' mentors who have been trained on BLOOM: 80

of Girls Peer-to-peer groups created and supported: 26

Of Girls Children and adolescents are active members of peer-to-peer groups: 5764

Under R1.A5, life and economic skills of adolescents and youth were enhanced through the creation of youth saving groups. A total of 1580 adolescents and young people received training on Establishing independent Savings and Loan Groups in workplaces, and financial services, including Savings, Loans, and Assistance, which aim to sensitize group members to the basic principles of Savings, purposeful borrowing, planning, and budgeting, problem-solving, learning from training opportunities, entrepreneurship, innovation, learning, conflict resolution, equity, decision making, wealth management, and life goals. 50 Youth Saving Groups were established, and 1290 adolescents and young people, including 566 males and 724 females, were enrolled in these groups. To build the life and economic skills for adolescents and youth, the process of peer-to-peer learning was established. COC and BLOOM mentors created VSLAs, and saved as of September they have 5,361,000 Rfws . This good practice was also adopted by the children from COC and BLOOM clubs, and they have managed to save 8,141,130 RWF and peer to peer groups reached 11108 (5344 boys and 5764 girls) as per October 2023.

In line with this outcome, Plan Rwanda conducted the training on Protection from violence, Psychosocial first aid, sexual reproductive health and rights, and prevention of sexual Harassment exploitation and abuse to 89 Child protection community mobilizers and AGSS mentors from Kigeme, Kiziba, Mugombwa and Nyabiheke camps. The aim of the training was to empower participants with skills and knowledge to give children and families psychological first aid and to ensure they are able enough to follow up on child protection cases at the community level in their respective camps.

Under the R1. A5, 80 girls 'Bloom mentors, young people from 19-24 years old (20 per camp), were selected and trained by ToTs (Plan Staff) to ensure increased capacity to be able to cascade the module to their peers. The BLOOM mentors cascaded the BLOOM modules to 700 adolescent girls in all 4 camps (175 girls per camp) divided into 7 groups of 25 per camp, aged between 12 and 17 years old to strengthen peer influencing around youth empowerment for a better life.

Additionally, a network of 26 peer-to-peer exchange groups has been meticulously established and managed, boasting an impressive participation of 5764 boys. The genesis of these groups can be traced back to the impactful training sessions conducted by Bloom mentors for Champion of Change participants. Motivated by the remarkable success of these sessions, individuals held the initiative to disseminate the knowledge they acquired to their peers and classmates. Under the supportive guidance of Champion of Change mentors, the participants have taken on the responsibility of overseeing these groups.

- **Uganda**

R1A1. Set-up of child, adolescent-friendly spaces, including girls only spaces, in both refugee camps, IDP sites and vulnerable host communities, with a specific attention to safety and security.

The project established and rehabilitated 5 child, adolescent friendly spaces in Zone II and III. Out of the 5 CFS, 1 was constructed, 3 rehabilitated and 1 more CFS was equipped with age and gender appropriate play materials..

The purpose of the child friendly spaces is to provide psychosocial wellbeing to the children and adolescent, to enhance relationships, promoting protection and safety, encouraging learning and play, fostering community support and peaceful co-existence with people of different diversity.

These Child Friendly Spaces (CFS') were equipped with age appropriate indoor play materials and games like toy cars, train, snake and ladders, puzzles, playing cards, ludo, omweso, drafts, story books, drawing books, pencils, colours and crayons and outdoor materials (games) such as valley ball, netball, football, Music, Dance and Drama materials (dancing costumes, drums, xylophone, and 'Adungu.

The East African playground installed play materials (swings, slides, sea saw, imaginative materials) at Limu CFS (newly constructed CFS). As result, 4,618 (2,401 Girls, 2,217 Boys) children with 2,818 refugees (1,601 girls, 1,217 boys) and 1,800 host community (800 girls, 1,000 boys) have been participating in different CFS activities like creative play, manipulative activities, physical activities, communitive and imaginative activities, Sexual reproductive health sessions, awareness and sensitization on child protection concerns.

The children now can freely interact among themselves, especially the host and refugees, children gained problem solving skills as well as communication and critical thinking skills. A child from Limu CFS said, "child friendly space has helped me learn how to play and socialize with children of different tribes without any problem, it was only one tribe in South Sudan where I lived and we concerned ourselves as sisters and brothers, how on reaching Uganda, there

are many tribes living in one place”.



Children playing at Limu CFS



An Animator guiding and interacting with children



Children participating in outdoor play games



Children engaged in different play activities at the child friendly space

18 (11Female, 7 Male) project staff were trained on CFS implementation and Management. This training was facilitated by PIU CPiE Specialist and the regional CPiE Specialist. The training was aimed at providing the staff with an capacity and knowledge and cascade the training to the CFS animators and also to enhance on staff capacity support to the CFS animators.



Project staff during the CFS training facilitated by the Regional CPiE Specialist and the CPiE

specialist Plan International Uganda

68 (29 Female, 39 Male) CFS animators and 7 CFS security guards. 75 (29 Female, 46 Male) from the refugee settlement and Host community were recruited and trained on child protection concepts, qualities of a good CFS, child-friendly communication, psychological first aid, and the PIU safeguarding policy.

The training strengthened the capacity of the participants to effectively identify child protection concerns when engaging with children at the CFS'. The participants demonstrated 33% knowledge gain from the training as evidenced by pretest and post test scores of an average of 48% and 81% respectively. The animators gained soft skills like facilitating sessions with young people, able to identify children with protection concerns and refer children for age-appropriate services, utilize local available resources, effectively manage CFS records.



Plan staff facilitating the training on child protection concern's in their communities at happy child friendly space.

Participants a group discussion on how to identify child protection concerns.

100 Adolescent girls were trained on business enterprise skills like tailoring and hair dressing, 40 girls from Zone II, (25 trained in hair dressing and 15 on tailoring) at Holy Dove child friendly space and 60 adolescent girls in Zone III, (40 from Kululu subcounty and 20 from Bijo) subcounty which is the host community, 10 of the girls from Zone III where taken to Lira City at Growth Care Uganda for training in reusable sanitary pad making for three months.

The purpose of skilling was to enhance technical skills on the adolescent girls that enables them to earn a living and support their families and to support adolescent girl groups with start-up kits. These adolescent girls were supported with all the necessary training materials needed, they were trained on financial literacy and life skills to enable them manage business life after, they graduated and were equipped with start-up materials like sewing machines, sitting stools, cutting tables, scissors, tape measures, threads, over locking machines for sanitary pads, generators with all its accessories, head and hand dyers, washing sinks, chairs, basins jerrycans, braids, weaves and all the necessary chemicals for hair.

A girl from happy child friendly said: *"before I was selected to be one of the life skilling with Plan International, I was very frustrated and depressed after returning home from my marriage*

which was because when I gave birth, my children had a multiple disabilities' and abnormalities which we thought at first would be treated, and we tried to reach out to the medical care. After realizing what the condition the child has is permanent, my husband left us and ran away from home, I stayed at his home for a year but he didn't return or call or provide for us which made me to return to my parents' home, though the condition has not changed, I feel happy and life is easier because am able to take care of my baby and I.

”

Hair dressing trait, Girls practicing at holy dove CFS.



Girls who had completed the training receiving their start up kit in groups of 5, at holy dove CFS.



Tailoring group receiving their start up materials in the groups of five members.

Girls who had completed specialized training on reusable sanitary pads receiving their equipment after graduation at happy CFS.

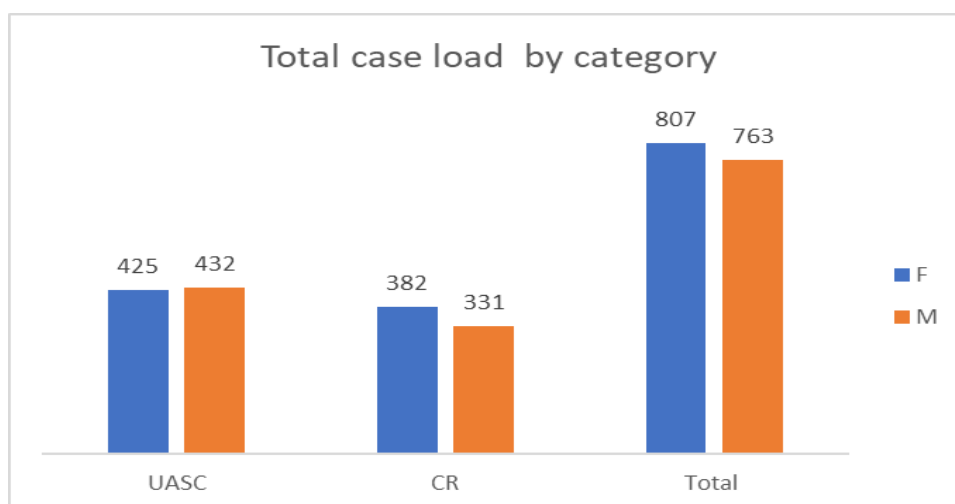
R1A2: Provision of case management services to children and adolescents

Explain any change with the target (CM, CVA) + refer to CVA SOPs

A total of 20 (13F, 07M) project staff were trained on child protection case management (Best Interest Procedure), psychosocial support, psychological first aid, Progres version four (V4), caring for child survivors of SGBV. The training focused on Child rights, Child development and stages, Child Centered Approach, Case Management Principles, Best Interest Procedures and Tools for case management , Analysis and Decision Making (Four Factor Analysis), Case planning and participation, general guidance on writing a BID report, psychosocial interventions, integrating psychosocial in casework, psychosocial assessment, and communication skills. The trainings were facilitated by CPiE specialist, CPiE Coordinator, UNHCR child protection team. The pre-test and post-test results showed 40% knowledge gain (42% average pre-test score, 82 average post-test score). The training strengthened capacity of staff to effectively provide quality child protection case management.

Cumulatively, the project managed 1,570 (807 girls, 763 Boys), child protection refugee cases against 1800 target, these include, 857 (425girls 432boys) separated children, 713 (382 girls, 331 boys) children at risk (child parents, neglect, teenage pregnancy, sexual assault/abuse, psychological abuse, children at risk of not attending schools, children with disability etc..). The cases include; identified cases by this project staff and the transferred cases 793 (403 Girls: 390 Boys) from the previous projects (BNO, SBF, and World Vision Uganda). The child protection cases were managed by the 14 case management workers through direct provision of services and referrals. 289 (151 girls, 138 boys) referrals were made to OPM for litigation on issues related to registration, card merging, and access to food. 08 (6 girls, 2 boys) were referred to TPO for psychosocial support and 12 (08 girls, 04 boys) were also referred to IRC

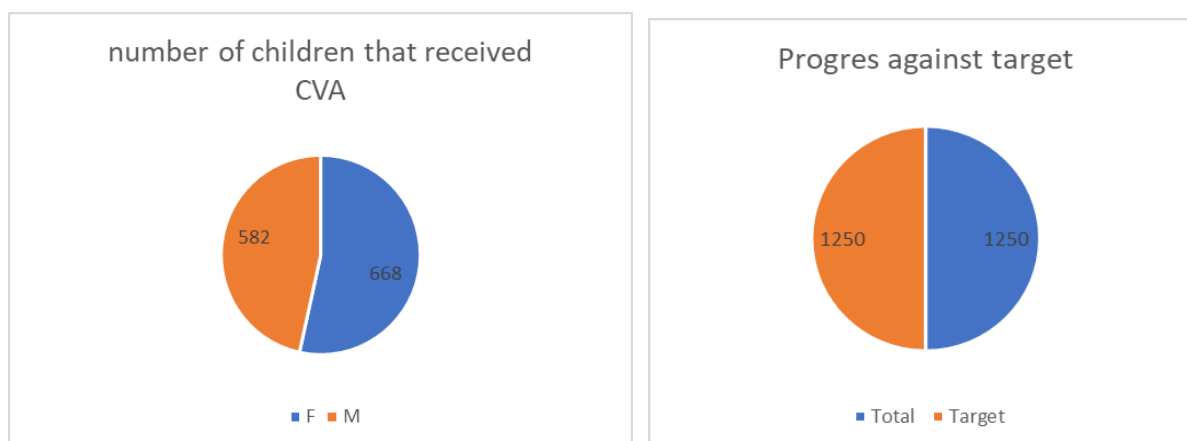
for medical support. A staff said, “Am now able to provide quality and effective case management to the most vulnerable children after understanding comprehensive Best Interest Procedure from the training”.



Case-by-case support to vulnerable children

837 (411girls, 426 boys) children under case management were supported with case-by-case items based on the individual needs assessed by the case management workers. Based on the assessments, the items the children received included milk, mattresses, blankets, mats, sandals, soap, nickers, mosquito nets, iron sheets, nails, food items and solar lambs. Additionally, some children whose houses got burnt were also supported to have their shelter constructed back. Some children were also provided with support to facilitate their medical bills. This support ensured reduced protection risk to the children and built their coping mechanisms

Provision of cash & Voucher assistance to selected Vulnerable children under case management



1250 (668girls, 582boys) children receiving child protection case management were verified and received a cash of 320,000/= each in three cohorts through cash in envelope and mobile money. The cash was given in two instalments of 160,000 Ugandan shillings in each instalment. The cash in envelope was distributed by a team of project staff and community leaders at household level through the parents/caregivers of children in the presence of the child/children. The cash was used to address the child's protection concerns (school dropout, safety, lack of basic needs) that were identified during the assessment that required some money. According to the PDM findings, 18% of the parents/caregivers utilized the cash for food, 17% sandals/shoe, 16% clothing, 15% school uniforms, 9% basic household items like blankets, bed sheets, utensils, 8% school fees, 7% scholastic materials, 4% agricultural inputs and 2% medication and MHM materials respectively. This has reduced the risk of children dropping out of school.

A participant reported that in December 2022, Plan International staff brought cash money for my three children, 160,000/= for each child, and this was done twice. I used this money to stock sorghum at a low price and sold it during scarcity. I was able to realize profits that doubled the initial capital. I then bought scholastic materials for all my children, I stocked more food for my family, and I have started an income generating activity of selling food items at the Centre of village 11 to sustain this money. I now have relief from the many thoughts I had in my mind. My children now go to school when they are smart, my children are no longer sent home because of PTA fund issues. Thank you DGD for wiping away my tears”.

Several positive results have been registered as a result of the CVA for example many caregivers were able to cultivate land for farming and have planted to sustain them since food is reduced, most of the participants were able to pay their PTA fee and bought uniforms for their school and the consistency of children at school improved as a result of the CVA. Some of the broken houses were renovated with CVA and the status of the families are much better. Children and family basic needs were addressed with the support of the CVA, Family relationships improved as a result of the CVA that is the relationship between child and care giver, dignity and empowerment CVA has allowed refugees to have control over their own lives and make choices based on their priorities and needs which helps them to restore dignity and worth. By providing cash and vouchers, refugee families accessed goods and services in local markets fostering interaction and integration with host communities, this reduces tensions and promotes social cohesion between refugees and host communities. The purpose of the cash and voucher is to meet the unmet basic needs of children through non- food items as told through the change story below.

A single mother, physically disabled narrated how her hopes were restored by the DGD project as follows. *“I was a businesswoman. I used to sell food items across markets in West Nile. Unfortunately, in 2018, I and other businessmen and women got an accident along Yumbe – Arua road. In this accident, I was a casualty, my right leg was smashed, I was rushed to Arua regional referral hospital, and my leg was amputated. While at the hospital, I received a phone call that my husband had suddenly passed on, and my children were left stranded with no parent next to them. I became severely distressed because losing my leg already meant that I would not work as I used to, and my husband was my only hope. I developed suicidal thoughts; I starved myself and felt that I should also die. My neighbours and friends came to console and comfort me from my home. They then encouraged me to seek assistance from IRC, but this did not yield some fruit. I then decided to report to Plan International staff in 2021.*

The staff assessed my four children and conducted home visits to further assess their living conditions. Plan international staff took soap, smearing oil, bedsheets clothes to support these children. In December 2022, Plan International staff brought cash money for my three children, 160,000/= for each child, and this was done twice. I used this money to stock sorghum at a low price and sold it during scarcity. I was able to realize profits that doubled the initial capital. I then bought scholastic materials for all my children, I stocked more food for my family, and I have started an income generating activity of selling food items at the Centre of village 11 to sustain this money. I now have relief from the many thoughts I had in my mind. My children now go to school and they are smart, my children are no longer sent home because of PTA fund issues. Thank you DGD for wiping away my tears”.



Nanina at her business place in village 11, Zone III

2 Post Distribution Monitoring for CVA was done and the findings showed positive usage of the findings. See the attached 1st PDM report.

 
UGA482 1st Final PDM%20REPOR%20
PDM Draft Report - JæFOR%2077%20CHIL

R1A3: Provision of support to unaccompanied and separated children (UASC) and adolescents.



Out of target of 1800 children targeted for child protection Case Management services, 1570 (807girls, 763boys) children were identified and documented as child protection cases, 857 (425Girls, 432Boys) were UASC, while 713 (382Girls, 331Boys) were children at risk.

837(411girls, 426boys) of the children were supported with case-by-case support like; assorted clothes, soap, basins, blankets, mattresses, sandals, crocus, Vaseline, nickers, pants, petty coats, mosquito net, bed sheets, milk, beans, posho, salt, iron sheets among others. The case-by-case support improved safety and dignity of the children and adolescents in the case load. A participant from village 13 said, *"I had lost hope when I got pregnant because my mother was the only person supporting me in everything involving my education, after Plan International identifying me, I received the monthly home visits and counseling, both me and my mother was talked to because the relationship home was very bad at that time. I was supported with bed sheets, basin, baby stockings, washing soap, baby sheets, kitenge, sandals, baby jelly, baby assorted cloths in preparation for delivery by plan international as case-by-case support. I was supported with CVA worth 320,000 in total and went back to school when the child grew a bit, and all my lost hope has been restored."*

R1A4: Roll out and set-up of the Champions of Change methodology with adolescents and youth to strengthen peer influencing over youth empowerment and gender equality

A total of 20 (13F, 07M) Staff were trained as TOT on the Champion of Change methodology at escape Village Yumbe Hotel on the 1st- 5th March, 2022. The focus was to train the staff in order to ease the rollout of the COC module to help improve the knowledge and attitudes of adolescents and young people in relation to SRHR as well promoting gender equality. The facilitation approach included presentations, plenary discussions, pictorials, games, role play, demonstration and motivational talks. The trained TOTs drew a work plan on how the COC methodology was rolled out to the adolescents and young people in the settlement.

A total of 10 (6F, 4M) Champions of change facilitators trained on Champion of Change methodology from 19th-23 April 2022 at Skypa Hotel Yumbe 19th- 23rd April 2023. This training was facilitated by the trained staff on Champion of Change Methodology. The training strengthened the capacity of Champion of change facilitators and who rolled out 12-sessions with adolescents and youth to strengthen peer influencing over youth empowerment and gender equality. At the end of the Project period, 3 champions of change facilitators left for their Country of Origin (South Sudan). The groups left without facilitators were supported by the available facilitators and staff till the end of sessions in June 2023.

37 (12F, 25M) stakeholders reached during stakeholder's engagement meeting on Champions of change methodology held on 26th April 2022 in Zone II and Zone III. The purpose of the meeting was to orient and strengthen stakeholder buy-in on the COC methodology of promoting gender equality. The participants included sub-county leaderships (political and technical), RWC representatives, and OPM. The leaders pledged to work together with the COC-facilitators for the good progress of the COC methodology. The engagement meeting was used as a platform to introduce the facilitators to the leaders which strengthened stakeholder buy-in.

129 (81F, 48M) participants reached during the introductory workshop on Champions of

Change (COC) Methodology with the 05 COC groups in zone II and III, the purpose of the introductory workshop was to orient the COC groups on the COC methodology and understand the group expectations. The groups familiarize themselves with the modules and their facilitators. Of the 5 groups, 03 are groups for girls and 02 groups are for boys. The girls' sessions are facilitated by female facilitators and boy's sessions are facilitated by male facilitators to enhance participation. In addition, the 10 COC facilitators were supported with visibility materials such as T-shirts, Bags, and stationaries to effectively perform their roles.

COC sessions greatly contributed to changing knowledge attitude and practices among the participants in different aspects. The pretest and post test results show positive changes in participants knowledge, attitude and practices for instance at posttest, 97.4% of the girls and 93.8% boys from 72% girls and 90% boys at pretest agreed that girls are as important as boys. More so 87.5% girls and 81.8% boys compared to 53 % girls and 87% boys who believed that a girl should be able to decide for herself over how to use her free time. Though there was positive change among the girls, the boys recorded a decline. 100% of girls and boys respectively argued that it was not right to make negative comments about girls appearance, sexist jokes, sexually assault a girl, spread sexual rumors about a girls and sharing naked pictures of a girl without her consent compared to 3% of the boys who said it was okay to make negative comments directly to a girls and make sexist jokes respectively as well as 2% and 8% of girls who agreed that it was okay to make negative comments about a girls appearance and negative comments directly to her. See additional results on participants level of confidence and skills on table below;

Confidence and skills to talk about gender equality	Pretest result			Posttest results		
	Boys	Girls	Average	Boys	Girls	Average
I talk about gender equality and girls' rights with girls around my age	29%	2%	16%	68.75%	34.62%	44.55%
I take part in conversations about gender equality and girls' rights with adult women.	13%	0%	7%	62.50%	17.95%	30.91%
If I hear someone saying something unfair against girls, I feel I have the confidence to challenge him or her.	19%	13%	16%	56.25%	41.03%	45.45%
I talk about gender equality and girls' rights with boys around my age	23%	0%	12%	75.00%	20.51%	36.36%
I take part in discussions about gender equality and girls' rights with adult men.	32%	0%	16%	65.63%	12.82%	28.18%

Though great changes were observed among the participants, girls still score lower in most of the parameters compared to the boys. This could be due to the negative social norms and practices that exist in the communities/settlements. Therefore, there is need to scale COC interventions for young people as well as community awareness sessions and dialogues with different categories including parents, cultural and religious leaders for social norm change.

The training post test results show 97.4% girls and 93.8% boys improvement in knowledge compared to the post test results that showed 72% girls and 90% boys at pretest agreed that girls are as important as boys. More so 87.5% girls and 81.8% boys compared to 53 % girls and 87% boys who believed that a girl should be able to decide for herself over how to use her free time. Though there was positive change among the girls, the boys recorded a decline. 100% of girls and boys respectively agreed that it was not right to make negative comments about girls appearance, sexist jokes, sexually assault a girl, spread sexual rumors about a girls and sharing naked pictures of a girl without her consent compared to 3% of the boys who said it was okay to make negative comments directly to a girls and make sexist jokes respectively as well as 2% and 8% of girls who agreed that it was okay to make negative comments about a girls appearance and negative comments directly to her.

R1A4.3. Support to peer to peer exchange visits (transport, meals) targeting youth led initiatives

The team conducted 2 peer to peer exchange visits, where 96 (62Female, 34Male) Champions of Change (COC) members were reached during learnings among the group members on 29th and 30th of October 2022. The girl's groups from Zone II were transported to Zone III, meanwhile, the boy's groups were also transported from Zone III to Zone II. The group members shared experiences and learning from the sessions they learnt. For all the groups, there were members who stepped up to shared stories with the rest of the group on how the COC module has been impactful to them;

One of the participants shared a story of how he has challenged gender stereotypes by supporting his parents with work, 'I used not to support my parents with work at home at all, ever since I became a member of champions of change, I support my mother to carry food from the *distribution point to home and even help to cook food and wash plates, this has made my mother praise me and say I am a supportive man*' says one of the members of the United boys Club.

One of the participants shared his experience of what he has gained as a member of champions of change such as confidence, communication and has identified his personality as an extrovert '*Initially, I couldn't stand before 2-3 people to address them, but as I speak, being a champion of change has helped me gain the confidence and I am currently the Head-prefect of my school and I am able to address a whole gathering with confidence and provide details*' says another male member of the club. *I have gained confidence as a Champion of Change member, even at school, I interact freely with peers, and I am also able to recognize power differences and use them positively.*

I couldn't express myself, but now, I can speak in public, and report concerns to relevant authorities, and I have learned how to make decisions on my own. At the moment, when my parents call for a family meeting, I am free and able to express my view' said one of the female members of champions of change.

Emmanuel a 22-year-old Champion of change participants said *"there is stigma attached when you are a man, and you are advocating for girls' rights in the community, perception towards girls still poor, he said changing the attitude of the community starts with young people*

creating an environment where young women and girls can feel free to express themselves. He said if the boys and men join the girls and young women their voice will be louder.

Sarah a 19-year-old said ending child marriage starts with girl out there, she said girls need to stand bold and raise our voices and action. In addition, she added it's important to help other girls understand their rights and know the importance of education and make them empowered, furthermore she said it's important to talk to the parents who drag their daughters into getting married at an early age.

R1A5: Building the life and economic skills of adolescents and youth by creating youth saving groups.

The project trained 98 (36F, 62M) adolescents and youths on group dynamics and leadership cohesion. The training focused on the understanding saving groups, Leadership, elections and development of constitution, social fund, share purchase and credit policies, Savings meetings, borrowing wisely, Planning and budgeting, Loan repayment. The training took place from 15th to 17th November 2022 and was facilitated by representatives of district commercial Officer Yumbe district.

Formed and supported 4 youth savings groups consisting of 25 members each (100 (58F, 42M) with Village Savings and Loan Association (VSLA) kits to effectively conduct their savings activities. The VSLA kit is composed of (metallic saving box with padlocks, bowls, counter books, pens, rulers, calculators, record books and stamps). Out of the 4 groups, 3 were in Zone III and 01 in Zone II. The groups were supported by the 04 trained community-based trainers (CBT). The CBTs supported the groups to develop their group constitutions and the groups have all registered with sub county leadership. Below are the total savings per group.





1 VSLA group members during their savings meeting in Zone 3 Village 14 & 12

Challenges

- **Mali**

Défis liés au Resultat1

Si les enfants et les adolescents vulnérables, y compris les Enfants Non-Accompagnés et Séparés, ont été habilités à comprendre les risques et les comportements en matière de protection, et qu'ils ont eu accès à des services de protection efficaces, sûrs, opportuns et adaptés à leur âge, il n'en demeure pas moins que ce résultat atteint à connus certains défis, notamment :

Plus de cent mille enfants déplacés au Mali ne seraient pas déclarés à l'état civil et seraient privés d'acte de naissance. Pour ce faire le projet a appuyé des familles à récupérer 1200 extraits d'actes de naissance (jugements supplétifs) en collaboration avec les services techniques de l'État.

Le système de protection existant, formel comme informel, devient de plus en faible, ce qui met les questions d'éducation, de santé, de justice pour mineurs, de travail des enfants, d'enrôlement d'enfants dans des groupes armés et d'enregistrement des naissances au cœur de la problématique des droits de l'enfant. Pour pallier cela, le projet a organisé les jeunes et adolescents à la tenue des dialogues sur le renforcement des systèmes de protection dans les 3 communes d'intervention. Les autorités administratives, locales et communautaires, ont réaffirmé leur engagement à soutenir tous les mécanismes de protection afin que les systèmes puissent offrir aux jeunes et aux enfants un environnement favorable à la protection.

Le projet a étendu la mise en place de ces espaces amis des enfants de 03 fixes à 20 de types mobiles en plus, pour faire face aux besoins grandissants due à l'arrivée de populations déplacées, ainsi qu'aux contraintes sécuritaires empêchant l'installation fixe.

- **Rwanda**

The main Challenges encountered in the implementation of the activities under this result are the following:

- The project had been planned to work in 5 DRC refugee camps but one of the camps (Gihembe refugee camp) was relocated to Mahama (a Burundian refugee camp) and Plan International is not a partner of Child protection within Mahama Camp
- Limited time to conduct the training for adolescent boys during school days. This resulted in scheduling the training on weekends and holidays.

- A large number of CoC mentors trained resigned to look for other opportunities within or outside of the camps.
- Young boys from families with conflicts are not attending well the program but PIR CoC mentors are conducting home visits to ensure the safety of the children, those cases are reported to the case workers for counseling sessions with both parents and referrals to other partners if needed to ensure the change of parents' mindset.
- High rate of young mothers who are leaving their children and going elsewhere in the towns to seek jobs and children are left under the care of their relatives or neighbors, raising potential challenges for their well-being.
- Insufficient and damaged CFSs and sports playgrounds compared to the children, Adolescents, and young people within refugee camps.
- For the identification of Coc and Bloom Participants, many children want to be enrolled but the number of the target beneficiaries is limited due to the limited budget.

- **Uganda**

The project experienced a high case load of participants, which resulted in a high case worker to participants ratio, compared to global standards on case management. On average each case worker managed 112 cases which is considered very high.

