



# MAKASI RESCUE FOUNDATION

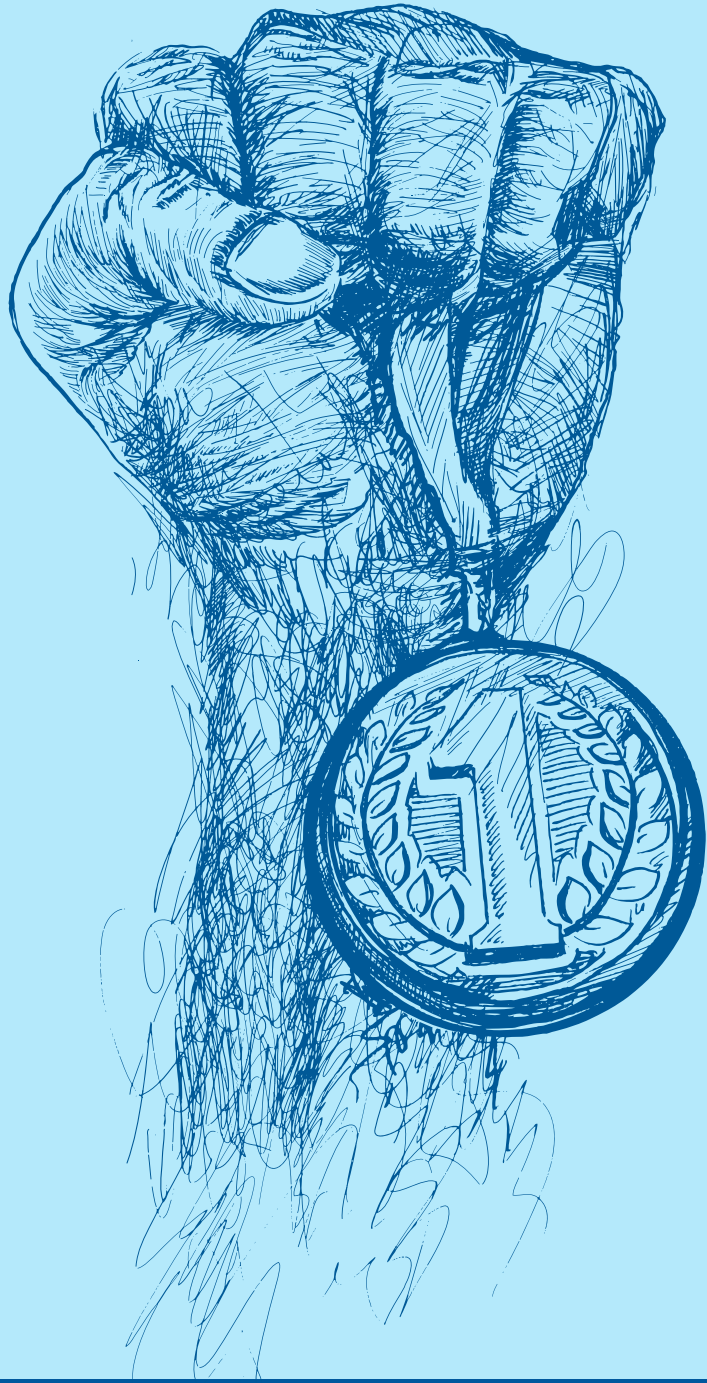
# PRESS



## Project Summary

Makasi Rescue Foundation (MRF) implemented a one-year project funded by the Hilton Foundation, focusing on enhancing the self-reliance of refugees and vulnerable host communities in Kampala. The project was structured around three core components: Livelihood Development, Early Childhood Development (ECD), and Sexual Reproductive Health and Rights (SRHR). Implemented in Rubaga, Makindye, and Central divisions of Kampala, the project aimed to equip beneficiaries with vocational skills, promote early childhood learning, and provide essential health services.





