



*Communication for  
Development  
Foundation  
Uganda*

# ANNUAL REPORT 2016

IGNITE  
CHANGE





“

Because of the *Healthy Choices* radio drama I am now aware that marrying off young girls leads to dangers of teenage pregnancy. I can now openly discuss with my daughters about these issues. Though I never attained any basic education, I have realized the benefits of education. For example the longer girls stay in school, the longer they will delay pregnancy. I now support girl child education.”

Naomi Angella, Osimiot village, Katakwi district.







# IN 2016

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Making healthy reproductive choices starts with the right information from a trusted source.
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First the evidence, then the relatable, relevant and successful program.
- 7** Access

When mothers are linked to good antenatal and delivery services, both the mothers and their precious babies are more likely to survive and thrive.
- 10** Educate

Getting communities exposed to cutting edge malaria prevention methods including Indoor Residual Spraying (IRS).

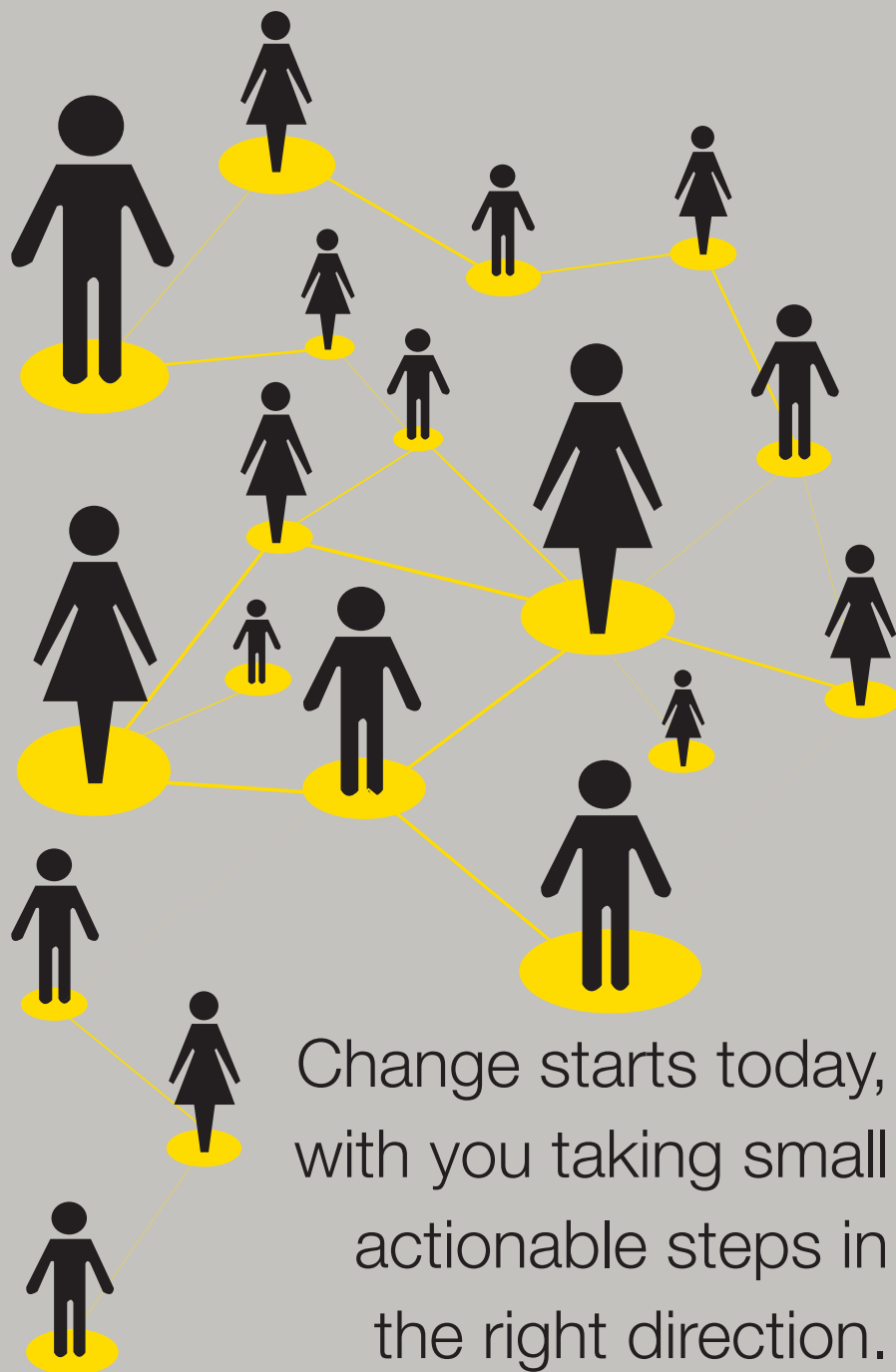
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Ending Violence Against Women and Girls (EVAWG), starts with addressing the negative attitudes and cultures that fuel it.
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Well harnessed, the people's voice and pursuit of their rights can be a significant force of change.
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*Rock Point 256* is the award winning radio drama that utilizes evidence and edutainment to prompt the listeners to reflect on their lives and make positive choices.
- 23** Inspire

The CDFU toll free Hotline provides reliable, anonymous and non-judgmental services for callers seeking information, counselling and referral on health and development issues.
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# WHO WE ARE

## WE ARE COMMUNICATION FOR DEVELOPMENT FOUNDATION UGANDA

A Uganda based Development Communications Non-Governmental Organization (NGO) that was established in 2002 to bridge the gap in provision of fully fledged Social and Behaviour Change Communication (SBCC) services in the country.

## OUR APPROACHES

CDFU works through existing structures including government departments at national, district and lower levels; NGOs; Community-Based Organisations (CBOs); school clubs (for school-based programmes) and other community structures/ networks. We utilize world- proven, tested behavior change approaches.

## OUR EXPERTISE

We operate as a “one-stop centre” for design and production of various communication products (print and electronic) and implementation of SBCC programmes with focus on: reproductive health; maternal and child health; nutrition; HIV & AIDS; WASH; malaria; gender; financial literacy; and civic education among others.