Conflicting community calendars affecting turn-up of participants for project activities, i.e. food distribution, on-going biometric verification, joint community sensitisation and awareness raising.

High expectation from the VSLA youth, some of them hope that the project was proving them with revolving fund to boost up their savings. The project team continued with awareness raising to different groups to enable them understand the implementation approach.

4.3.2.2. Outcome 2: Parents and caregivers respect children's rights to protection and engage positive parenting skills to improve quality of care and reduce child neglect

4.3.2.2.1. At the proposal stage

- **Sector:** Protection
- **Related sub-sector:** Prevention and response to violence, Capacity building (Protection)
- **Beneficiaries (status + number):** 14,500 beneficiaries, among which 3,850 refugees, 900 IDPs and 9,750 members of vulnerable host communities
- **Indicators for this outcome:** Plan's outcome indicators level of Protection from violence results framework and Child Protection Minimum Standard Indicator (16)
- **Outcome-related activities**

Activity 1. Contextualisation and roll-out of the Parenting Under Pressure (PUP) toolkit.

The PUP program developed by Plan aims to empower parents and caregivers of girls and boys ages 0 – 8 in humanitarian emergencies to provide nurturing care that supports their children's healthy development and wellbeing. It is comprised on 17 sessions focusing on increasing caregivers' understanding of the developmental needs of their children and teaching them positive parent–child interaction techniques, stress responses, management strategies and non-violent discipline practices. Through contextualisation and adaptation and selection of modules, the PUP curriculum become a compelling part of child protection

program that engage with parents in humanitarian contexts. The trained staff will deliver the PUP to community members intended to become Parent to Parent (PTP) Leaders. Once trained, these PTP Leaders will cascade the sessions to groups of parents and caregivers in their communities. (1) **In Mali**, Plan will ensure the contextualization and translation at the beginning of the action, as well as a dissemination through appropriate toolkit and information, education and communication materials, including facilitators guide, targeting 20 project staff. The toolkit will be piloted thanks to two 2-day trainings targeting 60 members becoming PTP Leaders (2 per community). (2) **In Rwanda**, Plan will emphasize the nutrition and parenting response, in order to address the needs made acute due to the phase-out of major nutrition donors. Plan will seek to align the PUP Toolkit with the existing Positive Parenting Manual as well as the National ECD program. A participatory workshop with 15 volunteers from communities (both refugee camps and vulnerable host communities) over 4 days will ensure a relevant contextualization. (3) **In Uganda**, the team will be supported by Plan Global Hub's ECD specialists in the rollout of the PUP toolkit, so that it aligns with the rollout of complementary toolkits (adolescent girls in crises, cash and voucher assistance). Later on, Plan will organize contextualization sessions and will roll out the toolkit towards a pool of 200 participants who will be involved in the testing and piloting.

Activity 2: Set-up of parenting sessions using the PUP toolkit. The staff in charge of conducting parenting sessions will be recruited and benefit from a training conducted using the PUP facilitators' manual to introduce staff to the PUP program and prepare them to train Parent to Parent (PTP) Leaders. By the end of the training, trainees will be able to: articulate key aspects of emergency response and humanitarian principles; articulate the importance of early childhood development, gender equality, and inclusion; understand and demonstrate strategies for positive parenting and stress-management techniques; describe what the PUP program is and how it is intended to be implemented, including: planning and preparation, delivery of activities, and monitoring and evaluation; demonstrate key facilitation skills; demonstrate the knowledge and skills to organize PUP sessions and train PTP Leaders. Priority will be given to parents and caregivers of children at risk, especially foster families, who will be automatically enrolled in the PUP programme, as well as parents actively asking to join the programme (to reduce the risks of stigmatisation of caregivers). Selection will be done through community mobilization and as the result of case management activities. (1) **In Mali**, Plan will support GAAS Mali NGO to implement the PUP toolkit and train PTP Leaders; the piloting (R2A1) will be followed by a 2-day training finalizing the roll-out of the toolkit. This will then result in the implementation of 6 groups of parents and caregivers, 3 groups of women and 3 groups of men caregivers, who will meet every other month to exchange on parenting with an attention to cross-cutting themes: child protection, SGBV, SRHR topics. The groups will be spearheaded by 12 PTP leaders who will liaise with the project team, lead quarterly reflection circles and organize peer-to-peer gatherings per community each semester. (2) **In Rwanda**, 20 people will be identified to become PTP leaders over a 7-day training. They will in return engage with 740 parents and caregivers, including foster families, from refugee camps and vulnerable host communities, over a total of 17 sessions per year over the course of the action; they will then lead peer-to-peer exchange groups. As the action relies more heavily on PUP and nutrition outcomes in Rwanda compared to other responses, as aligned with Plan Rwanda's response strategy, a pre and post-evaluation focusing on the roll-out of the activity will be implemented to rigorously measure tangible impact of the component. (3) **In Uganda**, 76 PTP Leaders will be selected within the host and refugee communities and trained by Plan's staff, with a special emphasis on engaging male caregivers in the PUP roll-out (specific contextualization to engage men, additional community mobilization to increase male engagement). In addition, parenting sessions will also be adapted towards young mothers (e.g. adolescent mothers and young vulnerable mothers) so that they are supported through dedicated activities in a safe space. This activity will target 200 participants who additionally will take part in peer-to-peer exchanges and implement their action plans.

Activity 3. Community sensitizations on nutritional practices (in Mali and Rwanda). Parents and caregivers attending PUP groups will also benefit from sensitization on good

nutritional practices, with messages disseminated within these groups with the aim of improving knowledge and skills and encouraging dialogue among peers on the factors that are discouraging the best practices. The key topics will include the importance of eating a balanced diet, exclusive breastfeeding, why gender equality is important in fighting malnutrition, minimum meal frequency. Cooking demonstrations targeting parents and caregivers will also be conducted. Emphasis will be placed on engaging men, where men will be encouraged to be involved in the cooking exercise and feeding young children to promote more male engagement in household activities. (1) **In Mali**, sensitization will be done through 30 sessions done every other month, by GAAS Mali NGO, with the support of Plan; each session will target directly 30 people, with a total of 900 people. It is then expected that 9,000 community members (300 members per community, e.g. other adults in the household, neighbors, members of the networks of PTP Leaders and active caregivers) will benefit from increased knowledge on nutritional practices and positive parenting. (2) **In Rwanda**, Plan will produce and disseminate information, education and communication materials printouts for the 5 refugee camps, with the aim of reaching 7,000 adults in total (3,500 per year, caregivers, other adults in the household, neighbors, members of the networks); in addition, cooking demonstrations sessions for awareness-raising will be implemented, thanks to the mobilization of the PTP leaders and material provision of cooking demonstration and food items. Plan will also pursue a successful activity which is the set-up of kitchen gardens, including within ECD spaces, with adolescent nutrition clubs of both girls and boys have been created. Plan will expand the kitchen garden nursery in all 5 camps, and will establish 8 kitchen gardens in each of the 5 camps. In addition, Plan will rely on existing nutrition networks, Champions of Change and PTP leaders to sensitize live on nutrition practices through drama and theatre annual activities.

Activity 4: Livelihood activities. Refugee communities in Rwanda and Uganda, as well as IDP communities in Mali, present a set of critical livelihoods-related needs due to several factors. Plan will support most vulnerable households to meet their basic needs via several types of livelihood-related support already piloted by Plan in the refugee camps and IDP sites. Parents and caregivers of children with protection-related needs will be identified by the action staff, using vulnerability selection criteria which will be communicated to community members. A specific attention will be given to foster families as they will receive support in cash or coupons and NFIs as part of this activity, and will participate in training sessions on child protection and positive parenting practices, as part of PUP. (1) **In Mali**, 90 households (3 per community), all foster families, will be identified by Plan during the first year of the action and will be targeted by a flexible modality of in-kind and cash and voucher assistance, based on their preference and on the risk and market assessment conducted. A yearly endowment of 87€ will be transferred, based on their attendance to parenting sessions they will be part of as per the PUP set-up. During the second year, either the same families if they are willing to, and if the placement was assessed as positive, or new foster families, will receive the same contribution. This activity will be planned, implemented and monitored by the Plan team. (2) **In Rwanda**, 740 caregivers and parents who participate to PUP activities will benefit from conditional cash transfers (a light condition, acting like a nudge, that is the participation to parenting sessions), including foster families, over regular installments for a total transfer expected at 611€ per household. (3) **In Uganda**, the focus will be put on both provision of cash and voucher assistance targeting foster families – 40 foster families will be identified to receive 5 installments of 115€ per household. In addition, 10 groups of 10 caregivers will receive a two-day training on technical skills, and be provided with start-up kits for income-generating activities.

4.3.2.2.2. *At final report*

[FINAL] Beneficiaries (status + number):**Program level****– Mali**

Bénéficiaires (statut + nombre) atteints dans le cadre du Résultat 2 : 1 440

Personnel formé sur boîte à outils PSP	20
Parents Leaders PUP formés	33
Parents PUP formés sans les 33 parents leaders	57
Parents d'enfants formés sur PUP	330
Femmes formées sur la démonstration culinaire	900
49 PDIs + 51 hôtes (cash urgence en mars 2023)	100
TOTAL	1 440

– Rwanda

13674 (9417 Females & 4257 Males) Beneficiaries were reached under the Result 2.

– Uganda

Beneficiaries for Outcome 2:

Age \ Sex	Total	F	M	F	M
Infants	0	0	0	0%	0%
Children (5-17y)	0	0	0	0%	0%
Adults (18-49y)	417	348	69	83%	17%
Elderly (>= 50y)	0	0	0	0%	0%

% of parents and caregivers who report using positive parenting practices Baseline: 55.2% Target: 60% Result: 82%

The proportion of parents that reported using positive parenting practices increased from 55.2% (57.0% female, 54.5% males) at baseline to 82% (79.35% female, 89.1% male) higher than the project target of 60%. The PUP model proved to be effective in changing the attitude and perceptions of parents/caregivers towards their children with 100%(117) reporting that they can communicate easily with their children, 99.1% can set realistic limits and boundaries for their children while 95.7% respondents agreed with the statement, *"I can show my child love and be affectionate."*

% of children aged 8–17 who report a positive change in their interactions with their caregivers following their caregivers' participation in a family strengthening programme. Baseline: 0% Target: 80% Result: 94.1%

The changes demonstrated by the parents/caregivers did not vary with what the children reported where 94.1%(175) compared to the 80% set target said they have witnessed positive changes in their interactions with the parents/ caregivers⁹. The positive changes in the interaction between children and parents/caregivers have been attributed to the

parents'/caregivers' participation in PUP sessions. Therefore, PUP interventions are effective in strengthening family relations especially between children and their parents/caregivers which should be adopted in future projects.

of Staff Trained and supported by GH ECD Specialist on PUP. Baseline: 0 Target: 20 Result: 20

20 (13 F, 7 M) staff were trained as trainers of trainees (TOTs) by the CPiE Specialist from BNO. The project staff demonstrated knowledge in the model and others had to apply the knowledge in their own families. *"Plan staff mentioned reflecting upon their own parenting practices. Also, personally I learned a lot."* Uganda.

of parenting sessions conducted. Baseline: 0 Target: 17 Results: 17

17 parenting sessions were conducted to 10 groups of 200 (165F: 35M) parents. 80 parents were from Zone II and 120 parents from Zone III. The parenting sessions were facilitated by parent to parent leaders using the Parenting Under Pressure curriculum. However, the parents are recommending for messages on different sessions be recorded for family members (especially fathers) and those who cannot attend the sessions to listen to the lessons later. This can also facilitate wider scale of the sessions to other neighbours.

of parents enrolled in the Parenting sessions and actively participated in the PUP sessions. Baseline: 0 Target: 200 Result: 180

200 (165 F, 35 M) parents/caregivers were enrolled for parenting under pressure (PUP) sessions in 10 groups. Each group consisted of 20 members and the categories selected were parents/caregivers with children between 0-8 years, young mothers, teenage mothers, parents and caregivers of children with disabilities, parents who experienced intimate partner violence, single parents among others. 180 parents/caregivers completed at least 75% of the 17 PuP sessions. Other parents were affected by food prioritization and opted to look for food, absenteeism was also recorded among host community parents.

of TOT of staff trained on parenting under pressure toolkit (PUP), life skills, gender transformative marker, CCM, PFA. Baseline: 0 Target: 20 Result: 20

20 (13F: 7F) project staff were trained as TOT in PuP toolkit by the CPiE from BNO, they were also trained on Life Skill by the regional CPiE Specialist and PIU CPiE Specialist. The same staff also received training on Psychological First Aid (PFA) to roll it out to the adolescent girls under CoC and also to the CFS animators but also to benefit themselves during their case management.

of men mobilised to increase male engagement in parenting. Baseline: 0 Target: Result: 42

42 men participated in 2 days mentorship training conducted by a male staff from the DGD project on positive parenting in Zone II and Zone III. As a result, the 42 men mobilized 200 other men that enhanced male participation in positive parenting sessions.

of young mothers who attend parenting sessions at CFS supported with material Support. Baseline:0 Target:100. Result: 99

99 out of 100 young mothers who attend Parenting Under Pressure Sessions in Zone II Village 6&7 and in Zone III. Each young mother was supported with 179,000/= cash to support to meet some of their basic needs that effectively enhanced their attendance and participation in Parenting Under Pressure Sessions.

[FINAL] Indicators for this result: please refer to the table 4.3.1 [FINAL]

[FINAL] Activities related to this result:

- Mali

R2.A1. Contextualisation et déploiement de la boîte à outils Parentalité sous pression (PSP)

Indicateurs :

de personnel du projet formé sur la boîte à outils PSP :20

#de boîte à outils PSP contextualisée et déployée : 01

Stratégie :

Formation du personnel, l'identification et la formation des leaders PUP
 La traduction, contextualisation, adaptation et sélection des modules de la boîte à outil
 La dissémination de la boîte à outil
 Formation et sensibilisations des communautés sur les bonnes pratiques nutritionnelles
 Mise en place des activités subsistances pour aider les familles à sortir de la précarité

La contextualisation, l'adaptation et la sélection des modules :

Le programme PUP a pour objectif de donner aux parents et aux personnes s'occupant de filles et de garçons âgés de 0 à 8 ans dans des situations d'urgence humanitaire, les moyens de fournir des soins attentionnés qui favorisent le développement sain et le bien-être de leurs enfants. Avec la situation d'urgence prolongée caractérisée par le déplacement massif des personnes dans la zone d'intervention du projet, la responsabilité des parents était devenue difficile. Le programme PUP est incontournable dans un contexte comme celui de Macina.

Aujourd'hui, le cercle de Macina compte environ 1786 ménages déplacés avec 7125 de personnes déplacées internes dont plus de 59% sont des enfants. Ces PDI sont en situation de vulnérabilité et vivent des moments de stress. Ils sont affectés et ont besoin d'appui de la part des intervenants internes et externes en matière de protection. Le besoin le plus crucial demeure l'aspect psychosocial.

Pour aider les enfants à renforcer leur résilience, il fallait impérativement accompagner le parent par un programme d'enseignement psychosocial à travers le programme Parentalité Sous Pression (en tant que programme d'enseignement composé de 17 séances). Pour la mise en œuvre de ces sessions, l'équipe du projet a fait un travail de contextualisation et d'adaptation des modules en fonction des besoins des participants. Cela a été suivi de la sélection de modules de formation.

Cette étape de sélection et d'adaptation a été suivie de la formation du personnel du projet pour un total de 18 personnes dont 6 femmes et 12 hommes en septembre 2022, dans le but de les rendre formateurs et transmettre le PUP aux membres de la communauté qui ont été désignés pour devenir des leaders de Parent à Parent (PTP). Une fois formés, ces leaders PTP ont transmis les sessions à des groupes de parents et de tuteurs/responsables d'enfants dans leurs communautés.

Organisation d'un atelier de transcription :

Un atelier de transcription a été organisé afin de faire la transcription des messages en langue locale (Bambara), regroupant ainsi les spécialistes en alphabétisation pour permettre l'adaptation des documents aux cibles.

Formation de 33 parents leaders PUP :

Suite au constat fait sur la possibilité de mobiliser les parents PUP des 30 villages du projet, le projet formé 33 parents leaders PUP sur 18 prévus pour les sensibilisations des autres

parents d'enfants de 0-8 ans. Ces derniers sont appelés à mettre en place les sessions PUP.



Photo de famille des participants à la formation de l'équipe et des leaders PSP

R2.A2. Mise en place de sessions de parentage utilisant la boîte à outils PSP

Indicateurs :

#de parents leaders PTP formés sur la boîte à outils PSP: 33

#de sessions parentales menées : 102 (17 séances par groupe pour 6 groupes de 33 parents leaders)

de parents et de tuteurs/trices participants aux séances sur la parentalité positive : 330

Identification et formation de 90 parents/tuteurs PUP :

Les leaders PTP ont donc à leur tour fait bénéficier 90 parents/tuteurs de leur communauté d'un programme d'enseignement composé de 17 séances. Cela a conduit à sensibiliser 330 personnes dont 165 hommes et 165 femmes adultes. Les sensibilisations ont porté :

L'enseignement aux parents et aux aidants du développement sain de l'enfant

L'interaction positive entre parents/aidants et l'enfant ;

Les réponses au stress et les stratégies pour le gérer ;

Et les pratiques parentales positives.

Causeries des animateurs du projet sur la situation des violences à l'endroit des parents et tuteurs :

Si d'une part, les animateurs du projet ont sensibilisés les enfants sur les tendances de l'exacerbation de la violation des droits des enfants (tranche d'âge la plus touchée, communautés plus touchées, les périodes de risque...), d'autre part, ils ont également travaillé

avec les parents et tuteurs d'enfants afin que tous soient mis au courant des situations qui prévalent.

La situation des parents et tuteurs touchés en ce sens se présentent comme suit :

BENEFICIAIRES	# total	#femmes	#hommes	VULNERABILITES	
				# PDIs	# Personnes en situation de handicap
Adultes de 18 à 49 ans	10 056	5209	4847	79	11
+ 50ans	5 097	2856	2241	43	4
TOTAL	15153	8065	7088	122	15

Le programme a donc permis de renforcer les relations entre les mères, les pères et autres aidants ou coparents, en vue d'accroître la participation des hommes dans la prestation de soins, améliorer l'égalité de genre et la cohésion sociale dans les communautés touchées par les crises humanitaires.

Témoignages

Les propos de M. MSO en sont une parfaite illustration. « Nous avons suivi 17 sessions. Après avoir complété le programme, nous avons compris que certes, on est dans de difficultés, mais cela ne doit pas nous empêcher de vivre en harmonie en vie de famille. Nous accordons une très grande importance à la survie et au bonheur de nos enfants. Les parents dans la communauté se sentent plus déstressé et plus heureux. ».

Selon AA, homme parent leaders PUP de 44 ans, le programme a permis d'accroître la participation des hommes dans la prestation de soins, ainsi qu'améliorer l'égalité de genre et la cohésion sociale au sein de ces communautés touchées par les crises humanitaires. "Je reconnais que le programme m'a transformé. Je me suis mis tellement de pression dans l'encadrement de mes enfants avec la dégradation de la situation sécuritaire, que je ne savais plus quoi faire. Après la participation aux différentes sessions de formation, je me vois capable de gérer mon stress.

Le comportement de AK , une femme 29 ans en est une parfaite illustration. AK était très préoccupé en début de la formation car ayant vécu depuis l'avènement de la crise des moments traumatisants. À la fin de l'atelier elle témoigne que son calme était lié à son vécu, mais avec la formation elle a su remonter cette situation.

R2.A3. : Sensibilisation des communautés aux pratiques nutritionnelles

Indicateur

de parents et tuteurs sensibilisés aux bonnes pratiques nutritionnelles : 900

La démonstration culinaire est une activité qui vise à améliorer la qualité de l'alimentation quotidienne et promouvoir la diversification de l'alimentation, l'utilisation de produits locaux et la distribution d'un livret de recettes. Le projet a mis les matières premières (mil, sorgho, sucre, condiments etc...) à la disposition des 03 CSCOM partenaires du projet.

La situation des femmes qui ont bénéficié de ces démonstrations se présente comme suit :

Femmes touchées	Communes			
Cibles	Saloba	Sarro	Kologo	TOTAL

Femmes allaitantes ;	60	60	60	180
Femmes enceintes ;	60	60	60	180
Femmes en âge de procréer ;	100	100	100	300
Femmes (adultes en statut de belle-mère)	80	80	80	240
TOTAL	300	300	300	900

Cette activité a permis d'aider les femmes démunies, dans la prévention et la lutte contre la malnutrition aiguë chez certaines catégories d'enfants. La formation a été donnée par les ASC (agents de santé communautaires) supervisée par les Directeurs Techniques de Centre de santé (DTC) et l'équipe du projet du 28 février au 01 mars 2023.

Les démonstrations ont aussi été suivies d'un cash transfert à 47 filles mères très vulnérables dans le but de renforcer leur résilience et améliorer la situation nutritionnelle de leur famille.

Pour le dépistage de MAM/MAS :

En décembre 2023, durant deux jours, le projet a organisé un dépistage de masse dans les trois communes d'intervention du projet. Les ASC formés et les relais communautaires supervisés par les DTC et l'équipe du projet, ont dépisté 8049 enfants dont l'âge est compris entre de 06 à 59 mois.

La méthode de collecte a été systématique, c'est-à-dire que tous les enfants de moins de cinq (05) ans dans les ménages ont été dépistés. Le dépistage a été fait à l'aide du périmètre branchial.

A la suite de ce dépistage, sur l'ensemble des enfants dépistés, 7850 enfants étaient au vert, 147 enfants étaient au jaune et 48 enfants étaient au rouge.

Tous les 48 enfants malnutris ont été référés aux centres de santé. Les informations collectées ont été traitées, interprétées et analysées par les deux M&E du projet ALPHALOG/ Plan.



R2.A4. : Moyens de subsistance / Activités d'accueil

de ménages vulnérables touchés par du transfert monétaire à usage multiple : 390

1. Dotation matérielle et distribution de cash aux FAT :

Les 09, 10 et 11 Mai 2023, le projet a assisté 90 Familles d'Accueil Temporaire dont 21

femmes chefs de ménages. Deux sites ont servis de cadre pour la remise notamment le site Macina et celui de Mandijladaga. Ils ont reçus :

des kits d'accueil transitoire (matelas, moustiquaire, serviette, torchon, sceau, savon, javel, raclette, casserole, claquettes et autres). Les FAT ont été consultés préalablement pour faire la liste des objets dont ils ont besoin pour l'accueil des ENAS. Tous les ménages ont bénéficié de cet appui selon leur demande.

L'équipe de projet a aussi fourni à chacune de 90 FAT, un montant de 57 570 f CFA (pour un total de 5 181 300 FCFA) pour améliorer les conditions de vie des enfants dont ils se faisaient charge et répondre aux premiers besoins. C'est avec l'accompagnement des services techniques de l'État (SLDSES et SLPFEF) que ce soutien en CASH a donc été effectué, suivi d'un appui en Kits NFI et vivres.

2. **Transfert monétaire aux ménages les plus vulnérables :**

C'est dans le contexte d'arrivée d'un flux remarquable de déplacées internes à Macina, qu'en mars 2023 Plan International, à travers son projet DGD, a pris l'initiative d'assister 49 ménages PDI et 51 ménages hôtes les plus vulnérables en kits d'hibernation composé de vivre et non vivres, y compris en CASH (57.750 FCFA transfert monétaire à usage multiple correspondant au développement d'un panier de dépenses minimum (MEB) fixé par le groupe de travail cash pour Ségou).

Le projet a ensuite identifié, en Novembre 2023, 200 ménages les plus vulnérables et les plus à risque d'insécurité alimentaire afin de faire un transfert cash de 42.000 FCFA par ménage (montant réduit à cause des limitations budgétaires).

L'activité a été menée afin de répondre urgemment aux besoins primaires des personnes déplacées internes (PDI) de Payaka dont 85% (soit 150) sont PDI et 15% (soit 50) sont des ménages des personnes vulnérables issues de la communauté hôte en raison des récents événements liés à l'insécurité dans les communes de Sana et Saloba

Il faut également signaler que dans ce cas les kits NFI et les vivres ne proviennent pas des ressources du projet DGD mais des mécanismes de réponse d'urgence de Plan International (. Le bureau d'urgence de Plan International de Ségou a sollicité l'appui du projet DGD, pour la mise à disposition de cash et pour la distribution des Kits NFI aux PDIs de Macina. L'activité a été présidée par le préfet du cercle de Macina avec la présence du chef de bureau d'urgence de Ségou , du Emergency Réponse Manager, des autorités locales et administratives de la localité. La cérémonie de remise a eu lieu le 28 Novembre 2023 sur la Place de l'indépendance de Macina.

Figure 1 Remise NFI par le 1^{er} adjoint du Préfet à deux ménages



Chef de village de Touara en interview avec l'ORTM

Témoignage : Un des bénéficiaires, PDI venant du village de Touara, a raconté qu'il est très ému par cette donation qui vient à un moment très important. Il a raconté qu'ils n'ont pas eu le temps de se préparer pour faire face à de telle situation. Ceci fait qu'ils ont quitté leur localité sans même avoir le temps de prendre quoi que ce soit. Il a dit que Plan les a soulagés à travers ces dons de vivres et non vivres. Il a terminé en disant que Plan est un bienfaiteur que lui et tous les bénéficiaires ne vont jamais oublier et il a remercié l'organisation éternellement.

- Rwanda

R2.A.1. Contextualisation and roll-out of the Parenting Under Pressure (PUP) toolkit. (explain here)

In Rwanda, the contextualization of the PUP toolkit was done in a participative way with a consultant and the collaboration of volunteers from refugee and host communities. Indeed, a 4-day workshop was organized with 15 volunteers from communities to ensure that the activities would be adapted to the context. A consultant was hired to help with the contextualization and translation of the toolkit in Kinyarwanda (the local language, which is also the language spoken by refugees in DRC refugee camps). Additionally, the PUP toolkit emphasizes the importance of nutrition and parenting response, in order to address the needs made acute due to the phase-out of major nutrition donors. Plan staff collaborated with WFP colleagues to discuss technical aspects on the nutrition material and ensure the high quality of the content.

The PUP Program aims to empower parents/caregivers of children aged 0-8 years in emergency settings, to provide nurturing care that supports their children's health development and wellbeing. The module was introduced to the project to equip parents and caregivers with positive parenting skills that will enable them to fight against child neglect in refugee camps. The program is a curriculum of 17 Sessions delivered to 1478 Parents and caregivers divided into 4 cohorts, with 368 participants per cohort (Kigeme 369: 15 men & 354 women, Mugombwa 370: 24 men & 346 women, Kiziba 370: 11men&359 women, Nyabiheke 369: 12men & 357women). The aim of this training was focused on teaching parents and caregivers about healthy child development; positive parent/caregiver-child interaction; stress responses and management strategies; and positive parenting practices.

R2.A.2. Set-up of parenting sessions using the PUP toolkit

Indicators

of Parent to Parent (PTP) leaders who have been trained on Parenting Under Pressure (PUP) Program: 20

of Project staff who have been trained on the Parenting Under Pressure (PUP) Program: 20

of Parenting sessions have been conducted: 17 sessions for each cohort

of Parents and caregivers who have been reached through parenting sessions: 1478 out 1480 parents and caregivers (1412 women and 66 men) (Kigeme 369: 15man & 354 women, Mugombwa 370: 28 men&342 women, Kiziba 370: 11 men&359 women, Nyabiheke 369: 12 men & 347 women)

In Rwanda, 2 project staff (the Project Manager and Nyabiheke camp CP Coordinator) acquired knowledge of the PUP program through training delivered in UGANDA for Master trainers, who in return cascaded the same training to 16 field staff (4 per refugee camp), CP Program Manager and the M&E Officer for 5 days. These two were previously trained by the Child Protection Specialist from BNO. Plan field staff (child protection coordinator, Community engagement officer, and Child protection officers), have increased their knowledge of PUP and VSLA through the delivery of training by the master trainers that provided a platform for an in-depth discussion on the expected outcomes and how these modules intend to boost the wellbeing of the program participants.

To roll out the Parenting Under Pressure (PUP) program and set up parenting sessions, 20 people have been identified to become PTP leaders. The training received by Plan field staff

was thereafter delivered to Parent-to-Parent leaders through a seven-day training for 20 (5 per refugee camp) selected parents. Through the PUP facilitators' manual, PTPs were trained about the program as they are responsible for the implementation of the program at the field level.

