



Acknowledgements

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For further information about the Safe to Learn diagnostics and these country experiences, please contact safetolearn@end-violence.org

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Acronyms and abbreviations

CSO Civil society organization

EDP Education development partners

EIE Education in Emergency

ESSP Education and Sports Sector Strategic Plan

GBV Gender-based violence

GPEVAC Global Partnership to End Violence against Children

INGO International non-governmental organization

ISC-VACIS Inter-sectoral Committee on Violence against Children in Schools, Uganda

KI Key informant

MoGEI Ministry of General Education and Instruction, South Sudan

MoES Ministry of Education and Sports, Uganda

MoGLSD Ministry of Gender, Labour and Social Development, Uganda

NSP VACIS National Strategic Plan on Violence against Children in Schools, Uganda

NYHQ New York Headquarters

RTRR Reporting, Tracking, Referral and Response Guidelines

SESIL Strengthening Education Systems for Improved Learning

STL Safe to Learn

ToR Terms of reference

UK FCDO Foreign, Commonwealth & Development Office, United Kingdom

UN United Nations

UNESCO United Nations Educational, Scientific and Cultural Organization

UNFPA United Nations Population Fund

UNHCR United Nations High Commissioner for Refugees

UNICEF United Nations Children's Fund

USAID United States Agency for International Development

VAC Violence against children



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Background and introduction

Background

1 billion children experienced physical, sexual, or emotional violence or neglect in the past year globally.¹ Violence hits children in a variety of settings, including where one would expect them to be safe, such as in school. 720 million children for example live in a country where the legal system does not fully protect them from corporal punishment in school.²

Violence against children in, around and through schools violates children's rights and impacts negatively on various aspects of their life and on their development including on their learning outcomes. Violence against children is a cost for society, estimated globally at 2-8% of the global GDP (\$7 trillion).³

Safe to Learn works with governments, civil society organizations, communities, teachers and children to generate commitments and create action to end all violence in every school by 2024. It unites 'education, child protection, violence prevention and health communities in a collaborative partnership that delivers multiple wins against the SDGs'. To achieve this, it has set out its objectives in a five-point "Call to Action":

- 1. Implement policy and legislation
- 2. Strengthen prevention and response at the school level
- 3. Shift social norms and behaviour change
- 4. Invest resources effectively
- 5. Generate and use evidence

In order to operationalize the "Call to Action", Safe to Learn partners under the leadership of UNICEF and UK FCDO, in 2019-2020 developed a Global Programmatic Framework and Benchmarking Tool.⁵ It provides guidance to Safe to Learn partners in translating the "Call to Action" into practical actions; highlights technical resources to assist in the design of interventions; and sets out a suggested framework for monitoring and tracking results. In the Programmatic Framework and Benchmarking Tool the Call to Action is translated into a series of "benchmarks", which countries need to meet to achieve progress under the Call to Action.

A diagnostic tool was also developed, and includes specific checkpoints at national, subnational/district and school level under each benchmark. It aims to serve to measure the degree to which governments are meeting the five priorities of the Call to Action and to inform country-level collective dialogue amongst Safe to Learn partners and with national counterparts. It can be used by any government or partner willing to conduct a Safe to Learn country diagnostic.

To complement this tool, a methodological package is available to undertake the diagnostics, including interview guides for various types of stakeholders: Student Interview Guide, Teacher Interview Guide, Head Teacher Interview Guide, District Officer Interview Guide and Ministry/national level Interview Guide.

Between November 2019 and April 2021 UK FCDO, UNICEF, the World Bank and the GPEVAC have supported the piloting of the diagnostic in five countries: Jordan, Nepal, Pakistan, South Sudan and Uganda.





The diagnostics in the five countries aimed to:

- 1. Identify good practices and gaps in government efforts to address violence in schools
- 2. Identify priority actions with ministries moving forward
- 3. Establish a baseline from which to measure progress from 2019-2024

Findings from the diagnostics were documented in five country reports and in a synthesis report summarizing findings from the first four countries (Nepal, Pakistan, South Sudan, Uganda).

Introduction

This document aims to capitalise on the pilot experience of these countries in implementing the diagnostic, with specific focus on South Sudan and Uganda. It aims to serve governments, Safe to Learn partners and all stakeholders engaged on preventing violence in and through schools in and beyond these two countries.

It describes and briefly analyses how the diagnostic process unfolded in the two countries, documents lessons learnt, challenges, strengths and weaknesses in these processes and aims to show the benefits and/or shortcomings of doing such diagnostics. The COVID-19 pandemic has disrupted schooling in all countries and affected activities to follow up on diagnostic findings at the country level. Nonetheless, this exercise also tries to identify to what extent the recommendations and findings from the diagnostics have been useful at the country level until now and through what existent country mechanisms they have been taken forward or could be taken forward in the future.







Methodology

This capitalization exercise was undertaken during the month of April 2021. It was guided by main research questions prepared by the researcher/author of this report in consultation with the Safe to Learn Secretariat and UK FCDO (see annex 2 for the research questions).

It is based on a literature review as well as interviews with stakeholders - in South Sudan, Uganda and at the global level.

A total of 15 stakeholders were interviewed, including 8 in Uganda, 6 in South Sudan and one from the global level. Key informants included representatives from organizations and institutions involved in the diagnostics, including UNICEF Education Sections in Uganda and South Sudan, UNICEF NYHQ Child Protection, Ministry of Education of both countries, UK FCDO/British High Commission from both countries, local CSOs and INGOs. Key informants were selected based on their involvement in the diagnostic, its dissemination or follow up and/or on their work on the issue of violence in school (for a complete list of key informants see Annex 1).⁶

The literature review included the country reports of the Safe to Learn diagnostics of Uganda and South Sudan, the Synthesis Report of the diagnostics in the four countries, the Safe to Learn Programmatic Framework and Benchmarking Tool, the Safe to Learn Diagnostic Tool, and the Safe to Learn webpage dedicated to the Safe to Learn diagnostics.

