

ANNUAL REPORT

2020



Creating period friendly communities



INTRODUCTION

Irise Institute East Africa is a charitable, National Non-Governmental Organization established in 2016. The organization is mandated to contribute to efforts towards Menstrual Health (Hygiene) Management, and Sanitation, Women and Girls' Education and Empowerment, Gender Equality, and Reproductive Health Education. The focus on Menstrual Health Management is aimed to break the barriers to optimal performance and participation of girls and young women in economic development processes and end period poverty. Advocacy campaigns for improved menstrual health service provision in schools and in the communities is a key process.

VISION

STATEMENT:

"A world in which women and girls achieve their potential unlimited by Period"

Empower women and girls in communities to pursue their life's goals and well-being socially and economically through menstrual friendly communities, by investing in Menstrual Health (Hygiene) Management, advocating for policy change, and engaging in evidence-based research as well as building grassroots networks to design appropriate programs.

Our goals

1

Increase access to menstrual health

Increase access to menstrual health information and services to school-going girls and demystify cultural norms associated with period stigma in Uganda's communities.

2

Build authentic leadership capacities

Build authentic leadership capacities for in-school girls through the Build Back Better leadership development program to incubate, groom, and mentor for future accountable leaders.

3

Increase girls' and young women's participation

Increase girls' and young women's participation to influence and shape the policy agendas around menstrual health and hygiene and engage in evidence-based research for improved menstrual health and hygiene programming.

4

This space is the home of your inspiring goal. Share it here!

Promote economic independence for marginalized young women through improved livelihoods and building young women's networks.

5

Capacity building and institutional strengthening

Capacity building and institutional strengthening of young women's networks at national and regional levels to champion menstrual health and hygiene programming.

6

Involvement and Engagement of Communities

Involvement and Engagement of Communities, government departments, and local government into programs for technical support.

WORDS FROM THE CHAIRPERSON BOARD

I want to use this opportunity to extend my gratitude and thank all the staff at IIEA, the various government departments at the district, Irise International and other funding partners for their dedication to support initiatives working with vulnerable young women and girls across communities to end period poverty in the year 2020. In underprivileged communities where women and girls suffer all forms of violence including period poverty, what investments can we make to ensure that these women and girls across the divide continue to grow and thrive their potential in the global system? This is the cause for which Irise was established.

In the year 2020, Irise Institute East Africa has experienced change at all levels, which has propelled it to grow in many ways. Despite the break out of the COVID-19 pandemic, the organization continued to work with in school girls in primary and secondary schools, school administrations and local leaders to meet the needs of girls. The support ranged from emergency relief for food items and basic needs at family level to supporting women groups engage in production of masks as a preventive measure to curb community infection. Irise Institute East Africa also provided sanitary towels and conducted sessions on menstrual health education community champions. The COVID -19 pandemic saw an increase in safe guarding issues for children that needed referrals and this sessions on this were incorporated into the general menstrual health education sessions.

In this annual report, you can read about the many ways that Irise Institute East Africa-IIEA is engaging government departments at district level, school administrations, girls and boys in communities, the private sector, and stakeholders' organizations to change the lives of women and girls through addressing period poverty to improve their chances to live up to their full potential. Menstrual Health and Hygiene programs continue to be of high importance for the women and girls in poor communities where there is limited access and fewer choices of how the women and girls can manage their menstruation. The disruption at the beginning of the year with lockdown, only demonstrated the magnitude of the problem around period poverty and the need to continuously build back better for the girls through productive support initiatives to help them pursue their destinies unlimited by periods.



Deborah Asikeit
Chairperson Board

FOREWORD

The Year 2020 was characterized by monumental changes at the organization, restructuring at the top level with a new Regional Director, and new Board Members but also rebranding to fit the prevailing working context. IIEA continued to implement Menstrual Health Education, product distribution (pads and flow cups) to girls in communities, Emergency Relief Response program, safeguarding program, this was after IIEA school and community programs on menstruation were put on hold due to the coronavirus pandemic. The total lockdown left the economic activities adversely affected and caused many to lose alternative means of livelihoods, school-going children, and communities greatly impacted. As a result, Irise International our funding agency in consultation with other donors had to reset priorities and focus on an immediate program to address the emergencies such as the provision of food relief packs for poor communities who suffered starvation because of a lack of food, rising lack of access to menstrual health management information and products by school-going girls who were stuck in homes and communities featured as key issues that needed attention. IIEA operates at different levels, the national level where we engage policy makers on discussions around making Menstrual Health Education and Management part of the mainstream school curriculum and increasing the participation of girls in the social-economic processes of development.

Networking and collaboration; a strategy that Irise Institute East Africa embraces in the delivery of its programs thus building partnerships with young women-led organizations whose focus are interventions on menstruation health management and women economic empowerment. We further partnered with local government structures, schools, and communities in fronting collective action in addressing issues and barriers surrounding menstruation.