They have in return engaged with 1478 parents and caregivers, including foster families, single parents, teen mothers, elderly people raising children under 8 years, Parents experiencing IPV, Parents living with children (0-8) with special needs, Parents/caregivers with children between 0-8 years, expecting mothers, and Young mothers (24 below) from refugee camps and have delivered the same training over a total of 17 sessions per year and then led peer-to-peer exchange groups. These 1478 participants have been divided into four cohorts (1 cohort = 367 parents, the second and 3rd cohorts=738 and the 4th Cohort was 373 Participants all four cohorts have completed the 17 sessions each cohort. After completion of all sessions, Plan staff (Nutrition officers) provided support in the facilitation of a cooking demonstration session for each cohort. This activity helped the parents and caregivers to understand more about cooking a balanced diet. As the action relies more heavily on PUP and nutrition outcomes in Rwanda compared to other responses, as aligned with Plan Rwanda's response strategy, a pre-evaluation focusing on the roll-out of the activity has been implemented.

In addition, the selection of program participants was done through case management, meeting with community structures, and referral from partners the following Criteria were respected:

- Parents/caregivers with children between 0-8 years
- Expecting mothers
- Teenage mothers (13-19years)
- Young mothers (24 below)
- Single parents
- Foster parents
- Parents living with children with special needs (Disability)
- Parents experience Intimate partner violence
- Parents and caregivers from CP Cases

According to the PUP program guide, there was a need to gather information related to child protection in the implementation areas by conducting studies. However, as this program was integrated with the child protection project, it was recommended by BNO to conduct the Rapid Need assessment (RNA) rather than conducting a baseline survey as most of the information needed was found in the project baseline survey. The RNA was done internally by Plan staff. During the implementation of this activity, the main challenge faced by the PTP leaders was to have as many women as men participating in the different sessions. Indeed, the population of the camps is mainly composed of women and children. Moreover, some men work outside the camps and therefore cannot attend the session

In addition, 1852 children and adolescents between the ages of 9 and 18 have indirectly benefited from the Parenting Under Pressure program. This program provides support and resources to parents, which in turn positively impacts their children by creating a more stable and nurturing environment at home. Indirect benefits include improved relationships, better communication skills, and a reduction in stressors that may affect children's well-being.

Location	1st Cohort					2nd & 3rd Cohorts					4th Cohort				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Kigeme	64	1	27	0	92	161	9	12	0	182	88	5	2	0	95
Kiziba	86	6	0	0	92	182	3	0	0	185	91	2	0	0	93
Mugombwa	75	11	5	0	91	170	11	5	0	186	86	6	1	0	93
Nyabiheke	82	3	7	0	92	168	5	12	0	185	86	4	2	0	92
Total	307	21	39	0	367	681	28	29	0	738	351	17	5	0	373



Celebration of completion of PuP training with project staff

R2.A3. Community sensitizations on nutritional practices

Indicator

Of Parents and caregivers who have been reached through sensitization on good nutritional practices: 10236

Plan has produced and disseminated information, education and communication materials printouts including flyers, pull ups & banners with nutrition messages such as how to prepare a balanced diet, the benefits of breastfeeding for all the refugee camps, with the aim of reaching 7,000 adults in total (3,500 per year, caregivers, other adults in the household, neighbors, members of the networks).

In addition, participants of the PUP program attended cooking demonstrations sessions for awareness-raising, thanks to the mobilization of the PTP leaders and material provision of cooking demonstration and food items. PUP parents and caregivers have invited their children and neighbors to taste the food and explain to their guests the advantages of a balanced diet.

Plan has also pursued a successful activity which is the set-up of kitchen gardens. Although it

was planned at the proposal stage to establish the kitchen gardens within the ECD spaces, the team decided to establish them directly in the community and managed by the refugees. Therefore, the parents and caregivers have started growing and taking care of the plants that they can take back home afterwards. The reason behind this decision was that the ECD staff had neither the time nor the space to manage these gardens, as this component (ECD) falls under another implementing partner's mandate in all refugee camps. In total, 3 new kitchen gardens and 1 kitchen garden nursery bed were established in each camp.

Moreover, the team decided not to create adolescent nutrition clubs mentioned at the proposal stage as the PTP leaders faced already a high amount of work. However, adolescents from Champions of Change and BLOOM clubs will be invited to visit the kitchen gardens in April and they have disseminated the messages on good practices observed to their family members and neighbors.



Cooking Demonstration on balanced diet

R2.A4. Livelihood activities

Indicators

of Parent and caregivers saving groups have been created: 44

of Parents and caregivers, as active members of saving groups, who have been provided with livelihood support: 910(862 & 48 Men)

of Peer-to-peer exchanges which have been successfully organized: 20 groups in all 4 DRC camps which composed by 1010(177 Men & 833 Women)

In addition to the PUP sessions, each PUP participant received a maximum of 372,000 RWF conditional CVA divided in 2 instalments, after the 10th and the 15th sessions. The amount is calculated according to the number of sessions they attend. However, the participants were automatically removed from the program if they missed three sessions and were replaced.

This amount supports them to cover the basic needs for their children and families in a bid to fight against child neglect. Parents and caregivers enrolled in the program have also been trained on VSLA program. Indeed, they have established 44 saving groups and loan associations and been encouraging the culture of saving and plan for better future through loan associations, hence building a resilient life.

Among the active members of these saving groups, 910 parents and caregivers who have received livelihood support are still in this association which comprising 862 women and 48 men. The number of members of these saving groups decreased from 1105 to 910 since the interim report for the following reason: Some program participants faced challenges engaging in saving activities. Issues such as personal character, socialization problems, and a lack of trust were identified as barriers to active participation in the savings component of the program hence the saving groups were reduced and other program participants have been resettled to the third country.

Now, they have a total of 91,115,410 in savings. As the current situation, The VSLA group members meet on weekly basis for saving and loans, and the PTP leaders take that opportunity to remind them about the positive parenting, monitor their progress and help them to address any challenge they may face. For the sustainability of Village Saving Groups, Plan PTP leaders monitor the group in collaboration with Plan community engagement and they are encouraged to have ownership.

In addition, 20 peer-to-peer exchange groups have been established and structured within all four DRC camps. These groups encompass 1,010 participants, consisting of 177 men and 833 women. The inception of these groups created from the efforts of parents and caregivers who underwent training by Parent-to-Parent leaders. Impressed by the effectiveness of the sessions, these individuals took the initiative to spread the knowledge within their communities. The supervision of these groups is carried out by PUP participants, with the assistance of Parent-to-Parent leaders.

The table below shows their details savings

Location	number of groups	Female	Male	Total	Saving VSLA for
Kigeme	14	221	8	229	39,025,500
Kiziba	6	162	3	165	8,345,190
Mugombwa	12	257	16	273	38,796,120
Nyabiheke	12	222	21	243	4948600
Total	44	862	48	910	91,115,410



PUP saving groups under operation





PUP During saving Activity



PTP While delivering session

- **Uganda**

R2A1. Contextualisation and roll-out of the Parenting Under Pressure (PUP) toolkit. (explain here)

During the project implementation period, 25 (7M, 18F) staff were trained as trainers of trainees (TOTs) for 4 days training from 21st -24th March 2022 at Escape Village Hotel Yumbe Town by CPIE specialist from BNO and CPIE Specialist from PIU. The TOTs were trained to help in contextualisation and rollout of the PUP modules, and the staff trained were 1 Project Manager, 1 Child Protection in Emergency Coordinator, 3 Child protection Officers, 1 MERL Officer, 14 Case Management Workers and a team from Rwanda (3 (1F: 2M)) who attended the training with Plan International Staff in Uganda under the DGD Project. The training content was on the introduction to Basic Early Childhood Development, Early Childhood in Emergency and Parenting in Emergency, plus the areas of childhood development, children's needs, the 17 sessions programme under PUP, why parents should be brought on board during Early Childhood Development activities, 3 different ways of delivering the PUP sessions, steps for implementation, implementation timeline. Key facilitation skills, PUP hybrid program methodology, stress and 3 types of stress, impact of stress on children, exploring the results and monitoring and evaluation framework, tools for output and monitoring indicators, feedback from M&E and workplan development. All these came out well thus leading to the success of the training. During the training, participants demonstrated the knowledge and skills to organize PUP sessions and intent to cascade the training to PTP Leaders.

Recruitment of parent to parents leaders

Plan International Uganda advertised to recruit parent to parent leaders in Zone II and III as well as in Lori and Kululu sub counties respectively.

40 (30M, 10F) turned up for the interview and 6 (2 F, 4 M) were from the host community. The interviews were led by the OPM representative and Community Development Officers for Lori and Kululu Sub-county. The parent to parent leaders were shortlisted based on their education level (O'level certificates), experienced in Community work, track record of being role model in the community and recommendation from RWC/LC. Therefore, 20 (7F, 13M) Parents to

Parent (PTP) leaders were recruited and trained on parenting under pressure (PUP) for 5 days from May 23rd - 27th at Bayan Hotel in Yumbe. The PUP curriculum aims at empowering Parents/Caregivers of girls and boys between 0-8 years. The purpose of the training was to increase knowledge, confidence, and skills of PTP leaders to effectively roll out the PUP modules. In addition, the PUP manual was printed for each of the 20 Parent-to-Parent leaders to help guide them as they roll out the Parenting under Pressure Sessions to parents and caregivers who were selected in the different groups.

The PTP leaders gained knowledge which helped them to deliver PUP sessions to different PUP participants. The PTP leaders demonstrated an exemplary lifestyle to other parents and caregivers through knowledge and skills acquired during the parenting sessions as result no cases of child abuse were reported among PUP participants.



Photos shows participants during group work sessions

R2A2: Set-up of parenting sessions using the PUP toolkit.

200 (165 F, 35 M) from 10 parenting under pressure (PUP) groups were identified. Each group consisted of 20 members and the categories selected were parents/caregivers with children between 0-8 years, young mothers, teenage mothers, parents and caregivers of children with disabilities, parents who experienced intimate partner violence, single parents among others. 4 PUP groups were from Zone II (village 1, 6 & 7) and hosting community of Invevea village in Lori Sub-County) consisting of 20 members all nationals (10M,10F) and 06 PUP groups were from Zone III (village 11, 12,13,14,15) & Limu Village comprising of 20 Members all nationals (13F,07M). 4 groups were formed in Village 11, 13, 14 in Zone III and Village 6&7 Zone II for the young mothers/teenage mothers.

The PUP pre-test was administered to 185 (140F, 38M) PUP participants, to find out the existing parenting practices in the community. A post-test was to be conducted at the end of 17 PUP sessions to determine the knowledge gained and changes in parenting practices. The first cohort completed their sessions.

“One of the PTP leaders reported that she has observed parents and caregivers providing their children gender-responsive nurturing care including responsive caregiving, protection and opportunities for play and learning during home visit”

“One female refugee participant from V.15 Zone III, testified that before Parenting under pressure sessions, she had a lot of stress and at the verge of committing suicide, she was identified and enrolled her on PUP program, she learnt under session 2 Parenting Challenges

and Dealing with Stress, I was able to learn that many people are also going through a lot but they are able to cope up with stress without committing suicide, she added that she now knows how to cope up with stress”.

The additional 200 men, 80 Male from Zone II and 120 Male from Zone III were mobilized and taken through parenting sessions facilitated by parent to parent leaders using the Parenting Under Pressure curriculum consisting of 17 sessions. The sessions were conducted once a week for 6 months, and after the completed all the 17 sessions the project team supported their initiative create awareness on positive parenting to other parents and caregivers. *Another participant was able to testify that before the training he used to think that upbringing children in the family was the responsibility of a woman for example bathing children, washing clothes even fetching water but later on after being taken through the 17 sessions he got learnings in session 6 that is cooperating he shared sharing family responsibilities in the aspects of maintaining hygiene in the family for example sweeping the compound, washing children clothes, cooking food among others that has made him and family live a violent free life”.*

Support mobilization of men to increase male engagement in Parenting.

42 men were taken through 2 days mentorship training by male staff from the DGD project on positive parenting in Zone II and Zone III (Village 1, 6, 7, Lori sub-county and Zone III Village 11, 12, 13, 14, 15, 16 and Limu host community. The training was from 1st – 2nd September 2022 and out of the 42 participants, 03 are persons with disability (physical disability).

The targeted participants were male parents who were already benefiting from Parenting under Pressure sessions and other key male parents who were very influential in the community. The topics covered were the concepts of parenting, co-parenting and positive parenting discipline and they developed their action plans for implementation during the training. Besides that, the trained men mobilized 200 men to increase male participation in positive parenting.



Male engagement group members for parenting under pressure after their sessions.

Support to young mothers who attend parenting sessions at CFS

99 out of 100 young mothers who attend Parenting Under Pressure Sessions in Zone II Village 6&7 and in Zone III village.11, V.13, V.14 were supported with 179000/= cash to support them buy some basic needs that can help them to effectively attend the Parenting Under Pressure Sessions. This groups consisted of participants from the Refugee aged 13-24 years. The need for this material support was registered during the session rollout due to inconsistencies in the attendance by participants and the young mothers had challenges that

could not allow them to effectively attend the sessions as planned.

"One of the young mother 16 years old from village 7 testified the support was timely since she had nothing to receive her baby in terms of baby sheets, basin, baby clothes, pumpers, soap, vaseline among others and currently her baby is healthy and she has made seven months".



Young mothers in Zone III receiving cash support from Plan International Uganda and the RWC1 of the Village.

Parents excited after receiving their cash for business boost



Support to the peer to peer exchange visits among the Parenting Under Pressure groups.

Below photo shows other participants arriving from Zone 3 Village 15 and V.14 to the venue for the exchange visits in Zone 2 Village 6.



During the exchange visit a total of 143 (97 Female, 46 Male) participants of parenting under pressure (PUP) from Zone III Village 15 and 14 were brought to Zone II to visit a group of parents and caregivers from village 1,6,7, and Lori host community participated in 1 day exchange visit with the purpose of learning from each other and strengthening the relationship as well as share their experiences in parenting. 20 (10M, 10F) were from the host community in Lori sub county.

During this exchange visit the PUP participants were able to share the knowledge gained during the PUP programme in that as a result men gained knowledge on co-parenting and accepting parenting as shared roles and responsibility for both male and female. Besides that the participants were able to recognise their contributions as parents in nurturing of children.

A case in village 15 where a female parent narrated her story saying *“Am a single mother with 5 children, I learnt many lessons but the most touching one was Session 2 Parenting Challenges and Dealing with Stress, this session helped me manage my stress because I had lost hope in life and I was becoming mad, I could talk alone, could take alcohol and could not care for my children. After joining PUP programme I was able to recover, I was taught techniques of stress management and I have built resilience and now caring for my children using parenting discipline”*.

“Below photo shows a participant who is a young mother sharing her change story saying am a 24years old young mother, I stay in Zone II, Village 6 tank 50 and am married with 3 children all boys, I use to be so stressed, I did not know how to manage my children but after when i was selected to be among the 20 PUP participants i started attending the sessions and the most touching session was session 2 that talks about parenting challenges and dealing with stress. This session i understood it very well now i can take good care of my children and i can teach other fellow parents on the positive stress management techniques”



During the exchange visit, UNHCR recommended Plan International to help link the PUP groups to other partners for livelihoods activities and if there are avenues within the organisation the PUP groups need to be considered for income generating activities in order to empower them. He added on that Plan International should document the change stories and share between the groups in Zone II&III in order to promote learning on positive parenting. He added on there is need to increase on the number of male to engage in parenting activities and take roles in co-parenting and create awareness on child protection issues to make parents understand that it's their roles to ensure that young children are protected and safeguarded against abuses.

The below photo is for UNHCR zonal representative addressing the participants during the exchange visit in Zone 2 Village 6.



Support to the formation of parent support groups (transport, refreshments)

50 (34F,16M) parents who attend Parenting Under Pressure Sessions in Zone II Village 1, 6, 7& Lori Host community and Zone III Village 11, 12, 13,14,15 & Limu host communities were selected as role model parents in their various communities. 5 members from each group were selected to represent as role model parents in the Villages and out of the 50 participants, there are 10 (3F,7M) nationals from the host communities of Lori and Limu Village and 40 (32F,8M) from the refugee settlement.

Training of parent support group on positive parenting practices.

50 (20M,30F) parent support group members were trained for 3 days from Oct 31st to Nov 2nd 2022 on positive parenting practices to go out and cascade knowledge on positive parenting practices to other parents who were not part of the parenting under pressure and male engagement group. The content covered was about the concept of parenting, examples of positive parenting practices/tips, family protective factors, benefits of positive parenting, the relationship between power, gender, intimate partner violence and its consequences and IPV being a barrier to positive parenting. These groups then developed their work plan and timeline for their work plan implementation and submitted to Plan International Uganda for effective monitoring. Among the items included in the work plan were the stationaries for instance flip charts, counter books, marker pens, pens, refreshments among others, and the activities developed were the awareness sessions on positive parenting practices and community dialogues on some key parenting challenges.

Parent support groups during the training



Support to the implementation of action plans for the parent support groups.

Conducted planing meeting with 50 (34F, 16M) parent support group members. During the meeting the participants developed action plans to strengthen positive parenting among the parents and caregivers. The actions included; community awareness on positive parenting and one one sessions with peers. On quarterly basis, the parent support group members participated in review meeting to check on the progress of their action implementation and review the action plans and find possible recommendations for better implementation of the actions. Action plans were reviewed and 10 groups were supported with stationaries (marker pens, flip charts) and refreshments to implement those actions. As result 4,583 (3,300F, 1,283M) participants reached with message on positive parenting.

R2A3. Community sensitizations on nutritional practices

(NOT IN UGANDA)

R2A4: Livelihood activities

The project trained 298 (211F, 87M) of 300 parents and caregivers on IGA identification, selection and management. The participants included 200 (140F, 60M) Parenting Under Pressure (PUP) participants, 98 (71F, 27M) parents/caregivers of children with protection concerns. The training for 98 participants took place from 28th February-3rd March 2023, and for the 200 PUP participants from 10th -15th July 2023 in 10 different venues in order to enhance meaningful participation.

The key areas covered included; goal setting, IGA identification and selection, market analysis of selected IGA, determining Business Capital Needs, IGA Planning, IGA-management (Managing business risks, failures & growth, Record keeping).

The training was facilitated by West Nile-Business Management Consults Ltd a consulting firm with expertise in Business Development services. The training enhanced practical skills of participants in identifying and developing income generating activities. pre-designed pre-test and post-test tool was orally administered by the facilitators to determine knowledge gain (57%) as evidenced by average pre-test score (30%) and average post test score (87%). Participants were able to identify and plan individual small business such as sale of greens & vegetables, retail businesses, brick making, fish selling, produce selling, farming, saloon services, boda-boda riding among others.

Out of 300 targeted parents, only 298 (211F,87M) parents and caregivers trained on business skills, 296 (210Female, 86Male) including 199 PUP participants, 97 parents/caregivers of children with protection concerns were supported with conditional cash grant of 200,000 UGX each to boost their individual existing businesses or start business for individual who did not have business capital. Of the participants that received cash grants, 196 were refugees, 100 were from the host community). The cash grant distribution was guided by approved an SOP. Post distribution monitoring results showed positive changes among the targeted households with 94.6% (209) of the participants reporting positive impacts in their relationships with customers, suppliers, community members and family members.

The CVA also contributed positively in improving food security, keeping children at school, ability to start IGAs, increase sales and stock more products, increased the trust of the customers, suppliers, community members and family members. Equally, other participants self-reported reduced family tensions/violence, fulfilled customer expectations or demands, increased savings as well ability to socialize with others, share inform and experiences has greatly improved.

“A participant narrated that I stay in V.6 Zone 2 tank 60, I completed the 17 sessions for the PUP and got a training on business skills and later I received cash grant to support me start my business now have opened my business and I can now get income for supporting my children since am a young mother I have gained knowledge and skills can now take care of my family.”



Parents and caregivers receiving cash grant for business in the presence of community leaders



In green is PUP participants that received cash grant and is selling tomatoes to a customer

The below photo is for a young mother who completed the 17 sessions in the PUP curriculum after receiving training on business skills and receive the startup capital she established her business in V.6 markets.



"She narrated that I stay in V.6 Zone 2 tank 60, I completed the 17 sessions for the PUP and got a training on business skills and later I received cash grant to support me start my business now have opened my business and I can now get income for supporting my children since

100 adolescent girls were also trained on financial literacy for 3 days from 10th -15 July 2023 by the District Commercial Officer of Yumbe District. The training focused on determining Business Capital Needs, managing business risks, failures & growth, record keeping and Customer care including financial management. The training was conducted for 3 days in each location (Holly Dove CFS, Lomunga CFS and Happy CFS) targeting the adolescent IGA girls that were undergoing training in hair dressing and tailoring.

23 (11M, 12F) staff were trained as TOT for adolescent life skills by the Regional Child Protection Specialist and the Child Protection Specialist in Yumbe. Participants gained knowledge on adolescent life skills (PALS) and were able to roll out the training to the life skill facilitators. Practical sessions and role play were demonstrated during the training sessions. The training was conducted from 18th to 20th April 2023.

A total of 10 (5Female, 5Male) community leaders were trained as Life Skill facilitators by staff who were trained as TOTs at Skypa Hotel Yumbe District from 24th to 27th May 20203. The training was based on the Plan International Adolescent life skill curriculum which has 13 sessions. The training was. The life skill facilitators were facilitated according to the sessions conducted with the IGA girls.

100 Adolescent girls were trained in adolescent life skills in the 3-child friendly spaces of Holly Dove CFS, Lomunga CFS and Happy CFS in Bidibidi Refugee Settlement. The sessions were delivered twice a week for a period of 1 month and 2 weeks (30th June to 18th August 2023) at the child friendly safe spaces (CFS) by the adolescent skill community facilitator. 13 Life skills sessions for adolescent girls and young mothers were covered sessions related to socio-emotional learning, protection, sexual reproductive health. Pre-posttest was administered to 100 life skill participants (adolescents' girls) at the start and at the end of the sessions.

Challenges

- Mali

Défis liés au Résultat 2

La protection des enfants est un enjeu crucial, et les parents jouent un rôle essentiel dans ce domaine. C'est dans cet ordre d'idée que le projet a mis les parents et tuteurs d'enfants y compris les FAT au cœur des actions du projet. Ils ont été un grand apport pour l'atteinte des résultats. Cependant il y a quelques défis auxquels le projet et les parents ont été confrontés.

La situation sécuritaire qui a entraîné le déplacement des ménages : Les équipes du projet dans le cadre des sensibilisations ont un planning hebdomadaire de sortie terrain. Avec la situation sécuritaire, force est de remarquer, soit les sorties sont empêchées, soit la population n'est pas disponible à cause de la situation sécuritaire. Il est en effet fréquent de voir les ménages absents des villages lors de visites terrain.

- **Rwanda**

The main Challenges encountered in the implementation of the activities under this result are the following:

- The resettlement and turnover of PUP leaders and program participants posed a challenge to the continuity and stability of the PUP/VSLA initiatives in the mentioned refugee camps. This turnover could disrupt the leadership structure and overall program dynamics.
- Some program participants faced challenges engaging in saving activities. Issues such as personal character, socialization problems, and a lack of trust were identified as barriers to active participation in the savings component of the program hence the saving groups were reduced
- Insufficient training materials and classrooms in some locations were noted as a challenge. The shortage of materials such as Flipchart, notebooks and markers may have hindered the effectiveness of training sessions, and the scarcity of suitable classrooms could have impacted the delivery of training sessions and other PuP program activities.

- **Uganda**

Absenteeism of the adolescent girls and young mothers without prior communication to the facilitators. The parenting Under Pressure leaders made follows and home visits to the PUP participants

There was Interruption of the session as the babies kept on craving for attention (crying, breastfeeding) when the adolescent mothers were trying to concentrate This is because the young mothers did not have babysitters, and they kept on coming with the children at the learning centres. This was resolved by Procuring the large mats and the Play materials for the babies that kept the busy busy and facilitators engaged the learner on the session mostly sharing of the experience and practicing what they have learnt.

The Cultural sensitivity, some sessions like Pregnancy and Safe sex), were sensitive topics for discussion as since the participants were not able to express themselves freely during this session. This is because of the cultural aspects of the communities where we work. For the future project it's recommended for the trained medical personnel to facilitate such topics

since this usually handle in the health facilitates.

4.3.2.3. Outcome 3: Community members and leaders support and respect protective gender and social norms, adopt practices that support non-violent behaviour in communities and actively engage to protect children, adolescents and youth against neglect, violence, exploitation and abuse

4.3.2.3.1. At the proposal stage

- **Sector:** Protection
- **Related sub-sector:** Protection information management and monitoring; Protection information dissemination; Capacity building (Protection)
- **Beneficiaries (status + number):** 33,500 beneficiaries, among which 13,750 refugees, 600 IDPs and 19,150 members from vulnerable host communities
- **Indicators for this outcome:** Plan's outcome indicators level of Protection from violence results framework
- **Outcome-related activities**

Activity 1: Establishment and strengthening of community-based child protection mechanisms (CBCPMs).

In refugee camps, IDP settings and vulnerable host communities, the needs assessment reveals gaps in capacity of community-level protection mechanisms. Plan will build upon the achievements of previous child protection projects implemented in the targeted areas and will continue to strengthen the community-based protection structures present in the camps, as these structures play a key role in prevention and response of child protection incidents, while paying attention for structures to reflect the diversity in the communities: representatives of refugee camps or IDPs sites and vulnerable host communities, age and gender balances. If aligned and context-relevant, Plan will support the establishment of adolescents and youth committees, in close link with adolescents and youth groups set-up under R1. Working with community-based structures encourages community engagement and commitment in being more involved in looking for solutions that benefit the community in general and children in particular. These structures are also involved the community awareness raising campaigns under regular supervision of Plan's Child Protection Officers. In addition, they play a critical role in the resilience and long-term impact of the action after its implementation. Finally, Plan will also build and strengthen the capacities of community leaders on the identification and referral of at-risk children or children in need of protection-related support. (1) **In Mali, 30 CBCPMs** will be established by Plan, with the support of GAAS Mali NGO, in the communities; 9 members per CBCPM will be trained (adding up to 270 participants trained) over a 3-day training. They will be involved in community-level mappings of risks of protection (R3A2). In addition, Plan will also train over a two-day mobilization, 2 community leaders per community, on the community-based identification and referral of children. (2) **In Rwanda, a total of 414 members will be trained**, through two types of structures dedicated to child protection exist in the targeted camps: CBCPSs and Voice of Children Committees. Plan will support these structures by setting-up VSLAs and material support. In host communities, Plan will support several types of community-level structures involved in child protection: community Child Protection Committees, as well as *Umugoroba w'umuryango* (*Family's Evening Forum*), a forum in which men and women as well as their children from the same village and family exchange and share ideas for a better cohabitation and protection of children. 5 Plan staff will train community leaders on child protection, with an emphasis on the identification of children at risk and protection from violence at family and community level. 55 people will be trained yearly, both in refugee camps and at vulnerable host community level, 40 from camps and 15 from host communities. (3) **In Uganda**, Plan will provide material support to 450 members of CBCPMs for sensitization, case-management, through covering transportation via allowances and providing them with the necessary stationary. The CBCPMs, both in refugee camps and host

communities, are already in place, thanks to past actions.

Activity 2: Mapping of protection-related risks in the communities. Risks, needs and services mapping is a key initial action to be conducted by community-level protection initiatives. Plan will support community-level initiatives to carry out the mapping. Such action will rely on the social mobilization of CBCPM and youth-led initiatives. Plan frontline staff will lead sessions so that members of CBCPM can: (i) identify child protection risks and SGBV risks within their communities through the multi-risk assessment tool contextualized; (ii) identify formal and informal protection prevention and response capacities and systems existing in the community; (iii) conduct a collective reflection session on the social and cultural norms surrounding child protection, SGBV and gender roles, to initiate a community reflection on harmful practices targeting girls and boys to prevent any form of violence and abuse. Second, based on such assessments, Plan will support community structures to consolidate the service mapping (medical, legal, psychosocial) at community level and adapt their workplans. Such workplans will aim at following up on the child protection issues identified and presented. (1) In Mali, 30 mapping will be conducted by GAAS Mali, with the support of Plan, to feed the community-level activities for awareness raising and sensitization on child protection risks, SGBV, gender equality, positive and non-violent masculinities, SRHR. Thematics will be planned according to the priorities of CBCPMs. (2) In Rwanda, the mapping will be done by committee leaders, local authorities, relevant child protection practitioners, mobilizing 25 stakeholders per camp (125 stakeholders in total). The mapping will be done twice over the course of the action. (3) In Uganda, Plan will support community-led initiatives to carry out a risk mapping in communities, providing transport allowance, refreshments to 100 participants from the CBCPMs. The child protection and SGBV risks assessments will be the basis for designing and implementing community action plans – 10 action plans will result from the exercise, to be updated twice a year.