How the diagnostic exercise unfolded in the two countries

Main stakeholders involved in the diagnostic process

Management and coordination - The diagnostics were managed from the country level, by UNICEF country offices and the respective education ministries of the two countries, with technical support from Cambridge Education, under contract with UNICEF NYHQ.

In **Uganda** the diagnostic process benefitted from the presence of an Inter-sectoral Committee on ending Violence against Children in Schools (ISC-VACiS), co-chaired by the Ministry of Education and Sports (MoES) and the Ministry of Gender, Labour and Social Development (MoGLSD). The committee was involved in all key phases of the diagnostic process, from approving the ToR, planning, reviewing and discussing the draft report and following up to it. The MoES with UNICEF's support convened an initial meeting of this committee to discuss the research and plan for it. The ToR for the diagnostic were presented and approved by this committee. Once the draft report was available, it was first presented to the education ministry and UNICEF and then presented and discussed at a meeting of the intersectoral committee.

In **South Sudan** the diagnostic was managed by UNICEF and the Ministry of General Education and Instruction (MoGEI), directorate of Gender Equity and Inclusive Education (the Directorate for Planning and Budget was also involved). The Ministry approved the questionnaires, was involved in planning the work and played the role of a facilitator between the schools and the researcher, ensuring school staff presence at school when the researcher visited them for the interviews and providing the researcher with an institutional accompany letter to support the exercise and facilitate trust from participating schools and informants.





How long did it take to conduct the diagnostics?

The time necessary to conduct the country diagnostics depends on various factors, including country sample, time availability, size and configuration of the research team:

- **South Sudan** conducted the diagnostic during almost 5 months, from November 2019 to March 2020.
- **Uganda**, where schools were about to close for a long holiday, conducted the diagnostic in almost 5 weeks, from 26th November to 20th December 2019.

Research teams in the two countries had different sizes and configurations, as the country sample and the time available for conducting the diagnostic differed:

- In **Uganda**, which had a sample of 30 schools across seven districts, and where schools were about to close for a long holiday, due to the time challenge a research firm (IPSOS) was contracted to deploy researchers simultaneously and conduct the interviews in a relatively short period of time. One key informant explained that 'having IPSOS as partner was good as they are local partners, so know the reality well'.
- In **South Sudan**, which had a sample of 24 schools across three districts, one researcher identified by Cambridge Education (with some support from an assistant) conducted the document review and all the interviews.

Both in Uganda and in South Sudan the national research teams benefitted from the technical support of Cambridge Education, contracted by UNICEF NYHQ from November 2019 to March 2020.

Stakeholders involved as key informants

South Sudan				
Level	Category	Gender		Total
		Male	Female	
National	Government	2	1	3
	Partners	1	2	3
State	Government	7	2	9
School	Head Teachers/ Deputy Head Teachers	24	0	24
	Teachers	71	25	96
	Students	48	48	96
Total		153	78	231

Source: Safe to Learn, South Sudan diagnostic exercise. Report May 2020. p.22



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Uganda				
Level	Category	Gender		Total
		Male	Female	
National	Ministry	3	4	7
District	DEO	15	13	28
	District Inspector of Schools			
	District Gender Officer			
	District Focal Person for Violence			
School level	Headteachers	23	5	28
	Deputy Teachers	18	8	26
	Teachers	56	53	109
	Students	54	62	116
Total		169	145	314

Source: Safe to Learn, Uganda diagnostic exercise. Report, 30 April 2020. p. 17

Stakeholders involved in the national dialogue on findings

A variety of stakeholders from the government, UN agencies, development partners and civil society were involved in national dialogue on findings and in reviewing the draft report and providing feedback (for further details see paragraphs on national dialogue and on follow up actions).







Methodology

The diagnostic exercise entailed a desk review of relevant laws, policies, guidelines and reports, as well as stakeholder interviews at the national, district and school levels. Interviewees included students, teachers, head teachers, district officers and staff at the Ministry of Education.

Interviews followed standard interview guides, developed at the global level with the support of Cambridge Education, whose questions are directly aligned with the Diagnostic Tool. These guides were adapted and customised to the specific country contexts before implementation.⁷

Each interview guide also includes an introduction to help researchers providing key informants all the necessary information prior to starting the interview. The introduction explains how the information collected will be used, highlights the voluntary nature of participation in the research and the possibility to withdraw from it at any point in time, provides confidentiality and safeguarding protocols and asks respondents to provide voluntary consent in writing. For children, the headteachers were asked to give consent in loco parentis, children were briefed on the purpose of the exercise and gave their oral consent.

Prior to each interview researchers also asked the permission for recording of some of responses or take pictures of documents or materials. They explained that there are no questions on any examples of violence in the school in the interviews and make key informants aware that if they provide such information, the researcher may be legally required to report it. Researchers were supported with letters from the Ministry of Education which explained who they were and the purpose of their visit so that they could be trusted. The Ministry also ensured teachers were in school when researchers visited and able to answer interviews.⁸

Customization of the diagnostic tool to the country contexts and ethical issues

Before undertaking the diagnostic exercises in Uganda and South Sudan a joint methodological workshop was held, bringing together the research teams from both countries, the representatives from the education ministries of both countries and the diagnostic focal points at UNICEF country offices. In both countries, within UNICEF COs, the diagnostic was managed by the Education Section. The workshop was facilitated by Cambridge Education and hosted by UNICEF Uganda, in Kampala.

The workshop allowed to:

- 1. Familarize the research teams and MoE and UNICEF research managers/coordinators in both countries to the exercise.
- 2. Customize the Diagnostic Tool and interview guides, developed at the global level, to the specific contexts of South Sudan and Uganda.
- 3. Discuss ethical issues and risks related with conducting research on violence, and with involving children and vulnerable groups in research and agree on key principles including do no harm, voluntary informed consent and safeguarding and on how to ensure these in the research.