IIEA held strategic leadership meetings with the newly appointed Board members, internal senior management staff, and participated in the global meeting organized by Irise International to develop a new Global Strategic Plan to generate broad strategic -program themes that would guide country-specific plans starting January 2021.

We continued to participate in networking national meetings with the MoES gender department to contribute to the process of standardizing materials to be used in menstrual health education for schools and communities. IIEA hosted a team from Domino Effect to film a documentary in communities on how menstrual health needs have evolved and the response mechanisms funded by Irise international. IIEA further strengthened the capacities of vulnerable communities, women on livelihood security while supporting their rights to live free of economic suppression. We recognize and appreciate the notable support we received from the various local government offices such as CAO, CDO, DISO, DEO as well as lower political structures like the LC1 office. Their support towards our project work cannot go unnoticed. We are committed to the pursuit of a period-friendly East Africa where girls and women celebrate their womanhood, attain economic equality, and are empowered to take lead in pursuing their rights to education, social inclusion, and health individually.

IIEA continues to work together with partners and local communities in Uganda to alleviate period poverty, end inequality in services and products geared towards managing menstrual health. We shall strive to strengthen and empower the voices of girls and young women, and men through education and skills to improve the lives of girls in schools and in communities. IIEA believes that fundamental change will happen in Uganda with a shift in policies and practice, and when citizens can exercise and claim their rights and responsibilities.



**Lilian
Bagala**
Regional
Director East
Africa

**“FUNDAMENTAL CHANGE WILL HAPPEN IN
EAST AFRICA WITH A SHIFT IN POLICIES
AND PRACTICE, AND WHEN CITIZENS CAN
EXERCISE AND CLAIM THEIR RIGHTS AND
RESPONSIBILITIES,”**

LILLIAN BAGALA, REGIONAL DIRECTOR

CONTENTS

07

APPROACHES

08

PROGRAM OVERVIEW

09

NUMBERS REACHED

10

ACHEIVEMENTS

23

CASE STUDIES

25

LESSONS, LEARNINGS AND CHALLENGES

26

APPRECIATION AND REMARKS

28

IRISE INSTITUTE EAST AFRICA BOARD
MEMBERS

29

TEAM IIEA

33

OUR PARTNERS

IRISE INSTITUTE EAST AFRICA APPROACHES:



"IIEA uses partnerships and movement building arrangements in the execution of her work both at regional, national, and grassroots levels through civil society networks, private sector, government, and the communities. We believe that by working in collaboration, we can build synergies, reach more people.

As we continue to build a governance structure that enables young women to occupy and influence leadership, our focus is on implementing policy advocacy-focused programming, menstrual education, and leadership development programming for young girls through a build back better model to address period poverty, capacity building for institutional strengthening of young women's network organizations as well as local governments. We engage in research, product development, and distribution of sanitary towels to school going girls in primary and secondary levels. Our economic empowerment program targets women groups in communities surrounding schools to make the linkage between the girls and the community for effective and sustainable development.



PROGRAM OVERVIEW

“Our Programs are hinged on the following thematic areas”

Menstrual Health Education and Product Distribution.

IIEA Menstrual health education and management program aims at increasing menstrual health knowledge and information for girls, boys and parents in communities and such sessions are designed and delivered with well trained personnel. The program also along the way introduces different menstruation management products for girls and distributes to those girls benefiting from our programs. These include reusable pads, disposable pads, flow cups so far that IIEA has managed to secure support for.

Policy, Advocacy and Research.

IIEA has participated in different research processes that have produced evidence on practical interventions that stakeholders rely on in designing programs to address menstrual health in communities. IIEA has evolved from a grass-roots implementer of social programmes to improve menstrual health knowledge and access to menstrual products through education and empowerment to platforms that advocate for menstrual hygiene reforms, discuss policy guidelines to influence multi-sectoral approaches that address gender equality as well as form partnerships for scientific research and synergies that can inform resource mobilization. Through our arm on Policy, Advocacy and Research IIEA has partnered with UKAID, The University of Sheffield and John Hopkins University through Irise International in 3 separate research projects that have led to 4 different publications since 2015.

The experience has enriched the IIEA programme team in data collection, community mobilization for sampling and ethical compliance. IIEA regards policy processes as key to improving menstrual management and on the back of this, has executed evidence-based programming to pilot and validate-

behavior change models and has produced evidence about practical interventions that stakeholders should rely on in designing programs to address menstrual health in communities.

Emergency Relief Response to COVID-19.

The project was designed to provide emergency relief for identified and assessed vulnerable households in the community that were drastically affected by the lockdown and resultant loss of livelihoods due to corona virus pandemic.