Activity 3. Community-level awareness-raising and sensitization on child protection and SGBV prevention and response. The mapping of risks and services carried out by the CBCPMs will be an entry point for awareness-raising within communities regarding the specific vulnerabilities of populations according to their gender, age and specific needs, and the available mitigation measures to these vulnerabilities. Plan will support the organization of dialogue sessions with community leaders on key topics related to child protection, safeguarding, SGBV, gender equality, SRHR and challenging social norms, to sensitize and initiate positive shift in attitudes of the main duty-bearers when it comes to child protection. Plan will also make the most of international days to conduct CBCPM-led community sensitizations in both refugee and host communities on topics identified by CBCPMs, Champions of Change and PTP leaders. Age and gender appropriate and transformative messages will be tailored to each specific day. Popularity of those celebratory days allows to conduct mass sensitization and to reach out to large population scale. In case the rollout of sensitization campaigns is not possible due to COVID-19 related restrictions, other ways of disseminating information already piloted by Plan will be used (such as using megaphones and mobile sound systems to sensitize families in refugee camps or using house-to-house visits to disseminate messages). (1) In Mali, community-level sensitization will rely on a mix of strategies, involving radio diffusion of key messages on child protection, gender equality, broadcasted throughout all targeted communities (expected reach of 6,000 members of communities). CBCPMs will be supported in organizing awareness-raising activities and sessions, and disseminating information, education and communication material on child protection risks and responses; 60 dialogues will be organized, targeting a total of 2,400 community members. (2) In Rwanda, dialogue sessions with community leaders will involve 50 participant per camp and host community (reaching 500 individuals over the course of the action). Community-level activities for awareness-raising and sensitization will center on annual events using drama and theatre expecting to reach 7,500 people from communities in total. (3) In Uganda, dialogue sessions with community leaders will involve 2,400 participants on bi-annual basis. Sessions will be conducted by Plan staff, involving CBCPMs members, Champions of Change and PTP leaders. Community leaders will then be supported to design

6-month action plans to support child protection, safeguarding, gender equality and SRHR. Routine sensitizations will aim at targeting a total of 20,000 community members.

Activity 4: Strengthening child and adolescent-friendly community feedback mechanism. Plan will ensure that the action is compliant with Core Humanitarian Standards 4 and 5, i.e. that the action is based on communication, participation and feedback on the one hand, and that feedback and complaints are welcome and addressed in line with the child-friendly feedback Guidelines from Plan. To ensure that a gender and age responsive feedback and complaint mechanism is in place, Plan will set-up or strengthen various channels through which both quality of the action, relevance of activities, but also potential breach of Plan's Safeguarding policies, will be assessed, based on discussions held with children and adolescents at the beginning of the action. Plan will actively collect feedback and complaints through various channels. The feedback mechanisms will be confidential, child-friendly and accessible for those with disabilities and those who are illiterate or homebound. Feedback mechanisms will be deployed at response level, and even at community-level, hence the strategy to maximize the use of feedback and complaints will be adapted. (1) **In Mali**, one dedicated officer communication with children from GAAS will set up friendly community feedback mechanism with children and adolescent ensuring that CFFB are accessible, relevant and age-friendly. This will include suggestion boxes and other necessary tools and materials so that the community-based feedback mechanism can be functional. The whole project staff will be trained on the use of complaints and feedback mechanism, including on skills to close the feedback loop. In addition, animators of CFS, AFS and AGSS will be trained on collecting regularly feedback from children and adolescents attending the activities. (2) **In Rwanda**, the project staff (20) and animators will be trained on community feedback mechanism that is age and gender responsive. (3) **In Uganda**, 24 project staff will be trained on child and adolescent friendly feedback mechanism. In addition, Plan will set up awareness raising session on child and adolescent friendly community feedback mechanism four times over the course of the action, relying on a network of 200 participants, from target groups set-up over the course of the action (e.g. Champions of Change, PTP Leaders). Plan will ensure training and capacity-building updated with staff team; material support is not needed, as it is already covered under other actions.

4.3.2.3.2. At final report

[FINAL] Beneficiaries (status + number):

Program level

- **Mali**

Bénéficiaires (statut + nombre) atteints dans le cadre du Résultat 3 : 19 987

Membres de CCPE formés	270
Acteurs pour la cartographie	41
Leaders communautaires soutenus pour les référencement	60
Personnes adultes sensibilisés par les membres du CCPE et Personnes touchées par les plan d'action CCPE (non touché par les animateurs)	4 153
Personnes adultes sensibilisés par les animateurs (non touchées par les CCPE)	15 153
Dialogues communautaires	310
TOTAL	19987

- **Rwanda**

Beneficiaries reached under Result 3:

- Men:12192
- Women:13027
- Boys: 9801
- Girls :9619
- Total:44,639

- **Uganda**

Beneficiaries of Outcome 3:

Age \ Sex	Total	F	M	F	M
Infants	0	0	0	0%	0%
Children (5-17y)	0	0	0	0%	0%
Adults (18-49y)	3350	1913	1437	57%	43%
Elderly (>= 50y)	303	173	130	57%	43%

[FINAL] Indicators for this result: please refer to the table 4.3.1 [FINAL] Uganda
% of community members who can identify common types of violence and abuse in their communities. Baseline: 33.5% Target: 85% Result 86.2%

The end-line results revealed that 86.2% (100/116) of community members, including the child protection committees, have adequate knowledge on the different types of violence and abuses in their communities. The common types identified by the community members and leaders included physical violence described by its examples like beating, cutting, caning, hitting, burning children with hot water; emotional violence expressed in form of names, insults and comparison with animals or objects; child neglect, economic violence; and sexual violence in form of rape, defilement, forced marriages, bad touches, among others. The Knowledge of the respondents was measured based on their level of awareness on the five different types of violence including physical, sexual, emotional, neglect and economic abuse. This means, there is still need to strengthen awareness sessions with parents to know the protection risks in their community for effective protection of children from any form of violence.

% of community members and leaders who report that it is acceptable for a man to hit or beat his wife (partner) under certain circumstances. Baseline: 69.4% Target: 20% Result: 41%.

The proportion of community members who report that it is acceptable for a man to hit or beat the wife or partner under certain circumstances including if she burns food, refuses to have sex with him, neglects the children, argues with him, disobeys him and uses contraception without telling him significantly reduced. The project interventions contributed positively in changing community attitudes and perceptions as revealed by the end-line results reducing to 41% (41% female, 41% male) from 69% (59% female, 77% male) at baseline. There is evidence therefore that the project was effective and helped to change attitudes of the project participants about VAC and GBV.

% of community-based child and family protection mechanisms which meet minimum

quality standards.

of community members trained on case management. Baseline: 0 Target: 450 Result: 471

471(221 female: 141Refugees, 80 Nationals and 250male: 130 Refugees, 120 Nationals) community-based child protection mechanisms strengthened both in Zone II and Zone III. The protection committees, RWCS, religious leaders, block leaders, neighbor watch, local council (LC1) authorities and para social workers participated in the training.

of CBCPs supported to carry out risk mapping in communities. Baseline: 0 Target: 35 Result: 35

165 (89Female, 76Male) participants (parents and community leaders) participated in risk mapping exercise conducted by hired facilitators. Some of the key protection risks mapped included; child labour, sharing latrine with neighbours, children not attending school, unattended health problems, domestic violence, substance abuse, long distance to school, unfriendly playground, and road accidents.

of protection related risks action plans developed by CBCPS. Baseline: 0 Target: 10 Result: 12

21 community leaders action Plans on Child protection, safeguarding, gender equality & SRHR supported were generated.

of community leaders trained on identification, referral & Child protection issues.

80 (35 f, 45 m) community leaders trained on identification, referral and Child protection issues both in Zone II and III. The leaders trained included; child protection committee, parasocial workers, RWCS. LC1s, religious leader, youth leaders and parish chiefs.

of Community leaders who participate in community dialogues on Child Protection, safeguarding, gender equality, SRHR and challenge harmful practices. Baseline: 0 Target: 2400 Result: 1294

1294 (699 F, 595 M) Community leaders participated in community dialogues on Child Protection, safeguarding, gender equality, SRHR and challenge harmful practices. In addition, **246 (90F, 156M)** host community participants including 4(3F, 1M) Persons with disability participated in 6 community dialogue sessions conducted on child abuse. This target was not realized because the expected participants especially the leaders did not reach the target based on the scope of the project.

of community leaders action Plans on Child protection, safeguarding, gender equality & SRHR supported. Baseline: 0 Target: 10 Result: 21

21 community leaders action Plans on Child protection, safeguarding, gender equality & SRHR supported were generated. The action plans were supported with the necessary materials to carry out the action, items like; stationery (flip charts, marker pens, masking tape, sticker notes, refreshments (sodas, biscuits, water).

of community members sensitised on child protection and SGBV, safeguarding, gender equality, SRHR, and harmful practices. Baseline: 0 Target: 20,000 Result: 1782

1782 (1072F, 710M) community members sensitised on child protection and SGBV, safeguarding, gender equality, SRHR, and harmful practices. **Awareness content;** different child protection forms, sexuality education, causes and effects of school drop-outs and solutions, the impact of positive parenting on education, early child and forced marriages and its effects, teenage pregnancy and its impacts on children, child rights and issues of hygiene.

of national and Local events supported.

[FINAL] Activities related to this result:

- Mali

R3.A1. Mise en place et renforcement des mécanismes et structures communautaires de protection de l'enfance

Indicateurs :

#de MCPEs mis en place et redynamisés : 30

#de membres des MCPEs bénéficiant de renforcement de capacités sur la PESU, les VSBG, les DSSR, la GHM, les services de protection : 270

#de plans d'actions mis en place : 30

de leaders communautaires soutenus pour l'identification et référencement des cas : 60

1. Mise en place/ redynamisation et formation de 30 comités communautaires de protection :

La Convention relative aux droits de l'enfant reconnaît aux parents, ainsi qu'aux familles et aux communautés « la responsabilité principale d'élever l'enfant et d'assurer son développement », ce qui fait qu'on ne saurait parler de protection de l'enfant sans responsabiliser les parents et les communautés. Ces comités communautaires de protection ont joué un rôle d'intermédiaire entre Plan/ALPHALOG et la communauté sur les questions liées à la protection et aux VSBG, ainsi que leur rôles et responsabilités. En Décembre 2022, au total 30 comités communautaires de protection composés de 09 membres chacun ont été mis en place dans les 30 villages d'intervention, pour un total de 270 membres (soit 168 hommes et 102 femmes). Cette mise en place a été faite lors de la tenue d'une assemblée générale par village, ce qui a contribué à renforcer l'appropriation des mécanismes communautaires de protection par la communauté même. Les membres de ces comités sont aujourd'hui de véritables acteurs de prévention, de résolution et de plaidoyer contre les Violences Basées sur le Genre faites aux enfants et aux femmes dans leurs localités.

Chaque comité a été formé pendant 3 jours courant les mois de mai et juin 2023 (plus une autre session de révision 06 mois après) sur les thématiques suivantes :

- Les principes clés de la CDE ;
- Les droits et devoirs de l'enfant ;
- Protection de l'enfant ;
- Les VSBG contre un enfant ;
- Rôles et responsabilités des membres du comité communautaire de protection et les autres acteurs de protection ;
- Élaboration de plan d'action ;
- Connaissance de Plan et ses politiques (Sauvegarde, HEAS).

Cette formation a permis au projet non seulement de renforcer les connaissances et les compétences des acteurs, mais aussi et surtout de renforcer l'engagement et la mobilisation communautaire. Ces membres, ainsi formés, sont désormais capables d'intervenir dans le domaine de la protection et la promotion des droits des enfants. Selon les participants, cette formation les a éclairés sur les conduites à tenir dans l'éducation de leurs enfants, car une telle andragogie, qui décortique réellement les droits et devoirs de leurs enfants qui étaient en grande partie, méconnus et négligés par nous les parents. Ils ont partagé avec l'équipe qu'ils

avaient réellement besoin d'orientations, de formations et d'informations pour pouvoir vivre en harmonie avec leurs enfants. Ils souhaitent accompagner les enfants à hauteur de souhait afin qu'ils puissent jouir pleinement de leurs droits.

Plan d'actions :

Chacun des 30 comité a mis en place un plan d'action détaillé énonçant les activités à réaliser durant et après la mise en œuvre du projet. Le projet a profité pour intégrer certaines activités phares ressortissant des différents suivis. Les activités clés de ce plan d'action sont :

Renforcer l'engagement et la mobilisation communautaire autour de la protection

- Développer les capacités des membres du CCPs sur les questions de protection, des droits des enfants et les VSBG.
- réduire les menaces identifiées au sein de la communauté ;
- Lutter contre l'impunité
- Réduire les vulnérabilités des personnes dans la communauté en renforçant la cohésion et l'entraide (travaux collectifs, appuis en natures) ;
- Renforcer la sensibilisation par les pairs
- Renforcer les capacités d'autoprotection des communautés
- Renforcer les capacités des décideurs communautaires à assumer leurs responsabilités en matière de protection ;
- Renforcement de l'environnement protecteur
- Mettre en place des comités de veille
- Tenir des réunions régulières
- Mobiliser les ressources internes

Chaque comité a mis en œuvre les activités planifiées (voir R3A3).

Formation spécifique de 2 leaders par CCPE sur l'identification et le référencement de cas de violence/abus/ négligence d'enfant :

Les 60 leaders ont été identifiés et la formation a été donnée en février 2023. Le module utilisé est la nouvelle boîte à outil de l'Alliance de Protection de l'Enfance en Action Humanitaire "Engagement de volontaires communautaires dans la gestion de cas". Au total 196 référencements sur les 262 cas suivi par nos structures proviennent des leaders communautaires (voir chapitre gestion des cas).

R3.A2. Cartographie communautaire des risques liés à la protection de l'enfance

Indicateur

de cartographie des services réalisés : 31 sur 30 prévues

Comme énoncé dans le rapport intermédiaire, cette activité a été réalisée en plusieurs étapes. D'abord un atelier d'orientation des animateurs du partenaire pour qu'ils s'approprient des termes techniques et les transcrire pour une meilleure compréhension. Ensuite la rencontre avec les structures travaillant en lien avec la protection des enfants (pour un total de 16 structures rencontrées au lieu des 30 initialement prévues, et cela est dû au fait que y a moins de structures de Protection au niveau communautaire).

Les données ont donc été discutées, systématisées et restituées vers les autorités, les structures rencontrées et la communauté via un atelier de restitution et dissémination de la

cartographie dans le but de mettre en place un circuit de référencement.

L'atelier s'est tenu le 6 avril 2023 dans la salle de réunion du conseil du cercle de Macina. Il s'agissait particulièrement de faire participer les acteurs de protection à la validation de cette cartographie.

Etaient présent plusieurs personnalités dont :

- Le sous-préfet de Macina
- Les représentants du SLPFE, du SLDES de Macina
- Les DTC des cscom de Kolongo, Saloba, Sana et Médecin chef de Macina
- Les Maires de Kolongo, Saloba, et Sana
- Les représentants des services judiciaire et Sécuritaire
- Les DCAP de Sarro, Kolongo, Sana et Macina
- Les leaders communautaires de Kolongo, Saloba, et Sana)
- Les ONG : ASSAFE, TDH.
- Le staff de l'équipe DGD (animateurs, gestionnaires de cas, coordinateur, superviseur, officers protection, M&E et Chef de projet).

Cette cartographie a permis de comprendre les facteurs de risque et de protection pour les enfants, afin de concevoir des approches préventives appropriées et de soutenir les praticiens communautaires de la protection de l'enfance dans leurs efforts.

R3.A3. Sensibilisation au niveau communautaire sur la protection des enfants et la prévention et la réponse à la violence sexuelle et basée sur le genre.

Indicateurs :

de personnes touchées par nos activités de sensibilisation et de prévention sur la PESU, les VSBG, les DSSR, la GHM, les services de protection : **8 416 dont 6880 femmes soit 77% de femmes et 4 263 enfants soit 51%**

de séances de dialogue communautaire organisées : 60

de participants aux séances de dialogue communautaire : 2757

Causeries éducatives des CCPE : Les comités locaux de protection des enfants CCPE ont mené des activités de sensibilisation communautaires durant la période sous la supervision des animateurs et gestionnaires de cas dans les communautés. Les séances de sensibilisations organisées ont permis de toucher ainsi 8416 personnes dont 4263 enfants. Toutes ces sensibilisations portaient sur les droits et devoirs de l'enfant et la protection en urgence.

Causerie des CCPE sur la problématique des droits de l'enfant en situation d'urgence

BENEFICIAIRES	# total	#femmes	#hommes	VULNERABILITES	
				# PDIs	# Pers.en situation de handicap
Enfants de 0 à 5 ans	0	0	0	0	0
Enfants de 6 à 17 ans	4 263	2881	1 382	56	3
Adultes de 18 à 49 ans	1 434	421	1013	44	3
PERSONNES DE + 50ans	2 719	1798	921	63	1
TOTAL	8416	5100	3316	163	7

Sensibilisation de masse par le CCPE de Zambala dans la commune de Saloba



La sensibilisation par les pairs a été suivie avec enthousiasme par la population. C'est aussi grâce à l'appropriation de nouvelles connaissances sur la protection par les membres des comités que le projet a touché le plus grand nombre de cibles à sensibiliser. Certains témoignages montrent à suffisance le niveau d'appropriation des stratégies par les membres des communautés. Environ 5 villages d'intervention du projet ont instauré l'interdiction de l'exode rural des enfants. Cette interdiction a permis aux enfants en général, et aux filles en particulier, leur maintien à l'école. Tous les comités dans la commune de Kolongo ont décidé de veiller à ce que le travail des enfants dans les champs de riz et d'échalotes soit fait dans le respect des règles et n'ait pas d'impact sur la fréquentation scolaire. Les communes de Sana et de Saloba ne sont pas restées en marge de ces changements observés. Les membres chargés d'enregistrement à la naissance ont renforcé la déclaration à la naissance aboutissant à l'établissement d'environ 2400 jugement supplétifs. On y constate également que les communautés jadis considérées réticentes (communauté nomade peulh) inscrivent maintenant massivement leur enfant à l'école suite aux formations/sensibilisations sur le sujet.

Par ailleurs, un atelier de partage d'expériences et de bonnes pratiques entre les membres des CCPE a été organisé en Janvier 2024 pendant deux (02) jours. L'atelier a permis aux 66 participants de :

- S'approprier davantage des stratégies des différents CCPE ;
- Faire l'état des lieux des activités de sensibilisations dans les différents villages ;
- Présenter les acquis, les difficultés et les propositions de solutions ;
- Élaborer une feuille de route pour la poursuite des activités.

Des témoignages importants sont ressortis de cet atelier. Selon un membre, “ aujourd'hui le rôle des membres des comités a dépassé leur tâches régaliennes (gestion de protection de l'enfant). Les membres ont développé d'entraide et de maintien de la cohésion sociale. Les membres ne manquent de soutenir d'autres comités d'une autre communauté en appui/conseil ».

“ Les idées fausses autour des campagnes de vaccination ont été combattues par l'ensemble des comités grâce à notre synergie d'action ” en témoigne un autre membre.

Causerie des animateurs du projet dans la communauté :

Les animateurs ont un plan d'action hebdomadaire qui les conduit à travailler directement au sein de la communauté. Les thématiques du projet sont expliqués en profondeur. Si au passage des autres acteurs, des points d'ombres sont soulevés, les animateurs viennent fournir un travail beaucoup plus approfondis. Les personnes touchées par les animateurs se

présentent comme suit. C'est l'occasion également de s'assurer pour les animateurs, de capitaliser les acquis et de collecter des données au près des cibles. Ces personnes touchées se répartissent comme suit :

BENEFICIAIRES	# total	#femmes	#hommes	VULNERABILITES	
				# PDIs	# Pers.en situation de handicap
Enfants de 0 à 5 ans	4457	1912	2545	11	3
Enfants de 6 à 17 ans	8 044	4229	3 815	75	9
Adultes de 18 à 49 ans	10 056	5209	4847	79	11
+ 50ans	5 097	2856	2241	43	4
TOTAL	27654	14206	13448	208	27

Dialogue communautaires :

Courant la mise en œuvre du projet, dans le cadre de la sensibilisation au niveau communautaire sur la protection de l'enfance et la prévention et réponse à la VSBG, le projet a organisé 06 dialogues communautaires. Le but était de permettre à toutes les parties prenantes et aux différentes générations de se mettre ensemble pour discuter et s'exprimer librement et partager leurs expériences sur des thématiques comme : le mariage d'enfant, la grossesse précoce, l'éducation et travaux abusifs des enfants, la Santé Sexuelle et Reproductive, la Violence physique, l'impact des réseaux sociaux sur les enfants ...etc. Ainsi, ces dialogues intergénérationnels se sont déroulés dans les villages de Sarro, Sellen, Bertha, Zambala, Ouan Marka, et Mangoni, en présence des chefs de village, des chefs coutumiers, des imams, des groupements féminins, de la jeunesse, des CCPE et le Réseau des Communicateurs Traditionnels pour le Développement (RECOTRADE) .

Les dialogues ont réuni des individus de différents groupes d'âge de 10 à 80 ans et au-delà, mobilisant 310 personnes, dont 103 hommes et 207 femmes.

Tableau récapitulatif des participants aux dialogues

HOMMES					Femmes				
10 - 14ans	15 - 17ans	18 – 25 ans	25 ans et Plus	Total Hommes	10 - 14ans	15 - 17ans	18 – 25 ans	25 ans et Plus	Total femmes
15	9	8	71	103	42	25	60	80	207

Ces dialogues ont permis de favoriser la compréhension mutuelle et à surmonter les obstacles ensemble. Par exemple, selon les témoignages, au-delà même de la thématique du dialogue, *« le cadre à Mangoni a été l'occasion de relever un défi majeur, car traditionnellement, les femmes et les hommes ne se rassemblaient jamais dans un même lieu pour quoi que ce soit. Grâce à vos sensibilisation et à travers ce dialogue intergénérationnel, vous avez réussi à les rassembler avec l'accord des autorités villageoises sur la place publique afin de débattre et discuter ensemble sur des sujets tels que : l'impact des réseaux sociaux sur les enfants. Ils ont également permis essentiellement de reconnecter les générations et exploiter le potentiel des individus de tous âges, créant ainsi des relations saines et durables »*.

Et encore : *« Pour nous, notables, je pense que l'approche du dialogue communautaire est la solution à tous les problèmes. Les problèmes de santé communautaires, les problèmes des droits, les questions de comportements des gens, les pratiques religieuses, ... peuvent avoir*

leur solution dans des activités pareilles. Pour moi, c'est une approche qui doit être vulgarisée et qui s'adapte dans tous les domaines ».

Témoignage de Minata :

Minata DIALLO femme ménagère à Sarro : « Pour moi, ici chez nous, si nous nous opposons aux hommes en leur disant non au mariage d'enfants et ou fiançailles précoce de nos filles la plupart du temps, ton mari te chasse de la maison.

Témoignage de Madou :

Madou Diané , vendeur d'eau de forage à Sarro, « je vends de l'eau ici à Sarro depuis une dizaine d'années, la plupart des enfants qui viennent acheter de l'eau majoritairement sont des jeunes filles, elles viennent tôt le matin parfois le soir avec des bidons vides de 20l pour les remplir d'eau. Qui les commissionne ? et bien ce sont les parents donc, ils sont les principales responsables »



Quelques images des dialogues

Sensibilisations radio : pour renforcer la sensibilisation communautaire, le projet a organisé 24 émissions radio sur les VSBG sur la base d'un contrat de collaboration avec 04 radios communautaires. Les émissions ont touché environ 188 000 personnes selon les cartes d'écoutes de différentes radios. Les principales radios qui ont animées sont la Radio Rurale de Macina, Nieta Fm, voix des jeunes et Kolongotumo fm. Les principaux messages ont porté sur les droits des enfants, les VSBG, les abus et l'exploitation.

R3.A4. Renforcement du mécanisme de retour d'information de la communauté adaptée aux enfants et aux adolescents

Indicateurs :

#de mécanismes de retour d'information mis en place: 30

#de retour d'information reçus :45

Dans le souci d'être redevable envers les participants au projet, un mécanisme de retour d'information accessibles, pertinents et adaptés aux enfants et adolescents, y compris les adultes, a été mis en place par le projet.

Pour la mise en place de ce mécanisme, en juillet 2023, des consultations communautaires sur les mécanismes de plaintes et de retour d'informations adaptés aux enfants dans les communes de Kolongo, Saloba et Sana ont été réalisées. Il ressort des avis des répondants avec un taux de 41,18% pour le maintien des comités communautaires de plaintes et de retour d'informations comme mécanismes adaptés à leur contexte contre 23,53% qui aussi pensent que les points focaux dotés de téléphone seraient aussi efficaces et confidentiels pour la remontée d'informations. Par ailleurs les autres mécanismes cités ont le plus bas taux dont 17,65% pour le réseau social WhatsApp, 11,76% pour le numéro vert, et 5,88% pour les boîtes à suggestion. Ceci s'explique par la fait de l'analphabétisme.

Au total, douze boîtes à suggestion sont placées dans les communes au niveau des EAE, des CSCOM, des sous-préfectures et des Mairies, et trente téléphones équipés ont été donnés aux points focaux feedback des comités de plaintes. Ces mécanismes sont mis en place selon les résultats de la consultation communautaire comme mécanisme le mieux adaptés.

La consultation communautaire a été suivie d'un atelier de renforcement des capacités des membres des comités de plaintes et de feedback sur les mécanismes de plainte et de retour d'informations adaptés aux enfants et aux communautés dans les communes de KOLONGO, SALOBA, SANA dans la salle de conférence du conseil de cercle de Macina du 08 au 11 juillet 2023 et du 04 au 05 octobre 2023 pour les Animateurs et Animatrices des Espaces Amis des Enfants de Kolongo, Sana et Saye, les Animateurs du Projet, les Gestionnaires de Cas, les Officiers de Plan International, le Superviseur et le Coordinateur de ALPHALOG, le Chef de projet DGD et le Chef de bureau Ségou de Plan International. Les ateliers étaient placés sous la présidence du Chef de projet DGD.

Le mécanisme a permis de recenser 45 plaintes et suggestions d'amélioration. La majeure partie des plaintes sont en rapport avec le niveau de la prise en charge des participants via orange money lors des activités du projet, le retard dans le cadre des perdiem, la non tenue des rencontre selon le calendrier prévus, la gestion des matériels et équipements des EAF, la gestion et l'entretien des EAF.

Toutes les plaintes ont été traitées confidentiellement et dans un délai raisonnable.

Pour l'ensemble des plaintes, des solutions ont été apportées immédiatement, en faisant appel au bon sens. Le traitement correct des plaintes a été une bonne occasion d'améliorer les services offerts par le projet.

- Rwanda

R3.A.1.Establishment and strengthening of community-based child protection mechanisms (CBCPMs)

Indicators

of Project staff were trained on Preventive Sexual Harassment, Exploitation and Abuse (PSHEA) and safeguarding: 16(9 females & 7 males).

of Community-based Child Protection Mechanisms (CBCPMs) that have been supported (meaning they have received cash): 416 (48 girls, 43 boys, 169 women and 156 men)

As part of this activity, 16 project staff received refresher training sessions on Protection from Sexual Exploitation, Abuse (PSHEA), and Safeguarding Children and programs participants to make sure that there is no harm as a result of the intervention of Plan International Rwanda and associates.

In Rwanda, 416 members of Community-Based Child Protection (CBCP) groups, comprising 169 women, 156 men, 48 girls, and 43 boys, received support totalling 1,187,500 RWF per group. This financial assistance aimed to enhance their income and resilience, particularly during these uncertain times marked by economic challenges. Additionally, the establishment of 16 Village Savings and Loan Associations (VSLA) groups, with four groups per camp, has been completed. The groups have successfully conducted their first shout and resumed savings, accumulating a total of 3,801,730 RWF in their collective boxes.

All group members underwent training provided by the project team, covering various aspects such as child protection, safeguarding, Protection from Sexual Exploitation, Abuse (PSHEA), identification of child protection concerns, and reporting mechanisms. This training equips them with the necessary knowledge and skills to contribute to child protection initiatives within their communities.

In previous years, there were so many groups dedicated to child protection with same objectives and they were all volunteers. Therefore, it was not easy to monitor their derivable. In 2020, the project team decided to remain with the CPCs (Child Protection Committees), which are operating at quartier level and each committee is composed by 9 people, including 4 children's representatives (2 girls, 2 boys), 2 parents/ caregivers (1 women, 1 men), 2 members of previous groups (1 woman, 1 man) and the chief of the quartier. All of them were elected by the members of the quartiers within their respective communities.

To ensure effective monitoring and reporting, CBCP members were provided with equipment (register book, pens, torches and badges), and routine monthly capacity-building sessions were conducted by project staff and community mobilizers. This approach facilitated the regular provision of accurate and timely monthly reports.

