



1. General Information,	
Project Title:	Girl's Health Life Effect (GHLE)
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Submitting organization:	TEENS Uganda, P.O. Box 23567 Kampala, Uganda Email: info@teensug.org Website: www.teensug.org
Project Location:	Wakiso and Kampala (Rubaga Division)
Project duration	12 months
Funds requested from	Total Project Cost: USD 96,670.2
Support Implementers	1) Ms. Helene H. Oord (Founder- Worldview Mission) Email: worldview.mission@gmail.com , Tel: +31636108563 2) Dr. Obi Ejeatuluchukwu (Chair dept Health Worldview Mission) Email: ejeatuluchukwu_obi@yahoo.com Web info: http://worldviewmission.nl/ http://www.new.worldviewmission.nl
Project Objectives:	Overall Objective: To enhance the ability of girls and young women from 12 to 24 years to obtain comprehensive abortion care and prevent teenage pregnancy in Wakiso and Kampala (Rubaga Division) district. Specific Objectives: 1. To increase on the information dissemination on SRH/R among girls and young women between (12-24 years). 2. To reduce on intersecting stigma girls and women face while seeking comprehensive Abortion Care. To strengthen collaborations with 10 partner organisations i.e. Health facilities (public and private), CBOs/NGO that provide SRH services) that engage in the SRH/R activities within Wakiso and Kampala (Rubaga Division) 4. To monitor and evaluate (M&E) Girl's Health Life Effect programme activities in the district.
Primary Audience	Youth between 12-24 years

Project expected results	<ol style="list-style-type: none"> 1. A total of 8 peer educators and 20 VHTs trained in implementing SRH programs attached to the office. 2. 20 school SRH clubs formed 3. 200 young people will be recruited as peer educators both in schools and communities 4. 12000 students will be reached with information on SRH/R 5. Shared information On teenage pregnancy and abortion stigma 6. 4000 community members engaged in dialogues on SRH stigma 7. 1350 girls and young women referred for Comprehensive Abortion Care (CAC) 8. 10 partners joining hands with Teens Uganda to advocate for Comprehensive Abortion Care (CAC) 9. Distribution of IEC materials (booklets, posters, banners, T-shirts, pla cards brochures) developed by TEENS Uganda and its partners to schools, health facilities and house holds
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Project main activities	<ol style="list-style-type: none"> 1. Training of 8 peer educators and 20 Village Health Teams in Wakiso and Kampala district. 2. Develop and disseminate IEC materials 3. Conduct continuous dialogues and meetings 4. Offer Referrals to clients for need SRH services/ products 5. Monitor and Evaluate the project progress
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2. Project Summary

The proposed Girl's Health Life Effect (GHLE) project is planned for one (1) year beginning when money is secured and MoU signed, has a total budget of **\$93,251.4**. GHLE is a gender sensitive initiative aimed at enhancing the choices of youth and young women towards accessing services as well as enjoying healthy life styles through social and behavioural change strategies embraced by communities. Project intends to ensure; increased access to Sexual Reproductive Health Rights information and service delivery among youth, young women, learning institutions and media. Teens Uganda will work with the community to reduce on Teenage / unwanted pregnancy and abortion stigma which contributes to unsafe abortion that leads to the death of girls/women. The project will target over 50,400 youth in and out school, 208 peer educators, 200 families, 8 media houses as well as leadership at local and district

levels especially influencers. The project will implement peers skills trainings and consultative meetings/ programmes to support (complement) the advocacy activities of the project through selected trainees and mass/public awareness programmes. Using the SRH rights based approach; the project team will offer peers and capacity skills among different audiences, for effective implementation as well as influence decisions making processes for social justice among young women by bringing on board their male counterparts in making better health choices for lives.

