International Conference On
CHILD PROTECTION IN AFRICA

THEME
From Vulnerability to Resilience, Innovation and Evidence

VENUE
Daystar University, Nairobi Campus
Nairobi, Kenya

DATE
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Increasing children's access to protection and Legal services in rural communities using AVSI Uganda community legal clinics

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AVSI Foundation: Origin, Vision and Mission

**AVSI Foundation** is a non-governmental organization born in 1972.

**AVSI** works for a world where every person, aware of her value and dignity, is the main protagonist of her own integral development and that of her community, even in crisis and emergency contexts.

**AVSI** implements cooperation projects in various sectors with a preferential focus on education, meaning that the person is accompanied towards self-discovery and recognition that the other person is a good for me. Each project is conceived of as an instrument to promote this awareness in all persons involved, carries in itself a need for communicating and sharing, and creates an impact capable of generating positive change.
Sectors

- Education+ ECD
- Food security and Nutrition
- Agriculture
- Health
- Protection
- Psychosocial care
- Family strengthening
- Economic strengthening
- WASH
- Energy and environment
- Urban development
- Emergency
SCORE Brief: USAID/PEPFAR Funding

LEAD AGENCY: AVSI Foundation – CARE, FHI360 and TPO Uganda

PARTNERS: 66 Local Implementers

DURATION: 7 Years (Apr 2011 – Apr 2018)

TARGET: 25,000 HHs, 125,000 people

REACH: *34,779 HHs and 208,674 people

COVERAGE: 35 districts

BUDGET: $40,041,414 ($36,045,184 USAID and $3,996,230 cost share)
SCORE goal, objectives and Approaches

Goal: To decrease the vulnerability of moderately and critically vulnerable children (VC) and their households.

- Objective 1: Economic strengthening
- Objective 2: Food security and Nutrition
- Objective 3: Child protection and legal services
- Objective 4: Family strengthening & access to critical services

- **DREAMS**: Reducing HIV incidence among AGYW 10-24

Approach

- Multi-sectoral
- Family-centered approach.
- Commitment to “fit the project to the people”.
- Use of evidence and robust M&E System
- capacity building and “Graduation model”
Innovative practices and evidence:
Through a strong case management model:
- The project identified protection risks at baseline in 2011 to include;
- Use of substances and drugs at 7%
- Child abuse stood at 38%
- Child labor stood at 26%
- Low school enrolment at 79%
- High absenteeism (Statistic Required)
- Access to legal and protection services (23% of beneficiaries did not know where to access legal services)
Protection and GBV indicators at baseline

- Child labor: 26%
- School Absenteeism: 44%
- Substance abuse: 7%
- School Enrollment: 78%
- Legal knowledge: 77%
Innovative Practice: Community Legal Clinics

Objectives:

- Extend Child protection and Legal service to hard to reach areas.
- Facilitate the process of case reporting and management since the cost of referral is low.
- Bridge the gap between legal service providers and community members
Innovative Practice: Community Legal Clinics

Process:

Step 1: IDENTIFICATION OF CHILD PROTECTION ISSUES/CONCERNS:
- Reference to Vulnerability Assessment Tool (VAT)
- Reference to Home visit Reports and Dialogue Findings
- Select and prioritize two issues in legal clinic session

Step 2: MOBILIZATION FOR COMMUNITY LEGAL CLINIC
- Identify Key stakeholders in the legal fraternity
- Appropriate date, time and venue is identified
- Maximum of 3 legal service providers are recommendation
- Local forums are used to mobilize community members
- Community child protection structures are part of the sessions

Step 3: CONDUCTING COMMUNITY LEGAL CLINIC
- Hold preparation meeting with selected legal practitioners
- Develop and share the legal clinic session programme
- Session are interactive/building from the known in the community

Step 4: LEGAL CLINIC SESSION
- Separate spaces are allocated for the legal practitioners to handle cases
- Referral forms are issued to community members seeking Legal redress
- All cases are documented
- Debrief with legal practitioners
- Clear follow up plan is developed
Significant changes (Legal Clinic Results)

- Improved relationship between the legal services providers and the community.
- The legal clinic was also used as platform for birth registration, over 24,912 of the children in the project attained birth certificates.
- Reductions in child labour from 26% to 4%,
- Reduction in child abuse from 38% to 6%,
- Reduction Substance abuse from 7% to 2%.
- Increased awareness on existing legal services from 78% to ......
Protection and GBV indicators at end line

Child labor 26% to 4%

School absenteeism 44% to 9.2%

Substance abuse 7% to 2%

School enrollment 78% to 86%

HH knowledge on where to seek legal services 77% to 99%
Replicability

- Applied in both rural and Urban Settings.
- Integrating legal clinics into existing interventions and activities.
- Cross-cutting legal issues (e.g. land Rights)
Engagement of existing child protection and Legal structures at district, sub county & Village levels

Trained and built capacity of social workers in the 35 districts.

Empowered the Community Legal Structures.
Lessons Learnt

- Involvement of stakeholders and community members in the initial planning is very significant.
- Appropriate number of community members in the legal clinic sessions.
- On spot referral during the clinic sessions are easy to manage and follow up.
- Prioritizing issues/topic of discussion.
Area for Further Research

- Sustainable and cost effective legal access interventions/ models in rural community
Our contacts

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