The other structure is The Voice of children committee. This committee is elected by children themselves. The representatives must have 15-17 years old and all children from 8 years are allowed to vote. They follow the guidance of the Rwandan Government through the National Children' Development Agency.

Through the establishment and strengthening of community-based child protection mechanisms (CBCPMs) activity PIR Organized camp level reflection sessions with CBCPSs and IZU committees and other community-based structures as foreheads of child protection. the main objective of this reflection was to build key stakeholders' capacity to identify the gaps in terms of child and adolescent protection and foster positive attitudes and practices as well as building their knowledge on GBV, SRHR, and gender equality.

To ensure that the information regarding available services and referral pathways at the camp, village, and community level is cascaded to the community. To ensure that the referral pathways-related information is well disseminated across communities, both from refugee settlements and host communities these activities reached 479(192 M &287 F) structures from both camp and host community.



Community- based Child Protection Committee members conducting community sensitization on child protection at school and in the community

R3.A.2. Mapping of protection-related risks in the communities

Indicator

of Local leaders, CBCPMs and community leaders who have been participated in dialogue sessions organized on CP, safeguarding, Gender equality, and SRHR: 479 (192 M &287 F)

In collaboration with safeguarding focal persons, a mapping of protection risks in the community with 50 persons was done in all 4 refugee camps (12 Kigeme, 12 Mugombwa, 12 Kiziba and 14 Nyabiheke), including community leaders, children's representatives, service providers as well as UNHCR and MINEMA representatives. The main risk identified were:

- Early pregnancy,
- School dropout,
- Drug abuse,
- Lack of work for youth,
- Child neglect;
- Gender based violence including child defilement,
- Physical assault,
- Emotional abuse.

At the beginning of the project, open group dialogues with camp leaders' committee and partners were organized in partnership with MINEMA. The purpose of these discussions was to inform and explain to them about the implementation of the project including response and prevention intervention that will ensure that children are safe and protected. Discussions focused on how the referral pathway can be strengthened and proceeded to ensure the refugee community has access to the information and is able to identify and report any child

protection concern.

A meeting was organized also to share with local leaders and CPCPMs and community leaders' findings from the mapping of protection, referral pathways related information and the joint action plan was developed in developed refugee camps reached 479(192 M &287 F) structures from both camp and host community.

The joint action Plan developed were the following:

- Engage with community members, local leaders and religious leaders to participate in joint awareness raising campaign on child protection and referral pathway, conducted on Monthly basis.
- Committed to cascade the knowledge gained on child protection issues related within their village and for the monitoring purpose to provide report on monthly basis.



Plan Staff during reflection sessions with CPBM and IZU

R3.A.3. Community-level awareness-raising and sensitization on child protection and SGBV prevention and response.

Indicator

of People reached with community-level awareness raising activities: 44639

In Rwanda, 44639 people including 13027 women, 12192 men, 9,619 girls, and , 9,801 boys

were reached through joint sensitization and campaigns (Joint mass campaign, Dialogues sessions, where communities were invited and gather together and then spread their message) in quarters, at school, at camp level and host community with community members and these were conducted in all 4 DRC refugee camps focused on child protection, Gender-based violence, and best nutrition practices through Drama and theatre issues in the community and the importance of reporting through existing reporting channels.

143 participants (44 men, 58 women, 24 girls and 17 boys) camp executive committee, Child Protection Committees (CPC), opinion leaders, Voice of Children members as well as women's committee participated in a quarterly review meeting and discussed on the key issues affecting children in the refugee camps. They agreed on how best they can be jointly addressed by all relevant stakeholders. The top issues discussed on were child neglect, child labor, school dropout, nutrition of children under 5 years old and sexual violence which results into teenage pregnancies.

Moreover, the Day of African Child (DAC) was celebrated through a two-week campaign on the prevention of school dropout, teenage pregnancy, child labour, and street children and improving access to integrated ECD (Early Childhood Development). The year's international theme was "Eliminating Harmful Practices Affecting Children: Progress on Policy & Practice since 2013" while a contextualised Nation theme was "Protect the child, build a better future - Turengere umwana, Twubake ejo heza" and the right of the child in the digital environment "uburengazira mu isi y'ikoranabuhanga. This events were carried out through different activities such as Community sensitisations through sports for protection, sensitizations and debates at schools, case management through community desks as well as community-based psychosocial support through play, children's complaints were received through case management community desk in Kigeme (90: 48 boys & 42 girls), Kiziba (143: 75 boys & 68 girls), Mugombwa (216: 203 boys & 113 girls) and Nyabiheke (115: 59 boys & 56 girls). Most of those complaints were related to registration and birth certificates, school dropout and medical issues. Deep assessments were done in collaboration with concerned protection partners through BIPs and necessary services were provided accordingly.

Additionally, the celebration of IDGC (International Day of Girl Child) and Girl Take Over was commemorated in all refugee camps and targeted also surrounding communities. The theme was "Our time is now right, our future ". All adolescent girls were encouraged to be aware of their potential and be proud of showing their capabilities through fighting traditional harmful cultural barriers reached.

As for the 16 Days of activism campaign against GBV, the 2022 global theme was "UNITE! Activism to End Violence against Women & Girls", customized at the national level as "UNITE! Build a Violence- Free Society" and the global theme 2023 Unite! Invest to prevent violence against women & Girls" and National theme: "Unite! Invest to Prevent GBV". During this campaign around 12390 people were reached, and the campaign served to raise awareness on preventing violence against women and girls and mobilise the refugee communities to understand their contribution in combating GBV, child defilement and reduction of teenage pregnancy in their respective refugee camps of Kigeme, Kiziba, Mugombwa and Nyabiheke

Joint sensitization and campaigns in quarters with community members were conducted in all 4 DRC refugee camps. The discussions focused on child protection issues in the community. The community members proposed solutions to identified issues and emphasized on the importance of the existing reporting channels. 32,249 participants were reached through these sensitizations, including 9,619 girls, 9,801 boys, 6832 women, and 5,997 men. These are

approximate numbers as counting of participants is difficult in outdoor set ups.

During the implementation of this activity, several challenges were identified by the team, including the following:

- Addiction of drugs & alcoholism among some parents/caregivers, especially teenagers and young single mothers, is high. Most of the time, they neglect their children by leaving them in the camp, sometimes with relatives or neighbors and go looking for jobs/ money in towns. This is mainly caused by stress, poverty, lack of livelihood and income generating activities, 60% ration food cut off. Most of the population was affected and didn't manage to cope with such a situation. Joint campaigns /sensitization on child protection have been conducted in the refugee camps to fight against these critical issues. The parents and caregivers that could be identified are enrolled in the PUP program to improve their wellbeing and to be able to take care of their children.
- Another issue is that parents/caregivers are not reporting children's cases as required
- and some of them are trying to manage cases within their family structures setting.
- This in return causes delay or absence of justice to some of the unreported cases.
- Others left school and started to look for money and small jobs out of the camps.
- A joint community-level awareness raising and sensitization campaign through drama and theatres will be done in February 2023 by the project team from the field on the prevention of drugs & alcoholism use among some parents/caregivers, especially teenage and young mothers.



DAC Campain through Debate and Sport



Campaign Through sport



16 days 2022 CClose out



Campaign teenager pregnancy during DAC 92023



The celebration of 16 Days of activism against gender-based violence



R3.A.4. Strengthening child and adolescent-friendly community feedback mechanism

Indicator

of Project staff who were trained on Community Feedback Mechanism: 20 (10 Male and 10 males)

20 staff (10 males and 10 females) allocated to protection, Program unit and nutrition projects in the humanitarian and country office) were trained on Community feedback mechanisms that is age and gender this training was delivered by the project managers. The people facilitated the feedback survey to validate the best feedback mechanism channels in the humanitarian and development areas.

After the training conducted by Plan International staff, a feedback mechanism survey was carried out in both humanitarian and development contexts. The community chose a toll-free number as a preferred mechanism for providing feedback. To ensure community awareness and participation, various sensitization activities were undertaken. These included mass meetings, campaigns, and evening sessions for parents, all aimed at educating the community about the feedback mechanism and how to use it effectively. This approach demonstrates a commitment to ensuring that community voices are heard and valued in both humanitarian

and development efforts.

- **Uganda**

R3.A.1.Establishment and strengthening of community-based child protection mechanisms (CBCPMs) (explain here)

The project built and strengthened the capacity of existing structures that work with/for children, 471(221 female; 141Refugees, 80 Nationals and 250male; 130 Refugees, 120 Nationals) community-based child protection mechanisms capacities strengthened both in Zone II and III. The participants included, child protection committee, RWCs, religious leaders, block leaders, neighbor watch, youth leaders, LC1s, para social workers. The purpose for training the community-based child protection committee was to strengthen the capacity of CBCPS on Child Protection, to reinforce the CP/SGBV referral pathway and ensure timely reporting of child abuses within the refugee and host community. This training has built the skills and knowledge of the structures observed from how they identify child protection cases, conduct monitoring and facilitating community awareness and dialogue sessions in the communities.

A member of the structure testified the impact of the training to him, "I now have a better understanding of child protection concerns and I can now identify child protection issues for case management." A Para social worker said, "I thank Plan International for the knowledge and skills given to I and the rest of the Para social workers, I can manage child protection issues without any challenges and since the numbers of the para-social workers is big, it's very hard for the government to train them."



Participant presenting group work on child protection concerns at holy dove CFS zone two



Plan staff explaining to CBCPM participants the category of vulnerable children in zone three. The structures were supported with stationery (counter books A4, pens, box files, stapling machines, punching machines, stapling wires, flip charts, marker pens, masking tapes, sticker notes, white star soap, megaphones, dry cells for megaphones and refreshments to facilitate and enable smooth running of their work.

R3.A.2. Mapping of protection-related risks in the communities

Conducted mapping of protection related risks in the communities in Zone II and III. The purpose of the service mapping was to identify child protection risks and services available in order to link children with protection concerns to different services. 46 (17Female, 29Male) Community Based Child protection Mechanism members oriented on data collection tools, and safeguarding and participated in data collection exercise. The team facilitated 11 focus group discussions with children and community leaders. Also conducted Key informants' interviews with 165 (89Female, 76Male) participants (parents and community leaders). The service mapping exercise was conducted by a hired facilitator. Some of the key protection risks mapped by the community include; Overworking of children by caregivers/parents, Lack of latrine that sharing latrine with neighbourhood, Not sending children to school when it is school going time, unattended health problems, domestic violence, substance abuse, long distance to school, unfriendly playground, and road accidents. These risks identified have informed our awareness and sensitization packages.

On the 15th and 16th September 2023, the CBCP identified, updated and reviewed the existing child protection risks in Zone II and Zone III at Escape village in Yumbe District. A total of 115 (67 M, 48F) CBCP structures participated in the identifying, updating and reviewing of risks in the settlement. This exercise was attended by technical child protection staff from OPM and UNHCR. The CBCP structure were able to review and update the different rights of children, this included, education, protection, water and sanitation, emotional wellbeing, participation and security. The structures reviewed these rights in terms of when its affected, how it affects the children and what action can be done and who is responsible for the action developed. This exercise was conducted through presentations and group work discussions. The identified risks included; School drops out due to food prioritization, Forced marriages, early marriages, teenage pregnancy, Child labour, poor health conditions, exposure to sexual exploitation and abuses, Domestic violence, Suicidal thoughts, Starvation, Alcoholism/drugs, Poverty, exposure to pornography, Abuse and neglect, Conflict and displacement and Drug abuse.

R3.A.3. Community-level awareness-raising and sensitization on child protection and SGBV prevention and response.

Support to community dialogue sessions with leaders

The project trained 80 (35F:, 45M) community leaders on identification, referral and Child protection issues both in Zone II and III respectively. The child protection committee, parasocial workers, RWCs. LC1s, religious leader, youth leaders, parish chiefs, participated in the training. The purpose of the training was to strengthen the capacity of local community leaders to identify and refer child protection issues affecting the children in the different communities, to create positive attitudes and practices by understanding the effects and impacts of the harmful practices on children and to create understanding on prevention and response to child protection concerns in the community.

The training content focused on introduction to child protection: (Definition of child protection, what do we protect children from or against (understanding the meaning of abuse, neglect, exploitation, violence, sexual, Physical & Emotional). Recognizing child abuse-Signs & Indicators (Physical & Behavioural signs), Myths & Facts about child abuse. (Brain storm & Give some examples), Categories of children with protection needs/concerns, Identifying the common child protection concerns in our community, their causes and effects on children, General Child protection Principles, Child rights and responsibilities, Structures in our community responsible for protecting children (child protection and their roles, Child protection referral pathway in the community and services, Child friendly communication (principles).

A leader testified his better understanding on how to identify and manage child protection issues in the community and he said, “with this knowledge that Plan International has powered me with, I can explain to our parents the criteria of selecting cases” this has been a challenge because the community says the child protection committee segregate children in the community.

445, (178F, 267 M) community leaders (sub-county chairpersons, councilors, religious leaders, Refugee welfare council representatives, local council I & II chairpersons) in the 3 sub-counties (Kululu, Bijo, and Lori and 9 villages of both Zone II (village 1, 6 & 7, and 3 (villages 11-16) were reached through community dialogue sessions on teenage pregnancy and child marriage. The key recommendation developed by the Participants include but not limited to; Parents/caregivers to provide age appropriate information on sex education, Parents who send girls for marriage to be arrested, charged and prosecuted to give message to the rest, every community leader to ensure mandatory reporting of child marriage cases to responsible authorities, need to have targeted dialogues specifically with religious and cultural leaders on issues of child marriage.

246 (90F, 156M) participants including 4(3F, 1M) Persons with disability participated in 6 community dialogue sessions conducted on child abuse. The participants included: police, health workers, Probation and Social Welfare Officers, CPC, parents and children representatives. Key issues raised during the dialogues include; concealment of information from the community leading to delayed response cases to CP cases, fear among the community leaders (CPCs) to report CP cases due to risk of being attacked by suspects, alleged cases of bribes by police, and release of suspects. Community leaders were urged to mobilize the community members to participate in awareness sessions on roles of community in prevention of child abuse and existing reporting channel for child abuse especially utilization of child help lines (116) and UNHCR toll free 0800333232. The participants also demonstrated knowledge on the different service points for children who may experience abuse in their communities. The participants also accepted to challenge the concealment of information by the community

Support for national events

60 (25Female, 35Male) participants participated in 04 focus group discussions (FGDS) in Zone II and III on harmful practices affecting children. Separate sessions were conducted for girls, boys, and community leaders as one of the key pre-activities planned during the Day of African Child (DAC). The key issues that emerged during the FGDs include: Harmful practices

affect children's capacity to learn and socialize with their peers, Child and forced marriage contribute to higher rates of school dropouts and exclusion from schools, particularly the girl child since some parents don't give girls second chance, lack or limited access to information/services leads to the inability of children, particularly the girl child to protect themselves from unwanted pregnancy, and sexually transmitted diseases and infections among others. These issues were presented to stakeholders during the district children's parliament at Escape Hotel Yumbe.

The project contributed refreshments, T-shirts and participated in the commemoration of the Day of the African Child highlighting this year's theme "Promoting and Protecting Children's Rights in the Digital Era". The commemoration was used to highlight the gaps in access to digital devices which impact digital literacy as only selected schools have computer labs and tablets. The speakers also used the occasion to urge teachers, parents, and guardians to have supervision and monitoring mechanisms to ensure the safety of children when using digital devices. 479 (248F, 231M) children reached during the child awareness sessions on the theme of DAC across the 2 Zones.

The project also supported the main celebrations of World Refugee Day in Yumbe District with refreshments, logistics, and food items. 2023 years theme was "Hope away from Home". In Bidibidi, World Refugee Day was celebrated on the 22nd of June 2023 after the main celebration on the 20th of June 2023. The event was graced by refugees, government officials, host community members, partners and school children. Participation in this celebration strengthened the coordination amongst partners on ground such as, NGOs, government structures, OPM, UNHCR, RWCs and host communities etc, and this helped in knowledge sharing and creating collaboration for easy referrals and advocacy among the partners, this was evidenced during the preparation where partners worked together contributed money, refreshments to make the day colorful.

R3.A.4. Strengthening child and adolescent-friendly community feedback mechanism

44 (21Female, 23Male) staff and focal point persons participated on Child and Adolescent friendly feedback mechanisms training. The training took place from 9th to 10th March 2023 at Bayan Hotel Yumbe. the training focused on the purpose of Child friendly feedback mechanisms, categories of feedback, key consideration for feedback mechanisms, types of feedback channels, a step-by-step guide to setting up a child-friendly feedback mechanism. The participants included; project staff, lead animators, feedback focal points from the selected schools (Lomunga, Kogbe, Dradanga, Kijebere and Lokopia primary schools). The training was facilitated by Child Protection in Emergency Coordinator and MEAL Officer using Plan international toolkit. After the training consultation meetings were conducted with children on the preferred feedback channels in the community. Among the channels included meeting with children, use of focal point person, Help desks, focused group discussions.

1,782 (1,072F, 710M) participants participated in awareness sessions on the child friendly feedback mechanisms in Zone II and Zone III including hosting sub counties of Lori, and Kululu. The awareness on feedback on child friendly mechanism was conducted at the five child friendly spaces and in the community. A total of 1782 (1072 Females; 600 Refugees, 472 Nationals and 710 Males; 370 Refugees, 340 Nationals) community members were reached during awareness session conducted on child & Adolescent friendly community feedback mechanisms in zone two and three and the hosting sub counties of Lori, Bijo and Kululu. The purpose of the awareness is to increase awareness on child friendly feedback mechanisms in the community and to collect and give feedback from and to the community we work with. The feedback sessions were on:

- What Plan International Should Keep Doing – something the organization is doing well

- and you recognize the value on it.
- What Plan International Should Stop Doing – something that is not bringing value, and that should be stopped.
- What Plan International Should Start Doing – a new idea, or something participants have seen working before that they would like to bring to the table.

The feedback from the community were;

A participant from village 13, said that she is appreciative to Plan International, as PI has been supporting her child with Cash for protection, non-food items, she urges PI to continuously monitor children under the case load. Families that have not benefited should be enrolled for case management and other activities. Children that are performing well should be provided scholarship so as to encourage others.

The project conducted feedback mechanism at the five child friendly spaces were the project is working in, that is Holy Dove CFS and Light Glory CFS in Zone II and Lomunga CFS, Happy CFS and Limu CFS in Zone III. The purpose of the assessment was to find out from the community child feedback systems are more preferred to them in terms of access, sufficiency and effectiveness of response, to set up feedback mechanism at the Child Friendly Spaces (CFS').

After the assessment, the project improved five feedback mechanism at the five child friendly spaces, these are the systems set in place for feedback that is preferred by the community; focal point persons (staff, animator) in the community, conducting regular meetings with children, having adolescents in safe spaces to who the children give feedback, during home visits and setting up feedback points at the child friendly spaces.

After improving feedback mechanisms in the community, there is an increase in the access of these points to inquire and get information. A child from Holy Dove child friendly said, *"I can now report any concern and seek for support freely"*.

Challenges

- Mali

Défis liés au Resultat 3

Le projet a permis aux membres et aux dirigeants des communautés de soutenir et de respecter les normes sociales et de genre. Il a également permis d'adopter des pratiques qui favorisent les comportements non violents dans les communautés et s'engagent activement à protéger les enfants, les adolescents et les jeunes contre la négligence, la violence, l'exploitation et les abus.

Grace à l'approche implication des communautés et de leurs leaders, la compréhension des risques de protection (sources et modèles) s'est améliorée. Les systèmes communautaires de protection sont renforcés.

L'atteinte de ces résultats a connu quelques défis, entre autres :

Défis sécuritaires, l'accès à toutes les communautés selon les planifications s'est avéré difficile. Plusieurs rencontres communautaires ont été reportées à plusieurs reprises. L'équipe du projet a collaboré avec les collectivités et les forces de l'ordre afin d'en tirer des renseignements avant d'effectuer tout déplacement dans les communautés.

La collaboration avec les groupes armés qui y sont s'est avérée difficile. Le département de la sécurité a communiqué à chaque étape, surtout s'il s'agit de transporter des matériels. Les menaces ont également touché des ONG et des agents de santé.

- **Rwanda**

Main Challenges encountered during the implementation of the activities under this result:

- « Addiction to drugs & alcoholism among some parents/caregivers especially teenagers and young single mothers who neglect their children by leaving them in the camp sometimes with relatives or neighbors and go to such for jobs/ money in towns. This is caused by food being cut off and most of the population was affected and didn't manage to cope with such a situation. A joint campaign /sensitization on child protection is still ongoing in refugee camps to fight against this critical issue and those identified are enrolled in the PUP program to improve their wellbeing, to be able to take care of their children.
- Parents/caregivers are not reporting children's cases as required and some of them are trying to manage cases within their family structures setting. This in return causes delay or absence of justice to some of the unreported cases.
 - School dropout is increasing due to some parents who are neglecting their children, others left the school and go to look for money and small jobs out of the camps
 - Resettlement and poverty were the main cause of some parents and caregivers to disjoin the program, they used cash voucher assistance and didn't plan to save

- **Uganda**

Ensuring the sustainability of community-based child protection structures over long time is difficult due to dynamic of the CBCPS, they are elected periodically and their need for continues capacity building of CBCPS.

Addressing the Children's need requires compressive and holistic approach and other agency or service providers to support the referral system but due to inadequate fundings some Agency have scaled down their activities.

4.3.2.4. Outcome 4: Child protection service providers have the required capacity to manage and respond to cases of violence against children at the community level in cooperation with and with the support of civil society and community-based actors

4.3.2.4.1. At the proposal stage

- **Sector:** Protection
- **Related sub-sector:** Protection information dissemination; Capacity building (Protection)
- **Beneficiaries (status + number):** 3,700 beneficiaries, among which 350 refugees, 400 IDPs and 3,050 members from vulnerable host communities
- **Indicators for this outcome:** Plan's outcome indicators level of Protection from violence results framework

Activity 1. Capacity-building and safeguarding training for extended project team and target groups. Building on already developed modules, training material regarding safeguarding, gender equality, gender-responsive approaches, will be mobilized to build the capacity of the project or extended project team. (1) **In Mali**, the while project team (Plan and GAAS) will benefit from two five-day training to strengthen the whole team's capacity regarding

child protection in emergencies, SGBV, referral pathway, case-management, gender equality. (2) **In Rwanda**, both the project staff and the members of the CBCPMs will be trained with two-day trainings on safeguarding, child protection, SGBV and gender equality. In addition, COVID-19 related material will be provided to staff. (3) **In Uganda**, the team of 24 staff (including case-workers) and 100 animators, will be trained on PSHEA, safeguarding, SGBV and Child Protection (respectively over a three-day and two-day training).

Activity 2. Capacity-building of service providers on quality, confidential and safe gender and age responsive case-management services and material support. The action aims at providing a full package of services to children and adolescents, including child and adolescent survivors. These services include referral to specialized services among which medical care and law enforcement actors. To comply with *Do No Harm* principle, Plan will ensure that all services that children and adolescents are likely be referred to are able to provide quality, confidential, safe and gender and age-sensitive care to beneficiaries. Plan will provide capacity-building sessions to key medical staff – refugee and host community health centers, referral hospitals – and law enforcement actors, to provide confidential, safe, compassionate, non-discriminatory, respectful, non-judgmental, non-stigmatizing care. (1) **In Mali**, 20 service providers will be trained by Plan over a 2-day dedicated training. Stakeholders include health care personnel, police and *gendarmerie* officers, justice stakeholders and local technical services of the Ministries in charge of Children and Women Protection. The action will also support health centers with a provision of 100 PEP kits. (2) **In Rwanda**, the focus will be on health workers. Plan will train health workers (including *Isange* One stop center) from both refugee camps and host communities on child protection. Plan will also facilitate the exchanges with partners specialized in clinical psychosocial support. 25 stakeholders in total will benefit from 7 days of training over the course of the action. (3) **In Uganda**, 100 participants will be trained on child protection standards on service provision. They will be targeted by a two-day training and will receive material support to offer quality, confidential, gender and age-sensitive case management services including transport and refreshments.

Activity 3: Training of government officials and partners from various sectors on children and adolescents' protection, safeguarding, gender equality and harmful practices. Plan will bring together following key stakeholders, depending on responses: (i) representatives of the local state authorities at the village, cell, sector and district and level. Their ownership of the action is a prerequisite for acceptability, connection with larger-scale initiatives, durability of the action, social cohesion between refugees and host communities. (ii) protection focal points within schools in both refugee settlements and host communities; (iii) stakeholders from UNHCR. The objective will be to build key stakeholders' capacity to identify the gaps in terms child and adolescent protection, and to foster positive attitudes and practices and build knowledge regarding child protection, SGBV, SRHR and gender equality. Each training will also have a dedicated session on PSHEA and children and youth safeguarding, following which all stakeholders involved in activities jointly conducted with Plan will sign the organization's Safeguarding Policy. (1) **In Mali**, 20 representatives of the local authorities will attend a two-day capacity-building led by Plan. Stakeholders will include: Macina Circle representatives, traditional leaders, representatives of local social services and social development, technical services related to Protection of Children and Women. (2) **In Rwanda**, a total of 15 stakeholders per camp (75 in total) will be trained over a 3-day session, representing both refugee camps and host communities. (3) **In Uganda**, 100 participants from local government staff and community leaders will be trained over a two-day period. Finally, Plan will also support child protection and SGBV response stakeholders via material provision to police, probation officers, to respond to child protection cases including transportation, stationary, material packages. 20 units will be supported on an annual basis.

Activity 4. Referral pathway strengthening and information dissemination by Plan and key stakeholders. Plan will ensure that the information regarding available quality services at the camp, village and community level is used to feed the update of the referral pathway. Plan will hence consolidate the mapping conducted by CBCPMs and support the identification of gaps of care in communities. Plan will ensure that the referral pathways-related information

and principles are well disseminated across communities, both from refugee settlements and host communities. Based on the update of the referral pathway, protection staff and caseworkers will set up information dissemination materials using various channels. In addition, Plan will support the facilitation of exchanges on good practices among service providers, by ensuring that coordination meetings and conferences gathering service providers, protection agencies relevant authorities and CBCPMs. (1) **In Mali**, Plan will contribute to the CP monitoring system, by sharing information in coordination with UNHCR, Ministries involved and key stakeholders – 55 members of CBCPMs, technical services of the Ministries in charge and service providers, Plan, partners and stakeholders; stakeholders will take part in the update of the referral pathway, based on mapping of risks and on feedback gathered from capacity-building of both service providers and local authorities. Its dissemination will rely on the activity of the CBCPMs as well as on dedicated dissemination through 60 radio diffusions, with an expected reach of 3,000 community members across the communities. (2) **In Rwanda**, a yearly 2-day training will be held at camp level, mobilizing CBCPMs members and IZU committees, to (i) organize camp-level reflection sessions on existing referral pathways, mobilizing 500 participants in total and (ii) diffuse the information related to the referral pathway; (iii) organize a dialogue session on sharing of best practices for the improvement of delivery of protection services two children of concern, targeting 25 participants per camp. (3) **In Uganda**, the referral pathway information and updates will be based on the community level mapping of child protection risks as well as (i) facilitation of exchanges and good practices among service providers and key stakeholders (2 conferences on experience sharing among partners, gathering 60 participants), (ii) support to coordination of meetings among service providers (i.e. reflection meetings gathering 50 participants), and (iii) support to child protection monitoring systems thanks to technical support from UNHCR, MoGLSD and other key stakeholders. In addition, Plan will provide support to the Child Protection Technical Working Group to feed into the update of the referral pathway. This will result in the update, of the referral pathway related information, that will then be disseminated thanks to the mobilization of 200 participants during an awareness raising session, and followed by the production, printing and dissemination of information, education and communication material about the referral pathway.

Activity 5. Protection-related advocacy targeting key duty-bearers. To address the various child protection and SGBV-related concerns faced by the communities, advocacy actions are needed at community, regional, and national level in order to influence behaviors, norms, policies, programs and improve resource allocations to ensure that long-term efforts are being made to address the root causes. Plan will conduct advocacy efforts targeting several types of actors through a variety of channels. To carry out successful advocacy actions, Plan will (i) identify key targets at all levels: community, regional, national; (ii) identify allies in the light of the creation of a pressure group and work in a network to change collective practices, behaviors and policies; (iii) develop key messages on child protection, gender equality, SGBV adapted to the specific characteristics and needs of each type of target stakeholders; (iv) put pressure on the targets by using an influential communication strategy, by sensitizing and mobilizing partners and the media in order to change the practices, collective behaviors or the policies in place, deemed insufficient or not favorable. (1) **In Mali**, 2 main initiatives will be implemented, one each year, including 2 workshops, gathering local advocacy initiatives, engaging with 40 people to reflect and find joint-solution on preventing violence against children, defining prevention of child protection actions and promote a positive protective environment. (2) **In Rwanda**, Plan will organize advocacy meetings regarding the protection of children and adolescents in both refugee camps and vulnerable host communities. 25 people (Champions of Change, PTP Leaders, members of CBCPSs) will be trained so that advocacy meetings will be implemented twice a year over the course of the action. (3) **In Uganda**, 100 participants will be trained, including staff and key community structures, on advocacy and influencing. Trainings will be 2-day sessions involving CBCPM members, Champions of Change, PTP leaders. Plan will support the set-up of 20 dialogues, targeting key duty-bearers: government workers, parents, community leaders, partners.