The COVID-19 pandemic has had both short term and long-term implications for families, friends, and communities. The pandemic impacted on our work as an organisation dedicated to improving education outcomes, welfare, and well being of girls by creating menstruation friendly communities to keep girls in school. With the limitation to school engagement IIEA was resolute about its support to vulnerable girls, women, and community at large, thus designing a wholistic program on emergency that addressed the basic needs of food and hygiene integrating menstrual health in our response.

This project ensured that IIEA remained active and relevant to its beneficiaries and the affected target communities in creating hope and inspiring perseverance. During implementation, the vulnerability of children, girls and women became clearer as many vices for example child neglect/abandonment, domestic violence, child abuse, transactional sex became rampant and children were particularly vulnerable. The program therefore centred its support on children targeting the following categories:

Child headed households

Children with Disability households

Children living in extreme poverty Households

NUMBERS REACHED

9,975

REACHED WITH
MENSTRUAL HEALTH
EDUCATION

4,058

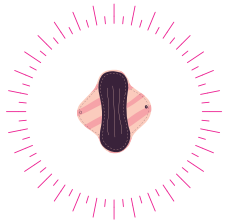
SUPPORTED WITH
EMERGENCY RELIEF
ASSISTANCE

100

PARTICIPATED IN
DEBATES

In 2020, we worked in Uganda, specifically in Jinja and Soroti districts where we targeted schools and communities. We engaged community leaders, teachers, parents, girls, and boys - in and out of school, local government at district and sub county levels, religious & cultural leaders to end period poverty and emergency relief response.

ACHIEVEMENTS IN THE YEAR 2020:



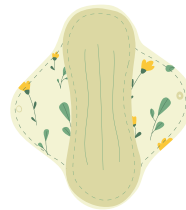
4000

REACHED IN
MENSTRUAL
HYGIENE EDUCATION
AND PRODUCT
DISTRIBUTION FOR
MENSTRUAL HEALTH
MANAGEMENT.



18

TRAINERS
WERE TRAINED
ON MHE/M FOR
MENSTRUAL
HEALTH..



1588

GIRLS WERE
SUPPORTED
WITH REUSABLE
MENSTRUAL
PRODUCTS.



100

CERTIFICATES
WERE
AWARDED TO
WINNERS IN
THE DEBATES



2,800

SCHOLASTIC
MATERIALS
GIVEN



WORKED WITH
STAKEHOLDER
S AT
THE DISTRICT
LEVEL



CAPACITY
STRENGTHENING
FOR LOCAL
GOVERNMENT
AND COMMUNITY
LEADERS.



1,298

RECEIVED FOOD PACKS



EMPOWERMENT FOR
WOMEN AND YOUTH
TOWARDS ECONOMIC
DEVELOPMENT



WORKED WITH LOCAL
PARTNERS IN
FRONTING OUR
VISION.

A) NO MORE TURNING A BLIND EYE TO GIRL'S RISKS;

MENSTRUAL HYGIENE EDUCATION AND PRODUCT DISTRIBUTION FOR MENSTRUAL HEALTH MANAGEMENT

With the financial support from Irise International Charity, IIEA continued to implement its Menstrual Health Education program, by providing knowledge to girls, boys, women, parents, and leaders. Menstruation requires a holistic approach in management at home, school, and community. Poor handling can result in school dropout, early marriages as well as early pregnancy since girls seek acceptance and means of management. We had the opportunity to engage the government and stakeholders to understand the magnitude of impact and the different avenues to address the issues affecting girls and women. Sanitary materials such as pads and flow caps were provided to girls and young women. Irise Institute East Africa employed different approaches to reach different categories of beneficiaries with knowledge and information on MHE/M.



MHE session in community by IIEA staff during COVID-19 and distribution of re-usable pads for primary school girls in Jinja

Fig 4: A door to door session on MHM being delivered by a Community Champion and in fig 3 is a schoolboy making remark during a school MHE session.



B) CLOSING THE GAP: TRAINING OF TRAINERS ON MHE/M

We conducted training for 18 teachers, 9 females and 9 males to close the gap of unawareness and to make them champions for menstrual health in their different schools. During the training, we explored ways that teachers can support girls during their course of studies and reduce the pressure boys and girls experience as they start puberty. During the training, the teachers shared different scenarios that they had come across in their schools and contributed to various approaches to address each. The Senior Man/Woman teachers mastered the art of answering difficult questions on menstruation and puberty especially those on the anatomy and menstrual cycle and their session delivery capacities were built. IIEA gave each school a set of 5 training diagrams on puberty, anatomy, and the menstrual cycle to be used for demonstration during MHE in their respective Schools. In addition to that, each teacher received 2 copies of the Core Knowledge teachers' manual. The diagrams and the teacher's manual will be used by teachers for their lessons.