3. Background of the Project

3.1 Statement of the Problem

According to findings by the United National Population Fund (UNFPA) 2013 on teenage pregnancy, of the 1.2 million pregnancies registered annually in Uganda, more than 300,000 of them are of girls below 19 years. This also forms the bulk of the nearly 700,000 pregnancies which are unwanted. The picture gets grimmer when you learn that these teenage girls also end up as the majority who procure abortions largely because most of these pregnancies are a product of sexual abuse, revealing that over 5% of Ugandan women aged 15 to 49 performs unsafe abortions every year. More findings reveal that almost 4 out of 10 (38%) of the unintended pregnancies in Uganda result in abortion, and an estimated 362,000 induced abortion occurred in 2009 compared to 297,000 in 2003 suggesting an upward trend. The health data system reveals that most of these pregnancies are a product of early marriages, ignorance, and lack of access to reproductive health information, poverty and including cultural practices. Of these, poverty seems to stand out. Statistics from Uganda Bureau of Statistics show that adolescents from poor families are more likely to get pregnant than their colleagues from wealthier families but abortion is common among both. Even when the girls have been abused, the poorer families are most likely to let the abuser get away with their crime than the well-to-do families. The question of access to information is critical too. Using the fear approach, the silence on reproductive health tackling prevention of unwanted pregnancies and abortion stigma must be broken through regular and sustained information dissemination strategies that ensure continuous information flow, change of behavior and as well influence policy structures for flexible life-choices and promotion social cohesion.

3.2 What has already been done?

Due to the growing health demands and need to save human lives, there has a been an improvement in the general health care system since the 1980 to 1990s leading to the reduction of child mortality rate due to the adaption of immunization, blood screening and treatment. However, the rate of mortality and mobility among young women bearing unwanted children and procuring all forms of abortion is till high. Teens Uganda with support from Ipas Africa alliance and Uganda Private Mid-wife Association (UPMA) have been implementing a project on reducing on SRH stigma including abortion stigma at the community level by taking interest in the need to save the lives of un-intending mothers who choose to procure abortion to conduct the process professionally through holding continuous dialogues, sharing

preventative practices such as use of contraceptives, but also redress actions for complex cases of unsafe abortion among many girls and young women.

4 Project Descriptions

4.1 General Objective/Goal

To enhance the ability of girls and young women between 12 to 24 years to obtain comprehensive abortion care and prevent teenage pregnancy in Wakiso district.

4.2 Specific Objectives/Purpose

1. To increase on the information dissemination on SRH/R among girls and young women between (12-24 years).
2. To reduce on intersecting stigma girls and women face while seeking comprehensive Abortion Care.
3. To strengthen collaborations with 10 partner organisations i.e. Health facilities (public and private), CBOs/NGO that provide SRH services) that engage in the SRH/R activities with in Rubaga Division, Kampala District

4.3 Key Outputs (Results)

The program outputs aligned under specific objectives will include;

SPECIFIC OBJECTIVE 1. To increase on the information dissemination on SRH/R among girls and young women between (12-24 years).

Outputs

1.1. A total of 60 outreaches in schools and community on reducing teenage pregnancy and abortion stigma held using public address system.

1.2. Have SRH/R promotion messages developed and aired 3 times daily for the first three months and 36 times every month for the next nine months. Distribution of IEC

materials (1000 booklets, 200 posters, 50 banners, 2000 T-shirts, 200 post cards 2000, brochures and 400 badges/tags) developed by TEENS Uganda and its partners to schools, health facilities and households.

SPECIFIC OBJECTIVE 2. To reduce on intersecting stigma girls and women face while seeking comprehensive Abortion Care

Outputs

2.1 Have 4000 community members engaged in dialogue on SRH stigma

2.2 A total number of 80 girls and young women referred for safe abortion

SPECIFIC OBJECTIVE 3. To strengthen collaborations with 10 partner organisations i.e. Health facilities (public and private), CBOs/NGO that provide SRH services) that engage in the SRH/R activities in Wakiso and Kampala (Rubaga Division) District

Output

2.1. A total of 10 partners joining hands with Teens Uganda to advocate for safe abortion care.

SPECIFIC OBJECTIVE 4. To monitor and evaluate (M&E) Girl's Health Life Effect programme activities in the district.

Outputs

4.1. A total of 12 monthly progress reports, 4 quarterly reports, 2 MSC reports and 1 annual report shared with stakeholders.

4.2. Have 4 financial reports submitted;

Assumptions

It is assumed that there will be;

1. Collaboration and acceptance of Girl’s Health Life Effect programme by the district and community leaders.
2. Acceptance and support of Girl’s Health Life Effect programme by the community.
3. Adequate funds for implementation of activities and timely delivery of Girl’s Health Life Effect for the programme period.
4. Through continuous dialoguing with different players in the community the behaviour of young people can be changed hence bring about social behavioural change.