4.3.2.4.2. At final report

[FINAL] Beneficiaries (status + number):

Program level

- **Mali**

Bénéficiaires (statut + nombre) atteints dans le cadre du Résultat 4 : 4 105

Prestataires et fonctionnaires formés	20
Personnes touchées par les radio (messages clés)	3000
Personnes touchées par le plaidoyer	1060
Bénéficiaires de kits PEP (sans la gestion de cas)	25
TOTAL	4105

- **Rwanda**

Beneficiaries (status + number) reached under Result 4:

- Men:1937
- Women:3227
- Boys:2060
- Girls:1354
- Total :8578

- **Uganda**

Beneficiaries of Outcome 4:

Age \ Sex	Total	F	M	F	M
Infants	0	0	0	0%	0%
Children (5-17y)	0	0	0	0%	0%
Adults (18-49y)	761	297	464	39%	61%
Elderly (>= 50y)	0	0	0	0%	0%

% of trained social service workers who demonstrate key competencies required to identify and respond to cases violence of against children and SGBV. Baseline: 21% Target: 80% End-line 75%

The participants demonstrated knowledge gain to 75% post-test from 21% at pre test. The follow up assessment with service providers revealed that 78% (78% F, 78% M) on average can effectively work with all persons from different backgrounds, avoid stereotypical responses, open and willing to learn other cultures, 73% (70% F, 76% M) take decisions based on evidence, 80% demonstrated accountability and transparency as well problem solving skills, 90% adapted working style with CAY, 76% promoted participation of CAY and understanding Protection Concerns for Children/young women respectively. Equally, 68% (66% F, 73% M) demonstrated effective communication skills with CAY and 84% of them

encourage CAY families in case management, take informed decisions, among other. However, due to continuous transfer of services providers from one facility to another, there is need to continuously provide training and mentorship for the service providers to strengthen adolescent and gender responsive service provision especially in case management.

% of trained community volunteers who have adequate knowledge and skills to provide PSS and animation of recreational activities in CFS, AFS, AGSS. Baseline: 53% Target: 80% End-line 75%

PIU trained community volunteers on recognizing child abuse signs and indicators, child protection concerns, child protection principles, child rights and responsibilities, understanding forms of SGBV and child and young people's safeguarding. The participants demonstrated competence and knowledge gain by 22% from 53% average score at pre-test to 75% at posttest. As result, the volunteers were able to timely identify child protection cases, report and refer survivors to relevant authorities for further management.

20 (11F: 09M) project staffs were trained on caring for child survivors of SGBV by plan staff who received TOT training conducted by International Rescue Committee (IRC) an implementing partner for GBV under UNHCR in Bidibidi refugee settlement.

of staff and Animators trained on PSEA, SGBV, Safeguarding & CoC Baseline: 0 Target 124 Result 91:

91 (39F, 52M) community volunteers (CFS animators, Champion of Change facilitators, and Parent to Parents facilitators) were trained on caring for child survivors of SGBV, safeguarding and PSEA.

of service providers trained on quality, confidential and safe gender and age-sensitive case-management services. Baseline: 0 Target 100 Result 105:

105 (41F, 64M) service providers trained on quality, confidential, safe, gender and age responsive case management services.

of local government staffs & Community leaders trained on protection, safeguarding, gender equality & SRHR Baseline: 0 Target 100 Result 97:

97 (35F, 62M) local government staff and community leaders trained on child protection and safeguarding.

of service providers supported during CP monitoring Baseline: 0 Target 50 Result 12:

06 (05Female, 01Male) District staff from the probation office and Information Technology (IT) were trained on the usage of the Sauti call Centre system to ensure the functionality and reporting of child protection and SGBV cases.

of staff and key community leaders trained on advocacy Baseline: 0 Target 100 Result 88:

88 (30F, 58M) Community structures trained on advocacy and influencing. Additionally, 23 (14F: 09M) Plan International staffs and 3 (02F, 01M) community development officers trained on advocacy and influencing by the trainers from Ministry of Gender Labour and Social Development (MGLSD).

of animators or facilitators who have undergone a structured observation by Plan staff and have received a feedback Baseline: 0 Target 68 Result 68:

110 (46Female, 64Male) duty bearers participated in protection related advocacy meetings conducted focusing on decreasing teenage pregnancy cases in the district and role of youth in parish development module.

Plan International Supported 6 Zonal Coordination meetings in Zone II and Zone III and 270 (106Female, 164M) partner staff participated in the Coordination meetings.

[FINAL] Indicators for this result: please refer to the table 4.3.1 [FINAL]

[FINAL] Activities related to this result:

- Mali

R4.A1. Renforcement des capacités du personnel du projet

Indicateurs :

de membres de l'équipe projet, d'animateurs.trices, de travailleurs.euses sociaux et de bénévoles bénéficiant du renforcement des capacités sur l'approche EAF, la gestion des cas, le Premier Secours Psychologique (PSP) et l'appui psychosocial : 18

Au total (06) Femmes et (12) Hommes Staff du projet ont les connaissances renforcées sur :

- Formation de l'équipe projet de protection sur la protection de l'enfance en situation d'urgence du 12 au 14 Septembre 2022 à Ségou ;
- La politique de sauvegarde de Plan International du 15 au 17 Septembre 2022 à Ségou ;
- Formation sur la gestion de cas du 11 au 15 Octobre 2022 à Macina ;
- Formation sur le genre transformateur du 01 au 05 Novembre 2022 à Macina ;

R4.A2. Renforcement des capacités des prestataires de services en matière de services de gestion de cas de qualité, confidentiels et sûrs, adaptés au genre et à l'âge, et soutien matériel.

Indicateurs :

#de formations données : 02

#de prestataires de service formés : 20

de centres de santé soutenus en matériel : 5 (Macina, kokry, Saloba, Sarro et Kolongo)

Formation des acteurs de prise en charge à la gestion de cas :

En juin 2023, à Macina 20 prestataires de services, 18 staffs du projet ont été formé par le projet sur la gestion des cas des enfants victimes de protection. La formation a été facilitée par la Direction Régional de la Promotion de la Femme de l'Enfant et de la Famille (DRPFEF). Durant trois (03) jours, les prestataires de services des trois (03) communes d'intervention du projet et de la commune de Macina ont développés leurs capacités sures :

- Généralités sur la protection ;
- Causes et conséquences des violences et abus ;
- Montage institutionnel ;
- Approche centré sur le survivant ;
- Appui psychosocial ;
- Référencement/ coordination ;
- Gestion de cas des enfants ;
- Réglementations en matière de protection.

Des prés et post tests ont été réalisés pour évaluer le niveau de renforcement de capacités des participants. L'ensemble des participants ont démontré des connaissances améliorées après le post test.

Dotation matérielle des acteurs de prise en charge :

Courant le mois d'Octobre 2023, les CSCom des communes de Kolongo, Saloba, Sana et Kokry et le CSRef de Macina ont été dotés en 200 kits PEP et en matériels médicaux pour la prise en charge adéquate des cas de VSBG. Cette donation avait pour objectif de renforcer le plateau technique desdits centres de santé communautaires et le CSRef.

La prophylaxie post-exposition, ou PEP, est un moyen de prévenir la transmission du VIH à une personne séronégative qui pourrait avoir été exposée récemment au virus. Elle consiste à prendre des médicaments anti-VIH aussitôt que possible après une exposition potentielle au virus. Toute personne qui croit avoir été exposée au VIH devrait communiquer immédiatement avec son médecin, un service des urgences hospitalier ou une clinique de santé sexuelle pour savoir s'ils offrent la PPE. La PPE est très efficace, mais ne peut pas prévenir la transmission du VIH dans 100 % des cas. Elle doit commencer dans les 72 heures suivant l'exposition au VIH. Pour que la PPE soit efficace, la personne doit prendre très fidèlement ses médicaments pendant toute la durée du traitement et ne devrait pas s'exposer de nouveau au VIH pendant la PPE. C'est ainsi que 200 kits ont été remis au CSRef reparti entre les CSCom cités ci-dessus.

Liste de matériel médical distribué

Désignations	Total	Structures concernées				
		Csref	Kolongo	Kokry	Saloba	Sana
Compresse	3600	1500	510	500	510	505
Bande	480	100	95	95	95	95
Doxycycline	30	10	5	5	5	5
Gant stérile	2500	900	400	400	400	400
Thermometre	30	10	5	5	5	5
Accu chek Kit mg/dl	1	1	0	0	0	0
Stertho doublePAAV	6	2	1	1	1	1
Norlevo 1,5mg	300	100	50	50	50	50
Zithromax500mg	60	20	10	10	10	10
Accu chek bandelette	1	1	0	0	0	0
Tensio spengler bras	15	5	3	2	3	2
Gant d'examen	50	10	10	10	10	10
Ceftriax 1g	400	200	50	50	50	50
Table d'examen suppar	2	1	1	0	0	0
Betadine dermique10%	180	100	20	20	20	20
Sparadrap perforé	288	200	22	22	22	22
Boite accouch	4	2	1	1	0	0
Metronidazole	35	11	6	6	6	6



Photo de remise des kits PEP à l'ASACO de Macina

R4.A3. Formation de fonctionnaires et de partenaires de divers secteurs sur la protection et la sauvegarde des enfants et des adolescents, l'égalité des genres et les pratiques néfastes.

Indicateurs :

#de formations données : 1

#de fonctionnaires formés : 20

Un atelier de formation des fonctionnaires et des partenaires du projet s'est tenu en fin Novembre 2023 à Macina en vue de contribuer au renforcement de l'environnement de protection des enfants et des adolescent(es) contre toutes les formes de violence y compris la VSBG au sein des communautés affectées par la crise humanitaire dans la région de Ségou. Au total vingt (20) personnes des structures étatiques (santé, justice, Asaco/Cscom, mairies, gendarmerie, surveillant de prise, l'éducation, SLDSES, SLPEEF) ont pris part à cet atelier au nom de leur structure respective dont 7 femmes et 13 hommes.

R4.A4. Renforcement de circuit de référencement et d'orientation ; diffusion des informations de prise en charge par Plan et les principales parties prenantes.

Indicateurs :

séances de diffusion radio d'information sur les parcours de référence : 60

personnes touchés par les séances radio : 3000
 # cadres de concertation réalisés : 2
 # de conférences de cas réalisées: 3
 # d'instances de coordination (clusters et autres) auxquels nous avons participé : 10

Afin de renforcer le circuit de référencement et d'orientation pour la diffusion des informations de prise en charge, le projet a réalisé deux (02) cadres de concertation et trois (03) conférences de cas avec les différents acteurs de prise en charge des enfants. Il faut noter que ces cadres ont servi de créneau de plaidoyer à la libération d'un adolescent qui était en détention à la maison d'arrêt de Macina et ont facilité l'intervention chirurgicale ophtalmologique à un adolescent de la 6ème année du fondamental 1 de Kolongo.

L'utilisation du circuit de référencement a permis à 196 enfants de bénéficier des prises en charges de qualités : 50 cas vers les structures de santé, 04 cas assistés dans la résolutions de problèmes avec la gendarmerie, 140 aux gestionnaires de cas, 02 cas pour l'assistance juridique

L'équipe du projet à travers son Chef de Projet ou le chef de bureau de Ségou a aussi participé régulièrement aux réunions mensuelles et hebdomadaires des clusters de protection. A chaque rencontre, on y discute de la mise en œuvre des plans de renforcements des capacités des membres, du renforcement de collaboration avec les structures étatiques, les défis et les perspectives chez les parties prenantes.

Des séances radio ont aussi été diffusée pour promouvoir le respect des droits des enfants, dénoncer la négligence et l'exploitation et les abus. Ceci a permis d'atteindre 3000 membres des communautés.

Les messages traduits en bambara et diffusés à la radio sont les suivants clés :

Message 1 Protection de l'enfant en situation d'urgence et les violences sexuelles basées sur le genre.

« Les conflits engendrent les déplacements des populations parmi lesquelles les enfants constituent la couche la plus vulnérable et qui nécessitent une protection spécifique en fonction d'urgence telle que l'abri, la santé, la nourriture, les loisirs, l'éducation etc. »

Les enfants sont exposés à des violences sexuelles basées sur le genre compte tenu de leurs vulnérabilités, ces violences (abus ou exploitation sexuelle, harcèlement sexuel etc.) peuvent être perpétrées entre eux-mêmes, par les membres de la communauté d'accueil, et même par certains intervenants.

Ces facteurs de risques que sont le manque d'éducation, la pauvreté, le mariage forcé, le mariage d'enfants, la drogue, la non application de la loi peuvent engendrer les grossesses non désirées, les Infections Sexuellement Transmissibles (IST), les avortements, les troubles mentaux, les traumatismes émotionnels.

Parents, chefs coutumiers, religieux, autorités administratives et politiques, faisons-en sorte que les enfants en situation d'urgence, bénéficient d'un accueil humain et d'un traitement digne afin qu'ils bénéficient d'une vie décente.

Ceci est un message de Plan International Mali et son partenaire de mise en œuvre, l'ONG ALPHALOG financé par la Direction Générale de la Coopération au Développement (DGD), un partenaire Belge au Développement

Message 2 : les Abus et Exploitation Sexuelles (AES)

Les abus et exploitations sexuelles tels que le mariage d'enfants, l'excision, les viols ; les

agressions sexuelles sont des actes néfastes qui nuisent au bien-être (physique et psychologique) de l'enfant.

Les coups et blessures, les homicides, les mobilités, la discrimination, les traumatismes, le stress, les avortements, les maladies (fistule, IST, Tétanos, VIH SIDA) l'alcoolisme, la toxicomanie et les assassinats, les grossesses non désirées constituent les conséquences fâcheuses des Abus et Exploitations Sexuelles. (Article de référence à insérer)

Ensemble donnons-nous la main pour mettre fin à ces pratiques néfastes pour une meilleure vie des adolescents et adolescentes.

Ceci est un message de Plan International Mali et son partenaire de mise en œuvre, l'ONG ALPHALOG financé par la Direction Générale de la Coopération au Développement (DGD), un partenaire Belge au Développement

Messages3 : La négligence et la discrimination

- La négligence : La négligence fait partie des quatre éléments contre lesquels on doit protéger un enfant. Il s'agit des Violences, Abus, Exploitations et Négligence (VAEN)

La négligence dévalorise l'enfant, le conduit à la perte de confiance en soi. Elle le rend moins imaginatif et productif. Elle peut pousser l'enfant à la révolte pouvant conduire à la délinquance juvénile. La négligence augmente les risques de vulnérabilités surtout chez les enfants en situation d'urgence.

- La discrimination : La discrimination est le pire des comportements chez un individu épris de justice et d'égalité. Elle enlève chez l'individu tous ses droits lui permettant de s'épanouir harmonieusement.

- Elle crée un climat de frustration chez la victime qui entraîne forcément les violences et les abus occasionnant souvent des conflits entre individus ou entre les communautés.

D'ailleurs la CHARTE AFRICAINE DES DROITS ET DU BIEN-ETRE DE L'ENFANT stipule dans son article 3 la non-discrimination :

« Tout enfant a droit de jouir de tous les droits et libertés reconnus et garantis par la présente Charte, sans distinction de race, de groupe ethnique, de couleur, de sexe, de langue, de religion, d'appartenance politique ou autre opinion, d'origine nationale et sociale, de fortune, de naissance ou autre statut, et sans distinction du même ordre pour ses parents ou son tuteur légal ».

Parents, jeunes, enfants, leaders religieux et coutumiers, autorités administratives, élus locaux, unissons-nous contre la négligence et la discrimination des Personnes Déplacées Internes (PDIs)

Ceci est un message de Plan International Mali et son partenaire de mise en œuvre, l'ONG ALPHALOG financé par la Direction Générale de la Coopération au Développement (DGD), un partenaire Belge au Développement

Message 4: Les droits de l'enfant

Le droit de l'enfant s'articule autour de quatre (04) principes fondamentaux de la Convention relative aux droits de l'enfant (C.D.E) : La survie et développement, l'intérêt supérieur de l'enfant, la participation de l'enfant et la non-discrimination.

En respectant ces 04 quarts principes fondamentaux, on respecte tous les droits de l'enfant dans l'ensemble notamment :

Le droit d'avoir un nom

Le droit un extrait d'acte de naissance

Le droit à l'éducation

Le droit à la santé

Le droit à une alimentation saine et équilibrée

Le droit à un environnement protecteur etc.

Parents, chefs coutumiers, religieux, autorités administratives et politiques donnons-nous les moyens pour respecter les droits de l'enfant qui sont obligatoire.

Message 5 : Les devoirs de l'enfant.

L'enfant est tout être humain âgé de moins de 18 ans.

Les devoirs de l'enfant font référence à l'ensemble des responsabilités de l'enfant envers ses parents, sa communauté, la société et l'état.

Ces responsabilités doivent être inculquées à l'enfant par ses entités en tenant compte de son âge, de son environnement et de ses capacités.

L'enfant doit:

Œuvrer pour la cohésion de sa famille, de respecter ses parents, ses supérieurs et les personnes âgées en toutes circonstances et de les assister en cas de besoins.

Servir sa communauté nationale en plaçant ses capacités physiques et intellectuelles à sa disposition.

Préserver et renforcer la solidarité de la société et de la nation.

Préserver et renforcer les valeurs culturelles dans ses rapports avec les membres de la société, dans un esprit de tolérance, de dialogues et de consultations, de contribuer au bien-être moral de la société.

« Préserver et renforcer l'indépendance nationale et l'intégrité de son pays. Préserver la tranquillité et la sécurité des espaces et des lieux d'éducation. »

« Enfants, cherchez à connaître vos devoirs afin de les accomplir. »

« Parents, chefs coutumiers, religieux, autorités administratives et politiques accompagnez les enfants dans l'accomplissement de leurs devoirs dans la société. »

R4.A5. Plaidoyer en faveur de la protection ciblant les principaux responsables.

Indicateurs :

de personnes touchées par les activités de plaidoyer : 1060

de produits de plaidoyer développés : 05

Aujourd'hui, la situation des enfants au Mali, et particulièrement dans la zone d'intervention du projet, est toujours préoccupante. La crise qui sévit depuis plus d'une décennie a progressivement affecté la région de Ségou, qui était initialement considérée comme une des zones les moins affectées, mais fait partie aujourd'hui des régions les plus touchées. Cette situation de crise est de nature à augmenter les violations des droits des enfants en général, et les droits sexuels des filles et des jeunes femmes telles que le mariage d'enfants, les grossesses précoces, les difficultés d'accès à l'information et au service de protection ainsi que la privation des droits d'expression. Les organisations de la société civile qui sont censées tenir l'Etat redevable vis-à-vis de ses engagements, se concentrent plutôt sur la fourniture des services pour compléter ou suppléer l'Etat.

Les responsables de la protection de l'enfant (gouvernement, parents ou tuteurs, et les enfants) sont appelés à mettre en place des mesures fortes pour que tous les enfants concernés puissent avoir accès à l'éducation, aux soins, à un niveau de vie décent, et soient pris en compte dans les décisions leur concernant.

Selon les données officielles reçues au niveau de la préfecture du cercle de Macina, il y a 17 077 PDIs dont 2 334 enfants, 8 793 femmes, 8 284 hommes et 2 968 ménages contre environ

10 000 PDI au démarrage du projet. Face à cette situation qui interpelle, les acteurs humanitaires doivent renforcer la résilience des communautés dûment affectées.

C'est ainsi que le projet a pris part à 04 (quatre) événements et une (01) initiative de plaidoyer :

- La journée Internationale Tolérance Zéro aux Mutilations Génitales Féminines le 6 février 2023 (comme expliqué dans le rapport intermédiaires)
- La célébration de la Journée de l'Enfant Africain (JEA) 16 Juin 2023 ;
- La célébration de la journée mondiale de l'enfant du 20 Novembre 2023;
- Plaidoyer des enfants à l'endroit des autorités des trois (03) communes d'intervention du projet (Kolongo, Saloba et Sana) en Janvier 2024. En raison de la situation sécuritaire, l'activité s'est déroulée également à Macina. Les plaidoyers ont été organisés simultanément. Les équipes étaient réparties entre les différents sites.

Ces activités ont permis de mobiliser plus de 1060 personnes autour de ces événements et initiatives de plaidoyer. Le travail de plaidoyer s'inscrit sur le cours, moyen et long terme et a pour objectif d'améliorer les conditions des enfants et des jeunes. Néanmoins, les enfants ont eu la capacité de réclamer que leur voix soit entendue et que leurs droits soient respectés. Cela a contribué leur protection et doit les protéger et considérer comme des acteurs à part entière de notre société.

Note de plaidoyer « Renforcement des systèmes de Protection de l'enfant dans le cadre du développement de la situation sécuritaire dans le cercle de Macina » faite en Juillet 2023.

- **Rwanda**

R4.A.1 Capacity-building and safeguarding training for extended project team and target groups

In Rwanda, to ensure the quality of the work delivery and compliance with organizational policies and procedures, 22 project staff (10 females and 12 males) and 340 volunteers (181 women and 159 men: 85 people per camp) were trained on Child Protection, Child Rights, Safeguarding, PSHEA as well as the Code of Conduct. The trainings were provided by Plan International Rwanda Technical leads and project staff. This indicates a commitment to maintaining a safe and supportive environment for both staff and beneficiaries.

R4.A2. Capacity-building of service providers on quality, confidential and safe gender and age responsive case-management services and material support. Include number of participants (F, M), dates of training, mention any findings (pre-post test)

Indicator

of Service providers were trained on quality, confidential, and safe gender and age-responsive case-management services and material support: 136(81 Men and 55 women)

Plan International Rwanda has, during monthly coordination meetings, explained to Child protection service providers (Alight, WVI, ADRA, HI, AHA, Police, UNHCR & MINEMA,) how

they should refer child protection cases through the “Enter Agency Referral Form”.

Child protection community mobilisers in collaboration with Child Protection committees and other protection partners operating in camps are doing regular joint awareness raising within the community to speak out on child rights, role and responsibilities of parents in fighting against child neglect and promoting positive parenting skills.

In addition, monthly community outreach in camps has been established in collaboration with MINEMA, UNHCR and all partners, where PIR delivered messages related to protection, gender equality and equity to ensure the community and service providers are aware of what PIR is doing in the camp.

To enhance the knowledge and skills of health workers professionals, various medical service providers, and key stakeholders regarding child protection, gender-based violence, and clinical psychosocial support, PIR has organized and conducted a workshop in conjunction with esteemed partners specializing in clinical psychological support. This collaborative initiative has successfully reached and positively impacted a total of 136 (81 Men & 55 Women health service providers within the Kigeme, Mugombwa, Kiziba, and Nyabiheke refugee camps.

R4.A3. Training of government officials and partners from various sectors on children and adolescents’ protection, safeguarding, gender equality and harmful practices.

Indicator

of Stakeholders who have been trained on children and adolescents’ protection, safeguarding, gender equality and harmful practices: 108 service providers including 40 women and 68 men)

Plan International Rwanda, with the objective of building the capacity of key stakeholders to identify gaps in terms of child and adolescent protection and to foster positive attitudes and practice and build knowledge regarding child protection, SGBV, SRHR, PSHEA, and gender equality, In collaboration with UNHCR, training of key partners (UNHCR, ALIGHT, WVI, SCI, AHA, WFP, POLICE, PFR, ADRA, SECTOR and DISTRICT authorities, RIB and POLICE) for 3 days was done for them in all locations and reached to **108** service providers including 40 women and 68 men). During this training also, we updated the existing referral pathways and analyzed together all gaps in Child protection for looking forwards new strategies, and best practices for the improvement of delivery of protection services to people of concern. Then, the collaboration through referral pathways, advocacy, and strategies to improve services in responding to Child protection and GBV issues were highlighted.

The referral pathway was also updated by CBPMs and all gaps which were supposed to be covered by them were identified. The role of Plan International will be monitoring the implementation of GBV prevention and Child protection best practices among service providers and reinforce the participation of relevant authorities and CBPMs.



R4.A.4. Referral pathway strengthening and information dissemination by Plan and key stakeholders

Indicators

Of Information dissemination sessions on referral pathway have been organized= 12

of Participants to sessions on referral pathway: 7972 people (2941 women, 1617 men, 2060 boys and 1354 girls)

Project staff disseminated all information about available services through referral pathways during the reflection workshops and other opportunities on child protection, GBV, Gender equality, best nutrition practices, school dropout, drug abuse prevention, teenage pregnancies, and child neglect through 12 sessions (3 per camp) of the campaign in all refugee camps and host communities to improve the capacity to look for services and share information timely. These sessions reached 7972 persons (2941 women, 1617 men, 2060 boys and 1354 girls).

In addition, monthly community outreach in camps has been established in collaboration with MINEMA, UNHCR, and all partners, where PIR delivered messages related to protection, gender equality, and equity to ensure the community and service providers are aware of what PIR is doing in the camp.

We have also bilateral meetings, case management meetings, case conferences, and joint campaigns with the above key partners and other Ips.

R4.A5. Protection-related advocacy targeting key duty-bearers.

Indicators

of advocacy sessions organized: 33

of duty bearers involved in the advocacy sessions organized: 108 service providers including 40 women and 68 men).

Plan Rwanda has conducted 33 advocacy sessions were carried out including DAC campaigns, 16 days (about 2 and a half weeks) of activism against the GBV campaign, the IDGC campaign, case management meetings, Bilateral meetings and regular monthly coordination meetings within these different channels plan took opportunities explained to Child protection and GBV service providers.

Plan International Rwanda has demonstrated its commitment to child protection through active engagement in various forums and coordination meetings. By collaborating with key stakeholders such as Alight, WVI, ADRA, HI, AHA, PFR Save the Children Police, RIB, UNHCR, and MINEMA, the organization has effectively communicated its case management strategies and advocated for robust support and orientation for children, adolescents, and parents to ensure the delivery of high-quality assistance. Furthermore, Plan International Rwanda has extended its reach through community campaigns, involving these partners in disseminating messages related to their services and expressing their readiness to provide support in the prevention of gender-based violence (GBV) and child protection issues. This inclusive approach underscores the organization's dedication to fostering awareness and collaboration within the community.

In parallel, the Child Protection and GBV community mobilizers, working hand-in-hand with community-based structures in both the refugee camps and host communities, have maintained an ongoing sensitization effort. This involves diverse methods such as parent evening dialogues, "inteko z'abaturage" (community assemblies), men's engagement initiatives, house-to-house visits, as well as Information, Education, and Communication (IEC) sessions at health centers. The focus of these activities encompasses promoting child protection, instilling positive parenting practices, highlighting parental responsibilities in combating child neglect, fostering skills for positive parenting, preventing GBV, promoting gender equality, and encouraging family dialogues. The commitment to engaging males in all related activities and incorporating a comprehensive approach underlines Plan International Rwanda's dedication to creating a supportive and informed community environment.





- Uganda

R4.A.1 Capacity-building and safeguarding training for extended project team and target groups

17 (11F: 06M) project staffs were trained on caring for child survivors of SGBV by plan staff who received TOT training conducted by International Rescue Committee (IRC) an implementing partner for GBV under UNHCR in Bidibidi refugee settlement. The three (3) days training of staff took place from 3rd - 5th October 2022 in Bucolic Hotel Adjumani. The training aimed at strengthening the capacity of staff to effectively provide case management services to child survivors of SGBV using the child centered approach. The facilitators administered pre-test and post-test to ascertain the knowledge gain. The pre-test and post-test evaluation results showed 35% knowledge gain (43.5% Average pre-test score, 78.5% average post test score)

91 (39F, 52M) community volunteers (CFS animators, Champion of Change facilitators, and Parent to Parents facilitators) trained on caring for child survivors of SGBV, safeguarding and PSEA. The three (3) days training took place in zone II and Zone III from 31st October 2022 to 2nd November 2022. The training was facilitated by trained Plan International staff. The pre-test and post-test evaluation results showed 39% knowledge gain (17% Average pre-test score, 56% average post test score).