“Teachers are the primary resource for menstrual health concerns in their respective schools.”
Agnes Akullo,
Program Manager
IIEA

C) GIRLS SOAR IN SCHOOL WITH SAFE, AFFORDABLE MENSTRUAL HEALTH PRODUCTS

In partnership with Cova Project, IIEA supported 1000 girls of reproductive age in 9 secondary schools with menstrual flow cups upon completion of the two MHE/M sessions in the schools, in addition the girls received bars of washing soap, this was aimed at encouraging hygiene management during periods. The flow cup is an affordable alternative for the vulnerable girls that are our target group because of the 10-year life span of usage. This will enable sustainable management of periods and will allow girls to focus on their education thereby reducing absenteeism from school and increasing participation in extracurricular activities as well as social engagements in and outside the school settings. In addition, IIEA distributed reusable menstrual products to 353 girls from 9 primary schools in Butagaya Sub-County and Buwenge TC and 235 reusable pads to girls of menstruating age during two community outreaches in Buwenge. The reusable pads revamped the dignity of girls especially in Butagaya, one of the sub counties where menstrual taboos used to be very strong with most girls using unconventional products and methods for example dried banana fibre and tying a string of these leaves around their waist to hold the “Pad” because many lacked panties to manage their periods. These interventions were intended for girls from the most vulnerable families who are of menstruating age and cannot afford sanitary products, these products will give relief and allow girls to focus on school participation. It also served as a platform to offer guidance and counselling to girls and the parents to establish a support system within the family and community at large .



With support from Mission Africa, we initiated innovative approaches in addressing MHE/M using debates in Butagaya Sub County. IIEA mobilized communities through the already existing community champions to identify school going girls and boys to participate in debates to share information and views on menstrual health management. The activity was well received and drew participation of over 100 students, certificates were awarded to winners in the debates.



Fig 4: Proud and excited girls showing their flow cups from the COVA Project as an alternative product range (top right)

D) STAKEHOLDERS ENGAGEMENTS, EXPERIENCE GREATER IMPACT!

2020 saw IIEA work with a divergent group of stakeholders at the district level. The outbreak of the Covid-19 pandemic posed new restrictions on usually acceptable gatherings in schools and communities. All our work required permissions from the District Internal Security Office. Our engagements strengthened impact because we secured permission to gather schoolgirls, conduct MHE sessions, implement activities and identify more women and girls. In June 2020, we held two community meetings to assess the impact of the Covid-19 pandemic lockdown to the lives and livelihood of people living in and around Buwenge Town Council in Jinja district. Through these meetings, a collective action by leaders both government and non-governmental leaders was drafted. It aimed at addressing the vices that increased gender-based violence, domestic violence, child labor and early marriages. Similarly, the deliberations to understand the status quo were made and interventions to address the most pressing needs were tailored. For example, the most at risk were identified; these include the elderly, those with ill health, families with children as care givers, orphaned and abandoned children. In addition, some women were abandoned by their husbands, some subjected to GBV despite the many children in need. Women in those categories were prioritized and supported. We further established collaborative efforts with 24 community leaders including the LC1, Women leaders commonly known as “Nabakyalas” in Jinja and 8 Menstrual Health Champions.

IIEA conducted a stakeholder safeguarding meeting at Buwenge town council offices in Jinja district. The meeting's focus was to come up with clear pathways on how safeguarding cases were identified in the community and how they can be reported and referred households with the office of the DCDO. During the meeting, the DCDO and his team agreed to undertake an assessment visit with the IIEA team and local leaders for household verification and needs assessment. To date 12 households have been assessed and 7 of which initial processes to get assistance have been initiated with the support of line partners both government and private.



Fig 1: Community Engagements in Buwenge sub county



Fig 2: A section of the stakeholders we engaged in school, Teachers and Parents.

E) CAPACITY STRENGTHENING FOR LOCAL GOVERNMENT AND COMMUNITY LEADERS.

We made commendable efforts to ensure community participation in decision-making and highlighted respect for rights of girls in participation in education, social and economic sectors of life without periods being a barrier to full participation. While working with our partners in the lower local government, we were able to actively involve a network of community champions for menstrual health and facilitated the champions to push the agenda of period rights in these communities. Several activities were implemented to strengthen capacity and increase participation of community leaders. We conducted 6 FGDs and 2 community awareness workshops. One workshop specifically targeted Muslim Religious Leaders. Their capacity was strengthened to hold their leaders accountable. As a result of this, 214 people, 67 male and 14 female stakeholders voiced concerns on the state of the schools, community, and places of worship in handling menstrual matters. More so, menstruation friendly checklists were adopted in schools, including where IIEA had not targeted schools, the Muslim leadership committed to initiate discussions in the wider Muslim community, and members had a list of priorities for MHM in schools that were forwarded to the sub county leader to consider in district support in schools.