4.4 Targeted beneficiaries

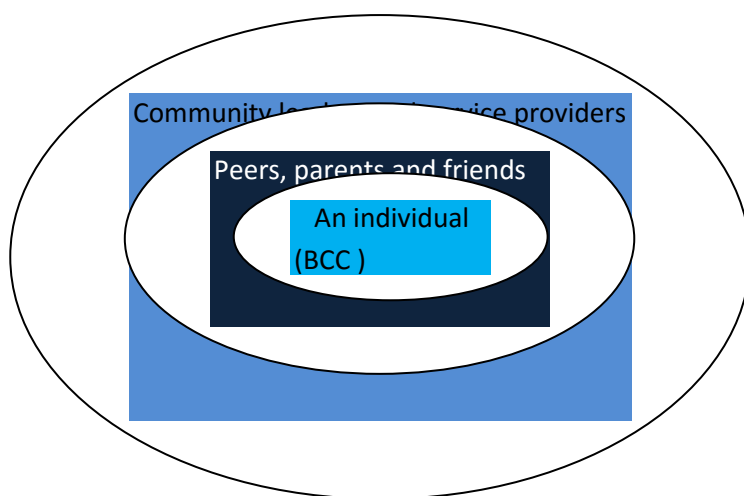
The Girl’s Health Life Effect programme will target all youth between the age of 12 to 24 years in Wakiso and Kampala (Rubaga Division) District, both in school and out of school.

Table 1: Target audience	Targeted category	Targeted number
In school youth	Students	12,000
	School staff	300
	Administration	150
Out of school youth	Organised youth groups	50*20 1000
	Women groups	50 *20 1000
Stake holders	Health workers	50
	Local leaders	100
	Religious leaders	60
	Cultural leaders	50
	Parents of the students	300
Total	Approximately	15,000

4.5 Main Components and Activities

Key activities/components of Girl’s Healthy Life Effect programme
Implementation Strategy

SBCC approach



Social Behavioural Change Communication approach; Girl's Health Life Effect programme will be implemented through the socio-ecological model (appreciative inquiry) for analysis to find change "influencers" using a human rights based approach. Schools and organised youth and women groups from the community will be utilized to have continuous dialogues with the students in schools, youth and young women out of school between 12 to 24 years. Also with such a model the programme will be able to reach the secondary audience like the school administrators, teaching and support staff, peers of the primary audience, local leaders, religious leaders and cultural leaders. One of the strategies to be used is;

Behavioural Change Communication (BCC); Mass sensitization will be undertaken to engage individuals in dialogues to improve on the knowledge, attitude and practice towards the use of SRH service. BCC activities will continue throughout the implementation of the program. Involvement of local, religious and district leaders will be sought. Communication channels to the target audiences will include;

1. Continuous dialogues with the primary, secondary and tertiary audiences.
2. Radio; Spot messages will be aired on local FM radio stations supporting the Girl's Health Life Effect intervention for a variety of audiences. The spot messages will feature information such as Standup against unsafe abortion practices emphasizing the idea of "reducing abortion stigma".
3. Print media; Information Education and Communication (IEC) materials developed by TEENS Uganda and its partners will be distributed to schools, youth groups, women groups, health facilities, religious facilities, community centres, markets, VHTs and households. These materials will include fliers, banners, T-shirts, Fact Sheets, stickers, brochures, and posters.
3. Community events; SRH/R campaigns using public address systems on market days and internationally celebrated days like world populations day and international youth day will be used for sensitization..
4. Inter-personal communication; VHTs will carry out community visits to offer referrals to clients who want SRH services and products.

Monitoring and Evaluation (M&E); Monitoring tools will be developed to keep track of the changes as a result of programme activities. Most Significant Change tool will be used in evaluating the progress of the program. As part of the M&E plan, Teens Uganda will submit progress reports and Most Significant Change reports from the stakeholders meeting.