Changes and adaptation of research tools during the customization process included:

- **South Sudan** using the correct language when referring to the administrative structure; checking the language for gender and conflict sensitivity given the background of the country. Statements, words or phrases that would invoke tension were reviewed, reworded or otherwise changed to minimise misunderstanding or confusion around expectations.
- **Uganda** specific changes included age and context-appropriate language, particularly for students. Statements, words or phrases that invoked misinterpretation were reviewed, reworded or otherwise changed to minimise misunderstanding or confusion.

Once adapted to the country contexts, the tools were translated into the relevant language(s) according to the sample districts and schools.⁹

Ethical issues

In order to address and mitigate the risks related with conducting research on violence and with involving children and vulnerable groups in research and to protect participants, **ethical issues** were discussed during the workshop and the following was agreed by participants:

- **Voluntary informed consent** —all participants, adults and children, need to understand the purpose of the data collection, how their responses will be used and their rights throughout the exercise, including their right to withdraw at any point from the research, without giving reasons and without repercussions.
 - To ensure such consent, each survey and interview was preceded by a short introduction describing the objective of the exercise, how the data would be processed and the participants' rights. The wording of each briefing was adapted to be clear and intelligible to the different types of respondents and was reviewed and agreed at the Kampala workshop. Adult participants were also asked to sign written forms, while head teachers provided consent in loco parentis for their students, who were then briefed on the exercise and thereafter invited to give their oral consent.
- **Do no harm** throughout the information collection, it was critical that participation in the exercise did not expose the participants to any harm, risks or unintended consequences. Specifically, the surveys and interviews avoided asking about particular incidences of violence that would identify perpetrators or give rise to unexpected repercussions. Central to this was the need for confidentiality and anonymity so that particular responses could not be traced back to individual participants.
 - Such protections were emphasised at the start of each interview or survey, none of which recorded respondents' names. Participants could also elect to withhold details of their grade level and school if they wanted additional assurance that their data would be stored and handled with complete anonymity.
- **Safeguarding** carefully balanced with the need for anonymity and confidentiality was the requirement to consider appropriate safeguarding in the event that the researcher discovered that one or more children faced an immediate threat of violence or abuse.
 - To address this issue, the researcher adopted and followed a step-by-step safeguarding approach derived from UNICEF standards and adapted for this particular exercise.





Geographic coverage and sampling approaches

South Sudan

To create a baseline and ensure inclusiveness and coverage, the study divided the country into three regions following the colonial demarcations, being Greater Equatoria, Greater Bahr el Ghazal and Greater Upper Nile.

In discussion with representatives from UNICEF and the MoGEI, a state was selected from each region on the basis that it contained one or more refugee communities, government schools, and private schools, both in rural and urban settings.

Within each state, schools were then stratified by primary and secondary, and urban and rural, and then eight schools randomly sampled to make a total of 24 schools across the country.

State schools also included one PoC or refugeefocused establishment, as well as one privately owned or run school.

Source abstract from Safe to Learn, South Sudan diagnostic exercise. Report May 2020. p.21

Uganda

To create a baseline and ensure inclusiveness and coverage, all 7 regions of Uganda were included: West Nile, North, Karamoja, Eastern, Central, Southwest and Western sub-region.

The UNICEF Uganda country office worked with MoES partners to select one district in each of the 7 regions.

UNICEF and MoES randomly selected 2 secondary schools (urban/rural) and 2 primary schools (urban/rural) in each district. Pre-primary and tertiary were not included as they do not contain as high a proportion of students in comparison to primary/secondary; and private/community schools were only included when they constituted a high proportion of students. Overall, a total of 30 schools were selected with 15 primary schools and 15 secondary schools both in urban and rural contexts.

Source abstract from Safe to Learn, Uganda diagnostic exercise. Report, 30 April 2020. p. 16







Data collection, analysis and reporting

The report was realistic and it is very useful. This is the first time this happened in country. I wished this had happened before. I tought it was exactly what we needed here as we sometimes forget about safeguarding. Key informant, South Sudan

In **Uganda**, researchers collected data electronically using tablets and the ifield software (there were various researchers covering a number of schools in a short timeframe).¹⁰

In **South Sudan**, data was collected by hand using paper copies of the interview guides or electronically where permission was granted.

At the end of each day, the researchers entered answers into an online data management platform, for data storage and analysis¹¹. Data was analysed and findings presented following the five points of the Safe to Learn Call to Action.

In **South Sudan** a national consultant identified by Cambridge Education undertook the data collection and Cambridge Education undertook the report writing. The report was then shared with the country and presented at a stakeholder consultation where a lot of feedback was received from partners. Cambridge Education then finalized the report.

In **Uganda** the process was supported by the research firm which collected the data and by Cambridge Education. The draft report was presented to the MoE, UNICEF and the inter-sectoral committee on VAC in school, co-chaired by the Ministry of Education and Sports and the Ministry of Gender, Labour and Social Development.

Cambridge Education, under contract with UNICEF NYHQ from November 2019 to March 2020, provided technical support to the diagnostics roll out and reporting processes.

National dialogues and dissemination of findings

The roundtable discussion was great to create awareness and engage the Ministry of Education. Key informant, South Sudan

One of the main aims of the diagnostic tool is to inform country-level collective dialogue amongst Safe to Learn partners and with national counterparts.

In **South Sudan** the diagnostic findings were presented at a national round table discussion convened on 15 July 2020 by the education ministry with the support and facilitation of UNICEF South Sudan. The round table was attended by many partners including USAID, UK FCDO, UNESCO, UNICEF, UNFPA, SFP, Save the Children, Girls' Education South Sudan (GESS), Windle International, Adra, and the Ministry of General Education and Instruction. Cambridge Education and UNICEF NYHQ also attended the event and presented a global overview of the diagnostic tool and of the Safe to Learn global initiative before the presentation on findings.