The FGDS were attended by CDOs, Head teachers, PTA, Parish chiefs, LC1s and representative members from the communities from Butagaya, Buwenge TC, Busedde, Kakira and Budondocounties in Jinja district.



Fig: staff from IIEA conducting Capacity Strengthening

F) MITIGATING CHALLENGES WITH EMERGENCY RELIEF

The COVID-19 pandemic has had both short term and long-term implications for families, friends, and communities. It has had a tremendous impact on our work as an organization dedicated to improving education outcomes, welfare, and well being of girls by creating menstruation friendly communities to keep girls in school. With schools as our entry point, that was not an option as a response route during the national lockdown. However, driven by the desire to continue being relevant in the communities we serve, we made a conscious strategic decision to channel some of our budgets to emergency response in consultation with Irise International. As the National Taskforce worked hard to flatten the curve of the virus spread, the already vulnerable groups faced multiple new concerns including physical and mental health risks, schools and business closure, family confinement and congestion, isolation and economic vulnerability. IIEA emergency response was timely in addressing some of the negative effects of the lockdown which are raging through the community and breaking families, as GBV, child abuse and abandonment were on the rise.

IIEA in partnership with the team leader Jen from Irise International conducted a needs assessment study to establish the extent the COVID-19 pandemic affected communities and especially girls and other stakeholder's approaches to manage menstruation. The assessment findings through FDGs with girls, parents and the in-depth structural interviews with local government officials (CDOs, Head teachers of schools, Senior women teachers, and others), In the preliminary report shared by Jen findings indicate that Covid-19 outbreak has had far reaching negative effects on the girls. The lockdown has magnified and exposed some of the vices that to an extent existed due to desperation, idleness, and psychological effects of isolation. In the report indicates a rise in transactional sex, teenage pregnancies, early marriages, Child labour, domestic violence, abandonment/neglect by parents/guardians, physical abuse, starvation and limited and in some cases no access to sanitary products for management of menstruation. Many girls will not be able to return to school because they have been trapped into child motherhood. Two of recommendations from the report call for increase on interventions around child safeguarding, and collaboration with the Jinja District Local Government to bring these findings to their attention and to forge solutions in mitigating and addressing some of these rising vices against the girl child in communities in and around Jinja District.

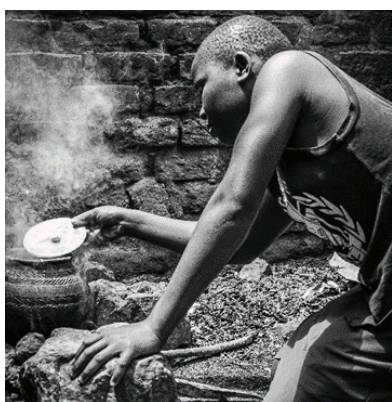


Fig 2 and 3: Pictures of a focus group discussion with a group of young mothers and a key informant interview with a teacher of Busiya Parents school taken during a needs assessment on the impact of Covid-19 on menstrual health management and access to menstrual health products.

CRACKING THE CODE THROUGH RADIO TALK SHOWS FOR TRANSMISSION OF MESSAGES ABOUT COVID -19

“The covid-19 pandemic hampered movements and activities that required mass engagements. We conducted radio talks with local community radios to share accurate and relevant information on prevention, treatment and management of COVID-19 reaching over 1900 people.”



“The covid-19 pandemic hampered movements and activities that required mass engagements. We conducted radio talks with local community radios to share accurate and relevant information on prevention, treatment and management of COVID-19 reaching over 1900 people.”

Fig 1 and 2: Champions in different community radios during talk shows on Covid-19.

G) PROTECTING CHILDREN, UPHOLDING, SAFEGUARDING FOR THEM AND ADULTS AT RISK

Safeguarding children is a humanitarian concern that has been ignored and has exposed children to abuse, neglect, physical violence, sexual violence, and emotional abuse, and has denied children their right to protection, survival, education, and participation. It is the responsibility of adults to fully provide for children, and give adequate support of necessities; however, this has not been the case for all children as many have been victims of these vices. In 2020 IIEA undertook emergency relief response to identified vulnerable target communities as recommended by the Office of the DCDO. During relief food distribution we captured several safeguarding issues in the community, thus highlighting the importance of integrating safeguarding at the forefront of our program work. Children have been greatly affected as GBV, sexual violence, illness, and loss of sources of income increased consequently breaking up families. In this year we documented and reported to the office of the Community Development Officer/Probation 211 people, 68 males and 143 females in situations that call for safeguarding.