**Key**

**Achievements/**

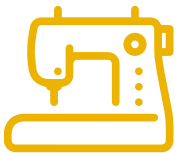
**Results**



## Livelihood and Economic Empowerment



### Vocational Training:



491 applicants met the selection criteria for vocational training, with 100 participants from a target of 100 selected using a vulnerability checklist. The selection was inclusive, comprising 70% refugees (70 individuals) and 30% nationals (30 individuals), with 86% female (86) and 14% male (14). Participants were trained in various vocational skills, including tailoring, hairdressing, bakery, shoemaking, craft making, and mechanics and auto-spares. 100 participants completed their pre-assessments, and 95 were assessed by the Directorate of Industrial Training (DIT), graduated and received DIT certificates.



### Startup Kits and Business Formation:

Startup kits were distributed to 95 graduates, resulting in 80 (84%) of the participants starting micro-businesses in sectors such as hairdressing, shoemaking, crafting, and bakery. Two saving groups were formed by the graduates to support their business ventures.



## Urban Saving and Loan Associations (USLA)

### Formation and Training:

Four saving groups with 130 members were formed, comprising 73.1% refugees (95) and 26.9% nationals (35), with 87% female (113) and 13% male (17). The groups were trained in USLA methodology, financial literacy, and business skills, and three groups were supported with registration with Kampala Capital City Authority (KCCA).

### Micro-Business Creation:

Seed grants led to the creation of micro-businesses such as kiosks for soft drinks, palm oil, second-hand clothes, and charcoal selling. These initiatives improved income sources and financial resilience.



## Early Childhood Development (ECD)



### Enrollment and Learning:

An ECD center was established, enrolling 208 pupils, surpassing the target of 200. The center offers structured play, outdoor activities, and nutritional support, with 83.2% of the pupils being refugees and 16.8% nationals.

### Graduation and Integration:

35 pupils graduated and were integrated into primary education at nearby government schools. The center's success in early learning attracted parents who had previously been unable to afford ECD services.

### **Parent Engagement and Workshops:**

Three parenting workshops were conducted, with 70 parents participating in each. The workshops enhanced parenting skills, focusing on child nurturing and holistic development.

### **Parent-Child Playtime Initiative:**

A pilot initiative was launched to engage parents in their children's education, achieving 90% attendance. The initiative enhanced parental involvement and promoted early childhood development.

### **Home Visits:**

48 home visits were conducted to sensitize parents on childcare, promote parent-child playtime, and follow up on agro-business and urban gardening. These visits tailored interventions to meet the unique needs of each household.

### **Integration of Livelihood Activities:**

20 guardians participated in vocational training in hairdressing, craft making, and tailoring, which enhanced their ability to support their children. A savings group of 30 members was formed, receiving financial literacy training.

### **Community Management and Oversight:**

A CMC with nine members and a PTA with 10 members were established to ensure effective oversight and community linkage. Meetings focused on community engagement, staff evaluation, budget planning, and resource mobilization.

### **Infrastructure Development:**

Construction of an ECD school began, with the foundation and the first phase nearing completion.

### **Integration of Health and Nutrition:**

100% of the children at the ECD center received medical screenings and nutritional assessments. Health initiatives, such as vaccination campaigns and mental health screenings, were integrated into the program, benefiting pupils and parents alike.

# Sexual Reproductive Health and Rights (SRHR):



## **HIV Services:**

1,500 clients were screened for HIV, with 756 tested, exceeding the target of 400. Fourteen new positive cases were identified and referred to health centers for care. Peer-to-peer outreach, community-based dialogues, and door-to-door campaigns were instrumental in increasing HIV testing and awareness among refugees and host communities.

## **STIs Treatment:**

1,180 clients were screened for STIs, with 510 diagnosed and treated, surpassing the target of 400. The most common STIs treated included UTIs and Syphilis, with 20 cases of Hepatitis B linked to care.

## **Family Planning:**

3,000 clients were sensitized on modern family planning methods, with 890 receiving family planning services. The project successfully integrated male groups as champions of family planning, significantly increasing the uptake of contraception.

## **Advocacy and Dialogues:**

Eight advocacy sessions and five community-based dialogues were conducted to address myths, taboos, and barriers to family planning. These efforts led to improved linkage to health facilities and a reduction in GBV/SGBV cases.