South Sudan was also invited to present its findings at the global level as a key presenter during the **Safe to Learn senior-level officials meeting** held on 18 November 2020. The meeting, chaired by the End Violence's Executive Director, Dr. Howard Taylor, provided the opportunity for senior officials to strengthen their awareness of the progress being made in this country, the challenges being encountered, the gaps that remain and how violence prevention and response activities have been affected by COVID-19. Participants in this meeting included senior level representatives from Safe to Learn member organisations.¹²





The STL diagnostic was very useful for Uganda. It continued to raise the profile of violence against children and informed several dialogues on the issue. Key informant, Uganda

In **Uganda** the Safe to Learn report was presented to the Gender Unit of the Ministry of Education and Sports, to the Safe to Learn partners and to a UNICEF cross sectoral team and all endorsed the findings and recommendations from the report. The Gender Unit of the Ministry of Education and Sports convened an online Intersectoral meeting on Violence against Children in Schools on Wednesday 7th October 2020, where the ministry presented the report and findings were discussed. **The Inter-sectoral Committee on Violence against Children in Schools (ISC-VACIS)** which held the meeting was established by the MoES in 2013, together with the Ministry of Gender, Labour and Social Development (MoGLSD) and involves various stakeholders from different sectors.

Participants in this meeting included:

- **Government institutions** the Gender Unit of the MoES, the Ministry of Finance, Planning and Economic Development (MoFPED), the Examinations Officer Special Needs Education (EO/SNE) and AC/PPE, the SGBV Department of the Crime Investigations and Intelligence Department (CIID) of the Police, UNATU (Uganda National teacher Union);
- **Development partners and programmes** IRISH AID, DFID, UNICEF and SESEL (a UK funded MoES capacity building programme housed in the Ministry of Education and Sports)
- National and international civil society organosations World Vision, Child Helpline (SAUTI), AVSI Foundation, IRCU (Inter-Religious Council of Uganda), RTI LARA (RTI International/Literacy Achievement and Retention Activity programme), ED FAWE U, Raising Voices, AFRICHILD, TMF (Trailblazers Mentoring Foundation), MEMPROW (The Mentoring and Empowerment Programme for Young Women Organization).

In **Uganda** the report was also presented to the **Basic Education Working Group of Education Development Partners (EDP)** in a meeting **on 'Violence against children in schools and presentation of the Safe to Learn diagnostic report'** on 20th August 2020. This group, meets about every 2 months, and involves FCDO, the World Bank and other development partners, some NGOs, and UNICEF. The main international researcher for the STL country diagnostics from Cambridge Education presented the findings of the Safe to Learn diagnostics for Uganda, with UNICEF NYHQ providing an overview of the global background.

Participants in this meeting included representatives from bilateral and multilateral cooperation and international financial institutions in Uganda, including UNICEF South Sudan, UNESCO, World Bank, UNFPA, UNHCR, African Development Bank, WWOB Uganda, ECHO, FCDO, GIZ, Icelandic International Development Agency (ICEIDA), JICA, the Belgian Cooperation (Enabel), KOICA, USAID, the Ministry of Foreign Affairs of the Kingdom of the Netherlands, Department of Foreign Affairs of the Embassy of Ireland, France, Sweden, Norway. From the global level, the STL Secretariat, FCDO, UNICEF NYHQ and Cambridge Education were also invited.

The national dissemination of findings, in particular to the decentralised level, faced some challenges in both countries due to the Covid-19 pandemic (see Challenges paragraph for further details).





What difference did it make that we undertook the STL diagnostics

We have the Safe to Learn coalition in Uganda – we had some meetings but did not seem to be on the same page on the issue. This study helped us to have a joint agenda, work well together and also have joined ownership of the study. The diagnostic study helped us to agree on priorities to support the government on. Key informant, Uganda

In **Uganda**, the diagnostic findings served to strengthen advocacy efforts towards the integration of violence in school in the new **Education and Sports Sector Strategic Plan (ESSP)**. The diagnostic findings had highlighted the lack of an explicit objective to prevent or reduce violence in schools in the ESSP 2017-2020, noting that 'Although the ESSP acknowledges the need to reduce violence in schools via a health and safety policy and inspections, an explicit objective to prevent and reduce violence in schools (with accompanying strategies, budgets and key performance indicators) would be much more powerful and effective.' As a follow up to this timely recommendation, a strategic objective and key issues for interventions to address violence against children in school have been included in the draft ESSP 2020/21-2024/25, which is waiting for approval in June 2021.

The recommendations of the diagnostics are also being used to support the revision of the **Reporting**, **Tracking**, **Referral and Response** (**RTRR**) **Guidelines**. The RTRR guidelines, developed by the Ministry of Education and Sports (MoES), guide schools in establishing mechanisms and processes for reporting, tracking, referral and response to child protection concerns. This is a 'laudable achievement' according to the diagnostic report which however recommended to unpack the RTRR guidelines and develop a simple document for each sector at district level, clearly defining the contribution of each sector and how each of them needs to work with other sectors in the prevention and response to violence.

The MoES in collaboration and with the support of UK FCDO, SESIL¹³ (the UK funded initiative on Strengthening Education Systems for Improved Learning) and UNICEF, is working on unpacking the RTRR guidelines into five simplified versions, including: one children's version, one for teachers and head teachers, one for health workers, one for community and social workers and one for the police. These documents have been drafted and are awaiting approval at the time this report is written (April 2021). The plan is then to translate them in five local languages.