IIEA worked closely with the District Probation Officer to undertake verification and needs assessment exercise of households that were identified with safeguarding concerns during implementation of IIEA programs. 12 households were visited during this first phase, 7 were linked by the Probation officer to identify organizations for continuous support. 3 families particularly with elderly persons taken care of by grandchildren were initiated into SAGE, a government initiative to support the elderly. In addition, the Probation officer identified 2 households that will receive start-up capital from Jinja District Local government.



We strengthened our safeguarding efforts in the year 2020 by organizing a child safeguarding essential training for 11 people, 6 female and 5 male stakeholder champions and local community leaders. The training empowered and increased knowledge on key aspects of safeguarding, and skills in dealing with incidents when identified. The training encouraged the participants to realize their noble duty to remind parents and community members of their obligation to offer support and all necessary needs for children and care to the elderly or sick. Topics covered include General understanding of safeguarding, categories of safeguarding, Child safeguarding, Principles of safeguarding, policies of safeguarding, dealing with Perpetrators, Identification of child safeguarding incidents, Examples of Safeguarding incident responsibility and response, information gathering or collection, reporting, referral process, and follow-up. Champions with support from local leaders are spearheading safeguarding, identifying, and reporting cases to the Community Development Officer at the TC office.

H) SPEARHEADING ECONOMIC EMPOWERMENT FOR WOMEN AND YOUTH TOWARDS DEVELOPMENT

Irise institute East Africa partnered with Irise international to increase access to resources and opportunities for vulnerable groups especially women in Walukuba, Jinja District. Walukuba Women's group is an organized group of 20 women based in Walukuba in Jinja district who organized themselves to make craft necklaces, bracelets, bags, mats, and table mats. This was their primary source of income before Irise International identified the group and tutored them in hand stitching reusable pads. The group later grew, received tailoring skills, procured sewing machines, and currently tailor a variety of items ranging from bags, dresses, shirts, shorts, and most importantly reusable pads. With the challenges posed by Covid-19 in 2020, IIEA received funding support from Irise International to facilitate Walukuba Women's Group with a short-term mask making business. The group was trained on designing, cutting, and making 3 different types of masks using different fabrics, this was during a 3- day training that included business skills and entrepreneurship training and business plan writing. Walukuba Women's group" produced 2776 masks in a period of 1 month and have so far sold more than 1500 masks. The group has been skilled to increase their self-employment opportunities and productivity and have continued with mask production, making reusable pads and craft items. Individual projects have sprouted in the group with some using the skills attained to venture into goat rearing, poultry and groundnut paste production.



Fig 15: One of the women from Walukuba women group started her own enterprise selling fresh vegetables Fig 14: Part of the women supported by IIEA sewing homemade masks for sale and taking stock

I) GROWING OUR PARTNERSHIPS TO FRONT PERIOD POVERTY.

Partnership is one of the strong building blocks that is necessary to strengthen the impact because the different partners offer skills, ideas, resources both financial and Human and those put together are vital for increased productivity. In 2020 IIEA has worked closely with several partners, and this collaboration and coordination enabled us to achieve greatly. We worked with local partners at the community level, local government, international partners, and women networks in fronting our vision.



Fig 1: IIEA board members first meet up at Hillside Hotel Kampala Fig : The Regional Director representing IIEA at the National Stakeholders meeting to validate and standardize the training manual for MHE in school and out of school communities.



J) BUILD BACK BETTER: KEEPING GIRLS IN SCHOOL THROUGH SCHOLASTIC MATERIALS.

This project was conceived to counter the negative impacts of the lockdown that have ravaged the social and economic system of the country due to the corona virus pandemic thus affecting the ability of vulnerable families to provide basic items for return of girls to school in Soroti District. The project seeks to finance a package of essential interventions for preserving critical effective education service delivery of acceptable quality in response to the current economic crisis due to the negative effects of COVID-19. The intervention is aimed at helping poor families to keep their children at school and encouraging the girls to remain until completion of the primary education cycle. For the past 2 years Irise Institute East Africa in partnership with Irise International implemented “Girls in Control” project in Soroti district that delivered a package to build the capacity of schools to act in line with the Ministry of Education’s call to support girls during menstruation and remove a neglected barrier to their full participation in education. The Build back Better has complemented these efforts. The project targeted P7 girls in the most vulnerable schools and provided essential scholastic materials (books, pens, pencils, mathematical sets). Our endeavours are ensuring that girls are sustained in school and their learning is enhanced thus providing an opportunity for improved performance and It has complemented the efforts made by the school, parents, and education sector in providing access to education for the girls while building on existing mechanisms and activities designed for schools in coping during the pandemic.



K) ECONOMIC EMPOWERMENT AND GENDER:

The project will partner with the Easy pad community of Irise Uganda Limited to respond to engage them in income generating activities that provide access to hygiene products such as the making of face masks; reusable pads; under garments and even soap. The patrons of IUL will be linked to other vulnerable communities so that they can train them in the making of the same. Identified communities will target 20 individuals from vulnerable households of either child headed homes or victims of domestic violence and abuse.