Programme Activities

There are four (4) major components/activities for the programme;

1. **Development and disseminate IEC materials.** Design and distribution of information Education and Communication materials developed by Teens Uganda to schools, organised youth groups, organised women groups, health facilities, religious institutions community centres markets and homes. These materials will include; fliers, banners, T-shirts, Fact Sheets, stickers, brochures, and posters).
2. **Conduct continuous dialogues and meetings.** Rigorous awareness campaigns will be undertaken to enhance community acceptability of the intervention. Community dialogue meeting target audiences will involve discussion of the situation and designing way forward

3. **Offer Referrals to clients for need SRH/R services and products.** The referral book system will be put in place and VHT together with Teens Peer educators will be referring clients in the community who want SRH services and products to identified, qualified and certified (by MoH) health workers, also follow up on the clients situation after receiving the service

4. **Monitor and evaluate the project progress.** Regular activity monitoring; Quantitative data will be collected by Teens Uganda staff and health workers. On a monthly basis, quantitative data collected will be captured and reported. Data collection will include:
 1. Number of clients referred for Comprehensive abortion care.
 2. Number of clients referred for family planning (contraception use).
 3. Number of clients referred for other Sexual Transmitted Infection/ Disease treatment.

Most significant change (MSC) tool will be used to track the changes that have occurred in the community as a result of the Girl Health Life Effect Program and this will be done on a mid and end of the project basis through holding stake holders meeting.

Girl Health Effect Programme reports:

1. Reports on regular activities will be sent to stakeholders on a monthly and quarterly basis.
2. MSC (Most Significant Change) reports will be sent to stakeholders on a quarterly basis
3. An annual report will be prepared and shared with stake holders

Project management

Title/ Position	No	Responsibility
Project coordinator	1	Spearhead the project; preside over meetings and lobbying for financial support.
Project secretary	1	Organizing meetings, Taking minutes and report writing
Communication personnel	1	Participate in designing of IEC material, advise on communication Work as a lead person in SRHR
Accounting Assistant	1	Financial and budget control
Peer educators	8	Facilitate in school and community outreaches and write activity reports.
Health practitioners/ counsellors	2	Offer medical support and facilitation of sessions

Time frame

	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
Activity												
Development and disseminate IEC materials												
Conduct continuous dialogues and meetings												
Offer Referrals to clients for need SRH/R services and products												
Mid and End of project Evaluation												

6. Gender Strategy

The program will promote a balance in the involvement of both male and female genders in implementation of program activities. The involvement of men will be greatly encouraged right from initiation for increased acceptability and support for the target audiences. Also, radio spot messages will present 'model' males who are actively involved in the female issues concerning their reproductive health. Women will be involved in programme design and decision making, mobilization and sensitization in the schools and the community.

7.0 Organization's brief information

7.1 Teens Uganda, P.O. Box 23657, Kampala, Uganda.

7.2 **Project contact person: Robert Kagwa Mwiine, Tel No. +256700319341 or +256772414936 E-mail: robertkagwa@yahoo.com**

7.3 Organization's strategic Goals/Mission: Teens Uganda ultimate goal is to provide quality services to the satisfaction of our clients.

7.4 Organization's Areas of Work: Our areas of work largely include human rights base promotion of women's Sexual Reproductive Health rights and fighting SRH related stigma including abortion stigma. In addition, Teens Uganda for the last two years has been implementing a reduction of abortion stigma at community level.

This project is support by IPAS Africa Alliance in the three parishes of Rubaga Division Kampala district. 2013.

Teens Uganda is also implementing a project in Teso region on renewable energy technologies for adaptation of climate change with two partners in the region for the Catholic diocese (SOCADIDO) and the Protestant diocese (COU-TEDDO) supported by ICCO corporation.

Project Partner Support: Worldview Mission (WM)

Worldview Mission (WM) is a dynamic platform for youth & young adult and looking into your aims and objectives all tie with the Millennium Development Goals which is our principal mission and vision. Our volunteer members are here to work with rural communities and much work has already been done by some of the youth groups showing positive outcomes in communities. We strongly believe, this shall enable us understand cultural diversity, lifestyles and how to implement or communicate with underprivileged youths and difficult to reach out children for example access recent technologies and opportunities. Reason being that Worldview Mission is an initiative made of volunteers and with your target we believe volunteerism shall be enhanced after Programme.