Two key informants also underlined that the diagnostic recommendations provide useful directions to inform the revision of the **National Strategic Plan on Violence against Children in Schools (NSP VACIS)** (2015 – 2020) for 2021-2025. The NSP VACIS provides strategic direction and priorities for Uganda towards the elimination of violence against children in schools. As of April 2021, the government with UNICEF and partners' support were undertaking the revision.

The diagnostic report pointed to the need to strengthen the national child protection system and the functionality of **child protection committees at the district level**, where the education sector is represented together with other sectors, in order to achieve a more systemic reporting, tracking and follow up of violence cases. One interviewee hilighted the importance of this finding, recognizing that there is the need to strengthen coordination at the district level. Although it has not been possible to disseminate findings at district and schools level yet, some meetings are coming up, 'for instance 9 district local governments are planned to meet in early May and these will be opportunities to share and discuss the findings from the diagnostic and other issues on VAC and gender to get action plans at district level'. It was noted that despite the district committees have not being functional during the lockdown enforced to contain the transmission of Covid-19, the **Covid-19 taskforce** has been holding **district level meetings** on a **weekly basis**, where VAC and other child protection issues have been raised.





The uptake of findings of the diagnostic into policy-making and programming is a complex and non-linear process and it is difficult to ascertain whether some current actions mentioned during the data collection process through interviews are a consequence of the diagnostic findings or rather whether the diagnostic reconfirmed something which was already happening. What is certain is that various on-going activities in country well align with the recommendations of the study.

The diagnostic said very relevant things, it pointed to things we were already working on, helping the ministry to further appreciate this as a gap. It provided us with the urgency to do this and to get other partners working on it. Key informant, Uganda

One stakeholder for example mentioned that the MoES is working to build the capacities of senior women teachers as VAC focal points in schools. While this 'structure' exists in country, the diagnostic was useful to realize there is a need for providing them with guidelines on their focal point role and for building their capacities for this role.

Another stakeholder that has been working on radio programmes to support the learning of students in grade 1-3 in response to Covid-19, noted that VAC and safeguarding were integrated in radio script and highlighted that:

The report talked about benchmarks, which enables us to ensure that the radio programs we have in our programs, have safeguarding measures. This had started before but the diagnostic helps us with the follow up. Key informant, Uganda

The diagnostic highlighted also gaps in data collection on VAC. The MoES, UNICEF, the districts and Uganda Bureau of Statistics are working to improve this. Initiatives include reviewing the EMIS (Education Management Information System) to integrate indicators on VAC, integrating VAC data in national statistics and supporting districts to use the KOBO tool (a free online data collection and management tool used in humanitarian settings). UNICEF also plans to collaborate with the Education Service Commission to advance on some recommendations and to support capacity building of teachers on safe learning environments and positive discipline.

In **South Sudan** stakeholders noted that the COVID-19 pandemic was a major challenge to the dissemination and follow up to the diagnostic findings and recommendations. Almost all children are out of school as a result of school closures linked with the pandemic. *The country situation is very challenging - This country was already in emergency, but when Covid came it became a double emergency'...there is a long way to go...The diagnostic report was not much disseminated as Covid stopped everything. (Key informants, South Sudan)*

However, it was highlighted that the diagnostic has generated a kind of accountability of stakeholders and was useful as it allows the country to have a real model for policy, legislation and interventions at the school level. It has provided the country with one comprehensive report including recommandations to advance under each area of the STL Call to Action bringing in various sectors.

The diagnostic was very useful for South Sudan because it let us know where we are, what is good, where we need to improve and how. Key informant, South Sudan

We are quite confident that the reflections in the diagnostic are useful as a policy document to bring in other sectors, so that children can have safe learning in schools. The study allowed us to have a broader platform to go beyond education as when it comes to action there is a need for us to work closely with child protection. Key informant, South Sudan





What we learnt from the diagnostic processes in the two countries

What to keep

Stakeholders valued various aspects of the diagnostic process. The major aspects they mentioned positively include:

- The relevance of the issue
- The government ownership of the process through the Ministry of Education
- The involvement of the education sector (at various levels)
- The comprehensiveness, balanced nature of the report and the fact that it is realistic
- The involvement of and data on both central, decentralised and school level
- The involvement of the inter-sectoral committee on violence in school (in Uganda)
- The involvement of different stakeholders in the process
- The opportunity to share experiences with other countries and learn from them

What to improve

The main issues that came out during interviews which would benefit the process are:

- Support with fundings the dissemination of findings and follow up to the study
- Stronger involvement of civil society
- Including the grassroots level in dissemination and follow up
- Involving other sectors and ministries from the intial stage of the diagnostic process even more
- Explore stronger linkages with education of refugee and internally displaced children







What worked well

Stakeholders valued positively the diagnostic process and study. Various highlighted that the study was relevant. The involvement of the Ministry of Education and of education staff in the study was mentioned as an important strength of the diagnostic process. The cross-sectoriality of the reflections in the diagnostic was also valued. The fact that the report provided information not only on the situation at central level but also at decentralised and school level was also valued positively.

One stakeholder highlighted the balanced nature of the diagnostic, which documents also good practices and noted this as a welcomed innovation.

We have done other studies before, but this was particular and taken very seriously by partners and the government as it assessed the capacity of the government to tackle the issue. So it was not telling something we already know. Also it highlighted good practices. It was very refreshing for the government to highlight what they are doing well, this is something rarely done. The balanced nature of this study was really appreciated. Key informant, Uganda

Interviewed stakeholders valued very positively that the diagnostic was a government-owned process. This was mentioned by the majority of the interviewees in both countries. The governments, through their ministries of education were involved from the planning phases, included in the methodology, led in the presentation and dissemination of findings.