Section 3:

OUR STORIES OF CHANGE

a) Jonah, a 15-year-Old Boy and His Family.

Katege Umar Jonah is a 15-year-old boy in the family of Katege Ashiraf living under the care of his parents with 3 other siblings in Kadiba Zone. According to Jonah's mother, Jonah was born normal, during the sensor motor stage, the boy started experiencing signs of epilepsy, he was treated once and he did not recover, however, from that time the family has had financial constraints to continue with treatment. The father used to be a taxi conductor before Covid-19, his mother used to sell charcoal, but they all lost their businesses due to the lockdown which has left the family in extreme poverty. The mother started selling sugarcane, a business that had low sales that sometimes they would go hungry on a bad day. During the lockdown due to COVID-19 pandemic, the family received food assistance from IIEA, and the champion supported them with medicine to cater for Jonah. Follow up has been made 2 times so far, the family's concern is on the boys' medication they can't afford, lack of food and education for Jonah who is passionate about his studies. IIEA in partnership with the Office of the DCDO engaged Jonah's family has linked him to a child centred organization for further management of his case. IIEA is committed to ensuring that all the identified cases are reported to the Probation Officer through the Office of the DCDO.



Fig 19: Jonah standing on the right with his two siblings

b) A thank you Note from Our Beneficiary

"I appreciate Irise East Africa for the food necessities which you provided to my family during the pandemic. You never found me home during your second visit because I had take my two young boys for treatment. There is no way I can express my happiness".

Teacher Beatrice Naigaga
KABI ZONE
JINJA - UGANDA

c) Remarks from The Head Teacher Aminit Madera a beneficiary school of the Build back better project (keeping girls in school)

"Most girls do not have mathematical sets; they borrow from other pupils during exams."