SUMMARY BUDGET TOTAL: 96,670.2

Specific Objective 1: To increase on the information dissemination on SRH/R among girls and young women between (12-24 years).

S/N	Activity	Unit	Rate US \$	Amount US \$
1	Developing IEC Materials	Lumpsum		20,000
2	Establish 20 SRH Clubs	20	120	2,400
3	Dialogues in Schools 140 each of 50 students	140 dialogues	100	14,000
4	Engaging 4 community Radios(Talkshows)	12	250	3,000
5	Radio spot Messages 3 per week 6 months	72	1.5	108
	Sub Total			39,508

Specific Objective 2: To reduce on intersecting stigma girls and young women face while seeking comprehensive Abortion Care.

S/N	Activity	Unit	Rate US \$	Amount US \$
1	Community dialogues 50 groups approximately 30 members each	50 groups	171	25,650
2	10 Dialogue with Health Care providers each of 12 Health workers	10 dialogues	85.2	1,704
3	Training of 20 VHTs and 8 Peer Educators	28	lumpsum	4,800
	Sub Total			32,154

Specific Objective 3: To strengthen collaborations with 10 partners that engage in the SRH/R activities within Rubaga Division -Kampala District

S/N	Activity	Unit	Rate US \$	Amount US \$
1	Collaboration Meetings with 10 partners of 5 people each	10	50	500
2	Monitoring and Evaluation	2	lumpsum	3,000
	Sub total			3,500

Project Management

S/N	Activity	Unit	Rate US \$	Amount US \$
1	Contribution to office 10%	12 months	240	2,880
2	Contribution to 4 people staff salary 30%	12 months	750	9,000
3	Secretarial work	12 Months	20	240
4	Communication	12 Months	50	600
	Sub Total			12,720
	10% Miscellaneous of total budget			8,788.2
	GRAND TOTAL			96,670.2

Annex 1: Logical framework for the Girl's Health Life Effect intervention

Specific Objective 1: To increase on the information dissemination on SRH/R among girls and young women between (12-24 years).			
Activities	Expected Results	Responsible	Means of Verification/ Source
Develop and distribute IEC materials on Teenage pregnancy and abortion stigma	Printed and distributed booklets, fliers, banners, T-shirts, Fact Sheets, stickers, brochures, post card and posters.	-Teens Uganda peer educators -Uganda Private Mid-wife Association (UPMA)	- Field report
Establish 20 SRH clubs in secondary schools and 2 institutions of higher learning	-20 SRH clubs formed -200 young people will be recruited as peer educators -50,000 students will be reached with information on SRH/R	-Teens Uganda	-Baseline report -Activity reports -List of attendance
140 Dialogues in schools	Shared information On teenage pregnancy and abortion stigma	-Teens Uganda peer educators -Uganda Private Mid-wife Association (UPMA)	Activity reports -List of attendance - video clip
Training of 20 VHTs and 8 Peer Educators	20 VHTs trained and 8 Peer educators	UPMA Teens Resource person	Training report
Engaging 4 Community Radios	1 Radio Talk show per month 6 DJ Mentions per week	UPMA Teens Guest from other partners	Recording

Specific Objective 2: To reduce on intersecting stigma girls and young women face while seeking comprehensive Abortion Care.			
Activities	Expected Results	Responsible	Means of Verification/ Source
2.1 50 dialogues with youth and women groups	14,000 community members engaged in dialogue on SRH stigma	Teens Uganda UPMA Kawaala Health centre III	Video clips Photographs Activity report Lists of attendance
2.2 Dialogue with Health workers	10 Health centres reached approx 6 to 10 health workers engaged	Teens UPMA	Reports
2.3 Referrals	1350 girls and young women referred for safe abortion	Teens Uganda UPMA	Referral forms

Specific Objective 3: To strengthen collaborations with 10 partners that engage in the SRH/R activities with in Rubaga Division -Kampala District			
Activities	Expected Results	Responsible	Means of Verification/ Source
3.1 3 Meeting	10 partners joining hands with Teens Uganda to advocate for safe abortion care	Teens Uganda	List of attendance Photographs Video clips
3.2 Monitoring and Evaluation	Impact of the project Accessed	Teens Uganda	Project Review report