Our key areas of expertise include: community mobilisation and empowerment; development and production of toolkits, job aids and Information, Education and Communication (IEC) materials; development of radio programs; design of communication and advocacy strategies and capacity building in SBCC.

Our interventions are linked to the CDFU Toll-free Hotline (0800 200 600) that provides reliable information, counselling and referral services.



## OUR VISION

“A transformed society where individuals take action to improve their lives.”

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## OUR MISSION

“Design and deliver communication programs tailored towards sustainable development.”

**3,000,000+ people** received behavior change messages generated by CDFU programs in all regions of the country



# CDFU BOARD OF DIRECTORS

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**Dr. Wilson  
Winstons Muhwezi**  
CHAIRPERSON - CDFU  
BOARD OF DIRECTORS

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**Ms. Nankunda  
Babihuga**  
EXECUTIVE DIRECTOR  
TECHNICAL

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**Mr. Basil Tushabe**  
EXECUTIVE DIRECTOR  
MANAGEMENT

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**Mr. Bruce Kyerere**  
BOARD SECRETARY

---



**Ms. Anne Gamurorwa**  
EXECUTIVE DIRECTOR  
PROJECTS

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**Dr. Joseph Matovu**  
BOARD MEMBER



**Ms. Joweria Kamariza**  
BOARD MEMBER



**Mr. Francis Xavier  
Sentamu**  
BOARD MEMBER



**Ms. Catherine  
Mwesigwa Kiiza**  
BOARD MEMBER



**Mr. Steven Openy**  
BOARD MEMBER

# A MESSAGE FROM THE BOARD CHAIR

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## A TRANSFORMED SOCIETY

“A transformed society where individuals take action to improve their lives.”

CDFU Vision

I am privileged to have joined the 15 year old organization as Board Chair. The year was fast paced with critical institutional strides achieved. We developed and launched a 5 year strategic plan maximizing strategic communication for Health, environment, agriculture and livelihoods, education, civic engagement and financial literacy. We are also committed to institutional development.

I congratulate the Board, management and staff of CDFU on all their hard work throughout the year and especially on developing the new strategic plan. I would like to recognize significant achievements in our work in Reproductive Health (RH), malaria prevention, Gender-based Violence (GBV), advocacy, civic education as well as provision of information, counselling and referral services through the Toll-free Hotline. A vote of thanks goes to all our stakeholders as well as national and international partners including: USAID through prime contractors, Democratic Governance Facility (DGF), UNFPA, UN Women, and Twaweza East Africa. Your support was instrumental in the milestones achieved during the year.

I look forward to a year of propelling our expertise, expanding our networks, and maximizing resources to empower communities with the right information and skills to motivate them adopt positive behaviours to transform their lives.

A handwritten signature in purple ink, appearing to read 'Wilson Muhwezi', with a stylized flourish at the end.

**Dr. Wilson Winstons Muhwezi**  
CHAIRPERSON - CDFU BOARD OF DIRECTORS



# MESSAGES FROM THE DIRECTORS



## NEW THINKING

More than ever before SBCC programs have to re-evaluate the strategies used in order to remain relevant. In the same breath, the communication methods and messaging we use to drive positive behaviors have to match up.

For 15 years CDFU has remained cognizant of the fact that our number one focus is the needs of the people we serve. In 2016, we developed a new Strategic Plan to guide us forward. We will measure our performance against this commitment and the results demonstrated through sustained behaviour change in the communities where we work.

Looking forward, we will prioritize strategic communication for health, environment, agriculture and livelihoods, education, civic engagement and financial literacy.

This new momentum can only be sustained by a strong institution which we will steadily strengthen over the next 5 years.

**Mr. Basil Tushabe**  
EXECUTIVE DIRECTOR - MANAGEMENT



## PRIORITISING EVIDENCE

One of the questions we ask ourselves on any communication project is –“Who is the audience?” The CDFU team spends a great deal of time understanding the people, their culture, needs, daily activities, their economics, education, gender, beliefs and even aspirations.

All our interventions are based on evidence. In 2016, CDFU worked with Ministry of Health (MoH) to conduct a formative research on Family planning across 10 regions in Uganda. We also conducted a qualitative study on Adolescent Sexual Reproductive Health and Rights in 14 districts of Karamoja and eastern Uganda. Additionally, we conducted an end line survey of the Sayana® Press Pilot project. Results from these studies and surveys informed how we were able to tailor messages and empower people to take control of their lives. Knowing enough about the context of peoples' lives enables us to tailor responses that work. It is a sure way to give value for money everyday.

**Ms. Anne Gamurorwa**  
EXECUTIVE DIRECTOR - PROJECTS



Through a combination of innovative approaches, we used both traditional and new communication methods including: mass media, interpersonal communication, community mobilization and edutainment to influence positive behavior change.



## LEVERAGING PARTNERSHIPS

In a world where corporate mergers are increasingly popular, development partners are not far off. Alone most organisations cannot comprehensively fulfill the needs of their clients. In our business we have learnt that the wellbeing of human beings and communities is influenced by multiple and interrelated factors. Any attempt to help people improve their lives requires equally diverse but linked responses.

This year CDFU expanded its partnerships providing strategic behavior change communication for HIV prevention, Malaria Control, Civic Education, Youth Empowerment, Reproductive Health and Gender Based Violence (GBV) prevention. We were privileged to bring our expertise to work on several outstanding partnerships including the USAID/Uganda Voucher Plus Activity; Malaria Action Program for Districts (MAPD); USAID Regional Health Integration to Enhance Services in East and Central Uganda (RHITES-EC); End Violence Against Women and Girls (EVAWG); *Healthy Choices*; USAID Advocacy for Better Health; USAID/Indoor Residual Spraying (IRS) and *Youth Rock the Nation*.

Not one of the achievements we are proud of would be possible without the generous support of our development partners and Government officials at national and district level. The CDFU Board stands apart in its consistent technical guidance and support. We celebrate the passionate CDFU team who spend their days making sure that the right messages and programs are implemented. We salute the communities who are courageous enough to act on the information they receive to change their lives.