One of the best approaches they had was working with the MoE. I saw that the MoE was so happy. The MoE brought in and be open to their feedback was one of the brilliant things they did. Key informant, South Sudan

The government refused findings from some other studies in the past. This time the government was at the table. Key informant, Uganda

Beyond its involvement at the research management/coordination level the Ministry of Education was also involved as key informant, including at the school level where school directors and teachers were interviewed.

Some schools staff are involved in violence. Involving them in the study as key informants was particularly strategic, and bringing in school directors is key. Key informant, South Sudan

In Uganda the presence of an inter-sectoral committee on violence in school, co-chaired by the Ministry of Education and Sport and the Ministry of Social Development, allowed for various key players to be involved form the start of the process and to discuss findings across sectors, which is key as highlighted by one key informant, as *violence against children is a cross-cutting issue*, *so we need to work together*' (Key informant, Uganda).

The roundtable national discussions seem to have worked well, nothwithstanding they were held virtually due to Covid-19 restrictions. The quality participation from the global level to provide the overall overview on STL and the diagnostics was also mentioned as a strength by one key stakeholder.

Stakeholders appreciated the opportunity to share experiences with other countries, as part of the process, as *this helps us to learn from each other*. Examples provided by interviews are the kick-off joint workshop held in Uganda, the invitation to present the country diagnostic experience to the STL Senior Level Officials Meeting in November 2020, and an initial internal UNICEF meeting on Safe to Learn (April 2019) uniting UNICEF education and child protection representatives from the 15 countries endorsees of the Call to Action.

The content of the report was appreciated by stakeholders, including its focus on the five areas of the Call to Action, the comprehensive nature of the report and its recommendations, the data collected at both national and decentralised level.





One strength of the diagnostic is that information in the diagnostic came from the field and the decentralised level and not only the central level. Key informant, South Sudan

The interviewees noted that 'the report was kind of realistic' (K.I, South Sudan) and it allows to link with violence in the community, that's also where VAC takes place (K.I, South Sudan).

You can't use only teachers to protect children, as teachers sometimes abuse students' – you need to talk to them using the community pressure and this study allows us to do this. Key informant, South Sudan

Challenges

The main challenges mentioned by stakeholders are challenges related with their context and with the global Covid-19 pandemic which has affected both countries. Additionally, the report of the diagnostic in South Sudan highlighted among challenges faced that there was a **limited understanding by students at the primary level of** the purpose of the exercise and of its questions.

Findings from key informant interviews indicate that Covid-19 has been a major challenge, which has affected the momentum for this work in both countries and particularly the dissemination of findings and follow up to the recommendations.

In **Uganda**, the draft report was ready in April 2020, at the time of lockdown. All meetings had to take place online and the Covid-19 was a challenge for the dissemination of findings to the decentralised level. In **South Sudan**, one stakeholder noted that due to Covid-19 a peer review meeting planned on the diagnostic had to be cancelled and implementation of activities in school premises has been hampered by the closure of schools. Schools have been closed since 28 March 2020 (with the exception of grade 8th of primary and 4th of secondary that held exams in April 2021), with the reopening planned for 2 May 2021. One interviewee highlighted that while the diagnostic study had been designed before the Covid-19 pandemic, when already about 2.8 million children were out-of-school in the country, an additional 2 million children were sent home due to the school closures part of the restrictive measures to contain the transmission of **Covid-19**. Many of these children, risk not return to school. For further details see UNICEF South Sudan press release of 29 April 2021. In response to this the priority of various key education sector stakeholders has been centred during these months on advocating towards school reopening.

School closure went beyond emergency.... this country was already in an emergency, but when Covid came it became a double emergency. Our priority is to advocate very strongly that children are not the drivers of the pandemic: schools should remain open. We see the raising of many issues when schools are closed: abuse, early pregnancies, difficulties/youth issues...we trust schools will be the best places to protect children. Key informant, South Sudan







In South Sudan, another major challenge was the **lack of resources to follow up on findings** and make the recommendations a reality. Resources would have been useful to support the dissemination of findings at decentralised level (State/county). The funding challenge was considered a general one that goes beyond this specific exercise, and affects more broadly the education sector, where resources are lacking to respond to the many needs.

Other challenges faced by the diagnostic teams and/or affecting the follow up to the study as mentioned by key informants include the quality of the roads, inaccessibility fo some areas, security, stability, flooding, the very demanding school infrastructure needs, Covid-19.

There is a Committee for the Safe Reopening of Schools in the country, which unites stakeholders including the MoE, donors, UN agencies, line ministries, gender, health, youth and sport, NGOs. The committee looks at the requirements for Covid-19 protocol, including water, sanitation and hygiene facilities, cleaniless and issues that are also important for child protection such as separating toilets boys/girls. Education donor meetings have been focusing on the school reopening process. Findings indicate that despite the diagnostic process, the inclusion of violence prevention and response has not been a priority in the school reopening discussions. However, some safety and safeguarding issues are being discussed, such as the need for the closure of shops that have been open in schools, for child safeguarding purposes and the evacuation of internally displaced persons living on the school premises before the reopening of schools ...when we look at protection there are so many issues. Some years ago we had armed forces occupying the schools...now they see the immediate need is the reopening, then our priority will come. Key informant, South Sudan

What could be done differently

Large part of the funds for the diagnostic were invested to contract the global institute which supported this exercise. According to some stakeholders in South Sudan it would have been useful to have some dedicated **funds to support the dissemination of findings** including at the decentralised level (state/county) and to follow up with actions to the recommendations. Findings from interviews with civil society organizations working in the field of violence in school, both in Uganda and South Sudan, indicate that some INGOs and CSOs have not received the report, others were not aware of the existence of such a diagnostic. Diagnostic findings can be useful for civil society which is an important player to contribute to accelerate results under the Safe to Learn Call to Action. One stakeholder involved in the management of the exercise in Uganda highlighted that engaging civil society during the discussion on the research tools would have been useful. Furthermore, involving the grassroots level as KIs was a strength in the diagnostic, but there is the need to explore need how the grassroots level can be involved in the dissemination and follow up.