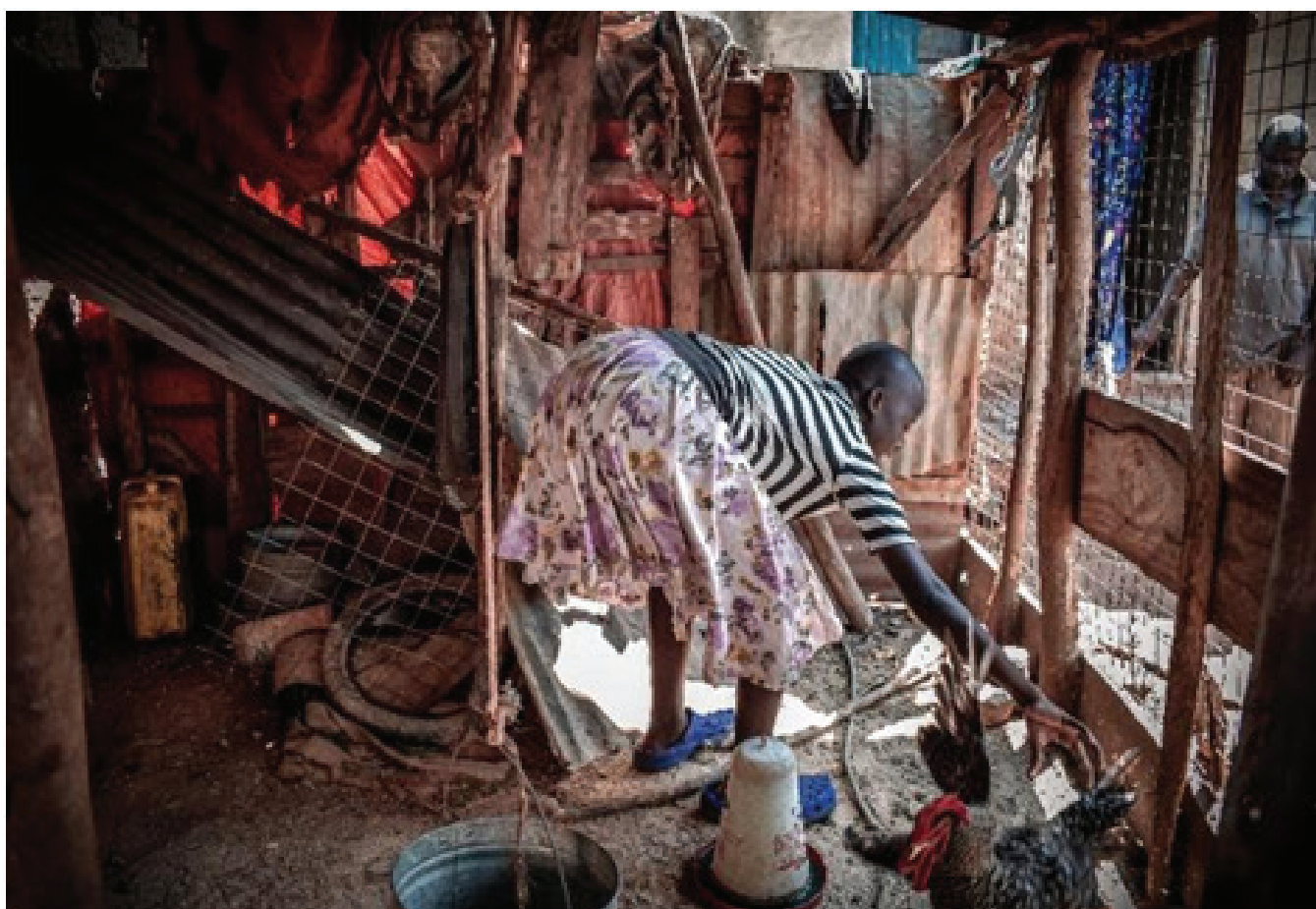




Figs 20,21 & 22: read Pupils of Rock View and Aminit primary schools receiving scholastic materials.

Section 4:

LESSONS, LEARNINGS AND CHALLENGES



Coronavirus Pandemic Outbreak: Several of our programs were affected due to the lockdown and curfew that the country experienced. These affected our operations as most schools were closed and meetings could not be held as planned due to restrictions on gatherings. We adopted use of online communications and use of local community radios to pass on the information without putting the community at risk.

The emergency relief program was an alternative that would deal with basic needs of population in poor and vulnerable communities. This included distribution of food items to the most vulnerable communities. However, transportation was a big issue since vehicles had limitations, hence reaching planned people took a lot more time by the team. The staff were at high-risk of exposure to COVID -19 however, the organization took measures to adapt to the new normal by working from home -

and by observing standard operating procedures whenever visits were made to the field and to offices.

This posed challenges and risks regarding time within which to deliver on tasks. The high costs of internet, and airtime slowed down staff operations. Inadequate funding in implementing some of the programs and reallocating funds to meet the current needs. The organization had to halt the in-school programs because many children were at home and IIEA could only identify a few to participate in the programs and majority were in far and hard to reach communities.

With the School reopening for candidate classes, IIEA identified several girls as beneficiaries for scholastic materials distribution but the funds were inadequate to reach all of them.



Fig 23: A group of young MHE champions participating in the party period

In most of the rural areas where our programs were implemented, there was difficulty in accessing certain areas due to poor roads. Network was also poor hence hindering communication with participants.



Committed to
GIRL CHILD
Cause!

IRISE INSTITUTE EAST AFRICA BOARD

Board Chairperson
MS. DEBORAH ASIKEIT



Finance Treasurer
MS. CAROL NAMAGEMBE



Board Member
SAMUEL KAVUMA



Board Member
MS. JACKIE ATEI



Board Member
GEORGE KANYOMOZI



Board Member
MS. REGINA NDAGIRE



TEAM AT IIEA

Regional Director
LILLIAN BAGALA



Program Manager
AGNES AKULLO



Finance Manager
HELLIOT OPYEM



Program Coordinator
IVAN KASADHA



Community Educator
JOYCE AKELLO



Community Educator
SALIMA SADIYA



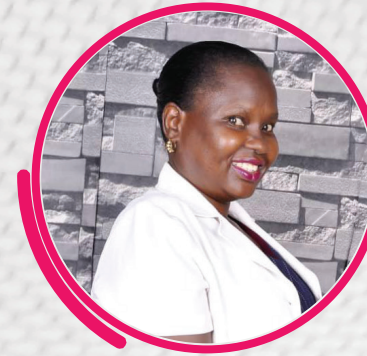
Community Educator
SARAH NAMUMBYA



Community Educator
SUZAN ALOBO



BookKeeper
BETTY ADEKE



BRIEFLY BELOW IS A LIST OF OUR PARTNERS.

In 2020, IIEA operated and supported women and girls in Jinja nd Soroti districts to achieve their potentials unlimited by periods because of the generosity from our funding partners. We empowered and protected women nd girls and transformed our lives on the ground. We appreciate Irise International, UK aid, The BigGive, Mission Africa, Genesis, Cova, Waterloo Foundation, The Circle and Sustain For life for their long-standing commitment to creating period friendly communities.



UK AID DIRECT



Irise International

thewaterloofoundation*



theBigGive

**IRISE
INSTITUTE
EAST
AFRICA**

**THANK
YOU!**

FIND US

 **@Iriseinstitute_eastafrica**

 **Irise Institute East Africa**

 **@Iriseeastfrica**

 **Irise Institute East Africa**

 **www.irise.org.uk**

 **+256 756 481 262**

 **info@irise.org.uk**