**Nankunda Babihuga**  
EXECUTIVE DIRECTOR- TECHNICAL



# EVENT CALENDAR - A SNAPSHOT



## WORLD MALARIA DAY

**Date:** 25<sup>th</sup> April, 2016

**Location:** Lira district

**Theme:** "End Malaria for Good"

CDFU showcased its contribution towards malaria prevention. We displayed IEC/SBCC materials that included IRS posters and frequently asked questions.

The Minister of Health acknowledged the significant impact of IRS in northern and eastern Uganda and acknowledged USAID/PMI and UK-aid for the support they were extending in fighting malaria through IRS. The new IRS insecticide was officially launched by the Minister of Health on World Malaria Day.



## WORLD POPULATION DAY

**Date:** 11<sup>th</sup> July, 2016

**Location:** Isingiro district

**Theme:** "Harness Uganda's Demographic Dividend: Invest in Teenage Girls."

CDFU showcased its programs during the World Population Day celebrations. The event was officiated over by H.E., the President of Uganda as the Guest of Honour.



## THE ROLL BACK MALARIA ANNUAL CONFERENCE

**Date:** 29<sup>th</sup> - 30<sup>th</sup> September, 2016

**Location:** Dakar, Senegal

The CDFU Executive Director, Basil Tushabe and IRS Communication Specialist, William Ogwal participated in the Roll Back Malaria (RBM) Communication Community of Practice (CCoP).

CCoP is an annual event held on rotational basis in countries with high malaria burden to network and expand the role of SBCC in the implementation of malaria prevention, control and elimination activities. CDFU made a poster presentation at the conference titled, "Social mobilization through community structures to enhance service delivery."

JAN

FEB

MAR

APR

MAY

JUN

JUL

AUG

SEPT

OCT

NOV

DEC



An instructor leading CDFU staff in the "Pathways to Change" BCC game

# ENGAGE

Making healthy reproductive choices starts with the right information from a trusted source.

## INNOVATION BEYOND "INSTRUCTION TO ACTION"

When people are exposed to characters that mirror their lives and relatable experiences through a radio drama, their hearts and minds are captured. No different than a popular soap, listeners can't help but reflect on their own lives in comparison to the stories they are presented. This approach is dynamic because it *"models"* positive behaviour through transitional characters rather than *"Instruction to Action."*

Under the UNFPA 7<sup>th</sup> country programme, we broadcast a stimulating radio show *"Healthy Choices"* focusing on population and development, reproductive health and gender issues. The characters model positive practices, behaviours, stimulated dialogue and action. We partnered with Village Health Team members (VHTs) who are a part of Ugandas health service and the "go-to-persons" in the community for advice. VHTs convened community members to hear engaging messages and there after facilitated discussions in order to promote healthy practices. The VHTs were provided a radio set, discussion guide and feedback forms to track learning.

Our interventions were linked to the CDFU Toll-free Hotline (0800 200 600) that provides reliable information, counselling and referral services.



## AT A GLANCE



A radio drama set in  
an imaginary village called  
**CORNER MADIT**

- 17 episodes produced in **English, Luganda, Luo and Ngakaramajong**.
- Drama **modeled behaviour** through **transitional characters**.
- Featured **monthly Q&A session** with an expert.



**10+ districts**

Kaabong, Kotido,  
Moroto, Abim,  
Amudat, Napat, Gulu,  
Lamwo, Kitgum and  
Nakapiripit.

**4 community-based radio stations broadcast**  
in 4 languages (Luganda, Lugbara, Luo and  
Ngakarimajong).

## HIGHLIGHTS

**Intergrated Communication:** Produced an integrated design document which guided development of storylines and scripts for the *Healthy Choices* radio serial drama as well as online messaging for FP, MH, GBV and HIV. The development process was also informed by data from the Family Planning Formative Research study.

**Evidence Based:** With support from UNFPA, CDFU carried out formative research on Adolescent Sexual Reproductive Health and Rights in 17 districts of Karamoja and eastern Uganda. Findings informed content development for a radio serial drama focusing on preventing teenage pregnancy and child marriage. The study findings showed that teenage pregnancy and child marriage were strongly entrenched practices in the study districts with cultural values and economic vulnerabilities at household level being the major influencers.



A script writer leads the participants in the development of the Family Planning storyline



# RESEARCH

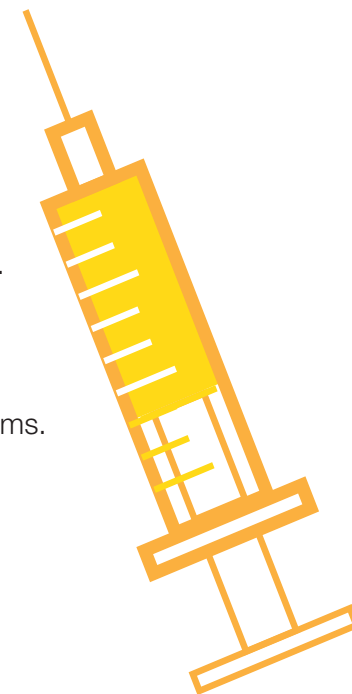
First the evidence, then the  
relatable, relevant and successful  
program.

The applicability of our work hinges on the accuracy of the evidence upon which we build interventions. Only when you are certain about the behaviours of a community can you start a meaningful dialogue on the status quo and challenge thinking around better actions. CDFU conducted studies on family planning and adolescent sexual reproductive health to inform development of communication strategies, materials, tools and messages.

In 2016, an evaluation of interventions to introduce the Sayana® Press contraceptive was conducted.

Sayana® Press is an innovative subcutaneous injectable contraceptive administered during routine health service delivery channels. The pilot which ended in September 2016 will build the evidence base for global decision-making about inclusion of Sayana® Press in future family planning programs.

CDFU worked with PATH to create awareness and demand for Sayana® Press.



Annet, a VHT and first woman recipient of Sayana® Press  
(COURTESY OF PATH/Will Boase)

## AT A GLANCE



# 10 districts

Nakasongola, Kibaale, Mayuge, Gulu, Apac, Kyegegwa, Mubende Kole, Alebtong and Amuria.