I would have wished for more discussion with the ministry and NGOs to feed into the report. There is a lot of capacity gaps that require discussions. Key informant, Uganda

Finally, as responding to violence against children requires a multisectorial approach which goes beyond the MoE, stakeholders have highlighted the importance of **involving other ministries in the diagnostic process even more**, including the Ministry of Gender and Social Development, starting **from the initial phases** of the research (methodology discussions), as their involvement is key to follow up on VAC cases.

We could probably have done a bit more on involving others in the process. But there's a lot in the sector going on. We may want to do a follow up now. You reminded me to keep people engaged. Key informant, South Sudan

On the methodological side, some respondents underlined that it would be good to increase the sample size and have a broader representation in the study (ex. a higher number of states and schools). Importantly in South Sudan it was highlighted that the exercise would benefit from including internally displaced children and refugee children in the study, and to collaborate with UNHCR and other agencies on this to bring in more resources and investments for refugee education as the diagnostic provides a platform to look at this in a comprehensive manner.





Existing country mechanisms to take the diagnostic recommendations forward

Uganda

The key government-led country mechanims to take the recommendations forward and advance on STL country level collaboration is the Inter-Sectoral Committee on Violence against Children in School (ISC-VACiS), chaired by the Ministry of Education and Sports and co-chaired by the Ministry of Gender, Labour and Social Development. The aim of the ISC-VACiS is to galvanise support and provide a multi-sectoral approach to tackling violence against children in schools in Uganda. The ToR of the Inter-sectoral Committee established in 2013 by the MoES and the MoGLSD and which includes stakeholders from various sectors, are currently being reviewed in their content and membership, based on various developments, including the diagnostic study.

UNICEF South Sudan has been playing a leading role on VACiS and Safe To Learn in country. In addition to the 14 global STL partners, key informants highlighted that the Ugandan STL coalition also includes other institutions and organisations active in country on the issue.

Another key country mechanism is the **Basic Education Working Group of the Education Development Partners**. The group meets about every 2 months, chaired by FCDO and the World Bank. A Basic Education Working Group facilitated by the Director of Basic Education includes many stakeholders, including some STL grantees (ex. Right to Play).

There is also potential in country through the **Secondary Education Expansion Programme of the World Bank** (July 2020-December 2025), which includes a safe and inclusive school component of 5,000,000 USD. Its implementation is expected to start soon. As part of this programme there is a Disbursement-linked Indicator (DLI) relevant for Safe to Learn: 'substantial implementation of child friendly school programme in about 300 schools'.

Other existing platforms for consideration for taking the recommendations forward include:

- Forum for education NGOs in Uganda (FENU) a network of over 100 civil society organizations and community based organizations working together to improve education in Uganda. It undertakes joint advocacy to influence government and change. FENU has six active thematic groups working on: Access and quality; Gender parity; Education in emergencies; Lifelong Learning; Education for Refugees; Early childhood education.¹⁵
- **EIE (Education in Emergency) working groups** (Right to Play, a STL grantee is part of this): chaired by Finn Church Aid and the MoE. It includes many partners working on education and on VAC.
- **District education cooordination**, coordinated by the district education officer: coordinates education stakeholders and partners working on education both in settlements and in communities.





South Sudan

A government-led inter-sectorial coordinating group on the issue of ViS pulling together education and child protection major stakeholders as it exists in Uganda, seems yet to be missing in South Sudan. Beyond the Ministry of General Education and Instruction which has been leading the diagnostic from the institutional level, the Ministry of Child and Social Welfare has also a focus on protection.

Other platforms for consideration for taking the recommendations forward include:

- Education Development Partners group, chaired by FCDO and USAID.
- **SESIL**: a programme of the MoE funded by FCDO for 'Strengthening of education system for improved learning'. It intervenes in 27 local governments in Eastern and Northern part of Uganda to improve quality of learning in basic education in Uganda. One of its 4 key drivers is 'children are safe in and around school'. SESIL has contributed to the diagnostic and to taking forward its recommendations.
- **GBV sub-cluster** (IRC-led), of the national protection cluster (UNHCR-led) it works on gender-based violence including through interventions at the school level to protect girls.
- Child Protection sub-cluster (UNICEF-led) of the national protection cluster includes all agencies working on child protection. It has various working groups for which the recommendations of the diagnostic would be of relevance, including:
 - **Psychosocial support working group** this could for instance be used to take forward the diagnostic recommendations at the school level.
 - Case management task force could be useful to advance on the work on a referral pathway between schools and child protection.
- National Education cluster is a good forum to potentially influence the MoE, which is part of it.
- National Education Coalition: a coalition of about 115 CSOs and INGOs established in 2015. With a Secretariat hosted by Oxfam, their key focus is on advocacy on education for all. They collaborate with UNICEF, the Canadian Embassy and others.
- There are also working groups/education coordination groups at the state and county levels. These are led by different INGOs or CSOs depending on which ones are active in the specific geographic area.
- There is potential in country to be explored to link with the Initiative on Girls' Education in South Sudan
 – funded by FCDO and Canada . This is the second year of implementation. The initiative aims to attract
 and retain girls in school. Areas covered include school governance; teacher training; behaviour change.





Conclusion

This exercise aimed to draw objective lessons from the Safe to Learn diagnostic exercise in two countries that showed leadership and political will in prioritizing the safety of all girls and boys on their learning journey. We hope the different pieces of the process documented in this report will inspire other countries to apply this diagnostic as a tool to enhance national momentum to prevent and respond to violence in and through schools. Let us give the last words to leaders of one of these two countries who expressed what is at stake better than anyone could do.