R4.A2. Capacity-building of service providers on quality, confidential and safe gender and age responsive case-management services and material support. Include number of participants (F, M), dates of training, mention any findings (pre-post test)

105 (41F, 64M) service providers trained on quality, confidential, safe, gender and age responsive case management services for 02 days. The participants included; 39 (22F, 17M), Teachers (Senior woman and male teachers, headteachers), 31(04F,27M) Police officers (child and family protection unit, crime intelligent detectives), 35 (15F, 20M) Health workers (clinical officers, midwives, enrolled nurses). The training took place from 30th - 31st August 2022, 1st and 2nd, 5th and 6th September 2022 in Hotel Skypa. The participants were trained on the provision of confidential safe, compassionate, non-discriminatory, respectful, non-judgmental, non-stigmatising care to child and adolescent survivors of abuse. the training focused on recognizing child abuse signs, child protection concerns, child protection principles, child friendly communication, applicable laws for child protection and safeguarding. The training was facilitated by Probation Officer, health Officer from Yumbe district local government and CPIE coordinator. The average pre-test result was 21% and average post-test result was 75%, hence knowledge gain is 54%.

R4.A3. Training of government officials and partners from various sectors on children and adolescents' protection, safeguarding, gender equality and harmful practices. Include number of participants (F, M), dates of training, mention any findings (pre-post test)

97 (35F, 62M) local government staff and community leaders participated in a 2- days training on child protection and safeguarding. The training took place from 19th - 22nd July 2022 in Escape, Lori and Kululu sub counties, the training focused on recognizing child abuse signs and indicators, child protection concerns, child protection principles, child rights and responsibilities, understanding forms of SGBV and child and young people's safeguarding. Participants included district/subcounty technical and political staff such as subcounty chiefs, health Assistants, parish chiefs, local council III&V chairpersons and councilors). The training was facilitated by the District Community Development officer, Assistant Settlement Commandant. The pre-test and post-test evaluation results showed 22% knowledge gain (53% Average pre-test score, 75% average post test score)

Plan International also supported the office of probation and police with fuel and stationery to respond to child protection and SGBV-cases in their area of jurisdiction. The police, through the district police commander, raised the need to support the police with police forms to ensure access to justice. In response to the request of District police commander, Plan supported in photocopying 900 copies of police form 3A, 3 and 24. While the office of probation was supported with fuel to transport the children from remand home. This has enhanced the timely response of child protection and SGBV cases.

R4.A.4. Referral pathway strengthening and information dissemination by Plan and key stakeholders

Updating and Printing of referral pathways

The project supported in updating of the child protection referral pathway for Bidi bidi refugee settlement with the help of child protection working group meeting. Various services were mapped including the agencies responsible for providing the service. The services mapped included: CP case management, GBV, legal, safety and security, education, health, mental health and psychosocial support, family tracing and re-unification, livelihood, shelter, The project also printed copies of child protection referral pathway on signposts (3Mx1.5M) and PVC Banners of various sizes (2.5mx1.5M), 2Mx1.5M) and disseminated the information

on child protection referral pathway in the two zones (2&3) through information sessions. 890 (408F, 482M) children reached during the dissemination of the child protection referral pathway by the project staff. In addition, the team also distributed printed copies of the referral pathway at sub county headquarters, 5 child friendly spaces, 5 primary schools, 3 health facilities, food distribution points and information help desk in the community.

“A refugee leader mentioned that this information is vital and shall help a number of children and people as they shall be in know of where to get support when needed”



Support to coordination meetings among service providers (reflection meeting includes refreshments, venue etc.)

Plan International Supported 6 Zonal Coordination meetings in Zone II and Zone III in the months of June, July, August, September 2023 with refreshments and meals. A total of 270 (106Female, 164M) partner staff participated in the Coordination meetings. During the meetings, the different sectors like protection, health, education, water and sanitation among others, were able to present their achievements, challenges and planned activities. This space helped the project to coordinate and also discuss different issues that are affecting the community. Plan International supported Bidibidi Protection working group meeting, zonal protection, coordination meetings and Inter-agency coordination meetings.

Support to CP monitoring with technical support from UNHCR, MoGLSD & other key stakeholders

The project facilitated the setup of the District Action Centre (DAC) in Yumbe with help of the Uganda Child Helpline Sauti 116 from the Ministry of gender labor and social development. 06 (05Female, 01Male) District staff from the probation office and Information Technology (IT) were trained on the usage of the Sauti call Centre system to ensure the functionality and reporting of child protection and SGBV cases. This has strengthened referral and information dissemination among the probation office and Ministry of gender labour and social development.

A 1-day stakeholders' monitoring was conducted on the 1st of August 2023 by the stakeholders. A representation of different stakeholders included OPM, CAO, RDC, Speaker, DCDO, CDOs, LC3s, RWCs, participated in CP monitoring to the project activities in Zone 2

and 3. The stakeholders used a stakeholders joint monitoring checklist while interacting with PUP members, COC members, the CFS, animators, CVA members among others.

On 2nd/August/2023, a review meeting/ interaction with the stakeholders and project participants was conducted in Yumbe, Bayan Hotel. The participants included PUP members, COCs members, Animators, VSLA group members, CPCs and IGA members who interacted directly and gave feedback to the staff and the technical stakeholders. The project participants from different methodologies were able to give and share their success and experiences as members of PUP, VSLA, COC, IGA, among others.

A PUP member said; *" I can relate and cooperate with my neighborhood; children are demonstrating love (relationship between children) and there are shared responsibilities at home"*

The COC member said the following, *" When I first started attending the session, during the session, the facilitator was saying things as if they stay with me at my home, they talked about my bad behavior towards my parents at home, that was exactly what I was doing, I would not respect my parents, I would talk back at them and I would not listen to any advice from them, I would do what I want to do, I would not think about my discussions, from the time, I started attending the sessions, I now listen to my parents and I no longer make rusher discussions, I think of what I am going to do and its implications in my life."* The participants continued and said that her confidence level greatly improved, she could not express herself even just mentioning her name, but after the sessions, she was able to conduct a community dialogue and was able to express herself.

Support to child protection technical working group (CPTWG)

Facilitated financially 3 Child protection technical working group meetings with meals and refreshments in the months of November 2022 and July 2023. The project also supported the Planning meeting of the International Day of Girl child and presentation of Best Interest Determination (BID) reports to the BID panel on 14th October 2022. 34 (10Female, 24male) participants from partner organizations such as World vision, save the children, Humanitarian Agency for Development Services, Finn Church Aid as well as UNHCR and OPM.

Plan International supported child protection technical working group (CPWG) in sorting and distributing birth certificates printed by National Identification Registration Authority (NIRA) to refugee children in Zone II and III. This has enhanced access to legal documents by refugee children. The project team also participated in the review of standard operating procedure for CPWG. The project provided meals and refreshment to facilitate the CPWG meetings during the quarter.

R4.A5. Protection-related advocacy targeting key duty-bearers.

23 (14F: 09M) Plan International staffs and 3 (02F, 01M) community development officers were trained on advocacy and influencing by the trainers from Ministry of Gender Labour and Social Development (MGLSD). The purpose of the training was to enhance capacity of staff and partners in effective influencing and advocacy and advocacy tactics that yield results. The training took place from 22nd to 23rd of November 2022 at Bayan Hotel Yumbe. The pre-test and post-test evaluation results showed 26% knowledge gain (60% Average pre-test score, 86% average post test score).

88 (30F, 58M) Community structures trained on advocacy and influencing. The training took place on 29th to 30th November 2022 in Zone 3 (village 14), Bijo (Lomunga CFS) and zone 2 (Holly Dove). The training was facilitated by trained community Development officers from Kululu, Bijo and Lori sub counties. The purpose of the training was to enhance practical skills

of participants in advocacy and influencing that will be used to engage in advocacy activities. The pre-test and post-test evaluation results showed 35% knowledge gain (30% Average pre-test score, 65% average post test score).

110 (46Female, 64Male) duty bearers participated in protection related advocacy meetings conducted on 18th August and 8th December 2022. The key discussion issues were focused on increasing teenage pregnancy cases in the district and role of youth in parish development module. The dialogues were attended by youth council leaders, Champions of change members, district chairperson, Resident District Commissioner (RDC), OPM representative of Office of Prime Minister, UNHCR and representatives of partners operating in Bidibidi refugee settlement including but not limited to World Vision, Save the children, Humanitarian Agency Development Services, Transcultural Psychosocial Organization, Yumbe GBV Network. The dialogues have led to formulation of bye-laws and ordinances on night discos which were drivers to increasing cases of teenage pregnancies and child marriages.

Challenges

- **Mali**

Défis liés au Resultat 4

On peut dire sans doute que les prestataires de services de protection de l'enfance disposent des capacités requises pour gérer et répondre aux cas de violence contre les enfants au niveau communautaire, en coopération avec la société civile et les acteurs communautaires et avec leur soutien grâce à l'intervention du projet. Malgré tous les efforts consentis, le besoin de renforcement supplémentaire se fait sentir. Ces défis sont surtout dus au fait que certains prestataires formés ont subi des mutations. Du côté des forces de l'ordre, le point focal désigné se fait souvent représenter par un autre collègue à cause du manque d'effectifs dans les organisations (dû au besoin de patrouiller la zone suite aux menaces armées).

Autre défi non moins important, c'est la fragilité des structures de protections des prestataires et des acteurs (centre de santé e écoles fermées à cause des menaces djihadistes). Même si les prestataires de services sont bien formés, si les services ne sont pas disponibles, les usagers auront du mal à y avoir accès.

- **Rwanda: Nothing to report**

- **Uganda**

There is an increase in theft of property in the community, most especially in Zone 3, this is due to youth idealness. The OPM Assistant Commandant recommended the need for PSS activities for young people and also engaging the youth in livelihood activities and holding a mindset change session.

The dependency mind set of the caregiver and project participants was noticed during the

monitoring activity by the stakeholders, this was because most of them said they do not want the project to end and they hoped for more support, and yet they are all happy and benefited.

4.4. Work plan (e.g. annexed Gantt diagram) – Annexed

4.5. Monitoring, assessment, auditing and other analyses

4.5.1. Monitoring of the activities (explain how, by whom)

Plan will continuously monitor the implementation of the project throughout the project cycle. It will be done by the M&E staff, with close supervision from the M&E coordinator/focal point in each Country Office, in collaboration with the implementation team. The project's approach to monitoring is based on principles of knowledge management, emphasizing robust and efficient generation and use of information to guide management and strategic decisions. During the inception phase, the team will lead the development of the monitoring and evaluation for accountability and learning (MEAL) framework and monitoring tools. The MEAL plan will be drafted in line with the logical framework and will include i) indicators, ii) their means of verifications, iii) frequency of routine reporting and iv) responsible stakeholders.

The main MEAL tools and mechanisms will include: (i) Activity Performance Tracking Tables (APTT) to track and update, on a monthly basis, the progresses at both output and activities implementation level. (ii) Plan teams' periodic progress reports, including financial and monitoring data focusing on progress, beneficiary feedback, challenges encountered, lessons and following plans. (iii) Routine monitoring of training sessions through documentation of monthly training schedules that show who and number of expected participants. (iv) Complaints and feedback mechanisms to determine the quality of the services delivered will be developed, in consultation with the community. During activity follow-up by the Program team, consultations will be held closely with CBCPMs to actively seek complaints and feedback from beneficiaries. The feedback mechanisms will be confidential, child-friendly and accessible for those with disabilities and those who are illiterate or homebound.

4.5.2. Tick the boxes corresponding to the analyses that may be undertaken:

- ☐ External assessment during the action
- ☒ External assessment after the action
- ☐ External auditing during the action
- ☒ External auditing after the action
- ☐ Internal assessment or internal auditing relating to the action

External final evaluation: The final evaluation will assess project effectiveness, efficiency, accountability, sustainability and impact and will provide policy recommendations. The program and finance teams will be responsible for producing financial and narrative reports. Financial monitoring will be ensured through PIR's accounting system and expenditure will be subject to audit by the Plan Global Assurance team. An external financial audit will be conducted one month after completion of interventions to give a true and fair view of the project's financial position, its financial performance and cash flows. It will be conducted by external auditors who will be contracted for the assessment in compliance with DGD and Plan procedures. Plan will share the terms of reference of both the baseline, endline and audit assessments with the key contact point at DGD.

Other analyses: x Please provide information: Internal Baseline assessment.

[FINAL]

- **Mali**

Les activités de suivi évaluation ont été réalisées à travers des outils de collectes de données et des listes de participants aux activités réalisées qui ont été mis à la disposition du partenaire de mise en œuvre pour rapporter sur les cibles du projet désagrégées au sein des espaces amis des enfants dans les trois communes d'intervention.

Pour ce qui concerne la production de rapports et enquêtes d'évaluations nous avons réalisé : une étude de base, deux enquêtes post distribution monitoring, ainsi qu'une évaluation finale externe

Ces outils ont servi de source principale pour renseigner et actualiser la matrice de suivi des indicateurs du projet. (Voir matrice des indicateurs renseignée en annexe).

Les visites terrains ont été trimestriels pour le chef de projet et mensuels pour les officiers et M&E. Compte tenu du retard accusé dans la mise en œuvre du projet, un plan de rattrapage a été mis en place dont une des stratégies fut la multiplication des suivis terrain. C'est ainsi que les suivis sont devenus mensuels.

- **Rwanda**

Throughout the project implementation in two years, the M&E department has conducted different activities to monitor the project progress and to evaluate the results. The following are the main activities conducted in M&E:

- Rapid Needs Assessment for PUP and Market Survey for Cash and Voucher Assistance: the assessment gave been conducted to map out the protection related risks in the refugee camps and host communities.
- Baseline study: The purpose of the baseline survey was to provide information that was the benchmark on which project implementation relied on for an effective and efficient achievement of its objectives and expected results. Therefore, the baseline was expected to measure the status of the project indicators at the very beginning of the project. The information collected on the project indicators is used to measure and monitor the project progress against the set indicators over the course of the project implementation, especially final evaluation.
- Post-Distribution Monitoring for CVA: PDM is the process of systematically collecting and analyzing feedback about a distribution after the fact, to understand the population's experience and ultimately improve the way assistance is designed and delivered, while ensuring that no harm has inadvertently been caused. Data for the PDM is collected through surveys with beneficiaries.
- MERL team conducted PDM to understand whether programme reached the right people in the right way. Moreover, by conducting PDM, we were verifying that the distribution process was accessible to all intended people, was conducted in a manner that adheres to Core Humanitarian Standards (CHS), as well as if it responded to an existing need. Furthermore, PDM served to reinforce accountability, improve the way assistance is designed and delivered, identify potential unintended consequences of the distribution, as well as to respond to preferences of beneficiaries.
- Knowledge, Attitude and Practice (KAP) survey for Champions of Change: this activity conducted to understand the adolescents and youth's knowledge, attitudes, and practices on sensitive subjects such as gender equality, SGBV, girls' rights, positive masculinities.
- Field Visit Monitoring of AGSS activity: The main purposes of this field visit are: To observe whether AGSS are equipped with recreational material and adolescent girls' specific targeted material, including menstrual hygiene management kits as planned,

the number of animators supporting AGSS, How the AGSS animators are recording participants, and how Plan staff are working closely with UNHCR management.

- Parenting Under Pressure (PUP) operational research: The main purpose is to understand to what extent Parenting under Pressure (PuP) is a promising methodology to prevent and respond to violence, abuse and neglect in the family environment, and understand the main drivers of change in parenting practices. This exercise was part of a bigger project that aimed at gathering data that will feed into the GH led PuP Operational research and the project's final evaluation
- Endline/Final evaluation: This Endline Evaluation had two main purposes. First, it aimed to measure the project's indicators at the end of the intervention and compare them with the values measured throughout the project's duration. Second, in accordance with Plan International's evaluation standards and criteria, it aimed to evaluate the project's effectiveness, relevance, and efficiency.

- **Uganda**

The project organised joint field monitoring visits with key stakeholders including Resident District commissioner (RDC), Chief Administrative Officer (CAO), Office of prime minister (OPM) Assistant settlement commandant, District community Development officer, Probation officer, Community Development Officers, Subcounty chairpersons, Refugee welfare committee chairpersons, animators, child protection committee chairpersons, project participants (PUP, IGA, CVA, VSLA, COC). The findings revealed that CFS are accessible to Children with Disabilities as evidenced by presence of ramps, scooting stands in the latrines, presence of first aid kit at the CFS and absence of clean water source in the CFS.

Plan International Uganda supported 1250 unaccompanied/separated children and children at risk with Cash and Voucher Assistance and each child received 320,000 UGX. The purpose of the cash support was to address the child's protection concerns (school dropout, safety, lack of basic needs) that were identified during the assessment that required some financial intervention. In addition, the project supported 298 (180 females, 118 males) parents and caregivers from 20 groups with cash assistance to boost their businesses and income generating activities. As a result, 4 post distribution monitoring assessments were conducted to collect participants feedback on the quality of the cash and voucher assistance, their perceptions especially on selection process, awareness on cash delivery modalities, use of cash, level of satisfaction, associated risks and effects of the intervention on the participants. Notable contributions of CVA included improved food security, ability to meet medical bills, maintaining children at school, ability to start IGAs, increased sales and stock of products, increased the trust of the customers, suppliers, community and family members. Equally, other participants self-reported reduced family tensions/violence, fulfilled customer expectations or demands, increased savings as well ability to socialize with others, share inform and experiences has greatly improved.

PIU also conducted an external end-line evaluation to measure the effects of the project interventions on the targeted participants. The findings revealed that 95% of CAY and 94% of parents/caregivers reported that child protection in emergency services are safe, accessible and participatory, 83% of reported cases of violence against children, adolescents and youth received appropriate and timely services; 31.2% of CAY reported changes to their wellbeing as a result of structured psychosocial support, 75.9% of CAY reported feeling confident to report a protection violation to a reporting structure; 49.5% of CAY demonstrated knowledge of child protection risks and behaviors; 82% of parents and caregivers reported using positive parenting practices and 94.1% of children aged 8–17 reported a positive change in their interactions with their caregivers. In addition, 75% of trained social service workers demonstrated key competencies required to identify and respond to cases of violence against children and SGBV and 75% of trained community volunteers have adequate knowledge and

skills to provide PSS at CFS, AFS, AGSS.

5. CROSS-CUTTING ISSUES

5.1. Please describe the expected level of sustainability and/or of connectedness.

Plan's action planning includes an exit strategy, which will be developed in consultation with refugees, PDIs and beneficiaries from host communities to ensure the sustainability of project interventions in the last months of the action. The approach will be contextualized for each Country Office, and will be systematically aligned with the requirements of regional refugee frameworks, national and governmental policies.

At beneficiary level: Children, adolescents, caregivers will benefit from capacity-building actions that will strengthen their skills, resilience, empowerment (increased agency) and self-reliance. The skills acquired by community workers and institutional actors will have a lasting impact not only for the current case load of at-risk children and adolescents in refugee and host communities, but also for potential new arrivals in refugee settlements and future generations of children in host communities. At community level: The action will either rely on and build capacity of existing structures and persons of influence or set up and build capacity of community-based structures for which gaps and needs have been identified. The aim is to strengthen the local community-based capacities to prevent and respond to protection risks for at-risk children, particularly adolescent girls, in order both to ensure sustainability of the action and local ownership. At institutional and policy level: Key stakeholders, service providers, local leaders and influencers will benefit from strengthened capacities in terms of child protection, SGBV, gender equality, protection risks, needs and services, which will trickle down in the long term to provide a safe and protective environment for children, adolescents and their caregivers. The proposed action is fully aligned with the following guiding documents, ensuring sustainable buy-in from national and local authorities: (i) **Rwanda** national policies and strategies, such as the *National Strategic Plan for Fighting Gender-Based Violence for 2017-2022*, the *National Integrated Child Rights Policy*, the *Joint Strategy for Furthering Economic Development in Host Communities through Refugee Self-Reliance (2016-2020)*. (ii) *The Road Map for the Implementation of the Comprehensive Refugee Response Framework in Uganda* (2018-2020). (iii) In **Mali**, a number of texts which are framing child protection and gender equality principles, namely the *Politique Nationale de Promotion et de Protection de l'Enfant du Mali*, the *code de protection de l'enfant au Mali*, the *code des personnes et de la famille et la Politique Nationale Genre*, with which the proposal is fully aligned. At economic level: Through its CVA and IGA components, the action will reduce financial barriers to child protection, and empower adolescents, youth, and parents and caregivers to generate their own income, enabling them to meet their needs and reduce their negative coping mechanisms. The connectedness of the action will be guaranteed by considering the complex nature of the Rwanda and Uganda refugee context and the Mali displacement context: there is a co-existence of needs for immediate assistance for vulnerable at-risk populations in refugee camps and IDP settings, a need for continued sustainable support to the protracted refugee situation in existing settlements, and the needs of a development nature in host communities.

5.2. Continuity strategy

The action will adopt, by the nature of the activities and because of the nature of the context, a nexus approach, working towards the achievement of short-, mid- and long-term outcomes within the targeted communities. Several activities will be put in place to address the immediate urgent needs of vulnerable at-risk populations, such as protection case

management activities and cash-based support. At the same time, the capacity of communities and key actors will be built to achieve longer-term sustainable outcomes. The continuity of this intervention, and particularly the link between relief, and development will therefore be ensured by strengthening of community based and national institutional child protection and SGBV actors and mechanisms, including State services at district and sub-district / village level e.g. schools, health centres, police, line ministries, as well as by advocacy actions targeting various stakeholders, for all three countries. In addition, Plan's action is on the nexus by the gender-transformative strategy that is cross-cutting throughout the activities: by working with beneficiaries through empowerment-oriented activities, and by initiating changes in the harmful norms that support girls, adolescent girls and young women's rights violations, the action aims at re-shaping gender power relations within communities, which will have impact on the long-run. **Rwanda:** The action is aligned with the Joint Strategy by The MINEMA and the UNHCR for Furthering Economic Development in Host Communities through Refugee Self-Reliance (2016-2020, extended for 2021), by equipping vulnerable refugee adolescents and their caregivers with life skills, entrepreneurship skills and livelihoods opportunities will enhance their self-reliance and contribute to the economic development of host communities, thus contributing to the continuity of the action and achievement of longer-term outcomes. **Uganda:** Both the Uganda CRRF Roadmap and Country Refugee Response Plan called for integration of assistance to refugees into state services to host communities, and for support to local capacities to respond to the burden posed by refugee influxes on local communities' limited resources. The continuity of this intervention, and particularly the link between relief, rehabilitation and development will therefore be ensured by the strengthening of community based and Ugandan institutional actors and mechanisms, including State services at district and subcounty level e.g. schools, health centres, police, line ministries. **Mali:** the action is aligned with the 2021 HRP that calls for a nexus-oriented response, throughout all sectors of intervention. The HRP highlights that a cash and voucher assistance is a preferred modality to increase the resilience of targeted households to realize this approach, and that a social services focus is essential.

5.3. *Integration*

Gender and inclusion: The action ranks high on the gender and age marker, as it applies a robust gender/age lens to ensure that different groups, including people who have mobility constraints, are able to safely access and participate in program design, services and activities, along the project cycle management. The project is based on thorough analysis the different needs, risks, and capacities of girls, boys, adolescent girls, adolescent boys, women, and men. Quantitative and qualitative data, disaggregated by sex, age and nationality/refugee status will be collected and analyzed to understand the impact of the project on age and gender sensitive outcomes, changes in gender/social norms through analysis of knowledge, attitudes and practices towards child protection, SGBV; whether services are meeting the needs of different groups and levels of participation. **Conflict Sensitivity:** The action is aligned with the Rwanda Country RRP, the Uganda CRRF Roadmap, the Mali HRP, that all underline the importance for interventions across all sectors to be sensitive to drivers of conflict and tensions, as to ensure that they not only achieve their desired outcomes, but also contribute to social cohesion among refugee communities and IDP settings, and between refugees or IDP and host communities. Interventions must de-escalate, and not trigger additional tensions. The action will – at minima – respect the 70:30 principle, whereby 30% of the support is provided to the host community. Targeting criteria will be defined in consultation with both refugee and host communities, will be clearly communicated to both refugee and host communities, building on community-based resources to ensure acceptance by all. **“Do No Harm” principles:** All project interventions will integrate locally adapted key conflict sensitivity principles, attention to safeguarding and risk assessments will be conducted before distributions that can put beneficiaries at risk. Capacity-building of protection service providers will be conducted to ensure that all staff children and adolescents might be referred to provide

services that are confidential, safe, compassionate, non-discriminatory, respectful (for choices made, of dignity of women and girls), non-judgmental, in order to comply with *Do No Harm* principle. Disaster Risk Reduction/Resilience: The action's proposed activities will strengthen resilience and recovery in children and adolescents who are facing distressing situations in their home or refugee community. Working with community-based structures and service providers will allow for a better dissemination of the action to a wider population and build the resilience of refugees and in host communities beyond the project beneficiaries. Environmental impact: The action will mostly provide soft activities focused on protection. As a result, the environmental impact will likely be neutral. Participation of and Accountability of the Affected People: Participation of different stakeholders will be ensured and various participatory approaches will be used throughout the project implementation, including feedback and complaints mechanisms.

[Final] Please provide any further explanation, modifications, changes or updates regarding these cross-cutting issues, from the beginning of the implementation, if applicable. Comments can cover topics related to sustainability (efforts to have a longer-term impact) and/or continuity and also Integration (efforts to enhance participation of the communities/authorities/etc, Gender and Inclusion (with a focus on accessibility), general AAP concerns which can include feedback and response mechanisms, any measures taken regarding “do no harm” principles, conflict sensitivity)

Uganda

Interestingly male participation in play activities appeared to be higher at 77% compared to 56% female for instance 77% of the male said that they helped their children with their homework. In general, few gender gaps exist between male and female participants in their interactions with their children implying that the project had a role in the greater involvement of fathers and male caregivers as well as more equal parenting practices. One of the participants testified men are actively engaged in performing roles and tasks that were not characteristically done by them including helping with house chores and taking care of children.

During the project implementation, improved family life of parents reporting positive parenting skills, such as friendly conversations, playing games, and calm discussions with their children. Child-Friendly Spaces (CFS) further enhance children's well-being by providing safe environments for recreation and feedback sharing. The project interventions like Parenting under Pressure, Adolescent lifeskills, Champion of change created awareness and mindset change as appreciated by participants.

The intervention were to increase awareness and reduce instances of VAC. This included sensitizing children about available reporting options in case they experienced violence. These included reporting desks, leaders, and other entities that can provide support out of the family circles. At least 61% of children interviewed could mention the name of an entity or person outside of the family that could help them in case they experienced violence. The ability to safely report any type of violence and receive redress is a critical indicator of existing child rights. Children normally lack sufficient agency and have their rights infringed upon in case of VAC because of their age. It is therefore critical that they know how to seek redress.

Children that participated in the FGD's also mentioned that they were confident in reporting cases. According to me if I see (violence against a child), I will go to the LC I and tell her. We can also go to women centres – FGD 10-14 years participant.

It is likely that if you go and report to the chairlady and the chairlady is the one who will report to the police; however, the chairlady can take over five weeks or some days. FGD 10-14 years participant.

6. SECURITY AND EMERGENCY MEASURES

6.1. Emergency measures

Risk (impact - I; likelihood - L)	Mitigation measures
Volatility in the region during project implementation, causing an increased influx of refugees to operational camps or an increased influx of IDPs in targeted communities (I: 4, L: 4)	Plan Country Offices all have a Disaster Preparedness Plan which outlines activities' scale-up strategies to be rolled out in case of need. Rwanda: Plan maintains its presence in all the camps hosting refugees in Rwanda as a Child Protection Lead; therefore, Plan Rwanda is always in close communication with UNHCR and MINEMA. Uganda: Plan will monitor closely the Ugandan asylum policy to ensure it remains protective and inclusive; the organization has an enabling position in Uganda to implement advocacy and influencing action if policy changes threaten the action. Mali: Plan Mali will keep on participating in protection and security clusters meetings to regularly update its contingency and business continuity plans.
Low take-up of the action and low participation of children, adolescents and their caregivers in the action (I: 5, L: 2)	Continuous community-based activities and capacity-building of community members of leaders, community sensitization on the project results and activities, robust feedback and accountability mechanisms
Changes in Rwandan and Ugandan asylum policy limiting refugees' rights and threatening the action (I: 4, L: 1)	Close monitoring of the Rwandan and Ugandan asylum policy to ensure it remains protective and inclusive; the organization has an enabling position in Rwanda and in Uganda to implement advocacy and influencing action if policy changes threaten the action
Service providers are not available, operational according to international best practices or do not have the capacity to participate in a functional referral system (I: 3, L: 3)	In coordination with UNHCR, national and local authorities, and other partners, Plan Country Offices will continue mapping available services, level of quality and accessibility to identify gaps and prioritize systems and structures for strengthening, re-establishment or establishment where structures are not present. Advocacy efforts will also be conducted in case a need for the establishment of new structures is identified
Stigma, local perceptions, beliefs or customs preventing survivors, children at-risk or other persons at risk from reporting incidences or seeking services (I: 3, L: 4)	Recognizing that stigma and local customs of silence have been identified as main causes for protection incident under-reporting, Plan Country Offices and program teams will prioritize community-led approaches to awareness-raising and grassroots activism to reduce stigma. Capacity building for partners and stakeholders will also focus on confidentiality and survivor-centered approaches to reduce fears or risks associated with incident reporting
Unavailability of items in the markets or increase of prices resulting in the impossibility to carry out procurement and limiting the access of beneficiaries to essential goods and services via the CVA (I: 3, L: 2)	Prices, market access, retailers' resilience will be monitored throughout the action's implementation. Plan's Cash and markets in emergencies specialist will train and support the project team on market assessment so that market situations are well monitored. In case of major market incidents, Plan will liaise with the donor and suggest modifications of the approach.
Major epidemiological outbreak (Ebola, COVID-19...) (I: 5, L: 4)	Plan Country Offices have put in place sound safety measures and adaptive programming that will serve as guidelines to ensure business continuity in case of an outbreak. Different operational scenarios have been developed and will be rolled out depending on the context and the scale of the outbreak.