**CDFU:** SBCC expert

### Funders:

- Bill & Melinda Gates Foundation
- Child Investment Fund Foundation (CIFF)

“

I started using Sayana® Press after hearing about it from Voice of Lango FM... I have used it for nine months now.”

Satisfied user in Apac district.

## HIGHLIGHTS

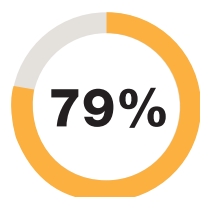
Knowledge, beliefs, attitudes, practices, enablers and barriers to access and utilisation of family planning conducted in five (5) districts.

- Developed and disseminated project **Communication Strategy** at district and national level.
- **851 VHTs trained** in Interpersonal Communication. The VHTs conducted home visits, one-on-one sessions and outreach visits to generate demand for Sayana® Press.
- **126 community dialogues** reached more than 2,400 people with Family Planning messages.
- 10 experiential activations using puppetry, reached **over 1,120 people with Family Planning messages**.
- Communication materials produced.
- **58 interactive radio talk shows** broadcast on 13 radio stations.
- **Over 15,900 radio spots** broadcast on 11 FM stations.
- Provided family planning information, counselling and referral services to **1,517 callers**, 64% of the callers were male (933) while 36% were female (584).

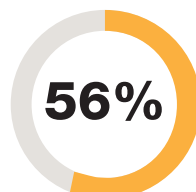


## ALL EYES ON BEHAVIORAL IMPACT

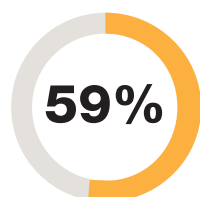
The real reward is in actual behaviours adapted. Results from the Sayana® Press endline survey carried out by CDFU indicate encouraging changes in knowledge, attitude and utilisation of family planning services.



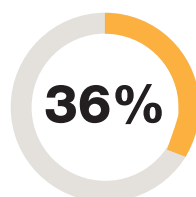
Respondents reported having been influenced to take action or change their behaviour/perceptions by the Sayana® Press messages



Respondents were influenced to start using Sayana® Press

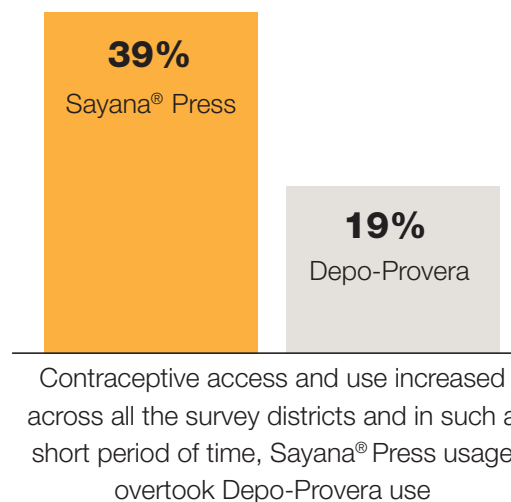
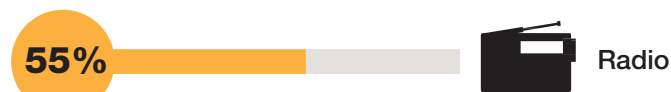
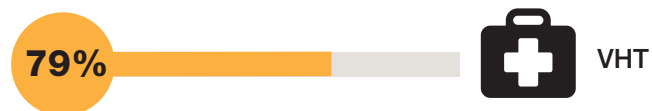


Respondents reported to have heard about Sayana® Press although knowledge of any Family Planning method was universal across all groups of respondents interviewed



Talked to and encouraged their friends/family to start using Sayana® Press

### Source of information



**7 in 10** women (72%) were using modern methods of Family Planning with 39% of these using **Sayana® Press** and 13% on Depo-Provera

**67%** reported exposure to **Sayana® Press SBCC interventions** with the most seen or heard messages revolving around:

- Types of contraceptives including Sayana Press (**61%**)
- Possible side effects of family planning (**20%**)
- Myths and misconceptions (**6%**)

## RELENTLESS: A COUPLE'S QUEST FOR THE RIGHT CONTRACEPTIVE

### Patrick and Ketty's Story

Patrick Obote and his wife Ketty Atapi were not novices at Family Planning. Infact, Ketty had used pills for 4 years. As a result their 4 children were well spaced, the first born 11 years and the last 4 years old. The couple was sure four was the right family size.

Patrick shares, "We want a manageable family size and peace in the family. If you don't plan for your children they become thieves and a burden to the community." However Ketty had become weary of taking a pill every single day. They tried Depro-Provera (an injectable), but Ketty's menstrual cycle became irregular; they decided to find another method. There were too many sad stories in their village of families that could not take care of their children; listening to the radio program changed all that.

"One evening when my wife and I were listening to Divine FM, we heard about Sayana®Press. They said it was easy and safe to use and listeners were referred to the nearest VHT for more information. We contacted Walter Okello, the VHT in our village, who provided us with more information and counselled us on how to use Sayana®Press. Ketty agreed to try Sayana®Press."

It is one year now, and the couple has not had any problems. Ketty is stronger than ever before, "I can take care of my last child without being scared I may get pregnant. We have peace."



The couple – Patrick Obote and Ketty Atapi

"I have been able to save some money and even bought land; we keep telling others to try Sayana®Press to plan the family they can manage."

PATRICK OBOTE,  
SATISFIED USER



# ACCESS

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When mothers are linked to good antenatal and delivery services, both the mothers and their precious babies are more likely to survive and thrive.

CDFU utilizes a mix of multi media methods including interpersonal, group communication as well as mass media approaches to generate demand for quality health services.

Under the USAID/Uganda Voucher Plus Activity, CDFU contributed towards demand generation, access and utilisation of safe motherhood services through the private sector in the target districts.