In South Sudan we have people who grew up during the war.....When there is a conflict children tend to find schools as areas where they can get supported, they tend to come to school as a safe place..after school you have to run...you don't sleep at home, you hide in the bush..We can have a generation that looks at peace and not violence.....Schools are the right places if you want to pass the message to children as many children come to school.....There's the need for recovery, healing, acceptance in South Sudan ..there's a lot of needs ...this type of initiatives is the right thing to do...The study came out at the right time. I wish it could get implemented in a couple of counties.If we end violence in school then we will have a violence free generation.

Key informant South Sudan







Annexes

Annex 1 - List of key informants interviewed

SOUTH SUDAN				
Name, Surname	Title	Organisation	Interview Date	
Esther Akumu	Director General, Gender Equity and Inclusive Education	Ministry of General Education and Instruction	14.4.2021	
Ustaz. Kenyi Paulino Kuka	Education Specialist	UNICEF	6.4.2021	
Pawan Kucita	Chief Education and Adolescents	UNICEF	6.4.2021	
Drania Peace Abulu	Education Advisor, Essential Services Team	FCDO	20 April	
Ador Riak Nyiel	Director	National education coalition	15.4.2021	
Thomas Hussien	Child Protection Coordinator and lead for the StL project	IRC	21.4.2021	





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UGANDA			
Name, Surname	Title	Organisation	Interview Date
Rosette Nanyanzi	Gender Technical Advisor, and Equity Budgeting Unit	MoES	13.4.2021
Irene Naiga	Education Specialist	UNICEF	6.4.2021
Khushbakht Hojiev	Adolescent Development Manager	UNICEF	6.4.2021
Rosemary Akech Oyollo	Senior National Performance Lead	SESIL	13.4.2021
Isla Gilmore	Education Adviser	British High Commission in Uganda	20 April
Hassan Muluusi	Program Manager, Good Schools Violence Against Children Prevention	Raising Voices	15.4.2021
Patrick Stanley	Country Director	Right to Play	21.4.2021
Henry Acai	Project Manager	Right to Play	21.4.2021
Stephen Blight	Senior Advisor, Child Protection	UNICEF NYHQ	15.4.2021

Annex 2 - Main research questions

- 1. How did the diagnostic exercise unfold in country?
- 2. What were the major partners/stakeholders involved in the exercise in country?
- 3. To what extent the diagnostic was useful in country?
- **4.** What follow-up actions were taken as a result of the diagnostic in country? What are the future next steps planned in country as a follow-up to the diagnostic?
- **5.** What difference did it make that we did this work? Were any results achieved as a result of the diagnostic and its follow-up?
- 6. How do the different stakeholders value the diagnostic process?
- **7.** Are there any lessons learnt from the process? What did we learn about what worked and what didn't work in the process? What could we do differently?
- **8.** Through what country mechanisms are the recommendations being taken forward? What country mechanims exist in country through which the recommendations could be taken forward?





Endnotes and References

¹Source: <who.int/news-room/fact-sheets/detail/violence-against-children>, accessed on 21 April 2021

²United Nations Children's Fund. (2018). An Everyday Lesson #End Violence in Schools, UNICEF, New York

³Pereznieto, P. et al. (2014). The costs and economic impact of violence against children, ODI / ChildFund Alliance, London

⁴Source: Safe to Learn Roadmap 2020

⁵The growing coalition of partners behind Safe to Learn currently includes: Civil society: Civil Society Forum to End Violence against Children (CSO Forum); Donors: FCDO, Global Affairs Canada, The World Bank; Global partnerships: Education Cannot Wait (ECW), the Global Coalition to Protect Education from Attack (GCPEA), the Global Business Coalition for Education (GBC-Education), the Global Partnership for Education (GPE), United Nations Girls Education Initiative (UNGEI), the Global Partnership to End Violence Against Children Secretariat; UN System: UNESCO, UNICEF, WHO; Secretary General's Special Representative on Violence Against Children (SRSG-VAC), Najat Maalla M'jid.

⁶Three additional stakeholders were contacted but did not respond to the invitation.

⁷Five types of interview guides are available: Student Interview Guide; Teacher Interview Guide; Head Teacher Interview Guide; District Officer Interview Guide and Ministry of Education Interview Guide.

⁸Source: author interview with a representative of the Ministry of Education of South Sudan.

Source: Safe to Learn, Safe to Learn Diagnostic Exercises in Nepal, Pakistan, South Sudan and Uganda. Synthesis Report, Safe to Learn: New York, 2020.

¹⁰Source: Safe to Learn, Safe to Learn Diagnostic Exercises in Nepal, Pakistan, South Sudan and Uganda. Synthesis Report, Safe to Learn: New York, 2020.

¹¹Source: Safe to Learn, Safe to Learn Diagnostic Exercises in Nepal, Pakistan, South Sudan and Uganda. Synthesis Report, Safe to Learn: New York, 2020.

¹²The growing coalition behind Safe to Learn includes the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children's Fund (UNICEF), The Foreign, Commonwealth & Development Office of the United Kingdom (UK FCDO), the United Nations Girl's Education Initiative (UNGEI), the Civil Society Forum to End Violence against Children, the World Bank, Education Cannot Wait (ECW), the Global Partnership for Education (GPE), the Global Business Coalition for Education, Global Affairs Canada, the World Health Organisation, the Global Coalition to Protect Education from Attack, the United Nations Special Representative of the Secretary-General on Violence Against Children, and the Global Partnership to End Violence Against Children.

¹³SESIL is a programme of MoE funded by FCDO 'Strengthening of education system for improved learning'. In 27 local governments in Eastern and Northern part of Uganda to improve quality of learning in basic education in Uganda. They have 4 key drivers – one of them being 'children are safe in and around school'.

¹⁴Source: Ministry of Education and Sports, The Republic of Uganda. Adm/97/298/01, 17th September 2020

¹⁵For further information: fenu.ug/about







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