Non-ethical conduct by Plan staff during project's life span (misconduct, fraud, corruption, sexual exploitation and abuse, violation of human rights and others) (I: 5, L: 2)	Plan Country Offices have detailed policies against any misconduct. Sanctions and disciplinary measures are in place to act if the above occurs. Every employee signs and adheres to the policies below: Disciplinary Policy, Anti-Fraud Policy, Safeguarding children and young people global policy, Harassment Bullying Discrimination policy, Code of conduct. In addition, Plan will also conduct refresher sessions with staff, refugee incentive workers and local contractors on PSHEA.
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6.2. Security-related aspects

6.2.1. Situation in the field. Please provide a brief description

Mali: The security context in Mali is fragile and the country continues to face a multitude of political, security, human rights and humanitarian challenges. The UN Peace Operations has declared that any lasting improvement in the situation security depends largely on the success of the current political transition. Indeed, the preparation of the national election which is showing the end of the political transition is a major test and a mandatory step for Mali stability. The context in Ségou is challenging, as outlined in the Mali Protection Needs Assessment.

Rwanda: The security context in Rwanda remains stable and has allowed for unhindered humanitarian access and project implementation. Plan coordinates with government authorities, UN agencies and NGO networks to share vital security information. Although the influx of new refugees remains limited in the targeted areas as of today, the project team will continue to monitor the context and will liaise closely with communities and key actors who are well informed of the environment.

Uganda: The security context in the operation area remains very stable, with no ongoing armed conflict or communal violence, and has allowed for unhindered humanitarian access and project implementation. Across the borders with South Sudan and DRC, the security situation is also relatively stable, with no major ongoing conflicts, hence no spillovers into the operation area. Relatedly, the refugee influx has reduced to a mere trickle into the region, mainly occasioned by the sporadic famine situation in border areas of South Sudan. Plan coordinates with government authorities, UN agencies and NGO networks to share vital security information. .

Has a specific security protocol been drawn up for this action?

yes ☐ no ☒ Standard procedures

No specific SoPs has been developed for this particular project. Plan International has standard protocols regularly updated based on the context and monitor closely the situation.

6.2.2. If yes, provide information: N/A

6.2.3. Have the staff in the field and the expatriates received information and training concerning these procedures? N/A

6.2.4. [FINAL]

• Mali

La zone d'intervention du projet, jadis considérées comme sans menaces sécuritaires, est devenue de plus en plus difficile, occupée par de nombreux groupes armés (groupe d'autodéfense, forces loyalistes et leurs partenaires et les groupes islamistes djihadistes composés de GNIM et EIGS). Le projet DGD n'est pas resté en marge de ces difficultés. Les 2 communes de l'inter fleuve (Saloba et Sarro) sont restées longtemps en proie à des menaces djihadistes. Pour pouvoir y accéder, il a fallu développer des stratégies internes (se

renseigner à chaque étape de déplacement, bien collaborer avec les groupes armés, échanger avec les collectivités et les agents de santé, utilisation des engins adaptés au contexte, emprunter les routes principales ...) et respecter les mesures sécuritaires soumis à la disposition des staffs. Il a aussi été conseiller au staff de respecter les principes humanitaires gage de renforcement sécuritaire.

- **Rwanda**

The security context in Rwanda remains stable and has allowed for unhindered humanitarian access and project implementation. Plan collaborates with government authorities, UN agencies, and NGO networks to exchange crucial security information. However, the influx of new refugees from DRC increased since November 2022 and asylum seekers are being received and assisted in NKAMIRA Transit Center. It is important to note that 80% of the population are children and women. Although Plan is actively providing Child Protection and Gender-Based Violence (GBV) response and prevention assistance, additional funding is required to support the vulnerable, particularly children and women, in coping with their needs.

- **Uganda**

Uganda continues to receive new arrivals from South-Sudan, Sudan and Democratic Republic of Congo (DRC) through northern and western border points due to ongoing conflicts South Sudan, Sudan and DR Congo making the situation unpredictable. Cumulatively 74,618 individuals arrived in the country since January 2023, of these, 28% arrived from South Sudan, while 26% are from the DR Congo, and 46% are urban new arrivals in Kampala. The ongoing conflict in Sudan has resulted in 5,886 new arrivals from Sudan out of 18,672 who arrived in the same period from different counties. Overview of Refugees and Asylum-seekers in Uganda as of 30-Nov-2023.

Since January 2024, Uganda received 71631 new arrivals and 23% of them are new arrivals in Kampala. Majority of the new arrivals 39% of them are from Sudan, 21% Democratic Republic of Congo, 20% South Sudan and 20% other nationalities and 99 of the new arrivals are received through Yumbe¹⁰.

There were threats of a demonstration against Agencies working in Zone II by the local communities over the allocation of resources to the host communities which posed fear to staff. However, we coordinated with office of prime minister (OPM) to dialogue with leaders in order to address the potential dispute which was later managed.

There was a fatal accident in Zone III, where 5 people lost their lives. The local community in Kululu sub-county blocked roads and locked sub-county offices, this affected engagement with the local community of Kulullu sub-county. However, the situation was managed by the Yumbe district leadership and the office of the prime minister.

7. COORDINATION IN THE FIELD

7.1. *Coordination in the field*

Plan coordinates with key partners including UN agencies such as UNHCR, UNICEF, WFP,

and members of the clusters, especially Child Protection and GBV. Plan has already harmonized its approach and methodologies, including targeting methodologies, thanks to a constant inter-sectorial and bi-lateral coordination with other key actors (UN agencies, other NGOs). **In Rwanda**, Plan leads and participates in the Child Rights' Coalition, Rwanda Education NGO Coordination Platform (RENCP), the Girls' Education Working Group, and the Child Protection Working Group. In collaboration with other organizations, Plan launched the Safeguarding Technical Working Group, to ensure children, young people and adults are not harmed by being associated with Plan in our programs, activities and interventions. It is also an important platform to exchange knowledge, lessons and best practices around safeguarding children, young people and adults. **In Uganda**, Plan coordinates with protection implementing lead partners for UNHCR and actively participates in the National Refugee Protection Working Group in Kampala, and the CP and the Prevention and Response to SGBV sub-working group meetings and will continue to coordinate with these groups. In West Nile Plan is part of and general and specific sector-based coordination mechanisms that are jointly organized and managed by the OPM and UNHCR. Plan also participates in sector based Technical Working Groups (TWGs) organized by the respective District Local Government (DLG) departments, with support from the relevant UN agencies. **In Mali**, Plan actively participates to protection clusters (Child Protection & GBV sub-clusters) as a member leading the work on gender-responsive actions, as focal point for gender, and civil documentation. Plan also participates to education and food security clusters at national level. At regional level, Plan is active in the various clusters related to ongoing actions and potential synergies.

7.2. National and local authorities

In **Rwanda**, in national level, Plan plays a key role in coordinating child protection and SRHR interventions across different actors, stakeholders, including with the national-level authorities, so as to ensure comprehensiveness and a holistic approach. Plan continues to leverage its strong partnerships with key ministries, such as MINEMA and MIGEPROF. At refugee site level, Plan Rwanda part in the UNHCR and MINEMA-organized joint coordination meetings at camp level. Plan also facilitates greater coordination between district level structures, camp coordination mechanisms thanks to its dual mandate. In **Uganda**, Plan has strong relationships with national and local authorities who are key stakeholders on child protection, SGBV prevention and response, education. At national level Plan has a running MoU with the OPM and with specific central government line ministries under which our interventions fall. Regarding Plan's West Nile projects, Plan has ongoing MoUs with all DLGs of the districts where projects are implemented, including utilizing the technical resource employees of the respective DLG in trainings and other technical assistance. At both national and DLG levels, Plan is compliant with all statutory government instruments, except where waivers have been granted to the organisation. In **Mali**, Plan has strong relationship with local and national authorities. The country strategy covering the period of 2019 to 2023 has been shared with the authorities. Plan's interventions are systematically shared and communicated with local authorities and traditional authorities, so that they are fully part of the process in the definition of the operating strategy and the process and monitoring and evaluation. At national level, Plan has MoU with the Ministry of Gender, the Ministry of Health, the Ministry of employment and vocational training. Plan has local conventions with regional authorities for the supervision of all its activities in the different areas of intervention.

7.3. Potential coordination with the Belgian diplomatic representation

Plan will regularly organize meetings to inform the Belgian Diplomatic Representation in Rwanda, Uganda and Mali, to inform on project progress, context evolution in the intervention areas, implementation of risk mitigation measures and non-realization of logical framework assumptions. Relationships with Enabel in all three countries will be strengthened. In Brussels, Plan will be in regular contact with the Development Cooperation of the Kingdom of Belgium

to keep it informed of project implementation and answer potential questions. Plan will also be available to organize field visits to Rwanda, Uganda or Mali if the Belgian Cooperation so wishes and if security conditions permit.

7.4. [FINAL] Please describe any update, change or challenge that you are facing on these questions, if applicable – maybe focus on the regular coordination with stakeholders

- **Mali**

Coordination avec le partenaire

Précisez les initiatives de coordination entreprises avec les partenaires (session de planification des activités, de suivi budgétaire etc.), et préciser si les partenaires ont bénéficié de sessions de renforcement de capacité.

Le partenaire ALPHALOG, partenaire de mise en œuvre du projet depuis octobre 2021, a bénéficié de plusieurs sessions de formations. D'abord, il y a eu en septembre 2023, une session d'orientation sur le projet, suivie de la formation sur les procédures comptables, administratives et financières. Ces sessions ont permis à l'organisation partenaire d'être plus outillée pour planifier, mettre en œuvre, et suivre les activités (programmatiques comme budgétaires).

A la fin de chaque mois, une réunion mensuelle se tenait entre Plan et le partenaire Alphalog, afin de faire la revue détaillée des activités réalisées et la planification des activités futures.

Toutes les activités terrain de sensibilisation, de formation, d'information et de plaidoyer et les suivis ont été organisées de façon conjointe.

Coordination humanitaire, clusters et groupes de travail

Plan International est membre actif du cluster protection, du sous-cluster VBG et co-facilitateur du cluster éducation. Pendant la période couverte par le projet, l'équipe a régulièrement participé aux réunions mensuelles des clusters susmentionnés, ainsi qu'aux rencontres mensuelles du groupe de travail "Protection contre l'exploitation et les abus sexuel et harcèlement (PSEAH)". Au total 19 réunions ont fait l'objet de participation.

Dans le cadre de ce réseautage, le chef de Projet a aussi participé en novembre 2023, à un atelier sur la collecte et l'analyse des données sur les VBG. L'atelier a été organisé par l'UNFPA.

Coordination avec les autorités gouvernementales et acteurs communautaires

Le projet collabore avec différents partenaires. Les services étatiques sont les partenaires de premières lignes dans la mesure où ils sont essentiellement constitués des prestataires de services. Les prestataires de services sont les acteurs étatiques dit de protection notamment le SLPFEF, le SLDSSES, l'académie d'enseignement, les collectivités et les services déconcentrés.

Il faut également signaler qu'un rapport périodique est soumis au Ministère de l'Administration Territoriale et de la Décentralisation.

Coordination avec d'autres acteurs

Il y a plusieurs acteurs de protection qui interagissent afin d'atteindre les résultats escomptés du projet parmi lesquels, il y a les ONG nationales et internationales, les organisations de la société civile, les agences des Nations Unies et des réseaux d'association. Le FONGIM

(Fédération des organismes internationaux au Mali) en tant qu'organisme dument enregistré et reconnu par les autorités maliennes, dont la grande majorité des ONG Internationales font partie du Forum est très opérationnel dans le cercle Macina et actif dans la coordination.

Les organisations les plus actives sont TDH, Amaparos, la CAFO, la FELASCOM, ALPHALOG, ASSAF. La coordination se fait sur la base des réunions de planification, des cadre de concertation, de gestion des cas, de référencements. Le SLPFEF de Macina assure le lead de la coordination des acteurs. Grace à l'intervention et la prise en charge des activités de coordination des acteurs, les parties prenantes ont beaucoup apprécié l'approche et l'initiative.

Il énonce notamment que toute personne ne prenant pas ou ne prenant plus une part active au conflit doit être protégée. Il pose le principe fondamental de la distinction entre les acteurs et les ressources civils d'une part et les acteurs et les ressources militaires d'autre part.

L'accès humanitaire et la sécurité des acteurs humanitaires et de la population peuvent être compromis en cas de non-respect des principes humanitaires et d'affiliation réelle ou présumée à une cause militaire ou politique.

Par rapport à la coordination avec les militaires, dans le contexte actuel au Mali, la stratégie d'interaction adoptée par le projet en particulier et par la communauté humanitaire en général est celle de coexistence sur le terrain. Une consultation et coordination régulière et soutenue est exigée afin de permettre de discuter les questions clés d'accès ou de protection. Cette stratégie a donc permis d'assurer une liaison régulière entre acteurs humanitaires et forces armées en présence, de façon à permettre un échange régulier d'informations, assurer le fonctionnement optimal des mécanismes de gestion de la crise mis en place et identifier toute problématique humanitaire ou sécuritaire qui devrait faire l'objet de discussions plus spécifiques entre acteurs humanitaires et forces armées.

Les principes de neutralité et d'impartialité sont à la base de cette collaboration.

Assistance externe apportée au projet lors de la période de rapportage

Au cours de la mise en œuvre du projet, plusieurs contributions ont été apportées au projet notamment :

- Le bureau d'étude Boombeï Ingenier pour l'évaluation des besoins pour la mise en place du EAF
- La fourniture des cheptels par la société coopérative SOCOMADEp
- La réhabilitation et l'aménagement des espaces amis des enfants par les Entreprises BOITE et EGK
- L'achat des kits PEP au niveau de LABOREX
- Le bureau d'étude Bougougnere et Bougou Conseil, 2bConseil SARL pour l'évaluation finale du projet

• Rwanda

In Rwanda, Plan leads and participates in the Child Rights' Coalition, Rwanda Education NGO Coordination Platform (RENCP), the Girls' Education Working Group, and the Child Protection Working Group. In collaboration with other organizations, Plan launched the Safeguarding Technical Working Group, to ensure children, young people and adults are not harmed by being associated with Plan in our programs, activities and interventions. It is also an important platform to exchange knowledge, lessons and best practices around safeguarding children, young people and adults.

At the national level, Plan plays a key role in coordinating child protection and SRHR interventions across different actors, stakeholders, including with the national-level authorities, to ensure

comprehensiveness and a holistic approach. Plan continues to leverage its strong partnerships with key ministries, such as MINEMA, MINISANTE and MIGEPROF.

Plan International Rwanda participated in Refugee Coordination meetings at the field level and shared the key achievements in collaboration with other partners have disseminated messages around child protection and prevention of child abuse, neglect, and school dropout, as well as GBV response and prevention

Below is the list of other protection partners with their areas of intervention:

- Alight (SGBV prevention through SASA methodology)
- World Vision International (Education and WASH)
- Save the Children International (Health)
- Legal Aid Forum (Legal services)
- Prison Fellowship RWANDA (Community-based services and Legal support)
- Humanity & Inclusion (Inclusion of People with disabilities)
- ADRA Rwanda (in charge of logistics including distribution)
- Practical Action (Energy services)
- WFP (Food and school feeding service)
- UNHCR (Overall Refugee Protection)
- MINEMA (overall coordination)

Plan International Rwanda has organized CP technical meetings with UNHCR and MINEMA to introduce and explain in detail the new interventions and activities of the DGD grant to complement the existing CPIE project funded by UNHCR

To get plots for AGSS constructions, we have managed to have discussions with the Government local authorities, MINEMA, and UNHCR which resulted in getting the plots.

• Uganda

The Project Implementation team continues to work closely with OPM, UNHCR, Yumbe District Local Government, and protection partners such as WVI, IRC, HADs, SCI and including participation in the different working group meetings like Child Protection working group meeting, SGBV subsector working group, settlement protection sector working group, zonal coordination meetings, and Case management working groups

8. IMPLEMENTATION PARTNERS

8.1. *Name and address of the implementation partner(s)*

Plan International Country Offices: **Plan International Rwanda**, 4th Floor, Golden Plaza Building, KG 546 St 1, Kacyiru, Kigali, Rwanda. **Plan International Uganda**. NECA House, Plot 1, Bandali Rise. Luthuli Avenue, Bugolobi, P.O Box 12075, Kampala . **Plan International Mali**, SOTUBA ACI près du Collège LES LUTTINS, BP 1598, Bamako, Mali.

In Mali, Plan will work with **Groupe d'Animation Action Sahel (GAAS)**, B. P. 7 Bandiagara –Tél. / Fax : 2442-238 – cel. 6741173

8.2. *Status of the implementation partners (e.g.: NGOs, local authorities, etc.) and the role played by them*

Plan International Rwanda, Plan International Uganda, Plan International Mali are NGOs, which will take the lead on the implementation of all the activities to be achieved under the scope of the action, making the most of their community deep-rooted presence and experience in implementing age and gender responsive child protection actions, as well as livelihoods actions. They will oversee the implementation of the action, fostering participation of beneficiaries, and delivering high-quality protection activities in the elaboration of tools, modules, approaches, dialogues, sensitizations, liaison with key stakeholders.

In order to strengthen local capacity of CSOs, Plan will implement this action with a local partner in Mali, Groupe d'Animation Action au Sahe (GAAS) - Mali, a local non-profit and non-governmental organization created in 1992, with HQ located in Bandiagara, and actions in Ségou, Koulikoro and Bamako through 6 functional offices. GAAS's expertise lies in the area of community mobilization, promoting equality, sustainability, multiculturalism, dignity and transparency. GAAS Mali's community base and its strong relations with local communities and authorities are an added value for the implementation of activities in a context of tense social cohesion and difficult access to communities. This partnership is already highly fruitful in the Segou region with the implementation of a project promoting access to education, with ECW and Global Affairs Canada-funded actions.

8.3. *Type of relationship with the implementation partner(s) and the reports expected from the implementation partner*

Plan International Uganda, Plan International Rwanda, Plan International Mali and Plan International Belgium all belong to the Federation of Plan International, hence sharing common vision, values and work management, as well as similar procedures; all entities have worked or are working with tight relationships in the past, within the execution of several grants funded by DG INTPA, D5.1, D5.2, Consortium 12-12, Nike Foundation and seeds.

GAAS and Plan International Mali will be tied by a MoU; GAAS will share regular technical and financial reports to Plan; Plan will support GAAS with planned and strategic capacity-building regarding programmatic, technical and operational strengthening. Plan and GAAS will jointly monitor the security context, and Plan will actively share security and safety-related SOPs and information monitoring.

8.4. [FINAL] Please describe any update, any change or challenge that you are facing on these questions, if applicable

• Mali

Plan International travaille pour la promotion des droits des enfants et pour une plus grande égalité pour les filles en travaillant en partenariat avec d'autres groupes et organisations. C'est ainsi que, dans le cadre de la mise en œuvre du projet Plan International a signé un protocole de collaboration avec l'ONG ALPHALOG, afin de pouvoir bénéficier mutuellement de ses compétences, de ses connaissances et de ses ressources.

Le partenariat a été fructueux dans la mesure où les deux partenaires ont appris l'un de l'autre. Il faut signaler que le projet a renforcé les capacités de l'organisation partenaire afin de répondre aux exigences notamment en matière de gestion de programme et gestion financière, ce qui leurs a permis de jouer un rôle dans l'atteinte des objectifs qui lui sont assignés.

Au cours du partenariat les deux organisations ont tenus à respecter les principes clés d'un

bon partenariat, notamment le respect mutuel et l'écoute, la connaissance de soi des partenaires, le partage des responsabilités et des risques et l'apprentissage mutuel.

Ainsi Plan a pu profiter aussi de :

La bonne coordination entre les équipes du partenaire

La mutualisation plus forte des compétences et des expertises autour de la même problématique.

l'ancrage du partenaire dans le zone d'intervention, grand apport par rapport l'implémentation correcte des activités, en particulier face aux défis sécuritaires.

- **Rwanda: N/A**
- **Uganda**

Implementation with Plan Uganda maintained as planned.

Plan International Uganda has maintained direct implementation of the project activities, this has enabled the project team to align the project activities with the organisation goals and set minimum standards.

The Project activities are monitored and evaluated direct project team interms of home visits, quarterly review meeting with the stakeholders, this has enabled project participants to share the pressings need and actions are developed and implemented together.

The project has good working coordination with the key stakeholders, and received technical support in terms of capacity building, which was conducted by UNHCR, Ministry of Gender Labour and Social Development, Office of the Prime Minister, Belgium National office as well as technical team from Country office.

Direct implementation allows engagement of the community stakeholders in identification of the child protection risk and action to be implemented as well as ensuring the capacity of the families as well the CBCPMs.

9. COMMUNICATION, VISIBILITY AND INFORMATION ACTIVITIES

9.1. *Planned communication activities*

The proposed project will adhere to both Plan International's standards and the Belgian Development Cooperation's Strategic Note on Communication. All visibility, communication and information activities carried out during the project implementation will inform the general public on the involvement of the Belgian Cooperation in Rwanda. The start-up workshop and all planned events will make visible the contribution of the Belgian Cooperation through media coverage, logos, and distribution of material. During the last months of the action, the exit strategy will be jointly designed with communities, and will serve as a closing workshop to make visible the achievements made by this action. Project information will further be shared with all the official and institutional stakeholders through the various working group meetings that the project staff attend during the course of the project period. The Belgian public will be informed about the project achievements through different channels of communication, including Plan International's website (Plan International will dedicate to the project a specific page on its website: www.planinternational.be), social media, newsletters, and any other printed materials issued by the action.

9.2. Outreach on durable equipment, the main supplies and on the project location

Sign posts with Belgian Cooperation and Plan International's logo will be installed at all CFS/AFS/AGSS, all billboards and other community structures targeted under this project. Both logos will be on all communication material to be disseminated under the execution of the action. Additionally, Plan International project staff, CBCPM members, volunteers, case-workers and partners will be equipped with t-shirts, caps, and jackets bearing the Belgian Cooperation logo. Finally, pull up banners, tear drop banners and regular banners will be printed with the Belgian Cooperation and Plan International logos and will be used during activity implementation, key meetings and will be placed in Plan International's offices.

9.3. Publication activities planned

Plan International will use its programming in emergencies, document its successes, challenges and identified opportunities under this project. As such, a publication will be done on good practices, challenges and lessons learnt, including programs implemented. This will be done in accordance to Plan's communications guide lines.

10. [FINAL]

• Mali

Insérer un récapitulatif des activités mentionnées dans le chapitre intermédiaire :

- 360 rencontres communautaires (communautés de Kolongo, Saloba et Sana).
- 30 messages radiophoniques et télévisés.
- 03 ateliers annuels de plaidoyer, dont le premier atelier (déjeuner-plaidoyer) pour la lutte contre l'excision et les mutilations génitales féminines (Plaidoyer en faveur de la protection ciblant les principaux responsables) et le deuxième Renforcement des systèmes de Protection de l'enfant face au développement de la situation sécuritaire dans le cercle de Macina.
- Matériel de visibilité pour le personnel terrain : 210 t-shirts et 210 casquettes distribuées aux autorités gouvernementales et parties prenantes et 1200 T-shirts remis aux participants communautaires dans les activités

- 16 banderoles, 150 affiches avec le logo de la DGD ont été créés.



- **Rwanda**

In Rwanda, all the visibility materials including banners, pull ups, badges for mentors and PTP leaders were printed with the Belgian Cooperation and Plan International logos.

During the startup workshop and introduction of the project to other partners, including Government officials, UNHCR and MINEMA representatives as well as in the community meetings, it was highlighted that this project was funded by the Directorate General for Development through Plan International Belgium National office, hence the need of ensuring their visibility in all refugee camps

- **Uganda**

All the project reporting templates have the donor logs, the signpost at the Child friendly space.

The murals drawings, tear drops, pull up banner, T-shirts and visibility jackets for the staff and volunteers.

11. HUMAN RESOURCES

11.1. Please state the overall figures by function and by status

Note that main staff categories are informed (% and number of months are fully described in the country-level budgets).

Function	Comments
Head of Project	Responsible for the implementation of the action in alignment with the action proposal, ensuring compliance of expenses, and leading reporting processes (narrative and financial), reporting to the Emergency response managers.
Project Officers	Coordinate activities at site level
MERL Officer	In charge of contextualizing Plan International's standard MERL tools, procedures and methodologies to this action; s/he will be responsible for data collection, analysis and reporting throughout the action.
Accountant	Responsible for the financial accountability of the action
Protection technical advisors – technical specialists, protection officers	Assists the head of project on protection technical aspects; s/he will liaise with partner agencies, clusters and relevant local and national stakeholders regarding protection and SGBV.
Case-workers	Caseworkers are child protection and SGBV frontline staff workers, responsible for case-management (identification, assessments, follow-up).
Administrative and logistics staff	Responsible for procurement processes, logistics, administrative operational activities, follow-up on reporting (financial, narrative and MERL).
Emergency response managers	Manages the humanitarian response and ensures that the action executed consistently; s/he also ensures the consistency of overall response portfolio (with specific attention to double funding, gap coverage, synergies across actions).
Leadership team members	MERL Manager (responsible for consistency of MERL tools across responses and supporting MERL and project staff in the field), Country Finance Manager (responsible for the execution of the budget & provision of ad hoc support to finance staff in the field), Head of Programme and Country Director (ensure compliance, strategic decision implementation, visibility and representation of the action).
Emergency Response Manager and / or Officer – Brussels	D5.1 focal point, responsible for compliance, capacity-building of field staff, support to strategic decision regarding overall logic of intervention, responsible for the quality of execution and reporting of the action.
Programme Financial Controller – Brussels	In charge of monitoring budget expenditure, compliance aspects, financial reporting.
Programme Financial Controller in secondment – Mali	Plan International Belgium mobilised an experienced Programme financial controller to support the country team in the process of the closure of the programme in Mali.
Child Protection Specialist - Brussels	In charge of capacity-building to staff on CPiE principles, tools, methodologies and processes; s/he liaises with networks, and supports evaluation processes.

Deployable Cash and Market in Emergencies Specialist	Based in Plan International Global Hub, provides capacity-building to staff based in Country Offices on CVA principles, tools, methodologies and processes.
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12. ADMINISTRATIVE INFORMATION

12.1. Name and title of the legal representative signing the agreement

Name: Heidy Rombouts; **Title:** National Director, Plan International Belgium

12.2. Name, telephone number, e-mail address and titles of the person(s) responsible for the management of the dossier

Name: François Defourny ; **Phone:** +32 (0) 497 38 26 38 ; **Email:** francois.defourny@planinternational.be **Title:** International Programs Director, Plan International Belgium

12.3. Name, telephone and fax number and e-mail address of the representative in the intervention area

In Uganda: Iveta Ouvry, Plan International Uganda Country Director. +256 414 305 000. iveta.ouvry@plan-international.org

In Rwanda: Name: William Mutero, Plan International Rwanda Country Director; +250 788 30 53 92. William.mutero@plan-international.org

In Mali: Constant Tchona; Plan International Mali Country Director; +223 71 71 63 80 constant.tchona@plan-international.org

12.4. Bank account

Name of bank: BNP Paribas Fortis

Address of the agency: Generaal Meiserplein 9, 1030 Schaarbeek, Belgium

Precise denomination of the account holder: Plan International Belgie VZW

Full account number (including bank code(s)): BE86 2900 2855 0050

IBAN code: BE86 2900 2855 0050

SWIFT code: GEBABEBB