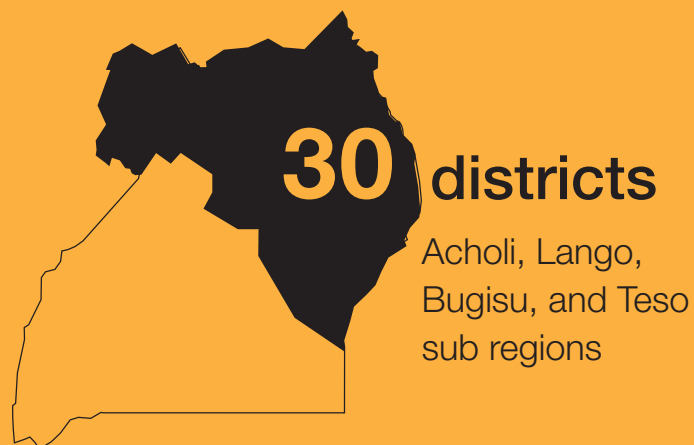
More than **15,000 vouchers** sold to low income pregnant mothers

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Amongin Malta, a voucher beneficiary from Kamuge sub County, Pallisa district

## AT A GLANCE



- **160** private facilities
- **Over 8,800 leaders sensitised** on safe motherhood and the voucher program through 278 meetings at sub county level

 **4,859 female**

 **3,989 male**

- **200 Voucher Community Based Distributors (VCBDs)** from **97 health facilities** trained in interpersonal communication and marketing to enable them effectively sell the vouchers
- **264 callers** provided with information, counselling and referral services through the toll free Hotline

## VOICES

### Directions

Annet called in to appreciate her clients for calling during the talk show because they were able to get:

- Correct information on the voucher
- Good directions to the accredited health facilities



*Annet (VCBD, Mufutu Village, Mbale district)*

### Affordability

Diana is positive about delivering at a health facility. She is thankful for the opportunity to deliver at a private facility at a cost she would never have afforded without the voucher.

*Diana (25 year old from Kumi district)*

### First Timers

All her previous deliveries had been done by traditional birth attendants, she didn't dare try the health facility near her, it would be unaffordable. The voucher made it possible.

*Esther (25 year old from Kumi district)*

### User Satisfaction

Denis, a Voucher Community Based Distributor (VCBD) working with Lucky Medical Centre in Pallisa called in on behalf of his clients - low income mothers were grateful to get care at a private facility. Majority were first timers - delivering at a facility rather than at home.

*Denis (VCBD, Palisa district)*

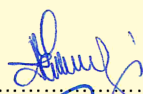
# FINANCIALS

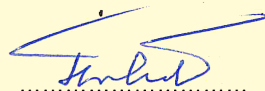
**COMMUNICATION FOR DEVELOPMENT FOUNDATION UGANDA (CDFU)**  
**(A Company Limited by Guarantee and Having no Share Capital)**  
**STATEMENT OF FINANCIAL POSITION**  
**AS AT 31 DECEMBER 2016**

		2016 Ushs	2015 Ushs
	NOTE		
<b>ASSETS</b>			
<b>Non - current assets</b>			
Property and equipment	5	<u>198,668,708</u>	<u>239,924,973</u>
<b>Current assets</b>			
Account receivables	6	132,733,921	209,975,414
Cash and cash equivalents	7	<u>381,355,362</u>	<u>408,274,845</u>
		<u>514,089,283</u>	<u>618,250,259</u>
<b>TOTAL ASSETS</b>		<u>712,757,991</u>	<u>858,175,232</u>
<b>EQUITY AND LIABILITIES</b>			
<b>Equity</b>			
General fund	9	172,472,491	323,066,106
Capital fund	10	198,668,708	239,924,973
Restricted fund	12	<u>184,581,599</u>	<u>86,998,989</u>
		<u>555,722,798</u>	<u>649,990,068</u>
<b>Current liabilities</b>			
Account payables	8	<u>157,035,193</u>	<u>208,185,164</u>
<b>TOTAL EQUITY AND LIABILITIES</b>		<u>712,757,991</u>	<u>858,175,232</u>

The notes set out on pages 19 to 25 form an integral part of these financial statements

The financial statements were approved by the Board on 19/10/ 2017  
and signed on its behalf by:

  
..... Chairperson

  
..... Executive Director

  
..... Board Secretary



# EDUCATE

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## Getting communities exposed to cutting edge malaria prevention methods including Indoor Residual Spraying (IRS)

Uganda has been fighting malaria for many years. When communities are equipped to use proven preventive methods alongside other malaria interventions, we are closer to stamping out the disease. Since 2012, CDFU has been part of the consortium that implemented the Uganda Indoor Residual Spraying (IRS) project that addresses malaria prevention through indoor residual spraying. The USAID PMI, UK AID supported project was led by Abt Associates, which manages all the technical aspects. CDFU spearheaded the behavior change communication component of the project.

The main focus of the interventions was sensitising district leadership and communities about IRS, with special emphasis on Interpersonal Communication (IPC), gender appropriate messages, and transitioning community mobilisation activities to the district. We also focused on integrated malaria messaging, which emphasized all four core malaria interventions (Indoor residual spraying, malaria in pregnancy, ITNs, test, treat and track). The messages urged communities to continue using these interventions to ensure that the sustainability of IRS gains are maintained.



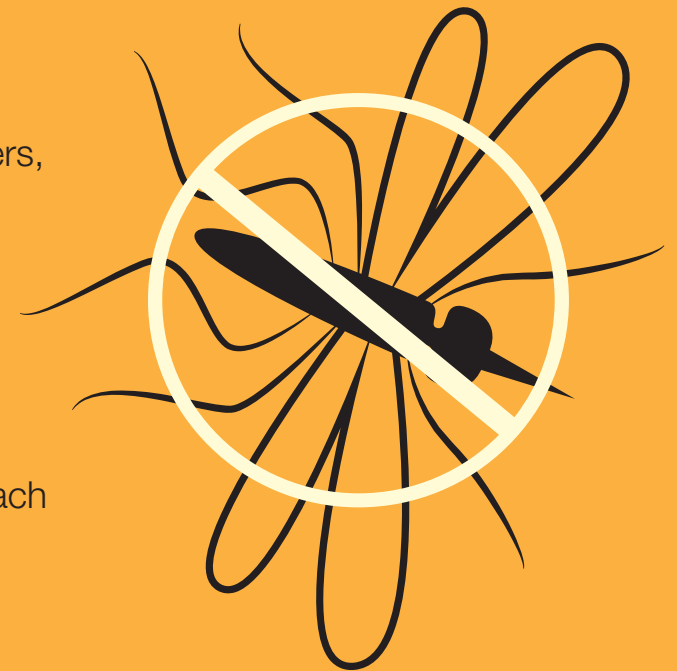
The Minister for Health Hon. Dr. Elioda Tumwesigye, launches the new insecticide



## AT A GLANCE

Strategic Behavior Change Communication messages shared helped increase community acceptance of IRS and provided guidance on a holistic approach which includes other malaria prevention and treatment interventions for successful outcomes.