## **Men Groups:**

Formation of 3 men groups each comprising 30 members to involve men in the uptake of modern family planning and reduce SGBV in communities has changed the mindset of men towards family planning promotion. These included men of hope,

## **20 Peers**

were identified and mentored from communities to provide SRH information and support to vulnerable groups and youths. This promoted proper decision making towards ABC (Abstinence, being faithful and Using Condoms) amongst youths in communities





## INNOVATIONS AMIDST IMPLEMENTATION

### Agro-Business and Urban Gardening

In livelihood and economic empowerment, 170 participants from USLA groups and vocational training were sensitized and trained in agro-business and backyard farming to promote food security. A demonstration garden was set up, and 40 backyard gardens were established, with 10 clients hiring land for large-scale farming. Refugee groups teamed up to hire land from host communities, leading to large-scale food production and supply to markets and hotels. Notable success stories include 5 individuals who expanded their interests from vocational training to poultry farming, generating additional income.



A participant picking chicken from his farm for sale during a monitoring visit on Agro-business with the MRF officer in Bakuli, Rubaga.



MRF officer supervising a backyard garden for Yasi, a member of Women of Hope Saving group in Massaja

## Parent-Child Playtime Initiative:

In ECD, a pilot initiative was launched to engage parents in their children’s education through parent-child play time, achieving 90% attendance. The initiative enhanced parental involvement and promoted early childhood development.

		<p><b>IMPROVEMENT OBJECTIVE</b> PARENT INVOLVEMENT/PARTICIPATION IN PARENT- CHILD PLAY TIME (ECD) ECD: 001</p>
<p><b>Documentation Journal for QI Teams</b></p>		
<p>Name of the Site: MAKASI EARLYCHILD HOOD DEVELOPMENT CENTER; Team Leader: ASIO JEREMIAH</p>		
<p>Team Members: CATHERINE (CAREGIVER), HARRIET (CARE GIVER), PATRICK (CAREGIVER), LAWRENCE (PM), MANILA AUGUSTINE (Chairperson PTA), CIKWANINE MPEMEGEZO BORA (VICE CHAIRPERSON PTA), Michelle (CMC Chairperson).</p>		
<p>Start Date for using Journal: 1/01/2024</p>	<p>End date: 31/12/2024</p>	
<p><b>Improvement Objective:</b> 1. To Improve on parent involvement and participation in Parent- child play time following their creation from 0% as of January 2024 to at least 90% by end of December 2024 at Makasi Early childhood development center.</p>	<p><b>Indicator for the Objective:</b> Percentage of parents involved/Participating in child play time sessions at Makasi ECD.</p>	

photo shows a project of parent involvement in a parent -child playtime project.



Pupils jumping on a trampoline during parent-child playtime as guided by the ECD teacher at the ECD center



ECD parents together with pupils jumping in a trampoline during Parent-Child Play time at the ECD centre.



# In Sexual Reproductive Health and Rights (SRHR), innovations included;

## School Health Programming:

MRF integrated SRHR programming into schools, reaching 968 adolescent girls with information on menstrual hygiene and adolescent health. The provision of menstruation kits to 600 girls reduced absenteeism and improved academic performance.

## SRHR Corner:

With 90% of the English learners being teenage girls, coupled with the risks they possess triggered MRF to create the SRHR corner to ease access to mental health and counselling services, menstrual hygiene, SGBV services and onsite HIV and STI screening and testing. This has eased access to SRHR services in the community.



Clinical Officer with pupils of Nakivubo Blue Primary school during an awareness session on Menstrual hygiene in Kampala Central



Pupils of Katwe Primary school during an awareness session on adolescent health and rights, Menstrual Hygiene and teenage pregnancy by the Clinical Officer



SRHR Officer with some of the youths during a sensitization on drug abuse, mental in Nsambya.



SRHR Officers undertaking health services at the SRHR corner

## Next Steps

- Continue with efforts to mobilize resources for the completion of the ECD school and expansion of SRHR services.
- Maintain follow-up visits to participants and graduates to monitor progress and ensure the sustainability of established micro-businesses.
- Integration of vocational training of girls and women in sanitary pads among the activities to be undertaken by Makasi Training center.
- Establishment of community based Early learning centers integrated with child care in refugee and vulnerable communities.
- Need to scale up urban agro business initiatives for refugees and vulnerable host communities as a long-term intervention. This is planned to be achieved through negotiations with land owners for sourcing plots and spaces for refugees agribusinesses.

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