- **65,000+ community members** reached with behavior change messages
- **2,400+ community dialogues and focus group discussions** conducted to sensitise communities about IRS and the new recommended insecticide
- **456 members of 18 women's groups reached** through "women - only" dialogues with messages on malaria prevention with IRS
- **228 radio announcements and 1,070 radio spots**
- **107 interactive talk shows** broadcast featuring practitioners, DHT members, political leaders and IRS beneficiaries. The media from Eastern and Northern districts were oriented on IRS and two (2) media houses contributed free airtime for talk shows
- **23,000+ IEC/SBCC materials** (including posters and FAQ leaflets) disseminated through Local Council structures (LC1s).
- Our interventions contributed towards attainment of **95% IRS coverage** each spray round.



## MALARIA FREE ZONE

### Malaria Free Schools

At Kabweri primary school, the effect of spraying was tremendous. During the IRS Sub county sensitization meetings, the head teacher pointed out that class attendance was high, concentration was better and the parents who had their homes sprayed reported the same good results.

### Championing Indoor Residual Spraying

Mr. Peter Abila is a farmer from Bata, Dokolo district. He belongs to a collective production group - farmers who grow and sell their harvest together. At a district meeting, Peter shared that once he had sprayed his house, farmers in the group did not want to take the produce he had stored because they feared it was contaminated with chemicals. However, when he invited the group leaders to his home, Peter was able to demonstrate that he had kept the produce in a separate room where it was not sprayed. After the visit they agreed to buy the stock. He is now an IRS mobilisation champion in Dokolo and he was featured as a guest speaker on one of the interactive radio talk shows organised by the project on Dokolo FM radio station. His testimony generated a lot of interest and many listeners called in to know more about how they too could store their produce before having their homes sprayed.



Indoor Residual Spraying exercise

Insecticide worked very well at Basira Musoki's house, his malaria related expenditure reduced significantly.

His advice - **Do it and follow the spray operators' instructions.**

**BASIRA MUSOKI,  
MAZUBA PARISH,  
BUDAKA DISTRICT**





# AWAKEN

Ending Violence Against Women and Girls (EVAWG), starts with addressing attitudes, mindsets, cultures and behaviors that fuel it and promote silence.

One of CDFU's core areas of focus according to its 5 year strategic plan is Gender Based Violence (GBV) prevention. With support from UN Women CDFU implemented a project aimed at reducing social tolerance and acceptance for violence against women and girls in 7 districts of Kampala, Moroto, Kaabong, Pader, Kitgum, Gulu and Kamuli.

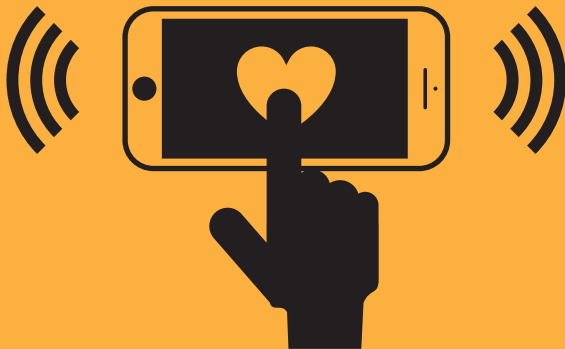
We worked to increase awareness among women and girls about their rights, legal implications, risks of VAWG; influence adaptation of gender equitable and respective attitudes, behaviors and practices at community and individual level and; equip key influencers and duty bearers with knowledge and skills in prevention and response approaches.



## AT A GLANCE

Multi-media and multi-sectoral approach to End Violence against Women and Girls (EVAWG)

- **Conducted formative research:** to inform strategy development and multi media campaign design
- **Developed a communication strategy:** the process involved all stakeholders through a strategy design process
- **Developed multimedia multi sectoral communication campaign:** CDFU embarked on the process of developing a multi-media multi-sectoral awareness and outreach advocacy campaign to raise awareness and influence change in attitudes, beliefs and practices that perpetuate violence against women and girls.



## ROLL OUT

The campaign, which will be launched in 2017, will utilise a combination of mass media, interpersonal communication, and community approaches to stimulate dialogue and action among communities, families, schools, and health institutions; and model positive practices through local and national media.



We will partner with existing community structures and organizations, particularly those implementing and providing services to survivors of violence to minimize duplication of efforts and enhance sustainability.

## POSITIVE OUTLOOK

It is expected that the campaign will empower women and girls to break the culture of silence about violence perpetrated against them and encourage men to develop gender equitable attitudes towards gender roles and norms and use non-violent means of resolving conflict.





# ADVOCATE

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Well harnessed, the people's voice and pursuit of their rights can be a significant force of change.

CDFU provided communications support to USAID/Advocacy for Better Health project working to improve the quality, availability and accessibility of health and other social services in 35 districts.

At the center of this advocacy effort is empowering individuals to demand their legal rights to health and other social services.



## AT A GLANCE

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### Development and Dissemination of the

**Patients' Charter:** The Patients' Charter poster was developed highlighting the rights and responsibilities of citizens. The process involved consultation with the target audiences to determine the critical rights and responsibilities.

As a patient, you have a right to:

- Proper medical treatment
- Be attended to without discrimination
- Be treated by a named health service provider
- Be listened to in case of a complaint
- A healthy and safe environment
- Accurate information provided by a health worker
- Privacy and confidentiality during consultation and treatment
- Access your medical records/information

You also have a responsibility to:

- Provide accurate information to a health worker
- Comply with treatment given by a health worker
- Respect the rights of other patients and health workers

## GETTING THE WORD OUT

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### Social Accountability

120 TV Spot messages aired on Domestic Health Financing as well as rights and responsibilities.

The spots triggered discussion about health financing, commodity security and human resources for health.

In addition, they targeted leaders as the primary audience and encouraged citizens to hold leaders accountable.




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### Messaging

CDFU coordinated and managed placement of advocacy messages on radio stations in addition to airing interactive radio talk shows.



## Radio Programmes

- **Four (4) radio spots scripted under the themes:** MCH/RH/FP, HIV & AIDS/TB, Malaria and Nutrition
- **Radio programmes and spots placed on 15 radio stations:** 4 national level and 11 district based

## Radio Drama

- **Radio serial drama:** CDFU utilised *Rock Point 256* to highlight the advocacy issues on drug stock outs and health worker absenteeism prompting the target audiences to call the CDFU toll-free Hotline to provide feedback on what was happening in the community.

## Hotline

- **Information and feedback through the toll-free Hotline:** CDFU's Hotline provided information and received feedback on issues concerning drug stock outs; violation of the patients' rights and health worker absenteeism.



## Radio Spot Messages:

**15 RADIO STATIONS**  
**4 NATIONAL LEVEL**  
**11 DISTRICT LEVEL**

## FEEDBACK

Innocent aged 20 called the Hotline on 4th Feb 2016 from Alebtong with a complaint that Alebtong Health center IV had run short of drugs and had also heard a rumor that some medical staff were transferring government drugs to their private clinics.

A female caller aged 20 called from Kayunga district called with a complaint about the female doctors and nurses in Kayunga hospital who were arrogant and rude while offering services to clients.



# INSPIRE

*Rock Point 256* is the award winning radio drama that utilizes evidence and edutainment to prompt the listeners to reflect on their lives and make positive choices.

For 11 years CDFU has through '*Rock Point 256*' reached more than 6 million young Ugandans with key messages addressing a range of issues including HIV and AIDS, sexual and reproductive health, nutrition, child health, Gender Based Violence (GBV), malaria and civic education.



*Rock Point 256* Activation Event At Gulu



## AT A GLANCE

*Rock Point 256 makes 11 years*



Produced and broadcast four (4) storylines focusing on:

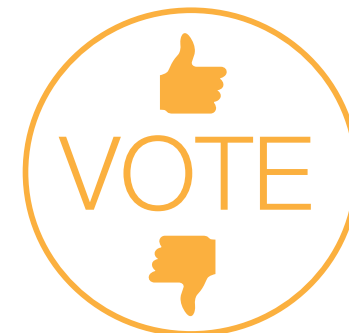
- Voter education (DGF supported)
- Drug stock outs and absenteeism in health facilities (USAID Advocacy for Better Health project)
- Community and leadership engagement for better academic performance (Twaweza East Africa)
- Civic education (DGF supported)

## HIGHLIGHTS

### Voter Education

CDFU with the support of Democratic Governance Facility (DGF) is proud to have contributed to the increase of the voter turnout in the Ugandan presidential elections in Uganda from 59.29% (2011) to 67.61% (2016).

An end of project evaluation showed that 73.6% of the respondents had voted for leaders of their choice in the general elections.



### Political Participation

21 members of the Listening and Action Platforms (LAPs) contested for different political positions across the country.

11 out of the 21 candidates were successfully voted into positions of leadership; 8 members gracefully accepted defeat in the elections while two are awaiting the LC1 elections. The voter education project ended in May 2016.



## HIGHLIGHTS

### Civic Education

This program focused on empowering youth participation in the planning and budgeting cycle. The stories urged youth to have their voices heard. The goal was to increase the proportion of youth who participate in the cycle from 4% to 25%.

In addition, issues of youth unemployment and life skills were addressed to demonstrate to the youth that there are opportunities to earn a living beyond waiting for handouts from government to give them money.



### School Performance

With the support of Twaweza East Africa, *Rock Point* 256 listeners were challenged to participate in improving the performance of public schools through school management committees, involving their local leaders and parents in improving academic performance in public schools. By the end of the project in May 2016, listeners had started talking to their leaders and among themselves as parents to utilize the knowledge they had gained for better performance.

## EVALUATION RESULTS



**43%** Weekly listenership

**21** Episodes

**504** broadcasts across **24** radio stations

**12,990** members of **13** Listening and Action Platforms (LAPs) supported

**1,422** Hotline calls

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## STORIES FROM AROUND UGANDA

### An Election Story

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“This season was very interesting and timely! One wouldn’t miss the election story. It showed us everything we needed to know about choosing the right leaders, what is involved in elections, how we should behave during elections and even pointed out that receiving gifts like sugar, soap and money is a crime. Unfortunately, the economic situation made some people turn a deaf ear to this and they went ahead to commit the electoral crime of bribery even if no one followed them up,”

ANNET TUSUUBIRA, HOIMA DISTRICT

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### Four First Grades

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“When the Primary Leaving Examination results for 2015 came out and Teremunga Primary School only got four first grades the whole town was disturbed because it had never happened before. Much as they said the poor performance was nationwide, we were not satisfied. We as the School Management Committee and the Parents Teachers Association, rose up to discuss the matter with the teachers and administrators. As we speak, the entire community, P.T.A., School Management Committee (SMC) and teachers are working as a team. I visit any time to check if all classes are being attended to. Sometimes I attend lessons with children and we do corrections together, I attribute these changes to full engagement of SMCs through *Rock Point 256*.”

SMC MEMBER, KOBOKO DISTRICT



## MOVERS AND SHAKERS IN KAMULI

### The Kiyunga Youth Drama Group

On stage with Kiyunga youth drama group in Kamuli district, you sense quickly these are ‘movers and shakers’, young people who are using everything they have to improve their lives and better the wellbeing of their community. Here are 4 things we learnt from them:

#### 1 Maximising Group Potential

Kiyunga Youth Drama Group is popularly known for its compelling drama for change shows in the community. The group, however, chose to take on income generating programs such as piggery, rabbit keeping, nursery beds for mangoes, oranges, hot pepper, and catering services to improve their livelihoods.

#### 2 Tackling Community Challenges

Every week the groups listen to the *Rock Point 256* radio serial drama and holds discussions relating the drama to the actual situations they are experiencing in their own community. “As a group, we saw the need for a water source as a priority and started engaging our local area LC1 chairman, Bugweri Christopher, to lobby for clean water. As we speak, we have a new borehole at Kiyunga health center, which benefits the whole community,” shared group leader, Nololo Asuman.

#### 3 Transparent Election Campaigns Are Worth It

Before national elections, the group was deeply involved in the voter education. “The drama (*Rock Point 256*) played a fundamental role in showing listeners the right thing to do [...] the drama that showed who a good leader is. For example, Amon in the play showed that he was a genuine leader with capability while Monday thought he would win votes by giving people free beers in his bar. [...] I believe it helped people choose the leaders they felt were best for them,” Nololo Asuman, the group leader.

#### 4 Peace Advocates Care

According to the group members, the voter and civic education through *Rock Point 256* as well as the voter education materials were instrumental in encouraging active participation among the youth in different positions of leadership during the elections. Kiyunga Youth Drama Group also prides itself for advocating for peaceful elections through mass community mobilization and sensitization against election violence.



### KIYUNGA YOUTH DRAMA GROUP

**Location:** Kamuli district

**Members:**



20 Males



10 Females

**Specialty:**  
Drama For Behavior Change



Members of Kiyunga Youth Drama Group





Our toll free Hotline is 0800 200 600

## INFORM

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The CDFU toll free Hotline (0800 200 600) provides reliable, anonymous and non-judgmental services for callers seeking information, counselling and referral on different health and development issues.

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The **Hotline** is available at **no cost** to the caller from Monday to Friday (8:00 am - 7:00 pm) and Saturday (9:00 am – 5:00 pm)



**Averaging 350 calls** per day

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## AT A GLANCE

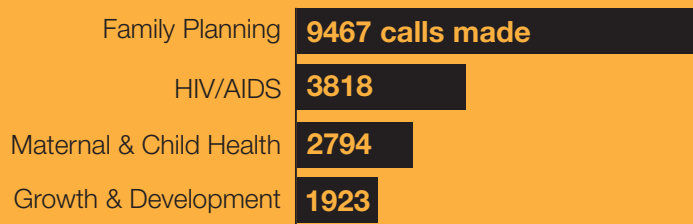
### Partners in 2016

Uganda Health Marketing Group (UHMG); Straight Talk Foundation and different projects where CDFU is a partner.

### Call Analysis

25,838 calls were attended to by the counsellors; 18,697 from males and only 7,141 from females.

### Most Requested Information



Gender Based Violence (432); Civic Education (355); Alcohol Abuse (302); Sexual Reproductive Health (237); Malaria (135); Twaweza-Education (87); Business Mentorship (87); Nutrition (42) and Others (6,159).

### Trend of Calls per Month

Out of the 25,838 calls received during the year, the highest number of calls were registered in September and August. This was as a result of the USAID Regional Health Integration to Enhance Services in south western Uganda (RHITES SW) and Ni-Yetu youth program.

## VOICES

**Precious, 16 year old:** “I managed to confront my boyfriend to stop sexual advances. I shared the problem with my parents and we all agreed to first concentrate on school.”

**Kamusiime, 28 year old from Rukungiri district:** “I had never thought of going for ANC services yet I was always bothered by headache, stomach ache and other complications especially when I was about to give birth. The counsellor explained to me why and referred me to a health facility where I later delivered a baby girl without any complication.”

**Didasi, 25 year old from Ibanda district:** “My wife had refused to take ARVs as instructed at the health centre but after your counselling, she was able to understand and appreciate the role of ARVs to her health and now she has steadily improved health wise.”

**A male caller from Isingiro district:** “After your counselling I was encouraged to go to Kabuyanda HC IV together with my girlfriend and we tested for HIV and they demonstrated to us how to use the condom properly.”

**Edwin from Kabale district:** “My brother’s wound was worsening day by day after circumcision but when we called, you took us through how to manage the wound properly and I’m happy to report that he is now better.”

**Allen from Rukungiri district:** Called to thank USAID RHITES-SW project team for the services they offered to the people of Bugangari village in Rukungiri which involved HCT, family planning and other services.

## LESSONS

The CDFU team are avid learners, documenting what is working and adjusting their programs effectively.

- The more the people listen to a message the more they get to understand the products and services and consider adapting them.
- Involvement of district religious and opinion leaders in community mobilization and sensitization through radio talk shows, community dialogues and trainings is key.
- Community dialogues have been appreciated by community members as effective in addressing their concerns in relation to Family Planning and other reproductive health issues.
- SBCC interventions should continue to focus on mitigating the underlying and persistent myths and misconceptions through increased and intensified community dialogues, which are more interactive.
- Involving different cadres of district and local government officials such as the District Health Educators (DHEs), sub-county taskforce members, and LC1 chairpersons in IPC efforts to mobilize and sensitize the community proved highly successful.

## NEW PROJECTS

### **Malaria Action Program for Districts (MAPD)**

CDFU is part of the consortium of the MAPD project. MAPD is a five year PMI/USAID funded project that aims to prevent and control Malaria illnesses and deaths in order to minimize the social economic effects of the disease among the overall population of Uganda especially in children under five years of age. CDFU will design and implement the overall SBCC interventions of the project.

### **Regional Health Integration to Enhance Services in East and Central Uganda (RHITES- EC)**

CDFU is part of the University Research Co., LLC (URC) led consortium that implements RHITES-EC in 11 eastern and central districts of Bugiri, Busia, Buyende, Iganga, Jinja, Kaliro, Kamuli, Luuka, Mayuge, Namayingo and Namutumba.

With the support from USAID, the five year Activity aims to increase utilization of health services through strengthened systems; improved quality, availability, and access to services; as well as increased demand for quality services. CDFU implements the SBCC interventions, particularly mobilizing communities for services. The project commenced on 30<sup>th</sup> September, 2016.



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